Safety and Health

Renamed the Center

for Disease Control

1970

1983

Establishes a Violence

Epidemiology Branch

homicide, and suicide

to confront child abuse,

1988

Establishes the National Center

for Chronic Disease Prevention

and Health Promotion

Establishes

the Laboratory

Response Network

Foreign Quarantine Service

Adds new surveillance systems to track measles, shigellosis,

Acquires the Tuberculosis Program

1965

tetanus, and trichinosis

1946

The Communicable

Disease Center

is organized in

Atlanta

Establishes the Epidemic Intelligence Service

(EIS) to protect against biological warfare and

man-made epidemics

CS106412

CDC: 60 Years of Excellence CDC at 60

With thousands of professionals in the United States and in 46 countries worldwide, working on issues ranging from Avian influenza, to obesity, to violence in schools, the Centers for Disease Control and Prevention is the nation's leading public health agency.

The CDC inspires trust and embodies the scientific knowledge that has been protecting the health of Americans—and people around the world—since 1946. Over the last 60 years, the world class scientists and staff at the CDC have helped people to live safer healthier, and longer lives. CDC and its partners are proud of their public health accomplishments, including their pioneering work in malaria control, helping to eradicate smallpox from the planet, identifying and reporting the first cases of AIDS, working to reduce tobacco use, obesity, diabetes, and creating the widely respected Epidemic Intelligence Service. CDC has been, and remains, the agency that the nation and the world trust in the face of a public health emergency.

From its Atlanta campus to the most remote location imaginable, today's CDC has a complex mission that reflects ever-changing public health needs in the areas of healthy people, healthy places, preparedness, and global health.

1940s – Today... 60 Years in the War on Malaria

It's fitting that CDC's Malaria Branch has been crucial in planning and supporting the President's Malaria Initiative (PMI), announced in 2005, as this disease was the agency's raison d'être at its founding in 1946. From its start as part of the U.S. Public Health Service's war on malaria in the United States, CDC has remained at the forefront of the fight, though the battleground has shifted to developing nations abroad.

PMI brings together the United States Agency for International Development (USAID) and the Department of Health and Human Services to provide support to National Malaria Control Programs in coordination with other donors, including the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and the World Bank Booster Program. This \$1.2 billion, 5-year effort aims to cut malaria-related deaths by half in 15 African countries by supporting an integrated, comprehensive package of malaria prevention and control interventions. By the end of 2006, CDC had field staff in 5 PMI countries, and, by the end of 2007, the agency will have staff in all 15.

In less than a year, PMI has provided more than six million people with life-saving interventions, including indoor residual spraying, bed nets treated with insecticides.



and new antimalarial drugs. In fact, in public health facilities on one of Zanzibar's islands, confirmed malaria cases have dropped by nearly 90%—a direct result of the nets and the new drugs.

» Malaria Control in War Areas

1950s – Today... A Half-Century in the Fight Against Polio

In public health terms, the 1950s could be remembered as the decade of polio intervention in the United States. After all, it was in 1950 that a group of CDC scientists conducted the first investigation of a polio outbreak in Ohio. The worst recorded U.S. epidemic of polio occurred in 1952, with more than 57,000 cases reported. By 1955, CDC had established its Polio Surveillance Program. That same year, an inactivated polio vaccine (IPV) was introduced, and the incidence of the disease dramatically decreased, falling 85% from 1955 to 1957. The sharp drop in cases continued after the introduction in 1961 of an oral polio vaccine (OPV). (In 1960, there were a total of 2,525 paralytic cases reported in the U.S.—by 1965, that number had dropped to a mere 61.) The last case of polio caused by a wild poliovirus (rather than an importation) in the U.S. was in 1979.

In 1988, based on success in controlling transmission in the U.S. and throughout the Americas, the World Health Assembly voted to launch an initiative to eradicate polio worldwide. CDC—along with the World Health Organization, Rotary International, and UNICEF—is a spearheading partner in this initiative. That year, an estimated 350,000 cases of paralytic polio occurred in 125 countries. By 2005, cases had fallen by more than 99%, with fewer than 2,000 reported globally, and only four countries—Nigeria, India, Pakistan, and Afghanistan—remained endemic for the disease. Since the initiative began, more than five million cases of paralytic polio have been prevented and an estimated 250,000 polio deaths averted.

There is still difficulty today in accessing all children for vaccination in areas of insecurity; and outbreaks have occurred in previously polio-free countries due to imported cases. To combat this, new tools and strategies are being implemented: when an outbreak occurs, an immunization response is conducted within four weeks of case confirmation; three immunization campaigns are held four to six weeks apart; and a house-to-house immunization strategy is used. In addition, monovalent OPV, which is more efficient at boosting immunity against specific strains of poliovirus than the trivalent vaccine, has been reintroduced in numerous countries since 2005. Disease surveillance has been strengthened, and targeted political advocacy has been conducted at the global, national, and district levels.

Key to achievement of a polio-free world is the continued support of the international polio partnership. After 50 years, CDC remains fully committed to the fight.

» Communicable
Disease Center
Artistic Rendering
1959



1960s – Today... 40 Years of Research on Tobacco and Smoking

In 1964, a sea change occurred in American culture when the Surgeon General released the first-ever report linking smoking to lung cancer. To a nation accustomed to seeing smoking on television and permitting it on airplanes, in homes and around children, the report's statement that "cigarette smoking is a health hazard of sufficient importance in the United States to warrant appropriate remedial action" marked a shift in attitude that continues to shape national discourse to this day. Some 22 years later, in 1986, another groundbreaking report would examine the health impact of secondhand smoke ("involuntary smoking")—an aspect of the debate largely under-examined previously.

It was fitting then that 20 years later, on June 2006, the Surgeon General again advanced the discussion on smoking and public health with the release of the 29th report devoted to tobacco and health. *The Health Consequences of Involuntary Exposure to Tobacco Smoke* documents, beyond any doubt, that secondhand smoke harms people's health and reaffirms, updates, and expands on the conclusions of the 1986 Report. CDC is responsible for these reports as well as for having supported highly successful state and community programs, dissemination of research findings, and ensuring the continued public visibility of antismoking messages.

The Report is already having far-reaching effects on the nation's public health. Its definitive and powerful conclusions—for example, there is no safe level of exposure and breathing even a little secondhand smoke can be dangerous—will set the stage for increased action to reduce involuntary exposure to tobacco smoke, saving lives and reducing the tobacco-related burden on the public's health in the process.

Here are just a few examples of healthy changes that have occurred:

- » Marriott Corporation goes smoke-free
- » Lockheed Martin Corporation announces tobacco-free campus policy
- » Nation's Restaurant News suggests that restaurants reconsider smoking policies
- » Pennsylvania Restaurant Association declares support for state smoke-free legislation
- » Anchorage and Kansas City Chambers of Commerce support local smokefree laws
- » Hawaii and Louisiana governors sign state smoke-free laws

CDC is proud to have been one of the first HHS agencies to implement a tobaccofree campus policy, even before this most recent Report was issued.

1970s – Today...

Three Decades of Reducing Lead Levels

Today, it is accepted science that exposure to lead can result in lower test scores and behavioral problems among children and hypertension and kidney disease in adults. But in 1972, the notion that lead could constitute a public health threat was something few had ever considered. Even the National Academy of Sciences report from that year stated, "lead attributable to emission and dispersion into the general ambient environment has no known harmful effects."

That same year, however, CDC research would dramatically alter the discussion. And, in 1973, CDC published its findings on harmful levels of lead exposure and health consequences in the *Morbidity and Mortality Weekly Report*. Not only were populations living near industrial areas or in dense urban areas being impacted by air lead levels, but deteriorated lead paint in older homes and apartment buildings was also a serious problem. This changed forever the way in which Americans viewed "acceptable levels" of lead exposure.

Over the next 34 years, blood lead levels declined dramatically; approximately 80% in the United States with the implementation of federal and state regulations to control lead exposure. CDC played a major role in reducing lead exposure from food cans, drinking water conduits, and other sources, in banning lead-based paints for use in housing and in making older housing lead-safe. The reduction in exposure that followed is one of the most significant public health successes of recent decades.

However, blood lead levels are still high today for certain populations—especially minority groups, children from low-income families, and those living in older homes. According to data collected during 1999–2002, non-Hispanic black children remained at higher risk for elevated blood lead levels than non-Hispanic white or Mexican American children. The most recent figures available indicate that approximately 24 million housing units still contain substantial lead paint hazards, with 1.2 million of these units occupied by low-income families—including perhaps 310,000 young children.

CDC has joined with other federal agencies to ensure a systematic effort to control and eliminate childhood lead poisoning as a public health problem by 2010. The interagency strategy will help to identify lead paint hazards as well as children with elevated blood lead levels, to monitor progress in reducing lead levels, and to further the success of prevention programs. Striving to meet the goal set in motion more than 30 years ago, CDC also is leading the way in international agreements to lessen the use of leaded gasoline and lessen health effects in areas where lead mining is conducted.

1980s – Today 25 Years of HIV/AIDS

Since June 1981, when CDC's *Morbidity and Mortality Weekly Report* published a report of *Pneumocystis carinii* pneumonia in five previously healthy young men in Los Angeles, CDC has continued the battle against this disease. Today, there are more than 1 million persons living with HIV/AIDS in the United States, but over the last 25 years, CDC has succeeded in

- » Decreasing mother-to-child (perinatal) HIV transmission from 1,650 during the early- to mid-1990s to 141 estimated cases in 2005; attributable to multiple interventions, including routine voluntary HIV testing of pregnant women, the use of rapid HIV tests at delivery for women of unknown HIV status, and the use of antiretroviral therapy by HIV-infected women during pregnancy and by infants after birth.
- » Ensuring availability and use of diagnostic and screening tests for HIV infection to promote individual knowledge of HIV serostatus and to ensure

- the safety of the nation's blood supply. Today, with nucleic acid testing, the risk for HIV transmission is estimated at as low as one per 2 million blood donations.
- Increasing widespread promotion of HIV testing and uptake have resulted in approximately 50% of persons aged 15 to 44 years in the U.S. reporting that they have had an HIV test, including a higher proportion of those at increased risk (e.g., men who have sex with men and injection-drug users).

Today, CDC continues to confront a leading cause of illness and death in the United States, to reduce the number of the estimated 250,000 HIV-infected persons in the United States who are unaware of their status; and to increasingly focus prevention messages on both HIV-positive and negative persons, and reduce health disparities, especially among African Americans and other high-risk populations. In 2006, CDC published groundbreaking new recommendations to make voluntary HIV screening a routine part of medical care for all patients aged 13 to 64 years and to simplify the testing process in health care settings and increase early diagnosis. The recommendations also include new measures to improve diagnosis among pregnant women and further reduce mother-to-child HIV transmission.