

SUPPLEMENTARY APPENDIX TABLE A2. ESTIMATED ANNUAL NUMBER AND RATE OF ILLNESSES, HOSPITALIZATIONS, AND DEATHS FOR SELECT PATHOGENS IN THE U.S. POPULATION (SCALLAN *ET AL.*, 2011), IN CHILDREN <5 YEARS (SCALLAN *ET AL.*, 2013), AND IN ADULTS AGED ≥65 YEARS^a

Pathogen	N ^b	Rate/ 100,000	N ^b	Rate/ 100,000	U.S. population estimate, %	N ^b	Rate/ 100,000	U.S. population estimate, %
	U.S. population (299 million people)			Children aged <5 years (20 million children; 7% of U.S. population)			Adults aged ≥65 years (37.2 million people; 12% of the U.S. population)	
<i>Estimated annual mean illnesses</i>								
<i>Campylobacter</i>	1,322,100	442.2	81,800	409.0	6	110,200	296.2	8
<i>Salmonella</i> ^c	1,229,000	411.0	123,500	617.5	10	110,100	296.0	9
<i>E. coli</i> O157 ^d	96,500	32.3	8100	40.5	8	4700	12.6	5
<i>Listeria</i>	1700	0.6	—	—	—	990	2.7	58
Total	2,649,300	886.1	213,400	1067.0	8	225,990	607.5	9
<i>Estimated annual mean hospitalizations</i>								
<i>Campylobacter</i>	13,200	4.4	1000	5.0	8	3,200	8.6	24
<i>Salmonella</i> ^c	23,100	7.7	4700	23.5	20	5,100	13.7	22
<i>E. coli</i> O157	3300	1.1	720	3.6	22	470	1.3	14
<i>Listeria</i>	1500	0.5	—	—	—	890	2.4	59
Total	41,100	13.7	6420	32.1	16	9,660	26.0	24
<i>Estimated annual mean deaths</i>								
<i>Campylobacter</i>	120	0.04	6	0.03	5	60	0.1	50
<i>Salmonella</i> ^c	450	0.15	40	0.19	9	220	0.6	49
<i>E. coli</i> O157	30	0.01	10	0.06	33	20	0.1	67
<i>Listeria</i>	270	0.09	—	—	—	180	0.5	67
Total	870	0.29	56	0.28	6	480	1.3	55

^a90% credible intervals for these estimates are presented in Scallan *et al.* (2011) for total U.S. population, 299 million people; in Scallan *et al.* (2013) for children aged <5 years, 20 million children; and in Supplementary Appendix Table A2 for adults aged ≥65 years, 37.2 million older adults.

^bModal or mean value shown; numbers >1000 rounded to nearest hundred, numbers from 10 to 1000 rounded to nearest 10, numbers <10 not rounded.

^cNontyphoidal; includes serotypes other than Typhi.

^dEstimated annual number of *E. coli* O157 illnesses for total U.S. population versus children aged <5 years or adults aged ≥65 years are not comparable. The total U.S. population estimate uses 58% (Voetsch *et al.*, 2004) to adjust for laboratory testing (i.e., the frequency with which clinical laboratories test stool specimens for *E. coli* O157), whereas the estimates in children aged <5 years and adults aged ≥65 years used 71% (Hoefler *et al.*, 2011) from a more recent FoodNet laboratory survey. Had 71% been used for the U.S. population, the number of estimated illnesses would have been lower.

For *Campylobacter* and *Salmonella*, the percentage of laboratory-confirmed case-patients aged ≥65 years reporting bloody diarrhea in FoodNet case-control studies (15% and 22%, respectively) (Friedman *et al.*, 2004; Hennessy *et al.*, 2004; Kimura *et al.*, 2004; Marcus *et al.*, 2007; Mermin *et al.*, 2004) was much lower than that reported in the general population (45% and 45%, respectively) (Scallan *et al.*, 2011). This is despite higher hospitalizations rates among adults aged ≥65 years compared with other age groups. Therefore, we assumed the percentage “severe” among older adults was at least that of the general population. To evaluate the uncertainty in this estimate, we estimated total illness using the percentage of laboratory-confirmed case-patients with bloody diarrhea and the percentage of adults aged ≥65 years hospitalized (Supplementary Appendix Tables A3 and A4).

Using the percentage of cases with bloody diarrhea or the percentage hospitalized for adults aged ≥65 years would have resulted in higher estimates for *Campylobacter* (268,600 and 121,080, respectively) and estimates of 285,600 and 99,800, respectively, for *Salmonella* (Supplementary Appendix Table A4).