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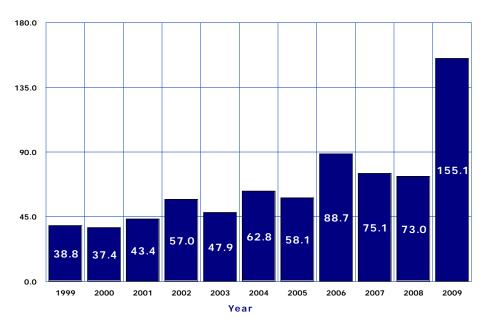
NON-SEXUALLY TRANSMITTED DISEASES

The infectious diseases designated as notifiable vary slightly by state. A notifiable disease is one for which regular, frequent, and timely information regarding individual cases is considered necessary for the prevention and control of the disease. All states generally report the internationally quarantinable diseases (i.e., cholera or plague) in compliance with the World Health Organization's International Health Regulations.

Data on morbidity, levels of disease and disability in the Arizona population, are obtained for certain infectious diseases that must be reported by law. The Bureau of Epidemiology and Disease Control Services conducts surveillance and monitoring of these reportable diseases and it provided data for the respective sections of this chapter and sections 5F, 6A and 6B.

This section provides some illustrative findings from the tabulated data. It is not intended to be an exhaustive analysis of the incidence of infectious diseases in the State. There is more information available online on the website of the Office of Infectious Disease Services at http://www.azdhs.gov/phs/oids/data_reports.htm

Figure 3A-1
Trends in the Incidence Rates of Valley Fever (Coccidioidomycosis)
by Year, Arizona, 1999-2009

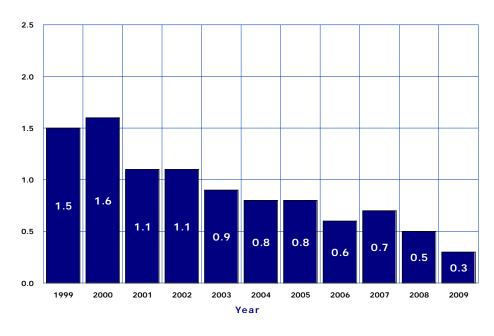


Coccidioidomycosis or Valley Fever is a fungal infection caused by inhalation of airborne spores that are present in the soil of southwestern United States, California, and parts of Central and South America. Most infections are asymptomatic or self-limited in patients with healthy immune systems. In rare instances, severe lung disease or disseminated infection can develop in patients. In 2008 (the latest available year), 63.4 percent of coccidioidomycosis in the United States occurred in Arizona.

Valley Fever imposed the greatest burden on morbidity among all nonsexually transmitted, notifiable diseases in Arizona in 2009. The reported incidence of Valley Fever increased sharply from 4,768 cases in 2008 to 10,233 cases in 2009 primarily because certain laboratories in the State adopted a less stringent case definition. The 2009 incidence rate of 155.1/100,000 (Figure 3A-1, Table 5F-2) was 4.1 times greater than the incidence rate 37.4/100,000 in 2000.

Number of cases per 100,000 population.

Figure 3A-2
Trends in Case Fatality Rates for Valley Fever (Coccidioidomycosis)
by Year, Arizona, 1999-2009



Despite the increase in the incidence rates, the annual mortality rates steadily declined. Thirty-five from among 10,223 Arizonans who had *Valley Fever* in 2009, died from it (**Table 3A-2**) for a case fatality rate of 0.3 deaths per 100 cases, a decrease from 0.7/100 in 2007 and 0.5 in 2008 (**Figure 3A-2**).

Number of deaths per 100 reported cases

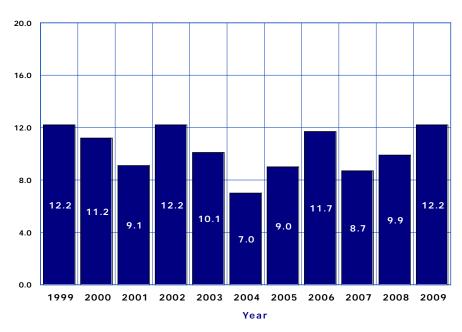
Shigellosis is an infectious disease caused by a group of bacteria called Shigella that can cause diarrhea in humans. In addition to spread from one person to another, Shigellae can be transmitted through contaminated foods, sexual contact, and water used for drinking or recreational purposes.

Shigellosis was the second most common enteric disease to afflict Arizonans in 1999. In 2000 - 2009, shigellosis was the third most common enteric disease to afflict Arizonans after salmonellosis and campylobacteriosis (Table 3A-1).

The number of reported cases of *shigellosis* increased from 557 in 2007 to 806 in 2009. The incidence rate of *shigellosis* increased to 12.2 cases per 100,000 in 2009 (**Figure 3A-3**). The risk of this disease was much higher in Navajo County (56.3/100,000; **Table 5F-2**).

One Arizona resident who had *shigellosis* in 2009, died from it (**Table 3A-2**).

Figure 3A-3
Trends in the Incidence Rates of Shigellosis by Year,
Arizona, 1999-2009



Number of reported cases per 100,000 population.

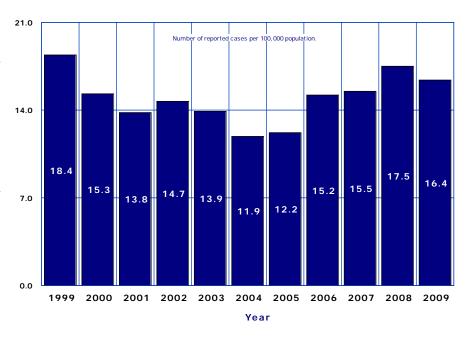
Salmonellosis is a bacterial infection. Most of those who are infected with Salmonella develop diarrhea, fever, and abdominal cramps. In 2008, more than 51,000 cases of Salmonellosis are reported in the United States.

From 1999 to 2002, salmonellosis (excluding *S. Typhi* and *S. Paratyphi*) was the most common enteric disease in Arizona. In 2003 – 2005, campylobacteriosis was the most common, followed by salmonellosis (**Table 3A-1**). In 2006-2009, salmonellosis once again was the most common enteric disease in the State.

The incidence rate of salmonellosis decreased from 17.5 cases per 100,000 population in 2008, to 16.4/100,000 in 2009 (**Figure 3A-4**). The risk of salmonellosis was substantially higher in Graham (55.3/100,000), and Greenlee (34.5/100,000) counties (**Table 5F-2**).

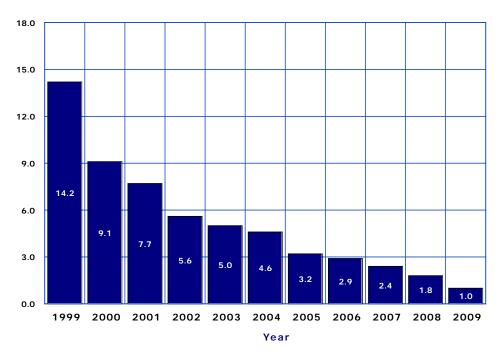
Unlike in 2008, no Arizonan resident who had *salmonellosis* died from it in 2009 (**Table 3A-2**).

Figure 3A-4
Trends in the Incidence Rates of Salmonellosis* by Year,
Arizona. 1999-2009



^{*}Excluding S. Typhi and S. Paratyphi

Figure 3A-5
Trends in the Incidence Rates of Hepatitis A by Year,
Arizona, 1999-2009



Hepatitis A is a liver disease caused by the hepatitis A virus. During 1995-1996, highly effective hepatitis A vaccines became available in the United States. Routine childhood vaccination for hepatitis A was recommended in 1999. The expansion of recommendations for hepatitis A vaccination to include all children in the United States aged 12-23 months is likely to reduce hepatitis rates further.

In Arizona, the incidence rate of *hepatitis A* decreased by 93.0 percent from a recent high of 14.2/100,000 in 1999 to 1.0/100,000 in 2009 (**Figure 3A-5**).

In 2009, the incidence rate of 14.7 cases of hepatitis A per 100,000 residents of Santa Cruz County substantially exceeded the state rate (**Table 5F-2**).

Number of reported cases per 100,000 population

Figure 3A-6
Trends in the Incidence of Pulmonary Tuberculosis and Total Tuberculosis by Year,
Arizona, 1999-2009

□Pulmonary TB ■Other TB

350 39 56 44 45 35 45 26 47 46 44 48 275 251 245 244 246 235 227 217 215 188 179 1999 2004 2005 2007 2008 2009 2000 2001 2002 2003 2006 Total TB 262 261 289 263 295 272 281 314

Tuberculosis (TB) is an infectious disease that usually attacks the lungs, but can attack almost any part of the body. Tuberculosis is spread from person to person through the air.

The number of reported cases of pulmonary tuberculosis slightly increased from 179 in 2008 to 188 in 2009. In contrast, the number of reported cases of tuberculosis other than pulmonary decreased from 56 reported in 2007 to 48 in 2008, and 44 in 2009 (Figure 3A-6, Table 3A-1). The incidence rate of total tuberculosis remained unchanged at 3.5 cases per 100,000 population both in 2008 and 2009 (Table 5F-2). The risk of the disease was 2.9 times higher in La Paz County (10.3 cases per 100,000 population).

Pulmonary tuberculosis accounted for 81.0 percent of all tuberculosis infections in 2009 (Table 3A-1). Eight Arizonans who had tuberculosis died from it in 2009 (Table 3A-2).

Number of reported cases by year