



Morbidity and Mortality

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EPIDEMIOLOGIC NOTES AND REPORTS
POLIOMYELITIS - Connecticut

On Oct. 25, 1972, three cases of type 1 paralytic poliomyelitis in three male students, ages 12, 16, and 17, were reported from a private school in Greenwich, Connecticut. In addition, there are eight cases of paralytic illness under further investigation.

The first patient became ill on September 29. A stool specimen from this patient yielded type 1 poliovirus. The other two patients developed illness on October 6 and 9. Serum neutralization antibody titers to type 1 poliovirus were 1:512 and 1:128 on acute specimens; no detectable antibodies to types 2 and 3 were present. Viral studies are pending.

Five of the eight suspected cases are residents of other states. Three live in New York, one in New Hampshire, and one in Massachusetts, and have returned to their homes. The

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State Health Departments have been notified and are investigating these cases.

On October 26, a vaccination program was conducted at the school using oral polio vaccine from the CDC epidemic stockpile.

(Reported by George Kraus, Director of Health, Greenwich, Connecticut Health Department; James C. Hart, State Epidemiologist, Connecticut State Department of Health; and an EIS Officer.)

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

DISEASE	42nd WEEK ENDING		MEDIAN 1967-1971	CUMULATIVE, FIRST 42 WEEKS		
	October 21, 1972	October 23, 1971		1972	1971	MEDIAN 1967-1971
Aseptic meningitis	154	145	140	3,299	4,295	3,571
Brucellosis	-	5	4	156	136	185
Chickenpox	623	- - -	- - -	116,647	- - -	- - -
Diphtheria	2	19	14	84	147	147
Encephalitis, primary:						
Arthropod-borne and unspecified	32	37	37	871	1,236	1,236
Encephalitis, post-infectious	2	3	3	234	292	337
Hepatitis, serum (Hepatitis B)	167	222	134	7,334	6,985	4,239
Hepatitis, infectious (Hepatitis A)	1,159	1,231	1,027	44,388	49,089	37,810
Malaria	12	155	114	742	2,533	2,474
Measles (rubeola)	167	271	271	27,674	70,953	40,740
Meningococcal infections, total	20	29	29	1,097	1,889	2,003
Civilian	19	23	26	1,053	1,684	1,804
Military	1	6	1	44	205	199
Mumps	609	1,054	- - -	59,373	103,824	- - -
Rubella (German measles)	471	816	328	22,179	40,392	45,181
Tetanus	3	1	3	96	87	125
Tuberculosis, new active	619	- - -	- - -	27,176	- - -	- - -
Tularemia	-	2	2	109	158	147
Typhoid fever	11	17	10	298	320	314
Typhus, tick-borne (Rky. Mt. spotted fever)	12	6	6	497	382	325
Venereal Diseases:†						
Gonorrhea	16,874	13,939	- - -	605,363	530,875	- - -
Syphilis, primary and secondary	538	471	- - -	20,219	19,067	- - -
Rabies in animals	57	73	65	3,396	3,321	2,835

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax:	2	Poliomyelitis, total:	10
Botulism:	8	Paralytic:	9
Congenital rubella syndrome: Ky. - 1	27	Psittacosis: N.Y.C. - 1	30
Leprosy: Calif. - 1, Hawaii - 2, Tex. - 1	100	Rabies in man:	1
Leptospirosis:	30	Trichinosis: Utah - 1	69
Plague:	1	Typhus, murine: Tex. - 1	13

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

INTERNATIONAL NOTES
INFLUENZA — Australia, Hong Kong, Thailand

Australia

Between mid-August and Sept. 25, 1972, localized influenza outbreaks were reported in Victoria. The overall morbidity appears to have been low in the general population, but the attack rate was high in the communities and institutions affected (army camps, hospitals, rest homes, factories, etc.). The disease was mostly mild, but some severe cases were reported. The mortality from influenza was low.

In New South Wales, an outbreak of influenza-like illness started with sporadic cases in July, gave rise to a high morbidity in August (20% absenteeism due to respiratory tract infection in the police force in Sydney), and ended approximately September 23. The disease was mild, and the mortality was low. It appears, however, that only a small part of the cases were due to influenza infection.

In Queensland, sporadic cases were reported in August and the first half of September, but the outbreak appears to have halted. The disease was mostly mild, but severe illnesses with bronchitis or bronchopneumonia were reported. The mortality from influenza was low.

In South Australia, a fairly widespread outbreak of influenza-like illness started at the end of August and reached a peak by September 23. The disease was mostly mild, but cases of bronchitis were reported. The mortality was low.

In Tasmania, the morbidity from influenza-like illness is increasing and seems to be high. In the Northern Territory, fairly severe influenza cases are being reported.

In Western Australia, where an extensive epidemic associated with influenza viruses A and B occurred in August throughout the State, only sporadic cases were reported at the beginning of September.

All strains of virus A isolated in Australia and tested at the World Influenza Centre, London, were antigenically close to the variant A/England/42/72. Strains of virus B were isolated in Western Australia and Victoria.

Hong Kong

Between Aug. 25 and Sept. 30, 1972, there was a gradual increase in the incidence of influenza illness with local outbreaks in the general population. In many cases, the infection caused high temperatures, with a relatively high incidence of complications in young children.

As of September 30, 13 strains of virus A had been isolated. The Influenza Reference Centre in Hong Kong has reported that one of them, A/HK/50/72, is closely related antigenically to A/HK/107/71 (also designated as A/HK/5/72). Others show antigenic differences to both A/HK/1/68 and A/HK/107/71, although they are related to these strains. Comparative tests could not be made with A/England/42/72 because this strain and its antiserum were not available in Hong Kong.

Thailand

Between Sept. 1 and Sept. 27, 1972, there was some increase in the incidence of influenza-like illness in Bangkok and the surrounding areas. The disease affected all age groups but was not severe. Eight strains of virus A have been isolated. They have shown some antigenic differences to A/HK/8/68 (also designated as A/HK/1/68), although they are related to this strain.

(Reported by the World Health Organization: Weekly Epidemiological Record, Vol. 47, No. 41, 1972.)

EPIDEMIOLOGIC NOTES AND REPORTS

SALMONELLA MINNESOTA IN A COMMERCIAL DIETARY SUPPLEMENT — Texas

Between Aug. 10 and Sept. 20, 1972, four of 1,700 children at an institution for the mentally retarded in Austin, Texas, had onset of acute gastroenteritis. Stool specimens from the four patients were cultured and yielded *Salmonella minnesota*.

Epidemiologic investigation revealed that the school obtains stool cultures from all employees semiannually and from all entering residents. Periodically, other stool surveys are performed at the institution. None of these stool specimens submitted in the past had been positive for salmonella.

Further investigation revealed that the four patients lived in the same dormitory. This building houses one quarter of the school's approximately 400 bedfast nursing service residents, the most profoundly retarded children at the institution. A stool culture survey of the dormitory residents and employees was subsequently conducted and yielded three asymptomatic cases of *S. minnesota* infection among the residents.

All seven patients were among the 16 children in the building receiving Diet-All, a proprietary powdered nutritional supplement designed for palsied children. The product is a mixture of protein sources, including egg, potato, bone

meal, soybean, wheatgerm, and alfalfa, with supplemental vitamins. The powder, which is provided in ten flavors, is shipped in 25-pound bags. It is then mixed with water in the institution's central kitchen before it is fed to the children in the dormitory.

Samples from the batches in use at the time of the investigation were cultured, and *S. minnesota* was recovered from apricot and spice Diet-All. Samples from unopened bags of Diet-All were also cultured, and *S. minnesota* was grown from the same two flavors. The manufacturer has suspended production of this product while awaiting the results of a Food and Drug Administration investigation.

(Reported by M. S. Dickerson, M.D., State Epidemiologist, Texas State Department of Health; J. J. Horan, President, Mainland Corporation, Pompano Beach, Florida; Joe Dominey, M.D., Medical Director, Travis State School, Austin, Texas; Ann Valdez, Head, Microbiology Department, Austin State Hospital Laboratory, Austin, Texas; Clarence J. Powers, Chief, and Cynthia Bishop, Head Dietician, Office of Nutrition and Food Services, Texas Department of Mental Health and Mental Retardation; Richard Swanson, Epidemiological Investigations Coordinator, Office of the Associate Commis-

sioner for Compliance, Office of the Commissioner, FDA; and an EIS Officer.)

Editorial Note

The epidemiologic evidence clearly implicates the protein supplement as the source of salmonellosis in this outbreak. Eggs, bone meal, and soy protein are among the food-

stuffs that can serve as sources of salmonella in commercial food products. Whereas most outbreaks of salmonellosis are thought to result primarily from errors in food storage and handling, contamination of a commercial product with salmonella, particularly one designed for institutionalized populations, presents a problem of special magnitude.

TRANSFUSION-INDUCED MALARIA – Georgia

On Aug. 18, 1972, a 46-year-old Georgia woman had onset of fever, chills, and nausea and was admitted to a community hospital. A blood smear from the patient showed heavy parasite infection with *Plasmodium falciparum*, and she was transferred to a nearby county hospital. The parasite was found to be resistant to chloroquine treatment, and the patient was treated with pyramethamine (3 days), quinine (14 days), and sulfadiazine (7 days). She has subsequently had an uneventful recovery.

Epidemiologic investigation revealed that the patient had not traveled outside the United States in the past year. However, she had been hospitalized on Aug. 2, 1972, with a bleeding ulcer and had received 9 units of blood donated by local residents between August 2 and August 8. She recovered

normally and was dismissed from the hospital on August 8.

The nine blood donors were subsequently interviewed and gave no history of illness within the past year. Two of the donors were ex-servicemen; one had served in Vietnam, and one in Turkey. Blood smears taken from each of the nine donors were all negative. However, a blood specimen from the Vietnam veteran yielded *P. falciparum* with a titer of 1:4096 by the malaria FA test.

(Reported by Thomas N. Lumsden, M.D. and James A. Butts, M.D., private physicians; Conrad Routh and Ellen Daugherty, Parasitology Laboratory, John E. McCroan, Ph.D., T. W. McKinley, and J. D. Smith, Epidemiology Unit, Division of Physical Health, Georgia Department of Human Resources.)

AMANITA VIROSA MUSHROOM POISONING – Ohio

On Sept. 29, 1972, a 58-year-old man from Euclid, Ohio, had onset of severe vomiting, abdominal pain, and diarrhea 3 to 8 hours after eating wild mushrooms. On Oct. 1, 1972, he was admitted in shock to a local hospital. The patient was treated with pressor agents and intravenous fluids and was transferred the next day to a hospital in Cleveland, where he underwent hemodialysis and treatment with prednisone and thioctic acid. He had oliguria and abnormal liver function tests but displayed gradual improvement in his hepatic status. After initial improvement, however, his renal function deteriorated, and repeated dialysis has been necessary.

Epidemiologic investigation revealed that the patient's daughter also experienced nausea, vomiting, and diarrhea 6 hours after eating part of a wild mushroom from the same batch. She subsequently had transaminase elevations and was hospitalized for 10 days for prednisone and thioctic acid therapy. The other members of the family, who had been asymptomatic, were screened for abnormal liver function tests. Hepatic enzyme elevations were noted in the 1½-year-old grandson, who was said to have a history of melena. He was hospitalized briefly for observation.

Further investigation revealed that the man had gathered a bowl of wild mushrooms on September 28 and had eaten most of them the next day. His wife, daughter, son-in-law, and three grandchildren had also consumed small amounts of the mushrooms. The uneaten mushrooms were examined, and were identified as *Amanita virosa*.

(Reported by Arnold Rosenzweig, M.D., private physician,

Euclid, Ohio; Robert W. Buck, M.D., Past President, Boston Mycological Club, Newton, Massachusetts; David Sperling, M.D., Senior Assistant Resident, Department of Medicine, Cleveland Metropolitan General Hospital, Cleveland, Ohio; Gerald A. Rosenthal, Assistant Professor of Biology, Case Western Reserve University, Cleveland, Ohio; John H. Ackerman, M.D., State Epidemiologist, Ohio Department of Health; Henry L. Verhulst, Director, Division of Chemical Hazards, Bureau of Product Safety, FDA; and an EIS Officer.)

Editorial Note

Reports of mushroom poisoning are rare in the United States, but in Europe, where amateur mushroom picking is more common, hundreds of cases are reported each year. The bulb agarics, containing the five cyclopeptide amanita toxins, are the most dangerous of the dozens of toxic mushroom species. Typically, ingestion of these mushrooms is followed by a 6 to 20-hour latent period that is abruptly terminated by vomiting, severe abdominal pain, and watery or bloody diarrhea. A patient surviving the initial episode may undergo apparent remission only to evince signs of hepatic and renal decompensation 2 to 3 days after ingestion. Consumption of *A. phalloides* in Europe or *A. virosa* in this country is associated with a mortality rate of 30 to 50%.

In Europe, attempts to develop specific therapeutic measures have been made. Thioctic acid is believed to block the effects of amanita toxins on intermediary metabolism and is available only on an emergency basis upon approval by the Poison Control Program, Bureau of Product Safety, FDA.

PHOCANEMA SPECIES INFECTION IN MAN – Vermont

On Aug. 5, 1972, a 22-year-old woman purchased a cod fish fillet from a local fisherman on the Government Wharf at Ingonish Beach, Cape Breton, Nova Scotia, Canada. While eating the fish, which had been broiled over an outdoor fire,

she noted several vermiform structures, interpreted as "veins". She ate a few of these and then noted one of them moving. This specimen was saved in charcoal transport medium by her

(Continued on page 364)

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
 FOR WEEKS ENDING OCTOBER 21, 1972 AND OCTOBER 23, 1971 (42nd WEEK)

AREA	ASEPTIC MENIN- GITIS	BRUCEL- LOSIS	CHICKEN- POX	DIPHTHERIA		ENCEPHALITIS			HEPATITIS		
						Primary including unspec. cases		Post In- fectious	Serum (Hepatitis B)	Infectious (Hepatitis A)	
						1972	1971	1972	1972	1972	1971
UNITED STATES	154	-	623	2	84	32	37	2	167	1,159	1,231
NEW ENGLAND	3	-	79	-	-	-	2	-	3	80	82
Maine*	-	-	1	-	-	-	-	-	-	-	8
New Hampshire*	1	-	4	-	-	-	-	-	-	9	2
Vermont*	-	-	-	-	-	-	-	-	-	5	6
Massachusetts	2	-	37	-	-	-	2	-	-	49	30
Rhode Island	-	-	10	-	-	-	-	-	-	4	9
Connecticut	-	-	27	-	-	-	-	-	3	13	27
MIDDLE ATLANTIC	48	-	20	-	3	2	4	-	62	213	175
Upstate New York	19	-	-	-	1	1	3	-	7	35	59
New York City	19	-	20	-	2	-	-	-	17	27	35
New Jersey	7	-	NN	-	-	-	-	-	12	61	62
Pennsylvania	3	-	-	-	-	1	1	-	26	90	19
EAST NORTH CENTRAL	24	-	255	-	4	13	11	1	32	181	145
Ohio	8	-	25	-	-	7	5	-	11	43	29
Indiana	-	-	45	-	-	-	-	-	-	13	6
Illinois	6	-	-	-	3	3	1	1	7	67	33
Michigan	10	-	-	-	1	3	1	-	14	55	67
Wisconsin	-	-	185	-	-	-	4	-	-	3	10
WEST NORTH CENTRAL	9	-	62	-	9	9	7	-	2	29	27
Minnesota	8	-	10	-	-	-	3	-	-	3	3
Iowa	1	-	39	-	-	2	-	-	1	8	6
Missouri	-	-	-	-	-	5	-	-	-	9	11
North Dakota	-	-	6	-	-	-	-	-	-	1	-
South Dakota	-	-	1	-	6	-	-	-	-	4	2
Nebraska	-	-	6	-	3	2	-	-	1	1	1
Kansas	-	-	-	-	-	-	4	-	-	3	4
SOUTH ATLANTIC	23	-	59	-	10	3	3	-	17	196	158
Delaware	-	-	1	-	-	-	1	-	-	1	1
Maryland	2	-	4	-	1	-	-	-	2	47	19
District of Columbia	-	-	-	-	-	-	-	-	-	1	-
Virginia	5	-	2	-	-	1	1	-	2	17	26
West Virginia	-	-	49	-	-	-	-	-	-	10	13
North Carolina	2	-	NN	-	-	-	-	-	4	42	33
South Carolina*	2	-	3	-	1	-	-	-	1	8	4
Georgia	-	-	-	-	3	1	-	-	-	7	27
Florida	12	-	-	-	5	1	1	-	8	63	35
EAST SOUTH CENTRAL	4	-	15	1	7	-	1	-	2	62	113
Kentucky	-	-	15	-	-	-	-	-	-	29	70
Tennessee	-	-	NN	-	-	-	-	-	-	22	32
Alabama	1	-	-	1	7	-	-	-	1	3	7
Mississippi	3	-	-	-	-	-	1	-	1	8	4
WEST SOUTH CENTRAL	17	-	17	1	38	1	4	-	9	128	157
Arkansas	2	-	-	-	-	-	-	-	-	4	4
Louisiana	4	-	NN	1	5	-	2	-	1	27	21
Oklahoma	4	-	-	-	-	1	2	-	-	-	19
Texas	7	-	17	-	33	-	-	-	8	97	113
MOUNTAIN	4	-	41	-	5	3	-	-	3	63	41
Montana	-	-	5	-	-	-	-	-	-	9	3
Idaho	1	-	-	-	2	1	-	-	1	22	4
Wyoming	-	-	5	-	-	-	-	-	-	-	2
Colorado	-	-	5	-	-	2	-	-	2	3	10
New Mexico	3	-	14	-	1	-	-	-	-	8	2
Arizona	-	-	12	-	2	-	-	-	-	11	15
Utah	-	-	-	-	-	-	-	-	-	10	4
Nevada	-	-	-	-	-	-	-	-	-	-	1
PACIFIC	22	-	75	-	8	1	5	1	37	207	333
Washington	7	-	64	-	6	-	1	-	-	17	41
Oregon	1	-	-	-	1	-	-	-	-	22	26
California	14	-	-	-	1	1	4	1	35	158	259
Alaska	-	-	3	-	-	-	-	-	2	2	3
Hawaii	-	-	8	-	-	-	-	-	-	8	4
Guam	-	-	-	-	-	-	---	-	-	-	---
Puerto Rico	-	-	4	-	-	-	-	-	-	10	31
Virgin Islands	-	-	-	-	-	-	-	-	-	-	-

*Delayed reports: Aseptic meningitis: N.H. delete 1
 Chickenpox: Me. 15

Hepatitis B: S.C. delete 7
 Hepatitis A: Me. 5, Vt. 8, S.C. delete 4

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**TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDING OCTOBER 21, 1972 AND OCTOBER 23, 1971 (42nd 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	12	742	167	27,674	70,953	20	1,097	1,889	609	59,373	471	22,179
NEW ENGLAND	-	24	47	3,279	3,462	1	46	89	44	2,518	9	991
Maine	-	2	-	244	1,466	-	4	8	-	287	-	74
New Hampshire	-	3	33	335	211	-	3	20	1	187	-	32
Vermont	-	1	-	128	118	-	-	-	19	132	-	70
Massachusetts	-	8	13	748	244	-	21	32	10	604	5	464
Rhode Island	-	1	-	524	238	1	12	3	5	391	1	90
Connecticut	-	9	1	1,300	1,185	-	6	26	9	917	3	261
MIDDLE ATLANTIC	3	68	3	1,049	7,576	4	135	258	55	3,443	3	1,904
Upstate New York	1	16	-	128	680	-	32	78	NN	NN	-	243
New York City	-	15	1	365	3,780	1	40	55	33	1,982	-	237
New Jersey	-	19	-	494	1,197	1	26	56	8	731	1	1,161
Pennsylvania	2	18	2	62	1,919	2	37	69	14	730	2	263
EAST NORTH CENTRAL	2	78	51	11,247	15,659	2	157	217	150	16,109	32	5,725
Ohio	1	14	1	257	4,011	-	61	70	18	2,221	5	408
Indiana	-	1	6	1,270	2,752	1	12	16	4	1,049	1	714
Illinois	1	30	8	4,160	3,024	-	34	60	22	2,807	3	1,041
Michigan	-	30	11	2,028	2,396	1	43	56	33	2,835	5	1,305
Wisconsin	-	3	25	3,532	3,476	-	7	15	73	7,197	18	2,257
WEST NORTH CENTRAL	-	47	11	981	6,916	2	76	137	73	8,645	5	1,291
Minnesota	-	7	-	22	55	1	24	23	5	690	-	494
Iowa	-	3	11	685	2,343	1	5	12	64	5,930	1	398
Missouri	-	12	-	164	2,603	-	20	47	-	543	1	112
North Dakota	-	1	-	53	238	-	-	6	2	389	2	31
South Dakota	-	4	-	7	217	-	2	6	-	119	-	12
Nebraska	-	3	-	23	66	-	9	15	2	271	1	53
Kansas	-	17	-	27	1,394	-	16	28	-	703	-	191
SOUTH ATLANTIC	3	116	11	2,204	8,588	5	250	337	59	5,564	228	2,271
Delaware	-	-	-	51	42	-	1	2	3	104	-	7
Maryland	-	9	-	15	550	1	37	49	7	387	3	51
District of Columbia	-	5	-	2	15	1	11	13	1	23	-	6
Virginia	1	9	-	62	1,600	1	55	39	6	1,164	1	70
West Virginia	-	2	1	282	527	-	8	10	23	2,421	2	407
North Carolina	-	39	3	37	1,936	-	30	57	NN	NN	-	30
South Carolina	-	12	-	216	911	-	20	20	-	178	-	50
Georgia	-	26	1	173	1,128	-	18	24	-	24	-	58
Florida	2	14	6	1,366	1,879	2	70	123	19	1,263	222	1,592
EAST SOUTH CENTRAL	-	165	9	1,063	8,342	3	86	172	14	3,078	5	1,560
Kentucky	-	144	9	535	3,951	1	28	51	-	469	2	872
Tennessee	-	-	-	193	1,023	-	28	66	11	1,959	3	528
Alabama	-	17	-	150	1,897	1	17	29	2	531	-	48
Mississippi	-	4	-	185	1,471	1	13	26	1	119	-	112
WEST SOUTH CENTRAL	1	80	14	1,544	12,543	-	134	156	48	5,076	35	1,593
Arkansas	-	5	-	13	778	-	9	5	-	167	-	35
Louisiana	-	6	-	90	1,678	-	41	56	5	322	1	94
Oklahoma	-	6	-	10	756	-	8	7	1	160	1	38
Texas	1	63	14	1,431	9,331	-	76	88	42	4,427	33	1,426
MOUNTAIN	1	49	12	1,907	3,289	-	25	56	57	3,086	8	1,118
Montana	-	2	-	16	925	-	3	6	1	189	-	33
Idaho	-	3	10	144	272	-	8	11	4	210	2	310
Wyoming	-	1	-	51	85	-	1	2	17	250	-	8
Colorado	1	31	1	531	835	-	5	7	2	760	1	522
New Mexico	-	3	1	126	394	-	3	4	18	615	-	106
Arizona	-	7	-	883	439	-	1	8	15	877	5	380
Utah	-	2	-	155	332	-	3	15	-	138	-	34
Nevada	-	-	-	1	7	-	1	3	-	47	-	3
PACIFIC	2	115	9	4,400	4,578	3	188	467	109	11,854	146	5,726
Washington	-	1	1	979	1,059	-	16	27	18	3,708	5	845
Oregon	-	11	-	133	375	-	14	36	35	1,645	4	396
California	2	88	8	3,177	2,650	3	147	395	56	6,107	136	4,406
Alaska	-	3	-	13	55	-	8	1	-	106	-	22
Hawaii	-	12	-	98	439	-	3	8	-	288	1	57
Guam	-	2	-	16	---	-	13	---	-	8	-	12
Puerto Rico	-	5	15	735	541	-	4	10	13	866	-	29
Virgin Islands	-	-	-	3	17	-	2	-	-	130	-	3

*Delayed reports: Mumps: Me. 2
Rubella: Me. 1

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
FOR WEEKS ENDING OCTOBER 21, 1972 AND OCTOBER 23, 1971 (42nd 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	Cum. 1972
UNITED STATES	3	619	-	109	11	298	12	497	16,874	538	57	3,396
NEW ENGLAND	-	6	-	-	1	15	-	2	375	9	1	99
Maine	-	3	-	-	-	-	-	-	24	-	-	76
New Hampshire *	-	-	-	-	-	2	-	-	4	-	-	3
Vermont	-	-	-	-	-	-	-	-	15	-	-	9
Massachusetts	-	2	-	-	1	11	-	2	141	8	-	4
Rhode Island	-	1	-	-	-	-	-	-	32	-	-	2
Connecticut	-	-	-	-	-	2	-	-	159	1	1	5
MIDDLE ATLANTIC	3	106	-	1	1	50	1	35	2,511	121	2	89
Upstate New York *	-	13	-	-	-	15	-	6	369	10	-	41
New York City	3	57	-	-	1	27	-	2	1,405	76	-	-
New Jersey	-	12	-	1	-	5	1	13	315	18	-	-
Pennsylvania	-	24	-	-	-	3	-	14	422	17	2	48
EAST NORTH CENTRAL	-	85	-	1	1	22	1	27	1,697	41	6	339
Ohio *	-	4	-	1	1	7	1	23	584	3	4	97
Indiana	-	20	-	-	-	-	-	-	214	9	-	69
Illinois	-	24	-	-	-	6	-	3	41	8	1	54
Michigan	-	23	-	-	-	7	-	-	643	17	-	8
Wisconsin	-	14	-	-	-	2	-	1	215	4	1	111
WEST NORTH CENTRAL	-	47	-	26	1	8	1	19	1,156	11	14	943
Minnesota	-	11	-	-	-	1	-	-	199	5	5	218
Iowa	-	1	-	-	-	-	-	2	125	1	3	273
Missouri	-	27	-	21	-	3	1	10	500	5	3	84
North Dakota	-	-	-	-	-	-	-	-	13	-	1	124
South Dakota *	-	-	-	1	-	-	-	4	41	-	1	112
Nebraska	-	1	-	1	1	1	-	-	38	-	1	16
Kansas	-	7	-	3	-	3	-	3	240	-	-	116
SOUTH ATLANTIC	-	108	-	10	2	36	2	250	4,857	169	7	347
Delaware	-	4	-	-	-	-	-	1	90	-	-	2
Maryland	-	14	-	1	-	8	1	31	259	4	-	17
District of Columbia	-	6	-	-	-	3	-	1	341	20	-	-
Virginia	-	11	-	7	1	10	-	56	119	11	1	95
West Virginia	-	11	-	-	-	1	-	3	34	-	-	52
North Carolina *	-	11	-	-	-	-	1	115	346	9	-	3
South Carolina	-	-	-	-	-	1	-	20	1,885	41	-	13
Georgia	-	35	-	1	-	3	-	22	678	52	4	94
Florida	-	16	-	1	1	10	-	1	1,105	32	2	71
EAST SOUTH CENTRAL	-	70	-	8	-	37	3	95	1,130	55	3	563
Kentucky	-	23	-	-	-	11	-	4	96	21	2	219
Tennessee	-	15	-	7	-	11	2	59	599	14	1	283
Alabama	-	21	-	1	-	10	-	17	207	11	-	58
Mississippi	-	11	-	-	-	5	1	15	228	9	-	3
WEST SOUTH CENTRAL	-	120	-	49	1	39	3	59	1,909	49	12	689
Arkansas *	-	7	-	28	-	12	3	14	66	3	2	98
Louisiana	-	55	-	4	1	7	-	-	433	14	-	36
Oklahoma	-	8	-	10	-	3	-	34	175	3	7	267
Texas *	-	50	-	7	-	17	-	11	1,235	29	3	288
MOUNTAIN	-	11	-	10	-	10	1	9	609	7	1	89
Montana	-	6	-	1	-	-	-	2	38	-	-	7
Idaho	-	-	-	-	-	-	1	6	31	2	-	-
Wyoming	-	2	-	-	-	-	-	-	20	-	-	1
Colorado	-	-	-	1	-	1	-	-	193	2	-	-
New Mexico	-	-	-	-	-	1	-	-	30	-	1	22
Arizona *	-	3	-	2	-	6	-	-	173	1	-	50
Utah	-	-	-	6	-	2	-	1	48	-	-	7
Nevada	-	-	-	-	-	-	-	-	76	2	-	2
PACIFIC	-	66	-	4	4	81	-	1	2,630	76	11	238
Washington	-	6	-	-	-	2	-	1	238	-	-	-
Oregon	-	6	-	1	-	-	-	-	309	3	-	3
California	-	51	-	2	4	76	-	-	1,981	73	11	227
Alaska	-	-	-	1	-	-	-	-	63	-	-	8
Hawaii	-	3	-	-	-	3	-	-	39	-	-	-
Guam	-	-	-	-	-	-	-	-	-	-	-	-
Puerto Rico *	-	49	-	-	-	7	-	-	41	13	-	42
Virgin Islands	-	-	-	-	-	-	-	-	6	1	-	-

*Delayed reports: Tetanus: N.Y. Ups. 1, P.R. 1

TB: Ohio delete 1, N.C. delete 3, Tex. 74

Gonorrhea: N.H. 9, Ark. 20

Syphilis: N.H. 3

Rabies in animals: S. Dak. 34, Ariz. 3

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDING OCTOBER 21, 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	679	403	33	38	SOUTH ATLANTIC	1,185	604	41	46
Boston, Mass.	233	126	8	18	Atlanta, Ga.	149	67	8	5
Bridgeport, Conn.	31	16	1	—	Baltimore, Md.	231	117	11	8
Cambridge, Mass.	24	16	1	4	Charlotte, N. C.	59	31	2	—
Fall River, Mass.	25	21	—	—	Jacksonville, Fla.	85	44	3	—
Hartford, Conn.	40	15	4	—	Miami, Fla.	106	59	—	5
Lowell, Mass.	34	24	1	3	Norfolk, Va.	57	31	—	7
Lynn, Mass.	29	17	3	2	Richmond, Va.	86	39	1	6
New Bedford, Mass.	28	22	—	1	Savannah, Ga.	38	17	1	2
New Haven, Conn.	47	31	4	—	St. Petersburg, Fla.	83	69	2	4
Providence, R. I.	65	40	6	2	Tampa, Fla.	67	36	2	4
Somerville, Mass.	6	4	—	—	Washington, D. C.	185	74	8	3
Springfield, Mass.	42	25	1	6	Wilmington, Del.	39	20	3	2
Waterbury, Conn.	34	21	1	—					
Worcester, Mass.	41	25	3	2	EAST SOUTH CENTRAL	677	359	40	31
MIDDLE ATLANTIC	2,968	1,819	93	122	Birmingham, Ala.	101	53	8	1
Albany, N. Y.	56	37	2	3	Chattanooga, Tenn.	66	36	4	11
Allentown, Pa.	26	18	1	4	Knoxville, Tenn.	40	28	—	1
Buffalo, N. Y.	122	77	7	10	Louisville, Ky.	127	68	7	8
Camden, N. J.	47	33	2	3	Memphis, Tenn.	144	73	10	4
Elizabeth, N. J.	32	16	2	2	Mobile, Ala.	63	33	6	1
Erie, Pa.	29	17	—	1	Montgomery, Ala.	44	20	2	2
Jersey City, N. J.	70	40	3	5	Nashville, Tenn.	92	48	3	3
Newark, N. J.	66	31	4	1	WEST SOUTH CENTRAL	1,215	642	68	37
New York City, N. Y. †	1,601	992	46	48	Austin, Tex.	52	28	1	4
Paterson, N. J.	47	32	3	5	Baton Rouge, La.	51	29	3	1
Philadelphia, Pa.	286	152	7	4	Corpus Christi, Tex.	32	16	3	—
Pittsburgh, Pa.	186	108	6	8	Dallas, Tex.	171	91	13	—
Reading, Pa.	39	28	1	5	El Paso, Tex.	69	33	8	5
Rochester, N. Y.	105	71	3	11	Fort Worth, Tex.	78	34	4	3
Schenectady, N. Y.	24	19	—	—	Houston, Tex.	242	126	6	4
Scranton, Pa.	26	19	—	1	Little Rock, Ark.	34	22	—	5
Syracuse, N. Y.	91	55	3	3	New Orleans, La.	161	91	15	1
Trenton, N. J.	39	23	2	1	Oklahoma City, Okla. *	86	49	5	2
Utica, N. Y.	25	17	—	1	San Antonio, Tex.	129	63	5	3
Yonkers, N. Y.	51	34	—	6	Shreveport, La.	50	26	2	2
					Tulsa, Okla.	60	34	3	7
EAST NORTH CENTRAL	2,657	1,561	114	75	MOUNTAIN	508	281	30	23
Akron, Ohio	72	48	3	—	Albuquerque, N. Mex.	60	30	3	5
Canton, Ohio	40	23	—	—	Colorado Springs, Colo.	27	13	2	6
Chicago, Ill.	696	391	29	13	Denver, Colo.	103	55	8	2
Cincinnati, Ohio	150	98	7	5	Las Vegas, Nev.	17	10	3	1
Cleveland, Ohio	202	106	11	2	Ogden, Utah	14	11	1	—
Columbus, Ohio	134	74	4	5	Phoenix, Ariz.	107	52	7	—
Dayton, Ohio	109	60	4	4	Pueblo, Colo.	24	16	—	5
Detroit, Mich.	369	209	22	14	Salt Lake City, Utah	75	48	2	1
Evansville, Ind.	44	26	2	1	Tucson, Ariz.	81	46	4	2
Fort Wayne, Ind.	53	40	1	3	PACIFIC	1,651	1,025	47	31
Gary, Ind.	36	18	3	—	Berkeley, Calif.	19	13	1	1
Grand Rapids, Mich.	61	42	2	8	Fresno, Calif.	58	28	3	2
Indianapolis, Ind.	181	111	6	5	Glendale, Calif.	32	21	—	—
Madison, Wis.	32	20	1	3	Honolulu, Hawaii	52	24	7	—
Milwaukee, Wis.	164	105	8	—	Long Beach, Calif.	112	74	2	2
Peoria, Ill.	78	39	4	—	Los Angeles, Calif.	542	345	11	7
Rockford, Ill.	28	14	—	3	Oakland, Calif.	67	38	1	—
South Bend, Ind.	37	25	1	3	Pasadena, Calif.	31	20	2	—
Toledo, Ohio	113	79	6	6	Portland, Oreg.	143	93	4	3
Youngstown, Ohio	58	33	—	—	Sacramento, Calif.	73	44	—	2
WEST NORTH CENTRAL	842	504	39	17	San Diego, Calif.	121	71	3	2
Des Moines, Iowa	68	41	2	—	San Francisco, Calif.	158	89	6	1
Duluth, Minn.	18	11	1	2	San Jose, Calif.	35	20	—	—
Kansas City, Kans.	24	12	4	1	Seattle, Wash.	126	84	4	5
Kansas City, Mo.	119	71	7	1	Spokane, Wash.	36	30	2	6
Lincoln, Nebr.	27	15	2	3	Tacoma, Wash.	46	31	1	—
Minneapolis, Minn.	112	67	8	1					
Omaha, Nebr.	125	81	2	2	Total	12,382	7,198	505	420
St. Louis, Mo.	219	123	10	5	Expected Number	12,258	6,980	555	403
St. Paul, Minn.	59	45	2	2	Cumulative Total (includes reported corrections for previous weeks)	531,911	309,354	21,078	20,597
Wichita, Kans.	71	38	1	—					

†Delayed report for week ending Oct. 14, 1972

*Estimate based on average percent of divisional total

PHOCANEMA SPECIES INFECTION - Continued

companion, a bacteriology technician. She ate no fish for the next 6 days and had no symptoms except for slight episodic nausea.

On Aug. 11, 1972, she coughed up a worm similar to the specimen held in transport medium and presented it live to the Medical Center Hospital of Vermont. The patient was examined at the hospital, where physical findings, complete blood count, and chest X-ray were unremarkable. Subsequent stool examinations for ova and parasites were negative. The patient has remained well. The worms were identified by the Department of Parasitology, University of Toronto, as *Phocanema* species (1).

(Reported by R. Wright, M.D. and J. Craighead, M.D., Department of Pathology, University of Vermont; S. Kates, Department of Microbiology and K. Wright, Ph.D., Department of Parasitology, University of Toronto, Toronto, Canada.)

Editorial Note

In 1960, Van Thiel described gastrointestinal lesions in which larval nematodes were found (2). Subsequently, reports of additional cases have been published in Europe and Japan. Although the apparent causative organism has been generally termed *Anisakis marina*, Myers has described the

difficulty in speciating nematodes from histologic preparations (3). Chitwood identified the nematode in Van Thiel's original paper as either *Phocanema* or *Porrocaecum* (4). Thus, at least in Europe, *phocanema*-like nematodes appear to cause disease in man.

P. decipiens are common in cod, smelt, and other food fish caught in the North Atlantic. In the present case, believed to be the first report of human infection by *Phocanema* of North Atlantic origin in America, at least two *Phocanema* species survived perfunctory cooking, and one survived in the patient for more than 5 days. Fresh fish purchased in the United States and Canada contain live *Phocanema* species and may present a potential for producing disease in man.

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3. Myers BJ: Nematodes Transmitted to Man by fish and aquatic mammals. *J Wild Dis* 6:266-71, 1970
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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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