

FOR ADMINISTRATIVE USE

CDC INFLUENZA SURVEILLANCE REPORT
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U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service Bureau of State Services
Communicable Disease Center - Robert J. Anderson, M.D., Chief
Epidemiology Branch - Alexander D. Langmuir, M.D., Chief
Surveillance Section - E. Russell Alexander, M.D., Chief
Statistics Section - Robert E. Serfling, Ph.D., Chief

Surveillance Section
50 Seventh Street, N.E.
Atlanta 23, Georgia
Telephone: TRinity 6-3311
Extension 5454

SPECIAL NOTE

Information contained in this report is a summary of data reported to CDC by State Health Departments, Epidemic Intelligence Service Officers, the influenza diagnostic laboratories collaborating with the International Influenza Center for the Americas, and other pertinent sources. Much of it is preliminary in nature and is intended primarily for those involved in influenza control activities. Anyone desiring to quote this information is urged to contact the person or persons primarily responsible for the items reported in order that the exact interpretation of the report and the current status of the investigation be obtained. State Health Officers, of course, will judge the advisability of releasing any information from their own States.

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I. Summary of Information

Within the past 2 weeks epidemics of febrile respiratory disease have been reported to the Surveillance Section, CDC, from three separate states: Texas, Ohio, and Tennessee. One of these outbreaks has been confirmed as being due to A₂ influenza virus. Responsible public health officers are urged to be alert for outbreaks of febrile respiratory disease, and the possibility that influenza may appear in epidemic form on a broader scale. All laboratories collaborating with the International Influenza Center are urged to report any isolations of influenza virus and to submit strains to Dr. Roslyn Q. Robinson, CDC Virus and Rickettsia Section, P.O. Box 61, Montgomery, Alabama for strain characterization.

II. Current Status of Influenza in the United States

A. Reports from States

1. Texas: Dr. Howard Smith, Director, Division of Communicable Disease Control, Texas State Department of Health reports that during the week prior to Christmas an outbreak of febrile respiratory disease was noted in Brownsville, Texas, and reached proportions sufficient to close the schools there several days before the planned Christmas holidays.

During the week ending January 2, the last week in December, a similar outbreak was reported in San Antonio, Texas. The number of cases was estimated to be 2,000 - 4,000. The disease is reported to be relatively mild with low-grade fever, and prominent respiratory symptoms, although some cases are said to have presented prominent gastro-intestinal symptoms. There has been no reported increase in mortality.

During the past several days, similar outbreaks have been reported in Austin and Houston, whereas the Brownsville and San Antonio outbreaks are reported to be declining at present.

Dr. J. V. Irons, Director of Laboratories, Texas State Department of Health, reports the isolation of A₂ influenza virus from a student at the University of Texas in Austin about 1 week before Christmas.

2. Ohio: Dr. Winslow Bashe, Chief, Division of Communicable Diseases, Ohio Department of Health reports that an outbreak of respiratory disease was noted in Columbus during the last week of December. Specimens for laboratory identification are being obtained. Concurrently, an outbreak of influenza was noted in the Ohio State Penitentiary; approximately 300 of the 4000 inmates were hospitalized with fever and prominent respiratory symptoms. Of twelve throat washings obtained, 7 yielded A₂ influenza virus. Serologic studies are underway both in the City of Columbus and the penitentiary.

Cleveland, Cincinnati, and Dayton have reported no increased respiratory disease.

3. Tennessee: According to Dr. C. B. Tucker, Director, Division of Preventable Diseases, Tennessee Department of Public Health, as reported to Dr. C. C. Dauer, NOVS, an outbreak of severe febrile respiratory disease has occurred in Linden, a small town in Perry County. About 350 persons were said to be involved, and schools were closed on Monday, January 4. Specimens are being obtained for laboratory studies.

Elsewhere there is at present no evidence of influenza becoming active, and the current influenza and pneumonia mortality data reveal no excess mortality.

This report was prepared and distributed to alert responsible public health officers as rapidly as possible to the recent appearance of epidemic influenza. A mortality analysis was not included in this report as a matter of expediency, but will be included in subsequent influenza surveillance reports.

(This report was prepared by Theodore C. Eickhoff, M.D., Epidemic Intelligence Service Officer, Surveillance Section, CDC.)