Vol. 16, No. 46

WEEKLY REPORT

Week Ending November 18, 1967

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE

BUREAU OF DISEASE PREVENTION AND ENVIRONMENTAL CONTROL

EPIDEMIOLOGIC NOTES AND REPORTS HUMAN CASE OF COWPOX — Indiana

Human cowpox has been clinically diagnosed in a 56-year-old woman from Loogootee, Indiana, and confirmed by virologic studies at NCDC. Following contact with a dairy cow which developed cowpox-like lesions on the udder, the woman noted lesions on her hands and onset of fever and malaise on October 30. These lesions progressed through papular, vesicular, pustular, and crusting stages. Further clinical and epidemiologic investigations are in progress.

Crust material from the patient, submitted to NCDC on November 15, revealed suspicious pox virus particles by electron microscopy. Cytopathic effect was observed in human embryonic lung fibroblast (RU1) tissue culture on the 3rd day following inoculation. Electron microscopy of

this tissue revealed pox virus particles. An agar gel diffusion test was positive for the pox virus group and suggested cowpox. Definitive diagnosis of cowpox was made on November 20 when characteristic hemorrhagic pocks on chicken chorioallantoic membranes were observed. Serologic studies are pending.

(Reported by A.L. Marshall, Jr., M.D., Director, Division of Communicable Disease Control, Indiana State Board of Health; E.B. Lett, M.D., Loogootee, Indiana; Viral Exanthems Laboratory, and an EIS Officer, NCDC.)

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative totals include revised and delayed reports through previous weeks)

	46th WEE	K ENDED	MEDIAN	CUMULA	TIVE, FIR	ST 46 WEEKS
DISEASE	NOVEMBER 18, 1967	NOVEMBER 19, 1966	MEDIAN 1962 - 1966	1967	1966	MEDIAN 1962 - 1966
Aseptic meningitis	61	67	45	2,725	2,689	1,914
Brucellosis	8	3	4	222	219	326
Diphtheria	es colleum 4 guiten	1	5	144	172	238
Encephalitis, primary:	e off-lachomaco was	3.00	/ /	M	- 63,565	
Arthropod-borne & unspecified	19	45		1,441	1,948	
Encephalitis, post-infectious	9	5	***	698	657	
Hepatitis, serum Hepatitis, infectious	51 836	40 714	665	1,968 34,086	1,280 28,396	33,705
Moloria	60	12		1,856	429	94
Malaria Measles (rubeola)		CALL CONTRACTOR OF THE PERSON AND ADDRESS OF	1 700	60.198	195,563	
	310	1,166	1,702	1.949	3,072	368,873
Meningococcal infections, total	37		40	, ,		2,454
Civilian Military	37	44	ar the to	1,827	2,780	
Poliomyelitis, total	2	3	3	35	90	106
	material Park AV one	3	3	26	85	85
ParalyticRubella (German measles)	307	263		42,122	43.843	00
Streptococcal sore throat & scarlet fever		8,260	6,436	392,397	369,505	343.445
Tetanue	0,494	3	0,430	198	171	
Tetanus	esting the rodine	V. Tanto con Trada	9	154	10.4	249
Tularemia Typhoid fever	8	7	10	372	164	255
Typhus, tick-borne (Rky. Mt. spotted fever)	8	4	10	293	345 243	406 218
Rabies in animals	67	85	72	3,802	3,612	3.612

NOTIFIABLE DISEASES OF LOW FREQUENCY

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Anthrax: Botulism: Leptospirosis: Calif1 Plague: Psittacosis: Calif1, Minn1	2 38 2	Rabies in man: Rubella, Congenital Syndrome: Trichinosis: Tenn1 Typhus, murine: Polio, Unsp. Calif2	7 54 40

CURRENT TRENDS MEASLES

A graph of the measles cases reported in the United States since 1962 is shown by 4-week periods in Figure 3. Above the graph is a pictorial representation of the amount of live measles virus vaccine distributed during this period. The striking decline in incidence of reported cases of measles appears to be related to increasing vaccine usage.

This decline is also reflected in the geographic distribution of the counties or health districts reporting 10 or more cases of measles for 4-week periods. During the first 4 weeks of the epidemiologic years 1966-67 and 1967-68, 60 counties in 24 states reported 10 or more cases. For the comparable period in 1967, however, 25 counties in 14 states reported 10 or more cases (Figure 4).

A similar reduction is notable in the numbers of counties reporting three or more cases. For the first 4 weeks

Figure 3 REPORTED CASES OF MEASLES BY 4-WEEK PERIODS WITH PICTOGRAM OF DISTRIBUTION OF LIVE MEASLES VIRUS VACCINE UNITED STATES, 1962-1967

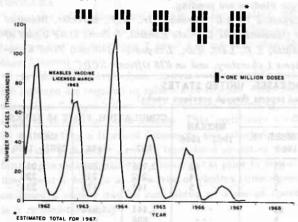
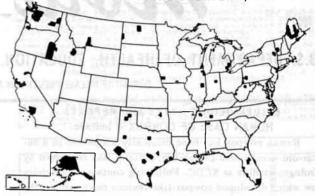
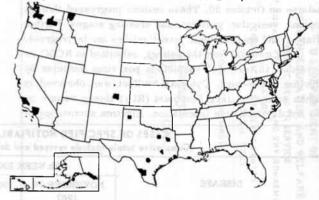


Figure 4 COUNTIES OR HEALTH DISTRICTS REPORTING A TOTAL OF 10 OR MORE CASES OF MEASLES OCTOBER 9 THROUGH NOVEMBER 5, 1966



OCTOBER 8 THROUGH NOVEMBER 4, 1967



of epidemiologic year 1966-67, 56 percent of the 378 reporting counties recorded three or more cases. For the same period of the current year, 38 percent of 279 counties reporting measles recorded three or more cases.

EPIDEMIOLOGIC NOTES AND REPORTS HEPATITIS - U.S. Visitors to Ontario, Canada

Between July 3 and August 10, 1967, 15 cases of infectious hepatitis occurred among a group of persons who had either vacationed or worked at a fishing lodge in Ontario, Canada. Twelve of the cases occurred among approximately 35 persons accommodated by the lodge during the first week in July. One case involved a guest who visited the lodge from July 14 through 17. The two remaining cases occurred in kitchen employees of the lodge.

The 15 cases are shown by date of onset in Figure 5. The index case, a young male kitchen worker whose duties included dishwashing, waiting on tables, and making ice cubes, became ill on July 3, but worked until July 5 when the diagnosis of infectious hepatitis was made. The dates of onset of the other 14 cases occurred over a 24-day period, July 18 - August 10, 1967. One of these

cases was in a female kitchen employee who began work June 24 and became ill August 7.

Twelve of the 13 cases among the guests were adults, ages 25-27; the remaining case was a 14-year-old girl visiting the lodge with her family. All 15 cases, including the two ill employees, developed jaundice; nine were hospitalized. There were no deaths.

The fishing lodge, located on the edge of a lake in Ontario, consists of individual family cottages equipped only with bathing facilities. Well-kept privies are distributed throughout the grounds. Three meals a day are served to the guests in a common dining room, described by the guests as "immaculate." Drinking water is obtained from the adjacent lake via an intake pipe extending 200 feet out and 40 feet deep into the lake.

(Continued on page 392)

NOVEMBER 18, 1967

SURVEILLANCE SUMMARY HEPATITIS - Summer Quarter 1967-68*

During the summer quarter (13-week period from July 2 through September 30, 1967) of the current epidemiologic year 1967-68, there were 9,521 cases of viral hepatitis reported in the United States, representing a rate of 4.8 cases per 100,000 population for that period (Table 1). This was an increase of 30 percent over the rate of 3.7 (7,298 cases) reported during the corresponding quarter of the previous year.

Figure 1 shows the areas in each of the nine geographic divisions of the U.S. Table 1 lists by division the number of reported cases, rates, change in number of cases, and percent change in rates for the summer quarters of epidemiologic years 1966-67 and 1967-68. The rates were

*Hepatitis morbidity data are summarized in terms of an "epidemiologic year," which runs from the 27th week of each year

through the 26th week of the succeeding year.

Figure 1



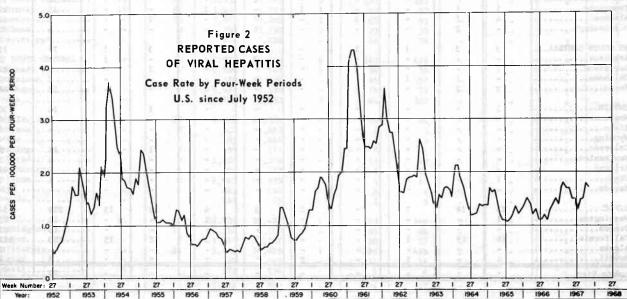
greater in the summer quarter of 1967-68 in all nine divisions; increases ranged from 9 to 69 percent. The largest increases were observed in the South Atlantic and West South Central Divisions (52 and 69 percent, respectively), whereas the smallest increases were noted in the Mountain and East North Central Divisions (9 and 14 percent, respectively).

Figure 2 presents the number of reported cases per 100,000 population by 4-week periods from July 1952 through the 46th week of 1967 (week ending November 18). The increased rates observed during the first 8 weeks of the fall quarter of 1967-68 were higher than those in the comparable period of 1966-67, further supporting the apparent reversal of the downward trend in hepatitis incidence, evident since the peak year (1960-61) of the last epidemic cycle.

Table 1 Reported Cases and Rates of Viral Hepatitis by Division Summer Quarter 1967-68 Compared with Summer Quarter 1966-67

Division		Quarter 1966 – , 1966	Summer July 2, Sept. 30		Change from Summer Quarter 1966-1967		
	Cases	Rate*	Cases	Rate*	Cases	Percent change in rates	
Total United States	7,298	3.7	9,521	4.8	+2,223	+30	
New England	299	2.7	402	3.6	+103	+33	
Middle Atlantic	1,229	3.3	1,615	4.4	+386	+33	
East North Central	1,132	2.9	1,292	3.3	+160	+14	
West North Central	430	2.7	537	3.4	+107	+26	
South Atlantic	684	2.3	1,037	3.5	+353	+52	
East South Central	462	3.6	585	4.5	+123	+25	
West South Central	606	3.2	1,029	5.4	+423	+69	
Mountain	335	4.3	365	4.7	+30	+9	
Pacific	2,121	8.6	2,659	10.5	+538	+22	

*Reported cases per 100,000 population based on U.S. census mid-year estimates.



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CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

NOVEMBER 18, 1967 AND NOVEMBER 19, 1966 (46th WEEK)

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Alabama	4	1		3	-	-	-	2	-	7	12	
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Morbidity and Mortality Weekly Report

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

FOR WEEKS ENDED

NOVEMBER 18, 1967 AND NOVEMBER 19, 1966 (46th WEEK) - CONTINUED

ADEA	MALARIA	MEASLES (Rubeola)			MENINGOCOCCAL INFECTIONS, TOTAL			POLIOMYELITIS			RUBELL
AREA	vi I i	1 6	Cumu1	ative	11 17	Cumula	tive	Total	Para	ytic	1 111
Day Fig. To	1967	1967	1967	1966	1967	1967	1966	1967	1967	Cum. 1967	1967
UNITED STATES	60	310	60,198	195,563	38	1,949	3,072	2	4 A	26	307
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Maine		7	261	2,473		76 3	141			7	35
New Hampshire	2 12 1	- 1	77	80	1	3	12	•			5
Vermont		3	42	316	1 236	1	4	-0.1	1 3 130	11 11 2 3	
Massachusetts		3	380	815	1	36	59		1 2 166		9
Rhode Island	-	- Val.	62	73		4	17	10.0	1 2 80		3
Connecticut	-	2	95	921		29	40			-	18
TIDDLE ATLANTIC	23	19	2,423	18,299	7	319	388	-201	1 .46	5	26
New York City		5	491	8,350	2	56	62		- 1/2	1	8
New York, Up-State.		E	613	2,592	1	79	106	-	1100	î	11
New Jersey	5	9	554	1,913	2	105	109	1.12 %	- 10		6
Pennsylvania	18	5	765	5,444	2	79	111	-		3	1
EAST NORTH CENTRAL	6	57	5,879	69,709	8	286	400	25	733	INCOMES M	107
Ohio	2	4	1,172	6,403		90	490 141	1111	- 17	6	107
Indiana	-	1	626	5,774	3	50	85	1943	1 . 10.	3	27
Illinois	4	33	1,091	11,457	i	61	89	36.30	. 19.		18
Michigan.		7	986	14,901	3	66	127	1507		3	29
Wisconsin		12	2,004	31,174	1	19	48	-		-	32
WEST NORTH CENTRAL		10	2,919	9,013	2	93	158	91	30	3	16
Minnesota	-	5.5	124	1,665	1 1 2	21	35	t Little		3	16
Iowa	- 1	7	771	5,361	1	19	22	1,000	1000	1	15
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SOUTH ATLANTIC	1	51	7,160	15,690	6	370	520	73		2	100 100
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Virginia	-	12	2,239	2,216	1	43	67	-512	100	and b	of Feet
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Tennessee	-	15	1,991	12,488	1	65	92	200.0	- 55-	Sec. 11.	3
Alabama	- U	3	1,348	1,738	3	29	58	201.4	- 130	- (br + 1 <u>2</u> 13)4	1
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Wyoming		5	193	217		1	6		- 11	18164511	TROPINE.
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Washington		11	5,590	4,565	1	36	44	-0.07	110		23
Oregon		9	1,685	2,117	111.5	30	37	-101	1.69	2 505	7
Alaska	6	26	5,142	14,975	1	289	495	2	-		38
Hawaii	5	1	140 182	592 154		11	18			127.0	14
			102	134		4	4				7

Morbidity and Mortality Weekly Report

CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

NOVEMBER 18, 1967 AND NOVEMBER 19, 1966 (46th WEEK) - CONTINUED

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UNITED STATES	8,494	4	198	4	154	8	372	el.	293	67	3,802
NEW ENGLAND	1,155	In this	2	38	1	2	10		1	Here are	97
Maine	31	li i i i i	100	2	1 1 to 10	A 210	- 4		1		23
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Pennsylvania	47	6-1	4 -	1-5	- 176,	-63	5	-1-1	11		16
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Iowa.	113	200	2		1	1.132	3		1 1 1 1		119
Missouri	4	1 7	8	1	9	1	10		1		160
North Dakota	118	112	411	1 - 1	1 (1 (V = 8)	1-100	- I - I		- 10		153
South Dakota	46	1 /-	1	1-2	2	1-654	-1				116
Nebraska.	91	P.Y - 15.	11	-	1.9-	-	4		2		60
Kansas	60	15	- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-	11:	10	128	2		540	3	104
SOUTH ATLANTIC	1,144	1	41		10	2	58	-	116	3	457
Delaware	5 122	11-2	100	1.5	10 may	2 Jan.			-		14 A 35
Dist. of Columbia	17	18-	1 100		10.0		2 3		21	110	6
Virginia	291	1	10		1 100	1.00	6	1 1	28		193
West Virginia	277	1	1		2	_ [_]	2		1	2	62
North Carolina	20	13-	7	11-5	- 523	1-332	4		46		3
South Carolina	6	2.0	1-		2	- 1214	10		5	and to be	2
Georgia	36	0.5	4	0 -	5	2	19	1	15	and the let	113
Florida	370	80	18	11 3	- [m1]:	1.0	12	- 1	A 1-1-1-1	Thirt	74
EAST SOUTH CENTRAL	1,483	-	31		10	2001	64	1-1	53	14	719
Kentucky	105	3-67	4	3-1	1	1 350	24	- 4	15	KDSC ID	161
Tennessee	1,150 158	14.	8 11	11.4	7	12264	11	1 1 1 2	26		502
Mississippi	70	1 32 -	8	1-2	2	1 1	12 17	1 1:	12		46 10
WEST SOUTH CENTRAL	792	114	48	1	80	1	38		42		Transfer
Arkansas	7,52	4551	5	1	47	(1 <u>1</u>	12		42 14		854 108
Louisiana	2	127	4	11.5	8	1	15		2		67
Oklahoma	17	10.1	3	1.11-2	18	1.557	7		16	1 1 1 1 TO 10 TO 1	329
Texas	766	12.	36	1	7	Sec.	4	1.19	10		350
MOUNTAIN	1,384	100	2	11-	10	S. Direct	20		9	11	111
Montana	64	34.5	100	177-121	1	ii Terras	2		- 121		CARRIED.
Idaho	189	1. 2 × × 1	1 6 -	11	12.5	1901	< 1.1	2	1 J . J. T.	in Th	1
Wyoming	237	75	1 4 -	1 - 9	2	7786	1	1-1	1 1 m		5
Colorado New Mexico	553 145	11 34	1-	911	(1 ₁	7.91	12	15/ 15	9		10
Arizona	87	15 24	1-		1350	1.00	3				34 50
Utah	109	17	118 -	10.5	6	P04	6- L-8		Tell Sta		3
Nevada	7 Tab. 3 Tab	1. 3	113.50	11-	1 449	ENC	114		- 110-	-11-43	9
PACIFIC		2	21	11 3	6	1 1	83	10-1	11	3	222
Washington	592	542	filme:	14.5	2	f little	2	-	2	14.24	2
Oregon	121	-	1	1-4	1 21	2500	3	200	3	31.	4
California	704 34	2	16	Test	3	. 1	75	2011	6	3	216
Hawaii	58	0.00	4	+++	3.004	4 1 10 17 1	3	C4/10	7 1 7 1 1 1		HE V.
	20		17	41 2 1		-	3		-		30

Week No.

DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED NOVEMBER 18, 1967

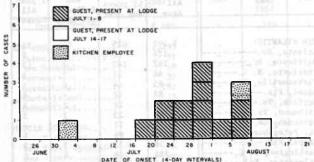
46

(By place of occurrence and week of filing certificate. Excludes fetal deaths)

	All Ca	uses	Pneumonia	Under	The same of the con-	All Ca	uses	Pneumonia	
Area	All Ages	65 years and over	and Influenza All Ages	l year All Causes	Area	All Ages	65 years and over	and Influenza All Ages	1 year All Causes
NEW ENGLAND:	756	479	32	32	SOUTH ATLANTIC:	1,197	625	41	53
Boston, Mass	222	125	10	10	Atlanta, Ga	124	55	5	7
Bridgeport, Conn	36	23	1	4	Baltimore, Md	267	140	7	17
Cambridge, Mass	31	19	ST WELL	•	Charlotte, N. C	44	21	2	3
Fall River, Mass Hartford, Conn	23 58	15 31	Med St.	5	Jacksonville, Fla Miami, Fla	85 81	44 48	6	3
Lowell, Mass	43	28	2	2	Norfolk, Va	46	28	2	6 2
Lynn, Mass	32	26	3	1	Richmond, Va	80	33	3	5
New Bedford, Mass	29	23	100	1	Savannah, Ga	37	17	3	-
New Haven, Conn	58	31	1	1	St. Petersburg, Fla	107	86	4	1
Providence, R. I	69	46	3	4	Tampa, Fla	58	32	3	2
Somerville, Mass Springfield, Mass	17 46	14 34	1	1	Washington, D. C Wilmington, Del	244	108	6	6
Waterbury, Conn	34	21	1001	i	wilmington, Ber.	24	13		1
Worcester, Mass	58	43	10	2	EAST SOUTH CENTRAL:	700	363	35	45
ralies por diff. A rest Co. No.		of probability	7.5-11.1111		Birmingham, Ala	112	54	1	9
IDDLE ATLANTIC:	3,336	2,043	128	132	Chattanooga, Tenn	39	17	2	2
Allastar Da	58	29	1	3	Knoxville, Tenn	50	33	4	1
Allentown, Pa Buffalo, N. Y	36 146	23 91	1	2	Louisville, Ky Memphis, Tenn	133	74	13	12
Camden, N. J	42	22	1	1	Mobile, Ala	142 55	71 28	2	12 5
Elizabeth, N. J	39	23	4	5	Montgomery, Ala	55	30	6	2
Erie, Pa	36	21	5	1	Nashville, Tenn	114	56	7	10
Jersey City, N. J	72	36	2	2	The second second second		The state of	San San	Asia de la
Newark, N. J	106	55	8	3	WEST SOUTH CENTRAL:	1,186	625	51	72
New York City, N. Y	1,755	1,080	66	58	Austin, Tex	34	17	3	1
Paterson, N. J Philadelphia, Pa	36 391	21 240	2 13	3 20	Baton Rouge, La Corpus Christi, Tex	47	24	or per all the	2
Pittsburgh, Pa	197	115	2	8	Dallas, Tex	25 192	16 97	3	14
Reading, Pa	67	43	3	2	El Paso, Tex	41	18	6	2
Rochester, N. Y	110	65	9	8	Fort Worth, Tex	100	58	8	7
Schenectady, N. Y	28	24	3		Houston, Tex	204	100	7	11
Scranton, Pa	43	31	-	2	Little Rock, Ark	63	36	1	5
Syracuse, N. Y	58	40	2	3	New Orleans, La	160	79	6	10
Trenton, N. J Utica, N. Y	48 22	29 19	1 2	1 1	Oklahoma City, Okla San Antonio, Tex	100	62	1	3
Yonkers, N. Y	46	36	2	-	Shreveport, La	118 56	62	2	7 7
W			-	111	Tulsa, Okla	46	32	5	3
AST NORTH CENTRAL:	2,806	1,608	81	148	Miss addresses the				1
Akron, Ohio	76	41	-	5	MOUNTAIN:	449	257	22	13
Canton, Ohio	42	27	7	1	Albuquerque, N. Mex	59	30	3	3
Cincinnati, Ohio	770 197	431 120	24 7	35	Colorado Springs, Colo. Denver, Colo	22	13	4	1
Cleveland, Ohio	249	124	í	6 18	Ogden, Utah	122 20	72 12	1 2	3
Columbus, Ohio	135	65	5	13	Phoenix, Ariz	99	48	4	2
Dayten, Ohio	78	44	2	1	Pueblo, Colo	24	13	1	-
Detroit, Mich	343	206	5	22	Salt Lake City, Utah	48	35	4	1
Evansville, Ind	32	22	1	2	Tucson, Ariz	55	34	3	2
Flint, Mich.	54	29	2	5	PACIFIC:	T T 1114,00	CU TYPE		
Fort Wayne, Ind Gary, Ind	53 40	31 20	3	3	Berkeley, Calif	1,519	931	37	64
Grand Rapids, Mich	63	44	2 4	8 7	Fresno, Calif	18 47	15 27	1	6
Indianapolis, Ind	185	102	2	9	Glendale, Calif	25	17	1 1 2 1	0
Madison, Wis	37	23		3	Honolulu, Hawaii	56	21	37" 37%	8
Milwaukee, Wis	129	81	3	2	Long Beach, Calif	72	47	1	2
Peoria, Ill	51	25		4	Los Angeles, Calif	468	283	11	18
Rockford, Ill	36	27	6	- 7	Oakland, Calif Pasadena, Calif	69	40	100	2
South Bend, Ind Toledo, Ohio	56 125	36 69	2 4	1 2	Portland, Oreg	30 110	23	-	
Youngstown, Ohio	55	41	1	1	Sacramento, Calif	118	79	2 2	4 2
TERMINISTER SERVICE		1	1	1	San Diego, Calif	58 120	75	3	8
EST NORTH CENTRAL:	897	561	29	50	San Francisco, Calif	174	97	5	2
Des Moines, Iowa	55	36		1	San Jose, Calif	29	18		1
Duluth, Minn	20	11	100	64.9° F 0.00	Seattle, Wash	128	78	7	9
Kansas City, Kans	120	27	2	7	Spokane, Wash	68	46	2	-
Kansas City, Mo	139	85	4	11	Tacoma, Wash	39	24	2	2
Lincoln, Nebr Minneapolis, Minn	43 112	29 71	2	7	Total	12 044	7 /02	1,56	600
Omaha, Nebr	86	50	2	í		12,846	7,492	456	609
St. Louis, Mo	265	161	12	16	Cun	ulative T	otals		1 200
St. Paul, Minn	88	63	4	2	including reporte				eks
Wichita, Kans	45	28	3	3	All Causes, All Ages All Causes, Age 65 and o Pneumonia and Influenza, All Causes, Under 1 Year	ver All Ages		322,255 19,726	

HEPATITIS - U.S. Visitors to Ontario, Canada (Continued from page 386)

Figure 5 HEPATITIS CASES RELATED TO FISHING LODGE ONTARIO, CANADA - JULY 3-AUGUST 10, 1967



A routine water sample taken May 28 was negative. Another sample taken in July showed 15 total coliforms but was negative for Escherichia coli. Chlorination was started immediately. In the opinion of the local health authorities, sanitation facilities at the lodge were quite adequate. No gastrointestinal illnesses were reported among the guests in July.

Both the occurrence of cases over a very short period of time and the age distribution suggested a common source outbreak of infectious hepatitis, with exposure occurring during the first week in July. All but one of the affected guests were at the lodge during this period; this was the same time the male kitchen worker who became ill with hepatitis was experiencing his acute illness (July 3-5). The other kitchen employee who became ill was exposed to the index case during this same period and subsequently became ill one month later.

The guest who was not at the lodge during the first week of July developed hepatitis approximately 30 days later on August 10. However, none of the guests who had been at the lodge during the first week of July was present during his stay. This guest had a history of contact with a jaundiced family member who may have had a case of infectious hepatitis. Thus, this guest may represent a case of hepatitis unrelated to the common source outbreak.

(Reported by J.S. Bell, Dr. P.H., Chief, Epidemiology, Ontario Department of Health; William J. Dougherty, M.D., Director, and Paul Marzinsky, both with Division of Preventable Disease Control, New Jersey State Department of Health; and an EIS Officer.)

Editorial Comment:

Most of the guests of the lodge are U.S. residents; the 13 guests who recently developed hepatitis were from four states. Although the cases were geographically widely separated, the outbreak became apparent by careful monitoring of individual hepatitis surveillance case records by the New Jersey State Department of Health. The ensuing investigation represented a cooperative effort by the Canadian health authorities, the epidemiologists of the four involved states, and the Hepatitis Unit, NCDC.

THE MORBIDITY AND MORTALITY WEEKLY REPORT, WITH A CIRCULATION OF 17,000, IS PUBLISHED AT THE NATIONAL COMMUNICABLE DISEASE CENTER, ATLANTA, GEORGIA.

DIRECTOR, NATIONAL COMMUNICABLE DISEASE

CENTER DAVID J. SENCER, M.D. A.D. LANGMUIR, M.D. IDA L. SHERMAN, M.S. CHIEF, EPIDEMIOLOGY PROGRAM ACTING CHIEF STATISTICS SECTION

EDITOR, MMWR MICHAEL B. GREGG, M.D.

IN ADDITION TO THE ESTABLISHED PROCEDURES FOR REPORTING MORBIDITY AND MORTALITY, THE NATIONAL COMMUNICABLE DISEASE CENTER WELCOMES ACCOUNTS OF INTERESTING OUTBREAKS OR CASE INVESTIGATIONS WHICH ARE OF CURRENT INTEREST TO HEALTH OFFICIALS AND WHICH ARE DIRECTLY RELATED TO THE CONTROL OF COMMUNICATIONS SHOULD BE COMMUNICABLE ADDRESSED TO:

NATIONAL COMMUNICABLE DISEASE CENTER ATLANTA, GEORGIA 30333 THE EDITOR MORBIDITY AND MORTALITY WEEKLY REPORT

NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE NCDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES STATE REALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES ON SATURDAY, COMPILED DATA ON A NATIONAL BASIS ARE RELEASED ON THE SUCCEEDING FRIDAY.

BUREAU 9 DISEASE PREVENTION AND ENVIRONMENTAL HEALTH, EDUCATION, AND WELFARE ATLANTA, GEORGIA 30333 PUBLIC HEALTH SERVICE OFFICIAL BUSINESS DEPARTMENT POSTAGE AND FEES DEPARTMENT OF PAID Ŧ

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