

PUBLIC HEALTH REPORTS.

New plan of campaign against yellow fever.

By Dr. E. LICEAGA,

President of the Superior Board of Health of Mexico.

(See Public Health Reports of February 12, 1904, pages 221-227, "Measures recommended for adoption by the United States and Mexico for the prevention of yellow fever.")

The Department of the Interior has been pleased to approve of the following initiative of the president of the supreme board of health for continuing the campaign against yellow fever:

It would appear that the series of communications which I have presented to your Department on behalf of the board of health, with the idea of attempting to combat the epidemics of yellow fever, would have carried conviction to all minds; but, nevertheless, experience has shown me that this has not taken place, and that it is necessary to demonstrate still more clearly the teachings of science and the results of experience gained in foreign countries as well as in our own. I thus find myself under the necessity of again presenting to the consideration of my countrymen the present condition of this question.

If we consider it from the humanitarian point of view, the loss of life ought to impose on us the obligation of suppressing a disease that every year causes numerous victims in persons of all ages and conditions, but more especially in those that have reached middle age. Another consideration is that of economy. If every man has a certain value for the State, the loss of lives withdraws laborers from agriculture, industry, and commerce, and this loss directly influences to the injury of public wealth, and even the disease in itself, besides the suffering that it occasions, temporarily withdraws the man from the work by which he gains his living and at the same time contributes to the public wealth.

The development of our ports has suffered serious delay, as is proved by the history of Tampico. During the twenty years, from 1878 to 1898, during which no yellow fever was found, its progress was very rapid, so much so that it was expected it would become a powerful rival to Vera Cruz, when the epidemic of 1898 appeared to delay the rapidity of the progress that had commenced.

The reappearance of yellow fever in the month of May of this year led to the emigration of so many people that laborers became very scarce for the port business, for the industry of the town, and even for attending to the necessary provisioning of those who remained. The port of Progreso, which on account of its situation near the island of Cuba and its close relations with this island and the United States

ought to have reached a high degree of prosperity, finds that prosperity detained through the fear of yellow fever. The port of Vera-cruz has been unable to advance or to reach the degree of prosperity which it had a right to expect in view of its commercial importance, a position with respect to the rest of the country and the facilities which its harbor works afford to trade, because it is the principal focus of the endemia of this disease.

The terror that is inspired by the epidemics of yellow fever keeps thousands of foreigners from the coast lines along the Gulf, who would be willing to go there and elevate the agriculture of those regions to the height which it has reached in similar districts. As I have already stated, the harbor works which were intended to furnish shelter for the ships and allow them to moor alongside of the wharves have remained practically useless, since the United States and the Island of Cuba declare that the ships which lie alongside the wharves are infected, whilst those which remain out in the bay are immune. What is the use of having undertaken the enormous expenses to make Vera Cruz a good port if the nations which have the most frequent and important relations with that port require their vessels to remain at anchor out in the bay, so as to avoid being submitted to strict quarantine such as is imposed in Habana?

I might extend myself very much further in considerations of this character, but those which I have already pointed out are sufficient to show the injuries that our agriculture, industry, and foreign commerce suffer through the existence of yellow fever, and the constant humiliation that is put upon us by neighboring nations, which, formerly tolerant, when their conditions were similar to ours, are now very exacting when they have amended their own conditions.

If the efforts made by the scientific congresses, if the resolutions of the sanitary conventions have been unable to liberate us from the hard treatment which is given to our commercial ports, we have only one way of liberating ourselves from this tyranny, and that is to exterminate yellow fever from our soil.

But is this possible? It certainly is, and to demonstrate that fact we will enter into considerations of a strictly technical character.

DOCTRINE OF THE TRANSMISSION OF YELLOW FEVER.

Doctor Finlay, a distinguished physician of Habana, was the first to suspect that yellow fever could be transmitted by the bite of a mosquito which was supposed to be the *Culex fasciatus*, but this idea was not taken into consideration at the time when he made his first studies on the subject, and it was necessary for the military intervention of the United States to be established in the island of Cuba for that powerful nation to understand that without the extermination of the disease that had exhausted the Spanish army and killed off the enormous number of immigrants of that nation, the military occupation of the island could not be made effective. With this idea it put all its scientific men to work, and after a series of experiments that will be always remembered in the history of humanity, these men were able to prove in the most conclusive manner that all the ideas up to that time held as to the etiology of yellow fever were inexact. These studies have been confirmed in other places; they have been ratified in our own port of Vera Cruz by an American commission which carried out

its labors during last year and that have now been sanctioned by the Pasteur Institute, whose members have a world-wide reputation.

This doctrine can be expressed in a very few words: When a yellow fever patient is stung by the *Stegomyia fasciata* mosquito, this insect becomes infected within a period of not less than twelve days, and once it is infected it is capable of transmitting the disease to a healthy individual who is not immune within a period of not less than five days, and that in exceptional cases may reach six days. From this knowledge we find that there are three indispensable factors in the appearance of yellow fever: Firstly, a person suffering from that disease; secondly, a mosquito of the genus *Stegomyia fasciata*, which will transmit the disease; and, thirdly, healthy persons who do not enjoy immunity and can be inoculated with the disease.

The natural history of the mosquito in question has been the object of profound studies on the part of American and Cuban physicians, and from this study we have acquired the following data: First, that the *Stegomyia fasciata* mosquito deposits its eggs in clean water; second, that, when transformed into larvæ, these require to rise to the surface of the water every minute in order to breathe the atmospheric air; third, that the duration of the life of these infected insects may last up to one hundred and fifty-four days; fourth, that these insects are continually found in human habitations; fifth, that during the winter they preserve their fatal property of infection, and that when the summer comes back they are again capable of infecting individuals who are not immune.

At the same time that the above knowledge has been obtained, we have also reached the conviction that the measures which are really adapted for the transmission of the disease have not as yet been fully demonstrated.

PROPHYLACTIC MEASURES IN VIEW OF THE TRANSMISSION OF YELLOW FEVER BY THE MOSQUITO.

The precautions that were formerly taken to ward off yellow fever, the greater part of which were of an empirical character, have been substituted by others, which are based on the positive information I have above mentioned. In fact, it is no longer necessary to think that the origin of the disease is found in the soil or in the air, and in certain parts of the ships, in the clothing that is stained by the dejecta, or in contact with the patients. Consequently, we must not proceed as formerly. The prophylactic measures of the present date consist in the separation of the three principal elements above referred to; the yellow fever patient, the mosquito that, by sucking his blood, infects itself and thus becomes capable of transmitting the disease, and the nonimmune, who is in a condition to receive it. As it would be humanly impossible to separate all the healthy persons who are capable of contracting the disease, sanitary science confines its efforts to the two first elements.

In order that a man suffering from yellow fever may no longer be dangerous, it is necessary to isolate him, but not in the same manner as persons are isolated who suffer from other diseases. The isolation in this case is for the purpose of preventing his being stung by mosquitoes, and this condition is easily realized by covering all the windows with fine wire netting, that will prevent the entrance of the insect, and by

placing double doors with wire netting at the entrance of the room in which the patient is isolated, so arranged that when the outer door is opened, the inner one is necessarily closed and can only be opened when the outer door is closed. A chain of a fixed length will permit this idea to be carried out. A room under these conditions is that which ought to be dedicated to the isolation of yellow-fever patients. Any other method that does not render it impossible for the mosquito to come into contact with the patient is entirely useless and should be abandoned. It is therefore sufficient to prevent the development of yellow fever in any place as an epidemic for the first patient to be isolated as soon as he reaches the locality, because it is necessary to understand that experimental science has proved that from the first to the fourth day of the disease is when the persons suffering from yellow fever most certainly infect the *Stegomyia fasciata* mosquito. In this way we come to the other rule, that an individual ought to be isolated from the moment that he presents any feverish symptoms, whatever may be the disease that produces them.

If, therefore, we can count on a place dedicated to suspected patients, (and they all are when they have fever) such patients can not infect the mosquito, and the further course of the disease shows whether the suspected person is or is not suffering from yellow fever. If he is, he is at once passed into the special ward, which is arranged as above stated, in order that he may be there isolated until his sickness terminates. His contact with the other suspected persons in whose company he has been, has presented no danger for them, seeing that they were all in a room into which the mosquitoes could not penetrate; these insects could not carry the disease to them.

It is also indispensable to destroy the mosquitoes that have been infected, and for this purpose we do not employ the methods of disinfection that are commonly used for transmissible diseases. In this case the objects of the disinfection are clearly defined, and simply consist in the destruction of the mosquito. The three methods that generally recommend themselves are the following: The damp vapors of sulphurous acid, and the combustion of chrysantema and tobacco. In order to employ these methods it is indispensably necessary to close the doors and windows and paste paper over all openings of any kind, however small they may be, that communicate with the outside air; that a sufficient quantity of chrysantema, sulphur, or tobacco be burnt, and the room kept closed for the necessary period, after which the doors are cautiously opened and the dead or sick mosquitoes collected; and to avoid the chance of any of them surviving, they should be incinerated. Of the three substances above indicated sulphurous acid is the only true insecticide, and the only one which we recommend. Later on we will give the proportions in which the material is to be burnt, in relation to the capacity of the room which it is desired to disinfect.

But it is not enough to make war on the mosquitoes that have already been infected; it is necessary to undertake their extermination in their native habitat, and for this purpose we utilize the information given to us by natural history, that the mosquitoes of the genus *Stegomyia fasciata* deposit their eggs only in clean water. This water is found in the dwellings, in reservoirs of more or less capacity, and also forms ponds on the surface of the ground. In order to prevent the insects from depositing their eggs in those recep-

tacles of clean water, it is only necessary to cover them with fine wire netting, such as that which is employed to cover the doors and windows of the rooms in which patients are isolated. If the water reservoirs are of large size, or through any circumstance can not be covered, a thin layer of petroleum in a crude state is spread over them. This acts in two ways: As a mechanical preventive against the laying of the eggs in the water and as a destroyer of the larvæ, as shown to us by the natural history of these insects, that these larvæ require to come to the surface every minute in order to breathe the air. The layer of crude oil mechanically prevents this rising to the surface and the larvæ die of asphyxia.

Here we have the practical methods that will prevent the development and propagation of yellow fever.

METHODS FOR UTILIZING THE RESOURCES OF SANITARY SCIENCE FOR PREVENTING THE SPREAD OF THE DISEASE IN ANY TOWN.

In the case of yellow fever hygiene pursues three objects: The isolation of the patient, the destruction of the infected mosquito, and the prevention of the development of fresh mosquitoes of the genus above mentioned.

ISOLATION OF THE PATIENTS.

In order for the isolation to be efficacious it must commence from the moment that the disease appears, and the resources on which we can count for knowing that a patient is suspected of having yellow fever are the following:

First. The obligation, which lies on all physicians under the sanitary code of the United Mexican States, of notifying the sanitary authorities of all patients who are suspected of having yellow fever.

Second. The obligation, which is also legal on all heads of families, chiefs of workshops, colleges, schools, barracks, etc., to give the same notice.

But as it might happen that the above-named persons should neglect the fulfillment of their duty and not make the declaration which is required by law, and that through this omission a yellow fever patient might be exposed to the sting of the mosquitoes, strict and continued domiciliary visits have been provided for. The experience that has been acquired in Habana, and that which we have had in Mexico during the epidemic of bubonic plague that prevailed in Mazatlan, have shown that any patient can be discovered from the moment that he commences to have fever, always provided that a sanitary corps is organized under the direction of persons who are properly instructed in the way to carry out these investigations. Some members of the sanitary police have reached a high grade of perfection in the fulfillment of this task, and they will be able to give instruction in the different localities that are liable to an invasion by the disease.

The declaration of the case, or its discovery by the domiciliary visit, should be followed by the immediate isolation of the patient in the suspected department. By acting in this manner the mosquitoes would have no time or opportunity to sting the patient. But to avoid even the possibility of such a thing happening in any place that is threatened with an epidemic, all the nonimmunes should be recommended to keep themselves covered at night by mosquito nettings, and informed

of the dangers to which they are exposed if they do not observe this simple recommendation.

As isolation is the fundamental basis of the struggle against an epidemic, it is necessary to make a careful study of the way in which it is to be carried out. If all the inhabitants of a town were educated and sufficiently cultured to properly understand the doctrine of the transmission of yellow fever, the general recommendations above given would be sufficient for each family to undertake the isolation of its patient, and to do so conscientiously, shutting him up in a room whose doors and windows would be provided with wire netting, and that would carefully and absolutely prevent the intrusion of any mosquito that could sting the patient; but, unfortunately, this special education is not to be found in the great majority of cases, and it becomes indispensably necessary for the public authorities to intervene in order to take the place of this want of special education.

The way in which the methodical and efficacious isolation is carried out in the hospitals under the direction of an intelligent medical staff that thoroughly understands its mission and that is anxious to comply with its duty, as well as assisted by subordinate employees who are thoroughly penetrated with the same ideas, is what ought to serve as an example or objective lesson to the general public. Besides the advantages above indicated, isolation in the hospital facilitates the administration of the medicine, the distribution of the meals at the hours prescribed by the physician, and it is a case in which discipline governs and is also of economical results for the public administration, because experience has shown the difficulties of attending the patients at their homes and the increased expenses that it imposes on the public funds.

At the same time, as there are persons of culture and means who can pay for their attendance in some place where a collective isolation is carried on, special hospitals will be established in which patients of this class will be isolated, and only under special and exceptional circumstances, and with the consent of the sanitary authorities, will any patient be allowed to be isolated in his own home. This individual or collective isolation is an obligation imposed on all citizens by the federal sanitary code, so that no person, whatever may be his age, sex, social condition, or nationality, can escape this obligation; and if at any time we have a full justification of the axiom that the public health is the supreme law, it is when it is a case of saving the community from the injury that an individual might cause it, by not freely submitting to the provisions in force.

In one word, the isolation of patients in the case of epidemics such as yellow fever is absolutely obligatory.

If we proceed to this isolation with promptness and vigor, we can absolutely make certain that a yellow-fever epidemic will be unable to spread in any locality.

DESTRUCTION OF INFECTED MOSQUITOES.

As above stated, this operation is carried out by hermetically closing the room in which a patient has been who could have been stung, covering all the cracks in the doors and other parts by pasting paper thereon and burning sulphur in the proportion of 40 grams per cubic meter of space in the room, arranging one or more vessels which con-

tain burning coals in a perfect state of combustion, so that when sulphur is thrown on them sulphurous acid is produced in such quantity as to saturate the atmosphere of the room.

After a lapse of at least four hours the room is opened, and once the atmosphere is rendered fit for breathing, all the mosquitoes which have fallen to the floor will be swept up and immediately incinerated. This operation, which is in itself very simple, nevertheless requires to be carried out by persons who are accustomed to its execution, and for this reason it will be necessary to organize a disinfecting corps under the orders of an experienced chief, who will carry out this operation in every house in which there has been a yellow fever patient.

DESTRUCTION OF THE LARVÆ OF THE *STEGOMYIA FASCIATA*.

From the teachings of natural history, as above mentioned, it is necessary to commence by emptying the reservoirs of clean water in which the larvæ of these insects have developed; rubbing the inside of the vessels so that no live larvæ will remain; pouring clean water into them and covering them with a close-fitting cover or a close wire netting, the object of which will be to prevent the mosquitoes from depositing their eggs in such vessels; but the water reservoirs of a larger size, such as ponds, tanks, etc., and the small ones that may accidentally appear after the rain, and even the small hollows that are left in the ground by passing animals, should be covered with a thin layer of crude petroleum.

As before stated, the object of this is to prevent the insects from laying their eggs in the water, and in those places in which the eggs are already laid, to prevent the larvæ from rising to the surface in order to breathe the air. In order to carry out this operation, it becomes necessary to form a third corps which will visit from house to house in order to investigate the condition of the water reservoirs, empty out those which already contain larvæ, clean them perfectly, fill them up with clean water, and cover them with a closed cover or metallic net, and spread petroleum in the proportion of 30 grams per square meter of surface on the other water reservoirs above mentioned. In those places where water may be thrown out that contains larvæ, it will be necessary to take the precaution of spreading petroleum in order to prevent their development. Although these operations are very simple, they require to be carried out by persons who are accustomed to execute them perfectly, and hence comes the necessity of forming the third corps, which will be exclusively dedicated to this object.

I have above given the method that should be put in practice for preventing the development and spread of an epidemic in any locality that is already invaded or in which the epidemic is commencing.

MEASURES INTENDED TO PREVENT THE SPREAD OF THE DISEASE FROM AN INFECTED TO A HEALTHFUL LOCALITY.

Men, like animals, always show a tendency to emigrate as soon as they discover the possibilities of contracting a disease. This emigration ought not to be prevented, because it diminishes the number of persons in the locality who run the risk of an attack, but on the condition that no suspected or sick person who could carry the epidemic

to a fresh locality be allowed to leave. In order to prevent this, a committee of physicians is organized to examine all persons who attempt to leave the town.

In order that this examination may be complete, besides the other means of investigation employed by the physician, he should add the use of the thermometer, as any person who may be found in a feverish condition not only ought not to be allowed to depart, but he ought also to be isolated in the suspected department. Should the investigation show that the person who desires to depart is not sick, he will be granted a passport that will state his name, age, sex, profession, or occupation, and also that he is in good health and not suffering from any feverish symptoms, the hour at which the inspection was made, and his destination. The medical committee will keep a register showing all these data and will duly advise the political and sanitary authorities, if there are any, of the place to which the passenger is traveling.

The person traveling under passport will be bound to present it in the sanitary stations through which he may pass and at the termination of his journey, so that he may be under surveillance for five days.

As can be seen, the object of this measure is to prevent any sick or suspected person from leaving his town and at the same time to keep a watch over the passengers who could carry with them the germs of the disease either on the road or to their place of destination. In order to make these precautions successful, it will be necessary to apply them to all who travel by railroad, carriage, on horseback, or on foot, and to be inflexible in the punishment of all who contravene these regulations.

In order to prevent the infected mosquito from finding a lodging in railroad or ordinary coaches, or in any other kind of vehicle, these will be disinfected by means of sulphurous acid before they are allowed to depart, and this disinfection will be continued in every sanitary station. The disinfection of the box cars and goods is only for the purpose of destroying the mosquitoes that may have lodged on the walls of the cars or on the covers of the goods, and can be carried out without opening the cars by introducing, through an aperture opened in one of the sides or through a small door, sulphurous-acid vapor that is generated outside in a special apparatus and carried into the inside by means of a hose or metallic tube. When it is a question of disinfecting cars that contain delicate tissues, metallic objects, etc., that could suffer deterioration through the action of sulphurous acid, it will be necessary to employ hydrocyanic acid, which is a powerful insecticide, the operators strictly complying with the rules of the special instructions that have been formulated by the board, so as to avoid the accidents that might take place through the imprudent handling of this dangerous substance.

The railroad traffic, which appears to facilitate the transmission of disease, would not be so if the rules above given are established; and further security can be obtained if the passengers are transshipped to other coaches before entering cities that are immune, if sanitary stations are established as ordered by the sanitary code, for the purpose of exercising a vigilance over the passengers, and the disinfection operations are repeated in the coaches and box cars that carry the baggage or merchandise. It is necessary not to forget that these operations, as regards yellow fever, have no further object than that

of destroying the infected mosquitoes, and consequently the operation is reduced to its most simple form.

The sanitary stations, which as already stated are intended to exercise a vigilance over the passengers who travel by railroad, coach, on horseback, or on foot, and the detention therein of the passengers who are either sick or suspected of being so, are sufficiently efficient when well established. The results that were obtained by this means in the State of Sinaloa when the port of Mazatlan and neighboring villages were invaded by the bubonic plague have convinced us of their utility, with the sole condition that the staff employed in these stations will be composed of upright physicians who are thoroughly penetrated with the duties of their office and have the assistance of an expert staff.

In order that all these measures may obtain the desired results, it is indispensable that their action should be efficacious and timely; that they shall be under the orders of only one authority and executed by a properly instructed staff who is zealous in the performance of its duty.

The example given to us by what happened in Mazatlan is a teaching which we must not forget. Through the supreme board of health, the Executive of the Union studied the measures which ought to be adopted, and once a plan was formed, its execution was intrusted to that board, under the vigilance of the Department of the Interior.

The governor of the State of Sinaloa, whose conduct will always be worthy of the highest praise, constituted himself the intelligent and self-denying instrument to carry out the orders of the federation, and, following his example, the whole of the State and municipal authorities, the charitable board, and private individuals, formed a perfectly organized corps under the direction of physicians, who gave the admirable example of exterminating a disease that was so much feared as the bubonic plague within a period of only six months. The results obtained lead the board to hope that if your department will address itself to the governments of those States in which yellow fever prevails, propose to them the adoption of the plan of defense against this disease, as above sketched, and request their consent to carry it out under the same conditions as those that prevailed in the State of Sinaloa during the campaign against the bubonic plague, the same successful results will be obtained as in the other case.

The board has full confidence that the interested states will accept the proposal made to them by the Executive, because that of Veracruz has for the past year appropriated a sum to the struggle against yellow fever, and in the present year has requested the federal government to confide to the board the direction of the campaign against that disease, while the state of Tamaulipas has followed that example and also solicited the intervention of the board. The state of Yucatan, which has undertaken such a vigorous campaign against that disease, and that feels the advantages derived by its interior and foreign trade as soon as its soil is cleared of yellow fever, will undoubtedly accept the initiative of the Executive of the Union.

The States of Campeche, Tabasco, Chiapas, Oaxaca, Nueva Leon, and San Luis Potosi, in which yellow fever is not endemic, but into whose territory it spreads whenever it takes an epidemic form, will, I believe, not hesitate to take part in this convention, seeing how inter-

ested they are in not permitting that disease to disturb their communications or the progress into which their people have lately entered. The board trusts that none of the above-mentioned States will resist the conviction that, even if their isolated efforts could be sufficient to stamp out the disease in any particular locality, they would be incapable of stamping it out from our territory, unless the direction of the campaign is entirely handed over to the federal district. And lastly, the board feels certain of counting on the cooperation of the whole of the States in this undertaking, because it is work that is at the same time necessary to the welfare of humanity, to civilization, and to the moral and material progress of Mexico.

MEXICO, *November 13, 1903.*

Protection of fever patients against mosquitoes.

Resolution adopted by the Louisiana State board of health, March 1, 1904.

NEW ORLEANS, LA., *March 3, 1904.*

To the physicians of Louisiana.

GENTLEMEN: In compliance with instructions from the Louisiana State Board of Health I have the honor to transmit for your information the following copy of resolutions adopted at the regular meeting, held March 1, 1904:

Whereas it has been proven that malarial fever and yellow fever are transmitted by mosquitoes, and that other fevers may possibly be transmitted by them, be it

Resolved, That the Louisiana State board of health most emphatically urges all physicians and all persons attending patients with fever to carefully keep a well-tucked bar over such patients, especially during the first four days of their illness, and as far as practicable to destroy mosquitoes about the patient's bed and room.

This precaution should be particularly observed from April 1 to November 30.

Resolved further, That a copy of these resolutions be sent to all the health officials and all the physicians in the State.

Resolved further, That a copy of these resolutions be sent also to all the newspapers of the State, with special request to publish the same.

In making this appeal to the physicians and the press of the State, and to an intelligent public, it is hoped by the Board that even should any mild case of fever of a type transmissible by mosquitoes escape diagnosis, that being the greatest source of danger, the adoption of the simple precautions recommended in the resolutions may prevent further spread of the disease.

Newspapers receiving a copy of this are earnestly requested to publish same with suitable editorial comment.

Respectfully,

G. FARRAR PATTON, M. D., *Secretary.*

Approved:

EDMOND SOUCHON, M. D., *President.*

[Reports to the Surgeon-General, Public Health and Marine-Hospital Service.]

Summary of work in Chinatown, San Francisco, for the week ended March 5, 1904.

The following is received from Passed Assistant Surgeon Blue, under date of March 7:

Week ended March 5.

Buildings reinspected.....	207
Rooms	1, 615
Persons inspected	217
Sick	39
Sick prescribed for at Oriental Dispensary.....	13
Clinical diagnosis plague (provisional).....	1
Dead examined	6
Necropsies	1
Rats examined bacteriologically.....	34
Number showing pest infection.....	1
Places limed and disinfected	904
Times streets swept.....	3
Sewers flushed	16
Notices served to abate plumbing nuisances	20
Plumbing nuisances abated.....	12
Undergoing abatement	24
Total number of plumbing inspections	183

Plague case No. 118 bacteriologically confirmed.

SAN FRANCISCO, CAL., *March 8, 1904.*

WYMAN, *Washington:*

Case 118, reported February 17 and February 20, Mrs. Louis Rossi, Italian housewife, aged 45, is bacteriologically confirmed.

BLUE.

Smallpox reported in Escondido, Cal.

On February 23 Assistant Surgeon Roberts at San Diego reported by telegram the supposed presence of smallpox at Escondido. On March 3 he reported as follows:

Dr. Valle, the county health officer, has returned from his inspection, and says that there is but one case, and that it is isolated in a tent in a very thinly settled part of the county. The local authorities think they have the disease well under control, and that there is no further cause for apprehension.

Transactions on account of yellow fever at Laredo, Tex.

The following telegram has been received from Acting Assistant Surgeon Frick, at Laredo, Tex.:

Summary report for week ended March 5: Fumigated, Laredo, 6 houses, containing 17 rooms; 67 houses, containing 94 rooms, along the International and Eagle Pass railways, from 6 to 18 miles out. This morning am sending the fumigators to Lomaprieta, Tordillo, and points between Minera and Palm Fox. This trip will require a wagon travel of about 100 miles. Request authority to ship some heavy material to Minera by rail. Weather during week somewhat disagreeable.

INSPECTION SERVICE, MEXICAN BORDER.

Inspection at El Paso, Tex.

Acting Assistant Surgeon Alexander reports, February 27, as follows: Week ended February 27, 1904. Inspection Mexican Central passengers, 215; inspection excursion train, 28; inspection Mexican immigrants, 72; inspection Mexicans imported in bond, 72; inspection Syrian immigrants, 6; disinfection soiled linen imported for laundry, 419 pieces; disinfection baggage, blankets, etc., from Aguas Calientes, 37 pieces; vaccination of immigrants and children, 11.

Inspection at Laredo, Tex.

Acting Assistant Surgeon Hamilton reports, through Acting Assistant Surgeon Frick, February 29 and March 3, as follows: Week ended February 27, 1904. Passenger trains from Mexico inspected, 16; persons entering from Mexico inspected, 1,697; immigrants from Mexico inspected, 5; persons vaccinated upon entry, 8; Pullman coaches disinfected, 8; certificates accompanying one corpse inspected and allowed entry.

Summary of inspection for the month of February, 1904.

Trains from Mexico inspected, 63; persons from Mexico inspected, 4,086; immigrants inspected, 39; persons vaccinated, 45; Pullman coaches disinfected, 31; day coaches disinfected, 2; certificate of corpses inspected and passed, 2.

Summary of fumigation work performed at Laredo during the month of February, 1904.

Total number of houses fumigated, 248; rooms, 552. Of these, 6 houses and 17 rooms were within the city limits. By request 4 houses, in which deaths from tuberculosis had occurred, were fumigated.

Statistical reports of States and cities of the United States—Yearly and monthly.

COLORADO—*Denver*.—Month of December, 1903. Estimated population, 175,000. Total number of deaths, 260, including diphtheria 3, enteric fever 5, scarlet fever 5, and 56 from tuberculosis.

CONNECTICUT—*Stamford*.—Month of February, 1904. Estimated population, 18,000. Total number of deaths not reported. No deaths from contagious diseases reported.

GEORGIA—*Columbus*.—Month of February, 1904. Estimated population, 19,303—white, 10,276; colored, 9,027. Total number of deaths, 26—white 11, colored 15—including enteric fever 1, whooping cough 1, and 3 from phthisis pulmonalis.

ILLINOIS—*Belleville*.—Three weeks ended February 27, 1904. Estimated population, 19,000. Total number of deaths, 24, including enteric fever 1, and 3 from phthisis pulmonalis.

Peoria.—Month of February, 1904. Census population, 56,100. Total number of deaths, 78, including diphtheria 4, and 3 from tuberculosis.

MASSACHUSETTS—*Worcester.*—Month of January, 1904. Estimated population, 127,286. Total number of deaths, 174, including diphtheria 2, and 27 from tuberculosis.

MICHIGAN.—Reports to the State Board of Health, Lansing, for the week ended February 27, 1904, from 65 observers, indicate that phthisis pulmonalis, diphtheria, remittent fever, and meningitis were more prevalent, and smallpox was less prevalent than in the preceding week.

Meningitis was reported present at 4, whooping cough at 14, diphtheria at 47, enteric fever at 50, pneumonia at 59, measles at 73, scarlet fever at 83, smallpox at 88, and phthisis pulmonalis at 208 places.

Danger from typhoid fever—Warning to cities and villages having a general water supply.

The bulletin issued by the Michigan State board of health for the month ending February 27, 1904, indicates that typhoid fever was much more prevalent than the average for the corresponding month in the ten preceding years. Of the reports received more than twice the average proportion stated the presence of the disease. A contamination of the water supply would account for the unusual prevalence of this disease. In winter that does not usually occur in country districts, the contents of privies being frozen so they can not leach into wells. The unusual reports of typhoid fever came from cities having a general water supply. The inference is that these places are using water from a polluted reservoir, river, or lake, and it is earnestly suggested that the local authorities should promptly notify the citizens to boil the drinking water.

MISSOURI—*St. Louis.*—Month of January, 1904. Estimated population, 645,000; white, 605,000; colored, 40,000. Total number of deaths, 1,008; white 906, colored 102, including diphtheria 7, enteric fever 19, scarlet fever 13, whooping cough 1, and 126 from tuberculosis.

NEW HAMPSHIRE—*Franklin.*—Month of February, 1904. Estimated population, 6,000. Total number of deaths, 15, including diphtheria 1, and 1 from enteric fever.

NEW YORK—*Saratoga.*—Month of February, 1904. Estimated population, 12,119. Total number of deaths, 27, including 4 from tuberculosis.

NORTH CAROLINA—*Charlotte.*—Month of February, 1904. Estimated population, 30,000. Total number of deaths, 22, including enteric fever 1, and 3 from tuberculosis.

PENNSYLVANIA—*Columbia.*—Month of February, 1904. Estimated population, 13,500. Total number of deaths, 19, including 1 from enteric fever.

Pottsville.—Month of February, 1904. Estimated population, 17,210. Total number of deaths, 40, including 5 from diphtheria.

VIRGINIA—*Pocahontas.*—Month of February, 1904. Census popu-

lation, 2,789. Total number of deaths not reported. One death from enteric fever reported.

WISCONSIN—*Milwaukee*.—Month of January, 1904. Estimated population, 325,000. Total number of deaths, 368, including diphtheria 11, enteric fever 5, scarlet fever 6, and 39 from tuberculosis.

Report of immigration at Boston.

OFFICE OF THE COMMISSIONER OF IMMIGRATION,
Boston, Mass., February 27, 1904.

Number of alien immigrants who arrived at this port during the week ended February 29, 1904; also names of vessels and ports from which they came.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 21	Boston	Yarmouth, Nova Scotia	61
21	Preston	Port Limon, Costa Rica	1
22	Ultonia	Liverpool, England	237
22	Sandisfield	Cardiff, Wales	1
22	Romanic	Italian ports	584
22	Mancuria	Port Lagoon, Nicaragua	1
25	Bohemian	Liverpool, England	4
25	Boston	Yarmouth, Nova Scotia	111
26	Harlow	Halifax, Nova Scotia	21
26	Pomeranian	Glasgow, Scotland	3
26	Saxonia	Liverpool, England	532
27	Kansas	do	4
	Total		1,560

GEORGE B. BILLINGS, *Commissioner.*

OFFICE OF THE COMMISSIONER OF IMMIGRATION,
Boston, Mass., March 7, 1904.

Number of alien immigrants who arrived at this port during the week ended March 5, 1904; also names of vessels and ports from which they came.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 28	Frutira	Montego Bay, Jamaica	3
28	Boston	Yarmouth, Nova Scotia	124
28	Cretic	Liverpool, England	186
29	Storm King	Rotterdam, Holland	2
Mar. 1	Admiral Farragut	Jamaica, West Indies	4
3	Boston	Yarmouth, Nova Scotia	83
3	Halifax	Halifax, Nova Scotia	33
5	Canadian	Liverpool, England	1
5	Sylvania	do	1
	Total		438

GEORGE B. BILLINGS, *Commissioner.*

Report of immigration at New York.

OFFICE OF THE COMMISSIONER OF IMMIGRATION,
New York, February 29, 1904.

Number of alien immigrants who arrived at this port during the week ended February 29, 1904; also names of vessels and ports from which they came.

Date of arrival.	Vessel.	Where from.	Number of aliens.
Feb. 21	Patricia	Hamburg	1,058
21	La Touraine	Havre	570
21	Chemnitz	Bremen	509
21	Philadelphia	Southampton	205
21	Pretoria	Hamilton, Bermuda	8
21	Vigilancia	Habana	1
23	United States	Copenhagen, etc	221
23	Prinz Oscar	Genoa and Naples	207
23	Mexico	Habana	9
23	Cametense	Manaos, etc	3
23	Bellaggio	Santos	5
23	Kaiser Wilhelm der Grosse	Bremen	1
24	Zeeland	Antwerp	536
25	Moltke	Hamburg	1,355
25	Carpathia	Genoa and Naples	1,071
25	Princess Irene	Naples	352
25	Seriphos	Constantinople	1
25	Roma	Naples	1,065
26	Sicilian Prince	do	859
26	Majestic	Liverpool and Queenstown	134
27	Amsterdam	Rotterdam	208
27	Monterey	Habana	6
	Total .....	.....	8,384

JOSEPH MURRAY, *Acting Commissioner.*

OFFICE OF THE COMMISSIONER OF IMMIGRATION,
New York, March 7, 1904.

Number of alien immigrants who arrived at this port during the week ended March 5, 1904; also names of vessels and ports from which they came.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
1904.			
Feb. 28	Rhein	Bremen	580
28	Calabria	Naples	486
28	St. Louis	Southampton	219
28	Trinidad	Bermuda	6
29	Citta di Torino	Naples	1,077
29	La Champagne	Havre	397
29	Etruria	Liverpool and Queenstown	329
29	Numidian	Glasgow	79
29	Roma	Naples	1
Mar. 1	Finland	Antwerp	593
1	Morro Castle	Habana	1
1	St. Andrew	Antwerp	1
1	Etruria	Demerara	1
1	Sanfield	do	1
2	Kaiser Wilhelm der Grosse	Bremen	760
2	Grosser Kurfurst	do	522
2	Rotterdam	Rotterdam	457
2	Peninsular	The Azores	205
2	Sicilian Prince	Naples	1
2	Roma	do	1
2	Etruria	Demerara	1
2	Numidian	Glasgow	1
4	Napolitan Prince	Naples	625
4	Oceanic	Liverpool and Queenstown	338
4	Georgic	Liverpool	1
Mch. 5	Lucania	Liverpool and Queenstown	786
5	La Lorraine	Havre	766
5	Ethiopia	Glasgow	86
5	Pisa	Piræus	13
5	Esperanza	Habana	3
5	Dorisbrook	Cardiff	1
	Total		8,338

JOSEPH MURRAY, *Acting Commissioner.*

Report of immigration at Philadelphia.

OFFICE OF U. S. COMMISSIONER OF IMMIGRATION,
Port of Philadelphia, February 29, 1904.

Number of alien immigrants who arrived at this port during the week ended February 27, 1904; also names of vessels and ports from which they came.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 24 27	Switzerland	Antwerp	45
	Rhynland	do	49
	Total .....	.....	94

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

Inspection of immigrants.

MONTHLY.

Place.	Month.	Number of immigrants passed.	Number of immigrants rejected.
Buffalo, N. Y	February ..	29	3
Charleston, S. C	do	8	0
Detroit, Mich	do	19	0
Galveston, Tex	do	207	0
Iloilo, P. I	January ..	39	0
Key West, Fla	February ..	1	1
Malone, N. Y	do	31	0
Manila, P. I	January ..	196	41
Mobile Bay, Ala	February ..	33	.....
New Orleans, La	January ..	130	0
Do	February ..	591	7
New York, N. Y	do	31,843	316
Niagara Falls, N. Y	do	68	13
Norfolk, Va	do	0	1
Portland, Me	do	48	0
San Diego, Cal	do	67	0
Tacoma, Wash	do	4	.....

Reports from national quarantine

Number.	Name of station.	Week ended—	Name of vessel.	Date of arrival.	Port of departure.
	UNITED STATES:				
1	Alexandria, Va.	Mar. 5	.....	.....	.....
2	Beaufort, N. C. ....	...do...	.....	.....	.....
3	Biscayne Bay, Fla.	Feb. 27	.....	.....	.....
	Bocagrande, Fla.—				
4	Punta Gorda. ....	...do...	.....	.....	.....
5	Puntarasa. ....	...do...	.....	.....	.....
6	Brunswick, Ga. ....	...do...	.....	.....	.....
7	Cape Charles, Va.	Mar. 5	.....	.....	.....
8	Cape Fear, N. C.	Feb. 27	.....	.....	.....
9	Cedar Keys, Fla.	Mar. 5	.....	.....	.....
10	Columbia River, Oreg.	Feb. 27	.....	.....	.....
11	Cumberland Sound, Fla.	Mar. 5	.....	.....	.....
12	Delaware Breakwater quarantine, Lewes, Del.	Feb. 27	.....	.....	.....
13	Dutch Harbor, Alaska.	Feb. 13	.....	.....	.....
14	Eastport, Me.	Mar. 3	.....	.....	.....
15	Eureka, Cal.	Feb. 27	.....	.....	.....
16	Grays Harbor, Wash. ....	...do...	.....	.....	.....
17	Gulf quarantine, Ship Island, Miss. ....	...do...	Nor. ship Charles Dickens ^a	Feb. 20	Rio de Janeiro ...
18	Key West, Fla. ....	...do...	.....	.....	.....
19	Los Angeles, Cal. ....	...do...	.....	.....	.....
20	Newbern, N. C. ....	...do...	.....	.....	.....
21	Nome, Alaska.	Feb. 20	.....	.....	.....
22	Pascagoula, Miss.	Feb. 27	.....	.....	.....
23	Port Angeles, Wash.	Feb. 20	.....	.....	.....
24	Portland, Me.	Feb. 27	.....	.....	.....
25	Port Townsend, Wash. ....	...do...	.....	.....	.....
26	Reedy Island, Del.	Feb. 27	.....	.....	.....
	St. Georges Sound, Fla.—				
27	East Pass. ....	...do...	.....	.....	.....
28	West Pass.	Feb. 21	.....	.....	.....
29	St. Johns River, Fla.	Feb. 27	Rus. bk. Pehr Brake	Feb. 27	East London
30	San Diego, Cal. ....	...do...	U. S. t. s. Adams ^a	Feb. 19	San Diego Harbor.
31	San Francisco, Cal. ....	...do...	.....	.....	.....
32	San Pedro, Cal. ....	...do...	.....	.....	.....
33	Santa Barbara, Cal. ....	...do...	.....	.....	.....
34	Santa Rosa, Fla.	Mar. 5	.....	.....	.....
35	Savannah, Ga.	Feb. 27	Rus. bk. Eliet ^a	Feb. 15	Cape Town
36	Sitka, Alaska.	Feb. 20	.....	.....	.....
37	South Atlantic quarantine, Blackbeard Island, Ga.	Feb. 27	.....	.....	.....
38	Southbend, Wash. ....	...do...	.....	.....	.....
39	Tampa Bay, Fla. ....	...do...	.....	.....	.....
40	Washington, N. C.	Mar. 5	.....	.....	.....
	HAWAII:				
41	Hilo.	Feb. 13	.....	.....	.....
42	Honolulu.	Feb. 20	.....	.....	.....
43	Kahului. ....	...do...	.....	.....	.....
44	Kihel. ....	...do...	.....	.....	.....
45	Koloa.	Feb. 13	.....	.....	.....
46	Lahaina.	Feb. 20	.....	.....	.....
47	Mahukona.	Feb. 13	.....	.....	.....
	PHILIPPINE ISLANDS:				
48	Cebu.	Jan. 16	.....	.....	.....
		Jan. 23	.....	.....	.....

^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				do.	
4				No transactions	
5				No report	
6				2 vessels spoken and passed.	1
7					4
8					1
9				No report	
10				No transactions	
11				No report	
12					1
13				No report	
14					13
15				No transactions	
16				do.	
17	Gulfport	Disinfected	Feb. 21		6
18					6
19				No report	
20				No transactions	
21				No report	
22					3
23				No report	
24					2
25				Glandular examination Am. ss. Lyra from Manila, Jap. ss. Iyo Maru from Hongkong, and Am. ss. Hyades from Dalny.	6
26				No report	
27				do.	
28				No transactions	
29	Jacksonville	Held for fumigation to kill rats.		do.	1
30	San Diego	Fumigated to kill vermin			2
31				Diphtheria, 11 cases; 190 crew bathed and effects disinfected; sick isolated ashore in tents.	11
32				2 vessels boarded and passed; glandular examination, Br. ss. Algoa from Manila, and Br. ss. Clavering and Br. ss. Doric from Hongkong.	
33				No report	
34				do.	
35	Savannah	Fumigated to kill rats	Feb. 23	do.	2
36				No report	
37					1
38				No transactions	
39					4
40				No report	
41				No report	
42				do.	
43				do.	
44				do.	
45				do.	
46				do.	
47				do.	
48				87 bancas inspected and passed.	34
				115 bancas inspected and passed.	40

Reports from national quarantine

Number.	Name of station.	Week ended—	Name of vessel.	Date of arrival.	Port of departure.
49	PHILIPPINE ISLANDS—Con. Iloilo.....	Jan. 23	.....	.....	.....
		Jan. 30	Br. ss. Kaifong.....	Jan. 25	Hongkong.....
50	Jolo.....	Jan. 9	.....	.....	.....
51	Manila.....	Jan. 16	.....	.....	.....
		Jan. 23	Am. ss. Texas.....	Jan. 17	Matnog.....
			Br. ss. Yuensang.....	Jan. 19	Hongkong and Amoy.
			U. S. a. t. Sacramento....	Jan. 21	Hongkong.....
		Jan. 30	.....	.....	.....
52	PORTO RICO: Ponce.....	Feb. 20	Am. ss. Maracaibo.....	Feb. 17	Maracaibo.....
			Sp. ss. Montevideo.....	Feb. 20	Habana.....
53	San Juan.....	.....do.....	.....	.....	.....
	Subports—	.....do.....	.....	.....	.....
54	Aguadilla.....	.....do.....	.....	.....	.....
55	Arecibo.....	.....do.....	.....	.....	.....
56	Arroyo.....	.....do.....	.....	.....	.....
57	Fajardo.....	.....do.....	.....	.....	.....
58	Humacao.....	.....do.....	.....	.....	.....
59	Mayaguez.....	.....do.....	.....	.....	.....

Reports from State and

Number.	Name of station.	Week ending—	Name of vessel.	Date of arrival.	Port of departure.
1	Baltimore, Md.....	Mar. 5	.....	.....	.....
2	Bangor, Me.....	.....do.....	.....	.....	.....
3	Boston, Mass.....	.....do.....	.....	.....	.....
4	Charleston, S. C.....	Feb. 27	.....	.....	.....
5	Elizabeth River, Va.....	Mar. 5	.....	.....	.....
6	Galveston, Tex.....	Feb. 27	.....	.....	.....
7	Gardiner, Oreg.....	.....do.....	.....	.....	.....
8	Marcushook, Pa.....	Mar. 5	.....	.....	.....
9	Mobile Bay, Ala.....	Feb. 27	.....	.....	.....
10	New Bedford, Mass.....	Mar. 5	.....	.....	.....
11	New Orleans, La.....	Feb. 20	.....	.....	.....
12	Newport News, Va.....	Mar. 5	.....	.....	.....
13	Newport, R. I.....	.....do.....	.....	.....	.....
14	New York, N. Y.....	.....do.....	.....	.....	.....
15	Pass Cavallo, Tex.....	.....do.....	.....	.....	.....
16	Port Royal, S. C.....	Mar. 5	.....	.....	.....
17	Providence, R. I.....	Feb. 27	.....	.....	.....
18	Quintana, Tex.....	Mar. 5	.....	.....	.....
19	Sabine Pass, Tex.....	.....do.....	.....	.....	.....
20	St. Helena Entrance, S. C.....	.....do.....	.....	.....	.....

and inspection stations—Continued.

Number.	Destination.	Treatment of vessel, passengers, and cargo.	Date of departure.	Remarks.	Vessels inspected and passed.
49	.....	.....	.....	2 vessels held for mechanical cleansing.	63
.....	Iloilo	Steerage passengers vaccinated.	Jan. 25	1 package uncertified Chinese food stuffs returned to Hongkong.	40
50	.....	.....	.....	.....	4
51	Manila	Held to determine cause of death.	Jan. 17	7 of crew vaccinated	8
.....	do	Disinfected	Jan. 19	162 steerage passengers and 62 crew bathed, and clothing and baggage disinfected. All inspected.	68
.....	do	do	Jan. 21	Crew bathed. 3 vessels fumigated to kill rats. Crew or members of crew on 45 vessels vaccinated. 2 cases measles on Br. ss. Empire from Melbourne and Sydney.	73
.....	.....	.....	.....	4 vessels fumigated to destroy vermin; crew or members of crew on 43 vessels vaccinated.	4
52	New York	Held in quarantine	Feb. 17	Took cargo in quarantine, under guard. No passengers for Ponce.	4
.....	Genoa	do	Feb. 20	Took cargo in quarantine, under guard. 8 passengers for Ponce from La Guaira, with medical certificates, allowed to disembark.	5
53	.....	.....	.....	.....	2
54	.....	.....	.....	.....	1
55	.....	.....	.....	No transactions	1
56	.....	.....	.....	.....	1
57	.....	.....	.....	No transactions	4
58	.....	.....	.....	.....	.....
59	.....	.....	.....	.....	.....

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	1
5	No report	7
6
7	No report .....	.....
8	do .....	.....
9	11
10	No report .....	.....
11	do .....	.....
12	do .....	.....
13	do .....	.....
14	do .....	.....
15	do .....	.....
16	No report .....	.....
17	No transactions .....	.....
18
19	No report .....	.....
20	do .....	.....

Smallpox in the United States as reported to the Surgeon-General, Public Health and Marine-Hospital Service, December 26, 1903, to March 11, 1904.

For reports received from June 27, 1903, to December 25, 1903, see PUBLIC HEALTH REPORTS for December 25, 1903.

Places.	Date.	Cases.	Deaths.	Remarks.
Arkansas:				
Fort Smith.....	Dec. 13-Feb. 20	6	.....
Total for State		6	.....
Total for State, same period, 1903.			.....
California:				
Berkeley.....	Jan. 1-Feb. 29	2	.....
Escondido	Feb. 23.....	1	.....
Fresno	Dec. 1-31.....	1	.....
Los Angeles.....	Dec. 27-Jan. 2	1	.....
Oakland	Jan. 1-31.....		1	
San Francisco.....	Dec. 7-Feb. 21	40	.....
Total for State		45	1	
Total for State, same period, 1903.		178	2	
Colorado:				
Boulder County.....	Dec. 1-Jan. 31	17	.....
Conejos County.....	Jan. 1-31.....	1	.....
Denver County (Denver).....	Dec. 1-Jan. 31	18	.....
El Paso County (Colorado Springs included).....	Dec. 1-Jan. 31	7	.....
Huerfano County.....	Dec. 1-31.....	1	.....
Kit Carson County.....	Dec. 1-Jan. 31	18	.....
Lake County.....	Dec. 1-31.....	1	.....
Larimer County.....	Dec. 1-Jan. 31	34	.....
Las Animas County.....	Dec. 1-Jan. 31	4	.....
Mesa County.....	Dec. 1-31.....	1	.....
Otero County.....	Jan. 1-31.....	9	.....
Pitkin County.....	Dec. 1-Jan. 31	2	.....
Rio Grande County.....	Dec. 1-31.....	11	.....
Routt County.....	Jan. 1-31.....	10	.....
Washington County.....	Dec. 1-Jan. 31	3	.....
Weld County.....	Dec. 1-Jan. 31	53	.....
Yuma County.....	Dec. 1-31.....	1	.....
Total for State		191	.....
Total for State, same period, 1903.		320	.....
Delaware:				
Wilmington.....	Feb. 21-27.....		1	
Total for State			1	
Total for State, same period, 1903.			.....
District of Columbia:				
Washington.....	Jan. 10-Feb. 27	20	.....
Total for District		20	.....
Total for District, same period, 1903.		8	1	
Florida:				
Escambia County (Pensacola).....	Nov. 1-Jan. 16	11	.....
Dade County (Fort Lauderdale).....	Nov. 1-Dec. 31	1	.....
Duval County (Jacksonville).....	Nov. 1-Feb. 27	13	.....
Leon County (Tallahassee).....	Nov. 1-Dec. 31	2	.....
Polk County (Bartow).....	Nov. 1-Dec. 31	1	.....
Walton County.....	Jan. 2-16.....	88	.....
Total for State		116	.....
Total for State, same period, 1903.		230	.....
Georgia:				
Darien	Jan. 14.....	2	.....
Liberty County.....	Feb. 12.....		7	
Total for State		2	7	
Total for State, same period, 1903.		81	8	

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Illinois:				
Belleville	Dec. 13-Feb. 27	18	2	
Cairo	Jan. 1-Feb. 5	13		
Chicago	Dec. 20-Mar. 5	21		
Danville	Dec. 13-Feb. 27	19		
Evanston	Jan. 1-Dec. 31, 1903	3		
Fairport	Jan. 10-16	1		
Springfield	Feb. 26-Mar. 3	3		
Total for State		78	2	
Total for State, same period, 1903.		107	5	
Indiana:				
Evansville	Dec. 13-Jan. 20	22		
Total for State		22		
Total for State, same period, 1903.		2, 112	96	
Iowa:				
Des Moines	Jan. 23-29	1		
Dubuque	Dec. 27-Jan. 2	1		
Total for State		2		
Total for State, same period, 1903.		49		
Kentucky:				
Louisville	Oct. 1-Dec. 31	53	14	
Total for State		53	14	
Total for State, same period, 1903.		469	4	
Louisiana:				
New Orleans	Dec. 13-Feb. 20	27	5	Ten imported.
Total for State		27	5	
Total for State, same period, 1903.		10		
Maine:				
Athens	Dec. 31			Present.
Biddeford	Dec. 13-19	1		
Brewer	Dec. 19	1		
Brighton	Dec. 31			Do.
Calais	Feb. 7-18	10		
Madawaska region	Dec. 1-31	39		
Madison	Jan. 28	1		
Milford	Jan. 7	2		
Oldtown	To Dec. 24	9		
Orono	Dec. 19-Jan. 22	3		
Smithfield	Jan. 21	1		
Stacyville	Jan. 21	11		
Van Buren	Jan. 1-31	7		
Total for State		85		
Total for State, same period, 1903.		273	1	
Maryland:				
Baltimore	Jan. 17-Feb. 27	5		
Total for State		5		
Total for State, same period, 1903.		26		
Massachusetts:				
Brockton	Dec. 20-26	1		
Fall River	Dec. 20-26	1		
Haverhill	Dec. 20-26	1		
Lawrence	Jan. 10-16	1		
Total for State		4		
Total for State, same period, 1903.		146	28	
Michigan:				
Detroit	Dec. 13-Feb. 27	15	1	
Flint	Dec. 13-Feb. 6	5		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Michigan—Continued.				
Grand Rapids.....	Jan. 2-30.....	5	.....
Port Huron.....	Dec. 16-23.....	4	.....
Total for State.....	.....	29	1	
Total for State, same period, 1903.....	.....	375	8	
Minnesota:				
Aitkin County.....	Feb. 9-15.....	1	.....
Beltrami County.....	Jan. 5-Feb. 22.....	32	.....
Cass County.....	Jan. 26-Feb. 1.....	13	.....
Chippewa County.....	Feb. 9-15.....	10	.....
Chisago County.....	Jan. 12-Feb. 15.....	11	.....
Clay County.....	Dec. 22-Feb. 1.....	11	.....
Cottonwood County.....	Feb. 2-15.....	2	.....
Crow Wing County.....	Jan. 5-Feb. 8.....	5	.....
Dakota County.....	Feb. 2-8.....	2	.....
Douglas County.....	Jan. 26-Feb. 8.....	3	.....
Goodhue County.....	Jan. 5-11.....	1	.....
Hennepin County.....	Dec. 22-Feb. 22.....	22	.....
Hubbard County.....	Jan. 19-Feb. 22.....	8	.....
Isanti County.....	Dec. 22-Feb. 15.....	31	.....
Itasca County.....	Dec. 15-Feb. 15.....	6	.....
Jackson County.....	Jan. 5-11.....	1	.....
Kandiyohi County.....	Dec. 15-Feb. 22.....	58	.....
Meeker County.....	Feb. 16-22.....	3	.....
Millelacs County.....	Feb. 16-22.....	2	.....
Morrison County.....	Dec. 15-Feb. 22.....	16	.....
Mower County.....	Feb. 2-8.....	1	.....
Norman County.....	Feb. 2-8.....	1	.....
Ottertail County.....	Dec. 15-Feb. 22.....	52	.....
Pine County.....	Feb. 2-15.....	3	.....
Polk County.....	Jan. 5-Feb. 22.....	3	.....
Ramsey County.....	Dec. 29-Feb. 22.....	12	.....
Redwood County.....	Jan. 19-25.....	2	.....
Renville County.....	Jan. 19-Feb. 1.....	5	.....
Rice County.....	Jan. 19-Feb. 22.....	5	.....
Roseau County.....	Jan. 12-18.....	10	.....
St. Louis County.....	Jan. 12-Feb. 8.....	3	.....
Sibley County.....	Feb. 9-15.....	1	.....
Stearns County.....	Dec. 15-Feb. 22.....	187	1	
Steele County.....	Jan. 5-18.....	2	.....
Swift County.....	Jan. 26-Feb. 15.....	11	.....
Todd County.....	Dec. 15-Feb. 22.....	112	1	
Wabasha County.....	Jan. 26-Feb. 22.....	23	.....
Wadena County.....	Jan. 12-18.....	2	.....
Washington County.....	Dec. 22-Feb. 22.....	18	1	
Wilkin County.....	Jan. 5-Feb. 15.....	9	.....
Cases not previously reported in Hennepin County.....	.....	11	.....
Total for State.....	.....	710	3	
Total for State, same period, 1903.....	.....	2,058	5	
Missouri:				
St. Louis.....	Dec. 20-Feb. 27.....	75	1	
Total for State.....	.....	75	1	
Total for State, same period, 1903.....	.....	179	3	
Montana:				
Butte.....	Jan. 1-Feb. 29.....	16	.....
Helena.....	Jan. 1-31.....	1	.....
Total for State.....	.....	17	.....
Total for State, same period, 1903.....	.....	14	.....
Nebraska:				
Omaha.....	Dec. 20-26.....	1	.....
Total for State.....	.....	1	.....
Total for State, same period, 1903.....	.....	59	.....

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
New Hampshire:				
Manchester	Dec. 13-Feb. 27	87		
Nashua	Jan. 3-23	3		
Total for State		40		
Total for State, same period, 1903.		77		
New Jersey:				
Camden	Dec. 27-Mar. 5	10	2	
Newark	Feb. 1-6	1		
Plainfield	Jan. 17-23	1		Imported.
Trenton	Dec. 27-Mar. 5	32	4	
Total for State		44	6	
Total for State, same period, 1903.		79	4	
New York:				
Buffalo	Dec. 20-Feb. 27	22		
Elmira	Feb. 7-13	1		
New York	Dec. 20-Mar. 5	16	3	
Niagara Falls	Feb. 14-27	6		
Saratoga Springs	Dec. 1-31	1		
Total for State		46	3	
Total for State, same period, 1903.		37	3	
North Carolina:				
Alamance County	Jan. 1-31	122		Present
Anson County	Jan. 1-31			
Bladen County	Jan. 1-31	1		
Buncombe County	Jan. 1-31	8		
Cabarrus County	Jan. 1-31	1		
Chowan County	Jan. 1-31	1		
Cleveland County	Jan. 1-31	4		
Cumberland County	Jan. 1-31	3		
Davidson County	Jan. 1-31	72		
Davie County	Jan. 1-31	2		
Durham County	Jan. 1-31	10		
Edgecombe County	Jan. 1-31	8	2	
Forsyth County	Jan. 1-31	17		
Gaston County	Jan. 1-31	17		
Guilford County	Jan. 1-31	8		
Harnett County	Jan. 1-31	3		
Henderson County	Jan. 1-31	3		
Iredell County	Jan. 1-31	8		
Jackson County	Jan. 1-31	25		
Johnston County	Jan. 1-31	5		
Macon County	Jan. 1-31			Do.
Madison County	Jan. 1-31			Do.
Mecklenburg County	Jan. 1-31	5		
New Hanover County (Wilmington included).	Jan. 1-Feb. 23	8		
Orange County	Jan. 1-31	10		
Perquimans County	Jan. 1-31	32		
Pitt County	Jan. 1-31	13		
Richmond County	Jan. 1-31	7		
Robeson County	Jan. 1-31			Do.
Rockingham County	Jan. 1-31	4		
Scotland County	Jan. 1-31	20		
Stanly County	Jan. 1-31	2		
Union County	Jan. 1-31	6		
Yancey County	Jan. 1-31	12		
Wake County	Jan. 1-31	1		
Wayne County	Jan. 1-31	10		
Wilkes County	Jan. 1-31	20		
Wilson County	Jan. 1-31	4		
Yancey County	Jan. 1-31	6		
Total for State		478	2	
Total for State, same period, 1903.		1,616	23	
North Dakota:				
Barnes County	Dec. 1-31	9		
Cass County	Nov. 1-Dec. 31	10		
Cavalier County	Dec. 1-31	12		
Eddy County	Dec. 1-31	1		
Grand Forks County	Nov. 1-Dec. 31	12		
Griggs County	Dec. 1-31	1		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
North Dakota—Continued.				
Ransom County	Nov. 1-Dec. 31	56	.....
Rolette County	Nov. 1-30.	1	.....
Stutsman County	Dec. 1-31.	1	.....
Towner County	Nov. 1-30.	8	.....
Trail County	Dec. 1-31.	1	.....
Walsh County	Dec. 1-31.	1	.....
Ward County	Dec. 1-31.	7	.....
Wells County	Nov. 1-30.	18	.....
Williams County	Dec. 1-31.	20	.....
Total for State		158	.....
Total for State, same period, 1903.			.....
Ohio:				
Allen County	Aug. 8-Dec. 26	1	.....
Ashtabula County	Aug. 8-Jan. 4	3	.....
Athens County	Aug. 8-Dec. 26	1	1	
Auglaize County	Aug. 8-Dec. 26	11	1	
Belmont County	Aug. 8-Dec. 26	24	8	
Butler County	Aug. 8-Dec. 26	21	.....
Carroll County	Aug. 8-Dec. 26	6	.....
Champaign County	Aug. 8-Dec. 26	14	.....
Columbiana County	Aug. 8-Dec. 26	34	.....
Coshocton County	Aug. 8-Dec. 26	13	.....
Crawford County	Aug. 8-Feb. 27	44	.....
Cuyahoga County	Aug. 8-Mar. 4	22	1	
Darke County	Aug. 8-Dec. 26	1	.....
Delaware County	Aug. 8-Dec. 26	13	.....
Erie County	Aug. 8-Dec. 26	14	.....
Fairfield County	Aug. 8-Dec. 26	1	.....
Franklin County	Aug. 8-Dec. 26	96	4	
Gallia County	Aug. 8-Dec. 26	56	5	
Guernsey County	Aug. 8-Dec. 26	104	1	
Hamilton County	Aug. 8-Feb. 26	115	4	
Hancock County	Aug. 8-Dec. 26	12	.....
Harrison County	Aug. 8-Dec. 26	14	2	
Jackson County	Aug. 8-Dec. 26	14	.....
Jefferson County	Aug. 8-Dec. 26	32	.....
Knox County	Aug. 8-Dec. 26	1	.....
Lake County	Aug. 8-Dec. 26	1	.....
Lawrence County	Aug. 8-Dec. 26	148	7	
Licking County	Aug. 8-Dec. 26	9	.....
Lorain County	Aug. 8-Dec. 26	2	.....
Lucas County	Aug. 8-Feb. 27	3	.....
Mahoning County	Aug. 8-Jan. 19	118	2	
Marion County	Aug. 8-Dec. 26	161	1	
Miami County	Aug. 8-Dec. 26	9	2	
Montgomery County	Aug. 8-Mar. 5	86	3	
Morrow County	Aug. 8-Dec. 26	3	.....
Muskingum County	Aug. 8-Dec. 26	16	.....
Ottawa County	Aug. 8-Dec. 26	14	.....
Paulding County	Aug. 8-Dec. 26	2	.....
Perry County	Aug. 8-Dec. 26	52	.....
Portage County	Aug. 8-Dec. 26	1	.....
Putnam County	Aug. 8-Dec. 26	23	.....
Richland County	Aug. 8-Dec. 26	9	.....
Scioto County	Aug. 8-Dec. 26	8	.....
Seneca County	Aug. 8-Dec. 26	1	.....
Stark County	Aug. 8-Dec. 26	105	.....
Summit County	Aug. 8-Dec. 26	27	.....
Trumbull County	Aug. 8-Feb. 13	7	.....
Tuscarawas County	Aug. 8-Dec. 26	5	1	
Union County	Aug. 8-Dec. 26	26	.....
Vinton County	Aug. 8-Dec. 26	10	.....
Washington County	Aug. 8-Dec. 26	66	1	
Wayne County	Aug. 8-Dec. 26	1	.....
Wood County	Aug. 8-Dec. 26	31	.....
Wyandot County	Aug. 8-Dec. 26	1	.....
Total for State		1,612	44	
Total for State, same period, 1903.		395	43	
Pennsylvania:				
Allegheny County	Dec. 13-Feb. 27	133	30	Five cases imported at Pittsburgh.
Beaver County	Dec. 1-Jan. 31	5	1	
Berks County	Dec. 1-Jan. 31	40	.....
Blair County	Dec. 1-Mar. 5	20	2	One case imported.

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Pennsylvania—Continued.				
Bradford County	Dec. 1-Jan. 31	10	.....
Bucks County	Dec. 1-Jan. 31	4	.....
Butler County	Feb. 1-13	2	.....
Cambria County	Dec. 1-Feb. 27	38	4	
Clearfield County	Dec. 1-Jan. 31	20	.....
Columbia County	Dec. 1-Jan. 31	8	.....
Center County	Dec. 1-Jan. 31	4	.....
Chester County	Dec. 1-Jan. 31	1	.....
Cumberland County	Dec. 1-Jan. 31	2	.....
Dauphin County	Dec. 1-Jan. 31	2	.....
Delaware County	Dec. 1-Jan. 31	8	.....
Erie County	Dec. 1-Jan. 31	109	1	
Fayette County	Dec. 1-Jan. 31	28	1	
Greene County	Dec. 1-Jan. 31	40	.....
Indiana County	Dec. 1-Jan. 31	10	.....
Jefferson County	Dec. 1-Jan. 31	8	3	
Lackawanna County	Dec. 1-Feb. 21	8	.....
Lancaster County	Dec. 1-Jan. 31	1	.....
Lebanon County	Dec. 1-Jan. 31	11	1	
Lehigh County	Dec. 1-Feb. 27	115	.....
Luzerne County	Dec. 1-Jan. 31	4	.....
Lycoming County	Jan. 3-Feb. 27	14	3	
Monroe County	Dec. 1-Jan. 31	5	.....
Montgomery County	Dec. 1-Jan. 31	8	1	
Northampton County	Dec. 1-Jan. 31	235	.....
Northumberland County	Dec. 1-Jan. 31	3	.....
Perry County	Dec. 1-Jan. 31	1	.....
Philadelphia County	Dec. 20-Mar. 5	607	150	
Schuylkill County	Dec. 1-Jan. 31	16	.....
Somerset County	Dec. 1-Jan. 31	9	.....
Susquehanna County	Dec. 1-Jan. 31	2	.....
Warren County	Jan. 1-Jan. 31	10	3	
Washington County	Dec. 1-Jan. 31	18	.....
Wayne County	Dec. 1-Jan. 31	92	.....
Westmoreland County	Dec. 1-Jan. 31	43	.....
Total for State		1,694	200	
Total for State, same period, 1903.		1,241	99	
SUMMARY.				
Total, November, 1903		631	74	
Total, December, 1903		1,208	123	
Total, January, 1904		617	100	
Total for three months		2,456	297	
South Carolina:				
Charleston	Dec. 20-Feb. 27	24	2	Three imported.
Greenville	Feb. 21-27	2	.....
Total for State		26	2	
Total for State, same period, 1903.		195	5	
Tennessee:				
Memphis	Dec. 13-Mar. 5	227	5	
Nashville	Dec. 27-Mar. 5	52	.....
Total for State		279	5	
Total for State, same period, 1903.		43	.....
Texas:				
San Antonio	Dec. 1-31	6	.....
Total for State		6	.....
Total for State, same period, 1903.		3	.....
Utah:				
Ogden	Jan. 1-31	1	.....
Salt Lake City	Dec. 27-Feb. 13	14	.....
Total for State		15	.....
Total for State, same period, 1903.		186	2	

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Virginia:				
Danville	Feb. 7-13.....	2	
Pocahontas	Jan. 1-Feb. 29	15	3	
Total for State		17	3	
Total for State, same period, 1903.		9	1	
Washington:				
Adams County	Dec. 1-Jan. 31	2	
Chehalis County	Dec. 1-31.....	3 .....	.....
Columbia County	Jan. 1-31.....	1 .....	.....
King County (Seattle included)	Dec. 1-Jan. 31	17 .....	.....
Kittitas County	Dec. 1-31.....	1 .....	.....
Klickitat County	Dec. 1-Jan. 31	18 .....	.....
Lincoln County	Dec. 1-31.....	2 .....	.....
Pacific County	Jan. 1-31.....	1 .....	.....
Pierce County (Tacoma)	Feb. 2-8.....	1 .....	.....
Spokane County (Spokane included).	Dec. 1-Jan. 31	9	3	
Walla Walla County	Dec. 1-Jan. 31	9 .....	.....
Whatcom County	Dec. 1-31.....	1 .....	.....
Whitman County	Dec. 1-Jan. 31	3 .....	.....
Yakima County	Jan. 1-31.....	8 .....	.....
Total for State		76	3	
Total for State, same period, 1903.		4 .....	.....
Wisconsin:				
Milwaukee	Dec. 13-Feb. 27	101	
Total for State		97 .....	.....
Total for State, same period, 1903.		1,255	6	
Grand total		6,080	303	
Grand total, same period, 1903.		11,915	349	

Plague in the United States, as reported to the Surgeon-General Public Health and Marine-Hospital Service, December 26, 1903, to March 11, 1904.

Place.	Number since March, 1900.	Number since January 1, 1904.	Re-reported.	Died.	Bacteriologically confirmed.	Remarks.
California:						
San Francisco	111	1	Jan. 10	Jan. 10	Jan. 25	Recovered.
Do	112	2	Jan. 12	Jan. 11	Jan. 27	
Do	113	3	Jan. 13	Jan. 13	Jan. 22	
Do	114	4	Feb. 7	.....	Feb. 17
Do	115	5	Feb. 9	Feb. 8	Feb. 27	
Do	116	6	Feb. 12	Feb. 12	Feb. 24	
Do	117	7	Feb. 15	Feb. 14	.....do
Do	118	8	Feb. 17	Feb. 19	Mar. 8	
Do	119	α 9	Feb. 18	.....	.....
Do	120	α 10	Mar. 1	.....	.....
Concord	121	α 11	Mar. 1	Feb. 29	.....

α Provisional diagnosis.

Summary: Calendar year, 1900, 22 cases, 22 deaths; 1901, 30 cases, 25 deaths; 1902, 41 cases, 41 deaths; 1903, 17 cases, 17 deaths.

Yellow fever in the United States, as reported to the Surgeon-General Public Health and Marine-Hospital Service, December 26, 1903, to March 11, 1904.

Place.	Date.	Cases.	Deaths.	Remarks.
Texas:				
Laredo.....	Dec. 26-Jan. 5	5	4	.....

[NOTE.—In accordance with custom, the tables of epidemic diseases are terminated semiannually and new tables begun.]

Weekly mortality table, cities of the United States.

Cities.	Week ended—	Population, United States census of 1900.	Total deaths from all causes.	Deaths from—									
				Tuberculosis.	Yellow fever.	Smallpox.	Varioloid.	Cholera.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.
													Whooping cough.
Allentown, Pa.....	Feb. 27	35,416	13	1	.....	.....	.....	.....	.....	1	1	.....	.....
Ashtabula, Ohio.....	Mar. 5	12,949	6	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
Baltimore, Md.....	do	508,957	302	46	.....	.....	.....	.....	.....	1	1	3	.....
Baton Rouge, La.....	Feb. 6	11,269	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do.....	Feb. 13	11,269	6	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do.....	Feb. 20	11,269	6	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do.....	Feb. 27	11,269	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Berkeley, Cal.....	Feb. 29	13,214	4	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
Binghamton, N. Y.....	Mar. 5	38,647	22	4	.....	.....	.....	.....	.....	.....	.....	.....	.....
Boston, Mass.....	do	560,892	241	29	.....	.....	.....	.....	.....	5	.....	3	1
Brockton, Mass.....	Feb. 27	40,063	11	1	.....	.....	.....	.....	.....	.....	.....	1	14
Bucyrus, Ohio.....	do	6,560	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Butler, Pa.....	do	10,853	4	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Cambridge, Mass.....	do	91,886	23	4	.....	.....	.....	.....	.....	.....	.....	.....	.....
Camden, N. J.....	Mar. 5	75,935	26	.....	.....	.....	.....	.....	.....	.....	1	1	.....
Carbondale, Pa.....	Feb. 29	13,536	10	.....	.....	.....	.....	.....	.....	.....	.....	1	.....
Charleston, S. C.....	Feb. 27	55,807	29	3	.....	1	.....	.....	.....	.....	.....	1	.....
Chelsea, Mass.....	do	34,072	16	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Chicago, Ill.....	Mar. 5	1,698,575	625	54	.....	.....	.....	.....	13	3	5	.....	1
Chicopee, Mass.....	do	19,167	8	3	.....	.....	.....	.....	.....	.....	.....	.....	.....
Cleveland, Ohio.....	Feb. 26	381,766	185	19	.....	.....	.....	.....	.....	16	.....	2	.....
Clinton, Mass.....	Mar. 5	13,667	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Colorado Springs, Colo.....	Feb. 27	21,085	16	8	.....	.....	.....	.....	.....	.....	.....	.....	.....
Covington, Ky.....	do	42,938	29	3	.....	.....	.....	.....	.....	.....	.....	.....	1
Danville, Ill.....	do	16,354	10	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
Dayton, Ohio.....	Mar. 5	85,333	35	3	.....	.....	.....	.....	.....	.....	.....	1	.....
Denver, Colo.....	Jan. 2	133,859	49	7	.....	.....	.....	.....	.....	.....	1	.....	.....
Do.....	Jan. 9	133,859	77	14	.....	.....	.....	.....	.....	1	2	3	.....
Do.....	Jan. 16	133,859	62	11	.....	.....	.....	.....	.....	.....	.....	1	.....
Do.....	Jan. 23	133,859	70	14	.....	.....	.....	.....	.....	2	1	1	1
Do.....	Jan. 30	133,859	65	14	.....	.....	.....	.....	.....	1	.....	2	.....
Des Moines, Iowa.....	Feb. 27	62,139	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Detroit, Mich.....	do	285,704	101	.....	.....	.....	.....	.....	.....	.....	1	1	.....
Dubuque, Iowa.....	do	36,287	14	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Dunkirk, N. Y.....	do	11,616	8	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Elmira, N. Y.....	Feb. 20	35,672	9	.....	.....	.....	.....	.....	.....	.....	1	.....	.....
Do.....	Feb. 27	35,672	9	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Erie, Pa.....	do	52,733	23	3	.....	.....	.....	.....	.....	.....	.....	3	.....
Evansville, Ind.....	do	59,007	20	1	.....	.....	.....	.....	.....	.....	2	.....	.....
Everett, Mass.....	do	24,336	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Fall River, Mass.....	Mar. 5	104,863	48	6	.....	.....	.....	.....	.....	1	.....	1	.....
Flint, Mich.....	Feb. 27	13,103	5	.....	.....	.....	.....	.....	.....	.....	.....	1	.....
Fort Smith, Ark.....	Feb. 20	11,587	5	.....	.....	.....	.....	.....	.....	.....	.....	1	.....
Do.....	Feb. 27	11,587	10	1	.....	.....	.....	.....	.....	.....	.....	.....	1
Freeport, Ill.....	do	13,258	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Galesburg, Ill.....	do	18,607	4	.....	.....	.....	.....	.....	.....	1	.....	.....	.....
Grand Rapids, Mich.....	do	87,565	35	1	.....	.....	.....	.....	.....	2	.....	.....	.....
Greenville, S. C.....	do	11,860	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Hyde Park, Mass.....	Mar. 2	13,244	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Jacksonville, Fla.....	Feb. 27	28,429	17	5	.....	.....	.....	.....	.....	.....	.....	.....	.....
Johnstown, Pa.....	do	35,936	22	.....	.....	.....	.....	.....	.....	.....	2	.....	.....
Kokomo, Ind.....	do	10,609	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lawrence, Mass.....	do	62,559	.....	4	.....	.....	.....	.....	.....	.....	.....	.....	1
Lexington, Ky.....	do	26,369	26	3	.....	.....	.....	.....	.....	.....	.....	.....	.....
Lowell, Mass.....	Mar. 5	94,969	37	4	.....	.....	.....	.....	.....	.....	.....	1	.....
McKeesport, Pa.....	Feb. 27	34,227	23	.....	.....	.....	.....	.....	.....	2	.....	.....	.....
Malden, Mass.....	do	33,664	12	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Manchester, N. H.....	do	56,987	26	3	.....	.....	.....	.....	.....	.....	1	.....	.....

Weekly mortality table, cities of the United States—Continued.

[illegible]

FOREIGN AND INSULAR.

AFRICA.

Report from Cape Colony—Examination for plague and plague-infected rats.

COLONIAL SECRETARY'S OFFICE,
Cape Town, Cape of Good Hope, February 8, 1904.

The following report by the medical officer of health for the Colony on the state of the outbreak of bubonic plague in the Cape Colony for the week ended February 6, 1904, is published for general information.

NOEL JANISCH,
Under Colonial Secretary.

Report of the medical officer of health on the state of plague in Cape Colony during week ended February 6, 1904.

Port Elizabeth.—No case of plague has been discovered during the week. Plague-infected rodents continued to be found in the town.

East London.—No case of plague was discovered during the week. At the plague hospital one case remains under treatment. No plague-infected rodents were found in the town.

Queenstown.—No case of plague was discovered during the week. Dead rodents, probably plague infected, continued to be found in the town.

Other places.—At King Williams Town, Knysna, Lady Grey Bridge, and Graaff-Reinet no case of plague in man or animal was discovered during the week.

Cape Town and harbor board area.—Two hundred and forty-five rats were examined during the week. None were found affected with plague.

A. JOHN GREGORY,
Medical Officer of Health for the Colony.

AUSTRIA-HUNGARY.

Report from Fiume—Inspection of immigrants.

Acting Commercial Agent La Guardia reports, February 20, 1904: February 19, steamship *Aurania*, via Naples: Steerage passengers inspected, 698; steerage passengers passed and embarked, 695; pieces of baggage inspected and disinfected, 680.

CANADA.

Inspection of immigrants at St. John, New Brunswick.

Passed Assistant Surgeon Billings reports as follows: Month of February, 1904: Number of immigrants inspected, 531; number passed, 506; number detained, 25.

CHINA.

Reports from Hongkong—Inspection of vessels—Diphtheria and enteric fever.

Passed Assistant Surgeon McMullen reports, January 27, and February 2 and 8, as follows:

During the week ended January 23, 1904, 8 vessels, with 659 crew and 283 passengers (171 cabin and 112 steerage), were inspected and granted bills of health; 528 crew and 77 steerage were bathed and their baggage was disinfected—607 pieces. There were 17 aliens recommended for rejection because of loathsome or dangerous contagious disease. One case of diphtheria (European) was the only communicable disease reported in the colony during the week.

Fumigation of vessel to kill rats.

Week ended January 30, 1904, 9 vessels with 760 crew and 173 passengers (131 cabin and 42 steerage) were inspected and granted bills of health; 545 crew and 38 steerage were bathed and their baggage was disinfected—582 pieces. One vessel was fumigated with sulphur to kill rats, and 1 army transport was allowed to proceed to Manila via Mariveles for disinfection. One case of enteric fever (imported) was the only communicable disease reported for the week. There were 7 aliens recommended for rejection because of loathsome or dangerous contagious disease.

Week ended February 6, 1904, 6 vessels, with 471 crew and 345 passengers (156 cabin and 189 steerage), were inspected and granted bills of health; 358 crew and 40 steerage passengers were bathed and their baggage was disinfected, 420 pieces. There was one rejection for fever.

Enteric fever was the only communicable disease reported for the week—9 cases reported, with 1 death. The majority of these cases occurred on a vessel in the harbor.

Reports from Shanghai—Smallpox.

Acting Assistant Surgeon Ransom reports, January 26, as follows:

During the week ended January 23, 1904, 2 original and 2 supplemental bills of health were issued, and 3 vessels, 121 crew, 17 cabin and 5 steerage passengers, with 78 pieces of personal baggage, were inspected and passed.

There were disinfected with formalin 11 pieces of steerage passengers' baggage and 1 piece of baggage belonging to crew. Also there was disinfected with 1-800 bichloride solution the hold between the upper decks, fore and aft, of 1 vessel.

Five immigration examinations were made, with no rejections.

The report of the municipal health officer shows for the week, smallpox, 1 case, 11 deaths; enteric fever, 1 case; diphtheria, 1 case, 5 deaths; tuberculosis, 1 case, 39 deaths. The total mortality reported was 2 foreigners and 134 natives.

No quarantinable diseases were reported from outports.

During the week ended January 30, 1904, no bills of health were issued by this office to vessels bound to American ports. This condi-

tion is due to the fact that all Japanese steamers have been withdrawn from service and that other vessels are unable to secure freight promptly because of the general feeling of uncertainty and threatened hostilities between Japan and Russia.

The municipal health office reports for the week: Smallpox, 2 cases and 16 deaths; enteric fever, 3 cases; diphtheria, 6 deaths, and tuberculosis, 65 deaths. Total mortality, 4 foreigners and 150 natives.

No quarantinable diseases were reported from outports.

Immigrant for San Francisco recommended for rejection.

One immigrant per steamship *Doric* for San Francisco recommended, February 2, for rejection.

CUBA.

Report from Cienfuegos—British steamer Kelvingrove from South American ports sent to Mariel quarantine station.

Acting Assistant Surgeon McMahon reports, February 25, as follows: During the week ended February 20, 1904, bills of health were issued to three vessels going to ports in the United States, all in good sanitary condition and no sickness on board.

No quarantinable disease has appeared at this port during this week. The mortuary report for the ten days of this month, ended February 20, has not yet been received.

The steamship *Kelvingrove* arrived at this port on February 22 from Buenos Ayres and Para, Brazil, with bill of health from the American consul in Para, stating there was bubonic plague existing at that port. The ship was sent to Mariel for fumigation and no cargo discharged here.

Report from Habana—Precautionary detention of British steamship Kelvingrove from South American ports.

Acting Assistant Surgeon Echemendia reports, February 26, as follows: Week ended February 20, 1904:

Vessels inspected and issued bills of health	20
Crews of outgoing vessels inspected	708
Passengers of outgoing vessels inspected	740
Pieces of freight passed	310

I have been informed by the chief quarantine officer of the Cuban service, Dr. Hugo Roberts, that the English steamship *Kelvingrove* arrived at the port of Cienfuegos on February 22, 1904, from Buenos Ayres and Montevideo, Para and Santa Lucia, and on account of the prevalence of bubonic plague at Para the vessel was quarantined at Cienfuegos, and later directed to proceed to Mariel Quarantine Station for disinfection. There was no sickness reported on board of the ship, this action being solely precautionary.

Mortuary report of Habana for week ended February 20, 1904.

Disease.	Number of deaths.
Tuberculosis	17
Pneumonia	4
Bronchitis	3
Enteric fever	2
Meningitis	8
Enteritis	1
Cancer	1
Tetanus	1
Measles	1

Total deaths from all causes, 96.

Report from Matanzas—Leprosy.

Acting Assistant Surgeon Nuñez reports, March 1, as follows:

During the week ended February 26, 1904, 2 bills of health were issued to vessels bound for the United States, in good sanitary condition.

No infectious or contagious disease, or any of quarantinable nature, has been reported within this district during the week. The case of leprosy in a prisoner, mentioned in my previous report, is still in the civil hospital of this city, awaiting a trial before being transferred to Habana.

Mortuary statistics of the city of Matanzas for the last nine days of February, 1904.

	Number of deaths.	Bertillon number.
Enteritis	4	105
Meningitis	2	61
Enteritis (above 2 years of age)	1	106
Cirrhosis of the liver	1	112
Tuberculosis	7	29
Senility	1	154
Cancer of the stomach	1	40
Hemorrhage, cerebral	2	64
Pneumonia	1	72
Cardiac disease (undetermined)	1	92
Total	21	.....

Estimated population, 48,000; annual rate of mortality per 1,000, 15.96.

History of leprosy cases.

Acting Assistant Surgeon Nuñez reports, February 26, as follows:

I have the honor to submit herewith the following history of the 2 cases of leprosy held under provisional observation at the civil hospital of this city since February 17, 1904:

Case No. 1.—Florentino Sosa, white, a native of Corral Falso, province of Matanzas, Cuba, 47 years of age, single, and without any children. He states that father and mother are both living and enjoying good health. With the exception of one of his brothers, who is at present suffering from same affection at home, he knows of no other instance among either his near or distant relatives that would indicate any hereditary tendency. He also denies having been in contact with other cases of leprosy by which he could have become infected. Sosa is a farmer by occupation, was born and raised in the country, where

he has always lived with his parents until he was brought to this city under arrest. He is addicted to alcoholic drinks, is of unclean personal habits, has always worn light linen clothes, and continually lived in very poor circumstances. He has been suffering from the present illness since he was 17 years old—that is, for the last thirty years—without showing a marked emaciation.

From what I have been able to observe, this case presents the tubercular or nodular type of leprosy. Numerous disseminated nodules are seen covering the skin of the face, especially around the nose and ears, giving it a leonine aspect, the hands present several scars of bullæ that have undergone ulceration, while several fingers can be noticed forcibly flexed on the palms of both hands through the contraction and shortening of the tendons of the corresponding muscles. The feet present the familiar appearance of elephantiasis, but in addition, numerous large cauliflower growths, almost the size of a chestnut, are to be seen covering the anterior aspects of both ankle joints. Several nodules and cicatrices are also present in different parts of the body, showing that the case is in an advanced stage of the disease.

The patient has been taking the compound sirup of sarsaparilla with iodide of potassium without any appreciable result.

Case No. 2.—Cecilia Hernandez, a negro woman, 40 years old, single, and with no children, has been living until recently at the San Miguel de Azopardo sugar plantation within this province. She has been occupied in general country work all her life up to the time she came to consult a physician in this city. No information can be obtained to show any hereditary source, or her having been in contact with other cases of leprosy that could explain the origin of the disease. She has been in the habit of taking plain, wholesome food, with the addition of some wine and water after each meal. Her general appearance shows very little attention paid to personal cleanliness. Her present affection, which commenced ten years ago, presents a combination of the two known varieties of leprosy—the tubercular and the anæsthetic. Numerous disseminated nodules and unpigmented macules can be noticed upon the face, trunk, hands, and feet, and several deep ulcers in the legs. This case is also in an advanced stage and, likewise, has been under treatment with iodide of potassium and sirup of sarsaparilla, with negative results.

The characteristic features to be noted in these two cases are the absence of inheritance and the impossibility of tracing the source of the contagion. It is a well-known fact that leprosy has existed in Cuba for many centuries, scattered more or less, especially in the principal cities, without any efficient prophylactic measures ever being taken prior to the American intervention to avert its propagation.

During the time of the Spanish Government there was no compulsory law as to isolation. The poorer class of patients without resources who volunteered of their own accord to go to the hospital for a home and comfort were the only inmates, while the well-to-do patients invariably remained at home with their families disseminating this dreadful disease.

Therefore it is not strange that some cases, like those mentioned, living in secluded country districts, trying to evade the laws in order not to be cut off from society and friends, may have escaped the attention of the health authorities; hence the difficulty at times to locate the origin of the infection.

The brother of the case No. 1, referred to as suffering with leprosy, has been reported to the superior board of health in order to be conveyed to San Lazaro Hospital. Case No. 2 has already been transferred, while case No. 1, being a prisoner, is still, pending some judiciary proceedings, to be also transferred to that institution.

GERMANY.

Report from Berlin—Plague and cholera in various countries.

Consul-General Mason reports, February 20, as follows:

Plague.

British India.—During the week ended January 23 there were registered in the Bombay Presidency 9,017 cases of plague and 6,929 deaths, of which 230 cases (195 deaths) occurred in the city of Bombay, 9 cases (8 deaths) in Karachi, 9 cases (9 deaths) in Broach, and 11 cases (11 deaths) in Jodia.

British South Africa.—In Cape Colony, during the week ended January 16, two cases of plague were registered in Port Elizabeth. Plague-infected rats continue to be found in Port Elizabeth, Knysna, and East London.

Brazil.—In the middle of January several cases of plague were reported at Pindamonhangaba, a town on the main line between San Paulo and Rio Janeiro; great mortality among the rats of that place has also been noticed.

Plague and cholera.

British India.—In Calcutta, during the three weeks from December 20 last year to January 9 this year, 40 persons died of cholera and 48 persons died of the plague.

Death rate of Berlin and other cities.

The death rate of Berlin for the week ended February 6 was higher than that of the preceding week, amounting, calculated on the year, to 15.4 per thousand of the population, this being, however, lower than the rate for the corresponding week of last year, in which it amounted to 16.1. In spite of this increase, however, more than two-thirds of the large German cities showed less favorable figures than Berlin, the death rate of the following places being considerably higher than that of this city, viz, Hamburg, Dresden, Hanover, Dusseldorf, Rixdorf (with 16.7), Munich, Nuremberg, Cologne, Aix la Chapelle, Breslau, Königsberg, as well as London, Paris, and Vienna. The following towns, on the other hand, had a lower death rate than that of Berlin, namely: Charlottenburg (with 11 per thousand), Schöneberg (with 14.3), Leipzig, Stuttgart, and Carlsruhe. The rate of mortality among infants rose from 3.2 per year per thousand to 4.2, being considerably lower than the Munich rate, though higher than the Hamburg figure. There was no important change in connection with acute intestinal diseases, which caused 30 deaths. Acute diseases of the respiratory organs, however, showed an increase, claiming 74 victims, including 11 persons who succumbed to influenza. Further-

more, there were registered 67 deaths from phthisis pulmonalis, 36 deaths from cancer, 10 deaths from measles, 1 death from scarlet fever; finally, 24 persons died by violence.

Report from Chemnitz—Twenty-five years of German mortality statistics.

The following is received from Consul Monaghan, under date of January 27:

An interesting statistical compilation was recently published under the caption "Twenty-five Years of German Mortality Statistics." Being a Government publication, and issued through the collaboration of the bureaus of sanitation and of statistics, the report has every claim to trustworthiness. The figures concern themselves with the causes and number of deaths among the leading diseases during the last twenty-five years, that is, from 1877 to 1901, in cities whose population exceeds 15,000.

In 1877 these cities contained a total population of 7,300,000 inhabitants, while by 1891 this number had been swelled to 17,500,000. The entire statistical presentation forms a splendid monument to the attainments of modern culture, and to the rapid progress of medical and sanitary science in the German Empire.

The following table presents the gist of the inquiry. The figures show the number of deaths per 100,000 inhabitants during the five years from 1877 to 1881, and during the five years from 1897 to 1901. The figures in the last column show how many times the death rate was greater during the first five years of the statistical inquiry. Thus in case of smallpox the death rate during the five years from 1877 to 1881 was 37.5 times as great as during the five years from 1897 to 1901:

Number of deaths per year per 100,000 inhabitants.

Disease.	1877-1881.	1897-1901.	Death rate first 5 years (times as high).
Smallpox.....	1.5	0.04	37.5
Abdominal typhoid.....	43.6	10.4	4.2
Localized typhoid.....	2.6	.06	43.3
Puerperal fever.....	14.4	5.1	2.8
Measles.....	27.6	21.3	1.3
Diphtheria.....	99.8	31.1	3.2
Acute diseases of the respiratory organs.....	308.6	258.5	1.2
Consumption.....	357.7	218.7	1.6
All other diseases not here enumerated.....	1,426.7	1,129.8	1.3
Average death rate.....	26.73	20.46	1.3

A gratifying advance is thus recorded in case of all these diseases. Its explanation is found in the spread of knowledge, the development of municipal administration, the progress of medicine, and the improvement of national legislation. Especially salutary in their operation are reported to have been the laws introducing invalid insurance (1885), the ordinances for the protection of workmen, and for the inspection of food products and the establishment of local bureaus for the analysis of food products.

The number of suicides has also decreased. During the years from 1877 to 1881 the rate of suicide per year per 100,000 was 31, while during the years from 1897 to 1901 the rate was 24.5. The general

improvement in the material welfare of the people is advanced in the report as an explanation.

The history of one class of diseases, that of acute intestinal diseases, is, however, extremely unfavorable. Its progress is looked upon with alarm. The death rates in cities of 15,000 inhabitants during periods of five years were as follows, per year, per 100,000 inhabitants:

During the five years—	Death rate per 100,000.
1877-1881.....	264.4
1882-1886.....	253.1
1887-1891.....	258.2
1892-1896.....	256.6
1897-1901.....	287.8

Among the acute intestinal diseases are included colic, stomach and intestinal catarrh, and diarrhea. It is especially among children that mortality from these diseases has been increasing, and particularly among sucklings.

The explanation given for this is that women are with each succeeding year participating to a larger extent in industrial life, and in consequence neglecting to bestow the necessary and proper care upon their children. Young children are too frequently irregularly nourished or starved while the mother is laboring in the factory or workshop, while, on the other hand, the common milk used for nourishment often contains impurities, or is prepared by unskilled or careless hands, thus exposing the fragile life of the child as a sacrifice to poverty or ignorance. However, with the rapidly improving methods in the handling of milk one of these evils will undoubtedly lessen from year to year.

HAWAII.

Plague at Hilo.

HONOLULU, *March 7, 1904.*

WYMAN, *Washington:*

There was a death from plague, Hilo, March 4.

COFER.

INDIA.

Report from Calcutta—Fumigation of vessels to destroy vermin.

Passed Assistant Surgeon Sprague, at Calcutta, reports, February 4 and 11, as follows:

During the week ended January 30, 1904, 1 bill of health was issued to the steamship *Queen Olga*, bound for Philadelphia, with a total crew of 30, all Europeans. Rat guards were kept on her wharf line during her stay at dock and the cargo compartments were fumigated for the destruction of vermin.

During the week ended February 6, 1904, bill of health was issued to the steamship *Queen Eleanor*, bound for Boston with a total crew of 31, all Europeans. Rat guards were maintained on the wharf lines, and the holds were fumigated for destruction of vermin.

Increase of plague—Examination of rats—Haffkine virus.

Plague seems to be on the increase in this city, the cases having rapidly risen to 51 within seven days.

The diagnosis, except rarely, is made after death when the bodies go to the burning ghat or to the burying ground. The premises of the deceased are then visited to search for other suspicious cases, and the room which he occupied is thoroughly washed with bichloride of mercury solution. From the structure of the dwellings no gaseous disinfectant would be of any value.

Dead rats are daily collected in the infected regions to the number of 300 to 400 and some of them are examined for evidences of plague; none has thus far been found, but it may be interesting to note that most of the cases are in the neighborhood of the grain "godowns" or storehouses.

Haffkine virus is given to applicants, but I am told that only a very few have as yet applied for it, about 20, and all those who applied had received inoculation last year. Evidently they appreciated the protection and desired its continuance.

Reports from Bombay—Comparative statistics of plague mortality—Malta fever in Bombay.

Acting Asst. Surg. Edward H. Hume reports, February 6, as follows:

The following figures show the progress of plague since the statement published in Public Health Reports on January 1, 1904. In that number the figures were given from September, 1896, to the end of October, 1903.

Summary of plague in Bombay Presidency from June 1 to December 31, 1903.

	Cases.	Deaths.
Total from June 1 to September 30, 1903.....	97, 715	69, 876
Total for October, 1903.....	66, 437	49, 335
Total for November, 1903.....	54, 709	41, 659
Total for December, 1903.....	42, 433	32, 329
Total from June 1 to December 31, 1903.....	261, 294	193, 199

These figures show that 73.94 per cent of the cases died, a mortality rate that is perhaps a little lower than is sometimes seen. It would appear as if the number of cases were steadily decreasing, month by month. This was true during December, but the figures for January, when published, will show a decided rise, as I have already reported in my weekly statement. The following is a summary of the plague and total mortality in Bombay city during January 1904:

Weekly summary, January, 1904.

[Population of Bombay, 776,006.]

	Plague attacks.	Plague deaths.	Total mortality.	Rate per 1,000 per annum.
Week ended—				
January 5.....	153	125	728	48. 78
January 12.....	207	186	730	48. 91
January 19.....	211	189	680	45. 56
January 26.....	270	231	763	51. 12
February 2.....		384	917	61. 44

The figures for the week ended February 2 show that plague mortality is greatly on the increase, and that the total mortality has also rapidly risen. As you will see from the summary of deaths and births given in the Bombay Government Gazette, herewith inclosed, the cases of plague are found all over the city, nearly every section being involved. That section called Dongri suffers most severely, as usual.

Comparative statement of plague deaths in January for five years.

	1904.	1903.	1902.	1901.	1900.
Week ended:					
January 5	125	183	213	154	244
January 12	186	349	250	222	324
January 19	189	469	296	328	428
January 26	231	455	347	371	478
February 2	384	551	.....	.....	.....

Mean for preceding five years, 497.

You will observe that although plague motality is on the increase, as usual at this season, the comparative figures for previous years are encouraging, taking them week for week.

I have the honor to forward to you a copy of a pamphlet given me by Doctor Haffkine on "The Occurrence of Mediterranean or Malta Fever in Bombay," by Capt. George Lamb. The interest attaching to these cases reported is that it seems likely that a number of the unrecognized fevers of this Presidency may prove, on careful examination, to be cases of Malta fever. I am preparing a statement with regard to such cases of unrecognized fevers to send you. It is true, however, that Captain Lamb, now stationed at Kussauli, is making the serum test on all doubtful cases whose blood he can get hold of. A case developed at Miraj last month, with a temperature curve almost exactly like that of "Case 1, G. C.," in the accompanying pamphlet, and on testing the serum, it was found to strongly agglutinate the *Micrococcus melitensis*. The patient, an Englishwoman, has been invalided home at once.

Plague and smallpox.

	Deaths from plague.	Total mortality.	Rate per mille per annum.
Week ended—			
February 9, 1904	419	938	62.85
February 2, 1904	384	917	61.44
February 10, 1903	649	1,434	96.09
February 3, 1903	551	1,343	89.99
Mean of corresponding weeks in preceding five years	602	1,745	114.23

You will thus observe that although the plague and total mortality are greater than for any previous week since November, 1903, yet the figures are only a little more than half those representing the mean of the corresponding weeks of the five years preceding 1903.

There were 8 deaths from smallpox in the week ended February 9, 1904, as compared with 53 in the corresponding week last year.

JAPAN.

Report from Yokohama—Sanitary conditions good—Plague in Formosa—Quarantine at Dalny and Port Arthur against Chefoo on account of smallpox.

Assistant Surgeon Moore reports, February 13, as follows:

During the week ended February 6, 1904, one steamer was inspected. The status of Japan, as regards grave quarantinable disease, remains unchanged. Plague continues to be reported from Formosa.

The Russian authorities at Dalny and Port Arthur are reported to have proclaimed quarantine against Chefoo on account of smallpox.

PANAMA.

Report from city of Panama—No quarantinable diseases.

Assistant Surgeon Pierce reports, February 22, as follows:

During the week ended February 21, 1904, one vessel, the steamer *San Juan*, cleared for San Francisco, with a crew of 59 and with 24 passengers on board, all in good health.

No quarantinable diseases were reported during the week. There were 24 deaths from all causes. The following causes of death were taken from the official register:

Nephritis	2	Abscess of the liver.....	1
General debility.....	1	Colic	1
Phthisis	3	Cholera infantum.....	1
Albuminuria	2	Worms	1
Fevers.....	4	Tuberculosis	1
Fever, pernicious	1	Scrofula	1
Fracture	1	Congestion.....	1
Old age	1	Heart disease.....	1
Pneumonia	1		

Report from Colon—Inspection of vessels.

Surgeon Perry reports, February 22, as follows:

During the week ended February 20, 1904, the following vessels sailed from Colon to United States ports: British steamship *Colonian* for New Orleans, February 17, 3 passengers embarked at this port; American steamship *Alliance* for New York direct, 38 passengers, February 18; Norwegian steamship *Brighton* (fruit boat) for New Orleans, 13 passengers and 24 crew, February 19; American schooner *J. K. Matherson*, 7 crew and no passengers, for Baltimore, on February 19; and the Norwegian steamship *Vera* for New York, on February 20, with 24 crew and no passengers.

PHILIPPINE ISLANDS.

Report from Manila—No cholera in Manila—Plague.

Chief Quarantine Officer Heiser reports, January 28 and February 4, as follows:

No report has been received from the provinces of the number of cases of cholera that have occurred during the week ended January

23, 1904. During the same period the only quarantinable diseases reported in Manila were 3 cases of plague, with 2 deaths.

The continued absence of cholera is very satisfactory, and it may be reasonably assumed that the only quarantinable disease with which we will have to contend at this port in the immediate future will be plague. The number of cases of the latter disease has not been large, yet its presence at a season of the year at which it is usually absent indicates that the prospect of its early disappearance is not bright. Assistant Surgeon Carroll Fox has reported the presence of another case at Cebu, Philippine Islands. This makes 2 cases at that port for the week covered by this report.

Quarantinable diseases—Fumigation of vessels—Recurrence of cholera in Manila.

The number of quarantinable diseases reported in Manila during the week ended January 30, 1904, is as follows:

	Cases.	Deaths.
Cholera.....	1	1
Smallpox.....	0	0
Plague.....	2	1

Recurrence of cholera in Manila.

The entire freedom from cholera which has been enjoyed during the past three weeks was interrupted during the week by one case of this disease. There has been no increase in the number of plague cases, only two cases and one death being reported. The board of health hopes that the systematic inoculation of the inhabitants of the infected sections of the city with the Shiga plague prophylactic will make the number of cases of this disease very few.

Smallpox on the eastern coast of Luzon in the vicinity of Antinonan is very bad at present. Number of cases unknown.

Asst. Surg. George W. McCoy reports that an American, the chief engineer on the coast guard cutter *Panay*, died from cholera while the vessel was at Iloilo, P. I.

On January 26, 1904, the British steamer *Saint George* sailed for Boston and New York via Cebu, P. I. The vessel was thoroughly fumigated with sulphur throughout.

Report of cholera occurring in provincial towns in the Philippine Islands for the week ended January 30, 1904.

Place.	Province.	Cases.	Deaths.
Aliaga.....	Nueva Ecija.....	23	14
San Jose.....	do.....	5	5
Manapla.....	Island of Negros.....	27	27
Cadiz.....	do.....	65	44
Total.....		120	90

Quarantine transactions during the month of December, 1903.

PORT OF MANILA.

Bills of health issued:

To steamers for—

United States ports	6
Foreign ports	46
Domestic ports	172

To sailing vessels for—

United States ports	2
Foreign ports	0
Domestic ports	87

Total	313
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Number of vessels inspected:

Steamers from—

United States ports	6
Foreign ports	53
Domestic ports	178

Sailing vessels from—

United States ports	0
Foreign ports	0
Domestic ports	71

Total	308
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Number of passengers on arriving boats inspected:

On steamers—

Cabin	1, 893
Steerage	6, 676

On sailing vessels—

Cabin	2
Steerage	207

Total	8, 778
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Number of persons vaccinated:

On steamers, crew	1, 173
On steamers, passengers	0
On sailing vessels, crew	398
On sailing vessels, passengers	0

Total	1, 571
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Crew on arriving steamers inspected	10, 926
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On arriving sailing vessels inspected	640
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Persons quarantined for observation, suspects and contacts	0
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Persons bathed and effects disinfected	1, 724
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Steamers disinfected	4
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Steamers partially disinfected	1
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Sailing vessels disinfected	0
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Steamers fumigated to exterminate vermin	10
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Sailing vessels fumigated to exterminate vermin	3
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Cases of quarantinable diseases detected on steamers, leprosy	1
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Vessels detained in quarantine	0
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Pieces of baggage:

Disinfected on steamers	2, 463
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Disinfected on sailing vessels	0
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Pieces of baggage inspected and passed:

On steamers	221
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Sailing vessels	0
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OUTGOING.

Vessels remaining in quarantine from November	0
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Vessels sailing without quarantine inspected and passed	6
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Sailing vessels sailing without quarantine inspected and passed	2
Steamers disinfected	5
Sailing vessels disinfected	2
Crew of steamers inspected	548
Crew of sailing vessels inspected	24
Passengers of steamers inspected	1, 337
Passengers of sailing vessels inspected	1
Persons bathed and effects disinfected	1, 356
Pieces of baggage disinfected	2, 386
Pieces of baggage inspected and passed	2, 274

PORT OF CEBU.

Bills of health issued:

To steamers for—	
United States ports	2
Foreign ports	5
Domestic ports	118
To sailing vessels for—	
United States ports	0
Foreign ports	0
Domestic ports	15
Total	140

Number of vessels inspected:

Steamers from—	
United States ports	0
Foreign ports	8
Domestic ports	127
Sailing vessels from—	
United States ports	0
Foreign ports	0
Domestic ports	225
Total	360

Number of passengers on arriving boats inspected:

On steamers—	
Cabin	223
Steerage	1, 055
On sailing vessels—	
Cabin	0
Steerage	521
Total	1, 799

Crew on arriving steamers inspected	3, 829
Crew on arriving sailing vessels inspected	1, 427
Persons bathed and effects disinfected	55
Persons vaccinated	406
Steamers fumigated to exterminate vermin	1
Sailing vessels fumigated to exterminate vermin	0
Vessels detained in quarantine	0

PORT OF ILOILO.

Bills of health issued:

Steamers for—	
United States ports	0
Foreign ports	1
Domestic ports	88
Sailing vessels for—	
United States ports	0
Foreign ports	0
Domestic ports	191
Total	280

Number of vessels inspected:

Steamers from—	
United States ports	0
Foreign ports	4
Domestic ports	79
Sailing vessels for—	
United States ports	0
Foreign ports	0
Domestic ports	189
Total	<u>272</u>

Number of passengers on arriving boats inspected:

On steamers—	
Cabin	335
Steerage	769
On sailing vessels—	
Cabin	0
Steerage	867
Total	<u>1,971</u>

Crew on arriving steamers inspected	2,946
Crew on arriving sailing vessels inspected	1,699
Persons vaccinated	508
Vessels disinfected	0
Vessels detained in quarantine	0

PORT OF JOLO.

Bills of health issued:

To steamers for—	
United States ports	0
Foreign ports	3
Domestic ports	9
To sailing vessels for—	
United States ports	0
Foreign ports	0
Domestic ports	1
Total	<u>13</u>

Number of vessels inspected:

Steamers from—	
United States ports	0
Foreign ports	5
Domestic ports	12
Sailing vessels for—	
United States ports	0
Foreign ports	0
Domestic ports	2
Total	<u>19</u>

Number of passengers on arriving boats inspected:

On steamers—	
Cabin	86
Steerage	272
On sailing vessels—	
Cabin	0
Steerage	21
Total	<u>379</u>

Persons vaccinated	0
Crew on arriving steamers inspected	817
Crew on arriving sailing vessels inspected	17
Vessels in quarantine	0

PORTO RICO.

Report from San Juan--Immigration.

Chief Quarantine Officer King reports, February 23, as follows:

Immigration at San Juan and subports.

Report of alien passengers arriving at San Juan during the week ended February 20, 1904.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 19	Spanish ss. Puerto Rico.....	Barcelona, Palma de Mallorca, Valencia, Torre Vieja, Malaga, Cadiz, Teneriffe, Las Palmas, Sta Cruz de la Palma.	5
19	French ss. Olinde Rodriguez.....	St. Marc, Gonaives, Petit Goâve, Port au Prince, Port de Paix, Cape Haitien, Sanchez.	6
19	Cuban ss. Julia	Habana, Nuevitas, Puerto Padre, Gibara, Baracoa, Santiago, Santo Domingo.	6
	Total		17

Report of alien passengers arriving at San Juan during the week ended February 27, 1904.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 21	Spanish ss. Montevideo	Habana, Limon, Barranquilla, Colon, Curaçao, Puerto Cabello, and La Guayra.	6
22	British ss. Solent	Barbados, Castries, Fort de France, Roseau, Point à Pitre, Monserrat, Saint John, Antigua; Saint Christopher, and Saint Thomas.	6
	Total		12

Aguadilla, Arecibo, Arroyo, Fajardo, Humacao, and Mayaguez, no transactions.

Report of alien passengers arriving during the week ended February 20, 1904, at the six subports of Porto Rico.

MAYAGUEZ.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 16	French ss. Salvador	Port au Prince, Jeremie, Les Cayes, Jecmel, Santo Domingo.	12
18	Cuban ss. Julia	Habana, Gibara, Nuevitas, Porto Padre, Baracoa, Santiago, Santo Domingo.	2
20	Spanish ss. Puerto Rico.....	Barcelona, Palma de Mallorca, Valencia, Malaga, Cadiz, Santa Cruz de Tenerife, Las Palmas, Santa Cruz de la Palma.	1
	Total		15

Aguadilla, Arecibo, Arroyo, Fajardo, and Humacao, no transactions.

*Smallpox in San Juan.*SAN JUAN, P. R., *March 8, 1904.*WYMAN, *Washington:*

Smallpox is now present in San Juan, 6.

CLARK.

Report from Ponce—Vital statistics, month of January, 1904—Immigration.

Acting Assistant Surgeon Torres reports, February 16, through the chief quarantine officer, as follows:

Vital statistics of the city of Ponce during the month of January, 1904.

Diseases of—		Congenital malformation.....	3
Digestive system	22	Convulsions.....	6
Nervous system	5	Syphilis	1
Circulatory system	8	Grippe	13
Respiratory system	15	Diphtheria.....	4
Malarial fever	24	Erysipelas	1
Tuberculosis	14		
Hydræmia	3	Total	147
Anæmia, inanition	19	January, 1904:	
Nephritis	1	Deaths	147
Old age.....	1	Births	79
Metritis	2	January, 1903:	
Accidents.....	4	Deaths	103
Cancer	1	Births	125

Immigration at Ponce.

Report of alien passengers arriving at Ponce during the week ended February 20, 1904.

Date of arrival.	Vessel.	Where from.	Number of immigrants.
Feb. 18	Cub. ss. Julia	Habana, Nuevitas, Puerto Padre, Gibara, Baracoa, Santiago de Cuba, Santo Domingo.	11
20	Sp. ss. Montevideo	Habana, Limon, Colon, Sabanilla, Curaçao, Puerto Cabello, La Guayra.	1
	Total		12

Foreign and insular statistical reports of countries and cities—Yearly and monthly.

AFRICA—*Lourenzo Marquez.*—Month of December, 1904. Estimated population, 7,000. Total number of deaths 72, including 9 from tuberculosis.

ARGENTINA—*Buenos Ayres.*—Month of December, 1903. Estimated population, 895,381. Total number of deaths 1,271, including diphtheria 8, enteric fever 9, scarlet fever 5, measles 3, smallpox 48, and 175 from tuberculosis.

AUSTRALIA—*New South Wales, New Castle*.—Estimated population, 49,400. Total number of deaths, 68; including enteric fever, 5, and 4 from tuberculosis.

Sydney, city and suburbs.—Month of December, 1903. Estimated population, 508,510. Total number of deaths, 554; including diphtheria, 2; enteric fever, 6; measles, 1; whooping cough, 13; and 50 from tuberculosis.

BAHAMAS—*Dunmore Town*.—Two weeks ended February 19, 1904. Population, 1,232. Two deaths. No contagious diseases.

Governors Harbor.—Week ended February 20, 1904. Estimated population, 1,500. No deaths and no contagious diseases.

Green Turtle Cay—Abaco.—Two weeks ended February 18, 1904. Estimated population, 3,314. No deaths and no contagious diseases.

Nassau.—Two weeks ended February 23, 1904. Estimated population, 12,390. No deaths and no contagious diseases reported.

DUTCH GUIANA—*Paramaribo*.—Month of January, 1904. Estimated population, 32,547. Total number of deaths, 96. No contagious diseases reported.

FRANCE—*Rouen*.—Month of January, 1904. Estimated population, 116,316. Total number of deaths, 324, including diphtheria 3, enteric fever 2, measles 1, whooping cough 1, and 48 from tuberculosis.

GERMANY—*Weimar*.—Month of January, 1904. Estimated population, 30,606. Total number of deaths, 43. No contagious diseases reported.

GIBRALTAR.—Two weeks ended February 14, 1904. Estimated population, 27,460. Total number of deaths, 15. No deaths from contagious diseases.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 76 great towns in England and Wales during the week ended February 13, 1904, correspond to an annual rate of 18.4 per 1,000 of the aggregate population, which is estimated at 15,271,425.

Bradford.—Two weeks ended January 30, 1904. Estimated population, 285,089. Total number of deaths, 208, including diphtheria 5, enteric fever 1, measles 1, scarlet fever 3, whooping cough 1, and 16 from phthisis pulmonalis. Two weeks ended February 13, 1904. Total number of deaths, 175, including diphtheria 7, enteric fever 1, measles 2, scarlet fever 2, whooping cough 3, and 8 from phthisis pulmonalis.

London.—One thousand five hundred and seventy-four deaths were registered during the week, including measles 37, scarlet fever 4, diphtheria 12, whooping cough 52, enteric fever 8, and diarrhea 13. The deaths from all causes correspond to an annual rate of 17.07 per 1,000. In Greater London 2,200 deaths were registered. In the "outer ring" the deaths included 5 from diphtheria, 1 from measles, 2 from scarlet fever, and 7 from whooping cough.

Ireland.—The average annual death rate represented by the deaths registered during the week ended February 13, 1904, in the 21 principal town districts of Ireland was 27.6 per 1,000 of the population, which is estimated at 1,093,289. The lowest rate was recorded in Lurgan, viz, 8.9, and the highest in Lisburn, viz, 63.7 per 1,000. In Dublin and suburbs 207 deaths were registered, including diphtheria 1, enteric fever 2, scarlet fever 1, whooping cough 6, and 37 from tuberculosis.

Scotland.—The deaths registered in 8 principal towns during the week ended February 13, 1904, correspond to an annual rate of 19.2 per 1,000 of the population, which is estimated at 1,726,236. The lowest rate of mortality was recorded in Perth, viz, 6.2, and the highest in Dundee, viz, 24.6 per 1,000. The aggregate number of deaths registered from all causes was 636, including diphtheria 3, measles 21, scarlet fever 2, smallpox 1, and 24 from whooping cough.

JAMAICA—Kingston.—Month of January, 1904. Estimated population, 50,000. Total number of deaths, 142, including whooping cough 3, and 15 from phthisis pulmonalis.

Port Antonio.—Two weeks ended February 20, 1904. Estimated population not reported. Number of deaths not reported. The health of the port is good.

JAPAN—Nagasaki.—Ten days ended January 31, 1904. Estimated population, 148,883. Total number of deaths not reported. One death from diphtheria and 1 from enteric fever reported.

MALTA.—Three weeks ended February 6, 1904. Estimated population, 193,350. Total number of deaths, 280, including diphtheria 9, enteric fever 4, and 1 from whooping cough.

PHILIPPINE ISLANDS—Manila.—Month of September, 1903. Population, 219,941. Total number of deaths, 1,228, including diphtheria 1, enteric fever 15, whooping cough 1, plague 3, cholera 232, and 77 from tuberculosis.

WEST INDIES—St. Thomas.—Two weeks ended January 23, 1904. Estimated population, 11,012. Total number of deaths, 13. No contagious diseases.

Two weeks ended February 12. Total number of deaths, 9. No deaths from contagious diseases.

Cholera, yellow fever, plague, and smallpox, December 26, 1903, to March 11, 1904.

[Reports received by the Surgeon-General, Public Health and Marine-Hospital Service, from United States consuls through the Department of State and from other sources.]

[For reports received from June 27, 1903, to December 25, 1903, see PUBLIC HEALTH REPORTS for December 25, 1903.]

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
Afghanistan:				
Heraat.....	Dec. 12.....	.....	.....	Present.
China:				
Shanghai.....	Dec. 18.....	1	.....	On Br. ss. Olivebank.
India:				
Bombay.....	Dec. 9-15.....	.....	1	
Calcutta.....	Nov. 15-Feb. 6	.....	249	
Madras.....	Nov. 14-Jan. 22	.....	10	
Japan:				
Nagasaki.....	Nov. 21-30.....	.....	1	
Philippine Islands:				
Manila.....	Oct. 31-Jan. 30	48	44	
Provinces.....	Oct. 31-Jan. 30	1,593	1,283	
Straits Settlements:				
Singapore.....	Nov. 8-Dec. 19	.....	12	
Turkey:				
Bagdad—				
Hitt.....	Dec. 13-15.....	8	4	
Kerbela.....	Dec. 12-Jan. 12	.....	463	
Mossul.....	Dec. 21-Jan. 4	1	1	
Musseleb.....	Dec. 17-Jan. 4	48	35	
Beirut—				
Latakiah.....	Dec. 21-Jan. 4	11	7	
Diarbekir—				
Diarbekir.....	Dec. 12-Jan. 9	64	44	
Syria.....	Nov. 29-Dec. 5	.....	.....	Present.

YELLOW FEVER.

Africa:				
Ivory Coast, Grand Bassam	Dec. 12.....	.....	.....	Present.
Brazil:				
Rio de Janeiro.....	Nov. 23-Jan. 31	20	7	
Colombia:				
Cartagena.....	Nov. 23-30.....	.....	1	
Cuba:				
Vicinity of Niquero.....	Feb. 6-13.....	.....	6	From the Nor. bk. Eugen from Cardiff and La Guaira, wrecked on south coast of Cuba.
Ecuador:				
Guayaquil.....	Dec. 6-12.....	.....	1	
Jamaica:				
Kingston.....	Dec. 27-Jan. 9	2	2	
Mexico:				
Ciudad Victoria.....	Dec. 6-19.....	4	2	
Merida.....	Dec. 6-Feb. 20	15	5	
Tehuantepec.....	Dec. 6-Jan. 30	.....	4	
Vera Cruz.....	Dec. 13-Feb. 27	14	4	
Panama:				
Panama.....	Jan. 4-Jan. 16	4	1	
Venezuela:				
La Guaira.....	Jan. 2-9.....	.....	1	
Maracaibo.....	Oct. 25-Dec. 27	2	2	

PLAGUE.

Brazil:				
Para.....	Jan. 1-31.....	9	.....
Pernambuco.....	Nov. 16-Jan. 15	.....	18	
Pindamonhangaba.....	Jan. 15.....	.....	.....
Rio de Janeiro.....	Nov. 16-Jan. 31	196	117	Several cases.
British South Africa:				
Cape Colony (East London, King Williams Town, Port Elizabeth).	Nov. 15-Jan. 16	.....	7	
Natal (Pietermaritzburg)...	Nov. 29-Dec. 5	3	2	

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

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Hongkong	Nov. 8-Dec. 12	6	6	
Tientsin	Nov. 29-Dec. 5	.....	1	
Egypt:				
Alexandria	Nov. 21-Jan. 28	2	1	
Minieh district	do.	3	1	
Formosa:	To Dec. 15, 1903	869	702	
	Jan. 1-19	13	9	
Hawaii:				
Hilo	Mar. 4	.....	1	
Honolulu	Jan. 10	1	1	
India:				
Bombay Presidency and Sind.	Nov. 15-Jan. 23	97,087	63,135	
Madras Presidency	do.	7,292	5,651	
Bengal	do.	13,645	11,878	
United Provinces	do.	29,287	26,630	
Punjab	do.	23,249	16,929	
Central Provinces (including Berar).	do.	22,578	18,996	
Coorg	do.	15	6	
Mysore State	do.	8,498	6,532	
Hyderabad State	do.	10,603	8,607	
Central India	do.	10,516	9,581	
Rajputana	do.	1,463	1,094	
Kashmir	do.	337	288	
N. W. F. Provinces	Nov. 21-Jan. 23	45	45	
Baluchistan	Nov. 29-Jan. 23	1	.....
Grand total		224,566	169,372	
Japan:				
Yokohama	Nov. 22-Dec. 5	2	2	
Mauritius	Nov. 13-Feb. 13	522	307	
Peru:				
San Pedro	Feb. 20	.....	.....	Present.
Philippine Islands:				
Cebu	Jan. 16-23	.....	2	
Manila	Nov. 15-Jan. 30	12	7	
Russia:				
Cronstadt	Jan. 14-20	.....	1	At plague laboratory.
Turkey:				
Smyrna	Dec. 1-6	.....	1	

SMALLPOX.

Africa:				
Cape Town	Dec. 1-31	2	.....
Green and Sea Point	Nov. 29-Dec. 5	1	.....
Argentina:				
Buenos Ayres	Oct. 1-Dec. 31	.....	129	
Austria-Hungary:				
Prague	Nov. 29-Feb. 13	102	1	
Trieste	Nov. 22-Jan. 2	7	.....
Belgium:				
Antwerp	Jan. 11-Feb. 15	12	3	
Brussels	Jan. 31-Feb. 13	.....	2	
Liege	Jan. 10-16	1	1	
Brazil:				
Pernambuco	Nov. 1-Jan. 31	.....	163	
Rio de Janeiro	Nov. 16-Jan. 31	588	335	
British Guiana:				
Demerara	Nov. 1-Dec. 26	73	.....
Canada, British Columbia:				
(Tower Hill and Vancouver.)	Dec. 1-Feb. 18	14	.....
New Brunswick, McAdam, Newcastle.	Jan. 9-21	2	.....
Ontario	Dec. 1-31	13	.....
Quebec	Feb. 7-27	7	.....
Chile:				
Antofagasta	Nov. 1-Dec. 31	.....	13	
Santiago	Feb. 1	.....	.....	Epidemic.
China:				
Hongkong	Dec. 27-Jan. 16	4	.....
Shanghai	Nov. 15-Jan. 30	.....	61	3 new cases.

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

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Colombia:				
Barranquilla	Dec. 1-Feb. 7 .....	.....	6	
France:				
Lyons	Feb. 7-13 .....	.....	1	
Marseille	Dec. 1-Jan. 31 .....	.....	58	
Nantes	Jan. 1-31	2	.....
Paris	Nov. 29-Feb. 13	228	21	
Rheims	Feb. 8-14	1	.....
Great Britain:				
Birmingham	Dec. 6-Jan. 9	4	1	
Bradford	Nov. 22-Dec. 5	1	.....
Edinburgh	Dec. 13-Feb. 20	71	2	
Glasgow	Dec. 5-Feb. 26	533	28	
Hull	Jan. 17-Feb. 6	4	.....
Leeds	Dec. 27-Jan. 30	2	.....
Leith	Jan. 10-Feb. 13	6	1	
Liverpool	Dec. 13-Jan. 23	3	1	
London	Nov. 29-Feb. 20	44	1	
Manchester	Nov. 29-Feb. 20	19	3	
Newcastle-on-Tyne	Dec. 5-Feb. 20	21	1	
Nottingham	Nov. 29-Feb. 20	104	3	
Sheffield	Dec. 27-Jan. 16	2	.....
Southampton	Dec. 27-Jan. 2	6	1	
South Shields	Jan. 3-Feb. 15	6	1	
Sunderland	Jan. 3-Feb. 6	17	2	
Hawaii:				
Honolulu	Feb. 4	1	.....	From U. S. a. t. Logan.
India:				
Bombay	Nov. 25-Feb. 9 .....	.....	42	
Calcutta	Dec. 27-Feb. 6 .....	.....	3	
Karachi	Dec. 21-Feb. 7	14	2	
Italy:				
Catania	Dec. 4-Jan. 7 .....	.....	5	
Messina	Dec. 12-18 .....	.....	1	
Palermo	Jan. 10-16	1	.....
Japan:				
Yokohama	Jan. 1-Dec. 31, 1903	2	.....
Java:				
Batavia	Nov. 15-Jan. 23	71	16	
Malta	Dec. 6-Feb. 6	17	3	
Mexico:				
Mexico	Dec. 28-Feb. 20	21	14	
Porfirio Diaz	Jan. 9	1	.....
Tampico	Jan. 11-21 .....	.....	12	
Vera Cruz	Dec. 19	1	.....	From ss. Prince August Wilhelm from Havre.
Netherlands:				
Amsterdam	Dec. 20-Feb. 20	28	4	
Rotterdam	Dec. 6-Jan. 23	2	.....
Panama, Panama	Jan. 11-17 .....	.....	3	
Philippine Islands:				
Manila	Nov. 15-Jan. 2	3	3	
Porto Rico:				
San Juan	Dec. 1-Mar. 8	9	.....
Russia:				
Moscow	Nov. 22-Feb. 6	58	18	
Odessa	Nov. 29-Jan. 6	11	1	
St. Petersburg	Nov. 29-Feb. 13	272	29	
Warsaw	Nov. 8-Jan. 16 .....	.....	13	
Spain:				
Barcelona	Jan. 10-Feb. 10 .....	.....	31	
Madrid	To Dec. 15	35,000	.....	Estimated.
Santander	Dec. 9-Feb. 22	37	5	
Turkey:				
Constantinople	Jan. 18-Feb. 14 .....	.....	29	
Smyna	Nov. 23-Feb. 7 .....	.....	46	
Uruguay:				
Montevideo	Sept. 6-Dec. 31	12	1	

Weekly mortality table, foreign and insular cities.

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.
Acapulco	Feb. 13	6,000	1											
Aix la Chapelle.	Jan. 30	144,305	64	9										
Alexandretta	Feb. 6	9,000	5											
Amherstburg	Feb. 27	2,250	2											
Amsterdam	Feb. 13	546,533	193	33										
Do	Feb. 20	546,533	161	21				1		1		3	8	4
Antwerp	Feb. 6	291,315	90	6					1				12	3
Do	Feb. 13	291,315	81	4				2				3	1	2
Athens	do	200,000		12					1					
Bahia	Jan. 30	230,000	61	9										
Barmen	Feb. 6	150,212	36	2										1
Do	Feb. 13	150,212	34	5							1			
Beirut	Feb. 1	80,000	25											
Belfast	Feb. 13	368,693	203										1	13
Belize.	Feb. 25	9,000	7											
Bergen	Feb. 11	73,000	44	8								11		1
Berlin	Jan. 30	1,960,517	540	74					1		2	6		
Do	Feb. 6	1,960,517	606	67					1	1	3	4	10	
Birmingham	do	533,039	162								2	4	2	6
Do	Feb. 13	533,039	224								1	1	5	6
Bombay	Feb. 2	776,006	917	62	384			10			1		5	
Bristol	Feb. 13	343,204	111								1	3	2	1
Do	Feb. 20	343,204	108							1	6		1	2
Brunswick	Feb. 13	131,422												
Brussels.	Feb. 6	575,896	185	13				1						1
Do	Feb. 13	575,896	157	16				1				2		2
Budapest	Feb. 6	732,322							1		4	4	8	1
Do	Feb. 13	732,322									4	3	3	1
Calcutta	Jan. 30	847,896	453	23	17	27								
Catania	Feb. 11	153,523	65	3										
Do	Feb. 18	153,523	98	4						1		3		
Christiania	Feb. 13	224,000	45											
Coatzacoalcas.	Feb. 20	3,000	5	2										
Coburg	Feb. 6	22,923	4	1										
Do	Feb. 16	22,923	8	1								1	1	
Cognac	Feb. 6	19,483	8	1										
Do	Feb. 13	19,483	6	1										
Cologne.	Jan. 30	406,420	144	39							2	1		4
Do	Feb. 6	406,420	162	48							1	9	3	4
Do	Feb. 13	406,420	126	32								4		6
Colon	Feb. 21	8,000	8											
Constantinople	Feb. 7	800,000	297					14		7		2	1	
Do	Feb. 14	800,000	297					9		5		2	5	
Copenhagen	Feb. 6	500,000	125											
Corunna	Feb. 6	50,000	29	5									1	
Do	Feb. 13	50,000	26	5									1	1
Crefeld.	Feb. 6	110,573	26											
Do	Feb. 13	110,573	21									2		
Curacao.	do	31,351	8											
Dublin	do	378,994	207	37						1		1		6
Dundee	Feb. 6	163,535	73							1			1	1
Do	Feb. 13	163,535	77							1		4		1
Edinburgh.	Feb. 13	331,977	101					1		2	2	3	1	1
Fiume	Feb. 7	38,996												
Do	Feb. 14	38,996												
Flushing	Feb. 13	19,105	11											
Do	Feb. 20	19,105	1											
Frankfort-on-the-Main	Feb. 6	312,000	92											3
Do	Feb. 13	312,000	105											
Funchal	Feb. 7	44,049	21											
Do	Feb. 14	44,049	26											
Geneva	Jan. 30	111,000	35								1			
Do	Feb. 6	111,000	32									1		
Girgenti	do	25,069	18											
Do	Feb. 13	25,069	20											
Glasgow	Feb. 19	798,357	305					1		1	2	1	11	6
Gothenburg.	Feb. 6	134,300	46	14								1		
Guayaquil	do	60,000	78	9									1	2
Habana	Feb. 13	270,000	104	17							2		2	
Halifax	Feb. 27	40,787	31									1	2	
Hamburg	Feb. 13	751,842	216								4	2		3
Hamilton, Bermuda	Feb. 23	17,535	3											
Havre.	Feb. 13	130,196	55	15					1					

Weekly mortality table, foreign and insular 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.
Hull	Feb. 13	253,865	80	...	...	...	...	1	...	...	...	1	1	...
Karachi	Jan. 31	108,644	83	...	10	...	...	...	...	...	...	...	1	...
Kingston, Canada	Feb. 26	19,374	8	...	...	...	...	...	...	...	...	...	...	...
Kobe	Jan. 23	274,449	105	...	...	...	...	...	...	...	...	1	...	...
Do	Jan. 30	274,449	157	...	...	...	...	...	...	...	...	1	...	...
La Rochelle	Feb. 14	31,553	15	...	...	...	...	...	...	...	...	...	...	...
Las Palmas	Feb. 6	49,500	24	...	...	...	...	...	...	...	...	...	...	...
Lausanne	Jan. 30	50,800	17	...	...	...	...	...	...	...	...	...	...	...
Do	Feb. 6	50,800	15	...	...	...	...	...	...	...	...	...	...	...
Leeds	Feb. 13	450,142	183	12	...	...	...	...	...	...	2	2	5	6
Do	Feb. 20	450,142	185	18	...	...	...	...	...	...	1	1	8	16
Leipzig	Feb. 6	496,370	143	26	...	...	...	...	...	...	3	4	...	...
Do	Feb. 13	496,370	148	16	...	...	...	...	...	...	1	4	2	...
Leith	do	80,508	22	1	...	...	...	...	...	...	...	...	...	2
Licata	Feb. 6	25,000	12	...	...	...	...	...	1	...	...	...	...	...
Liege	do	166,105	52	4	...	...	...	...	...	...	...	...	...	...
Liverpool	Feb. 13	723,430	292	...	...	...	...	...	...	...	2	4	1	25
Do	Feb. 20	723,430	341	...	...	...	...	2	...	...	1	3	...	28
Livingston, Guatemala	Feb. 22	3,500	1	...	...	...	...	...	...	...	...	...	...	...
London	Feb. 13	6,907,619	2,200	...	...	...	...	...	10	8	22	46	68	...
Lyons	Feb. 6	500,000	193	39	...	...	...	...	...	...	2	...	...	...
Madras	Jan. 22	509,346	427	...	1	2	...	...	...	...	...	5	...	...
Do	Jan. 29	509,346	370	...	...	...	...	...	...	...	...	2	...	...
Magdeburg	Jan. 30	234,877	77	6	...	...	...	...	...	1	1	1	...	4
Mainz	Feb. 13	89,000	39	7	...	...	...	...	...	...	3	1	...	...
Manchester	do	558,335	243	23	...	...	...	...	1	1	2	3	...	3
Mannheim	Feb. 6	150,181	44	...	...	...	...	...	1	1	...	1	...	...
Messina	do	107,000	32	3	...	...	...	...	...	...	...	...	...	...
Do	Feb. 13	107,000	27	3	...	...	...	...	...	...	...	...	...	...
Mexico	Feb. 14	368,777	329	26	...	...	...	4	6	...	1	...	...	...
Do	Feb. 21	368,777	319	22	...	...	...	4	7	...	1	...	4	2
Moscow	Jan. 30	1,173,427	491	11	...	...	...	1	...	12	10	4	...	2
Do	Feb. 6	1,173,427	557	17	...	...	...	4	1	2	16	15	4	...
Newcastle-on-Tyne	Feb. 15	219,021	74	...	...	...	...	...	...	...	...	3	...	...
Nottingham	Feb. 13	239,755	91	...	...	...	...	1	...	2	...	3	...	3
Nuremberg	Jan. 30	275,000	97	...	...	...	...	...	1	...	...	...	3	...
Do	Feb. 6	275,000	126	...	...	...	...	...	...	...	...	2	...	5
Odessa	do	492,000	169	33	...	...	...	...	1	5	1	3	...	...
Do	Feb. 13	492,000	174	30	...	...	...	...	...	6	4	1	...	...
Palermo	Feb. 6	330,000	110	6	...	...	...	...	...	...	...	...	...	...
Do	Feb. 13	330,000	131	6	...	...	...	...	...	...	...	...	...	...
Panama	Feb. 21	18,000	24	4	...	...	...	...	...	...	...	...	...	...
Paris	Feb. 13	2,660,559	906	218	...	...	...	1	...	3	1	6	13	6
Plymouth	do	112,000	38	6	...	...	...	...	...	1	...	...	...	...
Do	Feb. 20	112,000	55	3	...	...	...	...	...	...	...	...	...	...
Prague	Feb. 6	226,951	122	33	...	...	...	...	1	1	...	1	...	4
Do	Feb. 13	226,951	109	17	...	...	...	...	...	2	...	1	...	1
Puerto Cabello	Jan. 23	14,000	11	2	...	...	...	...	...	...	...	...	...	...
Do	Jan. 30	14,000	10	4	...	...	...	...	...	...	...	...	...	...
Puerto Cortez	Feb. 25	2,135	...	...	...	...	...	...	...	...	...	...	...	...
Quebec	Feb. 20	70,000	...	...	...	...	...	...	...	...	...	1	...	...
Do	Feb. 27	70,000	...	...	...	...	...	...	...	...	...	1	...	...
Rheims	Feb. 14	108,385	43	8	...	...	...	...	...	...	...	...	...	1
Rio de Janeiro	Jan. 31	800,000	...	45	5	...	1	19	...	3	...	1	...	...
Rotterdam	Feb. 13	357,471	131	...	...	...	...	...	...	3	2	1	...	...
Do	Feb. 20	357,471	132	...	...	...	...	...	...	1	...	2	...	...
Sagua la Grande	do	21,342	11	...	...	...	...	...	...	...	...	...	...	...
St. John, N. B.	Feb. 27	40,711	9	2	...	...	...	...	...	...	...	...	...	...
St. John, W. I.	Jan. 30	15,844	18	2	...	...	...	...	...	...	...	...	...	...
Do	Feb. 6	15,844	15	...	...	...	...	...	...	...	...	...	...	...
Do	Feb. 13	15,844	10	...	...	...	...	...	...	...	...	...	...	...
St. Petersburg	Feb. 6	1,450,000	675	125	...	...	...	2	...	13	21	5	11	6
St. Stephen, N. B.	Feb. 27	2,840	1	...	...	...	...	...	...	...	...	...	...	...
Santa Cruz de Tenerife	Feb. 6	36,500	1	2	...	...	...	...	...	...	...	...	...	...
Do	Feb. 13	36,500	14	1	...	...	...	...	...	...	...	...	...	...
San Feliu de Guixols	Feb. 14	11,333	8	1	...	...	...	...	...	...	...	...	...	...
Santander	Feb. 15	53,574	34	...	...	...	...	...	...	...	...	...	...	...
Singapore	Jan. 16	97,111	172	31	...	...	...	...	...	...	...	...	...	...
Do	Jan. 23	97,111	152	23	...	...	...	...	...	...	...	...	...	...
Solingen	Jan. 30	15,142	18	...	...	...	...	...	...	...	...	1	...	1
Do	Feb. 6	15,142	16	...	...	...	...	...	...	...	...	...	...	1
Do	Feb. 13	15,142	13	...	...	...	...	...	...	...	...	1	...	1

Mortality table, foreign and insular 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.
Southampton	Feb. 13	112,500	38	2	.....	.....	.....	.....	.....	.....	.....	1	.....
Do	Feb. 20	112,500	33	7	.....	.....	.....	.....	.....	.....	.....	.....	.....
South Shields	Feb. 15	105,325	38	2	.....	.....	.....	1	.....	1	.....	.....	.....
Stettin	Feb. 6	228,095	103	.....	.....	.....	.....	.....	.....	1	.....	2	.....
Do	Feb. 13	228,095	98	.....	.....	.....	.....	.....	.....	3	.....	1	.....
Stockholm	Jan. 30	305,115	67	11	.....	.....	.....	.....	.....	.....	1	2	.....
Do	Feb. 6	305,115	89	16	.....	.....	.....	.....	.....	.....	1	.....	.....
Stuttgart	Feb. 4	194,049	78	1	.....	.....	.....	.....	.....	.....	.....	.....	1
Do	Feb. 11	194,049	79	.....	.....	.....	.....	.....	.....	1	.....	.....	1
Do	Feb. 18	194,049	81	.....	.....	.....	.....	.....	.....	.....	.....	2	.....
Sunderland	Feb. 13	151,093	53	2	.....	.....	.....	.....	.....	.....	.....	1	4
Tangier	do	40,000	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	4
Tarragona	do	19,300	10	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
Trapani	Feb. 6	61,437	19	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do	Feb. 13	61,437	15	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Trieste	Jan. 30	187,251	106	.....	.....	.....	.....	.....	.....	1	.....	1	.....
Do	Feb. 6	187,251	98	.....	.....	.....	.....	.....	.....	1	.....	2	.....
Do	Feb. 13	187,251	96	.....	.....	.....	.....	.....	.....	.....	.....	3	.....
Tuxpan	Feb. 16	7,000	5	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do	Feb. 23	7,000	7	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Utile	Feb. 15	932	0	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Venice	Feb. 6	166,288	79	7	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do	Feb. 13	166,288	76	6	.....	.....	.....	.....	.....	.....	.....	.....	1
Vera Cruz	Feb. 20	32,000	36	10	.....	.....	.....	.....	.....	.....	.....	.....	.....
Vienna	Feb. 6	1,779,869	655	110	.....	.....	.....	.....	.....	1	1	11	10
Do	Feb. 13	1,779,869	615	112	.....	.....	.....	.....	.....	2	2	5	9
West Hartlepool	do	63,000	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Winnipeg	Feb. 20	46,150	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Yokohama	Jan. 23	313,695	.....	.....	.....	.....	.....	.....	.....	1	.....	1	.....
Do	Jan. 30	313,695	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....
Zurich	do	157,731	56	.....	.....	.....	.....	.....	.....	.....	1	.....	.....
Do	Feb. 6	157,731	58	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Do	Feb. 13	157,731	62	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

By authority of the Secretary of the Treasury:

WALTER WYMAN,

*Surgeon-General,**United States Public Health and Marine-Hospital Service.*