sequencing (491 nt) showed 100% identity to the *R. parkeri* sequence from GenBank (U43802).

These procedures enabled the identification of R. parkeri in 2.56% of the A. triste ticks from Uruguay. Previous findings of R. parkeri DNA in A. triste ticks from Uruguay (5) are corroborated by our isolation of a Uruguayan strain of R. parkeri in cell culture. The only other country where R. parkeri has been previously reported is the United States, where it is associated with A. maculatum ticks and is the causative agent of an emerging rickettsiosis (3). As A. maculatum and A. triste are established in at least 12 other Latin American countries (10), the distribution of R. parkeri in the Americas is likely continental. Finally, our results corroborate recent reports (3,5) that suggest R. parkeri is the causative agent of previously reported cases of rickettsiosis in Uruguay.

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Influenza-related Death Rates for Pregnant Women

To the Editor: Articles about influenza in the January 2006 issue of Emerging Infectious Diseases discussed a pandemic possibly as profound in its effect as the 1918–19 pandemic, when attack rates were >20% worldwide and death rates were 1%–2%. Then, as when subsequent virus antigenic shifts have occurred, all age groups were affected. Governments are now preparing contingency plans against the effects of an expected further antigenic shift.

However, insufficient consideration may have been given to how, in the absence of effective prophylaxis against a novel strain of influenza virus, to avoid deaths on the scale seen in the fall and winter of 1918–19. In particular, the vulnerability of pregnant women and their offspring appears to have been forgotten. Bland reported on pregnant influenza patients in Philadelphia and elsewhere in the fall of 1918; of 337, 155 died (1). Harris obtained by questionnaire from obstetricians medical histories of 1,350 pregnant patients in Maryland and in 4 large US cities (2). Pneumonia developed in half (678) of these patients and 365 died. Death rates from pneumonia were >40% for every month of pregnancy; fetal loss

Correction: Vol. 12, No. 10

In Human Prion Disease and Relative Risk Associated with Chronic Wasting Disease by Samantha MaWhinney et al., an error occurred in the list of references. Missing from the list is reference no. 36: Belay ED, Maddox RA, Gambetti P, Schonberger LB. Monitoring the occurrence of emerging forms of Creutzfeldt-Jakob disease in the United States. Neurology. 2003;60:176-81.

The corrected list of references appears in the online article at http://www.cdc.gov/ncidod/EID/vol12no10/06-0019.htm

We regret any confusion this error may have caused.