Outbreaks of Pseudo-Infection — Continued

test results. In the Florida investigation, an outbreak of pseudo-infection was suspected initially because of an inability to document an association between patients with specific clinical manifestations and positive findings for *Cyclospora* oocysts, while in New York City, the investigation was prompted, in part, by the atypical demographic characteristics of patients with cryptosporidiosis reported by one laboratory.

Although such patterns were important in the investigations described in this report, they typically are more reliable for well-characterized pathogens than for emerging pathogens, for which critical epidemiologic and clinical information may be limited. Because local laboratories may lack experience and optimal techniques for identifying emerging pathogens, these organisms may be more likely to be associated with outbreaks of pseudo-infection; therefore, confirmation of the diagnosis by an experienced reference laboratory may be critical in confirming outbreaks associated with these pathogens.

The outbreaks of pseudo-infection in Florida and New York City began after laboratory personnel implemented new testing procedures—in one instance, for a newly-identified pathogen and, in the other, with a different technique. The investigations of these incidents emphasize the potential for the occurrence of such outbreaks when efforts are made to enhance laboratory surveillance. In addition, these incidents indicate the needs for training and proficiency testing in conjunction with the introduction of new laboratory techniques and for reporting laboratories to submit a proportion of their positive and negative specimens for confirmation by a reference laboratory following the initiation of surveillance or testing for new pathogens.

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Adult Blood Lead Epidemiology and Surveillance — United States, Fourth Quarter, 1996

CDC's National Institute for Occupational Safety and Health Adult Blood Lead Epidemiology and Surveillance program (ABLES) monitors laboratory-reported

Adult Blood Lead Epidemiology and Surveillance — Continued

elevated blood lead levels (BLLs) among adults in 25 states.* This report presents ABLES data through the fourth quarter of 1996, compares these data with that from the same period in 1995, and describes cases of severe lead poisoning in adults in New York during 1996.

During October 1–December 31, 1996, the 6215 reports of BLLs \geq 25 µg/dL represented an 11% decrease from the 7014 reported for the fourth quarter of 1995 (1), which now include previously unpublished data for Minnesota and Ohio. For the four quarters of 1996, the number of reports of BLLs \geq 25 µg/dL decreased by 8%, compared with the number reported for the four quarters of 1995 (2), which also now include previously unpublished data for Minnesota and an estimate for Ohio (Table 1). The cumulative number of reports in 1996 decreased at each reporting blood lead level, compared with data for 1995. This overall trend of decreasing reports is consistent with the third quarter report for 1996 (3).

Since 1981, the New York State Department of Health has maintained a registry of poisonings associated with lead and other heavy metals. During 1982–1993, the number of cases of severe lead poisoning (defined as reported BLLs >100 μ g/dL) ranged from one to 12 adults per year. Of the 64 cases reported during that period, 42 (66%)

TABLE 1. Number of reports of elevated blood lead levels (BLLs) among adults, number of persons with elevated BLLs, and percentage change in number of reports — 25 states,* fourth quarter, 1996

Reported BLL (μg/dL)	Fourth qu	arter, 1996	Cumulative reports,	Cumulative reports,	% Change from
	No. reports [†]	No. persons§	1995¶	1996**	1995 to 1996
25–39	4,894	3,507	21,813	20,715	- 5%
40-49	983	675	5,609	4,597	-18%
50-59	183	125	1,059	890	-16%
≥60	155	96	499	490	- 2%
Total	6,215	4,403	28,980	26,692	- 8%

^{*} Alabama, Arizona, California, Connecticut, Illinois, Iowa, Maine, Maryland, Massachusetts, Michigan, Minnesota, New Hampshire, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Texas, Utah, Vermont, Washington, and Wisconsin

^{*}Alabama, Arizona, California, Connecticut, Illinois, Iowa, Maine, Maryland, Massachusetts, Michigan, Minnesota, New Hampshire, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Texas, Utah, Vermont, Washington, and Wisconsin.

[†]Data for Alabama and Illinois were missing; fourth quarter 1995 data were used as an estimate for Illinois and first quarter 1995 data (the most recent reports available) were used for Alabama.

Individual reports for persons are categorized according to the highest reported BLL for the person during the given quarter. Data for Alabama and Illinois were missing; fourth quarter 1995 data were used as an estimate for Illinois and first quarter 1995 data (the most recent reports available) were used for Alabama.

[¶]Data for Minnesota and Ohio are included for the first time in addition to previously published 1995 totals (2). For Minnesota, first through fourth quarter data for 1995 were used; for Ohio, first through fourth quarter data for 1996 were used as an estimate.

^{**}The cumulative number of reports for all four quarters includes year-end adjustments and corrections made by the states and may not be derived by simply adding the number of reports in each of the four quarters.

Adult Blood Lead Epidemiology and Surveillance — Continued

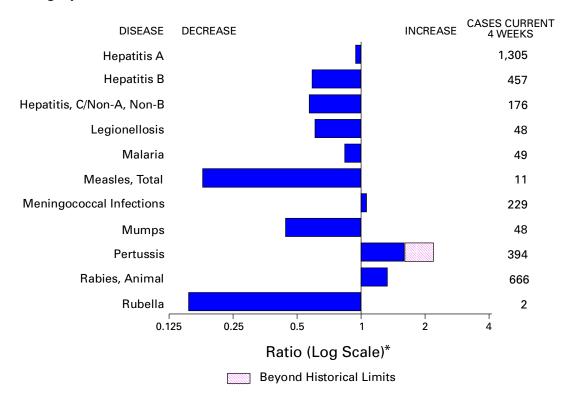
were occupationally related; of these, a total of 22 (52%) occurred among manufacturing workers and 18 (43%) among construction workers. Structural steel workers accounted for most of the construction workers exposed to lead during the refurbishing or demolition of bridges.

In 1994, one case of nonoccupational severe lead poisoning was reported, and in 1995 no such cases were reported. However, during 1996, seven cases of severe lead poisoning were reported. Four (57%) were occupationally related, and all occurred among residential painters; the highest BLL for the most severe case was 256 μg/dL (the highest occupational BLL reported in New York since 1983). The follow-up investigation of this reported case suggested that the primary exposure occurred while the worker used a mechanical sander to remove paint from the exterior of a house. He did not wear a respirator during this activity and frequently smoked cigarettes while working, which probably pyrolized lead in the paint dust and increased his exposure. Reported by: JP Lofgren, MD, Alabama Dept of Public Health. K Schaller, Arizona Dept of Health Svcs. S Payne, MA, Occupational Lead Poisoning Prevention Program, California Dept of Health Svcs. BC Jung, MPH, Connecticut Dept of Public Health. M Lehnherr, Occupational Disease Registry, Div of Epidemiologic Studies, Illinois Dept of Public Health. R Gergely, Iowa Dept of Public Health. A Hawkes, MD, Occupational Health Program, Maine Bur of Health. E Keyvan-Larijani, MD, Lead Poisoning Prevention Program, Maryland Dept of the Environment. R Rabin, MSPH, Div of Occupational Hygiene, Massachusetts Dept of Labor and Industries. M Scoblic, MN, Michigan Dept of Public Health. M Falken, PhD, Minnesota Dept of Health. L Thistle-Elliott, MEd, Div of Public Health Svcs, New Hampshire State Dept of Health and Human Svcs. B Gerwel, MD, Occupational Disease Prevention Project, New Jersey Dept of Health and Senior Svcs. M London, MS, R Stone, PhD, New York State Dept of Health. S Randolph, MSN, North Carolina Dept of Environment, Health, and Natural Resources. A Migliozzi, MSN, Bur of Health Risk Reduction, Ohio Dept of Health. E Rhoades, MD, Oklahoma State Dept of Health. A Sandoval, MS, State Health Div, Oregon Dept of Human Resources. J Gostin, MS, Occupational Health Program. Div of Environmental Health, Pennsylvania Dept of Health, A Gardner-Hillian, Div of Health Hazard Evaluations, South Carolina Dept of Health and Environmental Control. P Schnitzer, PhD, Bur of Epidemiology, Texas Dept of Health. W Ball, PhD, Bur of Epidemiology, Utah Dept of Health. L Toof, Div of Epidemiology and Health Promotion, Vermont Dept of Health. J Kaufman, MD, Washington State Dept of Labor and Industries. J Tierney, Wisconsin Dept of Health and Social Svcs. Div of Surveillance, Hazard Evaluations, and Field Studies, National Institute for Occupational Safety and Health, CDC.

Editorial Note: The findings in this report for the fourth quarter of 1996 suggest a continued decline in the overall number of detected cases of elevated BLLs among adults, which is consistent with the overall decline reported during 1993–1995 (3). This decline may reflect decreased occupational exposures to lead, diminished compliance with Occupational Safety and Health Administration requirements regarding blood lead monitoring, and/or a reduction in the size of the workforce in lead-using industries. Variation in nationwide reporting totals also may result from 1) changes in the roster of participating states, 2) changes in staffing and funding in state-based surveillance programs, and 3) interstate differences in worker BLL testing by lead-using industries.

In recent years, increased control efforts have been directed toward the hazards of lead—particularly to the risks for children who may be exposed to lead-based painted surfaces in their homes, schools, and day-care settings. These efforts have included attempts to remove lead-based paint in many older buildings (built before 1978). The cases of severe lead poisoning reported from New York illustrate the risks to workers and to building occupants as the result of improper methods for paint removal. Health

FIGURE I. Selected notifiable disease reports, comparison of provisional 4-week totals ending April 19, 1997, with historical data — United States



^{*}Ratio of current 4-week total to mean of 15 4-week totals (from previous, comparable, and subsequent 4-week periods for the past 5 years). The point where the hatched area begins is based on the mean and two standard deviations of these 4-week totals.

TABLE I. Summary — provisional cases of selected notifiable diseases, United States, cumulative, week ending April 19, 1997 (16th Week)

	Cum. 1997		Cum. 1997
Anthrax Brucellosis Cholera Congenital rubella syndrome Cryptosporidiosis* Diphtheria Encephalitis: California* eastern equine* St. Louis* western equine* Hansen Disease Hantavirus pulmonary syndrome* Hemolytic uremic syndrome, post-diarrheal* HIV infection, pediatric*	12 1 2 324 2 4 - - 35 1 1 12 53	Plague Poliomyelitis, paralytic Psittacosis Rabies, human Rocky Mountain spotted fever (RMSF) Streptococcal disease, invasive Group A Streptococcal toxic-shock syndrome* Syphilis, congenital [¶] Tetanus Toxic-shock syndrome Trichinosis Typhoid fever Yellow fever	14 1 30 394 9 27 10 30 5

^{-:}no reported cases

^{*}Not notifiable in all states.

†Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases (NCID). Supdated monthly to the Division of HIV/AIDS Prevention–Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), last update March 25, 1997.

Supdated from reports to the Division of STD Prevention, NCHSTP.

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending April 19, 1997, and April 20, 1996 (16th Week)

	I									
					coli O	erichia 157:H7			Нера	atitis
		DS		nydia	NETSS [†]	PHLIS [§]		rrhea	C/N/	
Reporting Area	Cum. 1997*	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1997	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996
UNITED STATES	15,582	19,904	104,549	118,706	283	128	69,555	89,681	848	908
NEW ENGLAND	465	841	4,670	5,760	23	10	1,533	2,373	13	24
Maine N.H.	18 4	10 25	288 163	212	1 -	-	14 40	13 37	2	3
Vt.	10	8	120	155	2	1	15	19	-	10
Mass. R.I.	220 43	486 38	2,231 653	1,991 657	16 1	9	726 164	660 173	9 2	8 3
Conn.	170	274	1,215	2,745	3	-	574	1,471	-	-
MID. ATLANTIC Upstate N.Y.	5,146 833	5,591 571	6,857 N	16,086 N	17 9	4 3	5,258 1,557	7,928 33	83 64	77 67
N.Y. City	2,649	3,283	U	7,225	5	-	Ū	3,955	-	1
N.J. Pa.	1,098 566	1,023 714	2,040 4,817	2,863 5,998	3 N	- 1	1,270 2,431	766 3,174	19	9
E.N. CENTRAL	1,088	1,538	18,308	28,008	51	18	11,357	18,216	173	159
Ohio Ind.	216 286	401 264	4,294 2,541	6,408 2,790	17 11	9 2	2,779 1,748	4,629 2,015	5 4	4 4
III.	372	527	3,444	8,174	10	-	1,739	5,301	15	31
Mich. Wis.	158 56	254 92	5,843 2,186	7,192 3,444	13 N	2 5	4,086 1,005	4,766 1,505	149	120
W.N. CENTRAL	313	424	6,262	9,996	40	27	2,807	3,968	53	19
Minn.	55	84	Ū	1,369	23	17	Ū	-	-	-
lowa Mo.	52 135	31 173	1,501 3,291	1,107 4,547	9 3	4 3	379 1,943	312 2,688	20 22	7 7
N. Dak. S. Dak.	4 2	1 7	81 339	317 424	3	2	5 38	9 65	2	-
Nebr.	28	32	259	757	1	-	36 89	152	-	2
Kans.	37	96	791	1,475	1	1	353	742	9	3
S. ATLANTIC Del.	3,895 51	5,141 113	23,744	16,894	42 1	7 1	24,532 331	31,427 439	72	56
Md.	425	645	2,054	1,825	2	1	3,897	4,121	5	-
D.C. Va.	182 323	243 266	N 3,470	N 3,688	- N	2	1,319 2,599	1,339 3,006	6	4
W. Va.	21	32	-	-	N	-	206	99	3	4
N.C. S.C.	217 213	277 276	5,193 3,535	U U	9 -	3	4,766 3,106	5,622 3,526	18 14	14 11
Ga. Fla.	528 1,935	682 2,607	2,406 7,086	4,078 7,303	15 15	-	3,425 4,883	7,447 5,828	U 26	23
E.S. CENTRAL	473	723	9,709	8,824	25	7	9,887	9,473	115	159
Ky.	48	118	1,833	2,228	7	-	1,160	1,252	6	10
Tenn. Ala.	203 127	244 235	3,774 2,293	3,678 2,750	13 2	7	3,238 3,189	3,242 4,240	62 5	148 1
Miss.	95	126	1,809	168	3	-	2,300	739	42	-
W.S. CENTRAL Ark.	1,459 59	2,030 96	11,126 373	7,245 456	3 2	1	7,797 755	6,913 1,223	77 2	87 1
La.	219	494	2,002	2,076	1	1	1,928	2,428	55	33
Okla. Tex.	86 1,095	66 1,374	2,304 6,447	2,280 2,433	-	-	1,491 3,623	1,434 1,828	4 16	26 27
MOUNTAIN	441	632	6,305	4,268	30	21	2,223	2,400	112	195
Mont.	12	8	276	410	2	-	14	10	4	8
ldaho Wyo.	8 9	10 2	469 151	507 213	4 2	-	33 18	29 10	15 44	40 62
Colo. N. Mex.	114 34	177 43	100 1,148	7 1,188	13 4	8 3	507 435	563 285	18 16	19 28
Ariz.	122	191	2,884	592	N	8	934	1,162	10 10 2	24 7
Utah Nev.	30 112	73 128	467 810	476 875	2 3	2	53 229	90 251	2 3	7 7
PACIFIC	2,302	2,984	17,568	21,625	52	31	4,161	6,983	150	132
Wash.	176	217	2,836	2,846	8	4	645	727	8	24
Oreg. Calif.	97 2,002	188 2,523	970 12,843	1,621 16,353	13 28	10 15	146 3,084	143 5,789	3 92	3 44
Alaska	12 15	3 53	427	239 566	28 3 N	2	148	163	47	44 2 59
Hawaii Guam	-	3	492	102	N N	-	138	161 24	-	59 1
P.R.	420	418	N	N	21	U	175	60	21	13
V.I. Amer. Samoa	17 -	6	N -	N -	N N	U	-	-	-	-
C.N.M.I.	-	-	N	N	Ň	ŭ	11	11	2	-

U: Unavailable

-: no reported cases

C.N.M.I.: Commonwealth of Northern Mariana Islands

^{*}Updated monthly to the Division of HIV/AIDS Prevention-Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention,

last update March 25, 1997.

National Electronic Telecommunications System for Surveillance.

Public Health Laboratory Information System.

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending April 19, 1997, and April 20, 1996 (16th Week)

	VVCCK	3 Ciluii	g Apri	1 13, 10	,57, an	и дрін	•	ווטוו אסכ	I VVCCI	4)	
	Legion	nellosis	Lyı Dise	me ease	Mal	laria		hilis Secondary)	Tubero	ulosis	Rabies, Animal
Reporting Area	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997
UNITED STATES	247	233	744	1,271	334	304	2,286	3,640	3,875	4,854	2,013
NEW ENGLAND	19	9	140	98	7	8	43	60	93	164	311
Maine N.H.	1 3	1	2 4	2	- 1	2 1	-	- 1	1	7 3	72 11
Vt.	3	-	2	-	1	1	-	-	-	-	50
Mass. R.I.	7 1	3 5	37 29	10 21	4 1	3 1	22	24	52 7	44 18	62 4
Conn.	4	N	66	65	-	-	21	35	33	92	112
MID. ATLANTIC Upstate N.Y.	40 9	51 9	481 48	1,034 376	70 9	79 15	79 12	90 12	812 85	830 92	435 304
N.Y. City	-	1	2	232	36	38	U	46	460	418	-
N.J. Pa.	5 26	7 34	114 317	94 332	17 8	21 5	39 28	32	176 91	176 144	42 89
E.N. CENTRAL	95	89	14	7	26	37	220	597	459	563	20
Ohio	55	32	11	5	3	5 2	77	240	108	85	16
Ind. III.	10 -	21 12	3	2	3 5	2 15	49 19	80 159	40 214	49 343	2 1
Mich. Wis.	28 2	16 8	- U	Ū	13 2	8 7	35 40	50 68	69 28	70 16	1
W.N. CENTRAL	20	13	10	27	9	4	41	167	125	137	125
Minn.	-	-	7	1	4	1	U	36	34	34	14
Iowa Mo.	3 6	1 3	1 -	3 7	2 2	1 1	3 26	6 110	15 49	15 52	50 7
N. Dak.	1	2	-	-	-	-	-	-	2	1 9	16
S. Dak. Nebr.	1 5	6	2	-	1	-	-	6	2 4	8	17 -
Kans.	4	1	-	16	-	1	12	9	19	18	21
S. ATLANTIC Del.	37 3	26 1	63	62 20	87 2	53 2	955 8	1,221 12	794 7	675 14	912 12
Md.	14	5	45	28	24	15	208	189	78	77	165
D.C. Va.	1 4	1 9	4	-	5 18	2 7	41 101	47 144	23 86	36 43	1 188
W. Va.	-	1	-	3	-	-	-	1	15	19	23
N.C. S.C.	5 2	3 1	2 1	6 1	5 4	7 3	239 111	325 149	109 87	100 101	294 42
Ga.	- 8	- 5	1	- 4	11	7	165 82	259	133	163	88
Fla. E.S. CENTRAL	o 7	5 17	10 18	19	18 7	10 8	565	95 896	256 292	122 400	99 86
Ky.	-	3	1	6	1	3	51	48	57	72	9
Tenn. Ala.	3 1	7 1	4 2	6	2 1	3 1	235 140	296 177	57 119	123 133	57 20
Miss.	3	6	11	7	3	1	139	375	59	72	-
W.S. CENTRAL Ark.	-	1	4	5 4	4 1	10	273 25	392 86	92 59	539 43	48
La.	-	-	1	-	3	-	126	180	-	-	15 -
Okla. Tex.	-	1	2 1	1 -	-	10	36 86	52 74	33	54 442	33
MOUNTAIN	15	11	-	-	21	19	46	43	125	174	13
Mont. Idaho	1 1	-	-	-	2	1 -	-	1	2 4	3	2
Wyo.	1	1	-	-	1	2	-	1	1	1	-
Colo. N. Mex.	3	5 -	-	-	10 2	11 1	1 -	14	27 8	32 22	1
Ariz.	4	2	-	-	3	1	38	24	51	79 10	9
Utah Nev.	4 1	3	-	-	3	2 1	1 6	3	4 28	10 27	1
PACIFIC	14	16	14	19	103	86	64	174	1,083	1,372	63
Wash. Oreg.	3	1 -	- 7	5	3 7	5 7	5 3	1 3	62 43	79 54	1
Calif. Alaska	10	15	7	13	91 2	71	55	169	892 31	1,163 24	54 8
Hawaii	1	-	-	1	-	3	1	1	55	52 52	-
Guam	-	-	-	-	-	-	-	2	-	35	-
P.R. V.I.	-	-	-	-	3	-	64	37 -	-	47 -	14 -
Amer. Samoa C.N.M.I.	-	-	-	-	-	-	3	- 1	-	-	-
OTIATIAL.		-	-				3				

U: Unavailable

-: no reported cases

TABLE III. Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending April 19, 1997, and April 20, 1996 (16th Week)

	H. influ	ienzae,	Hepatitis (Viral), by type						Measles (Rubeola)			
		sive	-	4	B Indigenous Imported [†]							tal
Reporting Area	Cum. 1997*	Cum. 1996	Cum. 1997	Cum. 1996	Cum. 1997	Cum. 1996	1997	Cum. 1997	1997	Cum. 1997	Cum. 1997	Cum. 1996
UNITED STATES	354	372	7,592	8,186	2,389	2,734	2	19	3	11	30	93
NEW ENGLAND	20 2	9	154	93 9	60 4	61 2	-	-	-	-	-	6
Maine N.H.	2	7	18 9	3	5	3	-	-	-	-	-	- -
Vt. Mass.	- 14	2	5 66	1 45	1 33	2 13	-	-	-	-	-	1 4
R.I. Conn.	1 1	-	11 45	3 32	6 11	4 37	-	-	-	-	-	- 1
MID. ATLANTIC	40	58	521	609	325	465	_	6	-	3	9	5
Upstate N.Y. N.Y. City	2 15	5 9	51 199	108 272	60 103	91 205	-	1	-	3	4	2
N.J.	16	24	115	121	80	94	-	-	-	-	-	-
Pa. E.N. CENTRAL	7 50	20 68	156 684	108 738	82 267	75 341	-	1 4	-	2	1 6	- 5
Ohio	28	40	145	302	32	39	-	-	-	-	-	2
Ind. III.	4 11	2 18	89 163	106 166	25 51	38 104	-	4	-	- 1	- 5	-
Mich. Wis.	6 1	3 5	246 41	101 63	156 3	129 31	- U	-	- U	1	1	- 3
W.N. CENTRAL	15	14	573	636	183	136	-	4	1	1	- 5	6
Minn.	7	7	35 82	23 152	5 38	3 19	-	-	1	1	1	5
lowa Mo.	3 1	3	306	308	118	91	-	4	-	-	4	1
N. Dak. S. Dak.	2	- 1	6 6	9 29	1 -	-	-	-	-	-	-	-
Nebr. Kans.	1 1	-	42 96	71 44	7 14	8 15	U	-	U	-	-	-
S. ATLANTIC	91	74	470	287	333	422	1	1	1	1	2	2
Del. Md.	29	1 24	10 106	5 61	1 52	1 95	-	-	1	1	- 1	1
D.C.	2	-	11	9	18	11	-	-	-	-	-	-
Va. W. Va.	5 2	3 3	54 5	47 6	35 6	46 9	-	-	-	-	-	-
N.C. S.C.	12 4	12 3	61 35	36 29	72 28	116 28	- U	-	- U	-	-	-
Ga.	16	24	41	2	15	5	-	-	-	-	-	-
Fla. E.S. CENTRAL	21 25	4 12	147 250	92 598	106 232	111 217	1	1	-	-	1	1
Ky.	4	3	24	9	10	27	-	-	-	-	-	-
Tenn. Ala.	15 6	4 4	158 37	439 78	142 26	173 17	-	-	-	-	-	-
Miss.	-	1	31	72	54	U	-	-	-	-	-	-
W.S. CENTRAL Ark.	17 1	12	1,250 100	1,264 153	168 19	223 29	1 -	1 -	1 -	1 -	2	1 -
La. Okla.	13	- 11	64 543	20 565	39 8	13 16	-	-	-	-	-	-
Tex.	3	1	543	526	102	165	1	1	1	1	2	1
MOUNTAIN Mont.	35	23	1,311	1,243 41	285	329 4	-	-	-	-	-	5
ldaho	-	1	39 57	109	2 10	35	-	-	-	-	-	-
Wyo. Colo.	2	- 5	14 149	10 126	11 58	8 44	-	-	-	-	-	- 1
N. Mex. Ariz.	2 12	7 6	82 611	169 390	97 58	123 56	-	-	-	-	-	-
Utah	3	4	254	300	32	42	-	-	-	-	-	-
Nev. PACIFIC	16 61	102	105 2,379	98 2,718	17 536	17 540	-	3	-	3	6	4 63
Wash.	1	1	172	159	17	28	-	-	-	-	-	4
Oreg. Calif.	14 43	12 87	122 2,023	409 2,101	41 464	41 468	-	-	-	3	3	-
Alaska Hawaii	1 2	2	15 47	23 26	10 4	1 2	-	3	-	-	3	58 1
Guam	-	-	-	20	-	-	U	-	U	-	-	-
P.R. V.I.	-	-	104	21	382	54	Ū	-	Ū	-	-	1
Amer. Samoa		-	-	-	-	-	U	-	U	-	-	-
C.N.M.I.	4	10	1	1	16	5	U	1	U	-	1	-

U: Unavailable

^{-:} no reported cases

 $^{^{*}\!\!}$ Of 72 cases among children aged <5 years, serotype was reported for 34 and of those, 16 were type b.

[†]For imported measles, cases include only those resulting from importation from other countries.

TABLE III. (Cont'd.) Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending April 19, 1997, and April 20, 1996 (16th Week)

	Mani:	0000001	I III	prii zu,	1550 (I Othi V	VCCK/					
		ococcal ease		Mumps Pertussis				Rubella				
Reporting Area	Cum. 1997	Cum. 1996	1997	Cum. 1997	Cum. 1996	1997	Cum. 1997	Cum. 1996	1997	Cum. 1997	Cum. 1996	
UNITED STATES	1,276	1,196	12	181	194	134	1,397	858	1	12	63	
NEW ENGLAND	81	49	-	6	-	6	345	185	-	-	7	
Maine N.H.	9 7	6 1	-	-	-	4	6 46	8 17	-	-	-	
Vt.	2	2	-	-	-	2	133	7	-	-	1	
Mass. R.I.	46 4	18 5	-	1 4	-	-	144 11	150 -	-	-	4 -	
Conn.	13	17	-	1	-	-	5	3	-	-	2	
MID. ATLANTIC Upstate N.Y.	109 26	113 28	4	20 3	23 7	5 -	95 42	75 41	-	2 1	5 3	
N.Y. City N.J.	19 26	19 25	-	-	4 2	-	6	13 3	-	1	1 1	
Pa.	38	41	4	17	10	5	47	18	-	-	-	
E.N. CENTRAL	163	170	-	23	54	5	127	158	-	2	3	
Ohio Ind.	69 17	53 18	-	8 4	19 5	1 2	55 13	52 9	-	-	-	
III. Mich.	50 14	58 20	-	7 4	10 19	2	18 23	48 10	-	-	1 2	
Wis.	13	21	U	-	1	U	18	39	U	2	-	
W.N. CENTRAL Minn.	100 6	97 9	-	8	2	15 14	95 59	37 23	-	-	-	
Iowa	24	17	-	3	-	-	14	2	-	-	-	
Mo. N. Dak.	52 -	45 2	-	-	2	- 1	12 2	7	-	-	-	
S. Dak. Nebr.	3 5	3 9	Ū	2	-	Ū	1 2	1 1	Ū	-	-	
Kans.	10	12	-	-	-	-	5	3	-	-	-	
S. ATLANTIC	232	172	1	26	19	22	146	72	-	2	10	
Del. Md.	4 26	2 20	-	4	9	1	53	9 30	-	-	-	
D.C. Va.	1 19	4 17	-	2	3	-	2 17	3	-	- 1	-	
W. Va.	4	6	-	-	-	-	3	2	-	-	-	
N.C. S.C.	39 34	27 25	Ū	6 1	3	Ū	28 6	9 1	Ū	1	-	
Ga. Fla.	41 64	61 10	- 1	2 11	1 3	- 21	2 35	2 16	-	-	10	
E.S. CENTRAL	100	101	-	12	9	2	31	34	-	-	-	
Ky. Tenn.	21 38	13 29	-	- 4	- 1	-	2 13	25 6	-	-	-	
Ala.	26	31	-	4	3	1	8	1	-	-	-	
Miss. W.S. CENTRAL	15 116	28 133	-	4 22	5 16	1	8	2	- 1	- 1	N 6	
Ark.	23	17	2	-	-	1 -	21 3	28 2	-	-	-	
La. Okla.	22 13	25 9	1 -	6	7	-	7 1	2 1	-	-	-	
Tex.	58	82	1	16	9	1	10	23	1	1	6	
MOUNTAIN Mont.	77 4	75 1	-	8	11 -	72	336 2	112 4	-	-	3	
Idaho	5	11	-	2	-	69	233	33	-	-	2	
Wyo. Colo.	22	12	-	2	-	3	3 75	21	-	-	-	
N. Mex. Ariz.	13 16	14 22	N -	N -	N 1	-	12 9	25 5	-	-	- 1	
Utah	11	8	-	2	1	-	1	3	-	-	-	
Nev. PACIFIC	6 298	7 286	- 5	2 56	9 60	6	1 201	21 157	-	- 5	- 29	
Wash.	33	35	1	4	6	6	104	64	-	-	1	
Oreg. Calif.	64 200	53 192	4	42	43	-	7 85	21 64	-	1	26	
Alaska Hawaii	1	4 2	-	1 9	2	-	1	8	-	- 4	2	
Guam	-	1	- U	-	3	U	-	-	- U	-	-	
P.R.	6	2	-	4	1	-	-	-	-	-	-	
V.I. Amer. Samoa	-	-	U U	-	-	U U	-	-	U U	-	-	
C.N.M.I.	-	-	U	-	-	U	-	-	U	-	-	

U: Unavailable

-: no reported cases

TABLE IV. Deaths in 122 U.S. cities,* week ending April 19, 1997 (16th Week)

		All Cau	ses Ri	/ Age (Y	•			77 (TOLIT VVECK)		All Cau	ISAS RI	/ Age (Y	eare)		
Reporting Area	All Ages	>65	45-64	25-44	1-24	<1	P&I [†] Total	Reporting Area	All Ages	>65	45-64		1-24	<1	P&I [†] Total
NEW ENGLAND Boston, Mass. Bridgeport, Conn. Cambridge, Mass. Fall River, Mass. Hartford, Conn. Lowell, Mass. Lynn, Mass. New Bedford, Mass New Bedford, Mass New Haven, Conn. Providence, R.I. Somerville, Mass. Springfield, Mass. Waterbury, Conn.	615 151 44 19 33 53 26 12 25 42 66 2 46 34	434 105 28 28 29 21 10 17 32 48 26 26	117 21 10 4 3 16 3 1 8 6 12	46 19 6 2 1 5 2 1 - 1 2	11 4 - 1 2 - 1 2 - 1	7 2 2 2	44 13 2 1 3 1 1 1 2	S. ATLANTIC Atlanta, Ga. Baltimore, Md. Charlotte, N.C. Jacksonville, Fla. Miami, Fla. Norfolk, Va. Richmond, Va. Savannah, Ga. St. Petersburg, Fla. Tampa, Fla. Washington, D.C. Wilmington, Del.	1,175 217 153 48 139 105 58 U 44 49 207 137 18	756 133 102 31 94 66 39 U 30 37 144 72 8	259 48 26 11 31 15 12 U 11 6 45 44	107 29 18 4 6 15 5 U 1 4 12 13	30 4 3 6 6 2 U 1 1 4 3	22 3 3 2 2 3 U 1 1 2 5	60 11 12 4 2 2 4 U 3 2 12 8
Waterbury, Comin. Worcester, Mass. MID. ATLANTIC Albany, N.Y. Allentown, Pa. Buffalo, N.Y. Camden, N.J. Elizabeth, N.J. Erie, Pa. Jersey City, N.J. New York City, N.Y. Newark, N.J. Paterson, N.J. Philadelphia, Pa. Pittsburgh, Pa.§ Reading, Pa. Rochester, N.Y. Schenectady, N.Y. Scranton, Pa. Syracuse, N.Y. Trenton, N.J. Utica, N.Y. Yonkers, N.Y.	62 2,410 46 34 72 57 22 37 41	249 1,695 35 27 48 40 11 30 27 820 27 9 281 62 6 95 29 32 64 17 7 12 23	12 425 8 6 17 9 4 5 6 230 11 4 72 11 4 14 5 10 13	1 199 2 1 5 6 4 - 6 120 8 2 2 8 6 1 3 1 2 2 1 1 3 1 1 3 1 1 1 1 2 1 1 1 1	47 1 1 1 1 23 3 1 10 1 - - 1 2 1 2 1	44 11 22 22 19 1 - 8 11 4 - - - 11	10 122 7 1 4 1 2 - 43 2 - 9 - 2 9 1 2 4	E.S. CENTRAL Birmingham, Ala. Chattanooga, Tenn. Knoxville, Tenn. Lexington, Ky. Memphis, Tenn. Mobile, Ala. Montgomery, Ala. Nashville, Tenn. W.S. CENTRAL Austin, Tex. Baton Rouge, La. Corpus Christi, Tex. Dallas, Tex. El Paso, Tex. Ft. Worth, Tex. Houston, Tex. Little Rock, Ark. New Orleans, La. San Antonio, Tex. Shreveport, La. Tulsa, Okla.	104 80 291 69 29 169 1,507 84 47	552 U 42 79 55 199 57 21 109 1,002 57 32 35 113 83 71 228 62 549 69	161 U 13 19 14 60 16 8 31 305 16 9 7 37 19 21 83 20 48 6	59 U 7 4 6 23 4 15 118 7 3 3 17 5 10 27 4 4 13 16 2 11	20 U 2 1 3 7 52 3 1 1 4 4 6 6 4	16 U 2 1 2 2 2 7 30 1 2 5 1 1 3 6 4 5	53 U 3 4 6 21 1 2 16 97 8 1 3 5 16 9 22 6 15 3 9
E.N. CENTRAL Akron, Ohio Canton, Ohio Canton, Ohio Chicago, III. Cincinnati, Ohio Cleveland, Ohio Dayton, Ohio Dayton, Ohio Detroit, Mich. Evansville, Ind. Fort Wayne, Ind. Gary, Ind. Grand Rapids, Mich Indianapolis, Ind. Lansing, Mich. Milwaukee, Wis. Peoria, III. South Bend, Ind. Toledo, Ohio Youngstown, Ohio W.N. CENTRAL Des Moines, Iowa Duluth, Minn. Kansas City, Kans. Kansas City, Mo. Lincoln, Nebr.	2,235 60 444 439 70 152 173 159 245 53 60 U 11. 44 227 43 134 39 45 50 118 71 707 32 22 22 101 39	1,538 52 28 275 49 107 125 116 135 40 54 U 35 151 38 30 34 43 90 55 509 27 29 13 57 29	3 11 106 15 29 29 31 69 9 11 0 6 50 3 33 7 6 7	159 1 37 5 14 13 5 25 25 20 1 19 4 11 2 3 6 5 4 5 4 1 4 6 6 6 6 7	45 3 - 14 - 1 3 4 7 1 - U - 3 3 1 - 1 - 1 - 1 - 1 - 1 - 1 - - - -	38 1 2 7 7 1 1 1 1 3 3 3 7 7 - 2 2 4 4 2 2 1 1 1 1 1 6 1 1 2 2	175 6 44 8 1 25 17 8 2 3 U 2 8 2 12 5 4 7 10 1 48 5 7 3 2	MOUNTAIN Albuquerque, N.M. Boise, Idaho Colo. Springs, Colo Denver, Colo. Las Vegas, Nev. Ogden, Utah Phoenix, Ariz. Pueblo, Colo. Salt Lake City, Utah Tucson, Ariz. PACIFIC Berkeley, Calif. Fresno, Calif. Glendale, Calif. Honolulu, Hawaii Long Beach, Calif. Los Angeles, Calif. Pasadena, Calif. Portland, Oreg. Sacramento, Calif. San Diego, Calif. San Francisco, Calif. San Jose, Calif. San Jose, Calif. Santa Cruz, Calif. Seattle, Wash. Spokane, Wash.	75 139 15 146 18 89 143 1,324 21 63 U 67 71 10 16 121 227 155	570 611 366 433 466 955 113 950 177 411 951 151 100 101 101 105 105 105 105 105 1	147 16 7 8 15 32 1 21 22 21 208 4 12 11 10 4 17 45 24 25 26 7 11	65 65 10 11 18 58 110 7 7 5 4 4 11 11 11 13 15 14 15 15 16 16 17 17 18 17 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	15 2 3 1 1 4 4 - 3 1 1 27 - 2 U - 2 3 3 3 2 5 - 6 1	13 - 1 1 1 - 7 - 7 - 4 - 29 - U - 1 1 4 5 5 8 8 - 4 2	65 3 4 3 8 11 15 3 7 10 147 2 4 U 6 7 U 2 11 39 20 18 27 4 4 3
Minneapolis, Minn. Omaha, Nebr. St. Louis, Mo. St. Paul, Minn. Wichita, Kans.		107 65 101 38 43	20 13 22 8	7 7 6 2 5	3 3 6 1 2	2 2 5 1 3	10 7 8 2 4	Tacoma, Wash.	Ü 11,592 [¶]	U	U	์ 908	ບ່ 267	Ü 215	й 811

U: Unavailable -: no reported cases

*Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of 100,000 or more. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

†Pneumonia and influenza.

Because of changes in reporting methods in this Pennsylvania city, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

Total includes unknown ages.

Adult Blood Lead Epidemiology and Surveillance — Continued

departments and medical practitioners in areas where there are substantial numbers of structures built before 1978 should be alert to these risks.

The findings in this report document the continuing hazard of lead exposures as an occupational health problem in the United States. ABLES enhances surveillance for this preventable condition by expanding the number of participating states, reducing variability in reporting, distinguishing between new and recurring elevated BLLs in adults and, as in the cases reported from New York, by facilitating the identification of possible new exposures.

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MORBIDITY AND MORTALITY WEEKLY REPORT

- 345 Alcohol and Other Drug-Related Birth Defects Awareness Week — May 11–17, 1997
- 346 Alcohol Consumption Among Pregnant and Childbearing-Aged Women United States, 1991 and 1995
- Rubella and Congenital Rubella Syndrome — United States, 1994–1997
 Outbreaks of Pseudo-Infection with Cyclospora and Cryptosporidium
 - Florida and New York City, 1995

 Adult Blood Lead Epidemiology and Surveillance United States, Fourth Quarter, 1996

Alcohol and Other Drug-Related Birth Defects Awareness Week — May 11–17, 1997

The National Council on Alcoholism and Drug Dependence (NCADD) has designated May 11–17, 1997, as Alcohol and Other Drug-Related Birth Defects Awareness Week. During this week, CDC, in collaboration with NCADD, will highlight the harmful effects of prenatal alcohol exposure on a fetus.

From 1991 to 1995, rates of alcohol use during pregnancy increased, especially for frequent drinking, underscoring the need for renewed attention to advising pregnant women to abstain from alcohol use. Associations between adverse pregnancy outcomes and moderate to heavy alcohol use during pregnancy continue to be reported. Health-care providers should educate women about the recommendations of the Surgeon General (1) and the Secretary of Health and Human Services (2) regarding the need for women who are pregnant or are planning a pregnancy to abstain from alcohol use.

State health departments can use state-based rates of reported frequent alcohol use by women of childbearing age to develop messages aimed at preventing alcohol use among pregnant women. In conjunction with a report in this issue of *MMWR* about alcohol use among childbearing-aged and pregnant women, the Council of State and Territorial Epidemiologists is providing state health departments and Behavioral Risk Factor Surveillance System coordinators with information focusing on fetal alcohol syndrome (FAS) and state-specific rates of self-reported alcohol use among women of childbearing age.

Additional information about Alcohol and Other Drug-Related Birth Defects Awareness Week is available from NCADD, telephone (212) 206-6770; World-Wide Web, http://www.ncadd.org; and from the National March of Dimes, telephone (888) 663-4637, http://www.modimes.org. Additional information about FAS and other alcohol-related birth defects and developmental disabilities is available from CDC, telephone (770) 488-7268, http://www.cdc.gov/nceh/programs/programs.htm; and from the National Institute on Alcohol Abuse and Alcoholism, telephone (301) 443-3860, http://www.niaaa.nih.gov.

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- 1. Anonymous. Surgeon General's advisory on alcohol and pregnancy. FDA Drug Bull 1981;11: 9–10.
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