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## UNITED STATES.

[Reports to the Surgeon-General United States Marine-Hospital Service.]

PLAN OF ORGANIZATION FOR SUPPRESSION OF SMALLPOX IN COMMUNITIES NOT PROVIDED WITH AN ORGANIZED BOARD OF HEALTH.—  
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[Supplemental to Marine-Hospital Bureau document "Précis upon the diagnosis and treatment of smallpox."]

The following pages have been written because there seemed to be a need for some such information by local authorities in their efforts to suppress smallpox. In many States, counties, and municipalities there is no health organization, and the details of managing an outbreak of smallpox come to the local authorities as a new problem. Having no experience in the management of the disease, valuable time and money are wasted by the authorities in trying to perfect an organization for the work. In order to aid such authorities the following suggestions are offered.

The plan herein suggested is intended more particularly for sections where no health organization exists. It is equally applicable to one case or many cases, to a small or a large territory. In either case the machinery and methods are the same, and one case of smallpox requires as careful handling as a thousand cases. In order to successfully suppress smallpox it is necessary to systematize the work, so that no essential point or measure shall be neglected.

The following form of organization having been frequently tested, and proved satisfactory, is recommended with such modifications as the necessities of each community may require. It has frequently been

used by officers of the United States Marine-Hospital Service for the suppression of smallpox, and with unflinching success.

It is essential that the entire management of the work of suppressing smallpox in a given territory, should be in the hands of one person. This individual should have military authority over all patients, suspects, and persons employed in the work. He should outline all measures and methods, and be responsible for their proper performance. He should therefore have authority to employ and discharge such persons as in his judgment seems best, and to authorize necessary expenditures. He should be designated as the "Officer in Charge" of smallpox work, and should receive the fullest support of the authorities.

From the above it will be seen that the person selected as officer in charge should be a man of good judgment, executive ability, and force of character. One who will do his duty without fear or favor, and whose sole object is the prompt suppression of the disease. His character should be above reproach. Fitness for the position should alone determine his selection, and political, social, or personal considerations should have no weight in the matter. It is always preferable to select a physician for this position if practicable. He should be well paid for his work, for his position will be a most trying one, and if he perform his duty faithfully he will earn his pay, whatever it may be.

The officer in charge having been selected, he should proceed to organize the following divisions: (1) Headquarters, (2) Inspectors and vaccinators, (3) Smallpox hospital, (4) Suspect camp or detention house, (5) Guards, (6) Disinfecting corps.

#### HEADQUARTERS.

One or more offices, centrally and conveniently located, should be selected as headquarters. Here some one should be on duty all the time, both day and night. In some of the smaller cities and towns an office in the police headquarters has been used satisfactorily. Some one is usually on duty here at all hours, and can receive and record all messages and reports.

A clerk should be on duty at headquarters at all times to record messages, answer questions, and keep the records. A messenger to carry messages and do odd jobs is essential. To the headquarters come all requisitions, requests, inquiries, etc., and from here emanate all orders, information, etc. Here the chiefs of divisions report, and from this office the entire work is managed and supervised. In order to more clearly indicate the detailed work of the headquarters, the following routine is given:

By 8 a. m. the officer in charge is at his desk; he has heard the report of the clerk, and read over the reports and records of the previous day; the chief of guards now reports, receives his instructions, and departs. Next the inspectors report. The officer in charge discusses

with each in turn, in the presence of the other inspectors, the work in his territory, and after having heard them all, assigns each inspector his territory, and outlines his work for the day. The amount of territory and the nature of the work of the inspectors varies with the period of the epidemic and the situation from day to day. In the first days of the work, when the inspectors are going over new ground, taking the names, etc., of the occupants of each house and vaccinating as they go, their territory will be smaller than later on when vaccination is completed, and the inspection is merely for the purpose of discovering any new case of smallpox that may have developed.

So as to the location of the territory ; after the city has been thoroughly inspected a few times, it will be found that the infected areas are defined, and they will require constant supervision, while other portions of the city are clean, and will only require an occasional inspection. After the inspectors have received their instructions, and depart for their respective territories, the disinfecting division reports through its chief. The work of this division for the previous day is reviewed and new work outlined. The chief disinfecter takes a list of the infected houses that have been reported since the previous day, gets his instructions, and departs. By this time it is 9 o'clock a. m., and telephonic reports from the smallpox hospital and suspect camp have been received. These reports should be in some such form as the following :

SMALLPOX HOSPITAL, ——— ———, 1899.

Patients remaining at previous report, ———; patients received since previous report, ———; patients discharged since previous report, ———; patients died since previous report, ———; patients remaining at 9 a. m. to-day. Total, ———; will probably discharge to-day recovered, ———.

These reports are recorded in a book kept for that purpose.

The officer in charge usually has a short conversation over the telephone with the physician in charge of the smallpox hospital, and also with the one who is in charge of the suspects; he receives their requisitions for subsistence and other supplies, and has them recorded by the clerk. These requisitions are now sent to the grocer and others, with orders to deliver them at the hospital or camp as may be needed.

The officer in charge now has time to see the numerous people who are waiting to confer with him on various subjects. After having disposed of his callers, he goes out to inspect the work of the various divisions and arrange many matters that require his personal attention.

In the meantime at headquarters reports from the inspectors and others are beginning to come in, and are recorded by the clerk in a book kept for that purpose. This record is a sort of journal, and would read somewhat as follows :

March 9, 1898, 9.20 a. m. : New case at 597 North avenue ; name, John Smith, colored ; age, 29 ; first day of eruption ; has wife and 6 children in same house. Reported by Jones, inspector. (Note.—Sent ambulance for patient and wagon for suspects at 9.30.)

10.15 : Chief inspector says the 2 barrels of sulphur ordered yesterday have not arrived. Wishes to know what to do.

10.45: Brown, inspector, reports suspicious case at 42 Lake street, colored child; name, Watkins. (Note by officer in charge.) Referred case to Dr. Williams, who reports child has only a cold.

Between 5 and 6 o'clock the officer in charge is in his office again; the inspectors begin to arrive and make written and verbal reports of the work of the day. The names and addresses of persons who have refused to be vaccinated are recorded and a copy forwarded to the mayor or other officer for prosecution. The situation is discussed and summed up, showing what progress is being made in suppressing the disease, and work for the morrow is forecast. About this time the representatives of the newspapers will come in for information, and it is recommended that it be given them freely. Local authorities, fearing to injure the commercial interests of their community, frequently adopt the shortsighted policy of concealing the facts. This does the community far more harm than if the truth were told. When the number of cases, and the location of each is published daily, the public at large is kept fully informed of the true conditions, but where there is concealment it is at once said that the conditions are so bad that the authorities dare not let it be known. The number of cases is greatly exaggerated by rumor, and they multiply as the distance from the cases increases. It has been known that 3 cases, all quarantined in hospital, have been reported as 30 cases, and numerous deaths at a distance of 20 miles away. It is therefore recommended that the facts be frankly given to the newspapers each day. By 6 or 7 o'clock in the evening the work of the day at headquarters is practically over. Some one should, however, be kept on duty during the night, as frequently new cases are discovered after nightfall, and should have immediate attention.

#### INSPECTORS AND VACCINATORS.

It is usual to combine the duties of inspector with those of the vaccinator. Inspectors and vaccinators should be physicians, or at least advanced medical students. The reason for this lies in the fact that no one without some medical education is capable of deciding if a given individual has or has not a disease. Not only this, but also because vaccination is a surgical operation, minor it is true, but nevertheless one that should be performed with all aseptic precautions, a fact that is too often overlooked.

It is frequently asked how many inspectors should be allowed for a given territory. This is a question that can not be answered categorically, as so much depends upon the individual, the amount of work that he does, and the conditions that confront him. It is a good plan to secure the option of as many desirable men as possible, and then put on as many as experience shows to be needed. In making the first few inspections, when it is desirable to cover a large territory in a short time, it is well to put on a large number of inspectors, and then gradually reduce the number, weeding out the least desirable. In this way

you will soon have a picked corps of inspectors, trained to their work, and who can be trusted.

In organizing this division, the inspectors should be called together, and the situation discussed, and a general policy and method of work outlined. Written general instructions should be given each inspector, and he should be furnished with a certificate, signed by the officer in charge and the proper local authorities, stating that the said inspector has been appointed "inspector and vaccinator," and that he is empowered to execute the sanitary laws and ordinances. The inspectors should now be made thoroughly familiar with all the symptoms of smallpox, and the diseases from which it should be differentiated.

It is well to read to them, from some modern standard text-book all that is written on the said diseases. It is well, also, to furnish them with an abstract of the principal diagnostic points of smallpox, especially in its earlier stages. The "Précis on the diagnosis and prevention of smallpox," issued by the United States Marine-Hospital Service, gives all this information in a convenient form. Copies of this précis can be obtained, free, on application to the Surgeon-General, United States Marine-Hospital Service, at Washington, D. C. It is well to show your inspectors several cases of smallpox in different stages of the disease. It should be unnecessary to add that your inspectors should be immune to smallpox, either by having had the disease, or by thorough vaccination. After being sure that your inspectors are capable of recognizing smallpox when they see it, you should teach them how to vaccinate.

Use nothing but glycerinized lymph. Glycerin lymph can be obtained almost anywhere.

A successful vaccination is one that shows first a vesicle, and then a pustule, with an umbilication, and *has an inflammatory zone extending for an inch or more around its base*. The scab usually falls in about twenty-one days.

As a rule a vaccine vesicle requires no treatment. A clean, soft linen bandage may be put over it to protect it from the rubbing of the clothes. Ointments, lotions, etc., are, as a rule, harmful. Avoid the use of shields, especially those made of felt, such as are usually sold at druggists. The wire shield is much less objectionable. A ribbon, with the word *vaccinated* printed on it, and worn around the outside of the coat sleeve, is sometimes of use in protecting against the assaults of one's friends.

What class of cases should be exempt from compulsory vaccination? The writer is of the opinion, personally, that only 2 classes should be exempt—those who are dead and those who have had smallpox. There may be individual cases where the physician may consider it inadvisable to vaccinate at the time, but unless the physician has some very definite reason against it, he should vaccinate. A good rule is, "When in doubt, vaccinate."

The question of the value of a good scar in protecting the individual

against smallpox is often met with. One is frequently confronted with the question "Is it necessary for me to be vaccinated? I was vaccinated a certain time ago, and have a good scar." In reply to such an inquiry, it should be advised that the individual be vaccinated, because *if he is immune the vaccination will not take, and if it does take, it shows that he was not protected.* No one can say how long the immunity of even a perfect vaccination will last in a given individual; the time varies very largely in different people; some who have been well vaccinated in childhood will never take, no matter how often they are vaccinated; others will take almost every time they are vaccinated. Therefore, to be on the safe side, advise the vaccination of every person who has not had smallpox.

Whenever there is a difference of opinion between a vaccinator and a person to be vaccinated, as to the propriety of his being vaccinated, the matter should be referred to the officer in charge or to the board of health.

Having instructed your inspectors on the above points, each should be supplied with a book, ruled for the following information :

Number, name, color, sex, age, address, date when first seen, date of vaccination or revaccination, successful or not, and remarks.

The inspector now goes to the first house in his district and inquires who lives there, the number of persons occupying the house, their names, and other information according to the ruled columns of his book, noting the same in their proper places. He should now carefully inspect each person living in the house, satisfying himself that each one is perfectly well, and if not, then the nature of the trouble. If, as frequently happens, any one is absent, he should make careful inquiry as to his whereabouts, and the hours when he is to be found at home, and then see that individual as soon as possible. Every person absent under these circumstances should be "suspicious" until found and noted.

The vaccinator should now proceed to vaccinate all persons in the house, with the exceptions noted above, recording the fact in his book. By the end of his second inspection of a district, the inspector should have the name and address of every person living in his territory, and should have personally inspected all of them, with but few exceptions, and those being persons who are away from home, at work, etc., and these should be inspected without delay, going to their places of business if necessary.

He should see every person in his territory at least once in every three days, in order to be sure that no new cases of smallpox develop without being discovered. Each inspector should be accompanied, if possible, by a policeman in uniform.

A policeman is of great assistance to an inspector, especially in certain districts of the city where nothing but a policeman commands respect. He can also keep watch on the outside of the house, while the

inspector is on the inside, to see that no one escapes from the house, and thus avoids inspection. In the event that a case of smallpox is found in a house, the policeman stands guard to prevent the escape of exposed persons, until they can be removed to the suspect camp. The policeman is also of use in protecting the inspector from violence, which is too often offered him. Upon the discovery of an actual or suspicious case of smallpox, the inspector, leaving the policeman on guard, goes to the nearest telephone, and informs headquarters of his find, giving name, age, color, and house address of the patient. The responsibility of the inspector and policeman do not end until the case and suspects have been safely delivered to the hospital, or suspect camp.

At the end of each day the inspector should report at headquarters and write out a report, giving the number of houses visited, number of persons inspected and vaccinated, and such other information as may be necessary. He should also make a verbal report to the officer in charge as to the general conditions in his territory. The thoroughness with which the inspectors do their work will have much to do with the prompt suppression of the disease. The inspectors are the eyes of the officer in charge.

#### GUARDS.

Guards are needed for the smallpox hospital, suspect camp, and for cases quarantined at their homes. Their number and hours of duty must be determined by the circumstances in each case. In general, it may be said that the smallpox hospital and suspect camp should be thoroughly guarded, day and night, and the tour of duty of each guard should be from eight to twelve hours during the twenty-four. There should be a chief and an assistant chief of guards, who divide the duty of the twenty-four hours between them, one of them always being on duty. The guards should be inspected at frequent and irregular intervals to see that they are properly performing their duty.

Any guard found asleep on post or disobeying orders, or otherwise neglecting his duty, should be promptly disciplined. The chief of police is frequently utilized as chief of guards, and the arrangement is usually satisfactory.

#### SMALLPOX HOSPITAL.

It will not be practicable here to enter into all the details of the equipment and management of a smallpox hospital, but the essentials will be given. The number of cases, the local conditions, and other circumstances will modify the details for each community.

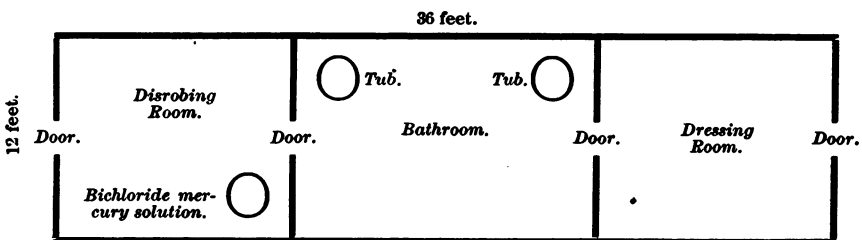
Primarily, the hospital must be under the management of a physician who should be quarantined with the patients if possible, and should hold no direct communication with the outside world. If this is not practicable and the physician has to live on the outside of the hospital, he should exercise the greatest care that he does not convey the infection from the patients. Elsewhere are given the precautions that should be observed in order to prevent carrying the infection. As stated

before, the number of cases and other circumstances modify the details, but the following are essentials :

A building or buildings capable of holding all the patients that are liable to be sent to it should be secured. The location of the hospital is important. It should be somewhat remote from other buildings, but close enough to the city to be easy of access for the transportation of patients, supplies, etc. A distance of 100 yards from other buildings or the roadway is sufficient. There must be at least 2 wards—1 for men and 1 for women. In the South, where race feeling is strong, it will be well to have 2 hospitals—1 for white and 1 for colored patients—duplicates of each other. If more convenient, tents can be used. The hospital need not be an elaborate affair—a single story building, with a ridge roof about 20 feet wide, and of sufficient length to give all the room needed, with a transverse partition dividing it into 2 wards. The material can be rough pine lumber, 1 inch-thick, and the building roofed with tarred paper; this is all that is usually needed. In colder climates in winter it may be necessary to cover the outside with paper, and possibly to sheathe with rough boards, to make it warm enough. The wards can be heated when necessary by stoves and lighted as is most convenient. Electricity is preferable, but hanging kerosene lamps are generally used. A kitchen and dining room should be built in the same way. A bountiful supply of water must be furnished. If practicable, city water should be piped to the hospital; but if this is not possible, then there should be a good spring or well near at hand and within the inclosure. The hospital should be located on a hill, with many shade trees and as much grass as possible.

A barbed wire fence, closely strung, should surround the hospital at a distance of 200 feet at the nearest point. There should be but one entrance to this inclosure, and that should be provided with a gate, and carefully guarded. Near the gate, and inside the inclosure, should be a small building for the use of the guard in stormy weather, and it should have a room in which the physician can change his clothing, etc. This building should contain a telephone, connected with the general telephone system of the city.

If the physician is quarantined with the patients, he should live in a tent, or a small rough house, built for that purpose. Not far from the gate, and on the opposite side from the guard's house, and nearer the hospital, say 100 feet from the hospital, should be a bath house, consisting of at least three rooms. The following diagram gives a very simple but effective arrangement :





This bath house is intended for the disinfection of patients prior to being discharged from the hospital. The details of this disinfection will be given later in their appropriate place.

Latrines, or earth closets of sufficient size, should be built at a convenient distance from each ward, and the excreta carefully covered with dry earth and unslaked lime. The wards should be furnished with cots, without mattresses. It is not necessary to supply bedclothing, as when a patient is brought to the hospital his bedclothing should be brought with him. As this clothing has frequently to be burned anyway, after the case is well, it saves expense to have the patient use it in the hospital. This plan also obviates the possibility of any complaint as to the quality. A blanket or two spread on the cot makes a more desirable bed than a mattress, and is more easily disinfected. A few chairs, several wooden settees or benches, and a few wooden tables constitute the ward furniture.

Dark-colored roller window shades should be put at the windows, and a large faced nonstriking clock will add much to the comfort of the patients.

Adequate arrangements for personal ablutions should be made. A tin basin, a towel or so, and a piece of good soap for each patient, to be used only by that patient, is a satisfactory arrangement.

The kitchen must be completely equipped with cooking stove, utensils, etc., and in summer a large refrigerator, and a bountiful supply of ice must be supplied.

A portion of the kitchen building should be partitioned off for a subsistence storeroom, and another room for other supplies.

The hospital force should not consist of less than the following, and this number should be increased as the necessity arises: One physician in charge, 2 nurses, 1 for each ward, 1 cook, 1 assistant cook, 1 or 2 dining room waiters and helpers, 1 general utility man.

All of these should be smallpox immunes from having had the disease, if possible, otherwise they should be thoroughly vaccinated. It is frequently possible to secure good helpers from among the recovered patients.

The physician should always keep on hand a small supply of drugs, liquors, etc.

The telephone in the guard's house should be the means of communication with the outside world. Supplies should be inquired for at 9 a. m. daily at headquarters. When the supplies arrive they should be deposited at the gate by the driver and left; the guard now takes them and deposits them at a designated spot within the inclosure, from whence they are taken to the hospital by the utility man, the guard having retired to the gate. A small shed to cover the supplies will be of use in protecting them from the sun and rain. A megaphone or tin horn will be of service in calling the utility man. The guard must under no circumstances approach the hospital nearer than 100 feet.

No person except the patients, physician, and guards must be allowed to enter the inclosure, and no person or article be allowed to leave it until after a thorough disinfection by one of the methods given later.

The hospital should be supplied with a vehicle that can be used as an ambulance to transport patients to the hospital. The ambulance should be driven by an immune, and he should change his clothing before leaving the hospital.

No patient should be discharged from hospital until all scaling of the skin has ceased, and the skin is perfectly smooth. For several days before discharge it is well to require the patient to take a bath, once or twice daily, and to rub the skin thoroughly with vaseline or some similar substance.

Red spots, where pustules have been, will frequently persist for a long time, but these do not convey infection if the skin is perfectly smooth.

When a patient is ready for discharge, he should go into the disrobing room of the bath house, remove all the clothing that he has worn in the hospital, and drop them into a tub containing a solution of bichloride of mercury, 1-1000. He then passes into the bathroom and thoroughly washes himself with soap and water, especial care being taken to see that the hair is thoroughly cleaned. He now takes a thorough bath in a 1-1000 solution of bichloride of mercury, and, having dried himself, passes into the dressing room. Here he finds sterile clothing that has previously been disinfected. He dresses himself and proceeds to the guard's house, where he receives his certificate of discharge from the physician, and departs without having reentered the hospital or having come in contact with any infected person. This certificate should give the name, age, color, sex, and address of the patient, date of discharge, and should state that his (or her) clothing has been thoroughly disinfected, and he (or she) is free from infection or the danger of conveying the same.

In the event that a patient has but one suit of clothes, it is not necessary to supply him with a new suit, as his old clothing can usually be disinfected as follows:

On the day previous to his discharge, supply the patient with a suit of overalls, if a man, or a gown, if a woman, and require him to go some distance from the hospital, and with soap and water thoroughly wash his clothing, underclothing, etc. His shoes, hat, etc., should be dipped in a solution of bichloride of mercury, 1-1000. After thoroughly washing all his clothing, each piece should be dipped in the solution of bichloride of mercury and hung in the sun to dry. On the morrow, when these clothes are dry, the guard takes them and puts them in the dressing room of the bath house, where they are ready for the patient after he takes his bath, and is ready to be discharged.

Letters and other articles that would be injured by being wetted, may be disinfected by sulphur, burned in a closed place, in the proportion

of 5 pounds to each 1,000 cubic feet of air space, and left therein for 24 hours; or, what is more convenient, place them in a close box, [sprinkle them with formalin solution, and let them remain for six hours.

If the physician can not be quarantined at the hospital with the patients, then he must exercise the greatest care that he does not convey the infection, and what is almost as important, does not seem to convey it. When visiting the hospital he must always be careful to change his clothing before entering, and again as soon as he comes out. In other words, he must never enter the hospital with the same clothing that he wears when he mingles with the public. When he goes to the hospital, he should put on a suit of overalls, and when he comes out of the hospital he should make the circuit of the bath house in the same manner that a patient does when he is discharged.

Doubtless many other details will suggest themselves to the physician when he gets his hospital established, but enough has been said to enable him to make a successful beginning. Do not call the smallpox hospital a "pesthouse." Many patients are willing to go to the "smallpox hospital" who would object most violently to going to the pesthouse.

#### SUSPECTS AND SUSPECT CAMPS OR HOUSES.

By a suspect we mean a person who has been exposed to infection, and is liable to develop the disease.

Among the most prolific sources of the spread of smallpox are the persons who, having been in contact with the disease, scatter to their homes, and there develop the disease, thus establishing new foci of infection. In order that this source of danger may be eliminated, it is necessary that all persons who have been exposed to infection shall be disinfected, vaccinated, and isolated, for a period covering the incubation of the disease. This is best done in a suspect camp or detention house.

When a case of smallpox is discovered care should be taken not to announce the fact until provisions have been made to prevent the escape of persons who have been exposed to the infection. As a rule, and this is especially true of negroes, as soon as it is known that a case of smallpox exists in a house there is a stampede of the inmates, and if they are not prevented they will scatter all over the city, and it will be impossible to find them.

As soon as possible after notification of the existence of a case of smallpox at a given place headquarters orders the suspect wagon to the house, and all suspects are removed to the suspect camp. They are accompanied by the policeman (who was left there on guard by the inspector) for the purpose of preventing the escape of any of them on the way. The house should be locked and sealed as soon as the case of smallpox and the suspects are removed. A placard with "SMALLPOX" in large letters, printed on it, and bearing a notice signed by the board

of health or the officer in charge, warning all persons under the penalties of the law from entering or disturbing said house until the card is removed by the proper authorities should be placed on the house. The card should be removed by the disinfecting division only after the house has been disinfected and is thoroughly safe.

The suspect camp or house is built very much like the smallpox hospital, and it is managed in much the same manner. It is called a camp because most frequently tents have been used to contain the suspects, rather than a house, but the one is as good for the purpose as the other. As all the persons under detention are supposed to be well, they do not require the attention that is needed by the smallpox patients. If buildings are used, they should be of the same kind and number as noted for the smallpox patients, and equipped and run in the same manner.

The suspect camp should be in charge of a physician, but it is not necessary that he be quarantined with the suspects. The suspect house or camp is usually located near the smallpox hospital for economy, and ease of administration. It should be also surrounded by a wire fence, and one set of outside guards can guard both the camp and the hospital.

When suspects are brought to the camp, they are sent through the bath house, and on emerging therefrom, the men are given overalls and slippers, and the women gowns and slippers, to wear until their own clothes can be disinfected and returned to them. In cold weather it may be necessary to supply each suspect with a blanket, in addition to the above. After the suspects have been disinfected they should be vaccinated, and then detained for fourteen full days. The clothing of each suspect should be tied into a loose bundle, and tagged with the name of the owner. It should now be disinfected by one of the methods given. As a rule, disinfection by sulphur or formaldehyd will be the most convenient. The suspects should be disinfected, and given sterile clothing before being allowed to go into the house or camp. Each suspect should be detained fourteen full days from the date of disinfection, not counting the day of admission or the day of discharge. This plan is safe, and safety is our aim.

A record should be kept, giving the name, age, color, sex, date of admission, and date of discharge of each suspect, with his address and other information of note. No suspect should be discharged under fourteen full days after disinfection, and if in the course of his detention a case of smallpox breaks out in the suspect camp, all suspects who have come in contact with it or who have been liable to infection, should be at once disinfected again and detained for fourteen days from the date of the last disinfection, and the quarters carefully disinfected. Be careful not to discharge a suspect under the fourteen full days. It has been known that suspects who were discharged after twelve days' detention, have developed smallpox on the fourteenth day. That suspects discharged on the morning of the four-

teenth day have had the initial chill of smallpox on the same afternoon. It has also happened that suspects who were detained fourteen full days, but whose clothing had not been disinfected, developed smallpox a few days after their discharge, showing that they were infected by the clothing of themselves or some other suspect. Therefore, disinfect the person and the clothing, vaccinate all suspects, and detain them in quarantine for the full fourteen days, not counting the day of admission or discharge, thus making sixteen days' detention.

Suspects should be inspected at least once daily, and better twice daily. At a certain hour require all suspects to form in line in front of their quarters. The physician should go slowly down the line and carefully inspect each one. If anyone does not seem to be perfectly healthy, take that case aside for a more extended examination.

Should one of the suspects develop any symptoms of smallpox, he should be at once isolated and kept apart from the rest of the suspects until the nature of his trouble develops. For this purpose it is well to have a tent or small house within the inclosure where such cases can be isolated. It is well also to provide a place where suspects suffering from noncontagious diseases can be treated, for you may have cases of ordinary sickness develop among them, and in fact you are very liable to have such cases.

Before a suspect is discharged he must make the circuit of the bath house, and go through the same form of disinfection as to person and clothing as a patient in the smallpox hospital. He should also be given a certificate of discharge similar in form to the certificate given patients discharged from the smallpox hospital. The suspect camp should have a wagon, with a driver in charge, always at the camp for the purpose of bringing in the suspects, and their bedding, clothing, etc.

#### DISINFECTING.

This is one of the most important of the divisions, and its work must be thoroughly done if a recurrence of the disease is to be avoided. This division should be in charge of a competent, level-headed man, preferably a physician, who will give the most careful attention to the details.

The duties of this division are to thoroughly disinfect all infected houses, articles, etc. The various methods of disinfecting will be given hereafter, and it depends on which method is used as to the appliances necessary. Disregarding for the moment the more expensive method of disinfecting by formaldehyd, we will consider what is needed for disinfection by sulphur and bichloride of mercury, the methods usually most available. Whatever means are used, it will be necessary to have one or more large farm wagons, each drawn by 2 mules, for the purpose of transporting the outfit from house to house.

For disinfection by sulphur we need 6 or 8 large iron pots, each capa-

ble of holding about 15 gallons, an equal number of wooden washtubs, several barrels of roll sulphur, a 5-gallon oil can filled with alcohol, about 20 pounds of raw cotton for stuffing cracks, a pot of paste with a large brush, several old case knives, and a number of old newspapers. The paste and papers are used to close openings, such as the fireplace, which can not be closed by stuffing with cotton. The knives are for pushing the cotton into the cracks. It is necessary that the cracks should be well closed. Proceed with the disinfection as described under that head.

For disinfecting with bichloride of mercury we will need several empty oil or whisky barrels, a good sized force pump, and some 300 feet of rubber hose in 50-foot lengths [see that the hose fits the pump, otherwise it will be useless]; about 50 pounds of bichloride of mercury, and several agate-ware measures for making up the solution. In disinfecting with the bichloride solution, the disinfectors should wear rubber boots and coats, old broad-brimmed hats, and it is well to protect the eyes by glasses from the flying spray. The method of disinfecting is given under its appropriate heading.

The following are the methods of disinfecting :

*Disinfection of articles.*—(a) Mattresses, pillows, quilts and other articles that can not be readily disinfected should be burned.

(b) All articles that will stand boiling should be boiled for at least one hour. A handful of washing soda should be put in the water in which the clothes are boiled. After boiling, the clothes should be rinsed in clean water and dried in the sun.

(c) Articles that can not be boiled should be dipped in a solution of bichloride of mercury (1-1000), and dried in the sun.

(d) The furniture should be thoroughly washed down with the bichloride solution.

*Disinfection of the house.*—If a hut or shanty and of small value, it should be burned; otherwise it should be disinfected by one of the following methods:

If the house is close and will retain the gas it can be disinfected by either formaldehyd or sulphur dioxide. If it is too open to admit of disinfection by this means it must be washed down with a solution of bichloride of mercury 1-1000.

(a) *Disinfection by formaldehyd.*—All openings, and especially those around windows and doors and the fireplace, should be closed by stuffing with cotton or some similar material, or by pasting paper over the cracks. The formaldehyd is usually introduced through the keyhole of the door in amount equal to 4 per cent of the volume of the air in the room, and the room left closed for not less than six hours. As formaldehyd requires the use of a generator, it will probably be more convenient generally to use sulphur.

(b) *Disinfection by sulphur.*—Close house as above, with the exception

of one door, for each room to be disinfected, and in each put a tub of water; in each tub put an iron pot capable of containing double the amount of sulphur required. Put in each pot sulphur enough to give 5 pounds for each 1,000 cubic feet of air space. Pour on a small amount of alcohol; see that the sulphur is thoroughly ignited, then leave the room; close the door and stop all the cracks. Leave the room closed for twenty-four hours.

(c) *Disinfection by bichloride of mercury solution.*—If the house is too open to admit of disinfection by the above-mentioned gases, it must be thoroughly washed down with a solution of bichloride of mercury (1-1000). Every portion of the room should be thoroughly wetted with the solution, and the room should not be occupied for twenty-four hours. The doors and windows should be kept open to facilitate drying.

#### SMALLPOX IN COUNTRY DISTRICTS.

While the foregoing remarks have been made with especial reference to smallpox in cities and towns, they are equally applicable to country districts. Because the territory is extended, and the population scattered, is no reason why any of the precautions should be relaxed; on the contrary they should be increased. It is so much easier for smallpox, especially the mild type of the present epidemic, to escape notice in the country districts, than in a town.

If an eruptive disease appears in a country district, it is the duty of the authorities to learn the nature of that disease, and if it seems contagious, it should be isolated. If a doubt exists, an expert should be called to settle the diagnosis. All cases of so-called "chickenpox," "Cuban itch," "elephant itch," "nigger itch," and the like, should be at once isolated; in nine out of ten cases these prove to be smallpox.

Another point that is sadly neglected in country districts, is vaccination. This is partially due to apathy on the part of the authorities, and partially to the prejudice that exists among the people against vaccination. This prejudice is the result of ignorance of the true facts, and to the alarming rumors in circulation as to the results following vaccination. Rumors of arms, legs, or life lost as the result of vaccination, have, as a rule, no foundation in fact.

It is true that within the past year or so, with the use of the "dry point" for vaccination, there have been a number of badly inflamed arms, that have persisted for some time, but this has been due to impure virus, or to some extraneous cause. With the use of glycerinized lymph no such trouble occurs. From the reports of a good many thousand vaccinations with the glycerinized lymph, there have been only a few extremely inflamed arms, and it is by no means certain that these were due to the vaccine virus.

If these facts are explained to the people by some one in whom they have confidence, much of the opposition to vaccination will disappear.

Without thorough vaccination it is almost impossible to suppress smallpox, therefore the authorities in country districts are urged to give this their earliest attention.

If vigorous measures are taken to isolate the first cases of smallpox and all exposed persons, and all infected houses and articles are promptly and carefully disinfected, and vaccination is thorough, the suppression of the disease is an easy task.

#### IN CONCLUSION.

It is advised that whatever measures are adopted they should be made thorough.

Measures, good or bad, half done are worse than useless, as they give a fancied security.

Smallpox can not be suppressed without the expenditure of money.

The more promptly you act the less it will cost.

When in doubt act on the safe side.

Finally, the following motto is offered for your banner in smallpox work :

“ISOLATE, VACCINATE, DISINFECT.”

#### *Yellow fever in Key West, Fla., and other places.*

[Continued from last PUBLIC HEALTH REPORTS.]

#### FLORIDA.

*Key West.*—Surgeon Murray reports October 16, as follows: October 11, 18 cases; October 12, 7 cases, 2 deaths; October 13, 23 cases; October 14, 10 cases, 3 deaths; October 15, 9 cases; October 16, 15 cases.

#### LOUISIANA.

*New Orleans.*—Surgeon Carter reports, October 16, 1 new case; weather hot. October 17, no new cases, no deaths.

*Steamship Armstor, for Philadelphia, with a case of yellow fever on board.*

On information received from the health commissioner, Baltimore, Md., Passed Assistant Surgeon Thomas at Reedy Island Quarantine, Del., was telegraphed, October 6, as follows:

Steamer *Armstor* from Baltimore for Philadelphia to-day; recently from Jamaica and Santiago; 1 of crew in Baltimore with suspected yellow fever; inspect critically, and, if necessary, disinfect.

On October 8, the following telegrams were received from the health commissioner, Baltimore, Md.:

October 8: Man died 4 o'clock this morning. Post-mortem to-day. Do you wish to send one to see it?—C. HAMPSON JONES, M.D.

October 8: P. M. this afternoon. Everything points to yellow fever.—C. HAMPSON JONES, M.D.



On October 8 Passed Assistant Surgeon Thomas was directed to disinfect the *Armstor*. On October 9 he was telegraphed to hasten the disinfection of the *Armstor*, and give discharge if a new crew arrived, holding old crew for period of observation. (The *Armstor*, second day out from Santiago, Cuba, developed an undoubted case of yellow fever, as proved by post-mortem.)

On October 13 the following reports were received from Passed Assistant Surgeon Thomas:

REEDY ISLAND QUARANTINE, DEL., *October 11, 1899.*

SIR: I have the honor to report that the steamship *Armstor* was discharged from quarantine yesterday, the 10th instant, after disinfection in obedience to Bureau telegram of the 9th instant. The old crew was sent to the Delaware Breakwater Quarantine Station to undergo their period of detention.

Assistant Surgeon Fox was sent in charge. He returned last night.

Respectfully, yours,

A. R. THOMAS,

*Passed Assistant Surgeon, U. S. M. H. S.*

REEDY ISLAND QUARANTINE, DEL., *October 11, 1899.*

SIR: Referring to Bureau letter (J. H. W.) of the 9th instant, in regard to the source of infection of steamship *Armstor*, I have the honor to state that the crew had left this station before the letter was received. The *Armstor* on her last voyage sailed from Philadelphia to St. Thomas, Danish West Indies, thence via Santiago de Cuba to Baltimore. I did not learn that she had been at Jamaica. At Santiago she was at the railroad dock in the town, but I was assured by the captain that he was the only person ashore, and that guards were stationed at the wharf to prevent the crew from reaching shore. One of the crew who was sick on reaching quarantine stated positively that he had not been ashore.

The *Armstor* loaded ore and tobacco. The captain stated that all the work of loading the ore was done by stevedores from shore, but the tobacco was stored by the crew.

Respectfully, yours,

A. R. THOMAS,

*Passed Assistant Surgeon, U. S. M. H. S.*

*Yellow fever on the schooner R. D. Spear and bark Essex.*

PORT TAMPA, FLA., *October 10, 1899.*

SIR: Replying to Bureau letter (J. H. W.) of the 4th instant, in regard to the name and previous history of the schooner on which a case of yellow fever was reported from Mullet Key Quarantine, I have to respectfully state that the schooner was the *R. D. Spear*, American, Captain Southerland. She arrived at Mullet Key, September 20, from Key West, being two days out. She came from New York laden with groceries for Key West and Tampa, and was in the harbor at Key West from September 11 to September 18.

She anchored in the stream and held no communication with the docks at Key West, and while there had no sickness on board. She was disinfected on arrival at Mullet Key, and on the fourth day of detention the captain was taken sick, the symptoms being suspicious, but the diagnosis was not made until the 27th, and death occurred October 1st.

The crew are all nonimmunes excepting the second mate. She was

redisinfecting October 9, and no cases of sickness have developed up to the present time.

Another vessel, the American bark *Essex*, Captain Behrman, arrived in quarantine September 30, ten days out from Key West, where she had been about ten days discharging coal from Baltimore. She took ballast at Key West, where the captain was sick, and 1 seaman sent to hospital. The captain was sick four days with, as he claims, intermittent fever. Three cases of sickness occurred en route to Mullet Key, and 1 death occurred September 29th, the body being buried at sea. The symptoms in all cases pointed to yellow fever.

The ballast was discharged outside of the harbor. The vessel was brought to the wharf to-day for disinfection, and no cases have appeared since arrival.

Respectfully, yours,

F. E. TROTTER,  
*Assistant Surgeon, U. S. M. H. S.*

*Report from the detention camp at Mullet Key, Fla.*

MULLET KEY, FLA., October 6, 1899.

SIR: I have to respectfully submit the following report of transactions at this camp during the week ended to-day: There have been no arrivals and no departures, and the camp force have been employed in the routine work, and in making some minor improvements.

The case of yellow fever reported at the State station died during the week, and the vessel is still under observation, together with the one on which a death occurred before arriving at quarantine.

Respectfully, yours,

F. E. TROTTER,  
*Assistant Surgeon, U. S. M. H. S.*

*Yellow fever in the United States as reported to the Surgeon-General United States Marine-Hospital Service from August 31 to October 20, 1899.*

Places.	Date.	Cases.	Deaths.
<b>Florida:</b>			
Key West.....	Aug. 31.....	6	.....
	Aug. 31-Sept. 4...	28	3
	Aug. 31-Sept. 5...	50	6
	Sept. 6.....	14	.....
	Aug. 31-Sept. 8...	96	8
	Sept. 9.....	31	2
	Sept. 10.....	23	1
	Sept. 11.....	12	.....
	Sept. 12.....	29	1
	Sept. 13.....	35	0
	Sept. 14.....	15	1
	Sept. 15.....	30	1
	Sept. 16.....	38	1
	Sept. 17-Sept. 18...	54	2
	Sept. 19.....	31	1
	Sept. 21.....	45	2
	Sept. 22.....	38	5
	Sept. 23.....	40	3
	Sept. 24.....	30	2
	Sept. 25.....	26	.....
	Sept. 26.....	47	2
	Sept. 27.....	26	1
	Sept. 28.....	39	1
	Sept. 29.....	54	1
	Sept. 30.....	22	2
	Oct. 1.....	48	2
	Oct. 2.....	32	1
	Oct. 3.....	(a)	.....
	Oct. 4.....	33	.....
	Oct. 5.....	43	2
	Oct. 6.....	37	0
	Oct. 7.....	28	0
	Oct. 8.....	24	3
	Oct. 9.....	25	0
	Oct. 10.....	13	1
	Oct. 11.....	18	.....
	Oct. 12.....	7	2
	Oct. 13.....	23	.....
	Oct. 14.....	10	3
	Oct. 15.....	9	.....
	Oct. 16.....	15	.....
Miami.....	Sept. 5-Sept. 22...	2	1
Port Tampa City.....	Sept. 10.....	1	1
<b>Louisiana:</b>			
New Orleans.....	Aug. 27-Sept. 19...	12	2
	Sept. 20.....	2	.....
	Sept. 21.....	3	2
	Sept. 22.....	0	2
	Sept. 23.....	1	.....
	Sept. 25.....	3	1
	Sept. 26.....	2	.....
	Sept. 27.....	2	.....
	Sept. 28.....	2	.....
	Sept. 29.....	3	.....
	Sept. 30.....	1	.....
	Oct. 2-Oct. 3.....	2	.....
	Oct. 4.....	5	1
	Oct. 5.....	3	.....
	Oct. 7.....	1	.....
	Oct. 9.....	4	.....
	Oct. 10.....	2	.....
	Oct. 11.....	0	1
	Oct. 12.....	0	1
	Oct. 13.....	0	1
	Oct. 14.....	2	.....
	Oct. 16.....	1	.....
	Oct. 17.....	0	0
<b>Maryland:</b>			
Baltimore (b).....	Oct. 8.....	1	1
<b>Mississippi:</b>			
Centerville.....	Sept. 29.....	2	.....
Jackson.....	Sept. 10-Oct. 2.....	12	4
Jackson.....	Sept. 1.....	1	1
Mississippi City.....	Sept. 14-Sept. 29...	26	1

a No report.

b At quarantine station.

## REPORTS FROM THE MEXICAN BORDER.

EAGLE PASS, TEX., *October 12, 1899.*

SIR: I have the honor to report the following, it being an account of the last trip made by me to the Texas border towns and country about the suburb of Presidio, Tex.:

On September 14, Mr. Drake ordered me to proceed to Presidio and other places, and take the proper measures to prevent the introduction and spread of smallpox in the United States. Accordingly I left Eagle Pass on the 14th, reached Marfa, Tex., on 15th, took stage at this place for Shafter on same date, and reached Shafter that afternoon. I remained in Shafter long enough to investigate that place, and finding nothing, I left on the Presidio stage for Presidio, the following day.

After a long and tedious horseback ride of over 500 miles, I finally finished my trip, the result being that I found smallpox in abundance all along the Mexican side of the Rio Grande, in all, some 200 cases, and along the American side some 40 cases.

In a letter of another date I explained the condition of the various towns.

At Presidio del Norte smallpox is spreading all the time, and as the Mexican Government will do nothing in the matter, the disease will undoubtedly prevail there all of the winter. The same may be said of the other Mexican towns.

The people of Presidio del Norte are just beginning to realize the true effect of smallpox, their death rate at present being from 3 to 5 a day, and the disease constantly spreading. Many times has the presidente (mayor) of Presidio del Norte asked me for vaccine in order to protect his people. Had I been in possession of vaccine at the time I would have vaccinated several healthy children in Presidio del Norte and allowed the presidente to secure vaccine from the children's arms and vaccinate the rest of the population, needing, as I did, all the vaccine available. As it happened, the vaccine ordered by Mr. Drake has never reached Presidio.

The United States sanitary guards at Presidio, etc., are doing excellent service, and every effort is being used by them to prevent the spread of smallpox in places on the American side which have the disease, and also to prevent the entrance of any fresh cases from Mexico.

*Eagle Pass, Tex., October 13, 1899.*—During the past month the detention camp has been taxed to its utmost capacity, there being as many as 14 persons in camp at one time.

It seems that all of the smaller towns in Mexico on the Mexican International Railroad, are more or less infected with smallpox, hence, during my absence (I having spent the better part of the past month in Presidio, Tex., preventing the spread of smallpox in that section), there being no vaccine here, the officer left in charge deemed it wise to detain all individuals from infected districts in the detention camp, rather than return them to Mexico and cause the infection of C. P. Diaz.

The chances for the spread of smallpox on the Mexican border this winter will be very great; hence Mr. Drake and myself are doing all in our power to prevent its entrance to the United States now. To this end, 2 guards are stationed at the detention camp, 1 doing night and the other day duty. On the pedestrian and railroad bridges we have 2 guards doing day duty. Mr. Drake has ordered me (in compliance with Bureau telegram of 11th instant) to appoint 2 guards for the bridges to serve during the night. Along the Rio Grande we have 1 guard at

Upson and 1 at Las Moras, both guards being on duty all the time and preventing access to the United States by way of the fords along the Rio Grande. Both of these men live on the river banks and ride a distance of from 10 to 15 miles daily.

At the city of Del Rio, Tex., we have 3 guards, who look out for Las Vacas, Mexico, and the surrounding country. At Presidio, Pulvo, Spencers Rancho, Rindosa, Condalaria, and Pilaes (all Texas border towns) we have ten mounted guards.

As you will see from the foregoing, the Rio Grande in this district is very well looked after.

The Presidio County is in quite a serious condition, and the guards are kept busy at all times, stringent measures being used often in order to prevent the distributing of smallpox.

I have the honor to remain, respectfully, yours,

LEA HUME,

*Acting Assistant Surgeon, U. S. M. H. S., In Command.*

*El Paso, Tex., October 3, 1899.*—I have the honor to report that during the week ended October 7, 1899, there arrived on the Mexican Central Railroad 2 passengers from Santiago de Cuba via Vera Cruz, Mexico, 1 an Italian cook, the other an American mechanic. These men were without certificates, and their baggage was, according to their statements, not disinfected. Both of them had been absent from Vera Cruz but seven days. They were detained four days, and their baggage was disinfected with formaldehyd.

Respectfully, yours,

E. ALEXANDER,

*Sanitary Inspector, U. S. M. H. S.*

*Laredo, Tex., October 5, 1899.*—I have the honor to submit the following report of the inspection service for the week ended September 30, 1899:

*International Ferry.*—Inspected and allowed entry from Nuevo Laredo, Mexico, to Laredo, Tex., 796; refused entry and returned from Monterey, Mexico, to Laredo, Tex., 8. The above persons refused entry had not procured certificates, and left the train at Nuevo Laredo to avoid inspection at the railroad bridge.

*International Foot Bridge.*—Inspected and allowed entry from Nuevo Laredo, Mexico, to Laredo, Tex., 2,916. The above includes 19 immigrants from Nuevo Laredo, Mexico, to Laredo, Tex.

*Refused entry and returned.*—September 25, 3 from Tampico, Mexico, to United States. September 26, 1 from Monterey, Mexico, to United States; 1 from Torreon, Mexico, to United States. September 27, 1 from Monterey, Mexico, to United States. September 28, 1 from Lampazos, Mexico, to United States. September 29, 1 from City of Mexico to Laredo, Tex.; 1 from Monterey, Mexico, to Laredo, Tex. Total refused entry for the week, 9.

Persons refused entry left the train at Nuevo Laredo, Mexico, to avoid inspection on the railroad bridge. No baggage or household effects are allowed across this bridge except what originates in Nuevo Laredo, Mexico, and the immediate vicinity; and I first satisfy myself before issuing a permit, and inspecting.

*Mexico National Railroad Bridge.*—From City of Mexico to United States, 52; San Luis Potosi to United States, 38; Saltillo to United States, 23; Monterey to United States, 74; other points, 29; total, 216.

September 24: Two persons from San Luis Potosi, six days out from Puebla, were refused entry; no baggage. Refused entry to 1 person

from Monterey; no evidence; no baggage. Refused entry to 1 person three days out from Puebla, with evidence of being at Puebla three days previous to appearance; he had hand-baggage only. Disinfected a trunk which was stamped "Vera Cruz, September 4," and had no certificate on it of disinfection; the owner passed on September 22, with certificate for himself.

September 25: Three persons, four to five days out from Tampico, were placed in the detention camp. They forded the river below the railroad bridge and were destitute.

September 27: Refused entry to 1 person from San Luis Potosi; no evidence. Refused entry to 1 person from Monterey; no evidence. Disinfected 3 trunks and a valise from Yucatan via Vera Cruz and the City of Mexico, twenty-five days at City of Mexico, but the certificate stated to disinfect baggage.

September 29: Refused entry to 1 person from the City of Mexico; no certificate.

September 30: Refused entry to 1 person from the City of Mexico; no certificate. Quarantine regulations are being strictly enforced.

Respectfully, yours,

H. J. HAMILTON,

*Acting Assistant Surgeon, U. S. M. H. S.*

*Plan for protecting the United States should Monterey become infected with yellow fever.*

LAREDO, TEX., October 7, 1899.

SIR: Owing to the continuance of yellow fever at Tampico, and the possibility of its reaching Monterey, I have considered the means to be instituted upon its reaching Monterey to prevent the possibility of its entering at this port. The report from the United States consul at Tampico on September 27, 1899, is: "Another case of yellow fever reported to-day. Of the 5 cases reported, every one has been in a different locality, and not in contact, as far as can be ascertained."

October 2 acting assistant surgeon United States Marine-Hospital Service at Monterey wires: "Seven yellow fever, Tampico." October 6, same source: "Yellow fever reported, Victoria."

Victoria is a city about half way between Tampico and Monterey on the line of the Monterey and Mexican Gulf Railroad.

On October 17, after the recent outbreak of yellow fever at Tampico, the governor of the State of Tamaulipas, Mexico, placed a quarantine at Gonzales, on the railroad about 40 miles northwest of Tampico. The following is the method as reported from the consular agency at Victoria, Mexico: "The Tampico train stops at Gonzales; passengers, after examination and fumigation, board another train, are again examined near Victoria, remain at Victoria over night, and next morning take another train for Monterey."

The above method has no value worth the trouble taken. A person also reports from Victoria that no Americans have passed through from Tampico since the quarantine was put on, except railroad employees. Last year the yellow fever at Monterey made its appearance first among the railroad employees of the Monterey and Mexican Gulf Railroad.

Assistant Surgeon Cofer sent me a copy of his instructions to the Mexican National Railroad officials should yellow fever break out at Monterey, which require the through train from the City of Mexico not to stop within a radius of 25 miles of Monterey, and all refugees from Monterey are instructed that they will have to be detained and baggage

disinfected at Saltillo or at the border. I suggested also to Assistant Surgeon Cofer that in addition he had better have the train inspectors on the through train between Saltillo and Laredo to see that instructions be complied with, and also that no one be allowed on the through train after it leaves Saltillo. The local train between Saltillo and Laredo can do all the local passenger business, and will not be allowed across the border, and the crew of said train will also not be allowed to enter. This train is to be considered infected, and all persons arriving at Nuevo Laredo on this local train are to be detained ten days, no matter where they are from.

In case of yellow fever at Monterey, more guards will be needed at this station. I will have to guard the border from a point in front of Guerrero, Mexico (6,000 or 7,000 inhabitants), to a point in front of Columbia, Mexico (about 1,000 inhabitants), a distance of about 100 miles. No one to cross frontier except at Laredo. As Nuevo Laredo will be used as a place of detention (so long as noninfected) for all persons arriving on local train from Saltillo, I will allow no persons to cross the frontier unless they have a written permit from me, and all persons arriving on local train will be required to remain ten days, providing their baggage was disinfected upon arrival. I will allow daylight communication only with Nuevo Laredo for business purposes. All persons, whether from the Mexican or American side, to have a pass from me. No skiffs nor ferryboats will be allowed to land within the 100 miles of river front mentioned. This method will allow the transaction of legitimate business without danger of infection.

Respectfully, yours,

H. J. HAMILTON,  
*Acting Assistant Surgeon, U. S. M. H. S.*

*Laredo, Tex., October 12, 1899.*—I have the honor to submit the following quarantine report at Mexican National Railroad Bridge quarantine station and detention camp for week ending October 7, 1899: Inspected and allowed entry per week reported from Mexico City, 104; San Luis Potosi, 19; Saltillo, 17; Monterey, 61; other points, 57; total entered, 258.

October 1, discharged 3 destitute Americans from camp. Two persons who had been one day at Nuevo Laredo, Mexico, crossed over. They were 4 days out from Tampico. They remained in detention camp until October 7, providing for themselves. October 1, refused entry to 1 person, no evidence. October 2, refused entry to 1 woman, no evidence. October 3, refused entry to 1 person. October 5, refused entry to 1 person. October 7, refused entry to 1 person. Total refused entry for week reported, 5; number in detention camp for week reported, 2. Persons without certificates as a rule leave train on Mexican side, but regulations are now generally known, and travelers come provided.

*Laredo, Tex., October 12, 1899.*—I have the honor to submit the following quarantine report at international foot and tramway bridge for week ended October 7, 1899: Inspected and allowed entry, 3,074; inspected and refused entry from Monterey, 11; inspected and refused entry from San Luis Potosi, 5; inspected and refused entry from City of Mexico, 1; total inspected, 3,091.

Three of the persons reporting from San Luis Potosi and returned, I discovered yesterday had been to Vera Cruz within ten days. They went finally to Guerrero, Mexico, where they live.

*Laredo, Tex., October 12, 1899.*—I have the honor to submit the following quarantine report at international ferry for week ended October

7, 1899: Inspected and allowed entry, 541; refused entry and returned to Mexico, 1; total inspected, 542.

Person returned was from Monterey, Mexico, without certificate or other evidence of whereabouts during previous ten days.

Respectfully, yours,  
H. J. HAMILTON,  
*Acting Assistant Surgeon, U. S. M. H. S.*

*Smallpox at Natchez, Miss.*

NATCHEZ, MISS., *October 12, 1899.*

SIR: I have in detention under treatment a case of smallpox. He developed the disease about four days ago, upon his return from a visit to Bougere, Concordia Parish, La., where he states that all the colored people are afflicted with it. This is the second time I have heard that smallpox was prevailing in the southern portion of this parish. I reported the matter at once to the Louisiana State board of health.

Respectfully, yours,  
J. C. BALLARD,  
*Acting Assistant Surgeon, U. S. M. H. S.*

*Smallpox on Orcas Island, Wash.*

PORT TOWNSEND QUARANTINE, WASH., *October 8, 1899.*

SIR: I have the honor to state the following facts relative to my telegram of October 6 concerning smallpox on Orcas Island. It was reported that there were 14 cases there and 1 death. The steamship *Lydia Thompson* is the only boat which makes regular trips to the island and other points on the sound, doing so every two days. I boarded her on arrival yesterday and found she had on board a letter addressed to the local health officer stating that 1 man had died of varioloid complicated with dropsy; that all persons who had been exposed were being closely watched, and that no other cases had as yet arisen. This letter was signed by a Dr. Wright and was in reply to a telegram sent to him by Dr. Tucker, asking as to the condition of affairs there.

I vaccinated all the crew of the *Lydia Thompson* and notified the captain that hereafter whenever he had passengers from Orcas Island he would be subject to inspection at the wharf until further notice.

Respectfully, yours,  
M. HUGH FOSTER,  
*Assistant Surgeon, U. S. M. H. S.*



**Smallpox in the United States as reported to the Surgeon-General United States Marine-Hospital Service, June 30 to October 20, 1899.**

[For reports received from January 1 to June 30, 1899, see PUBLIC HEALTH REPORTS for June 30.]

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Arkansas:</b>				
Jefferson County.....	Oct. 4.....	20		
Pulaski County.....	.....do.....	6		
Total for the State.....		26		
<b>California:</b>				
Oakland.....	June 3-June 24...	2	0	
San Diego.....	June 1-June 30...	2	1	
Total for the State.....		4	1	
<b>Colorado:</b>				
Hinsdale County.....	Sept. 9.....	1		
Lake County.....	Sept. 18.....	2		
Las Animas County.....	Sept. 9.....	1		
Total for the State.....		4		
<b>Connecticut:</b>				
Stamford.....	July 20.....	1		
<b>Florida:</b>				
Jacksonville.....	July 1-Sept. 2...	7		
Gadsden County.....	July 1-July 31...	18		
Hillsboro County.....	April 10-July 10...	35		
Jackson County.....	July 1-July 31...	1		
Lake County.....	.....do.....	1		
Leon County.....	.....do.....	4		
Marion County.....	.....do.....	3		
Pasco County.....	.....do.....	5		
Total for the State.....		74		
<b>Georgia:</b>				
Brooks County.....	Aug. 5-Aug. 30...	2	1	
Montgomery County.....	July 15-Aug. 10...	31		
Savannah.....	June 3-July 27...	7		
Total for the State.....		40	1	
<b>Illinois:</b>				
Chicago.....	June 20-July 1...	3	0	
<b>Indiana:</b>				
Clark County.....	July 1-Sept. 30...	6		
Elkhart County.....	.....do.....	1		
Harrison County.....	.....do.....	1		
La Grange County.....	.....do.....	10		
Lake County.....	.....do.....	1		
Marion County.....	.....do.....	6		
Porter County.....	.....do.....	30		
Total for the State.....		55		
<b>Kansas:</b>				
Butler County.....	Oct. 2.....	5		
Kansas City.....	June 10-June 17...	2		
	Oct. 1-Oct. 8...	9	1	
Total for the State.....		16	1	
<b>Kentucky:</b>				
Leslie County.....	Aug. 17.....	104		
Louisville.....	June 23-Sept. 23...	17	0	
Total for the State.....		121		
<b>Louisiana:</b>				
New Orleans.....	June 17-Aug. 26...	14	0	
Shreveport.....	.....do.....	3	0	Doubtful.
Total for the State.....		17	0	
<b>Maryland:</b>				
Baltimore.....	June 18-July 15...	18	0	
Steelton.....	June 23.....	14		
Total for the State.....		32		

Smallpox in the United States, etc.—Continued.

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Massachusetts:</b>				
Boston	June 27-Sept. 2...	9	3	
Chelsea	Sept. 28-Oct. 12...	8		
Everett	Aug. 7-Oct. 7...	4		
Fall River	June 27-Sept. 9...	2		
Lowell	Oct. 1-Oct. 7...	1		
Roxbury	Aug. 30	3		
<b>Total for the State</b>		<b>27</b>	<b>3</b>	
<b>Michigan:</b>				
Saginaw County	Sept. 10-Oct. 7...			Smallpox reported.
<b>Minnesota:</b>				
Austin	July 15-Aug. 1...	1	0	
Duluth	do	1	0	
East Grand Forks	do	7	0	
Round Lake	Aug 1-Aug. 31...	10		
<b>Total for the State</b>		<b>19</b>		
<b>Mississippi:</b>				
Natchez	July 7-Oct. 12...	15	0	
Pine Ridge	Aug. 16	8		
<b>Total for the State</b>		<b>23</b>		
<b>Missouri:</b>				
Barry County	April 6-July 20...	35		
Lawrence County	do	1		
Lincoln County	do	9		
Scott County	do	25		
St. Francois County	do	30	2	
Stoddard County	do	35		
St. Louis	June 19-June 26...	4		
<b>Total for the State</b>		<b>139</b>	<b>2</b>	
<b>Montana:</b>				
Great Falls	Sept. 18	6		
<b>North Carolina:</b>				
Bertie County	May 1-May 31...	4		
	July 1-July 31...	1		
Burke County	do	22		
Caldwell County	do	3		
Caswell County	do	6		
Catawba County	do	1		
Charlotte	June 30	1		
Chowan County	May 1-May 31...	1		
Currituck County	do	6		
	July 1-July 31...	2		
Forsyth County	do	2		
Gates County	May 1-May 31...			Do.
	July 1-July 31...	12		
Halifax County	do	7		
Hertford County	May 1-May 31...	4		
	July 1-July 31...	2		
McDowell County	May 1-May 31...	1		
Moore County	do	1		
Nash County	do			Do.
Northampton	do	1		
Richmond County	July 1-July 31...	1		
Rockingham	May 1-May 31...	14		
Rowan	do	1		
	July 1-July 31...	1		
Wake	May 1-May 31...	4		
Wayne	do	7		
<b>Total for the State</b>		<b>105</b>		
<b>Ohio:</b>				
Cincinnati	July 7-Oct. 6...	21		
Cleveland	June 24-Oct. 7...	18		
Columbus	July 30-Aug. 5...	1		
Dayton	July 15-Oct. 7...	6		
<b>Total for the State</b>		<b>46</b>		
<b>Oregon:</b>				
Astoria	Oct. 11	1		
Portland	June 13-July 19...	6	0	
Umatilla County	Sept. 7			Do.
<b>Total for the State</b>		<b>7</b>	<b>0</b>	

*Smallpox in the United States, etc.—Continued.*

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Pennsylvania:</b>				
Allegheny County.....	June 3-Sept. 30...	38		At Penn Station, several.
Belle Vernon.....	June 3-June 26...	1		
Brownsville Township.....	.....do.....	34		
Cambria County.....	June 3-Aug. 5...	27		
Somerset County.....	June 3-Aug. 5...	10		
Washington County.....	June 3-June 26...	11		
Westmoreland County.....	June 3-Aug. 5...	2		
<b>Total for the State.....</b>		<b>123</b>		
<b>Porto Rico:</b>				
Ponce.....	June 17-July 22...	6		
<b>Tennessee:</b>				
Memphis.....	Sept. 23-Oct. 9...	4		
<b>Texas:</b>				
Beaumont.....	Aug. 2.....	8		Many cases reported.
Brazos County.....	Aug. 4-Aug. 18...			
Brenham, Wash'gton County.....	.....do.....	1		
Condalaria.....	Sept. 29.....	1		
Canagre.....	.....do.....	1		
Dallas.....	Aug. 4-Aug. 18...	1		
El Indie.....	Sept. 29.....	7		
Presidio.....	July 23.....	40		
Palno.....	Sept. 29.....	2		
Pilares.....	.....do.....	15		
Ruidoso.....	.....do.....	4		
Sabine Pass.....	July 15.....	2		
San Antonio.....	Aug. 1-Aug. 31...	1	1	
Shafter.....	July 23-Aug. 5...	25		
Taylor.....	Aug. 4-Aug. 18...	1		
Sixteen places.....	Aug. 5-Sept. 9...	79	4	
<b>Total for the State.....</b>		<b>188</b>	<b>5</b>	
<b>Virginia:</b>				
Cape Charles.....	July 8.....	1		Smallpox reported. Do. Do. Do. Do. Do. Smallpox prevalent. Several cases.
Danville.....	June 14-July 6...	30	0	
Norfolk.....	June 22-Aug. 4...	19	1	
Portsmouth.....	June 22-Oct. 14...	16	0	
Augusta County.....	July 1-July 31...	1		
Brunswick County.....	.....do.....	2		
Charles City County.....	Aug. 1-Aug. 31...	8		
Gloucester County.....	July 1-July 31...			
Goochland County.....	.....do.....			
Greensville County.....	.....do.....			
Hanover County.....	Aug. 1-Aug. 31...	1		
Isle of Wight County.....	.....do.....	6		
Mathews County.....	.....do.....	3		
Mecklenburg County.....	.....do.....			
Norfolk County.....	.....do.....			
Orange County.....	.....do.....	2		
Pittsylvania County.....	.....do.....			
Princess Anne County.....	July 1-July 31...	2		
Prince George County.....	Aug. 1-Aug. 31...	1		
Scott County.....	July 1-July 31...			
Surry County.....	Aug. 1-Aug. 31...	9		
Sussex County.....	.....do.....	14		
Wise County.....	.....do.....	2		
<b>Total for the State.....</b>		<b>117</b>	<b>1</b>	
<b>Washington:</b>				
Almira.....	July 3.....	9		
Seattle.....	July 19-Sept. 30...	6		
Spokane.....	July 8-Aug. 19...	7		
Tacoma.....	July 23-Aug. 5...	2		
Walla Walla.....	June 29.....	8	0	
<b>Total for the State.....</b>		<b>32</b>		
<b>West Virginia:</b>				
Benwood.....	July 5.....	1	0	
Elkhorn, McDowell County...	Aug. 19.....	1		
<b>Total for the State.....</b>		<b>2</b>		

REPORTS FROM NATIONAL QUARANTINE

Number.	Name of station.	Week ended.	Name of vessel.	Date of arrival.	Port of departure.
<b>UNITED STATES:</b>					
1	Alexandria, Va.....	Oct. 14	.....	.....	.....
2	Beaufort, N. C.....	do.....	.....	.....	.....
3	Brunswick, Ga.....	do.....	Port. bk. Maria Emilia.....	Oct. 11	Rio de Janeiro.....
			Ger. brig Margaretha.....	Oct. 13	Pernambuco.....
4	Cape Charles, Va.....	do.....	.....	.....	.....
5	Cape Fear, N. C.....	Oct. 7	Nor. bk. Argo (a).....	Sept. 25	Pernambuco.....
			Br. ss. Slingsby.....	Oct. 1	New York.....
		Oct. 14	Br. ss. Aislaby.....	Oct. 10	Boston.....
			Br. ss. Wandby.....	Oct. 12	New York.....
6	Columbia River, Oreg.....	Oct. 7	.....	.....	.....
7	Delaware Breakwater Quarantine, Lewes, Del.	Oct. 14	.....	.....	.....
8	Eureka, Cal.....	Oct. 7	.....	.....	.....
9	Grays Harbor, Wash.....	do.....	.....	.....	.....
10	Gulf Quarantine, Ship Island, Miss.	do.....	Nor. ss. Songa (a).....	Sept. 23	Matanzas.....
			Am. sc. Viator (a).....	Sept. 28	Port Antonio.....
			Am. sc. Rita Cué.....	Sept. 30	Key West.....
			Am. sc. Magnolia.....	Oct. 1	do.....
			Am. sc. Mary E. Riggs..	Oct. 3	do.....
11	Newbern, N. C.....	Oct. 7	.....	.....	.....
12	Pascagoula, Miss.....	Oct. 14	.....	.....	.....
13	Port Townsend, Wash.....	Oct. 7	.....	.....	.....
14	Reedy Island Quarantine, Del.	Oct. 14	Br. ss. Armstor.....	Oct. 8	Baltimore.....
15	San Diego, Cal.....	Oct. 7	.....	.....	.....
16	San Francisco, Cal.....	do.....	.....	.....	.....
17	Savannah, Ga.....	do.....	Nor. bk. Brodrene.....	Sept. 25	Pernambuco.....
			Br. ss. Pacific.....	Oct. 3	Antofogasta.....
			Ger. bk. India.....	Oct. 7	Rio de Janeiro.....
		Oct. 14	Ger. bk. India (a).....	do.....	do.....
18	South Atlantic Quarantine, Blackbeard Island, Ga.	Oct. 7	Br. sc. John S. Parker (a).....	Sept. 26	Sagua la Grande.....
19	Tortugas Quarantine, Key West, Fla.	Oct. 14	Am. sc. John D. Long (a).....	Sept. 28	do.....
		Sept. 30	Am. bgt. Pedro (a).....	Sept. 15	Havana.....
			Am. sc. B. Frank Neally...	Sept. 23	Cardenas.....
			Bk. Olive Thurlow.....	Sept. 29	Havana.....
			Sc. Louise Hastings.....	Sept. 30	Key West.....
		Oct. 7	Sc. James Judge.....	do.....	Havana.....
			Am. bk. Olive Thurlow (a).....	Sept. 29	do.....
			Am. sc. Louise Hastings (a).....	Sept. 30	Key West.....
			Am. sc. James Judge (a).....	do.....	Havana.....
			Am. ss. Ambrosia Bolivar.	Oct. 1	Key West.....
20	Washington, N. C.....	Oct. 14	U. S. sc. W. C. W. Glazier..	Oct. 4	Tortugas.....
<b>CUBA:</b>					
21	Caibarien.....	Oct. 7	.....	.....	.....
22	Cardenas.....	do.....	.....	.....	.....
23	Cienfuegos.....	do.....	.....	.....	.....
24	Daiquiri.....	Sept. 23	.....	.....	.....
25	Gibara.....	Sept. 30	.....	.....	.....

a Previously reported.

## AND INSPECTION STATIONS.

Number.	Destination.	Treatment of vessel, passengers, and cargo.	Date of departure.	Remarks.	Vessels inspected and passed.
1				No transactions.	
2				No report.	
3	Brunswick	Disinfected and held			
	do.	Held for disinfection		1 case malarial fever on arrival.	
4					7
5	Wilmington	Disinfected and held	Oct. 2		2
	do.	Spoken and passed			
	do.	do.			1
	do.	do.			
6					4
7				27 officers and crew of Br. ss. Armstor remanded from Reedy Island as yellow fever suspects; detained five days.	5
8				No transactions.	
9					1
10	Mobile	Disinfected and held	Oct. 3	1 case yellow fever in quarantine.	
	Ship Island	do.	Oct. 4		
	Pascagoula	do.	Oct. 7		
	Handsboro	do.	do.		
	Moss Point	do.		1 case yellow fever in quarantine.	
11				No transactions.	
				do.	
12					4
13				1 Chinese and 18 Japanese steerage passengers on Am. ss. Victorian, from Victoria, B. C., vaccinated.	5
14	Philadelphia	Disinfected	Oct. 10	1 case yellow fever in hospital, Baltimore; 2 cases malaria.	21
15					5
16				1 death each from phthisis pulmonalis on Br. ss. Silberhorn and Gifford, from Antwerp and Cardiff, respectively.	17
17	Savannah	Disinfected and held	Oct. 3		10
	do.	Held for instructions	do.		
	do.	Awaiting orders under quarantine restrictions.			
	do.	Held for disinfection		3 cases malarial fever on Am. ss. Wm. H. Skinner, Jacksonville.	11
18	Jacksonville	Disinfected and held	Oct. 3		1
	Charlotte, N. C.	do.	Oct. 5		2
19	Mobile	Disinfected and held	Sept. 27		
	Port Tampa	do.	Sept. 28		
	Apalachicola	do.		Captain sick night of arrival.	
	Mobile	do.			
	Fernandina	do.			
	Apalachicola	do.	Oct. 6	1 case intermittent malarial fever.	
	Mobile	do.			
	Fernandina	do.	Oct. 7		
	Key West	Disinfected prior to returning refugees from detention camp.	Oct. 3		
	do.	do.	Oct. 7		
20				No transactions.	
21					12
22				1 case malarial fever on Nor. ss. Parran from Mobile.	13
23					18
24				No report.	
25					8

REPORTS FROM NATIONAL QUARANTINE

Number.	Name of station.	Week ended.	Name of vessel.	Date of arrival.	Port of departure.
26	CUBA—Continued.				
27	Guantanamo.....	Sept. 23			
	Havana.....	Oct. 7	Am. and Cuban ss. Guil- lermo Lopez. (a)	Sept. 29	Havana.....
			Am. and Cuban sc. Bella Catalina. (a)	do	do
			Am. and Cuban sc. Mi- caela. (a)	do	do
			Br. ss. Widdrington.....	Oct. 3	Mobile.....
			Fr. ss. La Navarre.....	Oct. 4	Coruña.....
			U. S. Qm. Dept. Launch No. 2.	Oct. 7	Havana.....
28	Isabela de Sagua.....	Oct. 7			
29	Manzanillo.....	do			
30	Matanzas.....	Oct. 8	Ger. ss. Hermann.....	Oct. 8	Caibarien.....
31	Nuevitas.....	Sept. 30			
32	Santiago de Cuba.....	Oct. 7			
	PORTO RICO:				
33	Ponce.....	do			
34	San Juan.....	do	Sp. ss. Buenos Aires.....	Oct. 4	Havana.....

REPORTS FROM STATE AND

Number.	Name of station.	Week ended.	Name of vessel.	Date of arrival.	Port of departure.
1	Anclote, Fla.....	Oct. 7			
2	Baltimore, Md.....	Oct. 14			
3	Bangor, Me.....	do			
4	Boston, Mass.....	do			
5	Carrabelle, Fla.....	do			
6	Cedar Keys, Fla.....	do			
7	Charleston, S. C.....	do			
8	Charlotte Harbor, Fla.....	do			
9	Elizabeth River, Va.....	do			
10	Galveston, Tex.....	Oct. 7	Br. ss. Cayo Largo.....	Oct. 1	Progreso.....
			Eckraide.....	Oct. 2	St. Vincent.....
			Br. ss. Engineer.....	do	Havana.....
			Br. ss. Glenfield.....	Oct. 3	Vera Cruz.....
			Br. ss. Collingham.....	Oct. 5	St. Vincent.....
			Sp. ss. Saturnina.....	Oct. 6	Arroyo, Porto Rico.
			Salmanira.....	Oct. 7	Havana.....
11	Gardiner, Oreg.....	do			
12	Key West, Monroe Co., Fla.....	Oct. 14			
13	Los Angeles, Cal.....	Oct. 7			
14	Mayport, Fla.....	Oct. 14			
15	Mobile Bay, Ala.....	Oct. 7	Fr. bk. Louis XI (a).....	Sept. 24	Cayenne.....
			Br. ss. Arecuna (a).....	Sept. 27	Tampico.....
			Br. sc. Gov. Blake.....	Oct. 1	Cienfuegos.....
			Sc. Jennie Hall.....	do	Tampa.....
			Nor. bk. Normandie.....	Oct. 5	Progreso.....
			Br. ss. Widdrington.....	Oct. 7	Havana.....
16	New Bedford, Mass.....	Oct. 14			
17	New Orleans, La.....	do			
18	Newport News, Va.....	do			
19	Newport, R. I.....	do			
20	New York, N. Y.....	do			
21	Pass Cavallo, Tex.....	do			
22	Pensacola, Fla.....	do			
23	Port Royal, S. C.....	do			
24	Providence, R. I.....	do			
25	Quintana, Tex.....	Oct. 7			
26	St. Helena Entrance, S. C.....	Oct. 14			
27	San Pedro, Cal.....	Oct. 7			
28	Tampa Bay, Fla.....	Oct. 14			

a Previously reported.

**AND INSPECTION STATIONS—Continued.**

Number.	Destination.	Treatment of vessel, passengers, and cargo.	Date of departure.	Remarks.	Vessels inspected and passed.
26				No report	
27	Miami	Disinfected	Oct. 1		29
	do	do	do		
	do	do	do		
	Mobile	do	Oct. 4		
	Havana and Vera Cruz.	Steerage and fore-castle and 387 pieces baggage disinfected.	Oct. 6	1 case smallpox embarked at Coruña and 1 case at sea; sent to hospital.	
	Havana	Disinfected	Oct. 7	1 case yellow fever	
28					15
29				No report	
30	Matanzas	Disinfected	Oct. 8		18
31					6
32				No report	
33				do	
34	Coruña	Held; 11 passengers landed, 6 nonimmunes held to complete period.			4

**MUNICIPAL QUARANTINE STATIONS.**

Number.	Destination.	Treatment of vessel, passengers, and cargo.	Date of departure.	Remarks.	Vessels inspected and passed.
1				No report	
2				do	
3				do	
4				do	
5				do	
6				do	
7					2
8				No report	
9					17
10	Galveston	Fumigated and held	Oct. 5		17
	do	do	Oct. 3		
	do	do	Oct. 3	To be discharged October 8.	
	do	do	Oct. 6	To be discharged October 9.	
	do	do	do		
	do	Fumigated and held		To be discharged October 10.	
	do			To be discharged October 12.	
11				No report	
12					5
13				No transactions	
14				No report	
15	Mobile	Disinfected and held	Oct. 1		22
	do	do	Oct. 2		
	do	do	Oct. 7		
	do	do	do		
	do	Held to complete period			
16				No report	
17				do	
18				do	
19				do	
20				do	
21				do	
22				do	
23				do	
24				No transactions	
25					3
26				No report	
27				do	
28				do	

*Inspection of vessels at Memphis from New Orleans.*

MEMPHIS, TENN., October 7, 1899.

SIR: I have the honor to report that the steamers *St. Louis* and *Alarm*, from New Orleans, were inspected at this port during the week just ended.

Respectfully, yours,  
JOHN McMULLEN,  
*Assistant Surgeon, U. S. M. H. S., in Temporary Command.*

*Inspection of immigrants at New York during September, 1899.*

NEW YORK, N. Y., October 10, 1899.

SIR: Report of the number of immigrants examined by the medical examiners at the port of New York during the month of September, 1899, and rejected as suffering from a loathsome or dangerous contagious disease: Number of steerage passengers examined during the month, 24,780; rejected as suffering from loathsome or dangerous contagious disease and detained pending action of the Commissioner of Immigration, 51.

Disease.	Certified.	Reported.	Admitted.	Remaining.
Trachoma.....	49	38	a 6	5
Favus.....	2	1		1

a Landed by the board of special inquiry upon evidence of citizenship.

Respectfully, yours,  
L. L. WILLIAMS,  
*Surgeon, U. S. M. H. S.*

*Inspection of immigrants at San Francisco Quarantine, Cal.*

SAN FRANCISCO QUARANTINE STATION,  
*Angel Island, Cal., October 7, 1899.*

SIR: I have the honor to report that during the month of September, 1899, 455 immigrants were inspected at the port of San Francisco, and that there were no rejections.

Respectfully, yours,  
J. J. KINYOUN,  
*Surgeon, U. S. M. H. S.*



*Report of immigration at Boston for the week ended October 7, 1899.*OFFICE OF U. S. COMMISSIONER OF IMMIGRATION,  
*Port of Boston, October 8, 1899.**Number of alien immigrants who arrived at this port during the week ended October 7, 1899;  
also names of vessels and ports from which they came.*

Date.	Vessel.	Where from.	No. of immigrants.
Oct. 1	Steamship Prince Arthur.....	Yarmouth, Nova Scotia.....	248
Do.....	Steamship Yarmouth.....	do.....	187
Do.....	Steamship Catalonia.....	Liverpool, England.....	418
Oct. 2	Steamship Admiral Farragut.....	Kingston, Jamaica.....	7
Do.....	Steamship Kansas.....	Liverpool, England.....	1
Do.....	Schooner Carrie Easler.....	Port Medway, Nova Scotia.....	1
Do.....	Schooner Lizzie Wharton.....	Windsor, Nova Scotia.....	2
Do.....	Steamship Bostonian.....	London, England.....	2
Oct. 4	Steamship Prince George.....	Yarmouth, Nova Scotia.....	155
Do.....	Steamship Boston.....	do.....	83
Do.....	Steamship Cestrian.....	Liverpool, England.....	8
Do.....	Steamship Irishman.....	do.....	1
Oct. 5	Schooner Vesta Pearl.....	Mahone Bay, Nova Scotia.....	1
Do.....	Steamship Yarmouth.....	Yarmouth, Nova Scotia.....	126
Do.....	Steamship Prince Arthur.....	do.....	51
Oct. 6	Steamship Halifax.....	Halifax, Nova Scotia.....	349
Oct. 7	Steamship Prince George.....	Yarmouth, Nova Scotia.....	147
Do.....	Steamship Boston.....	do.....	79
Do.....	Steamship Canada.....	Liverpool, England.....	633
Do.....	Steamship Ultonia.....	do.....	313
	Total.....		2,814

GEORGE B. BILLINGS,  
*Commissioner.**Report of immigration at Boston for the week ended October 14, 1899.*OFFICE OF U. S. COMMISSIONER OF IMMIGRATION,  
*Port of Boston, October 15, 1899.**Number of alien immigrants who arrived at this port during the week ended October 15, 1899;  
also names of vessels and ports from which they came.*

Date.	Vessel.	Where from.	No. of immigrants.
Oct. 8	Steamship Chicago.....	Hull, England.....	7
Do.....	Steamship Yarmouth.....	Yarmouth, Nova Scotia.....	129
Do.....	Steamship Prince Arthur.....	do.....	192
Oct. 9	Steamship Peruvian.....	Glasgow, Scotland.....	2
Do.....	Steamship Lycia.....	Avonmouth, England.....	1
Do.....	Schooner Wascano.....	Hillsboro, Nova Scotia.....	1
Do.....	Schooner Jeanie Myrtle.....	Port Medway, Nova Scotia.....	1
Oct. 10	Steamship Admiral Dewey.....	Port Morant, Jamaica.....	5
Oct. 11	Steamship Prince George.....	Yarmouth, Nova Scotia.....	122
Do.....	Steamship Boston.....	do.....	83
Do.....	Steamship Winifredian.....	Liverpool, England.....	20
Do.....	Steamship Michigan.....	do.....	2
Oct. 12	Steamship Prince Arthur.....	Yarmouth, Nova Scotia.....	91
Do.....	Steamship Yarmouth.....	do.....	78
Do.....	Steamship Pro Patria.....	St. Pierre, Miquelon.....	4
Oct. 13	Steamship Halifax.....	Halifax, Nova Scotia.....	246
Oct. 14	Steamship Prince George.....	Yarmouth, Nova Scotia.....	58
Do.....	Steamship Boston.....	do.....	56
	Total.....		1,098

GEORGE B. BILLINGS,  
*Commissioner.*

*Report of immigration at Philadelphia for the week ended October 14, 1899.*

OFFICE OF U. S. COMMISSIONER OF IMMIGRATION,  
*Port of Philadelphia, October 14, 1899.*

*Number of alien immigrants who arrived at this port during the week ended October 14, 1899; also names of vessels and ports from which they came.*

Date.	Vessel.	Where from.	No. of immigrants.
Oct. 9	Steamship Rhymland.....	Liverpool and Queenstown.....	188
Oct. 12	Steamship Aragonia.....	Antwerp.....	161
	Total.....		349

JNO. J. S. RODGERS,  
*Commissioner.*

*Reports of States and yearly and monthly reports of cities of the United States.*

**ALABAMA**—*Montgomery*.—Year ended September 30, 1899. Census population, 21,883. Total number of deaths, 467, including diphtheria, 1; enteric fever, 17; scarlet fever, 5; whooping cough, 8; small-pox, 1, and 54 from tuberculosis.

**CALIFORNIA**—*Los Angeles*.—Month of September, 1899. Estimated population, 103,000. Total number of deaths, 98, including diphtheria, 1; enteric fever, 2, and 26 from phthisis pulmonalis.

*Oakland*.—Month of September, 1899. Estimated population, 75,000. Total number of deaths, 70, including diphtheria, 1; enteric fever, 2, and 8 from phthisis pulmonalis.

*Sacramento*.—Month of September, 1899. Estimated population, 30,000. Total number of deaths, 36, including enteric fever, 1, and 7 from phthisis pulmonalis.

*San Francisco*.—Month of August, 1899. Estimated population, 360,000. Total number of deaths, 512, including diphtheria, 5; enteric fever, 10; measles, 1; cerebro-spinal meningitis, 2, and 64 from phthisis pulmonalis.

**CONNECTICUT**.—Reports to the State board of health for the month of September, 1899, from 165 towns, having an aggregate estimated population of 910,354, show a total of 1,142 deaths, including diphtheria, 20; enteric fever, 32; measles, 1; scarlet fever, 3; whooping cough, 7, and 103 from phthisis pulmonalis.

*Bridgeport*.—Month of September, 1899. Estimated population, 65,000. Total number of deaths, 96, including diphtheria, 1; enteric fever, 2; scarlet fever, 1; whooping cough, 2, and 14 from tuberculosis.

**ILLINOIS**—*Chicago*.—Month of August, 1899. Estimated population, 1,650,000. Total number of deaths, 2,113, including diphtheria, 60; enteric fever, 62; measles, 13; scarlet fever, 28; whooping cough, 14, and 188 from phthisis pulmonalis.

IOWA—*Davenport*.—Month of September, 1899. Estimated population, 40,000. Total number of deaths, 31, including enteric fever, 1, and 1 from phthisis pulmonalis.

MASSACHUSETTS—*Fitchburg*.—Month of September, 1899. Estimated population, 29,438. Total number of deaths 32, including diphtheria, 1; enteric fever, 1; cerebro-spinal meningitis, 1, and 1 from phthisis pulmonalis.

MICHIGAN.—Reports to the State board of health, Lansing, for the week ended October 7, 1899, from 65 observers, indicate that inflammation of bowels, pleuritis, and enteric fever increased, and dysentery decreased, in area of prevalence. Phthisis pulmonalis was reported present at 204, enteric fever at 129, scarlet fever at 54, diphtheria at 28, measles at 17, whooping cough at 17, cerebro-spinal meningitis at 4, and smallpox at 2 places—Battle Creek and Maple Grove township, Saginaw County.

MINNESOTA—*Winona*.—Month of September, 1899. Estimated population, 24,000. Total number of deaths, 26, including enteric fever, 2, and 1 from phthisis pulmonalis.

MISSOURI—*St. Louis*.—Month of August, 1899. Estimated population, 623,000—white, 587,000; colored, 36,000. Total number of deaths, 794—white, 694; colored, 100, including diphtheria, 8; enteric fever, 6; scarlet fever, 4; whooping cough, 6; cerebro-spinal meningitis, 2, and 93 from phthisis pulmonalis.

NEW HAMPSHIRE—*Concord*.—Month of September, 1899. Estimated population, 18,000. Total number of deaths, 25. No deaths from contagious diseases.

*Manchester*.—Month of September, 1899. Estimated population, 60,000. Total number of deaths, 90, including enteric fever, 1; measles, 1, and 6 from phthisis pulmonalis.

NEW YORK.—Reports to the State board of health, Albany, for the month of August, 1899, from 156 cities, towns, and villages, having an aggregate estimated population of 7,110,000, show a total of 10,003 deaths, including diphtheria, 171; enteric fever, 157; measles, 49; scarlet fever, 26; whooping cough, 120; cerebro-spinal meningitis, 64, and 1,034 from phthisis pulmonalis.

*Auburn*.—Month of September, 1899. Estimated population, 35,000. Total number of deaths, 33, including diphtheria, 2, and 4 from phthisis pulmonalis.

*Buffalo*.—Month of September, 1899. Estimated population, 370,000. Total number of deaths, 314, including diphtheria, 8; enteric fever, 9; whooping cough, 3, and 31 from phthisis pulmonalis.

TENNESSEE—*Nashville*.—Month of September, 1899. Estimated population, 110,834—white, 69,389; colored, 41,445. Total number of deaths, 148—white, 78; colored, 70, including diphtheria, 4; enteric fever, 6, and 16 from phthisis pulmonalis.

TEXAS—*San Antonio*.—Month of September, 1899. Estimated population, 63,000. Total number of deaths, 78, including diphtheria, 6; enteric fever, 4, and 19 from phthisis pulmonalis.

VIRGINIA—*Norfolk*.—Month of September, 1899. Estimated population, 60,000—white, 35,710; colored, 24,290. Total number of deaths, 36, including enteric fever, 3, and 6 from phthisis pulmonalis.

WASHINGTON—*Seattle*.—Month of September, 1899. Estimated population, 75,000. Total number of deaths, 50, including enteric fever, 4, and 6 from phthisis pulmonalis.

WISCONSIN—*Superior*.—Month of September, 1899. Estimated population, 35,000. Total number of deaths, 25. No deaths from contagious disease.

MORTALITY TABLE, CITIES OF THE UNITED STATES.

Cities.	Week ended.	Population, U. S. Census of 1890.	Total deaths from all causes.	Deaths from—												
				Tuberculosis.	Yellow fever.	Smallpox.	Variceloid.	Cholera.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.	Whooping cough.		
Allegheny, Pa.	Oct. 14.	105,287	41	3						3	1	1				
Ashtabula, Ohio	Oct. 13.	8,338	3													
Baltimore, Md.	Oct. 14.	494,439	204	28	1							11				
Baton Rouge, La.	Oct. 7.	10,478	5	1												
Do.	Oct. 14.	10,478	5	1												
Bay City, Mich.	do.	27,839	2								1					
Binghamton, N. Y.	do.	35,005	11	1								1				
Boston, Mass.	do.	448,477	186	29						8		10			2	
Bucyrus, Ohio.	Oct. 7.	5,974	4	1						1						
Butler, Pa.	Oct. 12.	8,734	8													1
Do.	Oct. 19.	8,734	5									1				
Cambridge, Mass.	Oct. 14.	70,028	23	1							4					
Charleston, S. C.	Oct. 7.	a 54,955	b 26	4						1						
Chelsea, Mass.	do.	27,909	14	1												
Chicopee, Mass.	Oct. 14.	14,050	7									1				
Chillicothe, Ohio	Oct. 7.	11,288	4	1						1						1
Do.	Oct. 14.	11,288	6													
Cincinnati, Ohio	Oct. 7.	296,908		8						3		4				
Cleveland, Ohio.	do.	261,353	90	2						3	3	5				
Do.	Oct. 14.	261,353	101	3						3	2	3				
Concord, N. H.	do.	17,044	4													
Dayton, Ohio.	do.	61,220	27	2								1				
Dubois, Pa.	Oct. 7.	6,149	2													
Do.	Oct. 14.	6,149	2													
Dunkirk, N. Y.	Oct. 7.	9,416	3	1												
Dunmore, Pa.	do.	8,315	3													
Elmira, N. Y.	do.	29,708	13	2												
Erie, Pa.	Oct. 14.	40,634	15													
Evansville, Ind.	do.	50,756	15	4						1						
Everett, Mass.	Oct. 7.	11,068	6									1				
Fitchburg, Mass.	do.	22,037	8									1				
Grand Rapids, Mich.	do.	60,278	19	1						1		1				
Green Bay, Wis.	Oct. 8.	9,069	9	1								1				
Do.	Oct. 15.	9,069	3									1				
Greenville, S. C.	Oct. 14.	8,607	9	4												
Hoboken, N. J.	Oct. 7.	43,648	39	2												
Holyoke, Mass.	Oct. 14.	35,637	17	3							1					1
Honolulu, Hawaii	Sept. 23.	35,000	16	4						1						
Jacksonville, Fla.	Oct. 7.	17,201	11							1						
Jersey City, N. J.	Oct. 8.	163,003	80	11						1	2	3				
Johnstown, Pa.	Oct. 14.	21,805	14													
Lancaster, Pa.	Sept. 30.	32,011	12							1		2				
Do.	Oct. 7.	32,011	6	1												
Do.	Oct. 14.	32,011	11	1								2				
Lawrence, Mass.	Oct. 7.	44,654	15									1				
Los Angeles, Cal.	do.	50,395	21	4								1				
Louisville, Ky.	Oct. 12.	161,129	40	4						7						1
Lowell, Mass.	Oct. 7.	77,696	31	2												1
Do.	Oct. 14.	77,696	34	4								1				
Lynchburg, Va.	do.	19,709	6	1						1						
McKeesport, Pa.	Oct. 7.	20,741	8	1								1				
Mahanoy City, Pa.	Oct. 14.	11,286	5													
Malden, Mass.	do.	23,031	10													
Manchester, N. H.	do.	44,126	23	4												
Massillon, Ohio	Oct. 7.	10,092		1												
Medford, Mass.	Oct. 14.	11,079	3													
Memphis, Tenn.	Oct. 7.	64,495	40	4						3		1				
Michigan City, Ind.	do.	10,776	6									1				
Do.	Oct. 14.	10,776	2													
Milwaukee, Wis.	do.	204,468	72	6						3	2	3				
Minneapolis, Minn.	Oct. 7.	164,738	51	3						2		3				
Do.	Oct. 14.	164,738	46	6						7		3				
Nashville, Tenn.	do.	76,168		2						3						1
New Bedford, Mass.	do.	40,733	17	3								1				
New Brunswick, N. J.	do.	18,603	8													
Newburyport, Mass.	Oct. 7.	13,947	2													
New Orleans, La.	do.	242,039	119	18	4							1				
Do.	Oct. 14.	242,039	138	18	3					5		1				
Newton, Mass.	do.	24,379	13	2												
Norristown, Pa.	do.	19,791	0													
North Adams, Mass.	do.	16,074	7													

a Estimated population, 65,165—white, 28,870; colored, 36,295.

b White, 8; colored, 28.

MORTALITY TABLE, CITIES OF THE UNITED STATES—Continued.

Cities.	Week ended.	Population U. S. census of 1890.	Total deaths from all causes.	Deaths from—												
				Tuberculosis.	Yellow fever.	Smallpox.	Varioloid.	Cholera.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.	Whooping cough.		
Omaha, Nebr.....	Oct. 7....	140,452	17													
Oneonta, N. Y.....	Oct. 14....	6,272	0													
Petersburg, Va.....	Oct. 8....	22,680	7		1											
Philadelphia, Pa.....	Oct. 14....	1,046,964	382	51												
Pittsburg, Pa.....	Oct. 7....	238,617	111	7												
Do.....	Oct. 14....	238,617	108	3												
Pittsfield, Mass.....	do.....	17,281	3	2												
Pittston, Pa.....	do.....	10,302	5													
Plainfield, N. J.....	do.....	11,267	3													
Portland, Me.....	Oct. 7....	36,425	19													
Do.....	Oct. 14....	36,425	19	1						1						
Portsmouth, Va.....	do.....	13,268	4	1		1							2			
Providence, R. I.....	do.....	132,146	53	3						1			1			1
Reading, Pa.....	do.....	58,661	23	2						1						
Rockport, Tex.....	Oct. 7....	1,250	0													
Sabine Pass, Tex.....	Oct. 14....	567	1													
Salt Lake City, Utah...	Oct. 7....	44,843	13	1												
Do.....	Oct. 14....	44,843	15													
San Diego, Cal.....	Oct. 7....	16,159	6													
San Jose, Cal.....	do.....	18,060	8	1												
Santa Barbara, Cal.....	do.....	5,864	2													
Scranton, Pa.....	do.....	75,215	34										5			
Do.....	Oct. 14....	75,215	34										6			
Seattle, Wash.....	Oct. 7....	42,837	13	2												
Shreveport, La.....	Oct. 14....	11,979	5	1						1						1
Steelton, Pa.....	do.....	9,250	4													
Tacoma, Wash.....	Oct. 7....	36,006	6													
Taunton, Mass.....	Oct. 14....	25,448	12	3												
Waltham, Mass.....	do.....	19,707	2													
Warren, Ohio.....	do.....	5,973	2													
Washington, D. C.....	Oct. 7....	230,392	124	15						6			8			
West Tampa, Fla.....	do.....	4,000	0													
Wheeling, W. Va.....	do.....	35,013	11													
Do.....	Oct. 14....	35,013	11													
Wichita, Kans.....	do.....	23,853	2													
Winona, Minn.....	Oct. 7....	18,208	4													
Youngstown, Ohio.....	Oct. 14....	33,220	13							3						

Table of temperature and rainfall, week ended October 2, 1899.

[Received from Department of Agriculture, Weather Bureau.]

Locality.	Temperature in degrees Fahrenheit.			Rainfall in inches and hundredths.		
	Normal.	α Excess.	α Deficiency.	Normal.	Excess.	Deficiency.
<b>Atlantic Coast:</b>						
Eastport, Me.....	52		0	.79		.59
Portland, Me.....	56		4	.79	.20	
Northfield, Vt.....	49		1	.56	.89	
Boston, Mass.....	59		2	.84	.58	
Vineyard Haven, Mass.....	60			.96		
Nantucket, Mass.....	59	1		.80		.75
Woods Hole, Mass.....	60	2		.81		.17
Block Island, R.I.....	60		2	.79	1.38	
New Haven, Conn.....	59		5	.90		.45
Albany, N. Y.....	58		3	.77	3.45	
New York, N. Y.....	62			.84		
Harrisburg, Pa.....	59		7	.83	.54	
Philadelphia, Pa.....	63		6	.70	.45	
New Brunswick, N. J.....	60		6	.81	1.45	
Atlantic City, N. J.....	63		7	.77		.33
Baltimore, Md.....	63		7	.80	2.18	
Washington, D. C.....	63		9	.77	2.06	
Lynchburg, Va.....	64		11	.82		.07
Cape Henry, Va.....	68		5	.98		.91
Norfolk, Va.....	67		5	.96		.91
Charlotte, N. C.....	67		9	.79		.49
Raleigh, N. C.....	64		6	.82	.56	
Kittyhawk, N. C.....	70		5	.96		.78
Hatteras, N. C.....	69	4		1.47		1.45
Wilmington, N. C.....	70		7	1.33		1.28
Columbia, S. C.....	72		9	.69		.63
Charleston, S. C.....	70		5	1.34		.98
Augusta, Ga.....	72		8	.63		.61
Savannah, Ga.....	72		5	1.19		1.19
Jacksonville, Fla.....	75		4	1.51		1.43
Jupiter, Fla.....	78		0	2.62	3.35	
Key West, Fla.....	81		1	1.75		.80
<b>Gulf States:</b>						
Atlanta, Ga.....	68		9	.73		.49
Tampa, Fla.....	77		1	.93		.93
Pensacola, Fla.....	74		6	.89		.89
Mobile, Ala.....	73		8	.99		.99
Montgomery, Ala.....	71		9	.61		.61
Vicksburg, Miss.....	71		8	.63		.63
New Orleans, La.....	74		6	.91		.91
Shreveport, La.....	71		6	.80		.80
Fort Smith, Ark.....	67			.75		
Little Rock, Ark.....	68		9	.59		.59
Palestine, Tex.....	72		5	.75		.75
Galveston, Tex.....	76		2	1.25		1.25
San Antonio, Tex.....	75		2	.62		.62
Corpus Christi, Tex.....	76		0	.86		.86
<b>Ohio Valley and Tennessee:</b>						
Memphis, Tenn.....	67		9	.68		.62
Nashville, Tenn.....	66			.77		
Chatanooga, Tenn.....	67		12	.79		.47
Knoxville, Tenn.....	64		14	.57	.07	
Louisville, Ky.....	64		13	.58		.56
Indianapolis, Ind.....	61		13	.63		.58
Cincinnati, Ohio.....	63		12	.49		.39
Columbus, Ohio.....	61		13	.56		.33
Parkersburg, W. Va.....	59		10	.70	.28	
Pittsburg, Pa.....	62		12	.56		.01
<b>Lake Region:</b>						
Oswego, N. Y.....	57		8	.70	1.95	
Rochester, N. Y.....	57		9	.58	1.00	
Buffalo, N. Y.....	57		9	.81	.61	
Erie, Pa.....	59		10	.96	.67	
Cleveland, Ohio.....	59		12	.75		.38
Sandusky, Ohio.....	61		13	.59		.48
Toledo, Ohio.....	59		13	.51		.50
Detroit, Mich.....	58		14	.56		.29
Lansing, Mich.....	57		14	.63		.51
Port Huron, Mich.....	56		11	.62	.22	
Alpena, Mich.....	52		9	.91		.76
Sault Ste. Marie, Mich.....	49		9	.98		.84
Marquette, Mich.....	51		10	.89		.68
Green Bay, Wis.....	54		9	.68		.68
Grand Haven, Mich.....	57		12	.82		.72

α The figures in these columns represent the average daily departure.

Table of temperature and rainfall, week ended October 2, 1899—Continued.

Locality.	Temperature in degrees Fahrenheit.			Rainfall in inches and hundredths.		
	Normal.	<sup>a</sup> Excess.	<sup>a</sup> Deficiency.	Normal.	Excess.	Deficiency.
<b>Lake Region—Continued:</b>						
Milwaukee, Wis.....	56		10	.61		.58
Chicago, Ill.....	59		12	.65		.19
Duluth, Minn.....	51		5	.76		.75
<b>Upper Mississippi Valley:</b>						
St. Paul, Minn.....	54		7	.61		.61
La Crosse, Wis.....	57			.86		
Dubuque, Iowa.....	59		12	.82		.82
Davenport, Iowa.....	60		11	.68		.68
Des Moines, Iowa.....	59		8	.70		.70
Keokuk, Iowa.....	62		11	.75		.73
Hannibal, Mo.....	60		10	.63		.60
Springfield, Ill.....	62		12	.71		.52
Cairo, Ill.....	65		11	.61		.60
St. Louis, Mo.....	64		9	.70		.70
<b>Missouri Valley:</b>						
Columbia, Mo.....	63		11	.58		.56
Springfield, Mo.....	61		4	.83		.83
Kansas City, Mo.....	63		4	.77		.77
Topeka, Kans.....	62		3	.54		.54
Wichita, Kans.....	63	0		.54		.54
Concordia, Kans.....	62	1		.47		.47
Lincoln, Nebr.....	62		4	.42		.42
Omaha, Nebr.....	60		5	.63		.63
Sioux City, Iowa.....	60		5	.22		.22
Yankton, S. Dak.....	58		4	.54		.54
Valentine, Nebr.....	58		2	.21		.21
Huron, S. Dak.....	55		4	.30		.29
Pierre, S. Dak.....	59		2	.21		.21
Moorhead, Minn.....	51		5	.48	.30	
Bismarck, N. Dak.....	52		1	.23		.21
Williston, N. Dak.....	51	2		.16		.09
<b>Rocky Mountain Region:</b>						
Havre, Mont.....	51	7		.22		.22
Helena, Mont.....	52	5		.24		.24
Miles City, Mont.....	54	3		.14		.14
Rapid City, S. Dak.....	58	0		.14		.14
Spokane, Wash.....	55	4		.30		.26
Walla Walla, Wash.....	62	3		.28		.18
Baker City, Oreg.....	55	3		.21		.19
Winnemucca, Nev.....	55	3		.10		.10
Boise, Idaho.....	55	8		.16		.16
Salt Lake City, Utah.....	60	6		.27		.27
Lander, Wyo.....	51	5		.19		.19
Cheyenne, Wyo.....	52	5		.19		.19
North Platte, Nebr.....	57	1		.28		.28
Denver, Colo.....	58	5		.21		.21
Pueblo, Colo.....	60			.09		
Dodge City, Kans.....	63	3		.28		.28
Oklahoma, Okla.....	67		4	.56		.56
Amarillo, Tex.....	65	1		.38		.38
Abilene, Tex.....	68	3		.56		.56
Santa Fe, N. Mex.....	56	6		.31		.31
El Paso, Tex.....	69			.21		
Phoenix, Ariz.....	75	11		.18		.18
<b>Pacific Coast:</b>						
Seattle, Wash.....	54	5		.65		.15
Tacoma, Wash.....	53			.65		
Fort Canby, Wash.....	56	0		.98	.34	
Portland, Oreg.....	58	5		.63	.20	
Roseburg, Oreg.....	58	5		.43		.12
Eureka, Cal.....	54			.44		
Redbluff, Cal.....	69			.21		
Carson City, Nev.....	56	8		.07		.07
Sacramento, Cal.....	67	4		.14		.14
San Francisco, Cal.....	60		2	.16		.16
Fresno, Cal.....	72	3		.07		.07
San Luis Obispo, Cal.....	63			.14		
Los Angeles, Cal.....	66	3		.07		.07
San Diego, Cal.....	66			.00		
Yuma, Ariz.....	79	7		.05		.05

<sup>a</sup>The figures in these columns represent the average daily departure.



## FOREIGN.

[Reports received from United States consuls through the Department of State and from other sources.]

*Cholera, yellow fever, plague, and smallpox as reported to the Surgeon-General United States Marine-Hospital Service, June 30, 1899, to October 20, 1899.*

[For reports received from January 1 to June 30, 1899, see PUBLIC HEALTH REPORTS for June 30.]

## CHOLERA.

Places.	Date.	Cases.	Deaths.	Remarks.
<b>India:</b>				
Bombay.....	June 6-Aug. 22.....		15	
Calcutta.....	May 13-Sept. 2.....		272	
Karachi.....	Aug. 6-Sept. 9.....	15	18	
Madras.....	May 20-Sept. 1.....		10	
<b>Japan:</b>				
Fukuoka Ken.....	July 26-Aug. 20.....	1		
Kanagawa Ken.....	.....do.....	3		
Miye Ken.....	.....do.....	1		
Osaka and Hiogo.....	June 10-Aug. 26.....	4	3	
Tokyo Fu.....	July 26-Aug. 31.....	31	7	
Yokohama.....	July 16-Aug. 26.....	3	3	
<b>Straits Settlements:</b>				
Singapore.....	Aug. 1-Aug. 31.....		1	
<b>Turkey:</b>				
Bassorah.....	Oct. 16.....			Cholera reported.

## YELLOW FEVER.

<b>Argentina:</b>				
Buenos Ayres.....	Apr. 1-Apr. 30.....		4	
	June 1-June 30.....		8	
<b>Brazil:</b>				
Bahia.....	June 3-Aug. 12.....	177	85	
Para.....	June 1-June 30.....		19	
Rio de Janeiro.....	May 19-Aug. 11.....		66	
St. Felix.....	June 7.....			Reported present.
<b>Colombia:</b>				
Barranquilla.....	June 10-June 24.....	2	2	
	Aug. 6-Sept. 16.....	2	2	
Cartagena.....	Aug. 30-Sept. 9.....	2	1	
Colon.....	Aug. 23-Sept. 3.....	1	1	
Panama.....	June 16-Aug. 8.....	88	45	
	Aug. 15-Sept. 19.....	27	9	
<b>Costa Rica:</b>				
Alajuela.....	Aug. 4-Sept. 24.....	60	21	
Heredia.....	.....do.....	1		
Port Limon.....	Aug. 18-Aug. 29.....	2	1	Yellow fever reported.
Punta Arenas.....	Aug. 4.....			
<b>Cuba:</b>				
Cienfuegos.....	July 23-July 29.....	1	1	Doubtful.
Cristo.....	Aug. 13-Aug. 14.....	1		
Daiquiri.....	Aug. 27-Sept. 2.....	1		
Havana.....	June 15-Sept. 30.....	133	42	
Manzanillo.....	July 2-Sept. 2.....	10	2	
Matanzas.....	June 17-July 27.....	2		1 Doubtful.
	Aug. 6-Aug. 12.....	1	1	
	Oct. 3.....	1		
Nuevitias.....	Sept. 10-Sept. 16.....	1		
Puerto Principe.....	To Aug. 9.....	39	13	
Santiago.....	June 10-Sept. 30.....	219	49	
Sancti Spiritu.....	Aug. 24.....	2		
<b>Mexico:</b>				
Amealco.....	.....do.....			Yellow fever reported.
Chilpanzingo.....	Sept. 14.....			Yellow fever prevalent.
Cinchaapa.....	Aug. 23.....			Yellow fever reported.
Cordoba.....	June 21.....	23	14	
	May 1-Aug. 26.....		133	
Cosamaloapam.....	Aug. 21.....	1		
Hidalgo.....	Aug. 23.....			Do.
Jalapa.....	Aug. 9.....		5	

*Cholera, yellow fever, plague, and smallpox, etc.—Continued.*

YELLOW FEVER—Continued.

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Mexico—Continued.</b>				
Juchitan .....	Aug. 23.....			Yellow fever reported.
Merida .....	July 1.....	1		
Orizaba .....	May 1-July 24... Aug. 29-Sept. 30..		11 66	
Progreso .....	July 25.....	2	1	Do.
San Geronimo .....	Aug. 23.....			Do.
San Juan la Junta .....	Aug. 24.....			
San Lorenzo .....	do.....			Do.
Tampico .....	July 1-July 7... Sept. 16..... Oct. 2.....	1 2 7	1	Do.
Tapona.....	Aug. 23.....			
Tuxpan.....	July 30-Oct. 2...		53	
Vera Cruz .....	June 15-Oct. 12..		231	Do.
Victoria .....	Oct. 6.....			
<b>Nicaragua:</b>				
Bluefields.....	Sept. 23-Sept. 30..		1	
<b>San Salvador:</b>				
San Salvador.....	June 30-Aug. 1... Sept. 1.....	3	1	Do.

PLAGUE.

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Arabia:</b>				
Djiddah .....	June 30.....			Plague reported.
<b>Brazil:</b>				
Santos.....	Oct. 19.....	6	2	
<b>China:</b>				
Amoy.....	July 1-Aug. 12.....		540	Do. Do.
Hongkong .....	Apr. 11-Aug. 19.....	1,555	1,495	
Fuchau.....	Aug. 5-Aug. 26.....			
Niuchwang .....	Sept. 13.....			
<b>Egypt:</b>				
Alexandria.....	May 4-Sept. 24... June 7.....	92	43	
<b>French Ivory Coast Colony:</b>				
Grand Bassam.....	June 7.....	200		
<b>India:</b>				
<b>Bombay, Presidency of: (a)</b>				
Ahmednugger District.....	Aug. 5-Aug. 11... do.....	45 26	31 17	Total, 1,273 cases; 956 deaths.
Aundh State .....	do.....			Total, 1,951 cases; 1,383 deaths.
Belgaum District.....	do.....	750	598	Total, 29,300 cases; 22,042 d'ths.
Baroda Territory .....	do.....	29	19	Total, 8,005 cases; 5,982 deaths.
Bijapore District.....	do.....	98	82	Total, 2,626 cases; 2,130 deaths.
Broach District.....	do.....	37	27	Total, 1,530 cases; 1,146 deaths.
Cutch State.....	do.....	29	27	Total, 10,477 cases; 8,634 d'ths.
Dharwar District.....	do.....	143	95	Total, 38,754 cases; 31,307 d'ths.
Janjira State.....	do.....	0	1	Total, 418 cases; 269 deaths.
Kaira District.....	do.....	58	46	Total, 2,069 cases; 1,578 deaths.
Kanara District.....	do.....	11	11	Total, 433 cases; 311 deaths.
Khandesh District.....	do.....	1	0	Total, 1,000 cases; 810 deaths.
Kolaba District.....	do.....	15	9	Total, 2,913 cases; 2,480 deaths.
Kolhapore and Southern Maharatta Country.	do.....	624	500	Total, 19,185 cases; 14,408 d'ths.
Kurrachee District.....	do.....	1	1	Total, 10,684 cases; 8,279 d'ths.
Nassik District.....	do.....	470	361	Total, 5,573 cases; 5,084 deaths.
Poona District.....	do.....	1,400	1,150	Total, 20,163 cases; 15,480 d'ths.
Rewa Kantha.....	do.....	26	25	Total, 442 cases; 341 deaths.
Rutnagherry District .....	do.....	18	15	Total, 742 cases; 618 deaths.
Satara District.....	do.....	228	177	Total, 27,057 cases; 21,211 d'ths.
Savanur State.....	do.....	1	1	Total, 62 cases; 38 deaths.
Sholapore District.....	do.....	29	28	Total, 4,912 cases; 3,960 deaths.
Surat District.....	do.....	61	40	Total, 7,947 cases; 5,842 deaths.
Thana District.....	do.....	108	86	Total, 12,366 cases; 9,794 d'ths. Grand total, 220,907 cases; 164,083 deaths.
Bombay.....	May 27-Sept. 12.....		895	
Calcutta.....	May 13-Sept. 2.....		366	
Karachee.....	Aug. 6-Aug. 12.....	1	2	
<b>Japan:</b>				
Kanagawa Ken.....	July 1-July 10... do.....	2 2	1	Total since outbreak, 2,468 cases; 1,866 deaths.
Nagasaki Ken.....	do.....			
Taiwan, Formosa.....	do.....	14	6	
Tamsui, Formosa.....	Apr. 1-July 26... do.....	1,530 1,222	1,222	

*a* Extract from Indian Times sent by United States consul.

*Cholera, yellow fever, plague, and smallpox, etc.—Continued.*

## PLAGUE—Continued.

Places.	Date.	Cases.	Deaths.	Remarks.
Lorenzo Marquez:				
Magudo.....	Sept. 22.....			Plague reported.
Mauritius.....	May 4-May 31...	1	5	
	July 14-July 20...	30	29	
	Aug. 10-Aug. 23...	68	42	
Hozambique.....	Aug. 25.....			Plague reported.
Persia:				
Bushire.....	June 8.....			Do.
	May 26-June 13...		40	
Portugal:				
Lisbon.....	Aug. 16.....			Plague reported.
Oporto.....	Aug. 16-Sept. 22...	70	31	
Réunion (Isle de).....	July 24.....	1	1	Do.
Russia:				
Kolobovka, Astrakhan.....	Aug. 1-Aug. 10...		21	
St. Petersburg.....	July 23-July 29...	1		
	Aug. 6-Aug. 12...	1		
Straits Settlements:				
Penang.....	Jan. 4-July 21...	49	39	
Singapore.....	May 27-June 17...	0	3	
Turkey:				
Bassorah.....	June 19.....	1	1	

## SMALLPOX.

Arabia:				
Aden.....	May 1-May 31.....		1	
Argentina:				
Bueno Ayres.....	Apr. 1-July 31.....		5	
Austria:				
Budapest.....	June 16-June 24...	2		
Belgium:				
Antwerp.....	July 31-Aug. 6...	1		
Ghent.....	June 10-Sept. 16...	22	6	
	June 23-July 1.....		1	
Brazil:				
Bahia.....	June 3-Sept. 16...	5		
Rio de Janeiro.....	May 19-Aug. 11...	374	241	
Bohemia:				
Prague.....	Aug. 27-Sept. 2...	5		
China:				
Hongkong.....	May 6-June 10...	2	1	
Colombia:				
Panama.....	July 12-July 24...	2		
	July 26-Aug. 1...	1	1	
Cuba:				
Casilda.....	Aug. 1-Aug. 31.....		1	
Havana.....	June 30-July 6...	5	1	
Sancti Spiritu.....	June 7.....			Reported present.
Santiago.....	July 1-July 8...	1		
Egypt:				
Alexandria.....	Aug. 20-Aug. 26...		1	
Cairo.....	May 20-Aug. 19...		28	
England:				
Liverpool.....	June 10-June 17...		1	
London.....	June 10-Aug. 5...	5	1	
France:				
Nantes.....	June 1-June 30...	1		
Marseilles.....	June 25-July 2...	1		
Paris.....	July 2-July 8.....		1	
Germany:				
Dusseldorf.....	Sept. 3-Sept. 9.....		1	
Gibraltar.....	June 4-June 21...	1		
Greece:				
Athens.....	June 10-Sept. 30...	150	34	
India:				
Bombay.....	May 27-Sept. 5.....		97	
Calcutta.....	May 13-June 10...		2	
Madras.....	May 20-Sept. 8.....		9	
Japan:				
Tamsui, Formosa.....	Apr. 1-June 30...	210		
Mexico:				
Chihuahua.....	July 16-Oct. 7.....		29	
City of Mexico.....	June 4-Sept. 30...	105	70	
Cuchio.....	Sept. 29.....	25		
Mulette.....	.....do.....	12		
Nuevo Laredo.....	July 1-Aug. 26...		3	

*Cholera, yellow fever, plague, and smallpox, etc.—Continued.*

**SMALLPOX—Continued.**

Places.	Date.	Cases.	Deaths.	Remarks.
<b>Mexico—Continued.</b>				
Ojenega .....	Sept. 29.....	50	.....	
Pilares .....	do .....	15	.....	
Progreso .....	Oct. 7.....	30	.....	
San Antonio .....	Sept. 29.....	20	.....	
San Felipe.....	Oct. 7.....	100	.....	
San Francisco.....	Sept. 29.....	5	.....	
San Juan.....	do .....	100	.....	
Suarez.....	Oct. 7.....	40	.....	
Vado de Piedras.....	Sept. 29.....	20	.....	
<b>Netherlands:</b>				
Rotterdam .....	July 15-July 22...	1	.....	
<b>Russia:</b>				
Khabarovsk .....	Apr. 1-Apr. 30...	1	.....	
Moscow .....	May 27-Sept. 23...	116	55	
Odessa.....	June 10-Sept. 9...	36	12	
Riga.....	June 1-June 30...	.....	22	
St. Petersburg.....	June 3-Sept. 9...	98	31	
Warsaw.....	June 3-Sept. 23...	.....	19	
<b>Scotland:</b>				
Glasgow.....	June 3-June 17...	1	1	
<b>Spain:</b>				
Barcelona.....	Aug. 1-Aug. 31...	.....	15	
Valencia.....	Aug. 16-Sept. 15...	5	1	
<b>Straits Settlements:</b>				
Singapore .....	Apr. 1-Aug. 31...	.....	31	
<b>Turkey:</b>				
Beirut.....	June 27-July 1...	1	.....	
Erzeroum .....	July 8-Sept. 9...	10	1	
Smyna.....	May 27-Aug. 20...	.....	10	
<b>Uruguay:</b>				
Montevideo .....	May 27-July 30...	2	.....	

**EPIDEMIC NOTES.**

[Translated in this Bureau from the Veröffentlichungen des Kaiserlichen Gesundheitsamtes, Berlin, September 27, 1899.]

**PLAGUE.**

**PORTUGAL.**—According to official statement, 70 persons in all were attacked by plague at Oporto during the period from June 5 to September 15. Of this number 31 died. The cases and deaths occurred as follows in the respective weeks: Two cases, 2 deaths; 4, 0; 3, 1; 3, 2; 3, 2; 4, 0; 4, 2; 2, 1; 8, 2; 5, 1; 11, 4; 8, 7; 7, 2; 3, 3. From September 11 to September 13, there were 3 cases and 2 deaths.

**TURKEY.**—On September 11 a plague death occurred on shipboard at Beirut in the person of a Greek lately from Alexandria.

**STRAITS SETTLEMENTS.**—According to official advices there have been no new plague cases at Penang since July 15.

**CHINA.**—According to advices of August 12, no plague deaths had occurred during the previous ten days.

**MAURITIUS.**—According to official advices Port Louis has been affected with plague in epidemic form since the beginning of August. Sporadic cases also occur in the country districts. From the beginning of the outbreak in January of this year to the end of June, 55 cases and 44 deaths have been reported. During the month of July and the first two weeks in August, 227 cases, 184 deaths.

**MOZAMBIQUE.**—According to advices of September 18, 10 plague cases and 1 death have occurred at Magude after a three weeks' interval in the epidemic.

SANITARY REPORTS FROM THE CENTRAL AMERICAN AND COLOMBIAN  
FRUIT PORTS.

BRITISH HONDURAS.

*Report from Belize.*

[BELIZE, BRITISH HONDURAS, *October 6, 1899.*

SIR: I have the honor to report the sailing this p. m. of the steamer *Stillwater* for New Orleans with fruit consigned to the United Fruit Company. The captain, crew, and passengers on board all in good health. There are no passengers from Belize on this trip. Weather conditions warm and raining, washing out the town and improving the sanitary conditions. There is no disease, either infections or contagious, in Belize or near surrounding colony.

Respectfully, yours,

C. W. KNIGHT,

*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.*

[Inclosure.]

*List of deaths registered in the town of Belize from the 29th ultimo to date.*

BELIZE, *October 5, 1899.*

Certified by medical practitioner: Debility, 1; pneumonia, 1; premature birth, 1.

Certified by district commissioner or police, none.

Certified by coroner, none.

Uncertified, none. Total, 3.

A. K. YOUNG,

*Registrar-General.*

COLOMBIA.

*Report from Bocas del Toro.*

BOCAS DEL TORO, COLOMBIA, *October 7, 1899.*

SIR: I have the honor to submit report for the week ended Saturday, October 7, 1899.

The following vessels have been inspected and cleared during the week: September 30, steamship *Kitty*, Olsen; crew, 19; no passengers, for Mobile. October 4, *John Wilson*, Olsen; crew, 17; 1 passenger, for Mobile. October 4, *Utstein*, Aarsvold; crew, 15; no passengers, for Mobile. October 6, *Dudley*, Eriksen; crew, 21; 5 passengers, for Mobile; *Iberia*, Jakobsen; crew, 14; 1 passenger, for New Orleans.

During the past week there has been little or no rainfall, and as the heat has been very great, the supply of drinking water has run very low, and some water is being brought from neighboring springs and creeks, often a distance of 3 or 4 miles. As yet the health of the port and vicinity has not been affected.

Deaths during the week have been as follows: One native, male, stab wound in the neck; 1 negro, male, shock from accidental injuries; 1 negro, male, progressive muscular atrophy.

Of late there has been very little communication with Colon.

Respectfully, yours,

HERMAN B. MOHR,

*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.*

COSTA RICA.

*Report from Port Limon.*

PORT LIMON, COSTA RICA, *October 6, 1899.*

SIR: I have the honor to submit herewith the following report for week ended Thursday, October 5, 1899:

The following are the clearances during the said week for ports in the United States: September 30, steamship *Hispania*, Frockberg, master; crew, 22; cleared for New Orleans; number of passengers, 4. October 2, steamship *Alene*, Long, master; crew, 38; cleared for New York; number of passengers, 4. October 3, *Las Palmas*, Motta, master; Savins, medical officer; crew, 49; cleared for Ponce, Porto Rico; number of passengers, 9; steamship *Phoenix*, Sewell, master; crew, 17; cleared for New Orleans; number of passengers, 1. October 5, steamship *Anselm*, McFarlane, master; crew, 36; cleared for New Orleans; number of passengers, 3.

The official records show 5 deaths during the past week in this port—2 females and 3 males, and were respectively the result of senility, phthisis pulmonalis, syncope, rheumatoid-arthritis, and railway injuries. All were of the colored race.

The sanitary conditions of the port and also the department of Limon continue to remain free from contagious or infectious diseases. The 2 local hospitals have a total of 12 patients—1 white male, and 11 colored males; the white man and 2 colored men are convalescing from malarial fever, the others are surgical cases.

Respectfully, yours, WM. H. CARSON,  
*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

GUATEMALA.

*Report from Livingston.*

LIVINGSTON, GUATEMALA, *October 5, 1899.*

SIR: I have the honor to report 2 deaths in this town since my last report, 2 children of about 8 years—one died of dysentery, the other of calentura. Health conditions satisfactory.

The following steamers cleared during the week for New Orleans:

Date.	Vessel.	Master.	Crew.	No. of passengers.	Laborers.	Destination.
Oct. 1...	Henry Dumas	A. C. Bary...	21	0	0	New Orleans via P'rto Cortez.
Oct. 5...	Stillwater.....	Galt.....	31	8	22	New Orleans via Belize.

Respectfully, yours, N. K. VANCE,  
*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

## HONDURAS.

*Report from La Ceiba.*LA CEIBA HONDURAS, *October 1, 1899.*

SIR: In presenting this my regular weekly report, I have the honor to state, that I have not seen nor heard of any case of serious sickness here since last report, either in the port itself or circumjacent country. One death reported, adult male, internal hemorrhage from punctured wound in epigastric region (a murder). It has been stormy all the week with heavy rains. Mercury went down at one time to 74°. Inspection report for the week: September 25, steamer *Sunniva*, Norwegian, Johnnassen, master; New Orleans; crew, 14; passengers, 8. September, 29, steamer *Condor*, Norwegian, Wlwig, master; New Orleans; crew, 15; no passengers.

Respectfully, yours,

WM. T. HAMILTON,

*Acting Assistant Secretary, U. S. M. H. S.*

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.**Report from Puerto Cortez.*PUERTO CORTEZ, HONDURAS, *October 3, 1899.*

SIR: Since last report the daily recurrence of rain, usually accompanied with wind and electrical manifestations, indicate that the tropical winter or rainy season is upon us, and there has been a manifest increase of sickness. Several cases of continued or remittent fever have come under my observation; also some mild cases of dysenteric or diarrheal affections.

There has been a fall in the mean temperature of from 4° to 6° F. There have been no deaths reported.

The following vessels have been dispatched since last report: Steamship *Henry Dumois*, Captain Berry; 27 men; New Orleans; carrying fruit. Steamship *Ardammhor*, Captain Johnston; 34 men; Havana; carrying cattle. Steamship *Uto*, Captain Anderson; 21 men; Havana; carrying cattle.

Respectfully, yours,

L. A. WAILES, M. D.,

*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.*

## NICARAGUA.

*Sanitary report from Bluefields.*BLUEFIELDS, NICARAGUA, *October 7, 1899.*

SIR: I have the honor to submit my weekly report as follows: Only 1 vessel has been inspected, the steamship *Hiram*, for New Orleans, with 9 passengers. One death, an adult, was recorded since my last report. The health conditions of Bluefields and the adjoining country are good.

Respectfully, yours,

D. W. GOODMAN,

*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,

*U. S. Marine-Hospital Service.*

## SANITARY REPORTS FROM OTHER PORTS.

## AFRICA.

*Supposed yellow fever in French Ivory Coast Colony.*SIERRA LEONE, *September 6, 1899.*

SIR: I have to report that under the date of the 24th ultimo Sierra Leone authorities gave notice of quarantine against Grand Bassam, of the French Ivory Coast, on account of the yellow fever existing there or prevailing.

The infected coast extends from the Gold Coast on the east up to and including Half Jack on the west. All vessels arriving at any port in this colony from any port of the infected coast or from any place having free communication therewith will be placed in quarantine.

This ordinance being issued the day following the death of the imperial German consul, W. Th. Kedenberg, Esq., on the 23d ultimo, causes some suspicion as to the cause of his death, which was reported officially as due to haematuric or black water fever; per contra it has been very prominently mooted by those familiar with the disease in question, that his death was due to yellow fever pure and simple.

I shall observe very closely the state of the public health here, and shall report very promptly any evidence of the existence of such disease in the colony, should it make its appearance.

Respectfully, yours,

JOHN T. WILLIAMS,  
*United States Consul.*

Hon. ASSISTANT SECRETARY OF STATE.

## BRAZIL.

*Plague in Santos.*

[Cablegram.]

RIO DE JANEIRO, *October 19, 1899.*WYMAN, *Surgeon-General, Washington:*

Plague is now present in Santos. There have been 6 cases. There have been 2 deaths. Autopsy confirms diagnosis. Isolation is possible.

W. HAVELBURG, *Sanitary Inspector, U. S. M. H. S.*

## CHINA.

*Chinese from Hongkong to the Hawaiian Islands to be disinfected before sailing.*

HONGKONG, *September 7, 1899.*

SIR: In further reply to your telegram of the 29th ultimo, I have the honor to hereby state that the Hawaiian inspector informed me during our consultations relative to the enforcement of the United States quarantine regulations, that his government had required for the past two years that all Chinese going to the Hawaiian Islands from Hongkong should be disinfected at this port before sailing. As stated in another letter, it was this regulation that forced the Pacific Mail Steamship Company to install a steam disinfecting plant at this place. Dr. Jordan assures me of hearty cooperation in this matter, and has offered to assist me in every way possible.

Respectfully, yours,

J. C. PERRY,  
*Passed Assistant Surgeon, U. S. M. H. S.*The SURGEON-GENERAL,  
*U. S. Marine Hospital Service.*



## COLOMBIA.

*One case of yellow fever at Cartagena since September 2.*CARTAGENA, COLOMBIA, *September 26, 1899.*

SIR: I beg to report that since September 2 there has occurred but 1 case of yellow fever; otherwise the city is in good health.

Respectfully, yours,

RAFAEL MADRIGAL,  
*United States Consul.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

*No new cases of yellow fever at Panama.*PANAMA, *October 3, 1899.*

SIR: There has been no new case of yellow fever in Panama for some time. Since my last letter to you there has been none reported at either of the hospitals.

Respectfully, yours,

FRANCIS GUDGER,  
*Vice Consul-General.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

## CUBA.

*Sanitary report from Cienfuegos.*CIENFUEGOS, CUBA, *October 9, 1899.*

SIR: I have the honor to report that, during the week ended October 7, 21 deaths have occurred in Cienfuegos, 4 from malaria, 4 from intestinal diseases, and 3 from tuberculosis. No contagious diseases. Death rate is 27.37. The sanitary condition of the city is good, nights cool, and approaching the dry season.

By request of the collector of customs, 150 barrels of potatoes from the steamship *Cienfuegos* were inspected, were found in bad condition, ordered assorted, 20 barrels were bad, removed, and place thoroughly limed. Inspected 18 vessels on arrival and 17 on departure during the week. The schooner *Harry Stewart* was disinfected October 5, previous to departure for Apalachicola, Fla.

*Tunas.*—Dr. Francisco Ravella reports 10 deaths during the week, 1 from malaria and 3 from intestinal diseases; no contagious diseases. Eight vessels were inspected during the week.

*Trinidad.*—Dr. Alejandro Cantero reports 3 deaths during the week, 1 from malaria. No contagious diseases. Six vessels inspected.

*Santa Cruz.*—Dr. Juan R. Xiques reports 2 deaths during the week. No contagious diseases. Eight vessels inspected.

Respectfully, yours,

J. M. LINDSLEY,  
*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

*Report from Nuevitas.*NUEVITAS, CUBA, *October 4, 1899.*

SIR: I have the honor to submit the following report for the week ended Saturday, September 30, 1899:

Since the recovery of the case of yellow fever reported on September 16, none others have developed, so that, with the thorough disinfection that was done of the infected premises, it may be safely said that no focus of infection was, on this occasion, established. \* \* \*

Five vessels arrived at this station during the week and 5 bills of health were issued. The mortality report of this city for the period of this report is inclosed.

Respectfully, yours,

T. F. RICHARDSON,  
*Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

[Inclosure.]

*Mortality report for week ended September 30, 1899.*

NUEVITAS, CUBA, *September 30, 1899.*

September 27: Arterio-sclerosis, 1 (old man).

J. R. ARIZA,  
*Acting Assistant Surgeon, U. S. M. H. S.*

FRANCE.

*Precautions against the introduction of plague.*

NANTES, FRANCE, *September 29, 1899.*

SIR: I have the honor to forward you the following information regarding what is being done to prevent the introduction of the plague into France:

The director of health at the port of St. Nazaire has recently received from the minister of the interior a circular containing explicit instructions regarding the precautions to be taken to prevent the introduction of the plague at any of the ports along the west coast of France. The prefect is instructed to notify mayors of all the municipalities what steps to take in all of the various towns along the coast. The circular calls the attention of the authorities to the great danger likely to arise from the visits of small fishing boats owned along the French coast, and which frequently call at Spanish and Portuguese ports for bait, and afterwards come to France to dispose of their catch, or for other purposes. These small boats are regarded as a greater source of danger than the large ships which come into the regular ports where there are regular sanitary officers. The director of health in the city of Nantes informs me that it is very difficult to watch these small boats, as owing to their insignificance in size, they often make landings under cover of darkness at very small ports away from the regular health officers. The health officer at the port of St. Nazaire is instructed to name physicians in all of the coast towns under his jurisdiction, to act as health officers. These health officers are to keep a vigilant lookout for any of the small French boats. As soon as one of these boats approaches the shore, the sanitary officer will swear the officers and crew, and question them whether they have visited any Portuguese or Spanish ports, or

whether they have had any communication with the same. Should any suspicious cases of sickness be on board, the parties will be sent at once to the lazaretto, and the boat quarantined. Any captain of a vessel, any doctor, or health officer, who officially alters any facts regarding sickness on board any vessel, and the plague spreads in consequence of such neglect, the offending official will be punished by death. The circular further states, that if these boats continue to call at Spanish or Portuguese ports, an edict may be issued forbidding their landing at any of the French ports. These fishing boats are very numerous along the coast of this consular district, in the departments of Vendée, Loire Inférieure, Morbihan, and Finistere. At present there are not many merchant vessels coming from Spanish or Portuguese ports, partly owing to the fact that Nantes merchants fear the cargoes might not be permitted to land.

Respectfully, yours,

JOSEPH I. BRITAIN.

*United States Consul at Nantes, France.*

HON. ASSISTANT SECRETARY OF STATE.

ITALY.

*Weekly report from Naples.*

NAPLES, ITALY, *September 30, 1899.*

SIR: I have the honor to report that for the week ended September 27, 1899, the following ship was inspected: On September 22 the steamship *Archimede* of the Italian General Navigation Company, bound with passengers and cargo for New York. There were inspected and passed 879 steerage and 7 cabin passengers, and 947 pieces of small and 500 pieces of large baggage.

The case of suspected plague that was mentioned in my report of September 16, proved not to be plague. It seems that the Italian Government caused two medical officers to be sent to Asinara to investigate the case, and upon their report the quarantine officer who remanded the vessel to Asinara was dismissed.

On September 23, there arrived at Genoa, Italy, the steamship *Sirio*, from Buenos Ayres, with yellow fever on board. There were 5 deaths from this disease during the voyage. Several cases were found aboard upon the vessel's arrival at Genoa, whereupon the vessel was remanded to Asinara.

Respectfully, yours,

VICTOR G. HEISER,

*Assistant Surgeon U. S. M. H. S.*

The SURGEON GENERAL,  
*U. S. Marine Hospital Service.*

JAPAN.

*Report of infectious disease.*

YOKOHAMA, JAPAN, *September 2, 1899.*

SIR: I have the honor to forward herewith, my report of infectious disease in Japan for period August 21 to August 31.

Of the cases of so-called cholera returned from Tokyo, it is in my opinion, more than doubtful whether a single one is genuine, similar returns having been made throughout the season, with no evident tendency to become epidemic manifesting itself.

Respectfully, yours,

STUART ELDRIDGE, M. D.,  
*Sanitary Inspector, U. S. M. H. S.*

The SURGEON GENERAL,  
*U. S. Marine-Hospital Service.*

[Inclosure.]

*Report of infectious disease in Japan from August 21 to August 31, 1899.*

Locality.	Cholera.		Dysentery.		Smallpox.		Plague.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Kioto Fu.....			198	49				
Osaka Fu.....			72	8				
Tokyo Fu.....	11	3	276	93				
Aichi Ken.....			80	11				
Akita Ken.....			16	1				
Awomori Ken.....			67	7				
Chiba Ken.....			186	51				
Fukui Ken.....			65	37				
Fukuoka Ken.....			53	9				
Fukushima Ken.....			1,310	189				
Gifu Ken.....			196	67				
Gumma Ken.....			338	78				
Hiogo Ken.....			194	47				
Hiroshima Ken.....			100	34				
Ibaraki Ken.....			146	46				
Ishikawa Ken.....			173	48				
Iwate Ken.....			1,145	204				
Kagawa Ken.....			134	42				
Kagoshima Ken.....			166	32				
Kanagawa Ken.....			370	112				
Kochi Ken.....			72	20				
Kumamoto Ken.....			166	31				
Miyagi Ken.....			346	48				
Miyazaki Ken.....			69	10				
Miye Ken.....			40	14				
Nagano Ken.....			796	177				
Nagasaki Ken.....			65	21				
Nara Ken.....			11	4				
Niigata Ken.....			1,818	413				
Oita Ken.....			110	22				
Okayama Ken.....			180	63				
Okinawa Ken.....			35	7				
Saga Ken.....			35	8				
Saitama Ken.....			213	75				
Shidzuoka Ken.....			294	64				
Shiga Ken.....			39	13				
Shimane Ken.....			122	20				
Tochigi Ken.....			224	51				
Tokushima Ken.....			98	30				
Tottori Ken.....			55	21				
Toyama Ken.....			85	31				
Wakaysama Ken.....			41	11				
Yamagata Ken.....			195	27				
Yamaguchi Ken.....			103	29				
Yamanashi Ken.....			421	99				
Yehime Ken.....			65	14				
The Hokkaido.....			2	1				
Taiwan(Formosa) <sup>a</sup> .....								

<sup>a</sup>No report.

MAURITIUS.

*Plague still prevalent.*

PORT LOUIS, MAURITIUS, *August 29, 1899.*

SIR: Since the forwarding of my plague report of the 14th instant, I regret to say that the malady is still on the increase, as will be seen from the death rate and the number of victims daily attacked.

It will be also perceived that in the course of its development the disease has assumed a new phase. From recent bacteriological examinations made it has been discovered to be a form of pneumonic plague, and to be of an exceedingly contagious character.

The first victim of the new form was Mr. Johnson, of the colonial secretary's office, and also the first white man attacked in any form of the malady. By the death of Mr. Johnson, on account of his social position and standing in the colony, a heavy gloom has been thrown over the

white population. His sudden and untimely death, together with the circumstances connected with it, have elicited a deep sympathy for his devoted wife, who is the daughter of the late Protestant archdeacon of this diocese. Mrs. Johnson also caught the malady while nursing her husband. The doctors in her case, instead of applying the Haffkin remedy, treated her after Dr. Roux's specific. It seems the former is a preventive against the disease, whilst the latter is a curative. However, Mrs. Johnson has recovered.

The white population of the colony hitherto seemed to consider themselves invulnerable against contracting the disease. In the death of Mr. Johnson and the attack on Mrs. Johnson it has been proved that the hand of Providence exempts none on account of their condition, state, or color. Many other white folks have since been attacked and died, but little has been said about them.

Apropos to the contentions in the council of government (as will be seen from inclosed newspaper clippings), I may remark in this connection that there exists here what is called The Mauritius Turf (?) Club, composed of a few sportsmen who import here from Australia, every year, a few horses which have been already used up on the different race courses of that country. After a training here of the horses for three or four months the club gets up a fund which is distributed to the winning horses on each day of the races.

The races generally commence towards the end of August and last for three days. They are not much, considered from an American point of view, but there are so very few sources of amusement in Mauritius that during the three days on which the races are held large crowds assemble at Port Louis from all parts of the island.

It has been customary for the governor to declare the last day of the races a holiday. On this occasion the planters follow suit and give the poor Indians, who are slaving from one year's end to the other, a holiday. All these poor creatures leave their different districts on the evening before the races. Those who own an ass and cart ride in, with their families and their little provisions for their day's outing. Those who are less wealthy, with their wives and families, travel all night on foot in order to be present the next day at the Champs de Mars in Port Louis. The following day they all return to their respective plantations to toil for another year.

It will be seen from the newspaper clippings inclosed that a motion was offered in the council by the colonial secretary to prevent the Indians from coming to town this year on the last day of the races, and, indeed, to suspend the races altogether this year, as it was alleged that such gatherings caused spread of the plague. This motion was first carried by a majority of 1 vote. At the next meeting of the council the question was again brought before it. On this occasion there was a larger attendance, and the motion for holding the races was carried by a majority of 4, but excluding the last day's races at which the Indians assembled.

In the meantime, Mr. Johnson was attacked with, and died from, plague. This regrettable circumstance seemed to have panic-stricken the government and the whole council. The governor immediately called an extra session of the assembly when the motion of the colonial secretary was renewed and carried by a vote of 18 to 6. These 6 members did not consider the death of Mr. Johnson a sufficient cause to deprive the whole tax-paying community of their few days pleasure. However, the decision was final and no races were held this year.

The Mauritius Turf Club now raises the question of indemnity, and claims to have sustained heavy losses by the action of the governor and the decision of the majority of the council. One of the members of the club told me that he owned three horses which he valued at 3,000 rupees each, the cost of bringing them here together with the wages of jockies and the care and training of the horses here amounted to 5,000 rupees more; making a total for this member alone of about 14,000 rupees, not calculating their winning of the stakes. The other members of the club consider their horses either equal to or more than this gentleman's.

Then, again, the merchants claim that they have imported large stocks of goods which would have been readily disposed of if the races had been permitted to take place, but now are thrown on their hands as a dead loss, and also are claiming indemnity. The colony is already over-taxed, and what the consequence will be has yet to be demonstrated.

Respectfully, yours,

JOHN P. CAMPBELL,  
*United States Consul.*

HON. ASSISTANT SECRETARY OF STATE.

[The clippings referred to give, from August 10 to August 28, 68 cases and 42 deaths from plague.]

MEXICO.

*Reports from the City of Mexico, Monterey, and San Luis Potosi.*

CITY OF MEXICO, MEXICO, *October 3, 1899.*

SIR: I have the honor to make my weekly report as follows: At the City of Mexico, for the week ended October 2, 157 passengers were inspected, 150 passed, and 7 detained and baggage (11 pieces) disinfected. Three passengers were remanded to the border for disinfection of baggage, in addition to the above. There were passed 4 cars of oranges from Yantepec, and 79 barrels of oranges shipped from the same place, but by express. At Monterey, for the week ended September 30, 40 passengers were inspected, 38 passed, and 2 detained and baggage (3 pieces) disinfected. At San Luis Potosi, for the week ended September 30, 31 passengers were inspected and passed. On October 2 (yesterday) Dr. Slabey, the Marine-Hospital Service inspector at Monterey, reported the presence of 7 cases of yellow fever in Tampico. I received a telegram at the same time from the consular officer at the latter place to the effect that there had been 4 deaths to date, but no new cases. Heavy rains and cool winds are reported at Monterey, the health of which city still remains good.

Respectfully, yours,

L. E. COFER,  
*Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

CITY OF MEXICO, MEXICO, *October 10, 1899.*

SIR: I have the honor to make my weekly report as follows: At the City of Mexico for week ended October 9, 91 passengers were inspected, 86 passed, and 5 detained, and baggage (12 pieces) disinfected. In addition to these, 3 passengers were remanded and reported to the border for detention and disinfection. There were also passed 1 car and 90 barrels of oranges from Yantepec consigned to Laredo, Tex. At Monterey for the week ended October 7, 40 passengers were inspected, 38 passed, and 2 detained, and baggage (3 pieces) disinfected. At San Luis Potosi for the week ended October 7, 9 passengers were

inspected and passed. The health of the city of Monterey is still reported to be good. On October 6, Dr. Slabey, the inspector of the Marine-Hospital Service at Monterey reported by wire the presence of yellow fever at Victoria. I inclose herewith a letter from Dr. Slabey, relative to the precautions recently instituted by the Mexican Government at Gonzalez, a station on the Monterey and Gulf Railway, for the protection of the city of Monterey, against the yellow fever at Tampico.

Respectfully, yours,

L. E. COFER,  
*Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

[Inclosure.]

MONTEREY, NUEVO LEON, *October 7, 1899.*

SIR: Your letter of October 3, 1899, received, and I at once set out in search of the desired information.

The quarantine precautions taken by the Mexican Government at Gonzalez are as follows: A medical representative from the State of Nuevo Leon is stationed at Gonzalez, whose duties are not to pass any one on the trains who has a temperature of one-half a degree above normal. If any passenger should have a temperature above the specified limit, he is detained for two days, and if at the end of that time his temperature is still above normal, he is detained again until all signs of fever shall subside. They also disinfect all cars leaving Tampico. The engineers and trainmen receive an injection of Saranelli's serum, and are not allowed to cross the small river at the other side of which is Tampico proper. \* \* \*

Respectfully, yours,

JOHN M. SLABEY,  
*Inspector, U. S. M. H. S.*

Asst. Surg. L. E. COFER,  
*U. S. Marine-Hospital Service, Mexico.*

*Report from Vera Cruz.*

VERA CRUZ, MEXICO, *October 6, 1899.*

SIR: I have the honor to make the following report for the week ended October 5: Cases of yellow fever, 9; deaths, 5; deaths from pernicious fever, 2; remittent, 6; tuberculosis, 3; all causes, 38. Of the yellow fever deaths, 4 were in the hospital and 1 in the city, though all the cases originate in the city and go to the hospital after being attacked.

The shipping continues free from infection, and the prevalent north winds have perceptibly cooled off the city.

Respectfully, yours,

SAML. H. HODGSON,  
*Acting Assistant Surgeon, U. S. M. H. S.*

The SURGEON-GENERAL,  
*U. S. Marine-Hospital Service.*

NICARAGUA.

*No yellow fever at Managua.*

MANAGUA, NICARAGUA, *September 15, 1899.*

SIR: I have the honor to inform you that no cases of yellow fever or other dangerous contagious diseases have been reported in this consular district up to this date.

Respectfully, yours,

CHESTER DONALDSON,  
*United States Consul.*

The SURGEON GENERAL,  
*U. S. Marine-Hospital Service.*

## PORTUGAL.

*Plague at Oporto.*LISBON, *September 25, 1899.*

SIR: I take the liberty of forwarding another series of sanitary bulletins from September 16 to September 22, 1899, both dates included, relating to the plague in Oporto.

In my dispatch No. 141 I send bulletins up to September 15 included. [The bulletins referred to report 7 new cases and 1 death from plague.]

Respectfully, yours,

J. H. THIERIOT,  
*Chargé d' Affaires.*

HON. SECRETARY OF STATE.

## RUSSIA.

*Device to prevent rats coming ashore from ships.*

[From advance sheets consular reports No. 549.]

Consul Heenan writes from Odessa, August 28, 1899:

I saw the other day a curious device attached to the mooring rope or cable of a steamer which was loading at this port. The cable was run through a piece of iron pipe about a foot in length, and welded on the end of the pipe was a flange or funnel which looked like the end of a trumpet, with the wide end facing the ship. The iron pipe was stuffed with oakum, to prevent it from slipping and also to prevent rats from passing through it. This novel construction was quite close to the ship. On inquiring what purpose this device served, I was informed that the Russian authorities furnished these appliances and obliged all ships to use them whenever they came from a port infected with the plague, in order to prevent the rats on the ship from coming on shore. It is generally conceded that the plague has been carried and spread by rats which have left ships coming from infected ports. It is known that rats make use of the cable to come on shore, and this iron pipe with its funnel-shaped arrangement was employed to prevent such visits, if possible. These devices are attached to each cable by which the ship is moored. In addition to this precaution, the master of the ship is obliged to take down his loading stages every night and erect them again the following morning, in order to prevent the rats from coming on shore during the night. I do not know whether this device is known to our sanitary authorities, and I send this description of it in the hope that it may be of service.

## TURKEY.

*Plague at Bassorah.*

The United States consul at Bagdad reports by cablegram as follows: BAGDAD, *October 16, 1899.*—Plague, Bassorah—*United States Consul.*

## URUGUAY.

*Quarantine regulations at Montevideo against plague.*

DEPARTMENT OF STATE,  
*Washington, D. C., October 14, 1899.*

SIR: I have the honor to inclose copy of a dispatch from the United States minister to Uruguay forwarding copy of the quarantine regula-



tions adopted at the Port of Montevideo to prevent the introduction of the bubonic plague.

Respectfully, yours,

DAVID J. HILL,  
*Acting Secretary.*

Hon. SECRETARY OF THE TREASURY.

MONTEVIDEO, URUGUAY, *August 28, 1899.*

SIR: Inclosed herewith I send you the regulations adopted by the health authorities of Buenos Ayres and Montevideo to protect those cities from the invasion of the bubonic plague.

Respectfully, yours,  
Hon. SECRETARY OF STATE.

WILLIAM R. FINCH.

[Inclosure.]

*Sanitary measures against bubonic plague.*

[Regulation adopted by the council of hygiene.]

The following are the regulations just adopted by the council of hygiene to protect Montevideo from invasion by the bubonic plague:

MONTEVIDEO, *August 26, 1899.*

The epidemic development of the bubonic plague having been proved in the city of Oporto, the national council of hygiene in use of the faculties conferred on it by article 3 of the law of October 31, 1895, in conformity with the sanitary council celebrated with the Argentine department of hygiene, and with superior authorization, resolves:

Article I. The port of Oporto is declared infected, and all the other ports of Portugal, including those of Maderia and the Azore Islands, and of those countries which do not sufficiently protect themselves, are declared suspected.

Art. II. Vessels proceeding from the said ports which bring a sanitary inspector and have a clean bill of health shall be disinfected and given free pratique. The passengers shall land at Flores Island Lazaret, where they shall be detained for the time necessary for the disinfection of their luggage.

Art. III. Vessels proceeding from suspected ports without a sanitary inspector and with a clean bill of health shall be submitted to sanitary observation for five days, or for ten days if from infected ports. In both cases the corresponding disinfections shall be performed.

Art. IV. Vessels that have had one or more suspected cases of bubonic plague fifteen days before arriving at this port shall undergo ten days' observation.

Art. V. Vessels that have had one or more suspected or proven cases of bubonic plague within fifteen days before their arrival shall undergo fifteen days' observation. In both cases the observation of the passengers shall count from the termination of the disinfection of their luggage.

Art. VI. The cargo shall be classified according to its procedure(?) that from suspected or infected ports being submitted to disinfection, and the rest given free pratique.

Art. VII. Correspondence from infected ports shall be submitted to disinfection, but that from suspected ports shall be landed without this formality.

Art. VIII. The council of hygiene shall telegraph to the Argentine authorities the result of the medical inspection practiced at Flores Island on vessels arriving from suspected or infected ports.

Art. IX. The Argentine sanitary authorities shall make a similar communication to those of Uruguay.

Art. X. No vessel shall be rejected from Uruguayan ports.

Art. XI. In case the bubonic plague appears in epidemic form on board any vessel, the Uruguayan and Argentine authorities shall agree on the corresponding measures.

Art. XII. The treatment indicated above may be modified by agreement with the Argentine authorities according to the progress of the epidemic.

Art. XIII. The present regulations shall come into force from this date.

Art. XIV. Publish for general knowledge.

JOAQUIN CANABAL,  
*President.*

GABRIEL HONORE,  
*Secretary.*

## FOREIGN STATISTICAL REPORTS.

**AFRICA**—*Cape Town*.—Month of August, 1899. Estimated population, 60,000. Total number of deaths, 167, including diphtheria, 5; measles, 31; whooping cough, 7, and 20 from phthisis pulmonalis.

**AUSTRIA**—*Brunn*.—Month of August, 1899. Estimated population, 82,660. Total number of deaths, 254, including 41 from phthisis pulmonalis.

**BAHAMAS**—*Dunmore Town*.—Two weeks ended September 29, 1899. Estimated population, 1,472. No deaths, and no contagious diseases.

*Governors Harbor*.—Two weeks ended September 30, 1899. Estimated population, 1,500. No deaths, and no contagious diseases reported.

*Green Turtle Cay—Abaco*.—Two weeks ended September 28, 1899. Estimated population, 3,900. No deaths, and no contagious diseases.

*Nassau*.—Two weeks ended August 2, 1899. Estimated population, 12,000. Number of deaths not reported. No contagious diseases reported.

**BRAZIL**—*Ceara*.—Month of August, 1899. Estimated population, 50,000. Total number of deaths, 101, including 11 from measles.

**BRITISH COLUMBIA**—*Vancouver*.—Month of September, 1899. Estimated population not reported. Total number of deaths, 21. No deaths from contagious diseases.

**CHILE**—*Antofagasta*.—Month of August, 1899. Estimated population, 14,000. Total number of deaths, 59, including 3 from phthisis pulmonalis.

**DENMARK**.—Month of August, 1899. Estimated population, 2,311,000. Total number of deaths, 25,935, including diphtheria, 748; enteric fever, 342; measles, 249; scarlet fever, 1,075; whooping cough, 1,202; cerebro-spinal meningitis, 8, and 383 from phthisis pulmonalis.

*Copenhagen*.—Month of August, 1899. Estimated population, 355,000. Total number of deaths, 4,858, including diphtheria, 182; enteric fever, 4; measles, 27; scarlet fever, 322; whooping cough, 109, and 75 from phthisis pulmonalis.

**DOMINICAN REPUBLIC**—*Puerto Plata*.—Six weeks ended September 30, 1899. Estimated population, 5,500. Total number of deaths not reported. No contagious diseases.

**GERMANY**—*Kehl*.—Month of August, 1899. Estimated population, 144,270. Total number of deaths, 312, including diphtheria, 1, and 2 from whooping cough.

**GREAT BRITAIN**—*England and Wales*.—The deaths registered in 33 great towns in England and Wales during the week ended September 30, 1899, correspond to an annual rate of 19.1 a thousand of the aggregate population, which is estimated at 11,404,408. The highest rate was recorded in Preston, viz, 27.9, and the lowest in Bradford, viz, 12.6.

*London*.—One thousand four hundred and fifty-six deaths were

registered during the week, including measles, 15; scarlet fever, 9; diphtheria, 44; whooping cough, 23; enteric fever, 19, and diarrhea and dysentery, 81. The deaths from all causes correspond to an annual rate of 16.7 a thousand. In Greater London 1,983 deaths were registered, corresponding to an annual rate of 15.8 a thousand of the population. In the "outer ring" the deaths included 15 from diphtheria, 5 from measles, 1 from scarlet fever, and 8 from whooping cough.

*Ireland.*—The average annual death rate represented by the deaths registered during the week ended September 30, 1899, in the 22 principal town districts of Ireland was 27.0 a thousand of the population, which is estimated at 1,053,188. The lowest rate was recorded in Queenstown, viz, 0.0, and the highest in Waterford, viz, 45.8 a thousand. In Dublin and suburbs 223 deaths were registered, including diphtheria, 1; enteric fever, 11; measles, 28, and whooping cough, 2.

*Scotland.*—The deaths registered in 8 principal towns during the week ended September 30, 1899, correspond to an annual rate of 18.4 a thousand of the population, which is estimated at 1,587,414. The lowest mortality was recorded in Leith, viz, 14.1, and the highest in Greenock, viz, 24.8 a thousand. The aggregate number of deaths registered from all causes was 562, including diphtheria, 8; measles, 4; scarlet fever, 5, and whooping cough, 5.

**JAMAICA.**—Two weeks ended September 30, 1899. Estimated population, 694,866. Number of deaths not reported. No contagious diseases reported.

*Port Antonio.*—Two weeks ended September 23, 1899. Estimated population not reported. Number of deaths not reported. The health of the port is good.

**JAPAN—Nagasaki.**—Twenty-one days ended September 10, 1899. Estimated population, 131,000. Number of deaths not reported. Four deaths from enteric fever; several cases of plague on vessels in quarantine, and none in port or district.

**JAVA—Batavia.**—Two weeks ended September 2, 1899. Estimated population, 150,000. Number of deaths not reported. No contagious or epidemic diseases.

**MALTA.**—Two weeks ended August 31, 1899. Estimated population, 180,328. Total number of deaths, 120, including enteric fever 3, and 3 from whooping cough.

**MOROCCO—Tangier.**—Two weeks ended September 30, 1899. Estimated population, 30,000. Total number of deaths not reported. General health fair.

**PARAGUAY—Asuncion.**—Three weeks ended August 24, 1899. Estimated population, 45,000. Total number of deaths, 65, including 4 from enteric fever.

**WEST INDIES—Antigua—St. John.**—Month of September, 1899. Estimated population, 15,000. Total number of deaths, 146. Dysentery epidemic.



## MORTALITY TABLE, FOREIGN CITIES—Continued.

Cities.	Week ended.	Estimated population.	Total deaths from all causes.	Deaths from—												
				Tuberculosis.	Plague.	Cholera.	Yellow fever.	Smallpox.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.	Whooping cough.		
Nottingham.....	Sept. 30	250,000	24							2	2	1				
Nuevo Laredo.....	Oct. 7	6,000	4	1												
Nuremberg.....	Sept. 9	233,500	122								1				8	
Odesa.....	Sept. 23	414,800	180							4	1	1				
Palermo.....	do.	300,000	109							1	1	1				
Panama.....	Oct. 3	16,000														
Plymouth.....	Sept. 30	99,848	30									1				
Prague.....	Sept. 23	190,260	97								3	2				2
Puerto Cortes.....	Oct. 4	2,000	0													
Rotterdam.....	Sept. 30	317,062	112									1				
St. Georges, Bermuda.....	do.	2,150	0													
St. John, New Brunswick.....	Oct. 14	45,000	15	3												
St. John, West Indies.....	Sept. 30	15,000	38													
St. Petersburg.....	Sept. 16	1,267,023	530							22	15	24	18			10
St. Stephen, New Brunswick.....	Oct. 7	3,000	0													
Santa Cruz.....	Sept. 23	33,000	16					2								
Sheffield.....	do.	362,368	180							11	3	11	4			
Singapore.....	Aug. 26	97,111	137	20				3								
Smymna.....	Sept. 24	300,000	35							2						
Solingen.....	Sept. 23	15,142	13									1				1
Southampton.....	do.	103,168	60													
Do.....	Sept. 23	103,168	33							2		1				
Stettin.....	Sept. 23	153,000	34							1	3	5				
Stuttgart.....	Sept. 23	162,984	68													
Trapani.....	Sept. 23	45,095	18													
Tuxpan.....	Oct. 2	5,000	19				3									
Utiila.....	Sept. 23	800	0													
Do.....	Sept. 30	800	0													
Venice.....	Sept. 16	172,288	64													
Do.....	Sept. 23	172,288	46												2	
Vera Cruz.....	Oct. 5	25,000	38	3			5									
Victoria, B. C.....	Sept. 9	20,000	7													
Do.....	Sept. 16	20,000	3													
Do.....	Sept. 23	20,000	4													
Do.....	Sept. 30	20,000	4													
Warsaw.....	Sept. 23	601,438						4	2	1	9	3	15			7
Winnipeg.....	Oct. 9	45,000								2						
Yokohama.....	Sept. 9	189,455														
Zurich.....	Sept. 23	164,425	67									1	1			

By authority of the Secretary of the Treasury :

WALTER WYMAN,  
Surgeon-General U. S. Marine-Hospital Service.