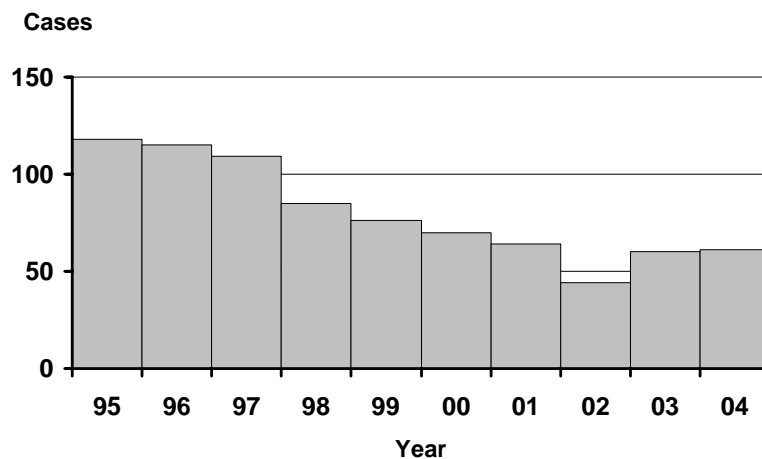


Meningococcal Disease

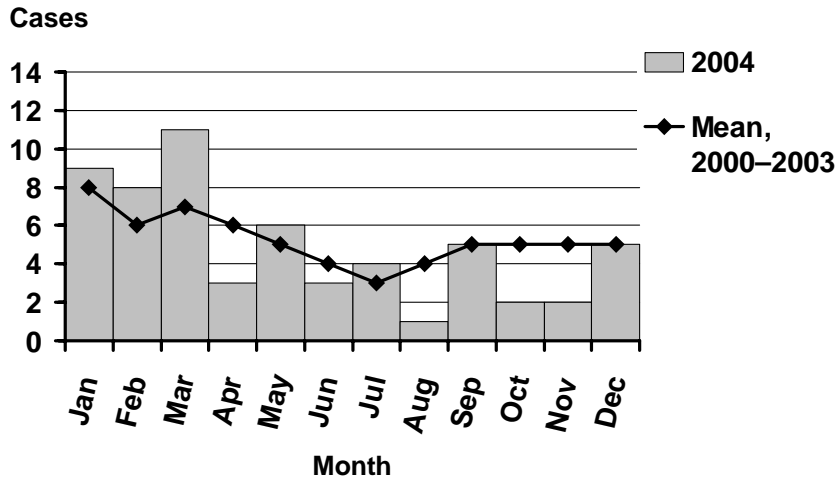
Reported cases of invasive meningococcal infections, including sepsis and meningitis, have declined from hyperendemic levels seen in 1993–1997 to those observed prior to the advent of the ET5 strain of serogroup B. Respiratory secretions and droplets continue to be shared among Oregonians and predispose secondary cases.

Though the overall trend in disease incidence in Oregon is declining, we continue to have higher rates than the nation. Serogroup B organisms make up more than 65% of all Oregon isolates. January through March show an increase in meningococcal activity with the highest rates of disease occurring among infants. A new vaccine for adolescents and young adults was licensed in 2005; however, this vaccine does not protect against Serogroup B disease.

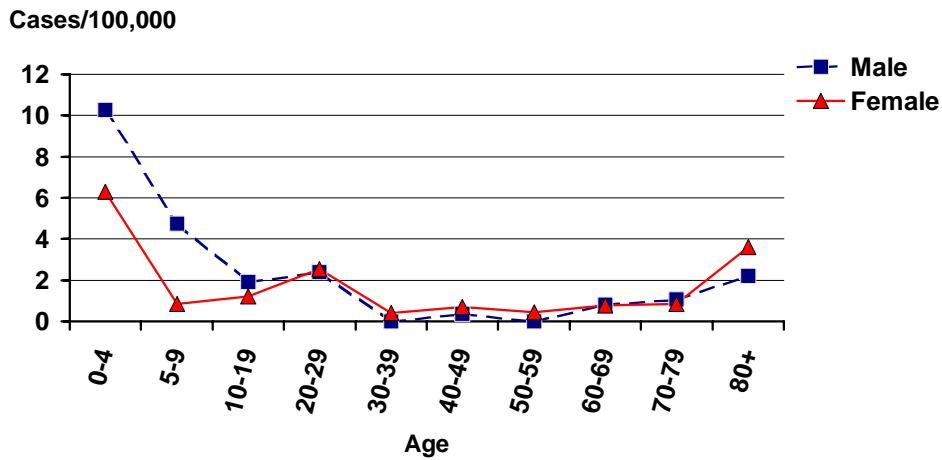
Meningococcal Disease by Year Oregon, 1995–2004



Meningococcal Disease by Onset Month Oregon, 2004

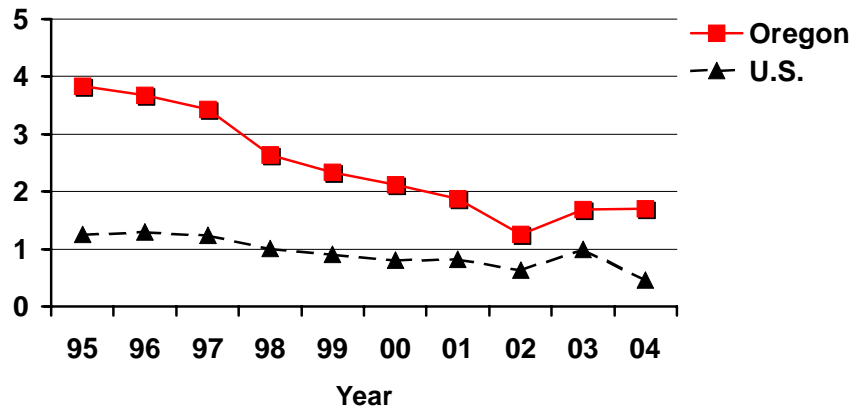


Incidence of Meningococcal Disease by Age and Sex Oregon, 2004

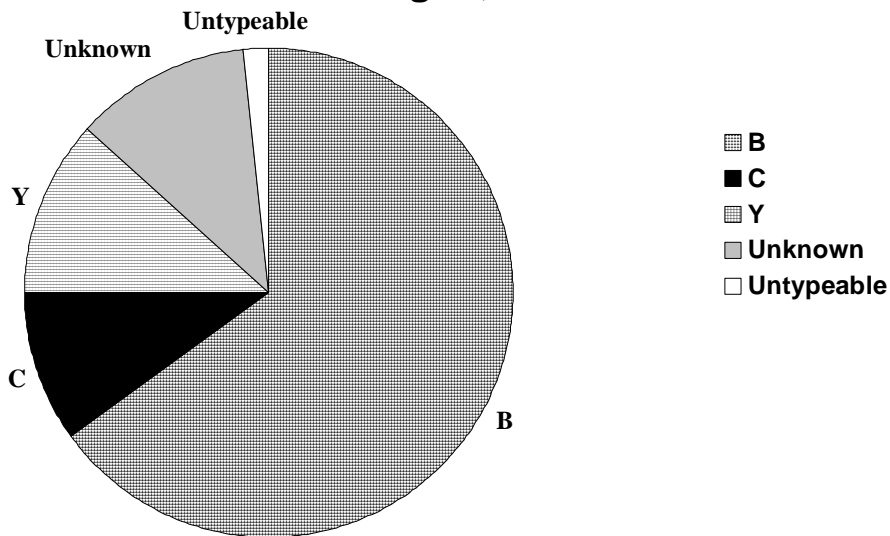


Incidence of Meningococcal Disease Oregon vs. Nationwide 1995–2004

Cases/100,000



Meningococcal Disease by Serogroup Oregon, 2004



Incidence of Meningococcal Disease by County of Residence, Oregon 2004

