

OREGON SEXUALLY TRANSMITTED DISEASE CASES 1980 - 2000

	<u>EARLY SYPHILIS</u>	<u>GONORRHEA</u>	<u>CHLAMYDIA*</u>
1980	232	11,162	
1981	221	9,189	
1982	200	7,796	
1983	242	6,682	
1984	217	6,635	
1985	181	6,409	
1986	202	5,481	
1987	503	4,043	3,035**
1988	515	3,221	7,135
1989	424	3,025	6,734
1990	261	2,549	7,387
1991	161	2,172	7,327
1992	103	1,768	5,885
1993	72	1,191	5,539
1994	43	977	5,494
1995	22	854	5,468
1996	18	886	5,442
1997	23	773	5,254
1998	13	880	5,857
1999	14	905	6,131
2000	31	1,039	7,126

* Chlamydia became reportable in Oregon July 1, 1987

** 1987 chlamydial infections are for July through December

Introduction:

Sexually transmitted disease (STDs) are the most frequently reported communicable disease in Oregon. The list of reportable STD, include chlamydial infections, gonorrhea, syphilis, pelvic inflammatory disease (PID), chancroid and lymphogranuloma venereum.

—**Chlamydial infections:** *Chlamydia* is Oregon's most frequently reported disease, accounting for over 50% of all reportable diseases and conditions in the 11 year period from 1990-2000. Surveillance for chlamydial infections formally began in July of 1987. Case reports are based on positive lab results indicating that *Chlamydia trachomatis* has been identified from a genital tract specimen. It is estimated that three-fourths of the infected women and up to one-half of the infected men have no symptoms to alert them to seek early care. An estimated 20-40% of untreated women with chlamydia will develop PID which is associated with infertility, increased risk of tubal pregnancy, and chronic pelvic pain. Only wide spread screening efforts will reach these asymptomatic men and women. It is estimated that every \$1.00 spent now in screening and treatment saves \$12.00 in costs of future complications.

Over 13 years of reporting data describes chlamydial infections in Oregon as most frequent in the 15-19 year age group, reported more often in women than men, higher rates among communities of color, and geographically wide-spread compared to gonorrhea and early syphilis. The high ratio of diagnosed females to males, 6:1 in Oregon from 1988 through 1993, reflect the focus of screening efforts and not actual prevalence. In 2000, the ratio of female to male chlamydial infections decreased to 2.7:1, at least in part this is related to males tested through STD and adolescent clinics.

In 2000, chlamydial infections remained the most commonly reported STD in Oregon. Over 7,000 infections (a case rate of 208 per 100,000 population) were documented. The 7,110 chlamydial infections reported during 2000 represent a 16% increase compared to 1999, and the third consecutive year of increasing cases and rates. We believe the majority of increased infections seen in 2000 are related to more people are being tested and the increased use of amplified technology by laboratories.

—**Gonococcal infections:** For 16 calendar years, 1980 through 1995, Oregon gonorrhea morbidity decreased compared to the previous year, 11,162 cases in 1980 to 854 cases in 1995. This trend was interrupted with the 886 gonorrhea cases reported in 1996, continued downward in 1997 with 773 cases, increased again in 1998, and continued to increase through 2000 with 1039 cases reported. The 134 (15%) case increase of gonococcal infections in 2000 compared to 1999 is associated with additional cases among white males. The greatest increase was observed in the 20-24 age group. Gonorrhea infections among men who have sex with men (MSM) also increased in 2000 compared to the previous year. The 178 cases in 2000 compared to 122 cases in 1999 equate to a 46% increase. Antibiotic resistant gonorrhea has been documented in Oregon since 1977. Data from local labs and the Gonococcal Isolate Surveillance Project (GISP) indicate significant resistance only to the penicillins and tetracyclines, neither of which are currently used in Oregon as primary therapy for gonococcal infections. Recent reports have indicated there may be an emerging problem with resistance to the quinolones. We have identified two high-level and a few intermediate level quinolone resistant isolates through GISP in the past four years. However, this issue does not appear as a concern in Oregon. We intend to monitor GISP data and field reports regarding this issue.

—**Early Syphilis:** The incidence of early syphilis (primary, secondary, and early latent under one year duration) is currently low in Oregon. The six-year trend in early syphilis from 1994 through 1999 is characterized by decrease, plateau, and decrease: The 31 cases reported in 2000 represent a 17 case (121%) increase compared to 1999, and a significant increase compared to the previous 5 years. Members of the gay community have represented a small percentage of early syphilis cases during the past several years. However, during 2000, 10 of the 31 reported early syphilis cases were gay men, representing 10 (56%) of the 18 male early syphilis cases.

—Recent sex partners of individuals diagnosed with STDs are at risk for infection and should be referred to a health care provider for evaluation. Health department staff generally counsel clients identified with chlamydial, gonococcal, or early syphilis infections regarding the importance of sex partner evaluation, and may assist in partner referral activities. Treatment of sex partners represents an important strategy in preventing spread of STDs.

—The following data summaries are tabulated from over 8,000 cases reported by physicians, clinics, hospitals, other health care providers, and laboratories throughout the state. These reports are used by state, national, and local agencies to help target resources for preventing and controlling STDs.

OREGON CHLAMYDIA MORBIDITY 2000
REPORTED CASES BY SOURCE/AGE/RACE/SEX

AGE	WHITE		AF AM/BLK		HISPANIC		ASIAN/PI		AMERICAN INDIAN		UNKNOWN		TOTAL		TOTAL
	%	&	%	&	%	&	%	&	%	&	%	&	%	&	
0-4		2												2	2
5-9															
10-14	2	77	5	7		22		4		3	2	14	9	127	136
15-19	232	1475	87	190	92	260	17	71	8	35	27	203	463	2233	2696
20-24	382	1157	92	111	214	282	23	76	10	22	43	162	764	1810	2574
25-29	179	328	37	39	96	154	16	32	7	10	35	52	370	615	985
30-34	57	122	23	12	44	70	6	11	5	7	13	22	148	244	392
35-39	40	51	11	5	11	18	2	7	1	2	13	7	78	90	168
40-44	23	25	6	1	7	9	1	1			1	5	38	41	79
45-54	28	15	2	1	3	4	2	1			7	2	42	23	65
55-65	3	6		2							1		4	8	12
65- OVER						1								1	1
TOTAL	946	3258	263	368	467	820	67	202	31	79	142	467	1916	5194	7110

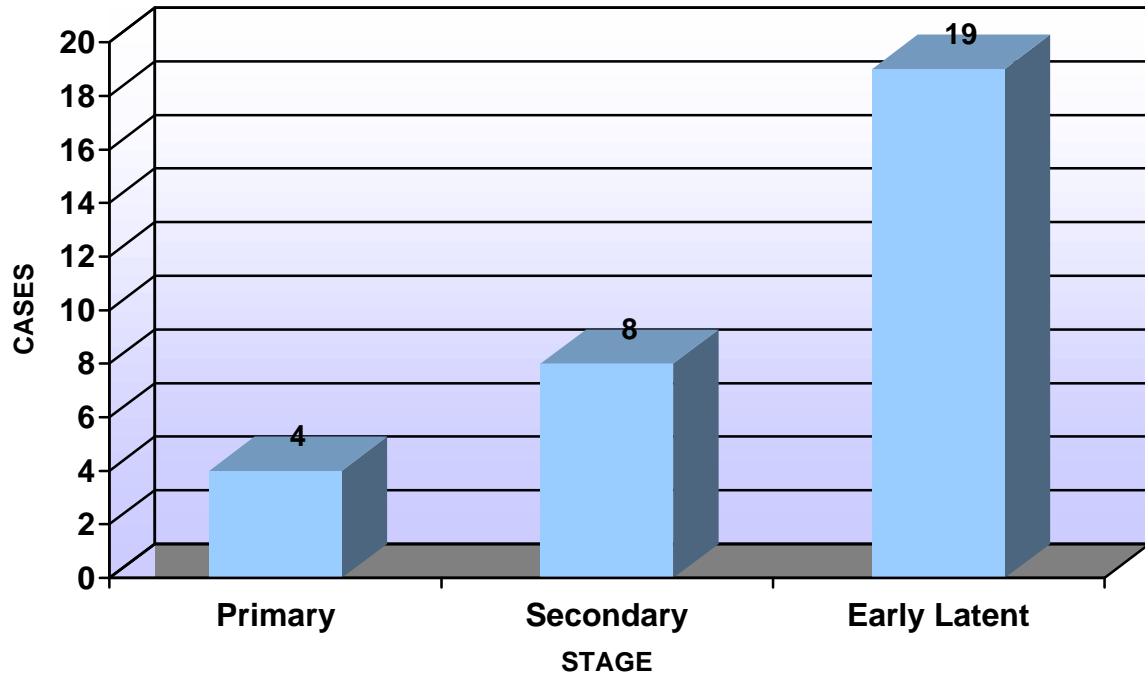
For the purpose of this table, Hispanic is considered a race.

OREGON GONORRHEA MORBIDITY 2000
REPORTED CASES BY SOURCE/AGE/RACE/SEX

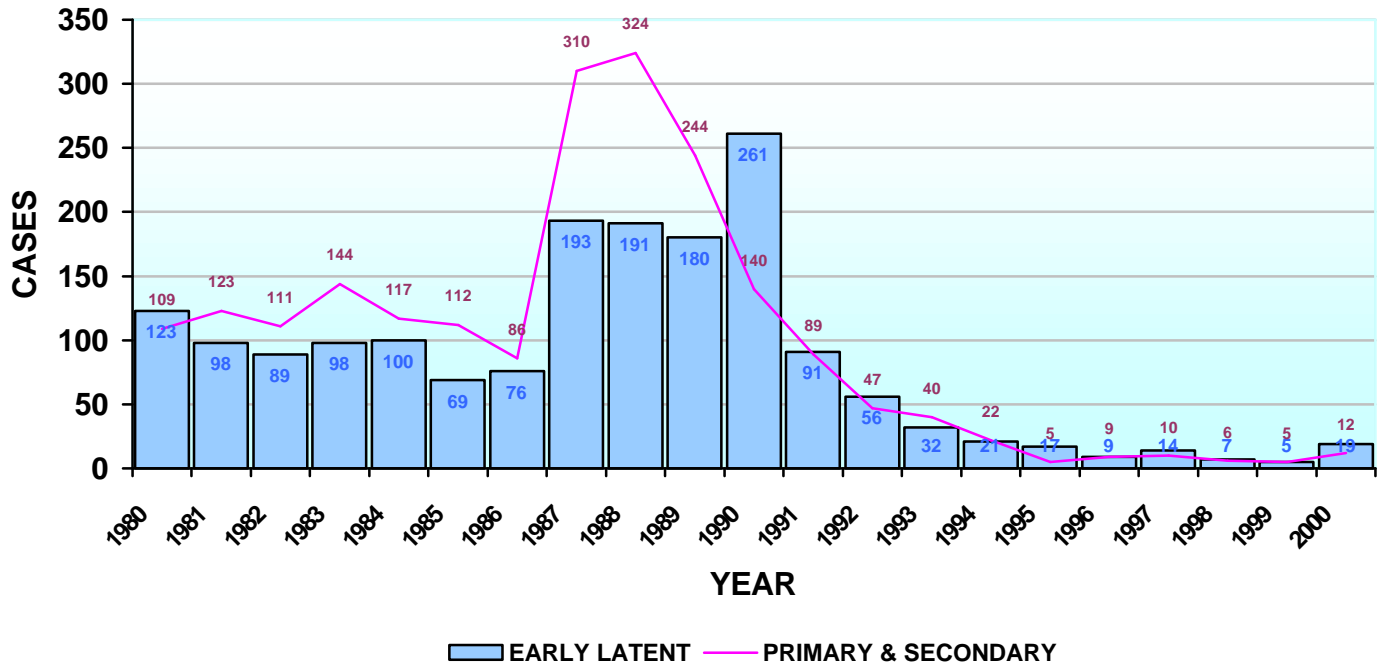
AGE	WHITE		AF AM/BLK		HISPANIC		ASIAN/PI		AMERICAN INDIAN		UNKNOWN		TOTAL		TOTAL
	%	&	%	&	%	&	%	&	%	&	%	&	%	&	
0-4															
5-9															
10-14	1	5		2									1	7	8
15-19	42	109	32	74	5	11	1	3	1	2	3	11	84	210	294
20-24	52	84	58	48	28	16	3	3	1		9	10	151	161	312
25-29	52	30	35	20	17	8	2	2		2	7	1	113	63	176
30-34	59	17	21	3	8	2			1	1	7		96	23	119
35-39	41	7	7	1	3	1	1	1			5		57	10	67
40-44	19	5	6	1	2	1	1				1	1	29	8	37
45-54	15	3	3	1	1						1		20	4	24
55-65											1		1		1
65- OVER								1						1	1
TOTAL	281	260	162	150	64	39	8	10	3	5	34	23	552	487	1039

For the purpose of this table, Hispanic is considered a race.

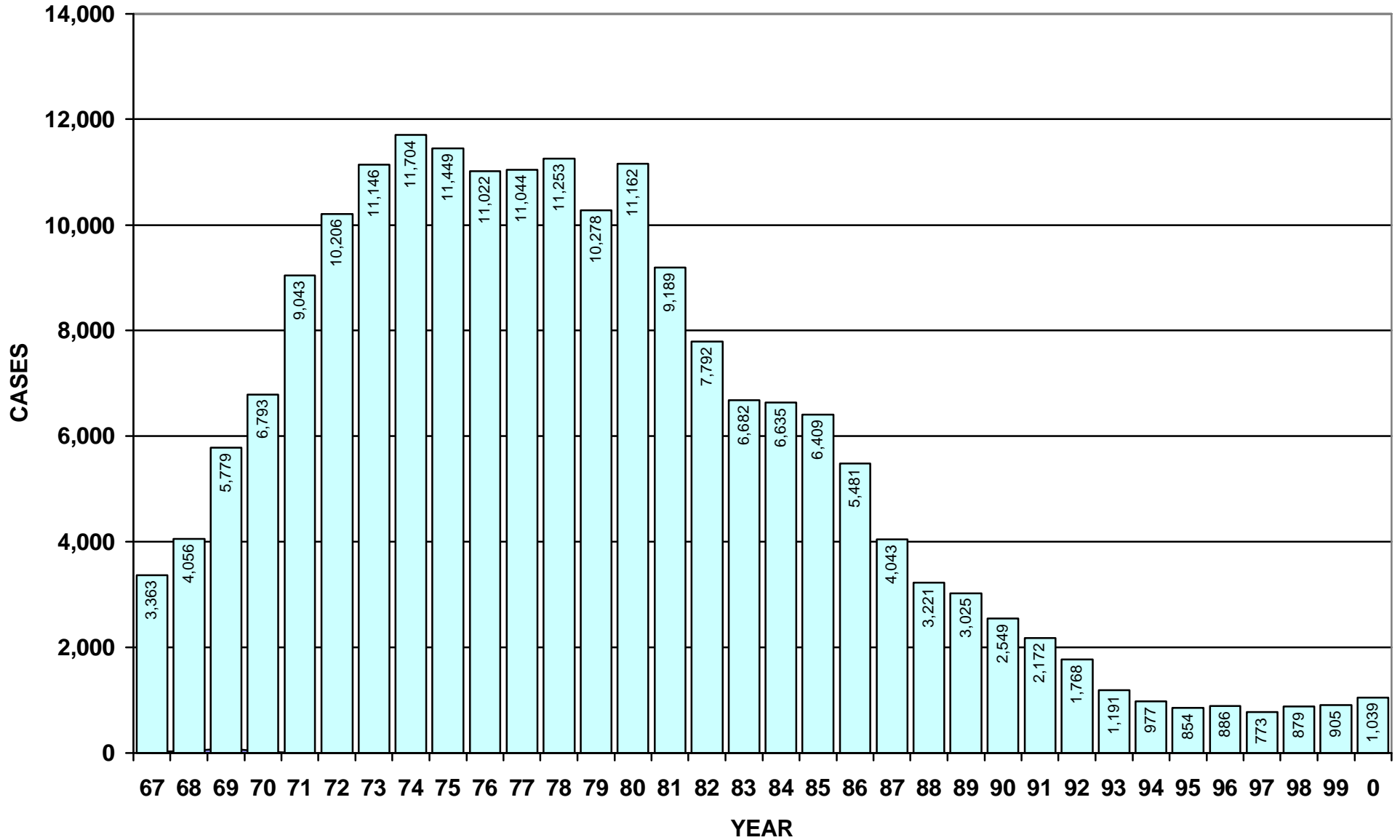
OREGON SYPHILIS 2000



OREGON EARLY SYPHILIS 1980 - 2000



OREGON GONORRHEA CASES 1967 THROUGH 2000

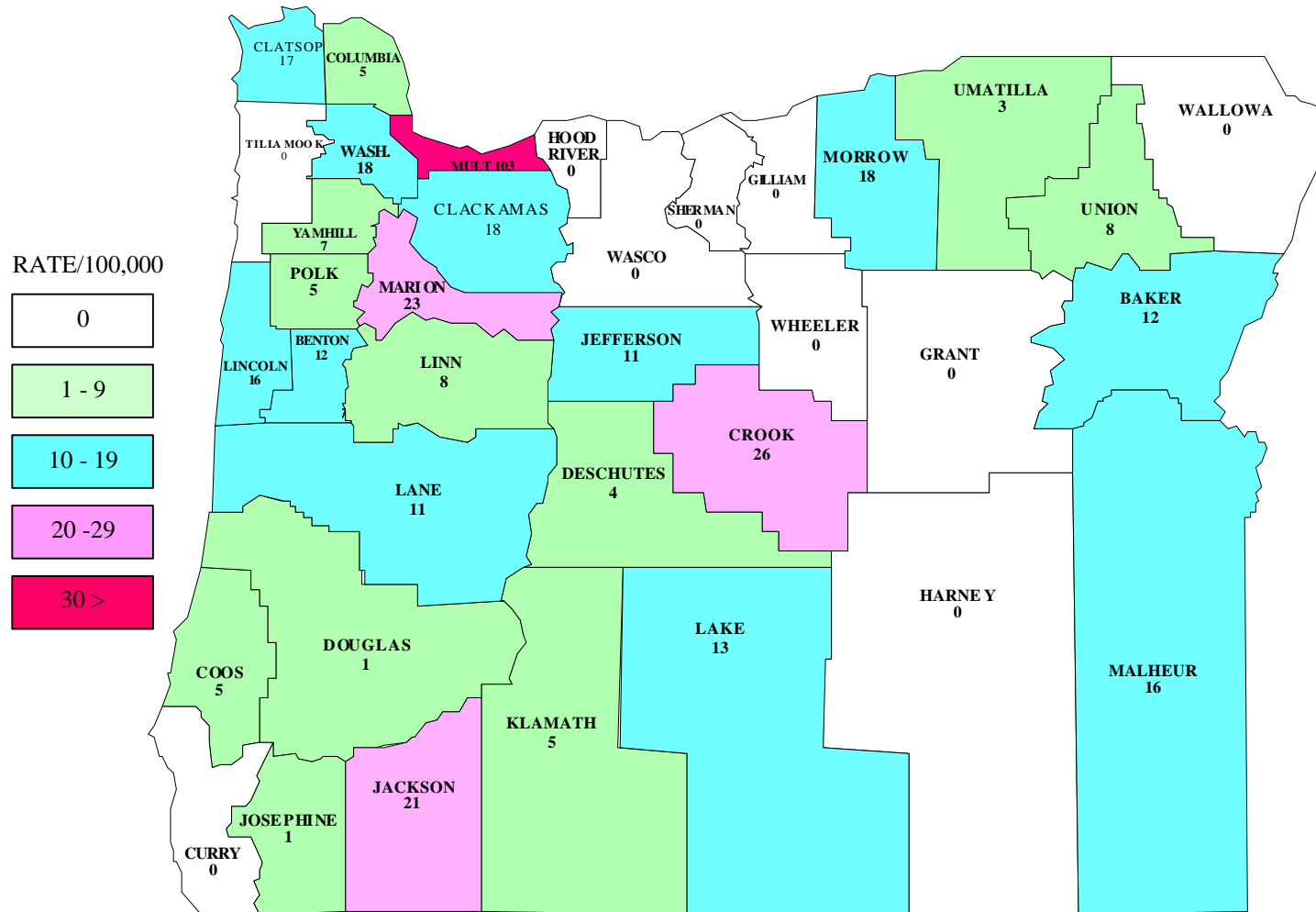


OREGON GONORRHEA CASES AND RATES BY COUNTY 1998 – 2000

COUNTY	1998		1999		2000		
	# CASES	RATE/100,000	# CASES	RATE/100,000	POPULATION	# CASES	*RATE/100,000
BAKER	1	6	1	6	16,741	2	12
BENTON	8	10	5	6	78,153	9	12
CLACKAMAS	31	10	52	16	338,391	60	18
CLATSOP	2	6	12	34	35,630	6	17
COLUMBIA	2	5	2	5	43,560	2	5
COOS	3	5	6	10	62,779	3	5
CROOK	2	12	1	6	19,182	5	26
CURRY	0	0	1	5	21,137	0	0
DESCHUTES	7	7	7	7	115,367	5	4
DOUGLAS	2	2	2	2	100,399	1	1
GILLIAM	0	0	0	0	1,915	0	0
GRANT	0	0	0	0	7,935	0	0
HARNEY	0	0	0	0	7,609	0	0
HOOD RIVER	0	0	0	0	20,411	0	0
JACKSON	31	18	26	15	181,269	38	21
JEFFERSON	2	12	4	24	19,009	2	11
JOSEPHINE	6	8	7	9	75,726	1	1
KLAMATH	1	2	11	17	63,775	3	5
LAKE	0	0	0	0	7,422	1	13
LANE	112	36	86	27	322,959	37	11
LINCOLN	5	12	8	18	44,479	7	16
LINN	10	10	11	11	103,069	8	8
MALHEUR	8	27	6	21	31,615	5	16
MARION	58	21	51	19	284,834	65	23
MORROW	0	0	0	0	10,995	2	18
MULTNOMAH	528	82	540	86	660,486	682	103
POLK	3	5	5	8	62,380	3	5
SHERMAN	0	0	0	0	1,934	0	0
TILLAMOOK	0	0	2	8	24,262	0	0
UMATILLA	0	0	1	2	70,548	2	3
UNION	0	0	2	8	24,530	2	8
WALLOWA	0	0	0	0	7,226	0	0
WASCO	0	0	1	4	23,791	0	0
WASHINGTON	54	14	50	13	445,342	82	18
WHEELER	0	0	0	0	1,547	0	0
YAMHILL	4	5	5	6	84,992	6	7
STATE	880	30	905	28	3,421,399	1039	30

2000 RATES CALCULATED USING CENSUS 2000 POPULATION DATA.

OREGON GONORRHEA RATES 2000 BY COUNTY

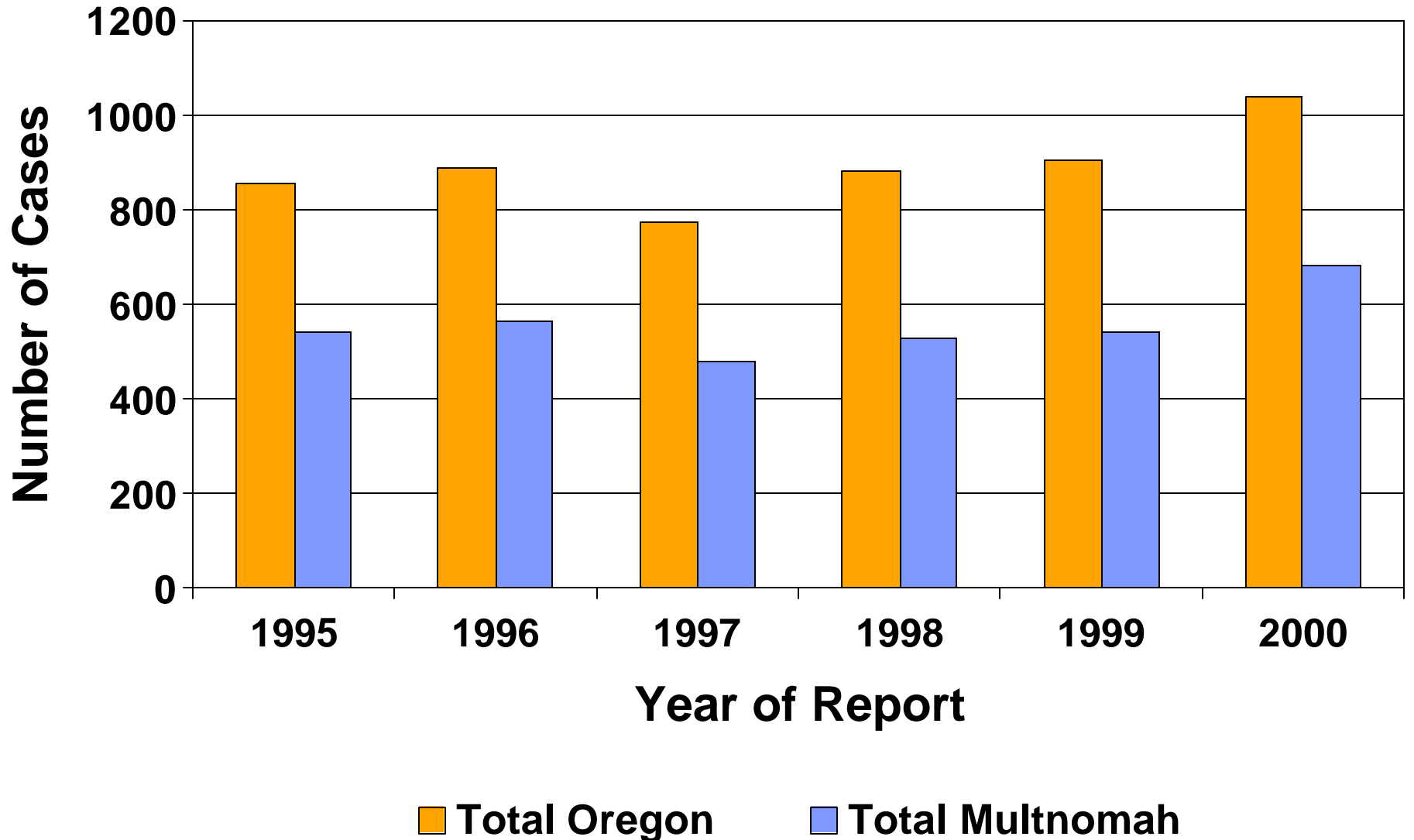


OREGON CASE RATE 30

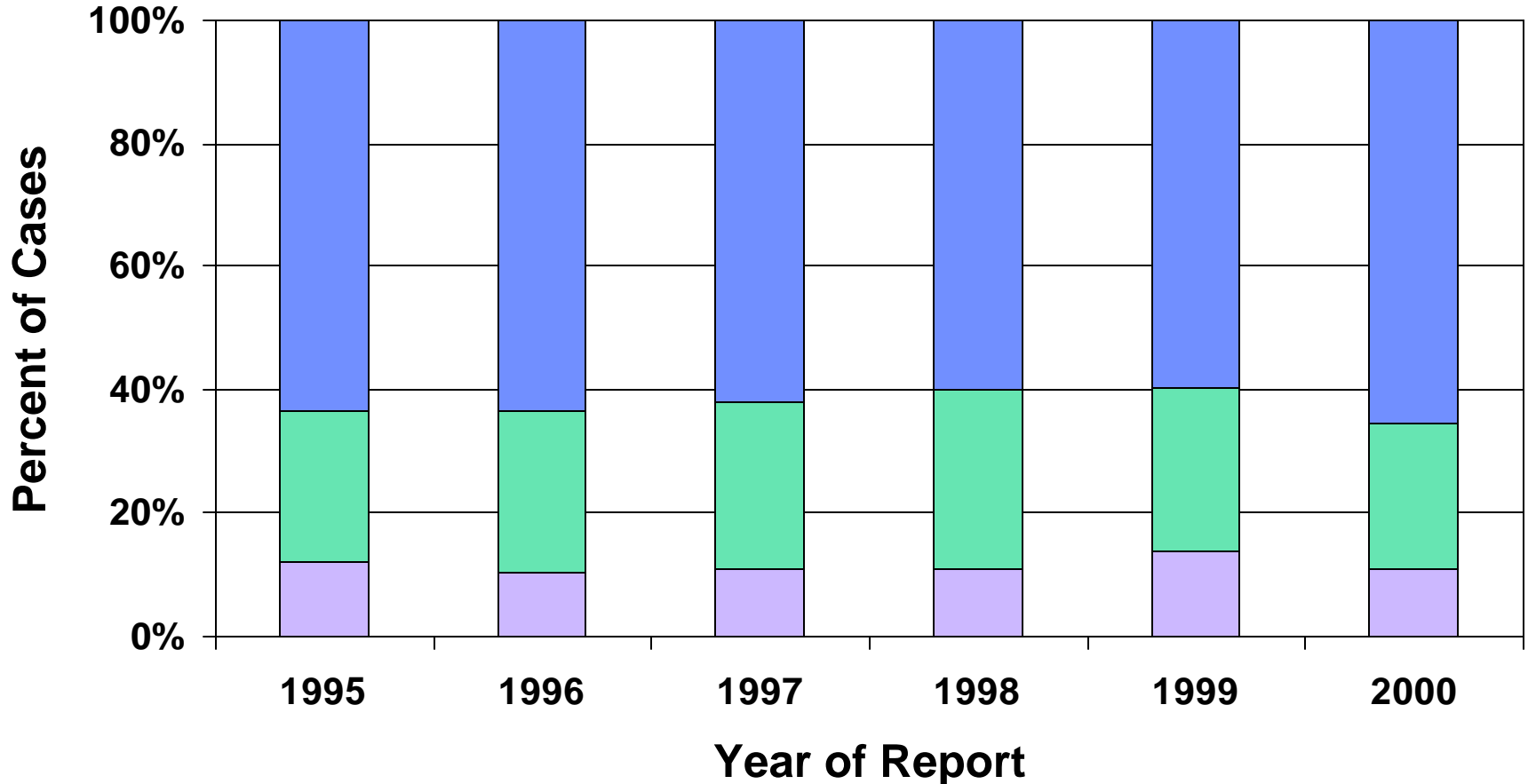
Rates calculated using census 2000 population data

Cases of Gonorrhea

Oregon and Multnomah County, 1995-2000



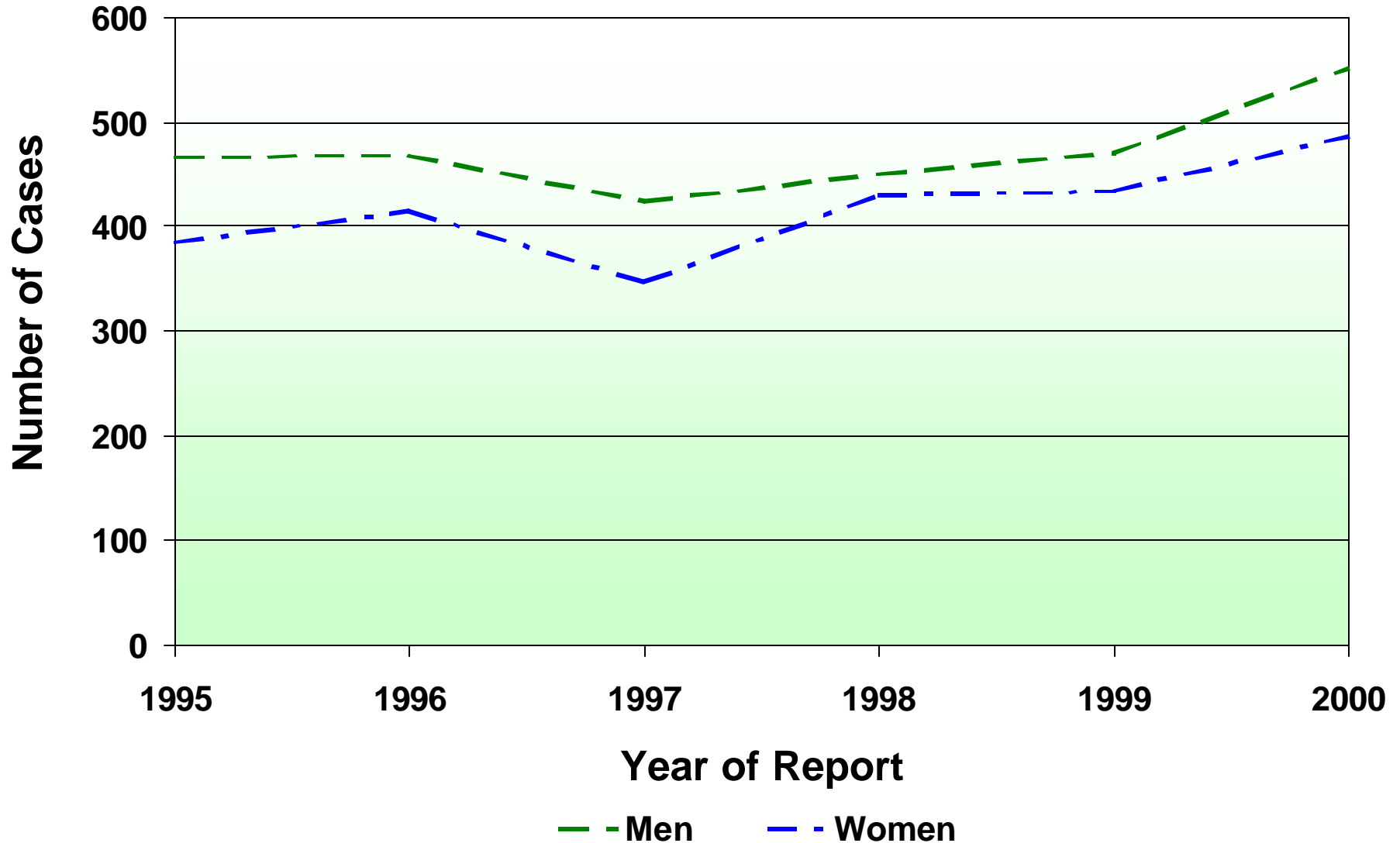
Proportion of Total Gonorrhea Cases Occurring in Oregon's Most Populous Counties, 1995-2000



- Multnomah County
- Clackamas, Lane, Marion and Washington Counties
- All Other Counties

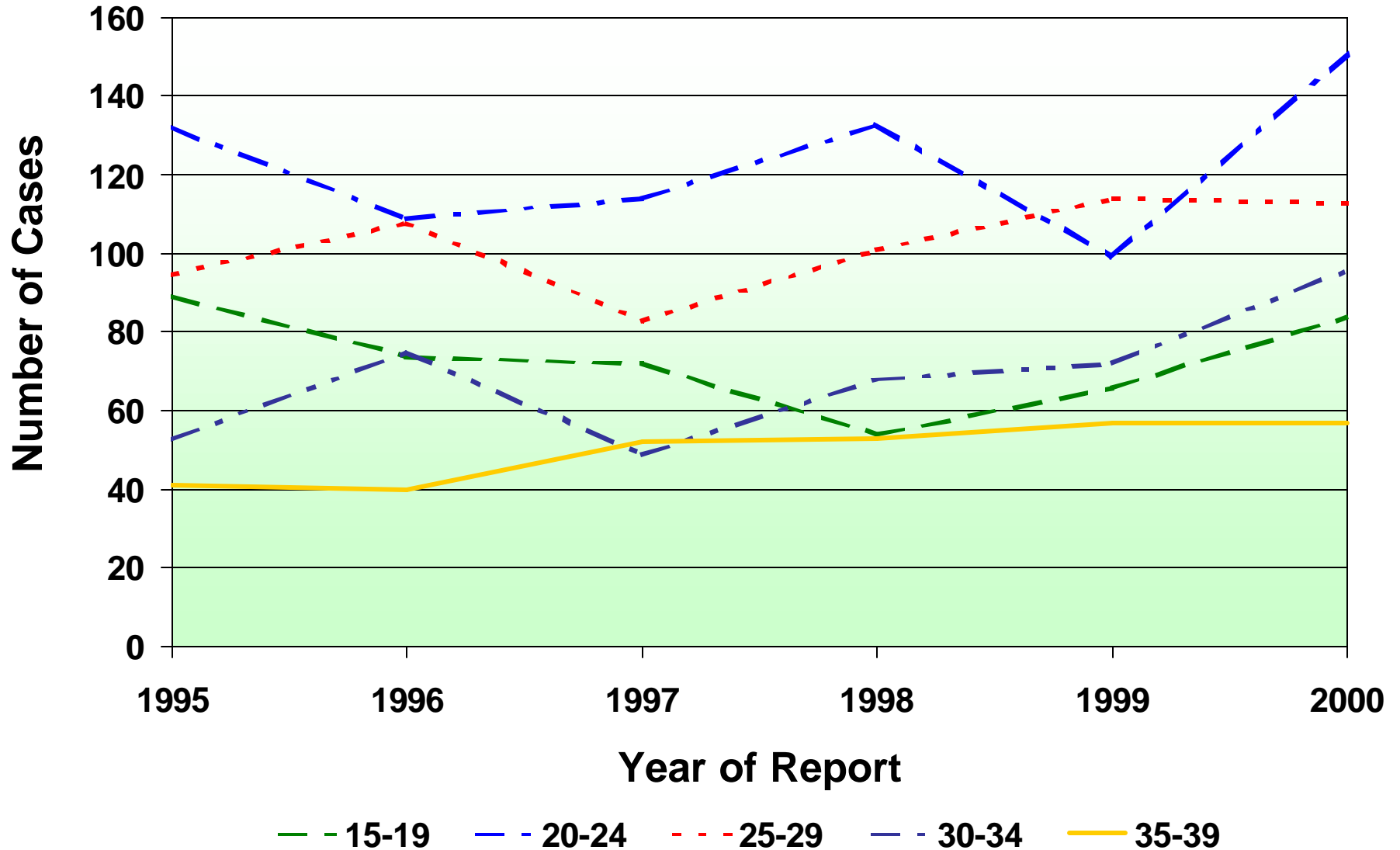
Gonorrhea Cases in Men and Women

Oregon, 1995-2000



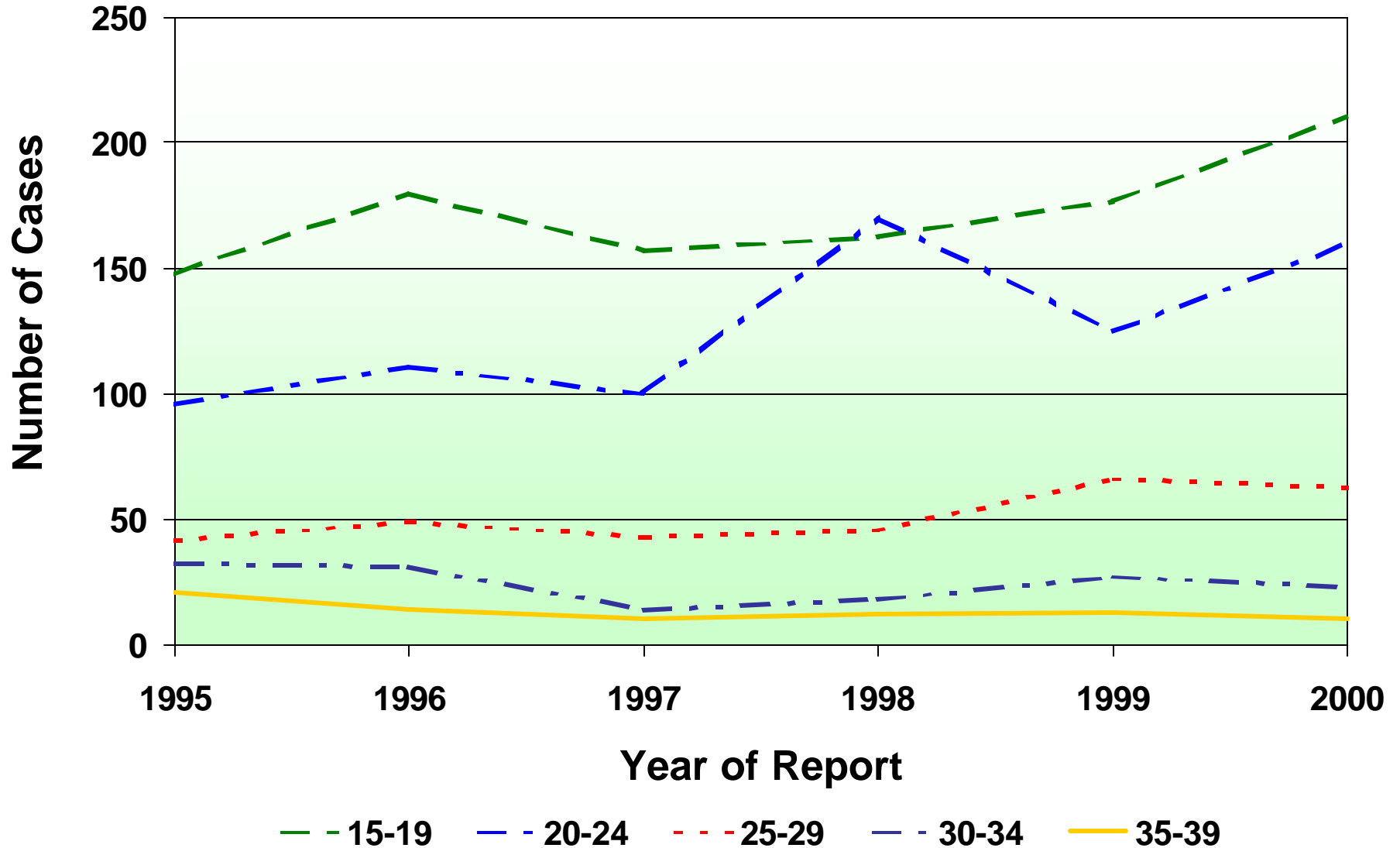
Gonorrhea Cases in Men by Age Group

Oregon, 1995-2000



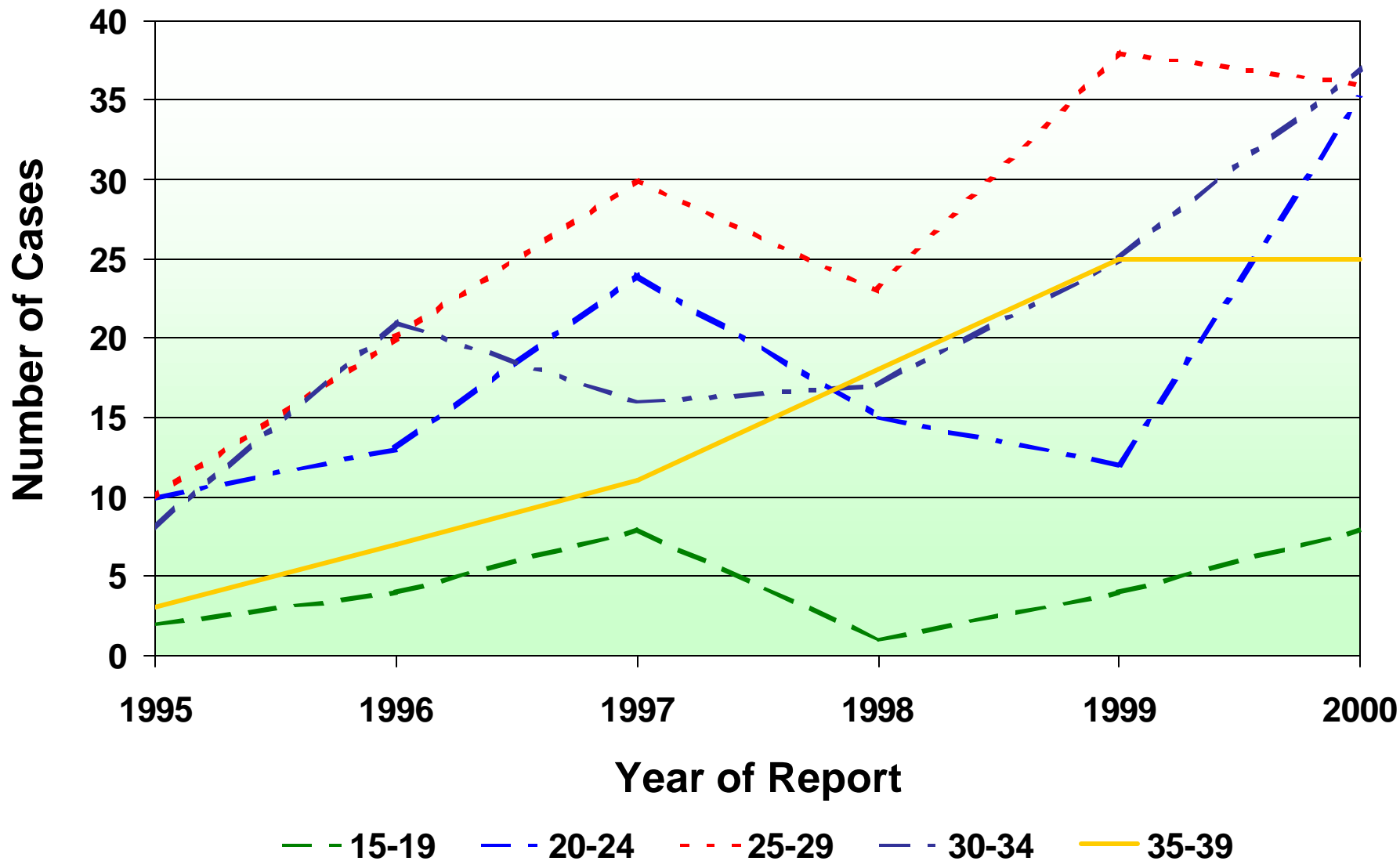
Gonorrhea Cases in Women by Age Group

Oregon, 1995-2000



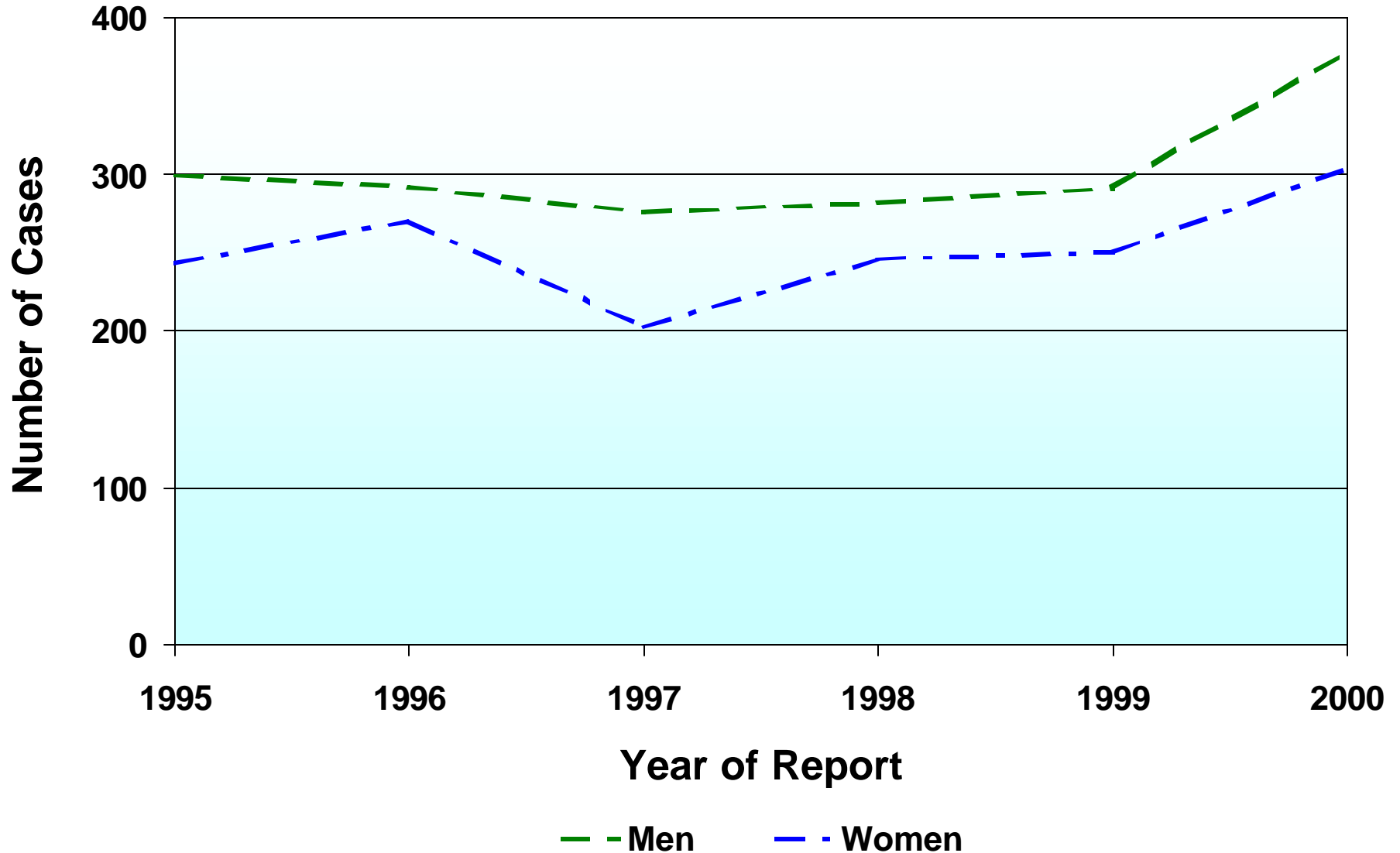
Gonorrhea Cases in MSM by Age Group

Oregon, 1995-2000



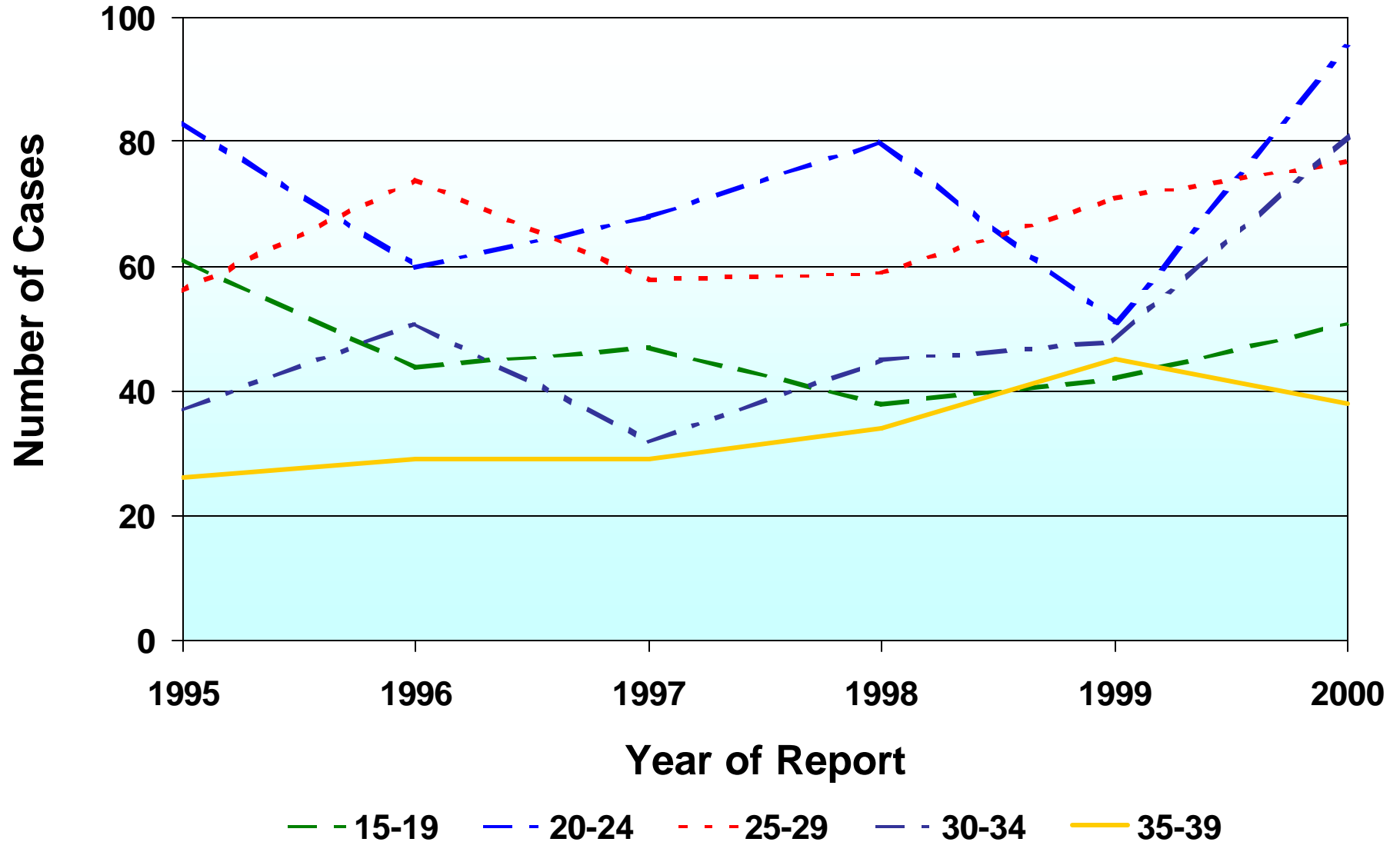
Gonorrhea Cases in Men and Women

Multnomah County, 1995-2000



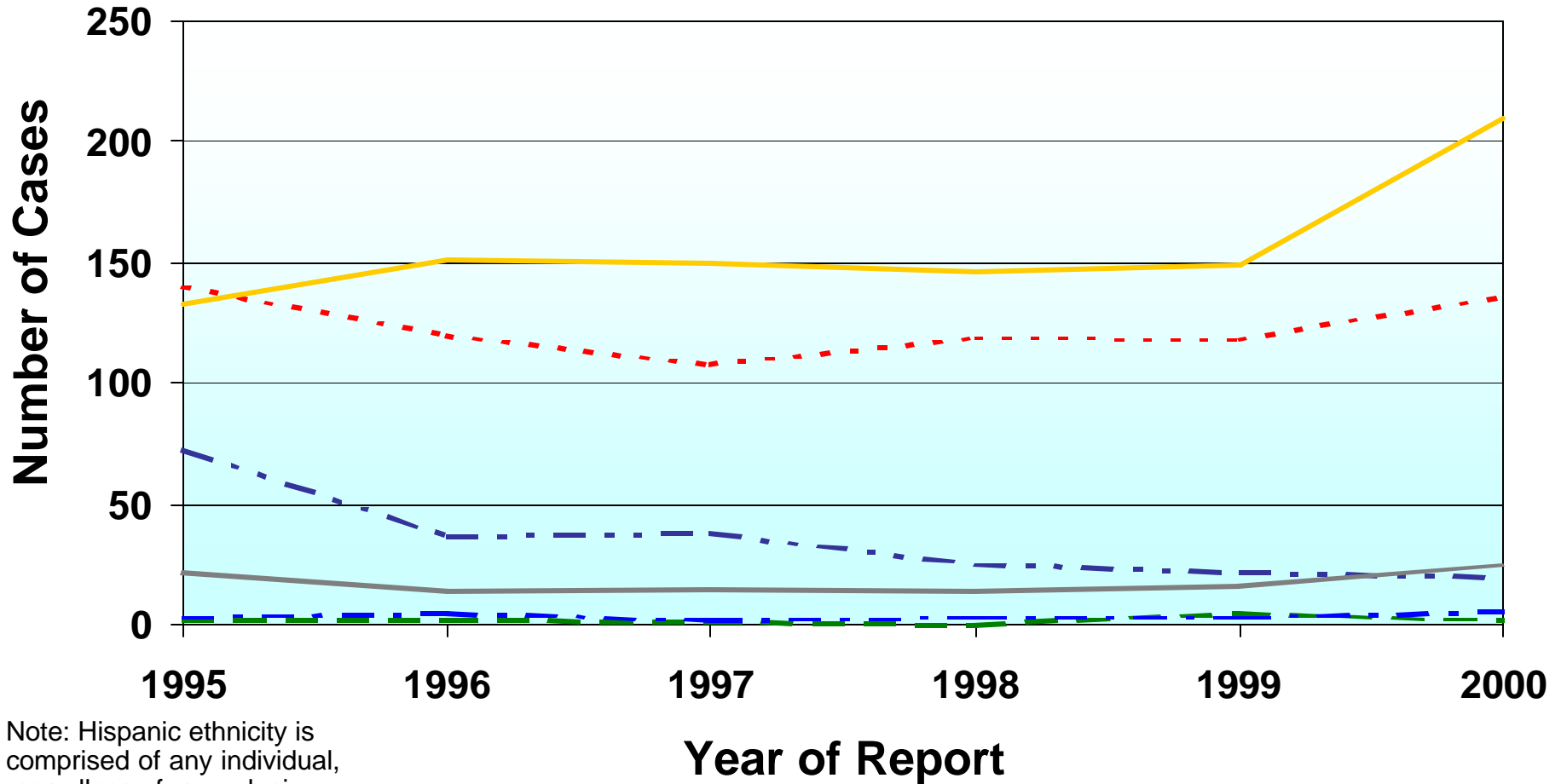
Gonorrhea Cases in Men by Age Group

Multnomah County, 1995-2000



Gonorrhea Cases in Men by Race and Ethnicity

Multnomah County, 1995-2000



Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

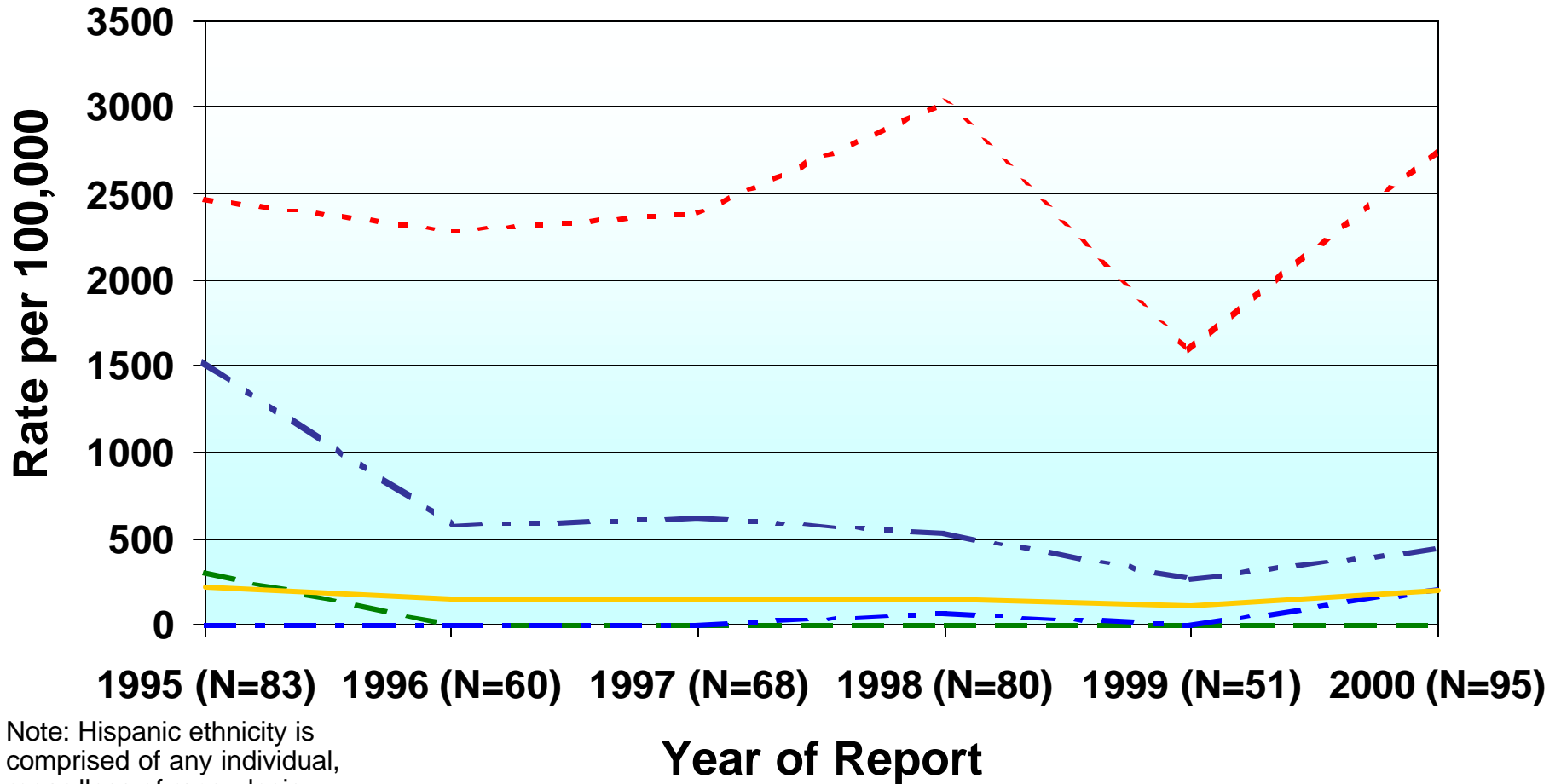
— Amer Ind
— Hispanic

— Asian/PI
— White

— Black
— Unk

Gonorrhea Rates in Men by Race and Ethnicity

Multnomah County, Ages 20-24, 1995-2000



Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

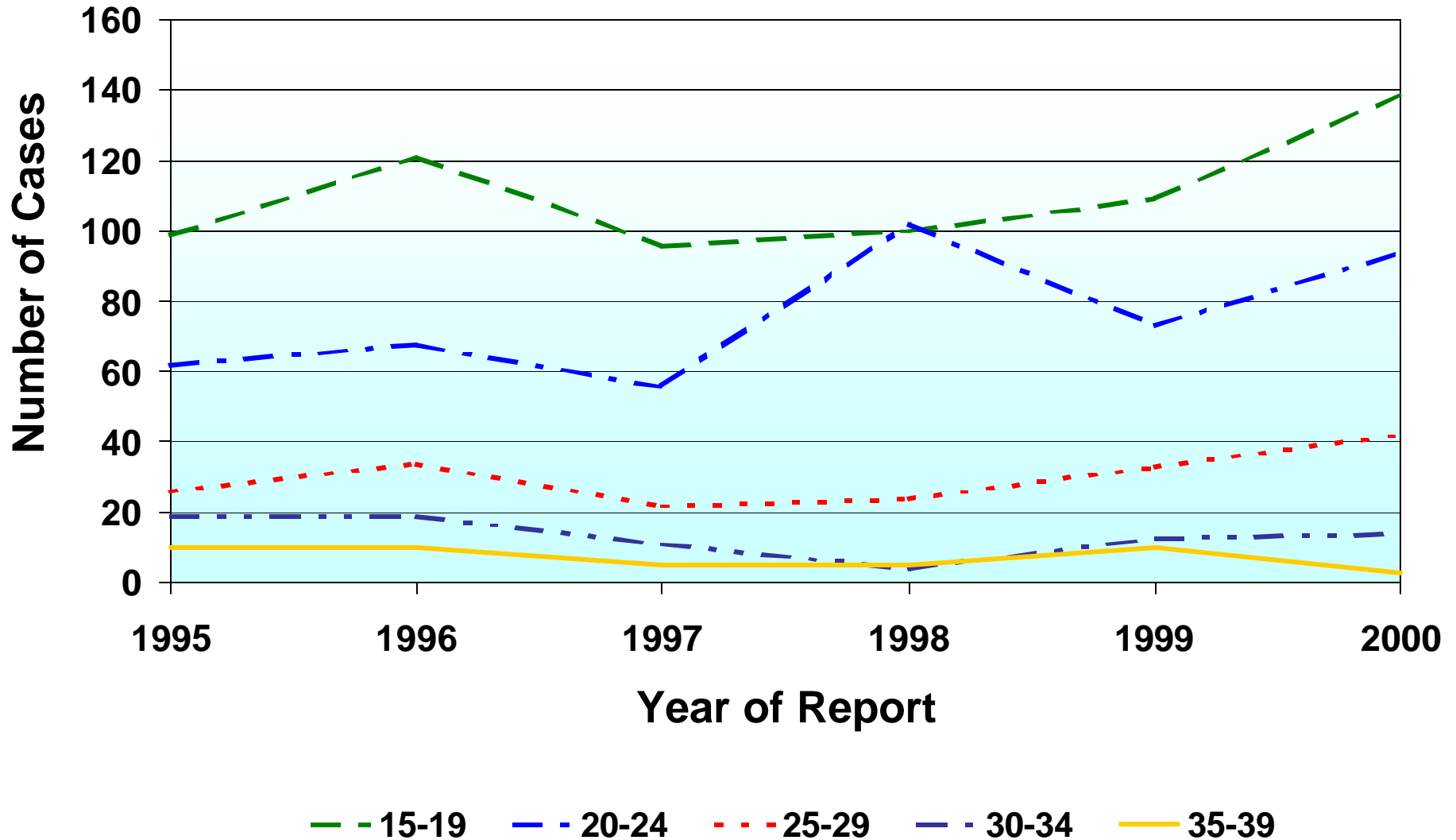
— Amer Ind
— Hispanic

— Asian/PI
— White

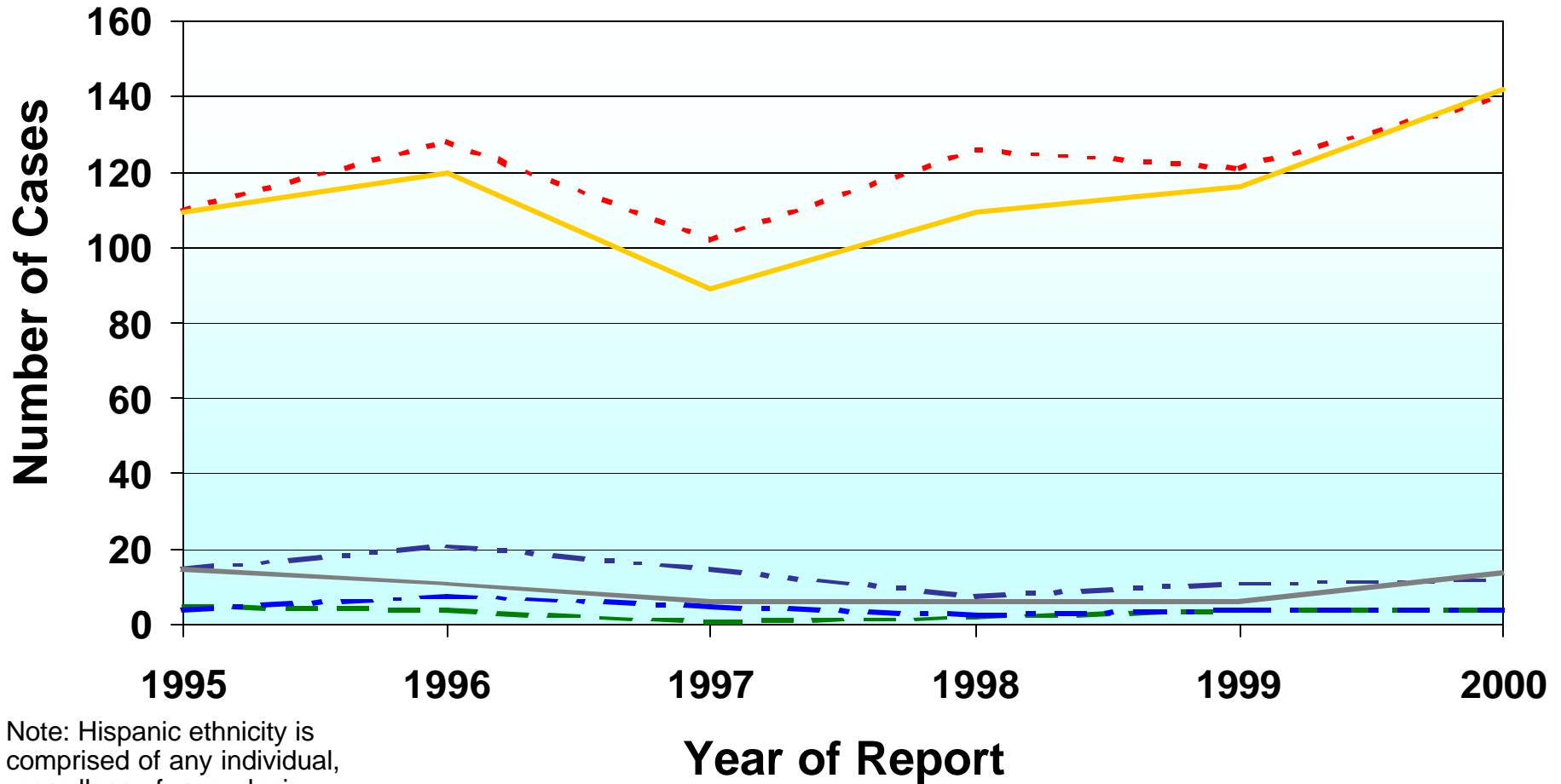
— Black

Gonorrhea Cases in Women by Age Group

Multnomah County, 1995-2000



Gonorrhea Cases in Women by Race and Ethnicity Multnomah County, 1995-2000



Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

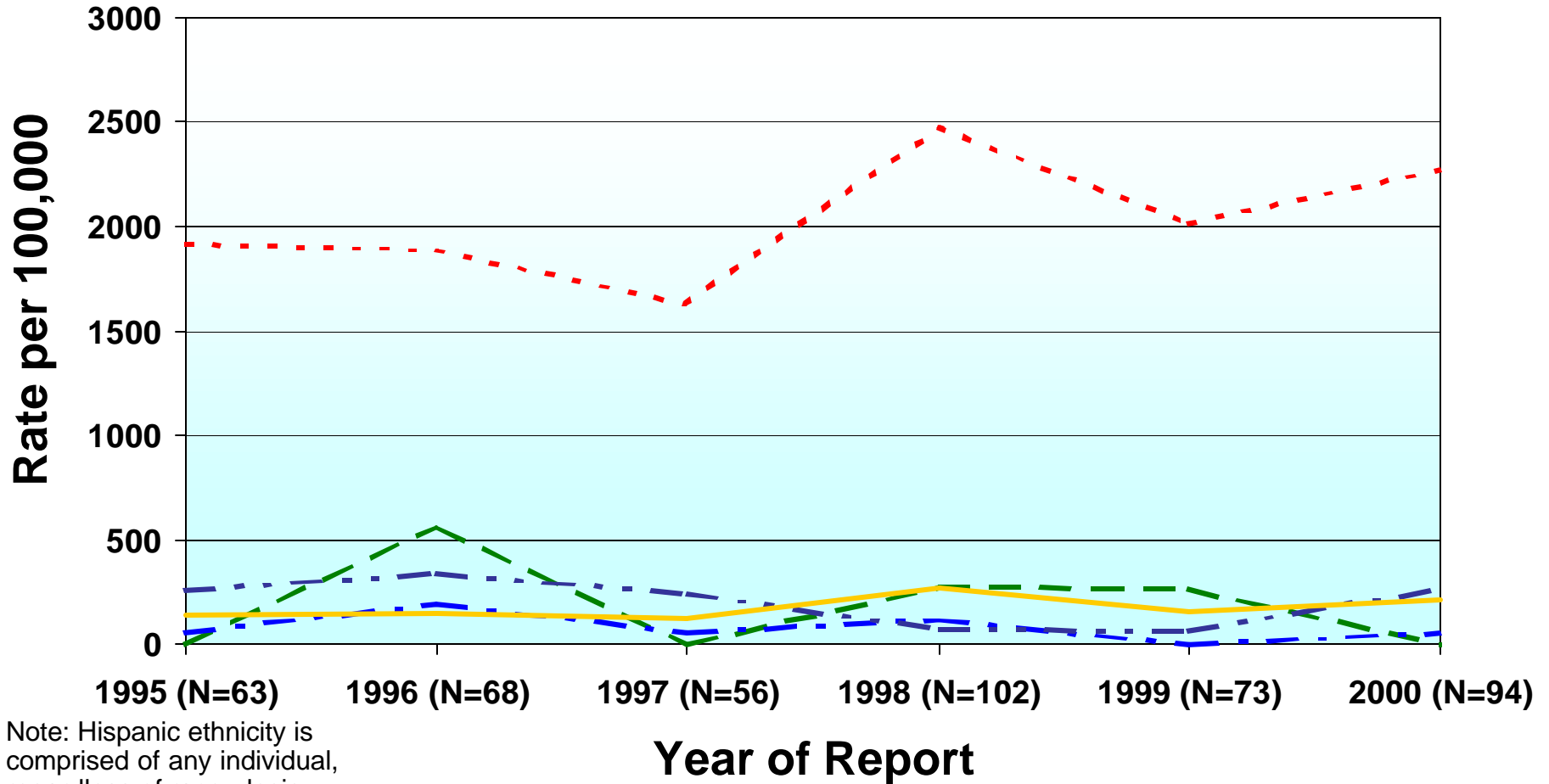
— Amer Ind
— Hispanic

— Asian/PI
— White

— Black
— Unk

Gonorrhea Rates in Women by Race and Ethnicity

Multnomah County, Ages 20-24, 1995-2000

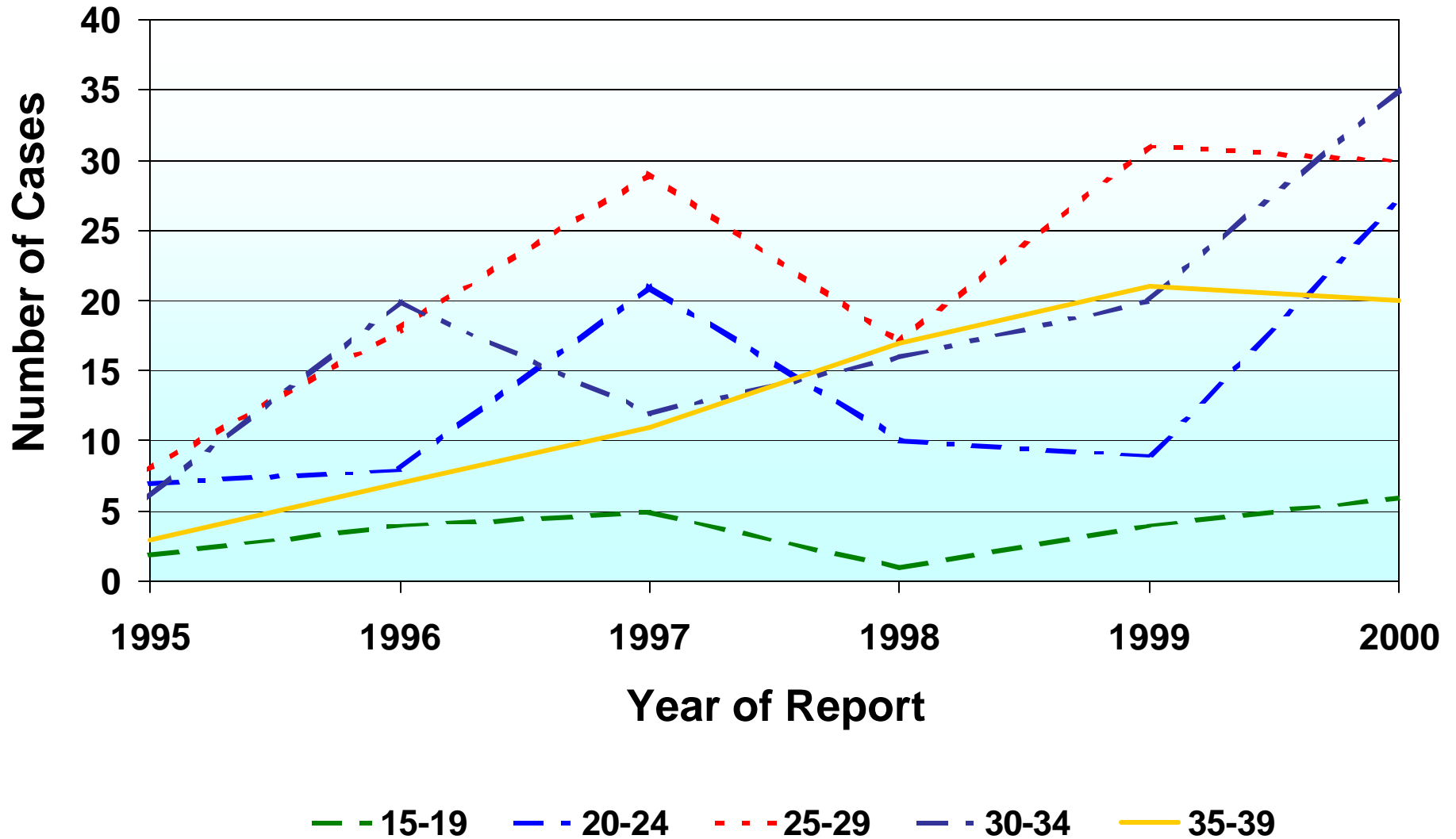


Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

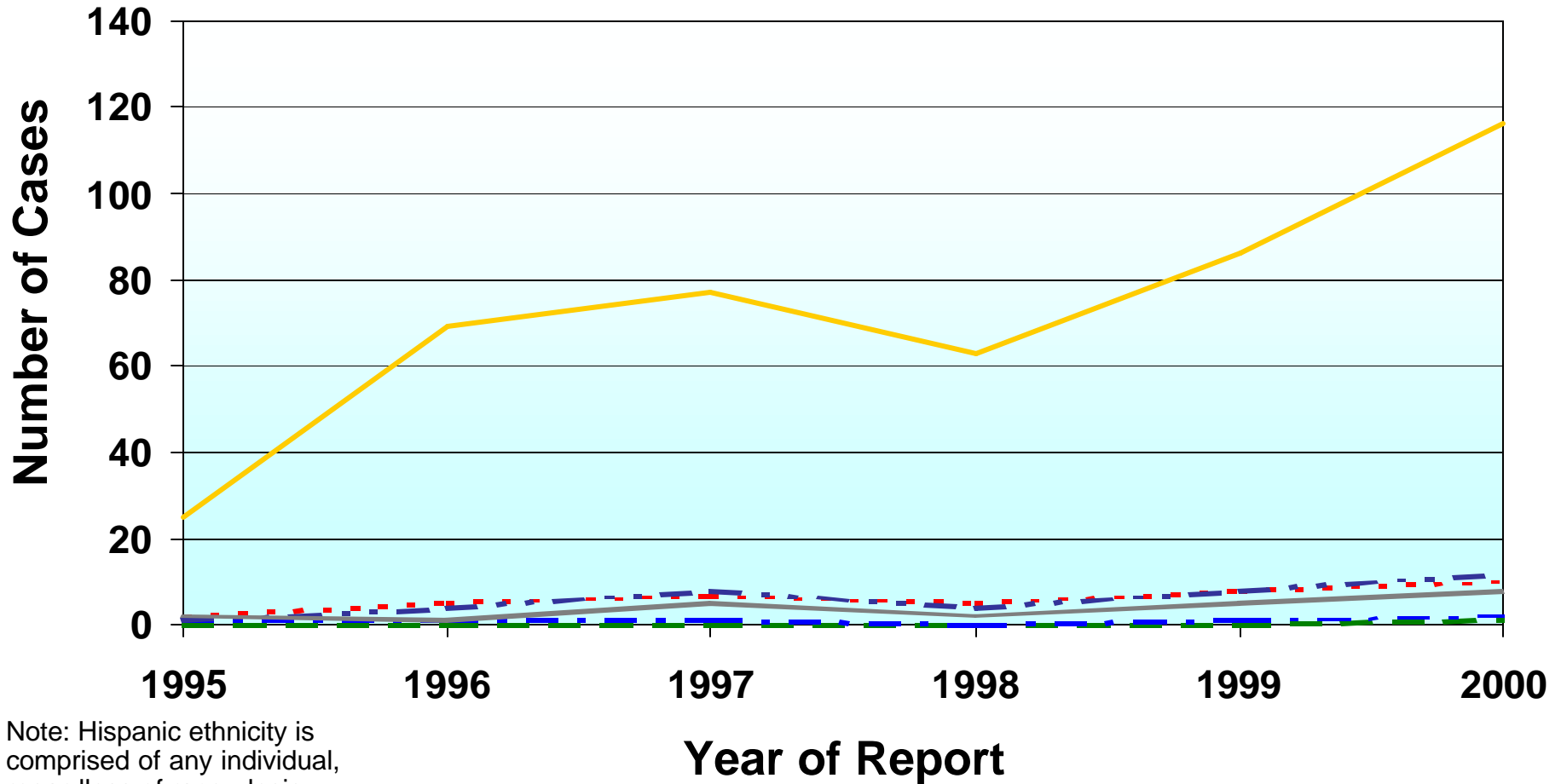
- Amer Ind
- - Asian/PI
- - - Black
- - - Hispanic
- White

Gonorrhea Cases in MSM by Age Group

Multnomah County, 1995-2000



Gonorrhea Cases in MSM by Race and Ethnicity Multnomah County, 1995-2000



Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

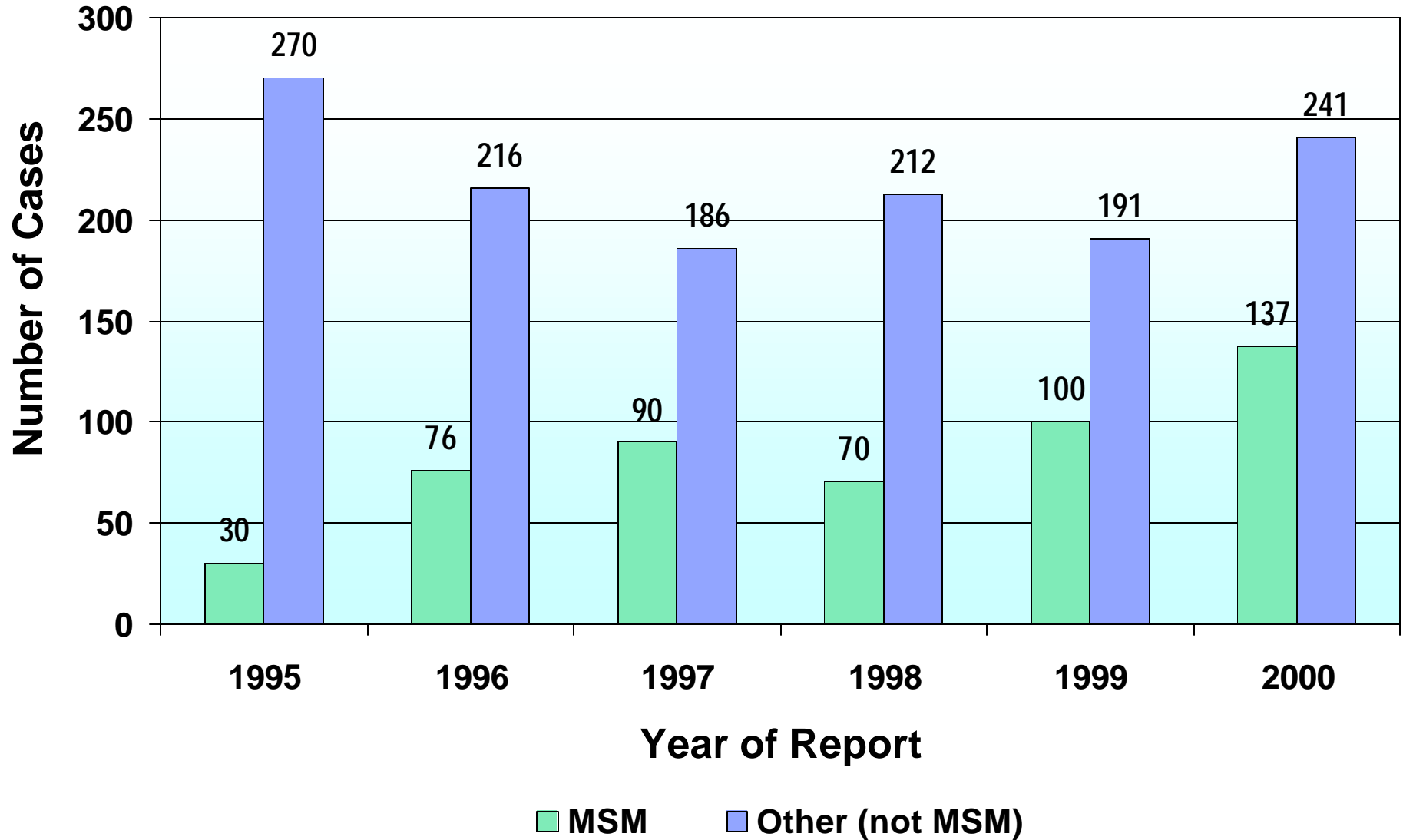
— Amer Ind
— Hispanic

— Asian/PI
— White

— Black
— Unknown

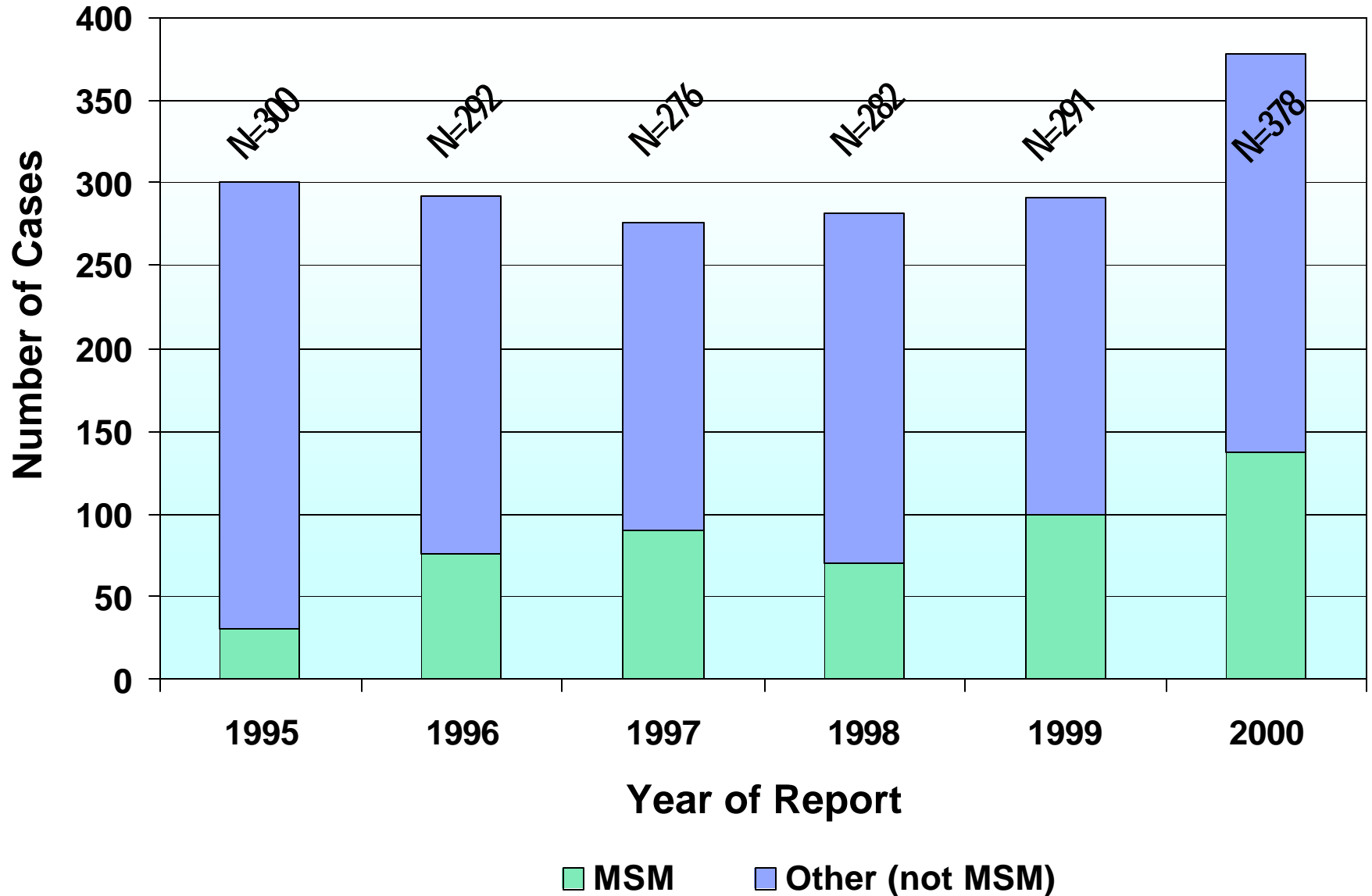
Male Gonorrhea Cases by Risk

Multnomah County, 1995-2000



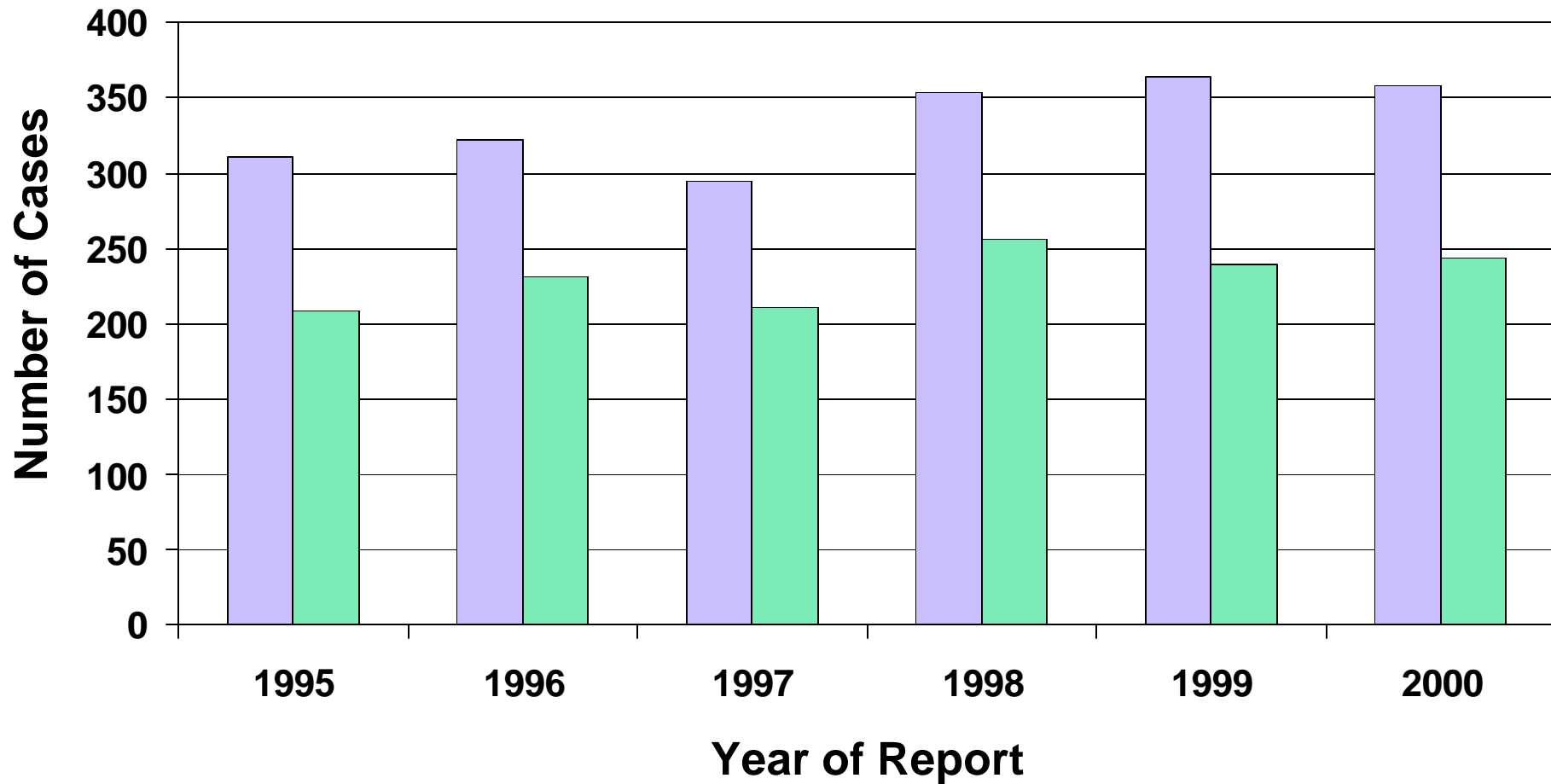
Male Gonorrhea Cases by Risk

Multnomah County, 1995-2000



Cases of Gonorrhea

Excluding Multnomah County, 1995-2000

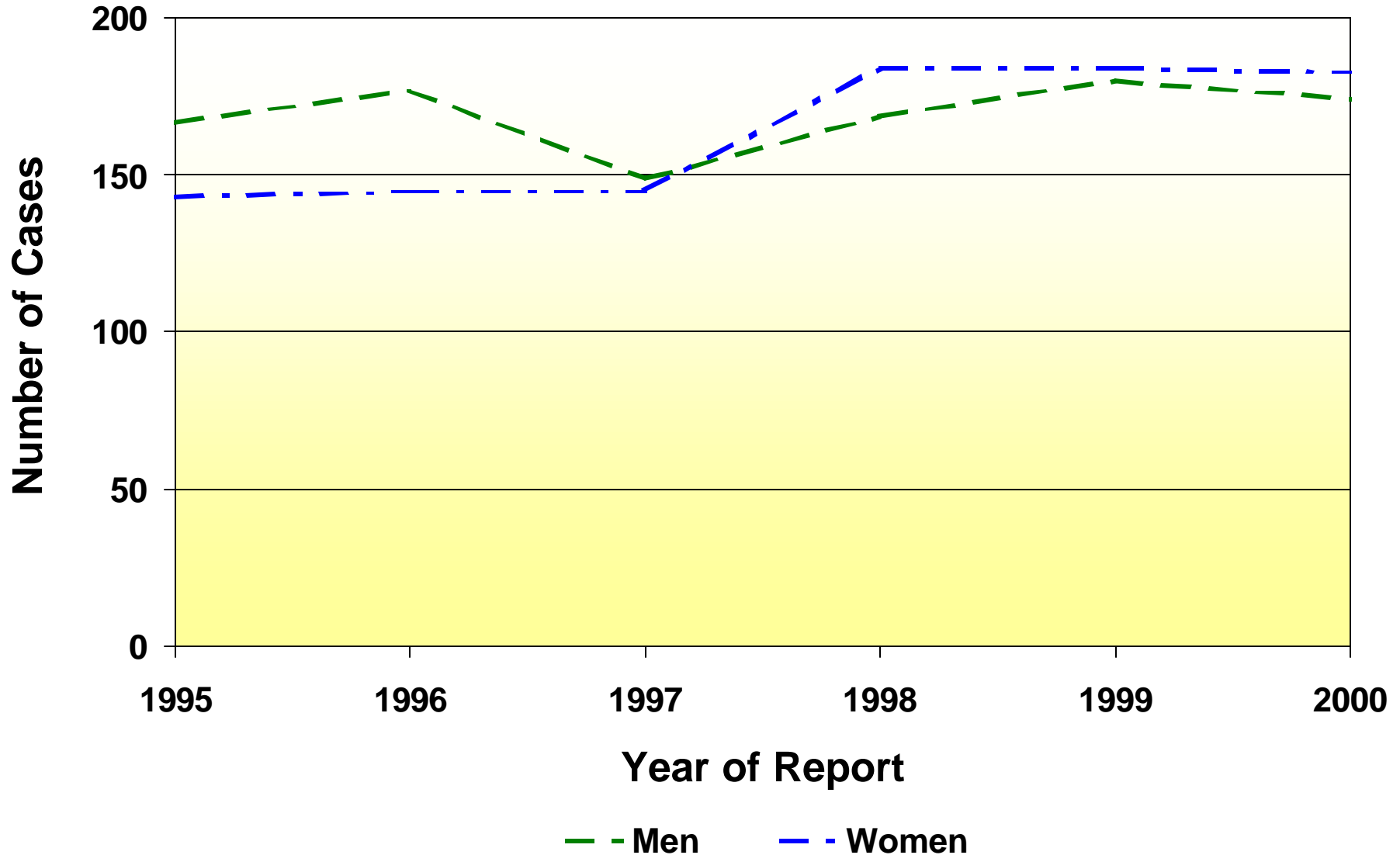


■ Total cases, excluding Multnomah

■ Clackamas, Lane, Marion and Washington county cases

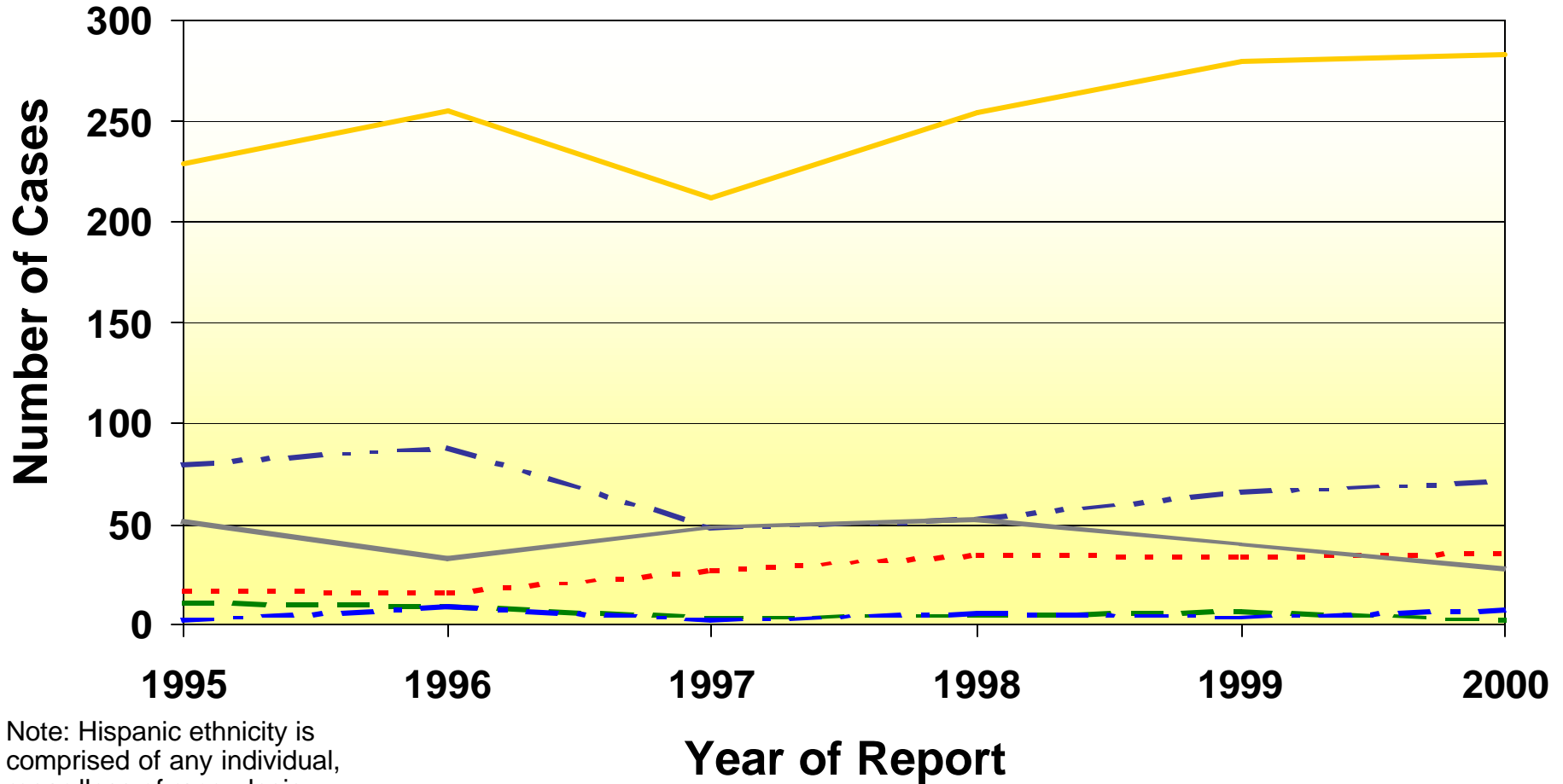
Gonorrhea Cases in Men and Women

All Oregon Counties Except Multnomah, 1995-2000



Gonorrhea Cases by Race and Ethnicity

All of Oregon Except Multnomah County, 1995-2000



Note: Hispanic ethnicity is comprised of any individual, regardless of race, designated as Hispanic. The Hispanic cases are not mutually exclusive of the other cases depicted.

— Amer Ind
— Hispanic

— Asian/PI
— White

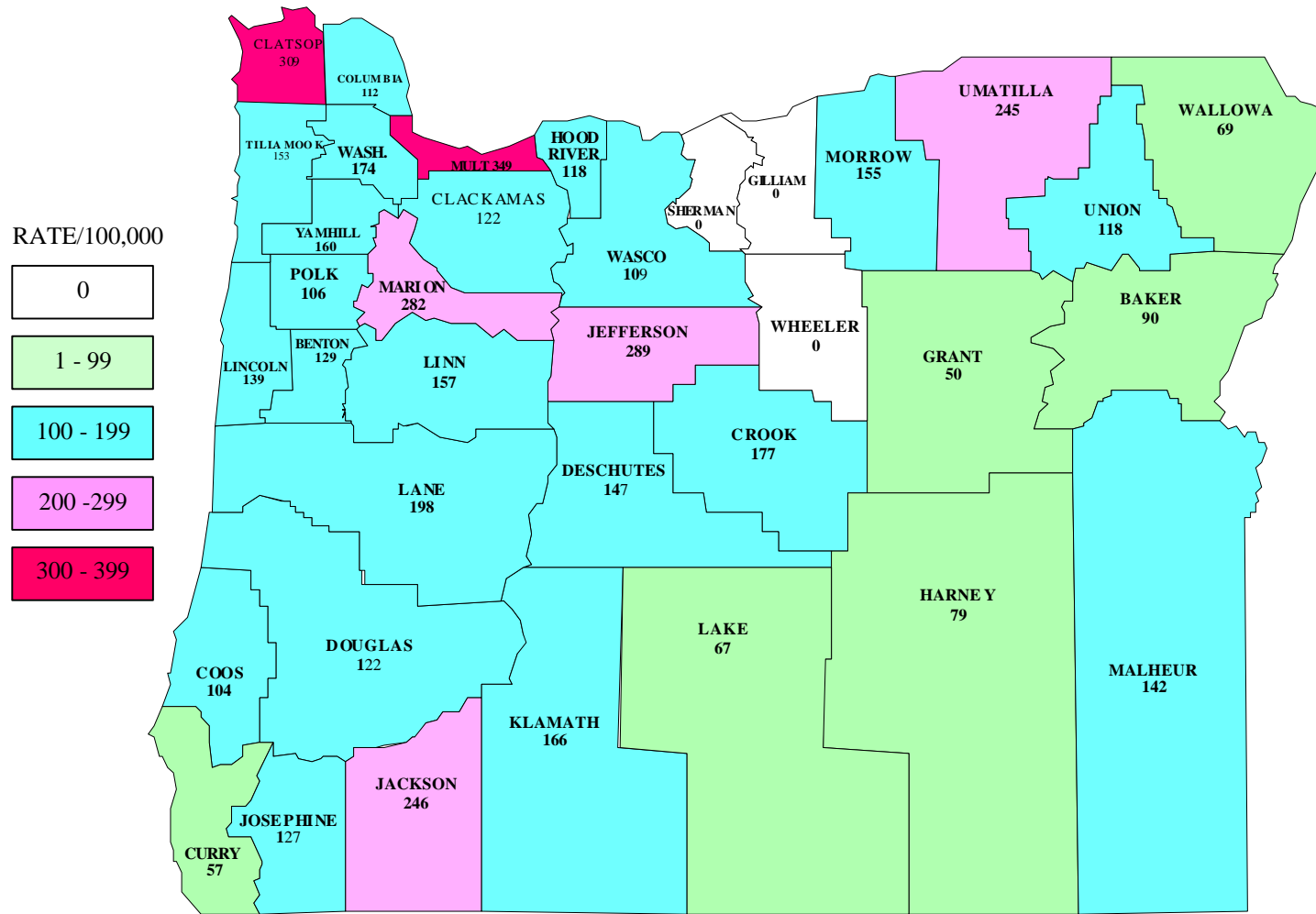
— Black
— Unknown

OREGON CHLAMYDIA CASES AND RATES BY COUNTY 1998 – 2000

COUNTY	1998		1999		2000		
	# CASES	RATE/100,000	# CASES	RATE/100,000	POPULATION	# CASES	*RATE/100,000
BAKER	23	138	14	85	16,741	15	90
BENTON	102	133	83	107	78,153	101	129
CLACKAMAS	349	108	398	119	338,391	412	122
CLATSOP	72	208	72	203	35,630	110	309
COLUMBIA	43	102	46	104	43,560	49	112
COOS	68	111	62	100	62,779	65	104
CROOK	12	72	18	104	19,182	34	177
CURRY	27	123	15	71	21,137	12	57
DESCHUTES	73	70	145	137	115,367	170	147
DOUGLAS	127	127	142	139	100,399	122	122
GILLIAM	0	0	0	0	1,915	0	0
GRANT	4	50	1	12	7,935	4	50
HARNEY	2	26	5	69	7,609	6	79
HOOD RIVER	19	97	13	66	20,411	24	118
JACKSON	296	171	282	163	181,269	446	246
JEFFERSON	59	339	78	469	19,009	55	289
JOSEPHINE	75	103	75	101	75,726	96	127
KLAMATH	79	127	117	185	63,775	106	166
LAKE	4	54	9	126	7,422	5	67
LANE	478	153	607	193	322,959	638	198
LINCOLN	56	130	52	115	44,479	62	139
LINN	147	144	143	137	103,069	162	157
MALHEUR	46	156	46	161	31,615	45	142
MARION	635	234	653	243	284,834	802	282
MORROW	18	192	9	90	10,995	17	155
MULTNOMAH	2130	332	2,023	321	660,486	2306	349
POLK	49	82	77	125	62,380	66	106
SHERMAN	1	53	1	56	1,934	0	0
TILLAMOOK	22	92	24	99	24,262	37	153
UMATILLA	116	173	119	182	70,548	173	245
UNION	32	131	33	133	24,530	29	118
WALLOWA	2	28	8	109	7,226	5	69
WASCO	27	120	25	108	23,791	26	109
WASHINGTON	580	146	612	153	445,342	774	174
WHEELER	1	63	0	0	1,547	0	0
YAMHILL	83	101	124	151	84,992	136	160
STATE	5,857	179	6,131	187	3,421,399	7110	208

2000 RATES CALCULATED USING CENSUS 2000 POPULATION DATA.

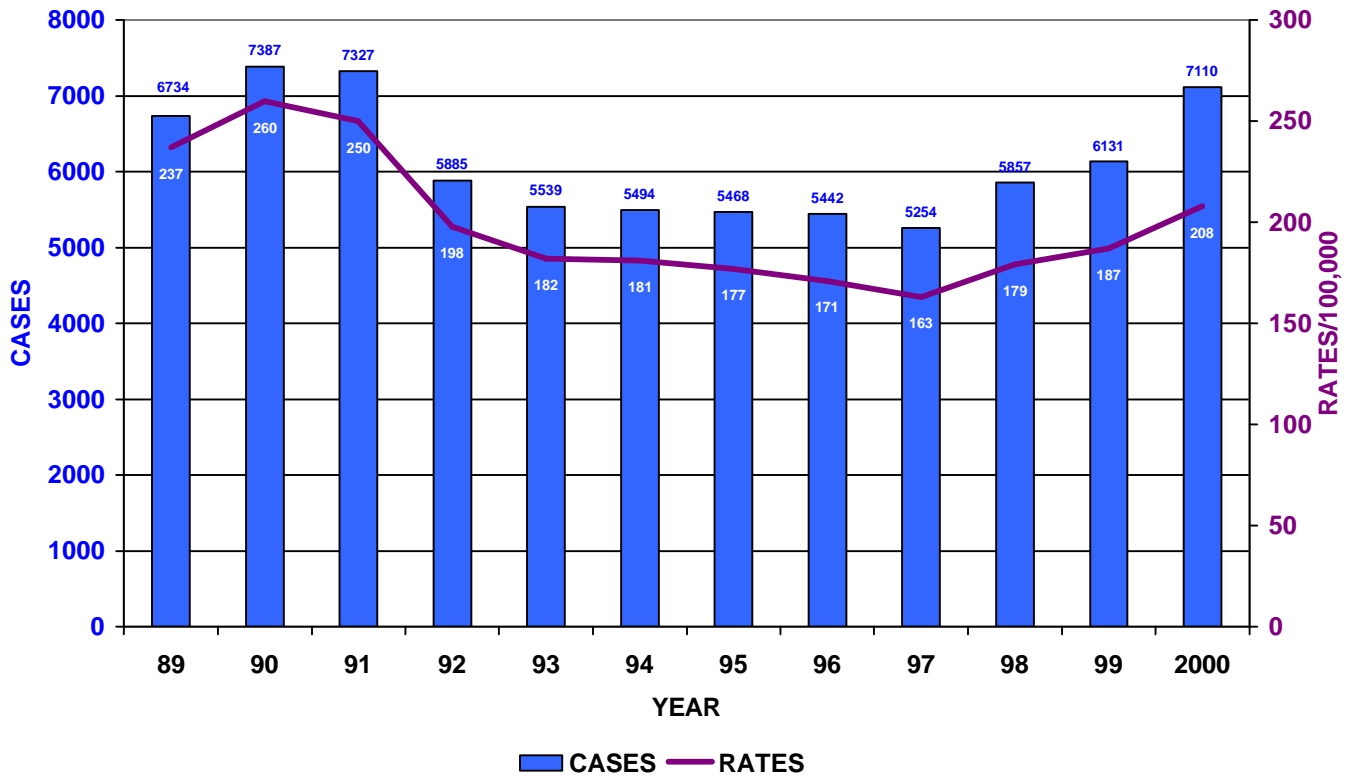
OREGON CHLAMYDIA RATES 2000 BY COUNTY



Rates calculated using census 2000 population data

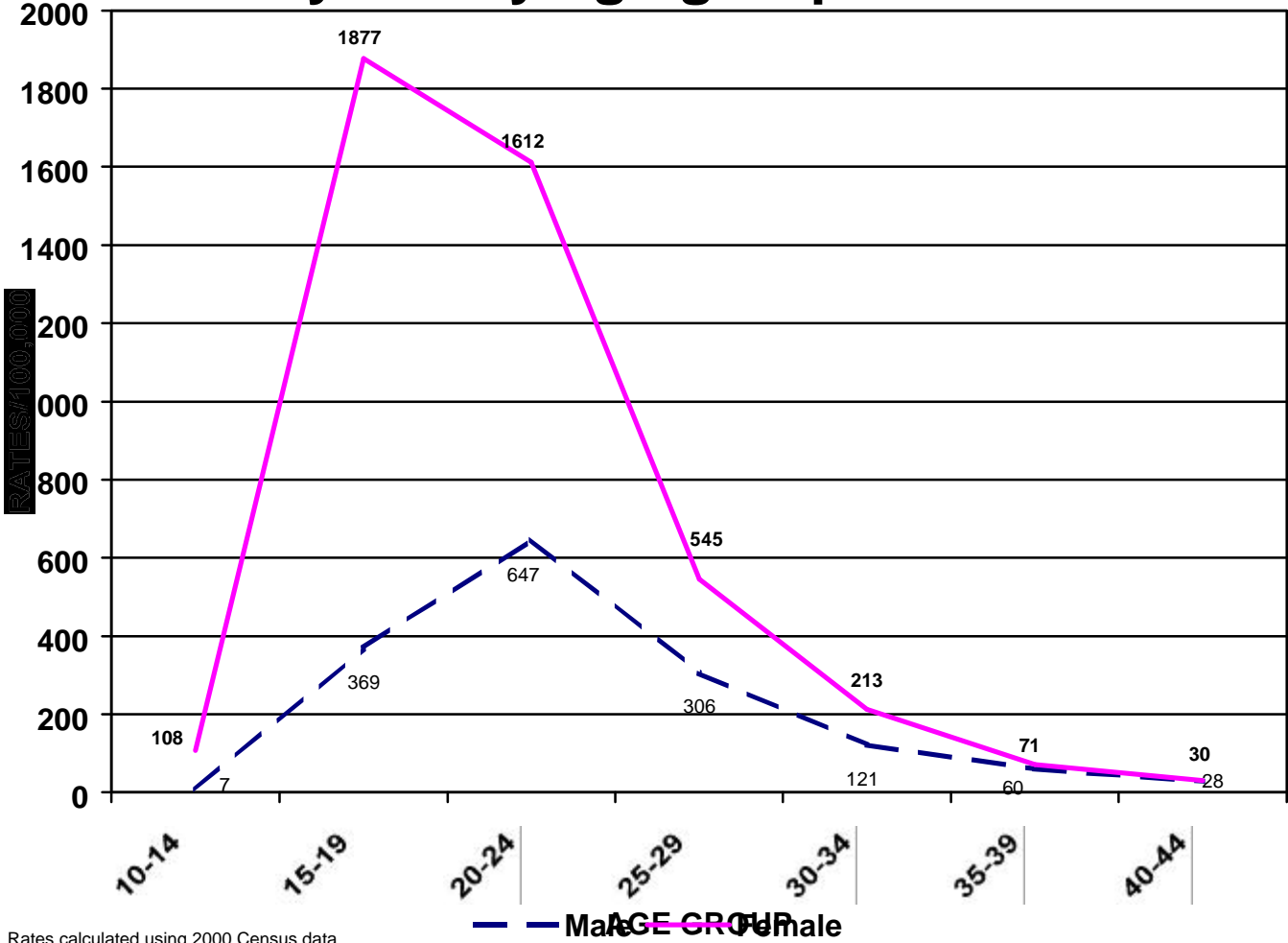
OREGON CASE RATE 208

OREGON CHLAMYDIA CASES & RATES 1990 - 2000



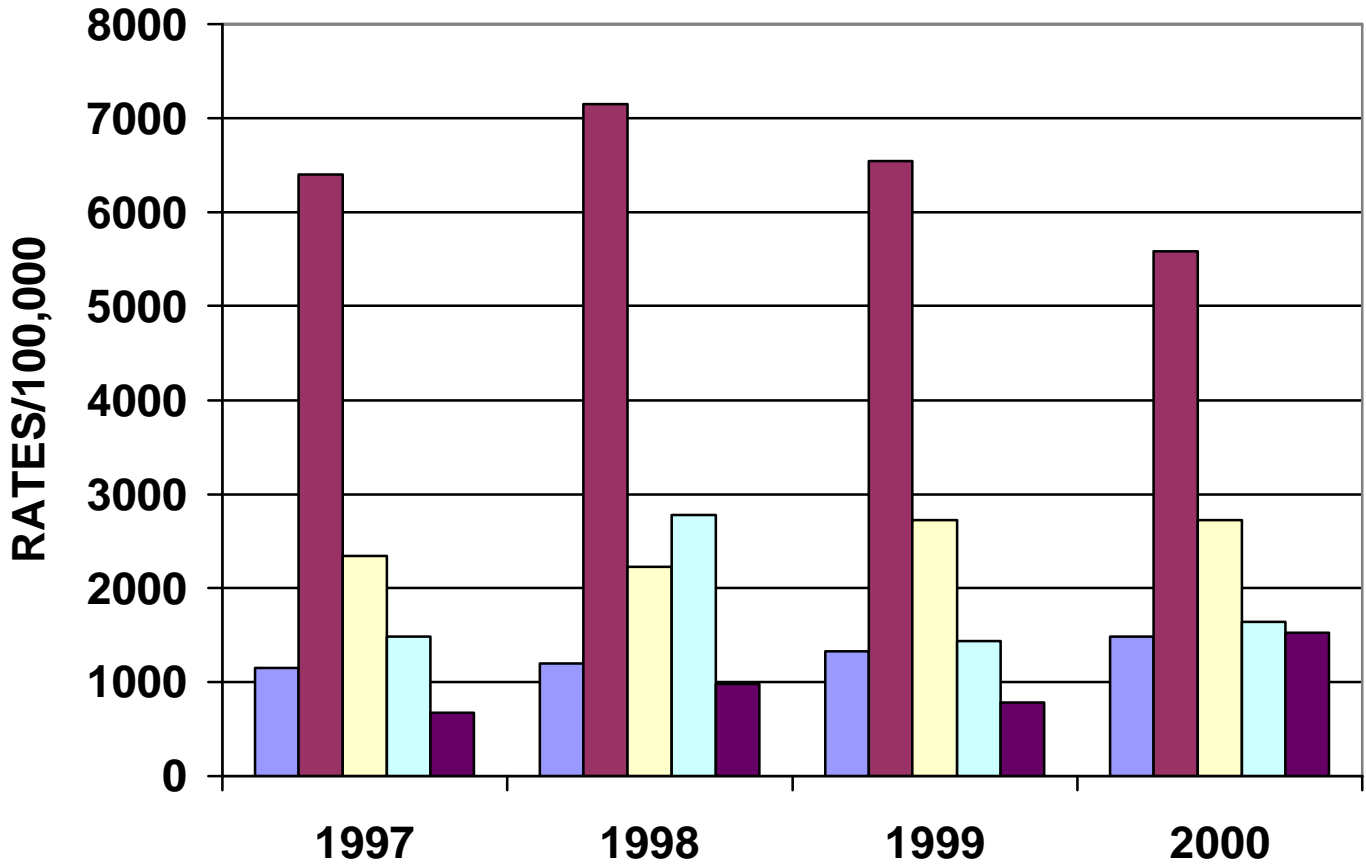
OREGON CHLAMYDIA RATES 2000

by sex by age group 10-44



Rates calculated using 2000 Census data.

OREGON CHLAMYDIA INFECTION RATES FEMALES, AGE 15-19, BY RACE/ETHNICITY 1997 - 2000



	1997	1998	1999	2000
WHITE	1153	1198	1327	1483
AF AM/BLK	6405	7148	6546	5579
HISP	2339	2224	2728	2725
AM IND	1483	2774	1435	1640
ASIAN/PI	671	984	782	1519

YEAR

Rates based on 1999 population estimates

STATUS OF STD BENCHMARKS

Student and adult sexually transmitted disease (STD) Benchmarks are part of the Benchmarks for People section of the Oregon Benchmarks Document. Meeting the STD Benchmarks will enhance quality of life by reducing complications associated with STD's, for example, infertility and tubal pregnancy related to chlamydial and gonococcal infections. These infections are among the most common seen in all types of primary care settings. Reducing the incidence of STD's would enhance general and reproductive health of women and men, and would improve the health status of newborns. In addition, reduction in STD's, especially those associated with genital ulcers, e.g., genital herpes and syphilis, will also reduce the transmission of HIV.

Explanation: the student (10-19 age group) and adult (20-44) STD Benchmarks are an aggregate of reported chlamydial, gonococcal, and early syphilis infections expressed as a rate per 10,000 population. Case data shown for the year 2000 and 2010 are forecasted cases to meet the benchmarks. Benchmarks are underlined. The 15-19 student sub-group is included to demonstrate that this group accounts for the majority of the cases in the 10-19 group. Current data indicate that Oregon will not achieve STD Benchmarks for the year 2002. The slight increase of cases and rates for 1998 and 1999, and more robust increases in 2000 and 2002 compared to 1997 reflect additional chlamydial infections identified by screening greater number of adolescents and young adults and the increased use of tests with greater sensitivity, and a steady increase observed for gonococcal infections. Please refer to the following table.

	STUDENT 10-19	SUBGROUP 15-19	ADULT 20-44
YEAR	cases/ rate	cases/ rate	cases/ rate
1990	3,675/ 94.1	3,467/ 181.7	5,938/ 52.6
1991	3,738/ 92.4	3,527/ 184.3	5,325/ 47.7
1992	3,121/ 76.6	2,904/ 148.3	4,235/ 36.7
1993	2,835/ 67.2	2,667/ 131.2	3,836/ 33.0
1994	2,593/ 61.4	2,372/ 116.6	3,633/ 31.2
1995	2,491/ 57.7	2,315/ 110.8	3,450/ 29.6
1996	2,615/ 59.0	2,449/ 112.9	3,561/ 30.2
1997	2,543/ 56.1	2,372/ 103.6	3,392/ 29.1
1998	2710/ 57.4	2,547/ 106.8	3,950/ 33.4
1999	2,872/ 60.0	2,741/ 112.8	4,038/ 34.4
2000	3,136/ 64.2	2,970/ 121.0	4,935/ 40.0
2000	<u>2,444</u> / 50.0		<u>3,700</u> / 30.0
2001*	3,161/ 64.7	3,033/ 123.5	5,351/ 43.4
2002	2,151/ 44		3,577/ 29
2003	2,004/ 41		3,454/ 28
2004	1,858/ 38		3,207/ 26
2005	1,711/ 35		2,960/ 24
2006	1,564/ 32		2,714/ 22
2007	1,418/ 29		2,467/ 20
2008	1,271/ 26		2,220/ 18
2009	1,125/ 23		1,974/ 16
2010	<u>978</u> / 20.0		<u>1,850</u> / 15.0

* Rates for 2001 were derived using Year 2000 population data. Estimated cases for years 2002-2010 to meet benchmark rates were derived using Year 2000 population data.