

April 30, 1996 Vol. 45, No. 9

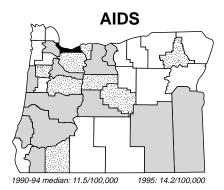
Telephone 503/731-4023 Emergencies 503/731-4030 Fax 503/731-4798 cd.summary@state.or.us

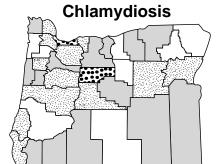
CENTER FOR DISEASE PREVENTION & EPIDEMIOLOGY • OREGON HEALTH DIVISION

COMMUNICABLE DISEASE REPORTING IN OREGON: 1995 IN REVIEW

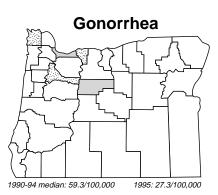
ALLIES FOR 1995 are essentially com-

plete, and today's space is devoted to





1990-94 median: 197.5/100,000 1995: 174.6/100,000

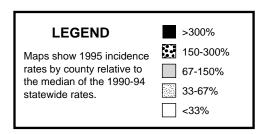


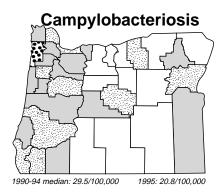
our annual summary of communicable disease reports. Figures and tables reflect data for cases with onset of clinical illness in 1995. If onset was not reported, date of report was used. The maps are one way of comparing county-by-county incidence rates with an "average" figure—in this case an arbitrarily determined median of statewide rates for the preceding five years. Medians often are used to minimize the influence of outlying data elements, e.g., the effect of a massive epidemic one year on a rolling average. The state would be uniform grey if incidence rates were uniform (duh...) and similar to previous years.

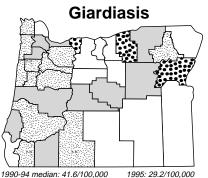
Hepatitis A rates soared to all-time highs in

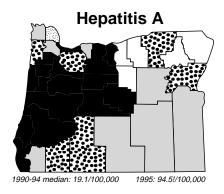
Hepatitis A rates soared to all-time highs in 1995. Few areas in the state were spared. After flirting most of the year with the mythical "goal" of 100 cases/100,000 population (approximately 10 times the national rate), Oregonians cleaned up their act in time for Thanksgiving; and the annual rate ended up at "only" 92.5/100,000. Preliminary data suggest that rates may fall 30-50% in 1996.

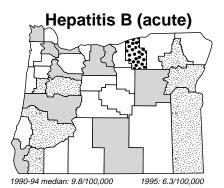
Gonorrhea and syphilis rates continued to fall; *Chlamydia trachomatis* held its own as the most frequently reported pathogen in Oregon.

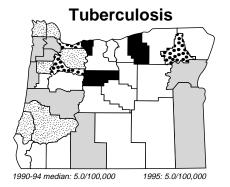


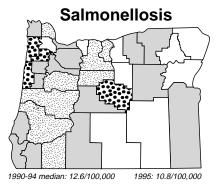












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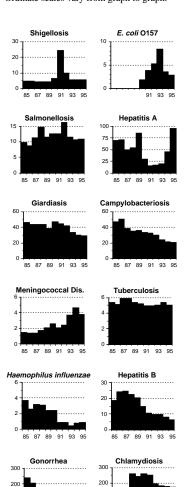
CD Summary, 800 NE Oregon St., Suite 730, Portland, OR 97232

CD SUMMARY

April 30, 1996 Vol. 45, No. 9 SECOND CLASS
POSTAGE
PAID
Portland, Oregon

INCIDENCE RATES FOR SELECTED DISEASES IN OREGON, 1985-95

Crude rates are shown as cases/100,000. Ordinate scales vary from graph to graph.



100

AIDS

87 89 91 93 95

85 87 89 91 93 95

Syphilis

85 87 89 91 93 95

BENTON 75,500 2 19 8 15 48 8 9 1 116 4 3 1 5 1 0 0 0 1 0 1 2 0 0 CLACKAMAS 308,600 1 74 8 67 148 36 15 19 353 33 4 1 27 3 1 0 15 6 7 3 2 2 0 CLATSOP 34,300 0 9 1 8 5 4 0 0 73 12 4 1 1 0 0 0 0 0 0 0 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 0 0 0 0 COLATSOP 34,300 0 4 0 3 5 2 1 1 4 2 0 1 1 2 2 0 1 0 3 1 1 1 1 0 0 0 0 0 COLATSOP 34,300 0 1 1 1 4 4 0 0 1 1 2 2 0 1 1 0 3 1 1 1 1 0 0 0 0 0 COLATSOP 34,300 0 1 1 1 4 4 0 0 1 1 0 1 1 0 0 1 1 0 0 1 1 0 0 0 0																								
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The number of new AIDS cases was lower for the second year in a row (see graph). This is almost certainly due to the continued effects of 1993 changes* in the AIDS case definition to include low CD4 cell counts, rather than to any significant decline in the number of people becoming ill.

Most reported enteric bacterial disease fell, particularly *E. coli* O157:H7 infections and campylobacteriosis. We hope that this reflects decreasing incidence, rather than a

*that was a lot of changes.

decreasing probability of ordering stool cultures or reduced access to care.

Physicians and other health care workers are required by law to report the name, address, phone number, date of birth, and date of symptom onset for their patients with any of a pretty long list of diagnoses. Reports are normally made to local health departments. For a list of what's reportable in Oregon, or for more information about disease reporting, contact your local health department or the Health Division (that's us).