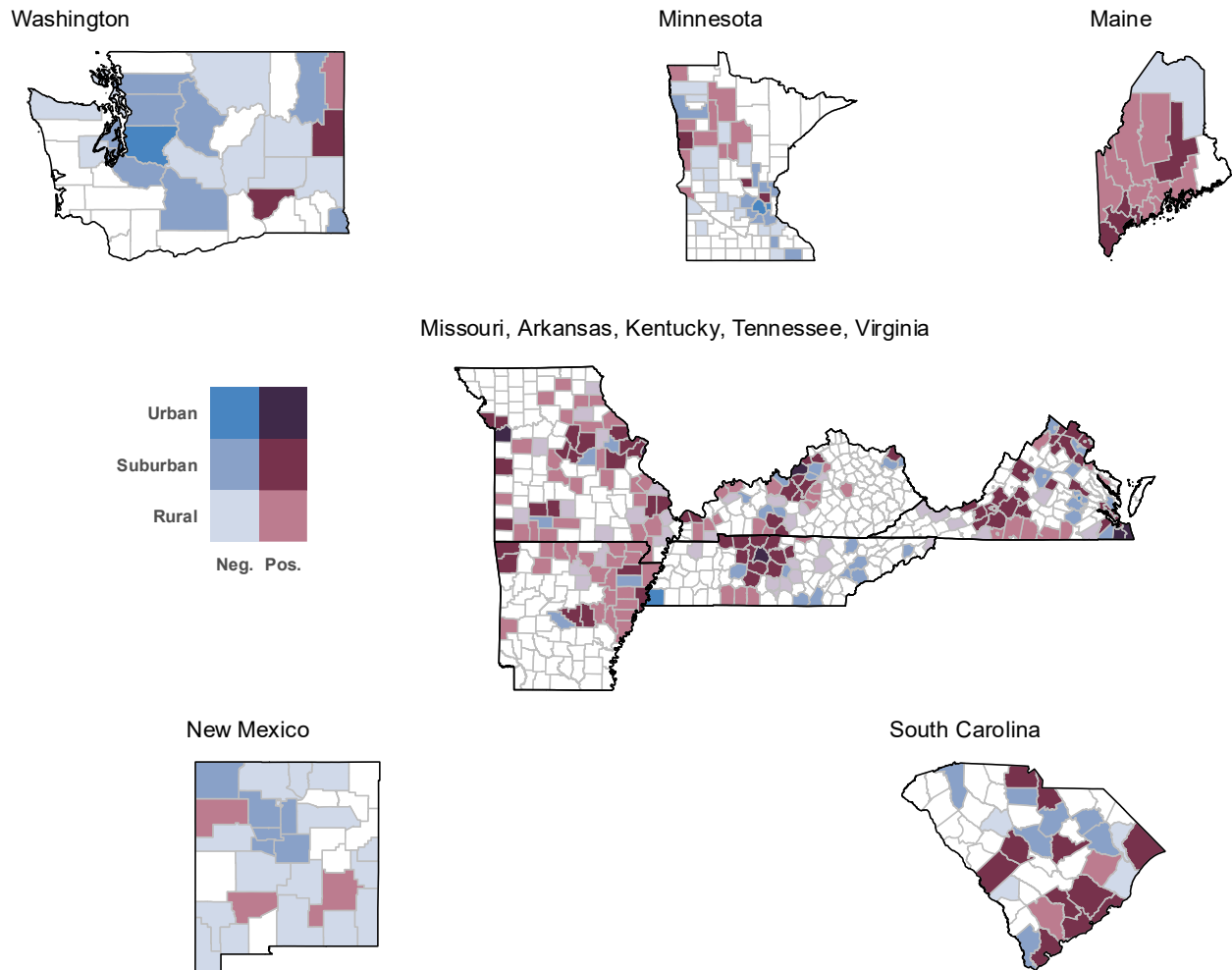


SUPPLEMENTARY FIGURE 2. Alpha-gal immunoglobulin E serostatus of blood donors and urban-rural gradient,* by county,† – 10 states,§ November 2024–April 2025



Abbreviation: IgE = immunoglobulin E, CI = confidence interval

* Urban, suburban, and rural designations are adapted from the National Center for Health Statistics 2023 Urban-Rural Classification Scheme. The six NCHS categories were subgrouped into three categories: urban (large central metropolitan), suburban (large fringe metropolitan, medium metropolitan, and small metropolitan), and rural (micropolitan and noncore). Arkansas, Maine, New Mexico, and South Carolina have no urban (large central metro) counties.

† Shaded counties represent blood donor counties of residence. A county was considered "positive" if at least one blood donor from that county had a positive alpha-gal IgE result; a county was considered "negative" if all blood donors tested from that county had negative serum alpha-gal IgE.

§ During 2017–2022, Arkansas, Kentucky, Missouri, Tennessee, and Virginia had the highest numbers of suspected AGS cases per population. New Mexico and Washington were selected as states without lone star ticks and with low numbers of suspected AGS cases. Maine, Minnesota, and South Carolina were considered to have moderate numbers of suspected AGS cases. Maine was selected because 1) the state is at the leading edge of the northward expansion of lone star ticks and 2) Maine CDC has performed and published AGS surveillance as a reference point. Minnesota was selected as a state with a relatively high number of suspected AGS cases relative to its minimal lone star tick populations. South Carolina was selected as a state with established lone star tick populations but with fewer suspected AGS cases than its neighboring states.