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STATE SANITATION.¹

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State sanitation is so rapidly becoming a feature of our American Government, and the zest for health measures is becoming so great, that a consideration of certain fundamental principles by this conference of sanitary engineers should be not only appropriate but profitable. I therefore take the liberty of calling attention to some of the governmental principles which, though generally accepted, are often overlooked, and of expressing my personal opinion on certain matters of administration about which different views are held by different classes of people and in different parts of the country. What I have written is taken largely from a course of lectures on municipal engineering administration which I have given for several years at Harvard University.

Health and Comfort of the People.

By State sanitation is meant the efforts which State governments exert to prevent insanitary or uncleanly conditions of human environment which tend to impair the health or which are prejudicial to the comfort of the people. It is important, in the first place, to link these two terms together—the health and comfort of the people—for sanitation is concerned with them both. The two words are bound together in laws and legal decisions, as well as in common parlance. Nuisances are infringements against comfort as well as against health. Health, in its broadest sense, is something more than the absence of disease; it has a positive side. We measure health inversely in terms of sickness and death; we are beginning to attempt to measure health in terms of physical efficiency, capacity to work, and ability to enjoy life. The latter belong on the front side of the shield; sickness and death are for the back side. Both sides of the shield should be guarded.

Comfort has to do with the senses. Human discomfort is hard to measure, especially as people differ as to their sense reactions under

¹ Read at the Conference of State Sanitary Engineers, Boston, Mass., June 1, 1921.

different environments. These sense reactions are an important part of life; and the courts are sound when they decide that insanitary conditions are "prejudicial to health," even though the sense reaction may be merely that of a disagreeable odor. Bad odors from faulty plumbing or from badly ventilated rooms, bad odors in water supplies, bad odors from industrial plants, excessive noise, smoke in the atmosphere, oil deposits along the banks of streams and shores, and many other sense-offending conditions may be public nuisances and are properly included within the legal scope of "health and comfort of the people." I believe that sanitary engineers, who by their training are inclined to think in mathematical terms and have a penchant for measuring sanitation in terms of death rates, need particularly to be reminded of this aspect of sanitation.

Police Power and Public Benefit.

The police power is one of the inherent powers of government, that of protecting the people from dangers from within. Under it the Government may coerce the individual, take away his liberty, his property, and even his life, if necessary, in order to safeguard the safety, health, or morals of the people. Since the time of Magna Charta the English-speaking race has been preserved from tyrannous oppression, from undue exercise of the police power, by what is called "due process of law."

In the United States the police power originates in the State. It is exercised directly by the legislature, as representing the people. It may be delegated to some State department or official, to some city or city department, or to the National Government. Fundamentally, however, authority to act under the police power must be traced back to the State government.

Another function of government is that of doing for the people those things which the Government can do better, more cheaply, or more expeditiously than the people can do for themselves. These are acts for the public benefit, acts of public service, acts for the common good. They are paid for under the taxing power of government, another of its well-established functions. In recent years this idea of government has been greatly extended. Carried to the limit, it becomes paternalism or socialism. Many think it has been carried too far even in matters of health and comfort, and I am in sympathy with this view.

These two ideas of force and service represent the masculine and feminine elements of government. The best government results from a proper combination of the two. State boards of health, or departments of health as they are coming to be called, are concerned with both of these parts of government—health service and police power in behalf of health.

Functions of State Health Departments.

State boards of health perform several functions. One of these is quasi-legislative in character, carried on under authority delegated by the legislature. A State board of health may be authorized to prepare a sanitary code, plumbing regulations, rules for the protection of water supplies, rules for reporting diseases dangerous to the public health, and the like. This is done because in technical matters and in special fields where expert knowledge is needed, the legislature, composed of persons of varied attainments elected by the people, is less competent to enact such detailed legislation than a body of men selected for the special work at hand. For the best results, this delegated authority should be given to a body of men rather than to an individual. A health commissioner acting alone should not be allowed to perform functions which are legislative in character. Legislatures do well, however, to delegate authority for the preparation of rules and regulations which are essentially technical and scientific to competent boards rather than attempt to legislate directly.

A State board of health may act in a semi-judicial capacity. This authority is seen in the matter of nuisances. The board may sit as a court, hold hearings, take testimony, and render decisions. Sometimes it sits as a court of appeal. In matters of this kind a board is better than an individual, as the decisions must often be based on facts and common judgment rather than on technicalities of science or law; that is, the board is a sort of judge and jury combined.

Of course there is much work of an executive character to be done by a State department of health. Some of this is incidental to the exercise of the police power—such as laboratory work, engineering, or inspection in connection with the oversight of water supplies, stream pollution, sewage disposal, nuisances, food sanitation, sophistication of food and drugs, statistical records of sickness and death.

In addition to these regulative functions much other work of quite a different character is done; vaccines and antitoxins are made and distributed; bacteriological diagnoses of certain diseases are made; nursing services are supervised; educational activities of various sorts are carried on. These works, done chiefly for the public benefit, are largely responsible for the increasing appropriations made to State departments of health. Further expansions of efforts of this nature are being considered in some States, such as maternity benefits, dental clinics, public health nursing, and the like. In my judgment the wisdom of extending these activities is open to grave doubt. It is not at all certain that a State department of health is the organization best fitted to conduct popular education in health matters. It is certainly not the best organization to manage State hospitals and insti-

tutions. It is doubtful whether any form of activity which involves the operation of public utilities should be conducted by a State department of health. The attempt to combine the exercise of police power and the conduct of utilities for the public benefit involves administrative problems of serious character. In my opinion welfare work and public health work should be kept apart. Welfare work is done under the taxing power of government. Taxation for this purpose should be definite. If people want it or need it, let them appropriate money for it, knowing for what the money is to be spent. Let it not be confused in the public mind with money appropriated for the ordinary and well-understood police-power functions of health departments. In my opinion the time is coming when appropriations for all governmental purposes must be greatly decreased and, when that time comes, it will be important to discriminate between those governmental functions which prevent injury and those which are for the public benefit. If it comes to a choice, the latter should be sacrificed first.

There is another very important function of a State department of health which needs consideration, and that is its advisory power. This is a semi-judicial matter. Often the remedy for difficulties between contending parties is advice, not legal action. In all sorts of sanitary matters, in problems of water purification and sewage treatment, in matters of nuisances from offensive trades, a letter of advice from a State department of health which has established its reputation for fairness is often as effective as a legal order. In no way can State departments of health do more to improve sanitation than by improving the quality of their advice. Better advice and less drastic police action is, I believe, good policy; for more offenses against sanitation are due to ignorance of what to do than to willful disregard of law.

Akin to giving advice in particular matters is the setting up of standards of sanitation, of methods of procedure in all sorts of public health activities. Any such standard should be carefully worked out, chiefly with reference to local conditions applicable within the State, but also with due regard to interstate and national relations. Standard rules and regulations are useful in two ways: they promote unity, and thus simplify administration; and they tend to raise the level of administration in communities hitherto backward up to that of the standard. Standards also carry with them two dangerous tendencies: they are liable to stifle progress by making people content with the standard, and they tend to destroy local initiative and self-confidence by causing cities and towns to fall back on the State. Standards tend to destroy initiative in those who make as well as in those who follow them. I believe that the standard methods of water analysis of the American Public Health Association have been highly serviceable in

raising the level of water analysis in many laboratories; but I am also convinced that they have had a bad effect on the teaching of this branch of science, students and even instructors unconsciously getting the idea that the facile use of the standard methods represents the *summum bonum* of the art. In such a matter as plumbing regulations, uniformity throughout the State is desirable in the interest of convenience and economy; yet some municipalities prefer to make, as well as to enforce, their regulations, and it is difficult to decide whether in this matter uniformity is more important than local initiative. The special plumbing board appointed by the State Health Commissioner of Massachusetts is attempting to solve the problem by making certain minimum requirements state-wide and compulsory, and by setting up in addition standard detailed rules which shall be optional for each city or town to adopt or modify. This seems to be a logical plan, as it means using the police power on a state-wide basis to prevent injury to health, and using only the advisory power in matters which relate chiefly to public benefit.

There is still another function of a State department of health which interlocks with all of the others, namely, that of inquiry, of investigation, of survey. Facts must be obtained as a basis of legislative action, judicial action, or advice, and the collection and preservation of these facts is of great importance not only to the department but to the community. The best method of preservation is by publication in annual reports. Interest in popular education in health matters has tended to turn the official reports of health departments into agents of propaganda. This is a mistake. Statistics make dry reading, but these records of facts should nevertheless form the backbone of annual reports. They are absolutely essential as a measure of progress. It is poor economy to eliminate them, because if not published they become unavailable in later years—and perhaps lost—thereby making new and expensive compilation necessary. Decisions as to what should appear in annual reports should not be left to officials who view the matter from the standpoint of printing and who have no expert knowledge of the value of the data presented for publication.

Engineering Department.

The great shift of population from rural to urban conditions which has taken place in recent years has made the problems of public water supply and sewerage greater than ever before. The protection of water supplies against infection and the safeguarding of streams, lakes, and harbors against pollution involve engineering problems of a high order. These problems usually extend beyond municipal boundaries, and the State is the proper authority to cope with them. This is acknowledged by everybody, although it must

not be forgotten that there are also interstate water pollution problems which must some day be taken up by the National Government or by river district commissions which override State lines.

A great question of administration arises in connection with these engineering matters. Ought they to be consigned to the State department of health, to the State engineer's department, if there is one, or to the water-supply commission, if there is one? Inland waters are used for public water supplies, drainage, power, recreation, fishing, and, in some instances, for irrigation and navigation. Conservation of all inland waters is of vital importance, and all of these uses must be given due consideration. It seems to me that the highest use of inland waters and the one which needs greatest consideration is that of public water supply. Drainage and water-power stand next, sometimes one, sometimes the other. The control of inland waters for water supply and drainage is an exercise of the police power in the interest of public health, and it seems to me that the control should be vested in that branch of the State government in which the police power is clearly recognized as a major function, namely, the State department of health. Water-supply commissions and State engineering departments are organized primarily to bring about public benefits, not to prevent damage being done. If the police power is exercised by them at all, it concerns safety rather than health. There is room, perhaps, for water-supply commissions in some States to appraise the water resources and to look after the uses of inland waters from the standpoint of public benefit; but to State departments of health should be given the oversight and care of the inland waters from the sanitary point of view, and this control should be recognized as paramount to all others. Hence, State boards of health need engineering departments. Most State boards of health have such departments to-day.

Besides water-supply and sewerage problems, there are other engineering matters which arise in connection with public health administration, such as problems of land drainage, of nuisances from trade waste, refuse disposal, plumbing, ventilation, rat-proofing of buildings, besides many minor engineering problems of rural sanitation. New York State has recently shifted its engineering department from the department of health to the State engineer's department. This is a regrettable action, as it takes away from the department charged with protecting the public health its strong right arm and reduces the engineering work involved in the sanitary protection of the waters to a subsidiary place in a department interested primarily in doing things for the public benefit and not acting under the police power. I hope that no other State will follow this unfortunate lapse from sound governmental principles which New York has made.

The supervision of water supplies and sewage-disposal works calls for chemical and biological as well as engineering work. These three sciences should be closely allied. Laboratory work is also required for other departments than that of engineering. The question arises, therefore, should the water and sewage laboratory be a part of the engineering department, or should all of the laboratory work be combined in a general laboratory in the interest of a unified equipment and of economical operation?

My experience in both the laboratory and administrative side has convinced me that there is little if anything, to be gained by consolidating laboratories in one department, although the physical concentration of the laboratories in one place may be a convenience and a slight economy. It is not often realized how widely and in what vital respects laboratories differ from each other. To be sure, gas and electricity and test tubes and balances are used in them all, but the work done in a laboratory of water analysis is as different from that done in a food and drug laboratory or a bacteriological diagnosis laboratory as the work of the electrical engineer is different from that of the sanitary engineer. The modern sanitary engineer, however, is trained to use the microscope and the balance as well as the transit and the level. To be of the greatest use to the sanitary engineering department the laboratory of water analysis should be a part of this department and separate in its personnel from all other laboratories. One reason for this is that more and more the importance of having water analysis conducted as field work rather than laboratory work is being appreciated. In the future the laboratories of sanitary engineering departments may be very largely headquarters for field parties who do their principal work in the field in connection with inspections. The laboratory as a tool should be always ready, quickly responsive, and the results should be available as soon as the analyses are completed. There should be no circumlocution in reporting, and the record files should be so kept as to be accessible at all times.

As to organization, my preference is for an engineering department in a State board of health, which has as its head a sanitary engineer who reports to the chief executive and who has under him an assistant engineer, a chemist, and a biologist, with such assistants for each as may be necessary. In a small department the chemical and biological work may be done by one man. In a large department one man specially trained in chemistry and another specially trained in biology are needed; but each should know the whole range of ordinary water analyses, chemical and biological, and each should be competent to act as director of the laboratory, this matter being governed by seniority. The special attainments in chemistry and biology are needed because of the unusual problems which are con-

tinually coming up for solution and in order that research may be carried on in the best way. While different forms of organization are to be expected in States which differ in size, condition, and tradition, one principle should always govern, and that is that the sanitary engineering department should have the engineering, chemical, and biological talent closely interlocked.

Permits, Approvals, Orders, Advice, and Recommendations.

The object of the sanitary engineering department is to conduct such investigations and provide such information that the State board (or department) of health may act as may be necessary to maintain and improve the cleanliness of the environment of the people. The two subjects which loom largest in the work are public water supplies and sewerage systems, with their accompanying problems of stream pollution, sewage treatment, and water purification. It is right and proper that State departments should supervise these matters; but in considering what action should be taken the two ideas of police power and public benefit must be kept clearly in mind.

In employing the police power, practice has developed several methods which demand comment. One method is that of permit. The State law may prescribe that no sewer may be built to discharge into a stream unless a permit has been received from the State department of health. This implies that there must be a subsequent inspection to make sure that the rule has been complied with. The object of the law is to prevent an injury. In plumbing, the system of permit and inspection is very common. The method is applied especially to matters in which the proscription is definite or of a routine character. It requires little special ability to carry out this method, as the rules are usually definite and infractions obvious.

Another method is that of approval. The State law may say that before works for a public water supply are constructed, the plans must be approved by the State department of health. This action demands an investigation of the particular circumstances which exist. Approval is more than permission: it implies that the plan proposed will accomplish what is intended; that it is reasonably satisfactory. Those who exercise this power of approval should realize, however, that it is an act done under the police power, and that the object of police power is to prevent public injury, not to confer a benefit. While in common usage the word "approval" carries with it the idea of commendation, legally used in connection with the police power it does not commend. The approval of a plan really means that the plan is not disapproved; that it contains no serious fault; that it "gets by." The plan may not be the best plan; yet if it will reasonably serve its purpose of preventing a public injury to

health, safety, morals, or the like, it may not be disapproved under the police power of the State. Approval may also carry with it the idea of necessity. For example, in Massachusetts the taking of land to protect a public water supply must be approved by the State department of public health, the idea being that the taking should not be made unless it is necessary for the protection of the public health. There may be other special cases of approval committed to the State department of health by the legislature, but what I am emphasizing here is the fundamental idea. In geometry we learned that certain procedures were "necessary and sufficient" to prove a given theorem. Those who have to approve sanitary engineering works would do well to keep these two words in mind.

Legal approval does not necessarily carry with it the idea of general commendation, and it is somewhat unfortunate that popular usage tends to make people read this idea into the word. The owner of some proprietary device, which has been approved for a special situation, likes to advertise his device by saying, "It has received the approval of the State board of health," and the public gets the idea that the board has given the device general commendation. For this reason, letters of approval should be written with great care and with reference to possible misuse. In my opinion it is perfectly consistent for a State department of health to give approval to one plan and then proceed to advise a better one, or to reply to the applicant that approval to the plan will be given on a second request, but will be withheld pending the consideration of another suggested plan, which is deemed a better one.

We have next to consider the question of "orders" of the board of health. Here we recognize action under the police power in a drastic form. The State board of health orders that a certain thing be done in the interest of the public health. A city may be ordered to install a water purification plant or a sewage treatment works, or a manufacturer may be ordered to install devices for preventing the spread of nauseous fumes. It is necessary to be very careful in these matters not to exceed authority, not to be unjust, and not to be unduly arbitrary. It is sometimes difficult to discriminate between what is merely desirable and what is necessary. It must be remembered that the police power is not intended to bring to pass what is desirable—it is confined to what is necessary to prevent injury. Orders must be given with reference to the ability of their being carried out. There have been instances where a State board of health has ordered a municipality to install sewage treatment works, to do which would have involved borrowing money beyond the legal debt limit. Such an order is inconsistent with good government, to say the least, and is sure to raise legal complications.

Orders should be directed against the injurious result, placing the responsibility for the remedy upon the person or city causing the public injury. An order to cease committing a nuisance may be properly accompanied by advice as to how to stop the nuisance, but the latter must be regarded as advice only and there must be no implication that following the advice will relieve the wrongdoer of responsibility.

For example, it is a desirable thing for a city house to have a connection with the sewer in the street; but (unless there has been legislation to the contrary) the local board of health can not compel the house owner to make this sewer connection unless his method of disposing of the house sewage is in some way prejudicial to the public health, safety, morals, or the like. The responsibility is on the individual to abate the nuisance.

In the same way the treatment of the sewage of a city may be desirable on general sanitary principles, but (in the absence of definite legislation) the State can not compel the city to put in a disposal plant unless the existing method of disposal is doing, or is reasonably certain to do, a public injury. Even then the State should not attempt to order in detail the method of treatment, although it may *order* the nuisance to cease, and *advise* as to the best method.

In emergencies, of course, boards of health have, and ought to have, summary powers. They may have to act without legislation in the interest of preserving the health of the people. Such powers should be limited, however, to emergencies and should not be stretched too far. It is better that a community endure temporary injury than that the principles of good government be overruled.

With these conceptions of approval of plans and orders for abating nuisances, we see the important part which advice can and should play in sanitary administration. The benefits of advice depend upon the reputation which departments of health have for giving sound advice. Letters of advice should be brief, clear, and definite. They should be sent as soon as possible after the necessary information has been secured. This virtue of promptness has been sadly neglected in many States. Unless advice is backed up by reputation, it is likely not to be followed. This means that the sanitary engineer of a State should be competent, experienced, and trustworthy, a man of good judgment and abreast of the times in sanitary science. It means that his department must be well equipped to gather and preserve the necessary facts, and equipped to conduct such investigations and carry on such experimental work as may be required to give proper advice. As a result of my experience as a practicing engineer, as a public-health administrator, and as a historian of the Massachusetts State Board of Health, I am convinced that the advisory func-

tions of a State department of health carry with them more power for bettering sanitary conditions than the more drastic actions covered by permits, approvals, and orders, although without the latter the advisory powers would lack force.

A recommendation is crystallized advice. It usually relates definitely to some policy or line of action. Unlike approval, a recommendation carries with it the idea of commendation.

I believe that there is a mistaken tendency in some States, and especially among some of the younger and less experienced officials, to exert too much authority, to try to accomplish results too quickly, to force communities to do things for benefit rather than to avoid injury, and to emphasize sanitation at the expense of other things just as important. Sanitation is not the *summum bonum* of life; it is a means to that end. If sanitation is forced much beyond the willingness of the community to support it, reaction is almost certain to follow. On the other hand, State health officials should avoid the opposite extreme very well illustrated by one of Hambone's Philosophical Meditations: "Parson tells me ah ort to be patient; but when ah tries to be patient, ah goes to sleep." State sanitary engineers must not sleep at their post—and I would like to add that I know of no class of men less likely to sleep at their post than engineers.

The Sanitary Engineer.

Finally we come to the sanitary engineer himself. Originally, and in its narrower sense, this term was applied to engineers who had to do with sewers and drains. Plumbers still style themselves sanitary engineers and have a national association of that name. But the field has expanded and now includes not only sewers, but sewage treatment, water purification, and the like. It embraces other cleansing operations such as street cleaning and refuse disposal. The sanitary engineer of to-day must have a knowledge of biology and chemistry as well as hydraulics and the art of building; he must be familiar with laboratory procedures; he must understand the relation between sanitary works and the public health and between the cost of works and sanitary value. It has been suggested that such a man should be called a public health engineer. This is certainly an appropriate title for engineers in a public health department; nevertheless, it is merely a translation of sanitary engineer, and it does not seem to be worth while to multiply names and titles without adequate reason. In fact I sometimes think it would be just as well if sanitary engineers were known merely as civil engineers, or even as engineers, just as public health officers are known as doctors. Personally I should regard the title of "Engineer Smith" as equal in honor, dignity, and importance to that of "Doctor Smith," assum-

ing of course that the title "Engineer" represents an engineering degree, membership in a national professional society, or some other adequate standard of attainment.

From my experience, I believe that in a State health department the work of the sanitary engineer is of importance equal to that of the doctor of medicine. I can say this with perfect frankness, because no one has been more earnest than I have been in teaching biology to engineers, in securing cooperation between engineers and doctors in public health work, and in establishing schools of public health in which hygiene, preventive medicine, engineering, statistics, and administration shall be properly blended. In health department organizations engineers and physicians should be given equal standing, equal salaries, and equal ratings as to seniority, bearing in mind certain differences between administrative and executive work. The United States Government, through its Public Health Service and the Medical Departments of the Army and Navy, would do well to set an example in this matter. The lack of recognition of equality is one of the reasons why some of our best young engineers hesitate to enter the Public Health Service to-day.

I believe that the executive positions in health departments should be under the civil service (perhaps I ought to say under a reformed civil service), and that there should be provision for retirement on pension at a certain age or after so many years of service. In consideration of this feature, the salaries paid should be somewhat lower than those paid for work of similar grade in private practice. Just as business men make more money but take greater risks, so engineers in private practice should make larger incomes while subjecting themselves more to the ups and downs of business conditions.

The great bugbear of public positions to-day is political interference. This is steadily causing a depreciation in the character of engineering service in cities and States alike. Civil service has not been an unqualified success. It has tended to keep out the unfit, but it has not increased the excellence of the service. It has made it difficult to get rid of men who are lazy, of mediocre ability, or of unpleasing personality, and pleasing personality is a quality very essential to team work in a public department. Reform in civil service is highly essential, if our health departments are to be placed on a high plane. There is another angle to the matter. If it is not right for legislators to interfere with the personnel of the executive departments, it is equally bad for the latter to interfere with legislative matters. Unfortunately, there are too many examples of this practice.

More than all else it is important that engineers pay greater attention to their own ability. The young graduate of an engineering school is a fledgling; he can fly a little, but not far or well. He

needs practice; he needs contact with engineering problems; he needs much study. The engineer must study throughout his life. Self-made engineers, like the engineers of the past, developed habits of study which never left them. College graduates too often think that their studies are over when they are graduated. When an engineer retires for age he may cease studying, but not until then. William Mulholland, the self-made engineer who built the great Los Angeles Aqueduct, told me recently that he takes fifteen magazines and reads them. Sanitary engineers must read much, because their field is wide and embraces many sciences.

In States where appropriations are limited, the attempt to get proper men for the position of sanitary engineer is met in various ways. One way is to employ an engineer on half time, allowing him to engage in private practice. This I believe to be a thoroughly iniquitous arrangement, unless the engineer conscientiously refuses to do any private work whatsoever within the limits of the State. Even then the arrangement is not altogether satisfactory, because it is difficult for the engineer to be on hand at the right time. Another method is to employ an engineer on half time, letting him combine State work with teaching. This is less objectionable, but not altogether satisfactory. A full-time sanitary engineer is as much needed as a full-time health officer. The job is big enough for a whole man and for the best man obtainable. In my opinion, it is better to obtain a lower priced full-time man than a higher priced half-time man. The appointee then has a definite piece of work for which he is personally responsible. This responsibility tends to make him do his best; whereas if he is carrying on two jobs at the same time, there is danger that he may slight both of them, unless he is a man of exceptional ability and force of character.

Even if a sanitary engineer gives what is practically his whole time to a State department of health, he should not allow himself to engage in private practice within the State, for sooner or later he is sure to find himself in a situation which will seriously compromise his reputation. He may, however, accept occasional consulting engagements outside of the State without overstepping the limits of professional etiquette. Professional ethics among engineers is something to be cultivated and guarded with jealous care. Licensing of engineers by the State or the setting up of any artificial standards will never accomplish for the profession what the engineers can do for themselves if they will.

There seems to be one solution of this problem which nowadays is seldom tried, namely, to reinforce the official sanitary engineer with a consulting engineer who is either regularly retained or called upon for advice in particular cases. The Massachusetts State Board of Health had this practice at one time, and some of our most eminent engineers, chemists, and biologists have served the State in a con-

sulting capacity. This practice, in my opinion, should be renewed and extended. It would have several advantages. In the first place, it would greatly strengthen the reputation of the State department of health and give its letters of advice greater weight. It would make it possible for the smaller States to have as good advice as the larger States. In case of controversies, it would strengthen the State in its contentions. It would tend to soften one of the sharp corners which result from laws requiring plans to be approved. At the present time it so happens that many of the engineers engaged in private practice are older and more competent than the State engineer who must pass upon the plans submitted. The less experienced State engineer may, however, understand local conditions better than the designing engineer who has made the plans. Under these conditions, refusal to approve the plans creates a situation disagreeable to both parties. If, however, the State department of health had a consulting engineer, doubtful plans could be approved or disapproved with better grace and a greater feeling of security that the proper result had been reached.

There is also a present-day tendency for engineers in high positions to do too much work by proxy. Accustomed to assistants, they have stenographers to write their letters and young engineers to make their computations. Many of our modern methods, thought to be so efficient, are not so, because they are turning our chief engineers into routine executives and are confusing administrative and executive work. Our chief engineers and consulting engineers ought to do more personal engineering work and leave more of the routine work to others. Engineers who cease to make personal studies run downhill rapidly.

Engineers who enter the public service under present conditions do so at a personal sacrifice. I believe that public service ought to involve personal sacrifice. Young men entering the service should understand this clearly. The sacrifice is recognized in times of war; it should be recognized in times of peace. Public service means doing for others. It is only by the recognition of this principle that our health departments will be filled with the right kind of men—men who are not there for gain, for large salaries, or easy work. Personally I know of no better way for a young man to serve his day and generation than to become an engineer, learn how to employ the great forces of nature for the use and convenience of man, and then enter the public service and spend his life for the public good. It does not mean wealth; it means hard work and many conflicts with the powers of evil. It may not always mean public recognition and honor; but it does mean much personal satisfaction and many pleasures by the way.

PREVENTION OF ANTHRAX AMONG INDUSTRIAL WORKERS.

ABSTRACT OF THE MEMORANDUM ON THE DISINFECTING STATION ESTABLISHED IN GREAT BRITAIN FOR DISINFECTION OF WOOL AND HAIR (FEBRUARY, 1921).

Because of a continued increase in the number of cases of anthrax in Great Britain, notwithstanding regulations introduced for the protection of operatives in factories, warehouses, etc., the Home Office appointed a committee to inquire into the question of anthrax in industries using wool and hair. In presenting its report in 1918, the committee recommended compulsory disinfection of raw material instead of the regulation of factory processes. A trial disinfecting station was erected, and operations were to have begun in the spring of 1921.

METHOD WORKED OUT EXPERIMENTALLY.

The memorandum deals with the process of disinfection worked out experimentally and the establishment and equipment of the trial station as recommended by the committee. The process of disinfection is fully described in volume 1 of the report referred to above.

Experimental investigation demonstrated the impracticability of disinfection in bales, except by methods which caused damage to the material; it also showed that anthrax spores are so well protected by nature that disinfection is untrustworthy, whatever the method adopted, unless this protection is removed.

The principle of the method of disinfection which was worked out, was to render the spores more susceptible to disinfecting agents by exposure of the material to an alkaline solution of soap at 102° F. (39° C.) for 30 minutes, in three stages of 10 minutes each, then disinfect with a 2 to 2½ per cent solution of formaldehyde at the same temperature for 20 minutes in 2 stages of 10 minutes each. The material is then dried, cooled, and rebaled.

THE TRIAL STATION.

Liverpool was selected as the site for the trial disinfecting station because the bulk of imported wool and hair arrives in Great Britain at that port and the water supply is very suitable for washing wool.

The plan and general arrangement of the trial disinfecting station made provision for—

1. Warehousing the materials on arrival.
2. Disinfection.
3. Rebaling.
4. Recovery of grease from the soapy effluent.

The station is driven by a steam-electric plant, and the exhaust steam from the engines is used for heating the liquids in the disinfecting machines and the air for the drying chamber.

The main building is about 340 feet long and 30 feet wide. The ground floor has the office, engine and generators, boilers, baling

press, grease-recovery room, and wool warehouse. The first floor contains the disinfecting and rebaling machinery, with storage space for disinfected material. The third story has the storage bins, part of the rebaling plant, and laboratories. All materials to be disinfected are handled before disinfection, as far as possible, mechanically. The feeding mechanism is inclosed and provided with an exhaust fan to prevent dust.

There are 5 baths, each 33 feet long and 4 feet wide, and fitted with squeezing rollers and mechanism which causes the material to pass through the liquids at proper speed. The first 3 are used for the preliminary treatment and incidentally for washing the material. These baths are specially built wool-washing machines. The last 2 baths, used for disinfection, are specially built carbonizing machines, and are air-tight to prevent the escape of formaldehyde gas. All 5 baths are arranged so that their contained solution may be maintained at the same strength. This solution in the first three baths is heated by direct admission of steam; in the last two by steam coils.

From the disinfecting machines the material passes into an ordinary wool-drying machine (specially designed to prevent the escape of formaldehyde vapors). The air for drying is raised to 220° F., although the wool itself never reaches a temperature higher than 160° F. The time in the drying machines is 15–20 minutes.

From the drying machine the wool is conveyed to the cooling machine, cooled in a current of cold air, and rebaled immediately.

The bales produced weigh about 300 pounds (the original weight of the bale is not given), and are given the same marks borne by the original bales.

GREASE RECOVERY.

The thin sludge from the first-process machines is automatically removed at short intervals and run through a machine to remove the wool fibers. The liquid then passes into a tank on the floor below, where the sand is separated. From this tank the liquid flows into tanks in which it is acidified with sulphuric acid, thus causing separation of the grease, which settles out. The grease sludge is transferred to cylinders raised to a temperature of 212° F., and then forced by air from an air compressor into a steam-heated filter press.

Machinery is provided to sterilize, wash, and dry clothes worn by workmen, and bale coverings taken from original bales.

The total cost of the equipment contained in the power plant, raw wool warehouse, disinfecting plant, wool-baling and delivery plant, grease-recovery plant, and miscellaneous equipment and services was £36,889.¹ The total building cost was £66,000.

¹ The American equivalents for English money are not given because of the varying exchange rate.

To provide against the possibility of infection to workmen they are provided with overalls, which are to be washed and sterilized in the station. Shower baths and lavatories are provided, as is also a mess room.

The capacity of the station is 1,000 pounds of clean, disinfected material per hour. The estimated cost of disinfection per pound of output is 2.75196 pence.

The memorandum contains an appendix giving the Anthrax Prevention Act of 1919, which provides for the prohibition of the importation of goods infected with anthrax, by orders in council, and gives the Secretary of State authority to provide for the disinfection of infected goods.

PUBLIC HEALTH INSTITUTES.

PRELIMINARY ANNOUNCEMENT REGARDING INSTITUTES TO BE HELD DURING 1922 UNDER THE AUSPICES OF STATE BOARDS OF HEALTH AND THE UNITED STATES PUBLIC HEALTH SERVICE.

THE AIM OF THE INSTITUTES.

In the fall of 1920 there was held in Washington an "Institute on Venereal Disease Control and Social Hygiene." More than 600 persons from all sections of the country attended the short intensive courses which were provided in the sociological, legal, psychological, and educational, as well as the medical aspects of this problem. Only within comparatively recent times has much attention been devoted to the venereal diseases; now extremely rapid developments are taking place. On that account the opportunity to come into personal contact with the leaders throughout the entire field was much appreciated and gave new impetus and direction to work then under way.

Rapid progress in the field of public health has not, however, been confined to the control of the venereal diseases. In child hygiene, industrial hygiene, the control of general communicable diseases, nutritional diseases, sanitary engineering, and other fields similar developments are occurring. From the treatment of disease, humanity has turned to its prevention, and every day discloses new needs, new opportunities.

With such a rapid advance the educational facilities for the training of workers have not kept pace. The result is that many persons who are employed in one capacity or another in public health work keenly feel the need for information concerning the results of the most recent scientific research and experience and for training in special subjects whose relation to their specific problem has only recently been understood. They desire to come into personal contact with those who are recognized as authorities in public health work.

Public health to-day is not merely the interest of sanitarians and bacteriologists. As the field has extended, the number of groups of those interested in various phases of the work has grown, and public health workers can make their work thoroughly effective only if their training in medical subjects is supplemented by a knowledge of statistics, sociology, psychology, and education.

It is for the purpose of meeting these various needs that the public health institutes have been organized. As one-week schools they have many obvious limitations. They will, however, bring health officers, private practitioners, nurses, educators, heads of institutions, social workers, and others concerned into closer touch with the newer aspects of public health work. They will show the importance of such thorough training as is now available at the best schools of public health and stimulate attendance at these schools. They will provide a valuable opportunity for public health workers to meet leading specialists in the various fields. Thus they will make public health work in the various communities more effective and the continued progress of the public health movement more sure.

Schedule of institutes.

Place.	Date.	Director.
New Orleans.....	Jan. 9-13.....	Dr. Oscar Dowling, State board of health, New Orleans, La.
Columbia.....	Jan. 9-14.....	Dr. J. A. Hayne, State board of health, Columbia, S. C.
Dallas.....	Jan. 16-21.....	Dr. Manton M. Carrick, State board of health, Austin, Tex.
Birmingham.....	Jan. 16-21.....	W. C. Blasingame, State board of health, Montgomery, Ala.
Memphis.....	Jan. 23-28.....	Dr. J. J. Durrett, city board of health, Memphis, Tenn.
Louisville.....	Jan. 30-Feb. 4.....	Dr. A. T. McCormack, State board of health, Louisville, Ky.
Indianapolis.....	Feb. 13-18.....	Dr. W. F. King, State board of health, Indianapolis, Ind.
Pittsburgh.....	Feb. 20-25.....	Dr. S. R. Haythorn, University of Pittsburgh, Pittsburgh, Pa.
Jacksonville.....	Feb. 27-Mar. 4.....	Dr. George A. Dame, State board of health, Jacksonville, Fla.
Detroit.....	Mar. 6-11.....	Dr. R. M. Olin, State board of health, Lansing, Mich.
Chicago.....	Mar. 13-18.....	Dr. I. D. Rawlings, State department of health, Springfield, Ill.
Minneapolis.....	Mar. 20-25.....	Dr. A. J. Chesley, State board of health, St. Paul, Minn.
Atlanta.....	Mar. 27-Apr. 1.....	Dr. T. F. Abercrombie, State board of health, Atlanta.
Portland.....	Apr. 10-15.....	Dr. Frederick D. Stricker, State board of health, Portland, Ore.
Kansas City.....	Apr. 10-15.....	Dr. S. J. Crumbine, State board of health, Topeka, Kans.
Spokane.....	Apr. 17-22.....	Dr. Paul A. Turner, State board of health, Seattle, Wash.
Newark.....	Apr. 17-22.....	Dr. A. Clark Hunt, State department of health, Trenton, N. J.
Albany.....	Apr. 24-29.....	Dr. Joseph S. Lawrence, State department of health, Albany, N. Y.
Denver.....	May 1-6.....	Dr. R. L. Drinkwater, State board of health, Denver, Colo.
Washington.....	.....	Dr. C. C. Pierce, United States Public Health Service, Washington, D. C.
Hartford.....	.....	Dr. J. T. Black, State department of health, Hartford, Conn.

For further information, address the directors of the various institutes or the United States Public Health Service, No. 16 Seventh Street SW., Washington, D. C.

DEATHS DURING WEEK ENDED NOV. 12, 1921.

Summary of information received by telegraph from industrial insurance companies for week ended Nov. 12, 1921, and corresponding week, 1920. (From the Weekly Health Index, Nov. 15, 1921, issued by the Bureau of the Census, Department of Commerce.)

	Week ended Nov. 12, 1921.	Corresponding week, 1920.
Policies in force.....	47, 635, 423	45, 061, 204
Number of death claims.....	6, 493	6, 592
Death claims per 1,000 policies in force.....	7.1	7.6

Deaths from all causes in certain large cities of the United States during the week ended Nov. 12, 1921, infant mortality, annual death rate, and comparison with corresponding week of preceding years. (From the Weekly Health Index, Nov. 15, 1921, issued by the Bureau of the Census, Department of Commerce.)

City.	Estimated population July 1, 1921.	Week ended Nov. 12, 1921.		Average annual death rate per 1,000. ¹	Deaths under 1 year.		Infant mortality rate, week ended Nov. 12, 1921. ³
		Total deaths.	Death rate. ¹		Week ended Nov. 12, 1921.	Previous year or years. ²	
Akron, Ohio.....	229,195	26	5.9	47.8	3	43	29
Albany, N. Y.....	115,071	36	16.3	C 9.6	2	C 1	45
Atlanta, Ga.....	207,473	47	11.8	C 15.7	5	C 8	.....
Baltimore, Md.....	750,864	176	12.2	A 14.5	21	A 31	59
Birmingham, Ala.....	186,133	40	11.2	A 16.5	4	A 5	.....
Boston, Mass.....	757,634	182	12.5	A 16.2	24	A 34	65
Bridgeport, Conn.....	149,967	18	6.3	A 13.8	2	A 6	25
Buffalo, N. Y.....	519,608	114	11.4	C 11.8	16	C 21	62
Cambridge, Mass.....	110,444	27	12.7	A 14.1	5	A 6	89
Camden, N. J.....	119,672	21	10.4	.....	5	.....	75
Chicago, Ill.....	2,780,655	537	10.1	A 12.1	80	A 93	.....
Cincinnati, Ohio.....	403,418	103	13.3	C 13.4	6	C 6	40
Cleveland, Ohio.....	831,138	172	10.8	C 11.0	23	C 41	62
Columbus, Ohio.....	245,358	59	12.5	C 9.6	8	C 7	93
Dallas, Tex.....	165,282	34	10.7	A 13.0	6	A 3	.....
Dayton, Ohio.....	158,119	37	12.2	C 9.1	4	C 4	66
Denver, Colo.....	263,152	62	12.3	A 14.3	3	.....	60
Detroit, Mich.....	1,070,450	208	10.1	C 9.4	32	C 46	60
Fall River, Mass.....	120,668	31	13.4	C 13.0	3	C 2	45
Fort Worth, Tex.....	111,423	23	10.8	.....	.....	.....	.....
Grand Rapids, Mich.....	141,197	35	12.9	C 11.6	6	C 9	102
Houston, Tex.....	144,340	36	13.0	.....	2	.....	.....
Indianapolis, Ind.....	325,632	90	14.4	C 10.2	6	C 10	47
Jersey City, N. J.....	302,788	69	11.9	C 11.3	10	C 16	69
Kansas City, Mo.....	336,157	89	13.8	C 11.4	9	C 9	.....
Los Angeles, Calif.....	611,921	159	13.5	A 12.2	19	A 8	90
Louisville, Ky.....	236,083	73	16.1	C 13.1	7	C 5	81
Lowell, Mass.....	113,757	25	11.5	A 15.2	4	A 7	64
Memphis, Tenn.....	165,656	52	16.4	C 20.1	3	C 8	.....
Milwaukee, Wis.....	468,396	67	7.5	A 11.3	8	A 17	39
Minneapolis, Minn.....	392,815	78	10.4	C 11.3	10	C 10	57
Nashville, Tenn.....	122,038	40	17.1	C 13.6	3	C 6	.....
New Bedford, Mass.....	125,012	27	11.3	A 15.2	6	A 8	92
New Haven, Conn.....	167,007	41	12.8	C 10.5	4	C 3	48
New Orleans, La.....	394,657	122	16.1	A 21.9	7	A 16	.....
New York, N. Y.....	5,751,867	1,123	10.2	C 10.3	144	C 157	57
Newark, N. J.....	424,885	94	11.5	C 8.2	21	C 9	93
Norfolk, Va.....	121,260	31	13.3	.....	4	.....	71
Oakland, Calif.....	226,472	40	9.2	A 10.4	4	A 4	51
Omaha, Nebr.....	197,066	32	8.5	.....	7	.....	81
Paterson, N. J.....	137,463	28	10.6	.....	1	.....	17
Philadelphia, Pa.....	1,866,212	430	12.0	14.0	43	64	58
Pittsburgh, Pa.....	602,452	176	15.2	C 12.5	31	C 21	110
Portland, Oreg.....	264,859	45	8.9	C 10.0	3	C 6	30
Providence, R. I.....	239,645	44	9.6	C 11.2	6	C 14	49
Richmond, Va.....	173,696	73	21.7	C 13.3	11	C 10	134
Rochester, N. Y.....	308,229	68	11.6	C 12.9	10	C 15	78
St. Louis, Mo.....	786,164	189	12.5	C 12.0	17	C 15	.....
St. Paul, Minn.....	237,781	47	10.3	C 11.3	5	C 7	50
Salt Lake City, Utah.....	121,595	27	11.6	A 10.3	2	.....	31
San Francisco, Calif.....	520,543	117	11.7	C 13.3	8	C 4	46
Seattle, Wash.....	327,227	46	7.3	A 7.5	5	A 3	42
Spokane, Wash.....	104,442	30	15.0	C 11.0	2	C 2	44
Springfield, Mass.....	135,877	19	7.3	C 13.1	2	C 3	30
Syracuse, N. Y.....	177,265	41	12.1	C 4.5	1	C 3	12
Toledo, Ohio.....	255,696	65	13.4	A 15.5	3	A 7	30
Trenton, N. J.....	122,780	27	11.5	A 16.8	5	A 8	76
Washington, D. C.....	454,026	110	12.6	A 15.8	20	A 13	117
Wilmington, Del.....	113,408	22	10.1	C 9.4	3	C 2	.....
Worcester, Mass.....	184,972	29	8.2	C 11.8	1	C 4	11
Yonkers, N. Y.....	103,324	16	8.1	A 12.1	2	A 25	45

¹ Annual rate per 1,000 population.

² "A" indicates data for the corresponding week of the years 1913 to 1917, inclusive. "C" indicates data for the corresponding week of the year 1920.

³ Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1920. Cities left blank are not in the registration area for births.

⁴ Data based on statistics of 1915, 1916, and 1917.

PREVALENCE OF DISEASE.

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring.

UNITED STATES.

CURRENT STATE SUMMARIES.

Telegraphic Reports for Week Ended Nov. 19, 1921.

These reports are preliminary and the figures are subject to change when later returns are received by the State health officers.

ALABAMA.		Cases.	COLORADO.	
			(Exclusive of Denver.)	
Cerebrospinal meningitis	11	1	Cerebrospinal meningitis	1
Chicken pox	72	11	Chicken pox	7
Diphtheria	6	72	Diphtheria	61
Malaria	1	6	Measles	1
Pellagra	13	1	Mumps	2
Pneumonia	24	13	Pneumonia	2
Scarlet fever	20	24	Scarlet fever	30
Tuberculosis	23	20	Smallpox	47
Typhoid fever		23	Tuberculosis	20
			Typhoid fever	17
ARKANSAS.			DELAWARE.	
Chicken pox	10		Anthrax—Wilmington	1
Diphtheria	36		Chicken pox	4
Hookworm disease	1		Diphtheria	2
Influenza	14		Malaria	1
Malaria	106		Poliomyelitis—Milton	1
Measles	3		Scarlet fever:	
Pellagra	6		Wilmington	18
Scarlet fever	24		Scattering	5
Smallpox	5		Tuberculosis	2
Trachoma	3		Typhoid fever	4
Tuberculosis	5			
Typhoid fever	23		FLORIDA.	
			Diphtheria	42
CALIFORNIA.			Influenza	8
Cerebrospinal meningitis:			Malaria	4
Los Angeles	2		Pneumonia	5
Santa Clara County	1		Scarlet fever	1
Diphtheria	308		Smallpox	12
Influenza	13		Typhoid fever	12
Lethargic encephalitis—San Francisco	1			
Measles	14		GEORGIA.	
Poliomyelitis:			Chicken pox	16
San Bernardino	1		Dengue	1
San Francisco	1		Diphtheria	62
Taft	1		Dysentery (ametic)	1
Scarlet fever	151		Dysentery (bacillary)	2
Smallpox:			Hookworm disease	35
Bakersfield	14		Influenza	23
Scattering	31			
Typhoid fever	6			

GEORGIA—continued.

	Cases.
Malaria.....	18
Mumps.....	4
Pneumonia.....	13
Scarlet fever.....	33
Septic sore throat.....	1
Smallpox.....	10
Tuberculosis (pulmonary).....	14
Typhoid fever.....	16
Whooping cough.....	3

ILLINOIS.

Cerebrospinal meningitis:	
Chicago.....	2
Peoria.....	1
Diphtheria:	
Blue Island.....	32
Carbondale.....	8
Chicago.....	243
Cicero.....	12
Decatur.....	15
East St. Louis.....	13
Evanston.....	8
Freeport.....	11
Mattoon.....	17
Olney.....	9
Rockford.....	12
Scattering.....	293
Influenza.....	14
Lefthargic encephalitis—Chicago.....	1
Pneumonia.....	197
Poliomyelitis:	
Chicago.....	1
Galesburg.....	1
Scarlet fever:	
Chicago.....	141
East St. Louis.....	10
Marion.....	10
Rockford.....	9
Scattering.....	158
Smallpox.....	18
Typhoid fever.....	32
Whooping cough.....	29

INDIANA.

Diphtheria.....	258
Scarlet fever.....	99
Smallpox.....	6
Typhoid fever.....	17

IOWA.

Cerebrospinal meningitis—Burlington.....	2
Diphtheria.....	66
Poliomyelitis:	
Chapin.....	1
Muscatine.....	1
Scarlet fever.....	117
Smallpox.....	22

KANSAS.

Chicken pox.....	83
Diphtheria.....	499
Influenza.....	2
Measles.....	8
Mumps.....	26
Ophthalmia neonatorum.....	3

KANSAS—continued.

	Cases.
Pneumonia.....	17
Poliomyelitis.....	3
Scarlet fever.....	307
Septic sore throat.....	1
Smallpox.....	36
Tuberculosis.....	43
Typhoid fever.....	13
Whooping cough.....	28

LOUISIANA.

Diphtheria.....	19
Influenza.....	5
Scarlet fever.....	9
Smallpox.....	12
Typhoid fever.....	14

MAINE.

Cerebrospinal meningitis.....	1
Chicken pox.....	22
Diphtheria.....	28
Pneumonia.....	3
Poliomyelitis.....	1
Scarlet fever.....	25
Septic sore throat.....	7
Smallpox.....	1
Tuberculosis.....	8
Typhoid fever.....	2

MARYLAND.¹

Cerebrospinal meningitis.....	1
Chicken pox.....	55
Conjunctivitis.....	1
Diphtheria.....	104
Dysentery.....	2
Influenza.....	18
Malaria.....	3
Measles.....	60
Mumps.....	15
Ophthalmia neonatorum.....	5
Paratyphoid fever.....	2
Pneumonia (all forms).....	59
Poliomyelitis.....	5
Scarlet fever.....	69
Septic sore throat.....	3
Tuberculosis.....	67
Typhoid fever.....	33
Whooping cough.....	15

MASSACHUSETTS.

Cerebrospinal meningitis.....	3
Chicken pox.....	193
Conjunctivitis (suppurative).....	12
Diphtheria.....	339
German measles.....	7
Influenza.....	6
Measles.....	146
Mumps.....	62
Ophthalmia neonatorum.....	18
Pneumonia (lobar).....	106
Poliomyelitis.....	3
Scarlet fever.....	184
Septic sore throat.....	5
Smallpox.....	1
Tetanus.....	1
Trachoma.....	2

¹ Week ended Friday.

MASSACHUSETTS—continued.	Cases.
Trichinosis.....	1
Tuberculosis (all forms).....	188
Typhoid fever.....	11
Whooping cough.....	72

MINNESOTA.

Cerebrospinal meningitis.....	1
Chicken pox.....	24
Diphtheria:	
Minneapolis.....	57
Scattering.....	110
Influenza.....	1
Measles.....	12
Poliomyelitis.....	4
Scarlet fever.....	177
Smallpox.....	42
Tuberculosis.....	57
Typhoid fever.....	12

MISSISSIPPI.

Diphtheria.....	69
Scarlet fever.....	16
Smallpox.....	2
Typhoid fever.....	9

MISSOURI.

Chicken pox.....	40
Diphtheria.....	368
Epidemic sore throat.....	26
Influenza.....	4
Measles.....	1
Poliomyelitis.....	2
Scarlet fever.....	146
Smallpox.....	81
Tetanus.....	1
Tuberculosis.....	40
Typhoid fever.....	33
Whooping cough.....	25

MONTANA.

Cerebrospinal meningitis—Walkerville.....	2
Diphtheria.....	23
Scarlet fever.....	8
Smallpox.....	23

NEBRASKA.¹

Chicken pox.....	11
Diphtheria:	
Omaha.....	38
Scotts Bluff.....	28
Scattering.....	26
German measles.....	1
Influenza.....	2
Measles.....	11
Mumps.....	2
Poliomyelitis—Dixon County.....	1
Scarlet fever.....	32
Septic sore throat.....	5
Small pox:	
Adams County.....	11
Bluehill.....	14
Keith County.....	9
Scattering.....	14

NEBRASKA—continued.	Cases.
Tuberculosis.....	1
Typhoid fever.....	4
Whooping cough.....	1

NEW JERSEY.

Anthrax.....	1
Cerebrospinal meningitis.....	2
Chicken pox.....	155
Diphtheria.....	192
Influenza.....	8
Leprcxy.....	1
Measles.....	87
Pneumonia.....	94
Poliomyelitis.....	3
Scarlet fever.....	171
Smallpox.....	1
Typhoid fever.....	13
Whooping cough.....	46

NEW MEXICO.

Chicken pox.....	3
Conjunctivitis.....	1
Diphtheria.....	20
Dysentery.....	1
Influenza.....	1
Malaria.....	1
Measles.....	2
Mumps.....	1
Paratyphoid fever.....	1
Pneumonia.....	7
Scarlet fever.....	7
Trachoma.....	1
Tuberculosis.....	28
Typhoid fever.....	11
Whooping cough.....	13

NEW YORK.

(Exclusive of New York City.)

Cerebrospinal meningitis.....	2
Diphtheria.....	352
Influenza.....	15
Lethargic encephalitis.....	2
Measles.....	47
Pneumonia.....	155
Poliomyelitis.....	7
Scarlet fever.....	312
Typhoid fever.....	58
Whooping cough.....	100

NORTH CAROLINA.

Cerebrospinal meningitis.....	2
Chicken pox.....	38
Diphtheria.....	225
German measles.....	2
Measles.....	3
Poliomyelitis.....	2
Scarlet fever.....	136
Septic sore throat.....	5
Smallpox.....	3
Typhoid fever.....	16
Whooping cough.....	54

¹ The report of 13 cases of diphtheria at Lincoln for the week ended Oct. 15 (Public Health Reports, Oct. 24, 1921, p. 2833) was an error; no cases of diphtheria occurred at Lincoln during that period. The 13 cases reported for Lincoln occurred at Chadron.

OREGON.		WASHINGTON—continued.	
	Cases.		Cases.
Cerebrospinal meningitis.....	1	Poliomyelitis—Continued.	
Chicken pox.....	14	Lewis County.....	2
Diphtheria:		Pierce County.....	2
Portland.....	22	Tacoma.....	1
Scattering.....	22	Walla Walla County.....	1
Influenza.....	1	Scarlet fever:	
Measles.....	3	Spokane.....	12
Mumps.....	6	Scattering.....	31
Poliomyelitis:		Smallpox:	
Eugene.....	1	Tacoma.....	16
Grants Pass.....	1	Walla Walla.....	13
Portland.....	1	Scattering.....	62
Scarlet fever.....	14	Tuberculosis.....	20
Smallpox:		Typhoid fever.....	12
Portland.....	12	Whooping cough.....	10
Scattering.....	12		
Tuberculosis.....	1		
Typhoid fever.....	2		
Whooping cough.....	8		
SOUTH DAKOTA.		WEST VIRGINIA.	
Chicken pox.....	2	Diphtheria:	
Diphtheria.....	32	Clarksburg.....	13
Pneumonia.....	5	Huntington.....	12
Poliomyelitis.....	1	Keyser.....	8
Scarlet fever.....	58	Scattering.....	37
Smallpox.....	6	Scarlet fever.....	18
Typhoid fever.....	3	Typhoid fever.....	4
TEXAS.		WISCONSIN.	
Chicken pox.....	7	Milwaukee:	
Diphtheria.....	62	Chicken pox.....	65
Influenza.....	8	Diphtheria.....	50
Pellagra.....	6	Measles.....	1
Scarlet fever.....	21	Pneumonia.....	11
		Scarlet fever.....	17
		Smallpox.....	1
		Tuberculosis.....	19
		Typhoid fever.....	1
		Whooping cough.....	20
		Scattering:	
		Cerebrospinal meningitis.....	1
		Chicken pox.....	77
		Diphtheria.....	127
		Influenza.....	1
		Lethargic encephalitis—	
		Rock County—Clinton.....	1
		Measles.....	11
		Pneumonia.....	2
		Poliomyelitis.....	3
		Scarlet fever.....	144
		Smallpox.....	33
		Trachoma.....	3
		Tuberculosis.....	45
		Typhoid fever.....	13
		Whooping cough.....	75
WASHINGTON.			
Chicken pox.....	69		
Diphtheria.....	35		
Measles.....	4		
Mumps.....	15		
Poliomyelitis:			
Chelan County.....	1		
King County.....	1		

Delayed Reports for Week Ended Nov. 12, 1921.

CONNECTICUT.		CONNECTICUT—continued.	
	Cases.		Cases.
Cerebrospinal meningitis.....	1	Measles:	
Chicken pox.....	25	Coventry.....	22
Diphtheria:		Willimantic.....	9
Bridgeport.....	11	Scattering.....	21
Hartford.....	12	Mumps.....	9
New Haven.....	13	Ophthalmia neonatorum.....	1
Scattering.....	36	Pneumonia (lobar).....	13
Dysentery (bacillary).....	1	Poliomyelitis.....	3
Influenza.....	4	Scarlet fever:	
Lethargic encephalitis.....	1	Waterbury.....	11
		Scattering.....	42

CONNECTICUT—continued.	
	Cases.
Tuberculosis (all forms).....	21
Typhoid fever.....	7
Whooping cough.....	21

DISTRICT OF COLUMBIA.	
Chicken pox.....	20
Diphtheria.....	23
Influenza.....	1
Measles.....	4
Scarlet fever.....	25
Tuberculosis.....	42
Typhoid fever.....	2
Whooping cough.....	7

KENTUCKY.	
Cerebrospinal meningitis—Scott County.....	1
Chicken pox.....	7
Conjunctivitis.....	1
Diphtheria:	
Daviss County.....	50
Jefferson County.....	72

KENTUCKY—continued.	
	Cases.
Diphtheria—Continued.	
Knox County.....	12
Taylor County.....	9
Scattering.....	72
Influenza.....	22
Malaria.....	1
Measles—Jefferson County.....	18
Ophthalmia neonatorum.....	1
Paratyphoid fever.....	1
Pellagra.....	1
Pneumonia.....	27
Scarlet fever.....	49
Septic sore throat.....	6
Smallpox.....	15
Tonsillitis.....	1
Trachoma.....	8
Tuberculosis:	
Jefferson County.....	10
Scattering.....	4
Typhoid fever.....	24

SUMMARY OF CASES REPORTED MONTHLY BY STATES.

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week:

State.	Cerebrospinal meningitis.	Diphtheria.	Influenza.	Malaria.	Measles.	Pellagra.	Polomyelitis.	Scarlet fever.	Smallpox.	Typhoid fever.
1921.										
Connecticut (October).....	4	361	14	1	109		13	182		49
Idaho (October).....	2	10			1		19	62	10	11
Louisiana (October).....	1	125	35	102	4	15	1	65	4	86
Maryland (October).....	3	367	52	75	57		55	267		185
Michigan (October).....		1,567			71		79	908	53	277
New Mexico (September).....		96		12	1	1		15		63
New Mexico (October).....	1	131	3	6	1	1	5	26	1	74
Rhode Island (October).....	1	74	9		4			41		9
West Virginia (October).....	2	1,163	28		33		3	418	50	294
Wisconsin (October).....	8	829	22		50		35	758	72	87

RECIPROCAL NOTIFICATION.

Massachusetts—October, 1921.

Cases of communicable diseases referred during October, 1921, to other State health departments by Department of Health of the State of Massachusetts.

Disease and locality of notification.	Referred to health authority of—	Why referred.
Typhoid fever:		
Brookline.....	State health department, Albany, N. Y.	Patient visited at Whitehall, N. Y., prior to onset of disease.
Andover.....	State health department, Augusta, Me.	Patient was visiting at Biddeford, Me., prior to onset of disease.

SMALLPOX EPIDEMIC.**Kansas City, Mo.¹**

An epidemic of smallpox of virulent type is stated to have begun in Kansas City, Mo., September 1, 1921, from which date to November 22, a total of 231 cases with 75 deaths was reported. During the week ended November 19, there were reported 59 cases with 22 deaths.

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921.**ANTHRAX.**

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Pennsylvania: Philadelphia.....		1	Tennessee: Nashville.....	1	.....

CEREBROSPINAL MENINGITIS.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Nov. 5, 1921.		City.	Median for previous years.	Week ended Nov. 5, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
Alabama:				Massachusetts—Contd.			
Birmingham.....	0	3	1	Lynn.....	0	1	2
Arizona:				New Bedford.....	0	1	1
Tucson.....	0	.....	1	Michigan:			
California:				Detroit.....	0	.....	1
Los Angeles.....	0	1	.....	Missouri:			
Oakland.....	0	1	.....	Cape Girardeau.....	0	1	.....
San Diego.....	0	1	1	Independence.....	0	1	1
Georgia:				Kansas City.....	0	2	.....
Atlanta.....	0	.....	1	New York:			
Illinois:				New York.....	3	7	5
Alton.....	0	1	.....	Niagara Falls.....	0	.....	1
Chicago.....	3	3	.....	Saratoga Springs.....	0	1	.....
Indiana:				Ohio:			
Indianapolis.....	0	1	1	Youngstown.....	0	1	1
Kansas:				Utah:			
Kansas City.....	0	1	.....	Salt Lake City.....	0	.....	1
Maryland:				Wisconsin:			
Baltimore.....	0	1	1	Milwaukee.....	1	1	.....
Massachusetts:							
Boston.....	0	4	2				
Chicopee.....	0	1	1				

DIPHTHERIA.

See p. 2909; also Telegraphic weekly reports from States, p. 2898, and Monthly summaries by States, p. 2902.

INFLUENZA.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Alabama:			District of Columbia:		
Montgomery.....		1	Washington.....	1	1
Arkansas:			Florida:		
Little Rock.....	1	.....	Tampa.....	4	.....
California:			Georgia:		
San Diego.....	1	.....	Atlanta.....	3	.....
San Francisco.....	3	.....	Savannah.....	.....	1
Colorado:			Illinois:		
Denver.....		1	Chicago.....	19	3

¹ See Public Health Reports, Nov. 18, 1921, p. 2849.

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

INFLUENZA—Continued.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Kansas:			New York:		
Wichita.....	1	1	Albany.....	5	.....
Kentucky:			Buffalo.....	1	.....
Lexington.....	1	.....	New York.....	20	8
Louisiana:			North Carolina:		
New Orleans.....	6	4	Greensboro.....	1	.....
Maryland:			Ohio:		
Baltimore.....	8	.....	Cleveland.....	2	.....
Cumberland.....	2	.....	Pennsylvania:		
Massachusetts:			Philadelphia.....	.....	1
Boston.....	1	.....	Rhode Island:		
Lynn.....	1	.....	Providence.....	1	.....
Saugus.....	4	.....	South Dakota:		
Michigan:			Sioux Falls.....	1	.....
Detroit.....	1	.....	Tennessee:		
Grand Rapids.....	1	.....	Memphis.....	.....	1
Hamtramck.....	1	.....	Virginia:		
Minnesota:			Danville.....	2	.....
Minneapolis.....	.....	2	Roanoke.....	3	.....
New Jersey:			West Virginia:		
Bloomfield.....	1	.....	Huntington.....	.....	1
Jersey City.....	1	.....	Wisconsin:		
Kearny.....	6	.....	Kenosha.....	1	.....
Montclair.....	3	.....		
Newark.....	7	.....		
Paterson.....	1	.....		

LETHARGIC ENCEPHALITIS.

California:					
Sacramento.....	1	.....		

MALARIA.

Alabama:			Louisiana:		
Tuscaloosa.....	1	.....	New Orleans.....	3	.....
Arkansas:			Maryland:		
Ft. Smith.....	5	2	Baltimore.....	1	.....
Little Rock.....	4	.....	Michigan:		
California:			Ann Arbor.....	1	.....
Sacramento.....	1	.....	New Jersey:		
Florida:			East Orange.....	1	.....
Tampa.....	5	.....	Jersey City.....	1	.....
Georgia:			Oregon:		
Atlanta.....	.....	1	Portland.....	.....	1
Augusta.....	1	.....	Tennessee:		
Illinois:			Memphis.....	1	1
Chicago.....	1	.....	Texas:		
Kansas:			Dallas.....	2	1
Lawrence.....	1	.....	Houston.....	.....	1

MEASLES.

See p. 2909; also Telegraphic weekly reports from States, p. 2898, and Monthly summaries by States, p. 2902.

PELLAGRA.

Alabama:			Massachusetts:		
Birmingham.....	1	1	Boston.....	1	.....
Mobile.....	.....	1	Ohio:		
California:			East Cleveland.....	1	.....
Los Angeles.....	1	1	Texas:		
Sacramento.....	1	.....	Waco.....	.....	1
Louisiana:					
New Orleans.....	1	1			

PNEUMONIA (ALL FORMS)

Alabama:			California:		
Birmingham.....	.....	7	Alameda.....	.....	1
Montgomery.....	.....	4	Bakersfield.....	.....	1
Arkansas:			Los Angeles.....	29	2
Little Rock.....	1	.....	Oakland.....	2	1
			Riverside.....	.....	1

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

PNEUMONIA (ALL FORMS)—Continued.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
California—Continued.			Massachusetts—Continued.		
Sacramento.....		1	Lowell.....		4
San Diego.....	2	1	Lynn.....	2	1
San Francisco.....	11	4	Malden.....	1	
Stockton.....	3		Medford.....		2
Colorado:			Melrose.....	3	2
Denver.....		7	Methuen.....	1	
Connecticut:			New Bedford.....	1	1
Bridgeport.....		4	Newton.....		2
Fairfield.....		1	Norwood.....		2
Greenwich.....		1	Quincy.....	2	
Meriden.....	1		Saugus.....		1
New Haven.....		2	Somerville.....	2	1
New London.....	1		Springfield.....	1	
Delaware:			Winthrop.....	1	
Wilmington.....		2	Worcester.....		4
District of Columbia:			Michigan:		
Washington.....		14	Detroit.....	36	22
Georgia:			Flint.....		1
Atlanta.....		7	Grand Rapids.....	8	4
Savannah.....		2	Hamtramck.....		2
Idaho:			Jackson.....	4	2
Pocatello.....		3	Kalamazoo.....	2	
Illinois:			Pontiac.....	1	
Aurora.....		4	Port Huron.....	2	
Blue Island.....		1	Sault Ste. Marie.....	1	
Chicago.....	143	30	Minnesota:		
Chicago Heights.....		2	Duluth.....		2
Cicero.....	2		Minneapolis.....		4
Danville.....	2		St. Paul.....		6
Decatur.....		1	Missouri:		
East St. Louis.....		2	Independence.....		1
Elgin.....		1	Kansas City.....		15
Galesburg.....		2	St. Joseph.....		4
Jacksonville.....		1	Springfield.....		3
Kewanee.....	3	2	Montana:		
Mattoon.....		2	Butte.....		3
Oak Park.....	1		Great Falls.....		1
Peoria.....		2	Nebraska:		
Rock Island.....		1	Omaha.....		10
Indiana:			Nevada:		
Fort Wayne.....		2	Reno.....	1	
Gary.....		2	New Jersey:		
Hammond.....		1	Belleville.....	2	
Indianapolis.....		13	Bloomfield.....	2	
Kokomo.....		1	Clifton.....	1	
La Fayette.....		1	East Orange.....	5	2
Logansport.....		1	Elizabeth.....		3
Marion.....		2	Garfield.....	1	
Muncie.....		2	Gloucester City.....	1	
Terre Haute.....		1	Hackensack.....	2	
Kansas:			Harrison.....	1	
Kansas City.....	3		Hoboken.....		2
Topeka.....		1	Jersey City.....	9	
Kentucky:			Kearny.....	4	1
Covington.....		4	Morristown.....		1
Lexington.....		2	Newark.....	60	8
Louisville.....	5	2	Passaic.....		1
Louisiana:			Trenton.....	1	
Monroe.....		1	West Hoboken.....		1
New Orleans.....		7	West New York.....	3	
Maine:			West Orange.....		1
Auburn.....		2	New Mexico:		
Bangor.....	1		Albuquerque.....		1
Biddeford.....		1	New York:		
Maryland:			Albany.....	16	
Baltimore.....	20	13	Buffalo.....	7	6
Cumberland.....	2		Cohoes.....	1	
Massachusetts:			Elmira.....		1
Beverly.....	3	1	Geneva.....		2
Boston.....	24	15	Hornell.....	2	1
Cambridge.....		6	Jamestown.....		1
Everett.....	4		Lackawanna.....	1	
Fall River.....	2	1	Middletown.....	1	
Greenfield.....		1	Mount Vernon.....	1	
Haverhill.....	2		Newburgh.....		1
Holyoke.....	2		New York.....	227	117
Lawrence.....		1	Peekskill.....	1	

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

PNEUMONIA (ALL FORMS)—Continued.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
New York—Continued.			Pennsylvania:		
Poughkeepsie.....	1	.....	Philadelphia.....	48	25
Rochester.....	13	4	Rhode Island:		
Rome.....	.....	1	Providence.....	.....	3
Schenectady.....	.....	2	South Carolina:		
Syracuse.....	4	3	Charleston.....	.....	2
Troy.....	3	2	Tennessee:		
Watervliet.....	.....	1	Memphis.....	.....	11
White Plains.....	5	.....	Nashville.....	.....	4
Yonkers.....	.....	4	Texas:		
North Carolina:			Beaumont.....	.....	2
Charlotte.....	.....	3	Dallas.....	4	2
Salisbury.....	.....	1	Houston.....	.....	2
Winston-Salem.....	.....	4	Virginia:		
Ohio:			Norfolk.....	.....	1
Akron.....	4	.....	Petersburg.....	.....	2
Ashtabula.....	.....	1	Portsmouth.....	.....	2
Bucyrus.....	.....	1	Richmond.....	.....	2
Canton.....	.....	1	Roanoke.....	2	.....
Cincinnati.....	.....	7	West Virginia:		
Cleveland.....	21	.....	Huntington.....	.....	1
Columbus.....	.....	4	Parkersburg.....	.....	2
Dayton.....	1	.....	Wheeling.....	.....	4
Hamilton.....	.....	1	Wisconsin:		
Lakewood.....	.....	1	Janesville.....	.....	1
Lima.....	.....	1	Oshkosh.....	.....	2
Portsmouth.....	.....	2	Racine.....	.....	1
Toledo.....	.....	4			
Youngstown.....	.....	3			
Zanesville.....	.....	1			

POLIOMYELITIS (INFANTILE PARALYSIS).

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for pre- vious years.	Week ended Nov. 5, 1921.		City.	Median for pre- vious years.	Week ended Nov. 5, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
California:				Missouri:			
San Bernardino.....	.....	1	.....	Kansas City.....	0	1	.....
San Francisco.....	0	3	1	New Jersey:			
Connecticut:				Elizabeth.....	0	.....	1
Bridgeport.....	0	1	.....	Jersey City.....	0	1	.....
New Haven.....	0	1	.....	New York:			
Illinois:				Albany.....	0	1	.....
Alton.....	0	1	.....	Buffalo.....	0	1	2
Chicago.....	2	4	2	New York.....	5	17	6
Kansas:				Rochester.....	0	1	.....
Topeka.....	0	2	.....	Ohio:			
Maryland:				Cleveland.....	0	1	.....
Baltimore.....	0	5	.....	Oregon:			
Massachusetts:				Portland.....	0	1	.....
Amesbury.....	0	1	.....	Utah:			
Boston.....	1	.....	1	Salt Lake City.....	0	.....	1
Brainree.....	.....	1	.....	Vermont:			
Chelsea.....	0	1	.....	Burlington.....	0	1	.....
Norwood.....	.....	1	.....	Washington:			
Michigan:				Aberdeen.....	.....	1	.....
Detroit.....	0	1	1	Seattle.....	0	2	.....
Minnesota:				Spokane.....	.....	2	.....
St. Paul.....	0	1	.....	Tacoma.....	0	1	.....

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

RABIES IN ANIMALS.

City.	Cases.
California:	
Los Angeles.....	1
Virginia:	
Petersburg.....	1

RABIES IN MAN.

City.	Cases.	Deaths.
Kentucky:		
Louisville.....	1	1

SCARLET FEVER.

See p. 2909; also Telegraphic weekly reports from States, p. 2898, and Monthly summaries by States, p. 2902.

SMALLPOX.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for pre- vious years.	Week ended Nov. 5, 1921.		City.	Median for pre- vious years.	Week ended Nov. 5, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
Alabama:				Montana:			
Mobile.....	0	1	.....	Great Falls.....	0	3	.....
California:				Nevada:			
Los Angeles.....	1	11	.....	Reno.....	0	1	.....
Oakland.....	0	5	.....	New York:			
San Francisco.....	0	3	.....	New York.....	0	1	.....
Colorado:				North Dakota:			
Denver.....	5	3	.....	Grand Forks.....	3	1	.....
Idaho:				Ohio:			
Pocatello.....	0	1	.....	Cincinnati.....	0	1	.....
Illinois:				Dayton.....	1	2	.....
Chicago.....	1	1	.....	Fremont.....	0	6	.....
Quincy.....	0	5	.....	Oklahoma:			
Indiana:				Oklahoma City.....	0	1	.....
Gary.....	0	4	.....	Oregon:			
Iowa:				Portland.....	2	3	.....
Council Bluffs.....	0	1	.....	Utah:			
Des Moines.....	1	1	.....	Salt Lake City.....	3	10	.....
Mason City.....	0	2	.....	Washington:			
Muscatine.....	0	4	.....	Aberdeen.....	0	1	.....
Sioux City.....	2	2	.....	Bellingham.....	0	2	.....
Waterloo.....	.....	4	.....	Seattle.....	0	1	.....
Kansas:				Spokane.....	5	18	.....
Hutchinson.....	0	6	.....	Tacoma.....	0	12	.....
Kansas City.....	0	5	.....	Vancouver.....	0	3	.....
Maine:				West Virginia:			
Waterville.....	1	1	.....	Bluefield.....	0	2	.....
Michigan:				Wisconsin:			
Detroit.....	2	3	.....	Appleton.....	0	1	.....
Minnesota:				Manitowoc.....	0	4	.....
Minneapolis.....	4	3	.....			
St. Paul.....	3	7	.....			
Missouri:							
Independence.....	0	1	.....			
Kansas City.....	1	38	9				

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

TETANUS.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
California:			Pennsylvania:		
Los Angeles.....	1	.....	Philadelphia.....	1	1
San Francisco.....	1	.....	Texas:		
Kansas:			Dallas.....	1	1
Pittsburg.....	.....	1	Virginia:		
Louisiana:			Danville.....	.....	1
New Orleans.....	1	.....	Petersburg.....	1	.....
New York:			Richmond.....	1	1
New York.....	2	1	West Virginia:		
Ohio:			Wheeling.....	.....	1
Cleveland.....	1	.....		

TUBERCULOSIS.

See p. 2909; also Telegraphic weekly reports from States, p. 2898.

TYPHOID FEVER.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for pre- vious years.	Week ended Nov. 5, 1921.		City.	Median for pre- vious years.	Week ended Nov. 5, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
Alabama:				Kansas—Continued.			
Birmingham.....	3	1	.....	Lawrence.....	0	2	.....
Mobile.....	1	2	.....	Topeka.....	1	1	.....
Arkansas:				Kentucky:			
Fort Smith.....	3	1	.....	Covington.....	1	1	1
California:				Lexington.....	0	1	.....
Los Angeles.....	5	.....	1	Louisville.....	2	3	2
Sacramento.....	1	1	.....	Louisiana:			
San Bernardino.....	0	.....	1	Monroe.....	0	.....	1
San Diego.....	0	.....	1	New Orleans.....	3	2	2
San Francisco.....	2	2	.....	Maine:			
Santa Cruz.....	1	1	.....	Portland.....	1	1	.....
Colorado:				Maryland:			
Denver.....	0	3	.....	Baltimore.....	16	4	2
Pueblo.....	2	1	.....	Cumberland.....	0	1	1
Trinidad.....	0	1	.....	Massachusetts:			
Connecticut:				Arlington.....	0	2	.....
Bridgeport.....	0	1	.....	Boston.....	3	3	.....
Greenwich.....	0	1	.....	Cambridge.....	1	1	.....
New Haven.....	2	1	.....	Lawrence.....	0	1	.....
Delaware:				Lynn.....	0	1	.....
Wilmington.....	1	2	.....	Watertown.....	0	1	.....
Georgia:				Worcester.....	0	.....	1
Atlanta.....	0	1	.....	Michigan:			
Idaho:				Detroit.....	8	9	.....
Pocatello.....	0	1	.....	Flint.....	1	1	.....
Illinois:				Holland.....	0	1	.....
Aurora.....	1	2	.....	Jackson.....	0	1	.....
Champaign.....	0	1	.....	Kalamazoo.....	0	2	.....
Chicago.....	10	11	1	Marquette.....	0	1	.....
Danville.....	0	2	.....	Minneapolis.....	3	1	.....
Decatur.....	0	1	.....	Minnesota:			
La Salle.....	0	1	.....	St. Paul.....	1	4	1
Indiana:				Virginia.....	0	1	.....
Bloomington.....	0	1	.....	Missouri:			
Hammond.....	0	1	.....	Kansas City.....	1	1	2
Huntington.....	0	2	.....	St. Louis.....	10	3	.....
Kokomo.....	0	1	.....	Montana:			
Richmond.....	1	2	.....	Great Falls.....	0	2	.....
South Bend.....	0	1	.....	New Hampshire:			
Kansas:				Portsmouth.....	0	1	.....
Coffeyville.....	1	1	.....	New Jersey:			
Fort Scott.....	0	3	.....	East Orange.....	0	1	.....
Hutchinson.....	0	1	.....	Jersey City.....	1	1	.....
Kansas City.....	0	1	.....			

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

TYPHOID FEVER—Continued.

City.	Median for pre- vious years.	Week ended Nov. 5, 1921.		City.	Median for pre- vious years.	Week ended Nov. 5, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
New York:				Pennsylvania—Contd.			
Albany.....	3	2	.....	New Castle.....	0	2	.....
Buffalo.....	1	2	1	Philadelphia.....	12	6	.....
Lockport.....	0	1	.....	Pittsburgh.....	2	1	.....
New York.....	31	18	2	Scranton.....	0	1	.....
Peekskill.....	0	1	.....	York.....	0	1	.....
Rochester.....	1	1	.....	Tennessee:			
Syracuse.....	0	3	.....	Nashville.....	4	2	.....
Watertown.....	0	3	.....	Texas:			
North Carolina:				El Paso.....	3	4	.....
Salisbury.....			1	Utah:			
Ohio:				Salt Lake City.....	2	3	1
Akron.....	1	3	.....	Vermont:			
Ashtabula.....	1	1	.....	Rutland.....	0	1	.....
Barberton.....	0	1	.....	Virginia:			
Canton.....	0	1	1	Alexandria.....	0	.....	1
Cleveland.....	4	7	.....	Danville.....	0	1	.....
Cleveland Heights.....	.....	3	.....	Petersburg.....	0	2	.....
Columbus.....	1	2	1	Portsmouth.....	0	5	.....
East Cleveland.....	0	1	.....	Richmond.....	3	1	1
Middletown.....	0	1	.....	Washington:			
Portsmouth.....	0	1	.....	Seattle.....	0	2	.....
Sandusky.....	0	2	.....	Tacoma.....	0	1	.....
Toledo.....	2	9	2	West Virginia:			
Youngstown.....	2	2	2	Fairmont.....	0	1	.....
Pennsylvania:				Parkersburg.....	0	2	.....
Canonsburg.....	.....	2	.....	Wisconsin:			
Connellsville.....	0	1	.....	Appleton.....	0	11	.....
Harrisburg.....	0	1	.....	Kenosha.....	0	1	.....
Jeannette.....	.....	1	.....	Milwaukee.....	1	2	.....
Johnstown.....	0	1	.....	Sheboygan.....	1	1	.....

YELLOW FEVER.

City.	Cases.	Deaths.
California:		
Los Angeles.....	1	1

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Alabama:										
Birmingham.....	178,270	47	7	1	.....	.....	4	.....	6	3
Gadsden.....	14,737	.....	3	.....	.....	.....	3	.....	.....	.....
Mobile.....	60,151	16	.....	.....	.....	.....	4	.....	1	3
Montgomery.....	43,464	13	6	.....	.....	.....	.....	.....	1	1
Tuscaloosa.....	11,996	.....	6	.....	.....	.....	1	.....	1	.....
Arizona:										
Tucson.....	20,292	6	.....	.....	.....	.....	.....	.....	.....	1
Arkansas:										
Fort Smith.....	28,811	18	2	.....	.....	.....	.....	.....	1	.....
Hot Springs.....	11,695	2	1	.....	.....	.....	2	.....	.....	.....
Little Rock.....	64,997	.....	4	.....	.....	.....	2	.....	.....	.....
California:										
Alameda.....	28,806	3	1	.....	.....	.....	.....	.....	.....	.....
Bakersfield.....	18,638	11	2	.....	1	.....	.....	.....	1	2
Eureka.....	12,923	4	2	.....	.....	.....	.....	.....	.....	.....
Long Beach.....	55,593	6	2	.....	.....	.....	.....	.....	1	1
Los Angeles.....	576,673	159	104	1	6	.....	25	.....	38	16

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
California—Continued.										
Oakland.....	216,361	57	23	1			10		3	3
Pasadena.....	45,354	8	10						1	2
Richmond.....	16,843	0	4							
Riverside.....	19,341	7	4						2	2
Sacramento.....	65,857	19	10	1			2		1	1
San Bernardino.....	18,721	6	1							1
San Diego.....	74,683	30	4	1			2		6	5
San Francisco.....	508,410	139	60				5		22	16
Santa Ana.....	15,485	2	4							
Santa Barbara.....	19,441	6	2							
Santa Cruz.....	10,917	2	1							3
Stockton.....	40,296	10	20	2			22			
Vallejo.....	21,107	2	1				1			
Colorado:										
Denver.....	256,369	74	14	2	1		9			10
Pueblo.....	42,908		10	1			3			
Trinidad.....	10,906		3							
Connecticut:										
Bridgeport.....	143,538	30	15	1			7		2	1
Bristol.....	20,620	1								
Derby.....	11,238	3	1							
Fairfield.....	11,475	2	1				1		1	
Greenwich.....	22,123				1		1			
Meriden.....	29,842		4				2		3	1
Milford.....	10,193	2	4							
New Haven.....	162,519	38	7				6		6	2
New London.....	25,688	8	1						1	
Norwalk.....	27,700	5								1
Norwich.....	29,685	4					1			
Stonington.....	10,236	1								
Delaware:										
Wilmington.....	110,168	21	4				4			2
District of Columbia:										
Washington.....	437,571	116	49	4			10		29	5
Florida:										
Tampa.....	51,252	6	4						2	2
Georgia:										
Atlanta.....	200,616	51	16	3			8			2
Augusta.....	52,548		2				3			
Brunswick.....	14,413	3								
La Grange.....	17,038	1	2							
Macon.....	52,995	8	4				1			
Rome.....	13,232		3				3			
Savannah.....	83,232	35	2				6			2
Valdosta.....	10,783	0					2			
Idaho:										
Pocatella.....	15,001	3	7		1					
Illinois:										
Alton.....	24,682	7					1		4	
Aurora.....	38,297	16	12	1	1		2		5	
Bloomington.....	28,725		8				1		2	1
Blue Island.....	11,424	2	12	1						
Centralia.....	12,491	9								
Chicago.....	2,701,705	553	293	15	17	1	112	3	224	34
Chicago Heights.....	19,651	2								
Cicero.....	44,995	8	14		1		5			1
Danville.....	33,750	11	3				4		2	
Decatur.....	43,818	7	19				6			2
East St. Louis.....	66,740	12	6				5			
Elgin.....	27,454	4	5				1			
Evanston.....	37,215	4	7				5			
Freeport.....	19,669	3	5		1		6			
Galesburg.....	23,834	8								1
Jacksonville.....	15,713	9	1							
Kewanee.....	16,023		3		1		2		1	
La Salle.....	13,059	0	1							
Mattoon.....	13,552	6	13						2	1
Oak Park.....	39,830		3		1		1			
Pekin.....	12,081		4				1			
Peoria.....	73,121	21	24				3			1
Quincy.....	35,978	11	1				4		3	1
Rock Island.....	35,177	12								1
Springfield.....	50,183	17	5				3			1

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Indiana:										
Bloomington.....	11,595	2	1							1
Elkhart.....	24,277	4	1							
Fort Wayne.....	85,549	20	14				2			2
Frankfort.....	11,585	1	2							
Gary.....	55,378	22	9				4			
Hammond.....	36,004	8	5				6			
Huntington.....	14,000	4	8				5			
Indianapolis.....	314,194	73	68	1	21		11		8	9
Kokomo.....	30,067	3	1						1	1
La Fayette.....	22,486	7	5							1
Logansport.....	21,626	4	1				1			
Marion.....	23,747	6	3							
Mishawaka.....	15,195	5	5		1		1			1
Muncie.....	36,624	10	2	1			1		2	2
Richmond.....	26,765	3					1			
South Bend.....	70,983	7	2						4	
Terre Haute.....	66,083	18	34	1			4		1	
Iowa:										
Burlington.....	24,057	5	1							
Cedar Rapids.....	45,586	3	3				1			
Council Bluffs.....	36,162	4	10							
Davenport.....	56,727	1	1				4			
Des Moines.....	126,468	22	22				16			
Dubuque.....	39,141	6	6				8			
Marshalltown.....	15,731						2			
Mason City.....	20,065	5	1		1		4			
Muscatine.....	16,068	4					1			
Ottumwa.....	23,003						4			
Sioux City.....	71,227		33	1			8			
Waterloo.....	36,230	4	4				5			
Kansas:										
Atchison.....	12,630	3	3						1	
Coffeyville.....	13,452	3	2				1			
Fort Scott.....	10,693	3	11				2			
Hutchinson.....	23,298		16	1			1			
Kansas City.....	101,177		39				7		2	
Lawrence.....	12,456	2	3	1			3			
Leavenworth.....	16,912	8	8				1			
Parsons.....	16,028	5	1				1			
Pittsburg.....	18,062	5	10							
Salina.....	15,085	5	2							
Topeka.....	50,022	7	49	1	1		3		2	
Wichita.....	72,128	19	45				32			
Kentucky:										
Covington.....	57,121	18	4		1		6			2
Lexington.....	41,534	18	6						1	2
Louisville.....	234,891	47	49		5		4		11	4
Owensboro.....	17,424		28				1		1	
Paducah.....	24,735		4				2			
Louisiana:										
Monroe.....	12,675	4								
New Orleans.....	387,219	130	15		2		4		23	17
Maine:										
Auburn.....	16,985	8	1				4			1
Bangor.....	25,978		1				1		2	
Bath.....	14,731	3								
Biddeford.....	18,006	3								
Lewiston.....	31,791	7	1						3	
Portland.....	66,272	12	19	1			11			2
Waterville.....	13,351		1				1			
Maryland:										
Baltimore.....	733,826	185	35	2	8		33		13	12
Cumberland.....	26,837	8	5				11			1
Massachusetts:										
Adams.....	12,967	2					8			
Amesbury.....	10,026	5								
Arlington.....	18,665	1			1					
Attleboro.....	19,731	4								1
Belmont.....	10,749	4	4	1						
Beverly.....	22,561	5					2			
Boston.....	748,080	176	70	1	48		39	1	37	18

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Massachusetts—Continued.										
Braintree.....	10,580	1								
Brookline.....	37,743	7	5				2			
Cambridge.....	109,694	31	6				7		6	7
Chelsea.....	43,184	8	1		1		4		2	
Chicopee.....	36,214	3	10				4			
Clinton.....	12,979	6								
Danvers.....	11,108		4							
Dedham.....	10,792	3								
Easthampton.....	11,261		1		1					
Everett.....	40,120	7					4		1	
Fall River.....	120,485	28	1				3		8	2
Frammingham.....	17,033	2	1							
Gardner.....	16,971	4					1		2	2
Greenfield.....	15,462	2	1				1			
Haverhill.....	53,884	11	4				1			
Holyoke.....	60,203	16	2	1	1				4	1
Lawrence.....	94,270	23	5	1	2				3	3
Leominster.....	19,744	4							1	1
Lowell.....	112,479	28	4				1		4	2
Lynn.....	99,148	20	9	1	1				4	2
Malden.....	49,103	10	8				1		1	1
Medford.....	39,038	9	1		14		1		3	1
Melrose.....	18,204	6	3						1	
Methuen.....	15,189	4								1
Natick.....	10,907								2	
New Bedford.....	121,217	25	9	1			4		4	3
Newburyport.....	15,618	4								
Newton.....	46,054	9	12						1	1
North Adams.....	22,282	3	1							
Northampton.....	21,951	11	7						1	
Norwood.....	12,627	7							1	
Pittsfield.....	41,751	11	4				2			
Plymouth.....	13,045	2								
Quincy.....	47,876	5	1		5		2		2	
Salem.....	42,529		1						2	
Saugus.....	10,874	2	2				1			
Somerville.....	93,091	31	7		2			1	3	
Southbridge.....	14,245	6					7			
Springfield.....	129,563	19	8				6		1	1
Taunton.....	37,137	6	4				1			
Wakefield.....	13,025	5	2				1			
Watertown.....	21,457	0			1					
Webster.....	13,258	4								
West Springfield.....	13,443	3								1
Westfield.....	18,604	3	2							
Weymouth.....	15,057	2								
Winthrop.....	15,455	1			1					
Woburn.....	16,774	3								
Worcester.....	179,754	41	5	1			8		7	4
Michigan:										
Ann Arbor.....	19,516	16	2	1			1		1	
Benton Harbor.....	12,233	7	2							
Detroit.....	993,739	189	94	9	39		58	2	38	16
Flint.....	91,599	16	21	2			20			6
Grand Rapids.....	137,634	25	12	2			2		13	
Hamtramck.....	48,615	6	6						3	
Holland.....	12,166	1	2				3			
Ironwood.....	15,739	2					1			1
Jackson.....	48,374	6	6				14		3	
Kalamazoo.....	48,858	20	16	1			9		5	1
Marquette.....	12,718	2			1					1
Pontiac.....	34,273	5	2		1		2		1	2
Port Huron.....	25,944	9	2							
Sault Ste. Marie.....	12,696	3					1			
Minnesota:										
Austin.....	10,118	2								1
Duluth.....	98,917	14	11	1	1		2			
Hibbing.....	15,089	6					1			
Minneapolis.....	380,582	63	64	2	2		53		32	6
Rochester.....	13,722	11							1	
St. Paul.....	234,585	50	18		1		24		12	
Winona.....	19,143	4	2		1		8	1		

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Missouri:										
Cape Girardeau.....	10,252	7	2	.....	.....	.....	1	.....	.....	1
Independence.....	11,686	7	6	.....	.....	.....	1	.....	1	1
Joplin.....	29,855	.....	3	.....	.....	.....	1	.....	.....	.....
Kansas City.....	324,410	107	61	3	2	.....	12	.....	1	6
St. Joseph.....	77,939	43	14	1	.....	.....	13	.....	.....	2
St. Louis.....	772,897	174	84	6	1	.....	14	.....	34	13
Springfield.....	39,631	11	.....	1	.....	.....	.....	.....	.....	1
Montana:										
Billings.....	15,100	2	.....	.....	.....	.....	.....	.....	.....	.....
Butte.....	41,611	13	1	.....	.....	.....	.....	.....	1	.....
Great Falls.....	24,121	7	4	.....	.....	.....	2	.....	2	1
Missoula.....	12,668	7	.....	.....	.....	.....	.....	.....	.....	.....
Nebraska:										
Lincoln.....	54,934	8	4	.....	.....	.....	1	.....	1	.....
Omaha.....	191,601	51	47	1	3	.....	2	.....	.....	1
Nevada:										
Reno.....	12,016	5	.....	.....	.....	.....	1	.....	.....	.....
New Hampshire:										
Borlin.....	16,104	3	.....	.....	1	.....	.....	.....	.....	.....
Concord.....	22,167	9	.....	.....	.....	.....	3	.....	.....	.....
Dover.....	13,029	1	.....	.....	.....	.....	.....	.....	.....	.....
Keene.....	11,210	2	.....	.....	.....	.....	.....	.....	.....	.....
Nashua.....	28,379	5	1	.....	.....	.....	.....	.....	.....	.....
Portsmouth.....	13,569	.....	4	1	1	.....	1	.....	.....	.....
New Jersey:										
Asbury Park.....	12,400	3	.....	.....	.....	.....	1	.....	.....	.....
Atlantic City.....	50,682	8	.....	.....	.....	.....	.....	.....	3	.....
Bayonne.....	76,754	.....	2	.....	.....	.....	3	.....	2	.....
Belleville.....	15,660	.....	.....	.....	.....	.....	.....	.....	1	.....
Bloomfield.....	22,019	2	2	.....	11	.....	2	.....	.....	.....
Clifton.....	26,470	1	4	.....	.....	.....	1	.....	.....	.....
East Orange.....	50,710	7	.....	.....	.....	.....	1	.....	.....	.....
Elizabeth.....	95,682	.....	15	.....	6	.....	10	.....	2	7
Englewood.....	11,627	1	.....	.....	.....	.....	.....	.....	.....	.....
Garfield.....	19,381	1	1	.....	.....	.....	.....	.....	.....	.....
Gloicester City.....	12,162	.....	7	.....	.....	.....	.....	.....	1	.....
Hackensack.....	17,667	2	1	.....	1	.....	.....	.....	1	.....
Harrison.....	15,721	.....	.....	.....	.....	.....	.....	.....	1	.....
Hoboken.....	68,166	13	2	.....	1	.....	4	.....	1	1
Irvington.....	25,480	.....	1	.....	.....	.....	2	.....	.....	.....
Jersey City.....	297,864	.....	19	.....	6	.....	4	.....	19	.....
Kearny.....	26,724	5	.....	.....	1	.....	.....	.....	2	.....
Montclair.....	28,810	2	.....	.....	.....	.....	1	.....	1	.....
Morristown.....	12,548	6	.....	.....	.....	.....	3	.....	1	1
New Brunswick.....	32,779	6	1	.....	.....	.....	.....	.....	.....	.....
Newark.....	414,216	75	14	.....	13	.....	29	.....	16	6
Orange.....	33,268	9	1	.....	.....	.....	6	.....	.....	.....
Passaic.....	63,824	8	2	.....	.....	.....	3	.....	1	2
Paterson.....	135,886	.....	6	.....	1	.....	.....	.....	9	.....
Perth Amboy.....	41,707	8	5	.....	2	.....	1	1	.....	.....
Phillipsburg.....	16,923	3	2	1	.....	.....	.....	.....	1	.....
Plainfield.....	27,700	7	3	.....	.....	.....	2	.....	.....	.....
Rahway.....	11,042	5	4	.....	.....	.....	.....	.....	.....	.....
Summit.....	10,174	1	.....	.....	.....	.....	.....	.....	.....	.....
Trenton.....	119,289	.....	9	.....	1	.....	2	.....	3	3
West Hoboken.....	40,068	4	1	.....	.....	.....	2	.....	1	.....
West New York.....	29,926	5	.....	.....	.....	.....	.....	.....	1	.....
West Orange.....	15,573	2	.....	.....	.....	.....	1	.....	.....	.....
New Mexico:										
Albuquerque.....	15,157	9	2	1	.....	.....	.....	.....	4	2
New York:										
Albany.....	113,544	.....	11	.....	.....	.....	2	.....	4	.....
Auburn.....	36,192	8	2	.....	.....	.....	1	.....	.....	.....
Buffalo.....	506,775	123	33	5	1	.....	26	3	17	8
Cohoes.....	22,687	7	.....	.....	2	.....	.....	.....	.....	.....
Elmira.....	45,505	11	3	1	.....	.....	1	.....	1	.....
Geneva.....	14,648	3	.....	.....	.....	.....	.....	.....	.....	.....
Glens Falls.....	16,628	5	.....	.....	.....	.....	.....	.....	.....	.....
Hornell.....	15,025	2	.....	.....	.....	.....	.....	.....	1	.....
Ithaca.....	17,004	6	6	.....	.....	.....	.....	.....	.....	1
Jamestown.....	28,917	7	7	.....	1	.....	1	.....	.....	1
Lockawanna.....	17,918	5	3	.....	.....	.....	1	.....	1	.....

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
New York—Continued.										
Little Falls.....	13,029	2					1			
Lockport.....	21,308	4	2		1		1			
Middletown.....	18,420		1		1		2			
Mount Vernon.....	42,726	9	2						1	
Newburgh.....	30,366	8								
New York.....	5,621,151	1,181	203	17	68	2	146	9	1269	199
Niagara Falls.....	50,760	10	3	1			10		3	
North Tonawanda.....	15,482	4	5							
Ogdensburg.....	14,609	9								
Olean.....	20,506	2	5				1			
Peekskill.....	15,868	3	1						2	
Port Chester.....	16,573	2	1		1		6			
Poughkeepsie.....	35,000	12	2	1						
Rochester.....	295,750	74	28	1			3		14	2
Rome.....	26,341	6	1							
Saratoga Springs.....	13,181	3								
Schenectady.....	88,723	17	3	1			7	1	2	
Syracuse.....	171,717	43	52	2	4		21			1
Troy.....	72,013	19	2				1		4	
Watertown.....	31,285	9							1	1
Watervliet.....	16,073	4								
White Plains.....	21,031	6					1		1	
Yonkers.....	109,226	22	5	1	4		8			
North Carolina:										
Charlotte.....	46,338	18					4		2	3
Durham.....	21,719	1	6				1			
Greensboro.....	19,961	4								
Raleigh.....	24,418	6	2				1			1
Rocky Mount.....	12,742	6								1
Salisbury.....	13,884	8								1
Winston-Salem.....	48,395	18	6				6	1	3	
North Dakota:										
Fargo.....	21,961	0					1			
Grand Forks.....	14,010		2							
Ohio:										
Akron.....	208,435	34	24		1		25			
Ashtabula.....	22,082	4	1							
Barberton.....	18,811	6	2						1	1
Bucyrus.....	10,425	1								
Ca. ton.....	87,091	27	21	3			4			2
Chillicothe.....	15,831	3	4							
Cincinnati.....	401,247	104	41	2	12		9	1	12	7
Cleveland.....	796,836		63		14		61			
Cleveland Heights.....	15,236						1			
Columbus.....	237,031	59	42	1			11		4	3
Coshocton.....	10,847		1							
Dayton.....	152,559	23	4		1		4			
East Cleveland.....	27,252	0								
Findlay.....	17,021	3					2		1	
Fremont.....	12,468	1	1							
Hamilton.....	39,675	7	9				3		2	
Ironton.....	14,007	2								
Kenmore.....	12,683		2							
Lakewood.....	41,732	6	2				7			
Lancaster.....	14,706	7	3				1			1
Lima.....	41,506	6	23		1					
Lorain.....	37,285		5	1			4		1	
Mansfield.....	27,824	1	2							
Marion.....	27,891		10				5			
Middletown.....	23,594	1	6	1			1			
Newark.....	26,718	12	19	1			8	1		1
Niles.....	13,080	1								
Norwood.....	24,966	4								
Piqua.....	15,044	2							1	
Portsmouth.....	33,011	10	9	2	1		1			1
Sandusky.....	22,897	4					2		1	
Springfield.....	60,840	16	52	1	1		5			
Steubenville.....	28,508	6							2	
Toledo.....	243,109	71	65	4			4			6
Youngstown.....	132,358	32	7				12		2	
Zanesville.....	29,569	10	2				3			

Pulmonary tuberculosis only.

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Oklahoma:										
Oklahoma City.....	91,258	18	11	2			6			1
Tulsa.....	72,075		6				4			
Oregon:										
Portland.....	258,288	51	42	1	2		13		4	5
Pennsylvania:										
Allentown.....	73,502		14				1		7	
Altoona.....	60,331		5							
Ambridge.....	12,730		4							
Berwick.....	12,181		2							
Bothleheim.....	50,358		5				2			
Braddock.....	20,879		1				3		1	
Butler.....	23,778						2			
Canonsburg.....	10,632		1				8			
Carbondale.....	18,640		1							
Carlisle.....	10,916		1							
Chester.....	58,030		1							
Connellsville.....	13,804		9		1		1			
Donora.....	14,131		1							
Dubois.....	13,681		1							
Duquesne.....	19,011		6				14			
Easton.....	33,813		1						2	
Erie.....	93,372		5				1		2	
Farrell.....	15,586		1		30		3			
Harrisburg.....	75,917		1							
Hazleton.....	32,277		1		1		1			
Jeannette.....	10,627		2							
Johnstown.....	67,327		11		4					
Lancaster.....	53,150		15				4			
Lebanon.....	24,643		2				2		4	
McKeesport.....	45,975		3		4		3		2	
McKee's Rocks.....	16,713		8							
Meadville.....	14,568						9			
Mount Carmel.....	17,469		1							
Nanticoke.....	22,614		2							
New Castle.....	44,938		2				18		1	
New Kensington.....	11,987		1				1			
Norristown.....	32,319		1				1			
North Braddock.....	14,928		2				1			
Oil City.....	21,274		2				2			
Old Forge.....	12,237		1						1	
Olyphant.....	10,236		1							
Philadelphia.....	1,823,158	415	64	6	3		121		64	39
Pittsburgh.....	588,193		20		3		12		21	
Pittston.....	18,497		1							
Plymouth.....	16,500		2							
Pottstown.....	17,431		1				18			
Pottsville.....	21,676		1		1					
Reading.....	107,784		17		2		1		10	
Scranton.....	137,783		5						6	
Shamokin.....	21,204		1				2			
Sharon.....	21,747		1		2		7			
Shenandoah.....	24,726		1							
Steelton.....	13,428		1						1	
Sunbury.....	15,721		4		1					
Uniontown.....	15,692		2							
Warren.....	14,256		4				1			
Washington.....	21,480		4				2		1	
Wilkes-Barre.....	73,833		10				3		3	
Williamsport.....	36,198		3				4			
Woodlawn.....	12,495		5				1			
York.....	47,512		5		1		2			
Rhode Island:										
Cranston.....	29,407	4	1							
Cumberland (town).....	10,077		1							
Newport.....	30,255	6	5				8			1
Pawtucket.....	64,248	4	2				2			
Providence.....	237,595	66	6		2		2			7
South Carolina:										
Charleston.....	67,957	18	5				6			2
Columbia.....	37,524		12				8			
South Dakota:										
Sioux Falls.....	25,176	4	1		1		3			

CITY REPORTS FOR WEEK ENDED NOV. 5, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Tennessee:										
Knoxville.....	77,818	.....	3	1	1	.....	.....	.....	2	2
Memphis.....	162,351	67	18	1	.....	.....	5	.....	1	4
Nashville.....	118,342	40	12	.....	.....	.....	2	.....	.....	1
Texas:										
Beaumont.....	40,422	7	.....	.....	.....	.....	.....	.....	.....	1
Corpus Christi.....	10,522	3	1	.....	.....	.....	.....	.....	.....	.....
Dallas.....	158,976	53	8	2	.....	.....	5	.....	1	1
El Paso.....	77,543	28	11	.....	.....	.....	8	.....	.....	2
Fort Worth.....	106,482	.....	2	.....	.....	.....	4	.....	1	.....
Galveston.....	44,255	8	3	.....	.....	.....	.....	.....	.....	.....
Houston.....	138,076	30	6	1	.....	.....	.....	.....	.....	.....
Waco.....	38,500	11	1	.....	.....	.....	.....	.....	.....	12
Utah:										
Salt Lake City.....	118,110	33	5	2	1	.....	15	.....	.....	1
Vermont:										
Burlington.....	22,779	6	7	.....	.....	.....	2	.....	.....	1
Rutland.....	14,954	2	.....	.....	1	.....	1	.....	.....	.....
Virginia:										
Alexandria.....	18,060	4	.....	.....	.....	.....	.....	.....	1	.....
Danville.....	21,539	6	2	1	17	.....	.....	.....	.....	.....
Lynchburg.....	29,956	5	7	.....	.....	.....	.....	.....	2	.....
Norfolk.....	115,777	.....	14	.....	.....	.....	1	.....	2	2
Petersburg.....	31,002	10	2	.....	.....	.....	.....	.....	.....	.....
Portsmouth.....	54,387	18	7	.....	.....	.....	.....	.....	1	2
Richmond.....	171,667	49	16	.....	1	.....	15	.....	4	3
Roanoke.....	50,842	14	16	.....	.....	.....	4	.....	1	1
Washington:										
Aberdeen.....	15,337	.....	2	.....	.....	.....	.....	.....	.....	.....
Seattle.....	315,652	.....	5	.....	.....	.....	2	.....	8	.....
Spokane.....	104,437	.....	6	.....	.....	.....	11	.....	.....	.....
Tacoma.....	96,965	.....	5	.....	1	.....	1	.....	3	.....
Vancouver.....	12,637	.....	.....	.....	.....	.....	1	.....	.....	.....
Walla Walla.....	15,503	.....	4	.....	.....	.....	.....	.....	.....	.....
Yakima.....	18,539	.....	.....	.....	1	.....	.....	.....	.....	.....
West Virginia:										
Bluefield.....	15,282	4	6	.....	.....	.....	2	.....	.....	.....
Charleston.....	39,608	6	7	.....	.....	.....	3	.....	.....	1
Fairmont.....	17,851	1	1	1	.....	.....	2	.....	.....	.....
Huntington.....	50,177	22	13	2	.....	.....	.....	.....	.....	2
Martinsburg.....	12,515	.....	1	.....	.....	.....	.....	.....	.....	.....
Moundsville.....	10,669	4	1	.....	.....	.....	6	.....	.....	.....
Parkersburg.....	20,050	5	7	.....	.....	.....	1	.....	.....	.....
Wheeling.....	54,322	20	8	2	1	.....	3	1	.....	.....
Wisconsin:										
Appleton.....	19,561	.....	2	.....	.....	.....	3	.....	.....	.....
Beloit.....	21,284	4	1	.....	.....	.....	.....	.....	1	.....
Eau Claire.....	20,880	.....	.....	.....	.....	.....	2	.....	.....	.....
Fond du Lac.....	23,427	3	2	.....	.....	.....	.....	.....	.....	.....
Green Bay.....	31,017	5	6	1	.....	.....	1	.....	.....	.....
Janesville.....	18,293	1	.....	.....	.....	.....	1	.....	.....	.....
Kenosha.....	40,472	2	12	.....	.....	.....	4	.....	.....	.....
La Crosse.....	30,363	.....	.....	.....	.....	.....	.....	.....	15	.....
Madison.....	38,378	.....	3	.....	.....	.....	1	.....	.....	.....
Milwaukee.....	457,147	.....	44	.....	3	.....	31	.....	13	.....
Oshkosh.....	33,162	7	5	.....	.....	.....	1	.....	.....	1
Racine.....	58,593	9	10	1	.....	.....	20	.....	.....	.....
Sheboygan.....	30,955	.....	7	.....	.....	.....	.....	.....	.....	.....
Stevens Point.....	11,371	.....	9	.....	.....	.....	.....	.....	.....	.....
Superior.....	39,624	6	.....	.....	.....	.....	10	.....	.....	.....
Wausau.....	18,661	.....	.....	.....	.....	.....	.....	.....	3	.....
Wyoming:										
Cheyenne.....	13,829	3	.....	.....	.....	.....	1	.....	.....	.....

FOREIGN AND INSULAR.

YELLOW FEVER ON VESSEL.

Steamship "Saramacca"—New Orleans—From Belize, British Honduras.

A fatal case of yellow fever was reported November 12, 1921, at New Orleans, La., on the steamship *Saramacca*, arriving from Belize, British Honduras.¹

BRITISH HONDURAS.

Yellow Fever—Stann Creek.

Under date of November 21, 1921, one case of yellow fever was reported at Stann Creek, British Honduras, 30 miles from Belize. Patient left Belize November 12 and was taken ill in Stann Creek November 13.

CUBA.

Beriberi.

During the period October 11–20, 1921, four cases of beriberi were reported in Cuba. Of these cases, two occurred among military stationed at Habana and two in Sagua la Grande, Santa Clara Province.

Status of Smallpox.

On October 20, 1921, 307 cases of smallpox were reported remaining in Cuba. The cases were distributed by Provinces as follows: Camaguey, 158 cases; Habana, 4; Oriente, 137; Santa Clara, 8. There were reported during the 10-day period ended October 20, 1921, 10 deaths from smallpox.

Communicable Diseases—Provinces.

Communicable diseases have been reported in Cuba as follows:

Provinces.

Province.	New cases reported, Oct. 11–20, 1921.							
	Chicken pox.	Diphtheria.	Infantile tetanus.	Malaria.	Measles.	Paratyphoid fever.	Poliomyelitis (infantile paralysis).	Typhoid fever.
Camaguey.....		1		10			2	
Habana.....	3	4		33		5		10
Matanzas.....		2		1		3	1	4
Pinar del Rio.....			2	7		2		7
Oriente.....	1			147	1			35
Santa Clara.....	6	1	1	1	2	3		8
Total.....	10	8	3	199	3	13	3	64

¹ For occurrence of yellow fever at Belize, British Honduras, see Public Health Reports, Aug. 26, 1921, p. 2064; Sept. 23, 1921, p. 2337; and Oct. 7, 1921, p. 2507.

JAMAICA.

Infectious Disease (Alastrim or Kaffir Pox).

The occurrence of new cases of alastrim or Kaffir pox in the island of Jamaica has been reported as follows: Week ended October 1, 1921, 48 cases; week ended October 8, 1921, 42 cases; week ended October 15, 1921,¹ 37 cases; week ended October 22, 1921, 23 cases.

EPIDEMIC DURING 1920 AND 1921.

The occurrence of alastrim or Kaffir pox in the island of Jamaica was stated to have begun in April, 1920, and to have been seriously epidemic in form during nearly a year. In August, 1920, information was received of the prevalence of a disease resembling smallpox, later reported under the name of alastrim or Kaffir pox, with about 500 cases and three fatalities. From the beginning of the outbreak to November 27, 1920, about 5,000 cases were reported.² From November 28 to January 1, 1921, 1,136 cases were reported,³ and during the period January 2 to April 30, 1921, 5,283 cases.⁴

Information dated October 29, 1921, indicates that the prevalence of alastrim is steadily declining. The following figures are given for the period May 1 to October 22, 1921:

Period.	Number of cases reported.		Period.	Number of cases reported.	
	Entire island.	Kingston and vicinity.		Entire island.	Kingston and vicinity.
May 1-28.....	952	9	Aug. 23-Sept. 24.....	189	1
May 29-June 25.....	461	.....	Sept. 25-Oct. 22.....	150	.....
June 26-July 30.....	761	1	Total.....	2,897	11
July 31-Aug. 27.....	384	.....		

Quarantine Regulations—1921.⁵

Under date of November 1, 1921, the quarantine board of Jamaica issued a revised set of regulations governing vessels arriving at Jamaican ports. The regulations pertain to the rat guarding of all vessels while in port and to special rules applying to those vessels which have cleared from countries infected with plague, yellow fever, influenza, and smallpox.

Typhoid Fever—Kingston and Vicinity.

The occurrence of typhoid fever in Kingston and vicinity, Island of Jamaica, has been reported as follows: Week ended October 1, 1921,

¹ Public Health Reports, Nov. 11, 1921, p. 2810.

² Public Health Reports, Dec. 31, 1920, p. 3193.

³ Public Health Reports, Jan. 7, 1921, p. 27; Jan. 14, 1921, p. 62; Jan. 28, 1921, p. 151.

⁴ Public Health Reports, Apr. 29, 1921, p. 964, and June 3, 1921, p. 1208.

⁵ Public Health Reports, Apr. 1, 1921, p. 692.

Kingston, 8 cases, in surrounding country 31 cases; week ended October 8, 1921, Kingston, 4 cases, surrounding country 40 cases; week ended October 15, 1921,¹ Kingston, 2 cases, surrounding country 27 cases; week ended October 22, 1921, Kingston, 6 cases, surrounding country 30 cases.

MEXICO.

Plague-Infected Rodents—Tampico.

During the period November 6 to 12, 1921, four plague-infected rodents were reported found at Tampico, Mexico, making a total from January 1, 1921, of 298 plague-infected rodents found.

POLAND.

Typhus Fever—June 18–July 16, 1921.

During the period from June 18 to July 16, 1921, 1,500 cases of typhus fever with 96 deaths were reported in Poland.

RHODES.

Plague.²

During the period from September 29 to October 8, 1921, the occurrence of four new cases of plague was reported in the island of Rhodes.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER.

Reports Received During Week Ended Nov. 25, 1921.³

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Shanghai.....	Oct. 10-16.....	3		Chinese.
India:				Aug. 14-20, 1921: Deaths, 19,033.
Bombay.....	Sept. 18-24.....	1	1	
Rangoon.....	Sept. 25-Oct. 1.....	1	1	
Java:				
West Java—				
Lebak.....	Sept. 9-22.....	12	7	
Philippine Islands:				
Manila.....	Sept. 25-Oct. 8.....	10	3	

PLAGUE.

Azores:				
St. Michael Is'land.....				Oct. 2-22, 1921: Cases, 25; deaths 13.
Ribeira Grande.....	Oct. 2-8.....	5	2	Occurring in vicinity of Ponta Delgada, at Relva, Ribeira Grande, and Santo Antonio.
Ceylon:				
Colombo.....	Sept. 25-Oct. 1.....	2	2	
China:				
Amoy.....	Oct. 2-15.....			Present; also rodent plague.
Egypt.....				Jan. 1-Oct. 20, 1921: Cases, 312; deaths, 134.

¹ Public Health Reports, Nov. 11, 1921, p. 2810.

² Public Health Reports, Nov. 11, 1921, p. 2811.

³ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received During Week Ended Nov. 25, 1921—Continued.****PLAGUE—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Egypt—Continued.				
Cities—				
Alexandria.....	Oct. 18-20.....	4	1	
Suez.....	Oct. 18-19.....	2	1	
India:				
Bombay.....	Sept. 18-24.....	9	5	
Madras Presidency.....	Oct. 2-8.....	154	106	
Rangoon.....	Sept. 25-Oct. 1.....	35	21	
Indo-China:				
Saigon.....	Sept. 18-Oct. 1.....	7	5	Including surrounding country.
Italy:				
Naples.....	Sept. 10-20.....	3		
Mexico:				
Tampico.....	Nov. 6-12.....			4 plague-infected rodents found; total from Jan. 1, 1921, 298.
Rhodes (Island).....	Sept. 29-Oct. 8.....	4		
Syria:				
Beirut.....	Sept. 5-Oct. 8.....	7		

SMALLPOX.

Brazil:				
Sao Paulo.....	Sept. 12-25.....	3		
Canada:				
Manitoba—				
Winnipeg.....	Oct. 23-29.....	2		
New Brunswick—				
St. Stephen.....	Oct. 30-Nov. 5.....	2		
Ontario—				
Ottawa.....	Oct. 30-Nov. 12.....	6		
Toronto.....	Oct. 30-Nov. 5.....	1		
Chile:				
Talcahuano.....	Sept. 1-30.....	2	1	
China:				
Amoy.....	Oct. 2-8.....		1	Oct. 9-15: Present.
Chungking.....	Sept. 25-Oct. 8.....			Present.
Nanking.....	Oct. 9-15.....			Do.
Cuba:				
Antilla.....	Oct. 30-Nov. 5.....	2		
Nuevitas.....	Oct. 31-Nov. 6.....	2		
Dominican Republic:				
San Pedro de Macoris.....	Oct. 23-29.....	4		
Santo Domingo.....	Oct. 14-19.....	12		
India:				
Bombay.....	Sept. 18-24.....	3	3	Aug. 14-20, 1921: Deaths, 56.
Madras.....	Oct. 2-8.....	9	4	
Indo-China:				
Saigon.....	Sept. 18-24.....	1	1	
Java:				
West Java—				
Batavia.....	Sept. 6-22.....	2	3	
Buitenzorge.....	.....do.....	43	10	
Krawang.....	.....do.....	2		
Tangerang.....	.....do.....	6		
Soekaboemi.....	Sept. 9-15.....	1		
Panama.....				Sept. 20-Oct. 30, 1921: Cases, 3; 1 from Taboga Island, 2 from interior of Panama; total from Jan. 1 to Oct. 30, 1921, 201 cases.
Poland.....				June 19-July 16, 1921: Cases, 334; deaths, 38; statistics for Brest-Litovsk, Minsk, and Vilna not included.
Spain:				
Huelva.....	Aug. 1-31.....		1	
Tunis:				
Tunis.....	Oct. 15-21.....		1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received During Week Ended Nov. 25, 1921—Continued.****TYPHUS FEVER.**

Place.	Date.	Cases.	Deaths.	Remarks.
Chile: Talcahuano.....	Sept. 1-30.....	1	1	
China: Antung.....	Oct. 12-23.....	5		
Egypt: Cairo.....	Aug. 20-26.....	2	2	
Mexico: San Luis Potosi.....	Oct. 30-Nov. 5.....			Present.
Poland.....				June 18-July 16, 1921: Cases, 1,500; deaths, 96; statistics for Brest-Litovsk, Minsk, and Vilna not included.
Syria: Beirut.....	Sept. 5-Oct. 8.....	1		
Union of South Africa: Cape Province.....	Sept. 25-Oct. 1.....			Outbreaks.
Natal.....	do.....			Do.

YELLOW FEVER.

British Honduras: Stann Creek.....	Nov. 13.....	1		30 miles from Belize.
On vessel: S. S. Saramacca.....	Nov. 12.....	1	1	At New Orleans, La., from Belize, British Honduras.

Reports Received from July 2 to Nov. 18, 1921.**CHOLERA.**

Place.	Date.	Cases.	Deaths.	Remarks.
China: Amoy.....	July 3-Sept. 10.....		15	
Hongkong.....	Aug. 22-28.....	37	8	Cases: Chinese, 34; foreign, 3.
Shanghai.....	Aug. 1-Oct. 2.....	67	10	Deaths, Chinese, 5; foreign, 3.
Swatow.....	Aug. 14-20.....	1	1	Cases: Chinese, 23; foreign, 44.
Germany: East Prussia— Königsberg.....	Oct. 10.....	3	1	
India: Bombay.....	May 1-June 18.....	11	10	Mar. 6-June 25, 1921: Deaths, 75,281. July 3-30, 1921: Deaths, 46,999. Aug. 31-Sept. 13, 1921: Deaths, 46,051.
Do.....	June 26-Sept. 17.....	77	48	
Calcutta.....	May 8-June 25.....	597	521	
Do.....	June 23-Sept. 24.....	182	158	
Karachi.....	July 10-Oct. 1.....	150	134	
Madras.....	May 15-June 25.....	3	2	
Do.....	June 26-Aug. 27.....	13	6	
Rangoon.....	Apr. 24-June 25.....	18	17	
Do.....	June 23-Sept. 10.....	21	14	
Indo-China: City.....				Jan. 1-31, 1921: Cases, 80; deaths, 15. May 29-June 12, 1921: Cases, 251; deaths, 202.
Cholon.....	June 6-12.....	5	4	
Saigon.....	May 9-June 12.....	65	44	
Do.....	July 4-Sept. 17.....	105	96	Disseminated in neighboring Provinces.
Province— Anam.....	Jan. 1-31.....	42		In January, 1920: No cases.
Cambodia.....	do.....	8	2	January, 1920: Cases, 27; deaths, 14.
Cochin-China.....	do.....	18	9	January, 1920: Cases, 13; deaths, 10.
Tonkin.....	do.....	12	4	January, 1920: No cases.
Philippine Islands: Manila.....	May 22-June 25.....	4		
Do.....	July 3-Sept. 17.....	33	2	
Province— Batangas.....	June 12-18.....	2	1	
Do.....	July 3-23.....	7	3	
Cavite.....	July 10-Aug. 6.....	2	1	
Cebu.....	June 28-July 2.....	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****CHOLERA—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Philippine Islands—Contd.				
Province—Contd.				
Laguna.....	June 19-25.....	1	.....
Do.....	July 3-9.....	1	1	
Mindoro.....	June 12-18.....	1	1	
Pampanga.....	June 5-11.....	1	1	
Tarlac.....	June 19-25.....	1	1	
Union.....	June 26-Aug. 13...	3	1	
Poland.....				
Baranowicze.....	Aug. 18.....	.....	.....	Apr. 24-June 18, 1921: Cases, 5; deaths, 1.
Bialystok.....	July 25.....	.....	.....	Present.
Pinsk.....	do.....	.....	.....	Do.
Russia.....				
Districts—				
Astrakan.....	Jan. 1-Aug. 10.....	5,132	.....	Jan. 1-Aug. 10, 1921: Cases, 78,011. City of Moscow, cases, 289.
Black Sea.....	do.....	3,152	.....	From Jan. 1 to July 13, 1921: 1,718 cases reported in Kuban Territory.
Kazan.....	Jan. 1-July 13.....	434	.....
Kharkow.....	do.....	257	.....
Kursk.....	Jan. 1-Aug. 10.....	1,227	.....
Moscow.....	Jan. 1-July 13.....	296	.....	City, 192 cases.
Orel.....	Jan. 1-Aug. 10.....	1,068	.....
Rjasan.....	Jan. 1-July 13.....	129	.....
Samara.....	Jan. 1-Aug. 10.....	5,315	.....
Saratow.....	do.....	7,201	.....
Simbirsk.....	do.....	1,160	.....
Tambow.....	do.....	2,561	.....
Tzaritzyn.....	do.....	3,028	.....
Ufa.....	do.....	5,196	.....
Voronezh.....	do.....	3,621	.....
Petrograd.....	July 6.....	6	.....
Republics—				
Basjkir.....	Jan. 1-Aug. 10.....	1,038	.....
Kirghiz.....	do.....	5,687	.....
Tartar.....	do.....	1,178	.....
Tchuvash.....	do.....	233	.....
Rostov-on-Don.....	June 1.....	747	.....	Present on Orenburg-Tashkent line, and at Cheljabinsk, Perm, Petropavlosk, Ufa, and in Smolensk and Vitebsk districts during period under report.
Siberia.....				
Territories—				
Azerbeidjan.....	Jan. 1-Aug. 10.....	614	.....	Far Eastern Republic.
Don.....	do.....	2,006	.....
Turkestan.....	do.....	5,583	.....
Ukraine.....	do.....	.....	.....	Very prevalent; reports incomplete.
Siam:				
Bangkok.....	Apr. 24-June 11.....	19	4	
Do.....	June 26-Sept. 3.....	6	2	
Straits Settlements:				
Singapore.....	June 12-18.....	1	1	

PLAGUE.

Algeria:				
Algiers.....	Aug. 1-Oct. 10.....	2	1	
Annale district.....	May 31-July 3.....	71	22	Native district about 140 kilometers from Algiers.
Donar Megnine.....	May 31-Aug. 24.....	185	97	
Oran.....	Sept. 20-30.....	1	1	
Asia Minor:				
Smyrna.....	June 19-25.....	1	.....	In suburbs.
Do.....	July 3-Sept. 3.....	4	.....
Australia:				
New South Wales—				
Sydney.....	Sept. 11-Oct. 8.....	.....	.....	Dead plague-infected rats found on wharves; 1 rat from vessel from Brisbane.
Queensland.....				
Brisbane.....	Sept. 17-24.....	.....	.....	Plague rats found, 28.
.....	Aug. 23.....	.....	1	Employee in produce store.
Kelvin Grove.....	Sept. 20.....	.....	1	Office cleaner at Brisbane; 1 plague rat.
Townsville.....	Sept. 21.....	.....	1	2 plague rats found.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Nov. 18, 1921—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Azores:				
Fayal Island—				
Horta.....	Sept. 4-10.....	1		
St. Michael Island—				
Capelas.....	Aug. 6-12.....	1	1	
Ribeira Grande.....	Aug. 6-Sept. 24.....	33	10	10 miles from port of Ponta Delgada.
Brazil:				
Bahia.....	May 15-June 18.....	3	3	
Do.....	July 31-Oct. 1.....	4	3	
Maranhao.....	June 28.....	1	1	
Pernambuco.....	Aug. 22-28.....	1	1	
Pindobassu.....				Locality 200 miles west of Bahia; plague reported epidemic during August, 1921, with 60 deaths. Sept. 1-30: Epidemic.
Villa Nova.....	Sept. 11-Oct. 1.....			
British East Africa:				
Kenya Colony—				
Kisumu.....	Apr. 24-May 21.....			Present.
Do.....	June 26-Sept. 24.....			Present in vicinity.
Uganda.....	Mar. 1-June 30.....	133	101	Reports of native chiefs show 2,709 deaths during same period.
Do.....	July 1-31.....	41	30	Reports of inspectors, deaths, 230; reports of chiefs, deaths, 1,482.
Cape Verde Islands:				
St. Vincent.....	Aug. 12-18.....	6	3	
Ceylon:				
Colombo.....	May 8-June 11.....	2	2	
Do.....	June 26-Aug. 27.....	5	5	7 cases rodent plague.
Chile:				
Iquique.....	Sept. 17.....	1		
China:				
Amoy.....	May 15-June 25.....	7	2	
Do.....	July 3-Sept. 10.....		42	Sept. 11-24: Present.
Foochow.....	May 15-21.....			Present.
Hongkong.....	Apr. 24-June 25.....	81	59	May 1-7, 1921: Plague rats found.
Do.....	June 26-Aug. 20.....	38	27	
Manchuria—				
Harbin.....	May 3-22.....	46		
Ecuador:				
Guayaquil.....	May 1-June 15.....	10	1	
Do.....	July 16-Sept. 30.....	9	4	Plague rats found: Aug. 1-Sept. 30, 1921, 133.
Egypt:				
City.....				Jan. 1-Oct. 13, 1921: Cases, 308; deaths, 132.
Alexandria.....	May 21-June 24.....	10	3	
Do.....	July 1-Oct. 11.....	48	12	
Port Said.....	June 16-27.....	4	2	
Do.....	July 1-Sept. 30.....	18	7	
Suez.....	May 20-June 30.....	9	5	
Do.....	July 1-Oct. 11.....	6	5	
Provinces—				
Assiout.....	May 24-June 16.....	9	7	
Do.....	July 30.....	1		
Beni-Souef.....	July 10.....	1		
Gharbich.....	June 2-25.....	7		
Do.....	July 9-Sept. 1.....	9		
Girgeh.....	July 6-13.....	5	4	
Minieh.....	May 28-June 10.....	2	1	
Do.....	July 13-Aug. 18.....	7	3	
Greece:				
Piræus.....	Sept. 23.....	3		
Hawaii:				
Honokaa.....				Plague rat found Sept. 8, 1921.
Kalapa.....	July 15-19.....	1	1	
Paauhau.....	May 21.....	1		
India:				
Bombay.....	May 1-June 25.....	287	204	May 1-June 25, 1921: Cases, 2,093; deaths, 1,621. June 26-Sept. 3, 1921: Cases, 3,570; deaths, 2,572.
Do.....	June 26-Sept. 17.....	69	50	
Calcutta.....	May 8-June 18.....	11	11	
Do.....	July 24-Aug. 6.....	23	21	
Central Provinces.....	Aug. 14-20.....	27	16	
Karachi.....	May 8-June 25.....	18	14	
Do.....	June 26-Oct. 1.....	5	5	
Madras.....	Aug. 20-27.....	1	1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****PLAGUE—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
India—Continued.				
Madras Presidency.....	May 22-June 25...	112	72	
Do.....	June 26-Oct. 1.....	1,252	803	
Rangoon.....	Apr. 24-June 25.....	162	142	
Do.....	June 26-Sept. 24.....	501	444	
Indo-China.....				Jan. 1-31, 1921: Cases, 57; deaths, 51.
Saigon.....	May 23-June 12.....	4	1	
Do.....	July 10-Aug. 27.....	16	11	Isolated cases in vicinity of Saigon. Sept. 11-24: Plague rats found, 4.
Italy:				
Catania.....	Oct. 24.....	1		
Naples.....	Sept. 4-Oct. 7.....	2		Workers in mill; plague-infected rat found on premises.
Java:				
East Java—				
Surabaya.....	July 10-Sept. 17...	14	12	
Madagascar:				
Tananarive.....	June 20-July 24.....	49	46	Pneumonia.
Mauritius:				
Port Louis.....	Aug. 24.....			Present.
Mesopotamia:				
Bagdad.....	Apr. 1-May 31.....	32	35	
Do.....	July 1-31.....	1	1	
Mexico:				
Ciudad Victoria.....	June 7.....	1		In State of Tamaulipas: Case confirmed June 20, 1921.
Progreso.....				Plague rat reported found Sept. 10, 1921.
Tampico.....	June 11-30.....	36		
Do.....	July 1-Aug. 21.....	21	8	Infected rodents found July 1-Nov. 5, 1921, 183. Total, Jan. 1 to Nov. 5, 1921, 294.
Morocco:				
Spanish Zone.....				Reported present in epidemic form Sept. 29, 1921.
Peru.....				Mar. 1-Apr. 30, 1921: Cases, 119; deaths, 64. June 1-30, 1921: Cases, 14; deaths, 10. July 1-15, 1921: Cases, 9; deaths 3. Sept. 1-30, 1921: Cases, 45; deaths, 22.
Department—				
Ancachs.....	Apr. 1-30.....	4	1	At Huarney.
Arequipa.....	Mar. 1-Apr. 30.....	5	3	At Mollendo.
Do.....	July 1-15.....	2		Do.
Cajamarca.....	Sept. 1-30.....			Present. At Bambamarca, Cajamarca, and other localities.
Callao.....	Mar. 1-June 30.....	16	1	At Callao.
Do.....	July 1-Sept. 30.....	6	3	Do.
Lambayeque.....	Mar. 1-Apr. 30.....	3	2	At Chiclayo.
Do.....	Sept. 1-30.....	2		Do.
Libertad.....	Mar. 1-June 15.....	31	15	In 5 localities.
Do.....	Sept. 1-30.....	3		At San Pedro.
Lima.....	Mar. 1-June 30.....	43	23	At Lima City: Cases, 28; deaths, 18.
Do.....	July 1-Sept. 15.....	4	3	At Lima City.
Do.....	Sept. 1-30.....	16	4	At Huacho: Cases, 9; deaths, 1. Lima City: Cases, 2; deaths, 1. Country: Cases, 5; deaths, 2.
Piura.....	Mar. 1-June 15.....	31	29	In 4 localities.
Do.....	Sept. 1-15.....	19	15	Deaths occurred at Sechura.
Do.....	Sept. 1-30.....	23	17	At Sechura.
Poland.....				In border province, Aug. 9, 1921: Cases, 8.
Porto Rico.....				Total plague-infected rats found from beginning of outbreak to July 9, 1921, 90.
Caguas.....	Aug. 7-20.....	4	2	Sept. 4-24, 1921: Two plague-infected rats found.
Fajardo.....				Aug. 23-Sept. 3, 1921: One plague-infected rat found.
Manati.....	July 17-23.....	1	1	
Martin Pena.....	July 3-9.....	1		Suburb coextensive with San-turce.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****PLAGUE—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Porto Rico—Continued. San Juan.....				Plague rat on steamship San Luis, in San Juan Harbor Sept. 9, 1921.
Portugal: Lisbon.....	July 29-Sept. 3....	7		
Portuguese West Africa: Angola— Loanda.....	Apr. 24-June 18....	16		
Do.....	July 17-23.....		1	
Rhodes (Island).....	Sept. 20-24.....	3		1 fatal case reported late in August, 1921.
Russia: Siberia— Vladivostok.....	Apr. 1-June 30....		252	First case occurred Apr. 10, 1921.
Do.....	July 1-31.....		4	
Senegal: Dakar.....	May 1-June 30....	54	47	
Do.....	July 1-Aug. 31....	117	93	
Siam: Bangkok.....	Apr. 24-June 18....	7	6	
Do.....	July 24-Sept. 3....	16	12	
Straits Settlements: Singapore.....	May 8-June 18....	5	5	
Do.....	June 26-Sept. 24....	6	6	
Syria: Alexandretta.....	July 10-Aug. 6....	18	4	
Beirut.....	May 31-June 30....	2		
Do.....	July 1-Sept. 4....	17		
Turkey: Constantinople.....	July 10-Oct. 15....	6	4	
Union of South Africa.....				January-April, 1921: Cases (white), 6; deaths, 4. Cases (native), 13; deaths, 6. Occurring in the Orange Free State.
On vessels.....				Plague rats reported, Sept. 21, 1921, on vessels from Brisbane, Australia, at Sydney and other ports.
Steamship Kishenev.....	May 2.....	1		At Chefoo, China. Plague death en route. Vessel sent to quarantine, Kentucky Island, where to May 6 a total of 16 deaths was reported. (Public Health Reports, July 1, 1921, p. 1531.)
Steamship Oreland.....				At Genoa, Italy, June 12, 1921; from La Plata, Argentina. Two fatal cases plague in crew en route.
Steamship Ralph Moller.....	June 8.....	4	1	At Chefoo, China, from Vladivostok, Siberia. Three fatal cases en route. One case with fatal termination removed at Vladivostok.
Steamship San Luis.....	Sept. 9.....			In harbor, San Juan, Porto Rico, Sept. 9, 1921: 1 plague rat.
Steamship Tenyo Maru.....				En route between Nagasaki and Kobe, Japan, June 28, 1921: 1 fatal case.

SMALLPOX.

Algeria: Algiers.....	May 1-June 30....	3		
Oran.....	Sept. 1-10.....	1		
Asia Minor: Smyrna.....	May 22-23.....	1		On the steamship Nicholas.
Do.....	July 24-Oct. 8....	2		District.
Australia: Victoria— Geelong.....	May 5-16.....	2		Mild.
Do.....	July 12-23.....	2		
Melbourne.....	Apr. 9-23.....	4	1	Mild epidemic.
Do.....	July 17-23.....	1	1	Slight epidemic reported.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Bolivia:				
La Paz.....	Apr. 1-30.....	5	4	
Brazil:				
Bahia.....	Sept. 25-Oct. 1.....	2	.....
Pernambuco.....	Mar. 28-May 22.....	28	4	
Rio de Janeiro.....	May 8-June 18.....	11	2	
Do.....	June 26-Oct. 1.....	117	27	
Sao Paulo.....	May 23-June 26.....	7	2	
Do.....	June 27-Sept. 4.....	13	2	
British East Africa:				
Kenya Colony—				
Zanzibar.....	May 8-14.....	12	4	Origin, India.
Do.....	Aug. 1-31.....	14	6	Districts and towns.
Bulgaria:				
Sofia.....	May 15-31.....	6	.....
Canada:				
Alberta—				
Calgary.....	May 26-June 18.....	3	.....
British Columbia—				
Vancouver.....	May 28-June 25.....	8	.....
Manitoba—				
Winnipeg.....	do.....	6	.....
Do.....	June 26-Oct. 15.....	13	1	
New Brunswick—				
Charlotte County.....	July 10-Oct. 15.....	11	.....
Madawaska County.....	Aug. 7-Oct. 15.....	3	.....
Restigouche County.....	June 19-25.....	1	.....
St. Stephen.....	Oct. 23-29.....	1	.....
Westmoreland County.....	June 26-July 2.....	2	.....
Nova Scotia—				
Sydney.....	June 5-18.....	2	.....
Do.....	June 26-July 2.....	4	.....
Ontario—				
Fort William and Port Arthur.....	Aug. 7-27.....	2	.....
Do.....	Oct. 16-22.....	2	.....
Hamilton.....	June 12-18.....	3	.....
Do.....	July 3-9.....	1	.....
Kingston.....	June 5-11.....	1	.....	At 2 localities in vicinity, 2 cases.
London.....	June 5-25.....	2	.....
Montreal.....	June 12-18.....	1	.....
Do.....	July 17-Oct. 29.....	6	.....
North Bay.....	June 11-25.....	3	.....
Do.....	June 26-July 9.....	2	.....
Ottawa.....	June 12-25.....	21	.....
Do.....	June 26-Aug. 13.....	35	.....
Toronto.....	Aug. 28-Sept. 24.....	3	.....
Saskatchewan—				
Moose Jaw.....	Sept. 4-Oct. 15.....	3	.....
Saskatoon.....	Sept. 26-Oct. 17.....	12	.....
Chile:				
Antofagasta.....	May 16-June 19.....	228	106	
Arica.....	May 31.....	2	.....
Concepcion.....	Sept. 5-19.....	3	.....	Reported present in Chillan and Mulchen.
Mejillones.....	May 30-June 5.....	.....	.....	Present; also at interior nitrate plants.
Vaiparaiso.....	June 26-Oct. 21.....	.....	49	
China:				
Amoy.....	May 8-June 4.....	.....	4	June 5-25: Present.
Do.....	June 26-Sept. 3.....	.....	2	Sept. 11-Oct. 1: Present.
Antung.....	May 16-June 26.....	12	2	
Canton.....	Apr. 1-30.....	.....	.....	Present.
Chungking.....	May 1-June 25.....	.....	.....	Do.
Do.....	June 26-Sept. 17.....	.....	.....	Do.
Foochow.....	May 8-June 25.....	.....	.....	Do.
Do.....	June 26-Oct. 8.....	.....	.....	Do.
Hankow.....	May 15-21.....	4	1	
Do.....	July 10-16.....	1	.....
Hongkong.....	Apr. 24-June 25.....	99	84	
Do.....	July 24-Aug. 20.....	3	1	
Manchuria—				
Dairen.....	May 9-June 26.....	44	5	
Do.....	June 27-Aug. 14.....	8	3	
Harbin.....	May 16-June 13.....	5	.....
Do.....	June 27-July 10.....	2	.....

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Nov. 18, 1921—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.	
China—Continued.					
Manchuria—Continued.					
Mukden.....	May 22-June 11.....	.....	.....	Present.
Do.....	July 3-Aug. 20.....	.....	.....	Do.
Nanking.....	May 8-June 25.....	.....	.....	Do.
Do.....	June 26-Oct. 8.....	.....	.....	Do.
Shanghai.....	June 20-26.....	1	.....	Mission hospital.
Do.....	July 3-Sept. 17.....	5	1		
Tientsin.....	May 8-June 25.....	31	.....	
Do.....	June 26-Aug. 20.....	9	1		
Tsingtau.....	May 9-June 12.....	4	1		
Do.....	July 25-31.....	1	.....	
Chosen (Korea):					
Chemulpo.....	May 1-June 30.....	11	3		
Fusan.....	.....do.....	12	3	
Gensan.....	.....do.....	5	2	
Seoul.....	.....do.....	3	.....	
Colombia:					
Santa Marta.....	June 5-25.....	.....	.....	Present.
Do.....	June 26-Aug. 27.....	.....	.....	Do.
Cuba:					
Antilla.....	June 5-25.....	7	.....	6 of those reported found in vicinity.
Do.....	June 26-Oct. 15.....	71	.....	
Cienfuegos.....	June 26-Sept. 3.....	3	.....	
Matanzas.....	June 12-18.....	1	1		
Do.....	July 3-31.....	4	2		
Nuevitas.....	July 4-Sept. 25.....	15	.....	
Preston.....	Oct. 2-15.....	4	.....	
Santiago.....	June 1-30.....	28	2		
Do.....	July 1-Oct. 31.....	60	1		
Dominican Republic					
La Romana.....	Aug. 25.....		In eastern Provinces, Aug. 25, 1921, 2,000 cases, estimated.
San Pedro de Macoris.....	Aug. 19-Oct. 22.....	54	7		Cases numerous.
Santo Domingo.....					
Sept. 1-Oct. 13.....	22	.....	.....	On sugar estates in same Province, about 400 cases, Aug. 19-25. Estimated 500 cases in the District of Macoris, 50 of which were within city limits.
Ecuador:					
Eloy Alfaro.....	Aug. 1-15.....	1	.....	In surrounding country.
Guayaquil.....	May 1-June 30.....	31	.....	
Do.....	July 1-Oct. 15.....	32	1		
Egypt:					
Cairo.....	Mar. 19-Apr. 29.....	2	1		
Port Said.....	Apr. 2-May 20.....	10	.....	
Finland.....					
May 1-15.....	1	.....	.....
France:					
Brest.....	May 22-June 4.....	18	.....	Varioloid.
Cherbourg.....	Aug. 1-31.....	1	.....	
Paris.....	July 22-31.....	2	1		
Rouen.....	May 1-29.....	2	.....	
Germany.....					
Apr. 24-May 28, 1921: Cases, 12. Additional, Apr. 17-May 7, 1921: Cases, 57; deaths, 7.					
Great Britain:					
Nottingham.....	May 20-June 4.....	1	.....	Stated Aug. 17 to be epidemic and to have begun about 2 months previous to date; 57 cases reported.
Do.....	July 2-Sept. 24.....	56	.....	
Queensdown.....	July 3-9.....	1	.....	
Southampton.....	June 26-July 2.....	1	.....	
Greece:					
Saloniki.....	June 6-12.....	.....	1	
Haiti:					
Cape Haitien.....	June 19-25.....	24	2	Present.	
Do.....	June 26-Oct. 22.....	226	20		
Port au Prince.....	Sept. 11-Oct. 29.....	.....	.....
India:					
Bombay.....	May 1-June 25.....	84	50	Mar. 20-May 21, 1921: Deaths, 3,232. June 5-25, 1921: Deaths, 958. July 3-9, 1921: Deaths, 393. July 24-30, 1921, 118 deaths.	
Do.....	June 26-Sept. 3.....	61	42		
Calcutta.....	May 8-June 25.....	8	8		
Do.....	June 26-Sept. 10.....	9	7		
Karachi.....	May 29-June 25.....	25	17		
Do.....	June 26-July 30.....	8	2		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
India—Continued.				
Madras.....	May 8-June 25.....	33	11	
Do.....	June 26-Oct. 1.....	74	41	
Rangoon.....	Apr. 24-June 4.....	20	3	
Do.....	July 10-Aug. 13.....	4	1	
Indo-China.....				Jan. 1-31, 1921: Cases, 102; deaths, 15.
City—				
Saigon.....	May 9-15.....	2	1	
Do.....	Aug. 21-27.....	1	1	
Province—				
Anam.....	Jan. 1-31.....	35		January, 1920: Cases, 16; deaths, 3.
Cambodia.....	do.....	21	3	January, 1920: Cases, 139; deaths, 54.
Cochin China.....	do.....	19	12	January, 1920: Cases, 8; deaths, 1.
Tonkin.....	do.....	27		January, 1920: Cases, 224; deaths, 43.
Italy:				
Catania.....				Province: June 6-20, 1921: Cases, 5.
Do.....	July 18-Aug. 14.....			In province: Cases, 7.
Genoa.....	Apr. 1-May 31.....	11		
Do.....	July 4-10.....	2		
Messina.....	May 23-June 26.....	2	1	
Do.....	July 11-17.....	1		In Province: July 4-17, 1921: Cases, 9.
Palermo.....	May 18-June 21.....	7	1	
Milan.....	Apr. 1-30.....	2		
Do.....	June 29-July 19.....	3		
Japan:				
Kobe.....	May 24-June 26.....	3		
Nagasaki.....	May 23-June 26.....	6	1	
Taiwan Island.....	July 1-10.....	1		
Java:				
East Java—				
Surabaya.....	June 19-25.....	2		
Do.....	July 10-Aug. 20.....	10	1	
West Java—				
Bandoeng.....	May 27-June 3.....	1		
Do.....	July 8-21.....	1		
Betavia.....	May 6-June 23.....	17	15	
Do.....	July 1-Sept. 1.....	106	40	
Buitenzorg.....	Apr. 20-June 23.....	16		
Do.....	July 22-Aug. 4.....	2	1	
Garoet.....	May 6-12.....	1		
Do.....	July 8-Aug. 4.....	4		
Krawang.....	Apr. 29-June 30.....	33	5	
Do.....	July 22-Aug. 4.....	14	1	
Lebak.....	Apr. 29-May 26.....	12	2	
Pandeglang.....	June 3-30.....	2	1	
Do.....	July 8-14.....	1		
Jugoslavia.....				Mar. 14-May 13, 1921: Cases, 334; deaths, 83. June 27-July 10, 1921: Cases, 111; deaths, 27.
Mesopotamia:				
Bagdad.....	Apr. 1-May 31.....	3	1	
Do.....	Aug. 1-31.....	20	4	
Mexico:				
Chihuahua.....	May 22-June 27.....		3	
Do.....	Oct. 3-16.....		4	
Guadaluajara.....	June 1-20.....	3		
Do.....	July 1-Sept. 30.....	13	3	
Mexico City.....	May 15-June 25.....	246		Including municipalities in Federal District.
Do.....	June 26-Oct. 3.....	247		Do.
San Luis Potosi.....	July 17-Oct. 15.....	1	3	
Tampico.....	July 11-20.....	1		
Torreón.....	Sept. 1-30.....	2		
Vera Cruz.....	June 13-19.....		1	
Do.....	July 11-Sept. 11.....		3	
Newfoundland:				
St. John's.....	Aug. 20-26.....	3		
Panama:				
Canal Zone.....	Apr. 1-May 31.....	2		Jan. 1-Sept. 19, 1921: Cases, 205, of which 33 were nonresidents.
Colon.....	Jan. 1-May 31.....	111		
Do.....	Aug. 30.....	1		From the interior.
Panama.....	Feb. 1-June 30.....	54		Sept. 4-19; 1 from interior.
Do.....	July 1-Sept. 19.....	4		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Poland:				Mar. 1-Apr. 30, 1921: Cases, 1,117; deaths, 142. Apr. 24-May 21, 1921: Cases, 677; deaths, 148. May 22-June 18, 1921: Cases, 404; deaths, 74.
District—				
Bialystok	Mar. 1-Apr. 30	3		
Cracovia	do	56	6	
Kielce	do	180	26	
Leopol	do	52	16	
Lodz	do	72	9	
Lublin	do	397	30	
Posen	do	26	2	
Silesia	do	10		In Teschen.
Stanislawow	do	30	5	
Tarnopol	do	156	31	
Warsaw	do	36	4	
Warsaw City	do	90	13	
Portugal:				
Lisbon	May 15-June 25		34	
Do	June 26-Oct. 1	46	5	
Oporto	June 19-25	1		
Do	Sept. 11-Oct. 15	2		
Portuguese East Africa:				
Lourenco Marques	May 8-28	8		
Do	July 10-Sept. 10	14	4	
Rumania:				
District—				
Hotin	Apr. 1-50	40	9	
Orthel	Mar. 1-31	2		
Russia:				
Province—				
Esthonia	Apr. 1-June 30	11		
Do	July 1-Sept. 30	55		
Latvia	Apr. 1-May 31	41		
Do	July 1-31	12		
Siberia—				
Vladivostok	June 1-30	1		
Serbia:				Mar. 24-May 21: Cases, 205; deaths, 41.
Belgrade	Aug. 7-20	2	1	
Senegal:				
Dakar	May 1-31	1	1	
Spain:				
Barcelona	May 12-June 22		13	
Do	July 7-Sept. 28		10	
Huelva	July 1-31		2	
Madrid	June 1-30	2		
Do	Aug. 1-31		1	
Malaga	May 1-June 30		57	
Do	July 1-Aug. 31		57	
Tarragona	May 9-15		1	
Valencia	May 22-28	1		
Do	July 2-Aug. 20	9	2	
Straits Settlements:				
Singapore	June 12-18	1		
Do	July 10-Sept. 24	15	4	
Switzerland:				
Basel	Sept. 11-Oct. 1	5		
Zurich	May 28-June 11	10		
Do	July 3-Sept. 2	4		
Syria:				Present.
Aleppo	Apr. 9-16			
Beirut	May 10-30	1	1	
Do	Aug. 8-14	1	1	
Tunis:				
Tunis	May 30-June 17	2	3	
Do	July 2-Oct. 14	15	11	
Turkey:				
Constantinople	June 12-25	5		
Do	June 26-Oct. 15	12	1	
Union of South Africa:				January-April, 1921: Cases (white), 18; deaths, 1. Cases (native), 192; deaths, 5. May 1-31, 1921: Cases, 65; deaths, 3, all natives. June 1-30, 1921: Cases, 64, of which 1 white. July 1-31, 1921: Natives—Cases, 129; deaths, 2. White—1 case. Aug. 23-Sept. 3, outbreaks in Cape Province, Orange Free State, and Transvaal. Aug. 1-31, 1921: Cases, 79; deaths, 1.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa—Con.				
Cape Province.....	Apr. 24-June 25.....			Fresh outbreaks.
Do.....	July 1-Aug. 27.....	118		Aug. 27-Sept. 27: Outbreaks.
Natal.....	Apr. 24-June 25.....			Fresh outbreaks.
Do.....	July 1-Aug. 27.....	1		Sept. 4-16: Outbreaks.
Durban.....	Aug. 7-27.....	3		Stated to have been imported.
Orange Free State.....	May 29-June 25.....			Outbreaks.
Do.....	Aug. 21-Sept. 17.....			Present.
Southern Rhodesia.....	July 14-Aug. 31.....	52	19	
Transvaal.....	May 22-June 18.....			Do.
Do.....	July 1-31.....	11		Aug. 27-Sept. 17: Outbreaks.
Johannesburg.....	do.....	2		
Do.....	Sept. 1-10.....	32	11	District.
On vessels:				
Steamship Craster Hall.....				Arrived Mobile, Ala., Oct. 8, 1921, from Buenos Aires, Rio de Janeiro, and Barbados. One case in crew removed at Barbados, Sept. 28, 1921.
Steamship Montoro.....	Aug. 31.....	1		At Batavia, Java, from Singapore, Aug. 27. Vessel proceeded from Batavia to Port Darwin and Townsville.
Steamship Niagara.....	June 1.....	1		At Sydney, Australia, from Vancouver via Fiji and New Zealand.

TYPHUS FEVER.

Algeria:				
Algiers.....	May 1-June 30.....	100	25	
Do.....	July 1-Oct. 10.....	23	7	
Oran.....	May 22-June 30.....	35	28	
Do.....	July 1-Sept. 10.....	15	13	
Asia Minor:				
Smyrna.....	June 12-18.....	1		In district.
Do.....	Aug. 28-Oct. 8.....	2		
Bolivia:				
La Paz.....	Apr. 1-June 30.....	50	51	
Do.....	July 1-31.....	19	3	
Brazil:				
Bahia.....	June 19-25.....	1	1	
Do.....	Aug. 7-13.....	1	1	
Porto Alegre.....	June 19-25.....		3	
Do.....	Aug. 7-13.....		1	
Canary Islands:				
Teneriffe.....	Aug. 14-Sept. 10.....		2	
Chile:				
Concepcion.....	Apr. 12-June 20.....		8	July 25-Aug. 29, 1921: In hospital,
Do.....	July 12-Oct. 3.....		17	30 cases; in city, estimated, 100 cases.
Los Angeles.....	July 26-Aug. 8.....			Prevalent.
Valparaiso.....	Mar. 27-May 28.....		4	
Do.....	June 26-Sept. 17.....		4	
China:				
Antung.....	May 30-June 5.....	1		From report of Japanese Settlement and Danish Mission among Chinese.
Do.....	June 27-Oct. 9.....	13		
Hankow.....	May 22-June 11.....	3		
Manchuria—				
Harbin.....	May 23-28.....	1		
Do.....	July 4-10.....	1		
Chosen (Korea):				
Chemulpo.....	June 1-30.....	2		
Fusan.....	May 1-31.....	1		
Gensan.....	May 1-June 30.....	4		
Seoul.....	May 1-31.....	1		
Cuba:				
Matanzas.....	Oct. 4-10.....	1		
Czechoslovakia:				
Prague.....	June 5-26.....	5	2	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Nov. 18, 1921—Continued.****TYPHUS FEVER—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Egypt:				
Alexandria.....	May 21-June 23....	21	8	
Do.....	June 24-Oct. 14....	49	20	
Cairo.....	Mar. 19-June 24....	235	162	
Do.....	June 24-Aug. 19....	77	44	
Port Said.....	Apr. 2-May 13....	8	2	
Finland.....	May 1-15.....	5		
Germany:				Apr. 24-June 4, 1921: Cases, 7.
Hamburg.....	May 27-June 4.....	1		
Great Britain:				
Dublin.....	May 29-June 4.....	1		
Do.....	Oct. 9-15.....	1		
Greece:				
Saloniki.....	May 23-June 26....	21	6	
Do.....	June 27-Aug. 14....	1	2	
Guatemala:				
Guatemala City.....	July 1-Sept. 30....		2	
Hungary:				Jan. 1-July 13, 1921: Cases, 71; occurring in 4 counties.
Italy:				
Messina (Province).....	Aug. 29-Sept. 4....	2		In 2 localities.
Japan:				
Nagasaki.....	May 23-June 5....	7	2	
Jugoslavia:				Jan. 30-May 14, 1921: Cases, 286; deaths, 40; June 27-July 10, 1921: Cases, 23; deaths, 7.
Belgrade.....	May 1-14.....	6		
Zagreb.....	June 19-25.....	3		
Do.....	July 10-Sept. 3....	37	4	
Mesopotamia:				
Bagdad.....	May 1-31.....	1	3	
Do.....	Aug. 1-31.....	1		
Mexico:				Including municipalities in Federal District.
Mexico City.....	May 15-June 25....	102		
Do.....	June 26-Oct. 8....	200		
Saltillo.....	Oct. 2-8.....		1	
San Luis Potosi.....	July 31-Aug. 6....			Present.
Morocco:				
Spanish Zone.....				Reported present in epidemic form Sept. 29, 1921.
Poland:				Mar. 1-Apr. 30, 1921: Cases, 11,438; deaths, 1,131. Apr. 24-May 21, 1921: Cases, 5,460; deaths, 489. May 22-June 18, 1921: Cases, 3,300; deaths, 290.
District—				
Bialystok.....	Mar. 1-Apr. 30....	853	45	
Cracovia.....	do.....	603	90	
Kialca.....	do.....	848	62	
Leopol.....	do.....	2,568	277	
Lodz.....	do.....	521	53	
Lublin.....	do.....	1,446	83	
Posen.....	do.....	77	5	
Silesia.....	do.....	26		In Teschen.
Stanislawow.....	do.....	1,557	232	
Tarnopol.....	do.....	1,855	194	
Warsaw.....	do.....	972	61	
Warsaw city.....	do.....	223	29	
Portugal:				
Oporto.....	July 12-Aug. 20....	2		
Rumania:				
District—				
Hotin.....	Apr. 1-30.....	107	10	
Kishinev.....	Apr. 1-June 30....	89		
Do.....	July 1-31.....	11		District.
Orhel.....	Mar. 1-May 30....	145		
Russia:				
Province—				
Esthonia.....	Apr. 1-June 30....	113		
Do.....	July 1-Sept. 30....	79		
Latvia.....	Apr. 1-June 30....	599		
Do.....	July 1-31.....	52		
Libau.....	Sept. 8-15.....	2		
Siberia—				
Vladivostok.....	Mar. 1-June 30....	5	3	
Do.....	July 1-Aug. 31....	22	3	
Serbia:				Mar. 24-May 21, 1921: Cases, 70; deaths, 7.
Spain:				
Madrid.....	May 1-June 30....		3	
Do.....	July 1-Sept. 30....		4	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Nov. 18, 1921—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Syria:				
Beirut.....	May 20-June 10...	1	1	
Tunis:				
Tunis.....	June 11-17.....		3	
Do.....	July 30-Sept. 9.....		2	
Turkey:				
Constantinople.....	May 22-June 18.....	11		
Do.....	June 26-Oct. 15.....	54	2	
Union of South Africa.....				January - April, 1921: Cases (white), 34; deaths, 2. Cases (native), 3,376; deaths, 437. June 1-30, 1921: Cases, 738; deaths, 66. July 1-31, 1921: Natives—cases, 868; deaths, 121. White—cases, 15; deaths, 2. Orange Free State and Natal: Cases, 25; deaths, 16. Aug. 1-31, 1921: Cases, 850; deaths, 83 (white cases, 17; deaths, 4; and colored cases, 833; deaths, 79).
Cape Province.....				Apr. 24-June 25, 1921: Outbreaks, May 1-31, 1921: Cases, 542; deaths, 51. July 1-31, 1921: Cases, 883; deaths, 123. Aug. 28-Sept. 17: Outbreaks. At native cantonment in vicinity.
Capetown.....	May 13-19.....	10	3	
East London.....	May 22-June 18.....	1	1	
Do.....	Aug. 21-27.....	1		
Port Elizabeth.....	Aug. 7-20.....	7		
Natal.....	July 10-Aug. 27.....			Outbreaks.
Orange Free State.....				Apr. 24-May 28, 1921: Outbreaks.
Do.....	July 10-Sept. 17.....			Outbreaks.
Transvaal—				
Johannesburg.....	Sept. 4-10.....			Outbreaks in surrounding country.
Venezuela:				
Maracalibo.....	June 21-27.....		1	
On vessel:				
Steamship Norden.....	Aug. 18.....	1		At Marcus Hook Quarantine, Pa., from Tampico, Mexico, via Nuevitas, Cuba.

YELLOW FEVER.

British Honduras:				
Belize.....	Aug. 22-Oct. 1.....	17	6	
Mexico:				
Alamo.....	June 1-30.....	10		State of Vera Cruz.
Do.....	July 19.....	4	1	Do.
Barra de Penn.....	July 17-23.....	1	1	Do.
Casamaloapam.....	do.....	3	1	Present. Sept. 25-Oct. 2, 1921, deaths, 40. Oct. 2, deaths, 5.
El Dorado.....	Oct. 7.....			June 1-Sept. 30, 1921: Cases, 19; deaths, 10.
Manzanillo.....				Oct. 7: Present.
Do.....	Oct. 9-15.....	1		Present.
Mazatlan.....	do.....			Territory of Quintana Roo.
Playa Obispo.....	Aug. 23.....	1		State of Tamaulipas.
Tampico.....	July 11-17.....	3	2	Case arrived at Vera Cruz on steamship Monterey from Progreso, Mexico.
Tierra Blanca.....	Sept. 19.....	1		Present.
Tlacoatalpan.....	Sept. 25.....			State of Vera Cruz. Oct. 15: Several cases present in vicinity.
Tuxpam.....	July 25-Oct. 14.....	2	1	Do.
Vera Cruz.....	June 13-27.....	7		Do.
Do.....	July 25-Sept. 25.....	6	4	Do.
Zapotlan.....	July 14.....	1	1	Do.
Peru.....				Mar. 1-Apr. 30, 1921: Cases, 17; deaths, 57. June 1-30, 1921: Cases, 25; deaths, 13. July 1-15, 1921: Cases, 2.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Nov. 18, 1921—Continued.

YELLOW FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Peru—Continued.				
Department—				
Callao—				
Callao.....	Apr. 1-30.....	1	.....	At quarantine station. From Chiclayo.
Lambayeque—				
Chiclayo.....	Mar. 1-June 15....	47	18	
Chongollape.....	Mar. 1-Apr. 30....	12	3	
Ferrenafe.....	Mar. 1-31.....	.....	1	
Jayanca.....	Apr. 1-30.....	5	2	
Lambayeque.....	Mar. 1-Apr. 30....	20	7	
Monsefu.....	Mar. 1-June 15....	29	9	
Motupe.....	Mar. 1-Apr. 30....	46	12	
Olmos.....	Apr. 1-30.....	2	4	
Pacora.....	June 1-15.....	1	.....
Pomalca.....	Mar. 1-31.....	5	1	
Villa Eten.....	Mar. 1-Apr. 30....	7	1	
Zana.....	Apr. 1-30.....	1	.....
Libertad—				
Casa Grande.....	June 1-15.....	1	.....	On farm.
Guadalupe.....	Apr. 1-30.....	2	.....
Monteseo.....	July 16-31.....	1	.....
Pacanga.....	June 1-30.....	2	2	
Pacasmayo.....	July 1-15.....	1	.....
Paljan.....	June 1-30.....	13	7	
Do.....	July 1-15.....	1	.....
Pueblo Nuevo.....	Apr. 1-30.....	1	1	
Trujillo.....	Apr. 1-June 15....	2	2	Country.
On vessels:				
Barge J. S. McGaughy.....	Oct. 6.....	1	.....	At quarantine station, Pensacola, Fla., from Tampico, Mexico, Sept. 30.
Steamship Lurline.....	Aug. 13-27.....	2	1	At Mazatlan, Mexico, from Mazatlan, Mexico (Public Health Reports, Sept. 16, 1921, p. 2292).
Steamship Monterey.....	Sept. 18.....	1	.....	At Vera Cruz from Progreso, Mexico, Sept. 15, 1921. Patient went to Tierra Blanca.
Steamship Washington.....	Aug. 29.....	1	.....	At Mazatlan, Mexico.