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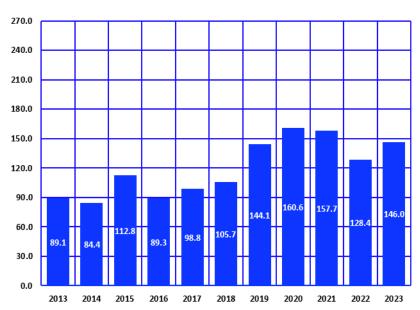
## **NON-SEXUALLY TRANSMITTED DISEASES**

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 Infectious Disease and 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 for Infectious Disease Services at: <a href="http://azdhs.gov/phs/oids/index.htm">http://azdhs.gov/phs/oids/index.htm</a>.

Figure 3A-1
Trends in the Incidence Rates<sup>a</sup> of Valley Fever (Coccidioidomycosis)
by Year, Arizona, 2013-2023

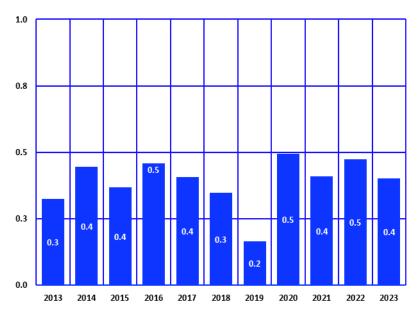


Coccidioidomycosis or Valley Fever is a fungal infection caused by inhalation of airborne spores that are present in the soil of southwestern United States, California, and parts of Central and South America. Most infections are asymptomatic or self-limited in patients with healthy immune systems. In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

Valley Fever imposed the greatest burden on morbidity among all nontransmitted, sexually notifiable diseases in Arizona in 2023. The reported incidence of Valley Fever increased 15.5 percent from 2022 (n=9,515) to (n=10,990) in 2023. The 2023 incidence rate 146.0/100,000 (Figure 3A-1, Table 5F-2) was 13.7 percent higher than the incidence rate of 128.4/100,000 in 2022, but was 63.9 percent higher than the unprecedented incidence rate of 89.1/100,000 in 2013.

Note: a Number of cases per 100,000 population.

Figure 3A-2
Trends in Case Fatality Rates<sup>a</sup> for Valley Fever (Coccidioidomycosis)
by Year, Arizona, 2013-2023



Forty-four of the 10,990 Arizonans who had *Valley Fever* in 2023 died from it (**Table 3A-2**) for a case fatality rate of 0.4 deaths per 100 cases (**Figure 3A-2**). The 2023 case fatality rate for Coccidioidomycosis was 23.5 percent higher than in 2013.

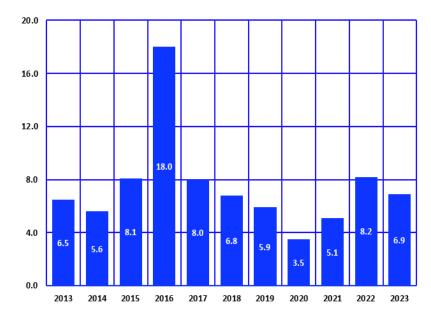
Note: <sup>a</sup> Number of deaths per 100 reported cases.

Figure 3A-3
Trends in the Incidence Rates of Shigellosis by Year,
Arizona, 2013-2023

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

From 2013–2023, shigellosis was the third most common enteric disease to afflict Arizonans after campylobacteriosis and salmonellosis (**Table 3A-1**).

The number of reported cases of shigellosis has decreased by 88 cases from 604 in 2022 to 516 in 2023. Compared to 2022, the incidence rate of shigellosis was 15.9 percent lower at approximately 7 reported cases/100,000 population in 2023 (**Figure 3A-3**).



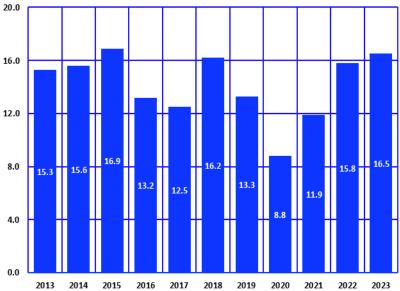
Note: a Number of reported cases per 100,000 population.

Figure 3A-4
Trends in the Incidence Rates<sup>a</sup> of Salmonellosis<sup>b</sup> by Year,

Arizona, 2013-2023

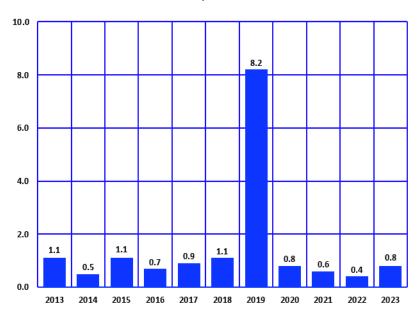
Salmonellosis is a bacterial infection. Most of those who are infected with Salmonella develop diarrhea, fever, and abdominal cramps.

The incidence rate of salmonellosis increased 4.4 percent from 15.8/100,000 in 2022 to 16.5/100,000 in 2023 (**Figure 3A-4**). The risk of salmonellosis was substantially higher in Graham (65.6/100,000), Santa Cruz (48.0/100,000), Navajo (40.1/100,000), Apache (29.9/100,000), and La Paz (29.6/100,000) than the remaining counties (**Table 5F-2**).



Notes: <sup>a</sup> Number of reported cases per 100,000 population; <sup>b</sup> Excluding S. Typhi and S. Paratyphi.

Figure 3A-5
Trends in the Incidence Rates of Hepatitis A by Year,
Arizona, 2013-2023

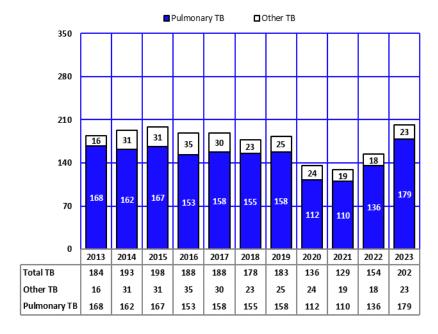


Hepatitis A is a liver disease caused by the hepatitis A virus. During 1995-1996, highly effective hepatitis A vaccines became available in the United States. Routine childhood vaccination for hepatitis A was recommended in 1999. The expansion Λf recommendations for routine hepatitis A vaccination to 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 was 0.8/100,000 in 2023. The highest rate recorded during the 2013-2023 period was 8.2 in 2019. The 2023 incidence rate was approximately 10 times lower than the 2019 rate (8.2/100,000; **Figure 3A-5**).

Note: a Number of reported cases per 100,000 population.

Figure 3A-6
Trends in the Incidence of Pulmonary Tuberculosis and Total Tuberculosis<sup>a</sup>
by Year, Arizona, 2013-2023



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 increased from 136 cases in 2022 to 179 reported cases in 2023. The number of reported cases of tuberculosis other than pulmonary increased from 18 in 2022 to 23 in 2023 cases (**Figure 3A-6, Table 3A-1**). The incidence rate of total tuberculosis increased from 2022 2.1/100,000 to 2.4/100,000 in 2023 (**Table 5F-2**).

Pulmonary tuberculosis accounted for 88.6 percent of all tuberculosis infections in 2023 (**Table 3A-1**). Ten Arizonans who had tuberculosis died from it in 2023, a decrease from 16 in 2021 (**Table 3A-2**).

Note: a Number of reported cases by year.