



MORBIDITY AND MORTALITY WEEKLY REPORT

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First 500,000 AIDS Cases — United States, 1995

As of October 31, 1995, a total of 501,310 persons with acquired immunodeficiency syndrome (AIDS) had been reported to CDC by state and territorial health departments; 311,381 (62%) had been reported as having died. The AIDS surveillance case definition was substantially expanded in late 1987 and again in 1993 to reflect increased knowledge of the natural history of human immunodeficiency virus (HIV) and to remain consistent with the clinical management of HIV disease (1,2). This report presents rates of reported AIDS cases for 1994 and describes the temporal changes in the characteristics of persons reported with AIDS during three periods corresponding to changes in the AIDS case definition—1981–1987, 1988–1992, and 1993–October 1995—and how this information can be used to plan local, state, and national prevention programs.*

Of the cumulative AIDS cases, 50,352 (10%) were reported during 1981–1987, 203,217 (41%) during 1988–1992, and 247,741 (49%) during 1993–October 1995. The proportion of AIDS cases among females increased from 8% of cases reported during 1981–1987 to 18% during 1993–October 1995 (Table 1). The proportion of cases among whites decreased from 60% to 43%, and the proportion among blacks and Hispanics increased from 25% to 38% and from 14% to 18%, respectively. During 1994, the rates per 100,000 population for blacks and Hispanics (101 and 51, respectively) were substantially higher than rates for whites (17), American Indians/Alaskan Natives (12), and Asians/Pacific Islanders (6).

The proportion of cases among persons who reported injecting-drug use increased from 17% during 1981–1987 to 27% during 1993–October 1995, and the proportion of cases attributed to heterosexual transmission increased from 3% to 10%. Cases among men who have sex with men decreased from 64% to 45%.

During 1994, the rates per 100,000 population for reported AIDS cases were 48 in the Northeast, 31 in the South, 29 in the West, and 13 in the Midwest.† However,

*Single copies of this report will be available free until November 22, 1996, from the CDC National AIDS Clearinghouse, P.O. Box 6003, Rockville, MD 20849-6003; telephone (800) 458-5231 or (301) 217-0023.

†Northeast=Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont; Midwest=Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin; South=Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia; West=Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

*AIDS Cases — Continued***TABLE 1. Number and percentage of persons with AIDS, by selected characteristics and period of report — United States, 1981–October 1995**

Characteristic	1981–1987		1988–1992		1993– October 1995		Cumulative	
	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Sex								
Male	46,317	(92.0)	177,807	(87.5)	204,356	(82.5)	428,480	(85.5)
Female	4,035	(8.0)	25,410	(12.5)	43,383	(17.5)	72,828	(14.5)
Age group (yrs)								
0–4	653	(1.3)	2,766	(1.4)	2,013	(0.8)	5,432	(1.1)
5–12	100	(0.2)	669	(0.3)	616	(0.2)	1,385	(0.3)
13–19	199	(0.4)	758	(0.4)	1,343	(0.5)	2,300	(0.5)
20–29	10,531	(20.9)	38,662	(19.0)	41,861	(16.9)	91,054	(18.2)
30–39	23,269	(46.2)	92,493	(45.5)	111,992	(45.3)	227,754	(45.4)
40–49	10,491	(20.8)	47,088	(23.1)	64,990	(26.2)	122,569	(24.4)
50–59	3,690	(7.3)	14,537	(7.2)	18,413	(7.5)	36,640	(7.3)
≥60	1,419	(2.8)	6,244	(3.1)	6,513	(2.6)	14,176	(2.8)
Race/Ethnicity								
White, non-Hispanic	30,104	(59.8)	102,551	(50.5)	105,516	(42.6)	238,171	(47.5)
Black, non-Hispanic	12,794	(25.4)	63,319	(31.2)	94,158	(38.0)	170,271	(34.0)
Hispanic*	7,039	(14.0)	35,213	(17.3)	45,135	(18.2)	87,387	(17.4)
Asian/Pacific Islander	309	(0.6)	1,339	(0.7)	1,809	(0.7)	3,457	(0.7)
American Indian/ Alaskan Native	67	(0.1)	433	(0.2)	783	(0.3)	1,283	(0.3)
HIV-exposure category								
Men who have sex with men	32,246	(64.0)	110,934	(54.6)	111,257	(44.9)	254,437	(50.8)
Injecting-drug use	8,639	(17.2)	49,093	(24.2)	67,708	(27.3)	125,440	(25.0)
Men who have sex with men and inject drugs	4,193	(8.3)	14,252	(7.0)	13,984	(5.6)	32,429	(6.5)
Hemophilia	505	(1.0)	1,744	(0.9)	2,009	(0.8)	4,258	(0.8)
Heterosexual contact	1,248	(2.5)	12,335	(6.1)	24,958	(10.1)	38,541	(7.7)
Transfusion recipients	1,285	(2.6)	3,894	(1.9)	2,521	(1.0)	7,700	(1.6)
Perinatal transmission	608	(1.2)	3,084	(1.5)	2,432	(1.0)	6,124	(1.2)
No risk reported	1,628	(3.2)	7,881	(3.9)	22,872	(9.2)	32,381	(6.4)
Region†								
Northeast	19,544	(38.8)	62,282	(30.6)	74,769	(30.2)	156,595	(31.2)
Midwest	3,770	(7.5)	20,352	(10.0)	24,914	(10.1)	49,036	(9.8)
South	12,960	(25.7)	65,926	(32.4)	86,462	(34.9)	165,348	(33.0)
West	13,550	(26.9)	46,675	(23.0)	53,729	(21.7)	113,954	(22.7)
U.S. territories	516	(1.0)	7,889	(3.9)	7,566	(3.1)	15,971	(3.2)
Vital status								
Living	2,779	(5.5)	32,144	(15.8)	155,006	(62.6)	189,929	(37.9)
Deceased	47,573	(94.5)	171,073	(84.2)	92,735	(37.4)	311,381	(62.1)
Total‡	50,352	(100.0)	203,217	(100.0)	247,741	(100.0)	501,310	(100.0)

*Persons of Hispanic origin may be of any race.

†Northeast=Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont; Midwest=Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin; South=Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia; West=Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

‡Includes persons for whom sex, race/ethnicity, or region are missing.

AIDS Cases — Continued

during 1988–1992 and 1993–October 1995, the largest numbers of cases (65,926 and 86,462, respectively) were reported from the South, which also accounted for the largest proportionate increase of reported cases (31%). The proportionate increases in reported cases from 1988–1992 to 1993–October 1995 for the Midwest, Northeast, and West were 22%, 20%, and 15%, respectively.

During 1993–October 1995 in the South and Midwest, higher proportions of cases among adolescents and young adults (aged 13–29 years) occurred in small (50,000–499,999 population) metropolitan statistical areas (MSAs) and non-MSAs (rural areas) (27% and 24%, respectively) compared with 9% in the Northeast and 11% in the West. During this time period, among cases in adolescent and young adult men who have sex with men, 25% of 8481 cases in the South occurred in persons who resided in small MSAs and rural areas, 21% of 2870 in the Midwest, 9% of 3311 in the Northeast, and 9% of 5706 in the West. Among adolescent and young adult injecting-drug users, 30% of 531 cases in the Midwest occurred among persons residing in small MSAs and rural areas, 23% of 2370 in the South, 17% of 930 in the West, and 8% of 3304 in the Northeast. The proportion of cases among adolescents and young adults residing in small MSAs and rural areas that resulted from heterosexual transmission was highest in the South (32% of 2842), followed by the Midwest (22% of 678), the West (18% of 691), and the Northeast (7% of 1745).

During 1993–October 1995, most AIDS cases among adolescent and young adult men who have sex with men occurred among whites in all four regions (Midwest, 57%; West, 56%; South, 49%; and Northeast, 42%). Black adolescent and young adult men who have sex with men accounted for 39% of cases in the South, 37% in the Midwest, 36% in the Northeast, and 14% in the West. These proportions were higher than those for cases among black adolescent and young adult men who have sex with men reported during 1988–1992 (South, 31%; Midwest, 30%; Northeast, 31%; and West, 12%).

Reported by: Div of HIV/AIDS Prevention, National Center for Prevention Svcs, CDC.

Editorial Note: The World Health Organization estimates that 18 million adults and 1.5 million children have been infected with HIV, resulting in approximately 4.5 million AIDS cases worldwide (3). The theme for the 1995 World AIDS Day (December 1) is “Shared Rights, Shared Responsibilities.” The findings in this report document both the magnitude and evolving nature of the AIDS epidemic in the United States, and underscore that HIV-prevention programs must be planned and implemented collaboratively by persons with diverse skills, training, and experience.

In addition to describing the overall magnitude of the epidemic—approximately one half million cases, nearly half of which have been reported since 1993—this report highlights changes in the epidemiologic patterns during 1993–October 1995 compared with those during earlier periods. In particular, although men who have sex with men continue to account for the largest proportion of cases, the AIDS epidemic is increasing more rapidly among injecting-drug users and persons infected through heterosexual contact with a partner at risk for or known to have HIV infection or AIDS (4,5). The increase in AIDS cases resulting from heterosexual transmission also is reflected in the increase in cases reported among women. The proportions of AIDS cases reported during 1993–October 1995 that are attributed to these risk behaviors will increase as records of persons who were reported initially without risk are reviewed and the risk is identified (6). Geographic patterns also have changed, as

AIDS Cases — Continued

reflected by increases occurring among persons in the South. Finally, regardless of transmission mode or region, the epidemic continues to affect blacks and Hispanics disproportionately.

Although the AIDS epidemic in the United States was recognized initially in the Northeast and West (7), and rates remain highest in the Northeast, the findings from AIDS surveillance document that the greatest proportionate increases in the HIV epidemic have occurred in the South and Midwest—areas that account for the largest proportion of the total U.S. population. These regional variations, especially in adolescents and young adults, underscore the importance of developing HIV-prevention programs based on local trends in the epidemiology of HIV transmission. In the South and Midwest, more detailed characterization of the epidemiologic patterns in small cities and rural areas is particularly important for developing effective regionwide prevention programs.

The disproportionate impact of the epidemic among racial/ethnic minorities is reflected by rates of reported AIDS cases that are six and three times higher for blacks and Hispanics, respectively, than for whites. Rates for HIV infection and the proportions of men who have sex with men and injecting-drug users with AIDS who are black and Hispanic also vary substantially by region (8). For example, Hispanics account for lower proportions of reported cases of AIDS among adolescents and young adult men who have sex with men in the Midwest and South than in the Northeast and West. Because race and ethnicity are not risk factors for HIV transmission, programs to prevent HIV transmission among racial/ethnic minorities should be based on underlying social, economic, and cultural factors that influence risk behaviors (8).

Because of the regional and local variations in the AIDS epidemic in the United States, HIV-prevention efforts must be directed at the local level. In 1993, a CDC advisory committee review of HIV-prevention programs emphasized the importance of 1) enhancing the capacity of local and state agencies to collect and analyze information relevant to the specific and unique aspects of HIV transmission in their communities, 2) strengthening the behavioral and social science bases of HIV-prevention activities, and 3) ensuring that HIV-prevention strategies and interventions reflect the preferences and needs of the affected communities for whom they are intended (9). As a result, in 1994, CDC initiated the HIV Prevention Community Planning process (10) that has provided resources for collaboration between health departments and planning groups that are representative of the local communities. These resources facilitate HIV-prevention programs that are based on scientific data (including data from HIV/AIDS surveillance, seroprevalence surveys, vital statistics, and behavioral research) and knowledge of the community norms and practices. This approach is consistent with the focus of World AIDS Day and emphasizes the necessity of shared participation in HIV-prevention planning and program implementation.

References

1. CDC. Revision of the CDC surveillance case definition for acquired immunodeficiency syndrome. MMWR 1987;36(suppl 1).
2. CDC. 1993 Revised classification system for HIV infection and expanded surveillance case definition for AIDS among adolescents and adults. MMWR 1992;41(no. RR-17).
3. World Health Organization. The current global situation of the HIV/AIDS pandemic. Geneva, Switzerland: World Health Organization, 1995.
4. CDC. Update: trends in AIDS among men who have sex with men—United States, 1989–1994. MMWR 1995;44:401–4.

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5. CDC. Update: trends in AIDS diagnosis and reporting under the expanded surveillance definition for adolescents and adults—United States, 1993. *MMWR* 1994;43:826–31.
6. CDC. HIV/AIDS surveillance report. Atlanta: US Department of Health and Human Services, Public Health Service, CDC, 1995:3–4,30–4. (Vol 7, no. 1).
7. CDC. Follow-up on Kaposi's sarcoma and *Pneumocystis* pneumonia. *MMWR* 30:409–10.
8. CDC. AIDS among racial/ethnic minorities—United States, 1993. *MMWR* 1994;43:644–7,653–5.
9. CDC. External review of CDC's HIV prevention strategies by the CDC Advisory Committee on the Prevention of HIV Infection. Atlanta, Georgia: US Department of Health and Human Services, Public Health Service, CDC, 1994.
10. Valdiserri RO, Aultman TV, Curran JW. Community planning: a national strategy to improve HIV prevention programs. *J Community Health* 1995;20:87–100.

Deaths Associated with a Purported Aphrodisiac — New York City, February 1993–May 1995

During February 1993–May 1995, the New York City Poison Control Center (NYCPCC) was informed about onset of illness in five previously healthy men after they ingested a substance marketed as a topical aphrodisiac; four of the men died. These cases were investigated by the New York City Department of Health, the New York City Department of Environmental Protection, and the Food and Drug Administration (FDA). Four cases were referred to the NYCPCC and one case to the New York City medical examiner's office. The decedents died from cardiac dysrhythmias, and all five patients had measurable levels of digoxin* detected in their serum. Digoxin had not been prescribed for therapeutic purposes for any of these patients, and none had medical conditions associated with endogenous digoxin-like immunoreactive substances. The purported aphrodisiac contains bufadienolides, naturally occurring cardioactive steroids that have digoxin-like effects. This report describes three of the five case reports, summarizes the investigations of the five cases, and underscores the health risks associated with inappropriate use of preparations containing digoxin-like substances.

Case 1

On February 23, 1993, a 26-year-old man ingested one piece of the topical aphrodisiac. Several hours after ingestion, he had onset of vomiting, abdominal pain, and weakness. Sixteen hours after ingestion, he sought medical care at an emergency department (ED). On examination, his blood pressure was 94/60 mm Hg; heart rate, 90 beats per minute (regular); respiratory rate, 16 per minute; and temperature, 98.3 F (36.8 C). Initial laboratory test results included sodium of 135 mEq/L (normal: 135–147 mEq/L), potassium of 8.4 mEq/L (not hemolyzed) (normal: 3.5–5.0 mEq/L), chloride of 102 mEq/L (normal: 95–105 mEq/L), bicarbonate of 18 mEq/L (normal: 22–28 mEq/L), urea nitrogen of 18 mg/dL (normal: 8–18 mg/dL), creatinine of 3.2 mg/dL (normal: 0.6–1.2 mg/dL), and glucose of 164 mg/dL (normal: 70–110 mg/dL). Analysis of arterial blood samples obtained during administration of oxygen revealed a pH of 7.2, pCO₂ of 36 mm Hg, and pO₂ of 519 mm Hg.

Based on the laboratory results, toxic ingestion was diagnosed, and the patient was treated empirically for hypotension and hyperkalemia. His cardiac rhythm deteriorated from normal sinus rhythm to atrial fibrillation to progressive sinus bradycardia.

*A cardiac glycoside obtained from the leaves of *Digitalis lantana*.

Aphrodisiac-Associated Deaths — Continued

The patient developed ventricular fibrillation and died from cardiac arrest 7 hours after admission and approximately 20 hours after ingesting the aphrodisiac. Because of his hyperkalemia and dysrhythmias, a premortem blood sample was evaluated for digoxin; his digoxin level was 2.8 ng/mL (normal: 0 ng/mL).

Case 2

On January 1, 1995, a 23-year-old man ingested a topical aphrodisiac purchased in a smoke shop[†]. Approximately 30 minutes later, he had onset of persistent vomiting and diarrhea. Approximately 12 hours after ingestion, he sought care at an ED. His blood pressure was 98/60 mm Hg; heart rate, 76 beats per minute (regular); respiratory rate, 28 per minute; and temperature, 93 F (33.9 C). On examination, he was diaphoretic, had midrange and reactive pupils, and was alert and not severely agitated; however, he was considered to be in respiratory distress. Initial laboratory test results included sodium of 139 mEq/L, potassium of 4.3 mEq/L, chloride of 100 mEq/L, bicarbonate of 21 mEq/L, urea nitrogen of 14 mg/dL, creatinine of 1.0 mg/dL, and glucose of 104 mg/dL. Analysis of arterial blood samples revealed a pH of 7.4, pCO₂ of 23 mm Hg, and pO₂ of 41 mm Hg. Electrocardiogram showed a right bundle branch block pattern.

Because of his respiratory failure, he was intubated and ventilated. During intubation his heart rate declined to 20 beats per minute; after administration of 1 mg atropine, his heart rate increased to 150 beats per minute. Approximately 3 hours after arrival, he had onset of ventricular fibrillation. Despite aggressive efforts, including administration of Digibind^{®§} based on the recommendations of the NYCPCC, the patient could not be resuscitated. His digoxin level before cardiac arrest was 0.9 ng/mL.

Case 3

On May 23, 1995, a 17-year-old male ingested a dark brown cube sold as a topical aphrodisiac. One hour later, he had onset of sustained vomiting. Approximately 24 hours after ingestion, when he sought care at an ED, his heart rate was 48 beats per minute (irregular). Initial laboratory test results included sodium of 136 mEq/L, potassium of 4.1 mEq/L, chloride of 102 mEq/L, bicarbonate of 23 mEq/L, urea nitrogen of 13 mg/dL, and creatinine of 1.5 mg/dL. Because of similarities with previous cases, toxic ingestion was presumptively diagnosed. The patient's serum digoxin level was 3.9 ng/mL. He remained bradycardic and continued to vomit.

Thirty-six hours after ingestion and 12 hours after admission, the patient was treated empirically with Digibind[®] based on the recommendation of the NYCPCC. Subsequently, his vomiting ceased and heart rate increased to as high as 70 beats per minute. The patient improved and was discharged. Serum digoxin levels had been 3.1 ng/mL at 6 hours following treatment with Digibind[®] and declined to 0.9 ng/mL by 30 hours following treatment with Digibind[®].

Follow-Up Investigation

The New York City Health Department obtained three samples of the purported aphrodisiac from family members of ill persons and other sources. The substance was a hard, dark brown, roughly square piece of material measuring approximately 1 cm

[†]Retail establishments that sell paraphernalia for recreational smoking.

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

Aphrodisiac-Associated Deaths — Continued

by 1 cm by 0.5 cm. Labels or instructions for use were not always included when the product was purchased. Based on analysis by thin-layer chromatography (TLC), all the samples were identical. Dissolved samples measured strongly positive for digoxin by digoxin radio immunoassay. Analysis of the samples by gas chromatography mass spectrometry (GCMS) at FDA's Northeast Regional Laboratory detected several bufadienolides[¶] (i.e., resibufogenin, bufalin, and cinobufagin) and bufotenine (a hallucinogen).

Because Chan Su—a traditional Chinese medication used as a topical anesthetic and cardiac medication—also contains bufadienolides (1), samples of Chan Su were obtained for comparative analysis from an importing company in New York City. Based on physical examination and analysis by TLC, the Chan Su samples and the topical aphrodisiac samples were identical.

Reported by: J Brubacher, MD, RS Hoffman, MD, T Bania, MD, Poison Control Center; P Ravikumar, PhD, M Heller, PhD, S Reimer, PhD, Bur of Laboratories; M Smiddy, MD, Office of the Chief Medical Examiner; B Mojica, MD, New York City Dept of Health. Health Studies Br, Div of Environmental Hazards and Health Effects, National Center for Environmental Health, CDC.

Editorial Note: The findings in this report indicate that the cases of cardiotoxicity in New York City resulted from ingestion of a purported aphrodisiac that contained bufadienolides and bufotenine and was intended for topical use. Cardioactive steroids, including bufadienolides, have a narrow therapeutic index (2), and unintentional therapeutic intoxication is well documented. These steroids can adversely effect the myocardium (3), and the most life-threatening manifestations of toxicity include arrhythmias, ventricular ectopy, sinus bradycardia, atrial arrhythmias, and hyperkalemia (2). Cardiac steroids are found in other nontraditional therapies such as Chan Su and teas made from oleander (*Nerium oleander*) and foxglove (*Digitalis purpurea*).

In New York City, the product marketed as an aphrodisiac is sold under names such as "Stone," "LoveStone," "Black Stone," and "Rock Hard" and is available in grocery stores and smoke shops and from street vendors. Although it is unknown whether the purported aphrodisiac is distributed throughout the United States, similar products have been seized from suspected drug traffickers in Miami, New York City, Philadelphia, and Tampa and in North Carolina and Virginia. Samples from these products also have been found by GCMS to contain bufotenine.

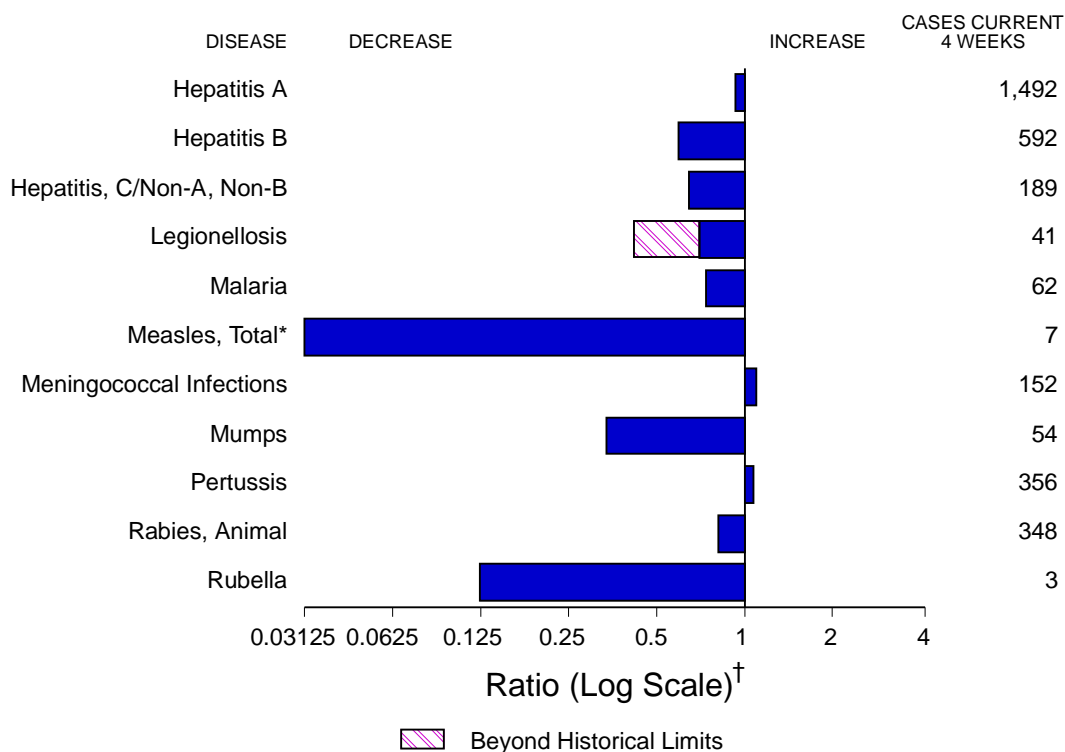
Following the investigation, the New York City Department of Health issued a press release warning the public about the health hazards associated with products marketed as aphrodisiacs. In addition, the NYCPCC recommends empiric administration of large quantities of Digibind[®] (10 vials) to symptomatic patients who may have ingested such products.

This investigation highlights the need for health-care providers and the public to be aware of the potential health hazards that may be associated with the use of some products promoted for self-treatment. In particular, such products are not regulated and have not been tested, and the labels on many of these products may not indicate their composition or intended method of use. Health-care providers should consider poisoning and other adverse effects when assessing illness in persons who have used the products described in this report or other nontraditional therapies. Physicians and the public should report adverse reactions to purported aphrodisiacs to FDA's Med-Watch Program, telephone (800) 332-1088 or (301) 738-7553.

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[¶]Cardioactive steroids derived from toad venom or secretions that cause symptoms similar to digoxin-like substances.

FIGURE I. Notifiable disease reports, comparison of 4-week totals ending November 18, 1995, with historical data — United States



*The large apparent decrease in the number of reported cases of measles (total) reflects dramatic fluctuations in the historical baseline.

[†]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 November 18, 1995 (46th Week)

	Cum. 1995		Cum. 1995
Anthrax	-	Psittacosis	62
Brucellosis	75	Rabies, human	2
Cholera	15	Rocky Mountain Spotted Fever	513
Congenital rubella syndrome	6	Syphilis, congenital, age < 1 year [†]	469
Diphtheria	-	Tetanus	30
<i>Haemophilus influenzae</i> *	1,027	Toxic shock syndrome	163
Hansen Disease	118	Trichinosis	26
Plague	7	Typhoid fever	300
Poliomyelitis, Paralytic	-		

*Of 1,004 cases of known age, 240 (24%) were reported among children less than 5 years of age.

[†]Updated quarterly from reports to the Division of STD Prevention, National Center for Prevention Services. This total through third quarter 1995.

-: no reported cases

TABLE II. Cases of selected notifiable diseases, United States, weeks ending November 18, 1995, and November 19, 1994 (46th Week)

Reporting Area	AIDS*	Gonorrhea		Hepatitis (Viral), by type						Legionellosis	
				A		B		C/NA,NB			
	Cum. 1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	59,806	305,807	357,793	25,518	21,937	8,584	10,186	3,246	3,618	1,032	1,398
NEW ENGLAND	2,862	5,554	7,471	283	261	183	305	19	132	31	72
Maine	81	77	85	28	24	12	11	-	-	6	5
N.H.	79	100	99	11	16	20	25	12	10	2	-
Vt.	30	58	32	5	11	1	11	-	13	-	-
Mass.	1,245	2,555	2,914	123	94	76	167	-	89	19	51
R.I.	210	475	416	32	24	8	8	7	20	4	16
Conn.	1,217	2,289	3,925	84	92	66	83	-	-	N	N
MID. ATLANTIC	16,251	28,711	39,602	1,533	1,498	1,141	1,373	399	402	171	234
Upstate N.Y.	1,978	3,853	9,640	414	483	348	339	216	190	49	55
N.Y. City	8,425	10,588	14,236	711	589	334	348	1	1	5	7
N.J.	3,885	3,464	4,606	214	258	288	337	143	180	24	38
Pa.	1,963	10,806	11,120	194	168	171	349	39	31	93	134
E.N. CENTRAL	4,463	65,148	72,639	2,704	2,232	890	1,043	234	292	278	393
Ohio	884	18,238	19,266	1,617	845	97	141	14	22	137	181
Ind.	473	7,341	8,079	158	340	205	188	5	9	65	43
Ill.	1,877	18,502	22,050	429	551	175	277	55	78	16	37
Mich.	923	16,042	16,278	335	281	363	351	160	183	30	75
Wis.	306	5,025	6,966	165	215	50	86	-	-	30	57
W.N. CENTRAL	1,415	17,208	19,861	1,682	1,094	537	593	117	81	104	95
Minn.	303	2,609	2,915	173	218	58	57	4	16	6	3
Iowa	91	1,429	1,360	56	57	43	24	12	12	20	30
Mo.	646	9,836	11,030	1,165	556	357	451	75	22	49	38
N. Dak.	6	26	36	23	5	4	-	8	1	4	4
S. Dak.	18	200	199	72	34	2	2	1	-	3	1
Nebr.	93	757	1,060	46	119	29	28	6	13	14	13
Kans.	258	2,351	3,261	147	105	44	31	11	17	8	6
S. ATLANTIC	15,414	92,654	95,712	1,192	1,158	1,308	1,864	313	404	166	335
Del.	266	2,024	1,767	8	22	8	14	1	1	2	31
Md.	2,305	8,158	16,175	203	168	229	312	4	19	30	74
D.C.	894	4,165	6,339	21	22	19	50	-	1	5	7
Va.	1,210	9,193	12,025	184	167	97	116	18	25	18	9
W. Va.	96	599	722	24	21	50	42	43	39	4	4
N.C.	898	21,174	25,143	97	120	273	257	55	53	31	25
S.C.	814	11,079	11,786	42	39	49	31	16	10	30	16
Ga.	1,990	18,242	U	53	35	62	536	13	191	14	110
Fla.	6,941	18,020	21,755	560	564	521	506	163	65	32	59
E.S. CENTRAL	1,922	36,785	41,571	1,709	583	715	1,083	822	837	43	81
Ky.	245	4,312	4,546	40	146	60	73	22	29	10	9
Tenn.	763	12,132	13,703	1,410	268	555	930	798	791	24	43
Ala.	523	14,814	13,347	78	97	100	80	2	17	6	13
Miss.	391	5,527	9,975	181	72	-	-	-	-	3	16
W.S. CENTRAL	5,162	28,839	42,805	4,155	2,794	1,304	1,136	295	288	17	39
Ark.	223	3,343	5,916	551	177	58	24	4	7	1	8
La.	880	9,644	10,745	130	138	195	152	140	162	3	13
Okla.	235	4,847	4,171	1,028	334	195	123	63	54	5	11
Tex.	3,824	11,005	21,973	2,446	2,145	856	837	88	65	8	7
MOUNTAIN	1,827	7,186	9,145	3,478	4,431	696	587	362	402	103	85
Mont.	20	61	80	147	23	22	19	13	13	4	16
Idaho	41	108	77	272	326	79	69	41	67	2	2
Wyo.	13	48	82	101	28	25	23	147	154	12	5
Colo.	571	2,519	3,186	485	512	123	86	54	64	38	18
N. Mex.	148	904	947	719	994	261	187	40	45	4	3
Ariz.	555	2,631	2,936	995	1,768	93	73	42	27	9	11
Utah	113	131	257	619	557	63	75	10	17	17	7
Nev.	366	784	1,580	140	223	30	55	15	15	17	23
PACIFIC	10,490	23,722	28,987	8,782	7,886	1,810	2,202	685	780	119	64
Wash.	785	2,381	2,591	755	964	173	207	197	241	20	12
Oreg.	387	321	920	2,133	969	110	140	31	41	-	-
Calif.	9,051	19,590	24,048	5,699	5,701	1,503	1,816	453	493	94	49
Alaska	62	623	806	51	198	10	13	2	-	-	-
Hawaii	205	807	622	144	54	14	26	2	5	5	3
Guam	-	66	122	5	23	1	4	-	-	1	1
P.R.	1,967	521	449	85	79	459	352	18	179	-	-
V.I.	30	6	39	-	3	2	8	-	1	-	-
Amer. Samoa	-	31	31	6	9	-	-	-	-	-	-
C.N.M.I.	-	42	46	18	12	13	1	-	-	-	-

N: Not notifiable U: Unavailable -: no reported cases C.N.M.I.: Commonwealth of Northern Mariana Islands

*Updated monthly to the Division of HIV/AIDS Prevention, National Center for Prevention Services, last update October 26, 1995.

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending November 18, 1995, and November 19, 1994 (46th Week)

Reporting Area	Lyme Disease		Malaria		Measles (Rubeola)						Meningococcal Infections		Mumps	
					Indigenous		Imported*		Total					
	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	1995	Cum. 1995	1995	Cum. 1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	7,874	11,169	1,115	965	1	257	-	28	285	885	2,619	2,401	730	1,268
NEW ENGLAND	1,778	2,616	44	71	-	8	-	2	10	27	128	113	11	19
Maine	26	26	7	6	-	-	-	-	-	5	10	19	4	3
N.H.	24	27	2	3	-	-	-	-	-	1	22	8	1	4
Vt.	8	16	1	3	-	-	-	-	-	3	11	4	-	-
Mass.	189	189	15	33	-	2	-	1	3	7	42	53	2	3
R.I.	285	455	4	9	-	5	-	-	5	7	-	-	1	2
Conn.	1,246	1,903	15	17	-	1	-	1	2	4	43	29	3	7
MID. ATLANTIC	5,004	6,784	303	199	-	7	-	5	12	222	295	257	105	105
Upstate N.Y.	2,523	4,163	61	48	-	1	-	-	1	26	93	82	25	30
N.Y. City	223	26	161	71	-	2	-	3	5	14	42	30	15	9
N.J.	1,137	1,361	57	47	-	4	-	2	6	173	76	53	13	13
Pa.	1,121	1,234	24	33	-	-	-	-	-	9	84	92	52	53
E.N. CENTRAL	83	512	119	98	-	9	-	4	13	102	359	354	151	227
Ohio	50	42	11	15	-	1	-	1	2	17	107	105	51	65
Ind.	18	18	15	13	-	-	-	-	-	1	64	46	5	7
Ill.	10	23	53	41	-	-	-	2	2	56	81	113	45	99
Mich.	5	25	26	26	-	6	-	1	7	25	67	53	50	42
Wis.	-	404	14	3	-	2	-	-	2	3	40	37	-	14
W.N. CENTRAL	249	278	24	43	-	2	-	-	2	170	177	159	45	64
Minn.	170	150	5	14	-	-	-	-	-	-	27	20	6	4
Iowa	14	15	2	5	-	-	-	-	-	7	30	18	10	16
Mo.	40	98	8	12	-	1	-	-	1	160	73	74	23	39
N. Dak.	-	-	1	1	-	-	-	-	-	-	1	1	1	4
S. Dak.	-	-	2	-	-	-	-	-	-	-	7	9	-	-
Nebr.	3	3	3	5	-	-	-	-	-	2	15	13	4	1
Kans.	22	12	3	6	-	1	-	-	1	1	24	24	1	-
S. ATLANTIC	486	727	225	207	-	11	-	1	12	72	484	352	96	185
Del.	23	102	1	3	-	-	-	-	-	-	6	5	-	-
Md.	274	248	60	76	-	-	-	1	1	4	34	32	20	58
D.C.	2	9	16	14	-	-	-	-	-	-	7	6	-	-
Va.	52	125	51	32	-	-	-	-	-	3	59	64	25	41
W. Va.	22	23	4	-	-	-	-	-	-	37	8	12	-	3
N.C.	67	76	15	11	-	-	-	-	-	3	72	48	16	36
S.C.	16	7	1	5	-	-	-	-	-	-	56	28	11	7
Ga.	14	118	36	33	-	2	-	-	2	4	99	72	8	9
Fla.	16	19	41	33	-	9	-	-	9	21	143	85	16	31
E.S. CENTRAL	43	43	22	31	-	-	-	-	-	28	160	170	15	27
Ky.	9	24	2	11	-	-	-	-	-	-	52	35	-	-
Tenn.	20	13	9	10	-	-	-	-	-	28	39	35	2	8
Ala.	9	6	8	9	-	-	-	-	-	-	38	69	4	10
Miss.	5	-	3	1	-	-	-	-	-	-	31	31	9	9
W.S. CENTRAL	109	119	48	42	1	31	-	3	34	19	320	290	53	219
Ark.	9	8	2	3	-	2	-	-	2	1	29	40	10	6
La.	7	2	5	9	-	17	-	1	18	1	48	39	13	28
Okla.	48	70	1	7	-	-	-	-	-	-	37	32	-	23
Tex.	45	39	40	23	1	12	-	2	14	17	206	179	30	162
MOUNTAIN	12	17	55	31	-	68	-	2	70	164	174	159	25	153
Mont.	-	-	3	-	-	-	-	-	-	-	3	6	1	-
Idaho	-	3	1	2	-	1	-	1	2	1	10	17	3	10
Wyo.	3	5	-	1	-	-	-	-	-	-	7	7	-	2
Colo.	1	1	25	13	-	26	-	-	26	19	45	32	2	4
N. Mex.	1	5	6	3	-	30	-	1	31	-	35	15	N	N
Ariz.	1	-	10	6	U	10	U	-	10	1	51	54	2	96
Utah	1	2	6	4	-	-	-	-	-	134	15	19	11	26
Nev.	5	1	4	2	-	1	-	-	1	9	8	9	6	15
PACIFIC	110	73	275	243	-	121	-	11	132	81	522	547	229	269
Wash.	10	4	21	30	-	16	-	4	20	4	83	85	13	18
Oreg.	14	6	22	16	U	-	U	3	3	2	99	121	N	N
Calif.	86	63	219	181	-	105	-	3	108	61	324	332	193	229
Alaska	-	-	3	2	-	-	-	-	-	10	12	3	13	4
Hawaii	-	-	10	14	-	-	-	1	1	4	4	6	10	18
Guam	-	-	-	-	U	-	U	-	-	228	3	-	3	7
P.R.	-	-	1	5	-	11	-	-	11	11	23	7	2	2
V.I.	-	-	-	-	U	-	U	-	-	-	-	-	2	4
Amer. Samoa	-	-	-	-	-	-	-	-	-	-	-	-	-	3
C.N.M.I.	-	-	1	1	U	-	U	-	-	29	-	-	-	2

*For imported measles, cases include only those resulting from importation from other countries.

N: Not notifiable

U: Unavailable

-: no reported cases

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending November 18, 1995, and November 19, 1994 (46th Week)

Reporting Area	Pertussis			Rubella			Syphilis (Primary & Secondary)		Tuberculosis		Rabies, Animal	
	1995	Cum. 1995	Cum. 1994	1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	88	3,679	3,639	2	139	209	12,902	18,570	17,808	19,302	6,095	6,928
NEW ENGLAND	14	508	432	2	49	128	148	196	447	440	1,367	1,712
Maine	-	43	18	-	1	-	2	4	12	27	45	-
N.H.	-	46	81	-	1	-	1	4	18	14	140	192
Vt.	-	64	41	-	-	-	-	-	4	8	165	128
Mass.	12	324	252	-	7	124	61	83	246	223	389	666
R.I.	-	4	6	-	-	2	4	13	45	43	303	40
Conn.	2	27	34	2	40	2	80	92	122	125	325	686
MID. ATLANTIC	7	353	585	-	14	6	715	1,235	3,619	3,959	1,156	1,851
Upstate N.Y.	2	197	219	-	5	5	44	154	453	535	446	1,382
N.Y. City	-	33	159	-	8	-	355	545	1,913	2,264	-	-
N.J.	-	14	15	-	1	1	139	217	687	694	309	248
Pa.	5	109	192	-	-	-	177	319	566	466	401	221
E.N. CENTRAL	10	382	536	-	5	9	2,255	2,741	1,725	1,840	89	58
Ohio	7	148	146	-	-	-	781	1,041	250	298	12	4
Ind.	-	58	60	-	1	-	243	230	202	166	12	13
Ill.	2	98	98	-	1	1	814	943	867	929	15	21
Mich.	1	66	89	-	3	8	262	257	344	396	39	12
Wis.	-	12	143	-	-	-	155	270	62	51	11	8
W.N. CENTRAL	4	246	194	-	1	2	662	1,060	512	511	320	199
Minn.	-	127	87	-	-	-	36	43	124	122	23	16
Iowa	-	12	19	-	-	-	43	59	55	54	113	77
Mo.	-	53	41	-	-	2	546	892	202	223	23	24
N. Dak.	-	8	5	-	-	-	-	1	4	9	28	13
S. Dak.	1	12	20	-	-	-	-	2	22	22	86	36
Nebr.	2	11	9	-	-	-	11	11	20	17	5	-
Kans.	1	23	13	-	1	-	26	52	85	64	42	33
S. ATLANTIC	7	309	327	-	25	15	3,340	4,851	2,897	3,379	1,907	1,814
Del.	-	10	3	-	-	-	15	25	46	40	74	60
Md.	1	36	68	-	-	-	164	286	253	306	275	488
D.C.	-	6	8	-	-	-	97	192	91	103	11	2
Va.	6	25	36	-	-	-	521	722	255	292	402	381
W. Va.	-	-	4	-	-	-	10	9	64	71	108	71
N.C.	-	110	79	-	1	-	1,014	1,484	394	443	426	155
S.C.	-	26	13	-	1	-	528	726	282	340	115	163
Ga.	-	28	30	-	-	2	650	735	319	592	258	340
Fla.	-	68	86	-	23	13	341	672	1,193	1,192	238	154
E.S. CENTRAL	-	262	128	-	-	-	3,340	3,490	1,410	1,454	262	209
Ky.	-	20	60	-	-	-	179	187	283	278	26	22
Tenn.	-	204	22	-	-	-	800	938	372	519	90	71
Ala.	-	35	34	-	-	-	588	585	353	392	137	112
Miss.	-	3	12	N	N	N	1,773	1,780	402	265	9	4
W.S. CENTRAL	4	279	184	-	8	13	1,709	3,964	2,572	2,456	521	618
Ark.	3	40	27	-	1	-	94	431	208	216	-	34
La.	-	17	10	-	-	-	924	1,533	105	15	43	63
Okla.	-	31	26	-	-	4	175	136	326	214	28	35
Tex.	1	191	121	-	7	9	516	1,864	1,933	2,011	450	486
MOUNTAIN	26	515	477	-	5	5	206	217	559	505	158	145
Mont.	1	4	10	-	-	-	4	3	10	9	43	20
Idaho	4	94	77	-	-	-	-	1	14	11	3	3
Wyo.	-	1	-	-	1	-	1	1	4	8	25	19
Colo.	13	102	216	-	-	-	100	111	66	70	9	18
N. Mex.	8	133	25	-	-	-	34	19	71	66	6	7
Ariz.	U	149	111	U	3	-	34	41	273	194	49	56
Utah	-	27	35	-	1	4	4	11	37	41	15	13
Nev.	-	5	3	-	-	1	29	30	84	106	8	9
PACIFIC	16	825	776	-	32	31	527	816	4,067	4,758	315	322
Wash.	6	300	106	-	2	-	15	30	215	228	7	15
Oreg.	U	54	99	U	2	4	9	33	48	90	-	13
Calif.	-	412	552	-	24	23	502	746	3,587	4,155	304	261
Alaska	-	1	-	-	-	-	1	3	63	74	4	33
Hawaii	10	58	19	-	4	4	-	4	154	211	-	-
Guam	U	1	2	U	-	1	8	3	38	75	-	-
P.R.	-	14	2	-	-	-	284	286	195	189	46	73
V.I.	U	-	-	U	-	-	2	28	-	-	-	-
Amer. Samoa	-	-	1	-	-	-	-	1	5	4	-	-
C.N.M.I.	U	-	-	U	-	-	12	2	16	30	-	-

U: Unavailable - : no reported cases

**TABLE III. Deaths in 121 U.S. cities,* week ending
November 18, 1995 (46th Week)**

Reporting Area	All Causes, By Age (Years)						P&I†	Total	Reporting Area	All Causes, By Age (Years)						P&I†	Total
	All Ages	≥65	45-64	25-44	1-24	<1				All Ages	≥65	45-64	25-44	1-24	<1		
NEW ENGLAND	528	376	85	38	18	11	31		S. ATLANTIC	1,179	721	235	151	37	32	70	
Boston, Mass.	159	98	26	18	11	6	16		Atlanta, Ga.	170	86	42	32	5	5	2	
Bridgeport, Conn.	40	28	8	3	1	-	1		Baltimore, Md.	253	154	48	39	7	5	21	
Cambridge, Mass.	15	13	1	1	-	-	2		Charlotte, N.C.	90	55	19	12	2	2	7	
Fall River, Mass.	27	21	6	-	-	-	-		Jacksonville, Fla.	130	87	28	10	3	2	9	
Hartford, Conn.	29	19	5	2	1	2	-		Miami, Fla.	107	60	19	17	6	5	1	
Lowell, Mass.	18	12	3	2	1	-	-		Norfolk, Va.	85	59	13	8	5	-	5	
Lynn, Mass.	14	12	1	1	-	-	1		Richmond, Va.	71	39	15	12	3	2	5	
New Bedford, Mass.	34	30	3	1	-	-	1		Savannah, Ga.	60	42	6	7	1	4	4	
New Haven, Conn.	55	37	12	3	2	1	5		St. Petersburg, Fla.	43	33	7	1	2	-	2	
Providence, R.I.	U	U	U	U	U	U	U		Tampa, Fla.	157	101	33	13	3	7	14	
Somerville, Mass.	5	3	1	-	1	-	-		Washington, D.C.	U	U	U	U	U	U	U	
Springfield, Mass.	56	42	7	5	-	2	5		Wilmington, Del.	13	5	5	-	-	-	-	
Waterbury, Conn.	22	19	2	1	-	-	-		E.S. CENTRAL	666	440	133	56	23	13	49	
Worcester, Mass.	54	42	10	1	1	-	-		Birmingham, Ala.	134	94	21	10	7	2	4	
MID. ATLANTIC	2,579	1,727	475	277	43	57	123		Chattanooga, Tenn.	66	49	15	1	1	-	4	
Albany, N.Y.	60	49	7	4	-	-	7		Knoxville, Tenn.	45	30	11	2	1	1	10	
Allentown, Pa.	26	23	2	1	-	-	-		Lexington, Ky.	71	43	21	2	4	1	9	
Buffalo, N.Y.	97	79	12	5	-	1	4		Memphis, Tenn.	140	79	33	20	6	2	11	
Camden, N.J.	49	29	10	5	4	1	2		Mobile, Ala.	51	33	8	8	1	1	-	
Elizabeth, N.J.	25	17	3	4	1	-	1		Montgomery, Ala.	41	32	5	2	1	1	1	
Erie, Pa.§	56	49	6	1	-	-	2		Nashville, Tenn.	118	80	19	11	2	5	10	
Jersey City, N.J.	U	U	U	U	U	U	U		W.S. CENTRAL	1,286	836	249	121	51	29	71	
New York City, N.Y.	1,394	891	270	181	24	28	51		Austin, Tex.	84	50	17	14	2	1	3	
Newark, N.J.	55	17	23	10	3	2	6		Baton Rouge, La.	42	34	4	2	2	-	3	
Paterson, N.J.	27	13	6	5	2	1	1		Corpus Christi, Tex.	59	45	7	6	1	-	1	
Philadelphia, Pa.	300	179	72	34	6	9	9		Dallas, Tex.	196	112	47	20	10	7	2	
Pittsburgh, Pa.§	93	70	12	3	1	7	7		El Paso, Tex.	63	43	15	4	1	-	7	
Reading, Pa.	18	16	1	1	-	-	1		Ft. Worth, Tex.	91	60	16	9	2	4	6	
Rochester, N.Y.	157	125	19	10	1	2	19		Houston, Tex.	390	247	73	40	21	9	30	
Schenectady, N.Y.	32	27	5	-	-	-	2		Little Rock, Ark.	76	47	14	8	3	4	4	
Scranton, Pa.§	31	23	8	-	-	-	1		New Orleans, La.	104	71	20	7	4	2	-	
Syracuse, N.Y.	81	60	12	7	-	2	6		San Antonio, Tex.	U	U	U	U	U	U	U	
Trenton, N.J.	51	35	6	5	1	4	3		Shreveport, La.	49	37	6	4	1	1	4	
Utica, N.Y.	27	25	1	1	-	-	1		Tulsa, Okla.	132	90	30	7	4	1	11	
Yonkers, N.Y.	U	U	U	U	U	U	U		MOUNTAIN	1,047	710	184	84	47	22	65	
E.N. CENTRAL	2,106	1,411	408	179	51	57	107		Albuquerque, N.M.	127	86	30	6	4	1	2	
Akron, Ohio	54	38	8	5	2	1	-		Colo. Springs, Colo.	58	35	13	6	3	1	2	
Canton, Ohio	47	34	9	3	-	1	1		Denver, Colo.	125	87	21	12	2	3	7	
Chicago, Ill.	451	282	91	49	11	18	17		Las Vegas, Nev.	186	129	39	10	5	3	16	
Cincinnati, Ohio	80	52	21	3	3	1	2		Ogden, Utah	40	29	3	6	1	1	5	
Cleveland, Ohio	131	83	30	10	3	5	3		Phoenix, Ariz.	213	128	40	22	16	7	14	
Columbus, Ohio	193	128	45	11	5	4	18		Pueblo, Colo.	38	29	7	2	-	-	3	
Dayton, Ohio	145	103	25	13	1	3	10		Salt Lake City, Utah	100	65	15	8	10	2	8	
Detroit, Mich.	233	138	51	31	7	6	9		Tucson, Ariz.	160	122	16	12	6	4	8	
Evansville, Ind.	39	27	6	5	-	1	2		PACIFIC	1,481	1,006	272	138	40	25	143	
Fort Wayne, Ind.	66	50	12	3	-	1	1		Berkeley, Calif.	29	24	3	1	1	-	1	
Gary, Ind.	18	8	7	2	1	-	1		Fresno, Calif.	83	59	13	6	3	2	7	
Grand Rapids, Mich.	59	46	5	5	2	1	8		Glendale, Calif.	U	U	U	U	U	U	U	
Indianapolis, Ind.	154	106	35	10	1	2	12		Honolulu, Hawaii	72	50	11	6	5	-	8	
Madison, Wis.	U	U	U	U	U	U	U		Long Beach, Calif.	67	43	17	3	3	1	8	
Milwaukee, Wis.	125	94	19	6	2	4	6		Los Angeles, Calif.	U	U	U	U	U	U	U	
Peoria, Ill.	52	36	10	-	2	4	4		Pasadena, Calif.	27	22	3	-	2	-	5	
Rockford, Ill.	49	32	11	3	1	2	5		Portland, Ore.	138	97	33	7	-	1	9	
South Bend, Ind.	61	39	11	5	5	1	4		Sacramento, Calif.	209	142	38	16	8	5	24	
Toledo, Ohio	100	73	10	13	3	1	4		San Diego, Calif.	157	106	29	17	1	4	18	
Youngstown, Ohio	49	42	2	2	2	1	-		San Francisco, Calif.	134	76	23	32	2	1	20	
W.N. CENTRAL	933	666	142	64	24	24	63		San Jose, Calif.	169	117	32	15	3	2	17	
Des Moines, Iowa	95	69	21	-	3	2	9		Santa Cruz, Calif.	50	35	10	1	2	2	3	
Duluth, Minn.	32	26	6	-	-	-	-		Seattle, Wash.	165	103	30	21	6	5	2	
Kansas City, Kans.	39	18	6	10	4	1	1		Spokane, Wash.	71	52	11	5	2	1	10	
Kansas City, Mo.	108	71	14	5	2	3	6		Tacoma, Wash.	110	80	19	8	2	1	11	
Lincoln, Nebr.	50	39	4	6	1	-	5		TOTAL	11,805†	7,893	2,183	1,108	334	270	722	
Minneapolis, Minn.	246	190	33	13	5	5	18										
Omaha, Nebr.	92	62	16	5	5	4	6										
St. Louis, Mo.	120	85	16	12	2	5	10										
St. Paul, Minn.	66	51	10	2	2	1	4										
Wichita, Kans.	85	55	16	11	-	3	4										

*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 - -: no reported cases

*Aphrodisiac-Associated Deaths — Continued**References*

1. Huang KC. The pharmacology of Chinese herbs. Boca Raton, Florida: CRC Press, 1993.
2. Arena JM, Drew RH. Poisoning: toxicology, symptoms, treatments. 5th ed. Springfield, Illinois: Charles C. Thomas, 1985:562–3.
3. Gilman A, Goodman LS, Rall TW, Murad F. The pharmacological basis of therapeutics. 7th ed. New York: Macmillan Publishing Company, 1985:716–8.

Update: Influenza Activity — United States and England, 1995–96 Season

In cooperation with the World Health Organization (WHO), its collaborating laboratories, and state and local health departments, CDC conducts surveillance to monitor influenza activity and to detect antigenic changes in the circulating strains of influenza viruses. This report summarizes influenza surveillance activities in the United States and England from September 17 through November 11, 1995.

United States

From October 1 through November 11, state and territorial epidemiologists reported sporadic* influenza activity for ≥ 1 week in 16 states (Alaska, Arizona, Connecticut, Idaho, Kansas, Kentucky, Montana, New Hampshire, New Mexico, New York, Rhode Island, South Carolina, Texas, Utah, West Virginia, and Wyoming) and the District of Columbia. Regional influenza activity was first reported from Alaska during the week ending October 7 and from Montana during the week ending October 28.

From September 27 through November 11, sporadic influenza A virus isolates were reported from 12 states (Alaska, Arizona, Colorado, Florida, Idaho, Montana, New York, Oklahoma, South Carolina, Texas, Washington, and Wisconsin), and influenza B isolates were reported from California, Nebraska, and Utah. Of the 18 isolates confirmed at CDC, one was identified as influenza type B, six as influenza type A(H3N2), and 11 as influenza type A(H1N1). Eight of these isolates were further characterized and found to be closely related to the influenza type A strains included in the 1995–96 influenza vaccine.

England

In England, outbreaks of influenza-like illness (ILI) were reported in two boarding schools during the weeks ending September 23 and October 14. The first outbreak involved approximately 130 (24%) of 550 students; influenza type A(H3N2) was isolated from three of the students. The second outbreak began on October 6, peaked October 9, and involved approximately 200 (40%) of 500 students; influenza type A(H3N2) was isolated from two of the students.

Reported by: Participating state and territorial epidemiologists and state public health laboratory directors. World Health Organization collaborating laboratories. Epidemiology Div, Public Health Laboratory Svcs Communicable Diseases Surveillance Center, London. Influenza Br and WHO Collaborating Center for Surveillance, Epidemiology, and Control of Influenza, Div of Viral and Rickettsial Diseases, National Center for Infectious Diseases, CDC.

*Levels of activity are 1) *sporadic*—sporadically occurring influenza-like illness (ILI) or culture-confirmed influenza with no outbreaks detected; 2) *regional*—outbreaks of ILI or culture-confirmed influenza in counties with a combined population of $<50\%$ of the state's total population; and 3) *widespread*—outbreaks of ILI or culture-confirmed influenza in counties having a combined population of $\geq 50\%$ of the state's total population.

Influenza — Continued

Editorial Note: Although the timing, intensity, and geographic distribution of influenza activity can vary substantially, the pattern of activity from September through early November 1995 is typical for this time of year in the Northern Hemisphere. Isolated outbreaks such as those in England are not uncommon during October or November, but widespread influenza activity usually does not begin before December. Even though influenza activity cannot be precisely predicted, all three influenza virus strains—type A(H3N2), type A(H1N1), and type B—are expected to circulate in the United States during the 1995–96 season.

In the United States, the optimal period for organized vaccination campaigns for high-risk persons is October through mid-November (1). However, health-care providers should continue to offer vaccine to high-risk persons after mid-November and even after influenza activity has been documented in a community. Because early virologic surveillance has indicated cocirculation of influenza type A and type B viruses and because the antiviral drugs amantadine and rimantadine are effective only against influenza type A, continued use of viral culture and rapid antigen detection throughout the season is particularly important. Amantadine or rimantadine can be used for either treatment or prophylaxis of influenza type A infection. Short-term prophylaxis with one of these drugs may be considered when vaccination is offered to high-risk persons after influenza A outbreaks have been reported in a community (1). Protective levels of antibody develop within 1–2 weeks after vaccination.

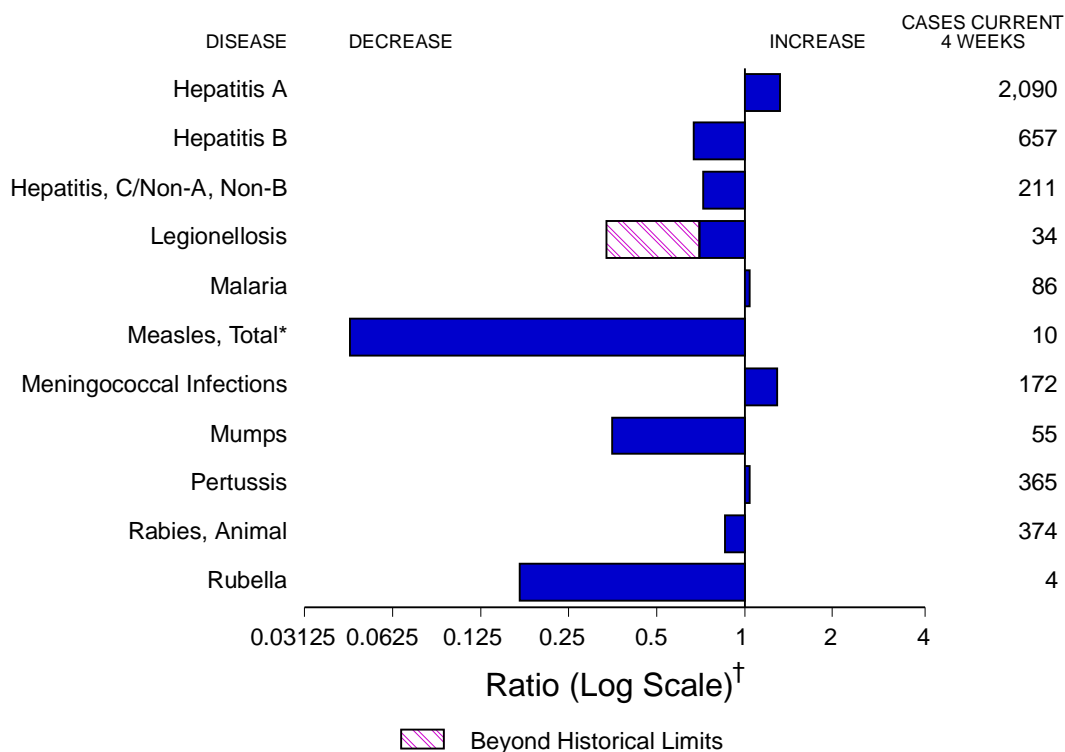
Influenza surveillance data are collected weekly from October through April. Sources of data include 1) reports of ILI from state and territorial epidemiologists; 2) the number and proportion of patients seen with ILI reported by a network of approximately 150 sentinel physicians; 3) the proportion of total deaths attributed to pneumonia and influenza reported by the vital statistics offices of 121 U.S. cities; and 4) the number and type of influenza viruses isolated by 68 WHO collaborating laboratories throughout the United States. As the influenza season progresses, these surveillance data collected at CDC will be updated weekly and made available through the CDC voice information system, telephone (404) 332-4551, and the fax information system, telephone (404) 332-4565 (request document number 361100). Information about local influenza activity is available from local and state health departments.

Reference

1. ACIP. Prevention and control of influenza: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 1995;44(no. RR-3).

*Notice to Readers***Week 45, Figure I and Tables I–III**

Following are Figure I and Tables I–III for the reporting week ending November 10, 1995 (week 45).

FIGURE I. Notifiable disease reports, comparison of 4-week totals ending November 11, 1995, with historical data — United States

*The large apparent decrease in the number of reported cases of measles (total) reflects dramatic fluctuations in the historical baseline.

[†]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 November 11, 1995 (45th Week)

	Cum. 1995		Cum. 1995
Anthrax	-	Psittacosis	62
Brucellosis	75	Rabies, human	2
Cholera	15	Rocky Mountain Spotted Fever	507
Congenital rubella syndrome	6	Syphilis, congenital, age < 1 year [†]	469
Diphtheria	-	Tetanus	28
<i>Haemophilus influenzae</i> *	1,008	Toxic shock syndrome	160
Hansen Disease	117	Trichinosis	26
Plague	7	Typhoid fever	291
Poliomyelitis, Paralytic	-		

*Of 988 cases of known age, 235 (24%) were reported among children less than 5 years of age.

[†]Updated quarterly from reports to the Division of STD Prevention, National Center for Prevention Services. This total through third quarter 1995.

-: no reported cases

TABLE II. Cases of selected notifiable diseases, United States, weeks ending November 11, 1995, and November 12, 1994 (45th Week)

Reporting Area	AIDS*	Gonorrhea		Hepatitis (Viral), by type						Legionellosis	
				A		B		C/NA,NB			
	Cum. 1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	59,806	299,369	351,395	24,981	21,411	8,412	9,928	3,214	3,547	1,021	1,369
NEW ENGLAND	2,862	5,337	7,367	275	255	183	295	19	130	30	70
Maine	81	72	84	27	23	12	11	-	-	5	5
N.H.	79	98	99	10	16	20	24	12	10	2	-
Vt.	30	55	31	5	10	1	10	-	13	-	-
Mass.	1,245	2,509	2,832	121	93	76	161	-	87	19	49
R.I.	210	459	407	32	23	8	8	7	20	4	16
Conn.	1,217	2,144	3,914	80	90	66	81	-	-	N	N
MID. ATLANTIC	16,251	28,188	38,803	1,514	1,462	1,112	1,318	397	397	171	228
Upstate N.Y.	1,978	3,854	9,508	414	481	343	335	214	189	49	53
N.Y. City	8,425	10,058	13,984	702	567	326	323	1	1	5	7
N.J.	3,885	3,470	4,383	207	249	273	321	143	176	24	37
Pa.	1,963	10,806	10,928	191	165	170	339	39	31	93	131
E.N. CENTRAL	4,463	64,063	71,106	2,648	2,196	863	1,032	234	290	273	389
Ohio	884	18,238	18,989	1,574	845	94	141	13	21	133	178
Ind.	473	7,002	7,904	154	339	192	187	6	9	64	43
Ill.	1,877	18,099	21,529	429	534	174	275	55	78	16	37
Mich.	923	15,760	15,880	330	269	354	344	160	182	30	74
Wis.	306	4,964	6,804	161	209	49	85	-	-	30	57
W.N. CENTRAL	1,415	16,915	19,522	1,633	1,075	516	580	114	79	101	91
Minn.	303	2,564	2,815	166	215	55	55	4	16	6	2
Iowa	91	1,385	1,334	54	56	42	24	12	12	20	30
Mo.	646	9,688	10,930	1,143	548	344	442	72	21	47	36
N. Dak.	6	26	36	23	5	4	-	8	1	4	4
S. Dak.	18	194	193	67	34	2	2	1	-	3	1
Nebr.	93	757	1,060	46	119	29	28	6	13	14	13
Kans.	258	2,301	3,154	134	98	40	29	11	16	7	5
S. ATLANTIC	15,414	90,162	93,841	1,168	1,119	1,277	1,803	307	376	166	328
Del.	266	1,928	1,718	8	22	8	14	1	1	2	31
Md.	2,305	7,471	15,923	201	163	223	309	4	19	29	74
D.C.	894	4,145	6,208	21	22	19	47	-	1	5	7
Va.	1,210	9,102	11,741	179	163	96	114	18	25	18	8
W. Va.	96	595	713	23	19	48	39	43	36	4	4
N.C.	898	20,971	24,664	95	119	259	241	51	53	31	25
S.C.	814	10,731	11,575	42	36	49	30	16	9	31	15
Ga.	1,990	17,852	U	53	32	62	535	13	185	14	109
Fla.	6,941	17,367	21,299	546	543	513	474	161	47	32	55
E.S. CENTRAL	1,922	35,880	40,846	1,658	561	710	1,059	809	821	43	79
Ky.	245	4,221	4,487	39	142	60	72	22	28	10	9
Tenn.	763	11,861	13,376	1,361	260	552	911	785	777	24	41
Ala.	523	14,390	13,181	78	90	98	76	2	16	6	13
Miss.	391	5,408	9,802	180	69	-	-	-	-	3	16
W.S. CENTRAL	5,162	28,502	42,402	4,013	2,725	1,278	1,108	288	285	17	39
Ark.	223	3,343	5,819	532	171	55	24	4	7	1	8
La.	880	9,429	10,561	125	137	194	148	140	162	3	13
Okla.	235	4,725	4,049	953	325	193	119	61	54	5	11
Tex.	3,824	11,005	21,973	2,403	2,092	836	817	83	62	8	7
MOUNTAIN	1,827	7,145	8,919	3,450	4,300	684	572	359	397	102	81
Mont.	20	61	76	142	21	21	19	13	13	4	14
Idaho	41	104	76	269	322	75	69	41	67	2	2
Wyo.	13	47	77	100	28	25	23	145	154	12	5
Colo.	571	2,496	3,095	475	498	119	86	54	63	38	17
N. Mex.	148	891	928	713	971	258	179	39	45	4	3
Ariz.	555	2,631	2,845	995	1,701	93	69	42	24	9	11
Utah	113	131	249	616	541	63	74	10	16	16	7
Nev.	366	784	1,573	140	218	30	53	15	15	17	22
PACIFIC	10,490	23,177	28,589	8,622	7,718	1,789	2,161	687	772	118	64
Wash.	785	2,343	2,546	731	958	167	205	187	241	20	12
Oreg.	387	321	886	2,133	942	110	138	31	40	-	-
Calif.	9,051	19,414	23,765	5,567	5,576	1,488	1,779	436	486	93	49
Alaska	62	615	780	50	192	10	13	2	-	-	-
Hawaii	205	484	612	141	50	14	26	31	5	5	3
Guam	-	66	115	5	22	1	4	-	-	1	1
P.R.	1,967	521	434	85	79	459	334	18	172	-	-
V.I.	30	6	38	-	3	2	7	-	1	-	-
Amer. Samoa	-	28	31	6	8	-	-	-	-	-	-
C.N.M.I.	-	42	45	18	8	13	1	-	-	-	-

N: Not notifiable U: Unavailable -: no reported cases C.N.M.I.: Commonwealth of Northern Mariana Islands

*Updated monthly to the Division of HIV/AIDS Prevention, National Center for Prevention Services, last update October 26, 1995.

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending November 11, 1995, and November 12, 1994 (45th Week)

Reporting Area	Lyme Disease		Malaria		Measles (Rubeola)						Meningococcal Infections		Mumps	
					Indigenous		Imported*		Total					
	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	1995	Cum. 1995	1995	Cum. 1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	7,718	10,869	1,104	939	2	258	-	28	286	884	2,574	2,353	711	1,240
NEW ENGLAND	1,773	2,603	43	69	-	8	-	2	10	27	125	111	11	19
Maine	26	26	7	6	-	-	-	-	-	5	10	19	4	3
N.H.	23	27	1	3	-	-	-	-	-	1	22	8	1	4
Vt.	8	16	1	3	-	-	-	-	-	3	10	3	-	-
Mass.	185	186	15	32	-	2	-	1	3	7	42	52	2	3
R.I.	285	453	4	8	-	5	-	-	5	7	-	-	1	2
Conn.	1,246	1,895	15	17	-	1	-	1	2	4	41	29	3	7
MID. ATLANTIC	4,889	6,537	294	188	-	7	-	5	12	221	294	256	105	101
Upstate N.Y.	2,464	4,073	61	48	-	1	-	-	1	26	92	82	25	30
N.Y. City	221	25	157	65	-	2	-	3	5	14	42	30	15	9
N.J.	1,118	1,263	54	44	-	4	-	2	6	173	76	53	13	13
Pa.	1,086	1,176	22	31	-	-	-	-	-	8	84	91	52	49
E.N. CENTRAL	76	510	119	98	-	9	-	4	13	102	351	349	145	223
Ohio	46	41	11	15	-	1	-	1	2	17	102	104	47	63
Ind.	15	18	15	13	-	-	-	-	-	1	62	46	5	7
Ill.	10	23	53	41	-	-	-	2	2	56	81	110	45	97
Mich.	5	25	26	26	-	6	-	1	7	25	66	52	48	42
Wis.	-	403	14	3	-	2	-	-	2	3	40	37	-	14
W.N. CENTRAL	238	277	23	42	-	2	-	-	2	170	173	155	43	63
Minn.	162	150	4	13	-	-	-	-	-	-	27	19	6	4
Iowa	13	15	2	5	-	-	-	-	-	7	30	18	9	16
Mo.	40	97	8	12	-	1	-	-	1	160	71	72	22	38
N. Dak.	-	-	1	1	-	-	-	-	-	-	1	1	1	4
S. Dak.	-	-	2	-	-	-	-	-	-	-	6	9	-	-
Nebr.	3	3	3	5	-	-	-	-	-	2	15	13	4	1
Kans.	20	12	3	6	-	1	-	-	1	1	23	23	1	-
S. ATLANTIC	474	698	227	203	1	13	-	1	14	72	475	346	92	179
Del.	23	102	1	3	-	-	-	-	-	-	6	5	-	-
Md.	267	225	61	75	-	-	-	1	1	4	33	31	20	54
D.C.	2	7	16	14	-	-	-	-	-	-	6	4	-	-
Va.	50	122	51	32	-	-	-	-	-	3	58	64	21	39
W. Va.	22	23	4	-	-	-	-	-	-	37	8	12	-	3
N.C.	65	76	15	11	-	-	-	-	-	3	71	48	16	36
S.C.	16	7	1	4	-	-	-	-	-	-	56	27	11	7
Ga.	13	118	37	32	1	4	-	-	4	4	97	70	8	9
Fla.	16	18	41	32	-	9	-	-	9	21	140	85	16	31
E.S. CENTRAL	43	40	22	31	-	-	-	-	-	28	157	167	15	22
Ky.	9	23	2	11	-	-	-	-	-	-	52	35	-	-
Tenn.	20	11	9	10	-	-	-	-	-	28	37	35	2	8
Ala.	9	6	8	9	-	-	-	-	-	-	37	66	4	5
Miss.	5	-	3	1	-	-	-	-	-	-	31	31	9	9
W.S. CENTRAL	105	115	48	41	1	30	-	3	33	19	309	281	51	215
Ark.	9	8	2	3	-	2	-	-	2	1	29	40	10	5
La.	6	1	5	8	-	17	-	1	18	1	46	36	12	27
Okla.	45	67	1	7	-	-	-	-	-	-	35	30	-	23
Tex.	45	39	40	23	1	11	-	2	13	17	199	175	29	160
MOUNTAIN	11	17	55	30	-	68	-	2	70	164	173	152	25	152
Mont.	-	-	3	-	-	-	-	-	-	-	3	6	1	-
Idaho	-	3	1	2	-	1	-	1	2	1	9	16	3	9
Wyo.	3	5	-	1	-	-	-	-	-	-	7	7	-	2
Colo.	-	1	25	13	-	26	-	-	26	19	45	30	2	4
N. Mex.	1	5	6	3	-	30	-	1	31	-	35	13	N	N
Ariz.	1	-	10	5	-	10	-	-	10	1	51	53	2	96
Utah	1	2	6	4	-	-	-	-	-	134	15	18	11	26
Nev.	5	1	4	2	-	1	-	-	1	9	8	9	6	15
PACIFIC	109	72	273	237	-	121	-	11	132	81	517	536	224	266
Wash.	10	4	21	29	-	16	-	4	20	4	80	83	12	18
Oreg.	14	6	22	15	-	-	-	3	3	2	99	119	N	N
Calif.	85	62	217	177	-	105	-	3	108	61	322	326	191	227
Alaska	-	-	3	2	-	-	-	-	-	10	12	2	13	4
Hawaii	-	-	10	14	-	-	-	1	1	4	4	6	8	17
Guam	-	-	-	-	U	-	U	-	-	228	3	-	3	6
P.R.	-	-	1	5	-	11	-	-	11	11	23	7	2	2
V.I.	-	-	-	-	U	-	U	-	-	-	-	-	2	4
Amer. Samoa	-	-	-	-	U	-	U	-	-	-	-	-	-	2
C.N.M.I.	-	-	1	1	U	-	U	-	-	29	-	-	-	2

*For imported measles, cases include only those resulting from importation from other countries.

N: Not notifiable

U: Unavailable

-: no reported cases

TABLE II. (Cont'd.) Cases of selected notifiable diseases, United States, weeks ending November 11, 1995, and November 12, 1994 (45th Week)

Reporting Area	Pertussis			Rubella			Syphilis (Primary & Secondary)		Tuberculosis		Rabies, Animal	
	1995	Cum. 1995	Cum. 1994	1995	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994	Cum. 1995	Cum. 1994
UNITED STATES	90	3,581	3,535	-	135	209	12,645	18,282	17,289	18,872	6,003	6,786
NEW ENGLAND	7	494	421	-	47	128	146	191	438	430	1,339	1,671
Maine	-	43	18	-	1	-	2	4	12	27	45	-
N.H.	-	46	72	-	1	-	1	4	18	14	134	190
Vt.	-	64	41	-	-	-	-	-	2	8	163	125
Mass.	7	312	250	-	7	124	60	80	243	219	386	639
R.I.	-	4	6	-	-	2	4	13	43	37	291	40
Conn.	-	25	34	-	38	2	79	90	120	125	320	677
MID. ATLANTIC	18	346	565	-	14	6	694	1,213	3,506	3,867	1,148	1,793
Upstate N.Y.	14	195	217	-	5	5	44	154	447	517	443	1,342
N.Y. City	-	33	152	-	8	-	332	539	1,866	2,209	-	-
N.J.	-	14	15	-	1	1	141	202	676	679	304	238
Pa.	4	104	181	-	-	-	177	318	517	462	401	213
E.N. CENTRAL	8	366	530	-	5	9	2,226	2,716	1,684	1,805	87	57
Ohio	-	141	143	-	-	-	771	1,029	244	293	12	4
Ind.	6	58	58	-	1	-	241	228	202	160	12	13
Ill.	1	90	98	-	1	1	805	937	836	907	15	20
Mich.	1	65	88	-	3	8	257	255	340	394	39	12
Wis.	-	12	143	-	-	-	152	267	62	51	9	8
W.N. CENTRAL	1	242	188	-	-	2	658	1,033	502	504	313	193
Minn.	-	127	85	-	-	-	36	43	124	121	22	15
Iowa	1	12	19	-	-	-	43	56	53	53	109	76
Mo.	-	53	40	-	-	2	542	868	195	219	23	23
N. Dak.	-	8	4	-	-	-	-	1	4	9	26	12
S. Dak.	-	11	19	-	-	-	-	2	22	22	86	34
Nebr.	-	9	9	-	-	-	11	11	20	17	5	-
Kans.	-	22	12	-	-	-	26	52	84	63	42	33
S. ATLANTIC	1	302	324	-	25	15	3,249	4,753	2,849	3,331	1,879	1,789
Del.	-	10	3	-	-	-	15	24	46	40	74	56
Md.	-	35	68	-	-	-	137	275	241	298	265	481
D.C.	-	6	8	-	-	-	97	191	91	102	11	2
Va.	-	19	36	-	-	-	519	699	255	292	391	378
W. Va.	-	-	4	-	-	-	10	9	61	71	107	69
N.C.	-	110	79	-	1	-	996	1,461	377	423	423	154
S.C.	1	26	13	-	1	-	505	709	279	331	114	158
Ga.	-	28	28	-	-	2	647	723	319	582	256	337
Fla.	-	68	85	-	23	13	323	662	1,180	1,192	238	154
E.S. CENTRAL	-	262	127	-	-	-	3,267	3,426	1,385	1,373	256	205
Ky.	-	20	60	-	-	-	179	183	280	268	26	22
Tenn.	-	204	22	-	-	-	779	921	360	469	86	71
Ala.	-	35	33	-	-	-	562	573	348	377	135	108
Miss.	-	3	12	N	N	N	1,747	1,749	397	259	9	4
W.S. CENTRAL	1	273	184	-	8	13	1,674	3,921	2,362	2,451	521	614
Ark.	-	37	27	-	1	-	94	418	208	212	-	31
La.	-	17	10	-	-	-	899	1,503	6	15	43	63
Okla.	-	31	26	-	-	4	165	136	326	213	28	34
Tex.	1	188	121	-	7	9	516	1,864	1,822	2,011	450	486
MOUNTAIN	12	489	433	-	5	5	206	214	559	484	158	142
Mont.	-	3	9	-	-	-	4	3	10	9	43	18
Idaho	-	90	49	-	-	-	-	1	14	11	3	3
Wyo.	-	1	-	-	1	-	1	1	4	8	25	19
Colo.	2	89	206	-	-	-	100	109	66	70	9	18
N. Mex.	10	125	23	-	-	-	34	19	71	55	6	7
Ariz.	-	149	108	-	3	-	34	40	273	184	49	55
Utah	-	27	35	-	1	4	4	11	37	41	15	13
Nev.	-	5	3	-	-	1	29	30	84	106	8	9
PACIFIC	42	807	763	-	31	31	525	815	4,004	4,627	302	322
Wash.	18	294	106	-	2	-	13	30	202	221	7	15
Oreg.	1	54	97	-	2	4	9	33	48	90	-	13
Calif.	23	412	542	-	24	23	502	746	3,546	4,032	291	261
Alaska	-	1	-	-	-	-	1	3	63	74	4	33
Hawaii	-	46	18	-	3	4	-	3	145	210	-	-
Guam	U	1	2	U	-	1	8	3	38	73	-	-
P.R.	-	14	2	-	-	-	279	279	195	189	46	71
V.I.	U	-	-	U	-	-	2	28	-	-	-	-
Amer. Samoa	U	-	1	U	-	-	-	1	4	4	-	-
C.N.M.I.	U	-	-	U	-	-	12	1	16	28	-	-

U: Unavailable - : no reported cases

**TABLE III. Deaths in 121 U.S. cities,* week ending
November 11, 1995 (45th Week)**

Reporting Area	All Causes, By Age (Years)						P&I†	Total	Reporting Area	All Causes, By Age (Years)						P&I†	Total
	All Ages	≥65	45-64	25-44	1-24	<1				All Ages	≥65	45-64	25-44	1-24	<1		
NEW ENGLAND	541	393	95	40	6	7	29		S. ATLANTIC	1,104	684	232	128	35	23	78	
Boston, Mass.	130	82	27	16	1	4	6		Atlanta, Ga.	122	75	26	14	4	3	5	
Bridgeport, Conn.	44	36	4	2	2	-	2		Baltimore, Md.	255	163	51	34	3	3	27	
Cambridge, Mass.	31	23	7	1	-	-	4		Charlotte, N.C.	104	68	23	7	4	2	8	
Fall River, Mass.	33	26	4	3	-	-	2		Jacksonville, Fla.	101	66	24	8	3	-	7	
Hartford, Conn.	47	31	11	4	1	-	-		Miami, Fla.	124	66	27	24	4	3	-	
Lowell, Mass.	29	19	5	4	1	-	3		Norfolk, Va.	43	24	11	5	-	2	1	
Lynn, Mass.	8	7	-	1	-	-	3		Richmond, Va.	91	55	16	9	6	5	4	
New Bedford, Mass.	23	22	1	-	-	-	3		Savannah, Ga.	51	33	13	4	1	-	8	
New Haven, Conn.	32	26	5	1	-	-	2		St. Petersburg, Fla.	47	37	5	3	-	2	6	
Providence, R.I.	54	41	11	1	-	1	1		Tampa, Fla.	159	95	32	20	9	3	12	
Somerville, Mass.	2	2	-	-	-	-	-		Washington, D.C.	U	U	U	U	U	U	U	
Springfield, Mass.	45	26	14	3	1	1	2		Wilmington, Del.	7	2	4	-	1	-	-	
Waterbury, Conn.	13	11	1	1	-	-	1										
Worcester, Mass.	50	41	5	3	-	1	-		E.S. CENTRAL	794	511	167	73	23	19	61	
MID. ATLANTIC	2,201	1,426	426	261	45	42	100		Birmingham, Ala.	100	65	19	11	3	2	4	
Albany, N.Y.	64	43	9	7	2	3	4		Chattanooga, Tenn.	84	62	17	3	1	1	3	
Allentown, Pa.	19	14	2	2	1	-	-		Knoxville, Tenn.	103	67	20	8	4	4	11	
Buffalo, N.Y.	95	80	9	4	1	1	4		Lexington, Ky.	101	63	25	5	3	5	7	
Camden, N.J.	20	11	5	2	-	2	-		Memphis, Tenn.	135	75	37	16	5	2	17	
Elizabeth, N.J.	9	3	5	1	-	-	-		Mobile, Ala.	79	53	10	14	1	1	8	
Erie, Pa.‡	35	27	6	1	-	1	2		Montgomery, Ala.	45	32	9	1	3	-	2	
Jersey City, N.J.	40	24	9	7	-	-	-		Nashville, Tenn.	147	94	30	15	3	4	9	
New York City, N.Y.	1,256	788	262	157	28	20	54		W.S. CENTRAL	1,249	763	269	134	55	28	61	
Newark, N.J.	78	28	23	24	3	-	7		Austin, Tex.	57	38	7	8	3	1	1	
Paterson, N.J.	27	16	6	4	1	-	3		Baton Rouge, La.	36	26	7	3	-	-	2	
Philadelphia, Pa.	200	127	39	23	7	4	6		Corpus Christi, Tex.	46	25	15	3	-	3	1	
Pittsburgh, Pa.§	41	28	7	4	-	2	2		Dallas, Tex.	198	117	42	23	13	3	4	
Reading, Pa.	11	10	-	1	-	-	2		El Paso, Tex.	133	83	24	14	9	3	9	
Rochester, N.Y.	110	80	18	9	-	3	5		Ft. Worth, Tex.	92	65	16	9	-	2	4	
Schenectady, N.Y.	26	17	5	4	-	-	-		Houston, Tex.	274	149	70	40	9	6	15	
Scranton, Pa.§	28	24	3	-	-	1	-		Little Rock, Ark.	71	50	14	3	1	3	9	
Syracuse, N.Y.	82	59	14	6	-	3	7		New Orleans, La.	90	48	20	13	8	1	-	
Trenton, N.J.	24	17	2	3	-	2	1		San Antonio, Tex.	114	72	30	7	5	-	8	
Utica, N.Y.	18	15	-	1	2	-	1		Shreveport, La.	45	38	5	1	-	1	3	
Yonkers, N.Y.	18	15	2	1	-	-	2		Tulsa, Okla.	93	52	19	10	7	5	5	
E.N. CENTRAL	1,878	1,249	363	147	51	66	122		MOUNTAIN	627	415	105	62	31	14	43	
Akron, Ohio	52	41	8	3	-	-	-		Albuquerque, N.M.	87	57	14	9	6	1	4	
Canton, Ohio	31	28	2	-	-	1	5		Colo. Springs, Colo.	58	37	11	5	4	1	2	
Chicago, Ill.	428	249	91	58	16	12	26		Denver, Colo.	U	U	U	U	U	U	U	
Cincinnati, Ohio	85	56	14	7	4	4	7		Las Vegas, Nev.	105	64	19	15	6	1	8	
Cleveland, Ohio	131	84	33	4	4	6	2		Ogden, Utah	30	28	2	-	-	-	3	
Columbus, Ohio	166	111	30	14	6	5	11		Phoenix, Ariz.	131	76	25	18	5	7	12	
Dayton, Ohio	89	61	18	7	1	2	5		Pueblo, Colo.	15	12	3	-	-	-	-	
Detroit, Mich.	143	81	43	10	4	5	4		Salt Lake City, Utah	98	62	17	8	8	3	8	
Evansville, Ind.	44	36	5	3	-	-	2		Tucson, Ariz.	103	79	14	7	2	1	6	
Fort Wayne, Ind.	55	40	12	1	-	2	2		PACIFIC	1,131	785	203	100	28	15	104	
Gary, Ind.	17	11	6	-	-	-	2		Berkeley, Calif.	15	8	5	1	1	-	2	
Grand Rapids, Mich.	61	44	11	2	-	4	9		Fresno, Calif.	87	60	15	6	4	2	9	
Indianapolis, Ind.	158	95	33	18	4	8	12		Glendale, Calif.	U	U	U	U	U	U	U	
Madison, Wis.	78	52	15	5	1	5	14		Honolulu, Hawaii	73	48	15	9	1	-	6	
Milwaukee, Wis.	133	99	18	8	5	3	10		Long Beach, Calif.	85	64	8	9	2	2	10	
Peoria, Ill.	29	23	5	-	1	-	2		Los Angeles, Calif.	U	U	U	U	U	U	U	
Rockford, Ill.	48	35	5	1	-	7	6		Pasadena, Calif.	26	18	6	2	-	-	4	
South Bend, Ind.	24	14	5	3	2	-	-		Portland, Ore.	134	97	21	13	1	2	8	
Toledo, Ohio	57	51	2	2	1	1	1		Sacramento, Calif.	U	U	U	U	U	U	U	
Youngstown, Ohio	49	38	7	1	2	1	2		San Diego, Calif.	104	69	19	10	3	3	11	
W.N. CENTRAL	657	466	108	41	17	12	30		San Francisco, Calif.	122	71	27	22	2	-	11	
Des Moines, Iowa	52	37	8	5	1	1	2		San Jose, Calif.	190	138	36	12	2	2	17	
Duluth, Minn.	22	17	3	1	1	-	1		Santa Cruz, Calif.	29	25	4	-	-	-	5	
Kansas City, Kans.	25	20	3	2	-	-	1		Seattle, Wash.	107	68	23	8	7	1	10	
Kansas City, Mo.	93	54	16	2	5	3	6		Spokane, Wash.	60	44	7	3	4	2	4	
Lincoln, Nebr.	23	17	3	3	-	-	1		Tacoma, Wash.	99	75	17	5	1	1	7	
Minneapolis, Minn.	104	77	20	6	1	-	10		TOTAL	10,182‡	6,692	1,968	986	291	226	628	
Omaha, Nebr.	114	85	15	10	-	4	4										
St. Louis, Mo.	89	57	20	5	5	2	-										
St. Paul, Minn.	67	51	11	2	3	-	2										
Wichita, Kans.	68	51	9	5	1	2	3										

*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 - : no reported cases

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