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POLIOMYELITIS SURVEILLANCE
REPORT NO. 43 SEPTEMBER 23, 1955

Department of Health, Education and Welfare
Public Health Service
Communicable Disease Center

Poliomyelitis Surveillance Unit
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SPECIAL NOTE

The information in this report represents a factual summary of data reported to the Poliomyelitis Surveillance Unit from State Health Departments, Epidemic Intelligence Service Officers, participating laboratories and other pertinent sources. Much of the material is preliminary in nature and is subject to change. The distribution of this report is strictly limited to federal and state officials, to directors of participating laboratories and to other official or non-official persons having responsibility for the control of poliomyelitis in the nation. It is understood that this report will not be quoted in public nor will its contents be released to the press or to unauthorized persons. Any release of this information will be made by the Office of the Surgeon General, U.S. Public Health Service. State Health Officers, of course, are free to reveal any information they may wish concerning data from their state.

All readers should be cautioned regarding the limitations of data presented herein. Current and cumulative data are given concerning reported cases of poliomyelitis in vaccinated persons and among their familial and community contacts. It should be recognized that these data do not constitute a controlled evaluation of poliomyelitis vaccine. For this reason, interpretations and conclusions based on material in these reports must be guarded.

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I Current Morbidity Trends

Poliomyelitis incidence by weeks for the current year, with similar data for the three preceding years, is presented in Figure 1, drawn from data published by the National Office of Vital Statistics. Incidence fell slightly this week and is below that for the three preceding years.

Poliomyelitis incidence by states for the weeks ending August 13 through September 17 is presented in Table 1, together with a six-week total for this and the three previous years. The slight change in national incidence this week is reflected in minor changes reported from many states. Of particular note is the drop in incidence in all North East states and in Wisconsin, and the marked increase in cases reported from California.

Poliomyelitis morbidity rates, for 1955 and the three preceding years, are presented in Table 2. Cases for the disease year April 10 through September 17, 1955, are taken from NOVS reports and converted to rates using Bureau of the Census population estimates for 1954. Rates for the same period during 1954, 1953 and 1952 are presented for comparison. Of the ten states with the highest rates, five are in New England (Massachusetts, New Hampshire, Rhode Island, Connecticut and Vermont), and five are spread throughout the country (Wisconsin, Idaho, Nevada, Texas and Nebraska). The ten low states (Alabama, Missouri, Utah, District of Columbia, Georgia, Pennsylvania, Tennessee, West Virginia, Mississippi and Maryland) are scattered over the whole country.

Dr. John F. Enders, Children's Medical Center, Boston, in a letter to this office dated September 9, notes current results on specimens from Massachusetts cases examined in his laboratory as follows:

> "To date we have isolated 36 strains of Type I virus and one strain of Type II virus from cases of either paralytic or non-paralytic poliomyelitis. In addition, we have isolated four unidentified fecal agents from non-paralytic cases".

II Age Distribution Analysis

A total of 5525 cases (2539 paralytic, 2732 non-paralytic, and 254 unspecified) is included in the tabulations presented this week. Data from two states, New Hampshire and Minnesota, have been added this week. Table 3 shows the age distribution of these cases by paralytic status and by single years of age under 15 together with a similar distribution, by single years of age under 10, for a total of 13,447 cases (7491 paralytic, 5093 non-paralytic, and 863 unspecified) from 12 states for the calendar year 1952. Figure 2 presents graphs of this data.

The 1952 data were taken from annual reports of the states. Age distribution data are available by single years of age under 10 for only 12 states (including the District of Columbia), and for only one state by single years of age under 15. Hence, the ages 10 to 14 are grouped together for the 1952 data in Table 3 and Figure 2. It is hoped by the end of this

study to have 1952 data comparable to the 1955 data currently collected from most of the states participating in this study. Until such time, caution must be taken in comparing 1955 and 1952 polio age distributions since 14 of the states that are included in the 1955 tabulations are not included in the 1952 tabulations.

It must be emphasized that these tabulations show the percent distribution of cases, without regard to the number of individuals in each age group. It is hoped that age-specific rates, which would adjust the raw data for variations in population, will eventually be presented, if the necessary population data can be obtained. Meanwhile it should be kept in mind that in 1955 there are approximately 25% more children ages 6, 7 and 8 than there were in 1952, while the numbers in other ages are not too different for the two years.

It is planned to present 1955 and 1952 age distribution data for the country as a whole each week for the remainder of the study period. Other tabulations (to include analyses by sex, race, date of first symptoms, and paralytic ratio), will be presented for the various regions, territories, and the country as a whole from time to time.

III Special Studies

Dr. Robert M. Albrecht, Bureau of Epidemiology and Communicable Disease Control, New York State, reports current data on polio attack rates among 6-10 year olds in the following table:

Poliomyelitis Attack Rates in Vaccinated and Unvaccinated Children Age 6-10 with Onsets between 5/21 and 9/9/55

New York State (exclusive of N.Y.C.) - Reported as of 9/9/55

Vaccination Status	Estimated Number*	Number of Cases			Rates per 100,000 Population		
		P***	NP	Total**	P***	NP	Total**
Vaccinated in 1955	353,000	13	57	73	3.7	16.1	20.7
Unvaccinated	280,000	40	69	125	14.3	24.6	44.6
Vaccinated in 1954 only	75,000	1	8	10	1.3	10.7	13.3
Booster dose in 1955	23,000	0	3	6	0.0	15.0	30.0
Total	731,000	54	137	214	7.4	18.7	29.3

*Majority of initial doses given week of 5/23; about 80,000 second doses given during end of June, and 40,000 to date since the end of July; 23,000 booster doses have been given since the end of July.

**Total includes cases with unknown paralytic status.

***Paralytic cases are defined as those in which definite weakness or paralysis has been detected and persisted during at least two examinations made at intervals of at least several hours.

Dr. Donald N. Wysham, Epidemic Intelligence Service Officer assigned to Washington State Health Department, sends a tabular summary of current data on polio incidence among vaccinated and non-vaccinated children in the state.

Preliminary Figures of Incidence of Polio in Vaccinated and Non-Vaccinated Children - Based on Morbidity Reports
State of Washington

Vaccination Group	Population	No. of Polio Cases from May 15 to Sept. 10,1955	Rate per 100,000 Population
Number of children ages 5-9 who received one or more polio immunizations in NFIP program since May 15, 1955	65,468*	1**	1.5
Number of children who received polio vaccination since May 15, 1955 from private physicians (estimate)	4,000	1***	25.0
Number of children who received vaccination in 1954 field trials not receiving booster vaccination in 1955	3,379	1****	29.6
Total number of children receiving one or more vaccinations for polio in 1954 or 1955	72,847	3	4.1
Estimated population ages 5-9 not vaccinated	148,390	32*****	21.6
Estimated population in age group 5-9	221,237	35	15.8

*Includes 2,152 children vaccinated in 1954 Field Trials who received booster in 1955.

**The single case in a child immunized in the NFIP program in 1955 was non-paralytic polio with onset 18 days after first injection.

***The case of polio in a child immunized privately followed 7 days after vaccination with Cutter vaccine, and was paralytic.

****The case of polio in a child vaccinated in 1954 was non-paralytic.

*****Of the 32 cases occurring in non-vaccinated children, 18 were paralytic, 11 were non-paralytic, and 3 are unspecified as yet.

IV Routine Polio Surveillance

The tabular summary lists in detail the polio cases among vaccinated children accepted September 15 through September 21 with revisions of previously listed cases. Table 4 presents these cases and total cases to date by vaccine manufacturer, paralytic status, and according to date of vaccination and interval between last vaccination and onset of first symptoms. It should be emphasized that cases are tabulated in Table 4 strictly according to their last inoculation--date and manufacturer.

Table 5 presents a comparison of "reported and "expected" cases among children who received first inoculations in NFIP Clinics through May 7. The "expected" numbers represent rough estimates of the numbers of cases that would have occurred in the respective groups of first and second grade children if they had not been vaccinated.

This week, for the first time, a similar "reported-expected" comparison of cases among children who received first inoculations in NFIP Clinics from May 8 through July 7 is presented, in Table 6. All first inoculations in NFIP Clinics were planned for completion by July 7. However, three cases were excluded from this table because of reported first inoculations after that date. The data on total numbers of first inoculations were supplied through the courtesy of the NFIP. The data are strictly tentative, but all figures on numbers of inoculations are believed to be correct within 10 or 15 percent. Several states that used only small amounts of vaccine during this period for first inoculations are not included in the table; 12 PSU accepted cases from these states are therefore not included in this table.

It should also be noted that Tables 5 and 6 do not include cases among children who were vaccinated in the 1954 Field Trials and who received a booster inoculation this year, nor do these tables include cases inoculated with commercially distributed vaccine.

V Polio-Like Diseases

Eastern Equine Encephalitis

(The following data were collected by the staff of the Epidemiology Branch, Communicable Disease Center, through direct inquiry and from the NOVS Morbidity and Mortality Reports.)

There is more widespread evidence of activity of Eastern equine encephalitis in 1955 than in recent years. This activity is manifest along the extent of the Atlantic Coastal and Gulf States from Massachusetts to Louisiana.

First reports of EEE activity this year came from Louisiana, where horse cases and deaths were reported and virus isolations from horse brains were made in June and July. (The incidence did not seem unusual for that State.) Florida also reported horse cases in mid-summer but less than had been reported in previous years at that time. Then, immediately following widespread hurricane activity and heavy rains along the Atlantic Seaboard

States, reports of virus activity in horses and pheasants in some coastal states prompted the Communicable Disease Center to make an informal survey of the present status of Eastern equine encephalitis.

Massachusetts: Twenty-four fatal cases of EEE have occurred in horses in the Taunton River Valley (Bristol, Norwalk and Plymouth counties) since the 17th of August, as reported by Dr. William Shannon, Chief Veterinary Health Officer, Division of Livestock Disease Control, Massachusetts Department of Agriculture. Dr. Shannon further reports that outbreaks among captive pheasants have occurred and that EEE virus has been isolated from these flocks at the University of Connecticut Laboratories by Dr. Jean Smith, Connecticut State Veterinarian. Dr. Chang of the Rhode Island State Laboratory has found EEE virus in pheasants sent to his laboratory from South Attleboro, Massachusetts. It is also of interest that this has been one of the worst mosquito years in the history of Massachusetts.

Rhode Island: Dr. Tom Grennan, State Veterinarian, Department of Agriculture and Conservation, reported that there had been two cases of EEE among horses in this State. An outbreak among pheasants has also occurred on a turkey-pheasant farm for the third year in a row. Dr. I.A. McAteer, State Epidemiologist, informed Dr. Grennan that a child suspected of having EEE has been sent to the Childrens Medical Center, Boston, Massachusetts.

Connecticut: Dr. Jean Smith, State Veterinarian, Department of Farm and Markets, stated that on a pheasant game farm in the northeastern part of the State, close to the Rhode Island-Massachusetts borders, 380 of 600 birds became sick and were slaughtered and that the farm is now under quarantine.

New Jersey: Dr. Oscar Sussman, Chief of the Veterinary Public Health Section of the New Jersey Health Department, reports that there have been no proven outbreaks of EEE in horses or pheasants in that State this year.

The mosquito population in New Jersey this year is stated to be unusually large. Doctor Sussman reports that a young pregnant woman has died of encephalitis in Plainfield but the diagnosis has not yet been confirmed by laboratory test. Serum specimens have also been submitted on three other possible cases of encephalitis near Perth Amboy.

Pennsylvania, Delaware and Virginia: These states, although reporting no evidence of EEE activity, have all had unusually heavy mosquito populations this year.

North Carolina: Dr. Martin P. Hines, Chief, Veterinary Public Health Section, State Board of Health, reports the occurrence of 13 cases of EEE in horses in six southeastern counties.

South Carolina: Dr. Frank Lee, State Veterinarian, reports that according to the records at the State Department of Agriculture, Veterinary Diagnostic Laboratory, Pontiac, 23 cases of EEE in horses have been reported to date. Twelve of these cases come from Johns Island, and seven from Charleston and vicinity. All cases were fatal. Two of the cases from Johns Island have been confirmed by virus isolation. All of the cases occurred in the coastal

strip extending about 100 miles north of Charleston. The mosquito population is said to be high in the State.

Georgia: Dr. Robert Kissling, Virus and Rickettsia Section of the Communicable Disease Center, Montgomery, Alabama reports that two specimens have been received from two suspected human cases at Darien, south of Savannah.

Florida: Dr. James Scatterday, State Public Health Veterinarian, reports that 28 fatal horse cases to September 1st. Of these, four have been reported during the month of August, and three of these came from the Daytona Beach area (Volusia County). All of the four were in the St. Johns River Valley. None of these cases have been confirmed by laboratory examination.

Alabama: Dr. Kissling, of the Virus and Rickettsia Section of CDC reports that two fatal horse cases were reported at Wetumpka. These were confirmed by histopathologic examination at Auburn Veterinary Diagnostic Laboratory.

Mississippi: Dr. Kissling reports that there is a recent human case of suspected EEE near Bay St. Louis. Some horse cases have been reported from that area.

Louisiana: Dr. Herbert Elliott, Chief of the State Diagnostic Laboratory, reports that although 100 horse cases have been reported this year from January 1955 to date, the majority of these have been reported since June. They have occurred primarily in parishes south of Baton Rouge. Some of these cases have been confirmed by virus isolation from horse brains. One serologically confirmed human case has been reported. This occurred in June in an 11-year-old girl who had been vacationing in Bay St. Louis, Mississippi. When last reported the child was still in coma. The child came from Baton Rouge, Louisiana. Some horse cases have occurred in that Parish, and at least one of them had been confirmed by virus isolation. Mosquitoes were heavy in this area in late June.

Texas: Dr. A.B. Rich, Director, Division of Veterinary Public Health reports no evidence of EEE virus activity in humans or horses in Texas this year. He did report a positive finding for Western equine encephalitis in a horse located in Stephenville, Texas.

(This report was prepared by Dr. Neal Nathanson and Dr. Wm. Jackson Hall, with assistance from the Statistics Section, CDC.)

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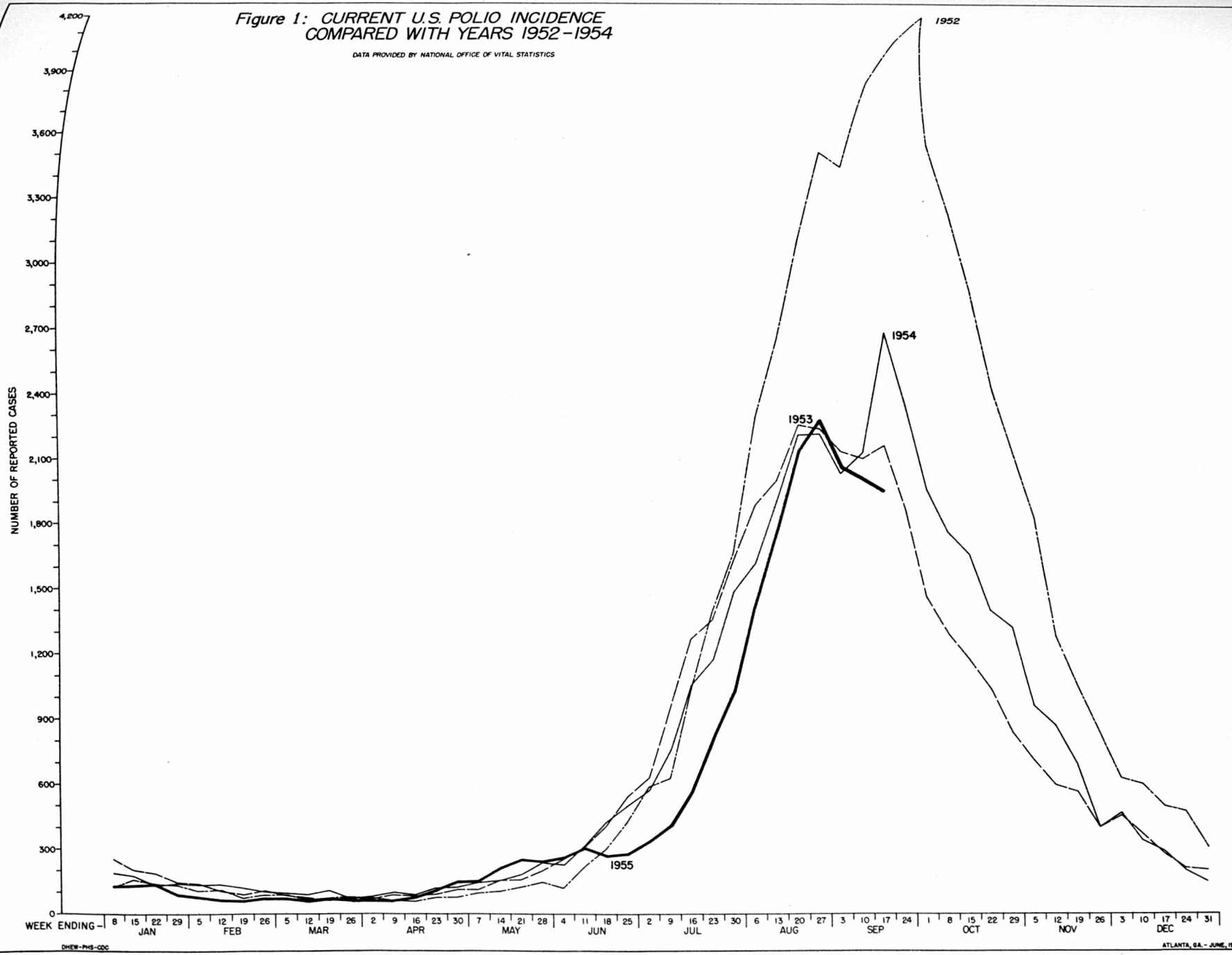
Figure 1: CURRENT U.S. POLIO INCIDENCE COMPARED WITH YEARS 1952-1954

DATA PROVIDED BY NATIONAL OFFICE OF VITAL STATISTICS



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ATLANTA, GA. - JUNE, 1955

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Table 1

TREND OF 1955 POLIOMYELITIS INCIDENCE

State	Cases Reported to NOVS* During Week Ending: 8/13	8/20	8/27	9/3	9/10	9/17	6 Week Total	Comparable Totals in: 1954	1953	1952
United States	1786	2138	2289	2059	2009	1950	12231	13150	12874	20557
North East										
Maine	18	13	18	12	22	12	95	54	165	67
New Hampshire	24	41	27	18	20	10	140	37	29	24
Vermont	4	20	13	9	13	6	65	27	42	10
Massachusetts	411	448	355	317	290	276	2097	436	210	274
Rhode Island	16	34	36	46	33	21	186	54	136	31
Connecticut	50	55	56	63	75	48	347	125	133	207
New York	117	169	238	272	245	251	1292	722	1174	1057
New Jersey	39	55	59	59	66	45	323	278	324	328
Pennsylvania	43	51	68	52	73	53	340	516	504	588
North Central										
Ohio	94	91	124	87	97	126	619	899	1112	1215
Indiana	27	26	35	33	27	32	180	304	294	497
Illinois	75	147	111	129	112	112	686	907	944	1635
Michigan	92	94	116	123	68	78	571	846	989	1604
Wisconsin	135	160	353	311	224	199	1382	237	306	915
Minnesota	73	62	60	41	45	38	319	300	1109	1556
Iowa	61	70	44	37	33	26	271	584	277	1428
Missouri	16	13	18	18	15	34	114	259	325	455
North Dakota	4	5	3	4	5	3	24	49	90	95
South Dakota	1	3	11	5	1	1	22	42	85	263
Nebraska	16	23	11	14	19	20	103	318	76	1008
Kansas	12	20	21	19	18	21	111	245	205	594
South										
Delaware	3	4	3	3	3	0	16	16	17	47
Maryland	18	23	25	15	12	15	108	83	228	51
Dist. of Columbia	1	2	4	2	4	6	19	37	23	84
Virginia	23	27	25	10	20	16	121	223	294	325
West Virginia	11	9	14	13	20	11	78	150	193	283
North Carolina	36	43	38	27	21	23	188	297	244	172
South Carolina	23	21	21	13	22	10	110	90	53	45
Georgia	10	4	14	15	6	21	70	279	113	177
Florida	12	26	16	3	23	13	93	316	176	135
Kentucky	43	36	36	14	19	33	181	324	102	785
Tennessee	8	20	16	10	20	19	93	197	171	223
Alabama	11	13	10	4	12	4	54	109	89	88
Mississippi	9	10	6	3	3	8	39	141	83	201
Arkansas	16	10	17	6	9	6	64	92	101	143
Louisiana	12	16	11	8	17	15	79	125	90	205
Oklahoma	5	22	15	4	29	17	92	174	172	415
Texas	79	98	80	76	94	60	487	900	382	1085

Table 1 (Continued)

State	Cases Reported to NOVS* During Week Ending: 8/13	8/20	8/27	9/3	9/10	9/17	6 Week Total	Comparable Totals in: 1954	1953	1952
West										
Montana	6	9	3	12	10	17	57	41	99	85
Idaho	9	6	10	5	5	14	49	43	18	134
Wyoming	1	3	-	1	2	8	15	96	19	30
Colorado	8	18	10	21	12	18	87	166	72	220
New Mexico	10	5	10	6	5	9	45	96	31	155
Arizona	2	10	3	10	8	7	40	63	165	99
Utah	6	-	4	-	7	2	19	86	63	57
Nevada	-	1	1	4	3	3	12	47	11	13
Washington	14	17	16	20	38	48	153	115	141	473
Oregon	12	14	18	22	20	20	106	103	104	145
California	70	71	86	63	64	115	469	1502	1091	831

*National Office of Vital Statistics.

Table 2

POLIOMYELITIS MORBIDITY RATES
FOR THE DISEASE YEAR TO DATE

State	1955 Cases* 4/10-9/17	1955 Rates* (per 100,000) 4/10 - 9/17	Rates* for Comparable Periods In: 1954	1953	1952
United States	19,058	11.8	13.8	14.5	19.2
North East					
Maine	118	12.7	7.1	24.6	9.3
New Hampshire	181	34.0	8.3	13.7	5.8
Vermont	77	20.0	8.3	14.9	4.4
Massachusetts	2,844	57.4	10.1	6.4	6.8
Rhode Island	226	27.4	7.6	20.0	4.1
Connecticut	452	20.4	9.6	10.7	11.9
New York	1,728	11.2	6.5	12.1	9.4
New Jersey	417	7.9	7.6	9.6	8.1
Pennsylvania	500	4.6	6.0	6.7	6.6
North Central					
Ohio	863	10.1	14.8	19.9	21.1
Indiana	289	6.9	10.4	11.5	14.9
Illinois	956	10.4	13.4	16.1	22.0
Michigan	852	12.1	18.2	21.7	29.4
Wisconsin	1,648	46.1	8.7	11.9	30.8
Minnesota	436	14.1	13.7	52.6	58.9
Iowa	438	16.6	35.1	17.1	77.8
Missouri	176	4.2	9.6	15.1	13.9
North Dakota	45	7.1	12.1	20.1	18.2
South Dakota	49	7.3	9.0	20.4	50.0
Nebraska	199	14.6	36.3	13.4	96.6
Kansas	189	9.4	21.7	18.5	40.8
South					
Delaware	48	13.1	8.2	7.0	17.2
Maryland	167	6.4	4.2	14.6	2.6
Dist. of Columbia	37	4.3	5.8	5.8	12.2
Virginia	241	6.7	9.9	16.0	12.5
West Virginia	117	6.0	10.2	18.7	22.7
North Carolina	303	7.1	11.6	18.0	6.3
South Carolina	215	9.6	10.2	5.7	2.7
Georgia	163	4.5	14.7	9.2	8.8
Florida	272	7.7	24.7	10.9	10.7
Kentucky	308	10.3	17.2	8.6	35.3
Tennessee	162	4.8	11.2	14.9	10.7
Alabama	128	4.1	9.2	12.2	6.2
Mississippi	135	6.1	17.8	12.8	23.4
Arkansas	140	7.3	12.9	12.5	12.7
Louisiana	243	8.3	12.9	11.5	21.5
Oklahoma	206	9.1	19.1	19.2	31.5
Texas	1,303	15.4	26.8	15.6	38.3

Table 2 (Continued)

POLIOMYELITIS MORBIDITY RATES
FOR THE DISEASE YEAR TO DATE

State	1955 Cases* 4/10-9/17	1955 Rates* (per 100,000) 4/10 - 9/17	Rates* for Comparable Periods In: 1954	1953	1952
West					
Montana	72	11.5	9.6	22.0	21.4
Idaho	188	30.6	9.9	5.5	30.4
Wyoming	27	8.7	51.9	14.1	16.3
Colorado	160	11.0	17.4	10.5	22.5
New Mexico	94	12.0	16.6	9.2	37.7
Arizona	78	7.9	15.6	30.8	19.3
Utah	32	4.2	16.0	16.1	10.0
Nevada	56	25.7	42.2	13.1	11.9
Washington	230	9.1	7.8	9.0	27.0
Oregon	196	12.0	10.4	9.9	13.6
California	1,055	8.4	22.5	16.3	12.1

* Cases for 1955 are those reported to NOVS for the week ending April 16 through the week ending September 17, 1955. Case totals for all years do not take into consideration minor corrections which are reported currently, and therefore may not agree with totals published elsewhere. Rates for 1955 and 1954 are computed using 1954 state population estimates for July 1, 1954, by the Bureau of the Census; rates for 1953 and 1952 are computed from state population estimates by the Bureau of the Census for July 1, 1953 and 1952, respectively.

Figure 2
AGE DISTRIBUTION OF POLIOMYELITIS IN 1955 (26 STATES) and 1952 (12 STATES)
(PRELIMINARY DATA APRIL 12 to SEPTEMBER 2)

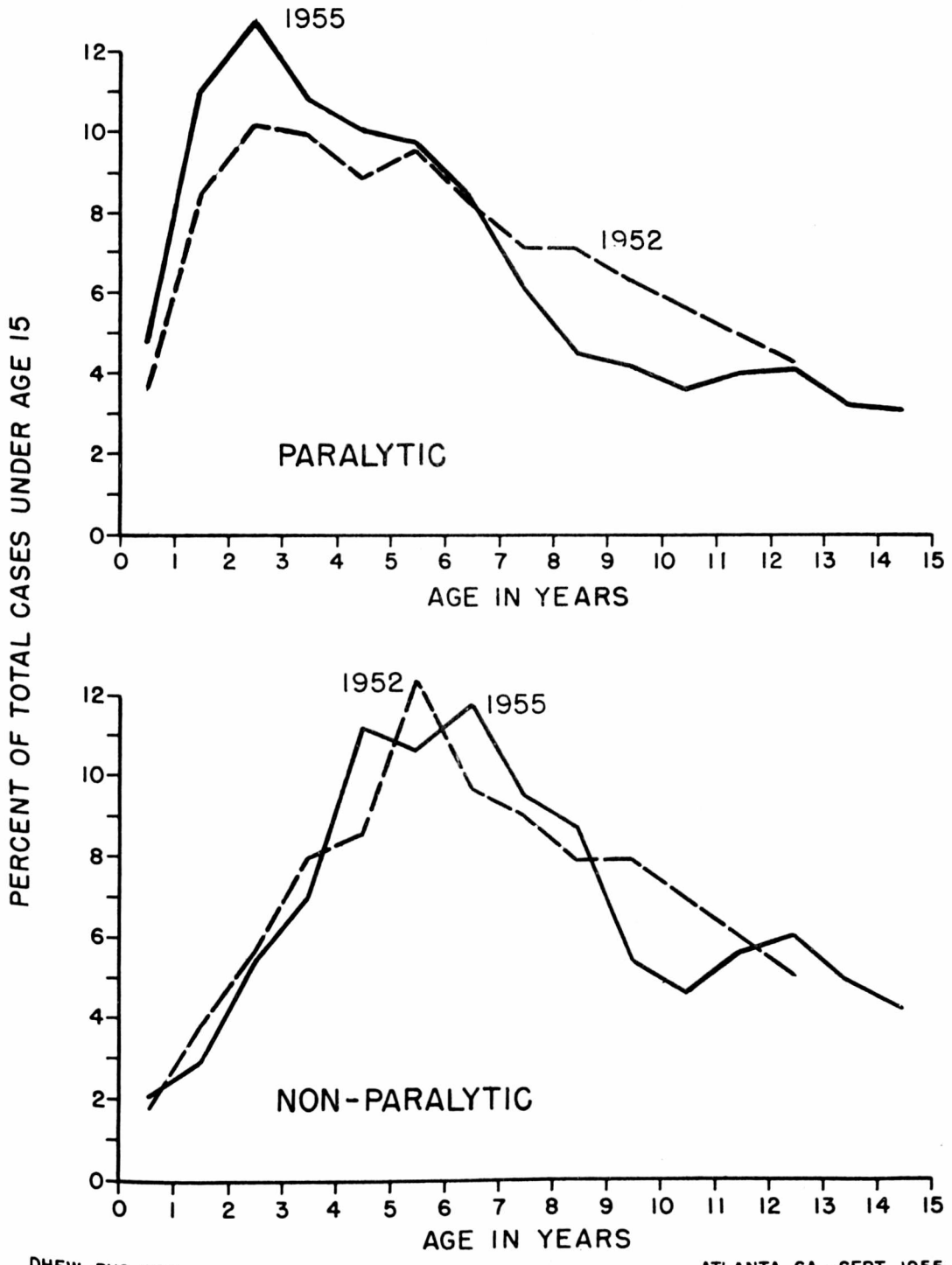

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Table 3

AGE DISTRIBUTION ANALYSIS
Poliomyelitis in 1955 and 1952
Percentage Distribution of Cases Under 15 Years of Age by Paralytic Status

Age	1955* (26 States)*				1952(12 States)*			
	Paralytic		Non-Paralytic		Paralytic		Non-Paralytic	
	No.	%	No.	%	No.	%	No.	%
Under 1	83	4.8	39	2.1	175	3.6	61	1.8
1	189	11.0	55	3.0	408	8.4	135	3.9
2	219	12.7	103	5.5	491	10.1	196	5.7
3	186	10.8	131	7.0	482	9.9	275	8.0
4	171	10.0	206	11.1	431	8.8	296	8.6
0-4	848	49.3	534	28.7	1987	40.7	963	28.0
5	166	9.7	197	10.6	463	9.5	423	12.3
6	142	8.3	218	11.7	400	8.2	333	9.7
7	104	6.1	176	9.5	346	7.1	308	9.0
8	77	4.5	162	8.7	345	7.1	272	7.9
9	73	4.2	101	5.4	307	6.3	272	7.9
5-9	562	32.7	854	45.9	1861	38.1	1608	46.8
10	61	3.6	86	4.6				
11	68	4.0	105	5.6				
12	70	4.1	112	6.0				
13	55	3.2	92	4.9				
14	54	3.1	79	4.2				
10-14	308	17.9	474	25.5	1037	21.2	867	25.2
0-14	1718	100%	1862	100%	4885	100%	3438	100%
15-plus	818		868		2559		1625	
Unknown	3		2		47		30	
Total	2539		2732		7491		5093	

* Preliminary data reported from the following states through September 2 on cases with onsets April 12 or later, but not including 254 cases with paralytic status unspecified: Maine, New Hampshire, Connecticut, New York, Ohio, Illinois, Wisconsin, Minnesota, Missouri, North Dakota, Nebraska, District of Columbia, Virginia, West Virginia, South Carolina, Tennessee, Alabama, Mississippi, Arkansas, Texas, Wyoming, Colorado, New Mexico, Arizona, Oregon, and California.

** Data for calendar year 1952 from the following states, but not including 863 cases with paralytic status unspecified: Maine, New Hampshire, Connecticut, New York, Illinois, Minnesota, North Dakota, District of Columbia, Virginia, Mississippi, Washington, and Oregon.

Table 4

Poliomyelitis Cases in Vaccinated Individuals
(PSU Accepted Cases through September 21, 1955)

	Vaccine Manufacturer* and Paralytic Status**											
	C		L		PD		PM		W			
	P	NP	P	NP	P	NP	P	NP	P	NP		
CASES VACCINATED 5-7 OR BEFORE WITH ONSETS 30 DAYS OR LESS AFTER VACCINATION* **												
Totals through 9-14 (Revised)	60	13	17	24	3	2	3	2	9	3		
	73		41		5		5		12			
(No New Cases 9-15 through 9-21)												
CASES VACCINATED 5-7 OR BEFORE WITH ONSETS 31 DAYS OR MORE AFTER VACCINATION* **												
Totals through 9-14 (Revised)	8	9	20	90	6	21	9	10	8	13		
New Cases 9-15 through 9-21	1	4	0	3	0	0	0	2	0	0		
Totals through 9-21	9	13	20	93	6	21	9	12	8	13		
	22		113		27		21		21			
CASES VACCINATED 5-8 OR LATER WITH ONSETS 30 DAYS OR LESS AFTER VACCINATION* **												
Totals through 9-14 (Revised)			10	39	19	24	0	3	1	5		
New Cases 9-15 through 9-21			2	1	0	0	1	0	0	0		
Totals through 9-21			12	40	19	24	1	3	1	5		
			52		43		4		6			
CASES VACCINATED 5-8 OR LATER WITH ONSETS 31 DAYS OR MORE AFTER VACCINATION* **												
Totals through 9-14 (Revised)			3	14	47	99			0	1		
New Cases 9-15 through 9-21			1	1	2	7			0	0		
Totals through 9-21			4	15	49	106	0	0	0	1		
			19		155		0		1			

* Vaccine Manufacturers: C - Cutter; L - Lilly; PD - Parke-Davis; PM - Pitman-Moore; W - Wyeth

** Paralytic Status: P - paralytic; NP - Non-paralytic

*** Cases in individuals who had two inoculations are listed according to the second inoculation. No inoculations with Cutter vaccine given after May 7.

Table 5

Comparison of Reported* and Expected** Cases of Poliomyelitis Among Children Who Received First Inoculations in NFIP Clinics from April 15 to May 7, 1955

Vaccine Mfr.*** And Number Vaccinated***	Cases	5 Weeks Apr.17– May 21	5 Weeks May 22– June 25	5 Weeks June 26– July 30	3 Weeks July 31– Aug.20	Aug. 27	Sept. 3	Sept. 10
CUTTER 303,000	Reported P	29	4	2	2	0	0	0
	Reported NP	11	5	5	5	2	1	3
	Reported Total	40	9	7	7	2	1	3
	Expected Total	11	12	16	13	4	4	7
LILLY 2,514,000	Reported P	16	11	13	3	1	0	0
	Reported NP	23	40	40	34	5	3	1
	Reported Total	39	51	53	37	6	3	1
	Expected Total	26	52	95	88	22	30	26
PARKE-DAVIS 860,000	Reported P	1	3	4	1	–	1	–
	Reported NP	0	4	18	–	–	0	–
	Reported Total	1	7	22	1	0	1	0
	Expected Total	6	11	43	67	24	18	19
PITMAN-MOORE 411,000	Reported P	2	4	5	1	–	1	–
	Reported NP	2	1	5	6	–	–	–
	Reported Total	4	5	10	7	0	1	0
	Expected Total	2	4	18	19	5	5	8
WYETH 775,000	Reported P	8	4	4	–	1	–	–
	Reported NP	3	4	8	–	1	–	–
	Reported Total	11	8	12	0	2	0	0
	Expected Total	4	9	20	26	10	13	13

*Reported Cases include only cases accepted by PSU through September 21 and vaccinated in NFIP Clinics April 16 through May 7, 1955.

**Expected Cases among this group of children estimated from 1955 incidence of poliomyelitis (paralytic and non-paralytic) reported to National Office of Vital Statistics by the States.

***CUTTER vaccine was used in Idaho, Nevada, Arizona, New Mexico, and southern California. LILLY vaccine was used in Texas, Oklahoma, Louisiana, Arkansas, Mississippi, Alabama, Tennessee, Florida, Georgia, South Carolina, North Carolina, Virginia, West Virginia, Indiana, and parts of Ohio, California, and Colorado. PARKE-DAVIS vaccine was used in Michigan, Illinois, Iowa, Wyoming, Utah, and part of Colorado. PITMAN-MOORE vaccine was used in Kentucky, Missouri, Kansas, and Nebraska. WYETH vaccine was used in Pennsylvania, Delaware, Maryland, District of Columbia and part of Ohio.

****Data from the NFIP.

Table 6

Comparison of Reported* and Expected** Cases of Poliomyelitis Among Children Who Received First Inoculations in NFIP Clinics from May 8 to July 7, 1955

Vaccine Mfr. and Number Vaccinated***	Cases	Thru July 2	Cases with Onsets in Week Ending: July 9	July 16	July 23	July 30	Aug. 6	Aug. 13	Aug. 20	Aug. 27	Sept. 3	Sept. 10
LILLY 234,000	Reported P	1	1	-	1	-	-	-	-	-	-	-
	NP	1	-	-	-	-	1	-	-	-	-	0
	Total	2	1	0	1	0	1	0	0	0	0	4
	Expected Total	**	1	1	1	2	3	4	4	4	4	
PARKE-DAVIS 1,382,000	Reported P	16	5	4	4	4	9	8	7	4	4	3
	NP	15	6	12	18	9	17	14	14	7	11	3
	Total	31	11	16	22	13	26	22	21	11	15	65
	Expected Total	**	11	22	32	45	62	73	81	77	70	

*Reported cases include only cases accepted by PSU through September 21 and who received first inoculations in NFIP Clinics May 8 through July 7, 1955, in the states listed below.

**Expected cases among this group of children estimated from 1955 incidence of poliomyelitis (paralytic and non-paralytic) reported to National Office of Vital Statistics by the states. No "expected" figures available for the period when vaccinations were in progress.

**Data on numbers of first inoculations are from the NFIP. PARKE-DAVIS vaccine was used during this period for first inoculations primarily in Arizona, California, Connecticut, Massachusetts, Minnesota, New Hampshire, New York, North Dakota, Oregon, Rhode Island, Utah, Vermont, Washington, and Wisconsin; and LILLY vaccine was used during this period for first inoculations primarily in California, Georgia, Indiana, Louisiana, Maine, Montana, New Jersey, North Dakota, Rhode Island, and South Dakota. About 12,000 first inoculations with PITMAN-MOORE vaccine were given during this period in Kansas, and from 20,000 to 30,000 first inoculations with WYETH vaccine were given during this period in Pennsylvania. Small amounts of vaccine from various manufacturers were used in other states and are not included in this table. "Reported" and "expected" comparisons for Pitman-Moore and Wyeth vaccinations for this period are given below.

Cases with Onsets July 3 to September 10

Cases		PITMAN-MOORE	WYETH
Reported	P	-	-
	NP	-	1
	Total	0	1
Expected Total		2	2

POLIOMYELITIS AMONG VACCINATED INDIVIDUALS
(PSU Accepted Cases September 15 - September 21, 1955)

PSU CASE NO.	County	Initials	Age	Sex	Date Inoc.	Date 1st Symp.	Date 1st Para.	Site Inoc.	Site 1st Para.	Mfr.	Lot No.	Remarks
							NEW				?8124-649336	
Colo-7	Clear Creek	CG	7	F	4-?	8-23	8-27	Arm	RL	L	?8123-649335	
					5-18			Arm		L	" "	
La-15	Orleans	DS	7	M	5-3	6-5	None	LA	None	L	?649335	
											?649339	
											?649340	
											?649341	
Mich-17	Wayne	GK	8	M	4-19	9-3	9-3	?	?	PD	028860B	
					8-10			?		PM	175D012	
Neb-13	York	DMcK	8	M	4-?	8-31	9-2	?	Left Facial	PM	?175B006	
											?175B007	
					8-9			?		L	6004-653-807	
NY-70	Dutchess	CE	8	F	5-25	8-29	None	LA	None	PD	029128C	Spinal fluid,98 cells.
NY-71	Monroe	DW	9	M	5-28	8-26	None	LA	None	PD	029128C	Spinal fluid,180 cells.
NY-72	Niagara	KW	7	F	8-22	9-10	None	LA	None	L	6002-653-805	
NY-73	New York	ML	7	M	5-20	9-7	None	?	None	PD	029128C	Spinal fluid,60 cells.
NY-74	Kings	LO	6	F	3rd Wk. in June	8-20	None	LA	None	PD	?028850	Spinal fluid 584 cells.
											?028861	
											?029128	
											?029129	
NY-75	New York	JG	6	M	6-3	8-29	None	?	None	PD	029128C	Spinal fluid,110 cells.
NY-76	Onondaga	WJ	8	M	5-19	8-16	None	?	None	PD	029129A	Spinal fluid,70 cells.
					6-21			?		L	6002-653-805	
Tex-57	Upshur	DS	7	M	4-20	9-2	None	LA	None	L	7080-649342	Spinal fluid,118 cells.
Va-26	Alexandria	MA	7	M	8-10	9-9	9-9	?	?	L	9184-653-802	Also vaccinated in 1954 field trials.
Ky-12	Daviess	SO	8	F	4-26	9-1	None	?	None	PM	?175027	
											?175028	

PSU CASE NO.	County	Initials	Age	Sex	Date Inoc.	Date 1st Symp.	Date 1st Para.	Site Inoc.	Site 1st Para.	Mfr.	Lot No.	Remarks
						NEW (Continued)						
Ore-7	Multnomah	MES	8	F	5-25	8-22	8-25	LA	Bulbar	PD	028847A	
NM-3	Sierra	DS	7	M	4-18	6-6	?	?	?	C	E6037	Paralytic
					6-17			LA		L	5206-649347	
NH-7	Rockingham	DC	7	M	6-?	9-2	None	?	None	PD	029126A	Spinal fluid,80 cells.
Wisc-26	Milwaukee	ADS	3	M	4-20	9-11	None	RL	None	PM	?029127	
Cal-95	San Diego	RW	8	M	4-19	8-22	None	LA	None	L	?649350	Spinal fluid,239 cells.
											?649351	Vaccinated in Oklahoma.
Cal-96	L. A. City	WC	6	F	4-21	9-5	None	LL	None	C	E5971	
Cal-97	Orange	DW	8	M	4-26	9-4	None	?	None	C	?	
Cal-98	L. A.Co.	LAL	7	M	4-22	9-11	None	LA	None	C	E6037	
Cal-99	L. A.City	VLK	8	M	5-16	9-11	None	LA	None	PD	028848A	
Cal-100	L. A.Co.	DS	4	M	4-22	9-6	None	LA	None	C	E5972	
Cal-101	L. A.Co.	RB	6	M	5-19	9-6	9-9	LA	Bulbar	PD	028848A	
						REVISIONS (Revised Items Underlined)						
Ala-8	Montgomery	TB	10	M	4-20	8-3	None	?	None	L	5079-649338	CSF?
					6-14			?		L	5207-649349	
NY-23	Cattaraugus	FK	7	F	5-22	7-20	7-21	LA	Legs	PD	029129A	
NY-38	Monroe	MJO	9	M	5-27	8-14	None	LA	None	PD	029128C	Spinal fluid,11 cells.
					8-14			LA		L	6002-653-805	
NY-65	Kings	FL	8	M	May	8-24	None	LA	None	PD	028861	Spinal fluid 70 cells.
											028850	
											029128 029129.	
Mo-5	St. Louis Co.	JD	7	F	4-55	8-29	None	?	None	PM	175C014 or 175D014	Two family contacts
					8-15			LA		PD	02885013	had Non-paralytic polio 2 weeks previously.
Va-8	Pulaski	RAS	7	M	4-28	7-2	None	Arm	None	L	7078-649343	Spinal fluid,200 cells.
Va-18	Fairfax	SM	7	F	4-?	8-12	None	Arm	None	L	8122-649334	

PSU CASE NO.	County	Initials	Age	Sex	Date Inoc.	Date 1st Symp.	Date 1st Para.	Site Inoc.	Site 1st Para.	Mfr.	Lot No.	Remarks
						Revisions (Continued)						
NC-4	Cumberland	EJA	6	M	5-21	7-8	None	Arm	None	L	5080-649339	No polio virus present, Unidentified agent. Dr. Francis (9-8).
La-4	DROPPED-----NOT POLIO--------rubeola---------											
NJ-1	Morris	JI	8	F	6-19	7-3	7-3	?	?	L	5205-649348	Type 3 virus, Dr. Shaffer (9-12).
Ariz-2	Maricopa	LH	7	F	4-25	5-17	5-24	LA	Trunk	C	E5928	
Cal-45	Sacramento	DROPPED-------SAME AS Cal-75*****										
Cal-47	Stanislaus	BMS	8	M	4-25	8-8	None	LA	None	C	E5927	Spinal fluid,163 cells.
					6-13			LA		PD	028847A	
Cal-43	L. A.Co.	BJ	6	F	6-6	8-9	8-12	LA	Bulbar	PD	028848A	Died 8-4
Cal-44	DROPPED------Same as Cal-78---------											
Cal-49	L. A. City	DT	6	M	5-17	7-14	None	LA	None	PD	028848A	Spinal fluid,280 cells.
					5-31			LA		PD	028848A	
Cal-50	DROPPED------Same as Cal-77-------											
Cal-51	DROPPED------Same as Cal-79-------											
Cal-52	DROPPED------Same as Cal-80-------											
Cal-73	DROPPED------Same as Cal-91-------											
Cal-74	L. A. Co.	LLB	9	F	5-1	6-20	?	LA	LA	C	?	
Cal-82	Yuba	CRO	7	M	4-27	7-30	None	LA	None	L	8124-649336	Spinal fluid,
					7-25			RA		PD	028847A	1250 cells.
Cal-85	L. A. City	HDM	8	M	5-16	8-16	None	LA	None	PD	028848A	Spinal fluid,352 cells.
Cal-91	Sacramento	KTE	8	M	4-25	8-17	None	LA	None	L	8123-649335	Spinal fluid,
					8-6			LA		L	8119-649331	889 cells.
Cal-94	L. A. Co.	HW	7	F	4-19	8-25	None	LA	None	C	E6038	
					5-23			RA		PD	029126A	