

Morbidity and Mortality



DEC 27

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INTERNATIONAL NOTES SMALLPOX SURVEILLANCE SUMMARY Worldwide and South America

Between Jan. 1 and Nov. 23, 1971, a total of 40,801 cases of smallpox were reported to the World Health Organization (WHO), and it is now estimated that approximately 45,000 cases will be reported for 1971. This is considerably higher than the 25,000 cases forecast in May 1971, and the increase is accounted for by the rapidity of development of surveillance activities in Ethiopia, East Africa. An increase in cases in 1971 has also been observed in India, Pakistan, and Sudan. The increase for India and Pakistan is attributed to a marked improvement in the completeness of the notification of cases.

South America

In the past year, only one smallpox outbreak involving 20 persons has been reported from South America. The outbreak occurred between December 1970 and April 1971. The cases were located in two clusters of houses which were

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approximately 1 mile apart in a lower socio-economic area of Rio de Janeiro, Brazil. Intensive containment measures in and around the involved area were instituted, and no new cases have been reported anywhere in the continent. The absence of reported cases from a continental area which reported over 7,000 cases only 2 years ago is encouraging. The difficult problem now, however, is to insure that there are no unknown foci which might serve as sources for the re-establishment of endemic transmission.

(Continued on page 452)

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

DISEASE	50th WEEK ENDED		MEDIAN 1966 - 1970	CUMULATIVE, FIRST 50 WEEKS		
	December 18, 1971	December 19, 1970		1971	1970	MEDIAN 1966 - 1970
Aseptic meningitis	75	89	49	4,990	6,043	3,409
Brucellosis	3	5	4	162	203	223
Diphtheria	11	6	5	196	436	199
Encephalitis, primary:						
Arthropod-borne & unspecified	21	28	29	1,486	1,532	1,532
Encephalitis, post-infectious	5	6	10	321	364	452
Hepatitis, serum	185	143	107	8,501	7,072	4,538
Hepatitis, infectious	1,058	1,311	936	58,316	54,847	44,078
Malaria	56	58	43	2,815	3,346	2,288
Measles (rubeola)	481	958	665	74,128	45,904	45,904
Meningococcal infections, total	30	49	58	2,110	2,379	2,460
Civilian	28	40	47	1,890	2,094	2,249
Military	2	9	6	220	285	242
Mumps	2,012	2,742	---	118,356	98,433	---
Poliomyelitis, total	—	—	—	11	29	45
Paralytic	—	—	—	8	28	32
Rubella (German measles)	329	426	412	42,618	54,602	47,728
Tetanus	3	2	4	113	134	164
Tularemia	4	4	4	177	153	159
Typhoid fever	5	7	7	405	348	364
Typhus, tick-borne (Rky. Mt. spotted fever)	2	1	—	402	338	297
Rabies in animals	59	54	60	3,752	2,919	3,257

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax	4	Psittacosis	37
Botulism	15	Rabies in Man	1
Leprosy: * Hawaii-1, Tex.-2	112	Rubella congenital syndrome	55
Leptospirosis: Tex.-1	42	Trichinosis	99
Plague	1	Typhus, murine	23

*Delayed reports: Leprosy: Mich. 1

SMALLPOX — (Continued from front page)

The pattern of smallpox occurrence since 1967 suggests that persistent smallpox foci in countries other than Brazil would be unlikely (Table 1). Since 1967, cases have been reported from only three countries other than Brazil: Argentina (24 cases), Uruguay (5), and French Guiana (1). All these cases occurred in areas near or adjacent to Brazil, and all could be traced to importations from that country. All of these outbreaks were effectively contained.

In Brazil between 1967 and August 1971, a systematic program of vaccination reached 82 million people out of an estimated population of 94 million. The surveillance program was initiated in July 1969 and was extended throughout the country in 1970. Soon after it began, smallpox incidence rose abruptly (Figure 1) as notifications became more complete and many additional cases were discovered. In 1970, smallpox incidence fell to record low levels, despite a further intensified surveillance program and finally declined to a nil incidence at a time when a seasonal increase in cases was expected.

Table 1
Cases of Smallpox — South America, 1967-1971

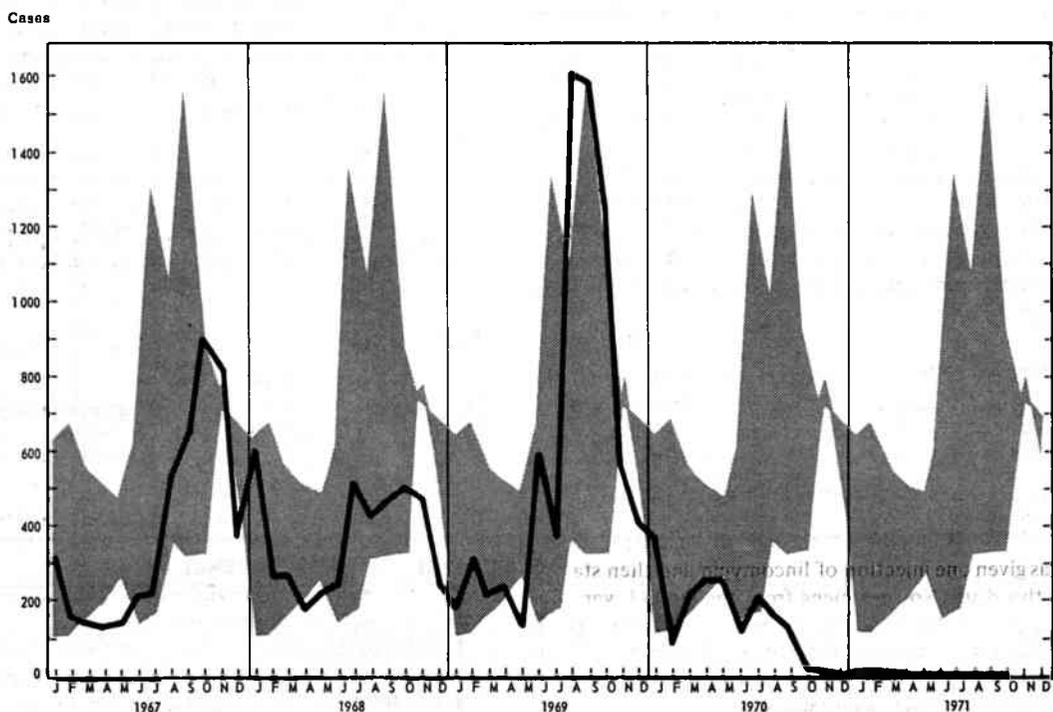
	1967	1968	1969	1970	1971
Argentina	30	0	0	24	0
Brazil	4,514	4,372	7,407	1,771	19
French Guiana	0	1	0	0	0
Uruguay	0	2	3	0	0
Other countries	0	0	0	0	0
Total	4,544	4,375	7,410	1,795	19

At present, there is a Surveillance Unit in all state capitals to encourage reporting and to investigate all suspected cases. To date, 3,169 reporting units have also been established, and most are located in the coastal area where 90 percent of the population resides.

In 1970 and 1971, systematic vaccination campaigns were conducted throughout a number of states following the last known outbreaks. In this period, the states and territories of the sparsely populated Amazon Basin (2.9 million vaccinations in a population of 3.5 million) and the State of Mato Grosso (1.4 of 1.5 million persons) were vaccinated. No cases were detected. In these same areas, an International Red Cross medical team visited 20 of the 36 Indian tribes in 1970 and examined approximately 10 percent of the Indian population in a 4-month survey; no cases were detected. In 1971, 9.5 million persons were vaccinated in the States of Piauí, Rio Grande do Norte, Pernambuco, and Alagoas in a repeat round of the systematic vaccination campaign; again, no cases were found. In Argentina in the past 3 years, 5.2 million vaccinations were performed, primarily in the northern states, and the vaccination program is continuing. Vaccination programs in Uruguay are also continuing, and between 1967 and 1971, 2.0 million persons (population 2.9 million) were reported to have been vaccinated.

In a further attempt to detect unrecognized foci, special studies were conducted in the past 6 months in four areas considered to be at high risk: (1) Brasília, the national capital, (2) São Paulo State, (3) Rio de Janeiro and the surrounding area, and (4) the remote areas of Bahia and Minas Gerais

Figure 1
SMALLPOX INCIDENCE — SOUTH AMERICA, 1967-1971



Note: The grey area represents the range between the highest and lowest incidence reported during the five-year period 1962-1966.

States. All suspected cases were investigated as well as recently reported cases of chickenpox; scar surveys were also conducted. No cases of smallpox which had occurred since the first of the year were detected in any of the surveys.

Eradication programs have been in progress in Bolivia, Peru, Colombia, Venezuela, and Ecuador for at least the past 4 years. No cases have been reported in this period. Surinam and Guyana, whose populations are concentrated on the northern coast of South America and have little communication with Brazil, have recorded no cases for 20 and 50 years, respectively.

Paraguay was considered to be of special concern because of its long common border with Brazil and because it had no eradication program. Accordingly, between March and June 1971, WHO staff and national authorities, with the cooperation of the health and malaria eradication personnel, undertook the most intensive special survey conducted in any of the countries. Over 150,000 persons (6.5 percent of the population) were contacted, and no cases of smallpox could

be detected. Scar surveys of over 19,000 persons in six different locations revealed a higher level of immunity than expected. Among those under 5 years of age, 43 percent had vaccination scars (range 18 to 69 percent), and among those 5-14 years, 82 percent had scars (range 67 to 90 percent).

Summary

While only 7 months have elapsed since the last detected cases in South America, it appears probable that smallpox transmission has been interrupted. At this time, any suspected case must, of course, be regarded as a public health emergency and investigated immediately. Thus, as recommended by the Scientific Group on Smallpox Eradication, at least 18 months must yet elapse before transmission in South America may be considered to have been interrupted, provided that an effective surveillance program is conducted throughout this period.

(Reported by the World Health Organization: Weekly Epidemiological Record, Vol. 46, No. 48, 1971.)

EPIDEMIOLOGIC NOTES AND REPORTS

PRIMARY AMEBIC MENINGOENCEPHALITIS — Pennsylvania

On June 27, 1971, a 58-year-old man from Philadelphia, Pennsylvania, was admitted to a local hospital with signs of meningeal irritation. The patient was a chronic alcoholic and had a 2-week history of non-specific weakness prior to admission.

Initial lumbar puncture showed an elevated cerebrospinal fluid (CSF) protein (150 mg percent which increased to the 500 mg percent range on serial lumbar punctures), a lowered CSF sugar (28 mg percent with a blood sugar of 160 mg percent), a white blood cell count of 520 with 90 percent lymphocytes, and normal pressure. No organisms were noted on Gram or acid-fast stains or India ink preparation. Brain scan and bilateral carotid arteriograms were within normal limits, but the electroencephalogram was diffusely abnormal. No organism was cultured.

The patient suffered progressive neurologic deterioration including transient diabetes insipidus in spite of therapy with antituberculous drugs and 4 days of Amphotericin B. He died on July 13 of aspiration pneumonitis.

At autopsy, pathology was limited to the brain, which demonstrated a necrotizing encephalitis involving primarily the temporal lobes and brain stem. Amebae with morphologic features consistent with a species of *Acanthamoeba* were found in perivascular clusters in sections taken from these

areas. Injections of fresh brain into tissue culture caused death of the cells, but no organism could be identified. Attempts to culture amebae from a frozen section of the brain were also unsuccessful. Examination for acid-fast bacilli, fungi, and viral inclusion bodies as well as serologic studies for viral infection were negative.

An epidemiologic investigation revealed that the patient had not recently been swimming and that none of his family members or neighbors had had a similar illness. There had been water from an unknown source in his basement in the latter half of June; however, no water was available for culture at the time of the investigation.

(Reported by Lucy Rorke, M.D., Chief, Neuropathology, Philadelphia General Hospital, Pennsylvania; Sylvan Fish, M.D., Consultant, Division of Epidemiology, David Faris, M.D., Chief, Communicable Disease Control Section, Philadelphia City Health Department; and an EIS Officer.)

Editorial Note

Nearly all cases of primary amebic meningoencephalitis previously reported in the United States have been due to *Naegleria sp.* and have occurred in the Southeast. The patients have been in otherwise good health and have recently swum in fresh water.

WOUND BOTULISM — Nebraska

On July 5, 1971, a 12-year-old girl from Kimball, Nebraska, consulted a physician for four puncture wounds of the foot. The wounds were cleaned, and she was given diphtheria-tetanus toxoid and started on oral penicillin (250 mg, four times a day). The child had previously been vaccinated against diphtheria-tetanus-pertussis and received a booster in January 1970. On July 9, her foot appeared to be infected, and she was given one injection of lincomycin and then started orally on this drug. No specimens from the wound were obtained for culture. On July 10, she was admitted to a local hospital with severe diplopia and vertigo. Botulism was considered; however, the patient had not eaten any home-canned foods, and the rest of her family was well.

On admission, the patient complained of a sore throat,

was noted to be hoarse, but was not dysarthric. Physical examination showed a mild, bilateral, external otitis, a red throat which was not thought to be excessively dry, and a "blotchy, migrating" macular rash involving the trunk and upper extremities. Spinal tap showed an opening pressure of 590 mm of water, no cells, and normal protein and glucose. Neurologic examination showed dilated, round, equal pupils which reacted to light. There was no muscular rigidity or trismus. She was not unusually weak, could sit upright, and was without respiratory difficulties; however, she required oral suction to control secretions. The patient was oriented, lucid, and afebrile until July 11, when she suffered a cardio-respiratory arrest, followed by a temperature rise to 100.4° F. She was

(Continued on page 458)

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TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

DECEMBER 18, 1971 AND DECEMBER 19, 1970 (50th WEEK)

AREA	ASEPTIC MENIN- GITIS	BRUCEL- LOSIS	DIPH- THERIA	ENCEPHALITIS			HEPATITIS			MALARIA	
				Primary including unsp. cases		Post In- fectious	Serum	Infectious		1971	Cum. 1971
				1971	1970			1971	1971		
UNITED STATES.....	75	3	11	21	28	5	185	1,058	1,311	56	2,815
NEW ENGLAND.....	-	-	-	-	-	-	5	95	142	1	83
Maine*	-	-	-	-	-	-	1	8	11	-	5
New Hampshire*	-	-	-	-	-	-	-	6	5	-	-
Vermont.....	-	-	-	-	-	-	-	6	37	-	1
Massachusetts.....	-	-	-	-	-	-	1	39	46	-	57
Rhode Island.....	-	-	-	-	-	-	1	17	15	-	8
Connecticut.....	-	-	-	-	-	-	2	19	28	1	12
MIDDLE ATLANTIC.....	30	-	-	10	6	-	81	201	267	2	269
New York City.....	17	-	-	1	-	-	29	41	91	-	24
New York, Up-State...	9	-	-	6	1	-	2	47	53	-	73
New Jersey.....	-	-	-	-	1	-	28	53	72	2	115
Pennsylvania.....	4	-	-	3	4	-	22	60	51	-	57
EAST NORTH CENTRAL.....	3	-	1	2	8	-	22	141	205	2	194
Ohio.....	-	-	-	-	4	-	2	32	53	-	26
Indiana.....	-	-	-	-	1	-	-	5	8	-	15
Illinois.....	-	-	-	-	-	-	8	79	56	1	61
Michigan.....	3	-	1	1	2	-	12	15	81	1	57
Wisconsin.....	-	-	-	1	1	-	-	10	7	-	35
WEST NORTH CENTRAL.....	5	1	-	3	3	1	3	24	50	5	255
Minnesota.....	5	-	-	1	2	1	-	4	9	2	38
Iowa.....	-	1	-	1	1	-	-	3	8	-	26
Missouri.....	-	-	-	-	-	-	3	5	9	-	28
North Dakota.....	-	-	-	-	-	-	-	3	4	-	3
South Dakota.....	-	-	-	1	-	-	-	4	1	1	3
Nebraska.....	-	-	-	-	-	-	-	1	14	-	14
Kansas.....	-	-	-	-	-	-	-	4	5	2	143
SOUTH ATLANTIC.....	14	-	1	2	6	3	15	178	118	7	420
Delaware.....	-	-	-	-	-	-	-	4	1	-	3
Maryland.....	2	-	-	-	-	-	2	23	8	1	54
Dist. of Columbia....	-	-	-	-	-	-	-	3	2	-	4
Virginia.....	1	-	-	-	1	-	5	29	28	1	68
West Virginia.....	-	-	-	-	1	-	-	18	15	-	7
North Carolina.....	4	-	-	-	-	-	-	31	15	-	146
South Carolina.....	-	-	-	-	-	-	-	7	6	-	20
Georgia.....	-	-	-	-	-	-	-	11	4	5	74
Florida.....	7	-	1	2	4	3	8	52	39	-	44
EAST SOUTH CENTRAL.....	8	-	4	-	-	-	6	68	86	11	303
Kentucky.....	2	-	-	-	-	-	-	32	26	11	270
Tennessee.....	1	-	-	-	-	-	4	24	51	-	-
Alabama.....	5	-	4	-	-	-	2	7	3	-	23
Mississippi.....	-	-	-	-	-	-	-	5	6	-	10
WEST SOUTH CENTRAL.....	6	2	2	-	-	-	17	98	91	23	549
Arkansas.....	-	-	-	-	-	-	-	2	3	-	20
Louisiana.....	4	-	2	-	-	-	5	18	19	-	39
Oklahoma.....	1	-	-	-	-	-	-	13	8	-	71
Texas.....	1	2	-	-	-	-	12	65	61	23	419
MOUNTAIN.....	-	-	-	2	-	-	4	42	99	-	166
Montana.....	-	-	-	-	-	-	-	4	5	-	2
Idaho.....	-	-	-	-	-	-	1	2	3	-	6
Wyoming.....	-	-	-	-	-	-	-	1	1	-	3
Colorado.....	-	-	-	1	-	-	1	8	37	-	129
New Mexico.....	-	-	-	1	-	-	-	7	19	-	11
Arizona.....	-	-	-	-	-	-	2	15	13	-	10
Utah.....	-	-	-	-	-	-	-	5	20	-	3
Nevada.....	-	-	-	-	-	-	-	-	1	-	2
PACIFIC.....	9	-	3	2	5	1	32	211	253	5	576
Washington.....	-	-	-	-	-	-	1	19	30	-	2
Oregon.....	-	-	-	-	-	-	1	30	32	-	21
California.....	9	-	3	2	4	1	30	151	182	5	489
Alaska.....	-	-	-	-	-	-	-	11	2	-	7
Hawaii.....	-	-	-	-	1	-	-	-	7	-	57
Puerto Rico.*	-	-	-	-	-	-	1	20	9	1	25
Virgin Islands.....	-	-	-	-	-	-	-	2	-	-	-

*Delayed reports: Hepatitis, serum: Me. 1, N.J. delete 1

Hepatitis, infectious: Me. 2, N.H. 1, N.J. delete 1, P.R. 13

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDED
DECEMBER 18, 1971 AND DECEMBER 19, 1970 (50th WEEK) - CONTINUED

AREA	MEASLES (Rubeola)			MENINGOCOCCAL INFECTIONS, TOTAL			MUMPS		POLIOMYELITIS		
	1971	Cumulative		1971	Cumulative		1971	Cum. 1971	Total	Paralytic	
		1971	1970		1971	1970			1971	1971	Cum. 1971
UNITED STATES.....	481	74,128	45,904	30	2,110	2,379	2,012	118,356	-	-	8
NEW ENGLAND.....	2	3,518	1,187	1	99	102	95	7,062	-	-	-
Maine.*.....	1	1,487	423	-	9	5	10	1,286	-	-	-
New Hampshire.....	-	218	61	1	22	9	4	682	-	-	-
Vermont.....	-	121	9	-	-	8	13	484	-	-	-
Massachusetts.....	1	261	459	-	37	40	16	1,767	-	-	-
Rhode Island.....	-	241	120	-	3	7	18	1,302	-	-	-
Connecticut.....	-	1,190	115	-	28	33	34	1,541	-	-	-
MIDDLE ATLANTIC.....	4	7,729	5,369	5	278	440	44	6,790	-	-	-
New York City.....	2	3,809	1,097	1	56	90	28	2,036	-	-	-
New York, Up-State...	-	699	461	1	84	84	NN	NN	-	-	-
New Jersey.....	2	1,289	1,727	-	60	181	3	1,796	-	-	-
Pennsylvania.....	-	1,932	2,084	3	78	85	13	2,958	-	-	-
EAST NORTH CENTRAL.....	129	16,793	10,697	4	248	275	604	46,304	-	-	-
Ohio.....	-	4,064	3,994	1	81	100	50	8,626	-	-	-
Indiana.....	23	2,987	280	1	21	26	14	5,342	-	-	-
Illinois.....	29	3,306	3,268	-	67	68	122	5,105	-	-	-
Michigan.*.....	12	2,621	1,842	2	64	68	148	10,535	-	-	-
Wisconsin.....	65	3,815	1,313	-	15	13	270	16,696	-	-	-
WEST NORTH CENTRAL.....	20	7,290	3,935	1	150	123	424	9,717	-	-	-
Minnesota.....	2	59	40	1	28	22	13	1,357	-	-	-
Iowa.....	17	2,693	1,175	-	14	14	325	5,438	-	-	-
Missouri.....	-	2,606	1,279	-	51	64	1	1,085	-	-	-
North Dakota.....	-	242	321	-	6	5	31	413	-	-	-
South Dakota.....	-	221	104	-	6	1	4	274	-	-	-
Nebraska.....	1	70	945	-	16	8	1	225	-	-	-
Kansas.....	-	1,399	71	-	29	9	49	925	-	-	-
SOUTH ATLANTIC.....	239	9,095	7,607	7	379	464	165	8,576	-	-	1
Delaware.....	-	42	269	-	2	3	2	186	-	-	-
Maryland.....	-	555	1,387	-	53	47	16	772	-	-	-
Dist. of Columbia....	-	16	345	-	14	3	1	101	-	-	-
Virginia.....	-	1,613	2,156	1	46	48	13	1,061	-	-	-
West Virginia.....	2	569	338	-	12	13	66	2,594	-	-	-
North Carolina.....	1	1,959	946	2	73	99	NN	NN	-	-	-
South Carolina.....	3	933	638	-	20	48	9	911	-	-	-
Georgia.....	-	1,138	18	1	26	45	-	11	-	-	1
Florida.....	233	2,270	1,510	3	133	158	58	2,940	-	-	-
EAST SOUTH CENTRAL.....	4	8,467	2,040	4	192	167	141	8,802	-	-	-
Kentucky.....	1	3,977	1,077	1	55	60	17	2,525	-	-	-
Tennessee.....	-	1,025	471	1	76	70	106	5,086	-	-	-
Alabama.....	2	1,971	378	2	35	25	13	1,031	-	-	-
Mississippi.....	1	1,494	114	-	26	12	5	160	-	-	-
WEST SOUTH CENTRAL.....	25	12,726	9,309	-	181	292	137	9,469	-	-	3
Arkansas.....	-	778	32	-	5	25	-	157	-	-	-
Louisiana.....	2	1,714	242	-	68	72	5	151	-	-	-
Oklahoma.....	-	758	942	-	10	23	6	208	-	-	-
Texas.....	23	9,476	8,093	-	98	172	126	8,953	-	-	3
MOUNTAIN.....	15	3,526	2,275	-	65	53	101	4,853	-	-	2
Montana.....	-	925	114	-	7	1	3	445	-	-	-
Idaho.....	-	274	481	-	11	7	13	182	-	-	-
Wyoming.....	-	85	11	-	2	2	-	416	-	-	-
Colorado.....	7	853	306	-	7	18	23	1,609	-	-	1
New Mexico.....	4	405	302	-	5	2	46	761	-	-	-
Arizona.....	4	641	1,004	-	9	16	15	1,248	-	-	-
Utah.....	-	336	36	-	20	6	1	192	-	-	-
Nevada.....	-	7	21	-	4	1	-	-	-	-	1
PACIFIC.....	43	4,984	3,485	8	518	463	301	16,783	-	-	2
Washington.....	22	1,163	759	1	36	49	60	6,690	-	-	1
Oregon.....	-	378	448	1	42	32	35	1,700	-	-	1
California.....	16	2,853	1,945	6	430	377	198	7,349	-	-	-
Alaska.....	-	63	141	-	1	-	4	108	-	-	-
Hawaii.....	5	527	192	-	9	5	4	936	-	-	-
Puerto Rico.*.....	11	622	984	-	10	5	49	1,338	-	-	-
Virgin Islands.....	-	17	8	-	-	3	2	86	-	-	-

*Delayed reports: Measles: Me. 1, Mich. 38, P.R. 2
Mumps: P.R. 15

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TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

DECEMBER 18, 1971 AND DECEMBER 19, 1970 (50th WEEK) - CONTINUED

AREA	RUBELLA		TETANUS		TULAREMIA		TYPHOID FEVER		TYPHUS FEVER TICK-BORNE (Rky. Mt. Spotted)		RABIES IN ANIMALS	
	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971
UNITED STATES.....	329	42,618	3	113	4	177	5	405	2	402	59	3,752
NEW ENGLAND.....	6	1,850	-	6	-	1	1	19	-	5	7	220
Maine.....*	1	274	-	-	-	-	-	1	-	-	6	192
New Hampshire.....	-	50	-	2	-	-	-	-	-	-	-	3
Vermont.....	-	102	-	-	-	-	-	-	-	-	1	16
Massachusetts.....	2	857	-	1	-	-	1	14	-	3	-	8
Rhode Island.....	1	110	-	-	-	-	-	-	-	2	-	1
Connecticut.....	2	457	-	3	-	1	-	4	-	-	-	-
MIDDLE ATLANTIC.....	23	2,730	-	11	-	-	-	93	-	38	-	154
New York City.....	9	613	-	6	-	-	-	23	-	1	-	-
New York, Up-State..	2	439	-	1	-	-	-	15	-	17	-	133
New Jersey.....	9	644	-	2	-	-	-	8	-	9	-	-
Pennsylvania.....	3	1,034	-	2	-	-	-	47	-	11	-	21
EAST NORTH CENTRAL....	61	9,279	1	18	1	9	-	57	-	20	8	392
Ohio.....	2	1,034	-	2	-	1	-	21	-	15	2	113
Indiana.....	5	2,210	1	3	-	-	-	6	-	-	-	81
Illinois.....	8	1,358	-	6	-	4	-	14	-	3	1	71
Michigan.....*	22	2,917	-	7	1	2	-	10	-	2	1	48
Wisconsin.....	24	1,760	-	-	-	2	-	6	-	-	4	79
WEST NORTH CENTRAL....	27	3,331	-	6	1	20	2	6	-	9	19	1,058
Minnesota.....	7	291	-	3	-	-	1	1	-	-	5	256
Iowa.....	10	743	-	1	-	-	-	-	-	2	7	231
Missouri.....	-	1,374	-	2	1	16	-	4	-	5	1	147
North Dakota.....	1	97	-	-	-	-	-	-	-	-	4	186
South Dakota.....	-	99	-	-	-	1	-	-	-	-	-	120
Nebraska.....	2	99	-	-	-	-	-	-	-	-	-	8
Kansas.....	7	628	-	-	-	3	1	1	-	2	2	110
SOUTH ATLANTIC.....	17	3,461	1	27	-	23	-	51	1	206	4	406
Delaware.....	-	51	-	-	-	-	-	1	-	2	-	-
Maryland.....	2	170	-	1	-	4	-	4	-	31	-	2
Dist. of Columbia..	-	8	-	4	-	-	-	4	-	-	-	-
Virginia.....	2	228	1	4	-	9	-	15	1	36	1	76
West Virginia.....	4	716	-	-	-	-	-	4	-	4	-	122
North Carolina.....	-	52	-	2	-	4	-	4	-	106	-	7
South Carolina.....	1	455	-	1	-	-	-	2	-	14	-	-
Georgia.....	-	1	-	2	-	4	-	2	-	13	2	143
Florida.....	8	1,780	-	13	-	2	-	15	-	-	1	56
EAST SOUTH CENTRAL....	41	4,045	-	16	1	14	-	48	1	64	4	342
Kentucky.....	16	1,754	-	3	-	2	-	11	-	13	-	171
Tennessee.....	19	1,989	-	7	1	8	-	26	1	35	2	107
Alabama.....	2	222	-	4	-	3	-	8	-	9	2	60
Mississippi.....	4	80	-	2	-	1	-	3	-	7	-	4
WEST SOUTH CENTRAL....	41	5,040	-	16	1	63	2	47	-	48	13	741
Arkansas.....	-	338	-	1	-	25	1	16	-	6	4	105
Louisiana.....	3	294	-	3	-	8	-	6	-	1	6	52
Oklahoma.....	-	75	-	2	1	18	-	3	-	28	-	276
Texas.....	38	4,333	-	10	-	12	1	22	-	13	3	308
MOUNTAIN.....	22	2,078	-	2	-	40	-	9	-	12	-	72
Montana.....	1	126	-	-	-	2	-	-	-	3	-	-
Idaho.....	-	43	-	1	-	1	-	-	-	4	-	-
Wyoming.....	-	861	-	-	-	-	-	-	-	-	-	12
Colorado.....	3	326	-	-	-	-	-	2	-	2	-	11
New Mexico.....	7	247	-	-	-	-	-	5	-	1	-	9
Arizona.....	11	391	-	1	-	-	-	2	-	-	-	25
Utah.....	-	69	-	-	-	37	-	-	-	1	-	10
Nevada.....	-	15	-	-	-	-	-	-	-	1	-	5
PACIFIC.....	91	10,804	1	11	-	7	-	75	-	-	4	367
Washington.....	14	1,510	-	1	-	-	-	1	-	-	-	-
Oregon.....	7	807	1	2	-	3	-	-	-	-	-	9
California.....	69	8,256	-	7	-	4	-	69	-	-	4	324
Alaska.....	-	50	-	-	-	-	-	1	-	-	-	34
Hawaii.....	1	181	-	1	-	-	-	4	-	-	-	-
Puerto Rico.....*	-	62	-	8	-	-	-	4	-	-	3	79
Virgin Islands.....	-	1	-	-	-	-	-	1	-	-	-	-

*Delayed reports: Rubella: Me. 1, Mich. delete 38

Tetanus: Mich. 4

Rabies in animals: P.R. 1

Morbidity and Mortality Weekly Report

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Week No. 50 TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED DECEMBER 18, 1971

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

Area	All Causes		Pneumonia and Influenza All Ages	Under 1 year All Causes	Area	All Causes		Pneumonia and Influenza All Ages	Under 1 year All Causes
	All Ages	65 years and over				All Ages	65 years and over		
NEW ENGLAND:	725	457	56	26	SOUTH ATLANTIC:	1,326	692	62	65
Boston, Mass.-----	230	138	16	14	Atlanta, Ga.-----	156	72	6	10
Bridgeport, Conn.-----	48	32	5	—	Baltimore, Md.-----	250	137	6	13
Cambridge, Mass.-----	24	19	5	—	Charlotte, N. C.-----	64	26	—	7
Fall River, Mass.-----	29	22	3	1	Jacksonville, Fla.-----	87	50	2	3
Hartford, Conn.-----	54	31	—	2	Miami, Fla.-----	148	75	3	2
Lowell, Mass.-----	23	14	1	2	Norfolk, Va.-----	73	33	12	1
Lynn, Mass.-----	21	12	2	—	Richmond, Va.-----	104	45	6	6
New Bedford, Mass.-----	28	22	3	—	Savannah, Ga.-----	42	23	5	2
New Haven, Conn.-----	59	29	1	2	St. Petersburg, Fla.-----	83	65	7	2
Providence, R. I.-----	62	37	6	3	Tampa, Fla.-----	64	38	7	5
Somerville, Mass.-----	10	9	—	—	Washington, D. C.-----	211	100	8	13
Springfield, Mass.-----	46	28	10	1	Wilmington, Del.-----	44	28	—	1
Waterbury, Conn.-----	27	20	—	—	EAST SOUTH CENTRAL:	661	395	27	20
Worcester, Mass.-----	64	44	4	1	Birmingham, Ala.-----	104	53	5	7
MIDDLE ATLANTIC:	3,118	1,907	116	85	Chattanooga, Tenn.-----	75	47	6	4
Albany, N. Y.-----	59	35	—	6	Knoxville, Tenn.-----	39	29	—	1
Allentown, Pa.-----	40	30	3	—	Louisville, Ky.-----	132	90	8	3
Buffalo, N. Y.-----	145	90	3	4	Memphis, Tenn.-----	110	71	2	2
Camden, N. J.-----	44	26	4	4	Mobile, Ala.-----	61	37	1	—
Elizabeth, N. J.-----	38	22	1	—	Montgomery, Ala.-----	38	20	3	2
Erie, Pa.-----	32	22	1	2	Nashville, Tenn.-----	102	48	2	1
Jersey City, N. J.-----	50	29	1	4	WEST SOUTH CENTRAL:	1,322	697	54	62
Newark, N. J.-----	77	43	5	2	Austin, Tex.-----	36	19	1	2
New York City, N. Y.†	1,445	896	58	30	Baton Rouge, La.-----	40	18	4	3
Paterson, N. J.-----	39	22	5	—	Corpus Christi, Tex.-----	35	15	1	3
Philadelphia, Pa.-----	590	326	4	16	Dallas, Tex.-----	181	88	4	9
Pittsburgh, Pa.-----	100	62	4	2	El Paso, Tex.-----	49	19	3	4
Reading, Pa.-----	53	40	4	1	Fort Worth, Tex.-----	83	50	3	4
Rochester, N. Y.-----	147	97	11	8	Houston, Tex.-----	271	136	7	9
Schenectady, N. Y.-----	29	20	2	1	Little Rock, Ark.-----	69	29	2	1
Scranton, Pa.-----	39	28	1	1	New Orleans, La.-----	178	87	6	11
Syracuse, N. Y.-----	75	49	1	3	Oklahoma City, Okla.-----	90	45	2	6
Trenton, N. J.-----	46	30	2	—	San Antonio, Tex.-----	156	107	11	5
Utica, N. Y.-----	27	11	3	1	Shreveport, La.-----	62	35	2	2
Yonkers, N. Y.-----	43	29	3	—	Tulsa, Okla.-----	72	49	8	3
EAST NORTH CENTRAL:	2,628	1,461	92	110	MOUNTAIN:	518	297	26	27
Akron, Ohio-----	63	40	—	2	Albuquerque, N. Mex.-----	49	33	8	—
Canton, Ohio-----	35	22	1	2	Colorado Springs, Colo.-----	30	18	4	1
Chicago, Ill.-----	758	379	21	43	Denver, Colo.-----	138	70	3	12
Cincinnati, Ohio-----	138	86	3	5	Ogden, Utah-----	24	15	2	—
Cleveland, Ohio-----	206	102	3	9	Phoenix, Ariz.-----	130	74	1	6
Columbus, Ohio-----	92	50	8	1	Pueblo, Colo.-----	21	14	3	2
Dayton, Ohio-----	88	50	1	2	Salt Lake City, Utah-----	59	35	4	2
Detroit, Mich.-----	328	169	12	19	Tucson, Ariz.-----	67	38	1	4
Evansville, Ind.-----	58	42	2	1	PACIFIC:	1,732	1,097	34	69
Flint, Mich.-----	63	28	2	2	Berkeley, Calif.-----	18	17	—	—
Fort Wayne, Ind.-----	51	33	8	2	Fresno, Calif.-----	54	30	2	7
Gary, Ind.-----	34	16	2	2	Glendale, Calif.-----	50	36	—	—
Grand Rapids, Mich.-----	57	36	5	1	Honolulu, Hawaii-----	35	21	3	5
Indianapolis, Ind.-----	155	88	—	4	Long Beach, Calif.-----	110	69	3	5
Madison, Wis.-----	59	39	4	1	Los Angeles, Calif.-----	525	339	9	12
Milwaukee, Wis.-----	126	86	5	2	Oakland, Calif.-----	72	45	1	9
Peoria, Ill.-----	44	23	—	4	Pasadena, Calif.-----	31	21	—	—
Rockford, Ill.-----	38	23	7	3	Portland, Oreg.-----	131	83	1	6
South Bend, Ind.-----	39	24	3	1	Sacramento, Calif.-----	76	52	2	3
Toledo, Ohio-----	118	77	3	4	San Diego, Calif.-----	127	74	1	1
Youngstown, Ohio-----	78	48	2	—	San Francisco, Calif.-----	193	111	3	6
WEST NORTH CENTRAL:	767	496	22	25	San Jose, Calif.-----	44	28	3	2
Des Moines, Iowa-----	52	38	2	1	Seattle, Wash.-----	158	101	—	6
Duluth, Minn.-----	25	17	1	—	Spokane, Wash.-----	65	44	6	6
Kansas City, Kans.-----	33	20	3	4	Tacoma, Wash.-----	43	26	—	1
Kansas City, Mo.-----	109	62	1	4	Total	12,797	7,499	489	489
Lincoln, Nebr.-----	39	28	1	—	Expected Number	13,240	7,663	525	591
Minneapolis, Minn.-----	88	60	1	6	Cumulative Total (includes reported corrections for previous weeks)	637,066	366,043	23,011	28,332
Omaha, Nebr.-----	87	57	2	1					
St. Louis, Mo.-----	219	140	4	5					
St. Paul, Minn.-----	60	43	—	—					
Wichita, Kans.-----	55	31	7	4					
Las Vegas, Nev.*	21	7	2	1					

*Mortality data are being collected from Las Vegas, Nev., for possible inclusion in this table, however, for statistical reasons, these data will be listed only and not included in the total, expected number, or cumulative total, until 5 years of data are collected.

BOTULISM — (Continued from page 453)

successfully resuscitated. She became comatose, however, and was transferred to a hospital in Cheyenne, Wyoming, (approximately 65 miles away) where she died on July 12.

At autopsy, focal perivascular lymphocytic infiltrate was observed in the brain stem. Her serum was tested and shown to contain botulinum toxin, type A.

(Reported by Richard Foresman, M.D., private physician, Kimball, Nebraska; Henry Tsumagari, M.D., Pathologist, Cheyenne, Wyoming; William F. Rapp, Entomologist, Henry D. Smith,

M.D., Director, Nebraska State Department of Health; the Ecological Investigations Program, CDC, Fort Collins, Colorado; and an EIS Officer.)

Editorial Note

This is the seventh case of botulism from a wound infection reported in the United States and the second reported this year.

Wound infection should be considered as a cause of botulism in cases where foods cannot be incriminated.

CURRENT TRENDS
INFLUENZA — USA

The second influenza telephone survey was conducted by the Viral Diseases Branch, Epidemiology Program, CDC, on December 21. Since the first telephone survey of November 17 and 18, A2 influenza has been documented in Connecticut, Kansas, Michigan, New Jersey, and Utah. Increased influenza-like disease has been reported from Colorado, Idaho, Indiana, Louisiana, Maine, Massachusetts, Montana, New Mexico, Oregon, South Dakota, and Wyoming.

Connecticut reported an isolated outbreak of influenza-like illness in a high school in Meriden on December 7; three isolates of A2/Hong Kong virus were obtained (MMWR, Vol. 20, No. 49); in addition, marked school absenteeism has been reported in several towns throughout the state in the past week. Three additional A2/Hong Kong isolates have been made. Influenza-like disease has been noted in northwestern New Jersey in two counties during the past week. School absenteeism of up to 30 percent has been recorded, and two A2/Hong Kong virus isolates have been made. Clinically, the disease has appeared mild.

Michigan reported isolated outbreaks of influenza-like

disease in five counties during the first two weeks of December. Five A2/Hong Kong isolates have been obtained from two counties. Kansas reported school absenteeism of 10-20 percent in the Kansas City area in the first week of December. Four isolates of A2/Hong Kong have been made.

In Utah, increased influenza-like illness occurred in late November in one town in the central part of the state, and four seroconversions were noted. In addition, increased incidence of influenza-like disease has been noted in Salt Lake City in the past week by private and emergency-room physicians. One isolate of A2/Hong Kong virus has been made.

Massachusetts reported increased school absenteeism. Colorado, Idaho, Maine, Montana, New Mexico, Utah, and Wyoming reported increased influenza-like disease occurring as isolated cases or isolated outbreaks in the last week of November to mid-December. In addition, scattered influenza-like disease was noted in isolated cases or in isolated outbreaks in Indiana, Louisiana, and Oregon.

(Reported by the Viral Diseases Branch, Epidemiology Program, Center for Disease Control.)

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The data in this report are provisional, based on weekly telegraphs to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the succeeding Friday.

In addition to the established procedures for reporting morbidity and mortality, the editor welcomes accounts of interesting outbreaks or case investigations of current interest to health officials.

Address all correspondence to: Center for Disease Control
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