# **State Profiles**

This section contains profiles on chlamydia positivity trends for all 50 states, Puerto Rico, and the Virgin Islands. Each of the following profiles contains three figures and one table.

### Morbidity Surveillance: Reporting of Chlamydia Cases

Figure A. Chlamydia rate per 100,000 women, 1997-2006

#### 2000-2006 Rates and Population

Crude incidence rates (new cases/population) were calculated on an annual basis per 100,000 population. In this report, the 2006 rates for all states were calculated by dividing the number of cases reported from each state in 2006 by the estimated state-specific 2005 population (the most current detailed population file available at time of publication).

The National Center for Health Statistics released bridged race population counts for 2000–2005 resident population based on the Census 2000 counts. These estimates resulted from bridging the 31 race categories used in Census 2000, as specified in the 1997 Office of Management and Budget (OMB) standards, to the five race/ethnicity

groups specified under the 1977 OMB standards.

From 2001 to 2002, population estimates for Guam were obtained from the Guam Bureau of Statistics and Plans: estimates for Puerto Rico were obtained from the Bureau of Census; and estimates for the Virgin Islands were obtained from the University of the Virgin Islands. After 2002, population estimates for all outlying areas were obtained from the Bureau of Census web site (http://www.census.gov/ipc/www/ idbprint.html). The 2004–2006 rates for outlying areas were calculated using the 2005 population estimates. Due to use of the updated population data, rates for the period 2000–2005 may be different from prior Surveillance Reports.

#### 1996–1999 Rates and Population

The population counts for 1996–1999 incorporated the bridged single-race estimates of the April 1, 2000 resident population. These files were prepared by the U.S. Census Bureau with support from the National Cancer Institute.

## Prevalence Monitoring: Reporting of Chlamydia Positivity

Figure B. Chlamydia positivity in women 15 to 24 years, by testing site, 1997-2006

Table 1. Chlamydia positivity in women 15 to 24 years, by testing site, 2006

Figure C. Chlamydia positivity by age group in women attending family planning clinics, 2006

Chlamydia test positivity was calculated by dividing the number of women testing positive for chlamydia (numerator) by the total number of women tested for chlamydia (denominator includes those with valid test results only and excludes unsatisfactory and indeterminate tests) and is expressed as a percentage. The denominator may contain multiple tests from the same individual if that person was tested more than once during the period for which screening data are reported.

The numerator may also contain multiple positive test results from the same individual if that person tested positive more than once during the period for which screening data are reported. Various chlamydia laboratory methods were used and no adjustments of test positivity were made based on laboratory test type and sensitivity. Chlamydia prevalence data on female National Job Training Program entrants are not presented when the number of persons tested from a state was fewer than 100 in the past year. The number of clinics cited in Table 1 for each state represents family planning (FP), sexually transmitted disease (STD), prenatal, Indian Health Service (IHS), and other clinics screening 25 or more women and iuvenile and adult corrections facilities screening 100 or more women. To be included in Figure B. FP and STD clinics must have each had data on at least 50 tests in any given year. Each age group displayed in Figure C represents data on at least 100 tests within the past year.