CDC
CENTERS FOR DISEASE CONTROL

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MORBIDITY AND MORTALITY WEEKLY REPORT

Current Trends

HIV Prevention in the U.S. Correctional System, 1991

During 1990, an estimated 4,350,000 adults—2.4% of the total U.S. adult population—were under correctional supervision* in the United States, a 75% increase since 1983 (*1*). From 1983 through 1989, the number of juveniles (aged 10–17 years) in custody increased 25%, from 80,091 to 99,846 (U.S. Department of Justice, personal communication, 1992). By November 1990, 4519 cases of acquired immunodeficiency syndrome (AIDS) had been reported among inmates in federal and 45 state prisons, and 2466 cases had been reported by 25 city/county jail systems (U.S. Department of Justice, unpublished data, 1991); these totals include both cases of AIDS reported among persons before their incarceration as well as those reported by prison systems. This report characterizes efforts to prevent human immunodeficiency virus (HIV) transmission within correctional systems.†

HIV counseling and testing programs provide persons in correctional facilities with information about their HIV serostatus and identify persons who require medical treatment for asymptomatic HIV infection and other prevention services. State and local health departments provide HIV counseling and testing services in approximately 430 correctional facilities in 42 states, the District of Columbia, and Puerto Rico (Figure 1). These sites have reported the results of at least 65,724 HIV-antibody tests from January 1 through December 31, 1991.§ Most (67%) persons who have been counseled and tested in correctional facilities have identified themselves as injecting-drug users (IDUs).

Health education/risk-reduction programs in correctional facilities provide prevention messages, information materials, and risk-reduction counseling to persons

*Includes all persons aged ≥18 years in jails and in federal and state institutions; under state parole supervision, whether released from prison by parole board decision or mandatory release, who had been sentenced to more than 1 year in prison; or who, as part of a state or local court order, were under the supervision of a probation agency.

†Single copies of this report will be available free until June 5, 1993, from the CDC National AIDS Clearinghouse, P.O. Box 6003, Rockville, MD 20849-6003; telephone (800) 458-5231.

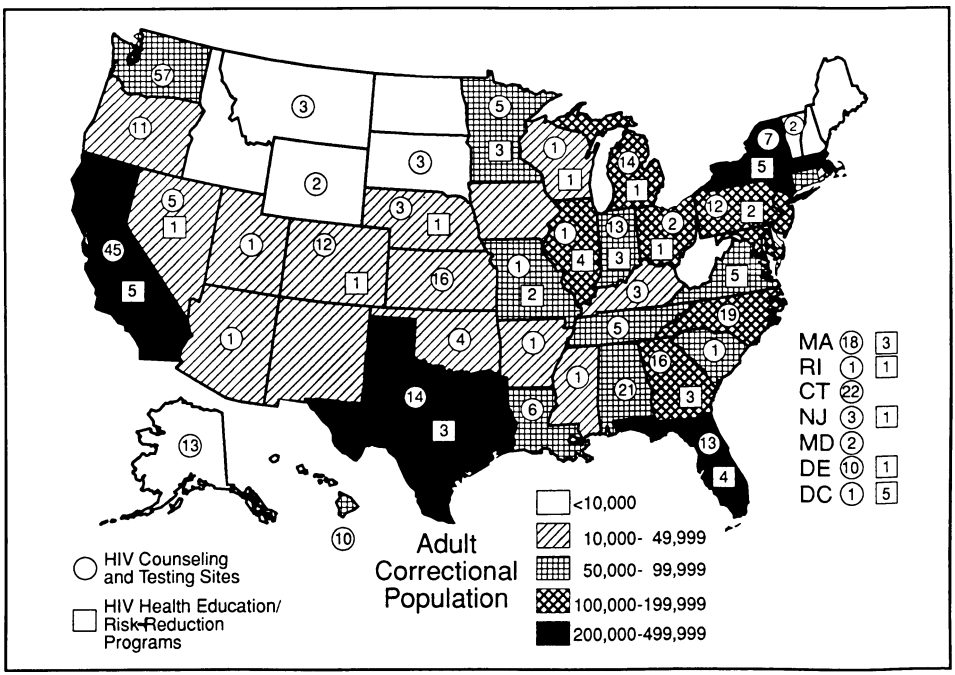
§Because of reporting lags, the final data analysis will not be completed until late June 1992.

HIV Prevention — Continued

whose behaviors (e.g., men who have sex with men, substance abusers [including IDUs], persons who exchange sex for money or drugs, or persons who are or were sex or needle-sharing partners of these persons) place them at risk for HIV infection. Health education/risk-reduction activities are provided in correctional facilities in 20 states and the District of Columbia (Figure 1) either by health departments or community-based organizations (CBOs); these activities are illustrated by programs in Massachusetts; the District of Columbia; Palm Beach County, Florida; and New York City.

- The Awaiting Trial Unit (ATU) sexually transmitted disease (STD) clinic at the Framingham Women's Correctional Facility in Massachusetts provides women with HIV counseling and testing; routine screening for syphilis, gonorrhea, chlamydia, and tuberculosis (TB); and referrals to a hospital for diagnostic and treatment services. An estimated 1400 women enter the ATU each year, with approximately 70 women in residence at any one time.

FIGURE 1. Adult correctional populations* and number of publicly funded HIV-prevention program activities in correctional facilities, by state — United States,† 1991



*Includes all persons aged ≥18 years in jails and in state institutions; under state parole supervision, whether released from prison by parole board decision or mandatory release, who had been sentenced to more than 1 year in prison; or who, as part of a state or local court order, were under the supervision of a probation agency. Persons in federal prisons or on parole or probation under federal correctional supervision are not included.

†Puerto Rico has 29 HIV counseling and testing sites; however, the correctional population is unavailable.

HIV Prevention — Continued

- The Office of AIDS Activities, District of Columbia Commission of Public Health, has designed a curriculum and implemented an HIV-prevention education program for incarcerated youth aged 13–19 years. A community follow-up program reinforces risk-reduction behaviors by providing adult mentoring, peer support, and access to health-care services.
- The Comprehensive AIDS Program (CAP) of Palm Beach County, Florida, provides HIV- and STD-prevention education to inmates in the correctional system. "Safety kits" distributed to inmates on release include condoms, AIDS brochures, information about needle hygiene for IDUs, and referrals to CAP for additional information.
- Life Force (a CBO), New York City, collaborates with the Bayview Correctional Facility in Manhattan to provide weekly HIV/AIDS education/support groups for female inmates. The groups focus on communication with family members and close contacts about risk behaviors, locating medical care, and other HIV-related information.

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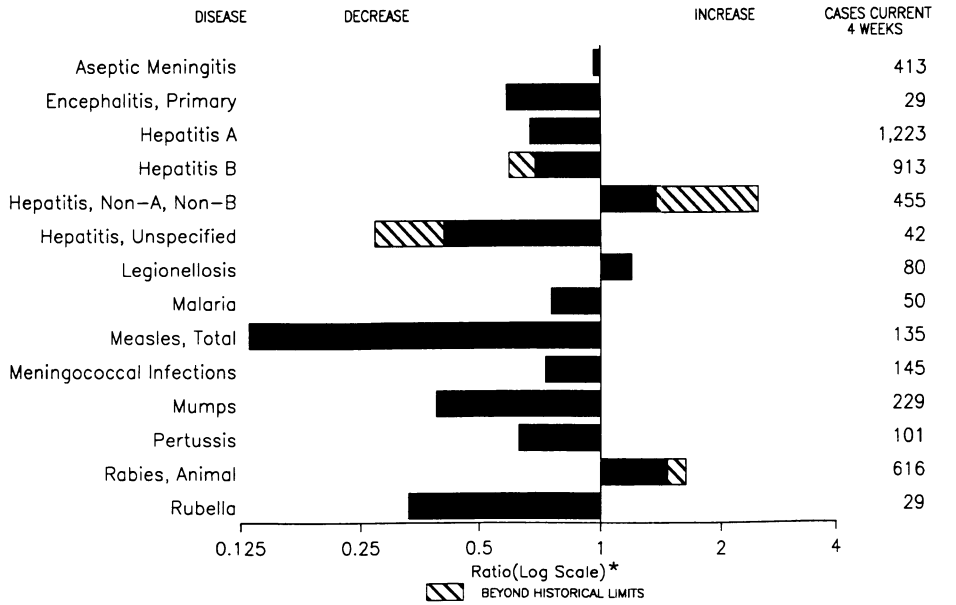
Editorial Note: A recent report indicated that among entrants to 10 selected U.S. jails and federal and state prisons, the HIV seroprevalence rate was 2.1%–7.6% for men and 2.7%–14.7% for women (*2*). The high seroprevalences, compared to seroprevalences among first-time blood donors (males, 0.04%; females, 0.02%) (*3*), underscore the need for providing primary and secondary HIV-prevention services to populations within the U.S. correctional system. To enhance their effectiveness, HIV-prevention programs for correctional institutions must provide adequate staff training and address issues of confidentiality.

In addition to high HIV seropositivity among prison entrants, HIV transmission occurs within prison settings (*4*), where a substantial proportion of inmates have histories of prior drug use (*5,6*). A report by the National Institute on Drug Abuse indicated that, based on a study during 1987–1989, approximately 83% of IDUs reported having been in jail or prison at some time (*7*). Because of the increased opportunities for transmission, the risk for HIV infection may be higher in prisons in which inmates serve longer terms or with large inmate populations (*8*).

The recent emergence of multidrug-resistant TB as an important opportunistic infection of HIV-infected persons (*9*) underscores the need for secondary HIV-prevention services in correctional facilities. Persons in correctional institutions are at increased risk for TB because of the high prevalences of HIV infection and latent TB, overcrowding, poor ventilation, and the frequent transfer of inmates within and between institutions (*10*).

(Continued on page 397)

FIGURE I. Notifiable disease reports, comparison of 4-week totals ending May 30, 1992, 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 — cases of specified notifiable diseases, United States, cumulative, week ending May 30, 1992 (22nd Week)

	Cum. 1992		Cum. 1992
AIDS*	20,284	Measles: imported	63
Anthrax	-	indigenous	927
Botulism: Foodborne	8	Plague	2
Infant	23	Poliomyelitis, Paralytic†	-
Other	-	Psittacosis	36
Brucellosis	19	Rabies, human	-
Cholera	33	Syphilis, primary & secondary	14,600
Congenital rubella syndrome	5	Syphilis, congenital, age < 1 year	-
Diphtheria	2	Tetanus	6
Encephalitis, post-infectious	49	Toxic shock syndrome	102
Gonorrhea	199,607	Trichinosis	14
Haemophilus influenzae (invasive disease)	694	Tuberculosis	8,408
Hansen Disease	64	Tularemia	29
Leptospirosis	12	Typhoid fever	132
Lyme Disease	1,595	Typhus fever, tickborne (RMSF)	67

*Updated monthly; last update May 30, 1992.
†Two cases of suspected poliomyelitis have been reported in 1992; nine suspected cases were reported in 1991; 4 of the 8 suspected cases in 1990 were confirmed, and all were vaccine associated.

TABLE II. Cases of selected notifiable diseases, United States, weeks ending May 30, 1992, and June 1, 1991 (22nd Week)

Reporting Area	AIDS*	Aseptic Meningitis	Encephalitis		Gonorrhea		Hepatitis (Viral), by type				Legionellosis	Lyme Disease
			Primary	Post-infectious			A	B	NA,NB	Unspecified		
	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1991	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992
UNITED STATES	20,284	2,102	215	49	199,607	238,105	7,930	6,549	3,154	280	540	1,595
NEW ENGLAND	681	116	15	-	4,280	6,094	256	253	24	14	37	137
Maine	27	10	-	-	35	52	28	10	2	-	1	-
N.H.	22	6	2	-	-	144	16	19	9	1	3	9
Vt.	9	5	2	-	11	17	2	6	2	-	2	1
Mass.	382	43	8	-	1,546	2,590	129	190	8	13	21	35
R.I.	41	52	3	-	343	504	54	15	3	-	10	37
Conn.	200	-	-	-	2,345	2,787	27	13	-	-	-	55
MID. ATLANTIC	4,844	241	12	5	20,717	29,421	636	872	168	12	164	1,156
Upstate N.Y.	642	116	-	-	4,121	4,996	174	205	105	6	67	790
N.Y. City	2,651	36	2	1	6,963	11,922	201	127	3	-	3	-
N.J.	1,041	-	-	-	2,733	4,256	100	238	43	-	22	109
Pa.	510	89	10	4	6,900	8,247	161	302	17	6	72	257
E.N. CENTRAL	1,911	296	63	8	38,639	44,195	977	960	546	15	113	39
Ohio	388	78	22	1	11,148	13,743	196	108	47	-	59	20
Ind.	194	36	7	-	3,616	4,317	327	346	273	5	9	13
Ill.	808	60	15	4	12,969	13,146	191	79	21	3	5	2
Mich.	401	117	18	3	9,500	9,967	63	270	167	7	30	4
Wis.	120	5	1	-	1,406	3,022	200	157	38	-	10	-
W.N. CENTRAL	585	141	13	4	9,802	11,671	984	362	190	15	35	48
Minn.	101	11	1	-	1,213	1,144	269	25	7	2	2	3
Iowa	46	20	-	2	733	799	20	14	2	2	7	6
Mo.	306	69	8	-	5,334	7,094	345	280	166	10	13	34
N. Dak.	1	1	1	-	25	27	43	1	3	1	1	1
S. Dak.	3	3	-	1	77	150	165	2	-	-	-	-
Nebr.	19	10	1	1	8	838	74	13	4	-	11	1
Kans.	109	27	2	-	2,412	1,619	68	27	8	-	1	3
S. ATLANTIC	4,849	438	38	23	63,445	71,125	494	1,062	358	42	81	98
Del.	53	17	4	-	695	993	17	101	82	1	15	46
Md.	561	56	9	-	6,138	7,111	100	167	19	5	14	16
D.C.	387	7	-	-	3,028	4,224	7	41	116	-	7	-
Va.	275	77	10	6	7,329	7,200	48	81	15	16	10	19
W. Va.	25	2	2	-	384	500	4	25	-	7	-	1
N.C.	306	45	10	-	10,943	13,359	29	135	35	-	10	6
S.C.	165	6	-	-	4,837	5,160	10	23	2	-	15	-
Ga.	641	46	1	-	20,277	18,184	51	134	39	-	-	1
Fla.	2,436	182	2	17	9,814	14,394	228	355	50	13	10	9
E.S. CENTRAL	622	119	7	-	19,682	21,881	125	576	951	1	25	17
Ky.	82	41	5	-	2,166	2,346	28	34	-	-	14	6
Tenn.	190	36	1	-	5,849	8,538	60	489	946	-	9	10
Ala.	229	28	-	-	6,737	5,399	21	51	5	1	2	1
Miss.	121	14	1	-	4,930	5,598	16	2	-	-	-	-
W.S. CENTRAL	1,812	218	19	4	20,130	27,213	772	786	53	65	9	26
Ark.	95	4	7	-	3,614	2,996	38	33	5	3	-	4
La.	320	15	2	1	2,903	6,279	51	67	20	2	-	-
Okla.	100	-	1	2	1,955	2,759	82	85	17	2	4	11
Tex.	1,297	199	9	1	11,658	15,179	601	601	11	58	5	11
MOUNTAIN	595	59	10	1	4,497	4,894	1,113	298	102	26	37	3
Mont.	9	-	1	-	43	44	32	18	19	-	5	-
Idaho	13	9	-	-	52	67	22	36	1	-	3	-
Wyo.	2	-	-	-	20	45	1	2	5	-	1	-
Colo.	217	15	5	1	1,550	1,360	323	46	34	12	5	-
N. Mex.	52	6	3	-	367	483	117	89	11	7	2	2
Ariz.	159	16	1	-	1,548	1,807	481	52	13	3	11	-
Utah	46	-	-	-	100	151	107	6	10	4	2	1
Nev.	97	13	-	-	817	937	30	49	9	-	8	-
PACIFIC	4,385	474	38	4	18,415	21,611	2,573	1,380	762	90	39	71
Wash.	217	-	-	-	1,673	1,889	243	131	56	6	2	2
Oreg.	130	-	-	-	645	854	158	130	30	6	-	-
Calif.	3,971	425	35	3	15,559	18,279	2,062	1,110	538	73	36	69
Alaska	8	3	3	-	311	300	13	4	2	1	-	-
Hawaii	59	46	-	1	227	289	97	5	136	4	1	-
Guam	-	-	-	-	41	-	5	3	-	2	-	1
P.R.	735	67	1	-	72	280	10	157	22	4	1	-
V.I.	2	-	-	-	47	236	6	4	-	-	-	-
Amer. Samoa	-	-	-	-	13	22	-	1	-	-	-	-
C.N.M.I.	-	-	-	-	30	27	-	-	-	-	-	-

N: Not notifiable U: Unavailable C.N.M.I.: Commonwealth of the Northern Mariana Islands
*Updated monthly; last update May 30, 1992.

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending May 30, 1992, and June 1, 1991 (22nd Week)

Reporting Area	Malaria	Measles (Rubeola)					Menin-gococcal Infections	Mumps		Pertussis			Rubella		
		Indigenous		Imported*		Total									
	Cum. 1992	1992	Cum. 1992	1992	Cum. 1992	Cum. 1991	Cum. 1992	1992	Cum. 1992	1992	Cum. 1992	Cum. 1991	1992	Cum. 1992	Cum. 1991
UNITED STATES	314	14	927	-	63	6,271	1,082	72	1,296	8	556	918	8	85	935
NEW ENGLAND	15	-	6	-	7	46	64	1	8	5	58	157	-	5	2
Maine	-	-	-	-	-	-	5	-	-	-	2	42	-	-	-
N.H.	2	-	1	-	-	-	5	-	1	-	21	12	-	-	1
Vt.	-	-	-	-	-	5	2	-	-	-	-	3	-	-	-
Mass.	8	-	5	-	3	17	27	1	2	1	26	89	-	-	1
R.I.	2	-	-	-	-	2	-	-	-	-	-	-	-	4	-
Conn.	3	-	-	-	4	22	25	-	5	4	9	11	-	1	-
MID. ATLANTIC	92	2	143	-	3	3,784	118	5	96	-	66	96	-	14	525
Upstate N.Y.	14	1	65	-	2	259	60	2	45	-	21	55	-	10	505
N.Y. City	47	1	28	-	-	1,250	11	-	12	-	7	8	-	-	2
N.J.	17	-	44	-	1	926	17	-	11	-	14	7	-	3	-
Pa.	14	-	6	-	-	1,349	30	3	28	-	24	26	-	1	18
E.N. CENTRAL	17	-	23	-	8	73	158	4	158	1	38	170	-	5	163
Ohio	2	-	2	-	3	1	37	-	60	-	15	58	-	-	147
Ind.	5	-	19	-	-	1	26	-	7	1	12	36	-	-	1
Ill.	3	-	1	-	4	24	45	-	44	-	4	35	-	5	4
Mich.	6	-	1	-	-	38	43	4	45	-	1	20	-	-	11
Wis.	1	-	-	-	1	9	7	-	2	-	6	21	-	-	-
W.N. CENTRAL	19	-	5	-	3	32	59	-	48	-	39	62	-	4	14
Minn.	5	-	3	-	2	8	7	-	7	-	15	22	-	-	5
Iowa	2	-	-	-	1	15	6	-	8	-	1	7	-	-	5
Mo.	9	-	1	-	-	-	29	-	26	-	14	21	-	-	4
N. Dak.	-	-	-	-	-	-	-	-	2	-	4	1	-	-	-
S. Dak.	1	-	-	-	-	-	1	-	-	-	2	1	-	-	-
Nebr.	-	-	-	-	-	-	7	-	3	-	2	4	-	-	-
Kans.	2	-	1	-	-	9	9	-	2	-	1	6	-	4	-
S. ATLANTIC	61	-	96	-	8	378	179	44	514	-	63	65	-	4	5
Del.	4	-	3	-	-	21	2	-	4	-	-	-	-	-	-
Md.	15	-	3	-	7	141	19	-	42	-	14	10	-	-	1
D.C.	5	-	-	-	-	-	-	-	2	-	-	-	-	1	1
Va.	13	-	5	-	1	22	34	-	20	-	4	10	-	-	-
W. Va.	-	-	-	-	-	-	14	-	20	-	3	6	-	-	-
N.C.	6	-	21	-	-	31	28	41	124	-	13	12	-	-	-
S.C.	-	-	29	-	-	12	14	-	46	-	9	-	-	-	-
Ga.	2	-	-	-	-	14	23	-	29	-	6	16	-	-	-
Fla.	16	-	35	-	-	137	45	3	227	-	14	11	-	3	3
E.S. CENTRAL	9	8	398	-	16	1	73	-	36	-	11	23	-	1	83
Ky.	1	8	396	-	-	-	26	-	-	-	-	-	-	-	-
Tenn.	4	-	-	-	-	1	18	-	12	-	5	11	-	1	83
Ala.	4	-	-	-	-	-	23	-	6	-	6	12	-	-	-
Miss.	-	-	2	-	16	-	6	-	18	-	-	-	-	-	-
W.S. CENTRAL	4	-	183	-	-	38	83	12	216	-	21	21	-	-	1
Ark.	-	-	-	-	-	5	8	1	6	-	9	2	-	-	1
La.	-	-	-	-	-	-	19	-	15	-	-	8	-	-	-
Okla.	2	-	9	-	-	-	9	-	13	-	12	11	-	-	-
Tex.	2	-	174	-	-	33	47	11	182	-	-	-	-	-	-
MOUNTAIN	9	-	1	-	5	542	58	2	71	-	92	110	1	3	4
Mont.	-	-	-	-	-	-	11	-	1	-	1	-	-	-	-
Idaho	-	-	-	-	-	131	8	-	3	-	13	18	-	1	-
Wyo.	-	-	1	-	-	-	2	-	-	-	-	3	-	-	-
Colo.	3	-	-	-	5	5	9	-	4	-	19	59	-	-	1
N. Mex.	1	-	-	-	-	101	3	N	N	-	19	10	-	-	1
Ariz.	4	-	-	-	-	260	13	-	43	-	34	8	-	1	-
Utah	-	-	-	-	-	30	4	2	15	-	5	10	1	1	-
Nev.	1	-	-	-	-	15	8	-	5	-	1	2	-	-	2
PACIFIC	88	4	72	-	13	1,377	290	4	149	2	168	214	7	49	138
Wash.	6	-	-	-	10	4	34	-	8	-	46	52	-	6	-
Oreg.	8	2	5	-	1	41	44	N	N	-	12	35	-	2	2
Calif.	68	-	39	-	-	1,323	202	3	130	1	104	89	1	34	131
Alaska	1	-	8	-	1	1	6	-	1	-	-	10	-	-	-
Hawaii	5	2	20	-	1	8	4	1	10	1	6	28	6	7	5
Guam	1	U	10	U	-	-	-	U	5	U	-	-	U	1	-
P.R.	-	-	5	-	-	63	3	-	1	-	8	14	-	-	1
V.I.	-	-	-	-	-	2	-	-	13	-	-	-	-	-	-
Amer. Samoa	-	U	-	U	-	24	-	U	-	U	6	-	U	-	-
C.N.M.I.	-	U	-	U	-	-	-	U	-	U	1	-	U	-	-

*For measles only, imported cases includes both out-of-state and international importations.
N: Not notifiable U: Unavailable †International §Out-of-state

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending May 30, 1992, and June 1, 1991 (22nd Week)

Reporting Area	Syphilis (Primary & Secondary)		Toxic-shock Syndrome	Tuberculosis		Tula-remia	Typhoid Fever	Typhus Fever (Tick-borne) (RMSF)	Rabies, Animal
	Cum. 1992	Cum. 1991	Cum. 1992	Cum. 1992	Cum. 1991	Cum. 1992	Cum. 1992	Cum. 1992	Cum. 1992
UNITED STATES	14,600	18,287	102	8,408	8,788	29	132	67	3,361
NEW ENGLAND	254	477	9	240	232	-	12	2	308
Maine	-	-	-	45	16	-	-	-	-
N.H.	-	12	6	-	-	-	1	-	1
Vt.	1	1	-	2	3	-	-	-	-
Mass.	122	233	2	64	121	-	8	1	2
R.I.	16	22	1	81	21	-	-	1	-
Conn.	115	209	-	48	71	-	3	-	305
MID. ATLANTIC	2,165	3,403	13	1,909	2,107	-	39	3	1,028
Upstate N.Y.	160	316	5	162	225	-	5	1	594
N.Y. City	1,128	1,598	-	1,150	1,264	-	16	1	-
N.J.	281	607	-	330	347	-	12	-	316
Pa.	596	882	8	267	271	-	6	1	118
E.N. CENTRAL	2,122	1,961	29	917	919	-	14	6	49
Ohio	299	271	8	141	135	-	3	4	4
Ind.	133	61	7	72	69	-	-	1	3
Ill.	994	873	4	473	487	-	10	-	9
Mich.	448	541	10	196	188	-	1	-	5
Wis.	248	215	-	35	40	-	-	1	28
W.N. CENTRAL	553	317	15	171	240	12	2	4	584
Minn.	40	36	3	37	41	-	-	-	93
Iowa	16	25	4	15	30	-	-	-	88
Mo.	430	193	2	72	106	10	2	4	8
N. Dak.	1	1	1	2	5	-	-	-	57
S. Dak.	-	1	-	15	16	1	-	-	50
Nebr.	1	7	3	9	8	1	-	-	5
Kans.	65	54	2	21	34	-	-	-	283
S. ATLANTIC	4,000	5,423	12	1,599	1,550	2	11	18	675
Del.	53	67	3	15	14	-	-	3	108
Md.	299	447	1	100	151	1	2	-	218
D.C.	181	334	-	51	85	-	1	-	10
Va.	305	450	1	116	135	1	-	-	118
W. Va.	9	14	1	25	37	-	1	-	18
N.C.	1,016	815	3	221	175	-	-	11	2
S.C.	547	648	1	170	168	-	1	2	50
Ga.	820	1,299	1	339	290	-	-	-	146
Fla.	770	1,349	1	562	495	-	6	2	5
E.S. CENTRAL	1,935	1,948	-	517	591	5	2	11	58
Ky.	64	35	-	164	141	1	-	1	35
Tenn.	506	672	-	105	161	4	-	10	-
Ala.	786	-	710	174	159	-	-	-	23
Miss.	579	531	-	74	130	-	2	-	-
W.S. CENTRAL	2,685	3,256	1	779	957	5	3	21	354
Ark.	408	229	-	41	86	2	-	5	19
La.	1,067	1,046	-	56	63	-	-	-	-
Okla.	113	74	-	41	61	3	-	16	165
Tex.	1,097	1,907	1	641	747	-	3	-	170
MOUNTAIN	164	260	7	228	221	5	3	1	68
Mont.	2	2	-	-	-	2	-	-	9
Idaho	1	3	1	11	3	-	1	-	-
Wyo.	1	1	-	-	2	1	-	-	23
Colo.	22	39	1	16	6	-	1	-	1
N. Mex.	17	15	1	26	22	2	1	-	3
Ariz.	75	172	2	116	131	-	-	-	30
Utah	5	4	2	33	25	-	-	1	1
Nev.	41	24	-	26	32	-	-	-	1
PACIFIC	722	1,242	16	2,048	1,971	-	46	1	237
Wash.	42	76	-	131	129	-	3	-	-
Oreg.	24	32	-	45	41	-	-	-	-
Calif.	650	1,127	16	1,746	1,680	-	42	1	225
Alaska	2	3	-	25	33	-	-	-	12
Hawaii	4	4	-	101	88	-	1	-	-
Guam	2	-	-	34	-	-	1	-	-
P.R.	130	210	-	55	71	-	1	-	23
V.I.	23	59	-	3	1	-	-	-	-
Amer. Samoa	-	-	-	-	2	-	-	-	-
C.N.M.I.	4	-	-	12	4	-	1	-	-

U: Unavailable

TABLE III. Deaths in 121 U.S. cities,* week ending May 30, 1992 (22nd Week)

Reporting Area	All Causes, By Age (Years)						P&I†
	All Ages	≥65	45-64	25-44	1-24	<1	Total
NEW ENGLAND	598	413	110	44	17	14	45
Boston, Mass.	164	109	26	20	4	5	15
Bridgeport, Conn.	36	20	9	4	2	1	4
Cambridge, Mass.	15	10	5	-	-	-	-
Fall River, Mass.	29	25	3	1	-	-	1
Hartford, Conn.	51	32	13	4	1	1	2
Lowell, Mass.	38	27	8	1	1	1	4
Lynn, Mass.	9	5	3	1	-	-	-
New Bedford, Mass.	26	22	3	-	-	1	1
New Haven, Conn.	34	24	5	3	-	2	2
Providence, R.I.	52	41	5	-	5	1	7
Somerville, Mass.	7	3	3	1	-	-	-
Springfield, Mass.	46	34	6	4	1	1	3
Waterbury, Conn.	24	13	6	3	2	-	1
Worcester, Mass.	67	48	15	2	1	1	5
MID. ATLANTIC	2,545	1,687	446	280	68	63	121
Albany, N.Y.	37	29	3	1	1	3	1
Allentown, Pa.	29	21	7	1	-	-	5
Buffalo, N.Y.	100	78	10	8	1	3	3
Camden, N.J.	38	22	6	3	3	4	1
Elizabeth, N.J.	36	28	7	1	-	-	-
Erie, Pa.§	34	28	5	-	-	1	2
Jersey City, N.J.	85	45	18	13	1	8	1
New York City, N.Y.	1,327	824	252	193	41	17	56
Newark, N.J.	106	55	22	16	5	8	7
Paterson, N.J.	15	11	-	-	3	1	1
Philadelphia, Pa.	401	293	69	23	7	9	27
Pittsburgh, Pa.§	56	39	8	4	2	3	1
Reading, Pa.	13	11	-	2	-	-	1
Rochester, N.Y.	101	83	8	8	2	-	6
Schenectady, N.Y.	22	17	5	-	-	-	2
Scranton, Pa.§	25	23	2	-	-	-	1
Syracuse, N.Y.	71	47	15	4	-	4	3
Trenton, N.J.	31	19	6	2	2	2	1
Utica, N.Y.	18	14	3	1	-	-	2
Yonkers, N.Y.	U	U	U	U	U	U	U
E.N. CENTRAL	1,957	1,223	358	199	120	57	105
Akron, Ohio	62	47	9	3	2	1	-
Canton, Ohio	34	20	11	1	1	1	2
Chicago, Ill.	493	219	90	95	83	6	15
Cincinnati, Ohio	107	66	23	6	3	9	10
Cleveland, Ohio	136	86	30	9	4	7	1
Columbus, Ohio	124	89	20	7	5	3	8
Dayton, Ohio	102	71	18	10	1	2	4
Detroit, Mich.	175	101	40	18	9	7	5
Evansville, Ind.	38	30	5	3	-	-	4
Fort Wayne, Ind.	50	38	7	3	1	1	2
Gary, Ind.	10	4	3	2	1	-	-
Grand Rapids, Mich.	51	40	3	4	-	4	4
Indianapolis, Ind.	149	99	27	15	5	3	14
Madison, Wis.	41	27	9	4	-	1	7
Milwaukee, Wis.	117	84	20	8	3	2	7
Peoria, Ill.	49	36	8	2	1	2	2
Rockford, Ill.	45	36	2	3	-	4	9
South Bend, Ind.	39	31	7	-	-	1	2
Toledo, Ohio	79	63	11	1	1	3	5
Youngstown, Ohio	56	36	15	5	-	-	4
W.N. CENTRAL	633	468	102	33	16	14	35
Des Moines, Iowa	46	35	8	1	1	1	5
Duluth, Minn.	22	16	3	1	1	1	-
Kansas City, Kans.	9	7	1	-	1	-	1
Kansas City, Mo.	81	49	22	8	1	1	3
Lincoln, Nebr.	35	26	7	2	-	-	-
Minneapolis, Minn.	153	112	21	8	6	6	11
Omaha, Nebr.	90	72	9	5	3	1	6
St. Louis, Mo.	108	82	14	6	3	3	5
St. Paul, Minn.	45	37	7	1	-	-	3
Wichita, Kans.	44	32	10	1	-	1	1

Reporting Area	All Causes, By Age (Years)						P&I†
	All Ages	≥65	45-64	25-44	1-24	<1	Total
S. ATLANTIC	1,078	657	223	134	30	33	58
Atlanta, Ga.	148	86	34	18	5	5	3
Baltimore, Md.	202	110	56	24	5	7	20
Charlotte, N.C.	76	50	13	10	-	3	4
Jacksonville, Fla.	101	54	18	20	7	2	4
Miami, Fla.	84	51	13	18	1	1	1
Norfolk, Va.	48	30	7	7	2	2	3
Richmond, Va.	73	48	17	5	3	-	2
Savannah, Ga.	54	34	10	8	1	1	7
St. Petersburg, Fla.	60	46	6	4	1	3	2
Tampa, Fla.	108	77	21	5	1	3	9
Washington, D.C.	101	52	25	14	4	6	3
Wilmington, Del.	23	19	3	1	-	-	-
E.S. CENTRAL	441	294	94	32	14	7	23
Birmingham, Ala.	82	52	20	6	2	2	1
Chattanooga, Tenn.	49	29	12	5	2	1	1
Knoxville, Tenn.	93	68	14	4	4	3	6
Louisville, Ky.	U	U	U	U	U	U	U
Memphis, Tenn.	U	U	U	U	U	U	U
Mobile, Ala.	63	42	11	8	2	-	8
Montgomery, Ala.	36	27	7	1	1	-	1
Nashville, Tenn.	118	76	30	8	3	1	6
W.S. CENTRAL	1,101	703	224	108	31	35	64
Austin, Tex.	64	39	13	10	2	-	5
Baton Rouge, La.	58	41	13	-	3	1	4
Corpus Christi, Tex.	42	32	2	5	1	2	1
Dallas, Tex.	169	102	35	24	2	6	4
El Paso, Tex.	23	17	6	-	-	-	2
Ft. Worth, Tex.	71	46	15	6	4	-	4
Houston, Tex.	275	160	57	31	12	15	23
Little Rock, Ark.	56	33	13	7	-	3	3
New Orleans, La.	79	47	22	6	3	1	-
San Antonio, Tex.	142	106	18	9	2	7	7
Shreveport, La.	43	28	10	4	1	-	5
Tulsa, Okla.	79	52	20	6	1	-	6
MOUNTAIN	685	455	129	62	20	19	58
Albuquerque, N.M.	75	46	15	11	1	2	4
Colo. Springs, Colo.	33	25	6	1	1	-	5
Denver, Colo.	104	67	14	15	2	6	15
Las Vegas, Nev.	92	64	17	7	2	2	3
Ogden, Utah	19	13	5	-	1	-	3
Phoenix, Ariz.	142	84	26	19	9	4	13
Pueblo, Colo.	27	24	3	-	-	-	1
Salt Lake City, Utah	88	64	18	2	1	3	8
Tucson, Ariz.	105	68	25	7	3	2	6
PACIFIC	1,767	1,167	322	183	55	33	120
Berkeley, Calif.	11	8	2	1	-	-	1
Fresno, Calif.	60	40	13	2	2	3	1
Glendale, Calif.	30	25	4	1	-	-	1
Honolulu, Hawaii	72	49	11	8	3	1	10
Long Beach, Calif.	70	42	15	11	1	1	8
Los Angeles, Calif.	568	371	100	65	22	5	33
Pasadena, Calif.	30	23	2	2	2	1	5
Portland, Oreg.	106	81	14	8	3	-	3
Sacramento, Calif.	128	76	30	11	6	5	14
San Diego, Calif.	123	78	18	15	5	5	16
San Francisco, Calif.	135	69	36	26	2	2	5
San Jose, Calif.	147	96	33	12	3	3	8
Santa Cruz, Calif.	21	18	2	1	-	-	3
Seattle, Wash.	148	100	25	16	4	3	4
Spokane, Wash.	49	41	4	2	-	2	3
Tacoma, Wash.	69	50	13	2	2	2	5
TOTAL	10,805¶	7,067	2,008	1,075	371	275	629

*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.

§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.

U: Unavailable

HIV Prevention — Continued

Because of the risks for HIV infection among prisoners, state and local health departments are encouraged to identify opportunities to implement HIV-prevention activities in correctional facilities. Organizations receiving funding through the 1992 Cooperative Agreements for Minority and Other Community-Based HIV Prevention Projects are required to collaborate with local juvenile and adult criminal justice systems, correctional institutions, or parole programs providing HIV-prevention and education services. Additionally, applicants for fiscal year 1993 Cooperative Agreements for HIV Prevention (through state/local/territorial health departments) will be required to include in health education/risk-reduction programs persons in the correctional and criminal justice systems (including parole, probation, and transition programs) and to collaborate with correctional institutions and the correctional justice systems in developing program activities for these populations. Additional information on the 1993 program is available from state health departments.

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International Notes

Update: Dracunculiasis Eradication — Ghana and Nigeria, 1991

Ghana and Nigeria, the two countries with the highest number of known cases of dracunculiasis (i.e., Guinea worm disease) in 1991, recorded substantial declines in the reported incidence of the parasitic infection caused by *Dracunculus medinensis*. Provisional surveillance data from 1991 indicate that the combined incidence of dracunculiasis declined 32.7% in the two countries since 1990 and 57.5% since 1989 (Figure 1). This report summarizes surveillance data for the two countries.

Dracunculiasis Eradication — Continued

Ghana

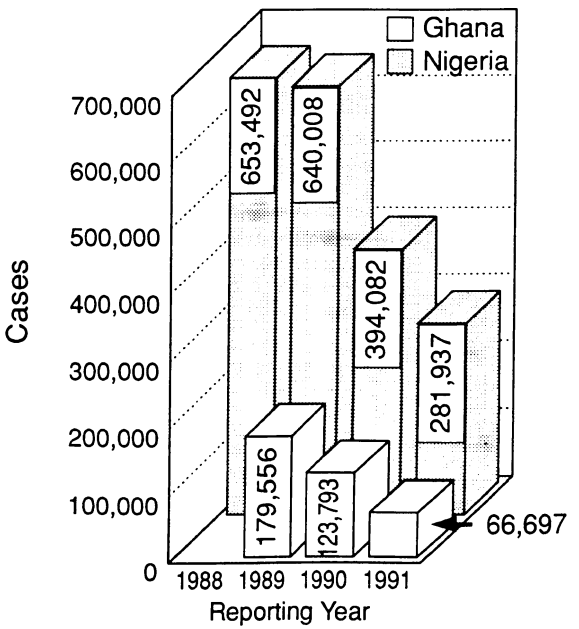
Based on monthly reports from trained village-based health workers in villages where the disease is endemic (*1*), the incidence of dracunculiasis in Ghana declined 46.1% from 1990 to 1991. Since 1989, the number of reported cases has decreased 62.8%. In addition, during 1991 the number of villages with endemic dracunculiasis declined from 5111 to 3718—including 469 newly detected during the year—a net reduction of 27.3%. At the end of 1991, more than 81.3% of the known villages with endemic disease were reporting to national authorities on time (i.e., within 30 days of the end of the reporting month); most of the remaining villages reported late.

Nigeria

Based on retrospective surveys conducted from July 1990 through June 1991, the incidence of dracunculiasis in Nigeria declined 28.6%, in comparison with the previous 12-month period. Since 1989, the number of reported cases has decreased 55.9%. In addition, the number of villages where the disease was endemic declined from 5270 in 1990 to 4908 in 1991, a reduction of 6.9%. States recording the highest individual reduction in cases from 1990 to 1991 included Kwara (54.8%), Ondo (48.1%), and Enugu (31.9%). Sokoto state, with 50,452 cases in 1991, recorded a reduction of 9.5% in the number of cases from 1990 through 1991.

Reported by: Ministry of Health, Ghana. Federal Ministry of Health and Human Svcs, Nigeria. Global 2000, Inc, Carter Center of Emory Univ, Atlanta. WHO Collaborating Center for Research, Training, and Eradication of Dracunculiasis. Div of Parasitic Diseases, National Center for Infectious Diseases, CDC.

FIGURE 1. Dracunculiasis cases — Ghana, 1989–1991, and Nigeria, 1988–1991*



*For 1991, cases in Ghana were obtained from monthly village-based reports, and the number of cases in Nigeria is provisional.

Dracunculiasis Eradication — Continued

Editorial Note: The substantial reduction in incidence of dracunculiasis in Ghana and Nigeria has been associated with specific interventions (i.e., health education and social mobilization, and targeted provision of safe drinking water to populations at risk) that were implemented during the respective national dracunculiasis eradication programs (*2*). The more rapid reduction in the number of villages in Ghana where the disease was endemic may reflect in part the smaller population of most villages in Ghana compared with those in Nigeria. Ghana now has fewer cases of dracunculiasis than Uganda, which has recorded more than 100,000 cases since initiating its first national search for cases in 1991 (*3*).

Both Ghana and Nigeria plan to implement more rigorous monitoring of interventions in 1992 in villages where the disease is endemic, as well as expanded use of Abate®* (temephos) for control of the intermediate host of the parasite in selected villages. During the 1991 reporting period, Ghana completed its transition to monthly surveillance by village-based health workers; Nigeria will complete its transition during 1992.

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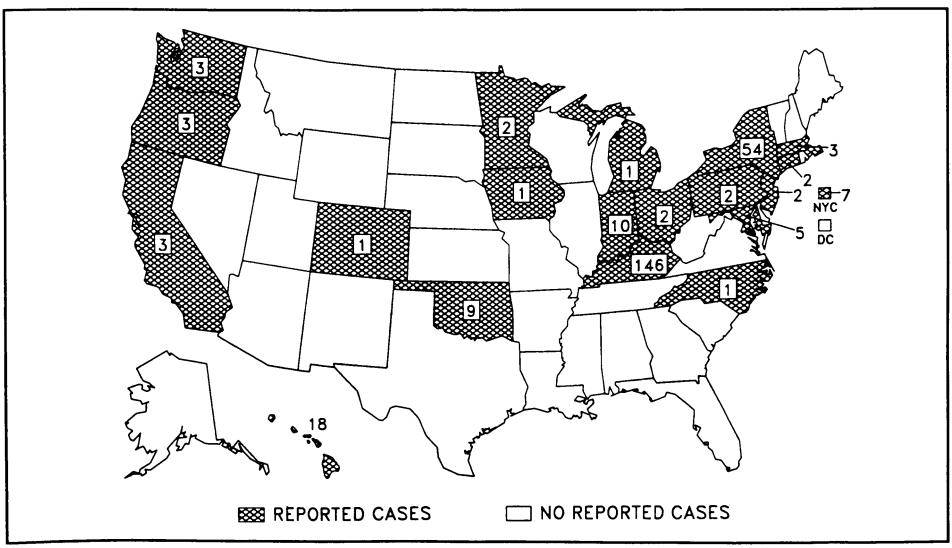
*Use of trade names is for identification only and does not imply endorsement by the Public Health Service or the U.S. Department of Health and Human Services.

Reported cases of measles, by state — United States, weeks 18–21, 1992



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