

New Hampshire Department of Health and Human Services  
 Infectious Disease Surveillance Section

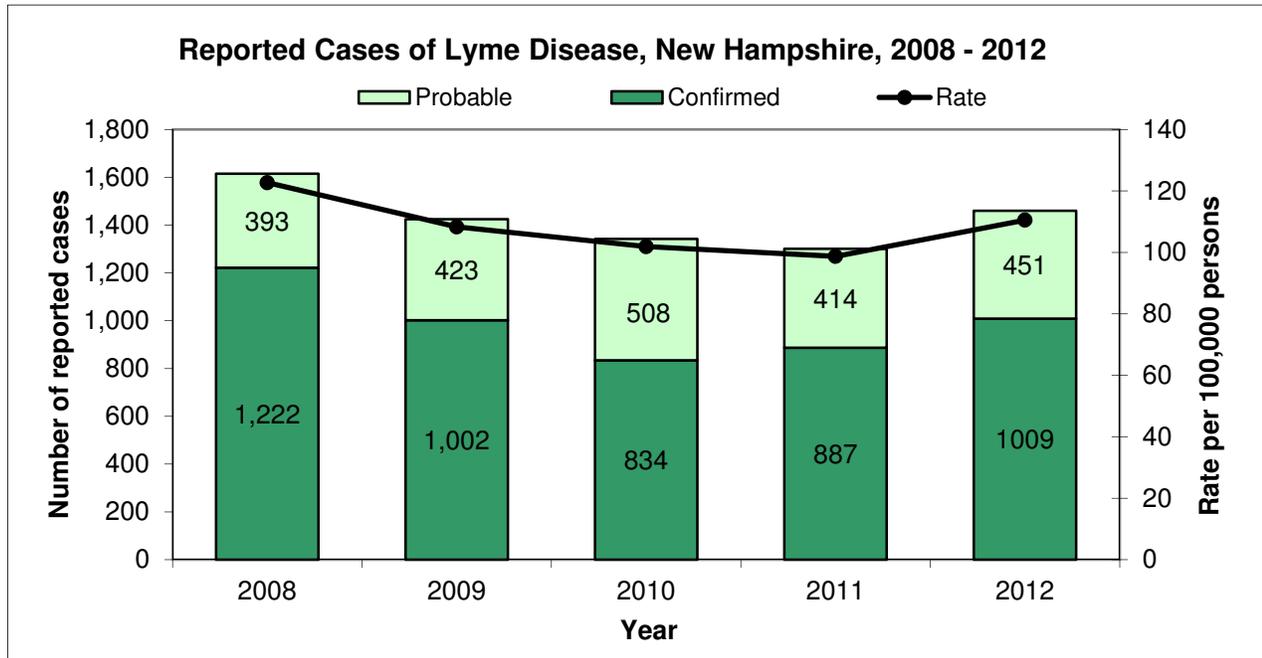
**Reported Cases of Lyme Disease in New Hampshire, 2008-2012**

County¶	2008		2009		2010		2011		2012	
	Cases	Rate*	Cases	Rate*	Cases	Rate*	Cases	Rate*	Cases	Rate*
Belknap	23	38.2	20	33.2	34	56.6	42	69.7	29	48.1
Carroll	16	33.3	19	39.8	35	73.2	53	111.2	48	100.9
Cheshire	36	46.5	36	46.6	29	37.6	61	79.3	43	56.0
Coos	2	*	3	*	5	15.1	10	30.6	5	15.6
Grafton	18	20.3	19	21.4	45	50.5	40	45.0	43	48.2
Hillsborough	451	112.9	438	109.5	425	106.1	388	96.6	429	106.5
Merrimack	103	70.0	90	61.3	110	75.1	108	73.7	125	85.2
Rockingham	681	230.9	585	198.2	498	168.7	422	142.5	550	184.7
Strafford	263	214.8	191	155.2	139	112.9	155	125.1	172	138.6
Sullivan	15	34.3	23	52.6	22	50.3	22	50.6	16	37.1
<b>Total Cases</b>	<b>1,615</b>	<b>122.7</b>	<b>1,425</b>	<b>108.3</b>	<b>1,342</b>	<b>101.9</b>	<b>1,301</b>	<b>98.7</b>	<b>1,460</b>	<b>110.5</b>
Confirmed	1,222		1,002		834		887		1,009	
Probable	393		423		508		414		451	

\* Rate per 100,000 persons. Rates calculated on events <20 are considered statistically unreliable and should be interpreted with caution. Rates not calculated for counties with 1-4 cases due to instability of the rate calculation.

Note: Data beginning with 2008 include confirmed and probable cases to be consistent with the 2008 Lyme Disease case definition adopted by CDC and CSTE. Data beginning in 2012 are based on the latest 2011 Lyme Disease case definition. Changes in case definition over time make it difficult to compare incidence across years as it is unclear how these changes altered the number of reported cases classified as probable or confirmed in New Hampshire.

¶ Data on county of residence is incomplete or not available for 7 cases in 2008 and 1 case in 2009.



Note: All the data in this report are based upon information provided to the New Hampshire Department of Health and Human Services under specific legislative authority. The numbers reported may represent an underestimate of the true absolute number and incidence rate of cases in the state. The department is not responsible for any duplication or misrepresentation of surveillance data released in this report. Case counts by year are based on morbidity date, which is the date closest to onset of illness and may represent date of onset, date of diagnosis, or date of report, whichever is earliest. Case counts may not exactly match data published yearly by the Centers for Disease Control and Prevention. Population data used in this report comes from the U.S. Census Bureau. Data are complete as of May 20, 2013.

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