



# THE PUBLIC'S HEALTH

Newsletter for Medical Professionals in Los Angeles County

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## Prevention Campaign for Women's Health

### May is Women's Health Month

To increase public awareness about women's health issues and the importance of prevention for chronic diseases such as heart disease, diabetes and cancer, the Los Angeles County Board of Supervisors declared 2006 as "The Year of Prevention." The Office of Women's Health, County of Los Angeles, has many resources available for you and your patients. Contact information is available at the end of this article.



Artist: Michelle Allen

### Chronic Disease and Women

"Chronic diseases account for over 1.7 million deaths in the U.S. and three quarters of our nation's health care costs each year." ([www.cdc.gov/nccdphp/power\\_prevention/pdf/power\\_of\\_prevention.pdf](http://www.cdc.gov/nccdphp/power_prevention/pdf/power_of_prevention.pdf)). In 2003, 11.5 million (45.2%) California adults age 18 and over were living with one or more chronic conditions, including heart disease, hypertension, diabetes, asthma or fair / poor health status. In the county, chronic diseases account for 86% of the total disease burden for women.

### Disparities Still Exist

Low-income and women of color have disproportionately higher risk for chronic disease. Besides ethnicity, barriers such as lack of insurance, poverty, language, cultural and other access issues keep many women from utilizing the health care system.

For many without insurance, maintaining good health is very difficult. Uninsured women usually receive less preventive care services, are diagnosed at more advanced disease stages, receive less therapeutic care once diagnosed, and have higher mortality rates (National Coalition on Healthcare; [www.nchc.org/facts/cost.shtml](http://www.nchc.org/facts/cost.shtml)).

### Importance of Prevention Cannot Be Overstated

As health care costs continue to rise at an alarming rate, strategies for prevention are increasingly important to address the very serious human, social and economic consequences of chronic illness. Many health issues are preventable or can be effectively managed with routine lifestyle changes, early diagnosis and early treatment. The largest portion of healthcare

### Health Statistics for Women

- One in 30 women die from breast cancer; while 1 in 3 die from cardiovascular disease.
- Heart disease and heart attacks claim the lives of more women than men each year.
- Sixty-four percent of women who suddenly died from heart disease had no previous signs.
- Heart disease poses a greater threat to women than all forms of cancer combined.
- The following nine **lifestyle** related risk factors account for over 90% of the risk of having a first heart attack.

- Cigarette smoking**
- High cholesterol**
- High blood pressure (Hypertension)**
- Diabetes**
- Abdominal obesity**
- Lack of physical activity**
- Low daily fruit and vegetable consumption**
- Alcohol over-consumption**

resources is still spent on the diagnosis and treatment of chronic disease while only a small amount is spent on prevention efforts.

Continued on page 2

# THE PUBLIC'S HEALTH



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## Women's Health...from page 1

### Prevention Matters! Campaign

In order to address this need, the Office of Women's Health (OWH) has developed the Prevention Matters! Initiative, a multi-lingual, multi-cultural umbrella campaign that addresses general prevention with an emphasis on heart health, the number one killer of women. The goal of the campaign is to reduce the burden of chronic disease among low-income women by eliminating disparities in access, utilization and quality of care; promoting awareness and education on living a healthier lifestyle; increasing access to screenings, treatment, and establishing a medical home; and promoting advocacy and policy opportunities.

The Office of Women's Health is working together with community partners to promote comprehensive, prevention-based strategies that are responsive to the unique health needs of all women. By working together to raise awareness and education, emphasizing health screenings and healthy lifestyles, significant progress can be made to improve the health status of Los Angeles County women.

### What the Los Angeles County Office of Women's Health is Doing

Critical to improving the health status and quality of life of all women in Los Angeles County is the elimination of disparities in access, utilization and quality of care and fostering effective improvements in the health care system. By increasing access to education, risk reduction counseling, screening, diagnosis and treatment, disparities in health for uninsured and low-income women can be reduced as well as decreasing the long-term effects of chronic disease.

Low-income women can be referred to OWH's seven-language hotline for appointments, referrals and information at 1-800 793-8090. Additionally, The Office of Women's Health has information fact sheets available in 6 languages that you can order for your patients. The OWH can be contacted at (626) 569-3850. A web link will soon be available. 

## A preventive health services for women poster is provided in this issue. See center pages.

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We must invest in preventing disease and injury rather than waiting to treat the consequences.

### Where's the money for prevention?

While many agree that prevention is key to a better quality of life, in an overburdened health care system, most providers that care for low-income women without insurance, utilize the majority of their resources on previously diagnosed, chronically ill, or currently sick patients and have little or no ability to extend their services to preventive care services. Although there are some ongoing preventive services attached to categorical funding sources (i.e., family planning, breast and cervical cancer screening and diagnosis), there is virtually no money designated for general preventive health.

# A BLOOM BY ANY OTHER NAME

## Investigating shellfish toxins

Each year from May 1st to October 31st public health investigators (PHI) place and maintain yellow mussel quarantine signs along the Los Angeles County coastline. During these months, mussels are found to have higher concentrations of the paralytic shellfish poisoning (PSP) toxin. The causative agent for PSP is *Alexandrium catenellum*, a dinoflagellate.

### This has been a decade's long practice.

PHIs also distribute annual statewide quarantine orders to bait shop owners and inspect these bait shops to ensure that mussels are labeled with the required "NOT FOR HUMAN CONSUMPTION" signs.

Shortly after 1991, however, the county and state added surveillance for the presence of domoic acid as well. Domoic acid was identified in samples of mussels, razor clams and other seafood in Washington, Oregon and Monterey Bay. The deaths of sea birds in Monterey Bay were attributed to domoic acid produced by *Pseudo-nitzschia*-a diatom. Now, the public is protected against domoic acid poisoning as well, year-round as long as dangerous levels of domoic acid are present.

Both PSP and domoic acid poisoning may be fatal to humans. With PSP, the first symptoms are tingling and numbness of the lips, tongue and fingertips within a few minutes to a few hours of consuming toxic shellfish. Afterwards an afflicted person has difficulty with balance, muscle coordination, slurred speech and swallowing problems. Total paralysis and death can occur.

With domoic acid poisoning, symptoms can occur from 30 minutes to 24 hours after eating the shellfish. Symptoms can include vomiting, diarrhea, stomach cramps, headaches, dizziness and confusion. In severe cases difficulty breathing, seizures, coma and death can occur. Survivors of severe poisoning suffer permanent short-term memory loss, thus the term amnesic shellfish poisoning (ASP). Since both PSP and domoic acid are toxins, heating the mussels or other bi-valves will not render them safe.

Dangerous levels of domoic acid have been found in the viscera of anchovies, sardines, crab and lobster as well.

Public health investigators have partnered with lifeguards, the U.S. Coast Guard and others to collect water column samples and mussels from various areas along the county coast. In order to determine the extent of the toxic bloom, water column sampling and mussel collections from a variety of areas are needed. Marine biologists are searching for faster, more accurate methods of detection so public warnings can be issued quicker.

Although there have not been known human fatalities due to domoic acid poisoning in the U.S., that is not the case in Canada. An outbreak occurred in eastern Canada in November of 1987. Mussels from an estuary in Prince Edward Island were the source. During that outbreak there were over one hundred cases of domoic acid poisoning and four people died.

Shortly after the harmful effects of domoic acid were discovered, Canada and the U.S. put in place surveillance measures to protect the public. With surveillance measures in place, deaths of marine mammals and seabirds have been confirmed to be the result of this toxin.



This toxin may have been the culprit of "die offs" of the past as well. Alfred Hitchcock was inspired by a true incident that occurred in Capitola, California in 1961. According to The Santa Cruz Sentinel of August 18, 1961, sea birds began colliding into homes and attacking people. The wisdom of the time was that they became disoriented by fog. Days later, Alfred Hitchcock phoned the paper to inform them he would be using the article as research for a new movie based on a novel by Daphne du Maurier. The movie "The Birds" was later released.

It is important to emphasize, however, that bi-valve shellfish caught by certified harvesters **are not at risk**. These are inspected regularly by the State, so enjoy your oysters and mussels. It is good to know that county public health investigators, state and federal agencies as well as academic institutions and the marine based businesses are all looking after the public's health. For more information, consumers can call CDHS' toll -free "Shellfish Information Line" which includes updates on shellfish biotoxins and quarantines, at 1-800-553-4133 Bon appetit! ☞

Ann Baldi, PHI

In collaboration with: Robert Mosby, Chief, PHI  
and Michael Mina, PHI

## Preventive Health Services For Women

Data collected from a variety of sources and compiled by the Los Angeles County Office of Women's Health.

**Getting checked regularly by your doctor can help prevent disease** or find it early, when it is most easily treated. For example, medical screenings help find disease or injury in people who may show no symptoms. Immunizations help prevent certain infections. Preventive services give you options that can save or improve the quality of your life. Below is a list of recommended screenings and preventive services that are important to women. These recommendations are primarily based on information from the U.S. Preventive Services Task Force. However, your own screening or immunization needs may vary depending on your individual risk factors.

Screening/ Intervention	Condition	Disease/Condition Description	When & How Often	What Happens During Screening/Intervention	Why It's Important
<b>Cardiovascular Screenings:</b>					
Cholesterol Test	High Blood Cholesterol	Cholesterol a fatty material in the blood, may cause buildup in the arteries, leading to increased risk for heart disease, stroke, and other blood vessel problems.	Age 45 and over (or younger with risk factors), then at least every 5 years or as doctor recommends <sup>1</sup>	Blood is drawn from the patient and sent to the lab for testing of total cholesterol, LDL and HDL levels.	High LDL cholesterol can cause hardening and narrowing of arteries, which might lead to a heart attack. High cholesterol is very common in women, however, treatment is available. Physical activity and a healthy diet can lower one's cholesterol level.
Blood Pressure Measurement	High Blood Pressure	Blood pressure below 120/80 is considered normal. When the pressure in blood vessels is too high, it can damage the heart, brain, and kidneys.	Part of a general health exam, at least every 2 years <sup>1</sup>	A band placed around the patient's arm is inflated. As the band is deflated, blood pressure is measured.	Though high blood pressure often has no symptoms, once caught it is treatable. Physical activity and a healthy diet can help control blood pressure.
Body Mass Index (BMI)	Obesity/ Overweight	BMI is calculated from a person's weight and height and is used to determine whether a person is obese or overweight.	Part of a general health exam <sup>1</sup>	Weight and height are measured and BMI is calculated. Calculate your BMI at <a href="http://www.nhlbiupport.com/bmi">www.nhlbiupport.com/bmi</a>	Being obese/overweight increases heart disease risk, and is a top preventable cause of death among Americans.
Screening/ Intervention	Condition	Disease/Condition Description	When & How Often	What Happens During Screening/Intervention	Why It's Important
Mammogram	Breast Cancer	Breast cancer is a cancerous growth that begins in the breasts, but may spread if untreated.	Age 40 and over every 1-2 years <sup>1</sup>	After a clinical breast exam by a clinician, each breast is placed between two X-ray panels to get a clear picture of any lumps.	One in eight women are diagnosed with breast cancer. However, early detection can greatly improve survival.
Pap Test	Cervical Cancer	Cervical cancer is an abnormal growth of cells in the cervix (the part between a woman's uterus/womb and vagina).	If sexually active or between ages 21-65, every 1-3 years. Age 65+ discuss with doctor <sup>1</sup>	A speculum is inserted into the vagina to see inside. The doctor uses a brush to take a light scraping of cells, which will be analyzed in a lab.	Pap tests are important for the prevention and early detection of cervical cancer.
<b>Colorectal Exams: Talk to your doctor about which screening or combination of screenings (listed below) is best for you.</b>					
Fecal Occult Blood Test	Colorectal Cancer	Hidden (occult) blood in stool can be a sign of colon cancer.	Age 50 and over, yearly <sup>1</sup>	The patient's stool is examined for any hidden blood. If there is blood, further testing is needed.	Colorectal cancer is the second leading cause of cancer death and the third most commonly diagnosed cancer in the U.S.
Flex-Sigmoidoscopy or Colonoscopy	Colorectal Cancer	Colorectal Cancer is cancer of the colon (large intestine) or rectum (end of large intestine) that often begins as a polyp, or growth.	Age 50 and over, Flex-Sig: every 5 years or as doctor recommends. Colonoscopy: every 10 years <sup>1</sup>	The patient may be offered a drug to feel relaxed. A thin tube with video camera is inserted through the anus into the colon. The doctor will look for and remove any polyps. Test may be uncomfortable but isn't painful.	People over 50 are especially at risk for colorectal cancer. However, early detection through regular screenings can prevent or cure colorectal cancer.
<b>Screenings To Discuss With Your Doctor:</b>					
Blood Sugar Test	Diabetes	Too much sugar in the blood. Symptoms are excessive thirst, weight loss, frequent urination, and blurred vision. However, diabetes may be without symptoms.	If you have symptoms, high blood pressure, or high cholesterol <sup>1</sup>	Blood is tested for sugar levels.	Diabetes can cause heart disease, blindness, stroke and kidney failure. Diabetes is often linked to obesity and lack of physical exercise. Regular exercise and a healthy diet can reduce your risk for diabetes.
Sexually Transmitted	STD's include: HIV, Chlamydia, Gonorrhea, Syphilis, Hepatitis, Genital Herpes	STD's are transmitted through sex. They can cause pain, discomfort, and abnormalities in the genitalia. In women, they have	Talk to your doctor, especially if you change partners or you or your partner has more than one partner. Sexually	There are different tests for different STD's, so you need to be open with your doctor to make sure you get the right tests. Tests may require a blood	STD's can have no symptoms. When caught early with testing many STD's are treatable. Safe

Screening/ Intervention	Condition	Disease/Condition Description	When & How Often	What Happens During Screening/Intervention	Why it's Important
Diseases (STD's) tests	Herpes, Genital Warts and Human Papilloma Virus.	In osteoporosis, the bones become weak and break easily. Fractures of the hip and spine, usually as a result of a fall, can be very disabling.	Age 65 or earlier, if you have risk factors and as doctor recommends <sup>1</sup>	The test is painless and usually uses X-rays to measure bone density in the hip and spine.	1 in 2 women over 50 will have an osteoporosis related fracture in her remaining lifetime. Osteoporosis often has no symptoms. Physical activity and getting enough calcium through a healthy diet and supplements can help maintain healthy bones.
Bone Mineral Density Test	Osteoporosis	Symptoms include feeling sad, hopeless, always tired, being unable to enjoy things, eating and sleeping more or less than usual, having stomach or headaches.	Part of a periodic medical visit <sup>1</sup>	Screening usually consists of taking a questionnaire or survey on one's mood or feelings. It can also involve talking to a counselor.	One in five women experiences depression during their lifetime. Depression is a serious medical condition that can affect one's quality of life and is treatable through therapy and/or medications.
Depression Screen	Depression	Symptoms: craving/depending on alcohol, drinking too much, behaving harmfully to yourself and/or others when drinking	Part of a periodic medical visit <sup>1</sup>	Test consists of a spoken/written survey of drinking patterns.	Alcohol impairs judgement, leads to severe medical problems, and is a leading underlying cause of motor vehicle death.
Alcohol Screen	Alcoholism	Tobacco use increases risks of heart disease, high blood pressure, stroke, lung disease, cancer, tooth/gum disease, and pregnancy complications.	Part of every medical visit <sup>1</sup>	Test consists of a spoken/written survey of tobacco use.	Tobacco use is the leading underlying cause of preventable death and disability in the U.S. It is important to quit whether on your own or with medical assistance.
Tobacco Use Screen	Tobacco Use	Domestic abuse is any act that causes physical, sexual, or psychological harm to partners, family, or relatives, including children, elders, siblings, and spouses.	California Law requires a screen for domestic abuse in routine medical visits at licensed clinics.	Bring concerns of abuse to a doctor, who can provide support and life-saving resources or call the Domestic Violence Hotline at 1-800 978-3600 for a confidential conversation and crisis intervention services and referrals.	About one-third of all women may experience domestic abuse in their lifetime. Often abuse goes unreported. All women should know that help is available.
Domestic Abuse Screen	Domestic Abuse	Disease/Condition Description	When & How Often	What Happens During Screening/Intervention	Why it's Important
<b>Immunizations:</b>					
Influenza (Flu) Vaccine	Influenza (Flu)	A viral infection causing sore throat, cough, fever, fatigue, headache, and/or nausea.	Age 50 and over every year or at an earlier age if clinician recommends <sup>1</sup>	Immunization usually consists of an injection to the upper arm.	Influenza can be serious and even fatal, especially in older women. Vaccines can prevent flu or reduce recovery time.
Pneumo-coccal Vaccine	Pneumo-coccal Pneumonia	A common lung infection, which causes fever, chills, uneasy breathing, chest pain, and severe coughing.	Age 65 and over or at an earlier age if clinician recommends <sup>1</sup>	Immunization is an injection to the upper arm that may cause temporary soreness.	Immunization can prevent pneumonia, which is a leading cause of hospitalization and death among older women.
Tetanus Vaccine	Tetanus	A bacterial disease causing muscle stiffness, especially in the jaw (lockjaw), and fever.	Every ten years <sup>1</sup>	An injection in the upper arm that may cause temporary soreness & swelling.	Tetanus bacteria can enter the body through cuts or wounds. Tetanus is a fatal disease.

# Animals as Sentinels for Infectious Diseases

Like humans, domestic animals and wildlife are exposed to infectious diseases and environmental contaminants in the air, soil, water and food, and they can suffer from acute and chronic diseases from such exposure.

Public health practitioners traditionally use animals as sentinels for rabies. However, many animals can supply a wealth of disease information. For example, in 1968, chickens were the first to alert Japan regarding PCB contamination of rice. More recently in 1999 on the East coast, dead crows sounded the alarm that West Nile virus (WNV) had entered the Western hemisphere. The dead crows were followed by horses dying and then humans. Dead crows heralded the arrival of WNV in Los Angeles County months before any human cases were detected.

There are more than 400 diseases of animals transmissible to people (zoonoses) and the list of emerging infectious diseases is expanding. About 75% of the emerging diseases are zoonoses. In California, over 45% of the reportable human diseases are also zoonoses and over 40% of the reportable animal diseases are zoonoses. Some diseases on the two lists overlap. Examples include: anthrax, brucellosis, encephalomyelitis, Erysipelas, Listeriosis, Rabies, and Tuberculosis.

Over 30 years ago, the U.S. Military had stockpiles of Venezuelan encephalitis vaccine for use with troops in case of biological warfare. In 1971, an epidemic of Venezuelan encephalitis swept across the Mexican border killing thousands of horses. The military responded by releasing its Venezuelan encephalitis vaccine for use in horses in a mandatory vaccination program. Though some horse owners were concerned about using a vaccine not proven in horses, the vaccine proved effective in curbing the epidemic.

Bubonic plague, an infectious bacterial disease, is endemic in Los Angeles County wildlife. Plague in wildlife can be spread to people by the bite of infected fleas. Health officials routinely screen local rodents for evidence of plague. Typically, there is a die-off of sentinel animals, such as ground squirrels, before there are human cases. When plague is detected in wildlife, the community can take precautions to prevent human cases.

Urban wildlife often spend their entire life in the city and systematic evaluation of wildlife can be very educational. Observational studies on urban wildlife are very informative in regard to various infectious diseases. For example, in 1984, a meningoencephalitis with myocarditis was detected in feral skunks in Griffith Park. The causative agent was *Trypanosoma cruzi*.

Over 20% of the feral skunks examined had American trypanosomiasis (Chagas' disease). More than 20 million people in the Americas are infected with this vector-borne disease. It is uncommon in the U.S. and there have been only a few cases reported in California and Texas. The disease is transmitted by triatomine bugs. While biting, infected bugs deposit feces containing parasites on the skin; these infective forms enter through the bite wound or penetrate mucous membranes.

## Tuberculosis in Animals

Five elephants were traveling in the county with a circus for over two months in the summer of 1996. Two of the elephants had been coughing and one had lost several hundred pounds. It was presumed the weight loss was due to an abscessed tooth and the elephant

In the county of Los Angeles in the 1920s, over 30% of the dairy cattle had Tuberculosis. Because of this, it was required that the capital letter "T" be branded on cattle to prevent their resale and movement.

Continued on page 7

## M. bovis can cause progressive disease in most warm-blooded vertebrates, including humans.

was anesthetized for dental work and died. An autopsy determined the cause of death to be related to *M. tuberculosis*. In elephants, the Tuberculin skin test is not reliable. To diagnose *M. tuberculosis* infection in elephants, they receive trunk washes to detect the organism.

Various species of wildlife are susceptible to *M. tuberculosis* infection and present a potential risk to humans when people and wildlife intermingle, such as in wild animal compounds, zoos and circuses.

Three main types of tubercle bacilli may produce infection in host species other than their own. They are *M. tuberculosis*, *M. bovis*, and *M. avium* complex. The two mammalian types are more closely related to each other than to the avian type. *M. tuberculosis* is typically found in humans and nonhuman primates but it can occasionally cause disease in dogs, pigs, elephants, and birds.

*M. bovis* can cause progressive disease in most warm-blooded vertebrates, including humans. It was previously common in U.S. cattle and is an important problem in most species of farmed and wild cervids. Deer appear to be unusually susceptible. Deer parks in the U.S. have experienced infection with *M. bovis*, requiring the depopulation of the herds and the disappearance of the parks.

In the county of Los Angeles in the 1920s, over 30% of the dairy cattle had Tuberculosis. Because of this, it was required that the capital letter "T" be branded on cattle to prevent their resale and movement.

### Physician training on sentinel animals

There are numerous studies regarding impact of diseases in nonhuman animals on human health, but the results are typically published in journals not read by physicians and currently physicians assessing environmental and infectious

disease health risks do not routinely include animal sentinel information. One example of this problem is the lack of a term for the animal sentinel concept in the medical subject heading of MEDLINE.

In recent years, however, there has been a move toward evidence-based medicine in human medicine and veterinary practice and an integration of knowledge from the two disciplines.

As we head into the 21st century, studies of sentinel events in animals may be appearing in the medical literature with increasing frequency. ☞

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## This Issue . . .

<i>Prevention Campaign for Women's Health</i> . . . . .	1
<i>Investigating Shellfish Toxins</i> . . . . .	3
<i>"Preventive Health Services for Women"</i> . . . . .	5
<i>Animals as Sentinels for Infectious Diseases</i> . . . . .	6



# THE PUBLIC'S HEALTH

Newsletter for Medical Professionals in Los Angeles County



COUNTY OF LOS ANGELES  
DEPARTMENT OF HEALTH SERVICES  
**Public Health**

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Los Angeles, California 90012

### Selected Reportable Diseases (Cases)\* - August - October 2005

Disease	THIS PERIOD Dec. 2005	SAME PERIOD LAST YEAR Dec. 2004	YEAR TO DATE Dec.		YEAR END TOTALS		
			2005	2004	2004	2003	2002
AIDS*	102	113	1,524	2,215	2,335	2,532	1,719
Amebiasis	12	9	125	100	98	121	102
Campylobacteriosis	80	53	786	919	915	1,100	1,067
Chlamydial Infections	2,907	3,022	39,981	38,464	38,464	36,555	35,688
Encephalitis	3	9	64	120	137	38	61
Gonorrhea	845	815	10,828	9,696	9,696	8,008	7,800
Hepatitis Type A	74	22	459	321	319	376	438
Hepatitis Type B, Acute	2	9	57	74	71	56	29
Hepatitis Type C, Acute	0	0	3	5	5	0	3
Measles	0	0	0	2	1	0	0
Meningitis, viral/aseptic	73	40	846	846	790	899	466
Meningococcal Infections	5	1	27	14	28	32	46
Mumps	3	0	13	2	2	10	16
Non-gonococcal Urethritis (NGU)	32	122	972	1,470	1,470	1,393	1,393
Pertussis	50	39	347	196	141	130	170
Rubella	0	0	0	0	0	0	0
Salmonellosis	108	97	1,051	1,075	1,185	995	956
Shigellosis	98	32	759	544	550	669	974
Syphilis, primary & secondary	47	46	539	459	459	442	364
Syphilis, early latent (<1 yr.)	35	35	484	381	381	365	353
Tuberculosis	109	219	809	925	856	949	1,025
Typhoid fever, Acute	0	0	12	13	13	16	33

\* Case totals are provisional and may vary following periodic updates of the database.