PUBLIC HEALTH REPORTS

VOL. 37 MARCH 17, 1922 No. 11

SANITARY METHODS FOR SUPPLYING VESSELS WITH WATER FOR DRINKING AND CULINARY PURPOSES WHEN OBTAINED FROM SOURCES ASHORE.

By ARTHUR E. GORMAN, Assistant Sanitary Engineer, and EDMUND C. SULLIVAN, Junior Assistant Sanitary Engineer, United States Public Health Service.

The following regulations, concerning water provided for drinking and culinary purposes on vessels, were approved by the Secretary of the Treasury and promulgated in Department Circular No. 234 of March 3, 1921:

On and after April 15, 1921, any person, firm, or corporation operating vessels in interstate traffic or between foreign ports on or near the frontiers of the United States and adjacent ports in the United States will be required to furnish on such vessels water for drinking or culinary purposes under one of the following conditions:

(*a*) If water for drinking or culinary purposes is not obtained ashore, it must be treated by an approved method.

(*b*) If water for drinking or culinary purposes is obtained ashore, it must be from an approved source or treated by an approved method.

On and after April 15, 1921, the piping system on all vessels must be so arranged that no connection can be made between the drinking-water system and any other water system aboard.

On and after April 15, 1921, an approved sign, stating that the water is unfit to drink, must be properly placed at every tap or other outlet from which water of an unsatisfactory sanitary quality and safety may be obtained.

Since these regulations affect vessels operating in coastwise as well as in inland river and lake traffic, it is obvious that widely different conditions for supplying drinking water must be dealt with. Coastwise vessels must of necessity, on account of the salt in sea water, if for no other reason, obtain water from sources of supply ashore or distill sea water aboard. On the other hand, vessels plying on rivers and most of the inland lakes of this country have available "overboard" fresh water of varying degrees of safety and desirability for drinking purposes, ranging from the clear, sparkling, cold, and practically sterile water of certain areas of the Great Lakes to the relatively warm, muddy, and sewage-laden waters of the Ohio and Mississippi Rivers below some of the large cities of the Central West. In the past, water obtained directly from these sources and provided to passengers and crews for drinking purposes has been responsible for several typhoid fever outbreaks. Under the Federal regulations quoted in the beginning of this report, such practices are now unlawful.

To a shipping company, the selection of either or both of these two methods outlined in Treasury Department Circular No. 234 for providing drinking water on its vessels depends largely on the expense involved. This, in turn, is dependent on the waters in which the ships navigate, the type of vessels, and the service in which they are operated. Large storage tanks on a vessel may take up valuable space. The weight of the water carried in them must be given serious consideration. A water-treatment apparatus aboard, although eliminating the necessity for carrying large quantities of water and the inconveniences connected with obtaining drinking water from sources ashore, is an addition to the equipment not necessary for the navigation of the ship and is an apparatus which requires the careful attention of the engine-room crew.

The practicability of obtaining water for drinking and culinary purposes from certified sources ashore, for a bulk freighter operating on the Great Lakes and docking at piers and wharves along various canals and slips in the rivers or harbor at terminal ports, would be questionable, owing to the uncertainty of knowing in advance whether such water would be conveniently available at the piers at which the vessel would load or unload cargoes during a season. On the other hand, in Ohio and Mississippi River shipping, the city water at the larger ports of call is usually of very satisfactory sanitary quality and could be made conveniently available at the steamboat landing or wharf boat. In such cases, to obtain the drinking water for a large passenger vessel from these turbid and sewage-laden rivers and efficiently to treat same aboard would require careful operation of the treatment apparatus by trained men—a condition not likely to be provided for. Generally, it can be made convenient for all passenger vessels to obtain drinking water from certified sources ashore, because at the large terminal ports a safe water supply is usually available. Since the vessel docks at the same wharf or pier each trip, hydrants can be placed to facilitate prompt filling of the ship's water-storage tanks. However, for vessels not calling regularly at ports where drinking water of satisfactory sanitary quality or safety is available, some sort of treatment apparatus, such as a distiller, should be installed.

In order that all water provided on vessels for ablutionary purposes may be of the same sanitary quality and safety as that provided for drinking and culinary purposes, it may be more desirable and economical, on account of the great quantities of water required and the necessity for limiting the number of large water-storage tanks, to treat aboard water taken on en route than to carry aboard in tanks water obtained from sources ashore. This is particularly true in the case of vessels operating on the Great Lakes, for the physical quality of this water is such that it can be readily treated.

The majority of the companies owning the larger passenger vessels operating daily between terminal cities on these lakes (at which the public water supply is not only highly satisfactory but conveniently available at the piers) have elected to comply with the Federal regulations by disinfecting aboard all water used for the above purposes on their ships, obtaining the water to be thus treated either from sources ashore or directly overboard, or both. For smaller passenger boats, especially those operating on regular schedules and stopping at one or more large ports each day, it is usually more convenient and economical for the operating companies to make provisions for obtaining the ship's drinking water from certified sources ashore and for storing same aboard in tanks. This paper deals largely with supplying these vessels with water from sources ashore.

There are two satisfactory systems by which water may be distributed aboard a vessel—the "gravity system" and the "pressure system." Under the former system the storage tank or tanks are located upon the upper decks of the vessel, so that water may flow by gravity to all parts of the ship where it is desired. For supplying water to cabins on the upper decks it may be desirable to locate a small tank on top of the "Texas" or wheel house (see Fig. 1). There are some objections to locating water-storage tanks on the upper deck of vessels, which must be taken into consideration when a decision is made relative to the adoption of a water-distributing system for a ship. In winter the water in these tanks may freeze unless protected. On Great Lakes freighters a steam pipe is passed through the water-storage tanks, and by circulating steam through the pipe during cold weather, freezing of the water is prevented. Heavy loads of water on the upper decks may be undesirable on vessels of shallow draft or of light construction. In such cases the distribution of the load by means of a number of small tanks may be helpful.

As implied by its name, distribution by the "pressure system" consists of delivering the water under dynamic pressure. This pressure may be attained by direct pumping or by air pressure on the water in the storage tank. The air-pressure system possesses the value of furnishing pressure in the distributing system for a limited period of time upon occasions when there would be no steam pressure available in the boilers for the operation of direct pumps, as when boilers on river vessels are being washed out. Under the pressure system the storage tank may be located at any desirable place on the ship, preferably convenient to the engine room.

Water-storage tanks are frequently located in the hold of a vessel and there can be no objection to such a location, provided the tanks are clear from all bilge water and are provided with water-tight covers, which are kept locked. Tanks located in the hold are frequently inconvenient of access and consequently liable to neglect. For this

reason it is highly desirable that tanks used for storing drinking and cooking water be located on deck. For their protection against damage by freight they should be inclosed.

Under no circumstances should drinking-water storage tanks be formed in part by the hull of the ship, because of the danger of contaminating the water stored therein in case a seam in the section

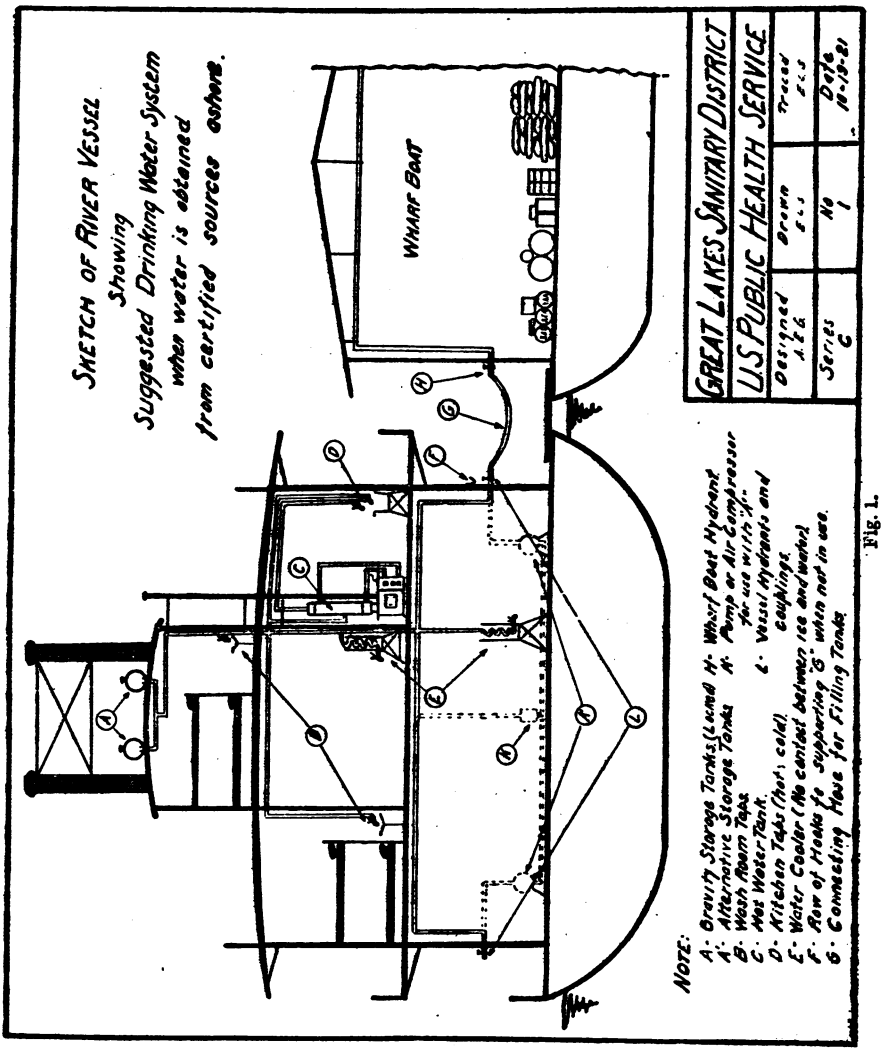

Fig. 1.

of the hull forming part of this tank should be opened as a result of an accident. Forward and aft "peak" tanks have been and still are being used for storage of drinking water, but it is advisable that the use of such tanks for this purpose be prohibited. Down pipes from toilets or any other sewer lines or drains should not pass through the drinking-water tanks on a vessel.

Drinking-water storage tanks should always be identified as such by a sign, especially when similar tanks for other water are located on the vessel. It is also desirable that the covers to all tanks used for storage of water for drinking or culinary purposes should fit tightly and be kept locked at all times when not necessary to open same. The keys should be intrusted to the charge of the ship's officer responsible for the drinking-water supply.

In either the "gravity" or "pressure" installations a distributing system physically separate from all other piping systems aboard should be installed for delivering the drinking water throughout the vessel to places where it may be conveniently available, such as the galley quarters, public saloons, parlors, vestibules, all decks, engine room, fire hold, and, when so desired, the staterooms. Of course, if the running water in public lavatories and staterooms is supplied from the drinking-water tanks, the distributing system for this water may be the same as the drinking-water system. All the taps and hydrants aboard which are conveniently located so that they can be drawn upon for drinking and culinary purposes and which deliver water that is not of the regular certified drinking and culinary supply should be posted with appropriate signs stating that the water is unfit to drink.

The hot water used in the galley quarters and the chilled water at the drinking water coolers should be supplied through branch feed lines having no returns to the main distributing system; but it is usually advisable to have all other branch lines connected back to the main line. Coils of pipe forming a gridiron in the ship's refrigerator or passing through the ice box of a cooler are more satisfactory than the separate ice and water compartments in drinking water coolers. By such an installation former water storage barrels can be converted into water coolers at little expense (see Fig. 1).

It is necessary that the drinking water supplied to roustabouts and members of the crew be of the same sanitary quality as that provided for the public. In fact, from a public health standpoint, it may be even more important that these persons should be protected; for, on account of their ignorance, if they should become "typhoid carriers" they would be a relatively greater menace to the public health. "Old timers" who tell of having drunk "the good old river or lake water" all their lives without experiencing a day's sickness, and superstitious Negroes, who believe that a lump of coal in the bottom of a barrel will "remove all sickness from river water," should be reasoned with if possible and their stories discredited by the truth.

The present practice on Ohio and Mississippi River vessels of storing water in barrels, tanks, or other containers and drawing the water in smaller receptacles from these containers as needed, is very

unsatisfactory and, where water to be used for drinking and culinary purposes is concerned, potentially dangerous, on account of the opportunities for contamination of the water through excessive handling. This "carry" system is very common on packet freight and passenger vessels operating on the Ohio and Mississippi Rivers.

Investigations of Ohio River Vessels.

During the summer of 1921 a special study was made of the sanitary quality of the water supplied for drinking and culinary purposes on passenger vessels operating on the Ohio River, especially out of Cincinnati.

Practically all of these vessels were supplied with drinking water from certified sources, such as the public supplies of Louisville, Ky., Cincinnati, Ohio, Evansville, Ind., Huntington, W. Va., and Pittsburgh, Pa. Water from these sources was delivered to the boats in many strange and different ways. On account of the fact that hydrants are not available at the landings in most of these cities, it was often necessary for the shipping companies to contract with some local truckman to deliver water to the landing in barrels. The contractor usually obtained this water from the nearest hydrant available above the public landing, and delivered it to the wharf boat in ordinary wooden kegs or barrels. In other cases, roustabouts were provided with wheelbarrows and sent to obtain water in kegs or barrels from the nearest hydrant available, or if wheelbarrows were not provided, the kegs or barrels were carried or rolled down the incline of the landing. The carrying of water in ordinary wooden buckets or galvanized-iron pails from the nearest hydrant to the storage tank or cooler aboard the vessel was another common practice. The cost of transporting water by these makeshift methods more than represents the interest charges upon a sum of money which would provide a satisfactory water-supply system upon the landing. As is usually the case in most shipping problems, the most satisfactory solution is the cheapest.

For general cooking, washing, and fire purposes, the water used aboard these vessels was invariably river water. Usually the hot water in the kitchen and pantry came direct from the boilers; whereas in some cases condensed steam was collected and used as far as possible, this supply being supplemented by the hot water from the boilers. Not infrequently the same container used for carrying river water from storage barrels to dry sinks in the staterooms for toilet purposes would be used for delivering drinking water from storage tanks to coolers and other smaller containers aboard the vessel. Sterilization of kegs, barrels, tanks, and pails in which drinking water was stored or transported was rarely done, the nearest attempt to it being a

rinsing of the container. To one familiar with the insanitary conditions which exist, on the lower deck especially, of river packet vessels, the need of further description to point out the potential dangers connected with the supplying of drinking water to these vessels is quite unnecessary.

The following table, giving data relative to the results of bacteriological analyses of samples of drinking water from packet freight and passenger vessels operating on the Ohio River out of Cincinnati, gives a good idea of the sanitary quality of the drinking water which was served to the crews and the traveling public on these vessels during the summer of 1921.

TABLE I.

[Samples were collected and analyzed by the Cincinnati Board of Health.]

Fleet.[a]	Vessel.	Source of supply.	Storage aboard.	Number of samples.	Average bacteria per c. c. 37° C 24 hours.	B. coli determinations.						Per cent positive 10 c. c.	Use.
						Positive.			Negative.				
						c. c.			c. c.				
						10	1	0.1	10	1	0.1		
A	1	River; boilers	Wooden barrel	6	2,400	1	1	1	5	5	5	16.7	Washing dishes.
A	1	City supplies	Galvanized-iron barrel	9	2,100	1	1	1	8	8	8	11.1	Drinking.
A	1	.....do	.....do	6	2,500	4	4	4	2	2	2	66.7	Cooking.
A	2	.....do	.....do	8	6,000	4	4	4	4	4	4	50	Drinking.
A	2	.....do	.....do	12	5,200	7	7	7	5	5	5	58.3	Cooking.
A	3	River; boilers	Wooden barrels	3	5,600	3	3	3	0	0	0	100	Washing dishes.
A	3	City supplies	Galvanized-iron barrel	14	5,500	3	3	3	11	11	11	21.4	Drinking.
A	3	.....do	.....do	12	5,700	7	7	7	5	5	5	58.3	Cooking.
B	1	City or private	Glass bottle or demijohn	9	2,900	5	5	5	4	4	4	55.6	Drinking.
B	1	.....do	Galvanized-iron tank	7	5,000	0	0	0	1	1	1	0	Cooking.
C	1	River; boilers	Wooden barrel	1	80	0	0	0	1	1	1	0	Cooking, washing dishes.
C	1	City supplies	Galvanized-iron barrel	8	6,300	8	8	8	0	0	0	100	Drinking.
C	1	.....do	.....do	3	4,100	3	3	3	0	0	0	100	Cooking.
C	2	River; boilers	Wooden barrel	3	123	0	0	0	3	3	3	0	Washing dishes.
C	2	City supplies	Galvanized-iron barrel	8	6,700	6	6	6	2	2	2	75	Drinking.
C	2	.....do	.....do	3	10,300	2	2	2	1	1	1	66.7	Cooking.
C	3	.....do	.....do	15	4,700	4	4	4	11	11	11	26.7	Drinking.
C	3	.....do	.....do	13	6,200	3	3	3	10	10	10	23.1	Cooking.
D	1	River; boilers	Wooden barrel	2	40	0	0	0	2	2	2	0	Washing dishes.
D	1	City and private	Wooden tank	6	4,400	3	3	3	3	3	3	50	Drinking.
D	1	.....do	.....do	6	6,300	6	6	6	0	0	0	100	Cooking.
D	2	River; boilers	Wooden barrel	2	30	0	0	0	2	2	2	0	Washing dishes.
D	2	City and private	Wooden tank	8	3,000	1	1	1	7	7	7	12.5	Drinking.
D	2	.....do	.....do	5	2,000	0	0	0	5	5	5	0	Cooking.

[a] Fleet A: Drinking water drawn from general storage tank to 5-gallon glass demijohns. Ice and water not in contact in cooler.
Fleet B: Drinking water purchased in 5-gallon glass demijohns. Ice and water not in contact in cooler.
Fleet C: Drinking water drawn from general storage tank in pails for filling metal cooler. Ice and water in contact.
Fleet D: Drinking water cooler filled from storage barrels direct. Ice and water not in contact.

It will be noted that in practically all cases the bacteria counts on agar plates incubated at 37° C. are far in excess of the Treasury Department standard of 100 per cubic centimeter. The bacteria counts were frequently as high in samples which gave negative results in presumptive tests for the *B. coli* group as in those which gave positive results. Since the public and private supplies from which these vessels obtained their water were all certified as producing a water of satisfactory sanitary quality, one would not expect such high bacteria counts if the water was properly protected from the time it was drawn from the hydrants ashore until it was delivered to the crew or traveling public aboard, from the taps in the galley quarters or at the drinking-water coolers. As described above, excessive handling of this water under conditions existing in the steamboat traffic certainly exposes it to many potential sources of contamination, and, therefore, in order to protect the water obtained ashore for drinking and culinary purposes, it is imperative that a more direct and satisfactory method for delivering this water to and storing and distributing the same aboard vessels should be adopted. In the following paragraphs suggested methods for different classes of passenger vessels are described.

Inland River Vessels.

These vessels are of three classes: (1) Regular packet, freight, and passenger vessels operating on regular schedules between terminal river ports; (2) local excursion steamers operating out of a single port; and (3) miscellaneous craft, such as tows, barges, dredges, sand suckers, and others. Vessels of each of these classes stop at same landing or wharf boats each trip, and therefore arrangements could be made to locate hydrants for conveniently obtaining drinking water ashore. An exception to this statement would be vessels which frequently operate on rivers along which no cities are located for great distances, or vessels which remain away from port for weeks at a time. On such vessels, there should be installed a distiller of sufficient capacity to supply all water used for drinking and culinary purposes.

At one of the large Ohio River cities a line was extended from the city main to the public landing at the expense of one of the shipping companies. There has been some discussion among city waterworks officials and the shipowners as to who should pay for such a line. As there is a distinct public health value to the community in having all vessels calling at its port provided with a safe drinking-water supply, the municipality should at least be willing to make reasonable concessions in connection with the extension of such a pipe line. Indeed, the more progressive city, in accordance with

its public health policies, might make this extension free of charge.

There is one feature common to river shipping which is different from that of lake or coastwise navigation, namely, the variation in the river level. On lakes the water level is fairly constant, and wharves and piers are built as "permanent" structures at a predetermined distance above high-water line. In tide-water ports, an elevation above high or mean tide is usually set for structures. But at river ports, if water shipping is to be uninterrupted, arrangements must be made to meet conditions developing as a result of varying levels of the river. Accordingly, the details in connection with the supplying of drinking water to these vessels must be adjusted to meet these conditions.

Obviously, a hydrant located at low-water level on the public landing or incline would be submerged during times of high water. Therefore, at river ports several connections to the water main at different hydrants could be set each in a valve box with a heavy cover fitting flush with the floor of the incline and provided with a seep drain (see Fig. 2). The spacing of these hydrants up the incline will in general depend on local conditions. It is believed that there should be at least one of these connections for every 15 feet vertical rise of the incline. Spacing at wider intervals will mean that long lengths of hose must lay on the landing. This hose, besides being inconvenient to trucking, will be liable to injury from the same.

Corresponding to the permanent piers and docks at lake and coastwise harbors are the river wharf boats, which serve as both piers and freight sheds. As the river rises or lowers, the position of the wharf boat is changed accordingly, and as a result the booms, gangplanks, and electric lines must be adjusted to accommodate this movement. So, also, it would be necessary to adjust the hose connection from the landing hydrants to the wharf boat, either by varying its length or by making a new hydrant connection. Between the wharf boat and the bank of the incline there is always a water space of several yards, depending upon the slope. Where public sewers discharge into the river at or above the wharf boats, the water around this vessel will be grossly contaminated, and every precaution must be taken to prevent the hose from dropping into it. If the water hose is attached to the wharf-boat connection and allowed to sag of its own weight between this point and the landing, it is very probable that when adjustments are made to this hose at the wharf-boat end, it will be dropped into the water. The contamination of the city water supplied to the storage tanks aboard the vessel with but a small quantity of this sewage-laden river water might result in the infection of a great many persons drinking water aboard. It is therefore desirable that the hose section between the wharf boat and the land-

ing be laid on or in a guideboard or pipe conduit, either of which may be conveniently attached to the frame structure supporting the guide rail on the gangplank (see Fig. 3).

On the wharf boat, from the land-side connection, a galvanized-iron pipe system could be installed to deliver this water to the river

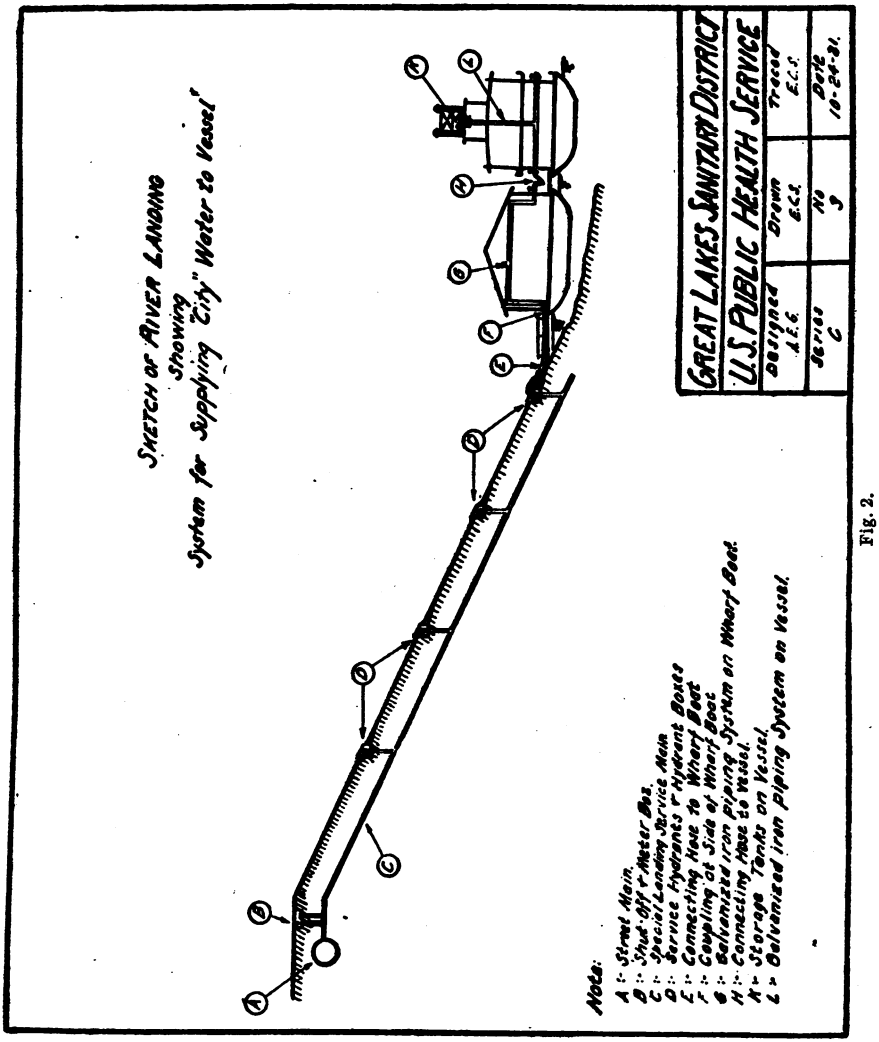

Fig. 2.

side of the boat. The pipe should be carried across the boat by attaching it to the lower chord of a roof truss. On the river side, as many connections can be made as are needed for the convenience of supplying water to the vessels docking alongside the wharf boat. Such a piping system on the wharf boat has a distinct value as a fire-protection measure.

It is very desirable that these connections be located as far above the floor of the wharf boat as will be convenient for making the hose attachment, in order to make as remote as possible the opportunities for contaminating the pipe ends. A valve at the river side of the wharf-boat piping should be provided, while one at the bank terminal would be convenient, although not necessary. For pur-

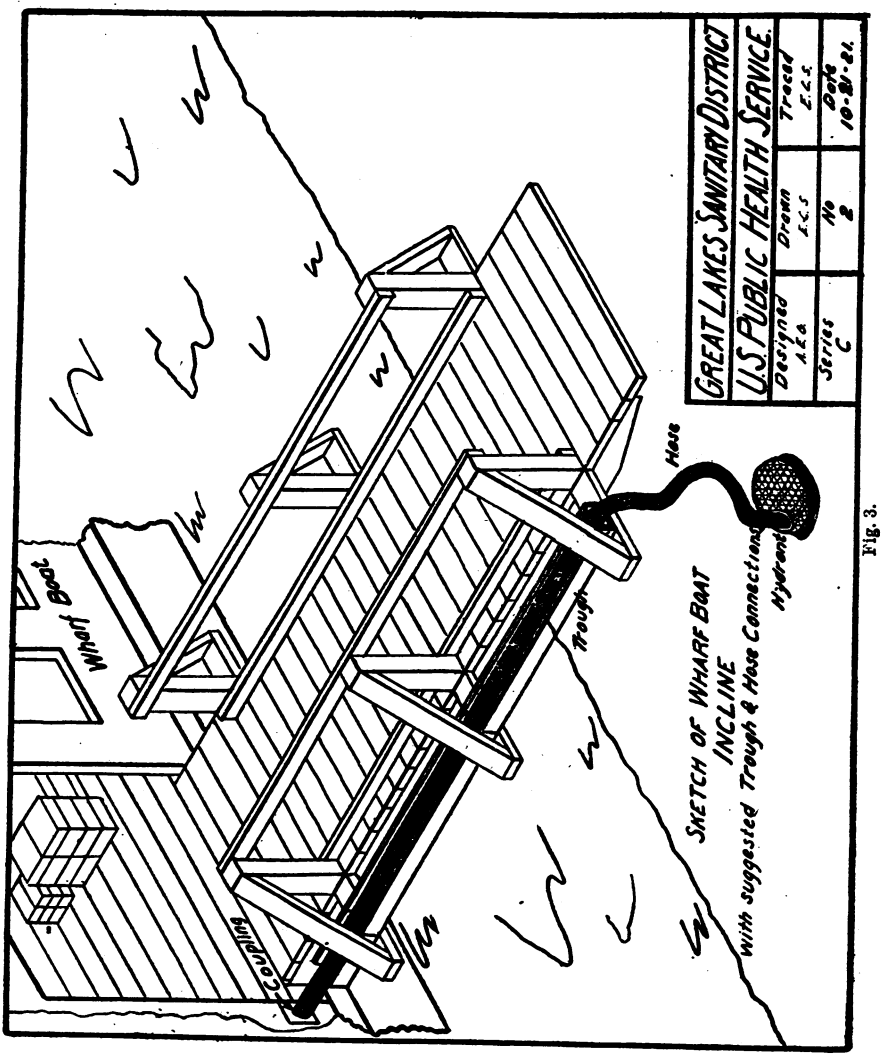

Fig. 3.

poses of identification and to warn against the stacking of freight in front of these water connections on the wharf boat, they should be properly posted. A sign with background in color of distinct contrast to the general color of the wharf-boat shed will very well serve this purpose. If pumps are installed on the wharf boats for pumping river water for fire purposes, or if any other hydrants for water other

than drinking water are located on the landing, all outlets and hydrants in these water systems should be identified and posted, warning against the use of this water for drinking purposes. The painting of drinking-water hydrants and outlets white and all others red is a simple way to distinguish between the two, the colors being symbolic of purity and danger, respectively.

Between the wharf-boat connection and the vessel a second section of hose will be necessary. Each vessel should carry its own drinking water supply hose, which should be used for no other purposes. It should be so stored away on the ship as to protect it from possible contamination. The shorter this section of hose is the better, and, therefore, it is highly desirable that delivery pipes to the storage tanks be installed on the vessel, with connections on both sides of the ship, to which the hose connecting with the wharf boat can be attached. The direct filling of storage tanks through a long hose inserted into the tanks is unsatisfactory, as careless handling of the hose or leaving the tank cover open may result in contamination of the drinking water.

Coastwise Vessels.

There are two methods by which water to be used for drinking and culinary purposes and obtained from certified sources ashore may be supplied to this class of ships:

(1) Through hose direct from hydrants on the wharves or piers at which the vessel docks, or

(2) Through hose direct from water boats, whose tanks are filled through hose from hydrants on wharves or piers.

(1) The location of hydrants on docks is a very important matter, and is one which should be given careful study. If it is desired to locate a hydrant under the floor of the wharf, in order to have no obstructions on the platforms, care should be taken to see that the end of this hydrant is protected against contamination which may result from filth dropping through the platform floor or being washed through during rains or flushing of the floors of the piers. A "gooseneck" curve on the pipe forming this hydrant is usually satisfactory in preventing filth from collecting in the end of the pipe. In order to prevent the dropping of the end of the hose into the polluted waters of the harbor, either through accident or carelessness, it is desirable to set all hydrants back at least 2 feet from the edge of the pier. It is obvious that the hydrants should be self-draining and the supply pipes protected against freezing in winter.

Drinking-water hydrants should be so marked as to be readily distinguished from all other hydrants on a pier, as outlined under the section on river vessels.

The size and length of water hose will, of course, depend upon local conditions; but every effort should be made to reduce the length of hose in the interests of economy and convenience. To prevent injury to hose having threaded-end couplings, a metallic cap should be provided and screwed over the end when not in use. The cap should be fastened to the hose coupling by a chain to insure against losing it. Suitable storage should be provided, either on board the vessel or on the dock, for drinking-water hose, which should be easily identified so that it would not be used for any other purposes. Painting this hose white would be an inexpensive way of identifying it.

(2) For water boats, particular care should be given to the details mentioned above for protecting the water delivered to its tanks. The pump for delivering water from the water boat to the supply tanks on a vessel should be used for this purpose only and should be independent of all other water systems. In case water is transferred from the water boat to the supply tanks aboard a vessel, on the "siphon principle," special care should be taken in charging this siphon that only the drinking-water supply is used. Sterilization and flushing of storage tanks on water boats should be done weekly without fail.

The design and sanitation of water boats are very important public-health problems, if the delivery of water by this medium to other vessels for drinking and culinary purposes from certified sources ashore is to be free from the many potential dangers associated with it. The ideal type of water boat is one in which the storage tanks are of iron or steel, each tank having no openings or connections other than a bolted manhole, an intake pipe, a discharge pipe, and a connection for complete draining of the contents of the tank into the bilge. There are many water boats in which the tanks are constructed of plain cypress planks with tar-pitched joints. The deck of the vessel usually forms the top of such tanks; and unless extreme care is taken to maintain them in a tightly calked condition, there is grave danger of contamination of the water in the tanks by leakage from the deck through these unprotected seams. The hatches to such tanks should be of water-tight construction, kept locked at all times, and the edges should be protected by a leather or rubber gasket fitting closely to a raised flange.

For filling the tanks, a filling plug (provided with a cap) raised above the level of the boat's deck, to which the delivery hose from the dock may be connected, should be provided. The discharge pumps for delivering water from the water boat should be independent of all other water-supply systems or sources. It is essential that there should be no way by which any water other than that obtained from the certified source of supply ashore may be admitted to the storage tanks or delivered to another vessel for drinking and culinary

purposes from the water boat. Care should be taken to prevent contamination of the hose used aboard this type of vessel. Threaded caps should be provided for the protection of the hose ends when not in use. The decks should be kept in a clean condition.

Weekly sterilization and thorough draining and flushing of the tanks should be part of the routine procedure. A satisfactory method of sterilization is to allow a solution of hypochlorite of lime in the proportion of 1 pound of the chemical to every 5,000 gallons of water to remain overnight in the tanks while completely filled. In the morning the tanks should be emptied and then flushed thoroughly.

Great Lakes Vessels.

The method of supplying water for drinking and culinary purposes from sources ashore to Great Lakes vessels is similar in every respect to that for coastwise vessels. The same precautions relative to location, protection, and identification of hydrants described above should be taken. Water boats are not common on the Great Lakes.

At Buffalo, Detroit, and Chicago city water was supplied to Great Lakes passenger vessels operating during the 1921 season with satisfactory results. The following table is a compilation of the results of bacteriological analyses of samples collected from the drinking systems on these vessels in the summer of 1921 and analyzed by the local city health departments:

TABLE II.

Fleet.	Vessel.	Source of supply.	Storage aboard.	Number of samples.	Average bacteria per c. c. 37° C., 24 hours.	B. coli determinations.						Per cent positive, 10 c. c.
						Positive.			Negative.			
						C. c.			C. c.			
						10	1	0.1	10	1	0.1	
A	1	Detroit	Iron tanks	37	145	6	5	1	31	32	36	16.2
B	1	do	do	8	225	0	0	0	8	8	8	0
C	1	do	do	21	180	0	0	0	21	21	21	0
C	2	do	do	2	250	0	0	0	2	2	2	0
C	3	do	do	7	200	0	0	0	7	7	7	0
D	1	Buffalo	do	48	330	13	4	0	35	44	48	27.1
D	2	do	do	41	410	12	7	0	29	34	41	29.3
E	1	Chicago	do	11	18	1	....	....	10	11	11	9.1

If one is to compare this table with the one (Table I) given for water supplies on Ohio River vessels he should bear in mind the point brought out by the sanitary experts reporting to the International Joint Commission in connection with their classification of Great Lakes water, given on pages 20 and 21 of the Progress Report of this

commission dated January 16, 1914, from which the following is quoted:

"In considering this classification it is to be remembered that it is *arbitrary*. The classification arises out of the data contained in this report. The differences in bacterial flow of these lake waters and that of comparatively warm river waters, subject to agricultural and municipal drainage, is very great, especially when measured by bacterial counts on agar and *B. coli*, which represent almost invariably for these lake waters recently added sewage organisms."

By their classification, bacteria counts on agar which might be considered relatively low (under 100 per c. c.) in waters of some district could and probably would be associated with gross pollution of recent origin in the waters of the Great Lakes. The water supplies from Buffalo, Detroit, and Chicago are all obtained from the Great Lakes in areas subjected to pollution, the only treatment before delivery to the city mains being disinfection by chlorine. For this reason it is believed that the bacterial counts on agar reported in the above table are not of great sanitary significance where the determinations for *B. coli* were negative; for while stored in tanks aboard the vessels, especially if these tanks were in proximity to the engine rooms, "aftergrowths" of spore-forming bacteria of nonfecal origin might develop.

Tugs, Tender, Tows, Canal Barges, and Miscellaneous Craft.

The water supply for these smaller vessels, if obtained from sources ashore, should be delivered to and stored aboard the boat with the same care as that given to larger vessels. The gravity system with a storage tank or tanks on the cabin house is probably the most economical installation. The carrying of water aboard in pails and storing it in a keg or crock is very unsatisfactory from a sanitary standpoint for the reasons already outlined in this report. The practice of obtaining water for drinking and culinary purposes from overboard in a pail to which a rope is attached, which is so common on these small boats, is as primitive as it is vicious and insanitary. This practice is all the more dangerous on smaller craft, as they frequently navigate in harbors and relatively shallow waters near shore, which are usually grossly polluted by sewage. (See Fig. 4.)

Conclusions.

1. Where water to be supplied for drinking and culinary purposes on vessels is obtained from sources ashore which are certified as producing water of satisfactory sanitary quality and safety, such water may, through excessive handling in delivery to and storage aboard a vessel, be so contaminated as to render it entirely unfit and unsafe for human consumption.

2. The methods by which drinking water was delivered to passenger vessels operating on the Ohio and Mississippi Rivers during the

summer, 1921, involved such excessive handling of this water that it was frequently contaminated and thereby rendered unsafe for human consumption.

3. Water obtained from sources ashore, where the hydrants are located on or at the pier or wharves, can be delivered to these vessels

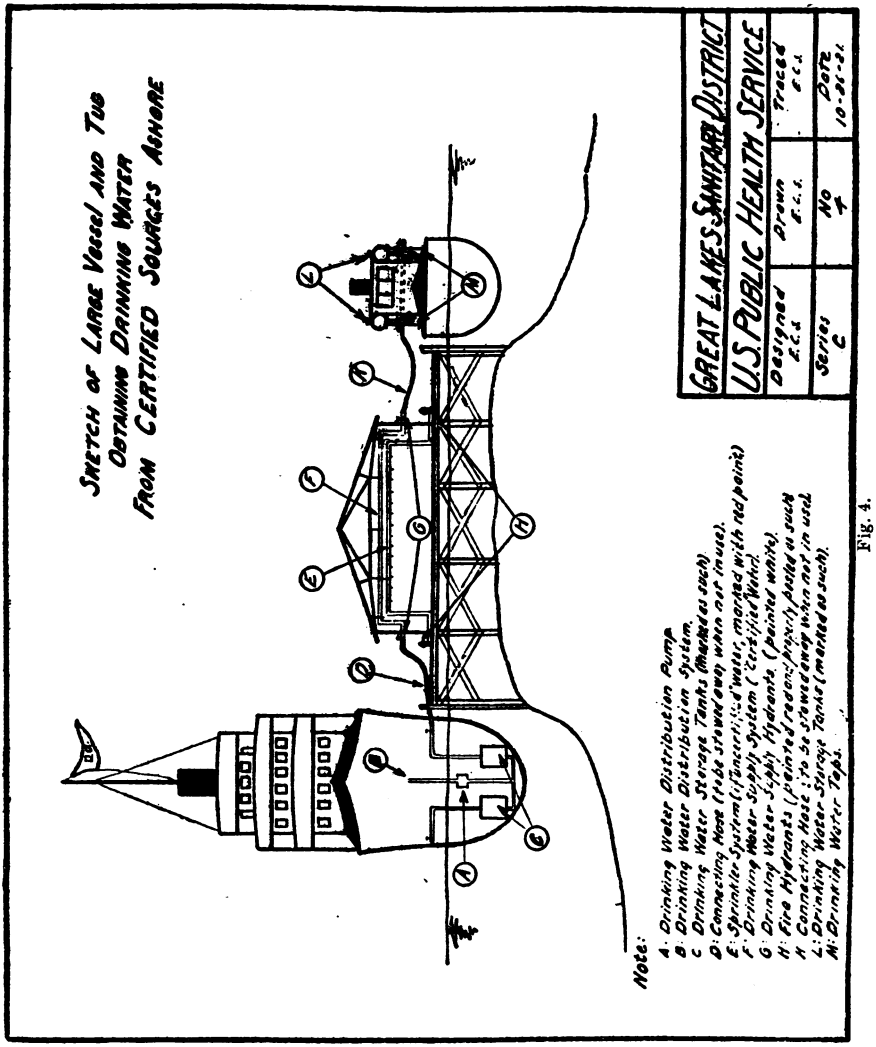

Fig. 4.

through hose with a reasonable minimum exposure to contamination, if proper precautions are taken.

4. The method by which drinking water is stored aboard and distributed throughout a vessel is fully as important in protecting this water against contamination as the means by which it is delivered to the vessel.

Recommendations.

1. Where water to be used for drinking and culinary purposes on vessels is obtained from certified sources ashore, hydrants from which this water is to be drawn should be located on the pier, dock, or landing so that this water can be conveniently delivered to the vessel through a hose or pipe, with a minimum opportunity for exposure to possible sources of contamination.

2. Consistent with local conditions, the length of hose necessary to deliver water from the hydrant on the pier or landing to the boat should be as short as practical.

(NOTE.—By installing a delivery pipe line from the lower deck of a vessel to the storage tanks, a length of hose necessary to connect the hydrant to this delivery line will be all that is necessary.)

3. In river shipping, when the water for drinking and culinary purposes for a vessel is obtained from sources ashore, the hose connecting the hydrant on the landing to the wharf boat should be protected against possible contamination from being accidentally dropped into the river by attaching it to a guide board or passing it through a protecting conduit fastened to the gangplank.

(NOTE.—For delivery of water across the wharf boat a special pipe line should be installed.)

4. In locating the drinking-water hydrants on piers, wharves, landings, and wharf boats, special consideration should be given to the nature of the traffic at these places, with a view to preventing contamination of the delivery hose connections on the hydrant.

5. All hydrants at which drinking water is obtained at the pier, wharf, landing, or wharf boat should be identified as such by a conspicuous sign of letters not less than 4 inches in height; and in case hydrants at which water for other than drinking purposes is available are located on the pier, wharf, landing, or wharf boat, they should be painted red and the drinking-water hydrants white, and both identified by signs.

6. The hose used for filling drinking-water tanks on vessels should be used for no other purposes, and it should be stored aboard the ship or at the pier, wharf, landing, or wharf boat so as to protect it against possible contamination.

7. One of the licensed officers of every vessel should be designated as "water-supply officer" and held responsible for the drinking water provided on the vessel.

LET THE CHILD DO THE "FOLLOW-UP" IN SCHOOL HEALTH WORK.[1]

By EDITH B. LOWRY, Acting Assistant Surgeon, United States Public Health Service.

Medical examination of school children has been carried on in a more or less efficient manner in some parts of the country for approximately 30 years. However, it required the revelations of the World War to start the wave of public opinion in favor of general health for children. Following the cessation of war activities, public opinion has been focused upon the physical condition of the children, as shown by the country-wide campaign for their weighing and measurement, and by the extensive practice of physical examinations and inspections. But, while the need for correction has been established, little has been accomplished as yet in the way of results. Moreover, there is danger that undirected or misdirected effort, failing in definite results and causing annoyance to teachers, may tend to close the schools to health activities.

Investigations proved that although in many cases the physical examinations had been made in a satisfactory manner, the correction of defects was anything but satisfactory. Notes sent to the parents were lost by the wayside or ignored at home; the few public health nurses could reach only an infinitesimal portion of the parents by home visits, which seemed to be the best method of obtaining results. "Lack of trained workers" was the cry everywhere. Efficient workers were unattainable even if funds were provided.

In an effort to discover some method of obtaining results without a prohibitive staff of home visitors, many schools were visited where physical examinations already had been carried on. Questioning the children revealed that the majority of them had forgotten the health advice given them, and the teachers were equally ignorant of the physical condition of their pupils. Everywhere the teachers expressed a desire for some form of record of the physical examinations that could be left in the schoolroom. The ordinary medical examination card was not of much value for this purpose, for the teachers already were overburdened with the multiplicity of duties and could not spend much time going over cards time and again, even if the records on the cards meant anything to them. The teachers, as a rule, were as poorly informed on the subject of health as were their pupils. In many instances the teachers themselves were in as poor physical condition as any of the pupils, some even were found with active tuberculosis, and the teacher with perfect teeth was almost as rare as the efficient health worker. "Yes; I know I should go to a dentist," was a remark frequently called forth.

[1] Read at the meeting of the American Medical Association, Boston, June, 1921.

What were we to do about it and what was the solution? Somewhere memory brought forth the old saying, "When in Rome do as Romans do." This, translated according to present needs, meant, "When in the schools, follow the methods of the school people to which the children as well as the teachers are accustomed."

In all lines of education except health, educators have found it necessary to set a certain standard for the children toward which they can work. For instance, a third-grade child is required to learn a certain amount of arithmetic and be able to read certain books. He is not given the indefinite instruction to "Learn arithmetic," "Learn to read."

Following this line of thought, the question came whether it were possible to set a definite standard of health for the children rather than say to them, "Be healthy; be well," without giving them an adequate idea of what health meant.

In the course of child-hygiene investigations by the Service in Mississippi it was suggested that a definite requirement be set for the health of school children for the current year. This suggestion was adopted by the State health department and the State department of education. Later it was adopted by the Kentucky division of child hygiene with satisfactory results.

The requirement outlined is as follows:

Eyes—
(a) Vision normal or corrected by glasses.
(b) No evidence of disease or inflammation.

Ears—
(a) Hearing normal.
(b) No evidence of disease or inflammation.

Nose—
(a) No adenoids.
(b) No other obstruction.

Throat—
(a) No diseased or enlarged tonsils.
(b) No evidence of disease or inflammation.

Mouth—
(a) No unfilled cavities in teeth.
(b) Teeth clean, showing evidence of daily care.
(c) Gums healthy.

Skin—
(a) No eruption.
(b) Scalp clean, free from scales.
(c) Scalp free from pediculosis.

Chest—
(a) No evidence of disease or inflammation of lungs.
(b) Chest expansion of at least 2 inches.

Vaccination—
Good scar or certificate of recent vaccination for smallpox.

Nutrition—
(a) Weight normal or not more than 10 per cent over.
(b) Negative hookworm report.
(c) No enlarged spleen (malaria).

No claim is made that this is an ideal health standard, but it is claimed to be a standard that should and can be lived up to by every person, whether child or adult. The requirement purposely was set sufficiently low so that it would be possible for it to be reached by practically every child in school who made the effort. For this reason, no mention was made of cardiac lesions, for instance, as such a condition probably could not be corrected by the child. The child should not be discouraged by an impossible standard.

The outline was arranged to take in the more obvious defects and does not include many defects that would be noted on a more rigid examination, the object being to interest the child in his own health and to secure his cooperation in having these more common defects corrected. As the health condition of a school improves from year to year, the requirement can be raised accordingly. How common the defects mentioned in the requirement are in the average school is shown by the fact that it is rare to find more than one child in a room (with the exception of a few cities) that meets all the requirements. The greatest failure was under the requirement for mouth, and the failure for throat requirement followed a close second.

HEALTH SCORE CHART.

In order to visualize health to the pupils and teachers, to give it a definite meaning, a Health Score was devised which tells at a glance the physical condition of the children in the room.

The charts were designed, first, to meet the request of teachers for a record to be left in the school and, second, to impress upon the children the ideal of health. In other words, "It is a record in the language to which children are accustomed." Charts and stars are used in practically every school all over the country. By the use of these charts the child himself is stimulated to do "follow-up work" in the home. It is felt that in his desire to "follow the crowd" and have a gold star placed before his name, his importunities will be more successful in securing the attention of the parents than any other method.

What the Health Score means in the school room is this: The principal of the school is visiting this room and hears a little child read very badly. Looking at the Health Record he probably finds that the child has no star in the column headed "Eyes." The thought comes immediately, "Why, that child has something the matter with his eyes." At once health is a vital subject to him.

On the Health Score a red star indicates that the child was, on the original examination, up to the standard in the subject indicated at the head of the column. For instance, a red star in the column marked "Eyes" indicates that at the time of the first examination

the child's vision was normal or corrected by glasses; also that there was no evidence of disease or inflammation.

Blue stars indicate corrections. For example, if the child had poor vision and later had this corrected by glasses, and there was no evidence of disease or inflammation, he would be entitled to a blue star under "Eyes." The two colors simply show graphically whether any corrections are being obtained.

Gold stars are placed before the names of children who have met all health requirements, that is, when every space following the child's name is filled with either a red or a blue star.

An especially designed health button may be presented to every child who has obtained a gold star. This should be presented with as much ceremony as a diploma, for we consider that any child who has given the nesessary attention to his health to become a gold star pupil is entitled to some recognition.

The following instructions are given for using the Health Score Chart, which is intended to be used in connection with the height and weight record.

Names.—The names of the children should be filled in plainly with black ink in the same order as they appear on the classroom weight chart. The two charts are companions and should be hung together in the schoolroom in such position that they can be seen readily by the pupils.

Red Star.—Red stars are stamped in the various columns when the child is free from defects or is up to the standard of the subject indicated at the head of the column at the time of the original medical examination. For example, a red star in the column marked "Eyes" indicates that at the first examination the child's vision was either normal or had been corrected by glasses, and also that there was no evidence of disease or inflammation of the eyes.

Blue Star.—Blue stars indicate correction. For example, if at the time of the first medical examination the child had poor vision, which was later corrected by glasses and there is no evidence of disease or inflammation, he would be entitled to a blue star under the heading "Eyes."

Gold Star.—A gold star is placed in the column in front of the name of the child who has met all the health requirements; that is, when every space following the child's name is filled with either a red or blue star.

Two Gold Stars.—Two gold stars may be placed in the column in front of the name of the child when it is impossible for the child to obtain relief from certain physical defects, even though everything possible has been done. In such a case the child may have two gold stars after all other corrections have been made. For example, if a child's deafness is such that it is impossible to correct it, even though everything possible is done; or if a child suffering from chronic infantile paralysis has met all the other requirements of the health score card, then he is entitled to the two gold stars.

The child should not be given a health button in such case until after conference with the director of the State division of child hygiene.

Health button.—In order further to stimulate the interest of the child in completing the health score, an award in addition to the gold star should be made in the form of a health button, after the physician in charge of the examination finds that he has completed the health score.

The health button should show the year in which it is given so that if the score is changed another year, or the child develops defects, there will be no question con-

cerning his right to wear the button. The health button should be furnished by the State division of child hygiene.

The presentation of a health button should be an occasion of special ceremony, and the child's parents should be invited to attend.

How to make out the Health Score record.—The health record can be made in the office from the school examination cards. It will save time to make the entire chart before adding any stars, indicating by "O" the space for red stars and then pasting or stamping the stars over these letters.

Every space after a child's name should be marked in some manner, *as blank spaces will indicate that the examination has not been made.*

Indicate by "*a*," "*b*," or "*c*" the defects found, using the Health Score Chart as a guide. Example:

In the column headed "Eyes"—

If the examination has not been completed, leave this space blank.

If vision is normal and there is no evidence of disease or inflammation, put an "o" in this space.

If vision is normal but there is some inflammation, use a "*b*."

If vision is defective but there is no inflammation or disease, use an "*a*."

If vision is defective and there is also inflammation, use "*a–b*."

Again, under nutrition, a small "a" will indicate under weight, while a capital "A" will indicate those who are over weight for a given age. This will make it easy to distinguish the children who are under weight and those who are over weight.

By using this method it will be easy to make a summary of defects from the chart, as by adding all the "a" marks in the column under "Eyes" the total number with defective vision will be found.

CLASSROOM WEIGHT CHARTS.

The following instructions are given for the use of the Weight Chart:

Names of the children should be filled in by the teacher in alphabetical order, surname first. Use black ink.

Age (*nearest birthday*) should be filled in by the teacher. Use black ink.

Height should be recorded in inches. Height should be taken *without* shoes, as the heels of shoes vary in height. Use black ink.

Normal weight can be found by consulting height and weight tables. The normal weight column should be filled in with *red* ink.

Monthly weight may be filled in first with pencil, then inked according to the following directions:

(*a*) If a child is of normal weight or not more than 10 per cent above, use red ink. This calls attention to the children who have reached the goal.

(*b*) If the child is below normal weight or more than 10 per cent above, use black ink.

Weight should be taken *without* shoes, coats, or sweaters.

Later weighing.—Arrangements should be made to have the children weighed every month, as this will show whether they are improving in nutrition. In some cases the nurse or permanent worker will have time to do this; in others the teachers will do the weighing; in other cases a committee of two mothers will volunteer for this help; sometimes this may be assigned to one of the older pupils. In all cases the weighing should be done as nearly as possible on the same day of the month.

Scales.—Every school building should have good balance scales as a part of the permanent equipment. Do not buy spring scales, as they get out of order easily and are not reliable. It is economy to buy good scales. A description of scales and price

lists will be furnished from this office on request. The money to buy scales may be obtained in several ways, among which are the following: (1) Appropriated from school funds; (2) purchased from funds of parent-teacher organization; (3) purchased from Christmas seal money; (4) purchased from Junior Red Cross funds; (5) purchased by proceeds from entertainment or "tea" given for this purpose.

These charts are designed to be left in the schoolroom. They are supplied by the State. They may be obtained from the United States Public Health Service or the Bureau of Education, Department of the Interior, Washington, D. C.

U. S. PUBLIC HEALTH SERVICE, HEALTH SCORE OF THE CHILDREN IN .... GRADE, ... SCHOOL.

192 -192 .

	Name of child.	Eyes.	Ears.	Nose.	Throat.	Mouth.	Skin.	Chest.	Vaccination.	Nutrition.			

Class score at beginning of session, ——. Class score at end of session, ——.

.... *Teacher.*

U. S. Public Health Service.

Weight record of the children in..............grade..............School. 192..–192...

Name.	Age.	Height Sept.	Normal weight.	Year. Actual weight.										End of school year.	
				Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May.	June.	Height.	Normal weight.

Height and weight table for boys.

Height inches.	5 yrs.	6 yrs.	7 yrs.	8 yrs.	9 yrs.	10 yrs.	11 yrs.	12 yrs.	13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18 yrs.
39...	35	36	37											
40...	37	38	39											
41...	39	40	41											
42...	41	42	43	44										
43...	43	44	45	46										
44...	45	46	46	47										
45...	47	47	48	48	49									
46...	48	49	50	50	51									
47...	....	51	52	52	53	54								
48...	....	53	54	55	55	56	57							
49...	....	55	56	57	58	58	59							
50...	....	....	58	59	60	60	61	62						
51...	....	....	60	61	62	63	64	65						
52...	....	....	62	63	64	65	67	68						
53...	....	....	....	66	67	68	69	70	71					
54...	....	....	....	69	70	71	72	73	74					
55...	....	....	....	....	73	74	75	76	77	78				
56...	....	....	....	....	77	78	79	80	81	82				
57...	....	....	....	....	....	81	82	83	84	85	86			
58...	....	....	....	....	....	84	85	86	87	88	90	91		
59...	....	....	....	....	....	87	88	89	90	92	94	96	97	
60...	....	....	....	....	....	91	92	93	94	97	99	101	102	
61...	....	....	....	....	....	....	95	97	99	102	104	106	108	110
62...	....	....	....	....	....	....	100	102	104	106	109	111	113	116
63...	....	....	....	....	....	....	105	107	109	111	114	115	117	119
64...	....	....	....	....	....	....	.....	113	115	117	118	119	120	122
65...	....	....	....	....	....	....	.....	.....	120	122	123	124	125	126
66...	....	....	....	....	....	....	.....	.....	125	126	127	128	129	130
67...	....	....	....	....	....	....	.....	.....	130	131	132	133	134	135
68...	....	....	....	....	....	....	.....	.....	134	135	136	137	138	139
69...	....	....	....	....	....	....	.....	.....	138	139	140	141	142	143
70...	....	....	....	....	....	....	.....	.....	.....	142	144	145	146	147
71...	....	....	....	....	....	....	.....	.....	.....	147	149	150	151	152
72...	....	....	....	....	....	....	.....	.....	.....	152	154	155	156	157
73...	....	....	....	....	....	....	.....	.....	.....	157	159	160	161	162
74...	....	....	....	....	....	....	.....	.....	.....	162	164	165	166	167
75...	....	....	....	....	....	....	.....	.....	.....	.....	169	170	171	172
76...	....	....	....	....	....	....	.....	.....	.....	.....	174	175	176	177

Prepared by Dr. Thomas D. Wood.

About what a boy should gain each month.

Age.	Oz.
5–8.....	6
8–12.....	8
12–14.....	12
14–16.....	16
16–18.....	8

About what a girl should gain each month.

Age.	Oz.
5–8.....	6
8–11.....	8
11–14.....	12
14–16.....	8
16–18.....	4

Try to do as much better than the average as you can.

Height and weight table for girls.

Height inches.	5 yrs.	6 yrs.	7 yrs.	8 yrs.	9 yrs.	10 yrs.	11 yrs.	12 yrs.	13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18 yrs.
39...	34	35	36											
40...	36	37	38											
41...	38	39	40											
42...	40	41	42	43										
43...	42	42	43	44										
44...	44	45	45	46										
45...	46	47	47	48	49									
46...	48	48	49	50	51									
47...	....	49	50	51	52	53								
48...	....	51	52	53	54	55	56							
49...	....	53	54	55	56	57	58							
50...	....	....	56	57	58	59	60	61						
51...	....	....	59	60	61	62	63	64						
52...	....	....	62	63	64	65	66	67						
53...	....	....	....	66	67	68	68	69	70					
54...	....	....	....	68	69	70	71	72	73					
55...	....	....	....	....	72	73	74	75	76	77				
56...	....	....	....	....	76	77	78	79	80	81				
57...	....	....	....	....	....	81	82	83	84	85	86			
58...	....	....	....	....	....	85	86	87	88	89	90	91		
59...	....	....	....	....	....	89	90	91	93	94	95	96	98	
60...	....	....	....	....	....	....	94	95	97	99	100	102	104	106
61...	....	....	....	....	....	....	99	101	102	104	106	108	109	111
62...	....	....	....	....	....	....	104	106	107	109	111	113	114	115
63...	....	....	....	....	....	....	109	111	112	113	115	117	118	119
64...	....	....	....	....	....	....	.....	115	117	118	119	120	121	122
65...	....	....	....	....	....	....	.....	117	119	120	122	123	124	125
66...	....	....	....	....	....	....	.....	119	121	122	124	126	127	128
67...	....	....	....	....	....	....	.....	.....	124	126	127	128	129	130
68...	....	....	....	....	....	....	.....	.....	126	128	130	132	133	134
69...	....	....	....	....	....	....	.....	.....	129	131	133	135	136	137
70...	....	....	....	....	....	....	.....	.....	.....	134	136	138	139	140
71...	....	....	....	....	....	....	.....	.....	.....	138	140	142	143	144
72...	....	....	....	....	....	....	.....	.....	.....	.....	145	147	148	149

Prepared by Dr. Thomas D. Wood.

Height and weight to be taken in house clothes without shoes. Weigh on the same day each month. Age, the nearest birthday. Each child to enter his own weight.

CASES OF INFLUENZA REPORTED BY STATES.

COMPARISON OF THE FIRST 10 WEEKS OF THE YEARS 1920, 1921, AND 1922.

The accompanying table shows the number of cases of influenza reported for the first 10 weeks of 1922 by 24 States, compared with similar reports for the corresponding weeks of the years 1920 and 1921. All weeks ended on Saturday. The first week of 1922 ended January 7; in 1921 the first week ended January 8; and in 1920 it ended January 10.

Number of cases of influenza reported by States for the first 10 weeks of the years 1920 to 1922, inclusive.

State.	Week number.									
	First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.
Alabama:										
1922	2	.....	5	3	26	95	29	20	31	185
1921	.....	.....	.....	.....	.....	5	11	.....	7	14
1920	.....	.....	8	203	1,296	3,236	2,366	3,603	3,885	1,047
Arkansas:										
1922	83	40	64	88	192	232	158	202	371	409
1921	63	78	75	37	52	70	19	94	63	88
1920	35	53	179	595	5,663	6,599	2,793	1,690	2,576	2,055
California:										
1922	38	.....	28	48	92	845	4,315	10,033	9,917	4627
1921	22	23	30	37	.....	98	.....	194	143	149
1920	32	322	1,604	7,133	13,660	11,887	7,420	5,527	918	496
Connecticut:										
1922	5	7	9	22	109	518	1,325	675	711	486
1921	13	14	13	13	8	9	12	18	18	6
1920	1	14	1,123	4,664	5,666	4,868	2,771	1,183	571	229
Delaware:										
1922	.....	.....	5	2	7	2	2	9	.....	2
1921	9	12	12	4	2	7	19	20	19	10
1920	1	.....	5	21	86	78	43	36	50	33
District of Columbia:										
1922	1	3	4	7	5	9	8	7	9	9
1921	2	2	2	4	4	1	1	1	4	8
1920	9	126	1,216	1,616	557	298	104	36	21	6
Florida:										
1922	3	6	21	6	15	35	123	118	68	72
1921	6	3	4	10	3	6	4	4	6	12
1920	2	10	484	1,547	1,581	1,735	1,420	1,026	580	413
Georgia:										
1922	21	19	52	64	74	81	128	162	179	149
1921	30	24	26	25	37	26	35	8	32	44
1920	27	27	95	617	3,256	5,411	7,809	8,210	3,677	3,087
Illinois:										
1922	25	49	38	125	108	417	633	1,069	809	735
1921	42	18	27	19	28	35	34	23	19	15
1920	73	3,251	14,805	29,156	30,330	23,037	7,237	3,062	1,344	453
Kansas:										
1922	9	23	88	121	364	440	480	901	626	557
1921	13	9	13	29	5	9	9	12	5	6
1920	17	45	1,130	8,582	16,960	17,699	10,026	3,590	3,332	1,551
Kentucky:										
1922	17	25	18	51	332	640	705	748	1,088	.....
1921	10	8	40	19	33	21	25	28	53	13
1920	45	75	170	878	2,536	6,067	4,295	8,584	4,099	3,640
Louisiana:										
1922	7	8	4	8	10	39	36	368	469	1,603
1921	39	.....	.....	10	.....	.....	22	.....	.....	.....
1920	52	27	123	763	1,901	3,690	3,153	3,363	2,541	1,982
Maine:										
1922	5	9	18	14	97	145	131	441	487	352
1921	18	6	14	7	1	2	2	1	.....	3
1920	1	4	.....	387	936	3,942	3,702	2,134	1,130	1,105
Maryland:										
1922	21	40	52	93	110	189	263	431	612	814
1921	70	79	82	107	125	164	143	279	368	367
1920	.....	.....	.....	.....	4,935	8,942	4,758	3,184	2,052	1,206

Number of cases of influenza reported by States for the first 10 weeks of the years 1920 to 1922, inclusive—Continued.

State.	Week number.									
	First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.
Massachusetts:										
1922	7	12	18	66	398	1,469	1,764	1,285	904	521
1921	37	63	39	15	17	37	32	.....	20	32
1920	46	58	489	4,495	9,627	10,747	5,601	2,375	1,144	490
Missouri:										
1922	7	16	8	20	71	99	234	313	406	279
1921	51	48	40	43	26	32	30	22	23	28
1920	.....	.....	.....	4,043	5,359	1,696	466	.....	.....	.....
Nebraska:										
1922	.....	.....	.....	.....	6	6	10	161	66	119
1921	3	4	1	1	9	2	.....	5	.....	6
1920	2	1	154	1,815	3,998	6,048	3,272	2,492	2,007	834
New Jersey:										
1922	28	36	40	126	426	1,288	1,555	918	512	221
1921	34	26	22	33	32	20	94	51	85	105
1920	23	98	753	7,365	9,603	5,807	2,798	1,043	764	365
New Mexico:										
1922	.....	.....	1	.....	10	14	35	92	304	209
1921	.....	.....	.....	2	1	6	.....	5	.....	.....
1920	8	4	61	260	1,576	1,166	632	204	186	97
New York (exclusive of New York City):										
1922	28	48	80	173	694	771	1,577	1,568	1,774	1,973
1921	86	109	96	79	43	44	63	44	47	38
1920	31	61	555	4,755	11,616	13,259	11,304	5,330	4,030	2,434
New York City:										
1922	56	57	110	1,230	5,731	7,070	3,284	1,312	592	310
1921	134	78	84	72	59	84	109	102	101	124
1920	100	384	5,690	30,456	21,388	8,091	3,030	1,069	489	381
Texas:										
1922	48	.....	5	5	57	141	123	76	353	1,181
1921	39	24	.....	.....	9	113	8	39	.....	79
1920	.....	.....	.....	.....	11,265	6,788	1,035	588	134	55
Vermont:										
1922	.....	1	.....	1	7	2	12	1	2	15
1921	5	1	2	3	6	1	.....	3	1	1
1920	.....	.....	25	89	272	796	1,314	1,071	481	470
Washington:										
1922	.....	.....	1	33	176	1,061	902	360	389	81
1921	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1920	.....	.....	12	902	6,451	6,426	4,596	1,559	1,260	271
Wisconsin:										
1922	46	17	59	22	24	37	22	73	129	321
1921	64	81	44	43	25	48	22	62	24	28
1920	3	67	1,944	6,739	14,328	10,310	6,274	3,131	994	554
Total:										
1922	457	416	728	2,328	9,141	15,645	17,854	21,343	20,808	15,230
1921	790	710	666	612	525	840	694	1,015	1,038	1,176
1920	508	4,627	30,625	117,081	184,849	168,623	98,219	64,090	38,265	23,254
Number of States reporting cases:										
1922	19	17	22	22	24	24	24	24	23	23
1921	21	20	19	21	20	22	19	20	18	22
1920	18	17	20	22	24	24	24	22	23	23

DEATHS FROM INFLUENZA AND PNEUMONIA COMBINED.

COMPARISON OF THE FIRST 10 WEEKS OF THE YEARS 1919-1922, INCLUSIVE, FOR CERTAIN LARGE CITIES OF THE UNITED STATES.

The accompanying table gives the number of reported deaths from influenza and pneumonia (all forms), combined, during the first 10 weeks of the years 1919, 1920, 1921, and 1922, in 36 large cities of the United States.

This is a continuation of the table printed on pages 535–537 of the Public Health Reports of March 10, 1922 (vol. 37, No. 10).

The weeks for which figures are given all ended on Saturday, the "first" week for each year ending on the following days, respectively: January 4, 1919, January 10, 1920, January 8, 1921, and January 7, 1922.

The figures for 1919 and 1920 were taken from the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce, supplemented by reports to the Public Health Service. For 1921 and 1922 the figures are taken from reports made by the city health officers to the Public Health Service.

Blanks in the table indicate that no reports of deaths from influenza or pneumonia were received for the week. This does not always indicate that no deaths from these diseases occurred.

Number of deaths from influenza and pneumonia (all forms) combined.

City.	Week number.									
	First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.
Birmingham, Ala.:										
1922	8	10	14	6	13	4	4	14	9	7
1921	7	14	6	4	9	9	12	6	13	7
1920	13	9	16	14	22	18	59	70	76	45
1919	36	44	52	41	29	21	28	25	[1]10	[1]10
Los Angeles, Calif.:										
1922	18	19	14	21	26	29	33	79	84	69
1921	12	19	9	13	15	12	17	15	15	16
1920	16	18	19	22	42	88	74	57	49	20
1919	99	151	178	177	104	47	21	8	14	8
Oakland, Calif.:										
1922	4	5	5	6	8	8	12	12	16	18
1921	4	3	8	7	9	4	6	4	5	9
1920	4	8	20	24	55	54	60	21	17	19
1919	66	92	111	67	38	18	[1]8	[1]3	4	[1]4
San Francisco, Calif.:										
1922	11	12	4	12	9	15	36	79	51	31
1921	.....	5	8	9	7	11	13	6	11	11
1920	14	26	48	59	115	137	113	89	54	32
1919	194	290	310	149	89	41	20	18	21	22
Denver, Colo.:										
1922	22	11	10	17	18	16	19	22	26	40
1921	25	22	23	11	16	21	20	13	21	13
1920	21	18	24	49	159	160	67	44	21	10
1919	65	47	35	24	29	30	37	29	27	27
New Haven, Conn.:										
1922	5	1	5	4	13	10	14	30	27	23
1921	4	7	7	7	2	6	9	9	11	.....
1920	6	8	10	19	20	60	68	31	23	17
1919	40	38	27	26	20	12	11	6	13	12
Washington, D. C.:										
1922	20	22	27	27	25	22	27	26	27	22
1921	22	22	14	9	9	12	19	24	22	22
1920	22	27	81	131	164	92	55	30	23	20
1919	139	109	107	73	60	42	40	28	35	38
Atlanta, Ga.:										
1922	13	7	9	7	20	17	11	16	13	20
1921	10	8	9	5	7	18	10	11	7	6
1920	19	11	10	15	32	75	104	75	46	26
1919	[1]40	[1]40	[1]54	[1]57	[1]54	[1]28	[1]21	[1]25	[1]12	[1]13
Chicago, Ill.:										
1922	48	43	63	65	72	80	56	94	139	150
1921	64	79	89	102	92	90	75	79	84	72
1920	107	153	472	1,109	1,005	494	243	136	120	108
1919	321	269	328	341	277	194	235	233	230	213
Indianapolis, Ind.:										
1922	20	11	9	17	29	42	39	38	36	24
1921	15	12	13	13	21	6	13	6	9	5
1920	18	16	21	36	92	124	72	49	41	20
1919	34	40	25	28	25	23	28	33	34	34

[1] Pneumonia (all forms) deaths only.

Number of deaths from influenza and pneumonia (all forms) combined—Continued.

City.	Week number.									
	First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.
Louisville, Ky.:										
1922	6	12	18	7	16	24	28	25	19	16
1921	6	4	5	5	2	2	9	13	8	10
1920	10	10	9	18	40	52	48	30	20	18
1919	22	20	21	30	20	19	19	37	34	88
New Orleans, La.:										
1922	13	14	14	13	19	25	20	19	31	52
1921	18	18	21	[2]3	12	21	23	14	16	26
1920	27	27	27	32	36	62	89	76	56	59
1919	94	141	202	201	125	58	49	44	30	27
Baltimore, Md.:										
1922	32	25	24	26	29	27	29	40	47	71
1921	33	20	24	18	26	56	44	44	43	68
1920	20	35	24	59	122	268	231	123	80	65
1919	48	75	83	150	138	126	117	90	66	51
Boston, Mass.:										
1922	21	17	36	28	33	38	51	83	84	61
1921	27	23	36	33	22	10	26	21	23	29
1920	28	28	45	85	158	255	216	136	80	48
1919	244	227	158	153	110	89	71	72	70	69
Cambridge, Mass.:										
1922	5	8	3	4	7	7	8	9	8	16
1921	4	5	5	5	1	3	4	4	4	6
1920	8	7	8	14	22	28	23	13	4	5
1919	39	22	20	16	[2]5	10	3	6	2	4
Fall River, Mass.:										
1922	5	4	3	6	5	7	9	22	29	24
1921	14	5	11	4	5	8	5	3	12	15
1920	7	10	5	3	5	16	25	19	18	14
1919	10	18	16	14	17	17	15	17	13	12
Lowell, Mass.:										
1922	4	7	5	4	4	6	5	13	11	4
1921	7	6	8	3	6	4	2	3	6	6
1920	5	4	2	7	12	10	36	29	27	16
1919	13	[1]10	20	26	11	[1]7	18	4	13	9
Worcester, Mass.:										
1922	5	10	11	7	16	16	16	15	13	4
1921	4	7	13	9	4	10	12	7	9	13
1920	10	9	7	14	15	44	52	34	59	18
1919	40	36	44	22	23	21	23	28	8	20
Minneapolis, Minn.:										
1922	10	6	9	9	6	9	4	8	19	20
1921	13	14	10	8	10	16	20	18	14	13
1920	12	10	9	63	168	125	53	13	8	18
1919	37	45	24	32	31	31	14	34	17	29
St. Paul, Minn.:										
1922	7	13	7	3	8	6	6	5	9	18
1921	9	5	9	9	.....	7	8	5	8	12
1920	4	10	26	75	80	63	26	14	5	10
1919	39	25	14	12	15	13	11	12	15	14
Kansas City, Mo.:										
1922	15	13	14	25	25	28	39	71	52	41
1921	17	17	19	13	14	17	16	16	10	15
1920	13	29	96	120	220	167	74	53	29	23
1919	49	50	68	45	58	40	51	46	55	47
Omaha, Nebr.:										
1922	11	9	17	12	16	12	11	17	16	9
1921	8	7	4	14	.....	4	12	11	8	7
1920	4	7	13	45	62	63	32	28	19	13
1919	25	25	17	17	11	12	10	12	9	16
Newark, N. J.:										
1922	13	15	20	20	38	33	39	37	28	20
1921	18	14	15	7	12	13	12	13	11	20
1920	17	14	30	55	116	142	93	54	34	24
1919	72	66	57	53	50	45	32	46	54	38
Buffalo, N. Y.:										
1922	6	20	13	19	21	15	15	20	22	36
1921	20	18	18	20	13	18	20	18	13	2
1920	10	7	19	17	67	141	145	98	56	38
1919	48	[1]19	90	123	90	75	35	34	44	20
New York, N. Y.:										
1922	215	263	284	302	481	596	576	548	404	331
1921	235	216	204	203	199	212	212	269	268	239
1920	218	261	511	1,308	1,988	1,796	987	513	369	317
1919	753	570	998	1,193	1,153	893	786	788	864	747

[1] Pneumonia (all forms) deaths only.
[2] Influenza deaths only.

Number of deaths from influenza and pneumonia (all forms) combined—Continued.

City.	Week number.									
	First.	Second.	Third.	Fourth.	Fifth.	Sixth.	Seventh.	Eighth.	Ninth.	Tenth.
Rochester, N. Y.:										
1922	5	11	12	14	6	7	14	11	11	18
1921	4	3	6	8	5	5	4	8	4	11
1920	13	7	12	23	50	52	27	19	12	15
1919	59	26	17	21	12	16	16	18	7	19
Syracuse, N. Y.:										
1922	4	6	4	6	7	7	.....	.....	7	3
1921	4	8	3	5	6	2	7	4	9	6
1920	9	8	10	31	89	78	29	23	11	6
1919	8	13	4	14	18	10	10	[1] 8	19	16
Cincinnati, Ohio:										
1922	14	20	15	19	21	27	41	54	49	42
1921	14	16	13	11	18	16	17	16	15	18
1920	14	12	17	25	38	62	81	99	73	34
1919	51	18	18	26	23	39	37	78	90	107
Cleveland, Ohio:										
1922	.....	.....	30	28	25	18	25	60	55	61
1921	25	22	23	24	31	28	31	27	34	26
1920	21	25	26	41	158	258	177	125	71	57
1919	132	94	92	92	108	100	80	82	94	131
Columbus, Ohio:										
1922	5	9	4	10	8	6	10	11	13	20
1921	8	8	12	12	13	12	7	9	9	6
1920	15	9	8	22	59	118	66	48	19	14
1919	15	14	10	20	19	11	15	20	27	27
Toledo, Ohio:										
1922	6	9	8	12	7	6	5	6	10	15
1921	.....	3	9	10	5	4	3	8	7	2
1920	9	8	9	18	54	50	50	26	15	13
1919	19	15	19	20	15	6	11	21	14	23
Portland, Oreg.:										
1922	4	7	4	6	5	15	17	27	32	28
1921	6	5	7	6	4	8	5	4	4	7
1920	13	8	9	17	21	57	52	41	28	13
1919	55	101	123	122	50	15	10	12	7	8
Philadelphia, Pa.:										
1922	73	98	87	86	85	91	101	162	136	143
1921	72	83	85	101	114	108	115	108	128	101
1920	55	75	108	153	289	564	620	373	217	153
1919	142	194	229	259	308	262	232	231	207	183
Providence, R. I.:										
1922	13	8	12	17	11	15	26	32	39	19
1921	14	6	5	8	14	11	9	14	7	4
1920	12	13	8	14	39	88	92	57	37	15
1919	47	59	62	61	35	30	28	11	21	36
Nashville, Tenn.:										
1922	2	7	.....	3	5	5	4	10	17	16
1921	2	8	4	.....	10	9	9	9	10	7
1920	6	11	6	12	8	23	47	62	33	26
1919	20	17	21	21	17	15	16	23	19	18
Richmond, Va.:										
1922	8	9	9	4	8	9	12	21	19	8
1921	5	5	13	6	5	7	10	9	13	7
1920	2	9	6	21	35	38	28	13	8	7
1919	50	26	34	30	23	11	9	9	10	19
Total:										
1922	671	761	823	872	1,140	1,298	1,362	1,736	1,608	1,500
1921	750	737	738	725	738	800	836	848	891	837
1920	802	947	1,771	3,820	5,657	5,922	4,314	2,721	1,858	1,356
1919	3,165	3,346	3,688	3,756	3,180	2,427	2,167	2,191	2,209	2,159

[1] Pnemonia (all forms), deaths only.

DEATHS FROM LETHARGIC ENCEPHALITIS IN THE UNITED STATES REGISTRATION AREA, 1920.

The Department of Commerce, through the Bureau of the Census, has issued a statement showing the number of deaths from lethargic encephalitis in 1920. This disease is often called "sleeping sickness," although the true "sleeping sickness" is a very different disease and is found principally in Africa.

In 1920, in the death registration area of the United States, lethargic encephalitis was given as a cause of death on 1,505 death certificates, as against 589 in 1919, giving mortality rates, respectively, of 1.7 and 0.7 per 100,000 population.

Deaths from this cause were reported for every State in the registration area except Delaware; the largest number in any one State was 364, reported for New York State, a rate of 3.5 per 100,000 population.

Cities are credited with 1,129 of the 1,505 deaths, and rural sections with 376, or mortality rates, respectively, of 2.6 and 0.8 per 100,000.

The white population, with 1,453 deaths from lethargic encephalitis, has a rate of 1.8 per 100,000 population, while the colored population, with only 52 deaths, has a rate of 0.7. Males and females contribute about equally to the total deaths from this cause, with 781 males and 724 females.

More of these deaths appear for persons aged 20 to 29 than for any other age group, though nearly as many are found for the age groups 30 to 39 and 40 to 49, and no age group escapes entirely.

Number of deaths reported as due to lethargic encephalitis in the registration area (exclusive of Hawaii) and each registration State, 1919 and 1920.

Area.	Number of death certificates giving lethargic encephalitis as cause of death.		Area.	Number of death certificates giving lethargic encephalitis as cause of death.	
	1920	1919		1920	1919
Summary.			*Registration States*—Continued.		
The registration area	1,505	589	Massachusetts	53	25
Registration States	1,476	564	Michigan	94	18
Cities in registration States	1,100	323	Minnesota	43	25
Rural part of registration States	376	241	Mississippi	8	4
Registration cities in nonregistration States	29	25	Missouri	20	19
All registration cities	1,129	348	Montana	6	4
Registration States.			Nebraska	14	(1)
California	57	49	New Hampshire	2	2
Colorado	14	1	New Jersey	59	23
Connecticut	40	13	New York	364	81
Delaware		3	North Carolina	20	11
Florida	14	2	Ohio	97	35
Illinois	92	55	Oregon	23	10
Indiana	35	23	Pennsylvania	142	29
Kansas	21	5	Rhode Island	8	3
Kentucky	20	10	South Carolina	18	6
Louisiana	14	16	Tennessee	17	12
Maine	9	1	Utah	3	
Maryland	36	5	Vermont	3	
			Virginia	24	34
			Washington	68	24
			Wisconsin	24	14
			District of Columbia	14	2

[1] Not added to registration area until 1920.

Deaths reported due to lethargic encephalitis, by age, sex, and color, in the registration area (exclusive of Hawaii), 1920.

Age.	Males.			Females.		
	Total.	White.	Colored.	Total.	White.	Colored.
All ages	781	755	26	724	698	26
Under 1 year	15	15	.....	15	11	4
1 year	16	15	1	25	24	1
2 years	19	17	2	12	12	.....
3 years	10	9	1	14	13	1
4 years	8	8	.....	15	15	.....
5 to 9 years	41	39	2	47	45	2
10 to 19 years	91	89	2	90	89	1
20 to 29 years	152	147	5	122	118	4
30 to 39 years	127	122	5	119	115	4
40 to 49 years	141	136	5	123	116	7
50 to 59 years	102	100	2	70	69	1
60 to 69 years	43	42	1	53	53	.....
70 to 79 years	12	12	.....	14	14	.....
80 to 89 years	2	2	.....	2	2	.....
90 years and over	.....	.....	.....	3	2	1
Unknown age	2	2	.....	.....	.....	.....

DEATH RATES IN A GROUP OF INSURED PERSONS.

DEATH RATES FOR PRINCIPAL CAUSES, DECEMBER AND YEAR, 1921, AND JANUARY 1921 AND 1922; AND COMPARISON BY COLOR FOR THE LAST QUARTERS OF 1919, 1920, AND 1921.

The accompanying tables are taken from the Statistical Bulletin of the Metropolitan Life Insurance Co. for February, 1922. They present the mortality data of the industrial department of the company for December, 1921, and January, 1921 and 1922, and compare, by color, the death rates for the last quarters of the years 1919, 1920, and 1921.

The gross death rate among this group was slightly lower in January, 1922 (9.1 per 1,000) than in the corresponding month of either 1921 (9.5) or 1920 (10.4).

The death rate from influenza was slightly higher for January, 1922 (12.6 per 100,000) than for the same month of 1921 (10.2). The pneumonia death rate for January, 1922 (101.5 per 100,000), although it showed an increase over the rate for December, 1921 (76.5), was lower than the rate for January, 1921 (106.0).

The death rate for tuberculosis for January, 1922, was much lower than the rates for this disease for December, January, and year, 1921.

Increases in death rates over those for the corresponding period of 1921 are shown for organic heart disease, cancer, and Bright's disease.

Death rates (annual basis) for principal causes per 100,000 lives exposed, December and year, 1921, and January, 1921 and 1922.

[Industrial Department, Metropolitan Life Insurance Co.]

Cause of death.	Death rate per 100,000 lives exposed.			
	January, 1922.	December, 1921.	January, 1921.	Year 1921.[1]
Total, all causes	910.0	885.9	948.7	853.8
Typhoid fever	3.7	6.0	3.7	6.6
Measles	2.3	1.3	3.0	3.1
Scarlet fever	7.2	5.5	10.2	6.9
Whooping cough	1.9	1.1	3.8	3.9
Diphtheria	24.7	31.3	28.4	23.3
Influenza	12.6	7.2	10.2	8.6
Tuberculosis (all forms)	102.3	105.6	116.5	115.1
Tuberculosis of respiratory system	93.1	96.5	107.7	103.6
Cancer	69.0	76.6	66.6	70.4
Cerebral hemorrhage	63.7	70.6	64.1	60.9
Organic diseases of heart	137.2	124.9	127.7	115.0
Pneumonia (all forms)	101.5	76.5	106.0	66.5
Other respiratory diseases	16.0	16.2	18.5	14.1
Diarrhea and enteritis	7.7	7.1	8.8	13.9
Bright's disease (chronic nephritis)	74.5	71.9	68.9	66.7
Puerperal state	17.3	17.0	17.5	19.5
Suicides	6.0	6.9	7.7	7.5
Homicides	7.3	8.4	7.2	6.6
Other external causes (excluding suicides and homicides)	47.9	50.2	50.7	56.2
Traumatism by automobile	8.5	12.5	7.8	11.9
All other causes	207.5	201.8	200.2	189.0

[1] Based on provisional estimates of lives exposed to risk in 1921

Death rates (annual basis) per 100,000 persons exposed, for principal causes, compared by color, for the last quarters of the years 1919, 1920, and 1921.

[Industrial Department, Metropolitan Life Insurance Co.]

Cause of death.	Death rate per 100,000 persons exposed.					
	White.			Colored.		
	Oct.-Dec., 1921.	Oct.-Dec., 1920.	Oct.-Dec., 1919.	Oct.-Dec., 1921.	Oct.-Dec., 1920.	Oct.-Dec., 1919.
All causes of death	752.4	771.9	781.3	1,262.8	1,303.7	1,305.3
Typhoid fever	6.4	7.5	6.9	16.7	14.6	18.2
Measles	.8	2.7	2.8	.5	.3	.5
Scarlet fever	5.4	7.1	4.8	.7	1.3	1.1
Whooping cough	1.3	3.8	2.5	2.1	6.3	2.9
Diphtheria and croup	32.0	32.2	33.2	17.2	9.3	10.7
Influenza	5.3	5.5	9.8	12.2	14.1	18.2
Tuberculosis (all forms)	81.0	97.2	106.2	233.8	259.9	281.2
Tuberculosis of lungs	73.2	87.2	95.8	214.7	235.3	259.3
Tuberculous meningitis	2.9	4.8	5.1	4.5	6.8	6.7
Other forms of tuberculosis	5.0	5.3	5.4	14.6	17.8	15.2
Meningitis (total)	4.4	3.9	5.3	5.3	3.3	4.3
Cerebral hemorrhage; apoplexy	58.4	53.5	53.3	92.2	92.2	90.5
Organic diseases of heart	107.2	97.6	95.5	166.5	152.2	154.6
Total respiratory diseases	66.7	66.7	70.5	119.4	115.3	118.3
Bronchitis	5.7	5.6	6.6	9.3	10.3	10.1
Bronchopneumonia	19.6	20.5	21.7	28.2	25.9	25.6
Pneumonia (lobar and undefined)	33.6	33.0	34.8	69.5	67.3	71.8
Other diseases of respiratory system	7.9	7.7	7.5	12.4	11.8	10.7
Diarrhea and enteritis	12.3	15.9	15.9	10.5	17.1	17.9
Under 2 years	5.5	7.4	7.2	1.7	4.3	4.5
2 years and over	6.7	8.5	8.7	8.8	12.8	13.4
Nephritis and Bright's disease	65.3	64.0	67.4	124.7	123.5	124.4
Total puerperal state	15.2	15.7	14.9	24.8	27.9	26.7
Puerperal septicemia	5.8	6.1	4.6	8.6	14.8	13.1
Puerperal albuminuria and convulsions	3.9	4.0	4.5	8.4	5.3	6.4
Other diseases of puerperal state	5.4	5.6	5.8	8.1	7.8	7.2
Total external causes [1]	61.4	67.6	67.4	89.3	97.9	90.5
Suicides	7.3	6.6	4.9	6.4	3.0	5.6
Homicides	4.4	3.1	3.1	28.9	29.4	27.0
Accidental and unspecified violence [2]	49.6	57.5	56.8	53.7	65.5	56.6
Accidental drowning	2.4	3.6	3.8	2.9	5.0	3.5
Automobile accidents	14.1	14.6	12.8	9.3	6.5	10.4
War deaths	.2	.3	2.6	.2	.....	1.3
All other and ill-defined causes of deaths	229.1	231.1	225.0	346.8	368.9	345.3

[1] Includes "war deaths." [2] Excludes "war deaths."

CONFERENCE OF HEALTH AUTHORITIES.

ANNUAL CONFERENCE OF STATE AND TERRITORIAL HEALTH AUTHORITIES WITH THE UNITED STATES PUBLIC HEALTH SERVICE TO BE HELD AT WASHINGTON, D. C., ON MAY 17 AND 18, 1922.

The Twentieth Annual Conference of State and Territorial Health Authorities with the United States Public Health Service will be held at Washington, D. C., on May 17 and 18, 1922.

It is expected that important State and National public health matters will be brought before the conference for action and the Surgeon General has urged that each State be represented by an official delegate and also that the chief sanitary engineers of the different States be present.

DEATHS DURING WEEK ENDED MAR. 4, 1922.

Summary of information received by telegraph from industrial insurance companies for week ended Mar. 4, 1922, and corresponding week, 1921. (From the Weekly Health Index, Mar. 7, 1922, issued by the Bureau of the Census, Department of Commerce.)

	Week ended Mar. 4, 1922.	Corresponding week, 1921.
Policies in force	49,109,724	46,146,658
Nnmber of death claims	12,430	9,560
Death claims per 1,000 policies in force, annual rate	13.2	10.8

Deaths from all causes in certain large cities of the United States during the week ended Mar. 4, 1922, infant mortality, annual death rate, and comparison with corresponding week of 1921. (From the Weekly Health Index, Mar. 7, 1922, issued by the Bureau of the Census, Department of Commerce.)

City.	Estimated population July 1, 1921.	Week ended Mar. 4, 1922. Total deaths.	Week ended Mar. 4, 1922. Death rate.[1]	Annual death rate per 1,000, corresponding week, 1921.	Deaths under 1 year. Week ended Mar. 4, 1922.	Deaths under 1 year. Corresponding week, 1921.	Infant mortality rate, week ended Mar. 4, 1922.[2]
Total	25,680,108	8,505	17.3	14.3	1,115	1,055	.....
Akron, Ohio	[3] 208,435	39	9.8	12.3	6	14	64
Albany, N. Y.	115,071	40	18.1	21.3	4	5	90
Atlanta, Ga.	207,473	68	17.1	12.1	5	10	.....
Baltimore, Md.	750,864	244	16.9	15.6	34	38	96
Birmingham, Ala.	186,133	44	12.3	16.0	3	12	.....
Boston, Mass.	757,334	322	22.2	14.9	51	30	136
Bridgeport, Conn.	[3] 143,555	42	15.3	11.1	9	7	112
Buffalo, N. Y.	519,608	149	15.0	16.2	29	34	114
Cambridge, Mass.	110,444	45	21.2	13.7	4	6	73
Camden, N. J.	119,672	35	15.3	21.8	5	10	76
Chicago, Ill.	2,780,655	855	16.0	13.7	129	120	.....
Cleveland, Ohio	831,138	225	14.1	12.6	43	34	111
Columbus, Ohio	245,358	77	16.4	12.5	12	0	127
Dallas, Tex.	165,282	43	13.6	12.6	7	4	.....
Denver, Colo.	263,152	86	17.0	16.1	10	8	.....
Fall River, Mass.	120,668	87	37.6	18.1	20	7	279
Fort Worth, Tex.	111,423	21	9.8	.....	1	.....	.....
Grand Rapids, Mich.	141,197	44	16.2	10.7	3	4	50
Houston, Tex.	144,340	38	13.7	9.4	2	3	.....
Indianapolis, Ind.	325,632	121	19.4	10.2	14	12	107
Jersey City, N. J.	302,788	94	16.2	15.5	13	14	83
Kansas City, Kans.	103,884	44	22.1	10.0	7	3	162
Kansas City, Mo.	336,157	151	23.4	11.9	21	14	.....
Los Angeles, Calif.	614,160	305	25.9	17.0	24	25	100
Louisville, Ky.	236,083	86	19.0	12.1	10	3	108
Lowell, Mass.	113,757	45	20.6	16.5	4	9	67
Memphis, Tenn.	165,656	76	23.9	13.5	11	2	.....
Milwaukee, Wis.	468,386	111	12.4	11.8	19	16	93
Minneapolis, Minn.	392,815	95	12.6	12.6	13	18	71
Nashville, Tenn.	122,036	55	23.5	24.4	6	2	.....
New Bedford, Mass.	125,012	50	20.9	15.4	17	12	25
New Haven, Conn.	167,007	71	22.2	17.5	12	7	147
New Orleans, La.	394,657	146	19.3	14.7	13	17	.....
New York, N. Y.	5,751,867	1,666	15.1	13.9	233	240	90
Newark, N. J.	424,885	145	17.8	14.5	20	23	89
Norfolk, Va.	121,260	34	14.6	13.8	4	3	71
Oakland, Calif.	226,472	91	21.0	10.4	6	4	76
Omaha, Nebr.	197,066	72	19.1	16.1	7	14	75
Paterson, N. J.	137,463	38	14.4	14.0	6	4	92
Philadelphia, Pa.	1,866,212	651	18.2	17.2	89	87	105
Pittsburgh, Pa.	602,452	207	17.9	17.7	38	32	121
Portland, Oreg.	264,859	111	21.9	11.0	5	5	49
Providence, R. I.	239,645	126	27.4	14.6	11	10	87
Richmond, Va.	175,686	71	21.1	15.7	9	10	110
Rochester, N. Y.	305,229	85	14.5	14.7	7	16	54
St. Louis, Mo.	786,164	291	19.3	14.5	15	20	.....

[1] Annual rate per 1,000 population.
[2] Deaths under 1 year per 1,000 births—based on deaths under 1 year for the week and estimated births for 1921. Cities left blank are not in the registration area for births.
[3] Enumerated population Jan. 1, 1920.

Deaths from all causes in certain large cities of the United States during the week ended Mar. 4, 1922, infant mortality, annual death rate, and comparison with corresponding week of 1921. (From the Weekly Health Index, Mar. 7, 1922, issued by the Bureau of the Census, Department of Commerce.)—Continued.

City.	Estimated population July 1, 1921.	Week ended Mar. 4, 1922.		Annual death rate per 1,000, corresponding week, 1921.	Deaths under 1 year.		Infant mortality rate, week ended Mar. 4, 1922.
		Total deaths.	Death rate.		Week ended Mar. 4, 1922.	Corresponding week, 1921.	
St. Paul, Minn.	237,781	81	17.8	12.5	9	8	84
Salt Lake City, Utah	121,595	35	15.0	17.2	1	13	15
San Francisco, Calif.	520,546	254	25.4	13.5	15	4	87
Seattle, Wash.	[a] 315,312	85	14.1	9.1	4	5	34
Spokane, Wash.	104,442	40	20.0	13.0	4	2	35
Springfield, Mass.	135,877	35	13.4	12.7	7	2	104
Toledo, Ohio	253,696	65	13.4	11.1	6	7	59
Trenton, N. J.	122,760	54	22.9	11.9	9	5	138
Washington, D. C.	[a] 437,571	141	16.8	16.2	24	13	138
Wilmington, Del.	113,408	39	17.9	15.6	6	9	117
Worcester, Mass.	184,972	68	19.2	11.3	8	9	87
Yonkers, N. Y.	103,324	26	13.1	13.6	5	4	104
Youngstown, Ohio	139,432	40	15.0	12.3	6	6	79

[a] Enumerated population Jan. 1, 1920.

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 Mar. 11, 1922.

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

ALABAMA.

	Cases.
Chickon pox	45
Diphtheria	12
Hookworm disease	55
Influenza:	
Barbour County	74
Montgomery County	62
Scattering	49
Malaria	3
Ophthalmia neonatorum	1
Pellagra	1
Pneumonia	6
Scarlet fever	10
Smallpox	32
Trachoma	1
Tuberculosis	14
Typhoid fever	2

ARKANSAS.

Chicken pox	28
Diphtheria	11
Influenza	409
Malaria	23
Measles	4
Pellagra	6
Scarlet fever	8
Smallpox	7
Trachoma	1
Tuberculosis	7
Typhoid fever	1
Whooping cough	5

CALIFORNIA.

Cerebrospinal meningitis:	
San Francisco	1
Diphtheria	143
Influenza:	
Berkeley	129
Los Angeles	1,243
Los Angeles County	292
Oakland	32
Pasadena	79
San Francisco	131
Scattering	2,721

CALIFORNIA—continued.

	Cases.
Lethargic encephalitis:	
San Francisco	1
Measles	22
Poliomyelitis:	
Pasadena	1
Tehama County	1
Scarlet fever	89
Smallpox:	
San Jose	10
Santa Clara County	11
Scattering	31
Typhoid fever	5

COLORADO.

(Exclusive of Denver.)

Cerebrospinal meningitis	1
Chicken pox	9
Diphtheria	13
Impetigo contagiosa	1
Influenza	937
Measles	26
Mumps	1
Pneumonia	41
Scarlet fever	47
Septic sore throat	1
Smallpox	7
Tuberculosis	19
Typhoid fever	4
Whooping cough	1

CONNECTICUT.

Cerebrospinal meningitis	4
Chicken pox	53
Conjunctivitis (infectious)	2
Diphtheria:	
Bridgeport	11
Hartford	12
Scattering	52
German measles	3
Influenza:	
Fairfield County	19
Hartford County	50

CONNECTICUT—continued.

	Cases.
Influenza—Continued.	
Litchfield County	164
Middlesex County	23
New Haven County	46
New London County	177
Tolland County	6
Windham County	1
Lethargic encephalitis	2
Measles:	
Groton	3
Hartford	60
New Haven	29
Stamford	27
Scattering	40
Mumps	28
Ophthalmia neonatorum	1
Pneumonia (lobar)	105
Scarlet fever:	
Bridgeport	15
New Canaan	9
New Haven	10
Waterbury	16
Scattering	36
Smallpox:	
Bridgeport	10
Scattering	13
Tetanus	1
Tuberculosis (all forms)	31
Typhoid fever	3
Whooping cough	19

DELAWARE.

Chicken pox	3
Diphtheria	3
Influenza	2
Measles	3
Mumps	1
Pneumonia	1
Scarlet fever:	
Wilmington	63
Scattering	15
Tuberculosis	4

FLORIDA.

Cerebrospinal meningitis	1
Diphtheria	14
Influenza	72
Malaria	4
Pneumonia	5
Smallpox	10
Typhoid fever	12

GEORGIA.

Chicken pox	29
Diphtheria	29
Hookworm disease	5
Influenza	149
Malaria	10
Measles	8
Mumps	2
Paratyphoid fever	1
Pneumonia	13
Scarlet fever	7
Septic sore throat	1
Smallpox	16

GEORGIA—continued.

	Cases.
Tetanus	1
Tuberculosis (pulmonary)	3
Typhoid fever	6
Whooping cough	17

ILLINOIS.

Cerebrospinal meningitis:	
Chicago	5
Rockford	1
Diphtheria:	
Chicago	157
Scattering	109
Influenza:	
Chicago	251
Scattering	484
Lethargic encephalitis:	
Chicago	1
Olney	1
Pneumonia:	
Chicago	504
Scattering	215
Poliomyelitis:	
Chicago	1
Lincoln	1
Scott County—Bluffs Precinct	1
Whiteside County—Fenton Township	1
Scarlet fever:	
Chicago	120
Sheffield	10
Scattering	144
Smallpox:	
Peoria	14
Scattering	44
Typhoid fever	12
Whooping cough	112

INDIANA.

Cerebrospinal meningitis:	
White County	1
Diphtheria	71
Rabies in animal:	
Floyd County	1
Scarlet fever	92
Smallpox	25
Typhoid fever	7

IOWA.

Diphtheria	26
Scarlet fever	70
Smallpox	52

KANSAS.

Cerebrospinal meningitis	3
Chicken pox	77
Diphtheria	66
Influenza	557
Measles	8
Mumps	13
Pneumonia	112
Scarlet fever	96
Smallpox	40
Tetanus	1
Tuberculosis	30
Typhoid fever	2
Whooping cough	12

LOUISIANA.

	Cases.
Cerebrospinal meningitis	1
Diphtheria	18
Influenza	1,608
Poliomyelitis	1
Smallpox	6
Typhoid fever	8

MAINE.

Cerebrospinal meningitis	1
Chicken pox	24
Diphtheria	15
Influenza	352
Measles	46
Pneumonia	35
Scarlet fever	52
Smallpox	2
Tuberculosis	10
Whooping cough	2

MARYLAND.[1]

Chicken pox	81
Diphtheria	44
German measles	11
Influenza	814
Lethargic encephalitis	4
Measles	210
Mumps	145
Ophthalmia neonatorum	2
Pneumonia (all forms)	249
Scarlet fever	117
Septic sore throat	4
Trachoma	1
Tuberculosis	52
Typhoid fever	3
Vincent's angina	1
Whooping cough	23

MASSACHUSETTS.

Cerebrospinal meningitis	3
Chicken pox	115
Conjunctivitis (suppurative)	13
Diphtheria	147
German measles	19
Influenza	521
Lethargic encephalitis	7
Malaria	2
Measles	590
Mumps	140
Ophthalmia neonatorum	23
Pellagra	1
Pneumonia (lobar)	284
Poliomyelitis	1
Scarlet fever	249
Septic sore throat	6
Trachoma	3
Tuberculosis	162
Typhoid fever	5
Whooping cough	112

MINNESOTA.

Chicken pox	9
Diphtheria	55
Influenza	209
Measles	44
Pneumonia	5

[1] Week ended Friday.

MINNESOTA—continued.

	Cases.
Scarlet fever	172
Smallpox	41
Tuberculosis	92
Typhoid fever	3
Whooping cough	3

MISSISSIPPI.

Cerebrospinal meningitis	1
Diphtheria	7
Scarlet fever	14
Smallpox	26
Typhoid fever	6

MISSOURI.

Cerebrospinal meningitis	1
Chicken pox	30
Diphtheria	64
Epidemic sore throat	20
Influenza	279
Measles	2
Mumps	8
Pneumonia	101
Scarlet fever	44
Smallpox	23
Trachoma	51
Tuberculosis	49
Typhoid fever	5
Whooping cough	1

MONTANA.

Diphtheria	12
Influenza	263
Scarlet fever	29
Smallpox	17

NEBRASKA.

Chicken pox	22
Diphtheria	24
Influenza	119
Measles:	
Fremont	20
Grand Island	11
Hastings	23
Lincoln	23
Omaha	22
Scattering	19
Mumps	26
Pneumonia	7
Scarlet fever:	
Cedar County	19
Franklin County	10
Grand Island	12
Hartington	29
Scattering	57
Septic sore throat	1
Smallpox:	
York County	8
Scattering	28
Tuberculosis	1
Typhoid fever	2

NEW JERSEY.

Chicken pox	123
Diphtheria	124
Influenza	221

NEW JERSEY—continued.

	Cases.
Measles	354
Paratyphoid fever	1
Pneumonia	236
Scarlet fever	304
Smallpox	2
Trichinosis	1
Typhoid fever	8
Whooping cough	97

NEW MEXICO.

Chicken pox	5
Diphtheria	24
Influenza	209
Measles	1
Mumps	7
Pneumonia	27
Scarlet fever:	
Albuquerque	10
Scattering	3
Smallpox	2
Whooping cough	23

NEW YORK,

(Exclusive of New York City.)

Diphtheria	151
Influenza	1,973
Lethargic encephalitis	1
Measles	294
Pneumonia	662
Scarlet fever	330
Smallpox	1
Typhoid fever	14
Whooping cough	148

NORTH CAROLINA.

Cerebrospinal meningitis	1
Chicken pox	167
Diphtheria	43
German measles	2
Measles	19
Scarlet fever	27
Septic sore throat	6
Smallpox	96
Typhoid fever	5
Whooping cough	127

OREGON.

Chicken pox	12
Diphtheria	13
Influenza	250
Measles	1
Mumps	7
Pneumonia	[1] 23
Scarlet fever	15
Smallpox:	
Multnomah County	8
Portland	20
Scattering	5
Tuberculosis	12
Typhoid fever	2
Whooping cough	2

[1] Deaths.

SOUTH DAKOTA.

	Cases.
Chicken pox	4
Diphtheria	16
Influenza	11
Measles	4
Pneumonia	17
Scarlet fever	23
Smallpox	30
Trachoma	1
Tuberculosis	2
Whooping cough	1

TEXAS.

Diphtheria	31
Influenza	1,181
Measles	63
Pneumonia	157
Smallpox	94
Typhoid fever	6

VERMONT.

Chicken pox	34
Diphtheria	3
Influenza	15
Measles	8
Mumps	17
Pneumonia	13
Scarlet fever	39
Typhoid fever	1
Whooping cough	15

VIRGINIA.

Smallpox:	
Bedford County	2

WASHINGTON.

Chicken pox	46
Diphtheria	14
German measles	2
Influenza	81
Measles	3
Mumps	87
Pneumonia	11
Scarlet fever	32
Smallpox:	
Spokane	11
Tacoma	17
Scattering	28
Tuberculosis	63
Typhoid fever	5
Whooping cough	20

WEST VIRGINIA.

Diphtheria	8
Influenza:	
Harrison County	128
Scattering	50
Scarlet fever	8
Typhoid fever	1

WISCONSIN.

Milwaukee:	
Cerebrospinal meningitis	3
Chicken pox	45
Diphtheria	14
German measles	4

WISCONSIN—continued.

Milwaukee—Continued.	Cases.
Measles	2
Pneumonia	21
Scarlet fever	10
Smallpox	4
Tuberculosis	15
Typhoid fever	2
Whooping cough	39
Scattering:	
Cerebrospinal meningitis	3
Chicken pox	91

WISCONSIN—continued.

Scattering—Continued.	Cases.
Diphtheria	72
German measles	10
Influenza	321
Measles	11
Pneumonia	3
Scarlet fever	106
Smallpox	43
Tuberculosis	26
Typhoid fever	3
Whooping cough	27

Delayed Reports for Week Ended Mar. 4, 1922.

DISTRICT OF COLUMBIA.

	Cases.
Chicken pox	43
Diphtheria	17
Influenza	9
Measles	8
Scarlet fever	11
Smallpox	2
Tuberculosis	32
Typhoid fever	2
Whooping cough	2

KENTUCKY.

Cerebrospinal meningitis—Scott County	1
Chicken pox	17
Diphtheria:	
Jefferson County	11
Scattering	17
Influenza:	
Allen County	34
Ballard County	73
Butler County	16
Caldwell County	25
Christian County	58
Franklin County	97
Graves County	20
Henry County	82
Jefferson County	35
Logan County	113

KENTUCKY—continued.

Influenza—Continued.	Cases.
Lyon County	45
Madison County	129
Pendleton County	90
Rowan County	34
Scott County	40
Todd County	53
Woodford County	52
Scattering	92
Malaria	1
Measles:	
Franklin County	30
Fulton County	35
Jefferson County	53
Scattering	7
Mumps	5
Pneumonia	119
Scarlet fever:	
Henry County	9
Scattering	15
Septic sore throat	1
Smallpox	5
Tonsillitis	1
Trachoma	1
Tuberculosis	54
Typhoid fever	1
Whooping cough	5

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.	Poliomyelitis.	Scarlet fever.	Smallpox.	Typhoid fever.
Arizona (January, 1922)	.....	16	.....	.....	2	.....	.....	26	36	8
Florida (February, 1922)	.....	83	291	18	31	2	1	17	36	50
Hawaii (January, 1922)	2	22	19	.....	19	.....	.....	7	.....	23
Massachusetts (February, 1922)	8	790	5,222	2	2,062	.....	4	951	.....	31
New Mexico (December, 1921)	.....	135	.....	.....	8	.....	1	42	10	33

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922.

ANTHRAX.

City.	Cases.	Deaths.
New York:		
New York	1	.....
Pennsylvania:		
Philadelphia	1	.....

BERIBERI.

California:		
San Francisco	1	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 1921, inclusive. In instances in which data for the full seven years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Feb. 25, 1922.		City.	Median for previous years.	Week ended Feb. 25, 1922.	
		Cases.	Deaths.			Cases.	Deaths.
California:				New Jersey:			
San Francisco	1	1	.....	Garfield	0	1	.....
Connecticut:				New York:			
Bridgeport	0	3	.....	Auburn	0	1	.....
New Haven	0	3	1	New York	7	6	8
Illinois:				North Carolina:			
Peoria	0	.....	1	Rocky Mount	0	.....	1
Maryland:				Pennsylvania:			
Baltimore	0	1	.....	Philadelphia	3	3	1
Massachusetts:				Tennessee:			
Arlington	0	1	1	Knoxville	.....	1	.....
Leominster	0	1	.....	West Virginia:			
Michigan:				Huntington	0	.....	1
Alpena	.....	1	.....	Wisconsin:			
Detroit	0	1	.....	Eau Claire	0	1	.....

DIPHTHERIA.

See p. 664; also Telegraphic weekly reports from States, p. 651, and Monthly summaries by States, p. 655.

INFLUENZA.

City.	Cases.		Deaths, week ended Feb. 25, 1922.	City.	Cases.		Deaths, week ended Feb. 25, 1922.
	Week ended Feb. 26, 1921.	Week ended Feb. 25, 1922.			Week ended Feb. 26, 1921.	Week ended Feb. 25, 1922.	
Alabama:				California—Continued.			
Birmingham	.....	3	3	Riverside	.....	23	.....
Arkansas:				Sacramento	11	88	3
Fort Smith	.....	2	.....	San Diego	2	236	3
Little Rock	1	39	.....	San Francisco	22	987	51
North Little Rock	.....	3	.....	Santa Ana	.....	161	.....
California:				Santa Barbara	.....	13	.....
Alameda	4	117	.....	Santa Cruz	.....	96	1
Bakersfield	1	.....	1	Vallejo	.....	50	.....
Berkeley	.....	671	4	Colorado:			
Eureka	.....	38	.....	Denver	.....	.....	2
Long Beach	.....	57	1	Pueblo	.....	.....	1
Los Angeles	5	3,651	29	Connecticut:			
Oakland	.....	242	4	Bridgeport	.....	58	5
Pasadena	.....	308	.....	Bristol	.....	8	.....

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

INFLUENZA—Continued.

City.	Cases. Week ended Feb. 26 1921.	Cases. Week ended Feb. 25, 1922.	Deaths, week ended Feb. 25, 1922.
Connecticut—Continued.			
Hartford		83	1
Manchester	1	1	
Meriden		48	
Milford		2	1
New Britain	11		
New Haven		9	13
Norwich		4	
Stonington		25	
Waterbury		7	
District of Columbia:			
Washington	1	7	4
Florida:			
Tampa		7	
Georgia:			
Atlanta	4	14	4
Savannah		3	3
Valdosta			1
Illinois:			
Aurora		2	1
Champaign		3	
Chicago	13	707	22
Cicero		14	
Decatur		7	
East St. Louis		30	3
Freeport		1	
La Salle		2	
Oak Park		10	
Rock Island		4	
Springfield		2	1
Indiana:			
Indianapolis			10
Kokomo			4
La Fayette		12	
Logansport			2
Mishawaka			1
Terre Haute			1
Kansas:			
Coffeyville	2		
Kansas City		5	
Lawrence		11	
Salina		2	
Wichita		17	1
Kentucky:			
Louisville	1	65	1
Owensboro		10	
Louisiana:			
Baton Rouge	2		
New Orleans		72	6
Maine:			
Auburn		2	
Bath		2	
Biddeford		9	
Lewiston			1
Portland		12	
Sanford		32	
Maryland:			
Baltimore	152	234	4
Cumberland	2	22	
Massachusetts:			
Arlington		6	
Attleboro		27	
Belmont		4	
Beverly			1
Boston	3	353	10
Braintree		26	
Brookline		7	
Cambridge	1	122	1
Chelsea		6	1
Clinton		3	1
Easthampton		2	
Everett	1	96	
Fall River		61	8
Framingham		14	

City.	Cases. Week ended Feb. 26, 1921.	Cases. Week ended Feb. 25, 1922.	Deaths, week ended Feb. 25, 1922.
Massachusetts—Contd.			
Haverhill	1	63	2
Holyoke		3	
Lawrence		1	
Leominster		4	
Lowell		44	
Lynn	1	12	2
Malden		5	
Melrose		3	2
Newton		5	
Peabody		1	
Quincy		8	
Saugus		41	1
Somerville		33	
Southbridge		19	
Springfield		3	
Wakefield		1	
Waltham		11	
Webster		1	
Westfield		1	1
Woburn			1
Worcester	9	73	
Michigan:			
Detroit	3	100	6
Flint		2	
Kalamazoo		2	
Pontiac		1	
Minnesota:			
Duluth		9	
Minneapolis		6	1
St. Paul	4	4	1
Missouri:			
Kansas City	7	21	28
St. Joseph		7	
St. Louis	1	49	5
Montana:			
Great Falls		3	
Missoula	2	166	
Nevada:			
Reno		26	
New Hampshire:			
Manchester		3	7
New Jersey:			
Asbury Park		1	
Bayonne		2	
Belleville	2		
Bloomfield		4	
East Orange		4	
Garfield		13	
Harrison	1		
Jersey City	1	6	
Kearny	1	36	
Montclair		15	
Morristown		4	
Newark	17		
Orange		5	
Passaic	1	48	
Paterson		45	
Plainfield	2		
Trenton	1	20	14
West Hoboken			1
West Orange		20	
New Mexico:			
Albuquerque		115	
New York:			
Albany	1	138	
Auburn		1	
Binghamton	1	20	
Buffalo		10	2
Hornell		2	
Ithaca		5	
Jamestown	1	43	
Middletown		49	
Mount Vernon	3	40	2

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

INFLUENZA—Continued.

City.	Cases.		Deaths, week ended Feb. 25, 1922.
	Week ended Feb. 26, 1921.	Week ended Feb. 25, 1922.	
New York—Continued.			
New York	102	1,312	105
Niagara Falls		1	
Peekskill		67	
Port Chester		2	
Poughkeepsie		7	
Saratoga Springs	1	11	
Schenectady		24	
White Plains	1		
Yonkers			1
North Carolina:			
Durham			1
Raleigh			2
Winston-Salem			3
North Dakota:			
Grand Forks		16	
Ohio:			
Akron		11	
Ashtabula		1	
Barberton		1	
Cambridge		4	1
Cincinnati		21	27
Cleveland	6	141	8
Columbus			2
Dayton	1	1	
East Cleveland		4	
Hamilton		4	1
Newark		3	
Toledo		77	3
Oklahoma:			
Muskogee	2		
Oklahoma			1
Oregon:			
Portland		19	15
Pennsylvania:			
Philadelphia	9	77	21
Rhode Island:			
Providence		59	7
South Carolina:			
Charleston		4	1
Tennessee:			
Memphis			1
Texas:			
Austin			1
Beaumont		3	
Dallas	6	27	
Fort Worth		1	1
Utah:			
Salt Lake City		8	2
Virginia:			
Danville		14	
Norfolk		93	3
Petersburg		18	1
Richmond			4
Roanoke	9	25	
Washington:			
Walla Walla		12	
West Virginia:			
Bluefield			1
Charleston		1	
Clarksburg		9	
Fairmont	2	31	
Huntington		1	
Wisconsin:			
Fond du Lac		5	2
Kenosha		1	
Madison		5	
Milwaukee		1	
Wyoming:			
Casper		20	1
Cheyenne		4	

LETHARGIC ENCEPHALITIS.

City.	Cases.	Deaths.
California:		
San Francisco		1
Connecticut:		
Meriden	1	
Kansas:		
Topeka	1	
Massachusetts:		
Framingham		1
Nebraska:		
Omaha	1	1
Wisconsin:		
Milwaukee	3	

MALARIA.

Alabama:			Massachusetts:		
Tuscaloosa	3		Westfield	1	
Arkansas:			Texas:		
Little Rock	1		Dallas	1	
California:					
Los Angeles	1				

MEASLES.

See p. 664; also Telegraphic weekly reports from States, p. 651, and Monthly summaries by States, p. 655.

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

PELLAGRA.

City.	Cases.	Deaths.
Alabama:		
Anniston	1	
Mobile		1
Georgia:		
Atlanta		2
South Carolina:		
Charleston		2

PNEUMONIA (ALL FORMS).

City.	Cases.	Deaths.
Alabama:		
Birmingham		11
Montgomery		3
Arizona:		
Tucson		2
Arkansas:		4
Fort Smith		
California:		
Alameda		2
Bakersfield		2
Berkeley	6	2
Long Beach		2
Los Angeles	107	50
Oakland	15	8
Pasadena	8	4
Sacramento	11	5
San Bernardino		1
San Diego	6	5
San Francisco		28
Santa Ana		2
Santa Barbara	1	
Santa Cruz	1	
Vallejo		1
Colorado:		
Denver		20
Pueblo		1
Connecticut:		
Bridgeport		14
Bristol	3	
Derby		1
Hartford	9	3
Manchester	2	
Milford	1	
New Haven		17
New London		1
Norwalk		2
Waterbury	12	11
Delaware:		
Wilmington		8
District of Columbia:		
Washington		22
Georgia:		
Atlanta		12
Augusta	2	
Macon	2	
Rome	9	
Savannah		3
Idaho:		
Pocatello		2
Illinois:		
Alton	3	1
Aurora	4	
Bloomington		2
Chicago	418	72
Cicero	9	3
Decatur		2
East St. Louis	15	2
Evanston	7	
Freeport		1
Galesburg		3
Jacksonville		3
Kewanee		1
La Salle		3
Mattoon	6	1
Oak Park	5	2
Peoria		4
Quincy		1
Rhode Island:		
Rock Island		3
Springfield	4	2
Indiana:		
East Chicago		7
Evansville		6
Fort Wayne		3
Frankfort	1	
Gary		11
Hammond		4
Huntington		1
Indianapolis		28
Muncie		3
Newcastle		1
Terre Haute		5
Iowa:		
Burlington	3	1
Muscatine	1	
Kansas:		
Atchison	1	
Coffeyville	5	
Fort Scott		2
Hutchinson	2	
Kansas City	27	
Lawrence		1
Parsons		1
Topeka	11	2
Wichita	10	8
Kentucky:		
Covington		8
Owensboro	1	
Louisiana:		
New Orleans	15	1
Maine:		
Auburn		3
Bangor	3	
Biddeford		3
Lewiston		8
Portland	6	4
Sanford	1	
Maryland:		
Baltimore	87	36
Cumberland		2
Massachusetts:		
Arlington	2	
Belmont		1
Beverly		2
Boston		73
Braintree		2
Brookline	2	1
Cambridge	11	8
Chelsea	10	
Clinton	3	
Everett	5	3
Fall River	17	14
Framingham		4
Gardner	1	
Haverhill	4	1
Holyoke	5	2
Lawrence	3	1
Leominster		3
Lowell		13
Lynn	5	2
Malden	4	2
Medford		1
Melrose	3	1
Methuen		1
New Bedford		8

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

PNEUMONIA (ALL FORMS)—Continued.

City.	Cases.	Deaths.
Massachusetts—Contd.		
Newton		2
North Adams		2
Peabody	2	
Pittsfield		1
Plymouth		1
Quincy	9	4
Saugus		1
Somerville	9	6
Springfield	7	4
Taunton		5
Wakefield	2	
Watertown	2	1
Westfield	4	2
Woburn		2
Worcester	19	15
Michigan:		
Ann Arbor	3	
Battle Creek	1	
Detroit	217	65
Flint		3
Grand Rapids	5	2
Kalamazoo	3	2
Pontiac	1	
Port Huron	2	1
Minnesota:		
Duluth	5	4
Minneapolis		7
Rochester	1	
St. Paul		4
Missouri:		
Kansas City	75	43
St. Joseph		12
Springfield		1
Montana:		
Billings		1
Great Falls	3	2
Missoula		1
Nebraska:		
Lincoln		4
Omaha		17
Nevada:		
Reno	4	
New Hampshire:		
Berlin		1
Manchester		3
New Jersey:		
Asbury Park	2	
Atlantic City		5
Bayonne	6	
Bloomfield	2	
Clifton	4	3
East Orange	9	2
Elizabeth		10
Englewood		1
Garfield	4	
Hackensack	9	6
Hoboken		7
Jersey City	11	
Kearny	7	2
Montclair	4	
Morristown		3
Orange	12	3
Passaic	10	2
Paterson	28	
Perth Amboy		4
Phillipsburg		1
Plainfield	5	
Summit	1	
Trenton	15	10
Union	1	
West Hoboken		4
West New York		3
West Orange	9	3
New Mexico:		
Albuquerque	3	
New York:		
Albany	33	
Auburn	4	2
Binghamton	7	
Buffalo	33	18
New York—Continued.		
Geneva		2
Hudson	2	1
Ithaca	2	
Jamestown	10	4
Lackawanna	13	1
Little Falls		1
Lockport	1	
Middletown		1
Mount Vernon	20	5
New York	987	443
Niagara Falls	10	5
Ogdensburg		1
Olean		1
Peekskill	3	1
Port Chester	6	2
Poughkeepsie		1
Rochester	48	11
Rome		2
Saratoga Springs	3	1
Schenectady	10	2
Troy	6	1
Watertown	2	1
Watervliet		1
White Plains	11	1
Yonkers	13	8
North Carolina:		
Charlotte		4
Durham		1
Raleigh		1
Salisbury		2
Wilmington	4	2
Winston-Salem		5
Ohio:		
Akron	16	
Alliance		1
Astabula		2
Barberton		1
Cambridge	4	3
Canton		6
Cincinnati		27
Cleveland	87	52
Columbus		9
Dayton	2	
East Cleveland	1	
Elyria		1
Hamilton	5	3
Kenmore	1	
Lancaster		1
Lorain		1
Mansfield	2	
Middletown		1
Newark		2
Norwood		2
Sandusky		1
Springfield		3
Toledo		3
Youngstown		8
Zanesville	5	3
Oklahoma:		
Oklahoma		15
Oregon:		
Portland		12
Pennsylvania:		
Philadelphia	173	141
Rholde Island:		
Cranston		3
Pawtucket		8
Providence		25
South Carolina:		
Charleston		2
Tennessee:		
Memphis		20
Texas:		
Austin		7
Beaumont		3
Corpus Christi		1
Dallas		12
Fort Worth		8
Houston		2
Waco		5

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

PNEUMONIA (ALL FORMS)—Continued.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Utah:			West Virginia—Contd.		
Salt Lake City		8	Huntington		4
Vermont:			Parkersburg		1
Rutland		2	Wheeling		6
Virginia:			Wisconsin:		
Alexandria	2		Fond du Lac	1	
Lynchburg		1	Janesville		1
Norfolk		11	Kenosha		2
Petersburg		1	Milwaukee	8	
Portsmouth		5	Wyoming:		
Richmond		17	Casper	2	
Roanoke	4	2	Cheyenne		3
West Virginia:					
Charleston		1			
Clarksburg		3			

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 1921, inclusive. In instances in which data for the full seven years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Feb. 25, 1922.		City.	Median for previous years.	Week ended Feb. 25, 1922.	
		Cases.	Deaths.			Cases.	Deaths.
Connecticut:				New Jersey:			
New Haven	0	1		Garfield			3
Georgia:				New York:			
Augusta		1		New York	1	3	2
Illinois:				Ohio:			
Centralia		1		Hamilton	0	1	
Maryland:				Pennsylvania:			
Baltimore	0	2		Norristown	0	1	
Cumberland	0		1	Philadelphia	0	2	
Massachusetts:				Rhode Island:			
Worcester	0	2		Providence	0	1	1

RABIES IN ANIMALS.

City.	Cases.	City.	Cases.
Georgia:		New Jersey:	
Savannah	1	Morristown	1
Massachusetts:		Plainfield	1
Holyoke	2	Virginia:	
Missouri:		Petersburg	1
Kansas City	1		

SCARLET FEVER.

See p. 664; also Telegraphic weekly reports from States, p. 651, and Monthly summaries by States, p. 655.

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

SMALLPOX.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1921, inclusive. In instances in which data for the full seven years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Feb. 25, 1922.	
		Cases.	Deaths.
Alabama:			
Birmingham	6	2	.....
Mobile	1	8	1
California:			
Bakersfield	0	2	.....
Berkeley	0	3	.....
Long Beach	2	1	.....
Los Angeles	4	1	.....
Oakland	0	1	.....
San Francisco	5	6	.....
Colorado:			
Denver	11	7	5
Connecticut:			
Bridgeport	0	10	.....
Fairfield	.....	2	.....
District of Columbia:			
Washington	0	3	.....
Georgia:			
Macon	3	2	.....
Illinois:			
Chicago	5	3	2
Peoria	1	21	.....
Indiana:			
Bloomington	0	3	.....
Indianapolis	6	1	.....
Iowa:			
Burlington	0	9	.....
Clinton	0	1	.....
Council Bluffs	1	1	.....
Muscatine	0	3	.....
Sioux City	5	1	.....
Kansas:			
Hutchinson	2	2	.....
Kansas City	1	3	.....
Topeka	1	1	.....
Wichita	4	4	.....
Kentucky:			
Louisville	1	3	.....
Michigan:			
Ann Arbor	0	1	.....
Detroit	3	4	.....
Flint	2	1	.....
Minnesota:			
Duluth	2	1	.....
Hibbing	0	1	.....
Minneapolis	35	13	.....
Rochester	4	6	.....
St. Paul	7	14	.....
Missouri:			
Kansas City	2	4	4
St. Louis	6	1	.....
Montana:			
Great Falls	1	8	.....
Nebraska:			
Omaha	15	1	.....
North Dakota:			
Grand Forks	5	1	.....
Ohio:			
Cincinnati	1	2	.....
Dayton	0	3	.....
Findlay	0	1	.....
Fremont	0	3	.....
Hamilton	2	1	.....
New Philadelphia	0	12	.....
Springfield	0	10	.....
Toledo	1	6	.....
Oklahoma:			
Oklahoma	2	2	.....
Oregon:			
Portland	5	26	.....
Pennsylvania:			
Harrisburg	0	1	.....
Jeannette	0	1	.....
Meadville	0	3	.....
Philadelphia	0	1	.....
South Dakota:			
Sioux Falls	1	1	.....
Tennessee:			
Memphis	1	1	.....
Texas:			
Dallas	25	5	.....
Fort Worth	0	3	1
Houston	0	1	.....
Utah:			
Salt Lake City	10	3	.....
Virginia:			
Danville	0	1	.....
Washington:			
Aberdeen	1	2	.....
Bellingham	1	1	.....
Spokane	27	11	.....
Tacoma	0	5	.....
Yakima	5	1	.....
West Virginia:			
Bluefield	3	1	.....
Wisconsin:			
Kenosha	0	2	.....
Manitowoc	0	2	.....
Marinette	0	1	.....
Milwaukee	3	6	.....
Racine	0	1	.....
Superior	0	5	.....
Waukesha	.....	2	.....
Wausau	0	2	.....
West Allis	.....	1	.....

TETANUS.

City.	Cases.	Deaths.
Illinois:		
Chicago	1	.....
Pennsylvania:		
Philadelphia	1	1

TUBERCULOSIS.

See p. 664; also Telegraphic weekly reports from States, p. 651.

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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 1921, inclusive. In instances in which data for the full seven years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Feb. 25, 1922. Cases.	Deaths.
Alabama:			
Birmingham	1	1	
Mobile	0	1	
Arkansas:			
Little Rock	0	1	
California:			
Oakland	0	3	
Colorado:			
Denver	0	1	
Delaware:			
Wilmington	0	2	
District of Columbia:			
Washington	0	1	
Florida:			
Tampa		6	
Georgia:			
Atlanta	0		1
Macon	0	2	
Rome	0	1	
Illinois:			
Chicago	3	1	
Indiana:			
Hammond	0		1
Indianapolis	0	1	1
Logansport	0	1	
Kansas:			
Kansas City	0	1	
Kentucky:			
Louisville	0		1
Louisiana:			
New Orleans	0	1	
Maryland:			
Baltimore	5	1	1
Massachusetts:			
Boston	3	2	
Northampton	0	12	
Michigan:			
Battle Creek	0	1	
Detroit	3	1	
Flint	0	1	1
Minnesota:			
Minneapolis	2	1	
St. Paul	0		1
Virginia	0	1	
Missouri:			
St. Louis	2	3	1
New Jersey:			
Atlantic City	1	1	
New York:			
Binghamton	0	1	
Buffalo	0	2	1
New York	8	1	1
Rochester	1	1	
Troy	0	1	
Watertown	0	2	
Ohio:			
Cincinnati	0	1	
Cleveland	2	1	
Fremont	0	2	
Oregon:			
Portland	0	1	
Pennsylvania:			
Connellsville	0	1	
Norristown	0	1	
Philadelphia	7	1	
Pittston	0	1	
Tennessee:			
Memphis	0	1	
Texas:			
Austin	0		1
Galveston	0	4	
Houston	0		1
Virginia:			
Petersburg	0	1	
Washington:			
Seattle	0	1	
Tacoma	0	1	
Wisconsin:			
Marinette	0	1	
Milwaukee	1	1	
Oshkosh	0	1	

TYPHUS FEVER.

City.	Cases.	Deaths.
Colorado:		
Pueblo	1	

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS.

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Alabama:										
Anniston	17,734								2	
Birmingham	178,270	50	1		1				3	2
Mobile	60,151	22	4	1			1			2
Montgomery	43,464	12	2							1
Tuscaloosa	11,996		1							
Arizona:										
Tucson	20,292	14		1						8
Arkansas:										
Fort Smith	28,811	13								1
Little Rock	64,997		1							
North Little Rock	14,048						1			
California:										
Alameda	28,806	10		1	1		12			
Bakersfield	18,638	11			1					1
Berkeley	55,386	18	9	1	1		5			
Eureka	12,923	3	7							
Long Beach	55,593	21	8				3		1	1
Los Angeles	576,673	263	32		6		29		79	28
Oakland	216,361	69	17	2	1		9		2	3
Pasadena	45,354	13	1				1		3	
Richmond	16,843	2	1							
Riverside	19,341	8			1				1	
Sacramento	65,857	31	1		1		7		4	2
San Bernardino	18,721	8								2
San Diego	74,683	29	2				6		2	
San Francisco	508,410	260	39	1	3		15		33	21
Santa Ana	15,485	6					1			
Santa Barbara	19,441	6								
Santa Cruz	10,917	7					1			
Vallejo	21,107	6								
Colorado:										
Denver	256,369	106	8		1		5			13
Greeley	10,883	0								
Pueblo	42,908	9	7	2						1
Connecticut:										
Bridgeport	143,538	51	11	1	7	1	12	1		4
Bristol	20,620	10	1				1		1	
Derby	11,238	2								
Fairfield (town)	11,475	1			1		3			
Greenwich (town)	22,123		4		3				1	
Hartford	138,036	51	7		50		4		8	1
Manchester (town)	18,370	7					1			
Meridan (city)	29,842						2		1	
Milford (town)	10,193	4	2		1		2			
New Haven	162,519	71	2		21	1	14		8	3
New London	25,688	7	1		4				1	
Norwalk	27,700	15								
Norwich (city)	22,304	4			3		1			
Stonington (town)	10,236	2	4							
Waterbury	91,410	30	5				12	1	4	1
Delaware:										
Wilmington	110,168	37	2		4		50			2
District of Columbia:										
Washington	437,571	148	18	3	10		12		33	7
Florida:										
Tampa	51,252	13	3						2	2
Georgia:										
Albany	11,555		1							
Atlanta	200,616	73	4				5		4	9
Augusta	52,548		1						1	
Brunswick	14,413	0								
Macon	52,995				15		4			
Rome	13,252		5							
Savannah	83,252	38					4	1		5
Valdosta	10,783	1	1							
Idaho:										
Pocatello	15,001	7		1						
Illinois:										
Alton	24,682	4	2							
Aurora	36,397	9	1		21				1	1
Bloomington	28,725	11					2			
Blue Island	11,424	6	2							
Centralia	12,491	5	1							

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Illinois—Continued.										
Champaign	15,873				1		1			
Chicago	2,701,705	731	156	16	238	4	127	2	198	42
Chicago Heights	19,653	6								
Cicero	44,995	14	4		4		3			1
Decatur	43,818	11	1				1			
East St. Louis	66,740	11							2	2
Elgin	27,454	7								1
Evanston	37,215	10	1		1		8			
Freeport	19,669	8					1			1
Galesburg	23,834	7	1				3		1	
Jacksonville	15,713	15	4				1			1
Kewanee	16,026	5	1				3			
La Salle	13,050	4					1			
Mattoon	18,552	6	1				1			
Oak Park	39,830	14	1		6		1		1	
Peoria	76,121	20	2				3			
Quincy	35,978	9	2				1	1	2	
Rock Island	35,177	7					1		4	2
Springfield	59,183	18			1		2			
Indiana:										
Anderson	29,767	5	2				5			
Bloomington	11,595	4	1							
Clinton	10,962	5					1			
Crawfordsville	10,139	1					2			
East Chicago	35,967	13	6	1					1	
Evansville	85,264	18	1				2			
Fort Wayne	86,549	18	6				4			
Frankfort	11,585	3			1				2	
Gary	55,378	22	2							2
Hammond	36,004	19	3		5		2		1	
Huntington	14,000	8	1	1			5			
Indianapolis	314,194	128	15		39		9		8	8
Kokomo	30,067	10					4			2
La Fayette	22,486	10							1	
Logansport	21,626	6	3		3					
Mishawaka	15,195	2							1	
Muncie	36,624	15	1	1						1
Newcastle	14,458	4								
South Bend	70,983	12	1		1				3	
Terre Haute	66,083	17	1	1	1		8	1		1
Iowa:										
Burlington	24,057	5								
Cedar Rapids	45,566						1			
Clinton	24,151	1	4	1			1			
Council Bluffs	36,162	10	2							
Davenport	56,727		1		2		1			
Dubuque	39,141		1	1			6			
Marshalltown	15,731						4			
Mason City	20,065	3	1							
Muscatine	16,068	6					1			
Ottumwa	23,003		3				2			
Sioux City	71,227		9				1			
Waterloo	36,230		1		1		3			
Kansas:										
Atchison	12,630						2			
Coffeyville	13,452	3					2			
Fort Scott	10,693	8	1							1
Hutchinson	23,293		2				1			
Kansas City	101,177		1				3		1	
Lawrence	12,456	6			1		1			
Leavenworth	16,912		1				2			
Parsons	16,028	8					1			
Salina	15,085	5	3				3			
Topeka	50,022	13	5						2	
Wichita	72,128	39	1	1			3		3	2
Kentucky:										
Covington	57,121	19			17					3
Louisville	234,891	118	10		86	2	3		24	7
Owensboro	17,424		2						1	
Paducah	34,735						4			
Louisiana:										
New Orleans	387,219	131	14		1		8		28	22

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922 – Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Maine:										
Auburn	16,985	9					4			
Bangor	25,978								2	
Bath	14,731	2								
Biddeford	18,008	12								1
Lewiston	31,791	16					1		1	
Portland	69,272	14	5	1			24			2
Sanford	10,691	1								
Maryland:										
Baltimore	733,826	246	38	1	122	1	53		14	30
Cumberland	29,837	12	1				1			
Massachusetts:										
Adams	12,967	4	1				1			
Amesbury	10,036	4			2					
Arlington	18,665	3					1			
Attleboro	19,731	9								
Belmont	10,749	3			2				1	
Beverly	22,561	7	1		1		2			
Boston	748,060	327	77	3	152	2	43	4	39	16
Braintree	10,580	5			1		1			
Brookline	37,748	13	2		1		2		1	
Cambridge	109,694	41	6	1	44		13			4
Chelsea	43,184	22	1		1		1			1
Chicopee	36,214	8	5	2			1		2	1
Clinton	12,979	2	1							
Danvers	11,108		2		2					
Dedham	10,792	2								
Easthampton	11,261								1	
Everett	40,120	12	1		16	1	3			1
Fall River	120,485	59	4	1		1	4		1	4
Framingham	17,033	11								
Gardner	16,971	7	1				2			
Greenfield	15,462	2			10					
Haverhill	53,884	73	7						3	1
Holyoke	60,203	21	1		8		1			4
Lawrence	94,270	36	1		19				1	
Leominister	19,744	6	2				1		2	
Lowell	112,479	46	4	2	1				2	2
Lynn	99,148	27	9				4		3	
Malden	49,103	15	7		10		4		2	
Medford	39,038	7								1
Melrose	18,204	7	1				2		2	1
Methuen	15,189	3			17					1
New Bedford	121,217	42	11	2	1		12		5	2
Newburyport	15,618	5								
Newton	46,054	17	1		1		3		1	
North Adams	22,282	11								
Northampton	21,951	11							1	
Peabody	19,552	7	1		14		3		1	
Pittsfield	41,751	7			1		1			1
Plymouth	13,045	2								
Quincy	47,876	10			32		6		4	1
Saugus	10,874	3	1						2	
Somerville	93,091	44	8		44		2			1
Southbridge	14,245	5								1
Springfield	129,563	37	7	1	6		9		3	2
Taunton	37,137	20	2	1			1			2
Wakefield	13,025	3								
Waltham	30,915	13	1		70		3		1	2
Watertown	21,457	4	1							
Webster	13,258	4								
West Springfield	13,443	2								
Westfield	18,604	14			11				2	1
Winthrop	15,455	4								
Woburn	16,574	9								
Worcester	179,754	65		1	7					5
Michigan:										
Alpena	11,101						5			
Ann Arbor	19,516	17	2				2			
Battle Creek	36,164		1		5		3			
Benton Harbor	12,233				2					
Detroit	993,739	279	59	7	294	3	75		53	16
Flint	91,599	21	7				4			1
Grand Rapids	137,634	34	3		1		6		4	

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Michigan—Continued.										
Holland	12,166	3	2	1		1	2			
Kalamazoo	48,858	15	7				35		6	
Marquette	12,718	3					1		1	
Pontiac	34,273	8	1		24		1		1	
Port Huron	25,944	4					4			
Sault Ste. Marie	12,096	5					4			
Minnesota:										
Austin	10,118	4								
Duluth	98,917	23					3		4	2
Faribault	11,089	1								
Hibbing	15,089						1		1	
Mankato	12,469						4			
Minneapolis	380,582	85	18		30		45	2	11	11
Rochester	13,722	14					1			3
St. Paul	234,595	68	6		3		29	2	12	7
Missouri:										
Kansas City	324,410	170	8		1		3		9	6
St. Joseph	77,939	46	2		1		6			3
St. Louis	772,897	265	60	2	1		15		45	14
Springfield	39,631	16								
Montana:										
Anaconda	11,668									1
Billings	15,100	3	1						1	1
Great Falls	24,121	7	11	1	1		4		1	
Missoula	12,668	7							1	
Nebraska:										
Lincoln	54,934	17	1		6		2			1
Omaha	191,601	62	1		19		4			1
Nevada:										
Reno	12,016	2							1	1
New Hampshire:										
Berlin	16,104	3								
Concord	22,167	9	1						1	
Dover	13,029	4			15					
Keene	11,210	4							2	
Manchester	78,384	25	9		18	3				1
New Jersey:										
Asbury Park	12,400	1			1				1	
Atlantic City	50,682	11					1		2	
Bayonne	76,754		1		4		1		2	
Belleville	15,660						2			
Bloomfield	22,019		1		9		1		1	
Clifton	26,470	5	2				6			
East Orange	50,710	12	4		1		9			
Elizabeth	95,682		5		2		18		1	
Englewood	11,627	6					4			
Garfield	19,381	4							1	
Hackensack	17,667	6					3			
Harrison	15,721		1				1			
Hoboken	68,166	20	1	2	3		3		2	
Jersey City	297,864		28		51		24		16	
Kearny	26,724	10			1		4		1	
Montclair	28,810	3					4		2	
Morristown	12,548	7		1			1			
Orange	33,268	7					5			
Passaic	63,824	22	3				10	1	2	2
Paterson	135,866		5		63		8		5	
Perth Amboy	41,707	10	10	1	11		2		1	
Phillipsburg	16,923	4								
Plainfield	27,700	3	1		2		3		1	1
Rahway	11,042	6	1				2			
Summit	10,174	1			1					1
Trenton	119,289	56			3		6		3	2
Union	20,651				2		4			
West Hoboken	40,068	10	1		7		3			
West New York	29,926	6	1		3		2	1	2	
West Orange	15,573	8					3			
New Mexico:										
Albuquerque	15,157	14	5	2			7		3	5
New York:										
Albany	113,344		7		14		1		2	
Auburn	36,192	12	1				2		2	
Binghampton	66,800	21	1				15			

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
New York—Continued.										
Buffalo	506,775	147	25	3	2		37	1	12	5
Geneva	14,648	5								
Hornell	15,025	7	1		3					2
Hudson	11,745	3	1						3	
Ithaca	17,004	4	3	1						
Jamestown	38,917	16	5		15		3		3	
Lackawanna	17,918	5					8		2	
Little Falls	13,029	4								
Lockport	21,306	3					1			
Middletown	18,420	2					2		1	
Mount Vernon	42,726	13	1		2		9		1	
Newburgh	30,366	17							1	3
New York	5,621,151	1,988	190	38	1,325	17	389	10	[1] 366	[1] 115
Niagara Falls	50,760	12	3		3		16	1	1	1
North Tonawanda	15,452	7	2							
Ogdensburg	14,609	6								
Olean	20,506	15	2				3			1
Peekskill	15,868	3							1	
Port Chester	16,573	8	1				1		4	
Poughkeepsie	35,000	12			50					
Rochester	295,750	81	8	1	1		1		14	4
Rome	26,341	8	2		17		1			1
Saratoga Springs	13,181	6					1		1	2
Schenectady	88,723	29	7				7		6	1
Troy	72,013	29	2		1		1		3	4
Watertown	31,285	11					3		1	1
Watervliet	16,073	3								
White Plains	21,031	6	1		47		3		1	
Yonkers	100,226	26	1		5		10			1
North Carolina:										
Charlotte	46,338	20					1		4	
Durham	21,719	6							4	1
Greensboro	19,861	2								1
Raleigh	24,418	11	1						2	1
Rocky Mount	12,742	7								
Salisbury	13,884	6								
Wilmington	33,372	14								
Winston-Salem	48,395	19					2		2	
North Dakota:										
Fargo	21,961	0					3			
Ohio:										
Akron	208,435	44	8		19		12			
Alliance	21,603	7	1							
Ashtabula	22,062	8							1	
Barberton	18,811	4					1		2	1
Bucyrus	10,425	4	2							
Cambridge	13,104		1				1		1	1
Canton	87,091	27	2		11		5			
Cincinnati	401,247	171	9	2	71		8		11	16
Cleveland	796,836	252	22	5	102	1	70	2	49	14
Columbus	237,031	81	7	1	1		3		5	7
Coshocton	10,847		1							
Dayton	152,559	45	4		2		3		1	
East Cleveland	27,292	3			1		2			
Elyria	20,474	9					1		2	
Findlay	17,021	5			1				1	
Fremont	12,468	5							1	
Hamilton	39,675	19					2		1	1
Kenmore	12,683		2				1			
Lancaster	14,706	5								
Lorain	37,295				2		1		1	
Mansfield	27,824	11	1				3			
Marion	27,891		3				2			
Martins Ferry	11,634	2								
Middletown	23,594	6							3	1
Newark	26,718	11	2				1			1
New Philadelphia	10,718		1				1			
Niles	13,080	3					4			
Norwood	24,966	5	3				3		1	
Salem	10,305	3					3			
Sandusky	22,897	9					2			1

[1] Pulmonary tuberculosis only.

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Ohio—Continued.										
Springfield	60,840	14	1				1		1	1
Steubenville	28,508	10	2				1			
Tiffin	14,375	2								
Toledo	243,109	61	13	1	8		7		8	8
Youngstown	132,358	47	5		4	1	8		3	6
Zanesville	29,569	16	2				3			2
Oklahoma:										
Oklahoma	91,258	29	3		1		4			3
Tulsa	72,075		1		9		1			
Oregon:										
Portland	258,288	86	17		3		11		3	5
Pennsylvania:										
Allentown	73,502		4							
Altoona	60,331						3			
Berwick	12,181				24					
Bethlehem	50,358		3		1		5			
Braddock	20,879								2	
Bradford	15,525				1					
Butler	23,778		1				1			
Chester	58,030				2		5		3	
Dickson City	11,049		2							
Dubois	18,681		1				1			
Easton	33,813		1							
Erie	93,372		3		3		1		2	
Farrell	15,586				1					
Harrisburg	75,917		2				3			
Hazleton	32,277				10		1			
Jeannette	10,627		2							
Johnstown	67,327		1		5		4		2	
Lancaster	53,150		3		2		9		1	
Lebanon	24,643		1				1		1	
McKeesport	45,975		1		1					
McKees Rocks	16,713		1							
Mahanoy City	15,599		1							
Meadville	14,568		1							
Monessen	18,179				1		4		1	
Mount Carmel	17,469		1							
Nanticoke	22,614				2					
New Kensington	11,987				1		1			
Norristown	32,319		1				5		2	
North Braddock	14,928						2		1	
Oil City	21,274		1							
Olyphant	10,236								1	
Philadelphia	1,823,158	618	90	12	27		138	6	70	40
Pittsburgh	588,193		17		47		31		14	
Plymouth	16,500		1		5				1	
Pottstown	17,431						5			
Pottsville	21,876				7		1			
Reading	107,784		8		1		4			
Scranton	137,783		5		3					
Shamokin	21,204		1		2					
Shenandoah	24,726		1		2		1			
Steelton	13,428		1							
Sunbury	15,721				6					
Tamaqua	12,363		3		9					
Uniontown	15,692		1		2		6			
Washington	21,480				10				1	
West Chester	11,717						1			
Wilkes-Barre	73,833		4		16				1	
Wilkinsburg	24,403		1				1			
Williamsport	36,198				5		3			
Woodlawn	12,495		1				1			
York	47,512		4						1	
Rhode Island:										
Cranston	29,407	6			2					
Cumberland (town)	10,077	1					1			
Newport	30,255	11	1				4	1		
Pawtucket	64,248	23	2							
Providence	237,595	113	4				3			5
South Carolina:										
Charleston	67,957	28							1	4
Columbia	37,524		1				1			

CITY REPORTS FOR WEEK ENDED FEB. 25, 1922—Continued.

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

City.	Population Jan. 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
South Dakota:										
Sioux Falls	25,176	5	2		4		5			
Tennessee:										
Chattanooga	57,895						2			
Knoxville	77,818				5		1			
Memphis	162,351	67	4				2		18	8
Texas:										
Austin	34,876	55								3
Beaumont	40,422	10								
Corpus Christi	10,522	4							1	1
Dallas	158,976	47	2		73		4		2	3
Fort Worth	106,482	33	4		1		2		3	3
Galveston	44,255	6								
Houston	138,076	37	2				1			3
Waco	38,500	20	2							
Utah:										
Salt Lake City	118,110	40	5		1		3		1	2
Vermont:										
Barre	10,008						3			
Burlington	22,779	10			1		8		2	
Rutland	14,954	5								2
Virginia:										
Alexandria	18,060	10							1	1
Danville	21,539	7	3		1				1	1
Lynchburg	29,956	5	4				5		2	1
Norfolk	115,777	1	1							9
Petersburg	31,002	9			1		1		2	1
Portsmouth	54,387	15					3			2
Richmond	171,667	79	7		16		2		6	3
Roanoke	50,842	16	4				3			1
Washington:										
Bellingham	25,570						1			
Seattle	315,652		5		1		7			
Spokane	104,437		1				4			
Tacoma	96,965		5							
Walla Walla	15,503		1				2		1	
West Virginia:										
Bluefield	15,282	4	1				1			
Charleston	39,608	15								1
Clarksburg	27,869	7	3		1		1			
Fairmont	17,851		4				1			
Huntington	50,177	28								2
Martinsburg	12,515		1		15					
Morgantown	12,127			1			2			
Moundsville	10,669	4			10		2			
Parkersburg	20,050	6								
Wheeling	54,322	22	1		1		1			2
Wisconsin:										
Ashland	11,334						1			
Beloit	21,284	2					2		2	
Eau Claire	20,880		1							
Fond du Lac	23,427	7	1						1	
Janesville	18,293	5	4				1			
Kenosha	40,472	7	8		1		1			
La Crosse	30,363						3		2	
Madison	38,378				1		2			
Marinette	13,610						1			
Milwaukee	457,147		10		1		18		12	
Oshkosh	33,162	11	1				1		1	1
Racine	58,593	10	3				10		3	1
Sheboygan	30,955		1							
Stevens Point	11,371		2							
Superior	39,624	7	2				5			
Waukesha	12,558		1				7			
Wausau	18,661				1					
West Allis	13,765								6	
Wyoming:										
Casper	11,447	5								
Cheyenne	13,829	7			2					

FOREIGN AND INSULAR.

PLAGUE ON VESSEL.

Steamship "Tango Maru"—At Thursday Island—From Kobe and Ports.

On December 31, 1921, the steamship *Tango Maru* arrived at Thursday Island, Queensland, Australia, from Kobe via Nagasaki, Hongkong, Manila, and Zamboanga, with a case of plague on board in the person of a third-class passenger who had boarded the vessel at Hongkong, December 20, 1921, and reported sick December 22, 1921. The *Tango Maru* left Kobe December 13, 1921. At Hongkong 40 passengers were taken on, including the patient subsequently landed at Thursday Island.

AUSTRALIA.

Plague—Queensland.

Bundaberg.—During the week ended March 11, 1922, one case of plague was reported at Bundaberg, Queensland, Australia.

The following is a summary of recent reports of plague in Queensland:

Brisbane.—Week ended December 31, 1921, two fatal cases; week ended January 7, 1922, four cases, and four cases reported during the previous week confirmed; week ended January 21, 1922, two cases; week ended January 28, one case previously reported, confirmed. Total number of cases reported from August 22, 1921, 55, with 28 deaths.

Cairns.—Week ended January 7, 1922, one death.

Townsville.—Two weeks ended January 14, 1922, two fatal cases. Total cases to date, 32; deaths, 21.

Plague Rats and Sentinel Guinea Pigs.

The finding of plague-infected animals in Australia has been reported as follows:

New South Wales—Sydney.—Week ended January 21, 1922, one plague rat found.

Queensland—Brisbane.—Week ended December 31, 1921, one rat; January 1 to 21, 1922, nine rats; week ended December 31, 1921, two plague-infected sentinel guinea pigs; week ended January 28, 1922, one plague-infected sentinel guinea pig reported found.

Cairns.—Week ended December 31, 1921, one plague rat.

Hinchinbrook (Ingham).—January 1–14, 1922, two plague rats.

BRAZIL.

Campaign Against Tuberculosis.

By legislative decree of December 28, 1921, the Brazilian Congress authorized the Government to establish sanitariums for the treatment of tuberculosis in or near the Federal district and at other points in the interior, preference being given to those States in which the endemic coefficient of tuberculosis is highest. In the extension of these sanitariums, arrangements will be made with State governments for a division of expense. The institutions will be supported by an appropriation to be voted annually by the National Congress. Each sanitarium is to be provided with at least 100 beds. A section will be reserved for pay patients.

The Government is also authorized to assist with loans three private institutions of the same type and capacity which shall have begun to be built within one year after the promulgation of the law and which are completed within two years. The institutions will be required to build especially for the treatment of tuberculosis, on plans conforming with the requirements of the national department of health.

CANADA.

Communicable Diseases—Ontario—December, 1921.

The following table shows the number of cases of communicable diseases occurring in the Province of Ontario, Canada, during the month of December, 1921, as compared with the number reported for the corresponding month of the year 1920. The number of deaths from these diseases is also shown. Population, estimated, 2,523,200.

Disease.	December, 1921.		December, 1920.	
	Cases.	Deaths.	Cases.	Deaths.
Cerebrospinal meningitis	5	3	7	7
Diphtheria	743	60	778	74
Influenza	4	4	45	12
Measles	94	2	973	7
Pneumonia	.....	215	.....	242
Poliomyelitis (infantile paralysis)	1	0	7	3
Scarlet fever	600	16	711	17
Smallpox	128	0	555	5
Tuberculosis	174	139	161	114
Typhoid fever	28	5	59	25
Whooping cough	95	9	335	16

CHINA.

Smallpox—Shanghai.

Under date of January 26, 1922, smallpox conditions at Shanghai, China, were reported to be still serious.[1]

[1] Public Health Reports, Feb. 17, 1922, p. 377.

CUBA.

Communicable Diseases—Provinces.

Communicable diseases have been notified in the Republic of Cuba as follows:

Provinces.

NEW CASES REPORTED JAN. 1-10, 1922.

Province.	Chicken pox.	Diphtheria.	Infantile tetanus.	Malaria.	Measles.	Paratyphoid fever.	Poliomyelitis (infantile paralysis).	Scarlet fever.	Smallpox.	Typhoid fever.
Camaguey		1		19			1		22	3
Habana	3	3		20	1	1		10		19
Matanzas	2	2	1			1				3
Oriente	6			64		6			69	1
Pinar del Rio		1		4						4
Santa Clara	10	1		1	1	1		1		4
Total	21	8	1	108	2	9	1	11	91	34

NEW CASES REPORTED JAN. 11-31, 1922.

Camaguey	9			48					70	4
Habana	16	10		50	4	2	2	32	1	26
Matanzas	7	2	2	5						11
Oriente	13	8	1	190		9		1	94	12
Pinar del Rio		2		10		3				3
Santa Clara	16	1		4		1	2	1	1	8
Total	61	23	3	307	4	15	4	34	166	64

MALTA.

Communicable Diseases—Year Ended March 31, 1921.

The report of the public-health department of the Island of Malta, for the year ended March 31, 1921, shows 651 cases of Mediterranean, Malta, or undulant fever, 248 cases of scarlet fever, 302 cases of tuberculosis, pulmonary, and 517 cases of typhoid fever. The total number of deaths reported for the period was 4,584, in a population of 226,224.

Mediterranean, or Malta, fever (also called undulant fever) continues to play an important rôle in morbidity in Malta, and constant efforts are made to combat the disease. Warnings to the public to boil all goats' milk before using are periodically issued. During the year under report, 5,729 goats were examined and an average of 6.9 per cent of these were found infected. Vaccination of goats against the fever has been carried on in the island but with negative results.

RUSSIA.

Typhus Fever—Saratov District.

Under date of January 31, 1922, typhus fever was stated to be gaining greatly in the district of Saratov, eastern Russia. In the town of Markstadt, in the German Communes, there were reported

present in hospitals and childrens' homes, 94 cases during the month of September, 1921, 172 cases in October, 797 cases in November, and 924 cases in December. The mortality was stated to be about 10 per cent.

SWEDEN.

Influenza—Goteborg.[1]

Influenza has been reported at Goteborg, Sweden, as follows: Week ended February 4, 1922, 649 cases with 7 deaths; week ended February 11, 1922, 873 cases with 11 deaths. (Population, census of Dec. 31, 1921, 228,053.)

UNION OF SOUTH AFRICA.

Smallpox—Typhus Fever—November, 1921.[2]

During the month of November, 1921, smallpox and typhus fever were reported in the Union of South Africa as follows:

Smallpox.—Among the colored population, 216 cases with 5 deaths. These were distributed as follows: Cape Province, 17 cases with 1 death; Natal, 170 cases with 4 deaths; Orange Free State, 7 cases; Transvaal, 22 cases. Among white inhabitants 8 cases were reported.

Typhus fever.—Among the colored population, 573 cases with 79 deaths. These were distributed as follows: Cape Province, 473 cases with 70 deaths; Natal, 55 cases with 7 deaths; Orange Free State, 41 cases with 1 death; Transvaal, 4 cases with 1 death. Among the white population 7 cases with 1 death were reported, occurring in the Cape Province.

VIRGIN ISLANDS.

Contagious Diseases—January, 1922.

The occurrence of contagious diseases in the Virgin Islands during the month of January, 1922, has been reported as follows:

Island and disease.	Cases.	Remarks.
In St. Thomas and St. John:		
Chancroid	1	
Chicken pox	1	
Gonococcus	5	3 imported.
Measles	93	65 St. John.
Syphilis	2	1 imported.
In St. Croix:		
Dengue	4	
Dysentery	1	Entamebic.
Filariasis	8	
Gonococcus	3	
Malaria	1	Aestivo-autumnal.
Mumps	2	
Schistomiasis	1	
Syphilis	6	
Trachoma	28	
Tuberculosis	4	Chronic pulmonary.

[1] Public Health Reports, Mar. 3, 1922, p. 516.
[2] Public Health Reports, Oct. 21, 1921, p. 2651; Nov. 18, 1921, p. 2865; and Dec. 16, 1921, p. 3114.

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

Reports Received During Week Ended Mar. 17, 1922.[1]

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
Philippine Islands:				
Manila	Jan. 15-21	16	8	
Provinces—				
Bulacan	Dec. 25-31	1		

PLAGUE.

Australia:				
New South Wales—				
Sydney				Jan. 15-21, 1922, one plague rat found.
Queensland—				
Brisbane	Dec. 25-31		2	Aug. 22, 1921-Jan. 28, 1922: Cases, 55; deaths, 28. Dec. 25, 1921-Jan. 28, 1922: 10 infected rats and 3 infected sentinel guinea pigs.
Do	Jan. 1-7	4		Also 4 cases reported previous week, confirmed.
Do	Jan. 15-21	2		
Do	Jan. 22-28			1 case reported previous week confirmed.
Bundaberg	Mar. 5-11	1		
Cairns	Jan. 1-7		1	Dec. 25-31, 1921: 1 plague rat found.
Hinchinbrook (Ingham)				Jan. 1-14, 1922: 2 plague rats found.
Townsville	Jan. 1-14		2	To Jan. 14, 1922: Cases, 32; deaths, 21.
Ceylon:				
Colombo	Jan. 15-21	3	4	1 plague rat.
China:				
Hongkong	Jan. 15-28	6	3	
India				Jan. 8-14, 1922: Cases, 1,609; deaths, 1,283.
Karachi	Jan. 22-28	5	5	
Indo-China:				
Saigon				City and district, Dec. 18-24, 1921: Three plague rats. City and district, Jan. 8-14, 1922: 1 plague rat.
Siam:				
Bangkok	Dec. 25-31	1		
On vessel:				
Steamship Tango Maru	Dec. 31	1		At Thursday Island quarantine, Australia, from Kobe, via Nagasaki, Hongkong, Manila, and Zamboanga.

SMALLPOX.

Canada				Dec. 1-31, 1921: Cases, 128.
New Brunswick—				
Charlo	Feb. 19-25	2		20 miles from Campbellton.
Chile:				
Talcahuano	Jan. 22-28	1		
China:				
Hongkong	Jan. 15-28	3	2	
Shanghai	Jan. 23-Feb. 5	6	37	Cases, foreign (pop. 24,000). Deaths, native (pop. 790,000).
Cuba				Jan. 1-31, 1922: Cases, 257.
Haiti:				
Cape Haitien	Feb. 12-18	6		
Indo-China:				
Saigon	Dec. 18-24	1	1	City and district.
Do	Jan. 8-14	1	1	
Mexico:				
San Luis Potosi	Feb. 19-25		3	

[1] 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 Mar. 17, 1922—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa				Nov. 1-30, 1921: Cases, 216; deaths, 5 (colored). White, 8 cases.
Cape Province				Nov. 1-30, 1921: Cases, 17; deaths, 1 (colored).
Natal				Nov. 1-30, 1921: Cases, 170; deaths, 4 (colored).
Orange Free State				Nov. 1-30, 1921: Cases, 7 (colored).
Transvaal				Nov. 1-30, 1921: Cases, 22 (colored). Among white population, 8 cases, State not designated.

TYPHUS FEVER.

China:				
Harbin	Jan. 9-22	12		
Mexico:				
San Luis Potosi	Feb. 19-25		1	
Russia:				
Saratov District—				
Markstadt				Sept. 1-Dec. 31, 1921: Cases, 1,987; mortality, about 10 per cent; hospital cases.
Union of South Africa				Nov. 1-30, 1921: Cases, 573; deaths, 79 (colored). White, 7 cases, 1 death.
Cape Province				Nov. 1-30, 1921: Cases, 473; deaths, 70 (colored). Among white population, 7 cases, 1 death.
Natal				Nov. 1-30, 1921: Cases, 55; deaths, 7 (colored).
Orange Free State				Nov. 1-30, 1921: Cases, 41; deaths, 1 (colored).
Transvaal				Nov. 1-30, 1921: Cases, 4; deaths, 1 (colored).

Reports Received from Dec. 31, 1921, to Mar. 10, 1922.

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
India				Oct. 2-Nov. 26, 1921: Deaths, 30,372.
Bombay	Oct. 30-Nov. 5	1		
Calcutta	Oct. 23-Dec. 31	71	60	
Do	Jan. 1-21	34	29	
Karachi	Nov. 6-12		1	
Madras	Dec. 11-31	4	1	
Do	Jan. 1-21	9	6	
Rangoon	Oct. 1-Dec. 31	30	24	
Do	Jan. 1-14	5	3	
Indo-China:				
Saigon	Nov. 6-12	1	1	
Java:				
West Java—				
Batavia	Nov. 1-7	2	2	At Lebak.
Philippine Islands:				
Manila	Nov. 13-Dec. 31	49	18	
Do	Jan. 1-14	45	13	
Provinces—				
Pampanga	Dec. 25-31	1		
Zambales	Dec. 11-31	31	18	
Poland				Aug. 14-Sept. 10, 1921. Cases, 4; deaths, 1.
Russia:				
Kharkoff	Jan. 28			Present.
Kieff	Dec. 15-Jan. 11	259		

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

CHOLERA—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Russia—Continued.				
Latvia—				
Riga				At quarantine station in October, 1921: One case.
Odessa	Jan. 28			Present.
Siam:				
Bangkok	Oct. 23–Dec. 24	8	4	

PLAGUE.

Asia Minor:				
Smyrna	Nov. 27–Dec. 3	1	1	
Australia:				
New South Wales—				
Sydney	do	2	1	Dec. 7–13: 4 plague rats.
Do	Jan. 29–Feb. 25	4		
Queensland—				
Brisbane	Oct. 30–Dec. 24	27	18	Total, Aug. 22–Dec. 24, 1921: Cases, 39; deaths, 25. Total infected rats, 53.
Do	Jan. 21–28	3		
Cairns	Oct. 30–Dec. 10	6	3	Plague rats: 8.
Cooktown	Oct. 30–Nov. 5	1		Pestis minor.
Ingham				Nov. 6–Dec. 24, 1921: Plague rats, 14.
Inisfail				Nov. 27–Dec. 3, 1921: 1 plague rat.
Ipswich	Dec. 11–17	1	1	
Port Douglas	Nov. 13–19	1	1	
Townsville	Nov. 20–Dec. 3	2	2	Total cases, 27; deaths, 18.
Azores:				
Islands—				
Fayal	Jan. 16–22	2	2	
St. Michael				Nov. 27–Dec. 31, 1921: Cases, 23; deaths, 9. Jan. 1–21, 1922: Cases, 13; deaths, 8.
Arrifes	Dec. 25–31	1	1	3 miles from port.
Do	Jan. 1–7	1		
Fenaes d'Ajuda	Nov. 27–Dec. 3			Present. 6 miles from port.
Do	Jan. 15–21	3	2	
Ribeira Grande	Nov. 13–Dec. 10	19	8	9 miles from port.
Do	Jan. 8–14	9	6	
Livramonto	Dec. 4–10	2		Vicinity of Ponta Delgada.
Ponta Delgada	do	1		
Brazil:				
Bahia	Oct. 30–Dec. 31	13	12	
Do	Jan. 1–7	2	2	
British East Africa:				
Uganda	Aug. 1–Oct. 31	90	61	Reports of inspectors, deaths, 343; reports of chiefs, deaths, 651.
Ceylon:				
Colombo	Oct. 30–Dec. 31	13	10	Oct. 30–Dec. 24, 1921: Rodent plague, 6.
Do	Jan. 1–14	7	7	Infected rats, 7.
China:				
Hongkong	Nov. 20–Dec. 17	6		
Do	Jan. 1–14	6	4	
Ecuador:				
Guayaquil	Nov. 16–Dec. 31	18	6	Rats examined, 2,958; found infected, 90. Total, July–Dec. 15, 1921: Cases, 28. Jan. 1–31, 1922: Rats examined, 6,200; found infected, 153.
Do	Jan. 1–31	20	9	
Egypt				Jan. 1–Dec. 31, 1921: Cases, 356; deaths, 153. Jan. 1–Feb. 2, 1922: Cases, 12, deaths, 6.
City—				
Alexandria	Dec. 5–30	7	2	
Do	Jan. 17–24	3	2	
Port Said	Dec. 20	1		
Suez	Nov. 22–Dec. 31	16	9	
Do	Jan 2–29	4	2	
Province—				
Girgeh	Jan. 12	1		Septicemic.
Keneh	Dec. 1	1	1	Do.
Do	Jan. 21–26	2	1	1 case septicemic.

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Greece:				
Preveza	Feb. 8			Outbreak. Port on the Ionian Sea.
India				Oct. 23-Dec. 31, 1921: Cases, 8,690; deaths, 6,458 (Reports, weeks ended Dec. 3 and 17, 1921, missing). Jan. 1-7, 1922: Cases, 1,944; deaths, 1,518.
Bombay	Oct. 23-Dec. 24	7	6	
Do	Jan. 1-7	1	1	
Karachi	Nov. 6-Dec. 31	5	5	
Do	Jan. 1-14	3	1	
Madras	Dec. 11-17	1		
Madras Presidency	Nov. 13-Dec. 31	2,047	1,438	
Do	Jan. 1-21	771	542	
Rangoon	Oct. 1-Dec. 31	139	129	
Do	Jan. 1-14	38	36	
Indo-China:				
Saigon				Nov. 6-Dec. 10, 1921: Rodent plague, 7.
Italy:				
Catania	Nov. 27	1	1	Total, Oct. 16-Nov. 27, 1921: Cases, 8 (of which 1 doubtful); deaths, 5.
Naples (Province)—				
Torre Annunziata	Oct. 22-Dec. 27	2		17 miles from city of Naples.
Venice	Oct. 27	1		
Java				Islands of Java and Madoera, Nov. 1-30, 1921; deaths, 763.
East Java—				
Soerabaya	Oct. 30-Dec. 10	11	12	
Madagascar:				
Tananarive	Feb. 4			Present.
Mauritius (Island):				
Port Louis	Oct. 29-Nov. 30	159	101	Plague-infected rats, 176; plague-infected cats, 36. (Corrected report).
Mesopotamia:				
Bagdad	Oct. 1-31	1	1	
Mexico:				
Tampico				Dec. 18-31, 1921: Infected rodents found, 5; total, Jan. 1-Dec. 31, 1921, infected rodents, 322; Jan. 1-Feb. 18, 1922, 9 plague-infected rodents.
Vera Cruz				One infected rodent caught Dec. 5, 1921.
Peru				Nov. 17-Dec. 31, 1921: Cases, 94; deaths, 35. Occuring in Callao, Huacho, Huaras, Lima, Magdalena Vieja, Paita, Salaverry, and Sechura. Jan. 1-15, 1922: Cases, 28; deaths, 12. (Corrected report.)
Localities—				
Bambamarca	Jan. 15			Present. Rural.
Callao	do	2		Rural. Year, 1921: Deaths, 30.
Cutervo	do	1		Rural.
Guadalupe	do	6	2	
Huacho	do	1		
Huaral	do	2		
Jayanca	do			Present.
Lima	do	2		In district, 2 cases; 1 death.
Payta	do	11	8	
San Pedro	do	1		
Sullana	do		1	
Portugal:				
Lisbon	Dec. 15	1	1	
Portuguese West Africa:				
Angola—				
Loanda	Oct. 9-Nov. 5		2	
Rhodes (Island) (Aegean Sea)	Oct. 13	3	1	
Siam:				
Bangkok	Oct. 23-Dec. 17	6	6	
Straits Settlements:				
Singapore	Nov. 6-Dec. 31	3	3	
Syria:				
Beirut	Oct. 9-Nov. 20	10	4	
Turkey:				
Constantinople	Jan. 1-7	1		

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa:				
Orange Free State—				
Bothaville	Nov. 19			Plague-infected mouse found.
Hoopstad	Dec. 4-10	1		In native herd boy.
On vessel:				
S. S. Polycarp	Feb. 3	1		At Para, Brazil, from Ceara, via Manaos, Maranham, and Para for New York.

SMALLPOX.

Arabia:				
Aden	Dec. 25-31		1	
Do	Jan. 8-14		1	
Asia Minor:				
Smyrna	Jan. 15-21	1		In district.
Bolivia:				
La Paz	Aug. 1-Oct. 31	42	28	
Brazil:				
Bahia	Nov. 6-Dec. 17	4		
Rio de Janeiro	Nov. 13-Dec. 31	13	2	
Do	Jan. 1-21	8	1	
Sao Paulo	Oct. 31-Dec. 25	11		
Do	Dec. 26-Jan. 1	1		
British East Africa:				
Uganda	Aug. 1-Sept. 30	7		Reports of inspectors; cases, 4.
Canada:				
British Columbia—				
Vancouver	Dec. 25-31	3		
Do	Jan. 29-Feb. 4	1		
Manitoba				Year 1921: Cases, 71.
Winnipeg	Nov. 20-Dec. 3	2		
New Brunswick—				
Charlotte County				Dec. 17, 1921: 31 cases previously reported, occurring at Andersonville and Blacks Harbor. Dec. 18-24, 1921: Cases, 3. Dec. 25-31, 1921: Cases, 2.
St. Stephen	Dec. 11-17	2		
Restigouche County	Dec. 11-31	3		
Do	Feb. 12-18	2		
York County	Dec. 11-17	1		
Do	Jan. 29-Feb. 4	1		
Ontario—				
Fort William and Port Arthur	Jan. 1-21	3		
Hamilton	Jan. 22-28	3		
Kingston	Jan. 17-Feb. 11	5		Jan. 16-20. 1922: Two cases reported.
Niagara Falls	Dec. 11-24	2		
Do	Jan. 15-Feb. 18	20		
North Bay	Feb. 12-18	1		
Ottawa	Dec. 11-24	17		
Do	Jan. 1-Feb. 25	26		
Sault Ste. Marie	Jan. 15-21	1		
Toronto	Dec. 11-24	4		
Do	Jan. 1-Feb. 18	43		
Windsor	Jan. 8-14	1		
Quebec—				
Montreal	Dec. 11-24	1		
Saskatchewan—				
Regina	Jan. 1-21	3		
Saskatoon	Dec. 1-18	6		
Do	Feb. 5-9	2		
Canal Zone:				
Ancon				Admitted to hospital by transfer from Panama, Nov. 30, 1921, 1 case. Arrived on sailing vessel from a village on south coast.
Ceylon:				
Colombo	Nov. 27-Dec. 3	1		Port case.
Chile				Nov. 15-21, 1921: Diffused in southern Provinces; not epidemic.
Concepcion	Nov. 23-Dec. 26		25	Nov. 15-21, 1921: Present. In vicinity, at Hualqui, cases, 32; deaths, 5. Dec. 4-17, 1921: Present.
Do	Dec. 27-Jan. 16		11	

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Chile—Continued.				
Coronel	Nov. 15–Dec. 17			Present.
Curanilahue	Nov. 15–21	4		
Talcahuano	Nov. 15–Dec. 24	6		
Do	Jan. 8–21			Do.
Temuco	Nov. 15–21	9		
Valparaiso	Oct. 23–Dec. 31		94	
Do	Jan. 1–21		39	
China:				
Amoy	Nov. 16–Dec. 31		7	Nov. 23–29, 1921: Present.
Do	Jan. 1–14		3	
Antung	Nov. 28–Dec. 18	4	1	
Canton	Dec. 1–31			Present.
Chungking	Nov. 6–Dec. 31			Do.
Do	Jan. 1–7			Do.
Foochow	Nov. 6–Dec. 31			Do.
Do	Jan. 1–14			Do.
Hankow	Nov. 13–Dec. 31			Do.
Do	Jan. 1–21	2		
Harbin	Nov. 14–Dec. 11	5		
Do	Dec. 26–Jan. 1	2		
Hongkong	Dec. 3–31	5		
Do	Jan. 1–14	3	1	
Mukden	Nov. 20–Dec. 31			Do.
Do	Jan. 15–21			Do.
Nanking	Nov. 20–Dec. 17			Do.
Shanghai	Oct. 31–Dec. 31	67	194	Cases, foreign: Deaths, Chinese and foreign. Jan. 14, 1922: Conditions serious.
Do	Jan. 2–22	22	114	Cases, foreign: Deaths, native. Jan. 14, 1922: Seriously prevalent.
Tientsin	Dec. 11–17	2		In Mission Hospital.
Tsingtau	Jan. 1–15	5	4	
Chosen (Korea):				
Fusan	Dec. 1–31	3	1	
Colombia:				
Cartagena	Nov. 22–28		1	
Cuba				Dec. 4–31, 1921: Cases, 361.
Antilla	Dec. 12–31	3		At Preston.
Do	Jan. 8–Feb. 4	13	1	
Cienfuegos	Jan. 22–28	1		From outside city limits.
Santiago	Jan. 1–31	5		
Czechoslovakia:				
Prague	Dec. 18–24		42	
Dominican Republic				Oct. 1–31, 1921: Cases, 653: deaths, 54. Jan. 2–Feb. 4, 1922: Cases, 6,922: deaths, 185.
Puerta Plata	Jan. 13	100	5	In district, widely diffused with 1,000 estimated cases with 100 deaths.
San Pedro de Macoris	Nov. 20–Dec. 31	31	1	Estimate of about 500 cases of smallpox in the district of Macoris; of this amount 50 within the city limits.
Do	Jan. 14–Feb. 4	122		
Santo Domingo	Nov. 15–Dec. 5			In district 401 cases estimated. Dec. 17–24, 1921: Present in vicinity. Jan. 9–16, 1922: In surrounding country, 1,745 cases (estimated).
Fiume				Dec. 27, 1921–Jan. 2, 1922: Cases, 2.
Ecuador:				
Guayaquil	Nov. 16–Dec. 31	7		And vicinity.
Do	Jan. 1–15	1		
Egypt:				
Alexandria	Nov. 26–Dec. 2	1	1	
Cairo	Nov. 26–Dec. 2	2		
Port Said	Dec. 20–26	1		
Do	Jan. 22–28	1		
Finland				Nov. 16–30, 1921: 1 case.
Great Britain:				
Manchester	Jan. 1–7	4		
Nottingham	Dec. 4–31	18		
Do	Jan. 8–28	3		
Swansea	Jan. 17–23	2		Imported on vessel from Persian Gulf.

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Haiti				Jan. 22–28, 1922: A few cases.
Cape Haitien	Dec. 11–24	8		
Do	Jan. 1–Feb. 11	15	1	
Port au Prince	Dec. 11–31			Present.
Do	Jan. 15–21	2		
India				Oct. 2–8, 1921: Deaths, 23. Oct. 23–Nov. 19, 1921: Deaths, 266.
Bombay	Oct. 23–Dec. 31	3	2	
Do	Jan. 1–7	1		
Calcutta	Nov. 13–Dec. 31	37	28	
Do	Jan. 1–21	21	19	
Karachi	Nov. 11–Dec. 31	28	9	
Do	Jan. 1–21	17	9	
Madras	Nov. 13–Dec. 31	183	59	
Do	Jan. 1–21	167	66	
Rangoon	Oct. 1–Dec. 31	6		
Italy:				
Genoa	Nov. 10–20	1		
Messina—				
Messina	Nov. 28–Dec. 4	1		
Pettineo	Nov. 14–Dec. 4	2		
Venice	Jan. 30–Feb. 5	2		
Japan:				
Kobe	Jan. 23–29	3	1	
Taiwan Island	Dec. 1–20	2	1	
Yokohama	Jan. 9–21	3		
Java:				
West Java—				
Bandoeng	Nov. 18–Dec. 8	2		
Batavia	Nov. 18–Dec. 22	11	9	City and Province.
Do	Dec. 30–Jan. 5	1	2	In Province: Cases, 6; deaths, 3.
Buitenzorg	Nov. 25–Dec. 8	7	1	13 cases, with 3 deaths, not locally stated.
Krawang	Nov. 18–24	1		
Lebak	Nov. 18–Dec. 8	7	4	
Pan leglang	Nov. 25–Dec. 1		1	
Tangerang	Nov. 18–Dec. 8	5	1	
Liberia:				
Grand Bassa County	Nov. 30			Present at Lower Buchannan.
Mesopotamia:				
Bagdad	Oct. 1–Nov. 30	117	50	Epidemic with high mortality in November, 1921.
Mexico:				
Chihuahua	Dec. 5–11		1	
Do	Jan. 23–29		1	
Guadalajara	Nov. 1–Dec. 31	6		
Do	Jan. 1–31	11	2	
Mexico City	Nov. 20–Dec. 31	64		Including municipalities in Federal District.
Do	Jan. 1–7	16		Do.
Saltillo	Jan. 29–Feb. 4		1	From San Salvador, Zacatecas.
San Luis Potosi	Dec. 18–24		2	
Do	Jan. 8–Feb. 18		6	
Torreon	Dec. 1–31	134		
Do	Jan. 1–31		78	
Newfoundland:				
St. Johns	Feb. 4–10	1		
Palestine:				
Jerusalem	Jan. 10–30	22		
Panama:				
Bocas del Toro Province—				
Sursuba	Jan. 18–Feb. 8	11		Village 24 miles from Almirante.
Chiriqui Province	Dec. 22			Present.
Do	Jan. 26			Present with center of prevalence at Bosquete Bajo.
Panama	Dec. 14	1		On Dec. 21, 1921: 1 additional case from country district of Sabanas, admitted to hospital. Total admissions, Jan. 1–Dec. 21, 1921, 207.
Peru:				
Lima	Nov. 1–Dec. 31		3	
Poland				Aug. 14–Dec. 3, 1921: Cases, 494; deaths, 112. Exclusive of Brest-Litovsk, Minsk, and Wilno districts.
Portugal:				
Lisbon	Nov. 13–Dec. 31	48	12	
Do	Jan. 1–28	46	1	

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Portuguese East Africa:				
Lourenco Marques	Oct. 1-Nov. 5	2	4	
Portuguese West Africa:				
Angola—				
Loanda	Oct. 9-Dec. 31		7	
Rumania:				
Bucharest	Nov. 1-30	23		
Russia:				
Esthonia	Oct. 1-Dec. 31	38		
Latvia	Oct. 1-Nov. 30	55		
Serbia:				
Belgrade	Oct. 2-Nov. 26	16	4	
Siam:				
Bangkok	Oct. 23-Nov. 5	1		
Spain:				
Barcelona	Jan. 8-14		1	
Huelva	Oct. 1-Nov. 30		2	
Malaga	Nov. 1-Dec. 31		60	
Seville	Nov. 16-Dec. 31		7	
Do	Jan. 8-28		5	
Valencia	Jan. 22-28	1		
Straits Settlements:				
Singapore	Nov. 6-Dec. 24	49	13	
Do	Jan. 1-7	8	4	
Switzerland:				
Glarus, Canton	Dec. 10			Epidemic.
Zurich	do	2		In vicinity.
Syria:				
Adana	Dec. 18-24			Present.
Do	Jan. 1-14			Do.
Aleppo	Dec. 18-24			Do.
Do	Jan. 1-Feb. 4			Do.
Alexandretta	do			Do.
Beirut	Oct. 9-Nov. 13	5	2	
Do	Jan. 8-28	8		
Cilicia	Jan. 8-Feb. 4			Do.
Diarbekir	Dec. 18-24			Do.
Do	Jan. 1-Feb. 4			Do.
Mersina	Dec. 18-24			Do.
Do	Jan. 1-7			Do.
Urfa	Dec. 18-24			Do.
Do	Jan. 1-Feb. 4			Do.
Tunis:				
Tunis	Nov. 26-Dec. 23	17	15	
Do	Jan. 1-Feb 4	4	5	
Turkey:				
Constantinople	Nov. 27-Dec. 24	20	4	
Do	Jan. 15-28	16	5	
Union of South Africa:				
Cape Province	Nov. 5-Dec. 31			Outbreaks.
Do	Jan. 8-14			Do.
Natal	do			Do.
Orange Free State	Oct. 23-Dec. 24			Do.
Southern Rhodesia	Dec. 29-Jan. 18	16		
Transvaal	Oct. 23-Dec. 31			Do.
Do	Jan. 1-14			Do.
Johannesburg District	Dec. 1-31	1		
Do	Jan. 1-7			Do.
Yugoslavia				July 3-30, 1921: Cases, 37.
Bosnia Herzegovina	July 3-9	2		
Croatia Slavonia	do	1		
Dalmatia	do	1		
Serbia	do	3		
Slavonia	do	1		
Voivodina	do	3		
On vessel:				
S. S. West O'Rowa	Jan. 5-8	3	1	At Kobe, Japan, from Shanghai, China.
S. S. ———	Jan. 17-23	2		At Swansea, Wales, from Persian Gulf.

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

TYPHUS FEVER.

Place.	Date.	Cases.	Deaths.	Remarks.
Algeria:				
Algiers	Nov. 1-Dec. 31	3		
Do	Jan. 11-20	1		
Oran	Dec. 21-31	1		
Do	Jan. 1-10		1	
Asia Minor:				
Brousa	Jan. 15-21	1		
Austria:				
Vienna	Dec. 4-31	10		
Do	Jan. 1-21	4	1	
Bolivia:				
La Paz	Aug. 1-Oct. 31	83	65	
Bulgaria:				
Sofia	Dec. 18-24	1		
Chile:				
Concepcion	Nov. 22-Dec. 26		3	
Do	Jan. 3-16		2	
Valparaiso	Oct. 23-Nov. 26		6	
Do	Jan. 1-7		1	
China:				
Antung	Dec. 26-Jan. 1	1		
Harbin	Nov. 7-Dec. 25	12		Jan. 23, 1922: Reported extending from Soviet Russia, along railway line to maritime provinces.
Do	Dec. 26-Jan. 8	4		
Egypt:				
Alexandria	Nov. 19-Dec. 31	3	1	
Do	Jan. 15-28	9	1	
Cairo	Oct. 1-Dec. 9	11	7	
Port Said	Jan. 22-28	1		
Germany:				
Breslau	Dec. 25-31	2	1	
Do	Jan. 1-15	37	4	
Hamburg	Dec. 11-17	4		
Great Britain:				
Glasgow	Dec. 25-31	1		
Italy:				
Palermo	Jan. 15-28	3	1	
Mesopotamia:				
Bagdad	Oct. 1-Nov. 30	2	9	
Mexico:				
Mexico City	Nov. 20-Dec. 31	242		Including municipalities in Federal District.
Do	Jan. 1-7	42		Do.
San Luis Potosi	Dec. 18-24		1	Dec. 25-31, 1921: Present.
Do	Jan. 8-Feb. 11			Present.
Palestine:				
Jerusalem	Dec. 27-Jan. 16	5		
Poland				Aug. 14-Nov. 5, 1921: Cases, 2,399; deaths, 173. Nov. 6-Dec. 3, 1921: Cases, 1,512; deaths, 105. Exclusive of Brest-Litovsk, Minsk, and Wilno districts. Nov. 20-Dec. 10, 1921: Cases, 1,162; deaths, 89.
District—				
Bialystok	Nov. 20-Dec. 10	116	3	
Galicia—				
Lemberg	Jan. 3	229		
Kielce	Nov. 20-Dec. 10	31	8	
Krakow	....do	45	6	
Lodz	....do	67		
Lublin	....do	59		
Lwow	....do	121	16	
Nowogrod	....do	249	15	
Polesia	....do	83	5	
Stanislawow	....do	88	8	
Tarnopol	....do	86	17	
Volhynia	....do	89	4	
Warsaw	....do	81	2	
Warsaw City	....do	47	5	
Do	Jan. 11	50		
Portugal:				
Oporto	Jan. 8-Feb. 11	6	2	
Rumania:				
Bucharest	Nov. 1-30	3		
Chisinau	....do	7		
Russia				Nov. 28-Dec. 10, 1921: In Soviet Russia, cases, 7,681.
Esthonia	Oct. 1-Dec. 31	53		
Latvia	....do	127		
Libau	Jan. 15-Feb. 1	4		
Perm	Nov. 23-Dec. 10	1,408		Oct. 1-31, 1921: Cases, 839; Nov. 1-30, 1921: Cases, 2,389.

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

Reports Received from Dec. 31, 1921, to Mar. 10, 1922—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Serbia:				
Belgrade	Oct. 2-Nov. 26	3	2	
Siberia				Jan. 23, 1922: Present in western districts.
Chita	Dec. 26			Epidemic.
Turkey:				
Constantinople	Nov. 20-Dec. 31	19		
Do	Jan. 1-28	30		
Union of South Africa:				
Cape Province				Oct. 23-Dec. 24, 1921: Outbreaks.
Do				Jan. 1-14, 1922: Outbreaks.
East London	Oct. 30-Dec. 24	3		One death in European at Jensenville, Dec. 6, 1921.
Natal	Nov. 5-Dec. 17			Outbreaks. Stated to be prevalent only in Newcastle District.
Orange Free State	Nov. 13-Dec. 31			Outbreaks.
Do	Jan. 1-14			Do.
Transvaal	Jan. 8-14			Do.
Johannesburg District	Jan. 12-18	26	4	
Venezuela:				
Maracaibo	Dec. 20-26		1	
Yugoslavia				July 3-30, 1922: Cases, 13.
Bosnia Herzegovina	July 3-9	1		
Croatia—				
Zagreb	Jan. 1-14	2		
Montenegro	July 3-9	2		

YELLOW FEVER.

Mexico				Year 1921: Cases, 115; deaths, 53.
Colima (State)				Year 1921: Cases, 7; deaths, 4.
Colima	Oct. 27	4	3	
Manzanillo	Aug. 21	3	1	
Jalisco (State)				Year 1921: Cases, 13; deaths, 7.
Guadalajara	Nov. 1-30	1	1	Imported.
Puerta Vallarta (Las Penas).	Oct. 5-Dec. 17	13	5	
Tomila	Aug. 31	1	1	
Quintana Roo (Territory)—				
Payo Obispo	Aug. 8	1	1	
Sinaloa (State)				Year 1921: Cases, 18; deaths, 9.
Culiacan	Sept. 17	4	1	
Guamuchil	Oct. 10	1		
Mazatlan	Aug. 21	1	1	Imported.
Palmar de los Leales	Sept. 30	12	7	
Tamaulipas (State)				Year 1921: Cases, 1; deaths, 1.
Tampico	Jan. 11	1	1	
Vera Cruz (State)				Year 1921: Cases, 75; deaths, 31.
Alamo	June 21	4	1	Oil camp.
Alvarado	July 3	1	1	
Barra de Penn	July 18	1	1	
Cordoba	Sept. 22	5	3	
Cosamaloapam	July 18	14	6	
Nogales	Oct. 28	1	1	
Orizaba	....do	1		
Papantla	Jan. 14	6	3	
Providencia	Oct. 28	3		
Purga	Feb. 7	1	1	
Rancho de Santa Rosa	Oct. 8	2		
Rancho "El Jaguey"	Sept. 14	2	2	
San Pablo (Papantla)	Sept. 12	1		
San Ildefonso	Oct. 17	2		
Tierra Blanca	Sept. 24-Nov. 12	4	3	
Tlacotalpan	Sept. 14	1	1	
Tuxpam	Jan. 3	8	2	
Vera Cruz	Jan. 15	18	7	Two of these cases imported. Dec. 20-26, 1921: Cases, 1; deaths, 1. Imported.