surveillance program involving data from 5 sources: legally mandated passive surveillance of diseases reported by health care providers and laboratories; special studies such as active surveillance for certain diseases through hospital infection control professionals; sentinel population surveillance, such as surveillance for vancomycin-resistant *Staphylococcus aureus* among hospitalized patients; population-based studies, including linkages with managed care organizations; and information collected for other purposes, such as Medicaid billing data. Data from the first 2 of these sources are routinely entered into the Maryland Electronic Reporting and Surveillance System for weekly transmission to the Centers for Disease Control and Prevention's National Electronic Telecommunications System for Surveillance.

The geographic information systems application is accessible to local health departments through a dial-up wide area network requiring a computer with a 486 Intel processor or higher (with at least 12 megabytes of random access memory) running Windows 3.1. A custom-configured application program in ArcView 2.1[3] is used to execute a PGM file in Epi Info,[2] a DOS-based freeware, without further intervention by the user. The goal of the application is to provide direct and easy manipulation of complex geographic information systems software[3] by users at local health depart-

ments. The application leads the user, within Epi Info, through multiple menu selections to create a custom database from larger databases (e.g., all reportable diseases in 1995) or subsets of the data (e.g., legionellosis cases) before final spatial display. After storing custom data files on a temporary scratch directory, the geographic information systems software imports and joins these files with base map files stored elsewhere on the network. A graphical user interface, including a menu and tool bars, is then presented; this is used to display frequencies and rates of disease within either county or zip code boundaries. The programmability of this application allows for future modifications such as incorporation of census tract boundaries or access to disease event data captured through other surveillance systems. The application can be modified to work with raw data on a nonnetworked desktop computer if dial-up access is unavailable. A non–Epi Info–based version was also created for Windows NT–based network systems.

The preprogrammed database manipulation of the geographic information system may be of particular interest to public health surveillance programs. With only a few clicks of a mouse, individuals can easily use the geographic information system for analysis and simple spatial display of health data. This application incorporates advanced user capabilities, yet it enables novices to become familiar with the basic manipulation of data

within a geographic information systems software environment. ArcView and Epi Info program files for this application may be downloaded at no cost from http://www.digizen.net/member/jayanthd/gis.zip. ☐

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References

1. Clarke KC, McLafferty SL, Tempalski BL. On epidemiology and geographic information systems: a review and discussion of future directions. *Emerg Infect Dis.* 1996;2:85–92.
2. Dean AG, Dean JA, Coulombier D, et al. *Epi Info, Version 6: A Wordprocessing, Database, and Statistics Program for Epidemiology.on Microcomputers.* Atlanta, Ga: Centers for Disease Control and Prevention; 1994.
3. *ArcView—The Geographic Information System for Everyone, Version 2.1.* Redlands, Calif: Environmental Systems Research Institute Inc; 1995.

Errata

In: Cunningham-Williams RM, Cottler LB, Compton WM III, Spitznagel EL. Taking chances: problem gamblers and mental health disorders—results from the St. Louis Epidemiologic Catchment Area Study. *Am J Public Health.* 1998;88:1093–1096.

In a sentence on page 1095, column 3, "since" was replaced by "because" through editorial error. The sentence should have read (change in italics) "*Since* this study was fielded, the American Psychiatric Association's criteria for gambling have significantly changed to mimic those of addiction disorders."

In: Ingster LM, Feinleib M. Salicylate intake and cardiovascular disease: Ingster and Feinleib respond to Hu and Willett. *Am J Public Health.* 1998;88:1268–1269.

A Journal proofreader failed to notice 2 typographical errors on page 1269. The sentences in question should have read as follows (changes in italics): "Of interest to us are the findings of Williams et al.,[8] which clearly demonstrate salicylate inhibition of platelet *aggregation* . . ." and "Williams et al. suggest that other additives may bind to different sites on the cyclo-oxygenase enzyme, whereas *salicylates* compete with aspirin for the same site."