



SOUTH DAKOTA DEPARTMENT OF HEALTH 2023 Vital Statistics Report: A Comparison of Leading Health Indicators

2023 South Dakota Vital Statistics Report: A Comparison of Leading Health Indicators

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Preface

2023 South Dakota Vital Statistics Report: A Comparison of Leading Health Indicators was prepared by the South Dakota Department of Health.

This report contains leading health indicators for vital statistics. The report is divided into eight main sections: Overview, Natality, Infant

Mortality, Fetal Mortality, Mortality, Marriage and Divorce, and Infectious Disease. Each section contains written analysis plus tables and figures. There is also a technical notes section that provides additional information regarding the sources of data, data limitations, geographic allocation, populations, rates, and definitions.

Any questions concerning the data, or request for additional statistics, may be directed to the following agency within the South Dakota Department of Health.

Office of Health Statistics 615 East 4th St. Pierre, SD 57501 Phone: (605) 773-3361 Internet: <u>http://doh.sd.gov/a-z-reports/</u>

For specific information or questions on Infectious Disease contact:

Office of Disease Prevention 615 East 4th St. Pierre, SD 57501 Phone: (605) 773-3737

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OVERVIEW

RESIDE	NT LIVE BIRTHS	
	Number of live births	11,170
	Rate per 1,000 population	12.2
INFAN	r deaths	
	Number of infant deaths	71
	Rate per 1,000 live births	6.4
FETAL	DEATHS	
	Number of fetal deaths	75
	Rate per 1,000 live births + fetal deaths	6.7
RESIDE	NT DEATHS	
	Number of resident deaths	8,500
	Rate per 100,000 population	924.6
MARRI	AGES	
	Number of marriages	5,471
	Rate per 1,000 population	6.0
DIVOR	CES	
	Number of divorces	2,113
	Rate per 1,000 population	2.3

This report contains selected health statistics that the Department of Health, other government agencies, and the public widely use. This information has proven useful in determining trends in health status, planning health care services and making decisions about public health programs. It also fulfills diverse requirements in the business community and academic research.

Vital statistics data are compiled and maintained under the direction of the Administrator of the Office of Health Statistics (OHS). The data are analyzed by staff from the OHS and can be found in the following sections: Natality, Infant Mortality, Fetal Mortality, Mortality, and Marriage and Divorce. When referring to divorce throughout this report, please note that annulments are included in the Divorce category. Induced Abortion data are now a separate report available online July 1 of each year.

Infectious disease data are collected, compiled, and analyzed within the Office of Disease Prevention. Data on communicable diseases can be found in the Infectious Disease section of the report.

The contacts listed in the Preface welcome suggestions for additional changes that would make the next compilation even more useful to those involved in improving the health of South Dakotans.

Table 1

Selected Records in Vital Statistics,

South Dakota, 2023

		NATALITY		
Oldest Father:	65	Oldest Moth	er:	48
Youngest Father:	16	Youngest Mo	other:	13
Smallest Live Birth:	1 lb. 2	Z.		
Largest Live Birth:	12 lbs. 3	0Z.		
	Most Po	pular Names for Infants		
Boy's Names 1. Oliver 2. Henry Hudson 4. Owen 5. Theodore 6. Liam William Grayson 9. Noah James Maverick	Number 54 48 48 44 43 37 37 37 37 35 35 35 35	<u>Girl's Nam</u> 1. Nora 2. Ava 3. Amelia 4. Olivia 5. Evelyn 6. Charlott Lainey 8. Harper 9. Emma Mia	42 41 38 36 35	
		MORTALITY		
Oldest Male Decede	ent: 106	Oldest Fema	le Decedent:	113
		DIVORCE		
Longost Duration of	a Marriago Ending			
Longest Duration of	a warriage Ending	in a Divorce: 56 Years		

HISTORICAL COMPARISON OF THE MOST POPULAR NAMES FOR SOUTH DAKOTA INFANTS

	1993	2003	2013	2023
Oliver	1	5	31	54
Henry	2	7	31	48
Hudson	0	4	26	48
Owen	0	25	48	44
Theodore	1	1	10	43
Liam	0	8	83	37
William	36	45	53	37
Grayson	1	7	23	37
Noah	2	50	65	35
James	38	31	41	35
Maverick	1	3	12	35

Table 2 Top Ten Boy's Names, 2023

Top Ten Girl's Names, 2023				
	1993	2003	2013	2023
Nora	0	4	15	42
Ava	0	15	51	41
Amelia	4	10	26	38
Olivia	15	64	53	36
Evelyn	2	6	26	35
Charlotte	3	0	15	34
Lainey	0	4	4	34
Harper	0	0	52	33
Emma	12	82	67	29
Mia	1	13	18	29

Table 3

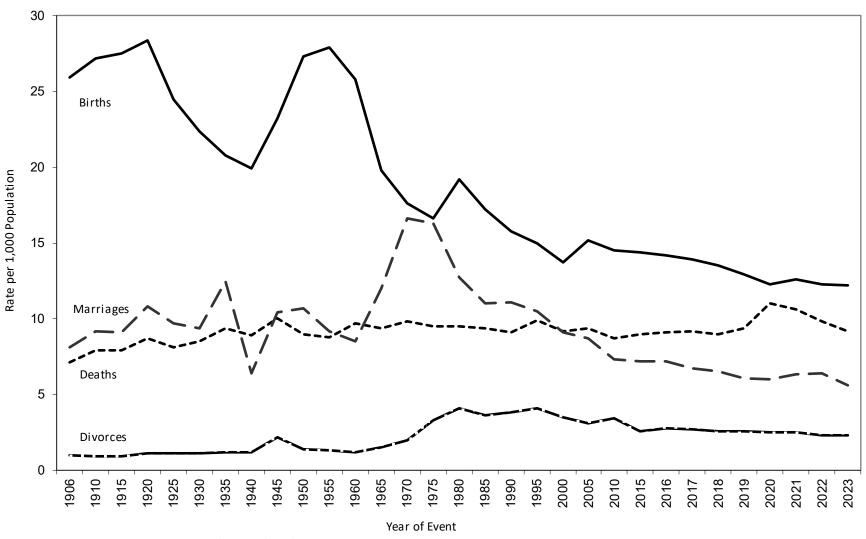
Table 4 Top Ten Boy's Names. 1993

	1993	2003	2013	2023
Tyler	132	43	12	1
Austin	124	47	22	3
Michael	103	51	39	25
Zachary	96	45	20	4
Cody	94	24	6	4
Jacob	91	78	44	15
Joshua	91	38	20	5
Matthew	89	36	11	11
Nicholas	76	36	9	5
Jordan	74	21	15	7

Table 5 Top Ten Girl's Names, 1993

	1993	2003	2013	2023
Ashley	104	25	4	4
Samantha	89	38	10	5
Taylor	86	50	16	7
Jessica	84	26	3	1
Emily	80	68	26	12
Megan	73	36	5	2
Kelsey	65	13	6	0
Amanda	65	6	0	0
Sarah	62	22	11	5
Rachel	57	23	6	6

Figure 1 Birth, Death, Marriage, and Divorce Rates for South Dakota, 1906-2023



Source: South Dakota Department of Health, Office of Health Statistics

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NATALITY

OVERVIEW 2023

Total Resident Live Births	11,170
Crude Birth Rate per 1,000 Population	12.2
Median Live Birth Weight (Grams)	3,340
Low Weight Births (Less than 2,500 grams)	804
Percent Low Birth Weight	7.2%
Median Age of Mother	29
No Prenatal Care	2.5%

There were 11,170 births to South Dakota residents in 2023, for a crude birth rate of 12.2 per 1,000 South Dakota resident population. This is the lowest crude birth rate ever.

Resident births decreased 0.2 percent from 2022 when there were 11,193 births. In 2023, 52.1 percent of the babies born were male and 47.9 percent were female.

The low birth weight rate per 1,000 live births increased from 71.0 in 2022 to 72.0 in 2023. This is the highest rate since 1968.

Table 6, below, displays the live births and crude birth rates for the United States and South Dakota for the past 15 years. South Dakota's birth rate remains above the national average even though the last five years have been the lowest ever.

Year	United S	tates	South	Dakota
fear	Number	Crude Rate	Number	Crude Rate
2023	3,596,017*	10.8*	11,170	12.2
2022	3,667,758	11.0	11,193	12.3
2021	3,664,292	11.0	11,304	12.6
2020	3,613,647	11.0	10,951	12.3
2019	3,747,540	11.4	11,448	12.9
2018	3,791,712	11.6	11,890	13.5
2017	3,855,500	11.8	12,128	13.9
2016	3,945,875	12.2	12,270	14.2
2015	3,978,497	12.4	12,323	14.4
2014	3,988,076	12.5	12,281	14.4
2013	3,932,181	12.4	12,243	14.5
2012	3,952,841	12.6	12,092	14.5
2011	3,953,590	12.7	11,834	14.4
2010	3,999,386	13.0	11,795	14.5
2009	4,130,665	13.5	11,930	14.7

Table 6
Resident Live Births and Crude Birth Rates, South Dakota and United States, 2009-2023

Note: * 2023 U.S. data are provisional at time of publication.

Crude birth rates are per 1,000 population.

Sources: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

BIRTHS BY RACE

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau, for South Dakota's race data to be comparable to other areas. All race data in this section are categorized in the following manner:

- white
- American Indian
- black
- Hispanic
- American Indian & white

The remaining categories (Asian, Pacific Islander, multi-racial) are included in the totals but are not necessarily shown specifically in any tables.

Table 7, below, shows the number and percent of resident births by mother's race since 2014. In 2023, the percent of births to white, American Indian, and Black all decreased. Hispanic births increased by 16.9 percent.

	501		Jia Res	ident Liv	e birth	s by wou	ner s ka	ce/Ethnici	ty, 2014	-2023	
Bi	rths	Wh	ite	Amer Indi		Hisp	anic	Blac	ck		n Indian & nite
Year	Num	Num	%	Num	%	Num	%	Num	%	Num	%
2023	11,170	7,961	71.5	1,359	12.2	842	7.6	344	3.1	245	2.2
2022	11,193	7,988	71.6	1,463	13.1	726	6.5	359	3.2	247	2.2
2021	11,304	8,049	71.4	1,514	13.4	691	6.1	383	3.4	283	2.5
2020	10,951	7,712	70.7	1,499	13.7	662	6.1	383	3.5	276	2.5
2019	11,448	8,141	71.3	1,607	14.1	641	5.6	414	3.6	268	2.3
2018	11,890	8,474	71.5	1,644	13.9	659	5.6	410	3.5	303	2.6
2017	12,128	8,610	71.1	1,806	14.9	624	5.2	398	3.3	292	2.4
2016	12,270	8,827	72.1	1,782	14.6	634	5.2	360	2.9	251	2.0
2015	12,323	8,821	71.9	1,921	15.7	559	4.6	266	2.2	267	2.2
2014	12,281	8,898	72.8	1,812	14.8	602	4.9	295	2.4	257	2.1

 Table 7

 South Dakota Resident Live Births by Mother's Race/Ethnicity, 2014-2023

Note: Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

MARITAL STATUS

In 2023, 35.1 percent of infants were born to single mothers. **This is the lowest since 2003.** When looking at the data by race, American Indian women have consistently had the highest percentage of births out of wedlock with 86.2 percent in 2023.

	All R	aces	Wh	ite	Ame Ind		Hisp	panic	Bla	ick	Indi	erican an & nite
Year	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	3,924	35.1	1,827	22.9	1,170	86.2	479	56.9	131	38.1	157	64.1
2022	4,010	35.8	1,859	23.3	1,278	87.1	397	54.7	136	37.9	159	64.4
2021	4,065	36.0	1,867	23.2	1,327	87.6	395	57.2	154	40.2	187	66.1
2020	3,947	36.1	1,772	23.0	1,318	87.5	375	56.6	146	38.0	186	67.4
2019	4,145	36.2	1,954	24.0	1,371	85.2	355	55.4	148	35.7	176	65.7
2018	4,287	36.1	2,008	23.7	1,400	85.0	357	54.3	158	38.5	220	72.6
2017	4,506	37.2	2,155	25.0	1,523	84.2	327	52.5	172	43.2	195	66.8
2016	4,519	36.8	2,505	25.0	1,513	84.9	349	55.1	156	43.3	156	62.2
2015	4,571	37.1	2,213	25.1	1,606	83.5	322	57.6	105	39.5	173	64.8
2014	4,623	37.7	2,303	25.9	1,533	84.2	331	55.0	135	45.8	178	69.3

 Table 8

 South Dakota Resident Births Out of Wedlock by Year of Birth and Race/Ethnicity, 2014-2023

Note: Failure of races to add to the total is due to other and unknown races included in the total. Source: South Dakota Department of Health, Office of Health Statistics

BIRTH WEIGHT

Table 9 compares low birth weight babies by race of mother. In 2023, 525 (6.6%) low birth weight babies were born to white women. For American Indian women, there were 109 (8.0%) low birth weight babies, and for black women, there were 40 (11.6%) low birth weight babies. From 2022 to 2023, there was an increase in low birth weight babies for white and black births. **The 7.2% overall is the highest since 1968.**

			Mother's Race/	Ethnicity		
Year	Total	White	American Indian	Hispanic	Black	American Indian & white
2023	7.2%	6.6%	8.0%	7.2%	11.6%	6.5%
2022	7.1%	6.3%	9.7%	8.4%	7.8%	7.3%
2021	7.1%	6.6%	8.5%	5.9%	10.7%	12.4%
2020	6.9%	6.5%	8.0%	6.2%	7.6%	9.1%
2019	7.0%	6.6%	7.7%	6.6%	11.4%	6.7%
2018	6.7%	6.1%	7.5%	7.6%	8.3%	8.3%
2017	6.9%	6.7%	7.9%	5.6%	10.5%	6.8%
2016	6.8%	6.2%	8.0%	6.0%	10.3%	6.8%
2015	6.2%	5.7%	7.3%	5.5%	6.0%	8.6%
2014	6.6%	6.3%	7.1%	7.3%	10.2%	6.2%

Table 9South Dakota Resident Low Birth Weight Births by Race of Mother, 2014-2023

Note: Failure of races to add to the total is due to other and unknown races included in the total.

Table 10 displays resident births by year of birth and weeks of gestation. In 2023 we saw the lowest percentage of births ever at 40 or more weeks of gestation at only 17.6 percent. **The 12.4 percent that were less than 37** weeks was the highest since before 1990. Prior to that year, gestational age was not published in the annual report for comparison.

Veer	Tota	al	<3	5	35-3	3 6	37-	39	40	+	Unkno	wn
Year	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	11,170	100	474	4.2	920	8.2	7,799	69.9	1,965	17.6	12	-
2022	11,193	100	417	3.7	740	6.6	7,797	69.7	2,225	19.9	14	-
2021	11,304	100	421	3.7	762	6.7	7,636	67.6	2,478	21.9	7	-
2020	10,951	100	389	3.6	641	5.9	7,259	66.4	2,646	24.2	16	-
2019	11,448	100	409	3.6	686	6.0	7,403	64.7	2,946	25.7	4	-
2018	11,890	100	410	3.5	709	6.0	7,442	62.7	3,313	27.9	16	-
2017	12,128	100	432	3.6	693	5.7	7,333	60.5	3,657	30.2	13	-
2016	12,270	100	399	3.3	699	5.7	7,366	60.1	3,796	31.0	10	-
2015	12,323	100	385	3.1	665	5.4	7,268	59.1	3,990	32.4	15	-
2014	12,281	100	416	3.4	622	5.1	7,310	59.7	3,894	31.8	39	-

Table 10South Dakota Resident Births by Year of Birth and Weeks of Gestation, 2014-2023

Source: South Dakota Department of Health, Office of Health Statistics

TOBACCO USE

Table 11 displays the percentage of mothers who smoked cigarettes for each of the past 10 years. In 2023, 9.1 percent stated they smoked cigarettes three months prior to pregnancy, and 6.4 percent smoked cigarettes anytime during their pregnancy, which is the lowest this has ever been.

		Mothe	r's Cigarette Smoki	ng Status	
Year	Three Months Prior to Pregnancy	First Trimester	Second Trimester	Third Trimester	Anytime During Pregnancy
2023	9.1%	6.1%	4.7%	4.2%	6.4%
2022	10.7%	7.2%	5.5%	5.0%	8.3%
2021	13.4%	8.9%	7.0%	6.3%	9.2%
2020	14.9%	9.8%	7.8%	7.3%	10.1%
2019	15.9%	10.5%	8.2%	7.5%	10.7%
2018	17.2%	11.4%	8.9%	8.1%	11.8%
2017	18.1%	12.2%	9.7%	8.8%	12.6%
2016	19.5%	13.2%	10.1%	9.2%	13.6%
2015	20.9%	13.6%	10.4%	9.5%	14.0%
2014	21.7%	14.4%	11.1%	10.2%	14.8%

Table 11South Dakota Resident Live Births by Cigarette Smoking Status, 2014-2023

Table 12, on the next page, displays the percentage of mothers who smoked cigarettes before pregnancy by their cigarette smoking status during pregnancy since 2014. The largest percentage of women stated they never quit smoking cigarettes during their pregnancy with 43.0 percent in 2023.

Table 12South Dakota Resident Births to Mothers Who Smoked Cigarettes Prior to Pregnancy by Cigarette SmokingStatus During Pregnancy, 2014-2023

Year	Quit before becoming pregnant	Quit before second trimester	Quit before third trimester	Never quit	Stopped at some point during pregnancy, but started again before giving birth
2023	32.8%	15.3%	6.9%	43.0%	2.1%
2022	31.6%	16.0%	6.5%	43.2%	2.7%
2021	32.3%	13.9%	7.1%	43.8%	2.9%
2020	32.9%	13.6%	4.9%	45.9%	2.7%
2019	33.4%	13.8%	6.1%	44.8%	1.9%
2018	32.3%	15.0%	6.0%	44.8%	2.1%
2017	32.0%	13.5%	6.4%	45.8%	2.2%
2016	31.5%	15.8%	6.4%	44.3%	2.1%
2015	33.9%	15.0%	6.1%	42.9%	2.2%
2014	32.3%	15.5%	5.5%	44.4%	2.3%

Source: South Dakota Department of Health, Office of Health Statistics

MOTHER'S AGE AND RACE

Table 13 shows that women aged 25 to 29 accounted for the largest percentage of South Dakota resident births in 2023 at 32.3 percent. The median age at birth for whites was 29, Hispanics was 27, American Indians was 25, Blacks was 30, and American Indian/white was 28.

Age of							Race of	f Moth	er			
Age of Mother	Tota	al	Wh	ite	Amer Indi		Hisp	anic	Bla	ick	_	erican & white
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
Less than 18	145	1.3	40	0.5	67	4.9	27	3.2	5	1.5	3	1.5
18-19 Years	369	3.3	144	1.8	141	10.4	52	6.2	9	2.6	11	4.5
20-24 Years	2,022	18.1	1,231	15.5	399	29.4	200	23.8	54	15.7	64	26.1
25-29 Years	3,610	32.3	2,703	34.0	359	26.4	250	29.7	90	26.2	76	31.0
30-34 Years	3,350	30.0	2,608	32.8	247	18.2	200	23.8	107	31.1	60	24.5
35-39 Years	1,389	12.4	1,039	13.1	120	8.8	89	10.6	56	16.3	26	10.6
40 & over	285	2.6	196	2.5	26	1.9	24	2.9	23	6.7	5	2.0
Total	11,170	100	7,961	100	1,359	100	842	100	344	100	245	100

Table 13South Dakota Resident Live Births by Mother's Age and Race, 2023

Note: Failure of the races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 14, on the next page, displays the mother's age for births in the past 10 years. Overall, the percentage of births is highest in women 25-34 years old. In 2023, the number of births to women 17 years or younger (145) was the lowest since before 1963. Prior to that year, the number of births to women 17 years or younger was not published in the annual report for comparison. As recently as 2009 there were 313 births in this age category for comparison.

									0							
	Total B	inthe							Age of I	Mother						
	IULAI D	irtiis	< 1	8	18-1	19	20-	24	25-	29	30-	34	35-	39	40	+
Year	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	11,170	100	145	1.3	369	3.3	2,022	18.1	3,610	32.3	3,350	30.0	1,389	12.4	285	2.6
2022	11,193	100	146	1.3	372	3.3	2,062	18.4	3,657	32.7	3,259	29.1	1,436	12.8	261	2.3
2021	11,304	100	159	1.4	347	3.1	2,100	18.6	3,704	32.8	3,336	29.5	1,413	12.5	245	2.2
2020	10,951	100	154	1.4	386	3.5	2,063	18.8	3,677	33.6	3,153	28.8	1,282	11.7	235	2.1
2019	11,448	100	147	1.3	393	3.4	2,197	19.2	3,801	33.2	3,356	29.3	1,349	11.8	205	1.8
2018	11,890	100	166	1.4	403	3.4	2,329	19.6	4,016	33.8	3,435	28.9	1,336	11.2	205	1.7
2017	12,128	100	155	1.3	467	3.9	2,493	20.6	4,023	33.2	3,401	28.0	1,342	11.1	247	2.0
2016	12,270	100	208	1.7	481	3.9	2,615	21.3	4,166	34.0	3,312	27.0	1,255	10.2	233	1.9
2015	12,323	100	161	1.3	565	4.6	2,746	22.3	4,172	33.9	3,331	27.0	1,130	9.2	218	1.8
2014	12,281	100	223	1.8	519	4.2	2,778	22.6	4,161	33.9	3,251	26.5	1,148	9.3	201	1.6

Table 14 South Dakota Resident Live Births by Mother's Age and Year of Birth. 2014-2023

Note: Failure of ages to add to total births is due to unknown mother's ages included in the total. Source: South Dakota Department of Health, Office of Health Statistics

Figure 2 displays the percent of South Dakota resident live births on the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) for the past 10 years. In 2023, 21.8 percent of mothers were on WIC during their pregnancy.

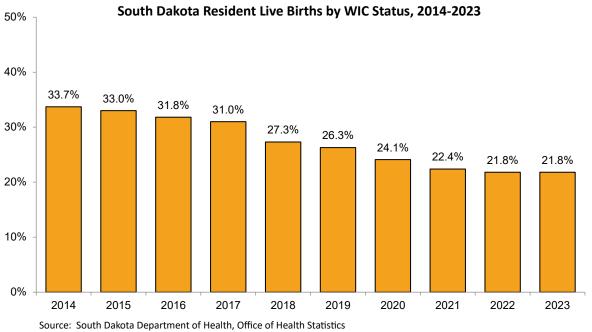
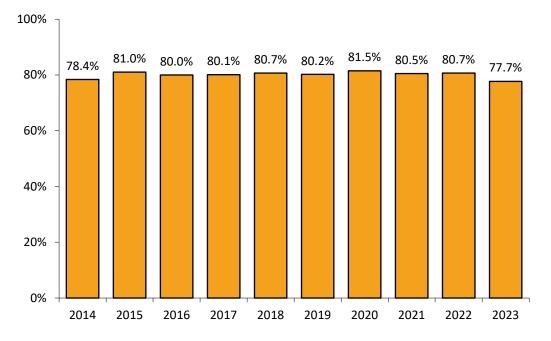


Figure 2

Figure 3, on the following page, displays the percentage of mothers breastfeeding at the time of hospital discharge. The percentage of women who were breastfeeding at the time of discharge decreased from 80.7 percent in 2022 to 77.7 percent in 2023. This was the lowest since 2013.

Figure 3 South Dakota Resident Live Births by Breastfeeding Status at Time of Discharge, 2014-2023



Source: South Dakota Department of Health, Office of Health Statistics

Table 15 displays South Dakota resident teen births (15 to 17 years old) by race from 2014 to 2023. In 2023, the teen birth rate was 7.2-**the lowest it's been since before 1963**. Prior to that year, the number of teen births was not published in the annual report for comparison. When looking at race, the white teen birth rate was 2.7 compared to a teen birth rate of 27.4 for American Indians and 20.8 for Hispanics in 2023.

 Bullott	i nesiae	int iccli					iotilei 3		······	y, 2014
Year	Tot	tal	Wh	ite	-	rican lian	Hisp	anic	Bla	ack
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2023	137	7.2	37	2.7	63	27.4	26	20.8	5	9.3
2022	140	7.7	50	3.8	57	25.6	21	18.3	1	2.0
2021	154	8.6	41	3.2	66	27.2	23	21.8	7	14.2
2020	147	8.6	37	3.0	61	26.6	27	26.7	3	7.0
2019	143	8.6	39	3.2	67	30.5	23	24.7	4	10.3
2018	162	9.9	37	3.1	86	40.2	18	21.3	7	19.3
2017	147	9.1	41	3.4	80	37.3	13	16.6	1	3.1
2016	200	12.5	60	5.0	93	44.6	23	29.7	4	13.5
2015	153	9.5	44	3.7	76	36.0	18	23.4	2	7.3
2014	216	13.2	87	7.1	86	41.4	19	23.3	8	19.8

Table 15 South Dakota Resident Teen Births and Rates by Year and Mother's Race/Ethnicity. 2014-2023

Note: Rates are per 1,000 female population ages 15-17.

Failure of races to add to the total is due to other and unknown races included in the total.

PRENATAL CARE

Table 16 shows the number of South Dakota resident live births by when the mother started prenatal care in 2023. Just over three-fourths (75.7%) of mothers started care in the first trimester – 83.9 percent of white mothers, 42.8 percent of American Indian mothers, 57.4 percent of black mothers, and 62.5 percent of Hispanic mothers. Overall, 2.5 percent of mothers failed to obtain prenatal care at all - the **highest recorded since collecting data in the current manner in 2006.**

When looking at race, the number of white mothers who had no prenatal care was 0.7 percent while American Indian mothers who had no prenatal care was 10.6 percent.

Trimester	Tot	al				Race/Et	thnicity o	of Mot	ther			
Prenatal Care Began			Whi	te	American	Indian	Hispa	nic	Black		_	erican & white
	Num	Num % 8,396 75.7		%	Num	%	Num	%	Num	%	Num	%
First	8,396	75.7	6,654	83.9	68	42.8	519	62.5	197	57.4	152	63.1
Second	1,848	16.7	1,024	12.9	407	30.7	191	23.0	85	24.8	63	26.1
Third	570	5.1	199	2.5	212	16.0	92	11.1	23	6.7	17	7.1
None	280	2.5	58	0.7	140	10.6	29	3.5	38	11.1	9	3.7
Unknown	76	-	26	-	32	-	11	-	1	-	4	-
Total	11,170	100	7,961	100	1,359	100	842	100	343	100	245	100

Table 16South Dakota Resident Live Births by Trimester Prenatal Care Began
and Mother's Race/Ethnicity, 2023

Note: Failure of the races to add to the total is due to unknown races contained in the total birth column. Source: South Dakota Department of Health, Office of Health Statistics

Table 17 shows the number of mothers who began prenatal care by trimester for the past 10 years. Prenatal care in the first trimester has remained steady over the past 10 years.

						-						
Year	Tota	al	Fii	rst	Seco	ond	Thi	rd	No Pre Ca		Not St	ated
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	11,170	100	8,396	75.7	1,848	16.7	570	5.1	280	2.5	76	-
2022	11,193	100	8,414	75.8	1,914	17.3	553	5.0	213	1.9	99	-
2021	11,304	100	8,530	76.2	1,913	17.1	587	5.2	168	1.5	109	-
2020	10,951	100	8,256	76.0	1,956	18.0	533	4.9	118	1.1	88	-
2019	11,448	100	8,605	75.9	2,094	18.5	533	4.7	105	0.9	111	-
2018	11,890	100	8,864	75.4	2,212	18.8	561	4.8	119	1.0	134	-
2017	12,128	100	8,853	74.0	2,360	19.7	622	5.2	129	1.1	164	-
2016	12,270	100	9,160	75.5	2,248	18.5	629	5.2	98	0.8	135	-
2015	12,323	100	9,128	75.3	2,292	18.9	588	4.9	107	0.9	208	-
2014	12,281	100	9,089	75.4	2,236	18.5	637	5.3	98	0.8	221	-

Table 17South Dakota Resident Live Births by Trimester Prenatal Care Began, 2014-2023

HOME BIRTHS

Figure 4 displays the number of intended home births for South Dakota residents in the past 10 years. In 2023 South Dakota saw the largest number of intended home births since this started being tracked in 2006.

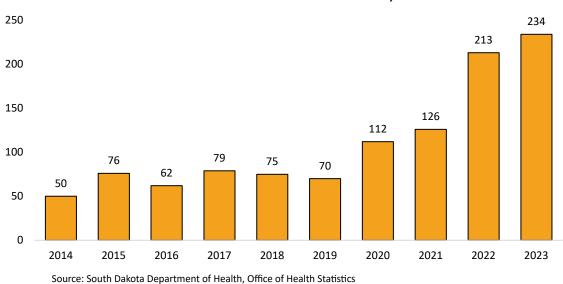


Figure 4 South Dakota Resident Intended Home Births, 2014-2023

METHODS OF DELIVERY

Table 18 displays the method of delivery for the past five years. Vaginal birth was the primary method of delivery for South Dakota residents for the past five years. C-section rates have remained steady over the past five years.

South Dakota Reside	nt Births	s by Me	thod of l	Delivery	and Ye	ar of B	i rth, 201	9-2023	6	
	203	19	202	20	202	21	202	22	202	23
	Num	%	Num	%	Num	%	Num	%	Num	%
Vaginal (Total)	8,647	75.5	8,252	75.4	8,527	75.4	8,513	76.1	8,449	75.6
Vaginal with no previous C-section	8,321	72.7	7,939	72.5	8,189	72.4	8,173	73.0	8,086	72.4
Vaginal after previous C-section	324	2.8	308	2.8	334	3.0	329	2.9	345	3.1
Vaginal (unknown previous types)	2	0.0	5	0.1	4	0.0	11	0.1	18	0.2
C-Section (Total)	2,801	24.5	2,698	24.6	2,777	24.6	2,679	23.9	2,721	24.4
Primary C-section	1,548	13.5	1,524	13.9	1,622	14.3	1,627	14.5	1,571	14.1
Repeat C-section	1,253	10.9	1,174	10.7	1,154	10.2	1,051	9.4	1,147	10.3
C-section (unknown previous types)	0	0.0	0	0.0	1	0.0	1	0.0	3	0.0

 Table 18

 South Dakota Resident Births by Method of Delivery and Year of Birth, 2019-2023

INFANT MORTALITY

OVERVIEW 2023

Infant Deaths Number Rate per 1,000 live births	71 6.4
Neonatal Deaths Number Rate per 1,000 Live Births	44 3.9
Postneonatal Death Number Rate per 1,000 Live Births	27 2.4

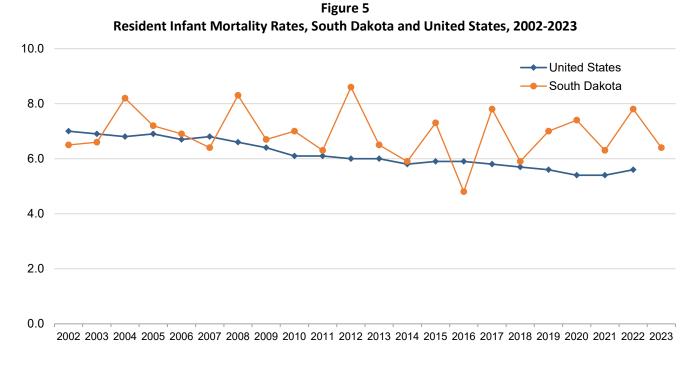
During 2023, there were 71 South Dakota resident infant deaths reported for an infant mortality rate of 6.4 per 1,000 live births. In comparison, there were 87 infant deaths in 2022, with an infant mortality rate of 7.8 per 1,000 live births.

Caution should be used when comparing these annual rates because the number of South Dakota resident births creates a relatively small denominator for determining infant mortality rates; a small change in the number of infant deaths can result in a relatively large rate change. Infant mortality rates should be monitored over time.

Veer	United S	tates	South	Dakota
Year	Number	Mortality Rate	Number	Mortality Rate
2023	*NA	*NA	71	6.4
2022	20,577	5.6	87	7.8
2021	19,928	5.4	71	6.3
2020	19,578	5.4	81	7.4
2019	20,921	5.6	80	7.0
2018	21,498	5.7	70	5.9
2017	22,341	5.8	94	7.8
2016	23,161	5.9	59	4.8
2015	23,455	5.9	90	7.3
2014	23,215	5.8	73	5.9
2013	23,446	6.0	80	6.5
2012	23,629	6.0	104	8.6
2011	23,985	6.1	75	6.3
2010	24,586	6.1	83	7.0
2009	26,412	6.4	80	6.7
2008	28,059	6.6	100	8.3
2007	29,138	6.8	79	6.4
2006	28,527	6.7	82	6.9
2005	28,440	6.9	82	7.2
2004	27,936	6.8	93	8.2
2003	28,025	6.9	73	6.6
2002	28,034	7.0	70	6.5

Table 19
Resident Infant Deaths and Infant Mortality Rates, South Dakota and United States, 2002-2023

Note: * 2023 U.S. data are not available at time of publication. Infant Mortality rates are per 1,000 live births. Sources: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics



Note: Rate Per 1,000 Live Births. U.S. 2023 data are not available at time of publication. Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Figure 6 displays South Dakota's infant mortality rate grouped in five-year increments. The current five-year rate (7.0) is the highest in the past 10 years.

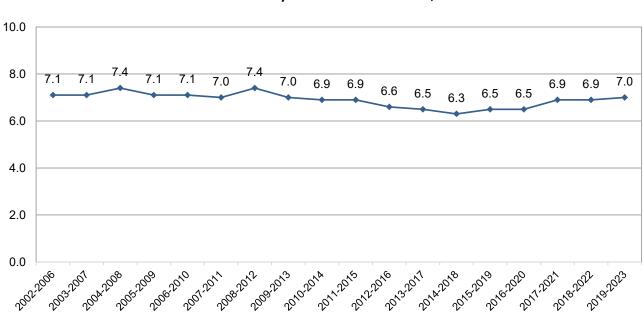


Figure 6 Resident Infant Mortality Rates for South Dakota, 2002-2023

Note: Rate Per 1,000 Live Births. Source: South Dakota Department of Health, Office of Health Statistics Table 20 lists the overall leading causes of infant death in 2019-2023. The leading causes of infant death can be broken down as follows: congenital malformations, 24.9 percent, short gestation and low birth weight with 11.0 percent, and sudden infant death syndrome with 7.9 percent.

	Total	2019	2020	2021	2022	2023
Total Deaths	390	80	81	71	87	71
1. Congenital malformations, deformations, & chromosomal abnormalities	97	27	13	20	21	16
(Q00-Q99)						
Chromosomal abnormalities (Q90-Q99)	22	6	2	7	3	4
Edward's syndrome (Trisomy 18) (Q91.0-Q91.3)	17	5	1	5	2	4
Congenital malformations of the heart (Q20-Q24)	19	6	3	3	6	1
Congenital malformations of the nervous system (Q00-Q07)	16	4	4	4	2	2
Anencephaly and similar malformations (Q00)	8	4	2	0	1	1
Congenital malformations and deformations of the musculoskeletal system,	11	3	0	3	3	2
limbs and integument (Q65-Q85)						
Congenital diaphragmatic hernia (Q79.0)	7	1	0	2	2	2
Congenital malformations of the genitourinary system (Q50-Q64)	8	1	0	1	4	2
2. Disorders related to short gestation and low birth weight (P07)	43	10	11	8	8	6
3. Sudden infant death syndrome (SIDS) (R95)	31	1	6	6	7	11
4. Accidental suffocation and strangulation in bed (W75)	30	7	8	6	6	3
5. Undetermined cause of death (R96-R99)	24	8	11	3	1	1
6. Newborn affected by premature rupture of membranes (P01.1)	10	2	1	2	5	0
T7. Homicide (X85-Y09)	7	1	1	1	3	1
T7. Hydrops fetalis not due to hemolytic disease (P83.2)	7	1	3	0	2	1
T9. Brain injury due to lack of oxygen or blood (P91.6)	6	2	2	1	0	1
T9. Respiratory distress of newborn (P22)	6	1	2	0	2	1
All other causes	129	20	23	24	32	30

Table 20South Dakota Resident Leading Causes of Infant Death, 2019-2023

Source: South Dakota Department of Health, Office of Health Statistics

INFANT DEATHS AND UNSAFE SLEEP ENVIRONMENT

Table 21 shows the causes of death related to an unsafe sleep environment over the past five years. Out of the total 390 infant deaths, 17 percent had an unsafe sleep environment noted on the death certificate. Of the 30 infant deaths caused by accidental suffocation and strangulation in bed, 100 percent involved an unsafe sleep environment.

South Dakota Resident Leading Causes of Infant Death by Sleep Environment, 2019-2023											
Cause of Death	Total	Unsafe sleep environment noted on the death certificate									
Total	390	65 (17%)									
Accidental suffocation and strangulation in bed (W75)	30	30 (100%)									
Sudden infant death syndrome (R95)	31	18 (58%)									
Undetermined cause of death (R96-R99)	24	13 (54%)									

Table 21	
South Dakota Resident Leading Causes of Infant Death by Sleen Environment	2019-2023

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INFANT MORTALITY BY RACE

All race/ethnicity data in this section are shown for White, American Indian, Black, and Hispanic. The remaining categories (Asian, Pacific Islander, and Multi-Racial) are included in the totals but are not shown specifically in any tables.

Table 22 indicates that from 2022 to 2023, the rate of South Dakota resident infant deaths decreased for American Indian and white infants while it increased for black and Hispanic infants. Table 23 displays infant mortality grouped by five-year increments.

		Total										
Year	White		White American Indian		Black		Hisp	anic	iotai			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate		
2023	34	4.3	21	15.5	6	17.4	6	7.1	71	6.4		
2022	47	5.9	30	20.5	2	5.6	5	6.9	87	7.8		
2021	31	3.9	26	17.2	7	18.3	3	4.3	71	6.3		
2020	43	5.6	22	14.7	4	10.4	5	7.6	81	7.4		
2019	50	6.1	18	11.2	5	12.1	4	6.2	80	7.0		
2018	44	5.2	14	8.5	2	4.9	4	6.1	70	5.9		
2017	61	7.1	15	8.3	7	17.6	3	4.8	94	7.8		
2016	33	3.7	21	11.8	3	8.3	1	1.6	59	4.8		
2015	52	5.9	24	12.5	3	11.3	3	5.4	90	7.3		
2014	36	4.0	23	12.7	3	10.2	4	6.6	73	5.9		

Table 22South Dakota Resident Infant Deaths and Mortality Rates by Infant's Race, 2014-2023

Note: Infant mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 23
South Dakota Resident Infant Deaths and Mortality Rates by Infant's Race, Five-Year Increments, 2010-2023

	Race of Infant													
Year	Wh	White American Indian		White American Indian Black Hi		e American Indian		Hisp	Hispanic American Indian & white		Black & white		Total	
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019-2023	205	5.1	117	15.7	24	12.7	23	6.5	4	3.0	7	20.1	390	7.0
2018-2022	215	5.3	110	14.2	20	10.3	21	6.2	5	3.6	7	23.0	389	6.9
2017-2021	229	5.6	95	11.8	25	12.6	19	5.8	8	5.6	7	24.4	396	6.9
2016-2020	231	5.5	90	10.8	21	10.7	17	5.3	8	5.8	7	26.0	384	6.5
2015-2019	240	5.6	92	10.5	20	10.8	15	4.8	9	6.5	5	19.2	393	6.5
2014-2018	226	5.2	97	10.8	18	10.4	15	4.9	12	8.8	5	19.8	386	6.3
2013-2017	228	5.2	105	11.4	20	12.5	13	4.4	12	9.3	5	20.7	396	6.5
2012-2016	220	5.0	114	12.3	16	10.9	19	6.6	10	8.0	8	36.2	406	6.6
2011-2015	229	5.2	117	12.5	16	11.9	18	6.5	13	10.7	8	40.2	422	6.9
2010-2014	229	5.2	112	12.1	14	10.7	18	6.7	17	14.9	6	34.7	415	6.9

Note: Infant mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

When analyzed by race, Table 24 indicates that the South Dakota resident neonatal mortality rate per 1,000 live births increased for blacks and Hispanics from 2022 to 2023. Whites and American Indians decreased from 2022 to 2023. In Table 25 neonatal mortality is grouped in five-year increments.

	Race of Infant											
Year	White		White American Indian		Bla	ack	Hisp	banic	Total			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate		
2023	26	3.3	11	8.1	2	5.8	3	3.6	44	3.9		
2022	28	3.5	18	12.3	2	5.6	2	2.8	50	4.5		
2021	18	2.2	12	7.9	5	13.1	1	1.4	37	3.3		
2020	23	3.0	10	6.6	4	10.4	3	4.5	43	3.9		
2019	30	3.7	6	3.7	5	12.1	3	4.7	46	4.0		
2018	24	2.8	7	4.3	1	2.4	3	4.6	36	3.0		
2017	46	5.3	10	5.5	6	15.1	2	3.2	67	5.5		
2016	22	2.5	8	4.5	0	0.0	0	0.0	31	2.5		
2015	36	4.1	15	7.8	3	11.3	2	3.6	59	4.8		
2014	25	2.8	8	4.4	1	3.4	4	6.6	42	3.4		

Table 24 South Dakota Resident Neonatal Deaths and Mortality Rates by Infant's Race, 2014-2023

Note: Neonatal mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 25
South Dakota Resident Neonatal Deaths and Mortality Rates by Infant's Race,

Five-fear increments, 2010-2023													
Year	White		American Indian		Black		Hispanic		American Indian & white		Total		
	Num	Rate	Num	Rate	Num	Num Rate Num Ra		Rate	Num	Rate	Rate	Rate	
2019-2023	125	3.1	57	7.7	18	9.6	12	3.4	0	0.0	220	3.9	
2018-2022	123	3.0	53	6.9	17	8.7	12	3.6	1	0.7	212	3.7	
2017-2021	141	3.4	45	5.6	21	10.6	12	3.7	2	1.4	229	4.0	
2016-2020	145	3.5	41	4.9	16	8.1	11	3.4	2	1.4	223	3.8	
2015-2019	158	3.7	46	5.3	15	8.1	10	3.2	2	1.4	239	4.0	
2014-2018	153	3.5	48	5.4	11	6.4	11	3.6	5	3.6	235	3.9	
2013-2017	160	3.6	50	5.4	14	8.8	9	3.1	5	3.9	247	4.0	
2012-2016	153	3.5	54	5.8	9	6.1	13	4.5	5	4.0	249	4.1	
2011-2015	160	3.6	56	6.0	11	8.2	13	4.7	7	5.7	264	4.3	
2010-2014	159	3.6	55	6.0	8	6.1	14	5.2	9	7.9	261	4.3	

Five-Year Increments, 2010-2023

Note: Neonatal mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

Table 26 shows that the American Indian postneonatal mortality rate has been consistently higher than the white rate for each year since 2014. Table 27 postneonatal mortality is grouped in five-year increments.

			Total				
Year	w	hite		erican dian	Total		
	Num	Rate	Num	Rate	Num	Rate	
2023	8	1.0	10	7.4	27	2.4	
2022	19	2.4	12	8.2	37	3.3	
2021	13	1.6	14	9.2	34	3.0	
2020	20	2.6	12	8.0	38	3.5	
2019	20	2.5	12	7.5	34	3.0	
2018	20	2.4	7	4.3	34	2.9	
2017	15	1.7	5	2.8	27	2.2	
2016	11	1.2	13	7.3	28	2.3	
2015	16	1.8	9	4.7	31	2.5	
2014	11	1.2	15	8.3	31	2.5	

Table 26 South Dakota Resident Postneonatal Deaths and Mortality Rates by Infant's Race, 2014-2023

Note: Postneonatal mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total. Source: South Dakota Department of Health, Office of Health Statistics

Table 27South Dakota Resident Postneonatal Deaths and Mortality Rates by Infant's Race,Five-Year Increments, 2010-2023

					Race of	Infant						
Year	White		White American Indian		Black Hispanic			American Indian & white		Total		
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019-2023	80	2.0	60	8.1	6	3.2	11	3.1	4	3.0	170	3.0
2018-2022	92	2.3	57	7.4	3	1.5	9	2.7	4	2.9	177	3.1
2017-2021	88	2.1	50	6.2	4	2.0	7	2.1	6	4.2	167	2.9
2016-2020	86	2.1	49	5.9	5	2.5	6	1.9	6	4.3	161	2.7
2015-2019	82	1.9	46	5.3	5	2.7	5	1.6	7	5.1	154	2.6
2014-2018	73	1.7	49	5.5	7	4.0	4	1.3	7	5.1	151	2.5
2013-2017	68	1.5	55	6.0	6	3.8	4	1.4	7	5.4	149	2.4
2012-2016	67	1.5	60	6.5	7	4.8	6	2.1	5	4.0	157	2.6
2011-2015	69	1.6	61	6.5	5	3.7	5	1.8	6	4.9	158	2.6
2010-2014	70	1.6	57	6.2	6	4.6	4	1.5	8	7.0	154	2.6

Note: Postneonatal mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

Table 28 shows the leading causes of infant death from 2019 to 2023. The overall leading cause of infant death for South Dakota residents was congenital malformations, deformations, and chromosomal abnormalities, which accounted for 24.9 percent of all infant deaths in South Dakota from 2019 to 2023.

The second leading cause of death was disorders related to short gestation and low birth weight with 11.0 percent.

			Race							
	То	tal		ce		-				
	10		Wh	White		American Indian		Black		anic
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
Total Deaths	390	7.0	205	5.1	117	15.7	24	12.7	23	6.5
1. Congenital malformations, deformations, & chromosomal abnormalities (Q00-Q99)	97	1.7	59	1.5	20	2.7	7	3.7	3	0.8
Chromosomal abnormalities (Q90-Q99)	22	0.4	11	0.3	3	0.4	3	1.6	3	0.8
Edward's syndrome (Trisomy 18) (Q91.0-Q91.3)	17	0.3	9	0.2	3	0.4	1	0.5	2	0.6
Congenital malformations of the heart (Q20-Q24)	19	0.3	13	0.3	4	0.5	1	0.5	0	0.0
Congenital malformations of the nervous system (Q00-Q07)	16	0.3	12	0.3	3	0.4	0	0.0	0	0.0
Anencephaly and similar malformations (Q00)	8	0.1	6	0.2	1	0.1	0	0.0	0	0.0
Congenital malformations and deformations of the musculoskeletal system, limbs, and integument (Q65-Q85)	11	0.2	8	0.2	3	0.4	0	0.0	0	0.0
Congenital diaphragmatic hernia (Q79.0)	7	0.1	4	0.1	3	0.4	0	0.0	0	0.0
Congenital malformations of the genitourinary system (Q50-Q64)	8	0.1	3	0.1	3	0.4	2	1.1	0	0.0
2. Disorders related to short gestation and low birth weight (P07)	43	0.8	21	0.5	15	2.0	6	3.2	1	0.3
3. Sudden infant death syndrome (SIDS) (R95)	31	0.6	11	0.3	12	1.6	2	1.1	4	1.1
4. Accidental suffocation and strangulation in bed (W75)	30	0.5	14	0.4	9	1.2	2	1.1	2	0.6
5. Undetermined cause of death (R96-R99)	24	0.4	17	0.4	5	0.7	1	0.5	1	0.3
6. Newborn affected by premature rupture of membranes (P01.1)	10	0.2	5	0.1	4	0.5	0	0.0	1	0.3
T7. Homicide (X85-Y09)	7	0.1	4	0.1	2	0.3	0	0.0	0	0.0
T7. Hydrops fetalis not due to hemolytic disease (P83.2)	7	0.1	6	0.2	0	0.0	0	0.0	1	0.3
T9. Brain injury due to lack of oxygen or blood (P91.6)	6	0.1	5	0.1	1	0.1	0	0.0	0	0.0
T9. Respiratory distress of newborn (P22)	6	0.1	6	0.2	0	0.0	0	0.0	0	0.0
All Other Causes	129	2.3	57	1.4	49	0.6	6	3.2	10	2.8

Table 28
South Dakota Resident Infant Deaths by Cause of Death and Race, 2019-2023

Source: South Dakota Department of Health, Office of Health Statistics

Note: Failure of races to add to the total is due to other and unknown races included in the total

FETAL MORTALITY

OVERVIEW 2023

Fetal Deaths

Number Rate per 1,000 live births + fetal deaths

During 2023, there were 75 South Dakota resident fetal deaths reported for a fetal mortality rate of 6.7 per 1,000 live births. In comparison, there were 52 fetal deaths in 2022, with a fetal mortality rate of 4.6 per 1,000 live births. Please see the Technical Notes section at the end of this report to define fetal death. Caution should be used when comparing these annual rates because the number of South Dakota resident births creates a relatively small denominator for determining fetal mortality rates; a small change in the number of fetal deaths can result in a relatively large rate change. Fetal mortality rates should be monitored over time.

Table 29
Resident Fetal Deaths and Fetal Mortality Rates,
South Dakota and United States. 2002-2023

75 6.7

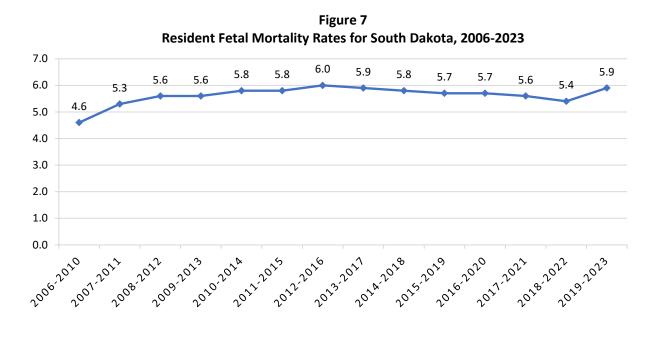
Year	United S	tates	South	Dakota
rear	Number	Mortality Rate	Number	Mortality Rate
2023	*NA	*NA	75	6.7
2022	*NA	*NA	52	4.6
2021	*NA	*NA	72	6.3
2020	20,854	5.7	66	6.0
2019	21,478	5.7	66	5.7
2018	22,459	5.9	51	4.3
2017	22,827	5.9	68	5.6
2016	23,880	6.0	84	6.8
2015	23,776	5.9	76	6.1
2014	23,980	6.0	77	6.2
2013	23,595	6.0	60	4.9
2012	24,073	6.1	72	5.9
2011	24,289	6.1	71	6.0
2010	25,258	6.0	73	6.2
2009	24,872	6.0	62	5.2
2008	26,335	6.2	61	5.0
2007	26,893	6.1	53	4.3
2006	25,972	6.1	30	2.5

Note: *2021-2023 U.S. data are not available at time of publication.

Fetal Mortality rates are per 1,000 live births + fetal deaths.

Sources: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Figure 7 displays South Dakota's fetal mortality rate grouped in five-year increments. The five-year rate is 5.9, up from 5.4 in 2018-2022. South Dakota's lowest fetal mortality rate was 4.6 in 2016-2010.



Note: Rate Per 1,000 Live Births.

FETAL MORTALITY BY RACE

							Race	of Moth	er			
Year	All Races		White		American Indian		Hispanic		Black		American Indian & White	
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019-2023	331	5.9	210	5.2	73	9.7	18	5.0	9	4.8	8	6.0
2018-2022	307	5.4	189	4.7	65	8.3	19	5.6	15	7.6	7	5.1
2017-2021	323	5.6	195	4.7	69	8.5	22	6.7	18	9.0	7	4.9
2016-2020	335	5.7	197	4.7	84	10.0	23	7.1	17	8.6	4	2.9
2015-2019	345	5.7	209	4.9	81	9.2	21	6.7	21	11.2	4	2.9
2014-2018	356	5.8	212	4.8	85	9.4	21	6.8	22	12.6	6	4.4
2013-2017	365	5.9	217	4.9	89	9.6	21	7.1	17	10.5	10	7.7
2012-2016	369	6.0	221	5.0	91	9.7	19	6.6	17	11.4	9	7.1
2011-2015	356	5.8	217	4.9	84	8.9	18	6.5	17	12.5	10	8.1
2010-2014	353	5.8	212	4.8	90	9.7	17	6.3	13	9.9	8	7.0
2009-2013	338	5.6	217	4.9	78	8.4	13	5.0	13	10.5	7	6.4
2008-2012	339	5.6	229	5.1	77	8.2	10	4.0	11	9.6	3	2.8
2007-2011	320	5.3	219	4.9	73	7.7	9	3.7	8	7.6	2	2.0
2006-2010	279	4.6	200	4.4	58	6.1	6	2.6	6	6.0	1	1.1

 Table 30

 South Dakota Resident Fetal Deaths and Mortality Rates by Race, Five-Year Increments, 2006-2023

Note: Fetal mortality rates are per 1,000 live births.

Failure of races to add to the total is due to other and unknown races included in the total.

FETAL MORTALITY BY MOTHER'S AGE

								Age of	Mothe	er						
Year	All F	laces	<	18	18-19		20-24		25-29		30-34		35-39		40+	
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019-2023	331	5.9	2	2.7	10	5.3	52	5.0	104	5.6	98	5.9	50	7.2	15	12.0
2018-2022	307	5.4	3	3.9	11	5.8	49	4.5	92	4.9	91	5.5	46	6.7	15	12.9
2017-2021	323	5.6	3	3.8	13	6.5	55	4.9	91	4.7	93	5.5	53	7.8	15	13.0
2016-2020	335	5.7	4	4.8	18	8.4	57	4.8	105	5.3	81	4.8	57	8.6	13	11.4
2015-2019	345	5.7	4	4.8	16	6.9	64	5.1	104	5.1	79	4.7	63	9.7	15	13.4
2014-2018	356	5.8	3	3.3	19	7.7	72	5.5	98	4.7	88	5.2	60	9.6	16	14.3
2013-2017	365	5.9	6	6.1	16	6.0	78	5.7	95	4.6	92	5.6	62	10.2	16	14.3
2012-2016	369	6.0	7	6.4	17	6.0	78	5.6	98	4.7	93	5.8	57	10.0	19	17.8
2011-2015	356	5.8	9	7.9	17	5.5	77	5.4	89	4.3	96	6.3	50	9.2	18	16.9
2010-2014	353	5.8	15	11.9	18	5.6	78	5.4	90	4.4	88	6.0	47	8.9	17	16.4
2009-2013	338	5.6	18	13.3	17	4.9	72	4.8	96	4.7	78	5.6	42	8.3	15	14.3
2008-2012	339	5.6	17	11.4	21	5.7	72	4.7	105	5.2	77	5.7	33	6.7	14	13.4
2007-2011	320	5.3	16	10.3	25	6.5	70	4.5	95	4.7	74	5.7	29	5.9	11	10.8
2006-2010	279	4.6	14	8.6	18	4.6	66	4.1	88	4.4	58	4.6	25	5.1	10	10.1

 Table 31

 South Dakota Resident Fetal Deaths and Mortality Rates by Mother's Age, Five-Year Increments, 2006-2023

Note: Fetal mortality rates are per 1,000 live births.

MORTALITY

OVERVIEW 2023

Total South Dakota Resident Deaths	8,500
Crude Death Rates per 100,000 Population	
South Dakota United States (2022)	924.6 984.1
Age-Adjusted Death Rates per 100,000 Pop	ulation
South Dakota United States (2022)	749.2 798.8

South Dakota resident deaths decreased from 8,955 in 2022 to 8,500 in 2023. Table 32 displays the deaths, crude death rates, and age-adjusted death rates for the United States and South Dakota residents for the past 17 years.

All race data in this section are shown for White and American Indian. The remaining categories (Black, Asian, Pacific Islander, Hispanic, and Multi-Racial) are included in the totals but are not shown specifically in any tables.

			ited States, 20	07-2023		
	U	nited States			South Dakota	a
Year	Number	Crude Rate	Age-Adjusted Rate	Number	Crude Rate	Age-Adjusted Rate
2023	NA*	NA*	NA*	8,500	924.6	749.2
2022	3,279,857	984.1	798.8	8,955	984.3	796.0
2021	3,464,231	1,043.8	879.7	9,183	1,025.6	858.2
2020	3,383,729	1,027.0	835.4	9,857	1,104.2	867.4
2019	2,854,838	869.7	715.2	8,273	935.2	739.6
2018	2,839,205	867.8	723.6	7,971	903.5	715.7
2017	2,813,503	863.8	731.9	7,991	918.9	736.1
2016	2,744,248	849.3	728.8	7,838	905.7	718.6
2015	2,712,630	844.0	733.1	7,724	899.7	714.9
2014	2,626,418	823.7	724.6	7,500	879.1	709.9
2013	2,596,993	821.5	731.9	7,079	837.9	677.4
2012	2,543,279	810.2	732.8	7,283	873.9	706.8
2011	2,515,458	807.3	741.3	7,271	882.3	716.1
2010	2,468,435	799.5	747.0	7,087	870.4	713.4
2009	2,437,163	794.5	749.6	6,913	851.1	688.6
2008	2,471,984	813.0	758.3	7,056	877.0	712.1
2007	2,423,712	803.6	760.2	6,800	853.2	695.1

 Table 32

 Resident Deaths, Crude Death Rates, and Age-Adjusted Death Rates, South Dakota

 and United States, 2007-2023

Note: *U.S. 2023 data were unavailable at publication time. Crude death rates are per 100,000 population. Age-adjusted rates are computed with the 2000 standard.

Source: National Center of Health Statistics

LEADING CAUSES OF DEATH 2023

The five leading causes of death in 2023 for South Dakota residents were heart disease, cancer, chronic lower respiratory disease, Alzheimer's disease, and stroke.

Heart disease was again the leading cause of death in South Dakota in 2023 accounting for 21.0 percent of all South Dakota resident deaths.

Cancer was the second leading cause of death in 2023 and accounted for 20.5 percent of South Dakota resident deaths. Lung cancer accounted for the most cancer deaths.

Chronic lower respiratory diseases were the third leading cause of death and accounted for 5.0 percent of 2023 South Dakota resident deaths. Chronic obstructive pulmonary disease (COPD) accounted for the most chronic lower respiratory disease deaths.

Alzheimer's disease was the fourth leading cause of death accounting for 4.7 percent of all South Dakota resident deaths in 2023.

Stroke was the fifth leading cause of death accounting for 4.5 percent of all South Dakota resident deaths in 2023.

Table 33, on the next page, lists South Dakota resident leading causes of death for the last five years. Heart disease has been the overall leading cause of death for four of the past five years. Cancer was the leading cause in 2021 with heart disease second.

COVID-19 dropped out of the top ten leading causes of death in 2023.

Alzheimer's disease was the 4th leading cause in 2023, but the 5th leading cause over the last five years.

Chronic lower respiratory diseases were the 5th leading cause in 2022 but were the 3rd leading cause in 2023.

Dementia became the 7th leading cause of death in 2023 compared to the previous year when it was the 10th leading cause.

Table 33

South Dakota Resident Leading Causes of Death, 2019-2023

Course of Dooth		2019-2023			2019			2020			2021			2022			2023	
Cause of Death	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%
South Dakota (All Deaths)		44,768	100		8,273	100		9,857	100		9,183	100		8,955	100		8,500	100
Heart Disease (I00-I09, I11, I13, I20-I51)	1	8,968	20.0	1	1,840	22.2	1	1,819	18.5	2	1,691	18.4	1	1,835	20.5	1	1,783	21.0
Cancer (C00-C97)	2	8,630	19.3	2	1,736	21.0	2	1,728	17.5	1	1,740	18.9	2	1,687	18.8	2	1,739	20.5
COVID-19 (U07)	3	2,873	6.4	*	*	*	3	1,497	15.2	3	776	8.5	3	448	5.0	*	*	*
Chronic Lower Respiratory Diseases (J40-J47)	4	2,253	5.0	3	521	6.3	5	429	4.4	4	464	5.1	5	415	4.6	3	424	5.0
Alzheimer's Disease (G30)	5	2,214	4.9	4	496	6.0	4	488	5.0	5	396	4.3	4	436	4.9	4	398	4.7
Stroke (I60-I69)	6	1,964	4.4	5	373	4.5	6	426	4.3	6	391	4.3	6	393	4.4	5	381	4.5
Diabetes (E10-E14)	7	1,521	3.4	6	287	3.5	7	329	3.3	8	306	3.3	7	336	3.8	6	263	3.1
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	8	1,234	2.8	10	154	1.9	8	235	2.4	7	329	3.6	8	281	3.1	8	235	2.8
Accidental Falls (W00-W19)	9	1,057	2.4	7	203	2.5	9	217	2.2	9	229	2.5	9	219	2.4	9	189	2.2
Dementia (F00-F03)	10	990	2.2	*	*	*	10	194	2.0	*	*	*	10	199	2.2	7	255	3.0
Suicide (U03, X60-X84, Y87.0)	*	*	*	9	185	2.2	*	*	*	10	202	2.2	*	*	*	10	180	2.1
Influenza and Pneumonia (J09-J18)	*	*	*	8	189	2.3	*	*	*	*	*	*	*	*	*	*	*	*
All Other Causes	-	13,064	29.2	-	2,289	27.7	-	2,495	25.3	-	2,659	29.0	-	2,706	30.2		2,653	31.2

Note: Letter/number combinations following cause of death are ICD-10 codes.

*This cause was not one of the 10 leading causes of death for the given year.

Due to rounding disease-specific percentages may not sum to 100.

	All Races						White					American Indian					
Cause of Death	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate		
South Dakota (All Deaths)		8,500	100	924.6	749.2		7,417	100	1,002.5	696.7		859	100	1,218.8	1,628.5		
Heart Disease (100-109, 111, 113, 120-151)	1	1,783	21.0	193.9	151.7	1	1,628	21.9	220.1	147.2	2	115	13.4	163.2	238.7		
Cancer (C00-C97)	2	1,739	20.5	189.2	147.1	2	1,579	21.3	213.4	144.1	1	118	13.7	167.4	235.4		
Chronic Lower Respiratory Diseases (J40-J47)	3	424	5.0	46.1	35.6	3	404	5.4	54.6	36.3	T10	14	1.6	19.9	31.8		
Alzheimer's Disease (G30)	4	398	4.7	43.3	34.0	4	386	5.2	52.2	34.6	*	*	*	*	*		
Stroke (160-169)	5	381	4.5	41.4	32.3	5	359	4.8	48.5	32.4	*	*	*	*	*		
Diabetes (E10-E14)	6	263	3.1	28.6	22.7	7	197	2.7	26.6	18.2	4	61	7.1	86.5	127.2		
Dementia (F00-F03)	7	255	3.0	27.7	21.6	6	242	3.3	32.7	21.6	*	*	*	*	*		
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	8	235	2.8	25.6	26.0	*	*	*	*	*	3	107	12.5	151.8	187.1		
Accidental Falls (W00-W19)	9	189	2.2	20.6	16.4	8	165	2.2	22.3	15.2	T10	14	1.6	19.9	28.3		
Suicide (U03, X60-X84, Y87.0)	10	180	2.1	19.6	20.6	10	128	1.7	17.3	17.7	5	42	4.9	59.6	60.2		
Motor Vehicle Accidents	*	*	*	*	*	*	*	*	*	*	6	41	4.8	58.2	59.8		
Homicide (X85-Y09, Y87.1)	*	*	*	*	*	*	*	*	*	*	7	30	3.5	42.6	42.1		
Accidental Drug Overdose (X40-X44)	*	*	*	*	*	*	*	*	*	*	8	29	3.4	41.1	44.4		
COVID-19 (U07)	*	*	*	*	*	9	139	1.9	18.8	12.5	*	*	*	*	*		
Septicemia (A40-A41)	*	*	*	*	*	*	*	*	*	*	9	25	2.9	35.5	51.3		
All Other Causes	-	2,653	31.2	-	-	-	2,190	29.5	-	-	-	263	30.6	-	-		

Table 34South Dakota Resident Leading Causes of Death by Race, 2023

Note: Letter/number combinations following cause of death are ICD-10 codes. Due to rounding, disease-specific percentages may not sum to 100.

* This cause was not one of the 10 leading causes of death for the given race.

RACE

Table 34, on the previous page, shows South Dakota resident leading causes of death by race as well as crude death rates and age-adjusted death rates.

In 2023, patterns for the 10 leading causes of death varied by race. Only six of the 10 leading causes were the same for whites and American Indians. For example, Alzheimer's disease, stroke, COVID-19, and dementia were in the top 10 for whites, but not American Indians.

At the same time, chronic liver disease and cirrhosis, motor vehicle accidents, accidental drug overdose, homicides, and septicemia were in the top 10 for American Indians, but not whites.

Heart disease was the leading cause of death for whites, while cancer was the leading cause for American Indians.

GENDER

Table 35, on the following page, presents South Dakota resident leading causes of death by gender as well as crude death rates and age-adjusted death rates.

In 2023 patterns for the 10 leading causes of death in South Dakota also varied by gender. Eight of the 10 leading causes were the same for South Dakota's men and women, but they differed in rank. For example, Alzheimer's disease was the third leading cause for women, but only the seventh leading cause for men. Dementia was the sixth leading cause for women but was not a leading cause for men.

Heart disease was the leading cause of death for men, but cancer was the leading cause for women.

Suicide and motor vehicle accidents were among the 10 leading causes of death for South Dakota's men, but not for women. At the same time, dementia and COVID-19 were both in the top ten for women, but not for men.

			Tota	al				Mal	е				Fema	le	
Cause of Death	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate	Rank	Deaths	%	Crude Rate	Age- Adjusted Rate
South Dakota (All Deaths)		8,500	100	924.6	749.2		4,495	100	961.7	894.5		4,005	100	886.2	629.8
Heart Disease (100-109, 111, 113, 120-151)	1	1,783	21.0	193.9	151.7	1	1,058	23.5	226.4	208.9	2	725	18.1	160.4	105.9
Cancer (C00-C97)	2	1,739	20.5	189.2	147.1	2	927	20.6	198.3	171.4	1	812	20.3	179.7	129.8
Chronic Lower Respiratory Diseases (J40-J47)	3	424	5.0	46.1	35.6	3	218	4.8	46.6	42.2	T4	206	5.1	45.6	31.6
Alzheimer's Disease (G30)	4	398	4.7	43.3	34.0	7	135	3.0	28.9	30.0	3	263	6.6	58.2	36.3
Stroke (160-169)	5	381	4.5	41.4	32.3	4	175	3.9	37.4	35.0	Т4	206	5.1	45.6	30.2
Diabetes (E10-E14)	6	263	3.1	28.6	22.7	5	150	3.3	32.1	28.7	7	113	2.8	25.0	17.9
Dementia (F00-F03)	7	255	3.0	27.7	21.6	*	*	*	*	*	6	164	4.1	36.3	22.5
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	8	235	2.8	25.6	26.0	8	133	3.0	28.5	27.6	8	102	2.5	22.6	24.5
Accidental Falls (W00-W19)	9	189	2.2	20.6	16.4	10	97	2.2	20.8	20.2	9	92	2.3	20.4	13.4
Suicide (U03, X60-X84, Y87.0)	10	180	2.1	19.6	20.6	6	136	3.0	29.1	30.2	*	*	*	*	*
Motor Vehicle Accidents	*	*	*	*	*	9	108	2.4	23.1	23.0	*	*	*	*	*
COVID-19 (U07)	*	*	*	*	*	*	*	*	*	*	10	77	1.9	17.0	11.5
All Other Causes	-	2,653	31.2	-	-	-	1,358	30.2	-	-	-	1,245	31.1	-	-

Table 35South Dakota Resident Leading Causes of Death by Gender, 2023

Note: Letter/number combinations following the cause of death are ICD-10 codes. Due to rounding, disease-specific percentages may not sum to 100.

*This cause was not one of the 10 leading causes of death for this gender.

Table 36South Dakota Resident Five Leading Causes of Death by Age Group, 2019-2023

Rank	All Ages	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90 & over
1	Heart Disease 1,794	Motor Vehicle Accidents 3	Suicide 22	Suicide 43	Chronic Liver Disease and Cirrhosis 41	Chronic Liver Disease and Cirrhosis 53	Cancer 156	Cancer 406	Cancer 509	Heart Disease 492	Heart Disease 436
2	Cancer 1,726	Accidental Drowning 3	Motor Vehicle Accidents 16	Motor Vehicle Accidents 26	Suicide 34	Heart Disease 49	Heart Disease 126	Heart Disease 283	Heart Disease 384	Cancer 423	Alzheimer's Disease 200
3	COVID-19 (2020-2023) 718	Homicide 3	Homicide 4	Accidental Drug Overdose 15	Motor Vehicle Accidents 25	Cancer 44	Chronic Liver Disease and Cirrhosis 62	COVID-19 (2020-2023) 113	COVID-19 (2020-2023) 169	COVID-19 (2020-2023) 205	Cancer 163
4	Chronic Lower Respiratory Diseases 451	Congenital Malformations, Deformations, and Chromosomal Abnormalities 2	Accidental Drug Overdose 2	Chronic Liver Disease and Cirrhosis 11	Accidental Drug Overdose 23	Suicide 27	COVID-19 (2020-2023) 51	Chronic Lower Respiratory Disease 69	Chronic Lower Respiratory Disease 144	Alzheimer's Disease 185	COVID-19 (2020-2023) 146
5	Alzheimer's Disease 443	Cancer 2	Cancer 2	Homicide 10	Cancer 18	Motor Vehicle Accidents 21	Diabetes 33	Diabetes 58	Diabetes 83	Chronic Lower Respiratory Disease 149	Stroke 112

Deaths per Year

Table 36, on the previous page, lists the five leading causes of death by age group for the last five years combined. Motor vehicle accidents, accidental drowning, and homicide were tied for the leading cause of deaths for 1-9 year olds. Suicides were the leading cause of death for 10-29 year olds. Chronic liver disease and cirrhosis was the leading cause for 30-49 year olds. The leading cause of death for persons 50-79 was cancer. Heart disease was the leading cause of death for persons aged 80 and older.

MEDIAN AGE

Figure 8 presents data on the median age at death for the 10 leading causes of death for South Dakota residents in 2023. The median age for the 10 leading causes of death in 2023 ranged from 39 for suicide to 90 for dementia.

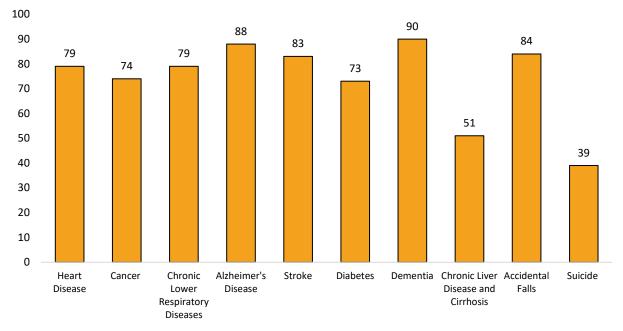


Figure 8 Median Age at Death for South Dakota Residents for the Leading Causes of Death, 2023

Source: South Dakota Department of Health, Office of Health Statistics

Table 37 shows the median age at death for the given years by race and gender. When looking at race, American Indians have a much lower median age at death at 56, while whites' median age at death was 79. The median age at death for males was 75, while females was 81.

Table 37
Median Age at Death for South Dakota Residents by Race, Gender, and Year of Death, 2005-2023

					··· , ··· ·
Year of Death	Total Median Age	White	American Indian	Male	Female
Death	weulan Age				
2023	77	79	56	75	81
2022	77	79	55	74	80
2021	76	78	55	73	80
2020	79	81	60	75	82
2015	80	81	56	76	83
2010	80	81	58	77	84
2005	80	81	58	76	83

Source: South Dakota Department of Health, Office of Health Statistics

AGE

Table 38 shows the median age at death for South Dakota residents for the leading causes of death by race and gender. In 2023, the median age at death for whites ranged from 43 for suicide to 90 for dementia. The range for American Indians was 28 for suicides to 74 for chronic lower respiratory diseases. For males the range in 2023 was 41 for suicide to 86 for Alzheimer's disease. The range for females was 49 for chronic liver disease and cirrhosis to 91 for dementia.

	Median Age at Death in Ye										
	All	Ra	ace	Ge	nder						
Cause of Death	Total Deaths	White	American Indian	Male	Female						
South Dakota (All Deaths)	77	79	56	75	81						
Heart Disease (100-109, 111, 113, 120-151)	79	81	64	76	84						
Cancer (C00-C97)	74	75	67	74	74						
Chronic Lower Respiratory Diseases (J40-J47)	79	79	74	79	80						
Alzheimer's Disease (G30)	88	88	*	86	89						
Stroke (160-169)	83	83	*	77	85						
Diabetes (E10-E14)	73	75	66	73	73						
Dementia (F00-F03)	90	90	*	*	91						
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	51	*	45	53	49						
Accidental Falls (W00-W19)	84	86	60	81	88						
Suicide (U03, X60-X84, Y87.0)	39	43	28	41	*						
COVID-19 (U07)	*	84	*	*	85						
Motor Vehicle Accidents	*	*	32	42	*						
Homicide (X85-Y09, Y87.1)	*	*	32	*	*						
Accidental Drug Overdose (X40-X44)	*	*	31	*	*						
Septicemia (A40-A41)	*	*	55	*	*						

Table 38Median Age at Death for South Dakota Residents for the Leading Causes of Deathby Race and Gender, 2023

Note: Letter/number combinations following the cause of death are ICD-10 codes. *This cause was not one of the 10 leading causes of death for this race or gender.

Source: South Dakota Department of Health, Office of Health Statistics

UNINTENTIONAL INJURIES

Table 39, on the following page, displays the breakdown of deaths due to unintentional injuries for each of the past five years.

The highest number of deaths in 2023 for this category was accidental falls at 189 deaths. Motor vehicle accidents accounted for 145 deaths with car accidents involved in the most deaths in this category at 59 deaths.

The third highest number of deaths due to unintentional injury in 2023 was accidental drug overdose with 73 deaths.

Table 39South Dakota Resident Leading Causes of Death Due to Unintentional Injuries, 2019-2023

		Year of Death							
	Total	2019	2020	2021	2022	2023			
Total Deaths	2,760	502	559	590	586	523			
1. Accidental Falls (W00-W19)	1,056	202	217	229	219	189			
2. Motor Vehicle Accidents	765	130	153	172	165	145			
Occupant of Car (V40-V49)	313	51	56	78	69	59			
Occupant of Pick-Up or Van (V50-V59)	122	28	26	21	28	19			
Pedestrian (V01-V09)	94	11	17	21	21	24			
Motorcycle rider (V20-V29)	67	13	18	13	10	13			
Occupant of special all-terrain Vehicle (V86)	52	6	13	9	11	13			
Occupant of Heavy Transport Vehicle (V60-V69)	13	1	2	3	2	5			
Pedal Cyclist (V10-V19)	7	0	1	3	3	0			
All Other Motor Vehicle Accidents	5	1	0	1	3	0			
Motor Vehicle Accident with Unspecified Details	92	19	20	23	18	12			
3. Accidental Drug Overdose (X40-X44)	383	71	70	86	83	73			
4. Accidental Poisoning by and Exposure to Alcohol (X45)	71	12	23	15	11	10			
5. Accidental Exposure to Smoke, Fire, and Flames (X00-X09)	63	11	11	19	12	10			
6. Accidental Drowning (W65-W74)	56	12	13	13	12	6			
7. Exposure to Excessive Natural Cold (X31)	51	10	8	9	15	9			
8. Choking on Food (W79)	36	7	3	5	8	13			
T9. Choking on any object except food (W80)	17	0	5	3	2	7			
T9. Accidental discharge of firearms (W32-W34)	17	0	5	0	7	5			
All Other Causes of Unintentional Injury	245	47	51	39	52	56			

Source: South Dakota Department of Health, Office of Health Statistics

TOBACCO USE

On the death certificate, the certifier was instructed to check "yes" or "probably" if in their opinion, the use of tobacco contributed to death or check "no" if in their clinical judgment tobacco use did not contribute to the death. There was also the option of "unknown" if the certifier was unsure if tobacco use contributed to death.

On 1,430 deaths, or 18.6 percent, the certifier indicated "yes" or "probably" that tobacco use contributed to the natural death. Conversely, on 4,204 deaths, or 54.8 percent, the certifier indicated that tobacco use did not contribute to the natural death.

In the remaining 2,038 deaths, or 26.6 percent, the certifier was unsure if tobacco use contributed to the natural death.

Table 40, on the following page, displays the 10 leading causes of natural death where the certifier said "yes" or "probably" that tobacco use contributed to the death.

Tobacco use contributed to death in 73.3 percent, or 22 out of the 30 emphysema deaths in 2023. In 65.5 percent, or 239 lung, trachea, and bronchus cancer deaths the certifier said "yes" or "probably" that tobacco use contributed to the death.

 Table 40

 South Dakota Resident Leading Causes of Natural Death as They Relate to Tobacco Use, 2023

 (Did Tobacco Use Contribute to Death)

Cause of Death	Yes/Pr	obably	Total Nat	ural Deaths
	Number	Percent	Number	Percent
Total	1,430	18.6	7,672	100
Cancer (C00-C97)	423	24.3	1,739	100
Lung, trachea, and bronchus cancer (C33-C34)	239	65.5	365	100
Esophagus cancer (C15)	18	34.0	53	100
Heart disease (100-109, 111, 113, 120-151)	301	16.9	1,782	100
Coronary artery disease (I20-I25)	211	20.1	1,048	100
Acute myocardial infarction (I21-I22)	139	22.3	623	100
Atherosclerotic heart disease (I25.1)	56	17.4	321	100
Hypertensive heart disease (I11)	26	16.0	162	100
Chronic lower respiratory diseases (J40-J47)	264	62.3	424	100
Chronic obstructive pulmonary disease, unspecified (J44.9)	179	63.0	284	100
Chronic obstructive pulmonary disease with acute lower respiratory infection (J44.0)	29	50.0	58	100
Chronic obstructive pulmonary disease with acute exacerbation (J44.1)	27	69.2	39	100
Emphysema (J43)	22	73.3	30	100
Stroke (160-169)	43	11.3	381	100
Diabetes (E10-E14)	42	16.0	263	100
Chronic liver disease and cirrhosis (K70 & K73-K74)	36	15.3	235	100
Alcoholic liver disease (K70)	34	17.6	193	100
COVID-19 (U07)	31	20.5	151	100
Chronic alcohol abuse (F10)	18	31.0	58	100
Hypertension (I10, I12, I15)	17	16.7	102	100
High cholesterol/triglycerides (E78)	17	25.0	68	100

Note: Table does not include infant deaths.

DRUG OVERDOSE DEATHS

Figures 9-10 and Tables 41-42 on the following pages break down the drug overdose deaths for South Dakota residents for the past 16 years by the manner of death, year of death, and type of drug.

As shown in Figure 9 there were 95 drug overdose deaths in 2023, down slightly from 96 drug overdose deaths in 2022. Table 41 shows that of the 95 drug overdose deaths in 2023, 73 deaths were unintentional, 20 deaths were suicides, and two deaths where the intent was undetermined. The definition of drug overdose deaths is located at the back of this report within the Technical Notes section.

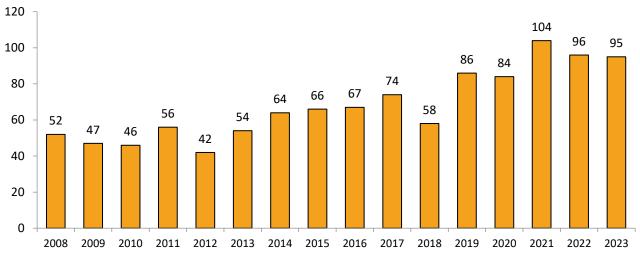


Figure 9 South Dakota Resident Deaths Due to Drug Overdoses, 2008-2023

Source: South Dakota Department of Health, Office of Health Statistics

Table 41South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for All Drugs,2008-2023

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Total	52	47	46	56	42	54	64	66	67	74	58	86	84	104	96	95
Unintentional	30	26	19	41	24	34	46	44	52	54	43	71	70	86	84	73
Suicide	13	12	16	11	11	15	12	19	12	18	11	10	10	17	9	20
Homicide	0	1	0	0	0	1	0	0	1	0	0	0	1	0	0	0
Undetermined Intent	9	8	11	4	7	4	6	3	2	2	4	5	3	1	3	2

Figure 10 South Dakota Resident Deaths Due to All Opioid Poisoning, 2008-2023

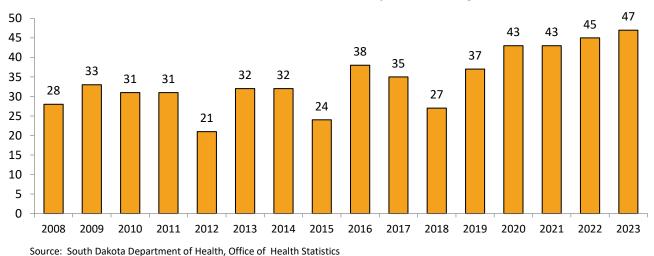


Table 42

South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for All Opioid Poisoning, 2008-2023

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Total	28	33	31	31	21	32	32	24	38	35	27	37	43	43	45	47
Unintentional	18	22	15	26	15	21	27	19	31	28	22	32	41	35	40	40
Suicide	4	6	8	3	2	9	2	4	6	7	3	3	1	8	3	5
Homicide	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Undetermined Intent	6	4	8	2	4	2	3	1	1	0	1	2	1	0	2	2

Source: South Dakota Department of Health, Office of Health Statistics

The following tables (43 and 44) show the specific drugs involved in drug overdose deaths for 2023 and for the past 10 years. Out of the 95 total drug deaths in 2023, 39 of those involved fentanyl and 30 involved methamphetamine. Of those 39 involving fentanyl, 21 listed fentanyl as the only drug, while the other 18 deaths involved at least one other drug. For methamphetamine, 20 of the 30 deaths only involved methamphetamine, while the other 10 involved at least one other drug.

The following is an explanation of what is represented regarding "Drugs Involved" in deaths due to a drug overdose:

- Please note that just because a drug is involved in a drug overdose death doesn't necessarily mean the overdose was due to that specific drug. It just means that drug was mentioned on the death certificate of a drug overdose death. Sometimes we have no way of knowing which drug caused the overdose in cases where multiple drugs are listed.
- Please be aware that when more than one drug is "involved" in a drug overdose, each drug is counted separately. For example, if methamphetamine and heroin are both listed on the death certificate, each drug will be counted once even though it's just one death.
- Also, if something like Vicodin, which is a combination of drugs, is listed on the death certificate, each drug will be counted and "involved" in the overdose.
- Analogs of fentanyl are included in the total for fentanyl.

Table 43South Dakota Resident Deaths Due to Drug Overdose by Drugs Involved, 2023

		Number of Specific on Death Cer	-
Drugs Involved	Number of Deaths	Only Drug Involved	Other Drugs Involved
1. Fentanyl (Includes analogs)	39	21	18
2. Methamphetamine	30	20	10
3. Cocaine (Benzoylecgonine)	11	4	7
4. Hydroxyzine	5	1	4
T5. Dextromethorphan	3	0	3
T5. Diphenhydramine (Benadryl)	3	3	0
T5. Hydrocodone (Vicodin)	3	3	0
T5. Tramadol	3	3	0

Note: ICD -10 Codes: X40-X44, X60-X64, X85, Y10-Y14

Table 44
South Dakota Resident Deaths Due to Drug Overdose by Drugs Involved and Year of Death, 2014-2023

South Dakota Resident Dea Drugs Involved and Number of			0				f Death				
Specific Drugs on Death Certificate	Total	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Methamphetamine	268	14	13	18	22	13	31	30	52	45	30
Only Drug Involved	179	10	8	10	12	10	25	19	39	26	20
Other Drugs Involved	89	4	5	8	10	3	6	11	13	19	10
Fentanyl (Includes Analogs)	201	7	7	7	12	12	23	30	29	35	39
Only Drug Involved	111	4	6	2	6	8	18	11	15	20	21
Other Drugs Involved	90	3	1	5	6	4	5	19	14	15	18
Oxycodone (Oxycontin, Percocet, Percodan)	52	8	2	9	5	7	4	6	7	3	1
Only Drug Involved	22	5	2	2	2	4	1	2	2	1	1
Other Drugs Involved	30	3	0	7	3	3	3	4	5	2	0
Cocaine (Benzoylecgonine)	49	0	3	3	3	8	5	5	6	5	11
Only Drug Involved	17	0	0	0	1	4	2	2	2	2	4
Other Drugs Involved	32	0	3	3	2	4	3	3	4	3	7
Hydrocodone (Vicodin)	41	5	7	10	4	2	2	3	4	1	3
Only Drug Involved	16	2	2	5	2	1	0	1	0	0	3
Other Drugs Involved	25	3	5	5	2	1	2	2	4	1	0
Morphine	38	11	1	7	3	1	8	4	1	1	1
Only Drug Involved	12	6	0	2	1	0	1	0	1	1	0
Other Drugs Involved	26	5	1	5	2	1	7	4	0	0	1
Heroin	37	2	3	8	8	5	3	6	2	0	0
Only Drug Involved	14	0	1	4	3	2	1	2	1	0	0
Other Drugs Involved	23	2	2	4	5	3	2	4	1	0	0
Bupropion (Wellbutrin)	24	2	0	1	3	3	5	2	3	3	2
Only Drug Involved	16	2	0	0	1	2	4	1	2	2	2
Other Drugs Involved	8	0	0	1	2	1	1	1	1	1	0
Diphenhydramine (Benadryl)	24	2	4	2	1	2	3	1	3	3	3
Only Drug Involved	13	2	2	1	1	1	1	0	1	1	3
Other Drugs Involved	11	0	2	1	0	1	2	1	2	2	0

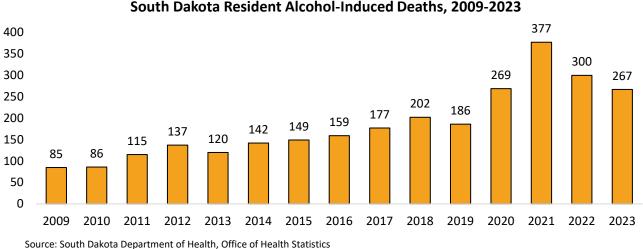
Drugs Involved and Number of		Year of Death									
Specific Drugs on Death Certificate	Total	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Amphetamine (Adderall)	22	2	2	1	3	0	1	3	3	6	1
Only Drug Involved	5	0	0	0	1	0	1	1	0	2	0
Other Drugs Involved	17	2	2	1	2	0	0	2	3	4	1
Methadone (Methadose)	22	6	4	4	4	3	1	0	0	0	0
Only Drug Involved	10	3	3	1	1	2	0	0	0	0	0
Other Drugs Involved	12	3	1	3	3	1	1	0	0	0	0
Acetaminophen (Darvocet, Excedrin,	18	2	3	2	1	0	0	2	3	3	2
Percocet, Tylenol, Vicodin)											
Only Drug Involved	9	2	2	0	0	0	0	0	1	2	2
Other Drugs Involved	9	0	1	2	1	0	0	2	2	1	0
Amitriptyline	18	1	1	4	3	2	2	2	3	0	0
Only Drug Involved	2	0	0	0	1	0	0	0	1	0	0
Other Drugs Involved	16	1	1	4	2	2	2	2	2	0	0
Tramadol	17	0	2	3	1	0	2	1	4	1	3
Only Drug Involved	7	0	1	0	0	0	1	0	1	1	3
Other Drugs Involved	10	0	1	3	1	0	1	1	3	0	0
Citalopram (Celexa)	17	3	0	0	2	1	2	3	4	1	1
Only Drug Involved	1	0	0	0	0	0	0	1	0	0	0
Other Drugs Involved	16	3	0	0	2	1	2	2	4	1	1
Quetiapine (Seroquel)	15	0	0	3	4	1	3	1	1	1	1
Only Drug Involved	5	0	0	1	1	1	0	1	0	1	0
Other Drugs Involved	10	0	0	2	3	0	3	0	1	0	1
Gabapentin	13	0	0	1	1	1	2	1	4	2	1
Only Drug Involved	1	0	0	0	0	1	0	0	0	0	0
Other Drugs Involved	12	0	0	1	1	0	2	1	4	2	1
Hydroxyzine	10	1	0	0	1	0	2	0	1	0	5
Only Drug Involved	1	0	0	0	0	0	0	0	0	0	1
Other Drugs Involved	9	1	0	0	1	0	2	0	1	0	4
Fluoxetine (Prozac)	10	1	0	2	1	0	0	2	1	2	1
Only Drug Involved	2	0	0	0	1	0	0	0	0	0	1
Other Drugs Involved	8	1	0	2	0	0	0	2	1	2	0
Alprazolam (Xanax)	10	1	0	1	0	3	1	1	3	0	0
Only Drug Involved	1	1	0	0	0	0	0	0	0	0	0
Other Drugs Involved	9	0	0	1	0	3	1	1	3	0	0

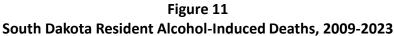
Table 44 (continued) South Dakota Resident Deaths Due to Drug Overdose by Drugs Involved and Year of Death, 2014-2023

Note: ICD-10 CODES X40-X44, X60-X64, X85, Y10-Y14

ALCOHOL-INDUCED DEATHS

Figure 11 shows the alcohol induced deaths for South Dakota residents for the past 15 years. The definition of alcohol-induced deaths is located in the back of this report within the technical notes section.





FARM ACCIDENT DEATHS

Figure 12 shows the number of South Dakota resident deaths due to farm accidents for the past 15 years. The definition of farm accident deaths is located in the back of this report within the technical notes section.

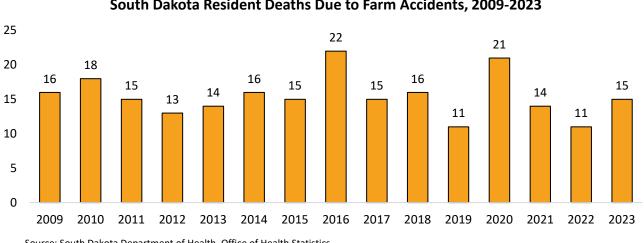


Figure 12 South Dakota Resident Deaths Due to Farm Accidents, 2009-2023

MATERNAL MORTALITY

Table 45 shows maternal mortality deaths for the past 10 years. Specific definitions are located in the notes below the table.

Pregna	nt at the Time of Death or	Pregnant at the Time of Death or Within One Year After Delivery, 2014-2023									
	Any Death While		Pregnancy								
Year	Pregnant, or Within One	Pregnancy-Related	Associated, But Not								
	Year After Delivery	Tregnancy Related	Pregnancy-Related								
2023	8	*	*								
2022	15	*	*								
2021	13	*	*								
2020	8	1	7								
2019	6	0	6								
2018	8	1	7								
2017	5	1	4								
2016	6	2	4								
2015	5	2	3								
2014	5	1	4								

Table 45 South Dakota Resident Deaths Occurring in South Dakota to Women Who Were Pregnant at the Time of Death or Within One Year After Delivery. 2014-2023

Source: South Dakota Department of Health, Office of Health Statistics

Note: <u>Pregnancy-related</u>: Death resulting from: 1) complications of the pregnancy itself, or 2) the chain of events initiated by the pregnancy that led to death, or 3) aggravation of an unrelated condition by the physiologic or pharmacologic effects of the pregnancy that subsequently caused death during pregnancy or within one calendar year of termination of pregnancy, regardless of the duration or anatomical site of pregnancy. This designation comes from the CDC as part of the Pregnancy Mortality Surveillance System (PMSS). *--The latest year they have reviewed for South Dakota is 2020.

<u>Pregnancy-associated, but not pregnancy-related</u>: Death of a woman from any cause, while she is pregnant or within one calendar year of termination of pregnancy, regardless of the duration or anatomical site of pregnancy, but not pregnancy related (see above). This designation comes from the CDC as part of the Pregnancy Mortality Surveillance System (PMSS). *--The latest year they have reviewed for South Dakota is 2020.

Table 46 shows the external causes contributing to death while pregnant within one year after delivery. The top three causes for the past ten years combined were accidental drug overdose, motor vehicle accidents, and suicides.

Table 46South Dakota Resident Leading Causes of External Death While Pregnant or WithinOne Year After Delivery by Cause of Death, 2014-2023

External Cause of Death	Total
Accidental drug overdose (X40-X44)	12
Motor vehicle accidents	12
Suicide (X60-X84, Y87.0)	12
Homicide (X85-Y09, Y87.1)	5

Table 47 shows the causes contributing to a pregnancy death. The top two causes for the past ten years were kidney disease and respiratory failure.

Cause of Death	Total
Kidney disease (N00-N07, N17-N19, N25-N27)	5
Respiratory failure (J96)	5
Influenza and pneumonia (J09-J18)	4
COVID-19 (U07)	4
Cancer (C00-C97)	3
Heart disease (100-109, 111, 113, 120-151)	3
Cerebrovascular disease (160-169)	3

Table 47Contributing Causes of Natural Death While Pregnant or Within OneYear of Giving Birth, 2014-2023

Source: South Dakota Department of Health, Office of Health Statistics

FIREARM DEATHS

Table 48 shows firearm deaths for South Dakota residents for the past 10 years. The definition of firearm deaths is located in the back of this report within the Technical Notes section.

	Total			Manner of I	Death	
Year	Firearm Deaths	Suicide	Homicide	Accident	Legal Intervention	Undetermined Intent
2023	112	89	11	5	4	3
2022	138	96	27	7	7	1
2021	128	98	25	0	4	1
2020	120	87	27	5	1	0
2019	113	101	10	0	2	0
2018	117	91	16	7	3	0
2017	102	83	12	2	4	1
2016	107	83	14	5	5	0
2015	95	73	14	5	2	1
2014	90	76	9	2	3	0

Table 48South Dakota Resident Deaths Due to Firearms, 2014-2023

MARRIAGE & DIVORCE

OVERVIEW 2023

Marriages:	
Number Occurring in S.D.	5,471
S.D. Rate per 1,000 Population	6.0
U.S. Rate per 1,000 Population	6.2*
**Divorces:	
Number Occurring in S.D.	2,113
S.D. Rate Per 1,000 Population	2.3
U.S. Rate per 1,000 Population	2.4*
Years Married Before Termination in S.D.	
Mean	11
Median	9
Mode	2
Range	
Lower	Less Than 1
Upper	56

Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics Note: *The U.S. marriage and divorce rates are provisional from 2022.

The U.S. divorce rate only includes 45 reporting states and the District of Columbia. ****** Divorces include annulments.

MARRIAGES

In 2023, the South Dakota marriage rate decreased to 6.0, down from 6.4 in 2022. **The marriage rate in 2023** was the lowest ever in South Dakota. Table 49 provides the United States and South Dakota marriage rates from 2009 through 2023.

Year	United	States*	Sout	h Dakota
icai	Number	Crude Rate	Number	Crude Rate
2023	NA**	NA**	5,471	6.0
2022	2,065,905	6.2	5,826	6.4
2021	1,985,072	6.0	5,636	6.3
2020	1,676,911	5.1	5,359	6.0
2019	2,015,603	6.1	5,403	6.1
2018	2,132,853	6.5	5,757	6.5
2017	2,236,496	6.9	5,862	6.7
2016	2,251,411	7.0	6,271	7.2
2015	2,221,579	6.9	6,195	7.2
2014	2,140,272	6.9	6,040	7.1
2013	2,081,301	6.8	5,919	7.0
2012	2,131,000	6.8	6,236	7.5
2011	2,118,000	6.8	6,145	7.5
2010	2,096,000	6.8	5,939	7.3
2009	2,080,000	6.8	5,887	7.2

 Table 49

 Marriages and Marriage Rates by Occurrence, South Dakota and United States, 2009-2023

Note: *The marriage data for the United States are provisional for all years. **2023 data are not available at the time of publication. Crude marriage rates are per 1,000 population. The 2013 and 2014 U.S. number and rate excludes data from Georgia. Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Table 50 displays marriages by month over the past five years. The most common time to have a wedding for most years is from June to October.

1										
	201	19	202	20	202	21	202	22	202	23
Year	Num	%								
Total	5,403	100	5,359	100	5,636	100	5,826	100	5,471	100
January	204	3.8	209	3.9	212	3.8	212	3.6	183	3.3
February	207	3.8	276	5.2	199	3.5	303	5.2	176	3.2
March	229	4.2	220	4.1	238	4.2	236	4.1	249	4.6
April	245	4.5	217	4.0	282	5.0	300	5.1	270	4.9
May	459	8.5	333	6.2	524	9.3	495	8.5	469	8.6
June	816	15.1	587	11.0	774	13.7	740	12.7	757	13.8
July	584	10.8	545	10.2	710	12.6	653	11.2	610	11.1
August	771	14.3	803	15.0	655	11.6	702	12.0	601	11.0
September	771	14.3	789	14.7	775	13.8	831	14.3	899	16.4
October	538	10.0	761	14.2	658	11.7	727	12.5	614	11.2
November	290	5.4	295	5.5	286	5.1	320	5.5	324	5.9
December	289	5.3	324	6.0	323	5.7	307	5.3	319	5.8

Table 50 Month of Marriages Occurring in South Dakota, 2019-2023

Source: South Dakota Department of Health, Office of Health Statistics

DIVORCES IN SOUTH DAKOTA

Table 51 lists the divorce rates for South Dakota and the United States. The 2023 South Dakota divorce rate was 2.3 divorces per 1,000 population, which is the lowest divorce rate since 1972.

	South Dakot	a and United s	States, 2009	-2023
Year	United	States*	Sout	h Dakota
Tear	Number	Crude Rate	Number	Crude Rate
2023	NA**	NA**	2,113	2.3
2022	673,989	2.4	2,113	2.3
2021	689,308	2.5	2,211	2.5
2020	630,505	2.3	2,226	2.5
2019	746,971	2.7	2,308	2.6
2018	782,038	2.9	2,265	2.6
2017	787,251	2.9	2,340	2.7
2016	776,288	3.0	2,400	2.8
2015	800,909	3.1	2,252	2.6
2014	813,862	3.2	2,374	2.8
2013	832,157	3.3	2,450	2.9
2012	851,000	3.4	2,550	3.1
2011	877,000	3.6	2,694	3.3
2010	872,000	3.6	2,774	3.4
2009	840,000	3.5	2,686	3.3

Table 51Number and Rate of Divorces by Occurrence,South Dakota and United States, 2009-2023

Note: *The U.S. data are provisional for all years. Crude divorce rates are per 1,000 population. **2023 data are not available at time of publication. The years 2017, 2018, 2019, 2020, 2021, and 2022 excludes data from California, Hawaii, Indiana, Minnesota, and New Mexico. The year 2016 excludes data for California, Georgia, Hawaii, Indiana, Minnesota, and New Mexico. The years 2013-2015 exclude California, Georgia, Hawaii, Indiana, and Minnesota. The years 2009-2012 exclude data for California, Georgia, Hawaii, Indiana, Georgia, Hawaii, Indiana, Louisiana, and Minnesota.

Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

For South Dakota, the mean or average duration of the marriages ending in divorce during 2023 was 11 years, the median duration was nine years, and the modal duration was two years. The length of time before terminating the marriage ranged from less than one year to 56 years for South Dakota divorces in 2023.

Table 52 displays the duration of marriages ending in divorce for the past 10 years. In 2023, zero to four years and five to nine years is the length most marriages lasted with 28.4 and 24.9 percent, respectively.

	0-4 Y	'ears	5-9 Y	ears	10-14	Years	15-19	Years	20-24	Years	25-29	Years	30+ Y	ears
Year	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	600	28.4	527	24.9	345	16.3	229	10.8	187	8.8	104	4.9	121	5.7
2022	573	27.1	553	26.2	352	16.7	222	10.5	169	8.0	101	4.8	143	6.8
2021	653	29.5	524	23.7	371	16.8	243	11.0	165	7.5	114	5.2	141	6.4
2020	646	29.0	583	26.2	354	15.9	240	10.8	185	8.3	92	4.1	126	5.7
2019	658	28.5	560	24.3	410	17.8	259	11.2	169	7.3	100	4.3	152	6.6
2018	692	30.6	563	24.9	368	16.2	276	12.2	165	7.3	98	4.3	103	4.5
2017	719	30.8	543	23.2	374	16.0	278	11.9	178	7.6	115	4.9	131	5.6
2016	791	33.0	553	23.0	386	16.1	253	10.5	175	7.3	105	4.4	137	5.7
2015	735	32.6	528	23.4	355	15.8	231	10.3	182	8.1	94	4.2	127	5.6
2014	755	31.8	591	24.9	359	15.1	235	9.9	193	8.1	114	4.8	127	5.3

Table 52 Duration of Marriage Ending in Divorce Occurring in South Dakota, 2014-2023

Table 53 displays the number of children involved in divorces for the past 10 years. Over half (53.6%) of all divorces in 2023 did not include children.

	Tot	al	No Children Involved		1 Cł Invol	-	2 Chi Invo	ldren Ived	3 Children Involved		Child	4 or More Children Involved		tated
Year	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2023	2,113	100	1,133	53.6	406	19.2	361	17.1	164	7.8	49	2.3	0	-
2022	2,113	100	1,126	53.3	373	17.7	413	19.5	144	6.8	57	2.7	0	-
2021	2,211	100	1,198	54.2	402	18.2	382	17.3	161	7.3	68	3.1	0	-
2020	2,226	100	1,174	52.7	420	18.9	404	18.1	179	8.0	49	2.2	0	-
2019	2,308	100	1,204	52.2	443	19.2	423	18.3	186	8.1	52	2.3	0	-
2018	2,265	100	1,164	51.4	412	18.2	446	19.7	179	7.9	64	2.8	0	-
2017	2,340	100	1,227	52.4	410	17.5	485	20.7	159	6.8	59	2.5	0	-
2016	2,400	100	1,298	54.1	459	19.1	432	18.0	166	6.9	43	1.8	2	-
2015	2,252	100	1,190	52.8	444	19.7	404	17.9	166	7.4	48	2.1	0	-
2014	2,374	100	1,256	52.9	502	21.2	414	17.4	156	6.6	45	1.9	1	-

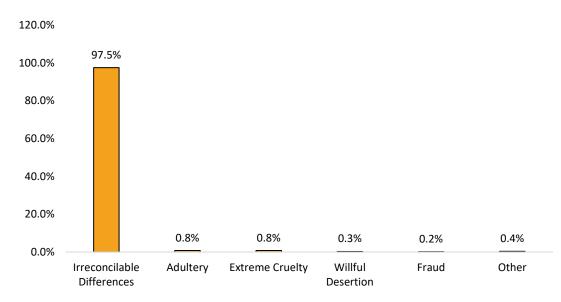
 Table 53

 Number of Children Involved in Divorce Occurring in South Dakota, 2014-2023

Source: South Dakota Department of Health, Office of Health Statistics

Figure 13, on the next page, displays causes for the divorce. Most divorces in 2023 stated irreconcilable differences with 97.5 percent.

Figure 13 Causes for Divorce Occurring in South Dakota, 2023



INFECTIOUS DISEASES IN SOUTH DAKOTA, 2023

The South Dakota Department of Health (SDDOH) strives to promote healthy living and to protect the health of all South Dakotans. A core public health function is the surveillance of infectious diseases in the state.

Infectious disease surveillance monitors patterns of disease occurrence and assesses the health status of South Dakota's population. Surveillance can detect sudden changes in disease occurrence, such as an outbreak, or identify long-term disease trends or new and emerging diseases. Surveillance activities are linked to public health actions, such as investigation, control and prevention, evaluation, or planning and allocating resources to address the diseases affecting the population.

SDDOH is authorized by South Dakota Codified Law 34-22-12 and Administrative Rules Article 44:20 to receive and process mandatory reports of communicable diseases by physicians, hospitals, laboratories, and institutions, and to establish public health measures to control and prevent disease transmission.

This report provides an overview of disease surveillance conducted by SDDOH in 2023. It highlights important statistics and shows key trends on selected reportable diseases in the state. To view the most current infectious disease data, please visit the monthly interactive dashboard on our website: https://doh.sd.gov/health-data-reports/data-dashboards/infectious-disease-dashboard/.

Reportable diseases	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	Total
Babesiosis	1	0	0	0	0	0	1	0	0	1	3
Botulism	0	0	0	0	0	0	0	0	0	0	0
Brucellosis	0	0	0	1	0	0	0	0	0	0	1
Campylobacteriosis	307	346	450	395	532	524	324	310	307	455	3950
Carbapenem-resistant Enterobacterales (CRE)	3	37	58	64	48	40	27	39	50	40	406
Chicken Pox (Varicella)	23	27	32	24	31	26	18	9	14	16	220
Chlamydia	4129	3967	4336	4439	4441	4545	4007	4858	5166	4891	44779
Coccidioidomycosis	NR	NR	5	6	3	8	7	6	8	7	50
Coronavirus Disease 2019 (COVID-19)	-	-	-	-	-	-	99984	81626	90750	25818	298178
Cryptosporidiosis	151	248	158	163	177	167	76	127	97	161	1525
Cyclosporiasis	0	0	3	4	30	10	22	16	2	5	92
Dengue	0	2	2	0	1	1	2	0	0	4	12
Ehrlichiosis and Anaplasmosis	0	0	1	1	4	0	2	3	1	5	17
Giardiasis	131	129	116	104	114	92	66	71	65	80	968
Gonorrhea	880	1055	1271	1291	1694	2170	2399	3261	3076	2330	19427
Hantavirus	0	0	0	1	0	2	1	0	1	0	5
Hepatitis A	3	2	1	1	1	8	1	1	2	4	24
Hepatitis B, chronic	58	52	60	52	46	37	53	36	30	38	462
Hepatitis B, acute	3	2	2	2	1	5	4	4	3	3	29
Hepatitis C, chronic	516	570	714	563	545	583	723	847	694	582	6337
Hepatitis C, acute	0	0	22	20	19	31	10	5	21	10	138
Haemophilus influenzae, invasive	NR	NR	20	21	30	30	14	17	25	28	185
Hemolytic uremic syndrome	1	1	1	0	0	5	2	6	6	7	29
HIV and AIDS	24	20	35	28	21	31	32	27	44	52	314
Legionellosis	9	10	9	15	33	23	10	21	24	17	171

Table 54 Reportable Diseases in South Dakota, 2014-2023 (Calendar years)

Reportable diseases	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	Total
Leprosy (Hansen's disease)	0	0	0	0	0	0	0	1	0	0	1
Listeriosis	0	0	0	2	1	0	2	1	2	2	10
Lyme disease	2	5	11	12	7	10	8	16	12	7	90
Malaria	5	4	4	8	9	6	2	8	2	4	52
Measles	8	2	0	0	0	0	0	0	0	0	10
Meningococcal disease	2	1	1	0	0	0	0	1	1	0	6
Мрох	NR	3	0	3							
Multisystem inflammatory syndrome	NR	NR	NR	NR	NR	NR	6	9	6	0	21
Mumps	0	0	2	0	0	12	0	0	0	0	14
Pertussis	109	16	15	9	163	147	34	1	1	51	546
Q fever	5	5	4	5	12	11	8	5	6	7	68
Rabies, animal	21	29	27	22	15	16	10	15	9	20	184
Salmonellosis	164	230	305	226	227	166	179	220	250	249	2216
Shiga toxin-producing E. coli	41	62	84	91	204	136	97	96	88	113	1012
Shigellosis	616	285	28	29	26	9	12	17	17	53	1092
Spotted fever rickettsiosis	3	2	6	13	14	10	7	7	1	2	65
Methicillin-resistant <i>Staph aureus</i> (MRSA), invasive	124	159	144	115	173	156	169	178	148	145	1511
Strep. pneumoniae, invasive	88	110	129	135	106	101	71	95	109	125	1069
Syphilis (primary, secondary, and early non-primary non-secondary)	76	48	41	52	50	56	101	787	1504	1390	4105
Syphilis, congenital	3	0	2	3	1	3	4	16	40	54	126
Toxic shock syndrome	0	3	1	0	1	0	0	0	1	0	6
Tularemia	5	25	14	13	9	17	10	14	0	8	115
Tuberculosis	8	17	12	14	12	16	16	12	10	14	131
Typhoid and paratyphoid fever	0	1	2	0	0	0	0	1	2	1	7
West Nile fever	45	29	117	46	122	11	9	29	35	48	491
West Nile neuroinvasive	12	11	35	27	47	0	11	19	36	46	244
Vibriosis	NR	NR	5	12	9	3	3	9	4	5	50

*NR = not reportable Source: South Dakota Department of Health. Minor variances from past reports reflect differences between MMWR year and calendar year, crossyear deduplication and recategorization.

Table 55 Reportable Diseases by Count	ty of Residence, South Dakota, 2023 (Calendar years)
---------------------------------------	--

County of residence	Campylobacteriosis	Chlamydia	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	Legionellosis	MRSA, invasive	Pertussis	Salmonella	Shigellosis	Strep. pneumo, invasive	Shiga Toxin-Prod <i>E. coli</i>	Tularemia	Varicella (Chicken pox)	West Nile disease
TOTAL	455	4891	161	80	2330	38	582	17	145	51	249	53	125	113	8	16	94
Incidence*	49.5	532.0	17.5	8.7	253.4	4.1	63.3	1.8	15.8	5.5	27.1	5.8	13.6	12.3	0.9	1.7	10.2
Aurora	<5	8	0	<5	0	0	0	0	0	0	0	0	0	0	0	0	0
Beadle	9	80	5	0	8	<5	7	0	<5	0	<5	0	<5	0	0	<5	<5
Bennett	<5	48	0	0	14	0	<5	0	<5	0	0	0	<5	0	0	0	0
Bon Homme	<5	16	0	<5	5	0	<5	0	0	11	<5	0	0	0	0	0	<5
Brookings	7	111	14	<5	8	<5	<5	0	<5	<5	7	<5	0	<5	0	<5	<5
Brown	23	123	10	<5	14	<5	7	0	<5	0	9	<5	<5	<5	0	<5	9
Brule	7	20	<5	0	20	0	5	0	<5	<5	<5	<5	<5	<5	0	0	0
Buffalo	<5	45	0	0	39	0	28	0	<5	0	0	0	0	0	0	0	<5
Butte	6	25	0	<5	9	0	<5	0	0	0	9	0	<5	0	0	0	0
Campbell	<5	<5	0	0	0	0	0	0	0	0	0	0	<5	0	0	0	<5

	-			-	-	-		1				-			-		
													St	Shiga Toxin-Prod		Varicella (Chicken pox)	
	Ca		_			He	He						Strep. pneumo, invasive	ga		rice	~
County of	Campylobacteriosis		Cryptosporidiosis			Hepatitis B,	Hepatitis C,						. р	Гох		ella	West Nile disease
residence	ylo		pto			titis	titis	۳	\leq				neı	in-		(Cł	str
	ba	с Г	qse	G	Go	ŝВ,	s C,	gio	MRSA,	-	Sal	h	Im	Pro	ᅻ	nicl	lile
	cte	Chlamydia	orio	Giardiasis	Gonorrhea	ch		Legionellosis	حر =	Pertussis	Salmonella	Shigellosis	o, ir	od E	Tularemia	ken	di
	rio	nyc	dio	dia	rrh	chronic	chronic		invasive	tus	one	llo	sevr		.em	pc	sea
														coli			
Charles Mix	6	58	<5	<5	35	<5	15	0	<5	5	5	0	<5	0	0	0	0
Clark	7	7	0	<5	<5	0	0	0	0	0	0	<5	<5	0	0	0	<5
Clay	<5	71	<5	<5	14	0	<5	<5	<5	0	9	0	<5	0	0	0	0
Codington	9	76	9	5	9	<5	<5	0	<5	0	6	0	<5	6	0	0	<5
Corson	0	41	0	0	21	0	26	0	<5	0	<5	0	<5	<5	0	0	<5
Custer	<5	15	0	0	<5	0	<5	<5	0	0	<5	0	<5	<5	0	0	0
Davison	11	65	<5	<5	22	0	<5	0	8	<5	<5	<5	5	0	0	0	<5
Day	<5	8	0	0	0	0	<5	0	0	0	<5	<5	<5	<5	0	0	<5
Deuel	6	12	7	0	0	0	0	0	0	0	<5	0	<5	<5	0	0	<5
Dewey	5	146	0	0	97	0	45	0	<5	0	<5	0	5	0	0	0	<5
Douglas	8	<5	0	0	0	0	<5	0	<5	0	<5	0	<5	<5	0	0	0
Edmunds	6	5	<5	0	<5	0	<5	0	0	0	<5	0	0	0	0	0	<5
Fall River	10	18	0	0	<5	0	8	0	<5	0	0	0	0	<5	0	0	<5
Faulk	<5	0	<5	0	0	0	0	0	0	0	0	<5	0	0	0	0	<5
Grant	5	6	<5	0	<5	<5	0	0	<5	0	<5	0	0	0	0	0	0
Gregory	10	9	0	<5	<5	0	0	0	<5	0	<5	0	0	<5	0	0	0
Haakon	<5	<5	0	0	0	0	0	0	0	0	<5	0	0	<5	0	0	0
Hamlin	6	8	8	<5	0	0	0	0	0	<5	<5	0	0	<5	0	0	<5
Hand	<5	<5	<5	0	0	0		0	<5	0	<5	0	0	0	0	0	<5
Hanson	<5	6	0	0	<5	0	0 0	0	<5	0	<5	0	0	0	0	0	0
Harding	<5	0	0	0	<5 <5	0	0		0	0	<5	0	0	0	0	0	0
Hughes	11	83	<5	<5	55	0	23	0	<5	0	<5	0	5	0	0	0	5
Hutchinson	<5		<5	0	6	0	<5	0	0	0	<5	<5	<5	<5	0	0	<5
Hyde	0	5 8		0	<5			0	0	0	0	+	< <u>,</u>	0		0	0
Jackson	-0 	8 38	<5 0	0	26	0	<5 <5	0	0	0	0	0	0	<5	0	0	0
Jerauld				0	0	0		0	0	0	0	0		0	0	0	•
	<5 15	<5	<5				0						<5				<5
Jones	<5 1	<5	0	0	<5	0	0	0	0	0	0	0	0	0	0	0	0
Kingsbury	<5 -15	8	<5	0	0	0	0	0	<5	0	<5 - 15	0	0	6	0	0	<5
Lake	<5	28	<5	<5	<5	0	<5	<5	0	0	<5	0	<5	5	0	0	<5
Lawrence	11	86	10	<5	12	<5	9	0	<5	0	5	<5	<5	<5	0	0	0
Lincoln	27	210	11	7	50	<5	9	<5	7	12	21	0	<5	<5	<5	<5	5
Lyman	<5	45	0	0	27	0	14	0	<5	0	<5	0	<5	0	0	0	<5
Marshall	<5	<5	<5	0	0	0	<5	0	0	0	<5	0	<5	<5	0	0	<5
McCook	<5	9	0	0	<5	0	<5	0	0	<5	<5	0	0	<5	0	0	<5
McPherson	<5	0	0	0	0	0	<5	0	0	5	<5	0	0	<5	0	0	0
Meade	13	108	<5	<5	19	<5	9	<5	<5	0	13	<5	<5	<5	<5	0	<5
Mellette	<5	23	0	0	18	0	<5	<5	0	0	<5	0	<5	0	0	0	0
Miner	0	7	<5	0	<5	0	<5	0	<5	0	<5	0	0	0	0	0	<5
Minnehaha	63	1447	41	26	756	22	117	5	35	0	40	9	19	23	<5	6	11
Moody	<5	23	0	0	15	0	<5	0	0	0	0	0	<5	<5	0	<5	<5
Oglala Lakota	6	373	0	<5	229	<5	35	0	7	0	<5	0	9	0	<5	0	5
Pennington	46	781	<5	<5	498	<5	80	0	20	0	28	<5	27	14	<5	0	5
Perkins	<5	<5	<5	<5	0	<5	<5	0	0	0	<5	0	0	0	0	0	<5
Potter	0	6	0	0	<5	0	<5	0	0	0	0	0	0	0	0	0	0
Roberts	11	59	<5	0	11	0	6	0	<5	0	<5	<5	<5	5	0	0	0
Sanborn	8	<5	0	<5	0	0	<5	0	0	0	<5	0	<5	<5	<5	0	<5
Spink	6	8	0	0	0	0	0	0	<5	0	<5	0	<5	<5	0	0	<5
Stanley	<5	10	0	0	<5	0	0	0	0	0	<5	0	<5	0	0	0	0
Sully	0	<5	0	0	0	0	0	0	0	0	0	0	<5	0	0	0	0
Todd	11	284	<5	8	196	0	55	<5	8	<5	<5	26	<5	<5	<5	0	0
Tripp	8	25	<5	0	23	0	<5	0	<5	0	5	0	<5	<5	0	0	0
Turner	7	17	<5	<5	<5	0	0	0	<5	0	<5	0	0	<5	0	<5	0
Union	5	25	0	0	<5	<5	<5	0	<5	6	<5	0	<5	0	0	0	<5
Walworth	<5	20	0	0	11	0	6	0	<5	0	<5	<5	0	0	0	0	<5
															L		I

County of residence	Campylobacteriosis	Chlamydia	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	Legionellosis	MRSA, invasive	Pertussis	Salmonella	Shigellosis	Strep. pneumo, invasive	Shiga Toxin-Prod <i>E. coli</i>	Tularemia	Varicella (Chicken pox)	West Nile disease
Yankton	6	69	<5	0	14	0	12	<5	8	0	5	0	<5	<5	<5	0	<5
Ziebach	<5	35	0	0	14	0	<5	0	<5	0	<5	0	0	0	0	0	0

*Incidence: cases per 100,000 population

Individual county events of 1, 2, 3 or 4 are published as <5

Table 56 Reportable Diseases by Gender, Race and Age, South Dakota, 2023 (Calendar years)

-						· · ·					-			-					
	Campylobacteriosis	Chlamydia	CRE	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	HIV and AIDS	Pertussis	Salmonellosis	Shiga Toxin-Producing <i>E. col</i> i	Shigellosis	Strep. pneumo, invasive	Syphilis (P, S, E non-P non-S)	Tuberculosis	Tularemia	Varicella (Chicken pox)	West Nile disease
Total	455	4891	40	161	80	2330	38	582	52	51	249	113	53	125	1390	14	8	16	94
Incidence*	49.5	532.0	4.4	17.5	8.7	253.4	4.1	63.3	5.7	5.5	27.1	12.3	5.8	13.6	151.2	1.5	0.9	1.7	10.2
Gender																			
Female	202	3275	22	79	37	1287	14	240	19	28	124	63	28	53	737	5	4	6	35
Male	253	1616	18	82	43	1043	24	342	33	23	125	50	25	72	653	9	4	10	59
Race																			
White	370	1882	37	151	61	441	6	172	24	46	198	104	18	72	134	6	6	10	79
Am.Indian	58	2255	1	7	14	1548	3	360	14	1	33	5	29	46	1191	2	2	1	12
Black	8	403	1	1	3	231	19	19	11	0	4	0	3	5	37	2	0	1	0
Asian	3	35	1	1	0	9	8	2	3	0	2	0	1	1	5	4	0	1	0
Other	5	62	0	1	1	33	1	18	0	0	3	1	1	0	17	0	0	2	0
Unknown	11	254	0	0	1	68	1	11	0	4	9	3	1	1	6	0	0	1	3
Age group																			
<1 yr	5	3	0	0	2	1	0	0	0	16	5	1	2	2	0	0	0	5	0
1-4 yrs	38	1	0	19	29	1	1	0	0	9	17	26	15	5	0	0	1	5	0
5-14 yrs	28	47	1	18	9	13	0	2	0	16	24	9	10	2	3	0	0	3	2
15-24 yrs	59	2707	1	27	3	770	7	56	5	5	22	17	2	2	302	2	0	1	4
25-39 yrs	108	1806	1	43	15	1182	13	246	37	1	36	24	9	14	814	7	3	1	8
40-64 yrs	140	318	8	40	17	345	14	235	9	4	93	20	10	50	265	2	4	1	47
≥65 yrs	77	7	29	14	5	16	3	43	1	0	52	16	5	50	6	3	0	0	33

Total cases reported on this table may differ slightly from column totals due to incomplete case information.

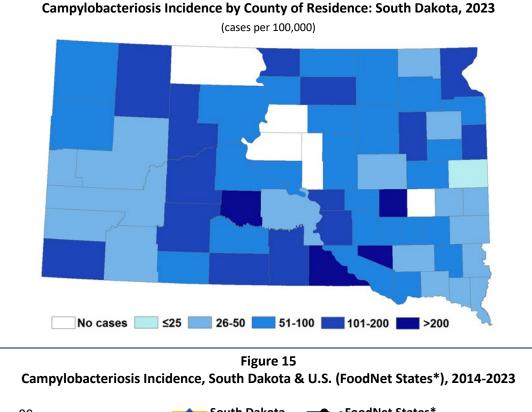
*Incidence: cases per 100,000 population

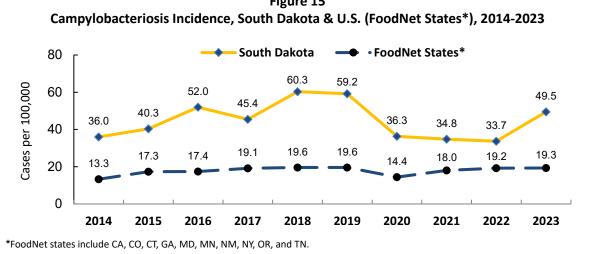
CAMPYLOBACTERIOSIS

Campylobacter is a bacterium that can cause diarrhea, often bloody, abdominal pain, vomiting, fever, nausea, and malaise. Most cases of campylobacteriosis are relatively mild, lasting one to two days. Some cases, however, are more severe and relapses occur in about 20 percent of patients. Complications may include convulsions, septicemia, extra-intestinal infection, arthritis, and one in 1,000 campylobacteriosis cases leads to Guillain-Barré syndrome. *Campylobacter*-associated deaths are rare.

Campylobacteriosis has been the most commonly reported enteric bacterial pathogen in South Dakota since 2001. In 2023, there were 455 cases of Campylobacter infection reported, a 40 percent increase from the five-year median (median: 324). South Dakota's rate of campylobacteriosis ranks high nationally, usually double the rate of states receiving enhanced funding for conducting active surveillance for foodborne disease (FoodNet). Eighty-two cases (21%) were hospitalized. Of the Campylobacter cases that were culture confirmed, the species identified were C. jejuni (127 cases), C. coli (17), C. ureolyticus (1), C. fetus (1), and C. upsaliensis (1). Thirty-eight percent of campylobacteriosis cases reported contact with cattle.

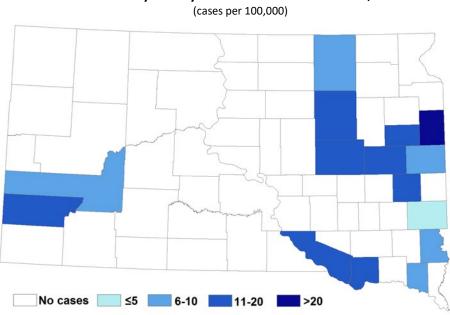
Figure 14

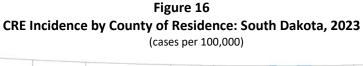




CARBAPENEM-RESISTANT ENTEROBACTERALES (CRE)

Carbapenem-resistant Enterobacterales (CRE) are a family of bacteria that are difficult to treat because they are highly resistant to group of antibiotics called carbapenems. CRE are an important emerging threat to public health. Common bacteria in the Enterobacterales order include Klebsiella species, Enterobacter species, and *Escherichia coli*. These bacteria are typically found in the human gastrointestinal tract. However, they can spread outside the gut and cause serious infections, such as urinary tract infections, bloodstream infections, wound infections, and pneumonia. Enterobacterales can cause infections in people in both healthcare and community settings. In South Dakota, 40 cases of CRE were reported in 2023. The statewide incidence was 4.4 cases per 100,000 population.





CHLAMYDIA

Chlamydia is a common sexually transmitted disease (STD) caused by the bacterium Chlamydia trachomatis which can infect both men and women. Chlamydia transmission occurs during contact with mucus membrane secretions of infected individuals – almost always during sexual activity. Neonatal transmission occurs when an infant is born to an infected mother and may then cause pneumonia or conjunctivitis in the newborn. Most female infections are asymptomatic or mild, but can cause mucus-pus discharges, pelvic inflammatory disease, infertility, and ectopic pregnancy. Men experience urethral discharge, epididymal pain, and sexually reactive arthritis.

In 2023, there were 4,891 cases of chlamydia reported in South Dakota, an eight percent increase from the five-year median (median: 4,545). Counties with the highest incidence (cases per 100,000 population) included Todd (3,087.3), Dewey (2,803.4), Oglala Lakota (2,776.5), and Buffalo (2,388.5). Youth in the 15–24 year age group had the highest rate of disease. The number of chlamydia cases has been increasing over the past decade in South Dakota.

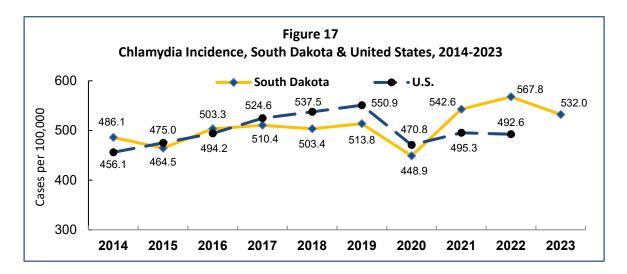
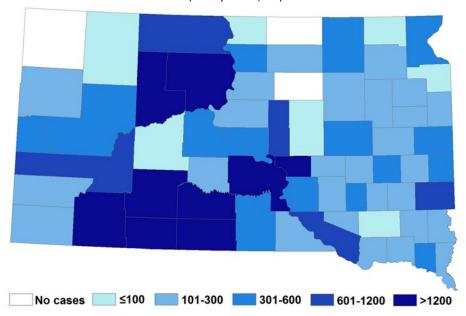


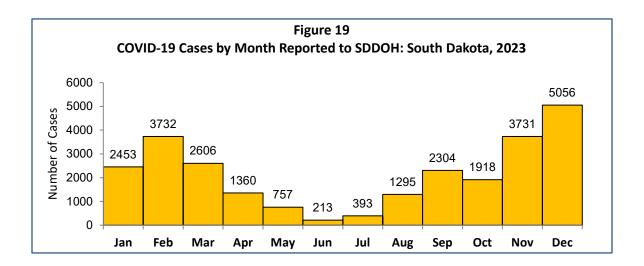
Figure 18 Chlamydia Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)



CORONAVIRUS DISEASE 2019 (COVID-19)

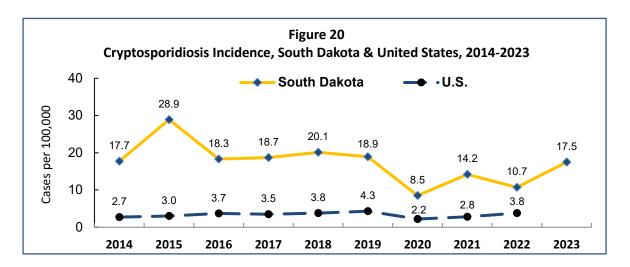
COVID-19 is a respiratory disease caused by the SARS-CoV-2 virus first identified in December 2019. From January 2020 until May 2023, COVID-19 was a federal public health emergency in the United States. COVID-19 is transmitted when an infected person breathes out aerosolized droplets that contain the virus. Symptoms of COVID-19 may include cough, runny nose, sore throat, fever, and new loss of taste or smell.

In 2023, a total of 25,818 cases of COVID-19 were reported in South Dakota, resulting in 1,448 hospitalizations and 184 deaths.



CRYPTOSPORIDIOSIS

Cryptosporidiosis is a diarrheal disease caused by a chlorine-tolerant protozoan parasite transmitted by cattle or human feces through contaminated food or water or by direct person-to-person or animal-to-person contact. South Dakota's cryptosporidiosis rate has been consistently higher than the national rate over the past decade. In 2023, 161 cases of cryptosporidiosis were reported in South Dakota.



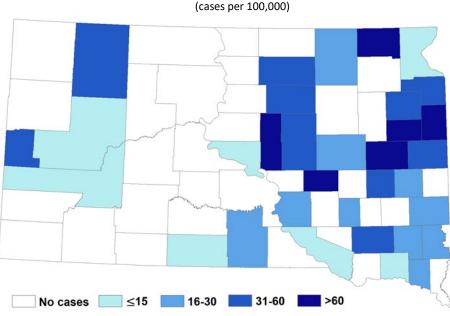


Figure 21 Cryptosporidiosis Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)

ESCHERICHIA COLI, SHIGA TOXIN-PRODUCING (STEC)

Shiga-toxin producing E. coli (STEC) often causes severe bloody diarrhea and abdominal pain. The illness usually resolves in five to 10 days. In some individuals, however, complications may involve severe hemorrhagic colitis, hemolytic uremic syndrome, thrombotic thrombocytopenic purpura, and even death. STEC is transmitted by meat, water, fresh vegetables, or other foods contaminated by feces of cattle, sheep, deer, and other animals. Person-to-person transmission can also occur. Proper slaughtering and processing methods can prevent human infection, adequate cooking of meats, proper kitchen hygiene, pasteurization of dairy products and fruit juices, and handwashing after contact with cattle or their feces. Individuals with STEC infections are restricted from commercial food handling, child daycare, or patient health care until two successive negative fecal samples are produced.

Culture-independent diagnostic testing (CIDTs) is now commonly used by clinical laboratories in the state for detecting STEC infections. The STEC surveillance case definition used by SDDOH to classify and report cases was updated in 2018. Individuals testing positive by CIDT (but not subsequently confirmed by culture) have been included in the reported case count totals since 2018.

In 2023, 113 cases of STEC were reported in South Dakota (12.3 cases per 100,000 population). South Dakota's STEC rate has been greater than two times the national rate over the past decade. There were 36 cases (32%) that occurred in children less than 15 years of age. Twenty-nine cases (26%) were hospitalized, and seven cases of hemolytic uremic syndrome (HUS) associated with STEC infection were reported. Of the 113 total STEC cases, 43 were culture-confirmed E. coli and 70 were only positive by a CIDT. Culture-confirmed cases included the following serogroups: 0157 (13 cases), 0111 (6), 026 (5), 0121 (4), and 0103 (4).

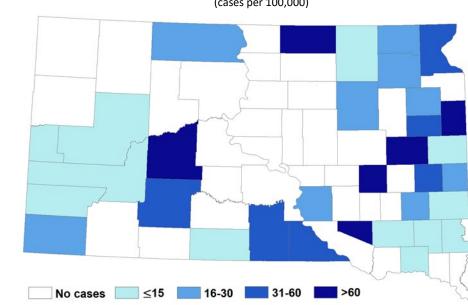
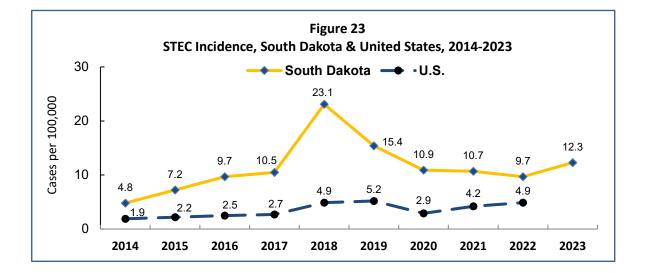


Figure 22 STEC Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)



GIARDIASIS

Giardiasis is a gastrointestinal disease involving diarrhea and abdominal cramps that is caused by a protozoan parasite called *Giardia lamblia* (*G. intestinalis*, *G. doudenalis*). Giardiasis is transmitted person-to-person or by contaminated water, or in some cases animal-to-human. In 2023, 80 cases of *Giardia* infection were reported in South Dakota residents (8.7 cases per 100,000 population), which was slightly above the five-year median (median: 71). South Dakota's giardiasis rate has been more than double the national rate over the past decade.

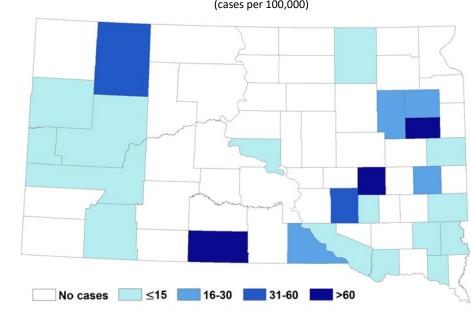
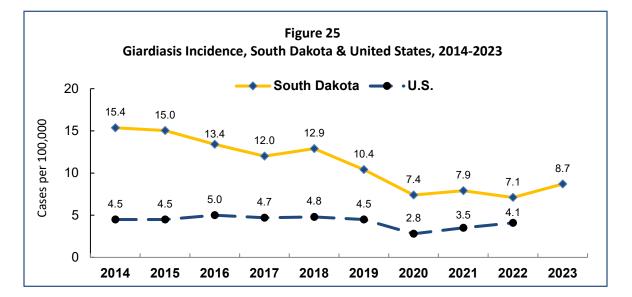


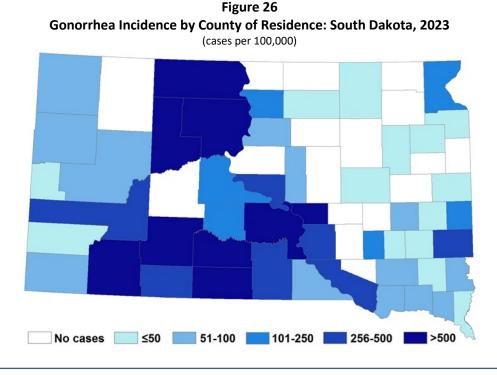
Figure 24 Giardiasis Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)

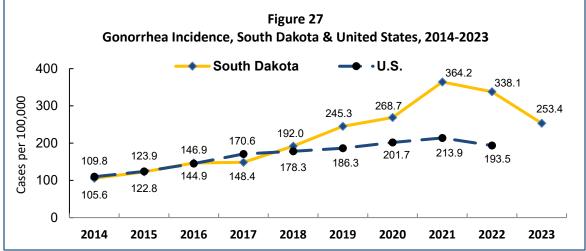


GONORRHEA

Gonorrhea is a sexually transmitted disease (STD) that can cause infections in the genitals, rectum, and throat, and less commonly as an invasive, disseminated disease. Gonorrhea is most common among young people ages 15-24 years. Although gonorrhea may be asymptomatic, untreated gonorrhea can cause serious and permanent health problems in both women and men. In women, untreated gonorrhea can cause pelvic inflammatory disease with complications such as scar tissue in fallopian tubes, ectopic pregnancy, infertility, and long-term pelvic/abdominal pain. In men gonorrhea may infect the tubes attached to the testicles which may cause sterility.

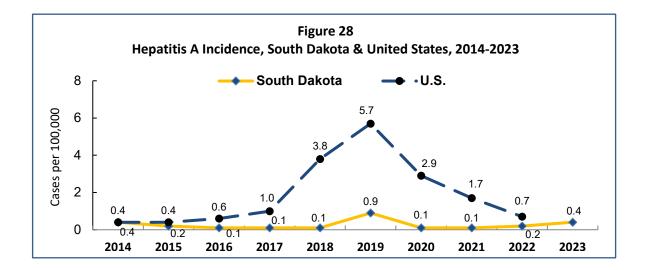
Gonorrhea has been increasing over the past decade in South Dakota. In 2023, there were 2,330 cases reported, which is a rate of 253.4 cases per 100,000 population. The median age of cases was 29 years old (range: 0 to 89). Females accounted for 55 percent of cases.





HEPATITIS A, ACUTE

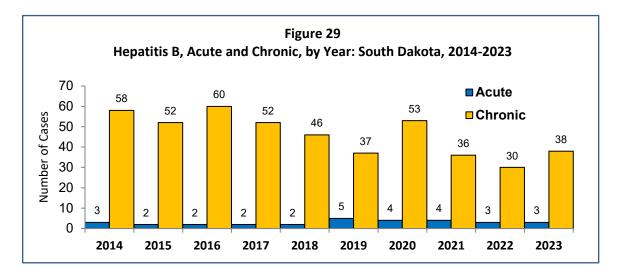
Hepatitis A is a liver disease caused by the hepatitis A virus (HAV), which infects humans through fecal-oral transmission. Since the licensure of the hepatitis A vaccine in 1995-1996, rates of infection have declined significantly. In South Dakota, there were four cases of hepatitis A reported in 2023. Two cases (50%) had recent international travel.



HEPATITIS B, ACUTE AND CHRONIC

Hepatitis B is a liver disease caused by the hepatitis B virus (HBV). This virus is transmitted when blood and other body fluid from an infected person enters the body of someone who is not infected during sexual contact; sharing needles, syringes, or other drug-injection equipment; or from mother to baby at birth. For some individuals, hepatitis B is an acute, or short-term, illness but for others, it can become a long-term, chronic infection. Risk for HBV chronic infection is related to age at infection: approximately 90 percent of infected infants become chronically infected, compared with 2-6 percent of adults. Chronic hepatitis B can lead to serious health issues like cirrhosis or liver cancer. The best way to prevent hepatitis B is by getting vaccinated. HBV vaccine is now recommended at birth and for children and adolescents who did not complete vaccination as infants. HBV vaccination is not mandatory for school entry in South Dakota.

In 2023, there were three cases of acute hepatitis B and 38 cases of chronic hepatitis B reported in South Dakota. The median age of cases was 36 years (range: 3 to 83) and 63 percent were male.



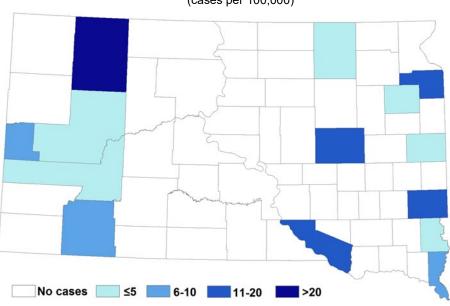
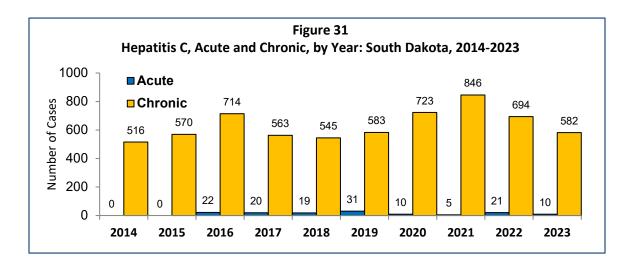


Figure 30 Chronic Hepatitis B Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)

HEPATITIS C, ACUTE AND CHRONIC

Hepatitis C causes liver disease. For most people, hepatitis C is a long-term, chronic infection and may cause long-term health problems resulting in death. The majority (70-80%) of persons might not be aware of their infection because they do not become clinically ill. There is no vaccine available for hepatitis C. Hepatitis C is a blood-borne virus and the greatest risk for infection is among persons who inject drugs.

In 2023, there were 10 cases of acute hepatitis C and 582 cases of chronic hepatitis C reported in South Dakota. The counties with the highest incidence of chronic hepatitis C (cases per 100,000 population) were Buffalo (1486.2), Dewey (864.1), Corson (687.5), and Todd (597.9).



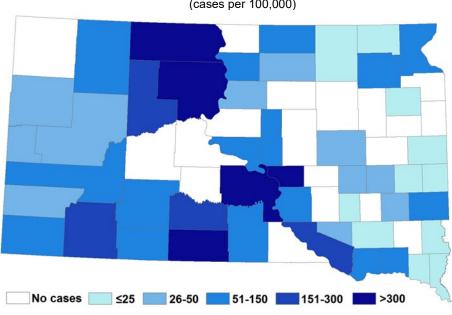
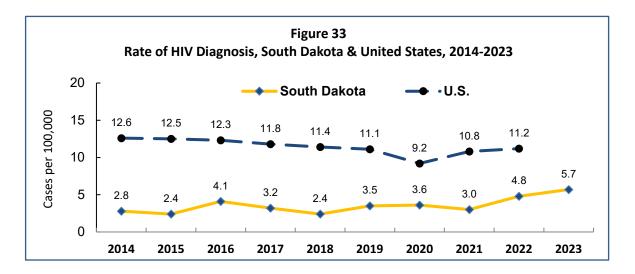


Figure 32 Chronic Hepatitis C Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)

HIV AND AIDS

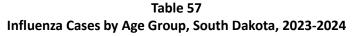
Human immunodeficiency virus (HIV) infection may lead to acquired immunodeficiency syndrome, or AIDS. HIV is spread mainly by having sex with or sharing drug injection needles and syringes with someone who is already infected with HIV. The only way to know for sure if you have HIV infection is to get tested. In 2023, there were 52 new HIV/AIDS cases reported in South Dakota.

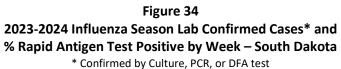


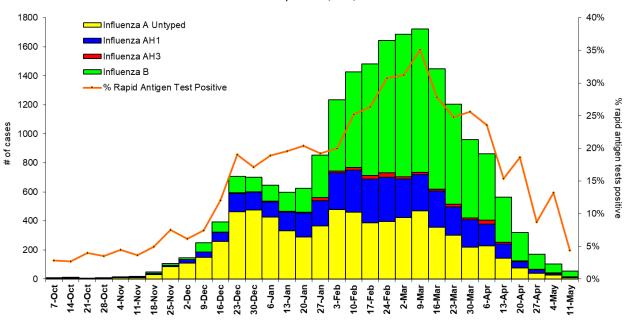
INFLUENZA

The 2023–2024 influenza season was a moderately severe season in South Dakota. A total of 20,180 confirmed influenza cases were reported to SDDOH, including 11,018 (55%) influenza A and 9,162 (45%) influenza B. Additionally, 16,813 rapid antigen influenza tests were performed with 3,147 positive results (19%); 1,492 (47%) positive for influenza A and 1,655 (53%) positive for influenza B. There were also 855 hospitalizations and 48 deaths reported during the 2023–2024 influenza season.

Lab Confir Influenza (by Culture,	Cases	DFA)	Influe Associ Hospita			ienza ciated ths
Age Group	# Case:	s (%)	# Hos	o (%)	Deat	ths (%)
0-4	2658	(13%)	70	(8%)	0	(0%)
5-18	7779	(39%)	87	(10%)	1	(2%)
19-49	6357	(32%)	169	(20%)	4	(8%)
50-64	1713	(8%)	151	(18%)	4	(8%)
> 64	1673	(8%)	378	(44%)	39	(81%)
Total	20,180		855		48	







LEGIONELLOSIS

Legionellosis includes two diseases, Legionnaires' disease and Pontiac fever, caused by exposure to *Legionella* bacteria. Legionnaires' disease causes pneumonia, while Pontiac fever causes a milder illness with fever and muscle aches. *Legionella* is naturally found in the environment, usually in water. People can get legionellosis after breathing in water droplets that contain the bacteria. In 2023, there were 17 cases of legionellosis reported in South Dakota, a 26 percent decrease from the five-year median (median: 23).

LYME DISEASE

Lyme disease is caused by the spirochete *Borrelia burgdorferi* and is transmitted to humans by bites from *lxodes scapularis*, commonly known as the blacklegged tick or deer tick. Currently, *l. scapularis* has only been found and documented in a few locations in eastern South Dakota, so the risk of exposure to Lyme disease in South Dakota is low. In 2023, there were seven cases of Lyme disease reported in South Dakota residents, a 30 percent decrease from the five-year median (median: 10).

METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS (MRSA), INVASIVE

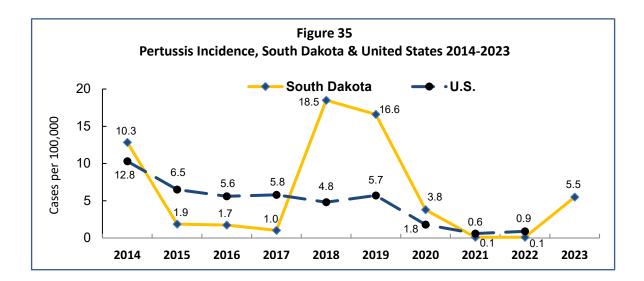
Methicillin-resistant *Staphylococcus aureus* (MRSA) is a bacterium resistant to most commonly used antibiotics. Most MRSA infections are skin infections, but may cause life-threatening bloodstream infections, pneumonia, and surgical site infections. In 2023, there were 145 cases of invasive MRSA reported in South Dakota. The highest rate of disease was among the elderly, ages 65 years and older.

MULTISYSTEM INFLAMMATORY SYNDROME (MIS)

Multisystem inflammatory syndrome (MIS) is a rare but serious inflammatory condition in children (MIS-C) and young adults (MIS-A) that affects multiple organ systems, almost always requiring hospitalization. It appears to be linked to infection with SARS-CoV-2, the virus which causes COVID-19. In 2023, there were no cases of MIS reported in South Dakota.

PERTUSSIS (WHOOPING COUGH)

Pertussis, commonly called whooping cough, is an acute infectious bacterial disease caused by *Bordetella pertussis*. The bacteria produce toxins that inflame and paralyze respiratory cilia causing severe coughing. Pertussis is transmitted by aerosolized droplets of respiratory secretions from infected individuals. Infants and young children are at higher risk of pertussis-associated complications, hospitalization, and death. The most common complication is secondary bacterial pneumonia. Youth and adults infected with pertussis may expose unprotected infants who are at risk of severe disease and complications. In 2023, there were 51 cases of pertussis reported in South Dakota, a 50 percent increase from the five-year median (median: 34). The median age of cases was 5 years (range: 0 to 58). One death occurred in an infant under 1 year of age.



RABIES, ANIMAL

Rabies is a viral disease affecting the central nervous system. All mammals, including humans, are susceptible to the rabies virus. Bites from infected animals constitute the primary route of transmission. Rabies is a fatal disease and cannot be treated once symptoms appear. Fortunately, rabies is successfully prevented by using post-exposure prophylaxis in people exposed to the rabies virus. While the last human rabies case in South Dakota occurred in 1970, substantial resources are spent managing potential exposures to rabies because of its constant presence in the state. Skunks (*Memphitis mephitis*) are the primary rabies reservoir in South Dakota. Over the past decade, 44 percent of skunks tested have been rabid. Bat rabies is also enzootic in South Dakota with four percent of bats being tested positive.

A total of 20 animals tested positive for rabies in 2023, a 33 percent increase from the five-year median (median: 15). The rabid animals included 18 bats, 1 skunk, and 1 cow. No human rabies was reported.

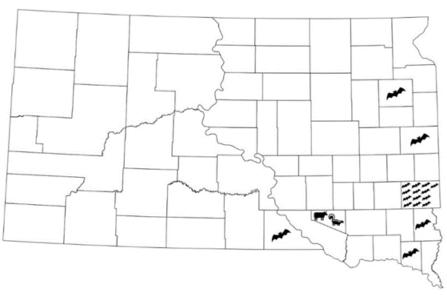


Figure 36 Animal Rabies by County: South Dakota, 2023

SALMONELLOSIS

Salmonella is a bacterium that can cause diarrhea, fever, and abdominal cramps between 12 and 72 hours after infection. The illness usually lasts four to seven days, and most individuals recover without treatment, but in some with diarrhea, infection may spread from the intestines to the blood stream, and then to other body sites. In severe cases, infection may cause death. The elderly, infants, and those with impaired immune systems are more likely to have a severe illness.

In 2023, 249 cases of salmonellosis were reported in South Dakota. The *Salmonella* serotypes most commonly identified were *S*. Enteritidis (57 cases), *S*. Typhimurium (39), *S*. Newport (16), *S*. I 4:i:- (15), and *S*. Infantis (10). Older adults had the highest rate of infection; 41 percent of reported cases were over 50 years of age. Sixty-four cases (26%) were hospitalized. Twenty-seven cases (11%) reported international travel.

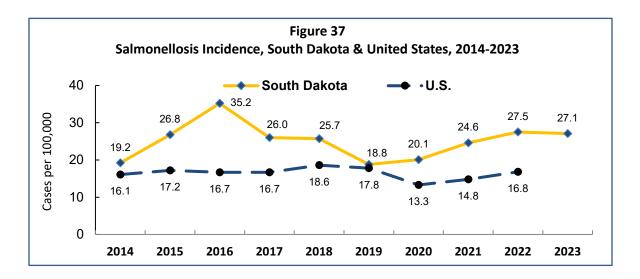
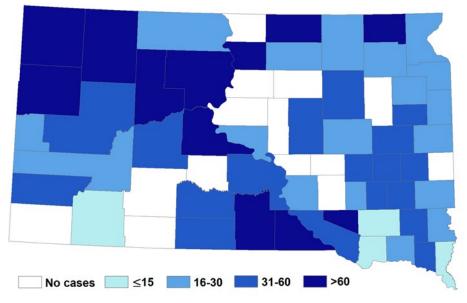


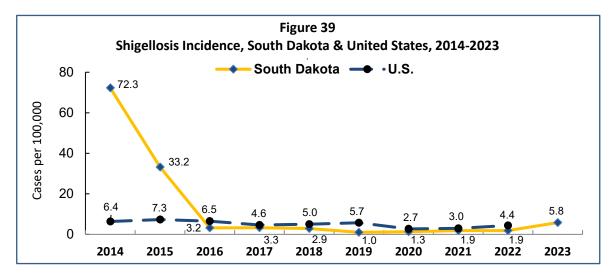
Figure 38 Salmonellosis Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)



SHIGELLOSIS

Shigellosis is an intestinal infection causing diarrhea, fever, nausea, vomiting, and abdominal cramps. Complications, such as severe dehydration or seizures, may occur, especially among young children. *Shigella* bacteria are transmitted by the fecal-oral route (human feces). Following exposure, illness usually occurs within one to four days. Transmission is typically person-to-person within families, child day care centers, and adult residential living situations. Food may be contaminated by people not washing their hands properly.

In 2023, there were 53 cases of shigellosis reported in South Dakota, a 211 percent increase above the fiveyear median (median: 17). South Dakota experienced a protracted multi-county outbreak from October 2013 to November 2015, largely in childcare settings. In 2023, thirty-eight cases (72%) were in children less than 15 years of age. Eleven cases (21%) were hospitalized.



STREPTOCOCCUS PNEUMONIAE, INVASIVE

Pneumococcal disease is an infection caused by the bacteria *Streptococcus pneumoniae*, also referred to as pneumococcus. Invasive *Streptococcus pneumoniae* can cause many types of illnesses, including bacteremia, pneumonia, ear infections, and meningitis. There are vaccines to prevent pneumococcal disease for both children and adults. In 2023, there were 125 cases of invasive pneumococcal disease reported in South Dakota. The majority (80%) of cases occurred in adults 40 years of age and older.

SYPHILIS (PRIMARY, SECONDARY, EARLY NON-PRIMARY NON-SECONDARY, AND CONGENITAL)

Syphilis is a sexually transmitted disease that can cause long-term complications if not treated promptly and correctly. Symptoms in adults are divided into stages: primary, secondary, early latent, and late latent syphilis. The primary, secondary, and early latent stages are infectious to others. Syphilis is spread by direct contact with a syphilis sore during vaginal, anal, or oral sex. Syphilis can also be spread from an infected mother to her unborn baby, i.e., congenital syphilis.

In South Dakota, there were 1,390 cases of early syphilis (primary, secondary, and early non-primary nonsecondary) reported in 2023, a 1,276 percent increase from the five-year median (median: 101). Fifty-four cases of congenital syphilis were also reported. Five counties (Pennington, Oglala Lakota, Minnehaha, Dewey, and Todd) accounted for 73 percent of the state's early syphilis cases.

TUBERCULOSIS

Tuberculosis (TB) is caused by the *Mycobacterium tuberculosis* bacteria. *M. tuberculosis* usually infects the lungs but can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal. Tuberculosis is spread through the air from one person to another when an infectious person coughs, sneezes, speaks, talks, or sings.

There were 14 cases of TB reported in South Dakota in 2023. The median age of cases was 32 years (range: 20 to 76). American Indians have historically reported the highest percentage of TB cases by race, but this trend has decreased in recent years. In 2023, American Indians represented 14 percent of the total TB cases. Seventy-nine percent of TB cases reported were foreign-born.

TULAREMIA

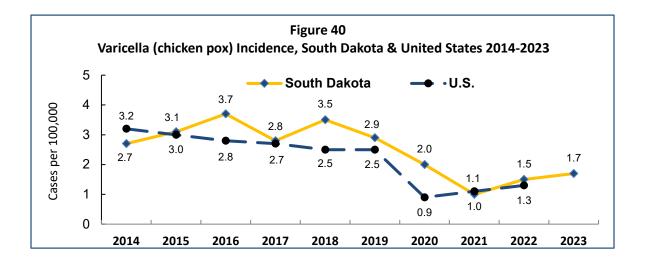
Tularemia is a bacterial disease caused by *Francisella tularensis* and is typically found in rodents but can infect insects as well. Infection can occur from a tick or deerfly bite, handling sick or dead animals, eating contaminated food, or inhaling airborne organisms. Depending on how a person is infected, symptoms can range from skin ulcers, inflamed eyes, sore throat and diarrhea to fever, chills, headache, and muscle aches. There are six main clinical forms of disease: ulceroglandular, glandular, pneumonic, oropharyngeal, oculoglandular, and typhoidal. If left untreated, tularemia may be fatal.

In 2023, there were eight cases of tularemia reported in South Dakota (5 ulceroglandular, 1 glandular, 1 oropharyngeal, and 1 pneumonic). The median age of cases was 40 years old (range: 1 to 61).

VARICELLA (CHICKEN POX)

Varicella (chicken pox) is a highly contagious disease consisting of a blistery rash, itching, and fever caused by varicella-zoster virus. Chicken pox can be a serious disease, especially in babies and people with weakened immune systems. Varicella is spread through the air by the cough or sneeze of an infected person. It can also be spread by touching or breathing in the virus particles that come from chicken pox blisters. The best way to prevent chicken pox is to get the varicella vaccine. Varicella vaccination is mandated for school entry in South Dakota.

In 2023, there were 16 cases of chicken pox reported in South Dakota. Among cases with known vaccination status, eighty-one percent were unvaccinated or too young to have been vaccinated. The median age of cases was 2 years old (range: 0 to 42).

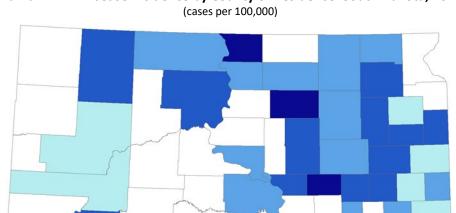


WEST NILE VIRUS (WNV)

West Nile disease is a viral mosquito-borne illness that emerged in South Dakota in 2002. About 20 percent of WNV infected individuals develop fever with other symptoms such as headache, body aches, joint pains, vomiting, diarrhea, or rash. Most people with this type of West Nile virus disease recover completely, but fatigue and weakness can last for weeks or months. Less than one percent of infected individuals develop a serious neurologic illness such as encephalitis (infection of the brain) or meningitis (infection of the spinal cord). The symptoms of neurologic illness can include headache, high fever, neck stiffness, disorientation, coma, tremors, seizures, or paralysis. Neuroinvasive WNV infection may take several weeks or months to recover. Some of the neurologic effects may be permanent. The death rate for WNV neurologic disease is about 10 percent.

In South Dakota, there were 94 human cases of WNV disease (46 neuroinvasive and 48 non-neuroinvasive) reported in 2023. The overall incidence of WNV was 10.2 cases per 100,000 population. Fifty-four cases (57%) were hospitalized, including four deaths. Additionally, 11 persons were identified to have WNV infection through blood donation screenings.

Figure 41 Human WNV Disease Incidence by County of Residence: South Dakota, 2023 (cases per 100,000)



OTHER INFECTIOUS DISEASES

Other infectious diseases reported in South Dakota during 2023 include: 28 cases of invasive Haemophilus influenzae, seven cases each of coccidioidomycosis and Q fever, five cases each of cyclosporiasis and vibriosis, four cases each of dengue, ehrlichiosis, and malaria, two cases each of listeriosis and spotted fever rickettsiosis, and one case each of anaplasmosis, babesiosis, and paratyphoid fever.

No cases _____ ≤15 _____ 16-30 _____ 31-60 _____ >60