

PUBLIC HEALTH REPORTS.

UNITED STATES.

SECOND GENERAL INTERNATIONAL SANITARY CONVENTION OF THE AMERICAN REPUBLICS.

SANITARY CONVENTION AD REFERENDUM.

The following convention ad referendum, which was concluded at the Second International Sanitary Convention of the American Republics, Washington, D. C., October 14, 1905, was ratified by the President, with the advice and consent of the Senate, May 29, 1906. It was also ratified by Honduras, December 14, 1905; Guatemala, April 23, 1906; Ecuador, April 30, 1906; Mexico, May 7, 1906; Costa Rica, June 25, 1906; Peru, September 6, 1906, and Salvador, November 6, 1906.

The Third International Sanitary Conference of American Republics, which met at Rio de Janeiro in 1906, adopted resolutions, August 23, 1906 (Public Health Reports, December 7, 1906), recommending that the countries represented at this latter conference adopt the International Sanitary Convention of Washington, adhering to it and putting its precepts into practice.

CONVENTION.

The Presidents of the Republics of Chile, Costa Rica, Cuba, Dominican Republic, Ecuador, Guatemala, Mexico, Nicaragua, Peru, United States of America, and Venezuela having found that it is useful and convenient to codify all the measures destined to guard the public health against the invasion and propagation of yellow fever, plague, and cholera, have designated as their delegates, to wit:

Republic of Chile, Señor Dr. D. Eduardo Moore, professor of the medical faculty, hospital physician.

Republic of Costa Rica, Señor Dr. D. Juan J. Ulloa, ex-vice-president, ex-minister of the interior of Costa Rica, ex-president of the medical faculty of Costa Rica.

Republic of Cuba, Señor Dr. D. Juan Guiteras, member of the superior board of health of Cuba, director of the Las Animas Hospital, professor of general pathology and tropical medicine of the University of Habana, and Señor Dr. D. Enrique B. Barnet, executive chief of the health department of Habana, member and secretary of the superior board of health of Cuba.

Republic of Ecuador, Señor Dr. D. Serafin S. Wither, chargé d'affaires and consul-general of Ecuador in New York, and Señor Dr. D. Miguel H. Alcívar, member of the superior board of health of Guayaquil, professor of the medical faculty, and surgeon of the general hospital of Guayaquil.

Republic of the United States of America, Dr. Walter Wyman, surgeon-general of the Public Health and Marine-Hospital Service of the United States; Dr. H. D.

Geddings, assistant surgeon-general of the Public Health and Marine Hospital Service of the United States, and representative of the United States at the sanitary convention of Paris; Dr. J. F. Kennedy, secretary of the board of health of the State of Iowa; Dr. John S. Fulton, secretary of the board of health of the State of Maryland; Dr. Walter D. McCaw, major, surgeon in the United States Army; Dr. J. D. Gatewood, surgeon in the United States Navy; Dr. H. L. E. Johnson, member of the American Medical Association (member of the board of trustees).

Republic of Guatemala, Señor Dr. D. Joaquín Yela, consul-general of Guatemala in New York.

Republic of Mexico, Señor Dr. D. Eduardo Licéaga, president of the superior council of health of Mexico, director and professor of the national school of medicine, member of the Academy of Medicine.

Republic of Nicaragua, Señor Dr. D. J. L. Medina, member of the Second Pan-American Medical Congress of the city of Habana in 1901.

Republic of Peru, Señor Dr. D. Daniel Eduardo Lavorería, professor of the medical faculty, member of the National Academy of Medicine, physician of the Dos de Mayo Hospital, chief of the division of hygiene of the ministry of Fomento.

Dominican Republic, Señor D. Emilio C. Joubert, minister resident in Washington.

Republic of Venezuela, Señor D. Nicolás Veloz-Goiticoa, Chargé d'Affaires of Venezuela.

Who, having made an interchange of their powers, and found them good, have agreed to adopt, ad referendum, the following propositions:

CHAPTER I.—*Regulations to be observed by the powers signatory to the convention as soon as plague, cholera, or yellow fever may appear in their territory.*

SECTION I.—*Notification and subsequent communications to other countries.*

ARTICLE I. Each government should immediately notify other governments of the first appearance in its territory of authentic cases of plague, cholera, or yellow fever.

ART. II. This notification is to be accompanied, or very promptly followed, by the following additional information:

1. The neighborhood where the disease has appeared.
2. The date of its appearance, its origin, and its form.
3. The number of established cases, and the number of deaths.
4. For plague, the existence among rats or mice of plague, or of an unusual mortality; for yellow fever, the existence of *stegomyia fasciata* in the locality.
5. The measures taken immediately after the first appearance.

ART. III. The notification and the information prescribed in Articles I and II are to be addressed to diplomatic and consular agents in the capital of the infected country; but this is to be construed as not preventing direct communication between officials charged with the public health of the several countries.

For countries which are not thus represented, they are to be transmitted directly by telegraph to the governments of such countries.

ART. IV. The notification and the information prescribed in Articles I and II are to be followed by further communications dispatched in a regular manner, in order to keep the governments informed of the progress of the epidemic.

These communications, which are to be made at least once a week, and which are to be as complete as possible, should indicate in detail the precautions taken to prevent the extension of the disease.

They should set forth: First, the prophylactic measures taken relative to sanitary or medical inspection, to isolation and disinfection; second, the measures taken relative to departing vessels to prevent the exportation of the disease, and, especially under the circumstances mentioned in paragraph 4 of Article II of this section, the measures taken against rats and mosquitoes.

ART. V. The prompt and faithful execution of the preceding provisions is of the very first importance.

The notifications only have a real value if each government is warned in time of cases of plague, cholera, or yellow fever and of suspicious cases of those diseases supervening in its territory. It can not then be too strongly recommended to the various governments to make obligatory the declaration of cases of plague, cholera, or yellow fever, and of giving information of all unusual mortality of rats and mice, especially in ports.

ART. VI. It is understood that neighboring countries reserve to themselves the right to make special arrangements with a view of organizing a service of direct information between the chiefs of administration upon the frontiers.

SECTION II.—*Conditions showing a given territorial area to be infected, or to have been freed from infection.*

ART. VII. Information of a first case of plague, cholera, or yellow fever does not justify, against a territorial area where it may appear, the application of the measures prescribed in Chapter II, as hereinafter indicated.

Upon the occurrence of several nonimported cases of plague, or a nonimported case of yellow fever, or when cases of cholera form a focus, the area is to be declared infected.

ART. VIII. To limit the measures to the affected regions alone, governments should only apply them to persons and articles proceeding from the contaminated or infected areas.

By the word "area" is understood a well-determined portion of territory described in the information which accompanies or follows notification, thus, a province, a State, "a government," a district, a department, a canton, an island, a commune, a city, a quarter of a city, a village, a port, a "polder," a hamlet, etc., whatever may be the extent and population of these portions of territory.

But this restriction, limited to the infected area, should only be accepted upon the formal condition that the government of the infected country shall take the necessary measures (1) to prevent, unless previously disinfected, the exportation of articles named in 1 and 2 of Article XII, coming from the contaminated area; and (2) measures to prevent the extension of the epidemic; and provided further, that there be no doubt that the sanitary authorities of the infected country have faithfully complied with Article I of this convention.

When an area is infected, no restrictive measure is to be taken against departures from this area if these departures have occurred five days, at least, before the beginning of the epidemic.

ART. IX. That an area should no longer be considered as infected, official proof must be furnished:

First. That there has been neither a death nor a new case of plague or cholera for five days after isolation,^a death, or cure of the last plague or cholera case. In the case of yellow fever the period shall be eighteen days, but each government may reserve the right to extend this period.

Second. That all the measures of disinfection have been applied; in the case of plague, that the precautions against rats have been observed, and in the case of yellow fever that the measures against mosquitoes have been executed.

CHAPTER II.—*Measures of defense by other countries against territories declared to be infected.*

SECTION I.—*Publication of prescribed measures.*

ART. X. The government of each country is obliged to immediately publish the measures which it believes necessary to take against departures, either from a country or from an infected territorial area.

The said government is to communicate at once this publication to the diplomatic or consular agent of the infected country residing in its capital, as well as to the international sanitary bureau.

The government shall be equally obliged to make known through the same channels the revocation of these measures, or modifications which may be made in them.

In default of a diplomatic or consular agency in the capital, communications are made directly to the government of the country interested.

SECTION II.—*Merchandise—Disinfection—Importation and Transit—Baggage.*

ART. XI. There exists no merchandise which is of itself capable of transmitting plague, cholera, or yellow fever. It only becomes dangerous in case it is soiled by pestous or choleraic products, or, in the case of yellow fever, when such merchandise may harbor mosquitoes.

ART. XII. No merchandise or objects shall be subjected to disinfection on account of yellow fever, but in cases covered by the previous article the vehicle of transportation may be subjected to fumigation to destroy mosquitoes. In the case of cholera and plague, disinfection should only be applied to merchandise and objects which the local sanitary authority considers as infected.

^aThe word "isolation" signifies isolation of the patient, of the persons who care for him, and the forbidding of visits of all other persons, the physician excepted. By isolation in the case of yellow fever is understood the isolation of the patient in an apartment so screened as to prevent the access of mosquitoes.

Nevertheless, merchandise, or objects enumerated hereafter, may be subjected to disinfection, or prohibited entry, independently of all proof, that they may or may not be infected:

1. Body linen, wearing apparel in use, clothing which has been worn, bedding already used.

When these objects are transported as baggage, or in the course of a change of residence (household furniture), they should not be prohibited, and are to be subjected to the regulations prescribed by Article XIX.

Baggage left by soldiers and sailors and returned to their country after death are considered as objects comprised in the first paragraph of No. 1 of this article.

2. Rags and rags for making paper, with the exception, as to cholera, of rags which are transported as merchandise in large quantities, compressed in bales held together by hoops.

New clippings coming directly from spinning mills, weaving mills, manufactories, or bleacheries, shoddy, and clippings of new paper, should not be forbidden.

ART. XIII. In the case of cholera and plague there is no reason to forbid the transit through an infected district of merchandise, and the objects specified in Nos. 1 and 2 of the preceding article if they are so packed that they can not have been exposed to infection in transit.

In like manner, when merchandise or objects are so transported that in transit they can not come in contact with soiled objects, their transit across an infected territorial area should not be an obstacle to their entry into the country of destination.

ART. XIV. The entry of merchandise and objects specified in Nos. 1 and 2 of Article XII should not be prohibited, if it can be shown to the authorities of the country of destination that they were shipped at least five days before the beginning of the epidemic.

ART. XV. The method and place of disinfection, as well as the measures to be employed for the destruction of rats and mosquitoes, are to be fixed by authority of the country of destination upon arrival at said destination. These operations should be performed in such a manner as to cause the least possible injury to the merchandise.

It devolves upon each country to determine questions relative to the payment of damages resulting from disinfection, or from the destruction of rats or mosquitoes.

If taxes are levied by a sanitary authority, either directly or through the agency of any company or agent, to insure measures for the destruction of rats and mosquitoes on board ships, the amount of these taxes ought to be fixed by a tariff published in advance, and the result of these measures should not be a source of profit for either State or sanitary authorities.

ART. XVI. Letters and correspondence, printed matter, books, newspapers, business papers, etc. (postal parcels not included), are not to be submitted to any restriction or disinfection. In case of yellow fever postal parcels are not to be subjected to any restrictions or disinfection.

ART. XVII. Merchandise, arriving by land or by sea, should not be detained permanently at frontiers or in ports.

Measures which it is permissible to prescribe with respect to them are specified in Article XII.

Nevertheless, when merchandise, arriving by sea in bulk (vrac) or in defective packages, is contaminated by pest-stricken rats during the passage, and is incapable of being disinfected, the destruction of the germs may be assured by putting said merchandise in a warehouse for a period to be decided by the sanitary authorities of the port of arrival.

It is to be understood that the application of this last measure should not entail delay upon any vessel nor extraordinary expenses resulting from the want of warehouses in ports.

ART. XVIII. When merchandise has been disinfected by the application of the measures prescribed in Article XII, or put temporarily in warehouses in accordance with the third paragraph of Article XVII, the owner, or his representative, has the right to demand from the sanitary authority which has ordered such disinfection, or storage, a certificate setting forth the measures taken.

ART. XIX. *Baggage*.—In the case of soiled linen, bed clothing, clothing, and objects forming a part of baggage or furniture coming from a territorial area declared contaminated, disinfection is only to be practiced in cases where the sanitary authority considers them as contaminated. There shall be no disinfection of baggage on account of yellow fever.

SECTION III.—Measures in ports and at maritime frontiers.

ART. XX. *Classification of ships.*—A ship is considered as infected which has plague, cholera, or yellow fever on board, or which has presented one or more cases of plague or cholera within seven days, or a case of yellow fever at any time during the voyage.

A ship is considered as suspected on board of which there have been a case or cases of plague or cholera at the time of departure or during the voyage, but no new case within seven days; also such ships as have lain in such proximity to the infected shore as to render them liable to the access of mosquitoes.

The ship is considered indemne which, although coming from an infected port, has had neither death nor case of plague, cholera, or yellow fever on board, either before departure, during the voyage, or at the time of arrival, and which in the case of yellow fever has not lain in such proximity to the shore as to render it liable, in the opinion of the sanitary authorities, to the access of mosquitoes.

ART. XXI. Ships infected with plague are to be subjected to the following regulations:

1. Medical visit (inspection).
2. The sick are to be immediately disembarked and isolated.
3. Other persons should also be disembarked, if possible, and subjected to an observation,^a which should not exceed five days, dating from the day of arrival.
4. Soiled linen, personal effects in use, the belongings of crew^b and passengers which, in the opinion of the sanitary authorities are considered as infected, should be disinfected.
5. The parts of the ship which have been inhabited by those stricken with plague, and such others as, in the opinion of the sanitary authorities are considered as infected, should be disinfected.
6. The destruction of rats on shipboard should be effected before or after the discharge of cargo, as rapidly as possible, and in all cases with a maximum delay of forty-eight hours, care being taken to avoid damage of merchandise, the vessel, and its machinery.

For ships in ballast, this operation should be performed immediately before taking on cargo.

ART. XXII. Ships suspected of plague are to be subjected to the measures which are indicated in Nos. 1, 4, and 5 of Article XXI.

Further, the crew and passengers may be subjected to observation, which should not exceed five days, dating from the arrival of the ship. During the same time the disembarkment of the crew may be forbidden, except for reasons of duty.

The destruction of rats on shipboard is recommended. This destruction is to be effected before or after the discharge of cargo, as quickly as possible, and in all cases with a maximum delay of forty-eight hours, taking care to avoid damage to merchandise, ships, and their machinery.

For ships in ballast this operation should be done, if done at all, as early as possible, and in all cases before taking on cargo.

ART. XXIII. Ships indemne from plague are to be admitted to free pratique immediately, whatever may be the nature of their bill of health.

The only regulation which the sanitary authorities at a port of arrival may prescribe for them consists of the following measures:

1. Medical visit (inspection).
2. Disinfection of soiled linen, articles of wearing apparel, and the other personal effects of the crew and passengers, but only in exceptional cases when the sanitary authorities have special reason to believe them infected.
3. Without demanding it as a general rule, the sanitary authorities may subject ships coming from an infected port to a process for the destruction of the rats on board before or after the discharge of cargo. This operation should be done as soon as possible, and in all cases should not last more than twenty-four hours, care being taken to avoid damaging merchandise, ships, and their machinery, and without interfering with the passing of passengers and crew between the ship and the shore.

^aThe word "observation" signifies isolation of passengers, either on board ship or at a sanitary station, before being given free pratique.

^bThe term "crew" is applied to persons who may make, or who have made, a part of the personnel of the vessel and of the administration thereof, including stewards, waiters, "cafedji," etc. The word is to be construed in this sense wherever employed in the present convention.

For ships in ballast this procedure, if practiced, should be put in operation as soon as possible, and in all cases before taking on cargo.

When a ship coming from an infected port has been subjected to a process for the destruction of rats, this process should only be repeated if the ship has touched meanwhile at an infected port, and has been alongside a quay in such port, or if the presence of sick or dead rats on board is proven.

The crew and passengers may be subjected to a surveillance, which should not exceed five days, to be computed from the date when the ship sailed from the infected port. The landing of the crew may also, during the same time, be forbidden except for reasons of duty.

Competent authority at the port of arrival may always demand, under oath, a certificate of the ship's physician, or in default of a physician, of the captain, setting forth that there has not been a case of plague on board since departure, and that no marked mortality among the rats has been observed.

ART. XXIV. When upon an indenne ship rats have been recognized as pest stricken as a result of bacteriological examination, or when a marked mortality has been established among these rodents, the following measures should be applied:

1. Ships with plague-stricken rats.

(a) Medical visit (inspection).

(b) Rats should be destroyed before or after the discharge of cargo, as rapidly as possible, and in all cases with a delay not to exceed forty-eight hours; the deterioration of merchandise, vessels, and machinery to be avoided. Upon ships in ballast, this operation should be performed as soon as possible, and in all cases before taking on cargo.

(c) Such parts of the ship and such articles as the local sanitary authority regards as infected, shall be disinfected.

(d) Passengers and crew may be submitted to observation, the duration of which should not exceed five days, dating from the day of arrival, except in special cases, where the sanitary authority may prolong the observation to a maximum of ten days.

2. Ships where a marked mortality among rats is observed:

(a) Medical visit (inspection).

(b) An examination of rats, with a view to determining the existence of plague, should be made as quickly as possible.

(c) If the destruction of rats is judged necessary, it shall be accomplished under the conditions indicated above in the case of ships with plague-stricken rats.

(d) Until all suspicion may be eliminated, the passengers and crew may be submitted to observation, the duration of which should not exceed five days, counting from the date of arrival, except in special cases, when the sanitary authority may prolong the observation to a maximum of ten days.

ART. XXV. The sanitary authorities of the port must deliver to the captain, the owner, or his agent, whenever a demand for it is made, a certificate setting forth that the measures for the destruction of rats have been efficacious and indicating the reasons why these measures have been applied.

ART. XXVI. Ships infected with cholera are to be subjected to the following regulations:

1. Medical visit (inspection).

2. The sick are to be immediately disembarked and isolated.

3. Other persons ought also to be disembarked, if possible, and subjected, dating from the arrival of the ship, to an observation, the duration of which shall not exceed five days.

4. Soiled linen, wearing apparel, and personal effects of crew and passengers which, in the opinion of the sanitary authority of the port, are considered as infected, are to be disinfected.

5. The parts of the ship which have been inhabited by persons sick with cholera, or which are considered by the sanitary authority as infected are to be disinfected.

6. The bilge water is to be discharged after disinfection.

The sanitary authority may order the substitution of good potable water for that which is contained in the tanks on board.

The discharge or throwing overboard into the water of a port, of dejecta, shall be forbidden unless they have been previously disinfected.

ART. XXVII. Ships suspected of cholera are to be subjected to measures prescribed under Nos. 1, 4, 5, and 6 of Article XXVI.

The crew and passengers may be subjected to an observation which should not exceed five days, to date from the arrival of the ship. It is recommended during the same time to prevent the debarkation of the crew except for reasons of duty.

ART. XXVIII. Ships indenne of cholera are to be admitted to free pratique immediately, whatever may be the nature of their bill of health.

The only regulations which the sanitary authorities of a port may prescribe in their case are the measures provided in Nos. 1, 4, and 6 of Article XXVI.

The crews and passengers may be submitted, in order to show their state of health, to an observation, which should not exceed five days, to be computed from the date when the ship sailed from the infected port.

It is recommended that during the same time the debarkation of the crew be forbidden except for reasons of duty.

Competent authority at the port of arrival may always demand, under oath, a certificate from the ship's surgeon, or, in the absence of a surgeon, from the captain, setting forth that there has not been a case of cholera upon the ship since sailing.

ART. XXIX. Competent authority will take account, in order to apply the measures indicated in Articles XXI to XXVIII, of the presence of a physician on board and a disinfecting apparatus in ships of the three categories mentioned above.

In regard to plague, it will equally take account of the installation on board of apparatus for the destruction of rats.

Sanitary authorities of such countries, where it may be convenient to make such regulations, may dispense with the medical visit and other measures toward indemne ships which have on board a physician specially commissioned by their country.

ART. XXX. Special measures may be prescribed in regard to crowded ships, notably emigrant ships, or any other ship presenting bad hygienic conditions.

ART. XXXI. Any ship not desiring to be subjected to the obligations imposed by the authority of the port in virtue of the stipulations of the present convention is free to proceed to sea.

It may be authorized to disembark its cargo after the necessary precautions shall have been taken, namely, first, isolation of the ship, its crew, and passengers; second in regard to plague, demand for information relative to the existence of an unusual mortality among rats; third, in regard to cholera, the discharge of the bilgewater after disinfection, and the substitution of a good potable water for that which is provided on board the ship.

Authority may also be granted to disembark such passengers as may demand it, upon condition that these submit themselves to all measures prescribed by the local authorities.

ART. XXXII. Ships coming from a contaminated port, which have been disinfected and which may have been subjected to sanitary measures applied in an efficient manner, shall not undergo a second time the same measures upon their arrival at a new port, provided that no new case shall have appeared since the disinfection was practiced, and that the ships have not touched in the meantime at an infected port.

When a ship only disembarks passengers and their baggage, or the mails, without having been in communication with terra firma, it is not to be considered as having touched at a port, provided that in the case of yellow fever it has not approached sufficiently near the shore to permit the access of mosquitoes.

ART. XXXIII. Passengers arriving on an infected ship have the right to demand of the sanitary authority of the port a certificate showing the date of their arrival and the measures to which they and their baggage have been subjected.

ART. XXXIV. Packet boats shall be subjected to special regulations, to be established by mutual agreement between the countries in interest.

ART. XXXV. Without prejudice to the right which governments possess to agree upon the organization of common sanitary stations, each country should provide at least one port upon each of its seaboard with an organization and equipment sufficient to receive a vessel, whatever may be its sanitary condition.

When an indemne vessel, coming from an infected port, arrives in a large mercantile port, it is recommended that she be not sent to another port for the execution of the prescribed sanitary measures.

In every country ports liable to the arrival of vessels from ports infected with plague, cholera, or yellow fever should be equipped in such a manner that indemne vessels may there undergo immediately upon their arrival the prescribed measures, and not be sent for this purpose to another port.

Governments should make declaration of the ports which are open in their territories to arrivals from ports infected with plague, cholera, or yellow fever.

ART. XXXVI. It is recommended that in large seaports there be established:

(a) A regular medical service and a permanent medical supervision of the sanitary conditions of crews and the inhabitants of the port.

(b) Places set apart for the isolation of the sick and the observation of suspected persons. In the *Stegomyia* belt there must be a building or part of a building screened against mosquitoes, and a launch and ambulance similarly screened.

(c) The necessary installation for efficient disinfection and bacteriological laboratories.

(d) A supply of potable water above suspicion, for the use of the port, and the installation of a system of sewerage and drainage, adequate for the removal of refuse.

SECTION IV.—*Measures upon land frontiers—Travelers—Railroads—Frontier zones—River routes.*

ART. XXXVII. Land quarantines should no longer be established, but the Governments reserve the right to establish camps of observation if they should be thought necessary for the temporary detention of suspects.

This principle does not exclude the right for each country to close a part of its frontier in case of necessity.

ART. XXXVIII. It is important that travelers should be submitted to a surveillance on the part of the personnel of railroads, to determine their condition of health.

ART. XXXIX. Medical intervention is limited to a visit (inspection), with the taking of temperature of travelers and the succor to be given to those actually sick. If this visit is made, it should be combined as much as possible with the custom-house inspection, to the end that travelers may be detained as short a time as possible. Only persons evidently sick should be subjected to a searching medical examination.

ART. XL. As soon as travelers coming from an infected locality shall have arrived at their destination, it would be of the greatest utility to submit them to a surveillance which should not exceed ten or five days, counting from the date of departure, the time depending upon whether it is a question of plague or cholera. In case of yellow fever the period should be six days.

ART. XLI. Governments may reserve to themselves the right to take particular measures in regard to certain classes of persons, notably vagabonds, emigrants, and persons traveling or passing the frontier in bands.

ART. XLII. Coaches intended for the transportation of passengers and mails should not be retained at frontiers.

In order to avoid this retention a system of relays ought to be established at frontiers with transfer of passengers, baggage, and mails. If one of these carriages be infected, or shall have been occupied by a person suffering from plague, cholera, or yellow fever, it shall be detached from the train for disinfection at the earliest possible moment.

ART. XLIII. Measures concerning the passing of frontiers by the personnel of railroads and of the post-office are a matter for agreement of the sanitary authorities concerned. These measures should be so arranged as not to hinder the service.

ART. XLIV. The regulation of frontier traffic, as well as the adoption of exceptional measures of surveillance, should be left to special arrangement between contiguous countries.

ART. XLV. The power rests with governments of countries bordering upon rivers to regulate by special arrangement the sanitary régime of river routes.

ARTICLES RELATING TO YELLOW FEVER.

ART. XLVI. Ships infected with yellow fever are to be subjected to the following regulations:

1. Medical visit (inspection).
2. The sick are to be immediately disembarked, protected by netting against the access of mosquitoes, and transferred to the place of isolation in an ambulance or a litter similarly screened.
3. Other persons should also be disembarked if possible, and subjected to an observation of six days, dating from the day of arrival.
4. In the place set apart for observation, there shall be screened apartments or cages where anyone presenting an elevation of temperature above 37.6° C. shall be screened until he may be carried in the manner indicated above to the place of isolation.
5. The ship shall be moored at least 200 meters from the inhabited shore.
6. The ship shall be fumigated for the destruction of mosquitoes before the discharge of cargo, if possible. If a fumigation be not possible before the discharge of the cargo, the health authorities shall order, either—

- (a) The employment of immune persons for discharging the cargo, or
- (b) If nonimmunes be employed they shall be kept under observation during the discharging of cargo and for six days, to date from the last day of exposure on board.

ART. XLVII. Ships suspected of yellow fever are to be subjected to the measures which are indicated in Nos. 1, 3, and 5 of the preceding article; and, if not fumigated, the cargo shall be discharged as directed under subparagraph (a) or (b) of the same article.

ART. XLVIII. Ships indemne from yellow fever, coming from an infected port, after the medical visit (inspection), shall be admitted to free pratique, provided the duration of the trip has exceeded six days.

If the trip be shorter, the ship shall be considered as suspected until the completion of a period of six days, dating from the day of departure.

If a case of yellow fever develop during the period of observation, the ship shall be considered as infected.

ART. XLIX. All persons who can prove their immunity to yellow fever to the satisfaction of the health authorities shall be permitted to land at once.

ART. L. It is agreed that in the event of a difference of interpretation of the English and Spanish texts, the interpretation of the English text shall prevail.

TRANSITORY DISPOSITION.

The governments which may not have signed the present convention are to be admitted to adherence thereto upon demand; notice of this adherence to be given through diplomatic channels to the Government of the United States of America and by the latter to the other signatory governments.

Made and signed in the city of Washington on the 14th day of the month of October, 1905, in two copies, in English and Spanish, respectively, which shall be deposited in the State Department of the Government of the United States of America, in order that certified copies thereof, in both English and Spanish, may be made to transmit them through diplomatic channels to each one of the signatory countries.

(Signed.)	DR. EDUARDO MOORE.
(Signed.)	JUAN J. ULLOA.
(Signed.)	JUAN GUIERAS.
(Signed.)	E. B. BARNET.
(Signed.)	EMILIO C. JOUBERT.
(Signed.)	M. H. ALCÍVAR.
(Signed.)	WALTER WYMAN.
(Signed.)	H. D. GEDDINGS.
(Signed.)	JOHN S. FULTON.
(Signed.)	WALTER D. McCAW.
(Signed.)	J. D. GATEWOOD.
(Signed.)	H. L. E. JOHNSON, M. D.
(Signed.)	JOAQUÍN YELA.
(Signed.)	E. LICÉAGA.
(Signed.)	J. L. MEDINA, M. D.
(Signed.)	DANIEL ED ^o . LAVORERÍA.
(Signed.)	N. VELOZ-GOITICOA.

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

Report from Vanceboro, Me.—Smallpox on Canadian border—Train inspection.

Acting Assistant Surgeon Young reports, January 21, as follows:
Week ended January 19, 1907. Inspected 18 passenger trains, carrying about 550 passengers; vaccinated 63 passengers.

Smallpox is now prevalent in Stellarton, Pugwash, New Glasgow, and Sydney, and is generally distributed in the country districts embraced in the triangle bounded by Collingwood, Victoria, and Middleboro, in Cumberland County, and in Colchester County, Nova Scotia. Definite information as to the number of cases in each place can not be obtained.

Report from Laredo, Tex.—Smallpox in State of Tamaulipas, Mexico.

Acting Assistant Surgeon Hamilton reports, January 18, as follows:
Smallpox is reported as prevailing to a considerable extent on the ranches in the neighborhood of Arguelles, Tamaulipas, Mexico. Arguelles is situated on Mexican Central Railroad, between Monterey and Tampico, and is 85 miles northwest of the latter place. There are American settlements in this vicinity.

STATISTICAL REPORTS OF MORBIDITY AND MORTALITY, STATES AND CITIES OF THE UNITED STATES YEARLY AND MONTHLY.

CALIFORNIA—*Los Angeles*.—Month of December, 1906. Estimated population, 250,000. Total number of deaths reported, 362, including diphtheria 4, enteric fever 6, and 70 from tuberculosis. Cases of contagious diseases reported: Diphtheria 35, enteric fever 17, scarlet fever 21, smallpox 1, and tuberculosis 35.

San Diego.—Month of December, 1906. Estimated population, 27,000. Total number of deaths, 67, including diphtheria 1, enteric fever 1, and 10 from phthisis pulmonalis. Cases of contagious diseases reported: Diphtheria 6.

CONNECTICUT—*Bridgeport*.—Month of December, 1906. Estimated population, 92,000. Total number of deaths, 128, including diphtheria 7, enteric fever 2, measles 2, and 14 from tuberculosis. Cases of contagious diseases reported: Diphtheria 28, enteric fever 1, measles 19, scarlet fever 9, whooping cough 1, and phthisis pulmonalis 5.

FLORIDA.—Reports to the State board of health for the week ending January 19, 1907, show as follows: Diphtheria, Duval County (*Jacksonville*), 2 cases; enteric fever, Hillsboro County (*Plant City, St. Petersburg, and Tampa*), 3 cases; Leon County (*Tallahassee*), 1 case; tuberculosis, Duval County (*Jacksonville*), 2 cases; Marion County (*Ocala*), 1 case.

ILLINOIS—*Rockford*.—Month of December, 1906. Estimated population, 43,000. Total number of deaths, 41, including 3 from tuberculosis. Cases of contagious diseases reported: Diphtheria, 3.

MASSACHUSETTS—*Lawrence*.—Month of November, 1906. Estimated population, 76,000. Total number of deaths, 85, including diphtheria 3, enteric fever 1, measles 1, whooping cough 1, scarlet fever 1, and 8 from tuberculosis. Cases of contagious diseases: Diphtheria 33, enteric fever 7, measles 9, scarlet fever 9.

Month of December, 1906. Total number of deaths, 85, including diphtheria 3, measles 2, whooping cough 1, and 7 from tuberculosis. Cases of contagious diseases: Diphtheria 26, enteric fever 3, measles 26, scarlet fever 7.

MINNESOTA.—Month of November, 1906. Estimated population, 1,979,658. Reports to the State board of health show as follows: Total number of deaths, 1,084, including diphtheria 28, enteric fever 66, measles 3, scarlet fever 3, smallpox 1, whooping cough 12, and 124 from tuberculosis. Deaths reported from State institutions during the month numbered 37, including enteric fever 3 and 4 from phthisis pulmonalis.

Minneapolis.—Month of December, 1906. Estimated population, 261,974. Total number of deaths 249, including diphtheria 5, enteric

fever 3, scarlet fever 1, whooping cough 2, and 26 from tuberculosis. Cases of contagious diseases reported: Diphtheria 92, enteric fever 11, scarlet fever 42, smallpox 33, tuberculosis 18.

St. Paul.—Month of December, 1906. Estimated population, 200,000. Total number of deaths reported to the department of health, 161, including diphtheria 8, enteric fever 2, whooping cough 2, and 25 from tuberculosis. Cases of contagious diseases reported: Diphtheria 122, scarlet fever 38, smallpox 8.

MISSOURI—*St. Louis.*—Month of December, 1906. Estimated population, 710,000—white, 665,000; colored, 45,000. Total number of deaths, 908—white, 831; colored, 77—including diphtheria 16, measles 3, scarlet fever 4, whooping cough 1, enteric fever 5, and 83 from phthisis pulmonalis. Cases of contagious diseases reported: Diphtheria 151, enteric fever 24, measles 161, scarlet fever 91, smallpox 1, whooping cough 4, and phthisis pulmonalis 137.

MONTANA.—Month of December, 1906. Estimated population, 280,000. Reports to the State board of health from 27 counties show as follows: Total number of deaths, 276, including diphtheria 8, enteric fever 16, measles 1, scarlet fever 2, and 18 from tuberculosis. Cases of contagious diseases were reported as follows: Diphtheria 57, enteric fever 39, measles 64, scarlet fever 14, and smallpox 7.

NEW JERSEY—*Paterson.*—Month of December, 1906. Estimated population, 113,773. Total number of deaths, 140, including diphtheria 6, and 18 from tuberculosis. Cases of contagious diseases reported: Diphtheria 43, enteric fever 6, scarlet fever 13, and tuberculosis 18.

NEW YORK—*Troy.*—Month of December, 1906. Estimated population, 76,861. Total number of deaths, 130, including enteric fever 3 and 15 from tuberculosis. Cases of contagious diseases reported: Diphtheria 12, enteric fever 5, scarlet fever 5, whooping cough 9, and tuberculosis 25.

PENNSYLVANIA—*Erie.*—Three days ended January 3, 1907. Estimated population, 62,000. Total number of deaths, 11, including 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 1, enteric fever 1, scarlet fever 1, and tuberculosis 2.

UTAH.—Month of December, 1906. Reports to the State board of health from 27 counties, having an estimated population of 315,966, show as follows: Total number of deaths, 321, including diphtheria 5, enteric fever 6, measles 1, scarlet fever 2, whooping cough 1, and 4 from tuberculosis. Cases of contagious diseases reported: Diphtheria 65, enteric fever 49, measles 165, scarlet fever 50, smallpox 63, whooping cough 59, tuberculosis 10 (incomplete).

VERMONT—*Burlington.*—Month of July, 1906. Estimated population, 22,000. Total number of deaths, 31, including enteric fever 1,

and 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 2, enteric fever 3, measles 4, scarlet fever 1, and whooping cough 2. Month of August, 1906. Total number of deaths, 42, including whooping cough 1, and 5 from tuberculosis. Cases of contagious diseases reported: Diphtheria 8, enteric fever 2, measles 1, and scarlet fever 3. Month of September, 1906. Total number of deaths, 45, including diphtheria 2, and 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 14, enteric fever 3, and whooping cough 1.

Smallpox in the United States as reported to the Surgeon-General, Public Health and Marine-Hospital Service, December 28, 1906, to February 1, 1907.

For reports received from June 29, 1906, to December 28, 1906, see PUBLIC HEALTH REPORTS for December 28, 1906.

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

Place.	Date.	Cases.	Deaths.	Remarks.
Arkansas:				
Fort Smith.....	Dec. 2-15.....	2		
Total for State.....		2		
California:				
Los Angeles.....	Dec. 23-29.....	1		
San Francisco.....	Dec. 6-22.....	2		
Total for State.....		3		
Connecticut:				
Manchester.....	Dec. 1-31.....	1		
Total for State.....		1		
Delaware:				
Reedy Island Quarantine.....	Dec. 22-27.....	1		On ss. Oswestry from Huelva, Spain.
Total for State.....		1		
Georgia:				
Augusta.....	Dec. 26-Jan. 22..	43		
Total for State.....		43		
Illinois:				
Abingdon.....	Nov. 10-16.....	1		
Chicago.....	Dec. 23-Jan. 26..	4		
Danville.....	Dec. 21-27.....	1		Imported.
Galesburg.....	Dec. 16-Jan. 26..	44		
Moline.....	Oct. 1-Nov. 9.....	3		
Peoria.....	Jan. 20-21.....	6		
Sandwich.....	Dec. 1-14.....	1		Present.
Victoria.....	Jan. 1-7.....			
Viola.....	Oct. 25-Dec. 25..	5		
Total for State.....		65		
Indiana:				
Elkhart.....	Dec. 16-22.....	1		
Indianapolis.....	Dec. 17-Jan. 20..	17	1	
Lafayette.....	Jan. 15-21.....	3		
Terre Haute.....	Jan. 20-26.....	1		
South Bend.....	Dec. 16-Jan. 19..	15		
Total for State.....		37	1	
Iowa:				
Ottumwa.....	Dec. 1-31.....	1		
Total for State.....		1		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Kansas:				
General	Dec. 1-31	1		
Allen County	Dec. 1-31	3		
Bouillon County	Dec. 1-31	1		
Brown County	Dec. 1-31	1		
Butler County	Nov. 1-Dec. 31	4		
Cheyenne County	Nov. 1-30	6		
Cowley County	Dec. 1-31	4		
Doniphan County	Dec. 1-31	1		
Geary County	Dec. 1-31	3		
Greenwood County	Dec. 1-31	1		
Jackson County	Dec. 1-31	1		
Jefferson County	Dec. 1-31	1		
Kearny County	Nov. 1-30	2		
Leavenworth County	Nov. 1-30	2		
Montgomery County	Nov. 1-Dec. 31	17		
Morris County	Dec. 1-31	1		
Osborne County	Nov. 1-30	6		
Pawnee County	Dec. 1-31	2		
Russell County	Dec. 1-31	2		
Sedgwick County, Wichita included.	Nov. 1-Dec. 31	9		
Shawnee County, Topeka included.	Nov. 1-Dec. 31	1		
Stevens County	Nov. 1-30	11		
Wallace County	Dec. 1-31	2		
Washington County	Nov. 1-30	2		
Woodson County	Dec. 1-31	1		
Total for State		85		
Louisiana:				
New Orleans	Dec. 23-Jan. 20	15	2	Imported.
Shreveport	Dec. 23-29	2		
Total for State		17		
Michigan:				
Ann Arbor	Jan. 13-19	1		
Detroit	Dec. 23-Jan. 19	19		
Total for State		20		
Minnesota:				
St. Paul	Dec. 4-31	6		
Total for State		6		
Missouri:				
St. Joseph	Dec. 16-Jan. 19	24	1	
St. Louis	Jan. 13-19	2		
Total for State		26	1	
Montana:				
Chouteau County	Dec. 1-31	5		
Dawson County	Dec. 1-31	2		
Total for State		7		
New York:				
New York	Dec. 16-Jan. 12	15		
Total for State		15		
North Carolina:				
Alamance County	Nov. 1-30	8		
Ashe County	Nov. 1-30	10		
Guilford County, Greensboro included.	Nov. 1-Jan. 19	3		
Person County	Nov. 1-30	1		
Randolph County	Nov. 1-30	21		
Wake County	Nov. 1-30	40		
Total for State		83		
Ohio:				
Cincinnati	Jan. 12-25	2		
Toledo	Dec. 16-22	1		
Total for State		3		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Texas:				
Houston	Dec. 30-Jan. 12...	5		
Total for State.....		5		
Utah:				
Boxelder County	Nov. 1-Dec. 31	6		
Cache County.....	Nov. 1-30	11		
Carbon County.....	Dec. 1-31	14		
Emery County.....	Nov. 1-30	4		
Salt Lake County, Salt Lake included.	Dec. 1-30.....	1		
Sevier County.....	Nov. 1-30	8		
Summit County.....	Nov. 1-Dec. 31	9		
Wasatch County.....	Nov. 1-Dec. 31	70		
Total for State		123		
Virginia:				
Fredericks Hall.....	Nov. 11-Jan. 5	6		
Norfolk	Jan. 1-7	1		
Total for State.....		7		
Washington:				
Spokane.....	Dec. 16-Jan. 12...	29		
Total for State		29		
Wisconsin:				
Appleton.....	Dec. 23-Jan. 19...	2		
La Crosse.....	Dec. 16-Jan. 19...	4		
Milwaukee.....	Dec. 16-Jan. 19...	31		
Total for State		37		
Grand total, United States...		614	2	

FOREIGN AND INSULAR.

Current quarantine measures.

[From the Veröffentlichungen des Kaiserlichen Gesundheitsamtes. Berlin, January 16, 1907.]

AUSTRIA.—December 28, 1906. A circular issued by the maritime authorities at Trieste informs the port and maritime sanitary officials of the outbreak of an epidemic of typhus fever at the Piraeus, and Athens, and refers them to requirements contained in proclamation of August 29, 1906.

MALTA.—December 10, 1906. An order relative to prohibited importations confirms the ordinance of July 21, 1906, prohibiting the importation of cotton unless accompanied by official certificate that anthrax does not prevail at the port of departure.

[From official reports.]

DUTCH EAST INDIES.—November 28, 1906. Cholera quarantine regulations enforced against arrivals from Calcutta. Plague quarantine regulations against arrivals from Cairns, Queensland, repealed.

EGYPT.—December 15, 1906. By decision of the permanent committee of the sanitary board at Alexandria, plague quarantine regulations are enforced against arrivals from Moulmein, Burma.

TURKEY.—December 18, 1906. By decision of the superior sanitary council at Constantinople arrivals at Turkish ports from Suakim and Kosseir, Sudan, are subject to medical inspection, disinfection, and measures for rat destruction.

AUSTRIA.

Report from Fiume—Epidemic of enteric fever.

Acting Consular Agent Mallett reports, December 23, 1906, as follows:

The present epidemic of enteric fever is the most infectious and virulent of any which ever occurred in this city. The city and military hospitals are entirely filled with enteric-fever patients. More than 200 cases have been officially reported during the last 2 weeks. The origin of the outbreak has not been determined.

CANARY ISLANDS.

Report from Santa Cruz de Teneriffe—Typhus fever.

Consul Berliner reports, December 29, as follows:

An expert sent by the Government to determine the disease reported as typhus fever arrived here on the 18th instant, but no report of his investigation has been received.

Quarantine is now enforced against the town of Santa Cruz de Teneriffe by all the islands of the Canary group, as well as by the towns situated on the island of Teneriffe.

Since November 30, when the first case appeared, there have been 28 cases and 12 deaths. The patients are sent to the lazaretto, which is about one mile from the town and situated on the seashore. All precautions have been taken against spread, the houses and drains have been disinfected by the city authorities, and the streets have been cleaned and sprinkled with lime. There have been no sudden deaths, all cases lasting from 7 to 9 days before death. (See Public Health Reports, January 11, 1907, page 29.)

CHINA.

Report from Shanghai—Inspection of vessels—Smallpox.

Temporary Acting Assistant Surgeon Mills reports, December 17, as follows:

Week ended December 15, 1906. Supplemental bills of health granted to 2 steamships. The crew of 1 steamship was vaccinated. Total crews numbering 179 were inspected and passed; also 83 steerage passengers; 4 pieces of baggage disinfected; 3 emigrants passed; no rejections of intending emigrants; 3,636 pieces of freight viséed.

No quarantinable diseases reported from outports.

The municipal health officer reports for the week ended December 16, 1906, 1 death from smallpox among the Chinese population.

CUBA.

Report from Cienfuegos—Inspection and fumigation of vessels—Leprosy—Sanitary conditions improved.

Acting Assistant Surgeon Marsillan reports, January 21, as follows:

Week ended January 19, 1907. Bills of health issued to 2 vessels bound for ports in the United States; 54 members of crews inspected; no passengers; no immune certificates issued.

The British schooner *Melba*, for Mosspoint, Miss., was fumigated prior to sailing.

No quarantinable disease has entered the port during this week, but there are in the city 4 cases of leprosy, 1 case in the civil hospital, which I have seen, and 3 cases outside, in the city.

The general sanitary condition of the port and surrounding country is improved.

The English steamship *Dandonian* arrived at this port January 12 from Tampico and was held in quarantine by Cuban authorities as being from an-infected port.

Report from Habana—Inspection and fumigation of vessels—Dengue fever—Sanitary work at Habana and interior localities.

Passed Assistant Surgeon von Ezdorf reports, January 22, as follows:

Week ended January 19, 1907.

Vessels inspected and bills of health issued	21
Vessels not inspected and bills of health issued	8
Crew of outgoing vessels inspected.....	917
Crew of outgoing vessels not inspected.....	488
Passengers of outgoing vessels inspected.....	611
Vessels fumigated prior to sailing.....	9

No new cases of yellow fever were reported in Habana during this week nor were any reported at any interior point in Cuba.

One case of dengue fever was reported for the first ten days of January, 1907.

The sanitary forces in Habana, operating especially for the extermination of breeding places for mosquitoes, continue their work with excellent results. Sanitary work on similar lines is also being carried out at other points in Cuba, particularly in places where yellow fever was reported last year.

Report from Matanzas—Inspection and fumigation of vessels.

Acting Assistant Surgeon Nuñez reports, January 21, as follows:

Week ended January 19, 1907. Bills of health issued to 8 vessels leaving for United States ports. One vessel, the American schooner *Lizzie B. Willey*, bound for Apalachicola, Fla., was fumigated on the day of sailing for her port of destination.

No quarantinable diseases reported during the past week.

Report from Santiago—Summary.

Acting Assistant Surgeon Wilson reports, January 18, as follows:

Summary of transactions for December, 1906.

Bills of health issued	17
Number of crews	675
Number of passengers	388
Vessels quarantined	0
Vessels disinfected	1
Certificates issued:	
Immune	3
Nonimmune	0
Vaccination certificates issued for the Canal Zone and Panama	0

EGYPT.

Disinfection of steamship City of Glasgow at Suez—Fatal case of cholera removed at Calcutta.

[From official reports.]

The British steamship *City of Glasgow* left Calcutta November 29, 1906, and Colombo December 5, and arrived at Suez on December 16, bound to London via Malta. Crew, 114; passengers, 10; general cargo. The vessel carried no physician and no disinfecting apparatus. On November 24, 1906, a cholera case was disembarked at Calcutta. The patient was taken to hospital and died the following day. At Suez, after favorable medical inspection and disinfection, the vessel was granted free pratique.

INDIA.

Report from Calcutta—Transactions of service—Cholera, plague, and smallpox.

Acting Assistant Surgeon Eakins reports, December 27, as follows: Week ended December 22, 1906. Bill of health was issued to the

steamship *Oceana* bound for Boston and New York with a total crew of 31; to the steamship *Buceros* bound for Boston and New York with a total crew of 51. The usual precautions were taken, holds fumigated, rat guards on wharf lines, and lascars' effects disinfected.

Week ended December 15, 1906, 109 deaths from cholera, 14 deaths from plague, and 6 deaths from smallpox in Calcutta.

In Bengal during the same week, 612 cases and 497 deaths from plague.

ITALY.

Report from Naples—Inspection of vessels—Rejection of emigrants recommended—Smallpox in Italy.

Passed Assistant Surgeon McLaughlin reports, January 7, as follows:

Week ended January 5, 1907. Vessels inspected as follows:

NAPLES.

Date.	Name of ship.	Destination.	Steerage passengers inspected and passed.	Pieces of large baggage inspected and passed.	Pieces of baggage disinfected.
Dec. 31	Napolitan Prince.....	New York	416	65	780
Jan. 5	Prinzess Irene.....	do	843	150	1,150
5	Moltke	do	515	135	950

Rejections recommended.

Date.	Name of ship.	Trachoma.	Favus.	Suspected trachoma.	Suspected favus.	Other causes.	Total.
Dec. 31	Napolitan Prince.....	26	.....	10	.....	3	39
Jan. 5	Prinzess Irene.....	21	2	21	.....	6	50
5	Moltke	16	4	8	.....	2	30
	Total	63	6	39	.....	11	119

Smallpox.—Week ended January 3, 1907, no cases reported. Week ended January 10, 1907, Corigliano (Genoa), 1 case.

PERU.

Report from Cullao—Inspection and fumigation of vessels—Smallpox—Recrudescence of plague.

Assistant Surgeon Wightman reports, December 30, as follows:

Week ended December 29, 1906. Vessels dispatched by this office as follows:

The Chilean steamship *Mapocho* on the 28th instant for Ancon, Canal Zone, with general cargo and a total personnel of 167, of whom 2 members of crew, 58 cabin, and 24 steerage passengers were from this port.

The British steamship *Strathearn* on the 28th instant for New York with general cargo and a total personnel of 49; none from this port.

Both vessels were fumigated and their personnel inspected. Steerage baggage was inspected and passed, or disinfected, and steerage passengers for Panama were vaccinated when necessary.

Smallpox is present at this place, but exact figures are not obtainable. There has recently been a recrudescence of plague in almost all of the formerly infected localities, with the exception of Lima, as is shown by the following report received from the Director de Salubridad:

Locality.	Cases December 1.	New.	Recovered.	Died.	Remaining December 19.
Lima	1		1		
Trujillo (neighborhood)	1	48	2	18	27
Lambayeque	1		1		
Catacaos	5	10	3	7	5
Pacasmayo		4		2	1
Mollendo		7			7
Paíta		2		1	1
San Pedro					

^a Figures for this place uncertain, but there were 6 cases remaining December 19.

PHILIPPINE ISLANDS.

Report from Manila—Quarantine transactions.

Chief Quarantine Officer Heiser reports, December 14, as follows:
Quarantine transactions of the Service in the Philippine Islands during the month of November, 1906:

Port of Manila.

Bills of health issued	250
Vessels inspected	243
Passengers on arriving vessels inspected	5,707
Persons vaccinated	395
Crews on arriving vessels inspected	11,611
Persons bathed and effects disinfected	1,231
Vessel disinfected	1
Vessels partially disinfected	5
Vessels fumigated to exterminate vermin	2
Pieces of baggage disinfected	1,636
Pieces of baggage inspected and passed	742
Outgoing:	
Vessels remaining in quarantine from October	3
Vessels entering quarantine during the month	26
Vessels discharged from quarantine	29
Vessels sailing without quarantine inspected and passed	35
Vessel disinfected	1
Persons remaining in quarantine from October	165
Crew quarantined	680
Cabin passengers quarantined	45
Steerage passengers quarantined	300
Crew on vessels inspected	2,125
Passengers on vessels inspected	1,464
Crew bathed and effects disinfected	171
Passengers bathed and effects disinfected	262
Pieces of baggage disinfected	1,841
Pieces of baggage inspected and passed	1,927
Pieces of miscellaneous cargo certified	67,942

Port of Iloilo.

Bills of health issued	194
Vessels inspected	106
Passengers on arriving vessels inspected	1, 018
Crew on arriving vessels inspected	2, 709
Outgoing:	
Vessels remaining in quarantine from October	14
Vessels entering quarantine during the month	11
Vessels discharged from quarantine	25
Vessels sailing without quarantine, inspected and passed	182
Persons remaining in quarantine from October	259
Crew quarantined	105
Steerage passengers quarantined	150
Crew on vessels inspected	3, 233
Passengers on vessels inspected	2, 428

Port of Cebu.

Bills of health issued	9
Vessels inspected	166
Passengers on arriving boats inspected	1, 510
Crew on arriving vessels inspected	3, 991
Persons bathed and effects disinfected	74
Persons detained in quarantine	2
Persons vaccinated	180
Vessel partially disinfected	1
Vessels fumigated to exterminate vermin	10
Vessel entering quarantine	1
Case of quarantinable disease detected on vessel—smallpox	1
Pieces of baggage disinfected	99

Port of Cavite.

Bill of health issued	1
Vessels inspected	6
Crew on arriving vessels inspected	4, 197

Port of Olongapo.

Vessels inspected	9
Passengers on arriving boats inspected	190
Crew on arriving vessels inspected	119

Port of Zamboanga.

Vessels inspected	3
Passengers on arriving boats inspected	9
Crew on arriving vessels inspected	163

Port of Jolo.

Vessels inspected	13
Passengers on arriving boats inspected	659
Crew on arriving vessels inspected	677

FOREIGN AND INSULAR STATISTICAL REPORTS OF COUNTRIES AND
CITIES—UNTABULATED.

ALGERIA—*Algiers*.—Month of December, 1906. Estimated population, 155,000. Total number of deaths, 338. No deaths from contagious diseases.

ARGENTINA—*Buenos Aires*.—Two weeks ended December 22, 1906. Estimated population, 1,064,000. Total number of deaths not reported. The following deaths from contagious diseases were reported: Diphtheria 2, enteric fever 3, measles 6, whooping cough 2, plague 4, and 68 from tuberculosis.

BRAZIL—*Pernambuco*.—Two weeks ended December 15, 1906. Estimated population, 210,000. Total number of deaths, 261, including leprosy 1, whooping cough 1, smallpox 35, and 58 from tuberculosis.

CUBA.—Month of December, 1906. Reports from the 6 provinces, having an aggregate population of 1,572,797, show as follows: Deaths from contagious diseases: Diphtheria 18, enteric fever 6, malarial fever 10, measles 1, yellow fever 2, whooping cough 1, and 73 from tuberculosis.

FRANCE—*Marseille*.—Month of December, 1906. Estimated population, 517,498. Total number of deaths, 1,359, including diphtheria 7, enteric fever 36, measles 2, scarlet fever 4, smallpox 88, whooping cough 2, and 176 from tuberculosis.

GERMANY—*Strasburg*.—Month of November, 1906. Estimated population, 185,000. Total number of deaths, 252, including diphtheria 2, enteric fever 4, whooping cough 2, and 36 from tuberculosis.

Weimar.—Month of December, 1906. Estimated population, 31,127. Total number of deaths, 49, including diphtheria 3, measles 1, whooping cough 1, and 2 from tuberculosis.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 76 great towns in England and Wales during the week ended January 5, 1907, correspond to an annual rate of 22.4 per 1,000 of population, which is estimated at 16,024,458.

Bradford.—Two weeks ended December 29, 1906. Estimated population, 288,544. Total number of deaths 203, including diphtheria 3, measles 1, scarlet fever 1, whooping cough 4, and 21 from phthisis pulmonalis.

London.—Two thousand two hundred and thirty-two deaths were registered during the week, including measles 36, scarlet fever 8, diphtheria 28, whooping cough 38, enteric fever 7, and 21 from diarrhea. The deaths from all causes correspond to an annual rate of 24.5 per 1,000. In Greater London 3,053 deaths were registered. In the "outer ring" the deaths included 3 from diphtheria, 4 from scarlet fever, 4 from measles, 3 from whooping cough, and 2 from diarrhea.

Ireland.—The average annual death rate represented by the deaths registered during the week ended January 5, 1907, in the 21 principal town districts of Ireland was 26.6 per 1,000 of the population, which is estimated at 1,117,457. The lowest rate was recorded in Queens-

town, viz, 6.6, and the highest in Ballymena, viz, 43.1 per 1,000. In Dublin and suburbs 246 deaths were registered, including measles 3, whooping cough 7, and 30 from tuberculosis.

Scotland.—The deaths registered in 8 principal towns during the week ended January 5, 1907, correspond to an annual rate of 22.9 per 1,000 of the population, which is estimated at 1,812,171. The lowest rate of mortality was recorded in Perth, viz, 15.0, and the highest in Paisley, viz, 31.8 per 1,000. The aggregate number of deaths registered from all causes was 796, including diphtheria 11, enteric fever 7, measles 10, scarlet fever 2, and 18 from whooping cough.

ITALY—*Milan.*—Month of November, 1906. Estimated population, 560,132. Total number of deaths, 725, including diphtheria 5, enteric fever 20, scarlet fever 2, and 111 from tuberculosis.

JAPAN—*Formosa.*—Month of November, 1906. Estimated population, 3,050,004. Total number of deaths not reported. Two deaths from diphtheria, 3 deaths from enteric fever, and 84 deaths from plague reported.

JAVA—*Batavia.*—Two weeks ended December 15, 1906. Estimated population, 160,000. Total number of deaths not reported. No deaths from contagious diseases reported.

MALTA.—Two weeks ended December 29, 1906. Estimated population, 205,059. Total number of deaths, 228, including diphtheria 6 and 3 from enteric fever.

PARAGUAY—*Asuncion.*—Month of February, 1906. Estimated population, 55,120. Total number of deaths, 116, including enteric fever 2, plague 5, and 4 from tuberculosis.

SIBERIA—*Vladivostok.*—Period from November 4 to 14, 1906. Estimated population, 64,500. Total number of deaths not reported. One death from enteric fever reported.

SPAIN—*Cadiz.*—Month of December, 1906. Estimated population, 69,382. Total number of deaths, 170, including enteric fever 1, smallpox 8, and 24 from tuberculosis.

SWITZERLAND.—Week ended December 29, 1906. Reports from 18 cities, having an aggregate population of 846,710, show as follows: Total number of deaths, 245, including diphtheria 1, measles 16, scarlet fever 1, whooping cough 1, and 40 from tuberculosis.

Cholera, yellow fever, plague, and smallpox from December 28, 1906, to February 1, 1907.

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

[For reports received from June 29, 1906, to December 28, 1906, see PUBLIC HEALTH REPORTS for December 28, 1906.]

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

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
India:				
Bombay	Nov. 23-Jan. 1		29	
Calcutta	Nov. 11-Dec. 15		447	
Cochin	Oct. 26-Nov. 30		21	
Karachi	Nov. 2-Dec. 7	11	13	
Madras	Nov. 17-30		4	
Negapatam	Oct. 27-Nov. 23		11	
Rangoon	Nov. 25-Dec. 22		113	
Philippine Islands:				
Manila	Nov. 18-Dec. 1	3	2	
Provinces—				
Capiz	Nov. 25-Dec. 1	66	42	
Iloilo	Nov. 18-Dec. 1	82	63	
Moro, Camp Vicars	Nov. 18-24	5	3	
Negros Occidental	Nov. 18-Dec. 8	19	13	
Pampanga	Nov. 18-24	2	1	
Rizal	Nov. 18-24	1	1	
Samar	Dec. 2-8	31	27	
Tarlac	Nov. 18-24	2	2	
Straits Settlements:				
Singapore	Jan. 1-Oct. 16	185	167	

YELLOW FEVER.

Africa:				
Dahomey	Nov. 17			Present.
Togo	Nov. 17			Do
Brazil:				
Para	July 1-Sept. 30 ^a		27	
Rio de Janeiro	Nov. 12-Dec. 8	5	3	
Cuba:				
Habana	Dec. 31	1		
Santa Clara	Jan. 8-10	1	1	
Ecuador:				
Guayaquil	Nov. 16-Dec. 15		23	
Salvador	Jan. 12			Epidemic.

^a Reports for July and August received out of date.

PLAGUE.

Arabia:				
Djeddah	Jan. 9	1		
Argentina:				
Buenos Aires	Dec. 16-22	5	4	
Australia:				
Brisbane	Nov. 16-24	2	2	
Brazil:				
Bahia	Dec. 2-15	10	8	
Para	July 1-31 ^a		2	
Pernambuco	Nov. 1-15		3	
Rio de Janeiro	Nov. 12-Dec. 23	73	28	
São Paulo	Nov. 12-Dec. 16		6	
Chile:				
Antofagasta	Nov. 22-Dec. 15	9	3	
China:				
Hongkong	Nov. 4-10	1	1	
Ecuador:				
Guayaquil	Nov. 16-Dec. 15		46	
Egypt:				
Alexandria	Nov. 13-Jan. 5	14	8	
Ismailia	Jan. 6	1		
Provinces—				
Garbieh	Oct. 25-Dec. 2	4	3	
Guerga	July 2-Dec. 2	34	23	
Keneh	June 10-Jan. 4	52	48	
Menoufieh	Mar. 29-Jan. 6	14	10	

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

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
India:				
Bombay Presidency and Sind.	Oct. 21–Nov. 24...	51,910	38,235	
Madras Presidency.....	Oct. 21–Nov. 24...	866	251	
Bengal.....	Oct. 21–Nov. 24...	2,702	2,359	
United provinces.....	Oct. 21–Nov. 24...	9,308	7,974	
Punjab.....	Oct. 21–Nov. 24...	39,580	84,253	
Burma.....	Oct. 21–Nov. 24...	3,955	3,599	
Eastern Bengal and Assam.	Oct. 21–Nov. 24...	80	25	
Central provinces, including Berar.	Oct. 21–Nov. 24...	7,105	5,840	
Mysore State.....	Oct. 21–Nov. 24...	3,105	2,343	
Hyderabad State.....	Oct. 21–Nov. 24...	148	100	
Central India.....	Oct. 21–Nov. 24...	12,260	9,367	
Rajputana.....	Oct. 21–Nov. 24...	118	71	
Kashmir.....	Oct. 21–Nov. 24...	1,094	686	
Northwest frontier province.	.....	2	1	
Baluchistan.....	Oct. 21–Nov. 24...	10	6	
		181,693	105,110	
Japan:				
Formosa—				
General.....	Nov. 1–30.....	100	84	
Saseho.....	Oct. 23.....	1	.....
Shimonoseki.....	Sept. 22.....	1	.....
Yamaga.....	Oct. 6.....	1	.....
Mauritius.....	Nov. 4–Dec. 6.....	172	111	
Peru:				
Catacaos.....	Nov. 9–Dec. 19.....	13	6	
Chicama.....	Dec. 5–11.....	14	.....	In vicinity.
Lambayeque.....	Nov. 9–15.....	.....	1	
Lima.....	Nov. 9–15.....	2	1	
Mollendo.....	Nov. 9–Dec. 19.....	17	11	
Pacasmayo.....	Dec. 13–19.....	4	1	
Paita.....	Nov. 13–Dec. 19.....	2	1	
Trujillo.....	Nov. 9–Dec. 19.....	57	23	And vicinity.

SMALLPOX.

Africa:				
Cape Colony—				
Cape Town.....	Nov. 11–Dec. 15..	7	.....
Argentina:				
Buenos Aires.....	Dec. 2–22.....	5	1	
Austria:				
Moravia.....	Nov. 4–10.....	1	.....
Brazil:				
Bahia.....	Dec. 2–15.....	9	.....
Pernambuco.....	Nov. 1–Dec. 15.....	.....	77	
Rio de Janeiro.....	Nov. 12–Dec. 23..	15	1	
Canada:				
New Brunswick—				
Kent County.....	Dec. 16–22.....	.....	.....	Present.
Nova Scotia—				
Cape Breton Island—				
Sydney.....	Jan. 6–19.....	.....	.....	Do.
Colchester County.....	Nov. 16–Jan. 19..	.....	.....	Do.
Cumberland County.....	Nov. 18–Jan. 19..	.....	.....	Do.
Pictou County.....	Jan. 13–19.....	.....	.....	Do.
Chile:				
Antofagasta.....	Nov. 16–Dec. 15..	34	2	
Coquimbo.....	Nov. 1–Dec. 13.....	70	5	
Iquique.....	Nov. 11–Dec. 15..	.....	.....	Do.
China:				
Chefoo.....	Nov. 13.....	.....	1	From U. S. S. Raleigh.
Shanghai.....	Nov. 27–Dec. 16..	1	1	
Cuba:				
Habana.....	Jan. 6.....	1	1	Case from ss. Puerto Rico from Spanish ports. Death from ss. Kronprinzessin Cecilia from Veracruz.
Egypt—General.....	July 2–29.....	112	27	
France:				
Marseille.....	Dec. 1–31.....	.....	88	
Paris.....	Dec. 2–Jan. 5.....	34	1	

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

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Germany:				
Gaudenz	Dec. 2-8	2		
Kanth	Dec. 9-15	1		
Marienwerder	Dec. 9-15	1		
Maxen	Dec. 2-8	1		
Metz	Nov. 18-Dec. 15	33		
Mülhausen	Dec. 2-15	9		
Thorn	Dec. 2-8	1		
Gibraltar	Dec. 17-Jan. 13	7		
Great Britain:				
Cardiff	Dec. 9-15	5		In port.
Hull	Dec. 22-23	7	4	
Manchester	Dec. 16-22	1		
Sheffield	Jan. 1-7	1		
India:				
Bombay	Dec. 12-25		2	
Calcutta	Nov. 11-Dec. 15		16	
Madras	Nov. 24-Dec. 14		5	
Italy:				
General	Nov. 23-Jan. 10	45		
Madeira:				
Funchal	Jan. 2	1		From ss. Massilia.
Malta	Dec. 16-22	1		
Mexico:				
Tamaulipas	Jan. 18			Epidemic in vicinity of Mexican Central R. R.
Netherlands:				
Rotterdam	Dec. 30-Jan. 5	1	1	
Persia:				
Anzell	Nov. 1-30			Present.
Hamadan	Oct. 1-31			Do.
Kerman	Oct. 1-31			Do.
Kermanshah	Oct. 1-31			Do.
Meshed	Oct. 1-31			Do.
Rasht	Nov. 1-30			Do.
Shiraz	Oct. 1-31			Do.
Teheran and vicinity	Oct. 1-31			Epidemic.
Yezd	Nov. 1-30			Do.
Peru:				
Callao	Dec. 23-29			Present.
Russia:				
Moscow	Dec. 11-29	4	1	
Odessa	Dec. 2-Jan. 5	38	8	
St. Petersburg	Nov. 25-Dec. 29	27	6	
Spain:				
Barcelona	Dec. 1-Jan. 10		24	
Cadiz	Nov. 1-30		3	
Madrid	Oct. 1-31	1		
San Feliu de Guixols	Dec. 23-Jan. 5		2	
Seville	Nov. 1-30			Present.
Syria:				
Beirut	Dec. 2-29			Do.
Turkey:				
Constantinople	Dec. 3-30		6	

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.				
Nuremberg	Dec. 22	294,426	87	13														
Do	Dec. 29	294,426	85	18														
Odessa	Jan. 5	461,000	185	23														1
Palermo	Dec. 29	390,000	127	6														
Plymouth	Jan. 5	116,000	49						1									
Prague	Dec. 29	226,320	136	26														
Do	Jan. 5	226,320	127	27														1
Quebec	Jan. 12	70,000																
Rangoon	Nov. 24	252,155	182	14	22	15												
Do	Dec. 15	252,155	218	11	18	43												
Rheims	Jan. 6	109,859	31															
Rotterdam	Jan. 12	390,360	142															
Rouen	Dec. 30	116,316	74	11														1
Do	Jan. 6	116,316	75	14														
St. Georges	Dec. 29	2,189	1															
Do	Jan. 5	2,189	1															
St. John, N. B.	Jan. 21	40,789	10	1														
St. Petersburg	Dec. 29	1,500,000	746	131														
St. Stephen, N. B.	Jan. 19	2,840	1															
Salford	Jan. 5	234,077	123	9														
San Felipe Guixols	do	11,094	7															
Santa Cruz de Tenerife	Dec. 29	45,000	17	3														
Do	Jan. 5	45,000	22	2														
Santander	Jan. 6	53,574	37															
Sheffield	Dec. 29	440,000	172	16														1
Do	Jan. 5	440,000	184	12														1
Southampton	do	117,312	46	4														1
South Shields	do	113,461	49	4														1
Stockholm	Dec. 22	324,488	83	14														2
Toronto	Dec. 8	262,749	77	5														
Do	Dec. 15	262,749	89	6														
Do	Dec. 22	262,749	77	7														
Do	Dec. 29	262,749	68	4														
Do	Jan. 5	262,749	79	2														
Do	Jan. 12	262,749	77	6														
Trapani	Dec. 29	67,379	19															
Tuxpam	Jan. 7	13,000	6															
Venice	Nov. 24	171,709	82	8														
Do	Dec. 1	171,709	45	5														
Do	Dec. 8	171,709	70	7														
Do	Dec. 15	171,709	43	3														
Do	Dec. 22	171,709	71	6														
Do	Dec. 29	171,709	80	7														
Veracruz	Jan. 5	32,000	42	12														
Do	Jan. 12	32,000	31	8														
Vladivostok	Dec. 5	64,500																
Windsor	Jan. 19	3,000	3															
Winnipeg	Jan. 12	100,000	16	1														
Yokohama	Dec. 2	313,695																
Do	Dec. 9	313,695																
Do	Dec. 16	313,695																
Zurich	Jan. 5	174,000	40	13														1

By authority of the Secretary of the Treasury:

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