

Nationally Notifiable Infectious Diseases and Conditions, United States: Annual Tables

TABLE 1. Annual reported cases of notifiable diseases and rates per 100,000, excluding U.S. Territories - - United States, 2018
(Accessible Version: <https://wonder.cdc.gov/nndss/static/2018/annual/2018-table1.html>)

Disease	Case Count	Rate
Anthrax	1	0.00
Arboviral diseases		
Chikungunya virus disease	117	0.04
Eastern equine encephalitis virus disease		
Neuroinvasive	6	0.00
Non-neuroinvasive	—	—
Jamestown Canyon virus disease		
Neuroinvasive	25	0.01
Non-neuroinvasive	16	0.00
La Crosse virus disease		
Neuroinvasive	83	0.03
Non-neuroinvasive	3	0.00
Powassan virus disease		
Neuroinvasive	21	0.01
Non-neuroinvasive	—	—
St. Louis encephalitis virus disease		
Neuroinvasive	5	0.00
Non-neuroinvasive	3	0.00
West Nile virus disease		
Neuroinvasive	1,657	0.51
Non-neuroinvasive	989	0.30
Western equine encephalitis virus disease		
Neuroinvasive	—	—
Non-neuroinvasive	—	—
Babesiosis		
Total	2,160	0.79
Confirmed	1,861	0.68
Probable	299	0.11
Botulism		
Total	225	0.07
Foodborne	17	0.01
Infant	157	4.08
Other (wound & unspecified)	51	0.02
Brucellosis	138	0.04
Campylobacteriosis	70,200	21.46
Chancroid	3	0.00
<i>Chlamydia trachomatis</i> infection	1,758,668	537.54
Cholera	14	0.00
Coccidioidomycosis *	15,611	11.58
Cryptosporidiosis		
Total	12,533	3.83
Confirmed	8,980	2.74
Probable	3,553	1.09
Cyclosporiasis	3,519	1.20
Dengue virus infections †		
Dengue	424	0.13
Dengue-like illness	41	0.01
Severe dengue	9	0.00
Diphtheria	1	0.00
Ehrlichiosis and Anaplasmosis		
<i>Anaplasma phagocytophilum</i> infection	4,008	1.27
<i>Ehrlichia chaffeensis</i> infection	1,799	0.57
<i>Ehrlichia ewingii</i> infection	33	0.01
Undetermined ehrlichiosis/anaplasmosis	283	0.09

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Disease	Case Count	Rate
Giardiasis	15,548	6.06
Gonorrhea	583,405	178.32
<i>Haemophilus influenzae</i> , invasive disease		
All ages, all serotypes	5,573	1.70
Age <5 years		
Serotype b	38	0.19
Non-b serotype	191	0.96
Nontypeable	222	1.12
Unknown serotype	175	0.88
Hansen's disease	90	0.03
Hantavirus infection, non-hantavirus pulmonary syndrome	2	0.00
Hantavirus pulmonary syndrome	18	0.01
Hemolytic uremic syndrome post-diarrheal	376	0.12
Hepatitis [§]		
A, acute	12,474	3.81
B, acute	3,322	1.02
B, perinatal infection	23	0.30
C, acute	4,768	1.54
Confirmed	3,621	1.17
Probable	1,147	0.37
C, perinatal infection	214	0.07
Human immunodeficiency virus diagnoses	32,999	10.09
Influenza-associated pediatric mortality	159	0.22
Invasive pneumococcal disease [¶]		
All ages	19,857	8.14
Confirmed	19,619	8.04
Probable	238	0.10
Age <5 years	1,116	0.43
Confirmed	1,078	6.80
Probable	38	0.24
Legionellosis	9,933	3.04
Leptospirosis	91	0.04
Listeriosis	864	0.26
Lyme disease		
Total	33,666	10.34
Confirmed	23,558	7.23
Probable	10,108	3.10
Malaria	1,748	0.53
Measles		
Total	375	0.11
Indigenous	296	0.09
Imported	79	0.02
Meningococcal disease		
All serogroups	327	0.10
Serogroups ACWY	100	0.03
Serogroup B	81	0.02
Other serogroups	23	0.01
Unknown serogroup	123	0.04
Mumps	2,515	0.77
Novel Influenza A virus infections	14	0.00
Paratyphoid fever ^{**}	133	0.04
Pertussis	15,609	4.77
Plague	1	0.00
Poliomyelitis, paralytic	–	–
Poliovirus infection, nonparalytic	–	–
Psittacosis	22	0.01
Q fever		

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Disease	Case Count	Rate
Total	215	0.07
Acute	178	0.05
Chronic	37	0.01
Rabies		
Animal	4,984	1.52
Human	3	0.00
Rubella	4	0.00
Rubella, congenital syndrome	—	—
Salmonellosis (excluding paratyphoid fever and typhoid fever) ††	60,999	18.64
Severe acute respiratory syndrome-associated coronavirus disease	—	—
Shiga toxin-producing <i>Escherichia coli</i> (STEC)	15,996	4.89
Shigellosis	16,333	4.99
Smallpox	—	—
Spotted fever rickettsiosis		
Total	5,544	1.71
Confirmed	124	0.04
Probable	5,420	1.67
Streptococcal toxic shock syndrome	371	0.18
Syphilis		
Total, all stages §§	115,045	35.16
Congenital	1,306	34.44
Primary and secondary	35,063	10.72
Tetanus	23	0.01
Toxic shock syndrome (other than Streptococcal)	33	0.01
Trichinellosis	1	0.00
Tuberculosis	9,025	2.76
Tularemia	229	0.07
Typhoid fever	401	0.12
Vancomycin-intermediate <i>Staphylococcus aureus</i>	85	0.03
Vancomycin-resistant <i>Staphylococcus aureus</i>	—	—
Varicella morbidity	8,201	3.07
Varicella mortality	6	0.00
Vibriosis		
Total	2,964	0.92
Confirmed	1,822	0.57
Probable	1,142	0.35
Viral hemorrhagic fevers		
Crimean-Congo hemorrhagic fever virus	—	—
Ebola virus	—	—
Guanarito virus	—	—
Junin virus	—	—
Lassa virus	—	—
Lujo virus	—	—
Machupo virus	—	—
Marburg virus	—	—
Sabia virus	—	—
Yellow fever	—	—
Zika virus		
Zika virus disease, congenital ¶¶¶	2	0.05
Zika virus disease, non-congenital	79	0.02
Zika virus infection, congenital ¶¶¶	8	0.21
Zika virus infection, non-congenital	245	0.07

—: No reported cases — The reporting jurisdiction did not submit any cases to CDC.

* Reportable in <25 states.

† Counts include confirmed and probable dengue cases.

§ Chronic hepatitis B and C data are not included in NNDSS tables but reported case counts are included in the annual Summary of Viral Hepatitis, published online by CDC's Division of Viral Hepatitis, available at <https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm>.

¶ Counts include drug resistant and susceptible cases of Invasive Pneumococcal Disease. This condition was previously named *Streptococcus*

pneumoniae invasive disease and cases were reported to CDC using different event codes to specify whether the cases were drug resistant or in a defined age group, such as <5 years.

** Prior to 2018, cases of paratyphoid fever were considered salmonellosis.

†† Prior to 2018, cases of paratyphoid fever were included as salmonellosis, but beginning in 2018 they are being published as paratyphoid fever.

§§ Includes the following categories: primary; secondary; early non-primary non-secondary (includes cases previously reported as early latent); and unknown duration or late (includes cases previously reported as late latent syphilis and cases previously reported as late syphilis with clinical manifestations).

¶¶¶ Data reported to ArboNET using the national surveillance case definition for congenital Zika virus infection (CSTE Position Statement 16-ID-01).

Notes:

1. These are **annual** cases of selected infectious national notifiable diseases from the National Notifiable Diseases Surveillance System (NNDSS). NNDSS data reported by the 50 states, New York City, the District of Columbia, and the U.S. territories are collated and published. Cases are reported by state health departments to CDC weekly. Because source datasets may be updated as additional information is received, statistics in publications based on that source data may differ from what is presented in these tables.
2. The list of nationally notifiable infectious diseases and conditions for 2018 and their national surveillance case definitions are available at <https://www.cdc.gov/nndss/conditions/notifiable/2018/>. This list incorporates the Council of State and Territorial Epidemiologists (CSTE) position statements approved in 2017 by CSTE for national surveillance, that were implemented in January 2018, including updated surveillance case definitions for anthrax, shiga toxin-producing *Escherichia coli*, and syphilis. Perinatal hepatitis c virus infection became a new nationally notifiable condition in 2018. While Carbapenemase Producing Carbapenem-Resistant *Enterobacteriaceae* (CP-CRE) was added to the list of nationally notifiable diseases in 2018, reporting jurisdictions could not submit data for this condition since Office of Management and Budget Paperwork Reduction Act approval was pending during 2018. Publication criteria for the finalized 2018 data are available at https://wonder.cdc.gov/nndss/documents/2018_NNDSS_Publication_Criteria_07122019_updated_09230219.pdf. See also [Guide to Interpreting Provisional and Finalized NNDSS Data](#).
3. Annual tables for 2016 and later years are available on [CDC WONDER](#).
4. Annual summary reports from 1993-2015 are available as published in the [MMWR](#).
5. NNDSS annual tables since 1952 are available at [CDC Stacks](#) (once in CDC Stacks select "Annual Reports" in the "Genre" box to the left).
6. For most conditions, national incidence rates are calculated as the number of reported cases for each infectious disease or condition divided by the U.S. resident population for the specified demographic population or the total U.S. resident population, multiplied by 100,000. When a nationally notifiable infectious condition is associated with a specific age restriction, the same restriction was applied to the population in the denominator of the incidence rate calculation. In addition, population data from reporting jurisdictions in which the disease or condition was not reportable or not available were excluded from the denominator of the incidence rate calculations.

Population estimates for incidence rates are July 1st, 2018 estimates obtained from the National Center for Health Statistics (NCHS) postcensal estimates of the resident population of the United States for April 1, 2010 - July 1, 2018, by year, county, single year of age (range: 0 to 85 years), bridged-race (white, black or African American, American Indian or Alaska Native, Asian, or Pacific Islander), Hispanic ethnicity (not Hispanic or Latino, Hispanic or Latino), and sex (Vintage 2018), prepared under a collaborative arrangement with the U.S. Census Bureau. Population estimates for states released June 25, 2019 are available at https://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm. Population estimates for territories are the 2018 mid-year estimates from the U.S. Census Bureau International Data Base, accessed on June 26, 2019 at <https://www.census.gov/data-tools/demo/idb/informationGateway.php>. The choice of population denominators for incidence is based on the availability of population data at the time of publication preparation.

Age restrictions in the numerator and denominator are applied for the following childhood conditions:

- Zika virus disease, congenital (age restriction in numerator and denominator is <1 year)
- Zika virus infection, congenital (age restriction in numerator and denominator is <1 year)
- Haemophilus influenzae*, invasive disease <5 years (age restriction in numerator and denominator is <5 years)
- Invasive pneumococcal disease <5 years (age restriction in numerator and denominator is <5 years)
- Influenza associated pediatric mortality (age restriction in numerator and denominator is <18 years)
- Infant botulism (age restriction in numerator and denominator is <1 year)
- Congenital rubella syndrome (age restriction in numerator and denominator is <1 year)
- Perinatal Hepatitis B infection (age restriction in numerator is ≤24 months, denominator is <24 months)
- Perinatal Hepatitis C infection (age restriction in numerator is ≤36 months, denominator is <36 months)

Data for congenital syphilis are aggregated by the infant's year of birth. The rate for congenital syphilis is based upon the number of reported cases per 100,000 live births, using natality data for 2018 (National Center for Health Statistics [Natality 2018](#), as compiled from data provided by the Vital Statistics Cooperative Program). The mother's race and ethnicity are used for race- and ethnicity-specific rates of congenital syphilis cases. Congenital syphilis data are published in Syphilis Statistics in the Sexually Transmitted Diseases (STD) surveillance report (<https://www.cdc.gov/std/syphilis/stats.htm>) and in the historical archives of the STD surveillance report (<https://www.cdc.gov/std/stats/archive.htm>). The STD surveillance report (<https://www.cdc.gov/std/syphilis/stats.htm>) updates congenital syphilis cases and rates over time.

7. Surveillance data reported by other CDC programs might vary from data reported in these tables because of differences in 1) the date used to aggregate the data, 2) the timing of reports, 3) the source of the data, 4) surveillance case definitions, and 5) policies regarding case jurisdiction (i.e., which jurisdiction should submit the case notification to CDC).

Suggested Citation:

- Centers for Disease Control and Prevention. National Notifiable Diseases Surveillance System, 2018 Annual Tables of Infectious Disease Data. Atlanta, GA. CDC Division of Health Informatics and Surveillance, 2019. Available at: <https://www.cdc.gov/nndss/infectious-tables.html>.

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- CDC acknowledges the Local, State, and Territorial Health Departments that collected the data from a range of case ascertainment sources (e.g., health-care providers, hospitals, laboratories) and reported these data to CDC's National Notifiable Diseases Surveillance System.

