



INTERNATIONAL NOTES
PARAINFLUENZA VIRUSES

United Kingdom, March 1971-February 1972

Parainfluenza viruses are frequently recovered from patients presenting with a variety of respiratory illnesses. The number of isolates reported in the United Kingdom between March 1971 and February 1972 is given in Table 1. Most of the isolates were parainfluenza type 3 virus which was prevalent in the last half of the year, particularly in August and September; a high proportion of these isolates were from the Midlands. Most infections occurred in infants and children, and in these cases, the viruses can undoubtedly cause severe illness. The diagnoses made in the patients from whom clinical information was available are shown in Table 2. In most of these cases, the virus was recovered from tissue cultures, but there were an additional 50 patients in whom the diagnosis was made serologically. There was no great difference be-

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tween the patterns of illness associated with the different virus types, each being recovered from both upper and lower respiratory infections. Type 1 virus did tend to be associated more commonly with croup-like illness and less commonly with lower respiratory tract infections in contrast to types 2 and 3. Although called "parainfluenza," only a small proportion of the viruses were recovered from persons with illnesses resembling influenza. In 19 of the patients from whom a

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

DISEASE	15th WEEK ENDED		MEDIAN 1967-1971	CUMULATIVE, FIRST 15 WEEKS		
	April 15, 1972	April 17, 1971		1972	1971	MEDIAN 1967-1971
Aseptic meningitis	26	39	33	479	726	423
Brucellosis	2	6	6	34	37	37
Chickenpox	4,872	---	---	58,461	---	---
Diphtheria	3	2	1	30	59	45
Encephalitis, primary:						
Arthropod-borne & unspecified	24	24	24	230	312	301
Encephalitis, post-infectious	7	5	7	73	92	116
Hepatitis, serum (Hepatitis B)	184	145	93	2,779	2,415	1,488
Hepatitis, infectious (Hepatitis A)	1,097	1,274	964	16,643	18,125	13,774
Malaria	15	64	60	419	1,131	696
Measles (rubeola)	1,075	3,744	1,778	12,530	33,492	18,480
Meningococcal infections, total	25	82	80	521	1,004	1,043
Civilian	24	76	63	498	857	931
Military	1	6	8	23	147	111
Mumps	2,123	4,557	---	31,662	55,628	---
Rubella (German measles)	802	1,892	2,155	10,496	19,236	19,388
Tetanus	---	1	4	22	20	30
Tuberculosis, new active	674	---	---	9,118	---	---
Tularemia	4	---	2	32	28	28
Typhoid fever	5	7	7	72	73	66
Typhus, tick-borne (Rky. Mt. spotted fever)	6	2	1	19	7	4
Venereal Diseases:†						
Gonorrhea	14,000	11,783	---	193,275	174,816	---
Syphilis, primary and secondary	513	436	---	6,677	6,813	---
Rabies in animals	75	114	96	1,211	1,327	1,153

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax:	---	Poliomyelitis, total:	5
Botulism:	---	Paralytic:	5
Congenital rubella syndrome:	8	Psittacosis:	8
Leprosy: Tex. - 2	31	Rabies in man:	1
Leptospirosis:	2	Trichinosis: Calif. - 1, Del. - 1, N.J. - 2	29
Plague:	1	Typhus, murine:	5

†Numbers for 1971 are estimated from quarterly reports to the Venereal Disease Branch, CDC

PARAINFLUENZA — Continued

parainfluenza virus was recovered, the illness was clinically diagnosed as whooping cough. While the association between the virus and the clinical condition may not have been causal, the findings do support the view that these viruses may occasionally cause the clinical syndrome of whooping cough.

Among those with non-respiratory conditions were two patients with myocarditis, in one of whom, a 13-month-old baby, type 3 virus was recovered from the heart at post mortem examination. The other patient was an elderly man who had the virus isolated from a throat swab; the association may well have been coincidental. Recovery of a type 1 virus from a throat swab was also reported in a patient with a pericardial

effusion. Three patients had an illness clinically diagnosed as rubella, and one had polyarthrititis without a rash. Twenty-five patients had encephalitis or meningitis, but in each case the virus was recovered from a throat swab, and again, it is likely that the virus was present in the throat coincidentally.

The relative frequency with which the different types of parainfluenza virus is recovered does vary in different years. Parainfluenza type 1 was prevalent in 1968-69 and 1970-71; type 4 virus is rarely encountered.

(From notes based on reports to the Public Health Laboratory Service from Public Health and Hospital Laboratories in the United Kingdom and Republic of Ireland, published in the British Medical Journal, April 8, 1972.)

Table 1
Number of Parainfluenza Isolates Reported in the United Kingdom — March 1971-February 1972

Isolate	Number of Isolates Reported for the 4-Week Period Ending													Total
	1971											1972		
	Mar. 26	Apr. 23	May 21	June 18	July 16	Aug. 13	Sept. 10	Oct. 8	Nov. 5	Dec. 5	Dec. 31	Jan. 28	Feb. 25	
Parainfluenza														
1	7	5	3	1	2	4	2	3	9	15	2	8	4	65
2	13	7	2	1	1	—	—	1	1	2	3	2	4	37
3	6	13	5	10	27	59	47	31	45	36	33	21	17	350
4A	—	1	—	—	1	—	—	—	1	4	—	2	—	9
4B	—	—	—	—	—	2	—	—	—	—	—	1	—	3
Untyped	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Total	26	26	10	12	31	65	49	36	56	57	38	34	25	465

Table 2
Percent of Patients with Parainfluenza Infections, by Clinical Categories
March 1971-February 1972

Virus Type	Percent of Patients with Clinical Condition											Total Number of Patients
	Coryza, Upper Respiratory Infection	Otitis Media, Pharyngitis, Tonsillitis	Croup, Laryngo-tracheo-Bronchitis	Bronchitis	Bronchiolitis	Broncho-pneumonia	Lower Respiratory Infection	Whooping Cough	Influenza-like Illness	Pyrexia, Febrile Convulsions	Non-Respiratory	
1	21	10	25	3	3	4	4	7	6	7	10	105
2	25	5	16	0	10	5	20	0	9	3	7	42
3	24	6	11	6	3	7	11	4	2	10	16	307

RECOMMENDATION OF THE PUBLIC HEALTH SERVICE
ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

Rh IMMUNE GLOBULIN

INTRODUCTION

Prevention of erythroblastosis fetalis, or Rh-hemolytic disease of the newborn, is now possible with the development of Rh immune globulin* (RhIG), licensed in 1968. RhIG suppresses the Rh immune response and thus can prevent formation of Rh antibodies in Rh-negative patients. Routine use of RhIG for Rh-negative women who give birth to Rh-positive infants or who undergo abortion should eliminate erythroblastosis.

Erythroblastosis Fetalis

Erythroblastosis fetalis was first described in 1932, with the realization that four perinatal diseases — late fetal death

*Official name: Rh₀(D) Immune Globulin (Human)

with erythroblastosis, hydrops fetalis, icterus gravis neonatorum, and congenital anemia of the newborn — were part of the same pathologic process. Discovery of the Rh factor and the understanding of Rh immunology led to the elucidation of pathogenesis of the disease 9 years later. It was shown that Rh antibodies result from exposure of an Rh-negative woman to Rh-positive fetal red blood cells which pass through the placenta (transplacental hemorrhage) into the maternal circulation during labor, delivery, or abortion. In a subsequent pregnancy with an Rh-positive fetus, the anamnestic response results in further elaboration of these antibodies which then transfer across the placenta into the fetus where they cause hemolysis of Rh-positive fetal red blood cells.

In the United States, 15 percent of whites and 5 percent of blacks are Rh-negative. About 8 percent of all pregnancies (9 percent of white women and 4.5 percent of black women) are complicated by Rh incompatibility — an Rh-negative woman with an Rh-positive fetus. The severity of erythroblastosis in affected infants can vary from only a positive Coombs test to stillbirth with hydrops. Each year over 20,000 affected infants are born and about 5,000 pregnancies end in stillbirth due to Rh-hemolytic disease. The neonatal case fatality ratio is less than 5 percent when exchange transfusion is used. Nevertheless, a small percentage of affected infants still develop kernicterus.

Rh IMMUNE GLOBULIN

RhIG is a sterile solution of gamma globulin (10-18 percent globulins) prepared by cold alcohol fractionation from plasma of donors with high Rh antibody titers. Each dose of 1-1.5 ml injected intramuscularly contains at least 300 micrograms of Rh IgG. In worldwide clinical trials, 98.8 percent of RhIG recipients did not develop Rh antibodies in a subsequent Rh-positive pregnancy; 11.4 percent of controls did. Immune suppression is transient, however, and a dose of RhIG is required for Rh-negative women after each abortion or birth of an Rh-positive infant.

RhIG USAGE

General Recommendations

RhIG is recommended for Rh-negative women at risk of developing Rh antibodies. Any Rh-negative woman whose serum does not contain Rh antibodies and who is exposed to the Rh antigen via delivery of an Rh-positive infant or an abortion should be given 1 intramuscular dose of RhIG within 72 hours after delivery or abortion.* (A crossmatch between RhIG and maternal red blood cells, described in the manufacturers' directions for use, may be of value in detecting a large transplacental fetomaternal hemorrhage.)

Although ABO blood group incompatibility between the Rh-negative mother and her Rh-positive fetus may provide partial protection against developing Rh antibodies, RhIG should be given in all such cases for optimal prophylaxis.

Abortion

Transplacental hemorrhage occurs in spontaneous and induced abortions, although in lesser amounts than in full term deliveries. The risk of developing Rh antibodies increases with the length of gestation; the risk is also higher with abortion by amniocentesis of hypertonic saline or hysterotomy than by dilatation and curettage. Since the Rh characteristic

*An Rh-negative woman who is D^u (Rh₀ [D] factor variant) positive on more refined testing is not at risk of developing Rh antibodies and does not need RhIG.

of the fetus is unknown, all Rh-negative women undergoing abortion should receive RhIG unless they are already known to have Rh antibodies or unless the father is Rh-negative.

Transfusion with Rh-Positive Blood

The use of RhIG in an Rh-negative person who inadvertently receives a transfusion of Rh-positive blood is under investigation. It is not recommended routinely. Doses of RhIG ranging from 10 to 30 micrograms for each milliliter of Rh-positive blood transfused have been shown to be successful in preventing development of Rh antibodies. If used, attendant patient care requires careful monitoring for hyperbilirubinemia, blood hemoglobin concentration, and renal function.

Reactions

Reactions in RhIG recipients are infrequent, consisting of slight soreness at the site of injection and/or slight temperature elevation.

Precautions and Contraindications

RhIG should be given only to a woman postpartum or post-abortion. It should not be given to an infant or father.

RhIG is not useful in a patient who already has Rh antibodies.

RhIG should not be given intravenously.

RhIG is not indicated in an Rh-positive (or D^u-positive) person.

SURVEILLANCE

Careful surveillance of Rh-hemolytic disease and patterns of RhIG use is necessary to monitor the benefits of RhIG prophylaxis. In addition to observing the general incidence of affected pregnancies, the specific occurrence of (1) liveborn infants with hemolytic disease, (2) infant deaths due to erythroblastosis, and (3) stillbirths due to Rh incompatibility should be determined.

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INTERNATIONAL NOTES QUARANTINE MEASURES

Changes in the "Supplement — Vaccination Certificate Requirements for International Travel,"

MMWR, Vol. 21, No. 11

The following changes should be made in the Vaccination Certificate Requirements for International Travel:

Bulgaria

Delete the note concerning smallpox, and insert: Smallpox — Except European countries, Canada, and United States

of America, provided travelers have been resident in these countries for 14 days immediately before arrival in Bulgaria. The Certificate, however, is required from arrivals from all countries any parts of which are infected.

(Continued on page 132)

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDING APRIL 15, 1972 AND APRIL 17, 1971 (15th WEEK)

AREA	ASEPTIC MENIN- GITIS	BRUCEL- LOSIS	CHICKEN- POX	DIPHTHERIA		ENCEPHALITIS			HEPATITIS		
						Primary including unspec. cases		Post In- fectious	Serum	Infectious	
						1972	1971	1972		1972	1971
UNITED STATES	26	2	4,872	3	30	24	24	7	184	1,097	1,274
NEW ENGLAND	—	—	785	—	—	—	—	—	6	87	77
Maine	—	—	45	—	—	—	—	—	—	3	8
New Hampshire	—	—	81	—	—	—	—	—	1	4	8
Vermont	—	—	29	—	—	—	—	—	—	8	6
Massachusetts	—	—	470	—	—	—	—	—	1	46	30
Rhode Island	—	—	160	—	—	—	—	—	2	12	11
Connecticut	—	—	—	—	—	—	—	—	2	14	14
MIDDLE ATLANTIC	2	—	437	—	—	3	4	—	76	183	231
Upstate New York	1	—	3	—	—	—	—	—	15	44	68
New York City	—	—	189	—	—	3	3	—	27	32	34
New Jersey *	—	—	NN	—	—	—	1	—	16	58	58
Pennsylvania	1	—	245	—	—	—	—	—	18	49	71
EAST NORTH CENTRAL	2	—	1,910	—	—	13	10	—	30	159	192
Ohio	—	—	457	—	—	2	3	—	5	29	45
Indiana	—	—	—	—	—	8	1	—	1	11	11
Illinois *	—	—	288	—	—	2	3	—	6	37	40
Michigan	2	—	429	—	—	1	3	—	18	72	89
Wisconsin *	—	—	736	—	—	—	—	—	—	10	7
WEST NORTH CENTRAL	1	1	646	—	4	—	3	2	10	55	44
Minnesota	—	—	22	—	—	—	—	1	—	1	5
Iowa	—	1	275	—	—	—	—	—	—	11	2
Missouri	—	—	84	—	—	—	1	—	4	25	6
North Dakota	—	—	6	—	—	—	—	—	—	2	1
South Dakota	—	—	NN	—	4	—	—	—	—	4	—
Nebraska	—	—	7	—	—	—	—	—	—	—	7
Kansas	1	—	252	—	—	—	2	1	6	12	23
SOUTH ATLANTIC	4	1	514	—	6	3	2	1	19	179	161
Delaware	—	—	4	—	—	—	—	—	1	1	6
Maryland	—	—	53	—	—	—	—	—	5	21	23
District of Columbia	—	—	13	—	—	—	—	—	—	3	—
Virginia	—	1	30	—	—	—	2	1	2	29	26
West Virginia	2	—	348	—	—	—	—	—	—	8	5
North Carolina	—	—	NN	—	—	1	—	—	—	36	10
South Carolina	—	—	66	—	—	—	—	—	—	8	8
Georgia	—	—	—	—	2	—	—	—	—	11	26
Florida	2	—	—	—	4	2	—	—	11	62	57
EAST SOUTH CENTRAL	1	—	54	—	1	—	—	1	1	36	71
Kentucky	---	---	---	---	---	---	---	---	---	---	20
Tennessee	1	—	NN	—	—	—	—	1	—	21	34
Alabama	—	—	47	—	1	—	—	—	1	4	12
Mississippi	—	—	7	—	—	—	—	—	—	11	5
WEST SOUTH CENTRAL	6	—	24	3	17	—	1	1	9	120	157
Arkansas	1	—	2	—	—	—	—	—	—	5	4
Louisiana	2	—	NN	—	4	—	1	1	2	9	31
Oklahoma	—	—	5	—	—	—	—	—	—	9	21
Texas	3	—	17	3	13	—	—	—	7	97	101
MOUNTAIN	—	—	276	—	2	3	1	—	3	58	84
Montana	—	—	33	—	—	1	1	—	—	4	4
Idaho	—	—	—	—	—	—	—	—	—	3	8
Wyoming	—	—	8	—	—	—	—	—	—	—	—
Colorado	—	—	60	—	—	—	—	—	2	18	15
New Mexico	—	—	58	—	1	—	—	—	—	10	25
Arizona	—	—	88	—	1	—	—	—	1	13	11
Utah	—	—	29	—	—	1	—	—	—	9	14
Nevada	—	—	—	—	—	1	—	—	—	1	7
PACIFIC	10	—	226	—	—	2	3	2	30	220	257
Washington	4	—	215	—	—	—	—	—	1	21	40
Oregon	1	—	—	—	—	1	—	1	1	41	31
California	5	—	—	—	—	1	3	1	26	142	173
Alaska	—	—	11	—	—	—	—	—	2	12	2
Hawaii	—	—	—	—	—	—	—	—	—	4	11
Guam *	—	—	13	—	—	—	---	—	—	7	---
Puerto Rico	—	—	31	—	—	—	—	—	—	18	33
Virgin Islands	—	—	—	—	—	—	—	—	—	—	—

*Delayed reports: Chickenpox: Wis. 7,697, Guam 4
Hepatitis, serum: N.J. delete 4 (1971)
Hepatitis, infectious: Ill. 3, Guam 3

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDING APRIL 15, 1972 AND APRIL 17, 1971 (15th WEEK) - Continued

AREA	MALARIA		MEASLES (Rubeola)			MENINGOCOCCAL INFECTIONS, TOTAL			MUMPS		RUBELLA	
	1972	Cum. 1972	1972	Cumulative		1972	Cumulative		1972	Cum. 1972	1972	Cum. 1972
				1972	1971		1972	1971				
UNITED STATES	15	419	1,075	12,530	33,492	25	521	1,004	2,123	31,662	802	10,496
NEW ENGLAND	1	9	85	906	1,233	-	24	44	80	1,300	34	444
Maine	-	-	3	123	628	-	3	5	1	112	1	26
New Hampshire	-	1	-	84	87	-	-	5	12	95	1	24
Vermont	-	-	1	22	57	-	-	-	-	74	3	15
Massachusetts	-	4	41	169	140	-	13	18	29	366	16	211
Rhode Island	-	-	8	133	31	-	6	2	15	242	4	40
Connecticut	1	4	32	375	290	-	2	14	23	411	9	128
MIDDLE ATLANTIC	1	29	49	612	3,473	4	56	128	76	1,433	89	728
Upstate New York	-	5	-	57	255	1	15	34	NN	NN	2	132
New York City	-	5	6	116	2,059	1	12	24	44	629	8	90
New Jersey	-	8	42	416	356	-	16	34	9	489	25	383
Pennsylvania	1	11	1	23	803	2	13	36	23	315	54	123
EAST NORTH CENTRAL	4	40	292	4,604	6,577	1	67	105	582	8,895	220	2,850
Ohio	2	6	6	159	2,180	-	21	28	59	1,322	13	191
Indiana	-	1	29	780	980	-	10	6	54	647	22	372
Illinois *	2	13	80	1,694	1,601	-	15	34	101	1,630	46	507
Michigan	-	18	51	841	570	1	18	30	97	1,486	27	663
Wisconsin	-	2	126	1,130	1,246	-	3	7	271	3,810	112	1,117
WEST NORTH CENTRAL	-	27	37	426	2,879	-	44	92	349	5,819	60	537
Minnesota	-	3	-	13	35	-	9	13	34	535	4	33
Iowa	-	1	10	218	865	-	-	6	190	4,096	25	245
Missouri	-	8	22	132	1,050	-	12	34	69	238	12	79
North Dakota *	-	1	-	31	116	-	-	2	14	236	-	18
South Dakota	-	4	-	4	167	-	2	5	3	44	-	11
Nebraska	-	3	2	10	17	-	7	11	6	152	1	38
Kansas	-	7	3	18	629	-	14	21	33	518	18	113
SOUTH ATLANTIC	6	54	118	1,176	3,508	8	114	156	226	2,728	54	809
Delaware	-	-	-	5	14	-	1	1	3	27	-	1
Maryland	-	-	1	9	51	4	20	24	8	129	6	25
District of Columbia	-	1	-	-	4	-	2	7	-	4	-	1
Virginia	-	2	4	30	797	3	26	15	9	398	3	47
West Virginia	-	1	24	98	224	-	9	2	112	1,463	20	243
North Carolina	5	23	2	25	1,188	1	19	21	NN	NN	1	5
South Carolina	-	8	11	159	419	-	9	14	11	108	2	28
Georgia	1	13	6	118	158	-	1	11	-	1	-	28
Florida	-	6	70	732	653	-	27	61	83	598	22	431
EAST SOUTH CENTRAL	2	120	49	800	4,640	1	41	80	74	1,644	22	615
Kentucky	---	114	---	435	2,272	---	10	23	---	255	---	259
Tennessee	-	-	23	137	360	1	17	28	61	1,037	18	260
Alabama	-	2	7	99	734	-	8	18	3	268	2	24
Mississippi	2	4	19	129	1,274	-	6	11	10	84	2	72
WEST SOUTH CENTRAL	1	45	73	800	7,981	6	68	92	184	2,584	126	900
Arkansas	-	3	-	6	408	-	7	3	4	78	40	54
Louisiana	-	2	3	41	1,119	-	20	30	3	111	3	46
Oklahoma	-	2	-	5	603	-	4	6	3	104	-	9
Texas	1	38	70	748	5,851	6	37	53	174	2,291	83	791
MOUNTAIN	-	30	103	916	1,585	1	10	28	143	1,739	39	558
Montana	-	1	-	12	594	-	1	2	5	121	-	16
Idaho	-	3	-	3	153	-	2	2	18	93	-	6
Wyoming	-	-	-	-	43	-	1	-	1	157	-	4
Colorado	-	20	13	318	413	-	1	4	48	457	22	286
New Mexico	-	1	10	64	179	-	1	2	20	420	3	52
Arizona	-	5	63	392	134	-	2	8	41	443	14	177
Utah *	-	-	17	127	66	-	1	9	10	29	-	14
Nevada	-	-	-	-	3	1	1	1	-	19	-	3
PACIFIC	-	65	269	2,290	1,616	4	97	279	409	5,520	158	3,055
Washington	-	-	52	465	448	-	11	13	99	1,908	17	503
Oregon	-	5	3	22	147	-	5	18	28	698	16	223
California	-	52	201	1,734	973	4	78	245	259	2,735	124	2,280
Alaska	-	1	-	5	8	-	-	-	5	89	-	14
Hawaii	-	7	13	64	40	-	3	3	18	90	1	35
Guam *	1	1	-	2	---	-	6	---	-	1	-	5
Puerto Rico	-	2	20	218	105	-	1	-	33	260	-	2
Virgin Islands	-	-	-	-	5	-	2	-	-	104	-	3

*Delayed reports: Malaria: N. Dak. delete 1
Meningococcal infections: Ill. 2, Guam 1

Mumps: Guam 1
Rubella: Utah 1

Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDING APRIL 15, 1972 AND APRIL 17, 1971 (15th WEEK) - Continued

AREA	TETANUS	TB (New Active)	TULAREMIA		TYPHOID FEVER		TYPHUS FEVER TICK-BORNE (Rky. Mt. spotted fever)		VENEREAL DISEASES		RABIES IN ANIMALS	
									GONOR- RHEA	SYPHILIS (Pri. & Sec.)		
									1972	1972		
	1972	1972	1972	Cum. 1972	1972	Cum. 1972	1972	Cum. 1972	1972	1972	1972	Cum. 1972
UNITED STATES	-	674	4	32	5	72	6	19	14,000	513	75	1,211
NEW ENGLAND	-	28	-	-	-	5	-	-	429	21	-	45
Maine	-	2	-	-	-	-	-	-	30	1	-	41
New Hampshire *	-	3	-	-	-	-	-	-	22	1	-	-
Vermont	-	-	-	-	-	-	-	-	-	6	-	4
Massachusetts	-	20	-	-	-	3	-	-	209	10	-	-
Rhode Island	-	1	-	-	-	-	-	-	23	2	-	-
Connecticut	-	2	-	-	-	2	-	-	145	1	-	-
MIDDLE ATLANTIC	-	129	-	1	1	17	-	3	2,359	112	4	22
Upstate New York	-	22	-	-	1	5	-	-	409	4	1	12
New York City	-	44	-	-	-	8	-	-	1,236	74	-	-
New Jersey	-	40	-	1	-	3	-	1	377	24	-	-
Pennsylvania	-	23	-	-	-	1	-	2	337	10	3	10
EAST NORTH CENTRAL	-	136	-	1	-	3	-	-	1,629	47	11	124
Ohio *	-	26	-	1	-	1	-	-	676	11	-	43
Indiana	-	14	-	-	-	-	-	-	204	9	6	38
Illinois	-	56	-	-	-	-	-	-	218	1	4	19
Michigan	-	36	-	-	-	2	-	-	389	25	-	1
Wisconsin	-	4	-	-	-	-	-	-	142	1	1	23
WEST NORTH CENTRAL	-	41	-	6	-	3	-	1	833	7	27	298
Minnesota	-	6	-	-	-	-	-	-	117	-	7	71
Iowa	-	1	-	-	-	-	-	-	131	2	1	74
Missouri	-	21	-	6	-	2	-	-	240	4	6	32
North Dakota	-	-	-	-	-	-	-	-	16	-	3	55
South Dakota *	-	5	-	-	-	-	-	-	31	-	1	30
Nebraska	-	3	-	-	-	-	-	-	139	1	-	2
Kansas	-	5	-	-	-	1	-	1	159	-	9	34
SOUTH ATLANTIC	-	121	1	5	1	7	5	9	3,713	178	1	111
Delaware	-	1	-	-	-	-	-	-	28	1	-	-
Maryland	-	23	-	-	1	1	-	-	340	28	-	1
District of Columbia	-	6	-	-	-	-	-	-	252	13	-	-
Virginia	-	12	-	4	-	3	5	7	461	55	-	36
West Virginia *	-	12	-	-	-	-	-	-	33	1	-	28
North Carolina *	-	30	-	-	-	-	-	1	227	10	-	-
South Carolina	-	-	-	-	-	-	-	1	910	13	-	-
Georgia	-	11	-	-	-	-	-	-	638	20	1	26
Florida	-	26	1	1	-	3	-	-	824	37	-	20
EAST SOUTH CENTRAL	-	51	-	2	-	6	-	2	755	16	7	298
Kentucky	---	---	---	-	---	1	---	-	---	---	---	97
Tennessee	-	18	-	1	-	1	-	1	419	8	6	168
Alabama	-	10	-	1	-	-	-	1	157	2	1	33
Mississippi	-	23	-	-	-	4	-	-	179	6	-	-
WEST SOUTH CENTRAL	-	67	3	14	2	5	1	4	1,661	55	23	249
Arkansas	-	8	-	9	-	2	-	-	69	8	6	42
Louisiana	-	30	1	1	-	-	-	-	470	7	1	14
Oklahoma	-	-	1	2	-	-	1	2	-	-	12	114
Texas	-	29	1	2	2	3	-	2	1,122	40	4	79
MOUNTAIN	-	5	-	2	-	3	-	-	486	15	-	10
Montana	-	-	-	-	-	-	-	-	38	-	-	-
Idaho	-	-	-	-	-	-	-	-	54	1	-	-
Wyoming	-	-	-	-	-	-	-	-	2	-	-	-
Colorado	-	5	-	1	-	-	-	-	154	7	-	-
New Mexico	-	-	-	-	-	1	-	-	55	-	-	1
Arizona	-	-	-	1	-	1	-	-	125	5	-	9
Utah	-	-	-	-	-	1	-	-	41	1	-	-
Nevada	-	-	-	-	-	-	-	-	17	1	-	-
PACIFIC	-	96	-	1	1	23	-	-	2,135	62	2	54
Washington	-	4	-	-	-	-	-	-	187	1	-	-
Oregon	-	3	-	-	-	-	-	-	167	3	-	-
California	-	85	-	-	1	20	-	-	1,737	56	2	50
Alaska *	-	3	-	1	-	-	-	-	44	2	-	4
Hawaii	-	1	-	-	-	3	-	-	-	-	-	-
Guam	-	3	-	-	-	-	-	-	6	-	-	-
Puerto Rico	-	10	-	-	-	2	-	-	71	16	-	20
Virgin Islands	-	-	-	-	-	-	-	-	6	2	-	-

*Delayed reports: Tuberculosis: N.H. 8, Ohio delete 2, N.C. delete 1, Alaska 16

Syphilis: W. Va. 1

Rabies in animals: S. Dak. 28

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TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDING APRIL 15, 1972

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

Area	All Causes			Pneumonia and Influenza All Ages	Area	All Causes			Pneumonia and Influenza All Ages
	All Ages	65 years and over	Under 1 year			All Ages	65 years and over	Under 1 year	
NEW ENGLAND	750	457	23	42	SOUTH ATLANTIC	1,200	681	39	39
Boston, Mass.	200	103	7	14	Atlanta, Ga.	149	75	7	3
Bridgeport, Conn.	39	19	—	6	Baltimore, Md.	234	137	7	4
Cambridge, Mass.	25	11	—	5	Charlotte, N. C.	66	37	1	—
Fall River, Mass.	32	22	1	—	Jacksonville, Fla.	80	45	2	1
Hartford, Conn.	58	34	3	—	Miami, Fla.	123	68	5	5
Lowell, Mass.	36	28	1	2	Norfolk, Va.	54	24	4	3
Lynn, Mass.	22	16	—	2	Richmond, Va.	100	56	—	4
New Bedford, Mass.	26	18	1	—	Savannah, Ga.	45	21	3	3
New Haven, Conn.	60	35	3	2	St. Petersburg, Fla.	111	94	—	2
Providence, R. I.	76	47	4	7	Tampa, Fla.	66	41	—	7
Somerville, Mass.	16	14	—	—	Washington, D. C.	124	59	6	3
Springfield, Mass.	51	31	2	2	Wilmington, Del.	48	24	4	4
Waterbury, Conn.	39	26	—	—					
Worcester, Mass.	70	53	1	2	EAST SOUTH CENTRAL	661	339	35	38
MIDDLE ATLANTIC	2,900	1,728	86	107	Birmingham, Ala.	123	61	6	—
Albany, N. Y.	52	30	1	—	Chattanooga, Tenn.	50	30	1	3
Allentown, Pa.	31	21	2	1	Knoxville, Tenn.	39	26	1	2
Buffalo, N. Y.	154	85	6	6	Louisville, Ky.	126	66	3	9
Camden, N. J.	37	22	2	3	Memphis, Tenn.	165	75	17	6
Elizabeth, N. J.	21	16	—	1	Mobile, Ala.	47	16	4	1
Erie, Pa.	42	24	1	4	Montgomery, Ala.	21	14	—	5
Jersey City, N. J.	69	36	—	2	Nashville, Tenn.	90	51	3	12
Newark, N. J.	69	21	2	5	WEST SOUTH CENTRAL	1,240	684	33	41
New York City, N. Y.†	1,369	832	30	51	Austin, Tex.	50	29	1	2
Paterson, N. J.	47	31	1	2	Baton Rouge, La.	36	17	1	2
Philadelphia, Pa.	394	222	21	4	Corpus Christi, Tex.	39	19	2	2
Pittsburgh, Pa.	189	106	5	10	Dallas, Tex.	173	82	4	3
Reading, Pa.	37	29	2	2	El Paso, Tex.	39	16	5	1
Rochester, N. Y.	123	80	5	4	Fort Worth, Tex.	93	61	1	2
Schenectady, N. Y.	33	24	1	4	Houston, Tex.	240	118	2	4
Scranton, Pa.	35	24	—	4	Little Rock, Ark.	64	45	1	4
Syracuse, N. Y.	83	51	7	—	New Orleans, La.	174	95	2	4
Trenton, N. J.	53	37	—	2	Oklahoma City, Okla.	79	38	4	—
Utica, N. Y.	23	12	—	1	San Antonio, Tex.	126	78	4	9
Yonkers, N. Y.	39	25	—	1	Shreveport, La.	52	29	4	3
EAST NORTH CENTRAL	2,729	1,523	109	78	Tulsa, Okla.	75	57	2	5
Akron, Ohio	44	25	—	—	MOUNTAIN	488	295	13	22
Canton, Ohio	35	19	4	2	Albuquerque, N. Mex.	36	22	—	3
Chicago, Ill.	780	399	38	19	Colorado Springs, Colo.	38	29	—	9
Cincinnati, Ohio	181	104	7	7	Denver, Colo.	104	71	2	3
Cleveland, Ohio	201	98	7	4	Ogden, Utah	21	13	2	2
Columbus, Ohio	138	80	4	3	Phoenix, Ariz.	153	80	2	2
Dayton, Ohio	116	61	4	—	Pueblo, Colo.	24	17	1	2
Detroit, Mich.	348	189	12	11	Salt Lake City, Utah	48	26	5	—
Evansville, Ind.	44	32	—	3	Tucson, Ariz.	64	37	1	1
Flint, Mich.**	55	29	3	2	PACIFIC	1,535	888	58	34
Fort Wayne, Ind.	58	35	2	3	Berkeley, Calif.	17	11	1	—
Gary, Ind.	44	19	2	2	Fresno, Calif.	42	21	2	4
Grand Rapids, Mich.	56	33	1	2	Glendale, Calif.	39	28	1	2
Indianapolis, Ind.	162	90	9	3	Honolulu, Hawaii	77	38	3	4
Madison, Wis.	39	22	1	6	Long Beach, Calif.	99	55	3	—
Milwaukee, Wis.	131	90	2	1	Los Angeles, Calif.	396	218	20	5
Peoria, Ill.	34	22	1	1	Oakland, Calif.	83	55	3	5
Rockford, Ill.	41	27	4	5	Pasadena, Calif.	38	28	—	1
South Bend, Ind.	43	34	—	1	Portland, Oreg.	120	71	5	—
Toledo, Ohio	103	71	4	1	Sacramento, Calif.	60	34	2	1
Youngstown, Ohio	76	44	4	2	San Diego, Calif.	100	53	2	—
WEST NORTH CENTRAL	826	499	36	18	San Francisco, Calif.	177	106	6	7
Des Moines, Iowa	67	45	2	2	San Jose, Calif.	50	32	—	1
Duluth, Minn.	29	20	1	—	Seattle, Wash.	148	80	8	3
Kansas City, Kans.	37	15	3	3	Spokane, Wash.	55	38	2	1
Kansas City, Mo.	129	82	3	5	Tacoma, Wash.	34	20	—	—
Lincoln, Nebr.	22	15	—	—	Total	12,329	7,094	432	419
Minneapolis, Minn.	102	62	1	1	Expected Number	12,990	7,503	550	509
Omaha, Nebr.	91	50	5	—	Cumulative Total	205,033	120,937	7,770	10,139
St. Louis, Mo.	199	124	7	5	(includes reported corrections for previous weeks)				
St. Paul, Minn.	80	50	2	1					
Wichita, Kans.	70	36	12	1					
Las Vegas, Nev.*	28	13	3	—					

*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.

†Delayed report for week ending April 8, 1972

**Estimate based on average percent of divisional total

QUARANTINE MEASURES — Continued

Canada

Delete all information concerning cholera.

Lebanon

Under yellow fever delete symbol, and insert II by air.

Mauritius

Under yellow fever change symbol to II > 1 year.

Netherlands

Under smallpox add symbol II.

In the note concerning smallpox, insert: Certificate required from travelers coming from Yugoslavia.

New Hebrides

Under smallpox change symbol to I > 1 year.

Poland

In the note concerning smallpox, insert: Certificate required from travelers going to and coming from Yugoslavia.

Romania

In the note concerning smallpox, delete: A certificate is, however, required from arrivals from all infected areas, and insert: A certificate is, however, required from arrivals from all countries any parts of which are infected.

Switzerland

In the note concerning smallpox, insert: Certificate required from travelers over one year of age coming from Yugoslavia.

Trinidad and Tobago

Delete all information concerning smallpox, and insert: Smallpox — Except: Bahamas, Barbados, British Virgin Islands, Canada, Dominica, Grenada, St. Kitts-Nevis-Anguilla,

St. Lucia, St. Vincent, United Kingdom, United States of America.

Union of Soviet Socialist Republics

Delete all information concerning cholera, and insert: Cholera — And from Afghanistan, Guinea, Sudan, and all countries any parts of which are infected.

United States of America

Delete the note concerning smallpox, and insert: Smallpox — Certificate required from arrivals from Iran and Iraq, and from all countries any parts of which are infected.

Virgin Islands

Delete all information concerning smallpox, and insert: Smallpox — Same measures as the United States of America (p. 35).

Yugoslavia

In the note concerning smallpox, insert: Vaccination recommended to travelers leaving Yugoslavia.

Erratum, Vol. 21, No. 13, Table I, Cases of Specified Notifiable Diseases, United States.

The estimated totals of gonorrhea and primary and secondary syphilis cases for the 13th week of 1971 were incorrectly printed as 10,338 and 368, respectively; they should have been 11,635 and 457, respectively. The cumulative totals of gonorrhea and primary and secondary syphilis cases for the first 13 weeks of 1971 were incorrectly printed as 134,394 and 4,784, respectively; they should be corrected to 151,250 and 5,940, respectively.

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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.

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