# MMR

MORBIDITY AND MORTALITY WEEKLY REPORT

- 709 Smoking and Health: A National Status Report
- 711 Premature Mortality from Diabetes
  Mellitus Use of Sentinel Health
  Event Surveillance to Assess Causes
- 715 Staphylococcal Food Poisoning from Turkey at a Country Club Buffet — New Mexico
- 722 Holiday Printing Schedule

# **Current Trends**

# **Smoking and Health: A National Status Report**

When the Comprehensive Smoking Education Act, Public Law 98-474, was signed into law in October 1984, it was the first major smoking and health legislation enacted by the Congress in over 15 years. The law required that all cigarette packages and advertising include four new health warnings and that these warnings be rotated quarterly. These new warnings replaced the single statement that had appeared on packs and in advertising since 1970.

The legislation also required the Department of Health and Human Services to undertake significant new activities, including a biennial report to Congress. On November 20, 1986, the Department issued the first of these reports. "Smoking and Health: A National Status Report" provides significant new information on smoking and health at the national, state, and local levels (1). A summary of key findings is presented below.

#### Smoking Prevalence 1955-1985

By 1985, 21 years after the first report of the Surgeon General's Advisory Committee, smoking prevalence rates in the United States had declined to the lowest level observed in nearly 40 years. Only 30% of all persons ≥18 years of age now smoke cigarettes on a regular basis. This figure is down from nearly 45% at the time of the Advisory Committee's report in 1964 (2).

Smoking rates for men have declined more rapidly than smoking rates for women (Figure 1). In the early 1960s, male cigarette-use rates were well above 50%. In 1985, male smoking prevalence had decreased to 33%—probably the lowest rate among men in this country at any time except prior to World War I. From the mid-1960s to 1985, female smoking rates declined from 34% to 28%. However, the gap between male and female smoking is narrowing. When lifetime smoking prevalence is examined by birth cohort, it is clear that, among contemporary age groups, there no longer exists a significant difference between men and women either in initiating smoking or in regular use of cigarettes.

## Age of Initiation of Regular Cigarette Smoking

Data from the National Health Interview Survey shows a narrowing of the average age of initiation between men and women. Cigarette smoking among men began to increase around

#### Smoking and Health — Continued

the turn of the century, and, by World War I, large numbers of men were smoking cigarettes. Women, however, did not begin to smoke in significant numbers until some 25 years later—just prior to and during World War II.

In more recent birth cohorts, the overwhelming majority of both men and women began smoking as teenagers. For the cohorts born from 1940 to 1949 and from 1950 to 1959, there is little difference in the proportion of men and women who began regular smoking before their 20th birthday (Figure 2). For the cohort born from 1950 to 1959, 88% of male and 84% of female ever smokers had initiated their behavior before age 20. Few adults initiate and adopt the behavior on a regular basis after age 20.

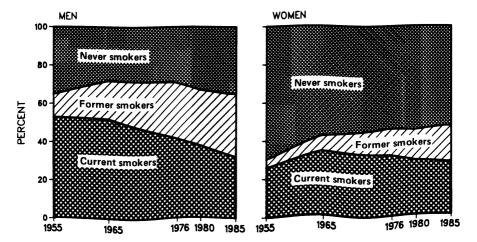
Reports of the Surgeon General and others have consistently noted a strong doseresponse effect between smoking initiation at an early age and mortality from all the major smoking-related diseases, including cancer, cardiovascular disease, and chronic obstructive lung disease. The current report also states that the earlier a person begins to smoke as a teenager, the less likely that person is to quit smoking as an adult and the more likely that person is to be a heavy smoker.

#### State Legislation on Smoking and Health

The new report contains a complete review of all state legislation on smoking and health. One of the major findings relates to sales and distribution of cigarettes and other tobacco products to minors. The majority of states (38) have enacted legislation restricting the sale or distribution of tobacco products to minors. However, 12 states have no such laws, and 14 of the states with restrictive legislation have set the minimum age for purchasing tobacco products at less than 18.

The Secretary of Health and Human Services, Dr. Otis Bowen, in his letter transmitting the report to the Congress, strongly urged all jurisdictions to adopt 18 as the *minimum* age at which any person should be allowed to purchase tobacco products. Concerning laws that impede the sale or availability of tobacco products to minors, Dr. Bowen wrote, "Enactment and enforcement of such legislation could have a strong preventive effect on early uptake of cigarettes and other tobacco products."

FIGURE 1. Percentage of current, former, and never smokers, by sex and year, United States, 1955-1985

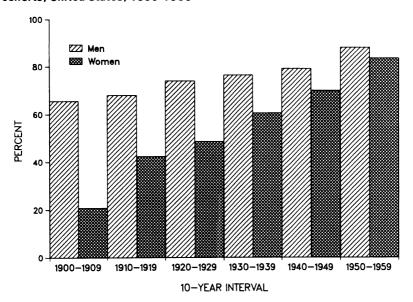


Smoking and Health - Continued

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FIGURE 2. Percentage of persons initiating smoking before age 20, by sex and 10-year birth cohorts, United States, 1900-1959



# Premature Mortality from Diabetes Mellitus — Use of Sentinel Health Event Surveillance to Assess Causes

According to national death certificate data (Table V), diabetes was the 12th leading cause of years of potential life lost in the United States in 1984. Actually diabetes contributes to a much larger proportion of mortality, since it is reported on only about half of the death certificates for persons who die with the disease and is listed as the underlying cause on only one-quarter of the certificates on which it appears (1). The most frequent causes of death among persons with diabetes are ischemic and other forms of heart disease, cerebrovascular disease, and other forms of atherosclerosis; renal disease, including nephritis/nephrosis and uremia; respiratory disease; and infection.

Optimal diabetes control depends on access to health care and the application of modern health care practices by both providers and patients. A method recently suggested for ascertaining the causes of premature mortality among persons with diabetes is the enumeration

#### Diabetes Mellitus - Continued

and investigation of deaths among young persons with diabetes (2). For the purpose of this investigation, each death is considered a "sentinel health event" worthy of detailed evaluation (3). The frequency of and factors contributing to these events may serve as a measure of the quality of health care in the community.

During 1985, Diabetes Control Programs (DCP) in Colorado, Illinois, Kentucky, Louisiana, Michigan, and Washington participated in a pilot project to test a surveillance system for sentinel health events for persons with diabetes. An event was defined as the death of a person who was < 45 years of age and whose death certificate made any reference to diabetes. A DCP investigator gathered basic demographic data from the death certificate and interviewed a family member and a physician associated with the case. The information collected included demographic, clinical, and health care related data.

The cause of death for each event was coded into one of the following three categories: 1) acute complications of diabetes (diabetic ketoacidosis or coma, infection, and hypoglycemia), 2) chronic complications (heart disease, end-stage renal disease, and cerebrovascular disease), and 3) other (diabetes only, non-diabetes-related, and unknown). Coding was based on the most contributory cause as indicated on the death certificate and by the DCP investigation.

Two hundred and thirty-three events were identified. The mean observed mortality rate (adjusting for variable observation times among sites) was 32.7/10,000 persons who were <45 years of age and had diabetes. Based on 1983 national death certificate data, the expected rate is 36.3/10,000 persons <45 years of age with diabetes.

The cohort of events included 146 males and 87 females. The median age at death was 38 years for males and 36 years for females. The distribution of causes of death did not differ between males and females. However, the cause of death differed significantly by age (Chisquare=14.5, p < 0.01); younger persons tended to die from acute complications, and older persons, from chronic complications (Table 1).

Several conditions were incidentally reported with notable frequency. They include alcohol abuse (13 events), suicide (5 events), and cardiomyopathy or congestive heart failure in the absence of ischemic heart disease (7 events). Eight of the persons with a history of alcohol abuse were male. Five of the 13 persons with a history of alcohol abuse died from acute complications; three, from chronic complications; and five, from other causes. All of the suicide events involved males.

The care practices of the cohort are shown by sex in Table 2. Such practices as blood pressure measurement and urinalysis were reported to have been conducted within the last year of life for virtually every person in the cohort. Other care practices, including glycohemoglobin measurement and funduscopic examination in the last year of life, were reported less commonly. Only half (48%) of the funduscopic examinations were performed by ophthal-

TABLE 1. Cause of death among 233 persons < 45 years of age with diabetes, by age, 1985

Cause of death	0-24 N=18	25-34 N=68	35-44 N=147	Total N=233
Acute complication	50.0%	22.1%	18.4%	21.9%
Chronic complication	11.1%	48.5%	60.5%	53.2%
Other	38.9%	29.4%	21.1%	24.9%
Total	100.0%	100.0%	100.0%	100.0%

# Diabetes Mellitus — Continued

mologists. Among those persons using insulin (84%), 46% had had a glycohemoglobin test in the last year of life, and 61% had used self-monitoring of blood glucose. Although virtually all persons with hypertension had been under treatment for it, the condition had not been controlled for 57% of them (≥140/90 mm Hg at the last examination). Forty-one percent were smokers at the time of death.

Individual differences in care practices between those who died from acute complications and those who died from chronic complications were not statistically significant. However, those who died from acute complications were reported to have had fewer average yearly physician visits than those who died from chronic complications (Wilcoxon rank sum test, p < 0.05).

There were more males than expected in the cohort. The ratio of males to females was 1.6, whereas the ratio of males to females in the living diabetic population < 45 years of age is 0.7. Differences in individual care practices between males and females were not statistically significant. However, within the last year of life, females had consistently higher rates of beneficial health care practices such as blood pressure check, urinalysis and glycohemoglobin testing, self-monitoring of blood glucose, and funduscopic examination. Fewer females had been current smokers, and females had seen physicians more frequently than had males, though the difference was not significant (median frequency 9 visits per year for females as compared with 6.5 visits per year for males).

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Editorial Note: Despite the heavy toll of chronic diseases on the health of persons in the United States, there are relatively few surveillance systems for them. The model surveillance system employed for infectious diseases, which includes reporting and compiling cases at a central source and rapidly disseminating results, is not currently a feasible approach for chronic disease surveillance. Infectious disease control—the investigation of causes and development of control strategies—is relatively straightforward. Chronic disease surveillance and control are comparatively more difficult because 1) chronic diseases are more complicated to diagnose, 2) there are often multiple and poorly defined etiologic factors for disease, and 3) there are long latency periods between these factors and the onset of disease. In addition, the factors responsible may be behaviors or practices (or neglect thereof) of affected persons or health care providers.

TABLE 2. Care practices in year prior to death among persons < 45 years of age with diabetes, by sex, 1985\*

	N	/lale	F	emale	T	otal
	No.	(%)	No.	(%)	No.	(%)
Blood pressure check	61	(91.8)	36	(100.0)	97	(95.0)
Urinalysis	61	(86.9)	37	(100.0)	98	(91.8)
Funduscopic examination	63	(76.2)	36	(83.3)	99	(78.9)
Glycohemoglobin testing						
among insulin users	46	(41.3)	19	(57.9)	65	(46.2)
Self-monitoring of blood glucose						
among insulin users	54	(59.3)	31	(64.5)	85	(61.2
Current smoker	63	(42.9)	36	(38.9)	99	(41.4

<sup>\*</sup>Includes only events for which responses from a physician or a family member were obtained during DCP investigation.

#### Diabetes Mellitus — Continued

Between 50% and 85% of the acute and chronic complications that are associated with diabetes and contribute to mortality are preventable or treatable (4). Previous studies on premature mortality among persons with diabetes have found that a significant proportion of deaths were due to preventable factors. The mortality rate for persons with diabetes who are <45 years of age has been reported to be 8 times that of the same age group in the general population (2). A detailed review of Washington State death certificates revealed that almost one-third of the deaths of persons <45 years of age with diabetes were due to acute complications for which there is definitive therapy (2). In a study in Great Britain, "neglect of diabetes" was considered a contributing factor in 27% of 447 deaths involving persons with diabetes who died at <50 years of age (5).

The rates of routine care practices of blood pressure check and urinalysis testing in this reported cohort were high. However, all persons with diabetes would be expected to have such basic examinations, especially in the last year of life when manifest complications of diabetes cause many to seek more health care. The rates of utilization of state-of-the-art care technologies, such as glycohemoglobin measurement or self-monitoring of blood glucose, were considerably lower and might be a more sensitive reflection of the quality of care. Finally, considering that this group is already at high risk for vascular disease, the rate of smoking was high.

' Jith advancing age, the frequency of complications among persons with diabetes increases, and the potential to prevent complications and attendant mortality decreases. The greatest potential to prevent mortality and years of potential life lost from diabetes exists among the youngest age groups. Problems that can be remedied by improved health care for this age group could also be expected to be remediable for the rest of the diabetic population. Thus, recommendations for preventing future deaths among persons <45 years of age should benefit the entire diabetic population.

The combination of alcohol and diabetes appears to be of particular concern. Alcohol has well-observed adverse effects on the health of persons with diabetes. Metabolic disturbances and compromise of the discipline and self-care that is integral to overall diabetes care are among these effects (6).

The preponderance of males in this cohort is unexplained. The higher mortality rate for males in part reflects the higher mortality experienced by males in the general population. It may also be related to a lower quality of care, but this warrants further investigation.

Sentinel health event surveillance in diabetes has the potential of illuminating the factors that contribute to premature mortality in the diabetic population and of forming the basis for systematic public health strategies to address diabetic health care problems. The system may then provide a means for measuring success or failure of strategies over time.

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# **Epidemiologic Notes and Reports**

# Staphylococcal Food Poisoning from Turkey at a Country Club Buffet — New Mexico

An outbreak of acute gastrointestinal illness followed a buffet served to approximately 855 people at a New Mexico country club on March 30, 1986. Of the 162 persons interviewed, 67 (35%) were ill with diarrhea, nausea, or vomiting. Twenty-four required emergency medical treatment or hospitalization. Of the 67 patients, 59 (88%) reported diarrhea; 52 (78%), nausea; 52 (78%), vomiting; 44 (66%), abdominal cramps; 30 (45%), headaches; 16 (34%), fever; and three (4%), bloody stool. Incubation periods ranged from 1.5 hours to 27.5 hours with a mean of 5.5 hours and a median of 4 hours. Duration of illness ranged from 1 to 88 hours with a mean of 26.3 hours and a median of 16 hours.

Three food items (turkey, poultry dressing, and gravy) were significantly associated with illness. For turkey, the odds ratio (OR) = 5.5 and the confidence limits (CL) = 2.3-13.1; for dressing, OR = 17.9 and CL = 6.1-56.4; and for gravy, OR = 2.9 and CL = 1.4-5.9. Bacteriologic cultures of the turkey and dressing yielded  $4 \times 10^7$  and  $3 \times 10^6$  Staphylococcus aureus organisms per gram respectively. Small concentrations of S. aureus were found in other foods that were not associated with illness, suggesting some degree of cross-contamination. Preformed staphylococcal enterotoxin type C was found in the turkey but not in the dressing.

S. aureus phage type 95 was isolated from the turkey and dressing, one food handler's nares (nasal passages) and stools, the nares of a second food handler, and the stools of a third. In addition, S. aureus that either could not be typed or was of another phage type was isolated from stools and nares of other food handlers and restaurant patrons. Two food handlers had open sores on their hands, but coagulase-positive staphylococci were not isolated from these sores. Although all of the food handlers had eaten at the buffet, none of them had gastrointestinal symptoms.

Review of food handling procedures indicated that the turkey had cooled for 3 hours at room temperature after cooking—a time and temperature sufficient for bacterial proliferation and toxin production. It was believed that the same utensils were used for both the turkey and other foods before and after cooking.

This same country club had experienced another foodborne outbreak in July 1984. The source of this outbreak was staphylococcal contamination of burritos and tacos. The ingredients had been cooked, assembled by hand, and then placed in a snack bar at room temperature. Phage typing was not performed. None of the food handlers with *S. aureus* isolated during investigation of the current outbreak were reported to have been working at the country club in July 1984.

After both outbreaks, food handlers were retrained by state environmental health personnel. Special emphasis was placed on increased hand washing, handling food only with gloves or implements, maintaining food below 45F (7.2C) or above 140F (60C), using smaller portions during cooling, maintaining better equipment and utensil sanitation, and exercising better management and supervision.

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## Staphylococcal Food Poisoning — Continued

Editorial Note: Epidemiologic and bacteriologic data in this large outbreak strongly implicate turkey and dressing as the vehicle. Turkey has accounted for 10% to 21% of all bacterial foodborne outbreaks for which a vehicle has been determined (1). Such outbreaks are particularly frequent around the Thanksgiving and Christmas holidays. The large number of people who may eat the meat of a single bird may amplify errors in preparation and make turkey-associated outbreaks more likely to be detected. Cooking turkey calls for particular care because of the large volume of meat to be heated and cooled, the practice of preparing it the day before it is served, and the amount of handling needed to remove the meat from the carcass (2). The pathogens most frequently causing turkey-related outbreaks are Clostridium perfringens (36% of such outbreaks reported in 1982), Salmonella (36%), and Staphylococcus aureus (27%) (3).

This report illustrates several characteristics of staphylococcal foodborne outbreaks. Outbreaks most frequently involve foods high in protein. From 1977 to 1981, approximately 25 outbreaks of staphylococcal foodborne disease were reported to CDC annually. The most

(Continued on page 721)

TABLE I. Summary—cases specified notifiable diseases, United States

		5th Week End	ling	Cumi	lative, 45th We	ek Ending
Disease	Nov. 8,	Nov. 9,	Median	Nov. 8,	Nov.9,	Median
	1986	1985	1981-1985	1986	1985	1981-1985
Acquired Immunodeficiency Syndrome (AIDS)	258	202	N	11.413	6.863	N
Aseptic meningitis	217	307	228	8.974	9,075	8,474
Encephalitis: Primary (arthropod-borne				-,	•	
& unspec.)	26	30	26	1.062	1,148	1,337
Post-infectious	_ i	-	1	90	110	81
Gonorrhea: Civilian	15,930	17,217	17,153	767,837	770.375	782,625
Military	209	478	498	14.420	18,345	21,192
Hepatitis: Type A	453	508	484	19,437	19,730	19,730
Type B	459	518	449	22.098	22,517	20,670
Non A, Non B	57	70	Ň	3,030	3,576	N
Unspecified	95	128	128	3,862	5.010	6,320
Legionellosis	14	8	N N	660	651	N
Leprosy	l '7	6	5	219	318	210
Malaria	15	7	11	973	892	892
Measles: Total*	87	21	21	5.850	2,627	2,439
Indigenous	87	20	N N	5.552	2.198	2,400 N
Imported	۰°	1	N	298	429	Ň
Meningococcal infections: Total	33	47	47	2.109	2.068	2.365
Civilian	33	47	47	2,109	2,061	2,350
Military	33	47	47	2,107	2,001	12
Mumps	116	44	62	4.453	2.574	2.879
Pertussis	90	98	35		3.070	2.069
Rubelia (German measles)	1 8			3,855	3,070 591	878
Syphilis (Primary & Secondary): Civilian	628	. 8	15	452	23,367	26.766
Military	028	576	576	23,312	23,367	334
Toxic Shock syndrome		1	4	140		
Tuberculosis	6	7	N	302	328	N 20.217
Tularemia	467	388	440	18,953	18,412	
Typhoid fever	4	1	2	134	160	238
Typhus fever, tick-borne (RMSF)	1 <u>1</u>	4	7	276	326	344
Rabies, animal	. 7	_5	_6	728	658	938
navies, allillal	67	85	94	4,749	4,702	5,371

TABLE II. Notifiable diseases of low frequency, United States

	Cum. 1986		Cum. 1986
Anthrax Retulians Foodbosses		Leptospirosis (Mo. 1, Fla. 2, Tex. 1)	35
Botulism: Foodborne Infant (Calif. 2)	13 46	Plague	7
Other	40	Poliomyelitis, Paralytic Psittacosis	84
Brucellosis	75	Rabies, human	"-
Cholera	3	Tetanus	57
Congenital rubella syndrome	10	Trichinosis	31
Congenital syphilis, ages < 1 year Diphtheria	107 -	Typhus fever, flea-borne (endemic, murine) (Fla. 1)	45

<sup>\*\*</sup>There were no cases of internationally imported measles reported for this week.

TABLE III. Cases of specified notifiable diseases, United States, weeks ending November 8, 1986 and November 9, 1985 (45th Week)

		Aseptic	Encer	halitis	Gono	rrhea	Н	epatitis (V	iral), by ty	pe		
Reporting Area	AIDS	Menin- gitis	Primary	Post-in- fectious		ilian)	Α	В	NA,NB	Unspeci- fied	Legionei- losis	Leprosy
	Cum 1986	1986	Cum 1986	Cum 1986	Cum 1986	Cum 1985	1986	1986	1986	1986	1986	Cum 1986
UNITED STATES	11,413	217	1,062	90	767,837	770,375	453	459	57	95	14	219
NEW ENGLAND Maine	448 18	9 1	24	3	20,199 762	19,741 999	8 -	38 2	4 1	9 1	6	8
N H Vt	10	-	2 4	-	494	495	-	1	-	-	-	-
Mass	5 237	2 1	5	2	237 7,488	287 8,193	5	23	2	8	2 4	8
R I Conn	28 150	2 3	13	1	1,579 9,639	1,566 8,201	2 1	2 10	1 -	-	-	-
MID ATLANTIC	4,104	20	94	8	132,596	111,724	7	35	2	10	-	17
Upstate N Y N Y City	428 2.794	13	33 18	4 1	15,771 76,949	15,562 54,766	3	16 1	1	10	-	1 15
NJ	615	7	10	-	16,962	16,806	4	18	1	-	-	-
Pa	267	-	33	3	22,914	24,590	•	-	-	-	-	1
EN CENTRAL	694 154	36 13	325 126	11 3	100,463 25,405	101,400 27,212	17 6	31 7	4	2 1	-	4
ind III	59	-	77	3	11,046	11,122	3	8	-		-	
III Mich	329 116	3	46	4 1	24,295 32,386	24,122 29,210	1 7	3 12	2 2	1	-	4
Wis	36	20	50 26		7,079	9,734	-	1	-		-	1
W N CENTRAL	217 83	19 2	77 33	9	33,201 4,741	36,206 5,362	2 1	21 4	2 1	-	1	4 2
lowa	18	6	24	-	3,393	3,815	-	ī	i	-	- :	-
Mo N Dak	71	10	1	-	16,412 279	17,450 245	-	15	-	-	1	-
S Dak	2	1	11		689	691	1		-		-	
Nebr Kans	11 30	-	1 3	1 8	2,489 5,198	3,167 5,476	-	1		-	-	2
S ATLANTIC	1,625	41	138	36	199,298	201,359	39	91	13	9	2	3
Del Md	20 159	2	6 30	1	3,302 23,277	3,878 25,307	3 3	1 6	2 3	1	1	-
D C	209	5	30	i	14,864	13,752	1	3	-	-		-
Va	135	1	36	1	16,294	16,649	8	5	- :	-	-	1
W Va N C	7 67	4 6	45 17	2	1,917 31,177	2,287 32,166	6	13	1 -	2	-	-
S C	43	1	-	-	16,993	19,164	-	6	:	-	1	-
Ga Fla	261 724	7 15	4	1 30	32,997 58,477	39,270 48,886	1 17	14 43	4 3	6	-	2
ES CENTRAL	138	11	60	4	61,743	66,263	5	28 7	3	1	-	1
Ky Tenn	25 67	4 2	30 7	1	6,810 23,448	7,537 25,479	3	17	2	1	-	-
Ala Miss	25 21	3 2	22 1	2	18,040 13,445	19,762 13,485	1	4	1	-	-	1
W S CENTRAL	1,057	37	167	6	89,381	97,326	61	37	7	22	1	
Ark	28	2	-	2	8,447	9,277	2	4	í	23	-	21 1
La Okla	137 41	5 2	15 20	-	15,687 10,278	18,368 10,779	4 11	13 7	-	4		1
Tex	851	28	132	4	54,969	58,902	44	13	3 3	19	1	19
MOUNTAIN Mont	302 4	11	37	1	22,687	24,141	66	51	8	17	1	13
ldaho	3	1	1	1	586 780	688 827	1 10	1 2	-	1		_
Wyo Colo	4	-	2	-	484	566	-	1	-	-	-	:
N Mex	146 21	1	4 3	-	5,713 2,400	7,028 2,763	3 12	8 12	2	6	1	3
Arız Utah	74	7	18	-	7,425	7,193	33	22	4	10	-	7
Nev	18 32	1 -	7 2	:	969 4,330	1,177 3,899	3 4	1 4	1 1	-	-	1 2
PACIFIC	2,828	33	140	12	108,269	112,215	248	127	14	24	3	148
Wash Oreg	148 52	4	12	-	8,065 4,659	8,786 5,640	28 37	12 16	2	1	-	16
Calif Alaska	2,573	25	121	12	92,346	93,607	177	97	12	23	3	102
Alaska Hawaii	12 43	4	6 1	-	2,346 1,105	2,678 1,504	6	1 1	:	-	-	29
Guam		U	_		172	172	U	U	U	U	U	1
PR VI	77	-	5	1	2,111	2,742	-	4		2		ż
Pac Trust Terr	3	U	-		238 413	364 766	U	U	U U	U	U	43
Amer Samoa	-	-	-	-	46		-	-	-	-		3

TABLE III. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending November 8, 1986 and November 9, 1985 (45th Week)

	-	- NC	vemb	er 8, 1	 	ana No	vember	ษ, 19 —	oo (45 	th W	BeK)				
	Malaria	India	Mea enous	sles (Rub		Total	Menin- gococcal Infections	Mur	mps		Pertussis			Rubella	
Reporting Area	Cum. 1986	1986	Cum 1986	1986	Cum. 1986	Cum. 1985	Cum. 1986	1986	Cum. 1986	1986	Cum 1986	Cum. 1985	1986	Cum 1986	Cum 1985
UNITED STATES	973	87	5,552	-	298	2,627	2,109	116	4,453	90	3,855	3,070	8	452	59
NEW ENGLAND Maine	60 2		82 12		21 1	126 1	147 25	2	62	7	155 2	194 9	-	9	12
N H Vt	3 2	-	43	-	:	-	6 18	:	14	-	79 3	105	-	1	:
Mass R I	32 7	-	24	-	13	118	37	2	12	7	41	46	-	4	
Conn	14	-	1	-	7	7	20 41	-	10 22	-	6 24	22 9	-	2 1	4
MID ATLANTIC Upstate N Y	135 45	33	1,730 77	-	34 24	232 85	336 116	5 2	187 62	6 2	190 120	226 106	-	36 27	221
NY City NJ	31 34	31	724 905	-	4	79 28	68 30	-	29 46	•	10 17	29 11	-	5 4	18
Pa	25	2	24	:	2	40	122	3	50	4	43	80	:	-	11
EN CENTRAL Ohio	59	-	1,053	-	28	535	301	51	2,994	-	359	736		45	3
Ind	19 2	-	27	- :	10 11	60 57	125 31	5 3	127 40	-	159 29	101 188	-	1	
III Mich	16 18	-	689 59	-	4	299 60	72 63	34 9	2,271 317	-	36 35	72 46	-	34 8	19
Wis .	4	-	278	-	3	59	9	-	239	-	97	329	-	2	' '
W.N. CENTRAL Minn	29 8	-	322 45	-	17 4	12 6	100 21	4 2	120 4	51	1,415 51	213 107	-	13	19
lowa Mo	11	-	133 25	-	1 6	3	11 34	2	38 21	1	19 21	28 29	•	1	
N Dak S Dak	2	-	25	-	ĭ	2	1 5	-	3	:	5	9	-	i	
Nebr Kans	4	-	-	-	-	:	11	-	1	-	14	3 9	-	-	
S ATLANTIC	3	-	94	-	5	1	17	-	53	50	1,298	28	•	9	7
Del Md	115	52 -	737 1		55	330	4	-	218	4	733 227	497 2	1	9	5
DC	14 3	-	26	-	9 1	113 31	45 4	- 1	20	-	163	283	:		6
Va W. Va	30 4	-	36 2	-	24	28 33	66 3	-	41 48	-	39 23	19 4	-	-	į
N C S C	5 6	-	3 274	-	1	9	61 41	-	22	1	74 18	31 2	- :	-	
Ga Fla	13 39	52	79 316	-	14 6	8 105	54 103	-	28 46	3	132 57	92 64	1	9	29
ES CENTRAL	20	2	60	-	12	7	112	10	56	-	47	58		4	2
Ky. Tenn	6 1	2	57	-	6 1	5 1	25 37	10	6 45	-	5 16	8 25	:	4	3
Ala Miss	9 4	-	1 2	-	1	1	36 14	-	4	-	25 1	21	-	-	
W.S CENTRAL	96		680	-	38	436	194	34	253	7	237	511	6	70	3
Ark La	1 17		276 4	-	2	42	27	28	61	2 2	20 15	14	-	-	3
Okla Tex	10 68	-	37 363	-	2 34	1 393	29	Ņ	Ñ	3	119	16 164	-	-	
MOUNTAIN	36		302	-	29	539		6	189 237	- 8	83	317	6	70	3!
Mont Idaho	1	-	1	-	8	137	10	-	5	4	263 19	208 10	1	24 2	(
Wyo	-	-	-			137 5	2	-	8	-	42 4	15	-	1	:
Colo N Mex	12 5	-	2 33		8 7	13 6	17 10	N	14 N	2	66 22	81 12	-	1	
Ariz Utah	12 3		252 12	•	6	241	22 10		187 15	2	65 41	38		2	:
Nev	3	-	2	-	-	-	26	-	8		4	52	1 -	15 3	
PACIFIC Wash	423 28	-	586 139	-	64 28	410 133		10 1	326 16	7 1	456 145	427	-	242	197
Oreg	15 379	-	7	-	4	5	32	Ň	N	-	12	75 45	-	17 4	14
Calif Alaska	-	-	413	-	30	248	13	8	283 6	5 1	285 3	260 30	:	215	133
Hawaii	1	•	27	-	2	24	11	1	21	-	14	17	-	6	48
Guam P.R	1 4	U	4 36	U	1	11 67	3	U -	4 33	U	19	12	U	4 62	27
VI. Pac Trust Terr	:	U	-	U	:	10	1	U	16 11	U	-	-	Ų	-	21
Amer Samoa	-	-	2	-	-	-	-		5	-	-	-	U	2	

<sup>\*</sup>For measles only, imported cases includes both out-of-state and international importations.

719

TABLE III. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending November 8, 1986 and November 9, 1985 (45th Week)

		NOVEINE	er 8, 1980	and NO	verriber 9	, 1905 (4:	T Veek		
Reporting Area	Syphilis (Primary &	Secondary)	Toxic- shock Syndrome	Tubero	culosis	Tula- remia	Typhoid Fever	Typhus Fever (Tick-borne) (RMSF)	Rabies, Animal
	Cum 1986	Cum 1985	1986	Cum 1986	Cum 1985	Cum 1986	Cum 1986	Cum 1986	Cum 1986
UNITED STATES	23,312	23,367	6	18,953	18,412	134	276	728 <del>+</del>	-6 4,749
NEW ENGLAND Maine	429 19	514 13	:	614 34	629 40	1	16	13	8
N H Vt	10	36	-	23 16	21	-	-	2	1
Mass	225	254	-	338	373	1	13	4	2
R I Conn	19 147	15 1 <b>8</b> 9	-	42 161	47 140	-	3	3 4	3 2
MID ATLANTIC	3,270 159	3,159 234	1	3,745 528	3,314 578	1	23		-1 607
Upstate N Y N Y City	1,841	1,929	:	1,972	1,602	-	4 10	19 5	76
N J Pa	578 692	602 394	1	631 614	456 678	1 -	8 1	2 9	17 514
EN CENTRAL	771	876	2	2,246	2,247	_	22	54	130
Ohio Ind	110	134	1	392	391	-	8	48	14
III	100 363	74 400	-	247 958	284 980	-	2 3	2	17 39
Mich Wis	160 38	210 58	1	549 100	466 126	-	6	4	24 36
W N CENTRAL	187	202	1	557	515	37	9	48	,
Minn Iowa	31 7	40 18	-	130 46	109 53	1	2	1	112
Mo	98	108	1	272	247	28	6	24 —	167 67
N Dak S Dak	5 9	2 6	-	10 26	10 27	3	:	1 6	145 170
Nebr	11	7	-	12	16	1	-	6	29
Kans	26	21	-	61	53	4	1	9	53
S ATLANTIC Del	6,999 52	6,735 35	-	3,797 40	3,754 42	10	45 1	328 +	-) 1,181
Md D C	394	421	-	277	336	2	15	29	528
Va	268 306	296 263		136 314	136 359	1 2	4 10	52	31 177
W Va N C	20	22	-	110	95 476	-	3	10 .	48
SC	450 607	600 706		536 490	457	2	4	125 <sup>[</sup> 70	9 60
Ga Fla	1,304 3,598	1,203 3,189	-	636 1,258	635 1,218	3	- 8	39 2	180 147
ES CENTRAL	1,553	1,815	-	1,674	1,609	13	3	108 🛨	315
Ky Tenn	63 549	61 568		369 498	393 477	5 6	1	22 44	91 109
Ala Miss	455	584	-	527	472	1	1	24	112
WS CENTRAL	486	602	-	280	267 2,360	1	1	18 131 +	3
Ark	4,590 220	5,376 290	-	2,394 323	287	58 40	23	10	152
La Okla	792 122	945 168	-	378 222	335 227	1 12	1 2	1 I 103 <b>3</b>	22 57
Tex	3,456	3,973		1,471	1,511	5	20	17	430
MOUNTAIN Mont	521 7	659 6	1	454 31	491 46	11	16 1	10 4	607 195
Idaho	14	5		20	22	-		2	9
Wyo Colo	2 118	9 1 <b>8</b> 9	1	40	5 73	1	1	1 3	255 29
N Mex	62	112	-	86	79	Ĭ	1	-	6
Arız Utah	219 18	276 8	-	211 31	219 17	4	9	-	95 7
Nev	81	54	-	35	30	1	1	-	11
PACIFIC Wash	4,992	4,031	1	3,472	3,493	3	119	1	497
Oreg	120 101	97 90	-	179 111	198 116	1 -	3	-	5 1
Calıf Alaska	4,730 10	3,781	1	2,980	2,926	1	110	1	483
Hawaii	31	59	-	46 156	89 164	1 -	1 5	-	8 -
Guam P R	1 777	2	υ	34	37	-	1	-	_
V.I	1	758 3	Ū	288 1	307 1		5	-	41
Pac Trust Terr Amer Samoa	215	128	ŭ	62	75	•	46	-	-
- Control				5			-	·	<u> </u>

TABLE IV. Deaths in 121 U.S. cities.\* week ending November 8, 1986 (45th Week)

		All Caus	es, By A	ge (Year:	s)				<u> </u>	All Cause	s, By A	ge (Years	;)		
Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	P&I** Total	Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	P&I**
NEW ENGLAND	599	430	114	33	8	14	49	S ATLANTIC	1,213	726	269	140	37	41	46
Boston, Mass. Bridgeport, Conn.	159 51	91 38	43	18	3	4	14	Atlanta, Ga	152	91	39	17	4	1	4 5
Cambridge, Mass	27	23	10 3	3 1	:	•	4	Baltimore, Md Charlotte, N C	187 88	109 56	45 16	20 8	5 1	8 7	4
Fall River, Mass.	24	17	4	i	1	1	2	Jacksonville, Fla	73	45	17	9	i	i	2
Hartford, Conn.	56	37	11	3	3	2	2	Miami, Fla	118	60	24	17	12	5	2
Lowell, Mass. Lynn, Mass	22	13	8	1	-	•	2	Norfolk, Va	48	30	11	4	3	-	2
New Bedford, Mass	19 28	17 24	1 1		-	1	:	Richmond, Va	75	43	16	9	1	6 1	10 3
New Haven, Conn.	42	31	6	3 2	ī	2	1	Savannah Ga St Petersburg Fla	48 100	30 83	10 14	7 1	1	i	4
Providence, R.I.	33	23	9	-		í	5	Tampa, Fla	71	50	14	8	ż	ż	3
Somerville, Mass.	7	5	2	-	-	-	ĭ	Washington, D C	234	112	68	39	7	8	7
Springfield, Mass. Waterbury, Conn.	51	41	8	1	-	1	4	Wilmington, Del	19	17	1	1	-	-	-
Worcester, Mass.	32 48	31 39	1 7	-	-	-	3	F.C. CENTRAL	770	494	176	54	16	30	38
		33	,	-	•	2	8	E.S. CENTRAL Birmingham, Ala	135	79	34	8	4	10	3
	2,318	1,532	472	200	55	59	108	Chattanooga, Tenn	50	32	9	2	5	2	5
Albany, N.Y. Allentown, Pa	53	35	7	3	5	3	1	Knoxville, Tenn	75	47	18	7	2	1	5
Buffalo, N.Y.	24 114	18	5	1	-	:	2	Louisville, Ky	112	80	19	. 7	2	4	3
Camden, N.J.	35	75 25	28 5	5 2	3	3	9	Memphis, Tenn	147	89	41 14	14 7	2 1	1 5	-
Elizabeth, N.J.	31	24	5	2	'	2	2	Mobile, Ala Montgomery, Ala	78 36	51 27	8	,	'	1	- 2
rie, Pa t	40	31	7	ĩ	1	-	4	Nashville, Tenn	137	89	33	9	-	6	11
Jersey City, N.J.	53	36	11	3	2	1	3		, , ,	•	-	-			
N.Y. City, N.Y. 1 Newark, N.J.	1,094	691		139	21	25	41	W S CENTRAL	1,327	797	297	119	63	49	5
Paterson, N.J.	72 32	31 20	19	11	7	4	6	Austin, Tex	57	40	6	7	1	3 1	
Philadelphia, Pa	297	199	6 72	3 12	2 7	1	2 13	Baton Rouge, La	41	25	11	2	2	'	
Pittsburgh, Pa.†	130	85	29	9	á	4	2	Corpus Christi, Tex Dallas, Tex	32 212	26 119	54	22	10	7	
Reading, Pa.	30	23	5	2	-	•	2	El Paso, Tex	60	32	13		1	8	
Rochester, N.Y. Schenectady, N.Y.	129	98	19	5	2	5	12	Fort Worth, Tex	118	70	24	13	8	3	
Scranton, Pa.†	38 28	30 25	8 3	-	-	-	2	Houston, Tex	315	176	75		18	14 2	1.
Syracuse, N.Y.	41	26	13	-	i	1	2	Little Rock, Ark	57	40	9		1 9	2	
Trenton, N.J.	29	20	5	i	'	3	2	New Orleans, La San Antonio, Tex	131	76 119	34 36		11	8	10
Jtica, N.Y.	19	16	3	-			- 1	Shreveport, La	186 32	20	8			-	
onkers, N.Y.	29	24	4	1	•	•	2	Tulsa, Okla	86	54	23		2	1	
	2,187	1,421			56	74	73	MOUNTAIN	687	453	131	52	25	26	3
Akron, Ohio Canton, Ohio	60 32	42 28	11	2	3	2	-	Albuquerque, N Mex	x 96	67	15	8	3	3	
hicago, III.§	564	362	4 125	45	10	-	2	Colo Springs, Colo	38	24	8		1 4	3 10	
Cincinnati, Ohio	118	81	20	9	1	22	16 9	Denver, Colo	112	73	17		2	3	
leveland, Ohio	175	100	54	10	ż	4	2	Las Vegas, Nev Ogden, Utah	138 18	87 14	34 4		-	-	
olumbus, Ohio	131	73	37	12	5	4	8	Phoenix, Ariz	137	85	28	13	7	4	
Payton, Ohio	110	76	26	6	2	-	2	Pueblo, Colo	15	11	3	-	1	-	
Petroit, Mich. vansville, Ind.	261 25	144 18	50	39	11	17	6	Salt Lake City, Utah		30	5		3	2	
ort Wayne, Ind.	37	26	5 8	1 2	-	1	3	Tucson, Arız	89	62	17	5	4	1	
ary, Ind	17	-8	5	í	2	1		PACIFIC	1,835	1,229	333	166	64	38	12
rand Rapids, Mich		35	5	5	3	Ċ	2	Berkeley, Calif.	1,033	14	2		-	2	
dianapolis, Ind.	159	105	36	8	5	5	3	Fresno, Calif	69	50	8	6	4	1	
ladison, Wis. lilwaukee, Wis.	20 120	15	4	1	-	-	3	Glendale, Calif	26	22	2		-	-	
eoria, III.	64	89 47	23 11	4 2	3	1	3	Honolulu, Hawaii	71	48	13		3	-	1
ockford, III.	57	45	9	1	1	3	5 2	Long Beach, Calif	110 477	69 291	20 102		5 27	5	2
outh Bend, Ind.	40	29	6	2	ż	i	- 4	Los Angeles, Calif Oakland, Calif	46	32	6		2	2	-
oledo, Ohio	97	66	23	6	-	ż	7	Pasadena, Calif	20	14	3		ī	-	
oungstown, Ohio	52	32	17	1	-	2	-	Portland, Oreg.	125	94	21	3	3	4	
I.N. CENTRAL	771	534	141	54	27	1 =	ا ہے	Sacramento, Calif	142	100	26		2	3	1
es Moines, Iowa	51	35	13	1	2/	15	52 5	San Diego, Calif	152	108	26		3	2	1
uluth, Minn.	35	29	5		1	-	1	San Francisco, Calif San Jose, Calif	163 159	99 114	37 19		2 6	4	1
ansas City Kans	36	20	10	4	2	-	- 1	Seattle, Wash	145	96	26	13	4	6	
ansas City, Mo	118	80	26	8	1	3	12	Spokane, Wash	66	44	26 16		Ž	6	
ncoln, Nebr.	31	20	6	4	1	-	3	Tacoma, Wash	45	34	6	3	-	2	
linneapolis, Minn.	140	102	24	9	2	3	9		t	t					
maha, Nebr. t. Louis, Mo.	81 146	60 96	8 24	6 15	6	1	5 12	TOTAL	11,707	7,616	2,412	975	351	346	57
t. Paul, Minn	66	43	12	3	6 5	5 3	12								
	67	49	13	4	1	•	41								

<sup>\*</sup>Mortality data in this table are voluntarily reported from 121 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

Theurmonia and influenza.

The Because of changes in reporting methods in these 3 Pennsylvania cities, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

Thouland includes unknown ages.

<sup>§</sup> Data not available. Figures are estimates based on average of past 4 weeks

Table V. Estimated years of potential life lost before age 65 and cause-specific mortality, by cause of death — United States, 1984

Cause of mortality (Ninth Revision ICD)	Years of potential life lost by persons dying in 1984*	Cause-specific mortality <sup>†</sup> (rate/100,000)
ALL CAUSES		
(Total)	11,761,000	866.7
Unintentional injuries <sup>§</sup>		
(E800-E949)	2,308,000	40.1
Malignant neoplasms	,	
(140-208)	1,803,000	191.6
Diseases of the heart		
(390-398, 402, 404-429)	1,563,000	324.4
Suicide, homicide		
(E950-E978)	1,247,000	20.6
Congenital anomalies		
(740-759)	684,000	5.6
Prematurity¶		
(765, 769)	470,000	3.5
Sudden infant death syndrome		
(798)	314,000	2.4
Cerebrovascular diseases		
(430-438)	266,000	65.6
Chronic liver diseases		
and cirrhosis	222 222	44.0
(571)	233,000	11.3
Pneumonia and influenza	163.000	25.0
(480-487)	163,000	25.0
Chronic obstructive		
pulmonary diseases (490-496)	123,000	29.8
Diabetes mellitus	123,000	29.0
(250)	119,000	15.6

<sup>\*</sup>For details of calculation, see footnotes for Table V, MMWR 1986;35:27.

# Staphylococcal Food Poisoning — Continued

common vehicles were ham (27% of outbreaks with a known vehicle), potato or egg salad (15%), and poultry (11%) (4). An outbreak occurs when a contaminated food is held at inappropriate temperatures long enough to allow the organisms to elaborate toxin. The toxin is heat stable, and reheating foods will not prevent the illness. Human carriers are presumed to be the source of the enterotoxigenic *S. aureus*, but carriers often do not have visible lesions. Thus the absence of nasal or hand lesions is no guarantee of safety (4). As in this outbreak, the most frequently found problem is a critical error in food handling that facilitates bacterial contamination and growth (5). Proper education and supervision, along with thorough investigation of outbreaks, remain the cornerstones of prevention of foodborne illness.

#### References

- Horwitz MA, Ganagarosa EJ. Foodborne disease outbreaks traced to poultry, United States, 1966-1974. J Milk Food Technol 1976;39:859-63.
- Bryan FL, McKinley TW. Prevention of foodborne illness from turkeys by time-temperature control of thawing, cooking, chilling, and reheating turkeys in school lunch kitchens. J Milk Food Technol 1974:37:420-9.

<sup>†</sup>Cause-specific mortality rates as reported in the MVSR are compiled from a 10% sample of all deaths.

<sup>§</sup>Equivalent to accidents and adverse effects.

<sup>¶</sup>Category derived from disorders relating to short gestation and respiratory distress syndrome.

# Staphylococcal Food Poisoning - Continued

- CDC. Annual summary 1982. Foodborne disease outbreaks surveillance. Atlanta, Georgia: Public Health Service, 1985; DHHS publication no. (CDC)85-8185.
- 4. Holmberg SD, Blake PA. Staphylococcal food poisoning in the United States: new facts and old misconceptions. JAMA 1984;251:487-9.
- Bryan FL. What the sanitarian should know about Staphylococci and Salmonellae in non-dairy products. I. Staphylococci. J Milk Food Technol 1968;31:110-6.

# Notice to Readers

# **Holiday Printing Schedule**

Because of the Thanksgiving holiday, Volume 35, Number 47, of the MMWR will be printed a day late. Therefore, distribution will begin on Friday, November 28, instead of on Thursday, November 27.

TABLE I. Summary-cases specified notifiable diseases, United States

	4	6th Week Endi	ng	Cumul	ative, 46th Wee	
Disease	Nov. 15, 1986	Nov. 16, 1985	Median 1981-1985	Nov. 15, 1986	Nov. 16, 1985	Median 1981-1985
Acquired Immunodeficiency Syndrome (AIDS)	243	118	N	11,663	6,981	N
Aseptic meningitis	233	231	231	9.281	9,306	8,665
Encephalitis: Primary (arthropod-borne		-0.		0,20		
& unspec.)	16	31	37	1.082	1,179	1,377
Post-infectious	l ï	•	· .	91	110	81
Gonorrhea: Civilian	16.877	15.920	17.601	784.918	786,295	800,226
Military	449	357	357	14.871	18,702	21,595
Hepatitis: Type A	477	444	444	19.912	20,174	20,174
Type B	449	540	493	22,532	23,057	21,127
Non A, Non B	51	64	N	3.084	3.640	N
Unspecified	80	77	118	3,936	5.087	6,438
Legionellosis	10	18	Ň	689	669	N
Leprosy	1	16	5	219	334	215
Malaria	19	28	20	994	920	920
Measles: Total*	ı 'ă	37	25	5.852	2.664	2,443
Indigenous	1 4	37	N N	5,561	2,235	N
Imported	1 .	37	Ň	291	429	N
Meningococcal infections: Total	34	34	55	2,145	2.102	2,410
Civilian	34	34	55	2,143	2.095	2,395
Military	] "	34	55	2,143	2,000	12
Mumps	98	31	49	4.553	2.605	2,928
Pertussis	31	83	31	3,874	3,153	2.097
Rubella (German measles)	l š	3	15	462	594	893
Syphilis (Primary & Secondary): Civilian	505	430	594	23.833	23,797	27,393
Military	303	430	4	143	145	338
Toxic Shock syndrome	5	į.	Ň	307	333	Ň
Tuberculosis	417	340	415	19.374	18,752	20,632
Tularemia	1 7'7	340 6	415 6	19,374	16,752	250
Typhoid fever	l ś	14	7	279	340	349
Typhus fever, tick-borne (RMSF)	3	10	6	730	668	943
Rabies, animal	70	98	98	4,836	4,800	5,432

TABLE II. Notifiable diseases of low frequency, United States

	Cum. 1986		Cum. 1986
Anthrax Botulism: Foodborne (Calif. 2, Alaska 2)	17	Leptospirosis Plaque	35
Infant (Calif. 11)	57	Poliomyelitis, Paralytic	ĺí
Other Brucellosis (Mo.1)	76	Psittacosis Rabies, human	84
Cholera Congenital rubella syndrome	3 10	Tetanus Trichinosis	57 31
Congenital syphilis, ages < 1 year Diphtheria	107	Typhus fever, flea-borne (endemic, murine)	45

<sup>&</sup>quot;There were no cases of internationally imported measles reported for this week.

TABLE III. Cases of specified notifiable diseases, United States, weeks ending November 15, 1986 and November 16, 1985 (46th Week)

		Aseptic	Encer	halitis	Com	rrhaa	Н	epatitis (V	'iral), by ty	pe	l	Γ
Reporting Area	AIDS	Menin- gitis	Primary	Post-in- fectious		orrhea ilian)	Α	В	NA,NB	Unspeci- fied	Legionel- losis	Leprosy
	Cum 1986	1986	Cum 1986	Cum 1986	Cum 1986	Cum 1985	1986	1986	1986	1986	1986	Cum 1986
UNITED STATES	11,663	233	1,082	91	784,918	786,295	477	449	51	80	10	219
NEW ENGLAND Maine	470 19	7	25	3	20,809 771	20,148 1,029	13	31 1	1	7	-	8
N H Vt	13	1	2	2	502 240	506 295	-	1	-		-	-
Mass R I	254 29	i	5	-	7,599 1,602	8,362 1,625	5 2	1 i 6	-	7		8
Conn	150	4	14	1	10,095	8,331	6	12	1		-	-
MID ATLANTIC Upstate N Y	4,206 458	12 4	94 33	8 4	135,935 16,210	113,408 15,932	12	30 6	2	8 1	-	17 1
NY City NJ	2,864 617	2 6	18 10	1	78,836 17,542	55,066 17,200	3 9	1 23	1 1	4	-	15
Pa	267	-	33	3	23,347	25,210	-	-		-	-	1
EN CENTRAL Ohio	695 154	49 17	333 128	11 3	102,317 26,222	104,069 28,642	20 4	38 7	4 1	2	-	4
Ind III	59	6	78	3	11,214	11,240	6	2	i	2	-	
Mich Wis	329 116	7 19	50 51	4 1	24,539 32,939	24,346 29,894	4 6	4 25	2	-	-	4 1
WN CENTRAL	37 219	9	26 79	9	7,151 33.720	9,947 36.921	8	10	1	-		-
Minn	83	1	33	-	4,844	5,462	-	-	-	-	1	4 2
Mo	18 72	5 1	25 2	-	3,444 16,572	3,966 17,826	-	1 5	-	-	1	
N Dak S Dak	2 2	-	4 11	-	283 701	253 707	1		-	-	-	-
Nebr Kans	11 31	1 1	1 3	1 8	2,541 5,335	3,167 5,540	3 4	4	1	-	-	2
S ATLANTIC	1,691	52	139	37	203,700	205,111	35	110	10	6	8	3
Del Md	21 159	1 7	6 30	1	3,358 23,892	3,946 25,749	2 2	1 4	-	1		-
D C Va	222 135	2 19	37	1	15,186 16,675	14,073 17,127	- 6	31	6	2	- :	1
W Va N C	7 67	1	45	-	1,985 31,525	2,329 32,669	2	1	Ĭ	1 2	6	-
S C Ga	45	1	17	2	17,435	19,523	1	24 12	1	-	1	-
Fla	261 774	3 16	4	1 31	33,742 59,902	40,049 49,646	6 16	24	2	-	1	2
ES CENTRAL Ky	141 28	12	61 30	4 1	63,106 6,951	67,916 7,804	4	26 1	1	2	-	1
Tenn Ala	67 25	3	8	1	23,927 18,454	26,024 20,371	3	1 1 5	-	-	-	1
Miss	21	6	22 1	2	13,774	13,717	1	9		2	-	
WS CENTRAL Ark	1,058 29	38 4	171	6 2	90,758 8.676	99,368 9,421	48 1	48 4	8 1	24	1 1	21 1
La Okla	137	3 2	15	-	15,756	18,897	1	5	2	2	-	i
Tex	41 851	29	20 136	4	10,516 55,810	11,080 59,970	2 44	6 33	5	20	-	19
MOUNTAIN Mont	310	10	37	1	23,287	24,641 711	78	40	9	6	-	13
ldaho	3	1	1 -	1 -	586 793	839	5	2	-	ñ	-	-
Wyo Colo	4 146	1 1	2 4	-	491 5,954	579 7,156	8	4	1	2	-	3
N Mex Arız	22 80	2 2	3 18	-	2,457 7.557	2,786 7,371	15 49	4 22	3	3	-	7
Utah Nev	18 33	3	7	-	988 4,461	1,199 4,000	1	- 8	4 1	-	-	1 2
PACIFIC	2,873	44	143	12	111,286	114,713	259	116	15	25		148
Wash Oreg	157 52	8	12	-	8,204 4,773	8,996 5,739	81 25	41 13	3 2	7 1		16
Calif Alaska	2,603	31	123	12	95,040 2,387	95,681 2,770	149	59 2	10	16 1	-	102
Hawaii	49	5	í	-	1,134	1,527	2	1		-		29
Guam P R	77	1	- 5	1	184 2,159	174 2,830	2	6	-	2	-	1
V١	3	-	-	-	247	369		-		-	-	
Pac Trust Terr Amer Samoa	-		-	-	424 51	766	4	-	-	1	-	53

N Not notifiable

724 MMWR November 21, 1986

TABLE III. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending

November 15, 1986 and November 16, 1985 (46th Week)

			Mea	sies (Rub	eola)		Menin-			I			T			
Ponestine Asset	Malaria	Indig	enous	Impo	ted *	Total	gococcal Infections	Mur	mps		Pertussis			Rubella		
Reporting Area	Cum. 1986	1986	Cum 1986	1986	Cum. 1986	Cum. 1985	Cum. 1986	1986	Cum. 1986	1986	Cum 1986	Cum 1985	1986	Cum 1986	Cum 1985	
UNITED STATES	994	4	5,561	-	291	2,664	2,145	98	4,553	31	3,874	3,153	8	462	594	
NEW ENGLAND	61	1	88	-	16	126	149	-	62	-	156	198	-	9	12	
Maine N.H.	2	-	12 43	-	1	1	26 6	-	14	-	2 80	9 107	-	1	2	
Vt.	2	-		-	-	-	18	-	4	-	3	3	-	1	-	
Mass R.I	32 7	-	24 2	-	13	118	38	-	12	-	41	46	-	4	6	
Conn	15	1	7	-	2	7	20 41	-	10 22	-	6 24	22 11		1	4	
MID ATLANTIC	138	-	1,729		34	232	339	5	193	1	193	232	-	36	228	
Upstate N.Y. N.Y. City	45 31	-	77 723	•	24 4	85 79	118	:	62 29		121 10	107 29	-	27 5	18 185	
N.J.	37	-	905	-	4	28	69 30	ī	48	- 1	18	11		4	11	
Pa	25	-	24	-	2	40	122	4	54	1	44	85	-	-	14	
E N. CENTRAL	61	1	1,055	-	28	562	307	44	3,039	6	368	757	2	49	37	
Ohio Ind.	19 2	-	27	-	10	60	126	1	128	-	159	109	-	1		
III.	16	1	691		11 4	57 326	32 74	29	40 2,300	6	35 36	188 73	2	38	1 19	
Mich. Wis.	20	-	59	-	-	60	64	13	330	-	35	47	-	8	16	
	4	-	278	-	3	59	10	1	241	-	100	340	•	2	1	
W.N. CENTRAL Minn.	29 8	-	322	-	17	12	102	16	136	8	1,405	223	1	14	19	
lowa	1	-	45 133		4	6	21 11	8 7	12 45	-	51 19	112 30	-	1	2	
Mo.	11	-	25	-	6	3	33	í	22	1	22	31	-	1	7	
N Dak S Dak	2	-	25	-	1	2	1	-	3	-	5	10	-	1	2	
Nebr	4	-	-	-	-	- :	5 11	-	1	3	14 10	3	-			
Kans.	3	-	94	-	5	1	20	-	53	4	1,284	28	1	10	7	
S. ATLANTIC Del	116 1	1	735 1	-	56	330	391	5	223	7	740	509	-	9	52 2	
Md	14	-	26		9	113	4 46	4	24	-	227 163	2 291	-	-	6	
D.C. Va	3 31	-	36	-	1	31	4	-	-	-	-		-	-	2	
W. Va.	4	-	2	:	24	28 33	69 3	- :	41 48	1 2	40 25	19 4			9	
N.C.	5	-	3	-	1	9	62	-	22	-	74	32	-	-	1	
S.C. Ga.	6 13	-	274 79	-	14	3 8	42 57	-	13 28		18 132	2 92	-	-	3	
Fla	39	1	314	-	7	105	104	1	47	4	61	67	-	9	29	
E.S. CENTRAL	20		63		9	7	113	8	64		47	63	_	4	3	
Ky. Tenn.	6	-	-	-	6	5	25	-	6	-	5	8	-	4	3	
Ala	1 9	:	57 1	-	1	1	37	8	53 4	-	16	25	-	-	-	
Miss	4	-	5	-	i	1	37 14	-	1		25 1	23 7	-	-	-	
W.S. CENTRAL	99	-	680	-	38	436	197	6	259	1	238	523		70	39	
Ark. La.	1 18	-	276 4	-	2	42	27 26		61 3	-	20	14 17	-	-	1	
Okla.	11	-	37	-	2	1	29	Ň	Ň	-	15 119	165	-		1	
Tex	69	-	363	-	34	393	115	6	195	1	84	327	-	70	37	
MOUNTAIN Mont	36	•	302	-	29 8	539 137	101 10	3	240 5	1	264	212	-	24	6	
ldaho	1	-	1	-	-	137	4		8		19 42	10 15	-	2	2	
Wyo. Colo.	12		2	-	8	5 13	2 17	1	15	-	4	-	-	1	-	
N. Mex.	5		33	-	7	6	10	Ń	15 N	1	66 23	82 12	-	1	2	
Ariz Utah	12	-	252	-	6	241	22	2	189	-	65	40	-	2	1	
Nev	3 3	-	12 2	-	-	:	10 26	:	15 8	-	41 4	53	-	15 3	1	
PACIFIC	434	1	587	_	64	420	446	11	337	7	463	436	5	247	198	
Wash.	28	-	139	-	28	142	60	1	17	2	147	80	-	17	14	
Oreg. Calif.	17	:	7	-	4	5 249	33	N 8	N 291	3	12	49		220	2 133	
Alaska	388	1 -	414	-	30	249	326 14	-	6	-	288 3	260 30	5	220	1	
Hawaii	1	-	27	-	2	24	14	2	23	2	16	17	-	6	48	
Guam	1	-	4	-	1	11 67	1	-	4 33		• -		-	4	3 27	
P.R V.I.	4	-	36	-	- :	10	3	-	16	-	19	12	-	62	- 21	
Pac. Trust Terr.	-	-	-	•	-	-	1	-	11	-	-	-	-	2	-	
Amer. Samoa		-	2					-	5	-				1	-	

<sup>\*</sup>For measles only, imported cases includes both out-of-state and international importations.

N Not notifiable U Unavailable †International §Out-of-state

TABLE III. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending

November 15, 1986 and November 16, 1985 (46th Week)

		lovember	15, 1986	and Nov	ember 16	, 1985 (4	6th Week	:)	
Reporting Area		(Civilian) Secondary)	Toxic- shock Syndrome	Tuber	culosis	Tula- remia	Typhoid Fever	Typhus Fever (Tick-borne) (RMSF)	Rabies. Animal
	Cum 1986	Cum 1985	1986	Cum 19 <b>8</b> 6	Cum 1985	Cum 1986	Cum 1986	Cum 1986	Cum 1986
UNITED STATES	23,833	23,797	5	19,374	18,752	141	279	730 ∳	2 4,836
NEW ENGLAND Maine	433 19	525 13	-	621 34	650 42	1	16	13	8
N H Vt	10	36	-	23 16	21	-	-	2	1
Mass R I	227	261	-	345	384	1	13	4	2
Conn	19 149	15 193	-	42 161	50 145	-	3	3 4	3 2
MID ATLANTIC	3,337 160	3,224 238	-	3,830 533	3,361 586	1	23	35	620
Upstate N Y N Y City	1,870	1,960	-	2,011	1,637		4 10	19 5	78 -
N J Pa	594 713	620 406	-	653 633	456 682	1	8 1	2 9	17 525
EN CENTRAL	776	886	1	2,291	2,281	1	22	55 <del>+</del>	132
Ohio Ind	110 103	134 74	1	398 250	397 291		8 2	49 [	16 17
III Mich	363	400	-	987	985	-	3	2	39
Wis	160 40	219 59	-	554 102	478 130	1 -	6 3	4	24 36
W N CENTRAL	190 31	207 42	-	569 132	520 110	40	9 2	47 <b>-</b> -	750 114
lowa	7	18		46	53	1	-	i	170
Mo N Dak	101 5	110 2	-	279 10	251 10	29	6	24 1	67 145
S Dak Nebr	9	6	-	27 14	27 16	3 1	-	6 5 – 1	170
Kans	26	22	-	61	53	6	1	9	31 53
S ATLANTIC Del	7,213 52	6,860 36	1	3,871 40	3,845 42	10	45 1	330 +	2 1,222
Md	403	438	-	287	354	2	15	29	551
D C Va	268 312	297 267	-	140 326	138 368	1 2	4 10	52	31 184
W Va N C	20 459	23 612	-	111 550	97 496	2	3 4	10 127 <b>2</b>	50 9
SC	619	712	1	499	467	-	-	70	64
Ga Fla	1,333 3,747	1,231 3,244	-	645 1,273	645 1,238	3	8	39 2	185 147
ES CENTRAL	1,574	1,828	-	1,710	1,636	13	4	108	319
Ky Tenn	63 566	63 568	-	381 504	402 485	5 6	1	22 44	94 109
Ala Miss	459 486	595 602	-	540 285	482 267	1 1	1 2	24 18	113 3
WS CENTRAL	4,672	5,491	2	2,458	2,390	61	25	131	667
La	229 805	292 960		333 393	287 335	<b>43</b> 1	1	10 1	152 22
Okla Tex	131 3,507	170 4,069	2	223 1,509	229 1,539	12 5	2 22	103 17	57 436
MOUNTAIN	537	666	1	461	500	11	16	10	613
Mont Idaho	7 14	6 5	-	31 21	46 23	1	1	4 2	197 9
Wyo Colo	4	9	-	-	5	1	-	1	258
N Mex	122 62	191 112	1	42 87	73 82	3 1	1 1	3	29 6
Arız Utah	219 18	281 8	-	214 31	224 17	4	9	-	96 7
Nev	91	54	-	35	30	í	ĭ	-	11
PACIFIC Wash	5,101	4,110	-	3,563	3,569	3	119	1	505 5
Oreg	120 103	97 92	-	183 112	200 119	1 -	3	-	1
Calif Alaska	4,837 10	3,855 4	-	3,062 46	2,992 89	1	110	1	491 8
Hawaii	31	62	-	160	169	-	5	-	
Guam P R	1 790	2 777	-	34 305	38 320	-	1 5	-	43
V I Pac. Trust Terr	1 238	3	-	1	1 75	-	47	-	-
Amer Samoa	-	128		75 5		-		-	

TABLE IV. Deaths in 121 U.S. cities.\* week ending November 15, 1986 (46th Week)

				ge (Years				1	All Causes, By Age (Years)					- 1	1
Reporting Area	All Ages	≥65	45-64	25-44		<1	P&I** Total	Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	P&I** Total
NEW ENGLAND	698	486	137		19	13	46	S ATLANTIC	1,120	713	228	88	28	34	54
Boston, Mass	175	108	38	15	9	5	8	Atlanta, Ga	113	68	35	3	4	3	3
Bridgeport, Conn	40	21	12	5	1	1	-	Baltimore, Md	201	126	49	13	6	7	4
Cambridge, Mass Fall River, Mass	30 33	27 28	3	-	-	-	4	Charlotte, N.C.	66	41	17	6		2	. 5
Hartford, Conn	64	46	5 10	6	i	1	-	Jacksonville, Fla	133	87	9		5	3	15
Lowell, Mass	27	21	5		'	i	5 1	Miami, Fla Norfolk, Va	86 46	47 26	22 11	15 7	1	1 2	2
Lynn, Mass	16	12	3	1	-		i	Richmond, Va	46 77	51	14	8	1	3	7
New Bedford, Mass		18	5	1	-	-		Savannah, Ga	57	30	16	6	3	2	4
New Haven, Conn.	62	42	10	8	2	-	4	St Petersburg Fla	76	64	10	ĭ	ĭ	-	1
Providence, R I Somerville, Mass.	67	50	13	2	-	2	11	Tampa, Fla	70	50	13	6	-	1	7
Springfield, Mass	5 63	5 45		:	-	-	-	Washington, D.C.	164	98	29	21	6	10	3
Waterbury, Conn.	32	45 25	15 4	1	1	1	5	Wilmington, Del	31	25	3	2	1	-	1
Worcester, Mass	60	38	14	1 3	2	2	6 1	ES CENTRAL	618	394	139	49	13	23	27
		50	1-7	3	3	2	,	Birmingham, Ala	106	65	27	7	1	6	1
		1,830		270	67	52	118	Chattanooga, Tenn		46	12	5	i	ĭ	ż
Albany, N.Y.	56	40	12	1	2	1	3	Knoxville, Tenn	61	46	12	1	-	2	5
Allentown, Pa Buffalo, N.Y	28	19	.8	1	-	-	2	Louisville, Ky	84	57	16	5	2	4	5
Camden, N.J	137 40	89 26	34	6	5	3	11	Memphis, Tenn	118	70	30	13	4	1	5
Elizabeth N.J.	19	15	12 3	2	-	-	1	Mobile, Ala	33	18	10	3	-	2	1
Erie, Pa †	45	39	5	1	-	-	5	Montgomery, Ala	48	29	10	5	5	4 3	3
Jersey City, N.J.	38	27	3	ż	-	1	5	Nashville, Tenn	103	63	22	10	5	3	3
N.Y. City, N.Y. 1	1,515	960			40	25	57	W S CENTRAL	1,233	712	275	142	55	47	48
Newark, N.J.	77	40	14	18	3	2	3	Austin, Tex	57	39	10	6	1	1	3
Paterson, N J	32	20	6	3	2	1	ž	Baton Rouge, La	26	13	8	1	1	3	-
Philadelphia, Pa Pittsburgh, Pa.t	311	192	70	34	7	8	16	Corpus Christi, Tex	47	33	8	2	1	3	1
Reading, Pa	71 36	45 33	18	4	2	2	1	Dallas, Tex	176	91	39	29	11	6	6
Rochester, N Y	125	91	3 24	-	-	:	3	El Paso, Tex	61	35	14	1	5	4	2 4
Schenectady, N Y	27	22	5	6	-	4	9	Fort Worth, Tex	85	51	17	11	3	3 11	6
Scranton, Part	46	33	11	1		i	-	Houston, Tex Little Rock, Ark	327	171	78 13	50 7	17	4	8
Syracuse, N.Y	119	86	23	6	3	i	3	New Orleans, La	65 89	40 41	26	14	6	2	1
Trenton, N.J. Utica, N.Y.	28	16	9	-	ĭ	ż	-	San Antonio, Tex	144	88	36	10	6	4	7
Yonkers, N.Y	16 34	13 24	3 6	i	2	1	2	Shreveport, La Tulsa, Okla	62	46	11	3	3	2 4	2 8
EN CENTRAL 2	2,348	1,532							94	64	15	8			
Akron, Ohio	65	47	10			77	96	MOUNTAIN	618	411	126	45	19	15	49
Canton, Ohio	40	29	8	1	4	3	4	Albuquerque, N Me	× 76	49	15	9	2	1	3 6
Chicago, III §	564	362	125			22	16	Colo Springs Colo Denver Colo	44	27	9 12	5 4	2	3	2
Cincinnati, Ohio	114	68	30	8	4	4	8	Las Vegas, Nev	82 106	64 56	30	11	5	2	8
Cleveland, Ohio	150	79	42	19	5	5	3	Ogden, Utah	16	11	2	- ' '	-	3	
Columbus, Ohio	177	101	46	15	7	8	4	Phoenix, Ariz	130	86	27	10	4	3	23
Dayton, Ohio Detroit, Mich.	112 293	71	32	4	2	3	-	Pueblo, Colo	20	14	5	1	-	-	-
Evansville, Ind	293 54	177 35	64			10	6	Salt Lake City, Utah		32	8	-	1	2	2
Fort Wayne, Ind	56	39	13 10	3 1	1	2	4	Tucson, Ariz	101	72	18	5	5	1	5
Gary, Ind.	13	9	2	2	2	4	3	DACIEIO	1.000	1,077	200	140	60	43	93
Grand Rapids, Mich	52	41	6	2	2	1	4	PACIFIC Berkeley, Calif	1,622 9	1,077	296	140 2	63 2	43	1
Indianapolis, Ind	178	113	39	14	3	9	8	Fresno, Calif	74	43	18	5	3	5	6
Madison, Wis	35	21	7	5	ĭ	ĭ	3	Glendale, Calif	22	14	6	2	-	-	1
Milwaukee, Wis. Peoria, III.	118	93	19	4	1	1	7	Honolulu, Hawaii	76	49	14	6	5	2	9
Rockford III	62	47	11	1	1	2	11	Long Beach, Calif	74	50	10	7	4	3	9
South Bend, Ind	48	35	.5	5	3	-	4	Los Angeles, Calif	411	270	65	44	23	6	10
Toledo, Ohio	62 96	45 73	11 17	4	1	1	4	Oakland, Calif §	70	48	12	5	3	2	3
Youngstown, Ohio	59	47	8	3 4	2	1	5 2	Pasadena, Calif Portland, Oreg	37 102	25 72	7 19	3 9	1 2	1	2 5
W N. CENTRAL	821	561	166		20	•		Sacramento, Calif	135	85	32	4	8	6	14
Des Moines, Iowa	64	43	18	48 3	28	18	42	San Diego, Calif	93	62	17	9	4	1	8
Duluth, Minn	28	20	7		1	-	2	San Francisco, Calif		77	30	19	2	6	3
Kansas City, Kans	29	16	é	3	i	1	'.	San Jose, Calif Seattle, Wash	157 117	110 80	29	10	2	6	11
Kansas City, Mo	122	80	28	9	3	ż	7	Spokane, Wash	65	51	20 10	11 2	4	2	5 4
Lincoln, Nebr	29	21	4	4	-	-	6	Tacoma, Wash	46	36	7	2	-	2 1	2
Minneapolis, Minn	218	152	34		16	5	7				,	2	-	•	2
Omaha, Nebr St. Louis, Mo	72 126	55	12	3	1	1	7	TOTAL	11,878	7,716	2,452	997	354	322	573
J. LUUIS, MO	136	91	30	5	4	6	7								
St. Paul, Minn	65	49	12	3	1	•									

Mortality data in this table are voluntarily reported from 121 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

Pneumonia and influenza
 Because of changes in reporting methods in these 3 Pennsylvania cities, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.
 †Total includes unknown ages.
 Data not available. Figures are estimates based on average of past 4 weeks.

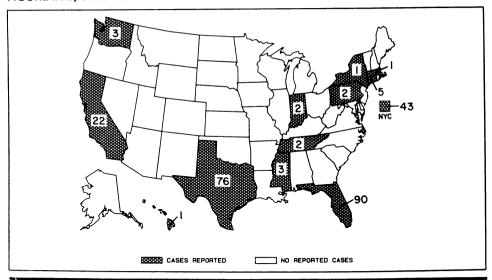
## Erratum: Vol. 33, No. 54, MMWR Annual Summary, 1984

p. 93 The following table replaces the table on homicide that appears in the MMWR Annual Summary, 1984. In the original publication, rates for another category were inadvertently attributed to homicide. The following table gives the correct homicide data for 1982:

HOMICIDE — Number of homicides and homicide rates (per 100,000 population), by race, sex, and age group, United States, 1982

			Whi	te			Black and other						
	Tot	al	Ma	le	Fem	ale	Tot	al	Male		Female		
Age group	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	
< 10	452	1.7	245	1.8	207	1.6	334	5.4	189	6.0	145	4.7	
10-14	150	1.0	68	0.9	82	1.1	87	2.7	58	3.6	29	1.8	
15-19	1,044	6.4	766	9.2	278	3.5	893	26.0	722	41.7	177	10.0	
20-24	2.013	11.0	1,537	16.7	476	5.3	1.745	50.1	1.442	84.6	303	17.1	
25-29	1,932	11.0	1,508	17.1	424	4.9	1,852	58.6	1,538	102.7	314	18.9	
30-34	1,506	9.5	1,216	15.3	290	3.6	1,523	55.3	1,276	99.5	247	16.8	
35-39	1,208	8.9	937	13.9	271	4.0	941	45.4	781	81.9	160	14.3	
40-44	962	8.9	742	13.9	220	4.0	618	36.5	500	64.3	118	12.9	
45-49	678	7.1	540	11.5	138	2.8	524	35.8	433	65.1	91	11.4	
50-54	653	6.5	499	10.3	154	3.0	430	31.9	364	60.6	66	8.8	
55-59	498	4.9	377	7.7	121	2.2	301	23.6	253	44.6	48	6.8	
60-64	392	4.1	282	6.4	110	2.2	237	21.9	191	39.9	46	7.7	
65-69	286	3.5	180	5.0	106	2.4	173	19.5	138	36.4	35	6.9	
70-74	223	3.4	135	5.0	88	2.3	112	15.8	80	26.8	32	7.8	
75-79	169	3.7	94	5.3	75	2.6	72	15.0	47	24.5	25	8.7	
80-84	112	3.9	48	4.9	64	3.4	33	12.3	20	19.8	13	7.7	
85+	115	5.1	54	8.2	61	3.9	26	13.1	12	18.2	14	10.7	
Age not													
stated	46	_	32	_	14	_	18	_	11	_	7	_	
Total	12,439	6.3	9,260	9.6	3,179	3.1	9,919	29.4	8,055	50.2	1,864	10.6	

FIGURE I. Reported measles cases — United States, weeks 42-45, 1986



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The data in this report are provisional, based on weekly reports to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the succeeding Friday.

The editor welcomes accounts of interesting cases, outbreaks, environmental hazards, or other public health problems of current interest to health officials. Such reports and any other matters pertaining to editorial or other textual considerations should be addressed to: ATTN: Editor, Morbidity and Mortality Weekly Report, Centers for Disease Control, Atlanta, Georgia 30333.

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