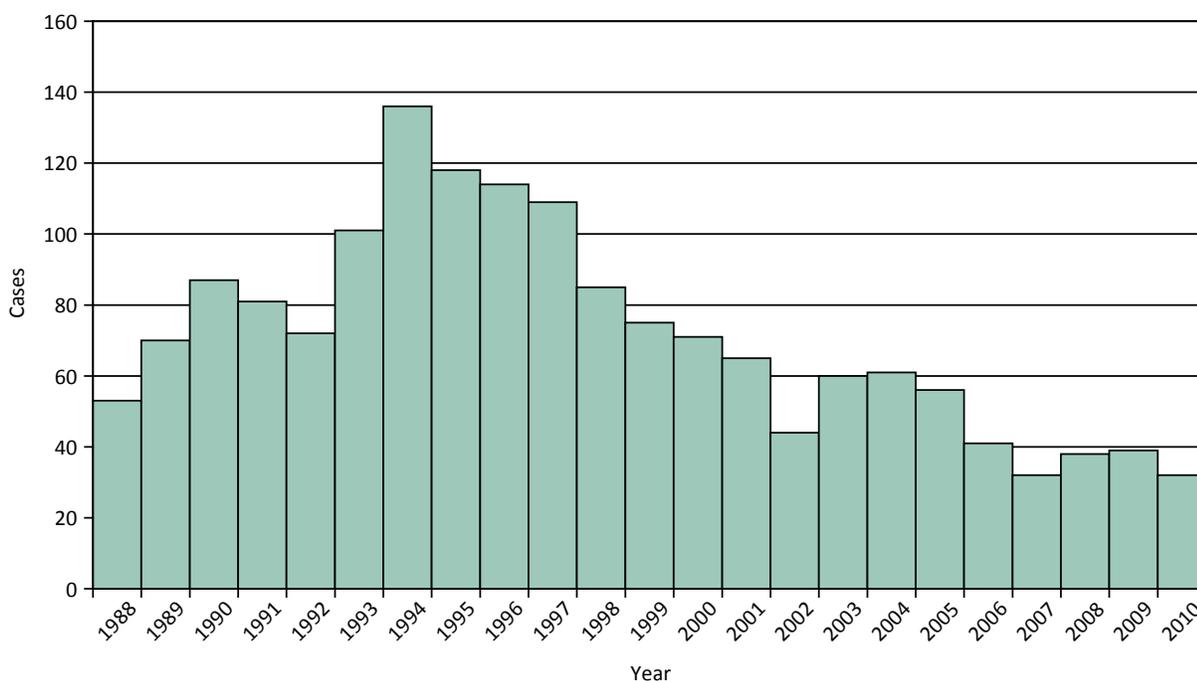


Meningococcal disease

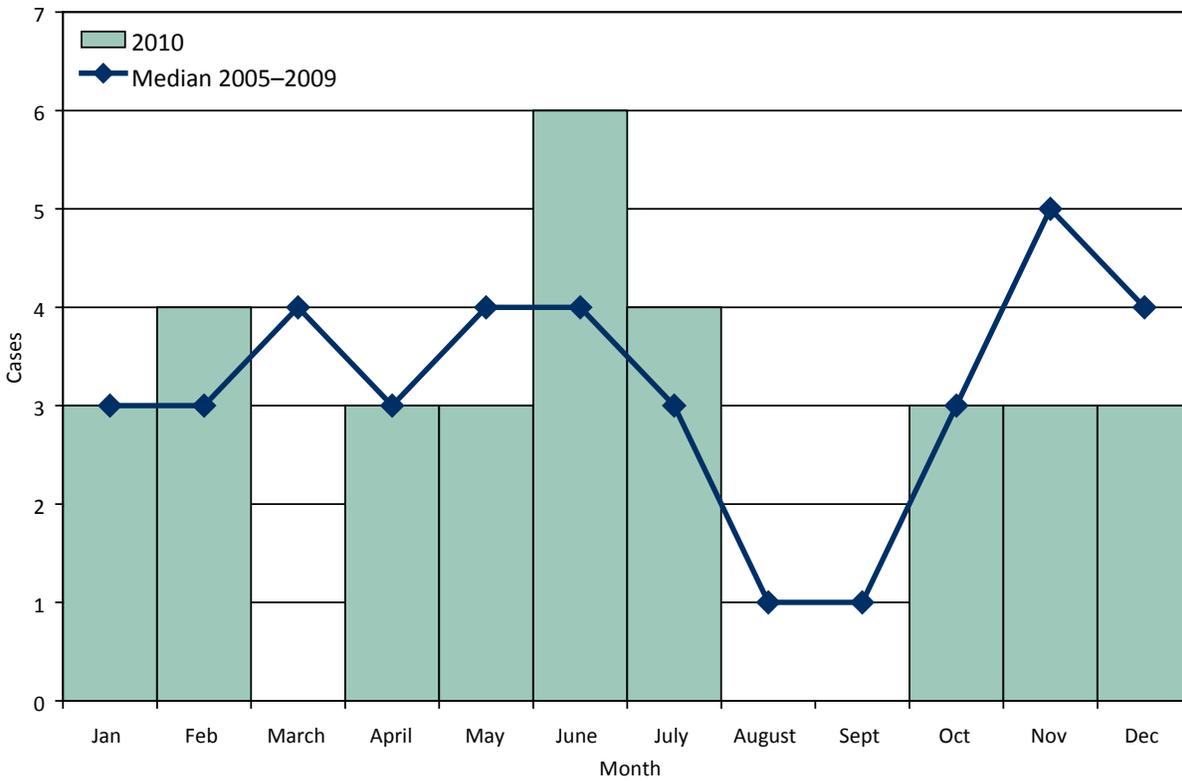
Reported cases of invasive meningococcal infections, including sepsis and meningitis, have declined from the hyperendemic levels seen in 1993–1997 attributable to a clonal strain of serogroup B. Respiratory secretions and droplets continue to be shared among Oregonians and predispose secondary cases.

In 2010, there were 32 reports of meningococcal disease in Oregon. This continues the overall decline in cases throughout the state. The highest majority (45%) of illness in Oregon was once again caused by serogroup B organisms, followed by serogroups Y (26%), C (19%), and W135 (10%). The burden of meningococcal disease is highest in the very young (those 0–4 years of age), with a second, lower peak in incidence in young adults, followed by those over the age of 65. Though a new conjugate vaccine (Menactra™) for adolescents and young adults was licensed in 2006, this vaccine does not protect against serogroup B disease.

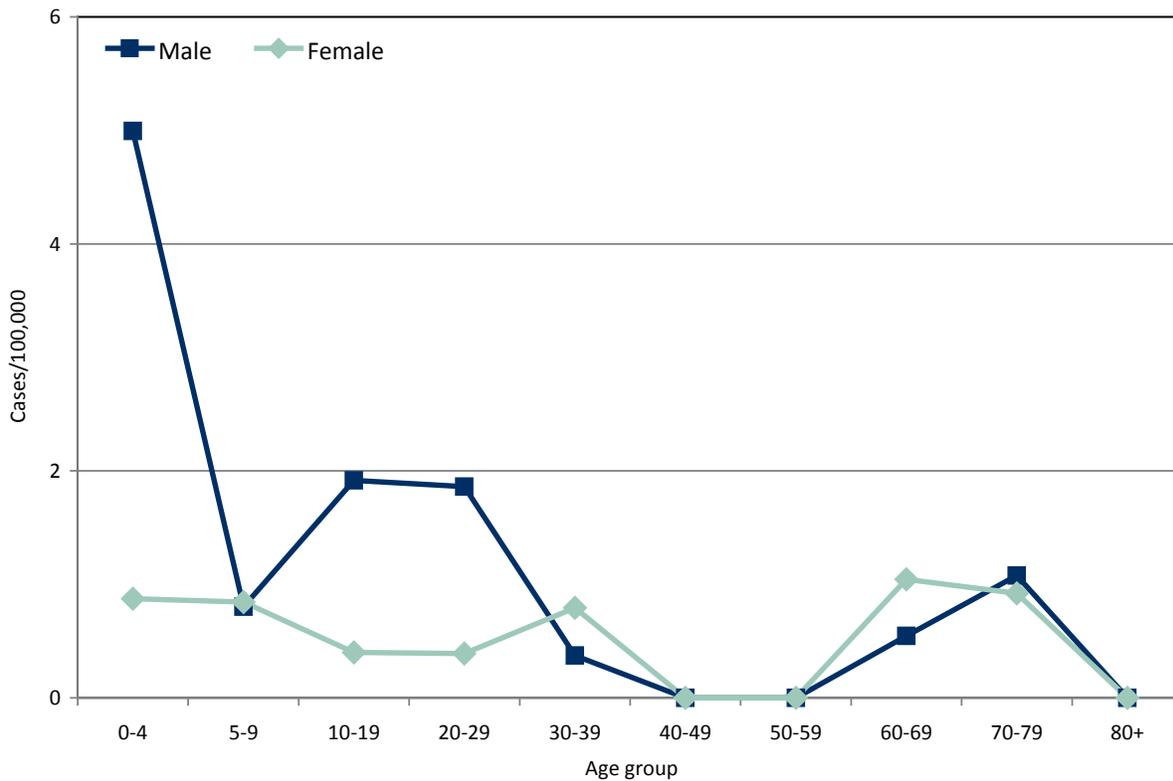
Meningococcal disease by year: Oregon, 1988–2010



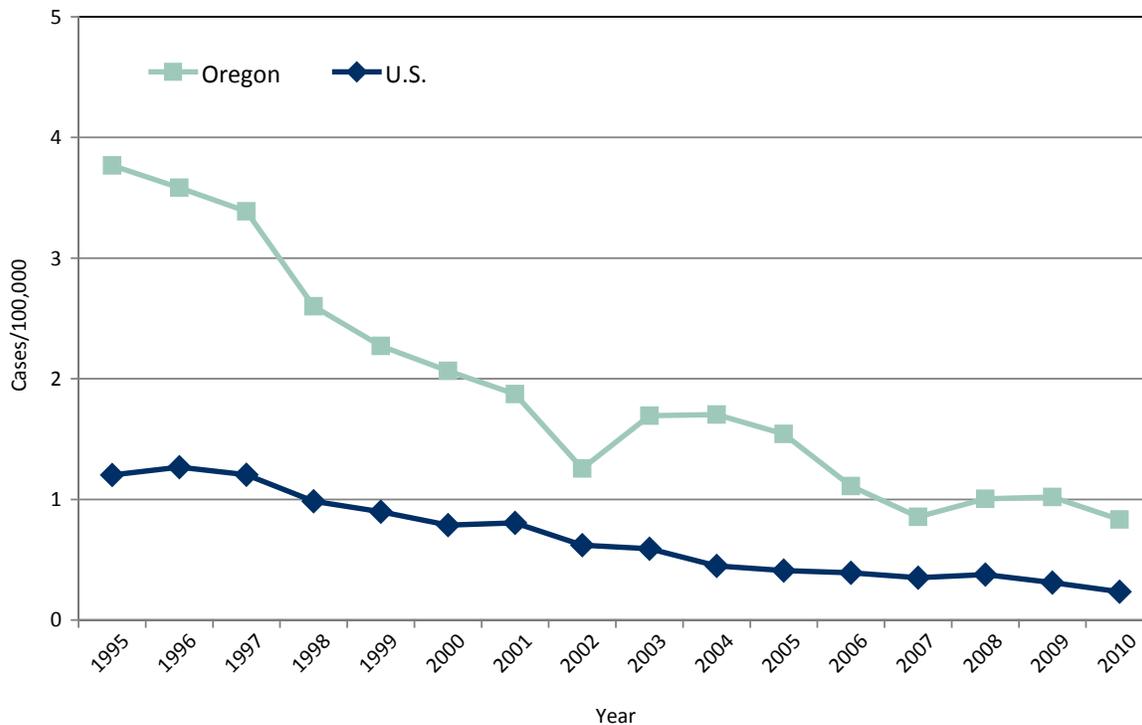
Meningococcal disease by onset month: Oregon, 2010



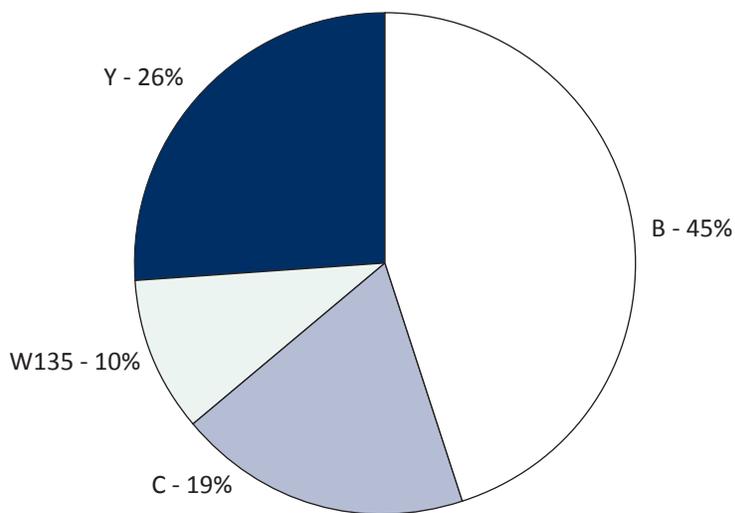
Incidence of meningococcal disease by age and sex: Oregon, 2010



Incidence of meningococcal disease: Oregon vs. nationwide, 1995–2010



Meningococcal disease by serogroup: Oregon, 2010



Incidence of meningococcal disease by county of residence: Oregon, 2000–2010

