

PUBLIC HEALTH REPORTS.

UNITED STATES.

BRIEF HISTORY OF FEDERAL AND STATE ACTION AGAINST TUBERCULOSIS IN THE UNITED STATES.

[Prepared in the Bureau of the Public Health and Marine-Hospital Service.]

The first organized movement against tuberculosis in the United States was begun about fifteen years ago by the Pennsylvania Society for the Prevention of Tuberculosis. This society, the first of its kind in America, was organized at Philadelphia, April 22, 1892, by Dr. Lawrence F. Flick, for the purpose of enlisting both physicians and laymen in the campaign. A report and history of this society have recently been issued.

The work, as outlined in a report of the society, was to be accomplished, first, by promulgating the doctrine of the contagiousness of the disease; second, by instructing the public in the practical method of avoidance and prevention; third, by visiting the tuberculous poor and supplying them with the necessary materials for protecting themselves against the disease and instructing them in their use; fourth, by furnishing the tuberculous poor with hospital treatment; fifth, by cooperating with boards of health in such measures as they might adopt for the prevention of the disease; sixth, by advocating the enactment of appropriate laws for the prevention of the disease.

Since that date, numerous other societies, leagues, and commissions have been organized, and to-day there are more than 50 such organizations in the United States. There are 2 national societies, namely, the American Antituberculosis League and the National Society for the Study and Prevention of Tuberculosis. The latter society was organized March 28, 1904, at Philadelphia, Pa., by a number of physicians and laymen. Two annual meetings of the association have been held at Washington. The constitution and by-laws, and reports of the annual meetings of this society have been published.

There are 14 State associations, and 1 association in the District of Columbia. Through the efforts of these associations and other agencies, city and local societies have been organized in many of the cities of the Union.

The following is a list of the States, including the District of Columbia, having such societies. It will be understood that all of these societies are independent of Government control:

Delaware Antituberculosis Society, New Castle, Del.

Illinois State Association for the Prevention of Tuberculosis, Chicago, Ill.

Indiana Antituberculosis Society, Indianapolis, Ind.

Iowa Association for the Study and Prevention of Tuberculosis, Des Moines, Iowa.

- Kentucky Antituberculosis Association, Louisville, Ky.
 Maryland Association for the Prevention and Relief of Tuberculosis, Baltimore, Md.
 Minnesota Antituberculosis Association, St. Paul, Minn.
 New Hampshire Society for the Prevention of Tuberculosis, Concord, N. H.
 New Jersey State Association for the Prevention of Tuberculosis, Newark, N. J.
 North Carolina Association for the Prevention of Tuberculosis, Oxford, N. C.
 Ohio Society for the Prevention of Tuberculosis, Columbus, Ohio.
 Pennsylvania Society for the Prevention of Tuberculosis, Philadelphia, Pa.
 Vermont Society for the Study and Prevention of Tuberculosis, Burlington, Vt.
 Wisconsin Society for the Study and Prevention of Tuberculosis, Milwaukee, Wis.
 District of Columbia Committee on the Prevention of Consumption, Washington.

The work of the above-mentioned societies, carried on independently or in cooperation with Federal, State, and municipal authorities, has been an important factor in the campaign against the disease in this country. The problem is more complex in the congested centers of population, and for that reason it demanded the earliest recognition in the larger cities of the country.

Many municipal authorities, acting under authority of State law or local ordinances, have been actively engaged in disseminating knowledge concerning the disease, taking steps looking to its prevention, and caring for those already afflicted. It may be stated that New York City led the way in this work and set an example of what may be done toward the elimination of this disease.

A review of the excellent work done by municipal authorities is not included in this brief summary, which refers only to Federal, State, and Territorial measures taken for the prevention of the disease.

DIRECT PUBLIC MEASURES TAKEN AGAINST TUBERCULOSIS.

FEDERAL ACTION.

The National Government has taken certain steps for the prevention of the disease among its employees, chief of which are the establishments of sanatoria.

The Surgeon-General of the Public Health and Marine-Hospital Service issued an order August 2, 1898, directing that separate wards be set aside in all of the marine hospitals of the Service for the exclusive use of tubercular patients. This bureau further recognized the advantages of establishing a sanatorium in the arid regions of the Southwest in order that the well-known climatic conditions in that region might be utilized in the treatment of this disease.

The Surgeon-General in a letter addressed to the Secretary of the Treasury dated November 28, 1898, representing the necessity for such an institution, stated as follows:

The elimination of this disease from the seafaring classes is especially incumbent upon the Treasury Department and the Marine-Hospital Service. These sailors come to our hospitals and remain a sufficient length of time to leave, if able to leave at all, and to again ship on board their vessels, where, in the narrow confines of the fore-castle, they spread the disease among other sailors, with whom they are so closely associated. Therefore any effort made to eliminate this disease from among the sailors is a very essential factor in preventing the spread of the disease among all classes of our population.

It is well known that in the southwestern portion of our country there is territory still belonging to the United States Government where the climatic conditions are such that patients afflicted with this disease, when removed there, will ultimately recover. It is therefore proposed to establish a marine hospital in this section and remove there from time to time, as can be done most easily and economically, the marine-hospital patients afflicted with this disease. This subject has been under consideration and a matter of conversation and of correspondence by myself for a number of years, and in 1878 I broached the subject of a ranch for the treatment of these sailors.

As the result of these representations, an Executive order was issued April 1, 1899, setting aside the old military reservation at Fort Stanton, N. Mex., for the use of the Marine-Hospital Service, the object being to establish a sanatorium for the treatment and cure of seamen of the merchant marine suffering with tuberculosis. This reservation contains 43 square miles. The sanatorium was completed as rapidly as possible and has now been in operation for a number of years. The War Department later established a sanatorium at Fort Bayard, N. Mex., for the treatment of the disease among the soldiers. The Navy Department maintains a tuberculosis camp of 50 beds at Pensacola, Fla.

The Surgeon-General of the Navy, in his annual report for 1906, states that investigations are being made with a view to the selection and recommendation of a site possessing the most favorable conditions for the establishment of a naval sanatorium for cases of tuberculosis in the Navy and Marine Corps.

The Surgeon-General of the Public Health and Marine-Hospital Service issued a circular letter, February 11, 1902, to officers of the Service, authorizing the disinfection of ships' quarters from which cases of tuberculosis had been taken.

With a view to preventing the spread of tuberculosis among the employees of the various Government buildings, offices, and workshops, the President issued an Executive order, dated February 28, 1906, providing for the inspection of the Government offices and workshops, the preparation of pamphlets of instruction, regulations, and antisputting notices. Provision was also made in this Executive order for the examination of persons suspected of being afflicted with tuberculosis, such examinations to be made in laboratories at Government expense. A copy of the circular issued under this Executive order has been published for distribution to those suffering with the disease. This pamphlet contains the Executive order above mentioned, the regulations to prevent the spread of tuberculosis, and the anti-sputting notices, which are posted in the various Government offices and workshops.

Congress provided for the creation of a hospital in the District of Columbia for the treatment of indigent persons suffering from tuberculosis. Under the existing form of government of the District of Columbia, this appropriation may be regarded as local rather than Federal.

The Fifty-ninth Congress during its first session made provision for an investigation as to the prevalence of tuberculosis among the Indians and the desirability of establishing a sanatorium for the treatment of Indians afflicted with tuberculosis, as follows:

That the Commissioner of Indian Affairs, under the supervision of the Secretary of the Interior, is hereby authorized to investigate and report to Congress upon the

desirability of establishing a sanatorium for the treatment of such Indians as are afflicted with tuberculosis, and to report upon a location and the cost thereof, and also upon the feasibility of utilizing some present Government institution therefor; said report to include, as far as possible, the extent of the prevalence of tuberculosis among Indians.

ACTION IN STATES, TERRITORIES, AND THE DISTRICT OF COLUMBIA.

A number of the States of the Union have also taken official action looking to the control of the disease within their respective territories. Official action directed toward the improvement of general sanitation within the States has also had more or less influence on the suppression of the disease. This is especially true in the larger cities, the action being based on a law of the State or an ordinance passed by the city government.

The following table shows the date of the beginning of the movement in the various States, Territories, and the District of Columbia:

State.	Date.	State.	Date.	State.	Date.
California	1902	Maine	1889	Ohio	1898
Connecticut	1902	Maryland	1901	Pennsylvania	1885
Delaware	1903	Massachusetts	1898	Porto Rico	1906
District of Columbia	1902	Michigan	1891	Rhode Island	1894
Florida	1902	Minnesota	1901	South Dakota	1904
Hawaii	1900	New Hampshire	1886	Utah	1903
Illinois	1899	New Jersey	1900	Virginia	1904
Indiana	1900	New York	1892	Wisconsin	1903
Georgia	1905	North Carolina	1904	Vermont	1902
Iowa	1898	North Dakota	1906		
Kansas	1906	Oregon	1903		

The following is a brief summary of the work accomplished so far as reported to the Bureau. This information was received from the State boards of health, and in compiling the same reference was also made to the annual reports of the various State boards.

California.—The State law requires notification of the disease and the collection of vital statistics. The State maintains a tent ward in connection with one of the State hospitals for the insane for the use of tuberculous patients. At another of the State hospitals for the insane a similar ward is now being constructed.

The Secretary of the State board of health states that most of the 57 counties have at their county farm a tuberculosis camp separate from the hospital.

Colorado.—The secretary of the State board states that the official action against tuberculosis has been limited to the issuance of a circular entitled "The Prevention of Tuberculosis." Notification of the disease is not required. In the Seventh Report of the board, published in November, 1904, there appears a proposed regulation governing tuberculosis. The ideas, as contained therein, were unanimously approved by the board, but owing to the lack of funds the regulation was not promulgated.

Connecticut.—The State legislature in 1902 made an appropriation to aid in the establishment of a hospital at Cedar Mountain for the exclusive treatment of tuberculosis under the auspices of the Hartford Hospital Society. An appropriation was also made to aid in the establishment of a sanatorium at Wallingford. Both of these institutions are partially supported by the State.

The health regulations of the various towns prohibit spitting on the floor of trolley cars and public buildings, and the spitting on sidewalks is prohibited in cities of the State. Consumption is reportable to boards of health. Vital statistics of the disease are collected and published in the annual reports of the State board.

An act, approved June 29, 1905, concerning tenement houses, chapter 178, was passed by the State legislature. This act has an indirect bearing upon the prevention of tuberculosis as it tends to improve the sanitary conditions of dwellings.

Delaware.—A division for tuberculous patients is provided at the State hospital for the insane, Farnhurst. Vital statistics of all diseases, including tuberculosis, are collected by the State board of health.

District of Columbia.—During the first session of the Fifty-ninth Congress an appropriation was made for the erection of a sanatorium for the treatment of indigent persons suffering with tuberculosis. The Board of Commissioners of the District, with a view to preventing tuberculosis among the District Government employees, issued an order, dated May 6, 1906, providing for the inspection of buildings, examination of suspected cases, etc. The health department also furnishes for distribution circulars relative to the prevention of consumption. The health officer, Dr. William C. Woodward, states that the health department disinfects without cost any room that has been occupied by a consumptive upon the receipt of a request for such disinfection, and when it learns of the vacation of a room that has been occupied by such a patient through death it solicits consent to disinfect. This department also collects vital statistics relating to tuberculosis.

An act was passed during the first session of the Fifty-ninth Congress entitled "An act to create a board for the condemnation of insanitary buildings in the District of Columbia and for other purposes." This law, having for its purpose the improvement of dwellings, will exert a beneficial influence against the spread of tuberculosis.

Florida.—The State board of health endeavors to educate the citizens regarding the prevention of tuberculosis by means of circulars and health notes. It has also, under the State law, issued a regulation forbidding promiscuous spitting under penalty of fine and imprisonment.

Georgia.—The State board of health has issued educational circulars dealing with the prevention of the disease. A resolution was passed by the State legislature and approved August 22, 1905, authorizing the governor to appoint a committee to consider the question of a State sanatorium for consumptives.

Hawaii.—The Territory of Hawaii has a general law requiring physicians and householders to report, under penalty, every case of "diseases dangerous to public health." Under this law the board of health has designated a list of diseases that must be reported, and among them is tuberculosis.

The president of the territorial board of health states that the number of deaths from the six important contagious diseases is summarized twice each month by the official registrar and notice is given through the press. Vital statistics are regularly collected and registered.

On request the board of health fumigates and disinfects rooms and houses where pulmonary tuberculosis has occurred. The city of Honolulu, island of Oahu, has had for six years an institution devoted to tubercular diseases and incurables. It is organized under the name of

the Leahi Home. In the year 1902 it was relocated on grounds especially adapted to its needs, and it is now equipped with new and admirable buildings and facilities, the latest addition being a large pavilion for the open-air treatment of pulmonary tuberculosis. The institution is supported by invested funds, Government aid, and charitable contributions. Adults and children are admitted from all parts of the Territory.

Illinois.—The State board of health has issued a number of circulars on the cause and prevention of tuberculosis. Provision is also made for the collection of vital statistics, including statistics of tuberculosis. Attempts were made on three occasions to secure legislation providing for a tuberculosis sanatorium, but without success.

Indiana.—The State legislature of 1905 passed a law creating a tuberculosis commission. This commission is charged with the investigation of the subject of tuberculosis, especially with reference to the establishment of a State sanatorium. The secretary of the State board of health states that this commission has been active in making visits, and that a full report will be made recommending a special law relative to the suppression of tuberculosis and the establishing of dispensaries and a State health farm. He also states that the State board of health has conducted a series of lectures throughout the State for the purpose of instruction. Whenever these lectures were delivered a tuberculosis exhibit was made. This exhibit consisted of pathological specimens, such as tuberculous bones and specimens prepared in formalin gelatine. This exhibit also included charts showing statistics in Indiana, photographs of various sanatoria, and charts containing brief statements regarding disinfection, etc.

A circular of information entitled "Consumption, its Cause, Prevention, and Cure," was issued by the State board of health in 1904.

Notification of the disease is required by ordinance in all the larger cities. The law really requires notification in all parts of the State, but it is possible only partially to enforce it. Vital statistics are carefully collected throughout the State, the reports being published monthly.

Iowa.—The State board of health issued its first circular of information respecting tuberculosis in 1898. The thirtieth general assembly of the State made provision for an investigation regarding the extent of tuberculosis in Iowa and the best means of prevention and treatment of the disease. The rules and regulations of the State board of health require notification of the disease. Rules were also adopted by the State board, January 15, 1906, for the restriction and prevention of tuberculosis in the schools of the State. In accordance with those rules any superintendent, principal, teacher, pupil, or employee in any school, public or private, in the State, if found upon examination to be suffering with tuberculosis, shall be excluded from the school until such time as the laboratory examination, made without expense, shall fail to reveal the presence of the tubercle bacilli.

Kansas.—The crusade against tuberculosis was inaugurated by the State board of health September 1, 1906. This was done by sending a circular letter to every physician practicing in the State, with the object of taking a census of all tubercular cases. The State board of health collects vital statistics, but, though notification of the disease is required, reports are not complete. The State laboratory makes free examinations of sputum of suspected cases. The State

board of health issued an order in July, 1905, to all county and municipal health officers that all houses and places should be effectively disinfected after termination of cases of pulmonary tuberculosis. The secretary of the State board of health states that, in addition to these measures, the names and addresses of all cases dying from tuberculosis, as disclosed by assessors' returns, have been sent to county and municipal health officers, with an order to investigate whether or not the places and things have been effectively and thoroughly disinfected, and to make a critical examination of the remainder of the family, in order to discover, if possible, any incipient cases. The State laboratory is open for the examination, free of charge, of all sputum submitted under this ruling. A pamphlet on the prevention is presented to the family of all such reported cases.

Maine.—The first real movement in the State against tuberculosis was the issue by the State board of health of its Circular No. 54, entitled "Prevention of Consumption." The first edition was issued in 1889, and the distribution of this circular throughout the State is still continued.

The secretary of the State board of health states that the statutory law of the State requires notification of cases of pulmonary tuberculosis. Statistics relating to tuberculosis are collected by the department of vital statistics, the secretary of the State board of health being *ex officio* registrar of that department.

The Maine Sanatorium Association was incorporated by a special act of the legislature in 1901. It was the first movement in the State toward the treatment of consumption. The object of the association was to establish a sanatorium for the treatment of persons afflicted with pulmonary diseases, and, through educational and preventive measures, to limit the spread of the disease.

The last legislature made an appropriation to aid in the work which had been undertaken by the Maine State Sanatorium Association.

Circular No. 70 of the State board of health contains directions for the disinfection of rooms and articles used by consumptives.

Maryland.—The first official step in the movement against tuberculosis was taken on November 5, 1901, when the State board of health addressed a letter to the governor of the State, pointing out the necessity of legislative action on the subject of tuberculosis, and suggesting to the governor the appointment of a tuberculosis commission. The governor gave his assent to the propositions, and the State board of health introduced in the legislature, which met the following January, a bill providing for the formation of a tuberculosis commission. This bill passed and received executive approval April 8, 1902. The commission was composed of five persons who made a report in 1904. Under this commission a tuberculosis exhibit was held in Baltimore in January, 1904—the first of its kind in America.

The State legislature of 1904 passed two acts relating to tuberculosis. One of them requires the registration of all cases of tuberculosis and guards these records with the strictest privacy. The second of these acts provides for domestic prophylaxis in the homes of the tuberculous. Copies of these acts are contained in the report of the tuberculosis commission.

The secretary of the State board of health states that under these acts private physicians are expected to carry out the prophylactic instructions of the board, to deliver the prophylactic supplies, and give

careful instructions to the patients and to one responsible member of the household. This second law also provides for the disinfection of homes and premises vacated by the death or removal of consumptive patients and provides a penalty for letting an apartment to the succeeding tenant before disinfection has been done.

The State legislature at its last session appropriated for and appointed a special commission to erect a sanatorium. Notification of tuberculosis is required and satisfactory mortality statistics, including the mortality statistics of tuberculosis, are collected.

The State board of health has laboratory records of examinations of tuberculous sputum covering a period of eight years.

Massachusetts.—The movement for the prevention of tuberculosis was inaugurated in Massachusetts in 1898 by the establishment of a State sanatorium, which has 365 beds and is located at Rutland. The accompanying list of State sanatoria gives the names of the additional State institutions in Massachusetts for the care of tubercular patients.

An act was passed by the State legislature and approved May 1, 1905, to authorize the board of prison commissioners to establish a hospital at Rutland for prisoners having tubercular disease. Male prisoners in the State prison, the Massachusetts Reformatory, the State farm, or any jail may be admitted upon the certificate of the prison physician that they are suffering with consumption. A resolution was passed by the State legislature and approved May 12, 1905, providing for an exhibition of means and methods of treating and preventing tuberculosis. This exhibit was held in Boston, December 28, 1905, to January 11, 1906.

The secretary of the Boston Association for the Relief and Control of Tuberculosis states that a State commission is now at work on the report which it will submit to the legislature at its next session on the extent of tuberculosis in the State and the need of further provision for the same. Notification of the disease is not made compulsory by the State board of health, but about 20 cities and towns in the State have voluntarily taken this action. The Boston board of health required registration of cases in 1900.

Vital statistics in the State of Massachusetts are collected by the secretary of the Commonwealth, and very complete data are available for deaths from tuberculosis for the past sixty years.

The State board of health has also issued educational circulars relative to tuberculosis or consumption, and the best means for preventing it.

Michigan.—The movement was first started by the State board of health in 1891. In accordance with the provisions of act No. 137, laws of 1883, the State board of health requires notification of cases of tuberculosis. The board also collects vital statistics of this and other diseases.

A bill was introduced into the State legislature June 6, 1905, and was enacted into law, to establish a State sanatorium in some suitable locality in Michigan for the care and treatment of persons having tuberculosis. In accordance with the provisions of this act, a State sanatorium is now being built at Howell, Mich.

The act No. 146, laws of 1905, requires that "there shall be taught in every year in every public school in Michigan the principal modes by which each of the dangerous contagious diseases is spread and the best method for the restriction and prevention of each such disease."

using the data and statements supplied by the State board of health. Other laws and regulations relating to the public health are also in force, which have an indirect bearing on prevention of tuberculosis and other diseases.

For purposes of instruction in the public schools, teachers' sanitary bulletins are published, containing information relative to tuberculosis.

The Teachers Sanitary Bulletin, No. 8, volume 1, issued January, 1905, contains information regarding the open-air treatment of tuberculosis.

In addition to the measures already mentioned, the State board of health has issued an additional circular entitled "Tuberculosis, Its Restriction and Prevention."

The State department of agriculture has issued numerous circulars relating to the care and handling of milk, which has a practical, though indirect, bearing on the prevention of tuberculosis.

Minnesota.—The secretary of the State board of health states that the first movement against tuberculosis in Minnesota was taken by the physician in charge of the State penitentiary in 1894, who established the system of isolation, special diet, etc., for the tuberculous inmates of that institution.

The State legislature of 1901 appointed a commission to consider the question of State care of cases of incipient tuberculosis. Appropriations have been made by each legislature since that date, and a building is now under process of construction. The State sanatorium for consumptives is located at Walker, Minn.

Notification of the disease is required under a recent ruling of the State board of health, and vital statistics are also collected. Through the State board of health certain circulars have been issued.

Missouri.—The general assembly of the State of Missouri passed a law, which was approved April 15, 1905, providing for the establishment of an institution for the treatment of incipient pulmonary tuberculosis. This sanatorium, which is now in process of construction, will be located at Mount Vernon, a point in the Ozark Mountains, which is at an altitude of something under 1,000 feet. Efforts are being made to secure the enactment of a law providing for the collection of sanitary statistics.

New Hampshire.—The movement against tuberculosis in New Hampshire was first started by the State board of health by the distribution of circulars and through the publications of the board.

A circular of this character, entitled "Consumption, Its Prevalence, Cause, Restriction and Prevention," has recently been issued. This circular shows that there has been a marked diminution in the fatality of the disease in New Hampshire during the last 20 years.

The law (ch. 2, N. H. Session Laws, 1903) forbids any person to spit on any sidewalk in the compact part of any city, village, or town, or in any railway station, hall, or other public place, or in any street or steam-railway car, other than smoking cars, except into spittoons provided for that purpose.

The law (ch. 17, N. H. Session Laws, 1905) requires the report to the local board of health of every death from pulmonary consumption, or the removal of a consumptive patient within one week after said death or removal.

It also requires the local board of health, within one week after such notice or such information, to cause the infected premises to be thoroughly disinfected and cleansed. It also forbids the reoccupancy of apartments which have been occupied by consumptives until after they have been thoroughly disinfected and cleansed.

The State legislature passed a resolution, which was approved February 13, 1901, providing for the appointment of a commission to consider the question of a State sanatorium for consumptives. This commission submitted its report to the governor November 1, 1902.

It also passed a law, which was approved March 10, 1905, providing for the establishment of a State sanatorium for consumptives. The vital statistics of the disease are collected by the State board of health.

New Jersey.—The campaign against tuberculosis in New Jersey was started by the medical society of the State. Vital statistics have been collected by the State board of health since 1879. A pamphlet entitled "Prevention of Tuberculosis," recently issued by the board contains a chart showing the death rate per thousand inhabitants for the past twenty-seven years.

The State board of health supplies facilities for the examination of specimens in cases of suspected tuberculosis. Notification of the disease is required in accordance with section 1 of an act approved March 22, 1905, entitled "An act for the protection of public health."

Chapter 260 of the laws of New Jersey, 1903, has for its object the prevention of spitting in railway cars.

The State of New Jersey is now building a sanatorium for incipient cases of tuberculosis of the respiratory organs at Glen Gardner, N. J. The secretary of the board of managers of the sanatorium states that the institution is for the care of indigent people only, that it will accommodate about 105 patients, and will probably be open for the reception of patients in the spring of 1907.

New Mexico.—A special law was approved March 18, 1901, providing for the protection of children and other attendants of public schools or other educational institutions in the Territory of New Mexico. Under this law a person suffering with consumption shall not be employed as a teacher, instructor, or professor in any public school or educational institution supported by the public. It also requires that an applicant for such positions shall file with the board of education or other governing educational body a certificate from a regular physician declaring the applicant free from tuberculosis.

Any taxpayer of the Territory may present a complaint to the school authorities in case he suspects that any teacher or professor is afflicted with tuberculosis. Upon such complaint the latter shall be required to submit to an examination and file certificate from a physician stating that he is not afflicted with tuberculosis. In case he is suffering from the disease, he shall be discharged from employment.

New York.—The first official action by the State looking to the prevention of tuberculosis was taken in 1892-93 and consisted of an effort to secure a State sanatorium. The commissioner of health states that the State has not taken any decided action for the prevention of the disease, but local boards of health have the power, under provisions of section 21 of the public-health law, to "make and publish from time to time all such orders and regulations as they may deem necessary and proper for the preservation of life and health."

One of the sanitary regulations recommended by the State department of health for adoption by local boards of health is as follows:

Spitting upon the sidewalk or cross walk of any public street, avenue, park, public square or place, in the village of ———, or upon the floor of any hall in any tenement house which is used in common by the tenants thereof, or upon the floor of any hall or office in any hotel or lodging house which is used in common by the guests thereof, or upon the floor of any theatre, schoolhouse, church, store, factory, or of any building which is used in common by the public, or upon the floor of any railroad car or other public conveyance, or upon the floor of any depot or station, or upon the station platform of any railroad or other common carrier, is hereby forbidden.

The corporations or persons owning or having the management or control of any such building, store, factory, railroad car or other public conveyance, or at any depot or station, station platform or other common carriers, are hereby required to keep permanently posted in each of said places a sufficient number of notices forbidding spitting upon the floors and calling attention to the provisions of this section.

The corporations or persons owning or having the management or control of such buildings, stores, factories, depots, stations, station platforms or other common carriers are hereby required to provide sufficient and proper receptacles for expectoration, and also to provide for the cleansing and disinfection of said receptacles at least once every twenty-four hours.

Any violation of any of the provisions of this ordinance shall subject the offending party to a penalty of ———.

Notification of the disease is required, section 24 of the public-health law requiring local boards of health to report promptly to the State health department all infectious diseases. Vital statistics are also collected and published in the monthly bulletin of the State department of health. In this connection, it may be stated that the health department of the city of New York was among the first to enforce notification of the disease. This municipality has a large sanatorium in course of construction, and also provides for the care and treatment of tuberculosis among children.

The State maintains a sanatorium for the treatment of incipient tuberculosis at Raybrook, N. Y. Special wards for the care of tuberculous patients are maintained at the State Hospital for the Insane, Binghamton; Buffalo State Hospital, Buffalo; Dannemora State Hospital, Dannemora; Manhattan State Hospital, Wards Island, and Willard State Hospital, Willard, N. Y.

North Carolina.—The State board of health collects vital statistics of tuberculosis from a number of cities and towns in the State. While there is no law requiring notification of the disease, an ordinance in Raleigh makes notification compulsory in that city. The law passed by the general assembly of North Carolina and ratified March 4, 1905, providing for a State laboratory of hygiene, makes the laboratory available for the examination of sputum in cases of suspected tuberculosis.

North Dakota.—The State board of health collects vital statistics of tuberculosis in the same manner as for all other diseases. The board also requests that all cases be reported by physicians and it has issued a circular entitled "Tuberculosis, Its Prevention and Treatment," for distribution to school teachers, township clerks, and physicians.

Ohio.—The first public action was taken by the State board of health when, in 1894, it sent out a circular letter to all of the physicians in

the State requesting certain information and offering to furnish printed instructions for the prevention of tuberculosis to be used by attending physicians in the homes of their cases.

Some interesting information was collected regarding the communicability of the disease (an account of which appears in the annual report of the Ohio State board of health for 1894), and a circular of instructions was prepared and widely distributed throughout the State.

Through the influence of the State board of health a meeting was called to organize a State society for the study and prevention of the disease. A State tuberculosis commission has purchased a site of 357 acres near Mount Vernon, Ohio, for a State sanatorium, and plans have been adopted for part of the buildings. It is expected that building operations will be immediately undertaken.

The State has taken no other action as regards legislative enactments except to authorize any local board of health to require that milk shall not be sold within its jurisdiction except from cows shown to be free from tuberculosis or other contagious diseases.

The legislature of 1904 appointed a commission to select a site for an institution for the treatment and education of crippled children. The secretary of the State board of health states that it is desired that this institution be located and built with special reference to tubercular joint diseases.

The State board of health collects monthly reports from local boards of health in all cities in the State, giving the number of deaths from various diseases, including tuberculosis. Compulsory notification of the disease was adopted in Cincinnati and Columbus, but was never successfully enforced.

Oregon.—The State board of health collects vital statistics of tuberculosis in connection with the collection of general statistics. Notification of the disease is compulsory, but the State health officer remarks that the reports have been incomplete. The board has issued a bulletin bearing on the subject of tuberculosis.

Pennsylvania.—The beginning of the movement for the prevention of tuberculosis in America was inaugurated in Pennsylvania through the effort of private individuals, the Pennsylvania Society for the Prevention of Tuberculosis being the oldest society of its kind in the world.

Efforts were repeatedly made to secure the enactment of a law providing for a State sanatorium, but they were not effective. The department of health of the State has issued a circular containing rules to be observed by patients, nurses, and attendants in the management of tuberculosis.

Notification of cases is required and vital statistics of the disease are collected by the State health department. Though there are no sanatoria under the control of the State, yet numerous sanatoria and dispensaries have been established through the efforts of the Pennsylvania Society for the Prevention of Tuberculosis.

Porto Rico.—The bureau of health has up to the present time directed its efforts toward the solution of general sanitary problems. These problems have included the pure-food question, the installation of water-closets in the larger cities of the island, and education of the people in sanitary matters, particularly with reference to the prevention of uncinariasis. Such measures, though of great importance, have only an indirect bearing on the prevention of tuberculosis.

An antituberculosis league was legally constituted in 1906. Officials and all persons interested in sanitary matters are enlisted in the work, which has been actively carried on for some months. It is the intention of the league to establish a central sanatorium at San Juan and several substations in other parts of the island; a plan similar to that adopted by the Porto Rico anemia commission for the prevention of uncinariasis.

A campaign for the education of sufferers and other persons as to the nature of tuberculosis will be instituted.

Rhode Island.—The first official action in the State for the prevention of tuberculosis was taken by the State board of health in 1894, and consisted in the examination of sputum for physicians. It is believed that Rhode Island was the first State to undertake such examinations. New York City had, however, begun the same work about one month previous to that time.

The State has also provided a sanatorium of 110 beds at Wallum Lake, in the northwestern part of the State, for incipient cases.

The State board of health has taken action to provide a tuberculosis exhibit in the city of Providence in connection with the collection of the National Association for the Study and Prevention of Tuberculosis. This board also regularly collects vital statistics of the disease and maintains records of the laboratory examination of sputum. The latter records are complete from 1900.

A number of local ordinances have been passed controlling promiscuous expectoration, and tuberculosis has been placed on the list of notifiable diseases in the city of Providence.

South Dakota.—The State board of health collects vital statistics of the disease, this being the only official action taken other than the general improvement of sanitary conditions within the State.

The United States Congress at its last session provided for an investigation of the disease among the Sioux Indians, with the view of establishing a sanatorium for their care and treatment.

Tennessee.—The State board of health has included tuberculosis among the transmissible diseases. Efforts have been made to segregate as well as possible cases occurring in the State institutions. A circular of information is now in course of preparation and will shortly be ready for distribution. Local ordinances in Nashville and Memphis require notification of cases occurring in those cities.

Utah.—The movement for the prevention of tuberculosis began in 1903. The State legislature passed a law, which was approved March 9, 1905, requiring reports to be made on cases of tuberculosis and the necessary disinfection to prevent the spread of the disease.

The State board of health makes free examinations of sputum submitted by any physician in the State, and sends to the families of all cases reported a circular, giving instructions regarding the prevention of the disease.

A monthly report of cases and deaths is made by the local boards of health to the State board in accordance with the law under which vital statistics are collected.

Vermont.—The movement was begun in Vermont in 1902. During that year the general assembly of the State passed an act requiring physicians to notify the State board of health of the existence of all cases of human tuberculosis. This law also requires the secretary of the State board of health to keep a careful and accurate record of

reported cases of tuberculosis and to furnish such patients with a printed circular containing information in regard to the disposal of sputum and other hygienic measures necessary for the protection of the community.

The general assembly of the State in 1902 also passed an act to prevent spitting upon the floor in cars and railway stations.

The State board of health is authorized by law to make bacteriological examinations of cases of tuberculosis, and it collects vital statistics of the disease.

The secretary of the State board of health states that the Vermont sanatorium is now in process of construction at Pittsford. A ward for tuberculous patients of the Vermont State Hospital for the Insane is maintained at Waterbury.

Wisconsin.—The official movement for the prevention of tuberculosis in Wisconsin began in 1903. The legislature of that year passed a joint resolution providing for a commission to investigate the subject of tuberculosis in the State. A report of that commission was made in 1905.

The legislature of 1905 passed a bill for the erection of a State tuberculosis sanatorium and providing for its maintenance. Under the provisions of this bill a State tuberculosis commission has been created, consisting of 5 members who have direct charge of the establishment of the institution.

The State sanatorium will be located on a site known as the Government Hill Reservation, at Wales, about 30 miles west of Milwaukee and near the center of population of the State.

The State has taken official action in causing the disease to be reported in cities of the first, second, third, and fourth classes.

The secretary of the State board of health states that the board has recently issued an order requiring that the disease be reported in all cities, towns, and villages.

The board has a State tuberculosis exhibit which is taken from city to city as organization plan, and is used for purposes of instruction in connection with talks on tuberculosis.

At the annual conference of State and Territorial health officers with the Public Health and Marine-Hospital Service it was stated that the State board of health had issued an order that pupils and teachers suffering from pulmonary tuberculosis should not be granted attendance in the schools of the State unless they carried a sputum cup and conformed strictly with the general rules for preventing the spread of this disease.

**STATES AND TERRITORIES THAT HAVE ISSUED EDUCATIONAL CIRCULARS AND THAT
HAVE LAWS OR REGULATIONS RELATING TO THE COLLECTION OF STATISTICS.**

States and Territories having issued circulars.	States requiring notification.	States requiring collection of statistics.
Colorado. District of Columbia. Florida. Hawaii. Illinois. Indiana. Georgia. Iowa. Kansas. Maine. Massachusetts. Michigan. Minnesota. New Hampshire. New Jersey. New York. North Dakota. Ohio. Pennsylvania. Oregon. Tennessee. Utah. Vermont. Wisconsin.	California. Connecticut. Hawaii. Indiana. Iowa. Kansas. Maine. Maryland. Michigan. Minnesota. New Jersey. New York. Pennsylvania. Utah. Vermont. Wisconsin. Oregon. Washington.	California. Connecticut. Delaware. District of Columbia. Hawaii. Illinois. Indiana. Iowa. Kansas. Maine. Maryland. Massachusetts. Michigan. Minnesota. New Hampshire. New Jersey. New York. North Dakota. Ohio. Oregon. Pennsylvania. Rhode Island. South Dakota. Utah. Vermont. Wisconsin.

FEDERAL AND STATE SANATORIA.

- California:**
 Mendocino State hospital for insane, separate tuberculosis ward, Talmage.
- Connecticut:**
 Separate wards for tuberculous prisoners, Westerfield.
 State hospital for consumptives, Hartford.
- District of Columbia:**
 Washington Asylum Hospital, separate tuberculosis ward.
 Tuberculosis division, Government Hospital for Insane.
 Appropriation for tuberculosis sanatorium.
- Delaware:**
 Tuberculosis division, State hospital for insane, Farnhurst.
- Florida:**
 Tuberculosis camp, naval hospital, Pensacola (U. S. Navy).
- Indiana:**
 Tuberculosis ward for prisoners, State reformatory, Indianapolis.
- Kentucky:**
 Tuberculosis ward, State prison hospital, Frankfort.
- Louisiana:**
 Separate ward, State hospital for insane, Jackson.
- Maine:**
 Appropriation for Maine State sanatorium, Hebron.
- Maryland:**
 Appropriation for State sanatorium.
 Tuberculosis ward, State hospital for insane, Sykesville.
- Massachusetts:**
 Massachusetts State sanatorium, Rutland.
 Massachusetts State colony for consumptive prisoners, Rutland.
 State hospital, Tewkesbury.
 State insane hospitals, special provisions for tuberculous patients.
- Michigan:**
 State sanatorium, Howell, in course of construction.
- Minnesota:**
 State sanatorium for consumptives, Walker.
 Special ward for tuberculous prisoners, State prison, Stillwater.
- Mississippi:**
 Special ward, hospital for insane, Jackson.
- Missouri:**
 Sanatorium for incipient tuberculosis in course of construction, Mount Vernon.

New Hampshire:

Appropriation for State sanatorium to take effect May, 1907.

New Jersey:

State sanatorium, Glen Gardner.

New Mexico:

Sanatorium for Consumptive Seamen, U. S. Public Health and Marine-Hospital Service, Fort Stanton.

U. S. Army General Hospital, Fort Bayard.

New York:

State hospital for insane, special ward for tuberculosis, Binghamton.

Buffalo State Hospital, tuberculosis ward, Buffalo.

State Hospital for Incipient Tuberculosis, Raybrook.

Special wards for tuberculous prisoners, Clinton Prison, at the Dannemora State Hospital, Dannemora.

Manhattan State Hospital, special tuberculosis wards, Wards Island.

Willard State Hospital, special wards for tuberculosis, Willard.

Ohio:

Tuberculosis camp, Columbus State Hospital, Columbus.

Appropriation for State sanatorium, Mount Vernon.

Rhode Island:

State sanatorium, Pascoag.

Tuberculosis division, State almshouse, Howard.

Tuberculosis division, State hospital for insane, Howard.

South Carolina:

Separate building for tuberculous prisoners, State penitentiary, Columbia.

Vermont:

Ward for tuberculous patients, Vermont State Hospital for Insane, Waterbury.

Vermont sanatorium, in process of construction, Pittsford.

Virginia:

Camp for tuberculous patients, central State hospital, Petersburg.

Wisconsin:

Appropriation for State tuberculosis sanatorium, Wales.

STATE COMMISSIONS.

The legislatures in a number of the States have, within the past five years, provided for the creation of State commissions for the purpose of making an investigation as to the extent of tuberculosis within the State and the best means of prevention and treatment, especially with reference to the establishment of sanatoria. The following is a list of these States: Indiana, Maryland, Massachusetts, Minnesota, New Hampshire, New Jersey, Ohio, Rhode Island, Vermont, and Wisconsin.

By provisions of chapter 162, of the laws of the thirtieth general assembly, the board of control of State institutions in the State of Iowa was also authorized to investigate the extent of tuberculosis in that State and the best means of prevention and treatment of the disease.

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

Report from Boston, Mass.—Scarlet fever.

Surgeon Woodward forwards, under date of February 13, the following information received February 12, from the health officer at Boston:

Month of January, 1907. Number of cases of scarlet fever reported, 519; deaths, 3. From January 1 to 8, inclusive, the number of cases reported was 48, the largest number reported on one day being 9. On January 9 the number rose to 37. On January 10 it reached 78, and on the two days following was 64 and 54, respectively. This sudden increase in the number of cases on January 9 occurred in several neighboring cities. The cause of the increase has not yet been determined.

Report from Pittsburg, Pa.—Enteric fever—Water supply.

Surgeon Smith reports, February 14, as follows:

Enteric fever has prevailed in this city to a considerable extent for a number of years and has recently increased to such a degree as to excite special attention. It reached a maximum in April, 1906, but it has continued throughout the year and up to the present time without any cessation and with even an apparent increase over the corresponding periods in the preceding year.

COMPARATIVE TABLE.

	Cases.	Deaths.
Year 1905	2,760	306
Year 1906	5,570	379
December, 1905	380	47
December, 1906	556	36
January, 1906	315	39
January, 1907	645	34

The health bureau is actively engaged in investigating the cause of the disease and considering measures for its prevention.

Water supply.—The first 25 wards of the city, which include the chief part of the population between the rivers, have a water supply drawn directly from the Allegheny River just above the city limit. This water is allowed a short time for sedimentation in reservoirs, but is not otherwise purified. It is in this population that the prevalence of enteric fever is greatest. The south side—that is to say, the part of the city lying south of the Monongahela River—is served by a private water company, drawing its supply from the Monongahela River a little above the city and delivering it without filtration. The fever prevails there, but not so severely as between the rivers. One ward at the southern limit of the city receives filtered water from a private company, and that ward is almost free from enteric fever. Two broad but less thickly populated wards on the eastern limits of the city between the rivers receive their supply from a private company which has a method of filtering the water taken from the Allegheny River, and conditions there are not bad, though cases of fever are reported.

Besides infection from unpurified river water, other causes probably assist in the spread of the disease in less degree. These are open privy vaults, which still exist in the crowded portions of the city, and infection by personal contact where people live closely crowded. Instances have been discovered where another person was sleeping in the same bed with a patient sick with enteric fever.

The city of Pittsburg is now engaged in building a modern filtration plant and system of waterworks at Aspinwall, which will take water from the Allegheny River and after filtration deliver it to the entire city. This work has been in progress for more than two years and it is expected the plant will be finished in another year. Meanwhile the bureau of health is doing all in its power to suppress the danger by warning the people not to use the river water for drinking without previously boiling or otherwise purifying it, and by enforcing such a rule upon hotels, restaurants, office buildings, and other establishments which serve the public. Notices are to be seen in all the street cars

which read, "Warning! Avoid typhoid fever by boiling all drinking water. Bureau of Health," and circulars containing the same warning, printed in three languages, have been distributed by means of the school children and others.

I have not included in this report the city of Allegheny, which is still separate from Pittsburg and has its own health department. I am informed that the same state of things exists there, both as to the prevalence of the disease and its causes, but that the number of reported cases is not relatively so great. It is proposed to unite Allegheny to Pittsburg, and if this is done the former city will come under the common city government in health as in other matters.

STATISTICAL REPORTS OF MORBIDITY AND MORTALITY, STATES AND CITIES OF THE UNITED STATES—UNTABULATED.

CALIFORNIA—*Los Angeles*.—Month of January, 1907. Estimated population, 250,000. Total number of deaths reported, 378, including enteric fever 4, scarlet fever 1, whooping cough 1, and 88 from tuberculosis. Cases of contagious diseases reported: Diphtheria 36, enteric fever 11, scarlet fever 19, and tuberculosis 36.

Stockton.—Month of January, 1907. Estimated population, 23,000. Total number of deaths, 38, including 4 from tuberculosis. No cases of contagious diseases were reported during month.

COLORADO.—Month of November, 1906. Estimated population, 634,066. Reports to the State board of health show as follows: Diphtheria, 54 cases, 7 deaths; enteric fever, 323 cases, 52 deaths; scarlet fever, 195 cases, 7 deaths; smallpox, 36 cases, no deaths. Total number of deaths from all causes, 809.

Month of December, 1906. Diphtheria, 37 cases, 7 deaths; enteric fever, 111 cases, 27 deaths; scarlet fever, 217 cases, 14 deaths; smallpox, 41 cases, no deaths. Total number of deaths from all causes, 918.

CONNECTICUT.—Month of January, 1907. Reports to the State board of health from 160 towns, having an aggregate population of 994,819, show as follows: Total number of deaths from all causes, 1,679, including diphtheria 25, enteric fever 14, measles 5, scarlet fever 7, whooping cough 19, and 153 from phthisis pulmonalis. Cases of contagious diseases were reported as follows: Diphtheria, 185 in 37 towns; enteric fever, 41 in 18 towns; measles, 219 in 38 towns; scarlet fever, 193 in 40 towns; smallpox, 1 case in *Stamford*; whooping cough, 145 in 23 towns, and phthisis pulmonalis, 47 in 17 towns.

Hartford.—Month of January, 1907. Estimated population, 95,000. Health department reports as follows: Total number of deaths, 163 (24 nonresidents), including enteric fever 4, measles 2, scarlet fever 2, whooping cough 2, diphtheria 2, and 19 from tuberculosis. Cases of contagious diseases reported: Enteric fever 10, diphtheria 48, measles 10, scarlet fever 19, tuberculosis 8.

FLORIDA.—Reports to the State board of health for the week ended February 2, 1907, show as follows: Enteric fever—De Soto County

(*Arcadia*), 4 cases; Duval County (*Jacksonville*), 3 cases; Hillsboro County (*Tampa*), 2 cases; St. John County (*St. Augustine*), 1 case; Volusia County (*Daytona*), 1 case. Smallpox—Polk County (*Lakeland*), 6 cases. Tuberculosis—Citrus County (*Floral City*), 1 case; Hillsboro County (*Tampa* and *Port Tampa*), 4 cases; Orange County (*Sanford*), 1 case. Week ended February 9, 1907: Diphtheria—Dade County (*Miami*), 1 case; Duval County (*Jacksonville*), 1 case. Enteric fever—De Soto County (*Arcadia*), Duval County (*Jacksonville*), Hillsboro County (*Tampa*), each 4 cases; Brevard County (*Melbourne*), Leon County (*Tallahassee*), Marion County (*Citra*), each 1 case. Tuberculosis—Citrus County (*Floral City*), 2 cases; Dade County (*Delray*), 1 case; Duval County (*Jacksonville*), 1 case; Hillsboro County (*Tampa*), 4 cases; Suwanee County (*Welborn*), 1 case.

ILLINOIS—*Quincy*.—Month of January, 1907. Estimated population, 43,000. Total number of deaths, 44, including whooping cough 1 and 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 4, enteric fever 2, scarlet fever 2, and whooping cough 1.

INDIANA.—Month of December, 1906. Estimated population, 2,648,549. Total number of deaths, 2,956, corresponding to an annual death rate of 13.1 per 1,000 of population, includes 67 from diphtheria, 79 from enteric fever, 2 from measles, 5 from scarlet fever, smallpox 1, 10 from whooping cough, and 329 from tuberculosis.

Morbidity: Diphtheria, 343 cases in 50 counties; enteric fever, 674 cases in 50 counties; smallpox, 393 cases in 19 counties. In the same month last year 112 cases of smallpox were reported from 13 counties, with 1 death.

Anderson.—Month of January, 1907. Estimated population, 25,398. Total number of deaths, 23, including enteric fever 1 and 3 from tuberculosis. Cases of contagious diseases reported: Diphtheria 7, enteric fever 2, scarlet fever 2, and tuberculosis 4.

Evansville.—Month of January, 1907. Estimated population, 75,000. Total number of deaths, 74, including diphtheria 1, enteric fever 2, and 9 from tuberculosis. Cases of contagious diseases reported: Diphtheria 22, enteric fever 30, measles 4, scarlet fever 1, and phthisis pulmonalis 11.

IOWA—*Cedar Rapids*.—Month of January, 1907. Estimated population, 30,000. Total number of deaths, 35, including 3 from tuberculosis. Six cases of scarlet fever reported.

Keokuk.—Month of January, 1907. Estimated population, 16,000. Total number of deaths, 31, including 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 2, and scarlet fever 4.

Ottumwa.—Month of January, 1907. Estimated population, 23,000. Health department reports as follows: Total number of deaths, 25, including diphtheria 1, and 3 from tuberculosis. Cases of contagious diseases reported: Diphtheria 4, scarlet fever 2, whooping cough 14, and tuberculosis 5.

MASSACHUSETTS—*Newton*.—Month of January, 1907. Estimated population, 37,550. Total number of deaths, 46, including 2 from phthisis pulmonalis. Cases of contagious diseases reported: Diphtheria 17, enteric fever 1, measles 3, scarlet fever 10, and tuberculosis 5.

MINNESOTA—*Winona*.—Month of January, 1907. Estimated population, 23,000. Total number of deaths reported, 19, including 3 from tuberculosis.

MONTANA—*Helena*.—Month of January, 1907. Estimated population, 21,000. Total number of deaths not reported. No deaths from contagious diseases. Contagious diseases reported: Diphtheria 4, measles 1, and smallpox 1.

NEW JERSEY.—Reports to the State board of health for the month of January, 1907, show a total of 3,289 deaths, including diphtheria 80, enteric fever 45, malarial fever 3, measles 4, scarlet fever 11, whooping cough 46, and 360 from tuberculosis. Cases of contagious diseases not reported. The number of deaths reported shows an increase of 1,019 over the number for the previous month.

By ages, there were 486 deaths among infants under 1 year, 202 deaths of children over 1 year and under 5 years and 770 deaths of persons aged 60 years and over. Compared with the preceding month the reports show an increase of 59 deaths from pulmonary tuberculosis; pneumonia shows an increase of 105, and other diseases of the respiratory system show an increase of 64. These figures are not unusual for this period of the year, and indicate the unfavorable influence of certain seasonal conditions on the affections included in this group.

The number of deaths from enteric fever (45) shows a slight diminution compared with the 2 previous months (December, 47, and November, 53). The mortality from scarlet fever (11) is but slightly greater than the average (9.33) for the 6 preceding months.

Diphtheria caused 80 deaths, while the average for the previous 6 months was only 45.33.

NEW YORK.—Month of December, 1906. Estimated population, 8,198,500. Reports to the State department of health show as follows: Total number of deaths, 12,075, corresponding to an annual death rate of 17.7 per 1,000 of the population, includes enteric fever 136, measles 48, scarlet fever 63, whooping cough 63, diphtheria 269, and 1,179 from phthisis pulmonalis.

Saratoga Springs.—Month of January, 1907. Estimated population, 11,822. Total number of deaths, 23. No deaths from contagious diseases. Cases of contagious diseases reported: Enteric fever 2, whooping cough 50, and tuberculosis 3.

NORTH CAROLINA.—Month of December, 1906. Estimated population, 1,893,810. Reports to State board of health from 74 counties show as follows: Measles in 13 counties, whooping cough in 13 coun-

ties, scarlet fever in 9 counties, diphtheria in 25 counties, enteric fever in 30 counties, malarial fever in 6 counties, pernicious malarial fever in 1 county, hemorrhagic malarial fever in 2 counties, and smallpox in 9 counties, viz: Alamance 1, Bertie 1, Currituck 2, Durham 3, Franklin 3, Guilford 9, Johnston 5, Richmond 5, and Wake 68 cases.

Reports for the month from 20 towns having an aggregate population of 192,600—white, 115,750; colored, 76,850—show a total of 255 deaths—white, 121; colored, 134—including enteric fever 9, and 30 from phthisis pulmonalis.

OHIO—*East Liverpool*.—Month of January, 1907. Estimated population, 20,000. Total number of deaths, 33, including diphtheria 1, and 1 from enteric fever. Cases of contagious diseases reported: Diphtheria 4, enteric fever 11, and scarlet fever 3.

Zanesville.—Month of January, 1907. Estimated population, 26,000. Total number of deaths, 40, including enteric fever 3. Cases of contagious diseases reported: Diphtheria 5, and enteric fever 20.

PENNSYLVANIA—*Nanticoke*.—Nine days ended February 9, 1907. Estimated population, 18,000. Total number of deaths, 4. One case of enteric fever reported.

TENNESSEE—*Nashville*.—Month of January, 1907. Estimated population, 121,915 (white, 76,582; colored, 45,333). Total number of deaths, 162 (white, 77; colored, 85), including enteric fever 7 and 27 from tuberculosis. Cases of contagious diseases reported: Diphtheria 3, enteric fever 11, measles 3, scarlet fever 16, and phthisis pulmonalis 10.

UTAH—*Ogden*.—Month of January, 1907. Estimated population, 25,000. Total number of deaths, 17, including 1 from diphtheria. Cases of contagious diseases reported: Diphtheria 6, enteric fever 1, scarlet fever 1, and smallpox 3.

Salt Lake City.—Month of January, 1907. Estimated population, 75,000. Total deaths from all causes, 116, including diphtheria 1, enteric fever 2, and 2 from tuberculosis. Cases of contagious diseases reported: Diphtheria 16, enteric fever 3, measles 1, scarlet fever 7, and whooping cough 4.

WISCONSIN—*Milwaukee*.—Month of December, 1906. Estimated population, 345,000. Total number of deaths, 328, including diphtheria 9, enteric fever 12, scarlet fever 1, whooping cough 1, and 22 from tuberculosis. Cases of contagious diseases reported: Diphtheria 93, enteric fever 74, measles 14, scarlet fever 16, smallpox 113, and tuberculosis 46.

Smallpox in the United States as reported to the Surgeon-General, Public Health and Marine-Hospital Service, December 28, 1906, to February 22, 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:				
General.....	Dec. 1-31.....		1	
Los Angeles.....	Dec. 23-29.....	1		
San Francisco.....	Dec. 6-22.....	2		
Plumas County, Quincy included.	Dec. 1-15.....	10		
Total for State.....		13	1	
Colorado:				
Boulder County.....	Nov. 1-30.....	1		
Conejos County.....	Nov. 1-30.....	1		
Denver County, Denver.....	Dec. 1-31.....	7		
La Plata County.....	Dec. 1-31.....	1		
Las Animas County.....	Nov. 1-Dec. 31.....	45		
Logan County.....	Nov. 1-30.....	1		
Otero County.....	Nov. 1-Dec. 31.....	2		
Pueblo County.....	Nov. 1-Dec. 31.....	6		
Weid County.....	Dec. 1-31.....	13		
Total for State.....		77		
Connecticut:				
Manchester.....	Dec. 1-31.....	1		
Stamford.....	Jan. 1-31.....	1		
Total for State.....		2		
Delaware:				
Reedy Island Quarantine.....	Dec. 22-27.....	1		On ss. Oswestry from Huelva, Spain.
Total for State.....		1		
Florida:				
Marion County, Reddick.....	Jan. 20-26.....	6		
Polk County, Lakeland included.	Jan. 23-Feb. 16.....	19		
Total for State.....		25		
Georgia:				
Augusta.....	Dec. 26-Feb. 12.....	51		
Total for State.....		51		
Illinois:				
Abingdon.....	Nov. 10-16.....	1		
Chicago.....	Dec. 23-Feb. 16.....	5		
Danville.....	Dec. 21-27.....	1		Imported.
Galesburg.....	Dec. 16-Feb. 9.....	81		
Moline.....	Oct. 1-Nov. 9.....	3		
Peoria.....	Jan. 20-26.....	6		
Sandwich.....	Dec. 1-14.....	1		Present.
Victoria.....	Jan. 1-7.....			
Viola.....	Oct. 25-Dec. 25.....	5		
Total for State.....		103		
Indiana:				
Allen County.....	Dec. 1-31.....	1		
Benton County.....	Dec. 1-31.....	1		
Cass County.....	Dec. 1-31.....	2		
Clark County.....	Nov. 1-Dec. 31.....	2		
Daviess County.....	Nov. 1-Dec. 31.....	2		
Elkhart County, Elkhart included.	Dec. 1-31.....	2		
Fulton County.....	Nov. 1-Dec. 31.....	68		
Grant County.....	Nov. 1-Dec. 31.....	7		
Henry County.....	Nov. 1-30.....	1		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Indiana—Continued.				
Howard County.....	Dec. 1-31.....	2		
Jennings County.....	Nov. 1-30.....	1		
Jasper County.....	Dec. 1-31.....	2		
Jefferson County.....	Nov. 1-Dec. 31...	145		
Marion County, Indianapolis included.	Dec. 1-Feb. 10....	37	3	
Marshall County.....	Nov. 1-Dec. 31...	12		
Miami County.....	Nov. 1-Dec. 31...	122		
Pulaski County.....	Nov. 1-Dec. 31...	51		
Ripley County.....	Nov. 1-30.....	2		
Starke County.....	Nov. 1-Dec. 31...	22		
St. Joseph County, South Bend included.	Dec. 1-Feb. 9....	42		
Tippecanoe County, Lafayette included.	Jan. 15-Feb. 10...	9		
Vigo County, Terre Haute in- cluded.	Jan. 20-26.....	1		
Wabash County.....	Dec. 1-31.....	3		
Washington County.....	Dec. 1-31.....	8		
Total for State		545	3	
Iowa:				
Clinton.....	Jan. 23-Feb. 3...	1		
Ottumwa.....	Dec. 1-31.....	1		
Total for State		2		
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 in- cluded.	Nov. 1-Dec. 31...	9		
Shawnee County, Topeka in- cluded.	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		
Wyandotte County, Kansas City	Feb. 3-9.....	1		
Total for State		86		
Louisiana:				
New Orleans.....	Dec. 23-Feb. 9...	24		6 imported.
Shreveport.....	Dec. 23-29.....	2		
Total for State		26		
Maryland:				
Baltimore.....	Feb. 10-16.....	1		
Total for State		1		
Michigan:				
Ann Arbor.....	Jan. 13-26.....	2		
Detroit.....	Dec. 23-Feb. 9...	27		
Kalamazoo.....	Jan. 27-Feb. 2...	2		
Total for State		31		
Minnesota:				
Aitkin County.....	Jan. 8-14.....	1		
Becker County.....	Dec. 11-28.....	13		
Beltrami County.....	Dec. 18-21.....	10		
Carver County.....	Jan. 1-7.....	1		
Cass County.....	Dec. 11-Jan. 21...	39		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Minnesota—Continued.				
Chippewa County	Jan. 1-7	1		
Chisago County	Jan. 15-21	1		
Clay County	Dec. 18-21	5		
Dakota County	Jan. 8-14	1		
Goodhue County	Dec. 18-24	2		
Grant County	Dec. 25-Jan. 14	2		
Hennepin County, Minneapolis included.	Dec. 11-Jan. 28	70		
Hubbard County	Dec. 11-Jan. 7	13		
Isanti County	do	2		
Itasca County	Dec. 11-Jan. 21	7		
Kittson County	Jan. 15-21	1		
Lac qui Parle County	do	1		
Lake County	Dec. 11-Jan. 14	6	1	
Lesueur County	Jan. 15-28	5		
Mower County	Jan. 22-28	1		
Ottertail County	Jan. 15-21	9		
Polk County	Dec. 11-Jan. 28	3		
Pope County	Dec. 11-31	3		
Ramsey County, St. Paul included.	Dec. 11-Jan. 21	16		
Rock County	Jan. 8-14	1		
St. Louis County, Duluth included.	Dec. 1-Jan. 28	28		
Scott County	Jan. 22-28	3		
Stearns County	Dec. 11-17	1		
Swift County	Dec. 18-31	2		
Todd County	Dec. 18-Jan. 28	8		
Wadena County	Dec. 17-Jan. 14	6		
Waseca County	Dec. 24-31	2		
Washington County	Jan. 1-28	12		
Wilkin County	Dec. 11-17	1		
Total for State		277	1	
Mississippi:				
Natchez	Jan. 20-26	3		
Total for State		3		
Missouri:				
St. Joseph	Dec. 16-Feb. 9	100	1	
St. Louis	Jan. 13-Feb. 11	5		
Total for State		105	1	
Montana:				
Chouteau County	Dec. 1-31	5		
Dawson County	Dec. 1-31	2		
Lewis and Clarke County, Helena included.	Jan. 1-31	1		
Total for State		8		
New York:				
New York	Dec. 16-Feb. 9	20	1	
Total for State		20	1	
North Carolina:				
Alamance County	Nov. 1-Dec. 31	9		
Ashe County	Nov. 1-30	10		
Bertie County	Dec. 1-31	4		
Currituck County	Dec. 1-31	2		
Durham County	Dec. 1-31	3		
Franklin County	Dec. 1-31	3		
Guilford County, Greensboro included.	Nov. 1-Jan. 19	10		
Johnston County	Dec. 1-31	5		
Mecklenburg County, Charlotte included.	Feb. 10-16	1		
Person County	Nov. 1-30	1		
Randolph County	Nov. 1-30	21		
Richmond County	Dec. 1-31	5		
Wake County	Nov. 1-Dec. 31	108		
Total for State		179		
Ohio:				
Cincinnati	Jan. 12-Feb. 15	5		
Toledo	Dec. 16-22	1		
Total for State		6		

Smallpox in the United States, etc.—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Pennsylvania:				
Wells	Sept. 1-Jan. 1	22		First case imported from North Dakota Feb. 12; 1 case in quarantine.
Total for State		22		
South Dakota:				
Sioux Falls	Jan. 27-Feb. 2	2		
Total for State		2		
Texas:				
Houston	Dec. 30-Feb. 2	16		
Total for State		16		
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		
Weber County, Ogden included	Jan. 1-31	3		
Total for State		126		
Virginia:				
Amelia County	Dec. 1-31	14		
Dinwiddie County	Dec. 1-31	4		
Goochland County	Dec. 1-31	1		
Hanover County, Atlee and Ellerson included	Dec. 1-Jan. 31	35		
Lee County	Dec. 1-31	3		
Louisa County, Fredericks Hall included	Dec. 1-31	6		
Nansemond County	Dec. 1-31	1		
Nelson County	Dec. 1-31	4		
Norfolk County, Norfolk in- cluded	Jan. 1-17	1		
Nottoway County	Dec. 1-31	9		
Pittsylvania County	Dec. 1-31	6		
Powhatan County	Dec. 1-31	1		
Sussex County	Dec. 1-31			Epidemic.
Total for State		85		
Washington:				
Spokane	Dec. 16-Feb. 9	67		14 imported.
Total for State		67		
Wisconsin:				
Appleton	Dec. 27-Jan. 19	2		
La Crosse	Dec. 16-Feb. 9	5		
Milwaukee	Dec. 16-Feb. 9	45		
Total for State		52		
Grand total, United States		1,933	7	

FOREIGN AND INSULAR.

Current quarantine measures.

[From the Veröffentlichungen des Kaiserlichen Gesundheitsamtes, Berlin, January 23, 1907.]

PLAGUE.

RUSSIA.—January 11, 1907. The commission on measures against plague declared the city of Suez free from plague.

TURKEY.—January 11, 1907. Medical inspection at Ottoman ports ordered for arrivals from Smyrna.

DUTCH EAST INDIES.—December 14, 1906. Measures against Suez suspended.

SMALLPOX.

AUSTRIA.—January 5, 1907. Circular of the maritime police authorities at Trieste suspends measures against Durazzo, in Albania.

TYPHUS FEVER.

CANARY ISLANDS.—December 31, 1906. Strict quarantine exists in all ports of the islands against Santa Cruz de Teneriffe on account of epidemic prevailing there.

CHINA.

Reports from Hongkong—Quarantine restrictions—Summary, month of December, 1906—Smallpox—Rinderpest.

Passed Assistant Surgeon White reports as follows:

Weeks ended December 29, 1906, and January 5, 1907. Restrictions enforced by Hongkong remain as reported on December 1, 1906.

Restrictions enforced against Hongkong remain as reported on December 1, 1906.

No quarantinable diseases.

Precautions taken at Hongkong during the month of December, 1906, for the protection of the public health of the United States, the Insular Territory, and the Republic of Panama.

Vessels inspected and granted bills of health	37
Vessels fumigated to kill vermin	4
Examined for diseases contemplated in paragraphs 29 and 67 of the quarantine regulations:	
Personnel	2,996
Passengers	503
Required to bathe and undergo special examination:	
Personnel	2,287
Passengers	386
Examined for diseases contemplated by the laws controlling immigration:	
Aliens	378
Rejected	49

Baggage:

Inspected and labeled	10
Disinfected and labeled	1,829
Cargo stored (par. 22): Human hair, 45 boxes.	
Quarantinable diseases: Smallpox, 4 cases, 3 deaths.	

There have been several cases of rinderpest in the colony, but the disease was promptly checked and eradicated.

Emigrants recommended for rejection.

Number of emigrants per steamship *Siberia* recommended January 15, 1907, for rejection: For Honolulu, 5; for San Francisco, 10; in transit, 3.

Report from Shanghai—Inspection of vessels—Smallpox.

Temporary Acting Assistant Surgeon Mills reports, January 15, as follows:

Week ended January 12, 1907. One original bill of health and 3 supplemental bills issued to 4 steamships after inspection of vessels, with their crews, numbering 658; 100 steerage passengers were inspected and passed; 1 emigrant passed; no emigrants rejected; 19,181 pieces of freight viséed.

No reports of contagious diseases received from outports.

The report of the municipal health officer for the week ended January 13, 1907, shows 1 case of smallpox.

CUBA.

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

Acting Assistant Surgeon Marsillan reports, February 11, as follows:

Week ended February 9, 1907.

Vessels inspected and bills of health issued	7
Crews inspected	210
Vessels fumigated by Cuban authorities	3
Passengers	0
Immune certificates issued	0

All vessels in good sanitary condition, and no sickness among crews.

No quarantinable disease has entered this port during the week. Of 4 cases of leprosy previously existing in Cienfuegos, 2 were sent to the leprosy hospital at Santa Clara and 2 have disappeared from the city.

The general sanitary condition of the port and surrounding country during the week is fair.

Report from Habana—Inspection and fumigation of vessels—Dengue fever during January, 1907.

Passed Assistant Surgeon Von Ezdorf reports, February 12, as follows:

Week ended February 9, 1907.

Vessels inspected and bills of health issued	24
Vessels not inspected and bills of health issued	10
Crew of outgoing vessels inspected	1,069
Crew of outgoing vessels not inspected	442
Passengers of outgoing vessels inspected	1,030
Passengers of outgoing vessels not inspected	29
Vessels fumigated prior to sailing	8

No quarantinable disease was reported in Habana during the week. One case of dengue was reported during the month of January, 1907.

Reports from Matanzas—Inspection and precautionary quarantine of vessels—Summary, January, 1907.

Acting Assistant Surgeon Nuñez reports, February 5 and 11, as follows:

Week ended February 2, 1907. Four bills of health and 1 certificate of immunity were granted. The American schooner *S. M. Bird*, bound to Mobile direct, was fumigated when about to sail for her port of destination. She left with all well on board. The British steamship *Queen Olga*, originally from Tampico, Mexico, was held in precautionary quarantine by the Cuban authorities while at this harbor. No sickness developed on board up to the time of her inspection.

No quarantinable diseases were reported in the city or province during the week.

Transactions for the month of January, 1907.

Bills of health issued.....	21
Crew.....	858
Passengers.....	0
Sailing vessels fumigated	3
Health certificates issued	0

There were no transactions for the Canal Zone nor for the Republic of Panama.

No quarantinable diseases reported in this district during the month.

Week ended February 9, 1907. Bills of health issued to 7 vessels leaving this port for the United States. The Norwegian steamship *Otto Sverdrup*, originally from Buenos Aires, via Montevideo, Santos, Barbados, and Sagua la Grande, was held in precautionary detention in quarantine by the Cuban authorities while at this port. This vessel was disinfected on its arrival at Sagua and was also held there under observation, it leaving February 8 for New York direct, without any sickness on board. The Spanish steamship *Catalina* left this port February 7 with 27 immigrants in transit for New Orleans. They were taken on in Barcelona and other Spanish ports and were carefully inspected on leaving this harbor.

Report from Santiago—Inspection of vessels.

Acting Assistant Surgeon Wilson reports, February 4, as follows:

Week ended February 2, 1907. Bills of health were issued to 3 vessels bound for the United States. No vessel was fumigated. No quarantinable disease has been reported.

GERMANY.

Smallpox in Hamburg from 1899 to 1905.

[From the report of the medical authorities of the city of Hamburg.]

During the period from 1899 to 1905, 32 cases of smallpox, with 2 deaths, were reported in Hamburg. They were distributed as follows: In 1899, 9 cases; 1900, 4 cases, 1 death; 1901, 2 cases, 1 death; 1902,

2 cases; 1903, 12 cases; 1904, no cases; 1905, 3 cases. Of this number 10 were imported by maritime routes, 7 by immigrants. Thirteen cases originated in Hamburg. One case was imported otherwise than by immigration. During the year 1905 1 case was imported, March 31, on the British steamship *Mandingo* from Sierra Leone and 1 on December 7 on the British steamship *Isle of Iona* from Valencia.

GREAT BRITAIN.

Report from Birmingham—Mortality—Infectious diseases.

Consul Halstead reports, January 24, as follows:

During the quarter ended December 31, 1906, 2,152 deaths were registered as compared with 2,200 in the fourth quarter of 1905, 2,509 in 1904 and 2,479 in 1903. The mortality rate was 15.8 per 1,000, which is the lowest on record for the fourth quarter. During the corresponding period of 1905 the mortality rate was 16.3 per 1,000.

Phthisis pulmonalis and other tubercular diseases caused 220 deaths, which is 35 below the average.

The mortality rate from the seven principal zymotic diseases was 1.60 per 1,000, as compared with 1.70 in the fourth quarter of the preceding year. The mean rate for the preceding five years was 2.10 per thousand. No case of smallpox was reported during the quarter. Sixty deaths from measles were registered. This disease was, however, much more prevalent than is indicated by the mortality. Fourteen deaths of scarlet fever were reported. The cases were generally distributed throughout the city, and in the great majority of them, no definite connection with a previous case could be traced. The number of cases of diphtheria reported was 348 as compared with 196 in the third quarter, 124 in the second quarter, and 149 in the first quarter. The total number of deaths during the quarter from this disease was 26. Seventy-one cases of enteric fever, with 20 deaths, were reported.

In this connection it may be stated that the system of house sewerage and the removal of refuse has been greatly improved.

There were 220 deaths from tubercular diseases, as compared with a similar number in the fourth quarter of 1905, and with 250 and 269, respectively, in the corresponding periods in 1904 and 1903. The deaths from phthisis pulmonalis numbered 179, being 18 below the average of the previous ten years, while those from other forms of tubercular diseases number 41, or 17 below the average of the preceding ten years.

INDIA.

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

Acting Assistant Surgeon Eakins reports, January 17, as follows:

Week ended January 12, 1907. Bill of health issued to the steamship *Sagami* bound for Boston and New York with a total crew of 44; to the steamship *Steinberger* bound for Philadelphia and New York with a total crew of 46, and to the steamship *British Monarch* bound for Boston and New York with a total crew of 31. The usual precautions were taken, holds fumigated, rat guards on wharf lines, and Lascar's effects disinfected.

Week ended January 5, 1907. Seventy-six deaths from cholera, 10 deaths from plague, and 12 deaths from smallpox in Calcutta.

India, general, week ended January 5, 1907: 12,918 cases, and 10,363 deaths from plague.

ITALY.

Report from Naples^a—Inspection of vessels—Rejection of emigrants recommended.

Passed Assistant Surgeon McLaughlin reports, January 28, as follows:

Week ended January 26, 1907. Vessels inspected:

NAPLES.

Date.	Name of ship.	Destination.	Steerage passengers inspected and passed.	Pieces of large baggage inspected and passed.	Pieces of baggage disinfected.
Jan. 22	Sicilian Prince.....	New York.....	572	90	780
23	Antonio Lopez.....	do.....	314	30	480
23	Roma.....	do.....	275	50	550

Rejections recommended.

Date.	Name of ship.	Trachoma.	Favus.	Suspected trachoma.	Suspected favus.	Other causes.	Total.
Jan. 22	Sicilian Prince.....	11	1	14	.....	.....	26
23	Antonio Lopez.....	7	1	4	.....	2	14
23	Roma.....	8	.....	9	.....	.....	17
	Total.....	26	2	27	.....	2	57

JAPAN.

Report from Yokohama—Inspection of vessels—Summary for six months ended December 31, 1906—Smallpox—Plague in Japan.

Passed Assistant Surgeon Cumming reports, January 20, as follows:

Week ended January 19, 1907. Six vessels inspected with an aggregate personnel of 619 crew and 732 passengers.

During the six months ended December 31, 1906, bills of health were granted to 138 vessels having an aggregate of 3,670 cabin, 17,250 steerage, and 15,945 members of crews. Eleven vessels were fumigated by order of this office for the purpose of destroying rats and vermin, and 1 steamship was held for diagnosis of suspicious case.

During the same period 8,635 would-be emigrants to the United States or its possessions were examined with reference to their freedom from diseases contemplated by the United States immigration laws and regulations, of whom 4,672 were passed. All such passengers are bathed and their effects disinfected, and so labeled, as are shipments of human hair, feathers, etc., when necessary, and various other shipments are personally inspected when suspected.

^aFor November 30, 1906, in PUBLIC HEALTH REPORTS, February 15, 1907, campaign against malaria, read November 2.

For the six months ended December 31, 1906, the health office shows: Cases 6, deaths 2, of smallpox. For the same period reports for the whole country show 496 cases of bubonic plague, of which 389 died and 103 recovered, 6 cases being under treatment January 1, and 9 cases reported since that date. The decreased mortality percentage is attributed to the use of serum treatment.

Emigrants recommended for rejection.

Number of emigrants, per steamship *America Maru*, recommended January 19, 1906, for rejection: For San Francisco, 27.

Per steamship *Aki Maru*, January 23, 1907: For Seattle, 23.

Per steamship *Siberia*, January 25, 1907: For Honolulu or San Francisco, 27.

Report from Kobe—Emigrants recommended for rejection.

Acting Assistant Surgeon Fowler reports, January 9, as follows:

Month of December, 1906. December 1, steamship *Kusuho Maru*, 440 for Honolulu; December 7, steamship *Doric*, 118 for Honolulu; December 8, steamship *Tosa Maru*, 17 for Seattle; December 15, steamship *Coptic*, 128 for Honolulu; December 20, steamship *Chiusa Maru*, 281 for Honolulu; December 22, steamship *Shinano Maru*, 28 for Seattle; December 26, steamship *Hong Kong Maru*, 63 for Honolulu; December 26, steamship *Amiral Exelmans*, 289 for Honolulu. All rejections were for trachoma.

Report from Nagasaki—Emigrants recommended for rejection.

Sanitary Inspector Bowie reports as follows:

January 19, 1907. Number of emigrants rejected, 50.

MEXICO.

Report from Veracruz—Smallpox.

Acting Assistant Surgeon Frick reports, February 7, as follows:

On February 2 a fatal case of smallpox was officially reported at Veracruz.

PHILIPPINE ISLANDS.

Reports from Manila—Cholera in Manila and the provinces—Inspection of vessels—Improved health conditions.

Chief Quarantine Officer Heiser reports December 28, January 2, and 4 as follows:

Week ended December 22, 1906. No quarantinable diseases reported for the city of Manila.

During the same period cholera was reported from the provinces as follows:

Provinces.	Cases.	Deaths.
Capiz	15	6
Negros Occidental	4	4
Total	19	10

Vessels granted consular bills of health as follows:

On December 17 the American steamship *Pleiades*, with 57 crew, en route from Seattle to Iloilo, was granted a supplemental bill of health.

On December 18 the British steamship *Algoa*, with 65 crew, en route from Hongkong to San Francisco, was granted a supplemental bill of health after the usual inspection of persons and cargo.

On December 21 the Norwegian steamship *Mandal*, with 38 crew, was granted a bill of health to Iloilo, after the usual inspection.

On December 22 the British steamship *Indrasamha*, with 63 crew, en route from New York to Iloilo, was granted a supplemental bill of health.

Week ended December 29, 1906. No quarantinable diseases reported for the city of Manila.

Cholera reported from the provinces.

Provinces.	Cases.	Deaths.
Samar.....	7	3
Capiz.....	10	8
Negros Occidental.....	3	0
Total.....	20	11

United States consular bills of health issued as follows:

On December 24 the British steamship *Bellerophon*, with 85 crew, en route from Tacoma to Liverpool, was granted a consular bill of health for Cebu after the usual inspection.

On December 24 the British steamship *Afghan Prince*, with 53 crew and 4 passengers, en route from Kobe to Boston and New York via Cebu, was granted a supplemental bill of health after inspection of cargo and personnel.

On December 29 the British steamship *Saint Patrick*, with 37 crew, en route from Yokohama to New York, was granted a supplemental bill of health after the inspection of personnel and certification of 11,600 pieces of miscellaneous cargo.

Week ended January 5, 1907. No quarantinable diseases reported for the city of Manila.

In the provinces there were 21 cases and 12 deaths from cholera reported. Most of them occurred several weeks ago, but owing to the remoteness of the provinces they did not find their way into the official statistics until the week covered by this report. They occurred as follows:

Province.	Cases.	Deaths.	Date.
Rizal, (Malabon).....	1	1	Dec. 28.
Capiz.....	18	9	Dec. 9 to 25.
Negros Occidental.....	2	2	Dec. 26 to 28.
Total.....	21	12	

The conditions with regard to dangerous communicable diseases in Manila and the Philippines generally are regarded by the Bureau of Health as being more favorable than at any time during the past three

years, and it is deemed to be no longer necessary to issue a daily report of quarantinable diseases.

No vessels cleared for United States ports.

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

BRAZIL.—State of São Paulo, including the cities of *São Paulo*, *Santos*, and *Campinas*.—Week ended December 30, 1906. Estimated population, 286,000. Total number of deaths, 187, including whooping cough 2, enteric fever 2, measles 4, leprosy 2, and 17 from tuberculosis.

Pernambuco.—Two weeks ended December 31, 1906. Estimated population, 210,000. Total number of deaths, 278, including leprosy 1, plague 1, whooping cough 2, smallpox 48, and 39 from tuberculosis.

Rio de Janeiro.—Month of October, 1906. Estimated population, 912,900. Total number of deaths, 1,162, including diphtheria 2, enteric fever 6, bubonic plague 18, measles 1, whooping cough 5, beriberi 1, leprosy 1, yellow fever 3, and 268 from tuberculosis.

CUBA—*Cardenas*.—Months of November and December, 1906. Estimated population, 27,935. Total number of deaths, 114, including diphtheria 1, leprosy 1, and 18 from tuberculosis.

FRANCE—*St. Etienne*.—Two weeks ended January 15, 1907. Estimated population, 146,836. Total number of deaths, 198, including whooping cough 1, enteric fever 2, and 29 from tuberculosis.

GIBRALTAR.—Two weeks ended January 27, 1907. Estimated population, 27,385. Total number of deaths, 14. No deaths from contagious diseases reported.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 76 great towns in England and Wales during the week ended January 26, 1907, correspond to an annual rate of 18.2 per 1,000 of population, which is estimated at 16,024,458.

London.—One thousand six hundred and forty-seven deaths were registered during the week, including measles 17, scarlet fever 11, diphtheria 16, enteric fever 5, whooping cough 35, and 16 from diarrhea. The deaths from all causes correspond to an annual rate of 18 per 1,000. In Greater London 2,378 deaths were registered. In the "outer ring" the deaths included 4 from diphtheria, 1 from measles, 6 from whooping cough, and 2 from scarlet fever.

Ireland.—The average annual death rate represented by the deaths registered during the week ended January 26, 1907, in the 21 principal town districts of Ireland was 24.6 per 1,000 of the population, which is estimated at 1,117,547. The lowest rate was recorded in Armagh, viz, 6.9; and the highest in Kilkenny, viz, 44.2 per 1,000. In Dublin and suburbs 225 deaths were registered, including scarlet fever 1, enteric fever 1, whooping cough 6, and 41 from tuberculosis.

Scotland.—The deaths registered in 8 principal towns during the week ended January 26, 1907, correspond to an annual rate of 19.1 per 1,000 of the population, which is estimated at 1,812,171. The lowest rate of mortality was recorded in Leith, viz, 15.6, and the highest in Perth, viz, 26.9 per 1,000. The aggregate number of deaths registered from all causes was 662, including diphtheria 4, enteric fever 2, scarlet fever 7, typhus fever 1, measles 3, and 16 from whooping cough.

HAWAII.—Year ended June 30, 1906: *Hilo.*—Total number of deaths, 347, including bubonic plague 1, diphtheria 4, enteric fever 15, whooping cough 2, and 34 from tuberculosis.

Honolulu.—Population, 39,306. Total number of deaths, 880, including bubonic plague 22, diphtheria 6, enteric fever 25, and 134 from tuberculosis.

Island of Oahu (exclusive of Honolulu)—Total number of deaths, 281, including bubonic plague 2, diphtheria 1, enteric fever 12, whooping cough 3, and 34 from tuberculosis.

Island of Hawaii (exclusive of Hilo)—Total number of deaths, 518, including bubonic plague 3, diphtheria 9, enteric fever 35, measles 1, whooping cough 8, and 54 from tuberculosis.

Island of Kauai: Total number of deaths, 244, including diphtheria 3, enteric fever 8, and 25 from tuberculosis.

Islands of Maui, Molokai, and Lanai: Total number of deaths, 528, including diphtheria 1, enteric fever 13, and 57 from tuberculosis.

JAMAICA—Kingston.—Three weeks ended January 26, 1907. Estimated population, 52,065. Total number of deaths not reported. Two deaths from enteric fever reported.

MALTA.—Three weeks ended January 26, 1907. Estimated population, 205,059. Total number of deaths, 350, including diphtheria 6, enteric fever 1, and 1 from whooping cough.

ST. HELENA.—Five weeks ended January 12, 1907. Estimated population, 3,500. Total number of deaths, 3. No deaths from contagious diseases.

SWITZERLAND.—Week ended January 12, 1907. Reports from 18 cities, having an aggregate population of 867,056, show as follows: Total number of deaths, 326, including enteric fever 2, measles 21, whooping cough 1, and 37 from tuberculosis.

URUGUAY—Montevideo.—Month of November, 1906. Estimated population, 306,890. Total number of deaths, 430, including diphtheria 1, enteric fever 1, measles 16, scarlet fever 2, whooping cough 3, and 82 from tuberculosis.

WEST INDIES—Curaçao.—Two weeks ended February 1, 1907. Estimated population, 31,600. Total number of deaths, 18. No contagious diseases reported.

Cholera, yellow fever, plague, and smallpox from December 28, 1906, to February 22, 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 23, 1906.]

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

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
Ceylon:				
Colombo.....	Dec. 31-Jan. 5....	1	1	
India:				
Bombay.....	Nov. 28-Jan. 15....		35	
Calcutta.....	Nov. 11-Jan. 5....		704	
Cochin.....	Oct. 26-Dec. 21....		25	
Karachi.....	Nov. 2-Dec. 7....	11	13	
Madras.....	Nov. 17-30.....		4	
Negapatam.....	Oct. 27-Dec. 14....		12	
Rangoon.....	Nov. 25-Jan. 5....		158	
Philippine Islands:				
Manila.....	Nov. 18-Dec. 1....	3	2	
Provinces—				
Capiz.....	Nov. 25-Jan. 5....	120	77	
Iloilo.....	Nov. 18-Dec. 1....	82	63	
Moro, Camp Vicars....	Nov. 18-24.....	5	3	
Negros Occidental....	Nov. 18-Jan. 5....	39	26	
Pampanga.....	Nov. 18-24.....	2	1	
Rizal.....	Nov. 18-Jan. 5....	2	2	
Samar.....	Dec. 2-29.....	45	33	
Tarlac.....	Nov. 18-24.....	2	2	
Straits Settlements:				
Singapore.....	Jan. 1-Oct. 16....	185	167	

YELLOW FEVER.

Africa:				
Dahomey.....	Nov. 17.....			Present.
Upper Senegal and Niger.....	Nov. 1-30.....	35	26	
Togo.....	Nov. 17.....			Do.
Brazil:				
Para.....	July 1-Sept. 30....		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	
Mexico:				
Tuxpam.....	Jan. 23-29.....		1	
Veracruz.....	Feb. 8.....	1		Imported from Paraje Nueva.
Salvador.....	Jan. 12.....			Epidemic.

PLAGUE.

Arabia:				
Djeddah.....	Jan. 9-15.....	8	7	
Hedjaz.....	Jan. 17-19.....	5	3	
Argentina:				
Buenos Aires.....	Dec. 16-22.....	5	4	
Australia:				
Brisbane.....	Nov. 16-24.....	2	2	
Brazil:				
Bahia.....	Dec. 2-Jan. 12....	24	15	
Para.....	July 1-31.....		2	
Pernambuco.....	Nov. 1-Dec. 31....		4	
Rio de Janeiro.....	Nov. 12-Jan. 6....	105	41	
Santos.....	Jan. 10.....	1		On ss. Saxon Prince.
São Paulo.....	Nov. 12-Dec. 16....		6	
Chile:				
Antofagasta.....	Nov. 22-Dec. 15....	9	3	
China:				
Hongkong.....	Nov. 4-10.....	1	1	
Niuchwang.....	Jan. 28.....			Present.
Ecuador:				
Guayaquil.....	Nov. 16-Dec. 15....		46	

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

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Egypt:				
Alexandria	Nov. 13-Jan. 14...	15	8	
Ismailia	Jan. 6	1	1	
Port Said	Jan. 17	1	1	
Suez	Jan. 9-15	1	1	
Provinces—				
Assiout	Jan. 8-14	1	1	
Garbieh	Oct. 25-Dec. 2	4	3	
Guerga	July 2-Dec. 2	34	23	
Keueh	June 10-Jan. 14	53	49	
Menoufieh	Mar. 29-Jan. 6	14	10	
India:				
Bombay Presidency and Sind	Oct. 21-Nov. 24...	51,910	38,235	
Madras Presidency	Oct. 21-Nov. 24...	366	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	34,253	
Burma	Oct. 21-Nov. 24...	3,955	3,599	
Eastern Bengal and Assam	Oct. 21-Nov. 24...	30	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	
		131,693	105,110	
Japan:				
General	Jan. 1-19	9		July 1 to Dec. 31, 496 cases and 389 deaths.
Formosa—General	Nov. 1-30	100	64	
Saseho	Oct. 23	1		
Shiomonoseki	Sept. 22	1		
Yamaga	Oct. 6	1		
Mauritius	Nov. 4-Jan. 3	237	154	
Paraguay:				
Asuncion	Feb. 1-28	5		Present in northern part of Paraguay.
Concepcion	Jan. 5	3		
Peru:				
Callao	Dec. 31-Jan. 12	4	2	
Cutacaos	Nov. 9-Jan. 7	15	8	
Chicama	Dec. 5-11	14		In vicinity.
Chiclayo	Dec. 25-Jan. 7	6	3	
Lambayeque	Nov. 9-15		1	
Lima	Nov. 9-15	2	1	
Mollendo	Nov. 9-Dec. 31	26	20	
Pacasmayo	Dec. 13-31	4	3	
Paita	Nov. 13-Jan. 7	15	14	And vicinity.
San Pedro	Dec. 25-31	11	12	San Pedro and Pacasmayo, Jan. 1 to 7, reported 10 cases and 18 deaths.
Trujillo	Nov. 9-Jan. 7	88	86	And vicinity.
Siam:				
Bangkok	Nov. 21		1	
Turkey:				
Smyrna	Jan. 9		1	

SMALLPOX.

Africa:				
Cape Colony—				
Cape Town	Nov. 11-Dec. 22 ..	8		
Argentina:				
Buenos Aires	Dec. 2-Jan. 5	10	3	
Austria:				
Galiccia	Dec. 9-19	1		
Moravia	Nov. 4-10	1		
Brazil:				
Bahia	Dec. 2-Jan. 12	13		
Pernambuco	Nov. 1-Dec. 31		125	
Rio de Janeiro	Nov. 12-Jan. 6	20	1	

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

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Canada:				
New Brunswick—				
Kent County	Dec. 16–Feb. 2			Present.
Nova Scotia—				
Cape Breton Island—				
Sydney	Jan. 6–26			Do.
Colchester County	Nov. 16–Feb. 2			Do.
Truro	Feb. 3–9	2		Imported.
Cumberland County	Nov. 16–Feb. 2			Present.
Pictou County	Jan. 13–Feb. 2			Epidemic.
Victoria County	Feb. 3–9			Do.
Yarmouth County—				
Lower East Pubnico	Feb. 3–9	12	1	
Ontario—				
Toronto	Jan. 20–26	2		
Quebec—				
Sherbrooke	Feb. 3–9	4		
Chile:				
Antofagasta	Nov. 16–Dec. 15	34	2	
Coquimbo	Nov. 1–Dec. 13	70	5	
Iquique	Nov. 11–Dec. 29			Present.
China:				
Chefoo	Nov. 13		1	From U. S. S. Raleigh.
Hongkong	Dec. 16–22	4	3	
Shanghai	Nov. 27–Jan. 13	4	1	
Cuba:				
Habana	Jan. 6–30	4	1	One case from ss. Puerto Rico and 2 cases from ss. Dania, from Spanish ports. Death from ss. Kronprinzessin Cecilia from Veracruz.
Ecuador:				
Guayaquil	Dec. 1–31		27	
Egypt:				
General	July 2–Sept. 9	289	92	
France:				
Marseille	Dec. 1–31		88	
Paris	Dec. 2–Jan. 26	78	2	
Germany:				
Bleichfelde	Jan. 14			Present.
Gaudenz	Dec. 2–22	8		
Kanth	Dec. 9–15	1		
Marienwerder	Dec. 9–15	1		
Maxen	Dec. 2–8	1		
Metz	Nov. 18–Dec. 22	35		
Mülhausen	Dec. 2–22	15		
Schwedenhöhe	Jan. 14	4		
Thorn	Dec. 2–8	1		
Gibraltar	Dec. 17–Jan. 20	8		One case imported.
Great Britain:				
Belfast	Jan. 13–19	1		
Cardiff	Dec. 9–Feb. 2	10	1	In port.
Hull	Dec. 22–Jan. 26	17	5	
Liverpool	Jan. 13–Feb. 2	7		
Manchester	Dec. 16–22	1		
Sheffield	Jan. 1–7	1		
Southampton	Jan. 27–Feb. 2	1		
India:				
Bombay	Dec. 12–25		2	
Calcutta	Nov. 11–Jan. 5		45	
Madras	Nov. 24–Jan. 4		7	
Rangoon	Dec. 29–Jan. 5	1		
Italy:				
General	Nov. 23–Jan. 24	58		
Japan:				
General	July 1–Dec. 31	6	2	
Madeira:				
Funchal	Jan. 2	1		From ss. Massilia.
Malta:				
.....	Dec. 16–Jan. 5	2		
Mexico:				
Mexico	Dec. 9–15		12	
Tamaulipas	Jan. 18			Epidemic in vicinity of Mexican Central R. R.
Vera Cruz	Jan. 27–Feb. 2	1	1	
Netherlands:				
Rotterdam	Dec. 30–Feb. 2	19	3	
Persia:				
Anzeli	Nov. 1–30			Present.
Hamadan	Oct. 1–31			Do.
Kerman	Oct. 1–31			Do.
Kermanshah	Oct. 1–31			Do.
Meshed	Oct. 1–31			Do.

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

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Persia—Continued.				
Rasht	Nov. 1-30			Present.
Shiraz	Oct. 1-31			Do.
Teheran and vicinity	Oct. 1-31			Epidemic.
Yezd	Nov. 1-30			Do.
Peru:				
Callao	Dec. 23-29			Present.
Lima	Dec. 1-31	9		
Russia:				
Moscow	Dec. 11-Jan. 26	15	10	
Odessa	Dec. 2-Jan. 19	61	14	
St. Petersburg	Nov. 25-Jan. 12	33	9	
Spain:				
Barcelona	Dec. 1-Jan. 20		81	
Cadiz	Nov. 1-30		3	
Madrid	Oct. 1-31	1		
San Feliu de Guixols	Dec. 23-Jan. 5		2	
Seville	Nov. 1-Dec. 31		40	
Syria:				
Beirut	Dec. 2-29			Do.
Turkey:				
Constantinople	Dec. 3-Jan. 27		7	

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.
Antwerp	Jan. 19	304,975	81	4								1	1	1
Bahia	Jan. 5	265,000	78	10	2					11				
Do	Jan. 12	265,000	97	8	5					10				
Belfast	Jan. 26	870,163	162	32								1		3
Belize	Feb. 7	9,000	7											
Birmingham	Jan. 26	542,959	226							1	2	2	5	1
Bombay	Jan. 15	977,822	689	58	33	3				4			1	
Bradford	Jan. 5	290,323	112	6							1			1
Do	Jan. 12	290,323	104	14									1	
Do	Jan. 19	290,323	87	8										1
Do	Jan. 26	290,323	96	8						2				3
Bristol	do	367,979	125									2		
Buenos Aires	Dec. 29	1,074,000	46	1				2		2	3	1	4	2
Do	Jan. 5	1,074,000	39							8	1	2	2	3
Calcutta	do	847,796	585	23	10	76		12						
Cardiff	Jan. 26	187,620	49	2				1		1		1		3
Cartagena	Jan. 19	30,000	11	2										
Do	Jan. 26	30,000	13	1										
Catania	Jan. 24	160,000	123	2					1	5		3	2	
Cognac	Jan. 26	19,483	11											
Dublin	do	378,994	225	41						1	1			6
Edinburgh	do	345,747	146								3	1	2	
Funchal	Jan. 27	44,019	25	3										
Glasgow	Feb. 1	847,584	307							1	3		1	11
Halifax	Feb. 9	40,787	19											
Hamburg	Jan. 26	824,792	279	48								5	2	1
Hamilton, Bermuda	Jan. 29	20,206	4											
Do	Feb. 5	20,206	5											
Hull	Jan. 26	266,762	131					1				3	18	4
Jalapa	Feb. 1	22,000	11	2										
Leitn	Jan. 26	83,668	25	4						1	1			
Liege	Jan. 19	171,537	62	4									3	
Liverpool	Jan. 26	746,144	285						1	1	4	3	4	4
London	do	7,217,941	2,378							6	16	32	27	66
Mainz	do	91,124	32	5										
Managua	Jan. 12	21,015	18											
Do	Jan. 19	21,015	13											
Manchester	Jan. 26	631,533	236	18						2	5	4		8
Moscow	Jan. 12	1,173,427	733	88				1		3	16	5	11	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.
Munich	Jan. 19	560,000	193	25						1		4	2	1
Newcastle-on-Tyne	Jan. 12	264,511	127							1	1	6		
Do	Jan. 19	264,511	102							1	2	1	1	
Do	Jan. 26	264,511	107									1	3	1
Plymouth	do	116,000	42										3	1
Puerto Cabello	Dec. 1	14,000	12	2										
Do	Dec. 8	14,000	13	3										
Do	Dec. 15	14,000	13	3										
Do	Dec. 22	14,000	12	3										
Do	Dec. 29	14,000	12	2										
Rangoon	Jan. 5	252,155	207	11	18	22		1						
Rouen	Jan. 20	116,316	55	4					1			2		
Do	Jan. 27	116,316	88	17					2			1	1	
Sagua la Grande	Feb. 2	22,634	7	1										
St. Georges	Jan. 19	2,189	1											
Do	Jan. 26	2,189	1											
St. John, N. B.	Feb. 9	40,789	13	1										
St. Petersburg	Jan. 12	1,500,000	915	163				1	28	34	27	33	9	
St. Stephen, N. B.	Feb. 9	2,840	0											
Salford	Jan. 26	236,670	95	11							1	2	2	2
San Feliu de Guixols	do	11,094	6											
Santander	Jan. 27	53,574	44											
Southampton	Jan. 26	119,745	28	2						1				
South Shields	Jan. 19	113,460	54	7						2			2	1
Do	Jan. 26	113,460	53	3								1	4	2
Toronto	do	268,749	84	2								2		
Tuxpam	Jan. 29	13,000	10				1							
Veracruz	Feb. 2	32,000	24	5			1							
Windsor	Feb. 9	3,000	1											
Winnipeg	Feb. 2	101,000	32										1	1
Yokohama	Dec. 23	313,695											1	
Do	Dec. 30	313,695											3	
Do	Jan. 7	313,695											2	
Do	Jan. 14	313,695												

By authority of the Secretary of the Treasury:

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