

# Active Bacterial Core Surveillance (ABCs) Report Emerging Infections Program Network Streptococcus pneumoniae, 1998



## **ABCs Areas**

California (San Francisco County); Connecticut; Georgia (20 county Atlanta area); Maryland (6 county Baltimore area); Minnesota (7 county Twin Cities area); New York (7 county Rochester area); Oregon (3 county Portland area); Tennessee (5 urban counties)

# **ABCs Population**

The surveillance areas represent 17,383,935 persons. Source: U.S. Bureau of the Census, 1998

# **ABCs Case Definition**

Invasive pneumococcal disease: isolation of *Streptococcus pneumoniae* from normally sterile site in resident of a surveillance area in 1998.

## **ABCs Methodology**

Project personnel communicated at least monthly with contacts in all microbiology laboratories serving acute care hospitals in their area to identify cases. Standardized case report forms that include information on demographic characteristics, clinical syndrome, and outcome of illness were completed for each identified case. Pneumococcal isolates were collected and tested for susceptibility at reference laboratories using NCCLS methods. Regular laboratory audits assess completeness of active surveillance and detect additional cases.

All rates of invasive pneumococcal disease were calculated using U.S. Bureau of the Census postcensal population estimates for 1998. For national projections of cases, race- and age-specific rates of disease were applied from the aggregate surveillance area to the age and racial distribution of the 1998 U. S. population. Cases with unknown race were distributed by area based on reported race distribution for known cases within the eight age categories.

#### **Reported ABCs Profiles:**

Race	No. (Rate*)	
White	2,600	(19.1)
Black	1,469	(49.5)
Other	113	(13.7)

Unknown race (n=498) distributed among knowns. \*Cases per 100,000 population for ABCs areas.

Ethnicity	No. (Rate*)	
Hispanic	131	(17.1)
Non-Hispanic	1,725	
Unknown	2,326	

	Case	s	D	eaths
Age (years)	No. (Ra	nte <sup>*</sup> )	No.	(Rate <sup>*</sup> )
<1	397 (16	55.3)	5	(2.07)
1	483 (20	)2.5)	3	(1.26)
2-4	265 (36	5.9)	0	(0.00)
5-17	126 (4.	.0)	3	(0.10)
18-34	349 (8.	1)	15	(0.35)
35-49	783 (17	7.9)	86	(1.96)
50-64	584 (24	4.2)	75	(3.11)
<u>&gt;</u> 65	1,195 (60	).5)	198	(10.03)
Total	4,182 (24	4.1)	385	(2.21)

<sup>\*</sup> Cases or deaths per 100,000 population for ABCs areas

Syndrome		No	. (%)
Meningitis		170	(4.1)
Bacteremia with	nout focus	1,612	(38.5)
Bacteremic pneumonia		2,246	(53.7)
Antibiotic Susceptibility	<b>S</b> *	I <sup>†</sup>	R <sup>‡</sup>
Susceptionity	%	%	%
Penicillin	75.6	10.5	13.9
Cefotaxime	85.9	8.0	6.1
Erythromycin	84.9	0.2	15.0
TMP/Sulfa	70.9	6.0	23.1
Levofloxacin	99.8	0.0	0.2
Vancomycin	100.0	0.0	0.0

Based on reference lab testing of 3,602 isolates.

\* Susceptible; <sup>†</sup> Intermediate; <sup>‡</sup> Resistant

#### National Projection of Invasive Disease:

Cases: 63,000 (23.3/100,000) Deaths: 6,100 (2.2/100,000)

#### Healthy People 2010 Update:

Objective: Decrease the incidence of invasive pneumococcal infections to 50 per 100,000 persons less than 5 years of age and to 46 per 100,000 persons aged 65 and older.

Age (year)	2010 Objective	1998 Rate*
< 5	50/100,000	87.6
<u>&gt; 65</u>	46/100,000	60.2

\*Projected cases per 100,000 U.S. population

#### For more information, visit our web site at:

http://www.cdc.gov/abcs