

CD SUMMARY

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• Office of Epidemiology and Health Statistics •

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COMMUNICABLE DISEASE ANNUAL SUMMARY – 1991

OVER 16,000 INDIVIDUAL morbidity reports were filed in Oregon in 1991. This total is very similar to that reported in 1990. By individual diagnosis, however, not everything was business as usual. In this issue, the graphs show totals (number of reported cases) for several diseases over the past decade; noteworthy trends and events are discussed in the text. A more complete summary table for 1986-1991 appears on the back.

HEPATITIS

The continued decline in reported hepatitis A last year provided welcome relief from the epidemic case counts of the late 1980s. Since 1989, the number of reported cases has plummeted 81%. A striking change has been noted in age-specific incidence rates, with now higher rates among persons under the age of 20, compared to older individuals.

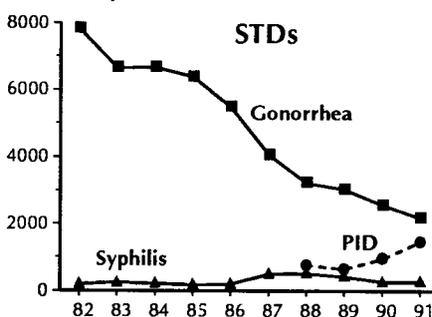
In 1991, hepatitis B registered its fourth consecutive decline. The incidence rate has fallen most dramatically among persons between the ages of 15 and 30. Given the similar transmission patterns of HBV and HIV, it is tempting to think that AIDS awareness may be responsible for at least some of this decline. To strengthen these trends, the Health Division has begun a pilot program of hepatitis B immunization of adolescents and young adults in a variety of settings, including school-based clinics, jails, and drug treatment clinics. At the county level, there is a renewed emphasis on case investigations of carriers, in recognition of the fact that they are responsible for most virus transmission. The recent addition of hepatitis B to routine infant immunizations will begin to pay off in ten to fifteen years.

NANB hepatitis increased last year, reflecting increasing reports of hepatitis C. Physicians are reminded that hepatitis C

disease is reportable in Oregon (as NANB), but seropositive individuals *per se* are not, unless evaluation reveals signs of active disease consistent with acute or chronic infection. Positive HCV test reports will not be made reportable by laboratories until they are shown to be indicative of recent infection.

STDs

Chlamydia continues to be the most commonly reported infection in Oregon, representing almost half of all case reports. In 1991, 88% of reported cases were female, undoubtedly reflecting a screening bias. The reported incidence of pelvic inflammatory disease continues to increase.

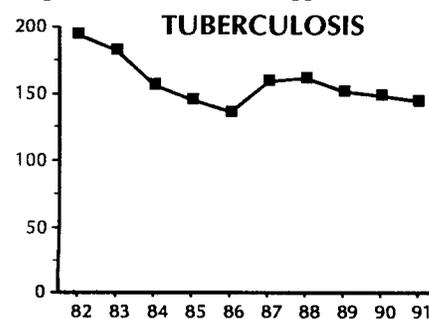


Only 13% of PID reports last year came from the private sector, raising the possibility of underreporting. Physicians are reminded that, as there is no diagnostic laboratory test for PID, we rely entirely on their reports to monitor the incidence of this condition. All cases of acute PID are reportable in Oregon. Syphilis held steady at a level slightly higher than was seen in the early 1980s, prior to the 1987-89 epidemic. The steady downward trend in gonorrhea, which began in 1973, continued with another 15% decline. The total of 2172 cases reported in 1991 is the lowest since 1963—even more striking given that Oregon's population has grown 58% since then.

TUBERCULOSIS

After falling markedly since the turn of the century, the reported incidence of TB in Oregon has been fairly stable over the past eight years. The 1991 rate (4.9 new cases/100,000 population) is the lowest ever recorded. Nonetheless, there is a growing concern nationally about the potential for the resurgence of TB—a potential already being realized in some populations. An excellent review of this

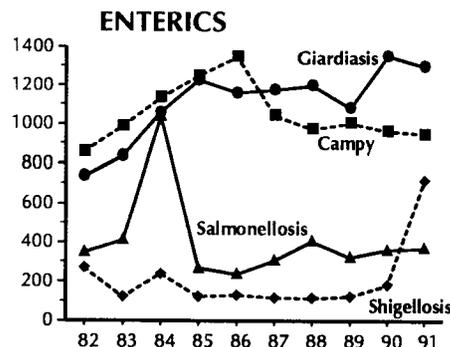
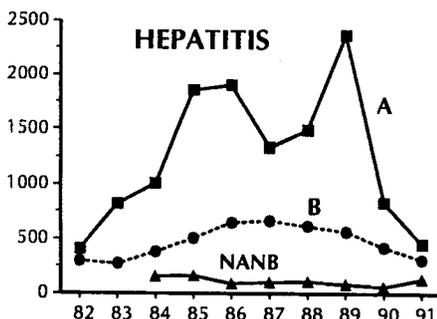
problem appeared recently in *Newsweek*, of all places (March 16, 1992, pp. 53-57).



ENTERIC DISEASES

If nothing else, *Shigella* hit the fan in 1991. In 1990, we expressed concern about the almost 50% increase in cases from 1989. This year's unprecedented 300% increase already makes that seem like the good old days. A community-wide outbreak in Portland began in early April 1991, and continued through most of the year. Another outbreak in July and August was linked to recreational water exposure at Blue Lake, in Multnomah County. In a ripple effect, later generations of cases occurred in an ever-widening circle of family and daycare settings, emphasizing the very high rate of secondary infections with shigellosis. The decline in hepatitis A notwithstanding, apparently not everyone has mastered the use of soap and water.

The Blue Lake outbreak also included at least 26 primary and secondary cases of gastroenteritis caused by *Escherichia coli* O157:H7, contributing to a 105% increase in case counts over 1990 (the first complete year of reporting). We expect the number of sporadic cases of O157-caused disease to grow over the next several years, as awareness of this pathogen (and concomitant laboratory testing) continues to increase.



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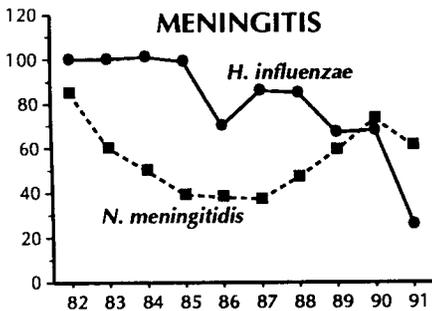
CD SUMMARY

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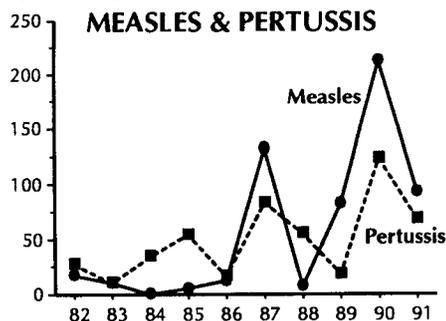
There were no significant changes in the reported incidence of salmonellosis, amebiasis, campylobacteriosis, giardiasis, and yersiniosis.

MENINGITIS

There was a modest (16%) decline in reported meningococcal disease. More noteworthy was the finding that 48% of serogrouped *Neisseria meningitidis* isolates in 1991 were group C—the highest proportion in the past two decades.



To end on a bright note, we are happy to announce that only 26 cases of invasive disease due to *Haemophilus influenzae* were reported last year. This is the lowest total ever reported, and already a 62% reduction from 1990, when conjugate vaccines became available for children less than 15 months old. Health care workers everywhere should take pride in this rapidly evolving success story.



Reported Diseases in Oregon, Annual Totals, 1986–1991						
Diagnosis	1986	1987	1988	1989	1990	1991
AIDS	69	175	177	221	328	272
Amebiasis	81	61	86	99	144	91
Campylobacteriosis	1344	1039	970	999	958	941
Chlamydial Infection			7135	6734	7387	7327
<i>Escherichia coli</i> O157					55	113
Giardiasis	1157	1171	1194	1078	1348	1294
Gonorrhea	5471	4043	3221	3025	2549	2172
<i>Haemophilus influenzae</i>	70	86	85	67	68	26
Hepatitis A	1899	1328	1483	2366	829	449
Hepatitis B	644	660	612	563	420	308
Hepatitis B (carriers)		276	356	421	555	299
Malaria	19	6	19	21	20	12
Measles	12	132	7	82	212	93
NANB Hepatitis	87	104	105	83	59	132
<i>Neisseria meningitidis</i>	38	37	47	59	73	61
Pelvic Inflammatory Disease			757	644	956	1452
Pertussis	16	83	55	18	123	68
Rocky Mt. Spotted Fever	0	1	2	2	1	0
Rubella	4	2	0	3	77	5
Salmonellosis	235	305	404	322	359	368
Shigellosis	127	114	112	121	178	712
Syphilis	202	503	515	424	261	277
Tetanus	0	1	0	0	1	1
Tuberculosis	136	159	161	151	148	144
Tularemia	0	5	2	5	2	2
Typhoid	0	3	8	6	5	6
Yersiniosis	16	12	16	20	18	17

THANK YOU FOR REPORTING