

Westchester County 2019 Community Health Assessment



Supplemental Data Report III: Communicable Diseases

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FOREWORD

The Westchester County Department of Health (WCDH) plays a leading role in promoting health, preventing disease, and prolonging meaningful life for Westchester County residents. The WCDH's ongoing mission involves monitoring and controlling the spread of diseases, regulating air and water quality, enforcing state and local sanitary codes, promoting and endorsing local public health activities, and ensuring the availability of community health services.

To comply with New York State Public Health Law, WCDH has collaborated with local hospitals and other community health partners to complete a *Community Health Assessment (CHA) Survey*, which describes the current health status of Westchester County residents, identifies existing gaps and health care barriers, assesses the availability and accessibility of health care services, and specifies public health priorities in the county. In addition, a *Community Health Improvement Plan (CHIP)* has been crafted to lay out the specific objectives, goals, and actions of the Health Department which address the public health priorities identified in the Community Health Assessment.

Supplementing the *Westchester County Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP), 2019-2021*, six additional data reports are compiled to provide detailed data addressing specific areas relevant to the county's public health. These reports are:

- Westchester County Community Health Assessment Supplemental Data Report 1. Population (2013-2017 ACS)
- Westchester County Community Health Assessment Supplemental Data Report 2. Vital Statistics (2011-2017)
- Westchester County Community Health Assessment Supplemental Data Report 3. Communicable Diseases (2013-2018)
- Westchester County Community Health Assessment Supplemental Data Report 4. Cancer (2012-2016)
- Westchester County Community Health Assessment Supplemental Data Report 5. Emergency Room Visits (2012-2016)
- Westchester County Community Health Assessment Supplemental Data Report 6. Hospitalizations (2012-2016)

This report presents the major communicable diseases required to be reported to New York State Health Department. Specific diseases occurred among Westchester residents are reported by type, municipality, sex, age, and race/ethnicity.

Data presented in this report are from the Westchester County Department of Health, the New York State Department of Health, and the American Community Surveys (ACS) conducted by the U.S. Bureau of Census.

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HIGHLIGHTS

In 2018, of the 76 reportable communicable diseases, in New York State a total of 15,190 cases among 47 diseases were reported to New York State County Department of Health.

Influenza was the most reported communicable disease in Westchester County with 4,686 cases of influenza A and 3,461 cases of influenza B reported in 2018.

Chlamydia had the highest reported cases of sexually transmitted diseases, followed by gonorrhea. In 2018, 3,927 chlamydia and 765 cases of gonorrhea were reported.

As of December 2017, 1,301 individuals were living with HIV in Westchester County and 1,801 individuals were living with AIDS. Excluding New York City, Westchester County had the highest number of individuals living with HIV and/or AIDS among all New York State Counties.

Meningitis and invasive streptococcus pneumoniae were the most commonly reported central nervous system diseases and diseases of bacteremias: thirty five cases of meningitis and sixty four cases of invasive strep pneumoniae were reported in 2018.

In 2018, 119 cases of salmonellosis were reported, as well as 246 cases of campylobacteriosis and seventy six cases of giardiasis, making up the majority of enteric infections reported.

The number of confirmed cases of Lyme disease in Westchester County was 119 in 2018. However, the New York State Department of Health estimated that there were 312 Lyme disease cases.

Post-exposure prophylaxis was administered to 257 Westchester County residents due to contact with suspected rabid animals.

Thirty-five new cases of tuberculosis were reported to the Department of Health in 2018, and an additional 429 close contacts were investigated.

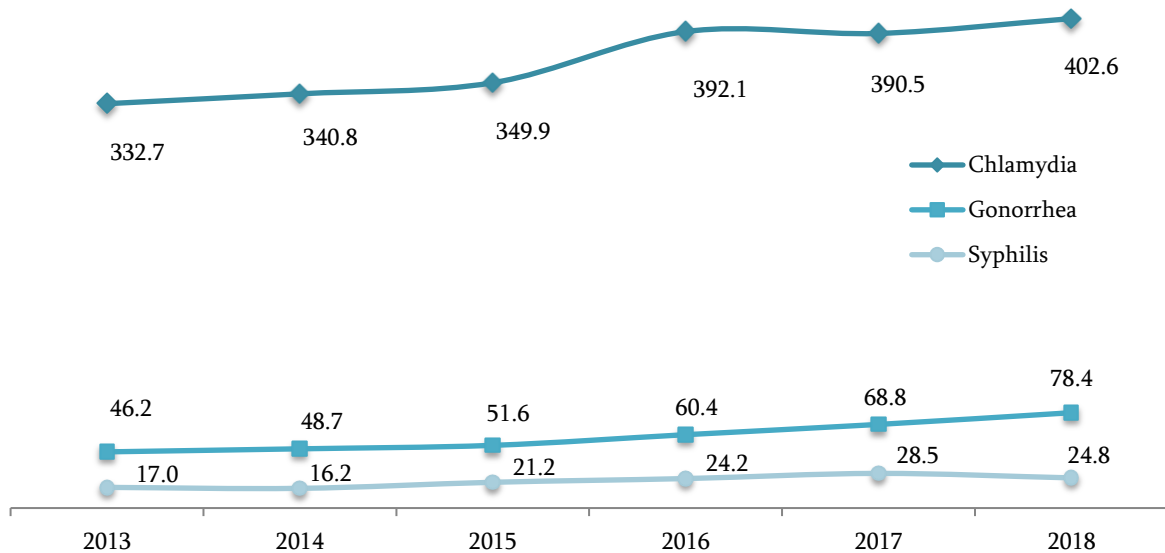
Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) include a large number of infectious organisms usually spread through sexual contact with an infected person. Individuals infected with an STD can be asymptomatic or have mild symptoms that are easily disregarded. However, those infected have the potential to spread the disease to others and develop severe health consequences.

Chlamydia was the most prevalent reportable STD in Westchester County between the period 2013-2018, with 3,927 cases reported in 2018 and an overall rate of 402.6 cases per 100,000 county residents. Reported infection rates of chlamydia have risen over the past six years by 21.0% (Figure 1).

Gonorrhea was the second most prevalent reportable STD in Westchester County with 765 cases and a rate of 78.4 per 100,000 in 2018. The total change in reported infection rates from 2013 to 2018 was an increase of 69.7% (Figure 1).

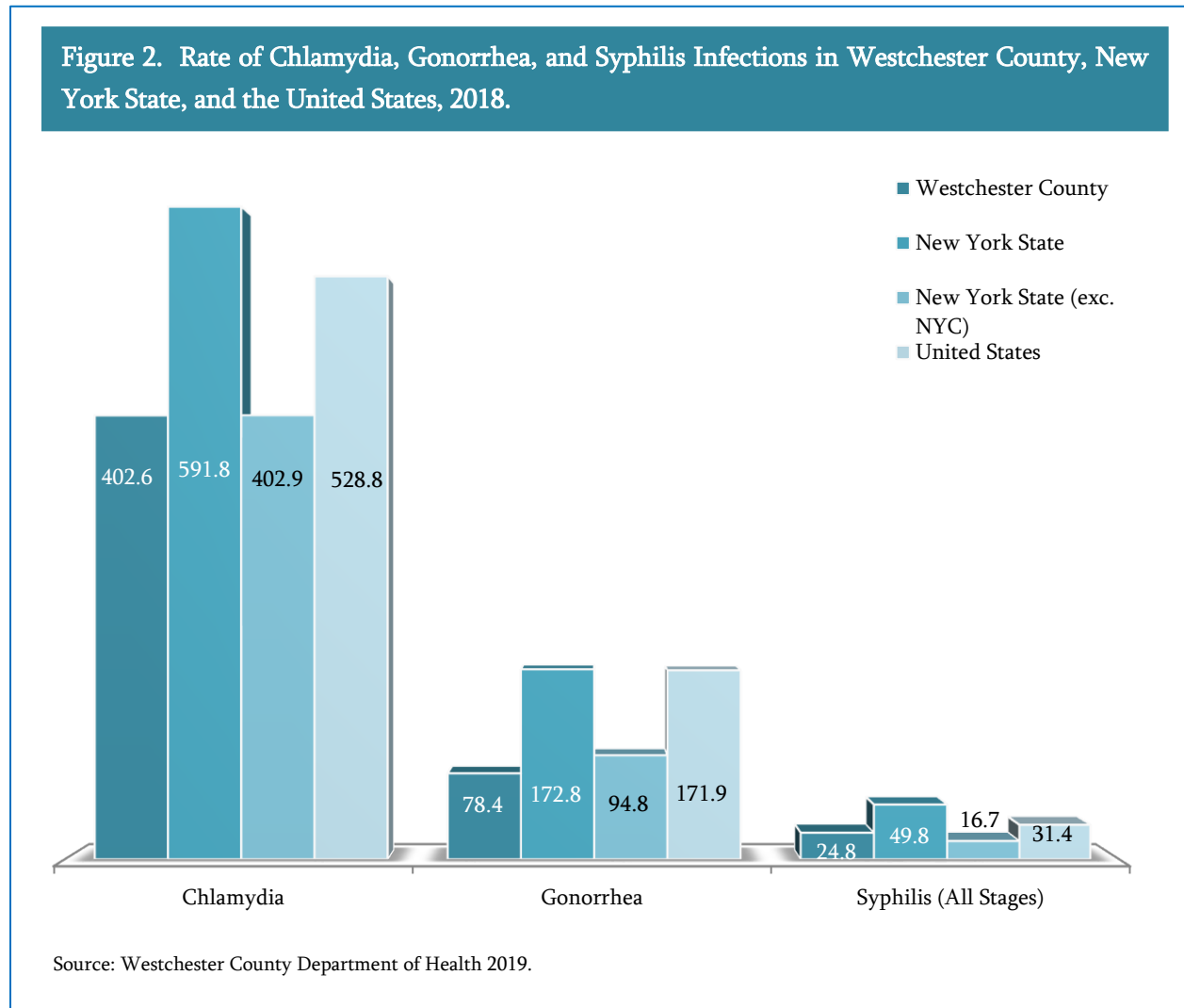
Figure 1. Reported Rates of Chlamydia, Gonorrhea, and Syphilis Infections, Westchester County, 2013 – 2018.



Source: Westchester County Department of Health 2019.

Syphilis was the third most prevalent reportable STD in Westchester County, with 242 cases and a rate of 24.8 per 100,000 in 2018. The rate of infection, with all stages of syphilis, increased by 45.6% since 2013.

The reported rates of chlamydia, gonorrhea, and syphilis in Westchester County were lower than those in New York State, when New York City is included.¹ When New York City was excluded, Westchester County had comparable rates of chlamydia and lower gonorrhea infection rates but had a higher rate of syphilis (Figure 2).

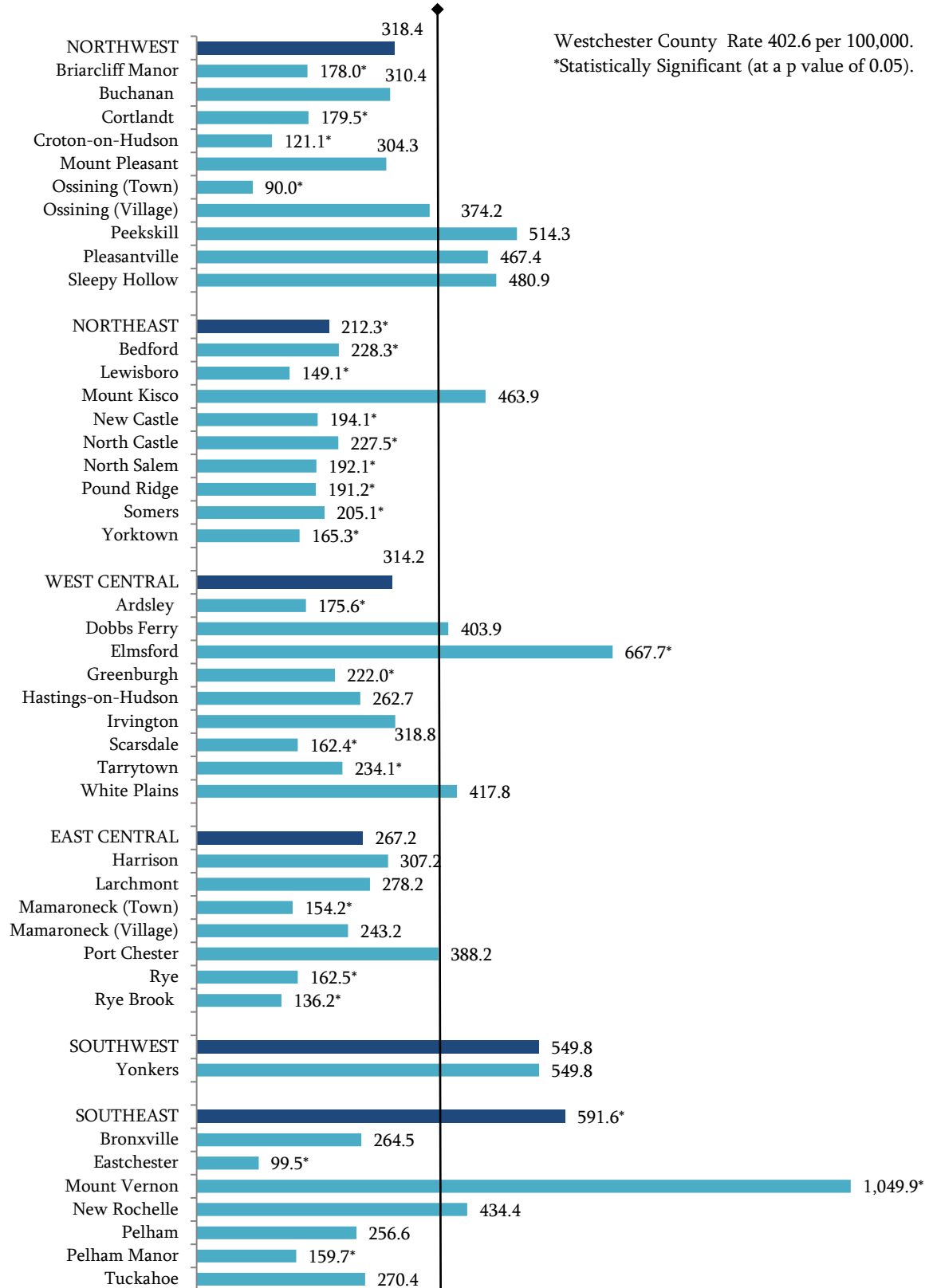


Compared to the entire nation, Westchester County had lower rates of chlamydia, gonorrhea, and syphilis.

¹ National and state figures are for the year 2017 as more recent figures were not available at the time of this report.

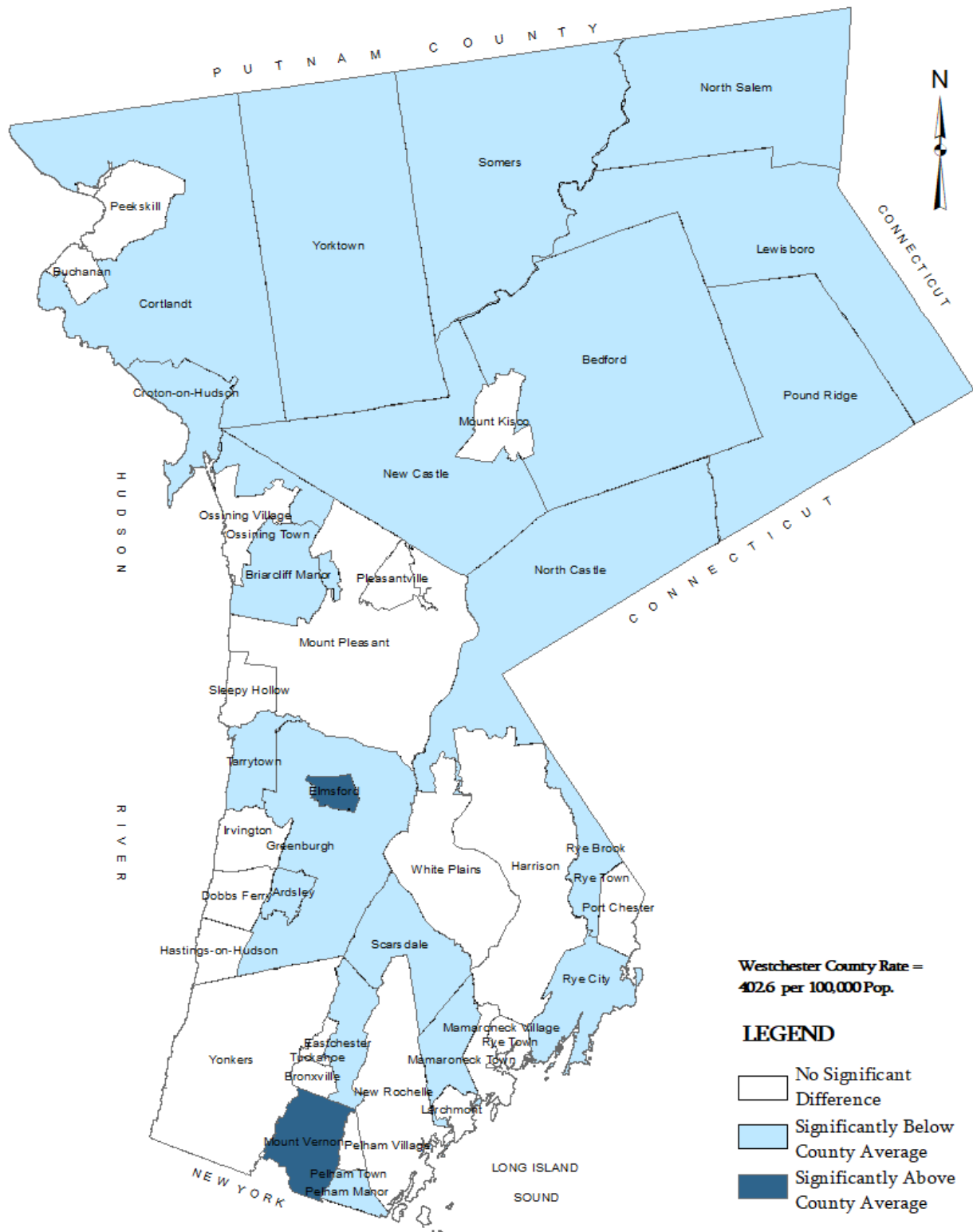
The reported rate of chlamydia by municipality is presented in Figures 3 and 4. In 2018, the reported rates of chlamydia infection were significantly higher in the Southeast Health Planning Region (591.6 per 100,000) than the overall county rate (402.6 per 100,000). The Northeast Health Planning Region (HPR) had a significantly lower rate (212.3 per 100,000) of chlamydia infections than the county as a whole (Figure 3).

Figure 3. Reported Rates of Chlamydia Infection by Municipality, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Figure 4. Comparisons of Rates of Chlamydia Infections by Municipality with Total Westchester County Rate, 2018.

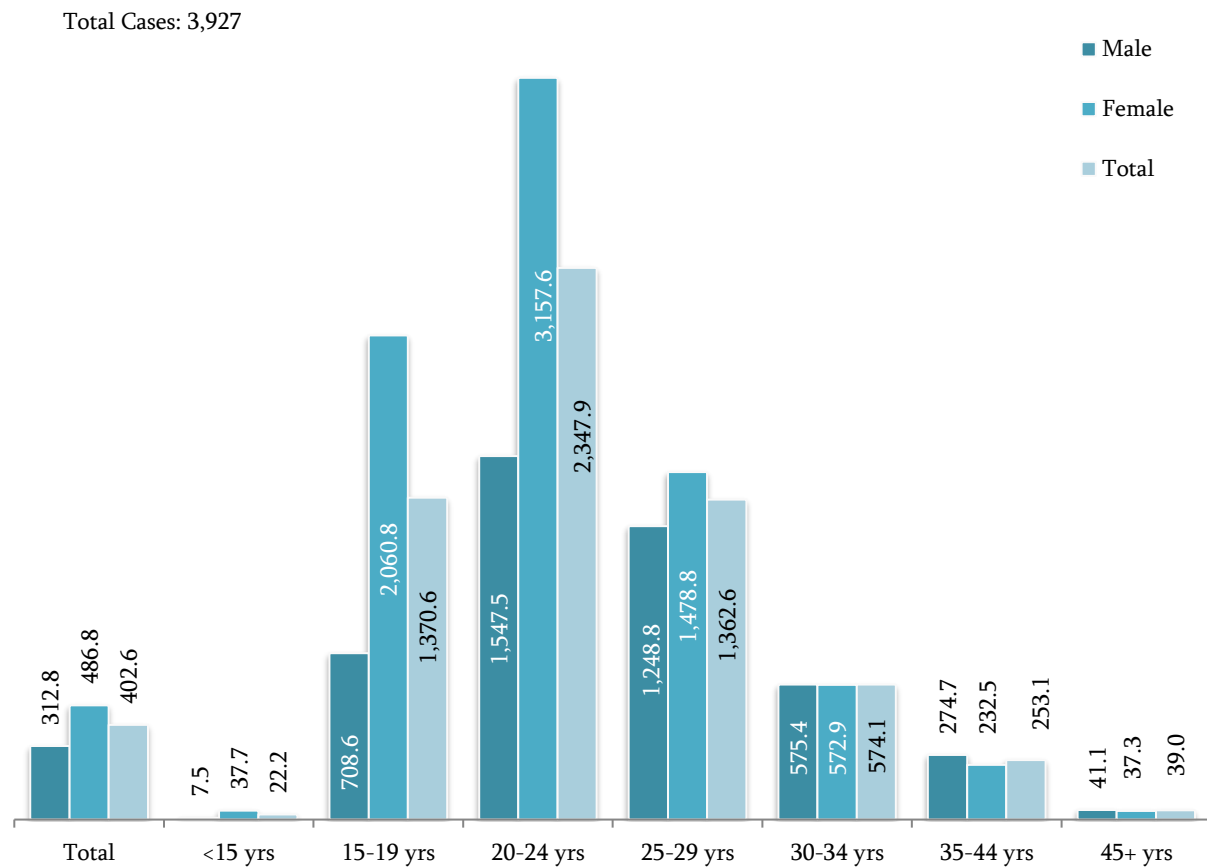


Source: Westchester County Department of Health 2019.

The reported rate of chlamydia was the highest among the 20-24 age group (2,347.9 per 100,000), followed by the 15-19 (1,370.6 per 100,000) and 25-29 age groups, 1,362.6 per 100,000 (Figure 5).

The overall rate of infection is higher in females than their male counterparts (486.8 and 312.8 per 100,000, respectively). For ages under 30 years, females had a higher reported infection rate in comparison to males. The higher rate of reported infection among females may be associated with higher rates of screening. In addition, women may become re-infected if their partners have not been tested and treated for STDs. Many individuals infected with an STD, especially chlamydia, may not exhibit symptoms and thus are unaware of the need to be tested.

Figure 5. Reported Rates of Chlamydia Infections by Age Group and Sex, Westchester County, 2018.

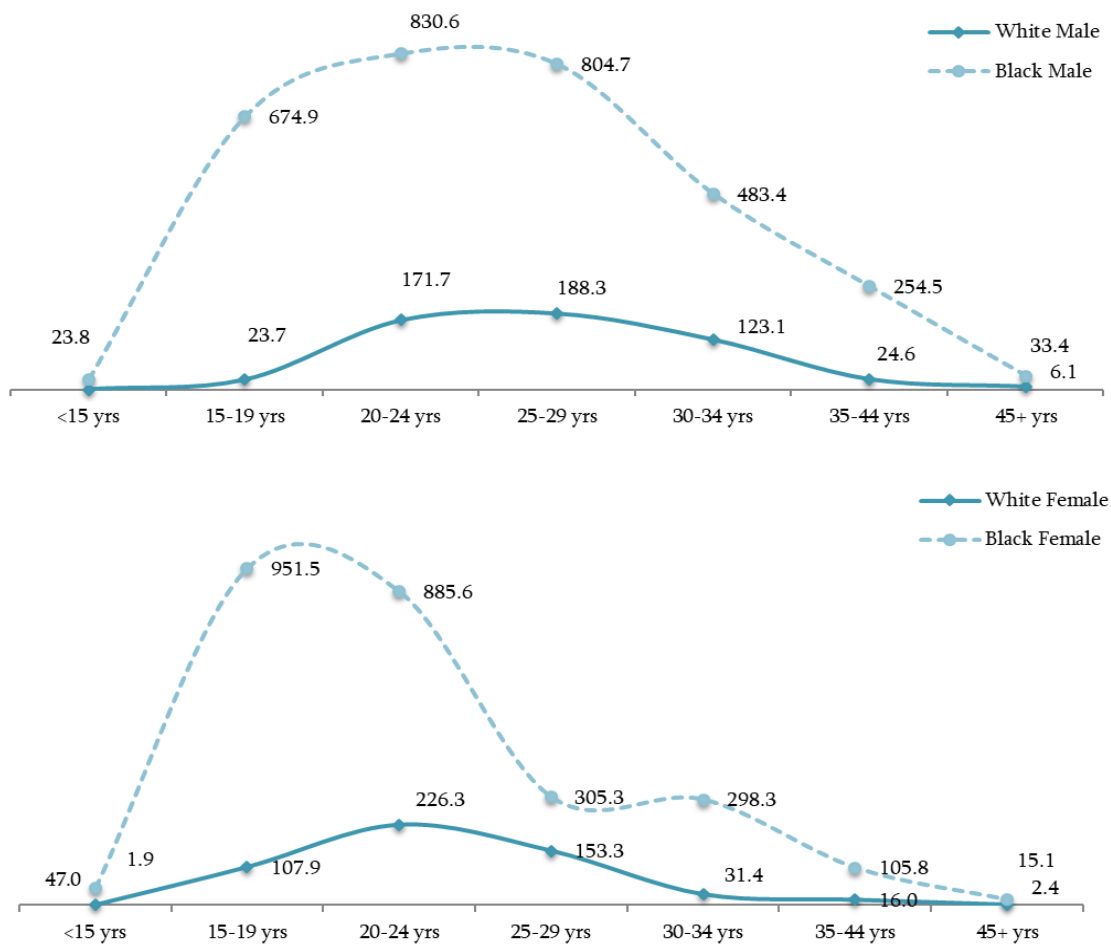


Source: Westchester County Department of Health 2019.

Although blacks comprise only 14.6% of the county’s population, 40.9 per cent of the reported cases, for whom race was known was black.

For both males and females and across all age groups, blacks have higher reported rates of chlamydia than their white counterparts. In the 15 to 19 age group, black females have a rate of 951.5 cases per 100,000, almost 9 times greater than white females of the same age. In the 20-24 age groups, the rate of infection for black females is 4 times greater. This trend is also evident among males. The rate of reported chlamydia infection among black males aged 15-19 is nearly 29 times greater than white males of the same age (Figure 6).

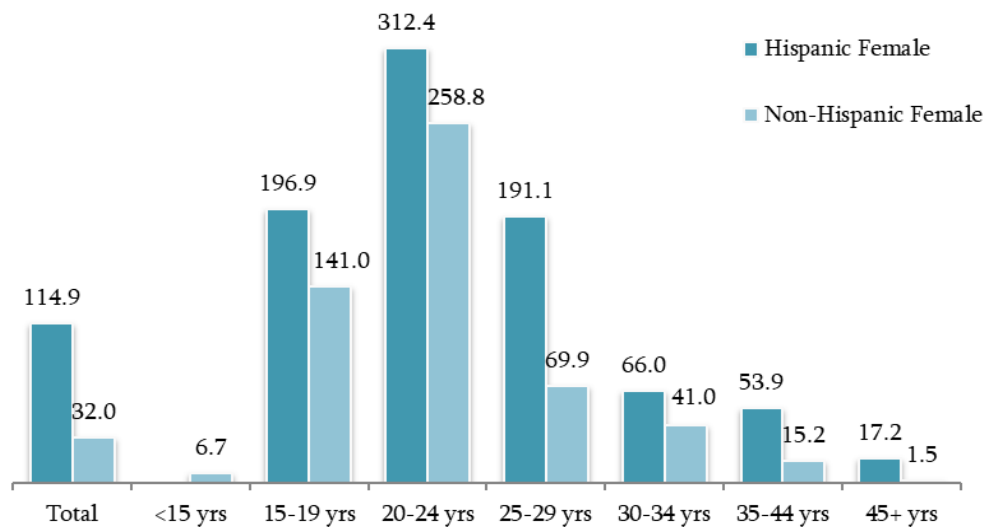
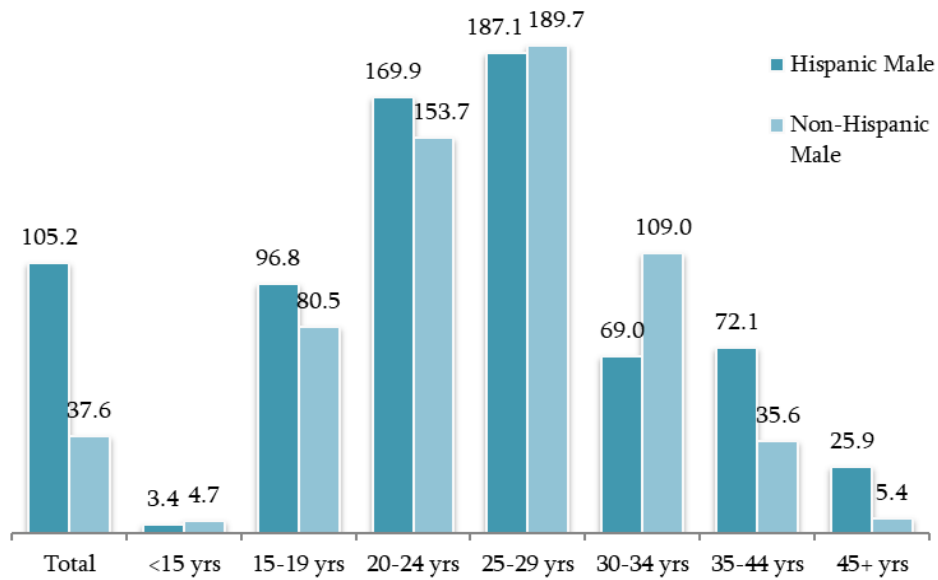
Figure 6. Reported Rates of Chlamydia Infections by Age, Sex and Race, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

In general, reported rates of chlamydia were higher for Hispanics than for non-Hispanics. Hispanic females had higher rates of reported chlamydia infections than non-Hispanics for all age groups (Figure 7).

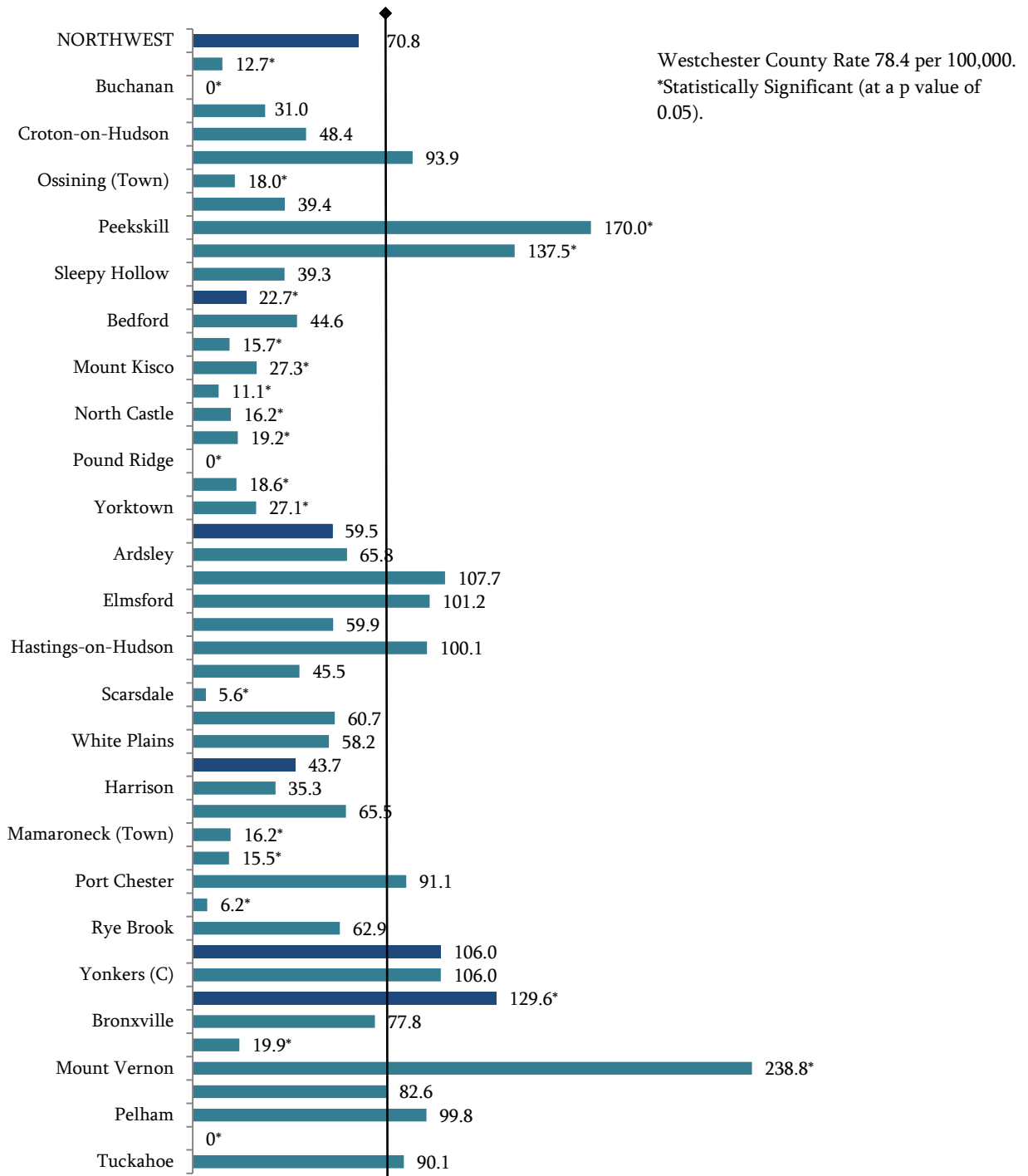
Figure 7. Reported Rates of Chlamydia Infections by Age, Sex and Ethnicity, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

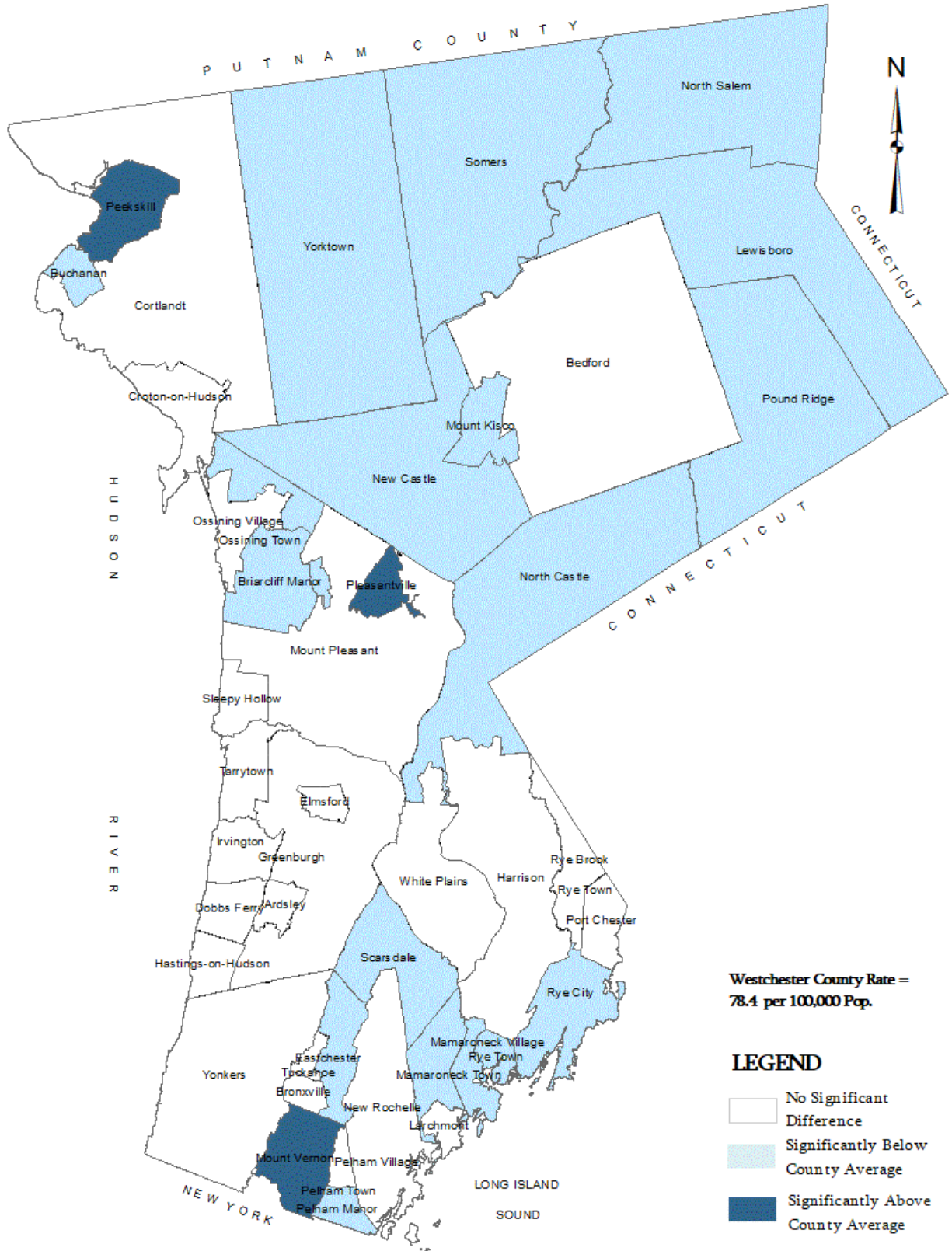
The reported rates of gonorrhea infection is presented in Figures 8 and 9).

Figure 8. Reported Rates of Gonorrhea Infection by Municipality, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

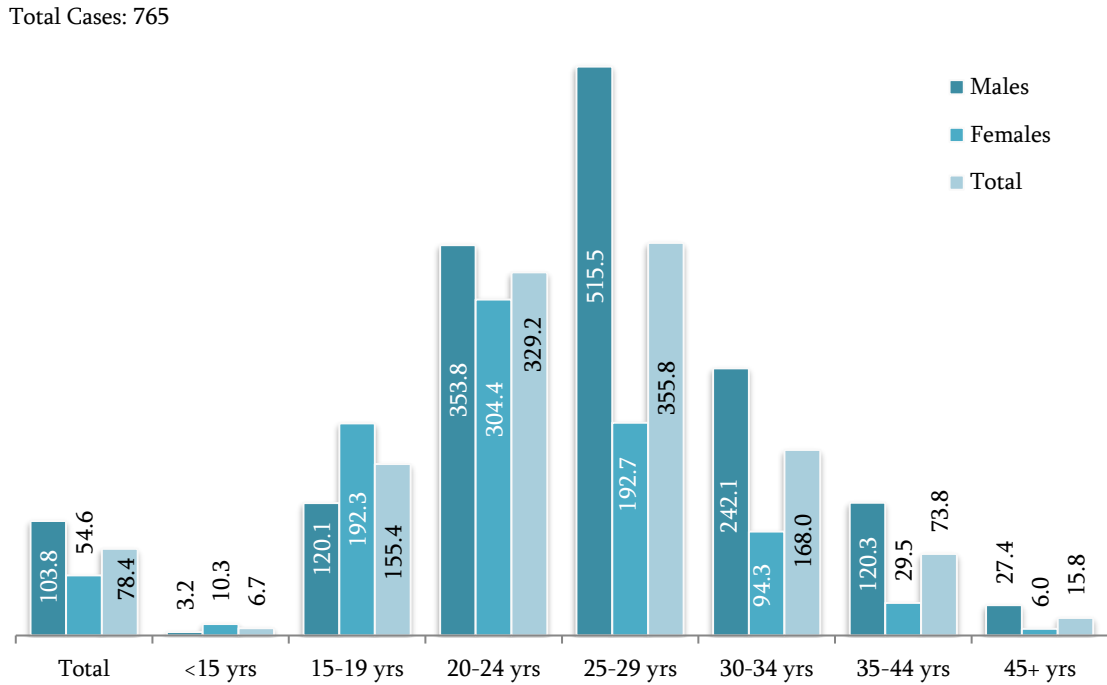
Figure 9. Comparison of Rates of Gonorrhea Infections by Municipality with Total Westchester County Rate, 2018.



Source: Westchester County Department of Health 2019.

For 2018, males had a higher overall rate of infection compared to females (103.8 vs. 54.6 per 100,000). When broken down by age, females generally had higher rates of gonorrhea infection among the younger age groups (Figure 10). In 2018, over 59.3% of cases occurring among females were younger than 25 years old, whereas 69.2% of males were over the age of 25.

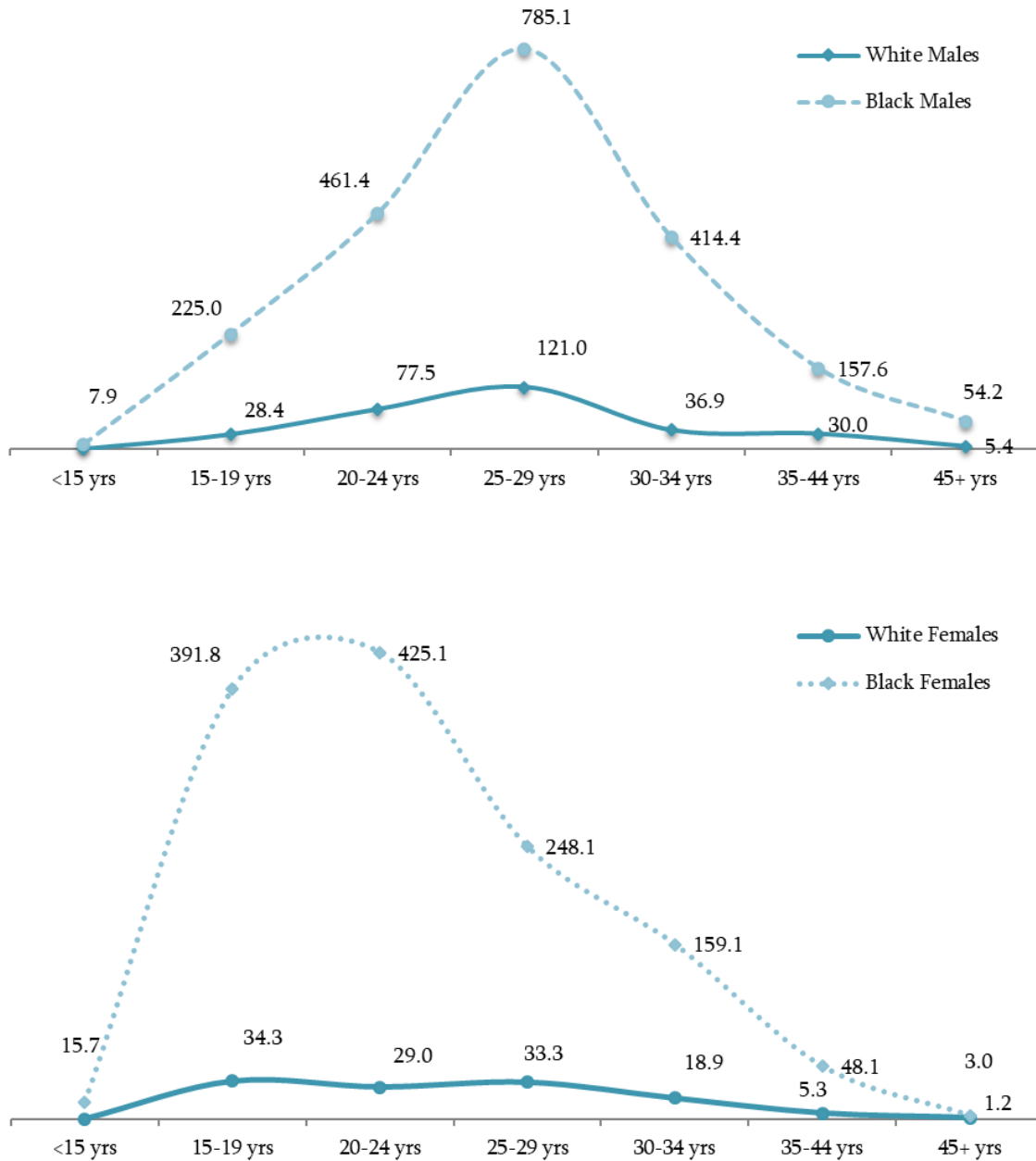
Figure 10. Reported Rates of Gonorrhea Infections by Age and Sex, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Among males, the reported rate for blacks aged 25 to 29 years was 785.1 per 100,000 and 121.0 per 100,000 among whites of the same age (Figure 11).

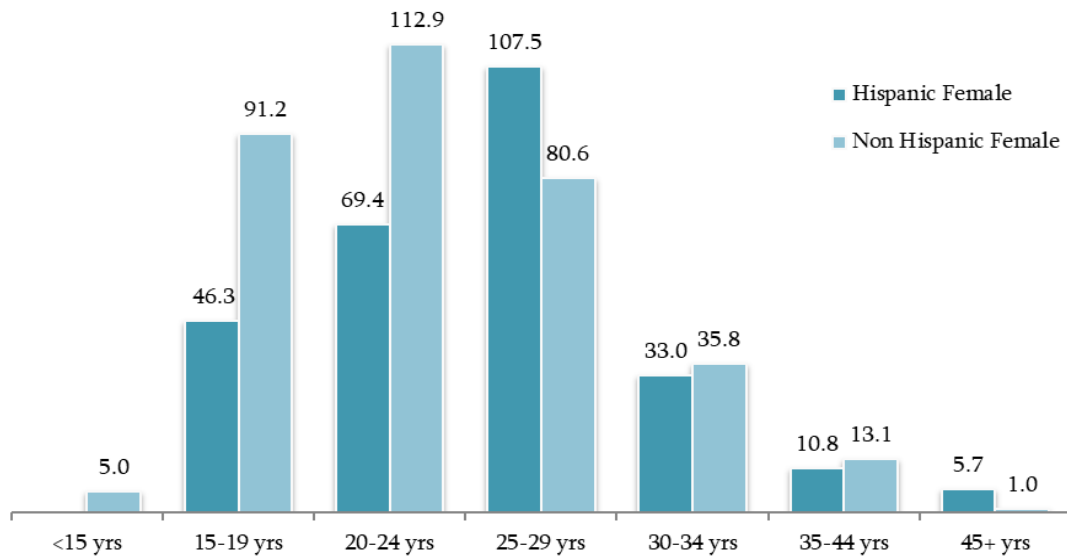
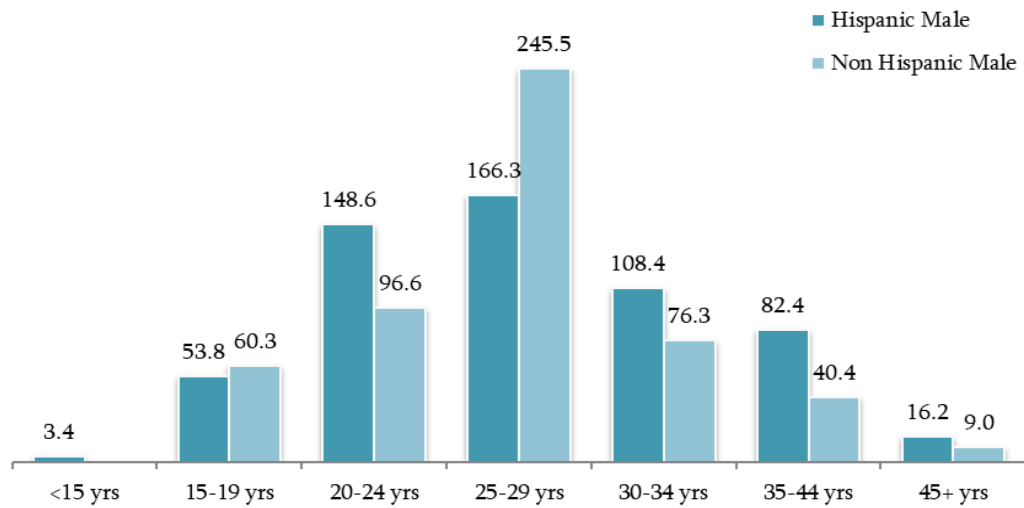
Figure 11. Reported Rates of Gonorrhea Infections by Age and Sex, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Female Hispanics had lower rates of gonorrhea infection than non-Hispanic counterparts for all ages except among females aged 25 to 29 years and 45+ years (Figure 12).

Figure 12. Reported Rates of Gonorrhea Infections by Age, Sex and Ethnicity, Westchester County, 2018.

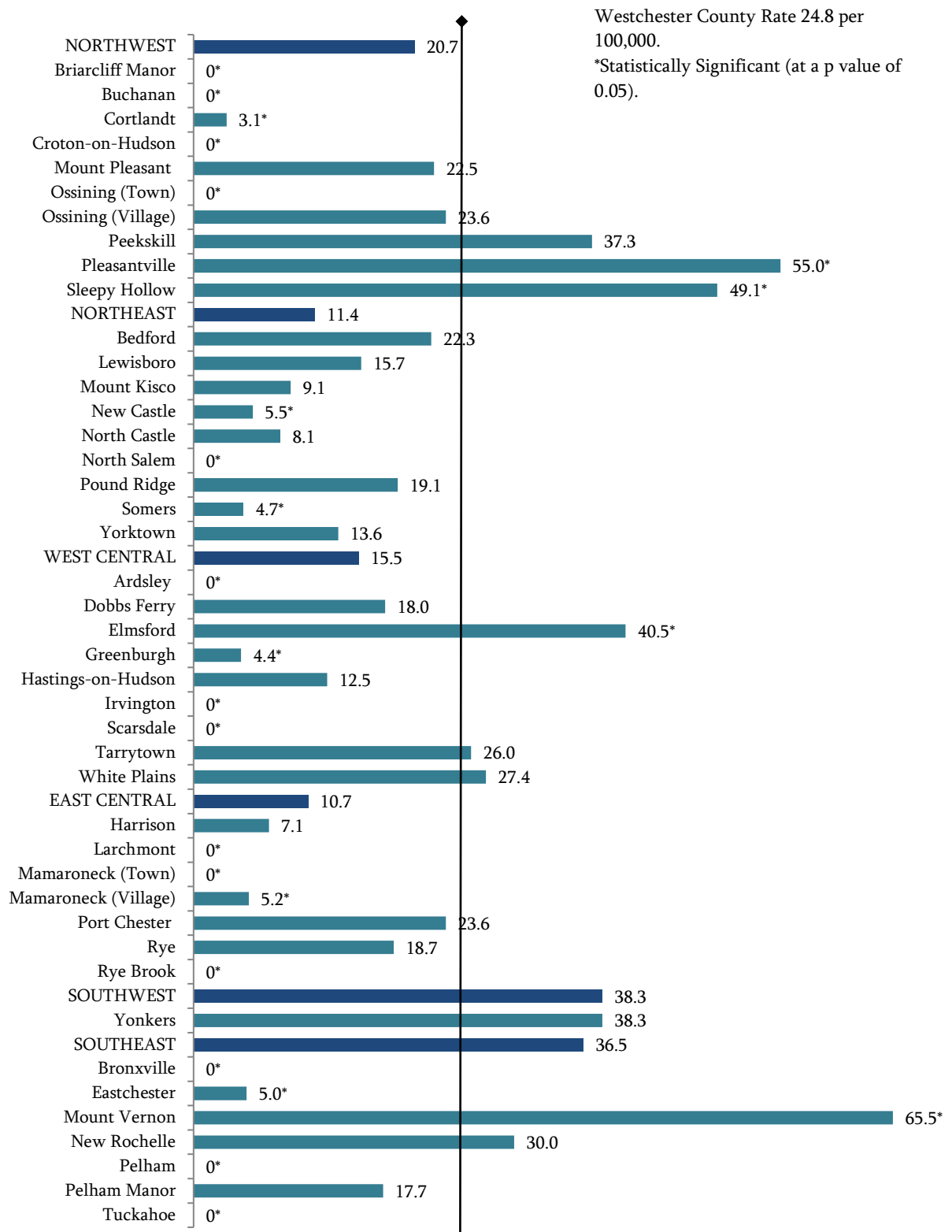


Source: Westchester County Department of Health 2019.

In 2018, there were 242 reported cases of syphilis among Westchester County residents, of which, 132 were cases of early syphilis (primary, secondary, and early latent). The early stages of syphilis are the symptomatic periods of the disease and are characterized by one or more painless sores at the site where the bacteria entered the body, rashes which can appear on any part of the body, and occasionally flu-like symptoms. These stages are also those during which transmission occurs most readily, and because many of the sores and symptoms of syphilis are easy to overlook, transmission often occurs from persons unaware of their infection. The symptoms of early syphilis will resolve with or without treatment. Without treatment, the infection will progress to the latent and late stages of the disease and remain in the body for decades. In the late stages of syphilis, the disease will eventually damage the internal organs, including the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints.

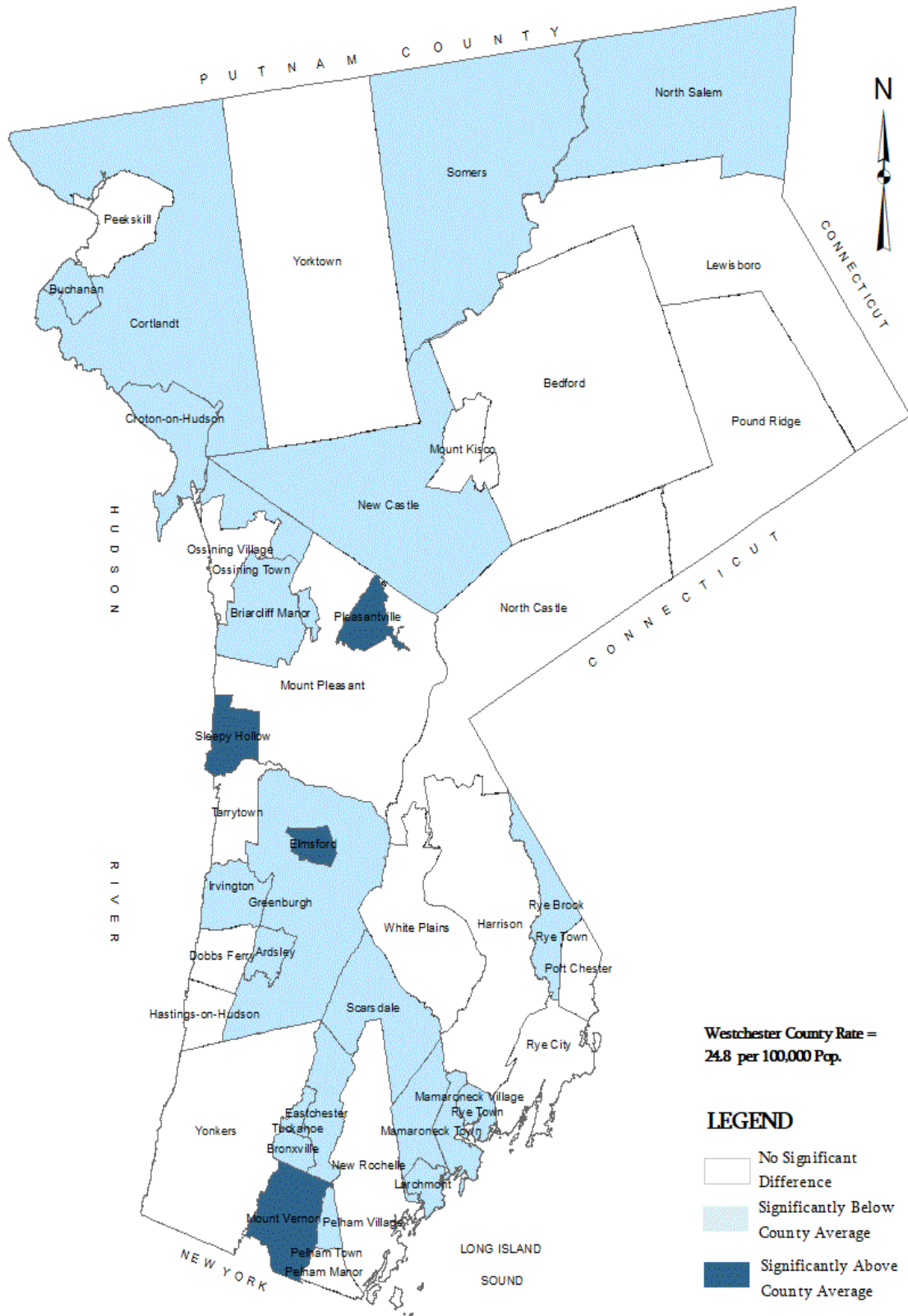
Approximately 61.0% of reported cases of syphilis (excluding inmates) occurred among residents of the Southeast and Southwest HPRs. These regions are the most urban and densely populated parts of the county. The number of reported cases in the cities of Yonkers (77) and Mt Vernon (45) alone comprise over half of the reported cases in the county (Figure 13 and 14).

Figure 13. Reported Rates of Syphilis (All Stages) Infection by Municipality, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

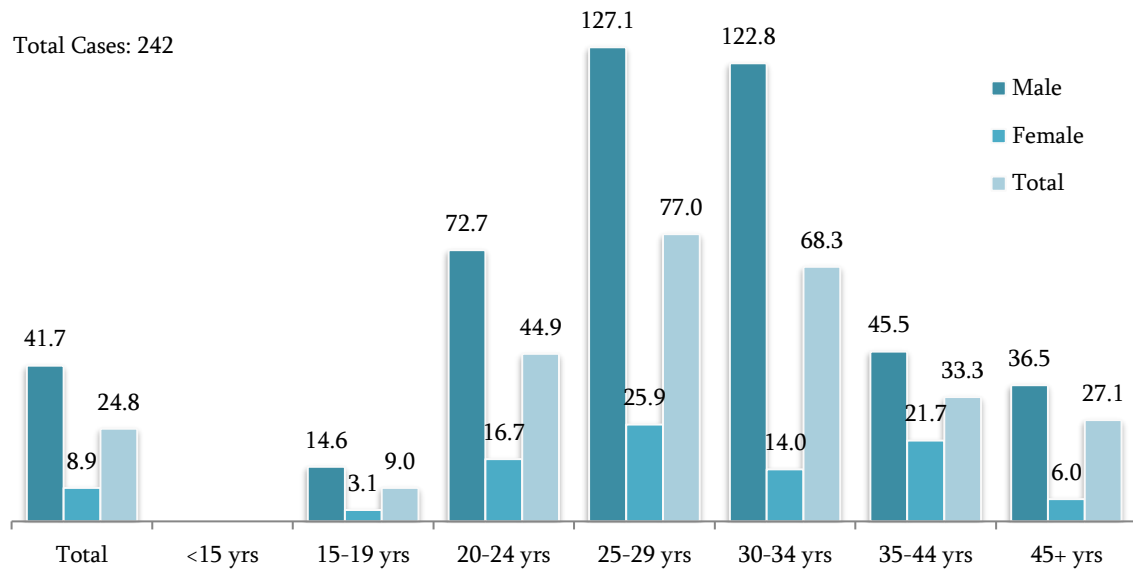
Figure 14. Comparison of Rates of Syphilis (All Stages) Infections by Municipality, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Among the total reported cases of syphilis in 2018, 69.0% of cases were aged 30 years or older. However, most cases were among those 25-29 years. Males, in all age groups, had higher overall rates of infection than females, 41.7 vs. 8.9 per 100,000 (Figure 15).

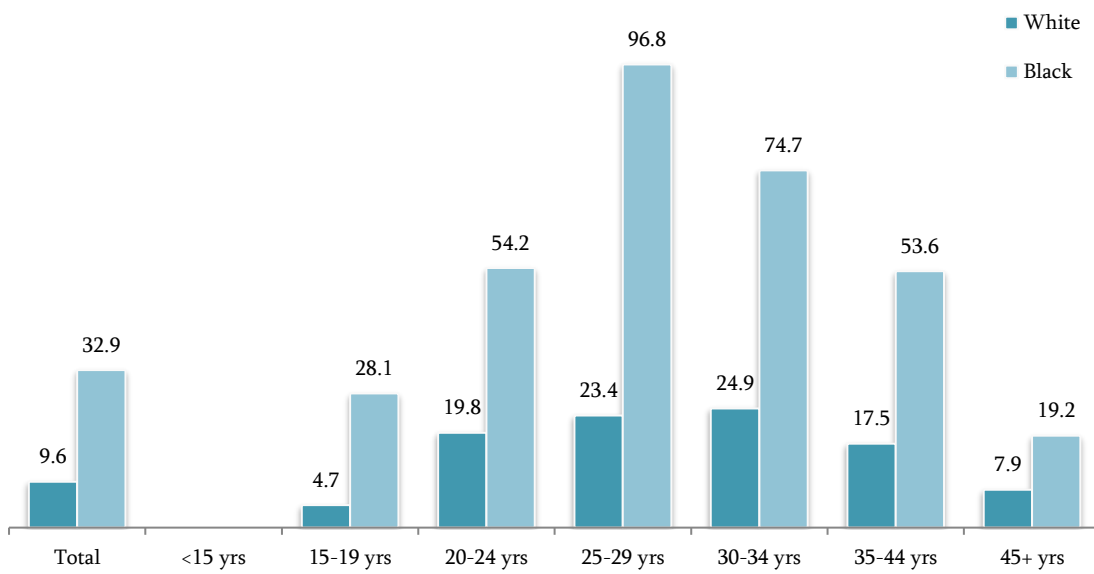
Figure 15. Reported Rates of Syphilis (All Stages) Infections by Age and Sex, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Among the cases of syphilis, for which race was known, 30.3% were black, 39.4% were white, and 30.3% were of another or more than one race. Like chlamydia and gonorrhea, reported rates of syphilis were also higher among blacks than whites (Figure 16).

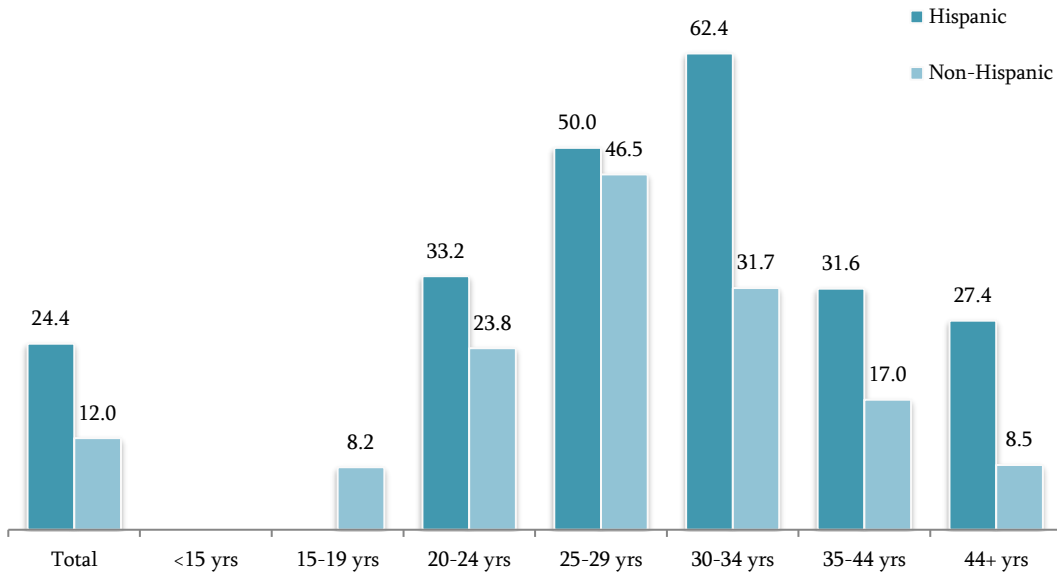
Figure 16. Reported Rates of Syphilis (All Stages) Infections by Age and Race, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

In general, Hispanics had higher rates of syphilis infection than their non-Hispanic counterparts (Figure 17). Hispanics comprised 36.8% of all reported syphilis cases.

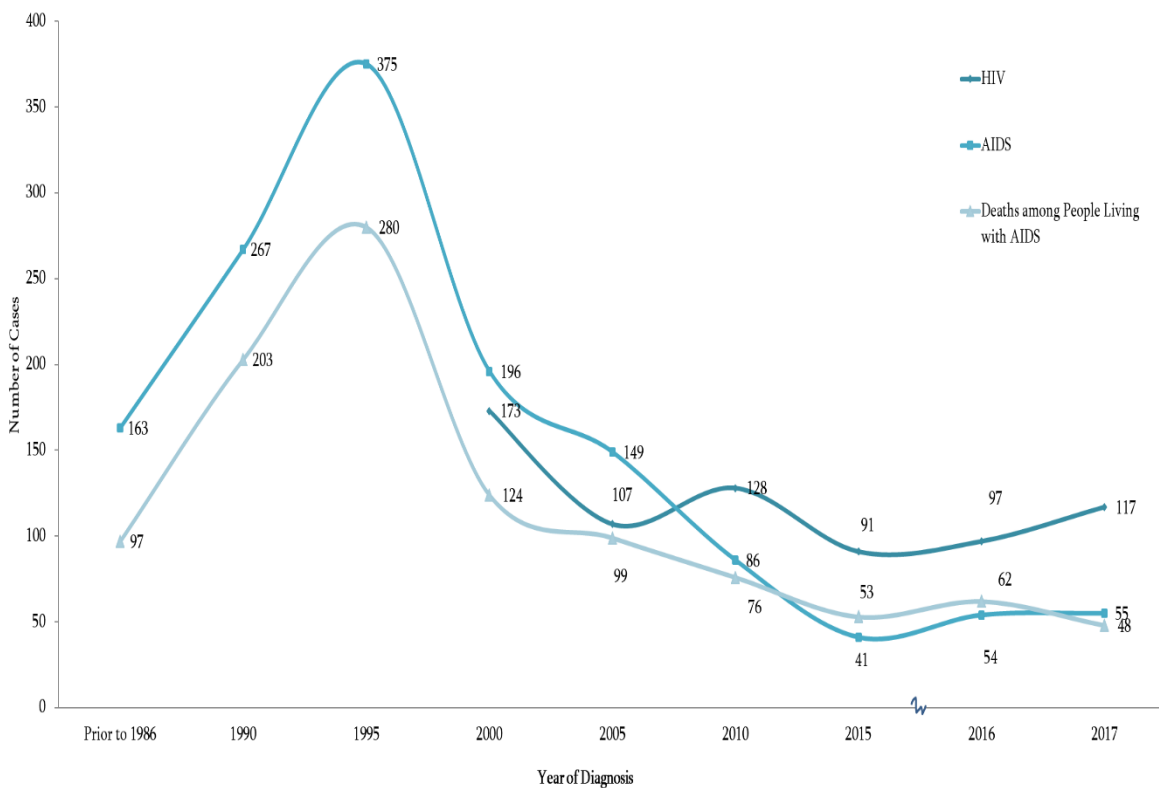
Figure 17. Reported Rates of Syphilis (All Stages) Infections by Age and Ethnicity, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

HIV reporting became effective on June 1, 2000 (Figure 18). As of December 2017, a total of 2,051 HIV cases were diagnosed, in Westchester County, with an annual average of 114 cases since the year 2000. The number of cumulative AIDS cases² as of December 2017 was 6,082 and the number of deaths among people with AIDS was 3,991. On average there are 121 annual deaths among people living with AIDS in Westchester County.

Figure 18. Number of Newly Diagnosed HIV and AIDS Cases and Number of Deaths Among People with AIDS, Westchester County.

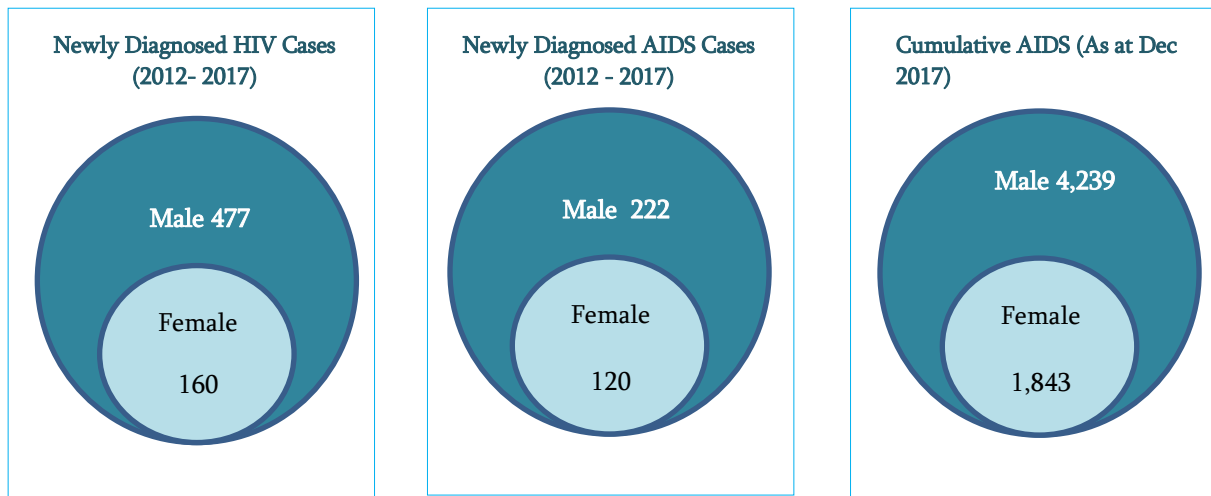


Source: Westchester County Department of Health 2019.

² Data from the period prior to 1986.

As reported by the New York State Department of Health, there was a total of 637 newly diagnosed HIV cases in Westchester County over the period 2012-2017. There were 477 cases among males and among females 160 cases. The average annual incidence rate for new HIV cases was 11.0 per 100,000 persons. There were more males than females among those newly diagnosed with HIV, those newly diagnosed with AIDS and cumulative AIDS cases, in the 2012-2017 period (Figure 19). There was a total of 342 newly diagnosed AIDS cases in 2012-2017: among males, 222 cases and females 120 cases. The average annual incidence rate for newly diagnosed AIDS cases was 5.9 per 100,000 over the period. As of December 2017, of the 6,082 cumulative AIDS cases, 4,239 were male and 1,843 were female in Westchester County.

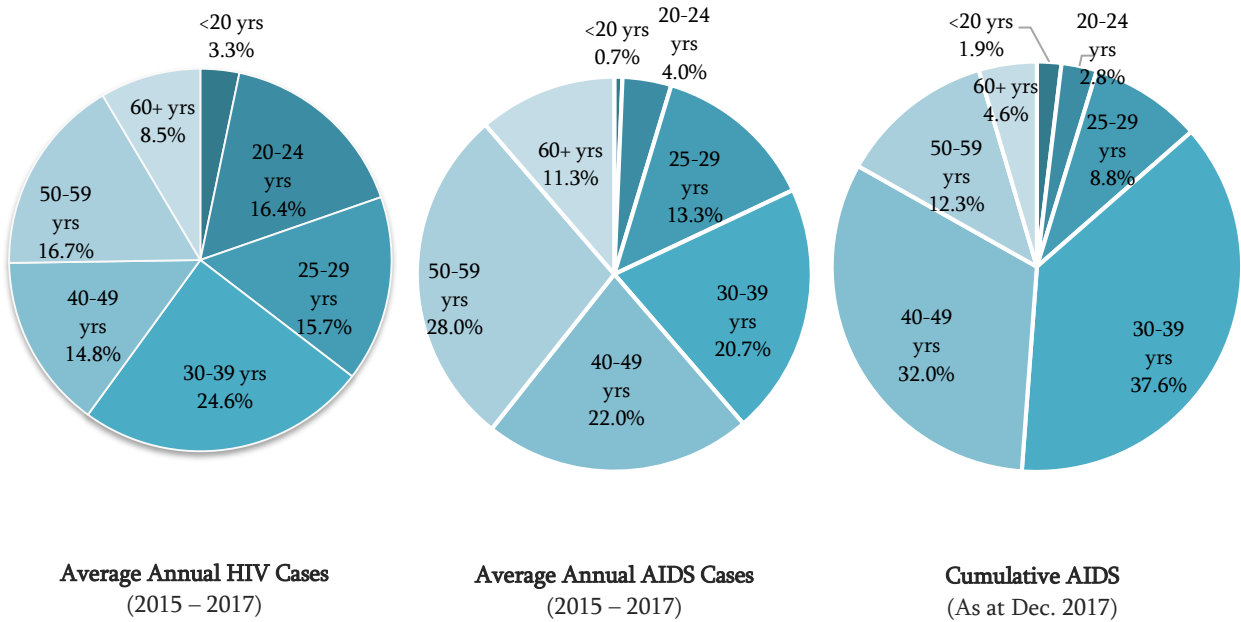
Figure 19. Number of Newly Diagnosed HIV and AIDS and Cumulative AIDS Cases by Sex, Westchester County, 2012 – 2017.



Source: New York State Department of Health 2019.

Between 2015 and 2017, 60.0% of the newly diagnosed HIV cases were under the age of 40 years at diagnosis, approximately 25.0% of newly diagnoses cases were between the ages of 30 and 39 years, and approximately 35.0% were under the age of 30 years (Figure 20).

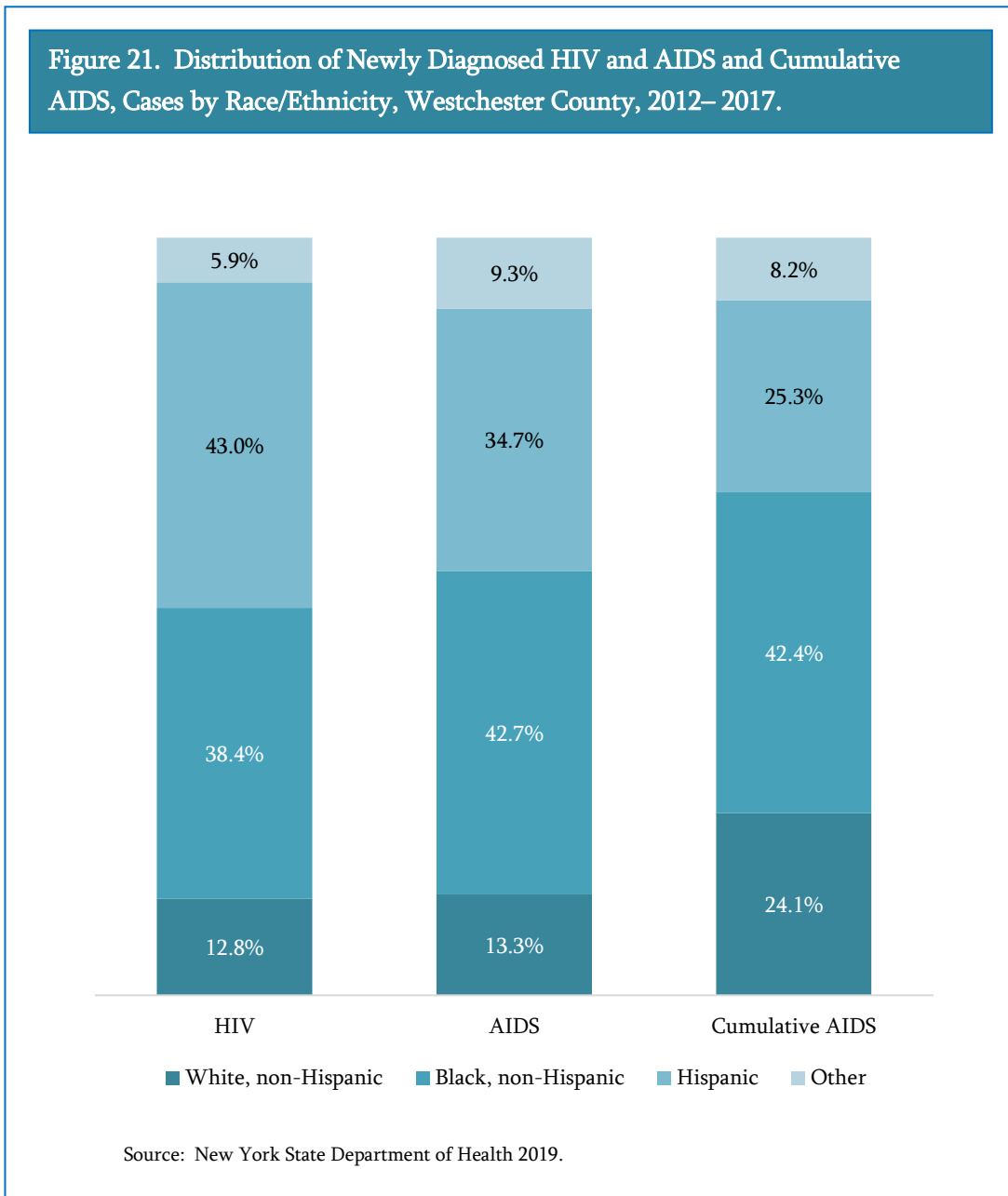
Figure 20. Distribution of Newly Diagnosed HIV, AIDS, and Cumulative AIDS Cases by Age, Westchester County, 2015 – 2017.



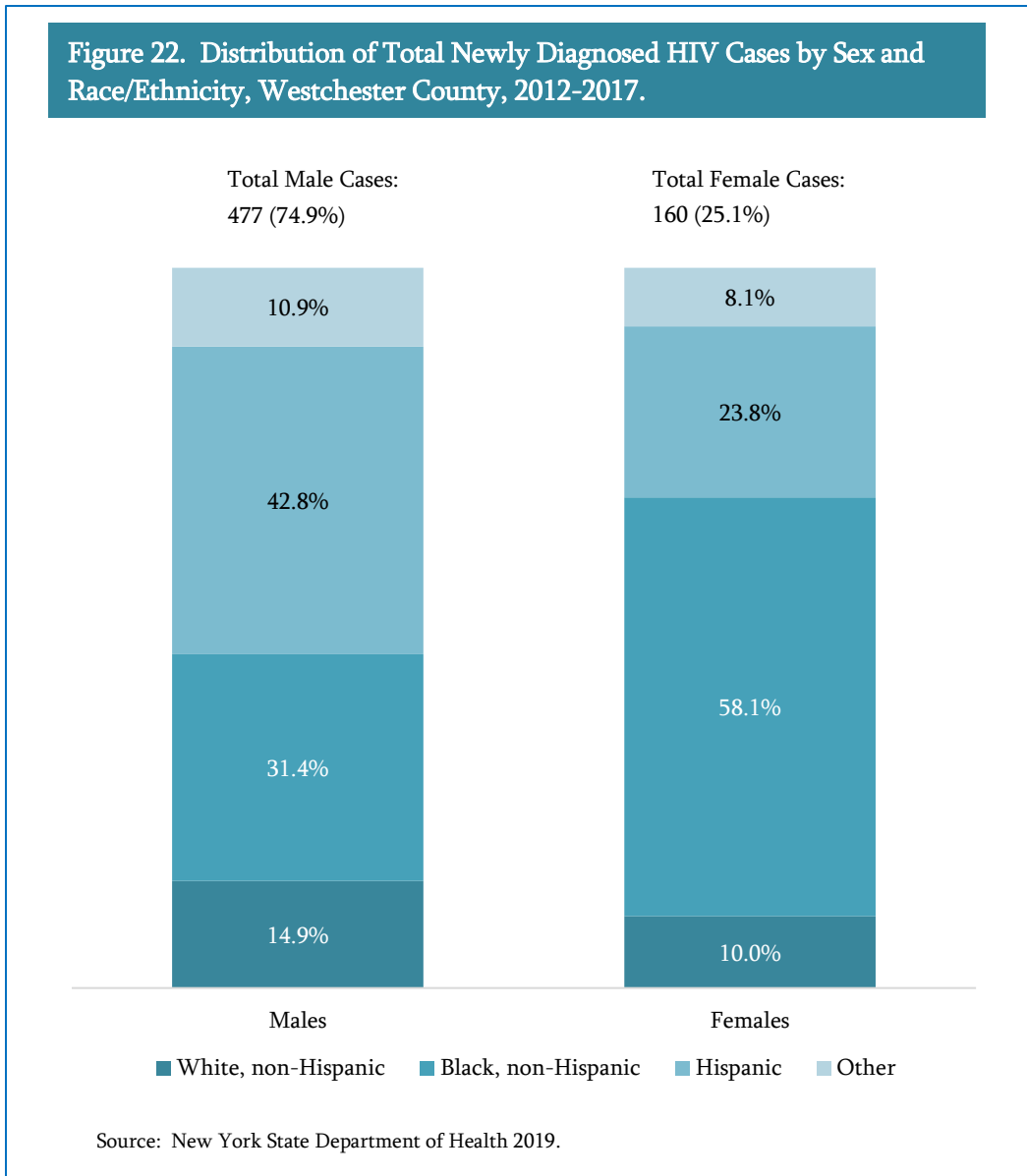
Source: New York State Department of Health 2019.

Of those newly diagnosed with AIDS, approximately 39.0% were under the age of 40 years, approximately 21.0% were between the ages of 30 and 39 years, and 18.0% were under the age of 30 years.

Over 38.0% of the newly diagnosed HIV cases were among Black non-Hispanic, 43.0% were among Hispanics, and 12.8% were among White non-Hispanics. For the newly diagnosed AIDS cases: 42.7% of the cases were among Black non-Hispanic, 34.7% were among Hispanics, and 13.3% were among White non-Hispanic (Figure 21).

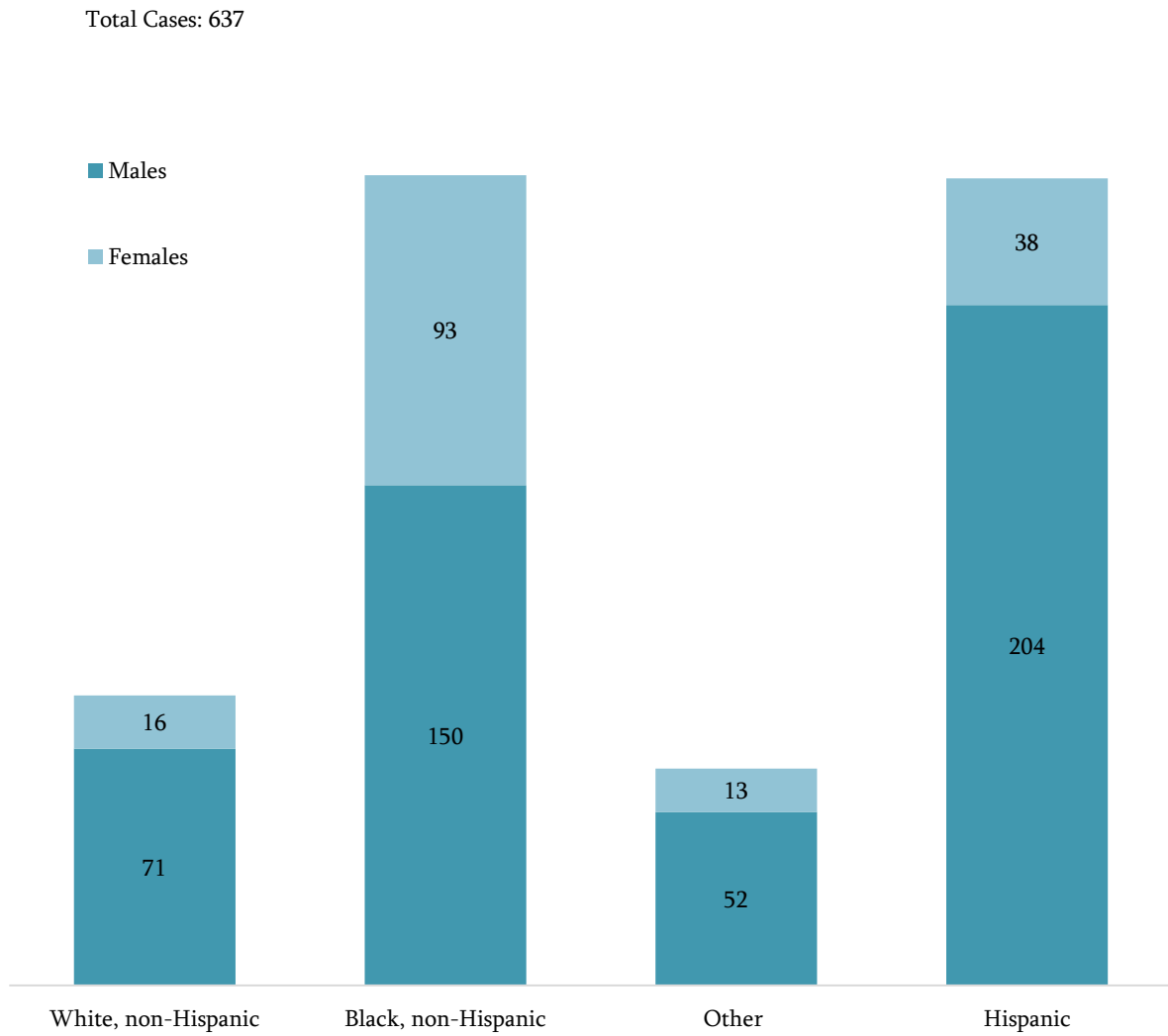


Among male newly diagnosed HIV cases, 14.9% were white non-Hispanic, 31.4% were black non-Hispanic, and 42.8% were Hispanic. However, among female newly diagnosed HIV cases, 10.0% were white non-Hispanic, 58.1% were black non-Hispanic, and 23.8% were Hispanic (Figure 22).



Most of the newly diagnosed HIV cases were among black non-Hispanics and Hispanics (Figure 22).

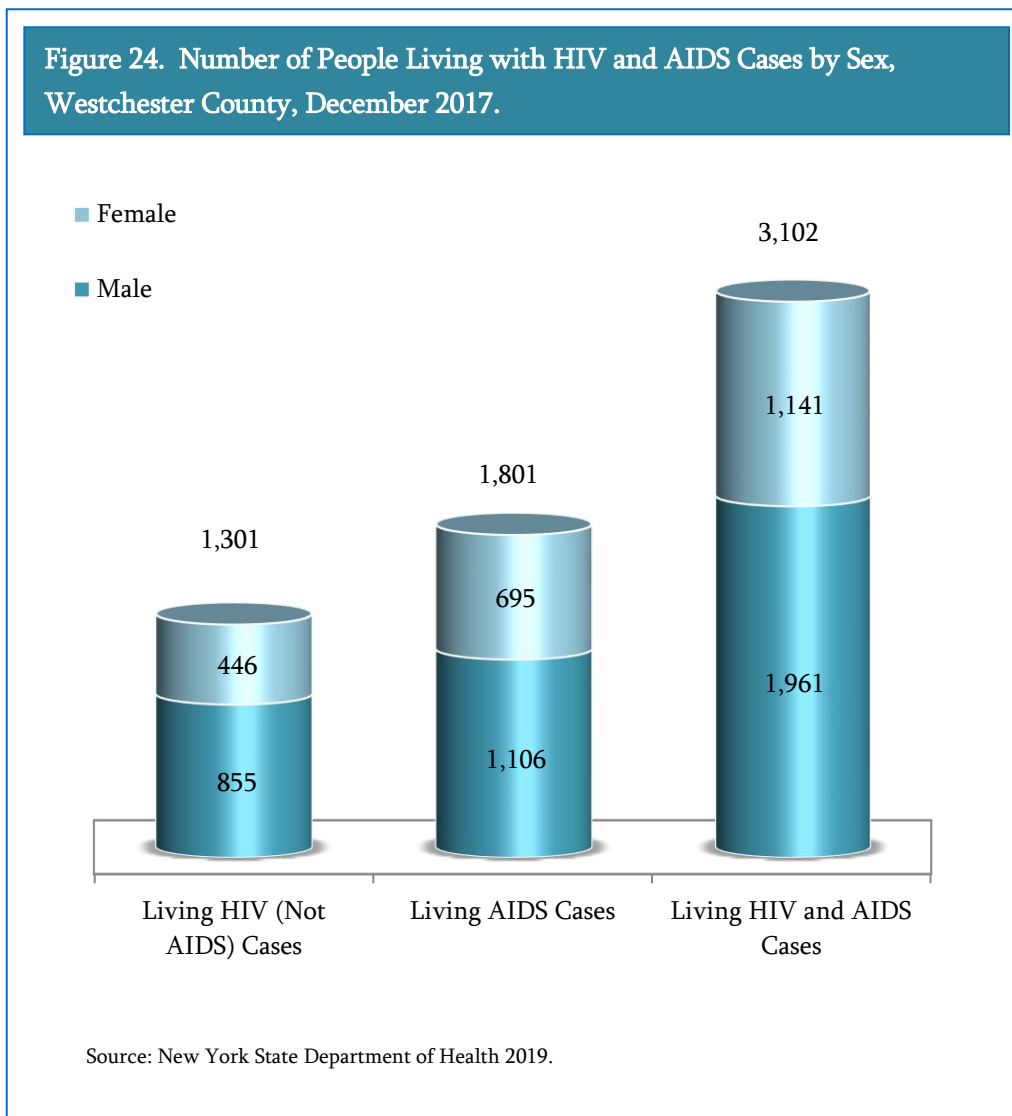
Figure 23. Number of Cases of Total Newly Diagnosed HIV Cases by Sex and Race/Ethnicity, Westchester County, 2012-2017.



Source: New York State Department of Health 2019.

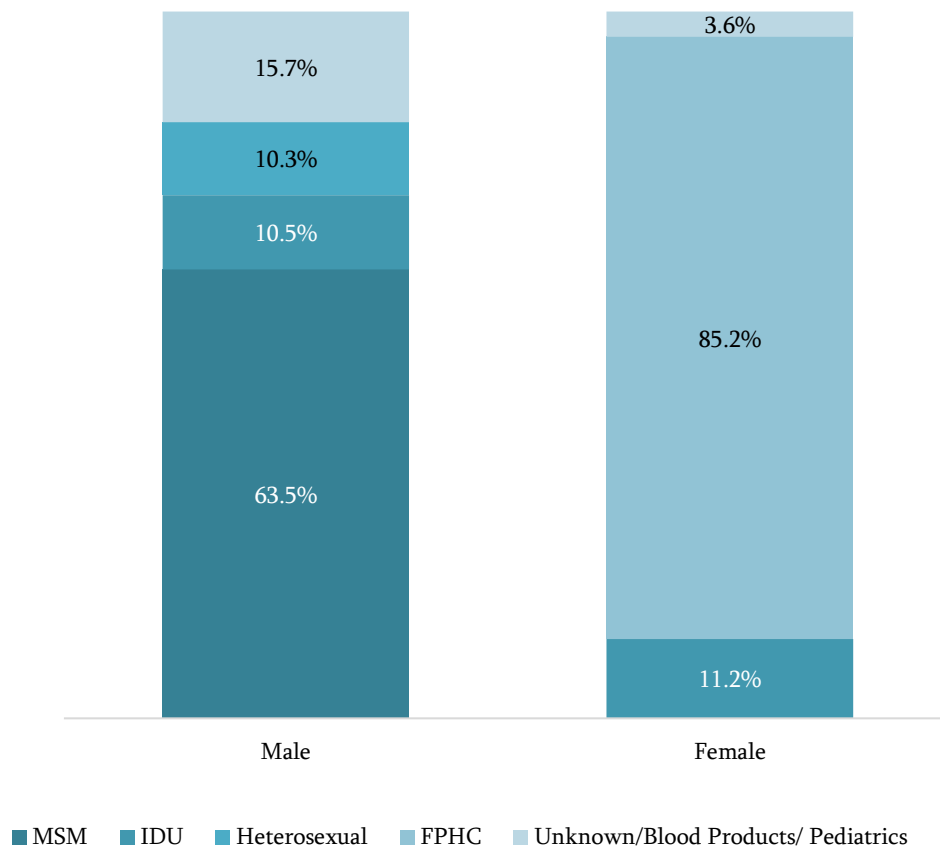
As of December 2017, there were 1,301 people living with HIV, non-AIDS (133.0 per 100,000) and 1,801 people living with AIDS (184.1 per 100,000) in Westchester County. Excluding New York City, Westchester County had the highest number of individuals living with HIV and/or AIDS among all New York State counties.

Among those living with HIV, 65.7% were males and 34.3% were females. Among those living with AIDS, 61.4% were males and 38.6% were females (Figure 24).



Among males living with HIV in December 2017, over one half (63.5%) of the cases were men with a history of male to male sexual contact (MSM). Over 10.0% was a result of a history of injection use (IDU³). Approximately 10.0% all new cases among males were caused by heterosexual contact. In contrast, 85.2% of all cases among females living with diagnosed HIV was due to female presumably heterosexual contact (FPHC)⁴ and over 11.0% IDU (Figure 25).

Figure 25. Distribution of Persons Living with Diagnosed HIV, by Sex and Risk, Westchester County, 2017.



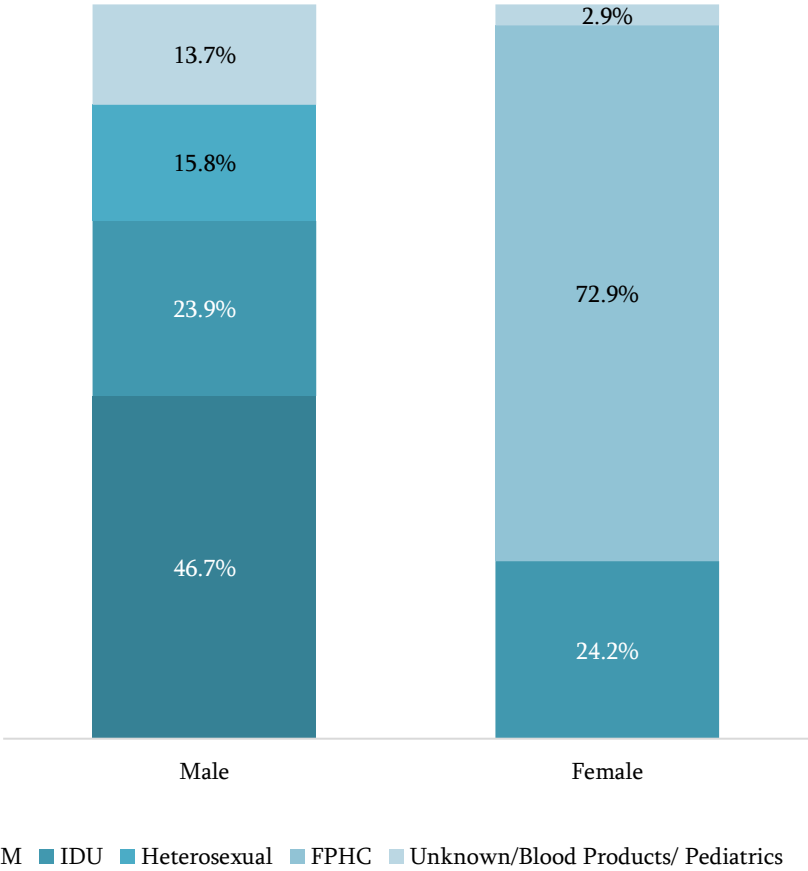
Source: New York State Department of Health 2019.

³ Includes IDU and MSM/IDU.

⁴ Female Presumably Heterosexual Contact are those cases, in females, considered heterosexual transmission in the absence of information to show otherwise.

Among males living with AIDS in 2017, almost half (46.7%) were among MSMs, 23.9% were attributed to IDUs, and 15.8% heterosexual contact. Among the female cases living with AIDS in 2017, 72.9% were due to FPHC and 24.2% to IDU (Figure 26).

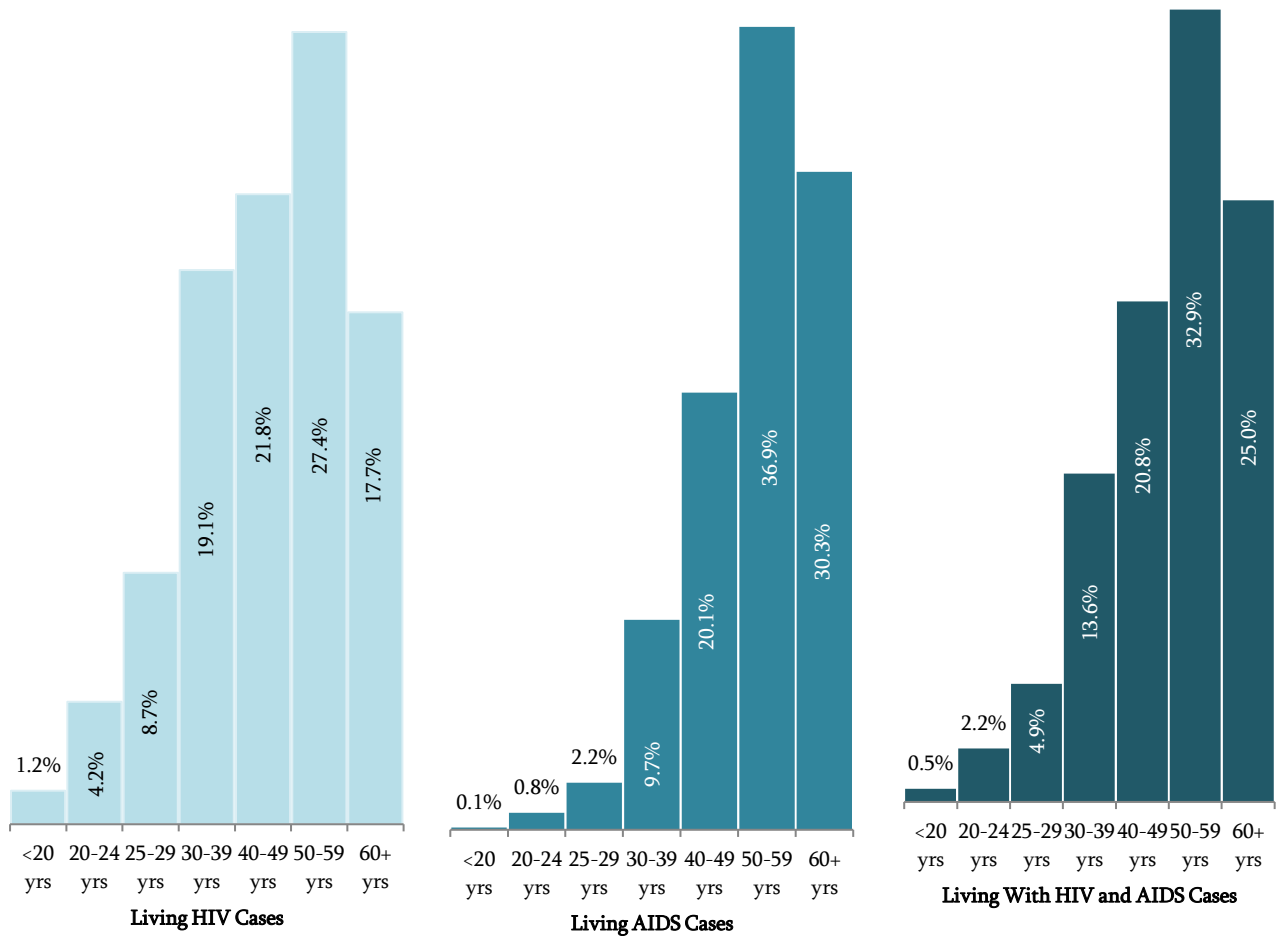
Figure 26. Distribution of Persons Living with Diagnosed AIDS, by Sex and Risk, Westchester County, 2017.



Source: New York State Department of Health 2019.

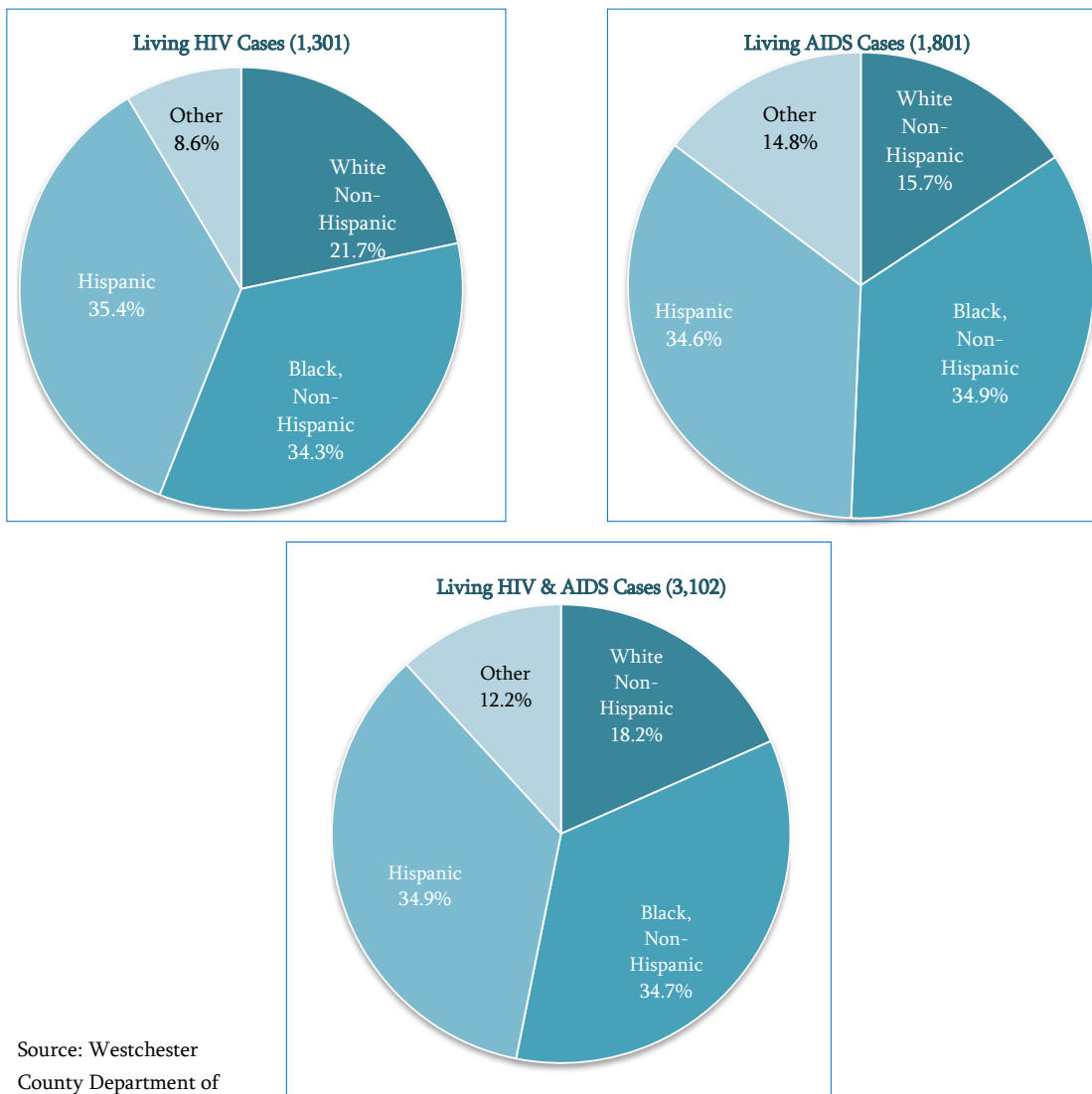
As of December 2017, 68.3% of those living with HIV were between the ages of 30 and 59. An additional 17.7% were 60 years or older and 14.1% were under the age of 30. Nearly 66.7% of all Westchester County residents living with AIDS were between the ages of 30 and 59 (Figure 27).

Figure 27. Distribution of Living HIV and AIDS Cases by Current Age, Westchester County, December 2017.



Source: Westchester County Department of Health 2019.

Figure 28. Distribution of Living HIV and AIDS Cases by Race/Ethnicity, Westchester County, December 2017.



Source: Westchester County Department of Health 2019.

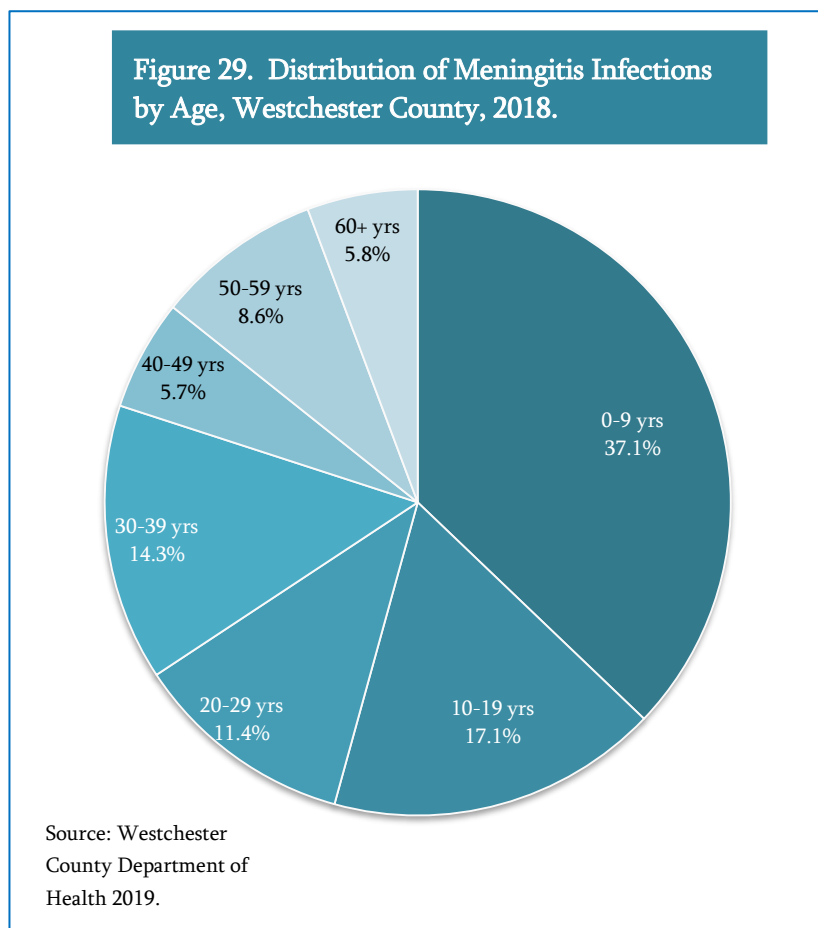
As at December 2017, 34.3% of the individuals living with HIV were Black non-Hispanics, whereas White non-Hispanics and Hispanics comprised 21.7% and 35.4% of the remaining cases, respectively. Almost 9.0% of those living with HIV were classified as being of other races. The racial and ethnic composition of those living with AIDS was similar to those living with HIV: 34.9% were non-Hispanic black, 15.7% were non-Hispanic white, 34.6% were Hispanics, and 14.8% were of other races (Figure 22).

Central Nervous System (CNS) Diseases and Bacteremias

Infectious diseases affecting the central nervous system include bacterial and viral pathogens that may infect one or many locations in the body including the brain, spinal cord membranes (meningitis), and/or the bloodstream (bacteremias). In 2018, the most frequently reported diseases in this category were Meningitis and Invasive Streptococcus (Strep) Pneumoniae.

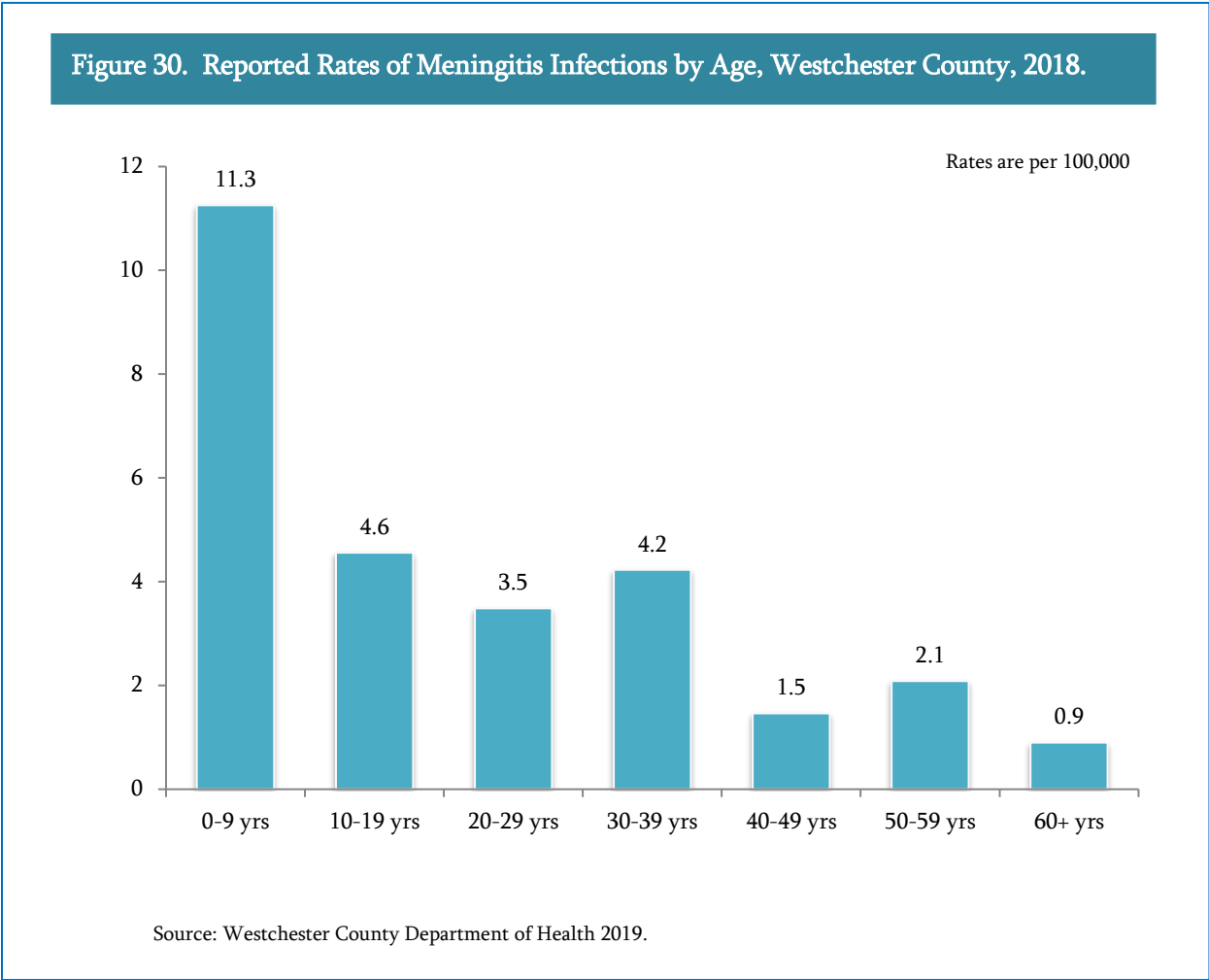
Meningitis is a disease caused by a bacterial or viral infection of the protective membranes covering the brain and spinal cord. Meningitis is also referred to as spinal meningitis. In 2018, thirty-five cases of meningitis were reported among Westchester County residents. Of these, thirty-one cases (88.6%) were aseptic meningitis, which is less severe than bacterial meningitis and does not require treatment of close contacts to the infected individual.

Over fifty percent (54.2%) of the confirmed meningitis cases in 2018 were among children aged 19 years or younger (Figure 29).



Among the total population, there were 3.6 cases of meningitis per 100,000 county residents in 2018.

The age groups with the highest rates of meningitis infections were those aged 0 to 9 years, followed by those aged 10-19 years old (Figure 30).

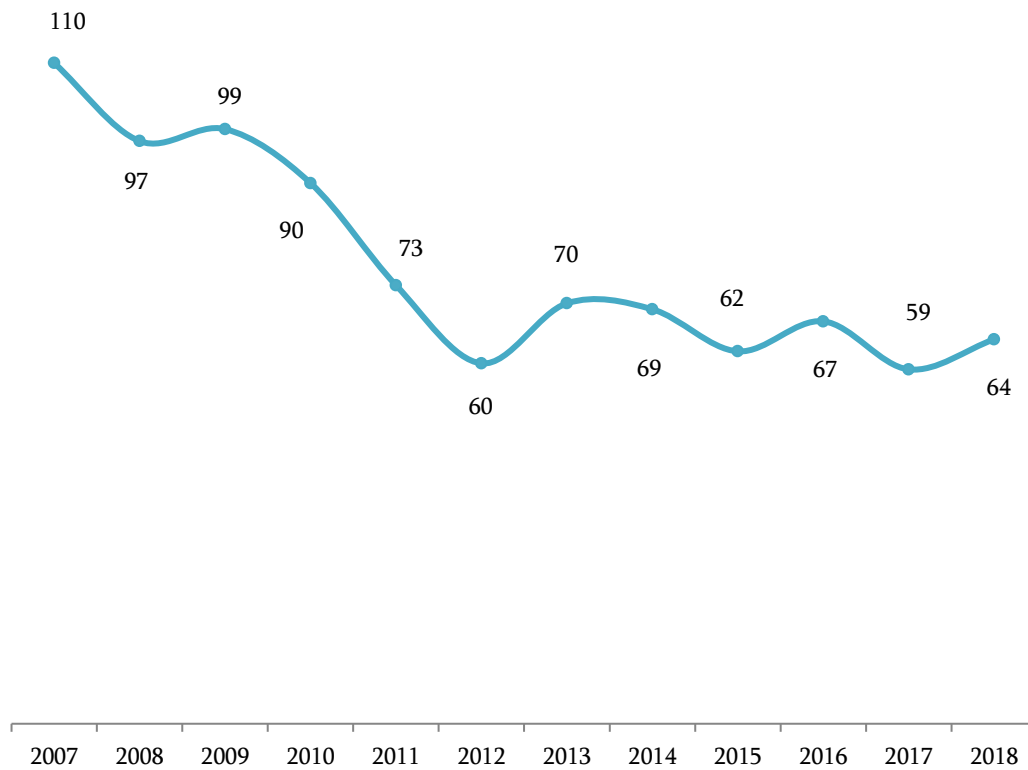


In 2018, fifteen cases of meningitis were male and twenty cases were female. Females had a slightly higher rate of infection compared to males (4.0 vs. 3.2 per 100,000).

Invasive streptococcus pneumoniae infection is caused by the bacterial pathogen Streptococcus pneumoniae, which is the most common cause of bacterial pneumoniae and bacterial meningitis in the United States. The pathogen usually resides in a person’s respiratory tract and is spread through respiratory droplets. Having the pathogen does not always result in illness; however, such a person may be a carrier and able to spread the disease to others.

In 2018, there were sixty four cases of invasive streptococcus pneumoniae infection in Westchester County. Over the past ten years, the number of cases of invasive streptococcus pneumoniae has been declining since reaching a peak of 110 cases in 2007 (Figure 31).

Figure 31. Number of Invasive Streptococcus Pneumoniae Infections, Westchester County, 2007-2018.

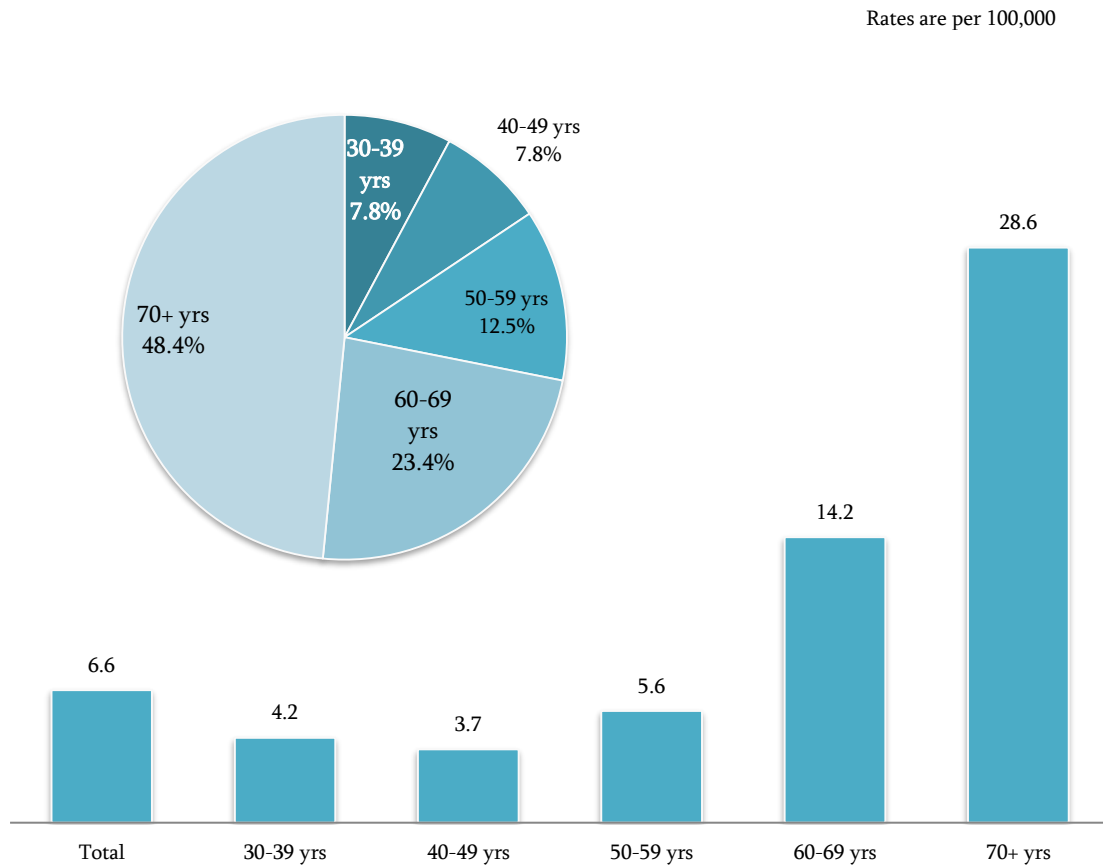


Source: Westchester County Department of Health 2019.

The majority of cases (71.9%) occurred among adults aged 60 years and older. There were no recorded occurrences of infections under the age of 20 for 2018. The rate of infection with Invasive Strep Pneumoniae was also highest in the oldest age groups. Among the total population, the rate of infection was 6.6 per 100,000 county residents. Among those 0-29 years there were no reported cases, among those between the ages of 50-59 years the rate was 5.6, and among 70 years and older, the rate was 28.6 cases per 100,000 (Figure 32).

In 2018, females had a marginally higher overall rate of infection for invasive streptococcus pneumoniae than males (6.8 vs. 6.4 per 100,000 respectively).

Figure 32. Distribution and Rates of Invasive Streptococcus Pneumoniae Infections by Age, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

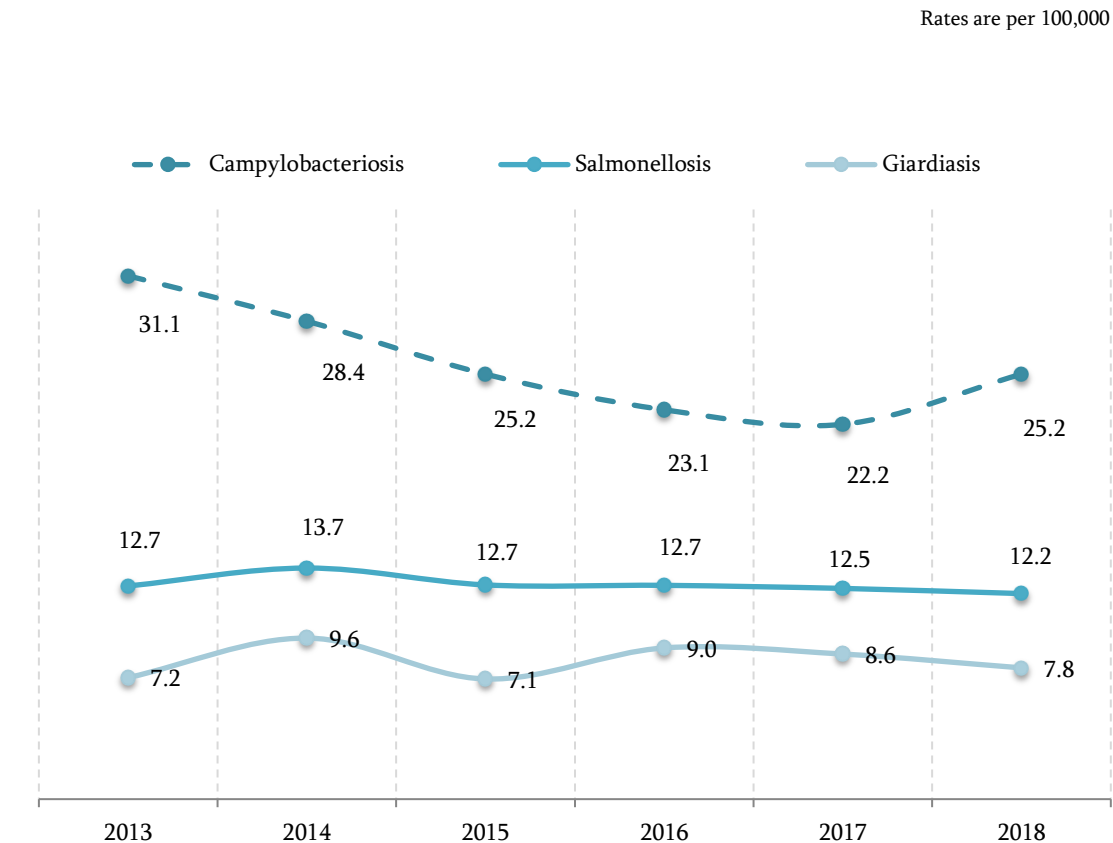
Enteric Diseases

Enteric infections enter the body through the mouth and intestinal tract and are usually spread through contaminated food and water or by contact with infected vomit or feces.

In 2018, the three most prevalent enteric diseases in Westchester County were Campylobacteriosis, Salmonellosis, and Giardiasis: with 246, 119, and 76 cases, respectively.

Over the past six years, the rate of Campylobacteriosis infections has fallen from 31.1 cases per 100,000 to 25.2 per 100,000. The rates of Salmonellosis and Giardiasis have remained relatively unchanged between 2013 and 2018 (Figure 33).

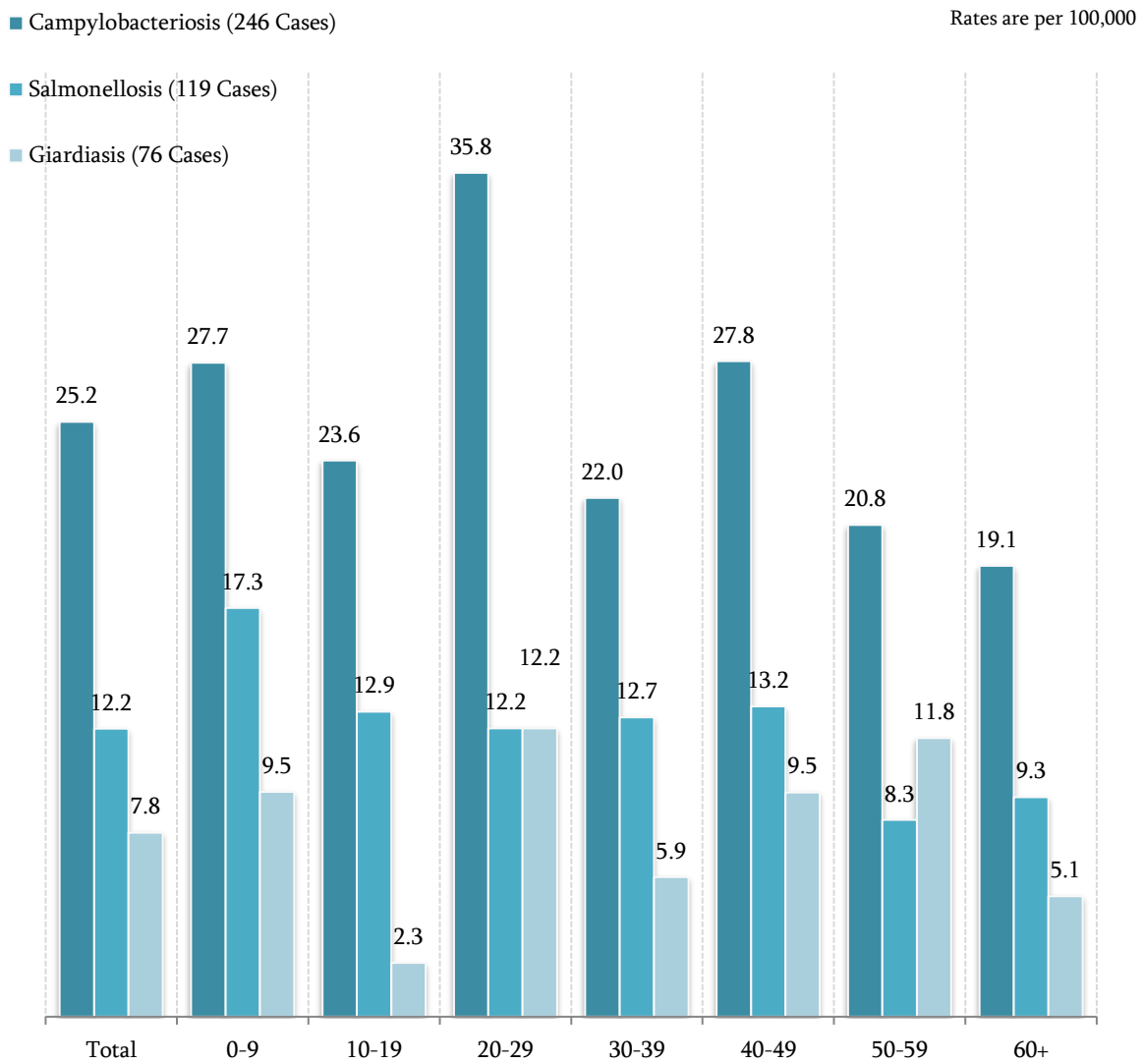
Figure 33. Rates of Major Enteric Infections, Westchester County, 2013-2018.



Source: Westchester County Department of Health 2019.

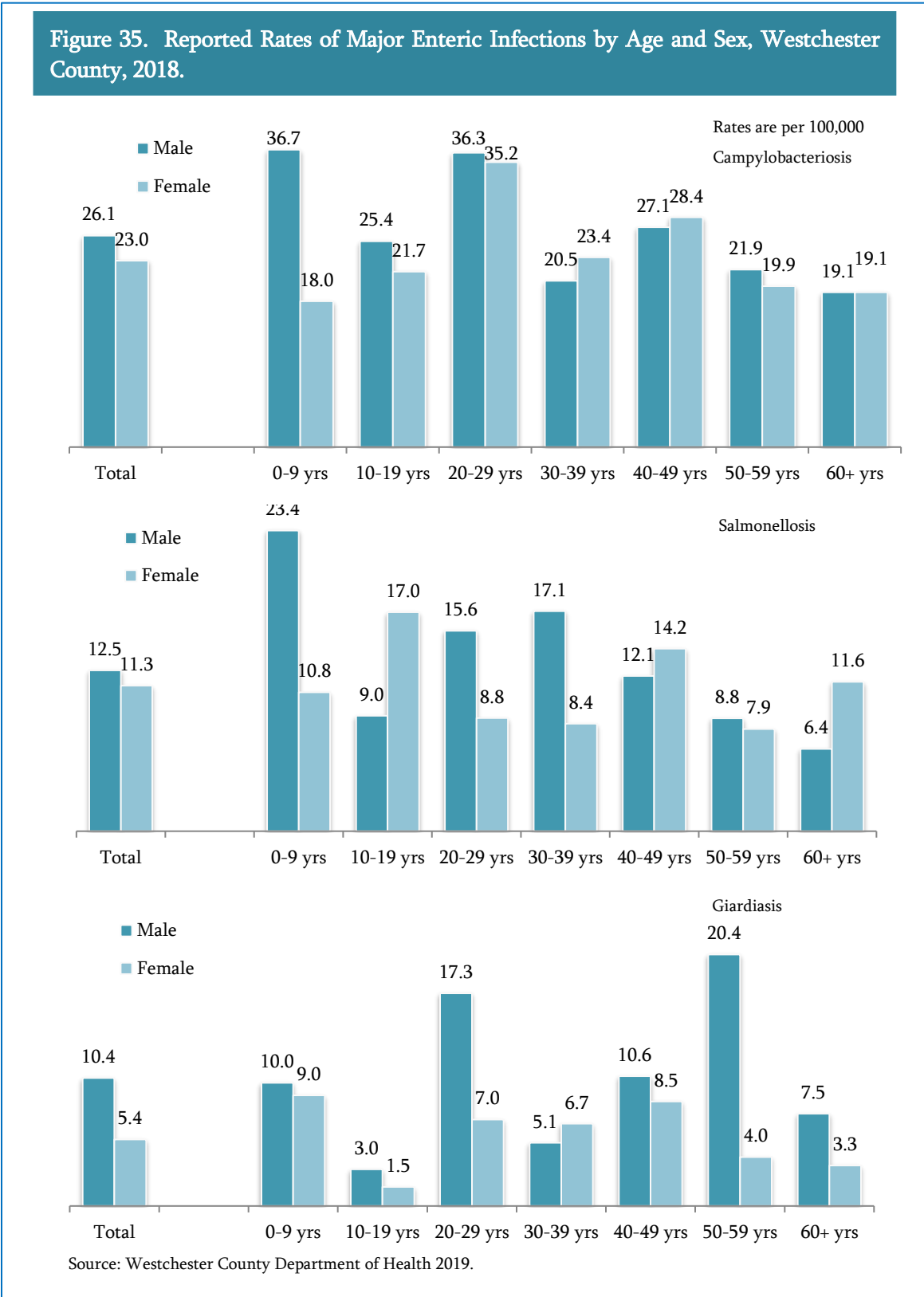
Among the total population, the rates of Campylobacteriosis, Salmonellosis, and Giardiasis were 25.2, 12.2, and 7.8 cases per 100,000, respectively. The incidence rate of Campylobacteriosis and Giardiasis is highest in the 20-29 age group and 0-9 years old for the Salmonellosis cases (Figure 34).

Figure 34. Rates of Major Enteric Infections by Age, Westchester County, 2018.



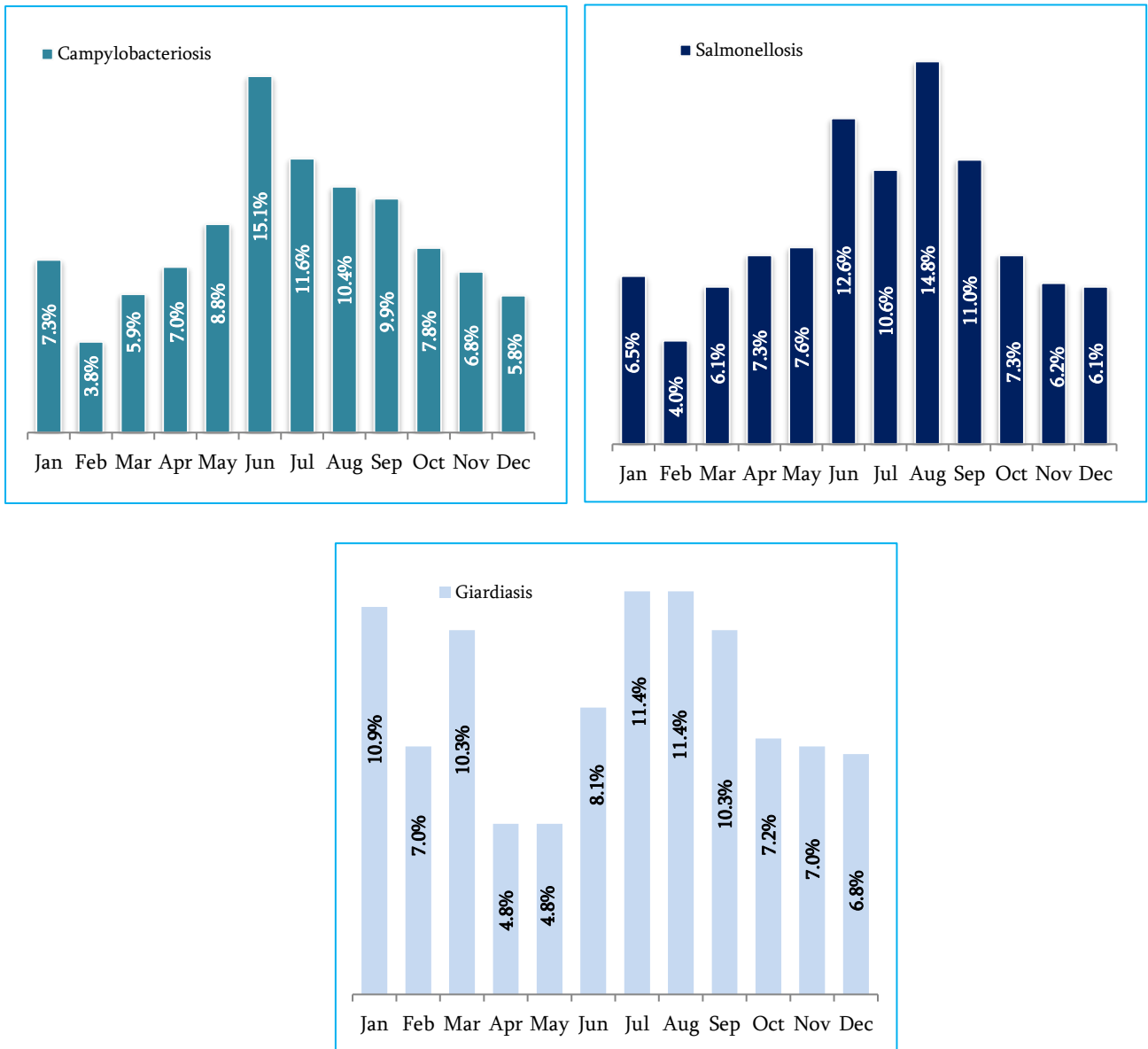
Source: Westchester County Department of Health 2019.

In general, rates of enteric infections were higher among males than females, but varies by age (Figure 35).



Rates of foodborne illnesses undergo seasonal fluctuations. These infections are more prevalent in warmer months and begin to decline with the onset of colder weather (Figures 36).

Figure 36. Average Distribution of Major Enteric Infections by Month, Westchester County, 2013-2018.



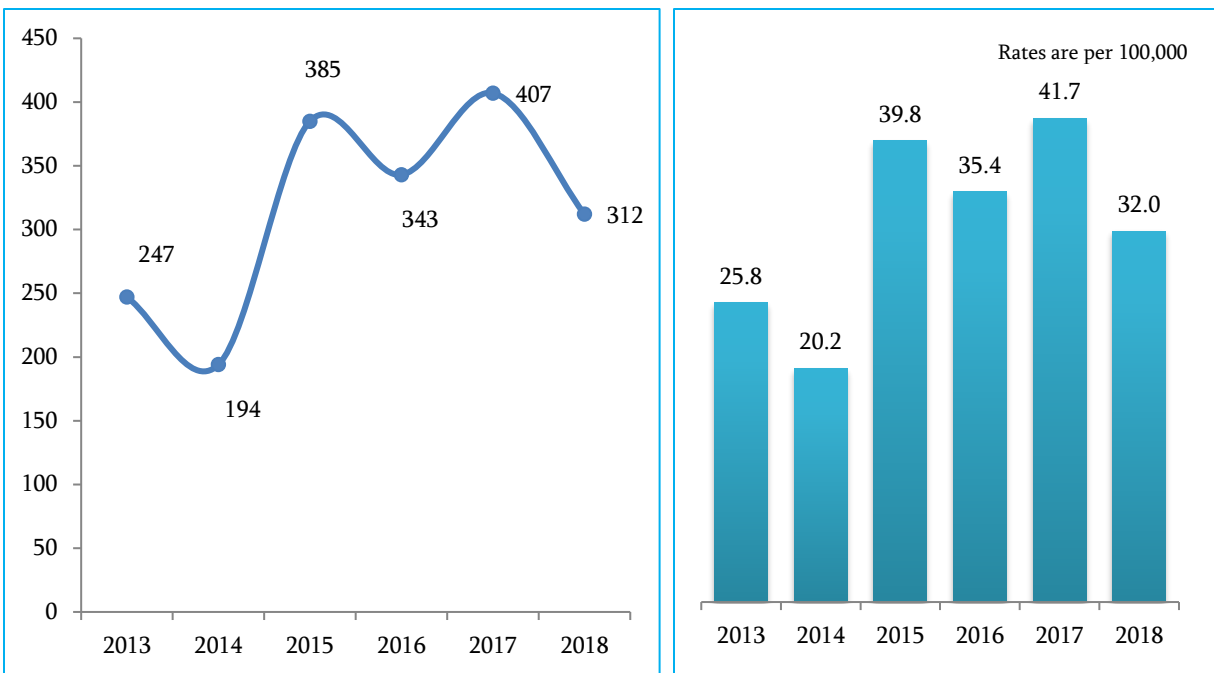
Source: Westchester County Department of Health 2019.

Vector-Borne Zoonoses

Transmission of an infectious disease can involve a vector or carrier. The most common vector-based disease in Westchester County is Lyme disease, which is transmitted by infected deer ticks. Lyme disease can cause symptoms that affect the skin, nervous system, heart, and joints. The most common indication of infection is a bulls-eye or solid rash (referred to as erythema migrans) close to the site of the bite.

In 2018, there were 119 confirmed cases of Lyme disease in Westchester County; most from the New York State designed Sentinel Surveillance System. Due to the large volume of Lyme disease cases in New York State, only a 20.0% random sampling of reported laboratory cases and 100.0% provider reports of erythema migrans are selected for follow-up. As a result, the data for reported Lyme disease infections presented in this report represent only a small sample of the true number of cases. The New York State Department of Health uses the data reported through the Sentinel Surveillance System to calculate an estimated total incidence of Lyme disease in Westchester County, which was 312 cases during 2018 (Figure 37).

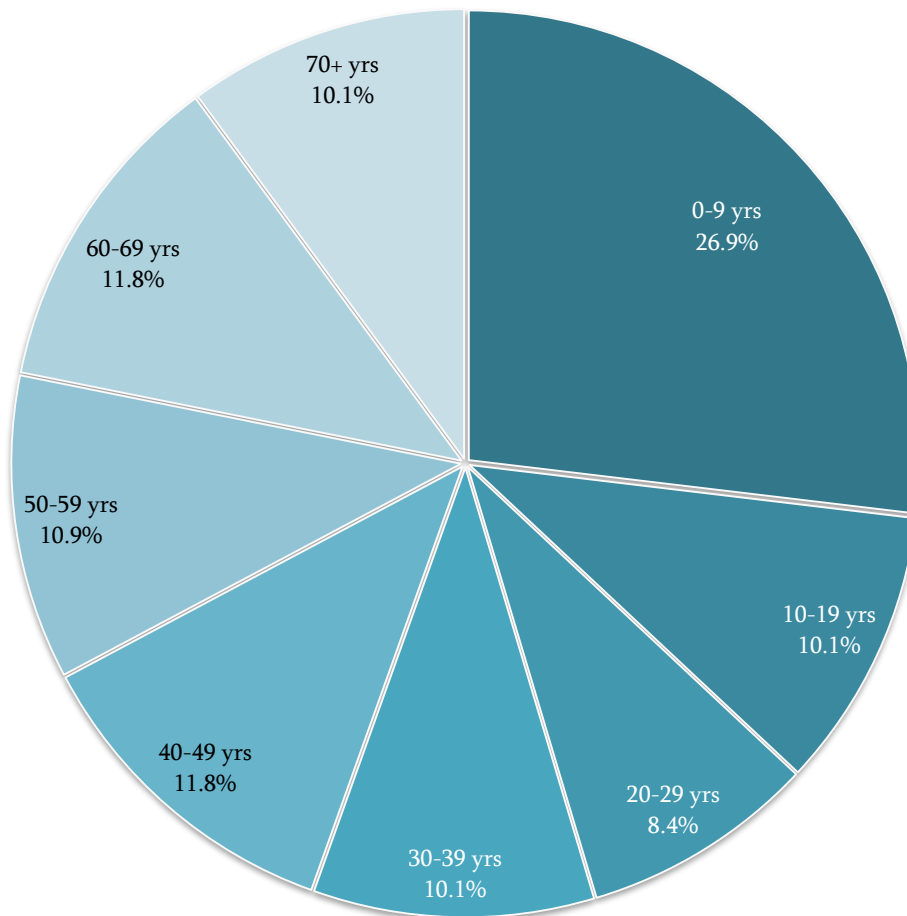
Figure 37. Estimated Number and Rate of Lyme Disease Total Incidence*, Westchester County, 2013-2018



Source: Westchester County Department of Health 2019.

Of the confirmed cases of Lyme disease in 2018, 37.0% were under the age of 20 years, 18.5% were between the ages of 20 and 39, 11.8% were 40 to 49 years, and 32.8% were 50 years or older (Figure 38).

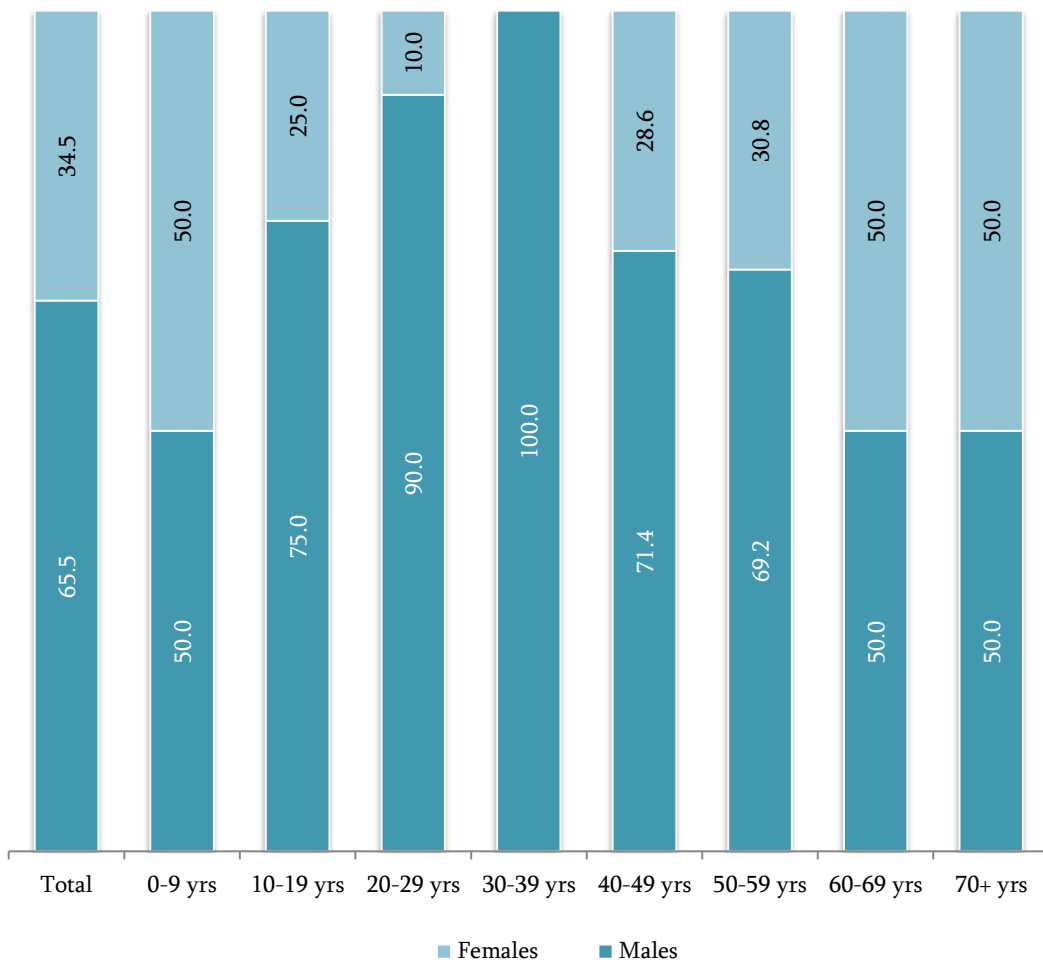
Figure 38. Distribution of Reported Cases of Lyme Disease by Age, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Male cases of Lyme disease outnumbered females two-to-one in 2018. Males made up a larger proportion of the reported Lyme disease cases than females in every age group except those, 60 years and older and those under 10, where the number of both sexes are equal (Figure 39).

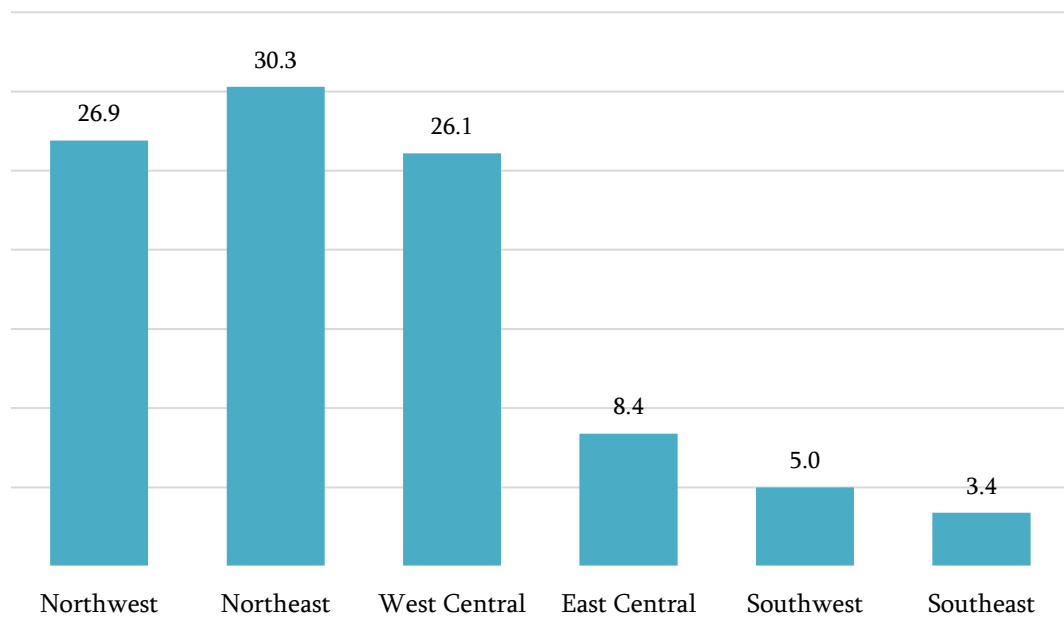
Figure 39. Percentage Distribution of Reported Cases of Lyme Disease by Age and Sex, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

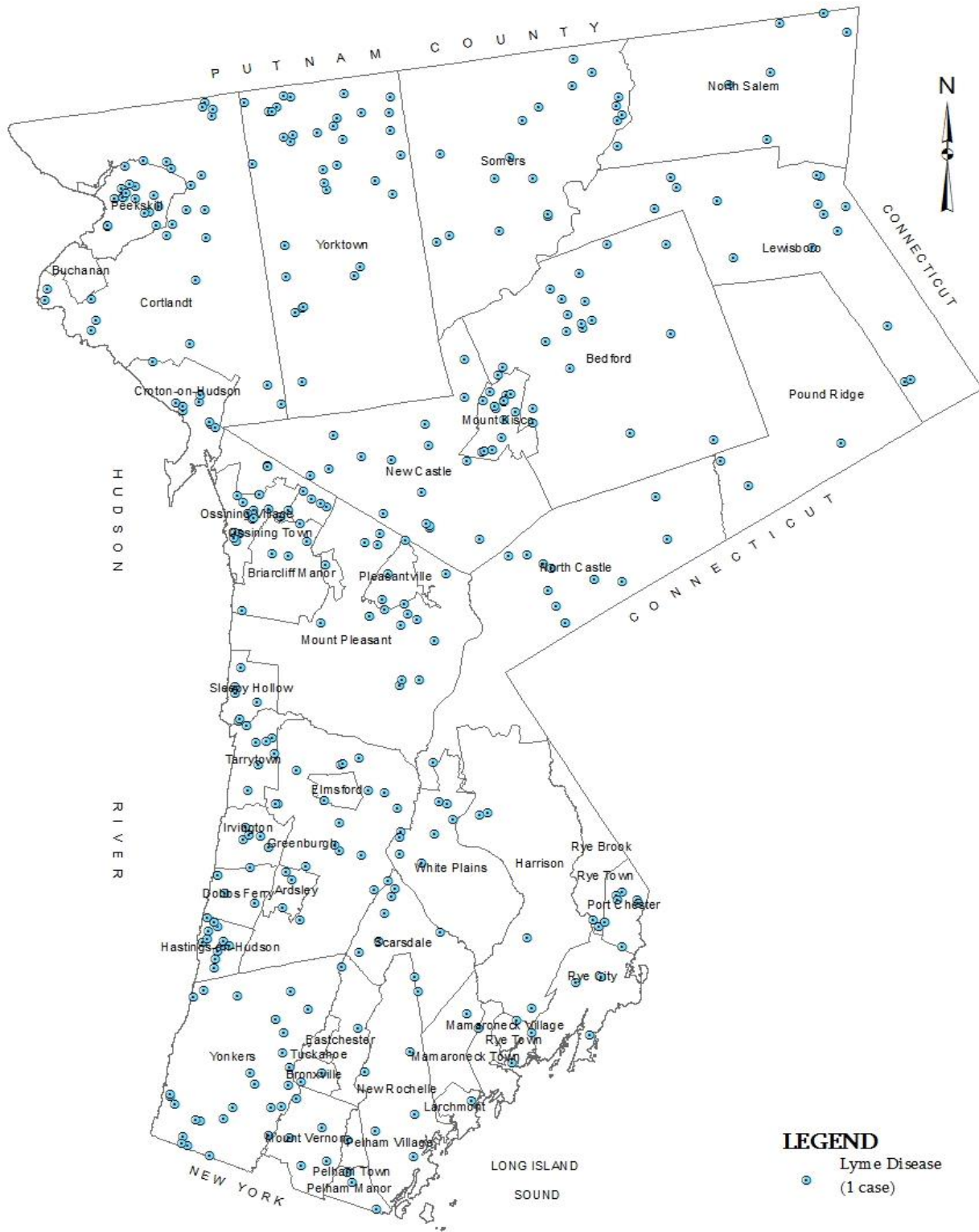
Almost 60.0% of the reported cases of Lyme disease occurred in the Northwest and Northeast HPRs. Over one-third of the Lyme disease cases were diagnosed among residents of the East Central and West Central regions of the county, and less than 10.0% of cases occurred in the Southwest and Southeast HPRs. Lyme disease is historically less prevalent in the urban regions of the county (Figures 40 and 41).

Figure 40. Percentage Distribution of Reported Cases of Lyme Disease by Health Planning Region, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

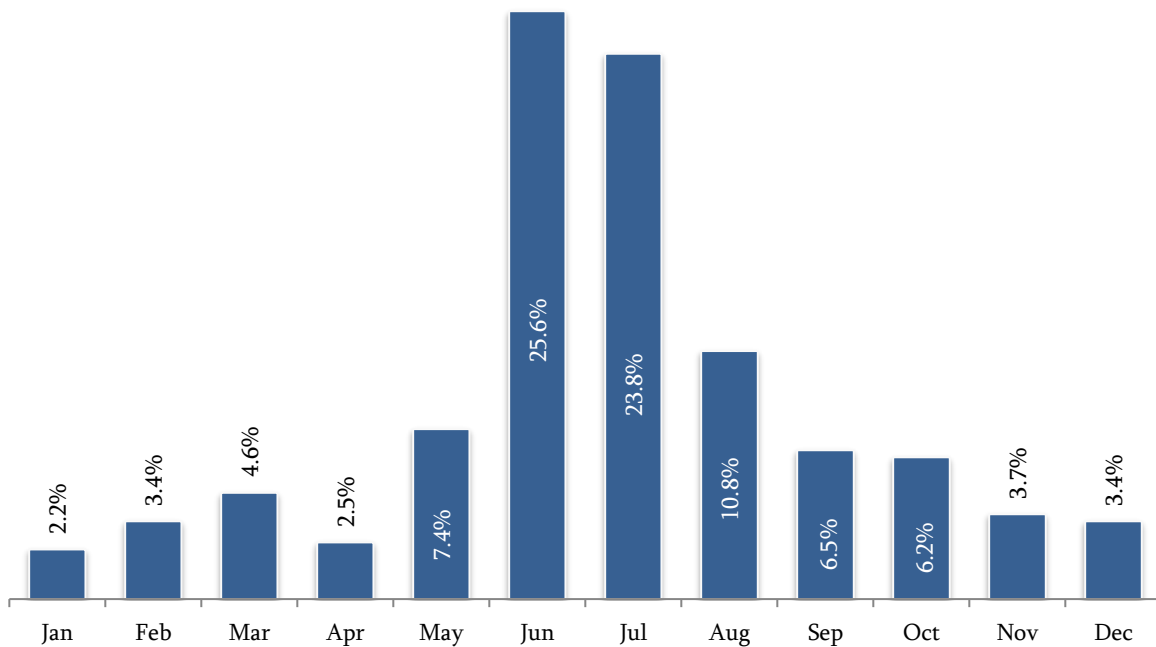
Figure 41. Geographic Distribution of Cases of Lyme Disease by Municipality, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

Lyme disease infections also display a seasonal pattern. The months with the greatest percentages of Lyme disease transmissions were June and July, coinciding with the months when residents are most likely to be outdoors and when the nymphal deer tick is actively feeding (Figure 42).

Figure 42. Average Distribution of Reported Cases of Lyme Disease by Month, Westchester County, 2016-2018



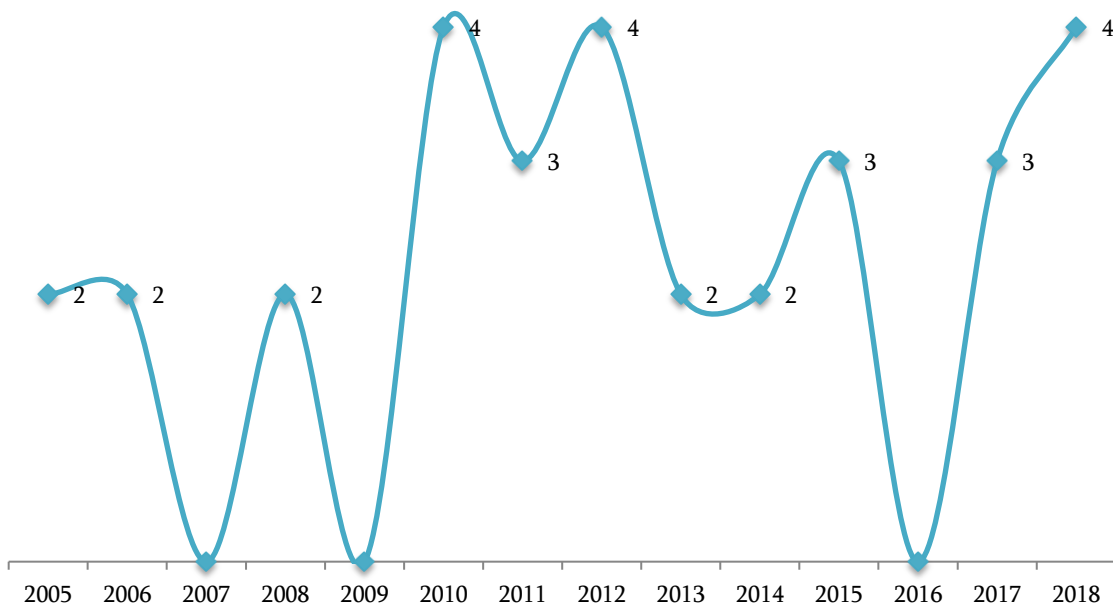
Source: Westchester County Department of Health 2019.

West Nile Virus (WNV) made its first appearance in the United States in New York City during the summer of 1999 and quickly spread to surrounding areas, including Westchester County.

The virus is transmitted from mosquito vectors to humans, birds, and other mammals. In very few individuals (1 in 150), WNV will cause encephalitis, a serious illness in which there is acute swelling of the brain. Symptoms may include high fever, headache, disorientation, coma, tremors, and convulsions and may last several weeks. These neurological effects can become irreversible. Up to 20.0% of people who become infected with WNV will have a milder form of encephalitis, with symptoms lasting from a few days to several weeks. Most people (approximately 80.0%), however, will be asymptomatic.

A total of thirty one confirmed human cases of West Nile encephalitis have been reported in Westchester County since 2005 (Figure 43).

Figure 43. Number of West Nile Encephalitis Cases, Westchester County, 2005 – 2018.



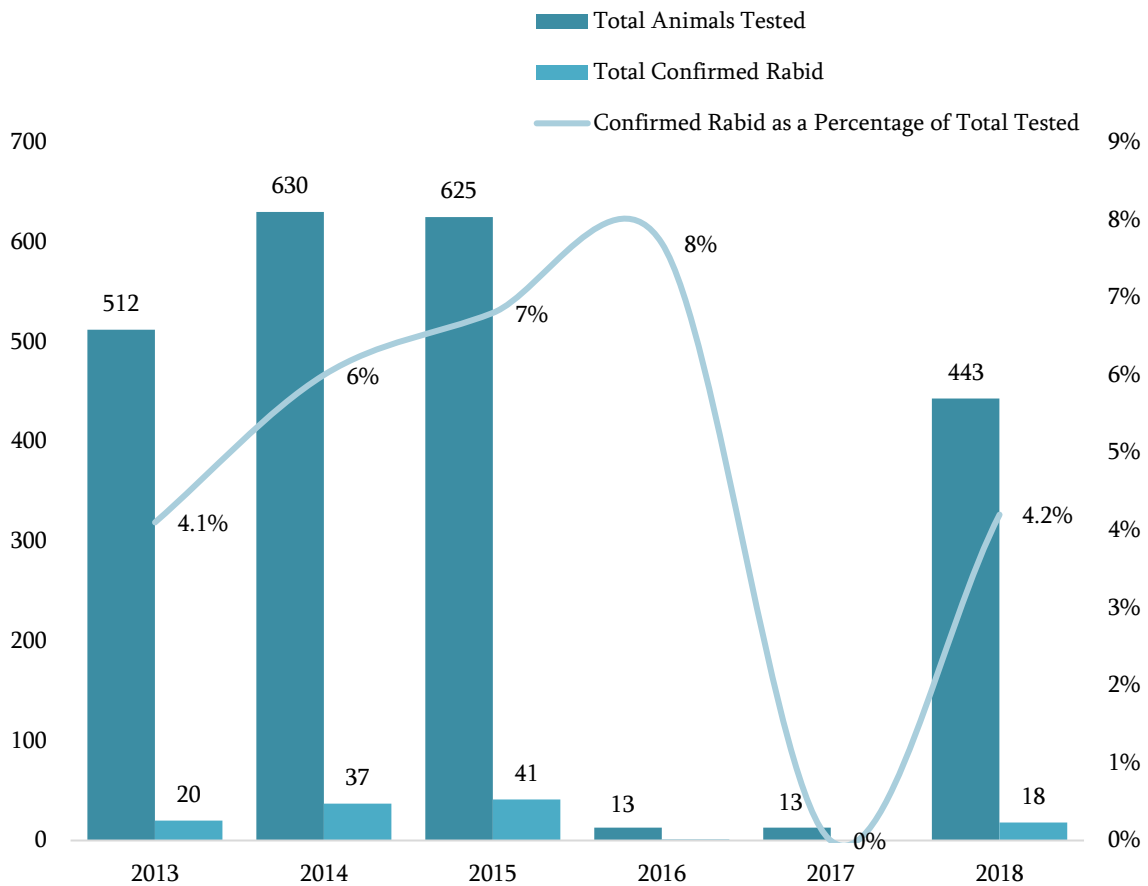
Source: Westchester County Department of Health 2019.

Zoonotic diseases are caused by infections that can be transmitted between animals and humans. Rabies is a deadly virus that lives in the saliva and brain tissue of an infected animal and is spread through bites, scratches, and contact with the infected animal. Because of the highly infective nature of the disease and its near 100.0% mortality rate if no medical intervention is obtained, rabies is the most closely monitored zoonotic disease in Westchester County.

Westchester County Department of Health closely monitors rabies exposures, with timely testing of suspected animals and prophylactic treatment of individuals who have come in contact with suspected rabid animals.

In 2018, 443 animals were tested for rabies with eighteen being confirmed positive (Figure 44).

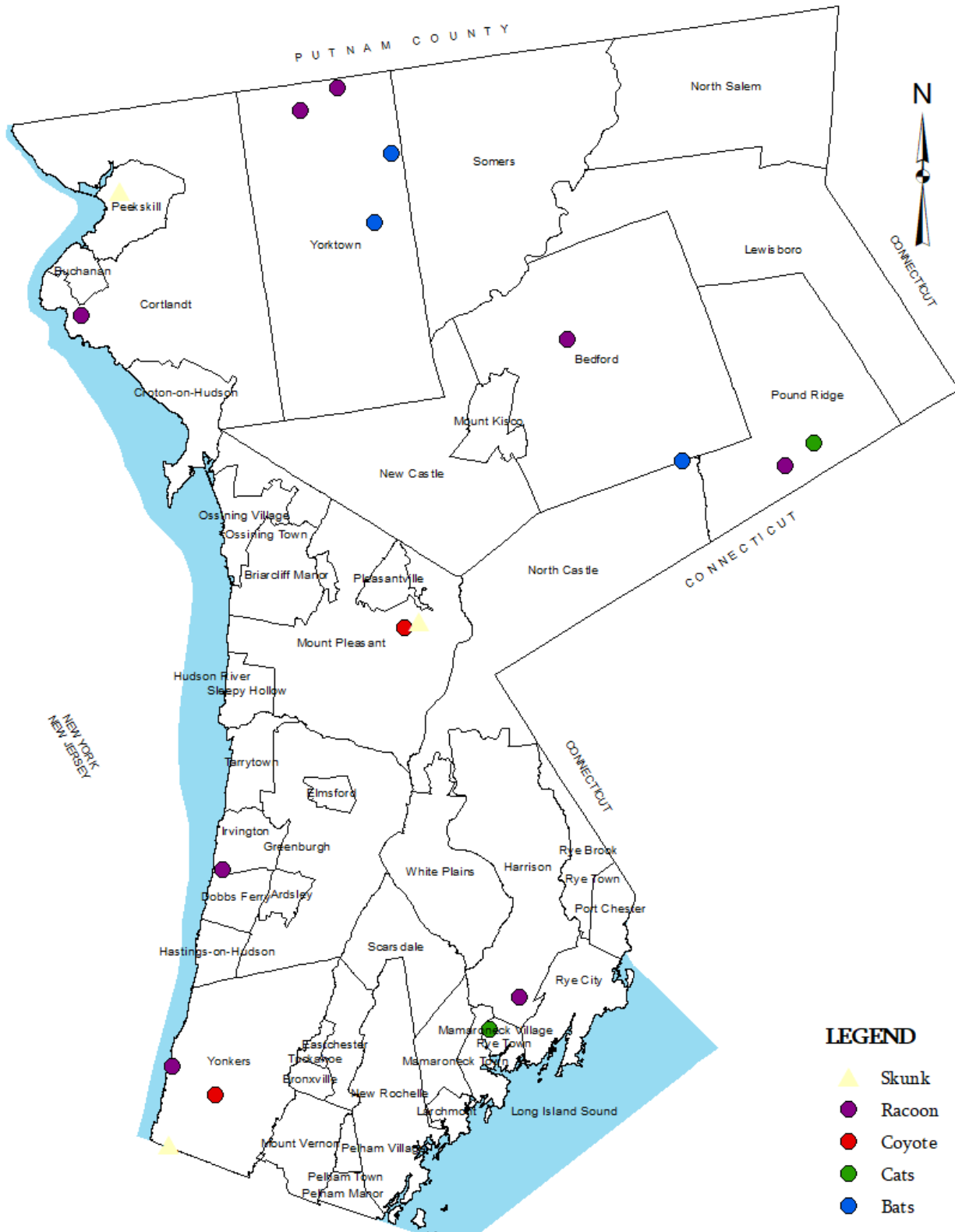
Figure 44. Number and Percent of Animals Tested and Confirmed Rabid, Westchester County, 2013-2018.



Source: Westchester County Department of Health 2019.

Historically, the animals most likely to test positive for rabies are bats, raccoons, and skunks. These three animals alone account for 77.8% of all laboratory confirmed rabid animals in 2018. Raccoons were 44.4% of all animals testing positive for rabies, with bats and skunks making up 16.7% each of all rabid animals. In 2018, rabid animals were captured throughout the county (Figure 45).

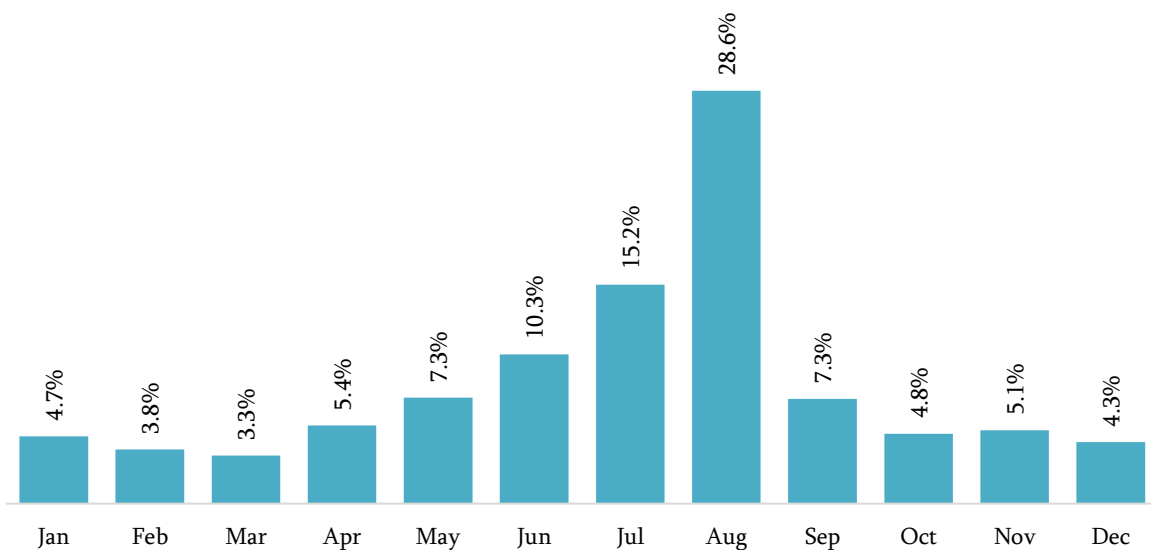
Figure 45. Location and Species of Confirmed Positive Rabid Animals, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

An annual average of 200 Westchester County residents were treated with post-exposure prophylaxis (PEP) over the 2013-2018 period. There are seasonal variations with respect to the number of residents affected and treated with the peak months being July and August and peak quarterly movements in the third quarter of a given year (Figure 46).

Figure 46. Average Annual Seasonal Variations in Treatment of Human Post-Exposure Prophylaxis, Westchester County, 2013-2018.



Source: Westchester County Department of Health 2019.

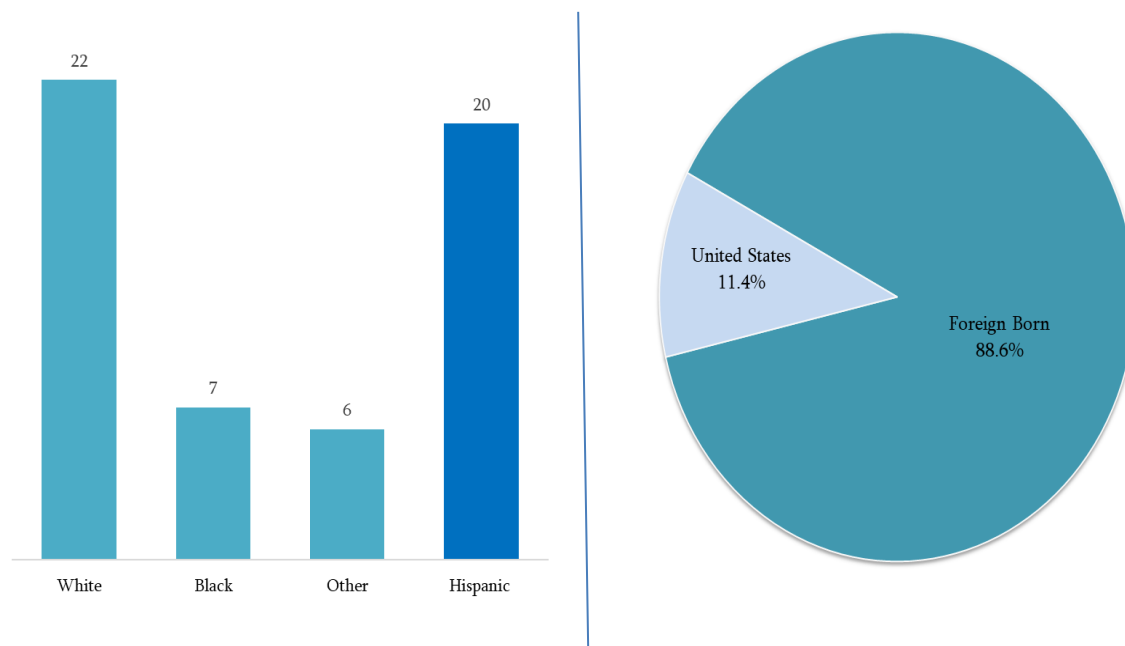
Rabies PEP treatment consists of local treatment of the wound followed by vaccine therapy which is initiated immediately after exposure. Vaccine therapy may be comprised of four to five intramuscular doses of rabies vaccination with or without human rabies immunoglobulin. The treatment administered depends on the contact type and severity of contact with the suspect animal as well as the species of animal.

Tuberculosis

Tuberculosis (TB) is a highly contagious air-borne disease that is spread by people with active, untreated TB infections of the lungs or throat. While TB usually affects the lungs, the disease can also cause illness in other parts of the body, including the brain, kidneys, or the spine. If left untreated it can become fatal.

In 2018, thirty-five new cases of TB were confirmed in Westchester County, 60.0% were male and 40.0% were female. Of the TB cases reported in 2018, 20.0% were identified as being resistant to at least one drug. The majority (88.6%) of TB patients were from foreign countries (Figure 47).

Figure 47. Distribution of Tuberculosis Cases by Race /Ethnicity and Origin of Birth, Westchester County, 2018.



Source: Westchester County Department of Health 2019.

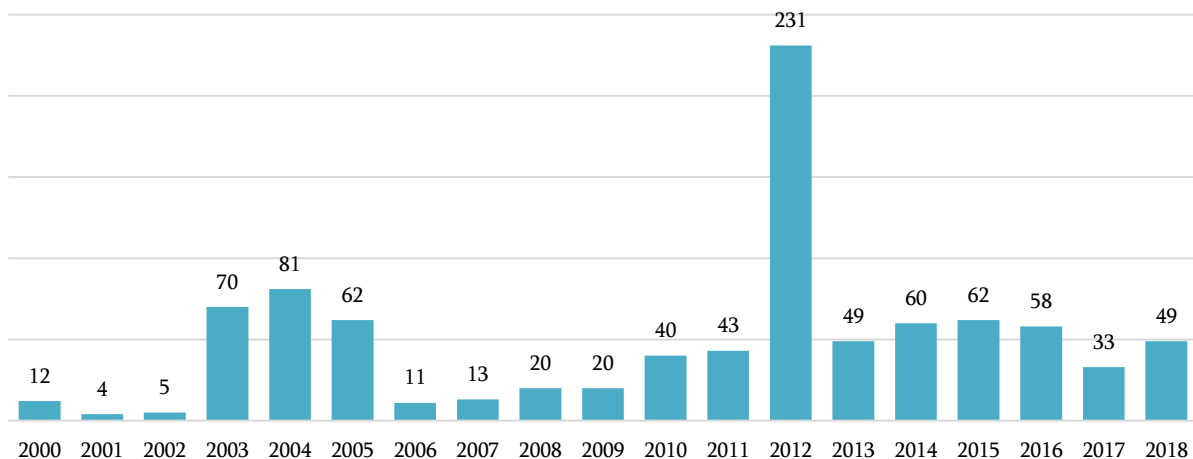
Vaccine Preventable Diseases

In 2002, the World Health Organization reported that approximately 1.4 million deaths among children under 5 years of age could have been prevented by routine vaccinations. Vaccinations are a front-line tool in infectious disease prevention and control. Through widespread immunization programs, many vaccine preventable diseases (VPDs) have been contained in the United States.

The most commonly reported VPD in Westchester County is Pertussis (Whooping Cough). Pertussis is highly contagious and begins with symptoms that are similar to the common cold. However, severe coughing appears after 1-2 weeks and can persist for up to 6 weeks. The classic whooping sound can be identified in older children and adults. Pertussis is particularly dangerous for young children and infants who can develop respiratory distress and difficulty breathing, usually requiring hospitalization for infants.

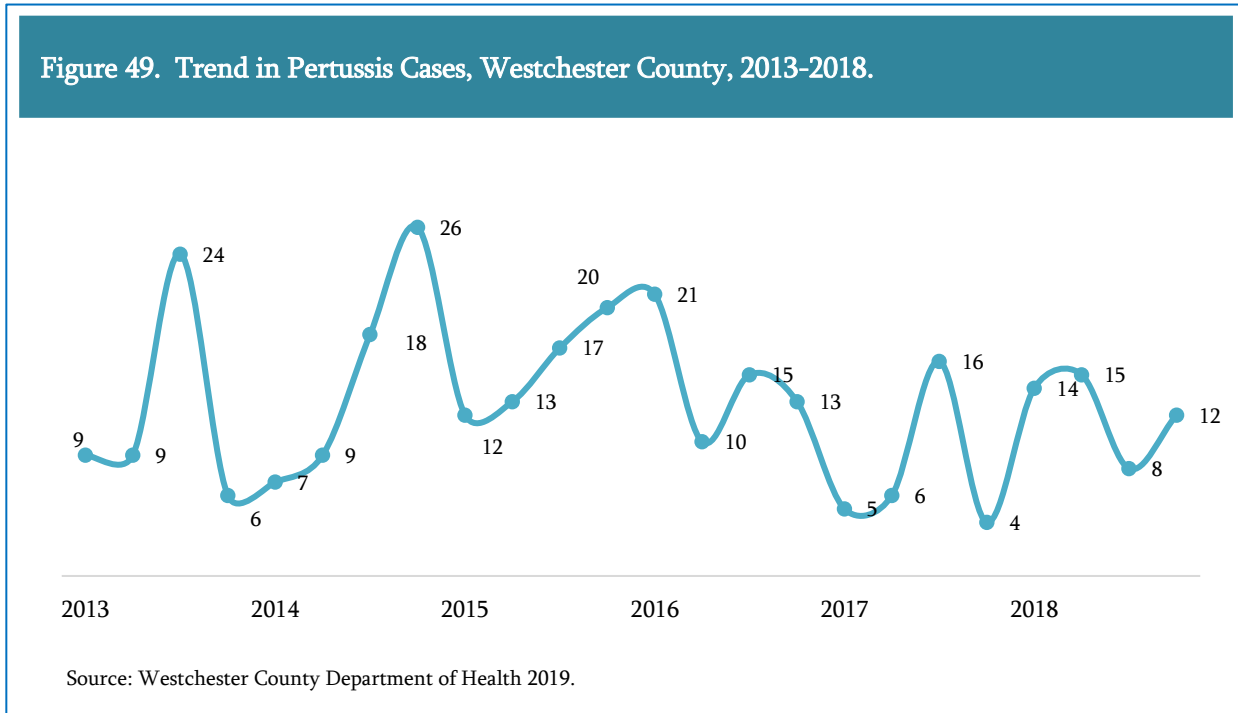
Outbreaks of Pertussis occur frequently with the number of cases peaking every 3 to 5 years. In 2012, 231 cases of Pertussis were reported in Westchester County, nearly 5 times as many as in 2018 (Figure 48).

Figure 48. Number of Reported Cases of Pertussis by Year, Westchester County, 2000-2018.



Source: Westchester County Department of Health 2019.

Trends between 2013 and 2018 show seasonal fluctuations in Pertussis cases. The number of cases peaked between the winter of 2014 and spring of 2015, trending downwards to 2018. Quarterly trends in 2018 show marginally higher number of cases in the first two quarters for the year (Figure 49).



The vaccine for Pertussis in infants and children is the DtaP: for older children and adults it is the TdaP. The Pertussis vaccination is combined with the vaccinations for diphtheria and tetanus. Some vaccinations lose their effectiveness over time and revaccinations or booster shots may be required. A full schedule of vaccinations and recommendations appear in the appendix at the end of this report.

Tables

Table 1. Reported Cases and Rates of Reportable Communicable Diseases*, Westchester County, 2013-2018.

	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
A. Vaccine-Preventable Diseases												
Mumps	10	5	6	7	6	0	1.0	0.5	0.6	0.7	0.6	0
Pertussis	49	33	58	62	60	49	5.0	3.4	6.0	6.4	6.2	5.1
B. CNS Diseases and Bacteremias												
Botulism	0	0	1	0	0	0	0	0	0.1	0	0	0
Encephalitis	11	6	5	8	7	13	1.1	0.6	0.5	0.8	0.7	1.4
<i>West Nile Encephalitis (lab positive)</i>	4	3	0	3	2	2	0.4	0.3	0	0.3	0.2	0.2
<i>Non-West Nile Encephalitis</i>	7	3	5	5	5	11	0.7	0.3	0.5	0.5	0.5	1.2
Haemophilus Influenzae	20	17	16	11	8	8	2.1	1.7	1.7	1.1	0.8	0.8
Listeriosis	7	5	3	0	4	6	0.7	0.5	0.3	0	0.4	0.6
Meningitis	35	47	53	57	60	54	3.6	4.8	5.5	5.9	6.2	5.6
<i>Aseptic Meningitis</i>	31	34	44	35	52	34	3.2	3.5	4.5	3.6	5.4	3.6
<i>Meningococcal Disease</i>	1	3	0	0	0	3	0.1	0.3	0	0	0	0.3
<i>Other Meningitis/Bacteremias</i>	3	10	9	22	8	17	0.3	1.0	0.9	2.3	0.8	1.8
Group A Strep	23	36	23	32	31	21	2.4	3.7	2.4	3.3	3.2	2.2
Group B Strep	75	98	98	78	79	63	7.7	10.0	10.1	8.1	8.2	6.6
Invasive Strep Pneumoniae	64	59	67	62	69	70	6.6	6.0	6.9	6.4	7.2	7.3
<i>Invasive Strep Pneumoniae</i>	57	53	60	55	59	64	5.8	5.4	6.2	5.7	6.1	6.7
<i>Drug-Resistant Strep Pneumoniae</i>	7	6	7	7	10	6	0.7	0.6	0.7	0.7	1.0	0.6
C. Enteric Infections												
Amebiasis	20	24	20	25	22	11	2.1	2.5	2.1	2.6	2.3	1.2
Calicivirus	2	0	30	10	151	350	0.2	0	3.1	1.0	15.7	36.6
Campylobacteriosis	246	217	224	244	273	297	25.2	22.2	23.1	25.2	28.4	31.1
Cryptosporidiosis	19	12	16	15	12	12	1.9	1.2	1.7	1.6	1.2	1.3
Cyclosporidiosis	13	4	6	5	5	3	1.3	0.4	0.6	0.5	0.5	0.3
Enterovirus	0	0	0	0	28	0	0	0	0	0	2.9	0
Giardiasis	76	84	87	69	92	69	7.8	8.6	9.0	7.1	9.6	7.2
Salmonellosis	119	122	123	123	132	121	12.2	12.5	12.7	12.7	13.7	12.7
Shigellosis	36	30	25	30	33	17	3.7	3.1	2.6	3.1	3.4	1.8
STEC (E. Coli 0157) ¹	28	7	10	12	15	16	2.9	0.7	1.0	1.2	1.6	1.7
Typhoid	3	4	4	2	0	2	0.3	0.4	0.4	0.2	0.0	0.2
Vibriosis	14	7	5	4	6	9	1.4	0.7	0.5	0.4	1	0.9
Yersiniosis	21	17	5	5	3	1	2.2	1.7	0.5	0.5	0.3	0.1

(continue)

Table 1. Reported Cases and Rates of Reportable Communicable Diseases*, Westchester County 2013-2018 (*continued*).

	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
D. Viral Hepatitis												
Hepatitis A	7	13	6	5	4	10	0.7	1.3	0.6	0.5	0.4	1.0
Hepatitis B	263	302	246	236	229	312	27.0	31.0	25.4	24.4	23.8	32.6
<i>Acute</i>	3	3	2	5	3	9	0.3	0.3	0.2	0.5	0.3	0.9
<i>Chronic</i> ²	260	299	244	231	226	303	26.7	30.7	25.2	23.9	23.5	31.7
Hepatitis C	351	392	432	543	686	587	36	40	45	56	71	61.384
<i>Acute</i>	2	4	1	1	2	1	0.2	0.4	0.1	0.1	0.2	0.1
<i>Chronic</i> ²	349	388	431	542	684	586	35.8	39.8	44.5	56.0	71.1	61.3
E. Sexually Transmitted Diseases												
Chlamydia	3,927	3,809	3,800	3,385	3,280	3,182	402.6	390.5	392.1	349.9	340.8	332.7
Gonorrhea	765	671	585	498	469	442	78.4	68.8	60.4	51.5	48.7	46.2
Herpes Infant	2	1	4	0	0	0	0.2	0.1	0.4	0	0	0
Syphilis (All Stages) ³	242	278	235	205	156	163	24.8	28.5	24.2	21.2	16.2	17.0
Early Syphilis	132	142	113	104	72	67	13.5	14.6	11.7	10.8	7.5	7.0
<i>Primary and Secondary</i>	70	84	76	63	40	40	7.2	8.6	7.8	6.5	4.2	4.2
<i>Early Latent</i>	62	58	37	41	32	27	6.4	5.9	3.8	4.2	3.3	2.8
All other	110	136	122	101	84	96	11.3	13.9	12.6	10.4	8.7	10.0
Congenital Syphilis	2	3	0	0	1	1	0.2	0.3	0	0	0.1	0.1
F. Tuberculosis												
	35	31	28	34	27	30	3.6	3.2	2.9	3.5	2.8	3.1
G. Vector-Borne, Zoonoses												
Anaplasmosis	34	33	26	14	8	21	3.5	3.4	2.7	1.4	0.8	2.2
Babesiosis	80	62	43	56	21	63	8.2	6.4	4.4	5.8	2.2	6.6
Chikungunya	1	0	5	5	40	0	0.1	0	0.5	0.5	4.2	0
Dengue Fever	2	0	15	4	6	8	0.2	0	1.5	0.4	0.6	0.8
Ehrlichiosis	12	15	11	3	3	8	1.2	1.5	1.1	0.3	0.3	0.8
Anaplasmosis/Ehrlichiosis	1	2	3	0	0	1	0.1	0.2	0.3	0	0	0.1
Undetermined												
Lyme Disease ⁴	119	108	97	153	88	83	12.2	11.1	10.0	15.8	9.1	8.7
<i>Sentinel Surveillance Cases</i>	71	79	65	67	48	57	7.3	8.1	6.7	6.9	5.0	6.0
<i>Non-Sentinel Surveillance Cases</i>	48	29	32	86	40	26	4.9	3.0	3.3	8.9	4.2	2.7
<i>NYSDOH Calculated Incidence</i>	312	407	343	385	194	247	32.0	41.7	35.4	39.8	20.2	25.8
Malaria	14	8	9	6	12	10	1.4	0.8	0.9	0.6	1.2	1.0
Post-Exposure Prophylaxis for Rabies ⁵	257	178	151	242	235	171	26.4	18.3	15.6	25.0	24.4	17.9
Powassan Disease	0	0	1	1	0	0	0	0	0.1	0.1	0	0
Rocky Mountain Spotted Fever	3	1	1	6	0	0	0.3	0.1	0.1	0.6	0	0
Zika Virus (Travel-associated)	2	10	37	--	--	--	0.2	1.0	3.8	--	--	--
<i>Symptomatic Cases</i>	2	4	33	--	--	--	0.2	0.4	3.4	--	--	--
<i>Asymptomatic Cases</i>	0	6	4	--	--	--	0.0	0.6	0.4	--	--	--

(*continue*)

Table 1. Reported Cases and Rates of Reportable Communicable Diseases*, Westchester County 2013-2018 (*continued*).

	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
H. Influenza (Laboratory-Confirmed)												
Influenza A	4,686	3,845	2,876	1,948	1,752	1,201	480.5	394.2	296.7	201.4	182.1	125.6
Influenza B	3,461	1,100	1,155	261	1,024	591	354.9	112.8	119.2	27.0	106.4	61.8
Influenza, Unspecified	25	27	18	6	5	4	2.6	2.8	1.9	0.6	0.5	0.4
Influenza, Pediatric Deaths	0	0	2	1	0	0	0	0	0.2	0.1	0	0
Influenza, Swine-Origin (H1N1)	0	0	0	0	71	17	0	0	0	0	7.4	1.8
I. Others												
Legionellosis	43	45	22	35	24	25	4.4	4.6	2.3	3.6	2.5	2.6
Toxic Shock Syndrome	0	1	2	1	1	4	0	0.1	0.2	0.1	0.1	0.4
Vancomycin-intermediate (VISA) or Vancomycin-resistant (VRSA) <i>S. aureus</i>	0	0	0	2	0	2	0	0	0	0.2	0	0.2

* Reporting of suspected or confirmed communicable diseases is mandated under the New York State Sanitary Code (10NYCRR2.10). The Westchester County Department of Health Monthly Morbidity Report lists the reportable diseases occurred among Westchester County residents during specific time periods. Data are extracted from the New York State's Communicable Disease Electronic Surveillance System (CDESS) unless otherwise noted. The incidence of a disease is reported by the date of diagnosis. If the diagnosis date is not available, the incidence is reported by the available dates according to the following hierarchy: symptom date, date reported to the Health Department, date when the Health Department received the record, or date when a supplemental file was created. Diseases with no cases reported for five years prior are not included. Some disease categories may include probable cases; thus, the number of cases over time may change to reflect recent changes in case status.

¹Shiga toxin producing E. Coli (STEC) may include non-0157 shiga toxin producing strains of E. Coli.

²Data may be incomplete due to surveillance limitations.

³Total Syphilis does not include congenital syphilis.

⁴Lyme disease totals includes number of confirmed cases from sentinel surveillance, erythema migrans (EM) rash and provider reporting. Cases from the sentinel surveillance are based on the 20% of cases randomly extracted from those reported to WCDH through New York State's Electronic Clinical Laboratory Reporting System (ECLRS).

⁵The number of individuals to whom rabies post-exposure prophylaxis has been administered. From WCDH internal records.

⁶The type of influenza specified by testing facilities.

Table 2. Number of Major Sexually Transmitted Diseases, Westchester County, New York State and the United States 2018.

	Westchester County ¹		New York State ²		New York State (exc NYC) ²		United States ³	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Chlamydia	3,927	402.6	116,843	591.8	45,153	402.9	1,708,569	528.8
Gonorrhea	765	78.4	34,111	172.8	10,620	94.8	555,608	171.9
Syphilis (All Stages)	242	24.8	9,869	49.8	1,876	16.7	101,567	31.4
<i>Primary and Secondary</i>	70	7.2	6,273*	31.8*	1,129*	10.1*	30,644	9.5

* Represents the figure for early syphilis which includes primary, secondary and latent stages of the disease.

¹Source: Westchester County Department of Health. Data as at February 2019 - data for the year 2018.

²Source: New York State Department of Health. Data as at February 2019 - data for the year 2017.

³Source: Center for Disease Control Prevention. Data as at February 2019.

Table 3. Reported Cases and Rates of Chlamydia by Municipality, Westchester County, 2013-2018.

Health Planning Region & Municipality	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
Westchester County	3,927	3,809	3,800	3,385	3,280	3,182	402.6	390.5	392.1	349.9	340.8	332.7
Northwest	477	479	516	402	445	414	318.4	319.7	345.8	269.7	299.9	280.4
Briarcliff Manor (V)	14	11	9	7	7	9	178.0	139.9	116.4	90.5	89.9	113.3
Buchanan (V)	7	3	7	5	7	4	310.4	133.0	311.7	225.4	300.4	178.1
Cortlandt (TOV)	58	52	65	44	49	39	179.5	161.0	202.4	137.4	154.3	123.4
Croton-on-Hudson (V)	10	32	17	15	14	6	121.1	387.5	207.1	182.9	171.4	74.0
Mount Pleasant (TOV)	81	89	111	80	97	98	304.3	334.3	413.9	297.6	364.1	370.9
Ossining (TOV)	5	8	8	9	4	2	90.0	144.0	144.0	162.7	72.7	36.5
Ossining (V)	95	99	112	86	100	89	374.2	390.0	442.7	339.8	396.3	353.8
Peekskill (C)	124	111	96	93	96	101	514.3	460.4	400.4	388.7	402.1	426.1
Pleasantville (V)	34	31	26	29	25	27	467.4	426.1	364.5	407.0	352.6	382.7
Sleepy Hollow (V)	49	43	65	34	46	39	480.9	422.0	642.5	337.5	459.9	393.4
Northeast	299	297	264	232	212	211	212.3	210.9	188.6	166.1	152.7	153.0
Bedford (T)	41	44	43	36	48	42	228.3	245.1	241.6	202.9	272.1	240.0
Lewisboro (T)	19	14	10	14	8	14	149.1	109.9	78.9	110.7	63.6	112.1
Mount Kisco (T/V)	51	49	36	32	27	31	463.9	445.7	325.4	289.3	245.1	283.5
New Castle (T)	35	24	28	18	20	19	194.1	133.1	156.0	100.6	112.4	107.3
North Castle (T)	28	29	13	18	12	12	227.5	235.6	106.6	148.3	99.6	100.5
North Salem (T)	10	9	8	6	6	9	192.1	172.9	154.5	115.8	116.2	175.0
Pound Ridge (T)	10	12	6	11	2	6	191.2	229.4	115.1	211.2	38.7	116.6
Somers (T)	44	38	41	28	25	12	205.1	177.2	194.0	132.9	119.8	58.1
Yorktown (T)	61	78	79	69	64	66	165.3	211.4	214.6	187.8	175.0	181.5
West Central	528	562	520	448	438	399	314.2	334.4	311.6	269.5	265.3	243.4
Ardasley (V)	8	9	3	6	7	5	175.6	197.5	65.6	132.1	154.9	111.8
Dobbs Ferry (V)	45	48	63	41	36	46	403.9	430.8	569.7	370.9	327.2	420.2
Elmsford (V)	33	19	28	27	21	13	667.7	384.5	581.6	566.6	445.0	276.1
Greenburgh (TOV)	100	122	103	90	75	94	222.0	270.8	229.6	202.2	170.2	215.7
Hastings-on-Hudson (V)	21	32	40	34	28	22	262.7	400.4	502.6	427.6	354.2	279.2
Irvington (V)	21	23	11	14	6	3	318.8	349.1	167.7	214.1	92.2	46.2
Scarsdale (T/V)	29	29	17	14	18	13	162.4	162.4	96.1	79.5	103.0	75.0
Tarrytown (V)	27	38	41	32	32	30	234.1	329.5	357.8	279.4	280.1	264.5
White Plains (C)	244	242	214	190	215	173	417.8	414.4	369.4	328.8	373.9	302.7
East Central	324	270	295	250	239	191	267.2	222.7	245.0	207.9	199.8	160.6
Harrison (T/V)	87	61	72	54	53	49	307.2	215.4	256.4	192.9	190.5	177.3
Larchmont (V)	17	4	11	10	9	6	278.2	65.5	182.4	166.5	151.2	101.7
Mamaroneck (TOV)	19	25	15	5	10	10	154.2	202.9	123.4	41.1	82.6	83.0
Mamaroneck (V)	47	39	40	36	28	28	243.2	201.8	207.7	187.3	146.3	147.1
Port Chester (V)	115	93	125	102	108	82	388.2	313.9	424.9	346.9	368.9	281.7
Rye (C)	26	27	21	23	14	8	162.5	168.7	131.7	144.3	88.1	50.6
Rye Brook (V)	13	21	11	20	17	8	136.2	220.1	115.6	210.3	179.8	85.2
Southwest	1,105	1,081	1,110	978	933	938	549.8	537.8	555.8	490.4	469.7	475.0
Yonkers (C)	1,105	1,081	1,110	978	933	938	549.8	537.8	555.8	490.4	469.7	475.0
Southeast	1,150	1,085	1,066	1,040	979	999	591.6	558.2	552.4	539.7	510.7	524.5
Bronxville (V)	17	31	17	9	6	6	264.5	482.3	265.8	140.4	94.1	94.5
Eastchester (TOV)	20	18	33	21	16	21	99.5	89.6	165.7	105.6	80.8	106.7
Mount Vernon (C)	721	673	656	665	592	651	1049.9	980.0	961.6	974.8	871.1	962.3
New Rochelle (C)	347	315	319	311	322	285	434.4	394.4	402.3	393.5	410.3	366.2
Pelham (V)	18	22	18	16	16	10	256.6	313.6	257.3	228.8	229.1	144.5
Pelham Manor (V)	9	7	9	5	7	4	159.7	124.2	161.8	89.8	126.4	72.5
Tuckahoe (V)	18	19	14	13	20	22	270.4	285.5	212.2	197.4	304.9	337.5
Westchester County Correctional Facilities	35	29	18	26	28	24	--	--	--	--	--	--
Unknown Address	9	6	11	9	6	6	--	--	--	--	--	--

Source: Westchester County Department of Health. Data as at February 2019.

Table 4. Reported Cases and Rates of Gonorrhea by Municipality, Westchester County, 2013-2018.

Health Planning Region & Municipality	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
Westchester County	765	671	585	499	469	442	78.4	68.8	60.4	51.6	48.7	46.2
Northwest	106	80	92	54	40	50	70.8	53.4	61.7	36.2	27.0	33.9
Briarcliff Manor (V)	1	0	0	2	0	0	12.7	0	0	25.8	0	0
Buchanan (V)	0	1	0	1	1	3	0	44.3	0	45.1	42.9	133.6
Cortlandt (TOV)	10	8	9	3	5	3	31.0	24.8	28.0	9.4	15.7	9.5
Croton-on-Hudson (V)	4	2	3	0	1	0	48.4	24.2	36.5	0	12.2	0
Mount Pleasant (TOV)	25	18	18	14	14	13	93.9	67.6	67.1	52.1	52.6	49.2
Ossining (TOV)	1	1	0	2	0	0	18.0	18.0	0	36.1	0	0
Ossining (V)	10	16	25	12	7	5	39.4	63.0	98.8	47.4	27.7	19.9
Peekskill (C)	41	26	24	10	6	18	170.0	107.8	100.1	41.8	25.1	75.9
Pleasantville (V)	10	7	11	6	4	4	137.5	96.2	154.2	84.2	56.4	56.7
Sleepy Hollow (V)	4	1	2	4	2	4	39.3	9.8	19.8	39.7	20.0	40.3
Northeast	32	35	25	18	21	19	22.7	24.9	17.9	12.9	15.1	13.8
Bedford (T)	8	7	3	2	3	2	44.6	39.0	16.9	11.3	17.0	11.4
Lewisboro (T)	2	3	2	1	0	0	15.7	23.5	15.8	7.9	0	0
Mount Kisco (T/V)	3	2	3	2	2	4	27.3	18.2	27.1	18.1	18.2	36.6
New Castle (T)	2	1	3	1	0	1	11.1	5.5	16.7	5.6	0	5.6
North Castle (T)	2	3	2	1	2	1	16.2	24.4	16.4	8.2	16.6	8.4
North Salem (T)	1	1	2	0	0	0	19.2	19.2	38.6	0	0	0
Pound Ridge (T)	0	1	0	0	1	1	0	19.1	0	0	19.3	19.4
Somers (T)	4	3	3	5	3	3	18.6	14.0	14.2	23.7	14.4	14.5
Yorktown (T)	10	14	7	6	10	7	27.1	37.9	19.0	16.3	27.3	19.3
West Central	100	93	80	64	57	51	59.5	55.3	47.9	38.5	34.5	31.1
Ardsley (V)	3	3	1	0	1	2	65.8	65.8	21.9	0	22.1	44.7
Dobbs Ferry (V)	12	12	4	4	8	9	107.7	107.7	36.2	36.2	72.7	82.2
Elmsford (V)	5	4	7	1	2	1	101.2	80.9	145.4	21.0	42.4	21.2
Greenburgh (TOV)	27	22	23	14	15	7	59.9	48.8	51.3	31.5	34.0	16.1
Hastings-on-Hudson (V)	8	10	7	7	7	5	100.1	125.1	88.0	88.0	88.6	63.5
Irvington (V)	3	2	1	0	0	0	45.5	30.4	15.2	0	0	0
Scarsdale (T/V)	1	2	0	3	3	0	5.6	11.2	0	17.0	17.2	0
Tarrytown (V)	7	3	2	1	1	1	60.7	26.0	17.5	8.7	8.8	8.8
White Plains (C)	34	35	35	34	20	26	58.2	59.9	60.4	58.8	34.8	45.5
East Central	53	60	42	29	35	24	43.7	49.5	34.9	24.1	29.3	20.2
Harrison (T/V)	10	16	9	9	9	5	35.3	56.5	32.0	32.1	32.3	18.1
Larchmont (V)	4	0	1	3	1	0	65.5	0	16.6	50.0	16.8	0
Mamaroneck (TOV)	2	4	3	2	4	2	16.2	32.5	24.7	16.4	33.0	16.6
Mamaroneck (V)	3	9	5	3	3	2	15.5	46.6	26.0	15.6	15.7	10.5
Port Chester (V)	27	25	22	9	13	13	91.1	84.4	74.8	30.6	44.4	44.7
Rye (C)	1	3	2	2	1	1	6.2	18.7	12.5	12.5	6.3	6.3
Rye Brook (V)	6	3	0	1	4	1	62.9	31.4	0	10.5	42.3	10.6
Southwest	213	197	151	154	153	147	106.0	98.0	75.6	77.2	77.0	74.4
Yonkers (C)	213	197	151	154	153	147	106.0	98.0	75.6	77.2	77.0	74.4
Southeast	252	195	192	174	158	150	129.6	100.3	99.5	90.3	82.4	78.8
Bronxville (V)	5	6	1	1	1	0	77.8	93.3	15.6	15.6	15.7	0
Eastchester (TOV)	4	2	3	3	1	5	19.9	10.0	15.1	15.1	5.1	25.4
Mount Vernon (C)	164	115	127	129	116	104	238.8	167.5	186.2	189.1	170.7	153.7
New Rochelle (C)	66	59	55	35	35	33	82.6	73.9	69.4	44.3	44.6	42.4
Pelham (V)	7	6	2	3	1	3	99.8	85.5	28.6	42.9	14.3	43.4
Pelham Manor (V)	0	2	1	0	0	0	0	35.5	18.0	0	0	0
Tuckahoe (V)	6	5	3	3	4	5	90.1	75.1	45.5	45.6	61.0	76.7
Westchester County Correctional Facilities	7	11	2	3	3	0	--	--	--	--	--	--
Unknown Address	2	0	1	3	2	1	--	--	--	--	--	--

Source: Westchester County Department of Health. Data as at February 2019.

Table 5. Reported Cases and Rates of Syphilis (All Stages) by Municipality, Westchester County, 2013-2018.

Health Planning Region & Municipality	Total Annual Cases						Rate (<i>per 100,000 persons</i>)					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
Westchester County	242	278	235	205	156	163	24.8	28.5	24.2	21.2	16.2	17.0
Northwest	31	35	31	21	11	16	20.7	23.4	20.8	14.1	7.4	10.8
Briarcliff Manor (V)	0	1	1	0	0	0	0	12.7	12.9	0	0	0
Buchanan (V)	0	0	1	0	0	0	0	0	44.5	0	0	0
Cortlandt (TOV)	1	4	2	2	1	2	3.1	12.4	6.2	6.2	3.1	6.3
Croton-on-Hudson (V)	0	1	2	0	0	1	0	12.1	24.4	0	0	12.3
Mount Pleasant (TOV)	6	4	4	4	2	3	22.5	15.0	14.9	14.9	7.5	11.4
Ossining (TOV)	0	0	0	1	0	0	0	0	0	18.1	0	0
Ossining (V)	6	7	7	3	2	1	23.6	27.6	27.7	11.9	7.9	4.0
Peekskill (C)	9	15	12	8	5	6	37.3	62.2	50.0	33.4	20.9	25.3
Pleasantville (V)	4	2	0	2	0	2	55.0	27.5	0	28.1	0	28.3
Sleepy Hollow (V)	5	1	2	1	1	1	49.1	9.8	19.8	9.9	10.0	10.1
Northeast	16	13	8	11	8	5	11.4	9.2	5.7	7.9	5.8	3.6
Bedford (T)	4	2	1	0	1	0	22.3	11.1	5.6	0	5.7	0
Lewisboro (T)	2	4	0	0	0	0	15.7	31.4	0	0	0	0
Mount Kisco (T/V)	1	1	0	4	2	0	9.1	9.1	0	36.2	18.2	0
New Castle (T)	1	1	3	1	0	1	5.5	5.5	16.7	5.6	0	5.6
North Castle (T)	1	1	0	0	0	0	8.1	8	0	0	0	0
North Salem (T)	0	0	0	0	0	1	0	0	0	0	0	19.4
Pound Ridge (T)	1	0	0	0	0	1	19.1	0	0	0	0	19.4
Somers (T)	1	0	2	3	0	0	4.7	0	9.5	14.2	0	0
Yorktown (T)	5	4	2	3	5	2	13.6	10.8	5.4	8.2	13.7	5.5
West Central	26	52	37	21	24	18	15.5	30.9	22.2	12.6	14.5	11.0
Ardsey (V)	0	0	1	0	2	0	0	0	21.9	0	44.3	0
Dobbs Ferry (V)	2	0	2	1	1	1	18.0	0	18.1	9.0	9.1	9.1
Elmsford (V)	2	2	2	2	1	2	40.5	40.5	41.5	42.0	21.2	42.5
Greenburgh (TOV)	2	9	4	5	3	4	4.4	20.0	8.9	11.2	6.8	9.2
Hastings-on-Hudson (V)	1	1	2	0	0	0	12.5	12.5	25.1	0	0	0
Irvington (V)	0	1	0	0	0	0	0	15.2	0	0	0	0
Scarsdale (T/V)	0	2	1	0	0	0	0	11	5.7	0	0	0
Tarrytown (V)	3	6	2	3	0	0	26.0	52.0	17.5	26.2	0	0
White Plains (C)	16	31	23	10	17	11	27.4	53.1	39.7	17.3	29.6	19.2
East Central	13	15	24	21	21	14	10.7	12.4	19.9	17.5	17.6	11.8
Harrison (T/V)	2	1	2	2	3	2	7.1	3.5	7.1	7.1	10.8	7.2
Larchmont (V)	0	0	2	0	0	0	0	0	33.2	0	0	0
Mamaroneck (TOV)	0	0	0	2	0	0	0	0	0	16.4	0	0
Mamaroneck (V)	1	6	4	5	3	3	5.2	31.0	20.8	26.0	15.7	15.8
Port Chester (V)	7	7	16	11	14	8	23.6	23.6	54.4	37.4	47.8	27.5
Rye (C)	3	1	0	0	1	1	18.7	6.2	0	0	6.3	6.3
Rye Brook (V)	0	0	0	1	0	0	0	0	0	10.5	0	0
Southwest	77	98	72	71	56	66	38.3	48.8	36.0	35.6	28.2	33.4
Yonkers (C)	77	98	72	71	56	66	38.3	48.8	36.0	35.6	28.2	33.4
Southeast	71	63	58	58	35	42	36.5	32.4	30.1	30.1	18.3	22.1
Bronxville (V)	0	1	1	0	0	0	0	15.6	15.6	0	0	0
Eastchester (TOV)	1	1	1	2	0	0	5.0	5.0	5.0	10.1	0	0
Mount Vernon (C)	45	36	34	36	20	24	65.5	52.4	49.8	52.8	29.4	35.5
New Rochelle (C)	24	21	19	14	12	17	30.0	26.3	24.0	17.7	15.3	21.8
Pelham (V)	0	2	0	4	2	0	0	28.5	0	57.2	28.6	0
Pelham Manor (V)	1	0	0	0	0	1	17.7	0	0	0	0	18.1
Tuckahoe (V)	0	2	3	2	1	0	0	30.0	45.5	30.4	15.2	0
Westchester County Correctional Facilities	6	1	3	2	1	2	--	--	--	--	--	--
Unknown Address	2	1	2	0	0	0	--	--	--	--	--	--

Source: Westchester County Department of Health. Data as at February 2019.

Table 6. Reported Cases and Rates,¹ of Chlamydia by Age, Sex and Race and Ethnicity, Westchester County, 2017 and 2018.

Sex & Race & Ethnicity	Total (2017)		Total (2018)		Age (2018)													
					Under 15		15-19		20-24		25-29		30-34		35-44		45+	
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
Total	3,809	390.5	3,927	402.6	40	22.2	917	1,370.6	1,412	2,347.9	743	1,362.6	328	574.1	319	253.1	168	39.0
White	286	44.8	202	31.7	1	0.9	27	65.0	70	198.4	51	170.7	25	77.8	15	20.2	13	4.1
Black	439	307.7	329	230.6	9	35.5	87	813.5	95	858.6	57	551.5	36	384.1	32	171.6	13	22.7
Other	466	239.2	274	140.6	2	4.3	56	381.2	98	711.0	43	300.4	18	115.3	34	102.2	21	37.3
Unknown	2,618	--	3,122	--	28	--	747	--	1,149	--	592	--	249	--	238	--	121	--
Hispanic ²	365	155.9	155	66.2	1	1.8	26	145.0	43	238.1	34	189.0	13	67.6	24	63.2	14	21.3
Non-Hispanic	630	85.0	257	34.7	7	5.7	54	110.3	87	206.8	47	128.7	28	73.9	22	25.0	12	3.3
Males	1,279	271.0	1,476	312.8	7	7.5	242	708.6	468	1,547.5	344	1,248.8	164	575.4	169	274.7	81	41.1
White	96	31.0	102	32.9	0	0	5	23.7	31	171.7	28	188.3	20	123.1	9	24.6	9	6.1
Black	160	246.0	175	269.1	3	23.8	36	674.9	45	830.6	41	804.7	21	483.4	21	254.5	8	33.4
Other	127	130.9	95	97.9	1	4.1	11	143.2	33	487.5	16	211.1	5	63.1	15	90.2	12	46.2
Unknown	896	--	1,104	--	3	--	190	--	359	--	259	--	118	--	124	--	52	--
Hispanic ²	94	135.4	73	105.2	1	3.4	9	96.8	16	169.9	18	187.1	7	69.0	14	72.1	8	25.9
Non-Hispanic	172	48.6	133	37.6	3	4.7	20	80.5	32	153.7	34	189.7	20	109.0	15	35.6	9	5.4
Females	2,530	502.5	2,451	486.8	33	37.7	675	2,060.8	944	3,157.6	399	1,478.8	164	572.9	150	232.5	87	37.3
White	190	57.9	100	30.5	1	1.9	22	107.9	39	226.3	23	153.3	5	31.4	6	16.0	4	2.4
Black	279	359.3	154	198.3	6	47.0	51	951.5	50	885.6	16	305.3	15	298.3	11	105.8	5	15.1
Other	339	346.5	179	183.0	1	4.5	45	642.0	65	926.6	27	401.0	13	169.1	19	114.1	9	29.6
Unknown	1,722	--	2,018	--	25	--	557	--	790	--	333	--	131	--	114	--	69	--
Hispanic ²	271	379.7	82	114.9	0	0	17	196.9	27	312.4	16	191.1	6	66.0	10	53.9	6	17.2
Non-Hispanic	458	118.2	124	32.0	4	6.7	34	141.0	55	258.8	13	69.9	8	41.0	7	15.2	3	1.5

¹Rates are per 100,000 persons and were calculated using the ACS 5-Year Estimates.

²Hispanic is an ethnic group and may be of any race. Therefore Hispanics are also reported in the race categories.

Source: Westchester County Department of Health. Data as at February 2019.

Table 7. Reported Cases and Rates,¹ of Gonorrhea by Age, Sex and Race and Ethnicity, Westchester County, 2017 and 2018.

Sex, Race & Ethnicity	Total (2017)		Total (2018)		Age (2018)													
					Under 15		15-19		20-24		25-29		30-34		35-44		45+	
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
Total	671	68.8	765	78.4	12	6.7	104	155.4	198	329.2	194	355.8	96	168.0	93	73.8	68	15.8
White	63	9.9	87	13.6	0	0	13	31.3	19	53.8	23	77.0	9	28.0	13	17.5	10	3.2
Black	159	111.4	196	137.4	3	11.8	33	308.6	49	442.9	53	512.8	26	277.4	18	96.5	14	24.5
Other	57	29.3	77	39.5	2	4.3	7	47.7	18	130.6	20	139.7	7	44.9	11	33.1	10	17.7
Unknown	392	--	405	--	7	--	51	--	112	--	98	--	54	--	51	--	34	--
Hispanic ²	55	23.5	94	40.2	1	1.8	9	50.2	19	105.2	25	138.9	14	72.7	18	47.4	7	10.6
Non-Hispanic	165	22.3	208	28.1	2	1.63	37	75.5	48	114.1	59	161.5	21	55.4	23	26.1	17	4.7
Males	452	95.8	490	103.8	3	3.2	41	120.1	107	353.8	142	515.5	69	242.1	74	120.3	54	27.4
White	47	15.2	63	20.3	0	0	6	28.4	14	77.5	18	121.0	6	36.9	11	30.0	8	5.4
Black	105	161.5	122	187.6	1	7.9	12	225.0	25	461.4	40	785.1	18	414.4	13	157.6	13	54.2
Other	38	39.2	50	51.5	1	4.1	4	52.1	10	147.7	13	171.5	5	63.1	9	54.1	8	30.8
Unknown	262	--	255	--	1	--	19	--	58	--	71	--	40	--	41	--	25	--
Hispanic ²	36	51.9	68	98.0	1	3.4	5	53.8	14	148.6	16	166.3	11	108.4	16	82.4	5	16.2
Non-Hispanic	105	29.7	129	36.5	0	0	15	60.3	24	96.6	44	245.5	14	76.3	17	40.4	15	9.0
Females	219	43.5	275	54.6	9	10.3	63	192.3	91	304.4	52	192.7	27	94.3	19	29.5	14	6.0
White	16	4.9	24	7.3	0	0	7	34.3	5	29.0	5	33.3	3	18.9	2	5.3	2	1.2
Black	54	69.5	75	96.6	2	15.7	21	391.8	24	425.1	13	248.1	8	159.1	5	48.1	1	3.0
Other	19	19.4	25	25.6	1	4.5	3	42.8	8	114.0	7	104.0	2	26.0	2	12.0	2	6.6
Unknown	130	--	151	--	6	--	32	--	54	--	27	--	14	--	10	--	9	--
Hispanic ²	19	26.6	26	36.4	0	0	4	46.3	6	69.4	9	107.5	3	33.0	2	10.8	2	5.7
Non-Hispanic	60	15.5	79	20.4	3	5.0	22	91.2	24	112.9	15	80.6	7	35.8	6	13.1	2	1.0

¹Rates are per 100,000 persons and were calculated using the ACS 5-Year Estimates.

²Hispanic is an ethnic group and may be of any race. Therefore Hispanics are also reported in the race categories.

Source: Westchester County Department of Health. Data as at February 2019.

Table 8. Reported Cases and Rates¹ of Syphilis (All Stages) by Age, Sex and Race and Ethnicity, Westchester County, 2017 and 2018.

Sex & Race & Ethnicity	Total (2017)		Total (2018)		Age (2018)													
					Under 15		15-19		20-24		25-29		30-34		35-44		45+	
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
Total	278	28.5	242	24.8	0	0	6	9.0	27	44.9	42	77.0	39	68.3	42	33.3	86	27.1
White	56	8.8	61	9.6	0	0	1	4.7	7	19.8	7	23.4	8	24.9	13	17.5	25	7.9
Black	42	29.4	47	32.9	0	0	3	28.1	6	54.2	10	96.8	7	74.7	10	53.6	11	19.2
Other	45	23.1	47	24.1	0	0	1	6.8	3	21.8	13	90.8	10	64.1	7	21.0	13	23.1
Unknown	135	--	87	--	0	--	1	--	11	--	12	--	14	--	12	--	37	--
Hispanic	52	22.2	57	24.4	0	0	0	0	6	33.2	9	50.0	12	62.4	12	31.6	18	27.4
Non-Hispanic	66	8.9	89	12.0	0	0	4	8.2	10	23.8	17	46.5	12	31.7	15	17.0	31	8.5
Males	205	43.4	197	41.7	0	0	5	14.6	22	72.7	35	127.1	35	122.8	28	45.5	72	36.5
White	48	15.5	51	16.5	0	0	1	4.7	6	33.2	5	33.6	8	49.3	9	24.6	22	14.9
Black	27	41.5	37	56.9	0	0	3	56.2	6	110.7	9	176.6	7	161.1	5	60.6	7	29.2
Other	31	32.0	40	20.5	0	0	1	13.0	3	44.3	11	145.1	10	126.3	5	30.1	10	38.5
Unknown	99	--	69	--	0	--	0	--	7	--	10	--	10	--	9	--	33	--
Hispanic	37	53.3	47	67.7	0	0	0	0	6	63.7	8	83.1	12	118.2	8	41.2	13	42.1
Non-Hispanic	51	14.4	72	20.3	0	0	4	16.6	8	38.4	13	72.5	12	65.4	9	21.4	26	15.6
Females	73	14.5	45	8.9	0	0	1	3.1	5	16.7	7	25.9	4	14.0	14	21.7	14	6.0
White	8	2.4	10	3.0	0	0	0	0	1	5.8	2	13.3	0	0	4	10.7	3	1.8
Black	15	19.3	10	12.9	0	0	0	0	0	0	1	19.1	0	0	5	48.1	4	12.0
Other	14	14.3	7	7.2	0	0	0	0	0	0	2	29.7	0	0	2	12.0	3	9.9
Unknown	36	--	18	--	0	--	1	--	4	--	2	--	4	--	3	--	4	--
Hispanic	15	21.0	10	4.3	0	0	0	0	0	0	1	11.9	0	0	4	21.5	5	14.3
Non-Hispanic	15	3.9	17	4.4	0	0	0	0	2	9.4	4	21.5	0	0	6	13.1	5	2.5

¹Rates are per 100,000 persons and were calculated using the ACS 5-Year Estimates.

²Hispanic is an ethnic group and may be of any race. Therefore Hispanics are also reported in the race categories.

Source: Westchester County Department of Health. Data as at February 2019.

Table 9. Newly Diagnosed HIV and AIDS Cases by Year of Diagnosis, and Deaths among People Living with AIDS by Year of Death, Westchester County

Year of Diagnosis	HIV*	AIDS**	Deaths among People Living with AIDS
Prior to 1986		163	97
1986		125	93
1987		191	120
1988		215	140
1989		252	166
1990		267	203
1991		320	202
1992		438	245
1993		391	247
1994		377	281
1995		375	280
1996		316	185
1997		241	104
1998		233	122
1999		180	94
2000	173	196	124
2001	94	190	82
2002	95	181	90
2003	90	183	111
2004	92	149	90
2005	107	149	99
2006	143	127	78
2007	134	132	83
2008	130	111	98
2009	121	88	79
2010	128	86	76
2011	107	64	64
2012	103	73	72
2013	103	57	47
2014	126	62	56
2015	91	41	53
2016	97	54	62
2017	117	55	48
Total	2,051	6,082	3,991

Data as of June 2018.

* HIV reporting started in June 2000. No earlier data are available.

** Persons diagnosed with HIV may also be diagnosed with AIDS in the same year or a later year and their AIDS diagnosis will be counted in the AIDS diagnoses tables. HIV and AIDS diagnoses cannot be added together in a meaningful way.

Table 10. Newly Diagnosed HIV Cases by Sex, Age, Race/Ethnicity, Risk, and Year of Diagnosis, Westchester County, 2012-2017.

	2012	2013	2014	2015	2016	2017
Total	103	103	126	91	97	117
Sex at Birth						
Male	79	77	97	57	82	85
Female	24	26	29	34	15	32
Age at Diagnosis						
<20 yrs	21	20	21	3	4	3
20-24 yrs				13	11	26
25-29 yrs	11	17	20	16	14	18
30-39	23	20	33	18	28	29
40-49	21	20	25	15	14	16
50-59	19	19	19	16	16	19
60+	8	7	8	10	10	6
Race/Ethnicity						
White, non-Hispanic	11	16	21	15	17	7
Black, non-Hispanic	38	36	52	38	29	50
Hispanic	34	35	42	33	46	52
Asian/Pacific Islander/ Multi-Race	20	16	11	5	5	8
Risk						
MSM ¹	58	55	66	42	50	62
IDU ²	9	3	8	3	6	7
Heterosexual	26	39	33	5	9	15
FPHC ³				30	11	19
Unknown/Blood Products/ Pediatrics	10	6	19	11	21	14

Data as of June 2018.

¹ History of Male to Male Sexual Contact.

² History of Injection Drug Use. Includes IDU and MSM/IDU.

³ FPHC: Female Presumably Heterosexual Contact.

Table 11. Newly Diagnosed HIV Cases by Age, Race/Ethnicity, Risk, and Sex, Westchester County, 2012-14 and 2015-2017.

	Total				Male				Female			
	Total	White, Non-Hispanic	Black, Non-Hispanic	Hispanic	Total	White, Non-Hispanic	Black, Non-Hispanic	Hispanic	Total	White, Non-Hispanic	Black, Non-Hispanic	Hispanic
2012-2014												
Total	332	48	126	111	253	40	81	94	79	8	45	17
Age at Diagnosis												
<20	15	1	5	6	10	0	2	6	5	1	3	0
20-24	47	4	17	20	39	4	13	16	8	0	4	4
25-29	48	1	19	20	38	1	11	18	10	0	8	2
30-39	76	9	25	26	59	8	15	22	17	1	10	4
40-49	66	13	26	22	51	11	17	19	15	2	9	3
50-59	57	13	24	15	40	11	14	12	17	2	10	3
60+	23	7	10	2	16	5	9	1	7	2	1	1
Race/Ethnicity												
White, non-Hispanic	48	48			40	40			8	8		
Black, non-Hispanic	126		126		81		81		45		45	
Hispanic	111			111	94			94	17			17
Asian/Pacific Islander/Multi-Race	47				38				9			
Risk												
MSM ¹	179	30	38	78	179	30	38	78	0	0	0	0
IDU ²	20	2	11	4	15	2	9	3	5	0	2	1
Heterosexual/FPHC ³	98	10	58	22	24	2	15	6	74	8	43	16
Unknown/Blood Products/Pediatrics	35	6	19	7	35	6	19	7	0	0	0	0
2015-2017												
Total	305	39	117	131	224	31	69	110	81	8	48	21
Age at Diagnosis												
<20	10	1	5	4	9	1	5	3	1	0	0	1
20-24	50	2	15	31	43	1	11	29	7	1	4	2
25-29	48	4	21	22	37	3	16	17	11	1	5	5
30-39	75	11	18	40	60	11	10	35	15	0	8	5
40-49	45	8	14	17	30	7	6	13	15	1	8	4
50-59	51	5	32	12	30	5	14	9	21	0	18	3
60+	26	8	12	5	15	3	7	4	11	5	5	1
Race/Ethnicity												
White, non-Hispanic	39	39			31	31			8	8		
Black, non-Hispanic	117		117		69		69		48		48	
Hispanic	131			131	110			110	21			21
Asian/Pacific Islander/Multi-Race	18				14				4			
Risk												
MSM ¹	154	22	41	81	154	22	41	81	0	0	0	0
IDU ²	16	1	5	8	11	1	2	7	5	0	3	1
Heterosexual/FPHC ³	89	10	50	26	13	2	5	6	76	8	45	20
Unknown/Blood Products/Pediatrics	46	6	21	16	46	6	21	16	0	0	0	0

Data as of June 2018

¹ History of Male to Male Sexual Contact.

² History of Injection Drug Use. Includes IDU and MSM/IDU.

³ FPHC: Female Presumably Heterosexual Contact.

Table 12. Newly Diagnosed AIDS and Cumulative AIDS Cases by Sex, Age, Race/Ethnicity, Risk, and Year of Diagnosis, Westchester County, 2012-2017.

	2012	2013	2014	2015	2016	2017	Cumulative through 2017
Total	73	57	62	41	54	55	6,082
Sex at Birth							
Male		125		25	37	35	4,239
Female		67		16	17	20	1,843
Age at Diagnosis							
<20 yrs		5		0	1	0	117
20-24 yrs		11		2	3	1	170
25-29 yrs		17		5	9	6	538
30-39 yrs		41		6	10	15	2,287
40-49 yrs		49		11	12	10	1,945
50-59 yrs		46		13	12	17	746
60+ yrs		23		4	7	6	278
Race/Ethnicity							
White, non-Hispanic		26		4	10	6	1,464
Black, non-Hispanic		71		17	19	28	2,578
Hispanic		55		15	19	18	1,539
Asian/Pacific Islander/ Multi-Race		40		5	6	3	501
Risk							
MSM ¹		71		16	25	18	1,462
IDU ²		27		4	6	5	2,909
Heterosexual		19		9	7	9	1,312
FPHC ³		55		8	7	12	
Unknown/Blood Products/ Pediatrics		20		4	9	11	399
Risk - Males							
MSM ¹		71		..	..	..	1,462
IDU ²		16		..	..	..	2,107
Heterosexual		19		..	..	..	332
Unknown/Blood Products/ Pediatrics		19		..	..	..	338
Risk - Females							
IDU ²		11		..	..	..	802
FPHC ³		55		..	..	..	980
Unknown/Blood Products/ Pediatrics		1		..	..	..	61

Data as of June 2018.

¹ History of Male to Male Sexual Contact.

² History of Injection Drug Use. Includes IDU and MSM/IDU.

³ FPHC: Female Presumably Heterosexual Contact.

Table 13. Living HIV & AIDS Cases by Sex, Age, Race/Ethnicity, and Risk, Westchester County, 2012-2017.

	2012	2013	2014	2015	2016	2017		
	Living HIV & AIDS					Living HIV	Living AIDS	Living HIV & AIDS
Total	2,840	2,930	3,081	3,147	3,225	1,301	1,801	3,102
Sex at Birth								
Male	1,751	1,803	1,919	1,955	2,036	855	1,106	1,961
Female	1,089	1,127	1,162	1,192	1,189	446	695	1,141
Age at Diagnosis								
<20	28	26	18	19	18	15	2	17
20-24	219	222	233	234	242	55	14	69
25-29						113	39	152
30-39	369	381	402	406	432	249	174	423
40-49	839	791	791	740	699	283	362	645
50-59	939	992	1,051	1,075	1,081	356	665	1,021
60+	446	518	586	673	753	230	545	775
Race/Ethnicity								
White, non-Hispanic	484	506	553	556	582	282	283	565
Black, non-Hispanic	982	1,013	1,080	1,104	1,110	446	629	1,075
Hispanic	958	981	1,023	1,058	1,123	461	623	1,084
Asian/Pacific Islander/ Multi-Race	416	430	425	429	410	112	266	378
Risk								
MSM ¹	852	898	999	1,038	1,088	543	516	1,059
IDU ²	672	675	635	640	636	140	432	572
Heterosexual	261	268	272	264	274	88	175	263
FPHC ³	798	824	876	900	905	380	507	887
Unknown/Blood Products/ Pediatrics	257	265	299	305	322	150	171	321
Risk - Males								
MSM ¹	852	898	999	1,038	1,088	543	516	1,059
IDU ²	413	405	385	388	394	90	264	354
Heterosexual	261	268	272	264	274	88	175	263
Unknown/Blood Products/ Pediatrics	225	232	263	265	280	134	151	285
Risk - Females								
IDU ²	259	270	250	252	242	50	168	218
FPHC ³	798	824	876	900	905	380	507	887
Unknown/Blood Products/ Pediatrics	32	33	36	40	42	16	20	36

Data as of June 2018.

¹ History of Male to Male Sexual Contact.

² History of Injection Drug Use. Includes IDU and MSM/IDU.

³ FPHC: Female Presumably Heterosexual Contact.

Table 14. Reported Cases and Rates of Major Central Nervous System Diseases and Bacteremias by Municipality, Westchester County 2017-2018.

Health Planning Region & Municipality	2017				2018			
	Meningitis ¹		Invasive Strep		Meningitis ¹		Invasive Strep	
	Case	Rate ²	Case	Rate ²	Case	Rate ²	Case	Rate ²
Westchester County	47	4.8	59	6.0	35	3.6	64	6.6
Northwest	6	4.0	5	3.3	5	3.3	5	3.3
Briarcliff Manor (V)	1	12.7	0	0	1	12.7	0	0
Buchanan (V)	0	0	0	0	0	0	0	0
Cortlandt (TOV)	1	3.1	1	3.1	1	3.1	2	6.2
Croton-on-Hudson (V)	1	12.1	0	0	0	0	1	12
Mount Pleasant (TOV)	1	3.8	1	3.8	0	0	0	0
Ossining (TOV)	0	0	0	0	0	0	0	0
Ossining (V)	1	4	1	3.9	1	3.9	0	0
Peekskill (C)	0	0	2	8.3	0	0	1	4.1
Pleasantville (V)	1	13.7	0	0	0	0	0	0
Sleepy Hollow (V)	0	0	0	0	2	19.6	1	9.8
Northeast	4	2.8	9	6.4	4	2.8	10	7.1
Bedford (T)	1	5.6	1	5.6	1	5.6	1	5.6
Lewisboro (T)	0	0	0	0	1	7.8	0	0
Mount Kisco (T/V)	0	0	0	0	0	0	0	0
New Castle (T)	1	5.5	1	5.5	0	0	0	0
North Castle (T)	1	8.1	1	8.1	1	8.1	0	0
North Salem (T)	0	0	0	0	0	0	0	0
Pound Ridge (T)	0	0	2	38.2	0	0	0	0
Somers (T)	1	4.7	1	4.7	0	0	2	9.3
Yorktown (T)	0	0.0	3	8.1	1	2.7	7	19.0
West Central	13	7.7	11	6.5	10	6.0	4	2.4
Ardsley (V)	1	21.9	0	0	0	0	0	0
Dobbs Ferry (V)	0	0	1	9.0	0	0	0	0
Elmsford (V)	1	20.2	0	0	2	40.5	0	0
Greenburgh (TOV)	2	4.4	3	6.7	4	8.9	1	2.2
Hastings-on-Hudson (V)	1	12.5	1	12.5	0	0	0	0
Irvington (V)	0	0	0	0	0	0	0	0
Scarsdale (T/V)	0	0	1	5.6	1	5.6	1	5.6
Tarrytown (V)	1	8.7	0	0	0	0	0	0
White Plains (C)	7	12.0	5	8.6	3	5.1	2	3.4
East Central	5	4.1	5	4.1	8	6.6	6	4.9
Harrison (T/V)	3	10.6	2	7.1	3	10.6	2	7.1
Larchmont (V)	0	0	1	16	0	0	1	16.4
Mamaroneck (TOV)	2	16.2	0	0	1	8.1	0	0
Mamaroneck (V)	0	0	0	0	2	10.3	1	5.2
Port Chester (V)	0	0	0	0	1	3.4	2	6.8
Rye (C)	0	0	2	12.5	1	6.2	0	0
Rye Brook (V)	0	0	0	0	0	0	0	0
Southwest	8	4.0	14	7.0	4	2.0	19	9.5
Yonkers (C)	8	4.0	14	7.0	4	2.0	19	9.5
Southeast	11	5.7	15	7.7	4	2.1	20	10.3
Bronxville (V)	0	0	0	0	0	0	1	15.6
Eastchester (TOV)	2	10.0	2	10.0	1	5.0	3	14.9
Mount Vernon (C)	5	7.3	6	8.7	2	2.9	6	8.7
New Rochelle (C)	4	5.0	7	8.8	1	1.3	9	11.3
Pelham (V)	0	0	0	0	0	0	1	14.3
Pelham Manor (V)	0	0	0	0	0	0	0	0
Tuckahoe (V)	0	0	0	0	0	0	0	0
Unknown	0	--	0	--	0	--	0	--

¹Meningitis disease category includes aseptic meningitis, meningococcal diseases and other meningitis/bacteremias.

²Rates are per 100,000 persons and were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 15. Reported Cases and Rates of Meningitis by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	47	4.8	100.0	21	4.5	100.0	25	5.0	100.0
0-9	11	9.5	23.4	4	6.7	19.0	7	12.6	28.0
10-19	4	3.0	8.5	2	3.0	9.5	2	3.1	8.0
20-29	5	4.4	10.6	4	6.9	19.0	1	1.8	4.0
30-39	8	6.8	17.0	4	6.8	19.0	4	6.7	16.0
40-49	4	2.9	8.5	1	1.5	4.8	3	4.3	12.0
50-59	4	2.8	8.5	2	2.9	9.5	2	2.6	8.0
60-69	4	3.8	8.5	2	4.0	9.5	2	3.6	8.0
70+	6	5.5	12.8	2	4.6	9.5	4	6.2	16.0
Unknown	1	--	2.1	0	--	0	0	--	0

Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	35	3.6	100.0	15	3.2	100.0	20	4.0	100.0
0-9	13	11.3	37.1	8	13.3	53.3	5	9.0	25.0
10-19	6	4.6	17.1	1	1.5	6.7	5	7.7	25.0
20-29	4	3.5	11.4	0	0	0	4	7.0	20.0
30-39	5	4.2	14.3	2	3.4	13.3	3	5.0	15.0
40-49	2	1.5	5.7	2	3.0	13.3	0	0	0
50-59	3	2.1	8.6	2	2.9	13.3	1	1.3	5.0
60-69	1	0.9	2.9	0	0	0	1	1.8	5.0
70+	1	0.9	2.9	0	0	0	1	1.5	5.0
Unknown	0	--	0	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 16. Reported Cases and Rates of Invasive Strep Pneumoniae by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	59	6.0	100.0	33	7.0	100.0	25	5.0	100.0
0-9	3	2.6	5.1	2	3.3	6.1	1	1.8	4.0
10-19	0	0	0	0	0	0	0	0	0
20-29	3	2.6	5.1	3	5.2	9.1	0	0	0
30-39	0	0	0	0	0	0	0	0	0
40-49	1	0.7	1.7	1	1.5	3.0	0	0	0
50-59	11	7.6	18.6	8	11.7	24.2	3	4.0	12.0
60-69	12	11.3	20.3	8	15.9	24.2	4	7.2	16.0
70+	28	25.8	47.5	11	25.3	33.3	17	26.2	68.0
Unknown	1	--	1.7	0	--	0	0	--	0

Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	64	6.6	100.0	30	6.4	100.0	34	6.8	100.0
0-9	0	0	0	0	0	0	0	0	0
10-19	0	0	0	0	0	0	0	0	0
20-29	0	0	0	0	0	0	0	0	0
30-39	5	4.2	7.8	1	1.7	3.3	4	6.7	11.8
40-49	5	3.7	7.8	2	3.0	6.7	3	4.3	8.8
50-59	8	5.6	12.5	3	4.4	10.0	5	6.6	14.7
60-69	15	14.2	23.4	9	17.8	30.0	6	10.8	17.6
70+	31	28.6	48.4	15	34.5	50.0	16	24.6	47.1
Unknown	0	--	0	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 17. Reported Cases and Rates of Major Enteric Infections, Westchester County Residents, 2017-2018.

Health Planning Region & Municipality	2017						2018					
	Campylobacteriosis		Giardiasis		Salmonellosis		Campylobacteriosis		Giardiasis		Salmonellosis	
	Case	Rate ¹	Case	Rate ¹	Case	Rate ¹	Case	Rate ¹	Case	Rate ¹	Case	Rate ¹
Westchester County	217	22.2	84	8.6	122	12.5	246	25.2	76	7.8	119	12.2
Northwest	37	24.7	11	7.3	26	17.4	55	36.7	9	6.0	22	14.7
Briarcliff Manor (V)	1	12.7	1	12.7	0	0	3	38.1	3	38.1	0	0
Buchanan (V)	0	0	0	0	0	0	3	133.0	1	44.3	0	0
Cortlandt (TOV)	9	27.9	4	12.4	5	15.5	8	24.8	0	0	4	12.4
Croton-on-Hudson (V)	1	12.1	0	0	3	36.3	3	36.3	0	0	0	0
Mount Pleasant (TOV)	1	3.8	1	3.8	1	3.8	2	7.5	0	0	2	7.5
Ossining (TOV)	0	0	0	0	0	0	0	0	0	0	0	0
Ossining (V)	9	35.5	0	0	3	11.8	17	67.0	0	0	7	27.6
Peekskill (C)	11	45.6	3	12.4	9	37.3	9	37.3	2	8.3	5	20.7
Pleasantville (V)	3	41.2	0	0	1	13.7	3	41.2	3	41.2	4	55.0
Sleepy Hollow (V)	2	19.6	2	19.6	4	39.3	7	68.7	0	0	0	0
Northeast	30	21.3	22	15.6	17	12.1	47	33.4	11	7.8	13	9.2
Bedford (T)	7	39.0	5	27.8	4	22.3	6	33.4	2	11.1	1	5.6
Lewisboro (T)	2	15.7	0	0	3	23.5	4	31.4	1	7.8	0	0
Mount Kisco (T/V)	1	9.1	3	27.3	1	9.1	3	27.3	1	9.1	3	27.3
New Castle (T)	4	22.2	3	16.6	2	11.1	5	27.7	2	11.1	1	5.5
North Castle (T)	4	32.5	2	16.2	1	8.1	3	24.4	1	8.1	2	16.2
North Salem (T)	2	38.4	3	57.6	0	0	4	76.8	1	19.2	0	0
Pound Ridge (T)	3	57.4	1	19.1	2	38.2	3	57.4	0	0	0	0
Somers (T)	5	23.3	1	4.7	1	4.7	4	18.6	1	4.7	3	14.0
Yorktown (T)	2	5.4	4	10.8	3	8.1	15	40.7	2	5.4	3	8.1
West Central	46	27.4	21	12.5	27	16.1	44	26.2	9	5.4	16	9.5
Ardsey (V)	3	65.8	1	21.9	2	43.9	2	43.9	1	21.9	1	21.9
Dobbs Ferry (V)	2	18.0	0	0	3	26.9	5	44.9	0	0.0	2	18.0
Elmsford (V)	3	60.7	0	0	1	20.2	0	0	1	20.2	0	0
Greenburgh (TOV)	4	8.9	6	13.3	3	6.7	8	17.8	2	4.4	1	2.2
Hastings-on-Hudson (V)	1	12.5	1	12.5	1	12.5	2	25.0	1	12.5	0	0
Irvington (V)	2	30.4	0	0	2	30.4	2	30.4	0	0	0	0
Scarsdale (T/V)	11	61.6	6	33.6	4	22.4	7	39.2	0	0	3	16.8
Tarrytown (V)	5	43.4	0	0	1	8.7	4	34.7	0	0	1	8.7
White Plains (C)	15	25.7	7	12.0	10	17.1	14	24.0	4	6.8	8	13.7
East Central	33	27.2	11	9.1	14	11.5	35	28.9	14	11.5	18	14.8
Harrison (T/V)	6	21.2	4	14.1	2	7.1	8	28.2	3	10.6	6	21.2
Larchmont (V)	3	49.1	1	16	0	0	1	16.4	3	49.1	1	16
Mamaroneck (TOV)	1	8.1	1	8.1	3	24.4	0	0	3	24.4	0	0
Mamaroneck (V)	3	15.5	0	0	4	20.7	6	31.0	0	0	4	20.7
Port Chester (V)	10	33.8	2	6.8	1	3.4	8	27.0	1	3.4	4	13.5
Rye (C)	7	43.7	2	12.5	1	6.2	4	25.0	1	6.2	1	6.2
Rye Brook (V)	3	31.4	1	10.5	3	31.4	8	83.8	3	31.4	2	21.0
Southwest	30	14.9	8	4.0	17	8.5	36	17.9	10	5.0	26	12.9
Yonkers (C)	30	14.9	8	4.0	17	8.5	36	17.9	10	5.0	26	12.9
Southeast	41	21.1	11	5.7	20	10.3	29	14.9	22	11.3	24	12.3
Bronxville (V)	3	46.7	1	15.6	2	31.1	3	46.7	3	46.7	2	31.1
Eastchester (TOV)	4	19.9	1	5.0	1	5.0	4	19.9	3	14.9	3	14.9
Mount Vernon (C)	8	11.6	2	2.9	9	13.1	8	11.6	6	8.7	6	8.7
New Rochelle (C)	21	26.3	6	7.5	7	8.8	10	12.5	5	6.3	10	12.5
Pelham (V)	3	42.8	1	14.3	1	14.3	0	0	2	28.5	0	0
Pelham Manor (V)	1	17.7	0	0	0	0	3	53.2	2	35.5	1	18
Tuckahoe (V)	1	15.0	0	0	0	0	1	15.0	1	15.0	2	30.0
Unknown	0	--	0	--	1	--	0	--	1	--	0	--

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 18. Reported Cases and Rates of Campylobacteriosis by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	217	22.2	100.0	113	23.9	100.0	99	19.7	100.0
0-9	34	29.4	15.7	19	31.7	16.8	15	27.0	15.2
10-19	31	23.6	14.3	19	28.4	16.8	12	18.6	12.1
20-29	33	28.8	15.2	18	31.1	15.9	15	26.4	15.2
30-39	20	16.9	9.2	9	15.4	8.0	11	18.4	11.1
40-49	19	13.9	8.8	13	19.6	11.5	6	8.5	6.1
50-59	30	20.8	13.8	17	24.8	15.0	13	17.2	13.1
60-69	23	21.7	10.6	7	13.9	6.2	16	28.8	16.2
70+	22	20.3	10.1	11	25.3	9.7	11	16.9	11.1
Unknown	5	--	2.3	0	--	0	0	--	0

Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	246	25.2	100.0	123	26.1	100.0	116	23.0	100.0
0-9	32	27.7	13.0	22	36.7	17.9	10	18.0	8.6
10-19	31	23.6	12.6	17	25.4	13.8	14	21.7	12.1
20-29	41	35.8	16.7	21	36.3	17.1	20	35.2	17.2
30-39	26	22.0	10.6	12	20.5	9.8	14	23.4	12.1
40-49	38	27.8	15.4	18	27.1	14.6	20	28.4	17.2
50-59	30	20.8	12.2	15	21.9	12.2	15	19.9	12.9
60-69	27	25.5	11.0	12	23.8	9.8	15	27.0	12.9
70+	14	12.9	5.7	6	13.8	4.9	8	12.3	6.9
Unknown	7	--	2.8	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 19. Reported Cases and Rates of Giardiasis by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	84	8.6	100.0	46	9.7	100.0	38	7.5	100.0
0-9	4	3.5	4.8	3	5.0	6.5	1	1.8	2.6
10-19	11	8.4	13.1	6	9.0	13.0	5	7.7	13.2
20-29	16	14.0	19.0	14	24.2	30.4	2	3.5	5.3
30-39	13	11.0	15.5	8	13.7	17.4	5	8.4	13.2
40-49	12	8.8	14.3	4	6.0	8.7	8	11.3	21.1
50-59	16	11.1	19.0	5	7.3	10.9	11	14.6	28.9
60-69	9	8.5	10.7	4	7.9	8.7	5	9.0	13.2
70+	3	2.8	3.6	2	4.6	4.3	1	1.5	2.6
Unknown	0	--	0	0	--	0	0	--	0

Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	76	7.8	100.0	49	10.4	100.0	27	5.4	100.0
0-9	11	9.5	14.5	6	10.0	12.2	5	9.0	18.5
10-19	3	2.3	3.9	2	3.0	4.1	1	1.5	3.7
20-29	14	12.2	18.4	10	17.3	20.4	4	7.0	14.8
30-39	7	5.9	9.2	3	5.1	6.1	4	6.7	14.8
40-49	13	9.5	17.1	7	10.6	14.3	6	8.5	22.2
50-59	17	11.8	22.4	14	20.4	28.6	3	4.0	11.1
60-69	8	7.6	10.5	6	11.9	12.2	2	3.6	7.4
70+	3	2.8	3.9	1	2.3	2.0	2	3.1	7.4
Unknown	0	--	0	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 20. Reported Cases and Rates of Salmonellosis by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	122	12.5	100.0	52	11.0	100.0	68	13.5	100.0
0-9	15	13.0	12.3	8	13.3	15.4	7	12.6	10.3
10-19	20	15.2	16.4	9	13.4	17.3	11	17.0	16.2
20-29	20	17.4	16.4	5	8.7	9.6	15	26.4	22.1
30-39	9	7.6	7.4	3	5.1	5.8	6	10.0	8.8
40-49	11	8.0	9.0	6	9.0	11.5	5	7.1	7.4
50-59	19	13.2	15.6	9	13.1	17.3	10	13.2	14.7
60-69	13	12.3	10.7	8	15.9	15.4	5	9.0	7.4
70+	13	12.0	10.7	4	9.2	7.7	9	13.8	13.2
Unknown	2	--	1.6	0	--	0	0	--	0

Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	119	12.2	100	59	12.5	100	57	11.3	100
0-9	20	17.3	16.8	14	23.4	23.7	6	10.8	10.5
10-19	17	12.9	14.3	6	9.0	10.2	11	17.0	19.3
20-29	14	12.2	11.8	9	15.6	15.3	5	8.8	8.8
30-39	15	12.7	12.6	10	17.1	16.9	5	8.4	8.8
40-49	18	13.2	15.1	8	12.1	13.6	10	14.2	17.5
50-59	12	8.3	10.1	6	8.8	10.2	6	7.9	10.5
60-69	7	6.6	5.9	2	4.0	3.4	5	9.0	8.8
70+	13	12.0	10.9	4	9.2	6.8	9	13.8	15.8
Unknown	3	--	2.5	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 21. Reported Average Number of Cases of Major Enteric Infections by Month, Westchester County, 2013-2018.

Month	Campylobacteriosis		Giardiasis		Salmonellosis	
	Average Number	%	Average Number	%	Average Number	%
Total	248	100.0	76	100.0	121	100.0
January	18	7.3	8	10.9	8	6.5
February	10	3.8	5	7.0	5	4.0
March	15	5.9	8	10.3	7	6.1
April	17	7.0	4	4.8	9	7.3
May	22	8.8	4	4.8	9	7.6
June	37	15.1	6	8.1	15	12.6
July	29	11.6	9	11.4	13	10.6
August	26	10.4	9	11.4	18	14.8
September	25	9.9	8	10.3	13	11.0
October	19	7.8	6	7.2	9	7.3
November	17	6.8	5	7.0	8	6.2
December	14	5.8	5	6.8	7	6.1

Source: Westchester County Department of Health. Data as at February 2019.

Table 22. Reported Cases and Rates of Lyme Disease by Municipality, Westchester County, 2013-2018.

Health Planning Region & Municipality	Total Annual Cases						Rate (per 100,000 persons) ¹					
	2018	2017	2016	2015	2014	2013	2018	2017	2016	2015	2014	2013
Westchester County	119	108	97	153	88	83	12.2	11.1	10.0	15.8	9.1	8.7
Northwest	32	28	16	35	22	20	21.4	18.7	10.7	23.5	14.8	13.5
Briarcliff Manor (V)	3	2	0	1	2	0	38.1	25.4	0	12.9	25.7	0
Buchanan (V)	0	0	1	1	3	1	0	0	44.5	45.1	128.8	44.5
Cortlandt (TOV)	7	9	8	10	7	7	21.7	27.9	24.9	31.2	22.0	22.2
Croton-on-Hudson (V)	3	2	2	2	3	2	36.3	24.2	24.4	24.4	36.7	24.7
Mount Pleasant (TOV)	1	6	1	10	3	2	3.8	22.5	3.7	37.2	11.3	7.6
Ossining (TOV)	0	0	0	0	0	0	0	0	0	0	0	0
Ossining (V)	7	0	1	3	3	3	27.6	0	4.0	11.9	11.9	11.9
Peekskill (C)	7	4	2	7	1	1	29.0	16.6	8.3	29.3	4.2	4.2
Pleasantville (V)	3	3	0	0	0	1	41.2	41.2	0	0	0	14.2
Sleepy Hollow (V)	1	2	1	1	0	3	9.8	19.6	9.9	9.9	0	30.3
Northeast	36	50	51	68	44	41	25.6	35.5	36.4	48.7	31.7	29.7
Bedford (T)	6	10	7	16	8	6	33.4	55.7	39.3	90.2	45.3	34.3
Lewisboro (T)	0	3	2	8	5	2	0	23.5	15.8	63.3	39.8	16.0
Mount Kisco (T/V)	5	5	2	4	6	3	45.5	45.5	18.1	36.2	54.5	27.4
New Castle (T)	1	5	14	4	5	8	5.5	27.7	78.0	22.4	28.1	45.2
North Castle (T)	4	4	3	6	2	1	32.5	32.5	24.6	49.4	16.6	8.4
North Salem (T)	3	2	3	5	6	3	57.6	38.4	57.9	96.5	116.2	58.3
Pound Ridge (T)	1	5	1	6	2	0	19.1	95.6	19.2	115.2	38.7	0
Somers (T)	3	10	6	7	2	8	14.0	46.6	28.4	33.2	9.6	38.7
Yorktown (T)	13	6	13	12	8	10	35.2	16.3	35.3	32.7	21.9	27.5
West Central	31	17	22	26	9	7	18.4	10.1	13.2	15.6	5.5	4.3
Ardsley (V)	0	1	1	1	0	0	0	21.9	21.9	22.0	0	0
Dobbs Ferry (V)	4	3	1	1	2	0	35.9	26.9	9.0	9.0	18.2	0
Elmsford (V)	1	0	0	1	1	0	20.2	0	0	21.0	21.2	0
Greenburgh (TOV)	1	2	5	10	3	3	2.2	4	11	22.5	6.8	7
Hastings-on-Hudson (V)	9	6	8	7	0	1	112.6	75.1	100.5	88.0	0	12.7
Irvington (V)	5	0	1	2	0	0	75.9	0	15.2	30.6	0	0
Scarsdale (T/V)	2	1	2	0	0	0	11.2	5.6	11.3	0	0	0
Tarrytown (V)	4	3	1	0	0	2	34.7	26.0	8.7	0	0	17.6
White Plains (C)	5	1	3	4	3	1	8.6	1.7	5.2	6.9	5.2	1.7
East Central	10	0	1	12	7	3	8.2	0.0	0.8	10.0	5.9	2.5
Harrison (T/V)	0	0	0	2	0	1	0	0	0	7.1	0	3.6
Larchmont (V)	0	0	0	0	0	0	0	0	0	0	0	0
Mamaroneck (TOV)	1	0	1	1	0	0	8.1	0	8.2	8.2	0	0
Mamaroneck (V)	3	0	0	2	1	0	15.5	0	0	10.4	5.2	0
Port Chester (V)	5	0	0	5	2	1	16.9	0	0	17.0	6.8	3.4
Rye (C)	1	0	0	1	1	0	6.2	0	0	6.3	6.3	0
Rye Brook (V)	0	0	0	1	3	1	0	0	0	10.5	31.7	10.6
Southwest	6	6	3	6	4	9	3.0	3.0	1.5	3.0	2.0	4.6
Yonkers (C)	6	6	3	6	4	9	3.0	3.0	1.5	3.0	2.0	4.6
Southeast	4	6	3	3	2	3	2.1	3.1	1.6	1.6	1.0	1.6
Bronxville (V)	0	1	1	0	0	1	0	15.6	15.6	0	0	15.7
Eastchester (TOV)	0	0	0	1	1	0	0	0	0	5.0	5.1	0
Mount Vernon (C)	1	0	2	0	0	0	1.5	0	2.9	0	0	0
New Rochelle (C)	3	5	0	0	1	2	3.8	6.3	0	0	1.3	2.6
Pelham (V)	0	0	0	0	0	0	0	0	0	0	0	0
Pelham Manor (V)	0	0	0	2	0	0	0	0	0	35.9	0	0
Tuckahoe (V)	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	0	1	1	3	0	0	--	--	--	--	--	--

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 23. Reported Cases and Rates of Lyme Disease by Age and Sex, Westchester County, 2017-2018.

Age (Years)	2017								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	108	11.1	100.0	62	13.1	100.0	45	4.6	100.0
0-9	12	10.4	11.1	9	15.0	14.5	3	5.4	6.7
10-19	14	10.6	13.0	11	16.4	17.7	3	4.6	6.7
20-29	5	4.4	4.6	3	5.2	4.8	2	3.5	4.4
30-39	8	6.8	7.4	4	6.8	6.5	4	6.7	8.9
40-49	18	13.2	16.7	12	18.1	19.4	6	8.5	13.3
50-59	19	13.2	17.6	9	13.1	14.5	10	13.2	22.2
60-69	17	16.0	15.7	8	15.9	12.9	9	16.2	20.0
70+	14	12.9	13.0	6	13.8	9.7	8	12.3	17.8
Unknown	1	--	0.9	0	--	0	0	--	0
Age (Years)	2018								
	Total			Males			Females		
	Number	Rate ¹	Percent	Number	Rate ¹	Percent	Number	Rate ¹	Percent
Total	119	12.2	100.0	78	16.5	100.0	41	8.1	113.9
0-9	32	27.7	26.9	16	26.7	20.5	16	28.8	44.4
10-19	12	9.1	10.1	9	13.4	11.5	3	4.6	8.3
20-29	10	8.7	8.4	9	15.6	11.5	1	1.8	2.8
30-39	12	10.1	10.1	12	20.5	15.4	0	0	0
40-49	14	10.2	11.8	10	15.1	12.8	4	5.7	11.1
50-59	13	9.0	10.9	9	13.1	11.5	4	5.3	11.1
60-69	14	13.2	11.8	7	13.9	9.0	7	12.6	19.4
70+	12	11.1	10.1	6	13.8	7.7	6	9.2	16.7
Unknown	0	--	0	0	--	0	0	--	0

¹Rates were calculated using the ACS 5-Year Estimates for each respective year.

Source: Westchester County Department of Health. Data as at February 2019.

Table 24. Reported Cases of Lyme Disease Per Month, Westchester County, 2016-2018.

Month	2016		2017		2018	
	Number	%	Number	%	Number	%
Total	97	100.0	108	100.0	119	100.0
January	3	3.1	1	0.9	3	2.5
February	2	2.1	3	2.8	6	5.0
March	3	3.1	9	8.3	3	2.5
April	2	2.1	4	3.7	2	1.7
May	7	7.2	5	4.6	12	10.1
June	26	26.8	32	29.6	25	21.0
July	29	29.9	22	20.4	26	21.8
August	10	10.3	10	9.3	15	12.6
September	6	6.2	8	7.4	7	5.9
October	5	5.2	6	5.6	9	7.6
November	1	1.0	4	3.7	7	5.9
December	3	3.1	4	3.7	4	3.4

Source: Westchester County Department of Health. Data as at February 2019.

Table 25. Number of Tuberculosis Cases and Contacts, Westchester County 2013-2018.

	2018		2017		2016		2015		2014		2013	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
New Tuberculosis Cases	35		31		28		34		27		30	
Sex												
Male	21	60.0	18	58.1	20	71.4	20	58.8	18	66.7	22	73.3
Female	14	40.0	13	41.9	8	28.6	14	41.2	9	33.3	8	26.7
Race												
White	22	62.9	19	61.3	17	60.7	20	58.8	16	59.3	20	66.7
Black	7	20.0	4	12.9	5	17.9	8	23.5	2	7.4	6	20.0
Asian	6	17.1	8	25.8	5	17.9	6	17.6	9	33.3	4	13.3
Other	0	0	0	0	1	3.6	0	0	0	0	0	0
Ethnicity												
Hispanic	20	57.1	16	51.6	16	57.1	17	50.0	16	59.3	18	60.0
Non-Hispanic	15	42.9	15	48.4	12	42.9	17	50.0	11	40.7	12	40.0
Foreign Born	31	88.6	30	96.8	24	85.7	29	85.3	26	96.3	26	86.7
US Born	4	11.4	1	3.2	4	14.3	5	14.7	1	3.7	4	13.3
Site of Infection												
Pulmonary	25	71.4	21	67.7	15	53.6	22	64.7	24	88.9	16	53.3
Extra-Pulmonary Only	10	28.6	10	32.3	13	46.4	12	35.3	3	11.1	14	46.7
Drug Resistant												
Non Identified	28	80.0	30	96.8	26	92.9	30	88.2	26	96.3	28	93.3
Drug Resistant (None-MDR)	6	17.1	0	0	2	7.1	4	11.8	1	3.7	2	6.7
Multi-Drug Resistant	1	2.9	1	3.2	0	0	0	0	0	0	0	0
HIV Status												
Negative	30	85.7	31	100.0	23	82.1	28	82.4	26	96.3	25	83.3
Positive	5	14.3	0	0	2	7.1	2	5.9	1	3.7	1	3.3
Unknown	0	0	0	0	3	10.7	4	12	0	0	4	13.3
Contacts Identified	429	--	249	--	335	--	719	--	294	--	259	--
Incidence Rate per 100,000	3.6	--	3.2	--	2.9	--	3.5	--	2.8	--	3.1	--

Source: Westchester County Department of Health. Data as at February 2019.

Appendices

A1. Communicable Disease Reporting Requirements

Westchester County publishes a monthly morbidity report (MMR) detailing the incidence of all reportable diseases that occur within the County. The MMR can be found on the Health Department's website <https://health.westchestergov.com/2017-03-10-16-09/monthly-morbidity-reports>. Diseases are reported in the MMR if there have been cases during the past 3 years, therefore not every disease that is listed in the New York State Department of Health reporting requirements will appear.

NEW YORK STATE DEPARTMENT OF HEALTH
Communicable Disease Reporting Requirements

Reporting of suspected or confirmed communicable diseases is mandated under the New York State Sanitary Code (10NYCRR 2.10,2.14). The primary responsibility for reporting rests with the physician; moreover, laboratories (PHL 2102), school nurses (10NYCRR 2.12), day care center directors, nursing homes/hospitals (10NYCRR 405.3d) and state institutions (10NYCRR 2.10a) or other locations providing health services (10NYCRR 2.12) are also required to report the diseases listed below.

Anaplasmosis	C Foodborne illness	Influenza, laboratory-confirmed	Psittacosis	Streptococcal infection (invasive disease) ²
Amebiasis	C Giardiasis	Legionellosis	C Q Fever ²	Group A beta-hemolytic strep
C Animal bites for which rabies prophylaxis is given ¹	C Glanders ²	Listeriosis	C Rabies ¹	Group B strep
C Anthrax ²	Gonococcal infection	Lyme disease	C Rocky Mountain spotted fever	Streptococcus pneumoniae
C Arboviral infection ²	Haemophilus influenzae ³ (invasive disease)	Lymphogranuloma venereum	C Rubella (including congenital rubella syndrome)	C Syphilis, specify stage ²
Babesiosis	C Hantavirus disease	C Measles	Salmonellosis	Tetanus
C Botulism ²	Hemolytic uremic syndrome	C Melioidosis ²	C Severe Acute Respiratory Syndrome (SARS)	Toxic shock syndrome
C Brucellosis ²	Hepatitis A	Meningitis	Shigatoxin-producing E.coli ⁴ (STEC)	Transmissible spongiform encephalopathies ⁵ (TSE)
Campylobacteriosis	C Hepatitis A in a food handler	Aseptic or viral	Shigellosis ⁴	Trichinosis
Chancroid	Hepatitis B (specify acute or chronic)	C Haemophilus	C Smallpox ²	C Tuberculosis current disease (specify site)
Chlamydia trachomatis infection	Hepatitis C (specify acute or chronic)	C Meningococcal Other (specify type)	Staphylococcus aureus ⁶ (due to strains showing reduced susceptibility or resistance to vancomycin)	C Tularemia ²
C Cholera	Pregnant hepatitis B carrier	C Meningococemia	C Staphylococcal enterotoxin B poisoning ²	C Typhoid
Cryptosporidiosis	Herpes infection, infants aged 60 days or younger	C Monkeypox		C Vaccinia disease ⁹
Cyclosporiasis	Hospital associated infections (as defined in section 2.2 10NYCRR)	Mumps		Vibriosis ⁴
C Diphtheria		Pertussis		C Viral hemorrhagic fever ²
E.coli O157:H7 infection ⁴		C Plague ²		Yersiniosis
Ehrlichiosis		C Poliomyelitis		
C Encephalitis				

WHO SHOULD REPORT?

Physicians, nurses, laboratory directors, infection control practitioners, health care facilities, state institutions, schools.

WHERE SHOULD REPORT BE MADE?

Report to local health department where patient resides.

Contact Person _____

Name _____

Address _____

Phone _____ Fax _____

WHEN SHOULD REPORT BE MADE?

Within 24 hours of diagnosis:

- Phone diseases in bold type,
- Mail case report, DOH-389, for all other diseases.
- In New York City use form PD-16.

SPECIAL NOTES

- Diseases listed in **bold type C** warrant prompt action and should be reported **immediately** to local health departments by phone followed by submission of the confidential case report form (DOH-389). In NYC use case report form PD-16.
- In addition to the diseases listed above, any unusual disease (defined as a newly apparent or emerging disease or syndrome that could possibly be caused by a transmissible infectious agent or microbial toxin) is reportable.
- Outbreaks: while individual cases of some diseases (e.g., streptococcal sore throat, head lice, impetigo, scabies and pneumonia) are not reportable, a cluster or outbreak of cases of any communicable disease is a reportable event.
- Cases of HIV infection, HIV-related illness and AIDS are reportable on form DOH-4189 which may be obtained by contacting:
Division of Epidemiology, Evaluation and Research
P.O. Box 2073, ESP Station
Albany, NY 12220-2073
(518) 474-4284
In NYC: New York City Department of Health and Mental Hygiene
For HIV/AIDS reporting, call:
(212) 442-3388

ADDITIONAL INFORMATION

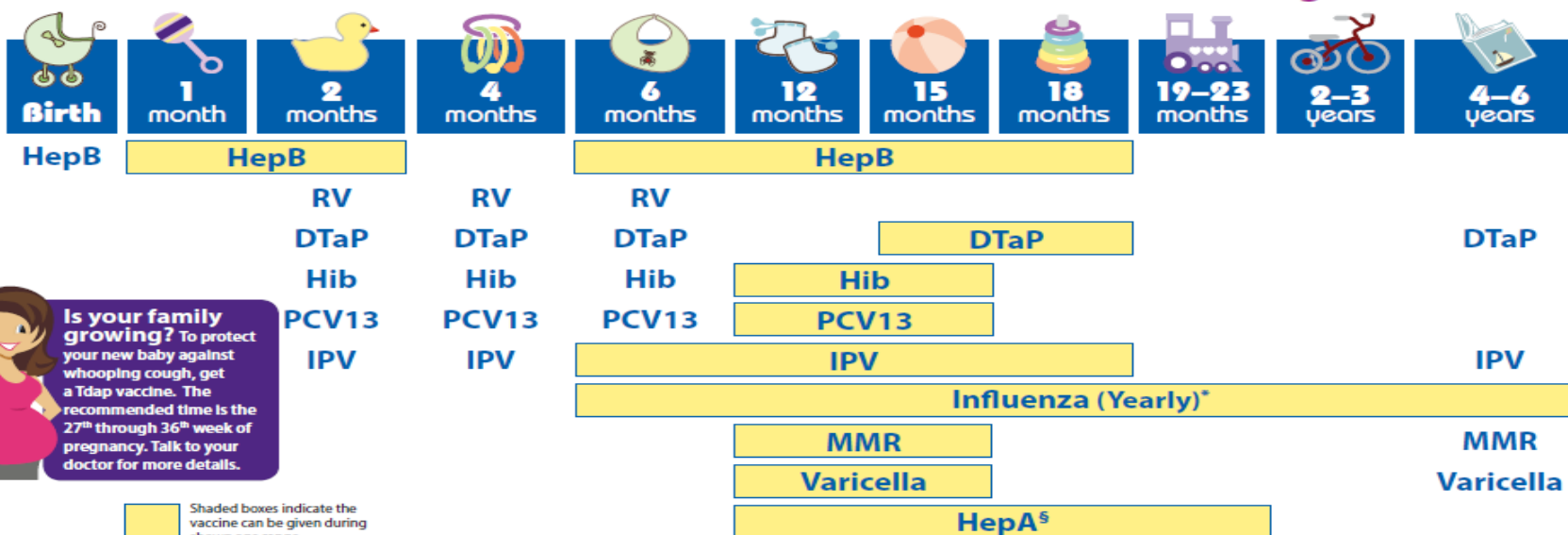
For more information on disease reporting, call your local health department or the New York State Department of Health Bureau of Communicable Disease Control at (518) 473-4439 or (866) 881-2809 after hours. In New York City, 1 (866) NYC-DOH1. To obtain reporting forms (DOH-389), call (518) 474-0548.

PLEASE POST THIS CONSPICUOUSLY

DOH-389 (2/11) p2 of 2

A2. Childhood Immunization Schedule

2019 Recommended Immunizations for Children from Birth Through 6 Years Old



NOTE:

If your child misses a shot, you don't need to start over. Just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

FOOTNOTES:

* Two doses given at least four weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

⁵ Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 months after the last dose. HepA vaccination may be given to any child 12 months and older to protect against hepatitis A. Children and adolescents who did not receive the HepA vaccine and are at high risk should be vaccinated against hepatitis A.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he or she may need.

See back page for more information on vaccine-preventable diseases and the vaccines that prevent them.

For more information, call toll-free
1-800-CDC-INFO (1-800-232-4636)
or visit
www.cdc.gov/vaccines/parents



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



American Academy
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Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pink eye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR** vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV13 vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Sometimes rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.

** MMR combines protection against measles, mumps, and rubella.

A3. Adolescent Immunization Schedule

INFORMATION FOR PARENTS

2019 Recommended Immunizations for Children 7–18 Years Old

Talk to your child’s doctor or nurse about the vaccines recommended for their age.

	Flu Influenza	Tdap Tetanus, diphtheria, pertussis	HPV Human papillomavirus	Meningococcal		Pneumococcal	Hepatitis B	Hepatitis A	Polio	MMR Measles, mumps, rubella	Chickenpox Varicella
				MenACWY	MenB						
7-8 Years											
9-10 Years											
11-12 Years											
13-15 Years											
16-18 Years											

More information: Everyone 6 months and older should get a flu vaccine every year.

All 11- through 12- year olds should get one shot of Tdap.

All 11- through 12- year olds should get a 2-shot series of HPV vaccine. A 3-shot series is needed for those with weakened immune systems and those who start the series at 15 years or older.

All 11- through 12- year olds should get one shot of meningococcal conjugate (MenACWY). A booster shot is recommended at age 16.

Teens 16–18 years old **may** be vaccinated with a serogroup B meningococcal (MenB) vaccine.

- These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.
- These shaded boxes indicate the vaccine should be given if a child is catching up on missed vaccines.
- These shaded boxes indicate the vaccine is recommended for children with certain health or lifestyle conditions that put them at an increased risk for serious diseases. See vaccine-specific recommendations at www.cdc.gov/vaccines/hcp/acip-recs/.
- This shaded box indicates children not at increased risk may get the vaccine if they wish after speaking to a provider.



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AMERICAN ACADEMY OF PEDIATRICS

A4. Adult Immunization Schedule

Vaccinations for Adults

You're **NEVER** too old to get immunized!

Getting immunized is a lifelong, life-protecting job. Don't leave your healthcare provider's office without making sure you've had all the vaccinations you need.

Age ➤ Vaccine ▼	19-49 years	50-64 years	65 years & older
Influenza	You need a dose every fall (or winter) for your protection and the protection of others around you.		
Pneumococcal	You need 1-2 doses if you smoke cigarettes or if you have certain chronic medical conditions.*	You need 1 dose at age 65 (or older) if you've never been vaccinated.	
Tetanus, Diphtheria, Pertussis (Whooping Cough) (Td, Tdap)	Be sure to get a 1-time dose of "Tdap" vaccine (the adult whooping cough vaccine) if you are younger than age 65 years, are 65+ and have contact with an infant, are a healthcare worker, or simply want to be protected from whooping cough. You need a Td booster dose every 10 years. Consult your healthcare provider if you haven't had at least 3 tetanus- and diphtheria-containing shots sometime in your life or have a deep or dirty wound.		
Hepatitis B (HepB)	You need this vaccine if you have a specific risk factor for hepatitis B virus infection* or you simply wish to be protected from this disease. The vaccine is given in 3 doses, usually over 6 months.		
Hepatitis A (HepA)	You need this vaccine if you have a specific risk factor for hepatitis A virus infection* or you simply wish to be protected from this disease. The vaccine is usually given as 2 doses, 6-18 months apart.		
Human Papillomavirus (HPV)	You need this vaccine if you are a woman who is age 26 years or younger. One brand, Gardasil, can be given to men age 26 years or younger to prevent genital warts. The vaccine is given in 3 doses over 6 months.		
Measles, Mumps, Rubella (MMR)	You need at least 1 dose of MMR if you were born in 1957 or later. You may also need a second dose.		
Varicella (Chickenpox)	If you've never had chickenpox or you were vaccinated but received only 1 dose, talk to your healthcare provider to find out if you need this vaccine.*		
Meningococcal	If you are going to college and plan to live in a dormitory, or have one of several medical conditions*, you need to get vaccinated against meningococcal disease. You may also need additional booster shots.		
Zoster (Shingles)			If you are age 60 years or older, you should get this vaccine now.

*Consult your healthcare provider to determine your level of risk for infection and your need for this vaccine.

Do you travel outside the United States? If so, you may need additional vaccines. The Centers for Disease Control and Prevention (CDC) provides information to assist travelers and their healthcare providers in deciding the vaccines, medications, and other measures necessary to prevent illness and injury during international travel. Visit CDC's website at www.cdc.gov/travel or call (800) CDC-INFO [(800) 232-4636]. You may also consult a travel clinic or your healthcare provider.

Technical content provided by the Centers for Disease Control and Prevention, December 2010. www.immunize.org/catg.d/p4030.pdf • Item #P4030(12/10)

Immunization Action Coalition • 1573 Selby Ave. • St. Paul, MN 55104 • (651) 647-9009 • www.vaccineinformation.org • www.immunize.org

A5. Data Sources

The information source on communicable diseases in Westchester County is the New York State Communicable Disease Electronic Surveillance System (CDESS). CDESS is a live database that collects information regarding cases and investigations of numerous communicable diseases in New York State. The information presented in this report represents a snapshot of the data at the time it was downloaded. Subsequently, cases may have been revoked, added, or found to have been duplicates and removed based on new information.

A6. Westchester County Municipalities

Health Planning Region and Municipality ¹	Code ²
Northwest	
Cortlandt Town	T
Buchanan Village	V
Croton-on-Hudson Village	V
Cortlandt Unincorporated	TOV
Mount Pleasant Town	T
Briarcliff Manor Village (Mount Pleasant Part) ²	V
Pleasantville Village	V
Sleepy Hollow Village	V
Mount Pleasant Unincorporated	TOV
Ossining Town	T
Briarcliff Manor Village (Ossining Part) ²	V
Ossining Village	V
Ossining Unincorporated	TOV
Peekskill	C
Northeast	
Bedford Town	T
Lewisboro Town	T
Mount Kisco Town/Village	T/V
New Castle Town	T
North Castle Town	T
North Salem Town	T
Pound Ridge Town	T
Somers Town	T
Yorktown Town	T
West Central	
Greenburgh Town	T
Ardsley Village	V
Dobbs Ferry Village	V
Elmsford Village	V
Hastings-on-Hudson Village	V
Irvington Village	V
Tarrytown Village	V
Greenburgh Unincorporated	TOV
Scarsdale Town/Village	T/V
White Plains	C

Health Planning Region and Municipality ¹	Code ²
East Central	
Harrison Town/Village	T/V
Mamaroneck Town	T
Larchmont Village	V
Mamaroneck Village (Mamaroneck Part) ³	V
Mamaroneck Unincorporated	TOV
Rye City	C
Rye Town	T
Mamaroneck Village (Rye Part) ³	V
Port Chester Village	V
Rye Brook Village	V
Southwest	
Yonkers	C
Southeast	
Eastchester Town	T
Bronxville Village	V
Tuckahoe Village	V
Eastchester Unincorporated	TOV
Mount Vernon	C
New Rochelle	C
Pelham Town	T
Pelham Village	V
Pelham Manor Village	V

¹ For regional planning purposes, municipalities are grouped into six geographic health planning regions.

² A town may or may not include incorporated villages located within the town boundary. When it does not include any incorporated villages within the town boundary, the statistics refer to the town as a whole (T). When it does include incorporated villages within its boundary, the statistics refer to the unincorporated area within the town boundary (TOV). The entities of Harrison, Mount Kisco, and Scarsdale are both towns and villages (V/T). The land in two towns, Pelham and Rye, has all been incorporated into separated villages. Therefore, no data are reported for these two towns.

³ The Village of Briarcliff Manor and the Village of Mamaroneck are split between two towns. Briarcliff Manor is within the Town of Ossining (92% of its surface area and 91% of its population) and the Town of Mount Pleasant (8% of its surface area and 9% of its population). The Village of Mamaroneck is within the Town of Mamaroneck (63% of its surface area and 60% of its population) and the Town of Rye (37% of its surface area and 40% of its population).

A7. Health Planning Regions and Municipality Map

