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SPONTANEOUS HATCHING OF CLONORCHIS OVA.

A Preliminary Note on the Investigation to Determine Whether Clonorchiasis may be Disseminated on the Pacific Slope.

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In 1906, S. Saito described the development of the egg of *Clonorchis sinensis*. He stated that he was able to squeeze the embryo out of the egg, and that he observed other embryos emerge spontaneously. In so far as I am informed, these observations have not been confirmed up to the present time. This note is intended to confirm these observations, and to present the essential details under which the experiment was made.

Eggs were collected from the patient, and washed in tap water, by centrifugation, on the following day. During the subsequent week they were washed in watch crystals with tap water until free from extraneous material. The watch crystals were then held at room temperature, varying from 14 to 20° C., for five weeks. The water in the crystals was changed frequently. Tap water was used for three weeks, but so much plankton developed that, subsequently, cooled boiled water or Berkefeld filtered water was used.

At the end of five weeks the eggs were intact and showed no apparent change. They were then exposed in the open watch crystal to running filtered water at a temperature of 24 to 26° C. and observed with the immersion lens.

The caps of a few eggs were seen to open along one side, and the embryo quickly wriggled out of the egg, even before the cap was completely open. Immediately upon emergence of a part of the embryo, the cilia were in motion; and within a few seconds after the cap opened, the embryo swam toward the surface of the water and moved off. The swimming was relatively rapid and in straight lines. None of the embryos observed thus far remained active for more than five minutes; they disintegrated rapidly under the conditions present.

Numerous embryos have been observed by squeezing them under a cover glass. Definite motion, however, has been rarely seen within a closed egg. Nor has the definite raising of the cap been seen in eggs other than those from which the embryo emerged, except in

those which gradually went into dissolution, or were phagocyted by ameboid forms, without the emergence of an embryo.

The morphology of the miracidium as observed thus far is substantially that described by the above mentioned observer.

Experiments to determine the optimum conditions for hatching the eggs are in progress. Attempts are also being made to infect snails and fish native to the waters of the Pacific slope, in accordance with the observations of Kobayashi and Muto, in Japan, and of Faust and Barlow, in China.

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FACTORS IN THE MENTAL HEALTH OF BOYS OF FOREIGN PARENTAGE.

A Study of 240 Boys of Foreign Parentage Known to a Child Welfare Agency, 1916-1923.

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This study is the second section of a preliminary report on problems of the foreign born who seek assistance from social organizations. The first section dealt with 210 girls who received advice or help from the Boston Society for the Care of Girls;¹ and material for this investigation was obtained by a study of the records of the Boston Children's Aid Society. These two agencies have recently united under the name "Boston Children's Aid Association." Their combined records present most of the major social difficulties of immigrants. From the standpoint of mental hygiene it is important to consider the causes and results of social maladjustments among foreign-born residents. Such a consideration is likely to furnish material for the adoption of practical preventive measures. This inquiry, however, is mainly for the purpose of developing lines of approach toward a better understanding of the mental health factor in relation to the immigrant's adaptation.

Two phases of the subject call for investigation. The first of these is concerned with the immigrant's difficulties of adaptation as a cause of mental disorder, while the second concerns itself with the rôle that such difficulties play in the production of social disorder. An unfavorable environment may produce mental illness or it may aggravate

¹ Factors in the mental health of girls of foreign parentage—A study of 210 girls of foreign parentage who received advice and assistance from a social agency, 1919-1922. By Mary C. Jarrett. *Pub. Health Rep.*, 39, 10, 447-472. (Reprint No. 905.)

a latent form of mental disease. On the other hand, mental disease may have been a factor in creating adverse social conditions.

The belief that the complexity and unfamiliarity of American customs and institutions often cause immigrants to become mentally unbalanced or harassed to the point of committing antisocial acts is not founded upon an accurate body of observations. Individual cases that are not correctly understood may sometimes be the origin of such belief and lead to erroneous generalizations. In a recent book by an authority on the Polish peasant¹ the author says of a man committed to a hospital during a violent attack of mental disease: "Pretty certainly he would not have been insane in Europe, in his original community. He would have been difficult, but the pressure of the large family and the community would have kept him within certain bounds." After three years this man is still in a hospital for mental cases. It is conceivable in this case that environmental pressure might have precipitated an acute attack of mental disease, and that favorable environmental conditions might have prevented him from becoming a serious social problem. In this and many similar cases accurate facts are lacking. Until these are supplied through more detailed study and observation, the probabilities of outcome in instances like the case cited above must necessarily be based upon conjecture and speculation. There is a need, therefore, for closer study of the process of adaptation in immigrant families so that their mental attitudes toward environmental conditions may be accurately observed. We shall gain more accurate knowledge by studying the immigrant's adaptation in process than by relying entirely upon later reports and external results.

The records of the cases vary greatly with respect to completeness, accuracy, and period covered; for the applications have a wide range both in problems presented and in final disposition. In cases of children who have been under the society's care in foster homes, the record consists of a full inquiry about the child and the family from friends, relatives, employers, interested professional persons, the school, church, or other sources, and also careful observations of the child in the foster home and of the relations of his family to him. In other cases the record may be brief, consisting of a few interviews with the persons most concerned and leading to some advice or suggestion. In some cases, a change in the circumstances or attitude of the family or of the person making the application may render further inquiry unnecessary after the investigation has been partly made. The case records of a child welfare agency therefore are not uniform, and, when studied for the purpose of throwing light upon the special problems of the immigrant, leave much to be desired.

The cases included in this study were taken from the records for the period December 15, 1916, to September 30, 1923. Cases were

¹ Thomas, William J.: *The Unadjusted Girl*. Boston. Little, Brown and Co. 1923.

selected of 240 boys of foreign parentage over the age of three. During this period of a little over six and three-quarters years, 268 applications for boys of foreign parentage came to the society. This was 8.5 per cent of all cases during that period. Twenty-eight records were not used because they were too incomplete for this purpose. The number of applications in behalf of girls of foreign parentage during this time is not known. Probably in about half the cases both boys and girls were involved in the same application.

The group presents a great variety of conditions with respect to nationality, age, conduct, and character and circumstances of parents. Sixty-nine of the 240 boys were delinquent; that is, they had committed offenses against the law or misbehaved in some marked degree. The remainder, classed as nondelinquent, include some with behavior difficulties of various degrees of seriousness. The distinction is arbitrary, but serves to distinguish between those boys who were a source of social disorder in the community and those who were not. Perhaps some of the nondelinquent boys at an older age would appear in the delinquent class.

Causes for application to the social agency may be classified as follows:

Behavior difficulties of the boy	71
Death of parent	45
Mother	34
Father	8
Both	3
Illness of parent	43
Mother	38
Father	5
Illness of boy	25
Desertion of parents	16
Father	5
Mother	11
Separation of parents	16
Runaway boys	8
Illegitimate child	8
Neglect by parents	4
Disagreement with stepmother	2
Disagreement with relatives	1
Mother in Europe	1
	240

In 56 per cent of the cases reason for the need of social assistance was due to some failure in parental care through illness, death, or delinquency, and in 44 per cent of the cases to some defect of health or conduct in the boy himself. In 10 per cent of the cases application was for care in a foster home under healthful conditions for a sick or delicate boy. Behavior difficulties of the boy led to the application in 34 per cent of the cases. Among all the cases there is a wide variety of circumstances leading to the application as well as a wide

variety of conditions at the time of application. The common feature among them is that in every case there existed a social maladjustment of some kind that tended to interfere with the future development of the boy. It is not the purpose of this study to consider the nature or success of the social treatment given by the agency, but to deal with the facts concerning the families of these boys previous to the application, with the object of discovering whether mental factors peculiar to the immigrant were a cause of the social maladjustment.

GENERAL DESCRIPTION OF THE 240 BOYS INCLUDED IN THIS STUDY.

Twenty-seven countries are represented, classified according to the father's birthplace (see Table 1). In 22 cases the mother's nationality was different from that of the father's; though in all cases both parents were foreign born. In 30 per cent of the cases the father came from Italy; in 20 per cent from Russia, three-quarters of whom were Jews; in 13 per cent from Canada; in 8 per cent from Ireland; in 5 per cent from Poland; and the remaining 24 per cent came from various countries, one or more from each. Seventy-nine per cent of the boys were born in the United States, while 21 per cent were foreign born. Eighty-four per cent of the delinquents and 80 per cent of the nondelinquents were native born. All of the Irish boys were born in this country, as were all but one of the Poles, and all but five of the Canadians. One-seventh of the Italians and nearly half of the Russians were foreign born.

TABLE 1.—*Foreign-born and American-born delinquent and nondelinquent boys classified according to country of birth of father.*

Country of birth of father.	Foreign born.	Native born.	Birth-place not reported.	Total.	Delinquent.	Nondelinquent.	Total.
England.....	3	4		7	2	5	7
Scotland.....	1	3		4	1	3	4
Ireland.....	0	19		19	8	11	19
Norway.....	0	3		3	1	2	3
Sweden.....	1	6		7	1	6	7
Denmark.....	0	2		2	1	1	2
Belgium.....	1	0		1	0	1	1
Switzerland.....	0	1		1	1	0	1
Holland.....	0	1		1	0	1	1
Germany.....	0	6		6	0	6	6
Poland.....	1	10		11	3	8	11
Austria.....	2	1		3	0	3	3
Hungary.....	0	1		1	0	1	1
Russia.....	14	33		147	12	35	147
Rumania.....	1	1		2	0	2	2
Lithuania.....	1	1		2	1	1	2
Greece.....	0	3		3	0	3	3
Albania.....	1	0		1	0	1	1
Italy.....	8	59	4	71	21	50	71
Spain.....	1	1		2	0	2	2
Portugal.....	1	1	1	3	1	2	3
Armenia.....	2	2		4	1	3	4
Syria.....	0	3		3	3	0	3
Turkey.....	1	0		1	1	0	1
China.....	1	1		2	0	2	2
Canada.....	5	26	1	32	10	22	32
Australia.....	0	1		1	1	0	1
Total.....	45	189	6	240	69	171	240

¹ Russian Jews, 32.

The ages of the boys studied ranged from 3 to 18 years, the number in the different age groups being as follows:

Age group.	Number.
3-7 years.....	56
7-15 years.....	145
15-18 years.....	36
18 and over.....	3

About half of the older boys and about one-fourth of the younger group were delinquent. The ages of the boys of foreign birth at the time that they came to this country varied from 1 to 15 years. The largest number had been here a year. Twenty-seven were under school age when they came.

The religion of the family was Roman Catholic in 113 cases; Protestant in 68 cases; Jewish in 46 cases; Eastern Orthodox in 7 cases; Chinese in 1 case; and in 5 cases it was not reported.

From the standpoint of education, 159 boys were in school, 56 were under school age, one was an imbecile unfit for schooling, and 24 had left school. Of the latter, only 1 had graduated from high school; 2 had completed one year of high school; 2 the grammar grades; 3 had left before completing the eighth grade; 7 while in the seventh; 2 while in the fifth; 1 while in the fourth; and 1 while attending an ungraded class. In five cases the grade on leaving school was not reported. Only 7 boys in all had attended high school.

Physical examinations were given in 115 cases, and mental examinations in 67 cases. Physical disorder was found in 61 boys and mental disorder in 48 boys.

The 69 boys classed as delinquent comprised 29 per cent of the total number of cases under consideration. When we compare the age distribution of the delinquent group with that of the nondelinquent it is found that in the former 30 per cent are 15 or more years of age, while in the latter only 11 per cent are 15 or more years of age. Only 32 of the delinquent boys had been in court, and two-thirds of these were under 15 years of age. Three-fourths of the boys who came before the court were native born. Complaints were as follows: stealing, 19 cases; stubborn child, 8 cases; begging, gambling, trespassing, 1 case each; and not reported in 2 cases. The immediate cause of the complaint in court is not always indicative of the form of misbehavior that is most outstanding.

The types of misconduct found among the 69 delinquent boys of his group are classified below. The miscellaneous class, or "other forms of misbehavior," include running away, "bunking" out over

night, running the streets until late hours, persistent lying, and disobedience.

	Cases.
Dishonesty.....	47
Sex delinquency.....	8
Alcohol.....	2
Excessive smoking.....	6
Violence.....	5
Other forms of misbehavior.....	42

The economic status of the family was "comfortable" in 64 cases, "marginal" in 125 cases, and "dependent" in 51 cases. Of the "comfortable" cases, 25 owned property. Cases were classified as "dependent" when the family either received financial aid or were in need of it. A comparison of the economic status and home conditions of delinquents and nondelinquents may be seen by reference to Table 2. Here it will be observed that of the 69 delinquents, 27 were found in families in "comfortable" circumstances, and 42 in families in either "marginal" or "dependent" financial circumstances. The ratio of delinquents in this group is higher in families of comfortable economic status than in families of marginal and dependent circumstances.

In an effort to classify the occupations of fathers in the 240 cases,² it was found that 44 per cent were engaged in skilled trades and 56 per cent were unskilled. Of the former, 3 per cent were in business for themselves, 10 per cent in positions calling for considerable intelligence, and 31 per cent in skilled trades. The remaining 56 per cent were in occupations graded as unskilled factory workers or laborers.

The general character of the homes of these boys was considered "satisfactory" in 38 per cent of the cases, "fair" in 33 per cent, and "unsatisfactory" in 22 per cent; whereas 6 per cent of the boys had no home. The classification "satisfactory" was defined in the previous section of this report as "a home that is comfortable and clean, in which the members of the household are law-abiding and regular in their habits and take an average interest in each others welfare." "Fair" was defined as "a home in which there is less comfort and fewer opportunities for home life than is desirable, but in which there are no immoral influences and the habits of the family

² The fathers of the boys were employed in 69 occupations or place of work, as follows: awning maker, 1; baker, 4; bank, 1; barber, 7; blacksmith, 1; bootblack, 2; bricklayer, 2; bottle worker, 1; cabinet maker, 1; buildings wrecker, 1; carpenter, 12; car cleaner, 1; cigarmaker, 2; clerk, 2; clothes presser, 1; cook, 8; conductor, 1; detective, 1; decorator, 1; drummer, 1; efficiency expert, 1; engineer, 1; engraver, 1; factory worker, 28; farmer, 3; fireman, 3; floor layer, 1; furniture mover, 1; gardener, 1; hostler, 1; hurdy-gurdy man, 1; insurance, 1; interpreter, 1; iron molder, 2; janitor, 1; journalist, 1; junkman, 2; laborer, 22; latherer, 1; leather cutter, 2; longshoreman, 2; lumberman, 1; machinist, 4; marketman, 1; mason, 2; mason's helper, 2; motorman, 3; packer, 2; painter, 6; peddler, 5; photographer, 1; physician, 3; piano tuner, 1; plumber, 1; pool room, 1; ragpicker, 2; real estate agent, 1; restaurant, 2; roofer, 2; salesman, 3; saloon keeper, 1; shoemaker, 6; storekeeper, 2; tailor, 11; teamster, 9; upholsterer, 1; watchman, 2; wood polisher, 2; wool sorter, 1; and unknown, 34.

are regular; or it may mean a home that is comfortable, in which the parents are well meaning but not always wise." "Unsatisfactory" indicates a home in which the above conditions are lacking. Excessively bad home conditions were found in 13 per cent of the cases (see Table 2).

TABLE 2.—Character of the home.

	General character.					Excessively bad conditions.				Economic condition.				
	Satisfactory.	Fair.	Unsatisfactory.	No home.	Total.	Physical.	Moral.	Both.	Total.	Own Property.	Comfortable.	Marginal.	Dependent.	Total.
Delinquent boys.....	27	28	11	3	69	2	1	2	5	11	16	34	8	69
Nondelinquent boys.....	66	51	42	12	171	13	5	4	27	14	23	91	43	171
Total.....	93	79	53	15	240	20	6	6	32	25	39	125	51	240

The relationship of delinquency and nondelinquency to unsatisfactory home conditions shows that a smaller proportion of delinquents in the group studied come from homes of unsatisfactory character (16 per cent delinquent as compared with 24 per cent nondelinquent). Similar ratios occur when excessively bad home conditions are considered (8 per cent delinquents as compared with 15 per cent nondelinquents). Difference in age is a factor to be taken into account; for the nondelinquent boys were, on the whole, younger, and there may have been many potential delinquents among them.³ These findings indicate the need for more definite information regarding the nature of environmental forces in the home and their influence in molding the character traits of boys in immigrant families.

FACTORS OF SOCIAL MALADJUSTMENT COMMON TO BOTH IMMIGRANT AND NATIVE FAMILIES.

Certain conditions are always potential causes of social maladjustment, and are not, in themselves, peculiar to immigrant families. These are as follows: Death of parents, physical or mental illness of parents, delinquency of parents, unfavorable home conditions, and restricted activities. The underlying causes of such conditions may or may not arise from the immigrant situation. Let us see to what extent these conditions are found among the 240 boys of this study.

PHYSICAL AND MENTAL DISORDERS.

In 81 cases (34 per cent) one or both parents were known to be physically ill; both parents in 11 instances, the father in 33 instances, and the mother in 59 instances. Delinquents and nondelinquents

³ 56 children of the nondelinquent group were under 7 years of age.

were about equally represented here. No report had been recorded of the health of 46 fathers and 28 mothers, however. The information given in the record indicated the absence of any marked physical disorder in 161 fathers and 153 mothers. Physical illness, either chronic or acute at the time of application, was reported in 20 per cent of the fathers and 32 per cent of the mothers who were living.

In 83 cases (35 per cent) one or both parents showed some form of mental disorder as follows: both parents in 13 cases; the father in 55 cases; and the mother in 41 cases. Information on record was insufficient to indicate the mental condition of 63 fathers and 63 mothers. In 95 instances the mental condition was not indicated for one parent, and in 31 instances for both parents. The absence of any mental disorder in either parent was indicated in 33 per cent of the cases. Among those whose condition was known, 31 per cent of the fathers and 23 per cent of the mothers showed some form of mental disorder. Mental defect was found in one of the parents in 6 cases; mental disease in 22 cases; mental instability in 26 cases; and alcoholism in 29 cases. The term "mental defect" indicates feeble-mindedness and subnormal mentality. "Mental disease" was used only when the diagnosis had been made by a psychiatrist or was indicated by unmistakable signs, and includes not only the psychoses but other forms of mental disease, such as hysteria and neurasthenia, which do not necessarily require hospital care. "Mental instability" was used only when there were marked signs of mental trouble, such as suicidal attempts, peculiar lying and stealing, uncontrollable violence, or erratic behavior.

Mental disorder among siblings was reported in only 30 cases—mental defect in 21 cases; mental disease in 4 cases; and mental instability in 5 cases. In 23 families there were no siblings, and in 23 families the mental condition of siblings was not indicated. However, it is probable that in the 164 cases in which the record indicated no mental disorder among the siblings, the inquiry was not thorough enough in all case to be conclusive.

Twenty per cent of the 240 boys showed mental disorders. Five delinquents and 14 nondelinquents had some form of mental defect; 14 delinquents and 15 nondelinquents were mentally unstable. In 33 cases the report was insufficient to indicate clearly the mental condition.

In 101 cases mental disorder occurred in either the boy or one parent, so that in 42 per cent of all the cases mental trouble of a marked type was a factor in the problem. This percentage might probably be even higher if it were not for the fact that the mental condition of 33 boys and 126 parents was unknown. In 14 cases (8 delinquents and 6 nondelinquents) mental disorder occurred in both the boy and one parent, and in 3 cases (1 delinquent and 2 nondelinquents) in the boy and both parents.

DELINQUENCY OF PARENTS AND SIBLINGS.

In 30 per cent of the cases one parent was delinquent—the father in 57 cases; the mother in 28 cases; and both parents in 15 cases. The incidence of delinquency among parents and siblings is shown in Table 3. The character of 27 parents (14 fathers and 13 mothers) was unknown. There were 109 cases in which no delinquency was found either in the boy or his parents, so that delinquency did not complicate the problem in 45 per cent of the cases. Of the 15 cases in which both parents were delinquent, 2 were cases of delinquent boys and 13 of nondelinquent boys. Of the 153 cases in which neither parent was delinquent, 44 were cases of delinquent boys and 109 of nondelinquent boys. Twenty-four per cent of the delinquent boys had delinquent parents (father in 16 cases, mother in 3 cases), whereas 31 per cent of the nondelinquent boys had delinquent parents (father in 41 cases, mother in 25 cases).

TABLE 3.—*Delinquency of parents and siblings.*

	Delinquent.				Nondelinquent.				Not reported.				Total.
	Father.	Mother.	Both.	Siblings.	Father.	Mother.	Both.	Siblings.	Father.	Mother.	Both.	Siblings.	
Delinquent boys:													
Number.....	16	3	2	19	51	63	44	—	2	3	1	—	69
Per cent.....	23.2	4.3	2.9	27.5	74.1	91.2	64.2	—	2.9	4.3	1.4	—	—
Nondelinquent boys:													
Number.....	41	25	13	9	118	136	109	—	12	10	1	—	171
Per cent.....	23.9	14.6	7.6	5.2	69	79.6	63.7	—	7.1	5.8	5.8	—	—

No siblings in 23 cases.

The character of step-parents and foster parents also has an important bearing upon the welfare of the child. Eleven per cent of the delinquents and 5 per cent of the nondelinquents had step-parents. The step-parents of the nondelinquents were reported to be of bad character in four instances, and of the delinquents in one instance. In each group there were two whose character was not indicated. Fourteen per cent of the delinquents and 13 per cent of the nondelinquents had been at some time in one or more foster homes. The foster parents of the delinquents in seven cases, and of the nondelinquents in one case, appeared to be of bad character.

Delinquency was found among the siblings of 27 per cent of the delinquent boys and 5 per cent of the nondelinquent boys. There was only one case in each group in which the character of siblings was not indicated. However, the information concerning siblings in many of the records was not full enough to show their character conclusively. Eleven per cent of the delinquent boys and 9 per cent of the nondelinquent boys had no siblings. As a larger number of the nondelinquent boys came from families of young children, a higher rate

of delinquency among the siblings of delinquent boys was to be expected. There were two cases in which two of the siblings were delinquent, and one case in which three siblings were delinquent.

UNFAVORABLE HOME CONDITIONS.

The family status as given in Table 4 shows the relation of the boys to their parents. In 5.8 per cent of the cases the boy was of illegitimate birth. One parent had died in 34.6 per cent (the father in 14.6 and the mother in 25 per cent), while in 5.4 per cent both parents were dead. The parents were separated in 12.5 per cent of the cases, and in 9.5 per cent one or the other parent had at some time deserted (in 14 instances the father and 9 instances the mother). There were step-parents in 6.7 per cent of the families (5 fathers and 11 mothers). In 13.7 per cent of the cases the boy had been cared for at some time in one or more foster homes. Eleven per cent of the delinquent boys and 5 per cent of the nondelinquents had step-parents. There were only 4 delinquents whose parents were separated, as against 24 nondelinquents. With these exceptions, the family status was about the same for the two groups. Thirty-five per cent of the delinquents and 34.5 per cent of the nondelinquents had lost one parent by death.

TABLE 4.—*Family status.*

	Illegitimate birth.	Parents separated.	Parents who deserted.			Parents dead.				Step-parents.			Foster parents.
			Father.	Mother.	Total.	Father.	Mother.	Both.	Total.	Father.	Mother.	Total.	
Delinquent boys.....	3	4	3	3	6	5	11	8	24	1	7	8	10
Nondelinquent boys.....	11	26	11	6	17	17	37	5	59	4	4	8	23
Total.....	14	30	14	9	23	22	48	13	83	5	11	16	33

At the time of the application to the children's agency, 38.7 per cent of the boys were living with both parents, 46 per cent of the delinquents and 35 per cent of the nondelinquents), 17 per cent were living with their father (3 per cent of delinquents and 12 per cent of nondelinquents), and 13 per cent were living with their mother (13 per cent of delinquents and 12 per cent of nondelinquents). There was a step-parent in the home in 5 per cent of all cases (11 per cent of delinquents and 9 per cent of nondelinquents). Ten per cent of the boys lived with foster parents, and 10 per cent with relatives, the proportion of delinquents and nondelinquents being about the same. Six per cent had no home in a family group, some of whom were in institutions and some in lodgings by themselves.

Over 18 per cent of the boys had at some time received care from a charitable or correctional organization (8 per cent in a children's home; 7 per cent placed out in a foster home; 1.5 per cent in a school; and 1.5 per cent in a reformatory). Twenty-nine per cent of the delinquent boys and 15 per cent of the nondelinquent boys had received institutional care.

The general physical and moral character of the homes of the boys whether with one or both parents or with other persons, was considered "satisfactory" or "fair" in 71 per cent of the cases. However, only 38.7 per cent of the boys were living in their own homes with both parents, and in about one-fifth of these families one or both of the parents were delinquent, so that the potentiality for normal family life with both parents living and of good character existed for less than one-third, 31 per cent, of these boys. When physical and mental disorders, ignorance, discord, and poverty are taken into account, the possibilities for good home life among this group of boys are further reduced. In 30 families there was marked friction between the parents. There were only a few instances of good family life in which both parents were living. In these cases the cause of application to the agency was either temporary illness of one of the parents or behavior difficulties of the boy.

RESTRICTED ACTIVITIES.

Activities in leisure time were not reported in 58 per cent of the cases, two-fifths of which were cases of boys under 7 years of age. Of the cases reported, there were 28 boys whose recreation was considered satisfactory; that is, they spent their leisure time in a variety of activities among companions whose influence was not considered demoralizing and under conditions that were not injurious to their physical or moral development. Of these, 3 were delinquent. There were 71 boys whose recreation was unsatisfactory, of whom 60 were delinquent. One boy had no recreation. Satisfactory recreation was found much more frequently among the younger boys of the nondelinquent group. Unsatisfactory recreation took the form chiefly of "street life" with undesirable companions, remaining out late at night, and engaging in mischievous or delinquent exploits. There were two boys who engaged in gambling for a pastime. In 12 cases the boy did not have sufficient recreation of any kind.

Church attendance was not reported in nearly 60 per cent of the cases. Among the children over 7 years in whose cases it was reported, there were 27 who attended church regularly, 9 irregularly, and 6 not at all. An active interest in church was reported for only four boys.

The character of companions was recorded in 50 per cent of the cases. In 5 per cent the boy had few companions or none. In 15

per cent the character of companions seemed to be satisfactory; that is, 7 of the delinquent boys and 20 of the nondelinquent boys had suitable companionship. Sixty per cent of the delinquents and 3 per cent of the nondelinquents were known to associate with bad companions.

Tastes and habits in regard to reading were reported in 31 per cent of all cases; 24.5 per cent liked reading in some form. Of the delinquents, 29 per cent liked to read; and of the nondelinquents over the age of 7, 13 per cent.

Membership in some voluntary organization, such as a boys' club or the Boy Scouts, was not reported in 70 per cent of the cases. Only 3 per cent of the boys were known to belong to any club (5.6 per cent of the delinquents and 1.7 per cent of the nondelinquents).

There were 24 boys at work, of whom 5 were efficient (2 delinquents and 3 nondelinquents), 12 worked irregularly, and 3 were inefficient (12 delinquents and 3 nondelinquents). The employment record of 4 was unknown. The types of occupation in which these boys were engaged were factory work, running errands, messenger service, and odd jobs.

FACTORS OF SOCIAL MALADJUSTMENT PECULIAR TO THE IMMIGRANT FAMILY.

In the social records of these boys, as in the case of the girls studied in the previous section of this report, little information is found bearing on the special problems of immigrant families. In only 14 instances could the social maladjustment be attributed to the conflict between foreign and American customs (8 cases of delinquent boys and 6 cases of nondelinquent boys). The length of time that the father of the family had been in this country was reported in 62 per cent of the cases; and of this number all but 8 had been here over five years. The majority had been in the United States 10 years or more. The length of residence of the fathers in this country is shown below:

Length of residence.	Number.
2-5 years.....	8
5-10 years.....	28
10-15 years.....	40
15-20 years.....	28
20-30 years.....	32
30-40 years.....	12
45 years.....	1
Unknown.....	91

It is possible that the majority of these families had become so completely assimilated in this country that their foreign origin and customs were no longer conspicuous. However, in one-third of the non-English speaking families a foreign language was still spoken in

the home; and only about one-sixth of the fathers were reported as naturalized. The records studied do not indicate the present attitude of these foreign-born parents to American life, nor the extent to which difficulties of adaptation may have led to their becoming a social problem.

In the 104 cases in which there was a report on the question of naturalization, 37 of the fathers were citizens, 12 had taken out first papers, and 55 had not applied for citizenship.

Fifty-nine boys were from English-speaking families. In 66 per cent of the cases of non-English speaking families there was no report on the question of the language spoken in the home. In 34 per cent a foreign language was used. Language difficulty was mentioned as a handicap for 10 boys, of whom 5 were delinquent.

Overstrict control of the boy by parents, following the customs of their own country, was found in only eight cases (five delinquents and three nondelinquents). Marked friction between the boy and his family was found in 21 cases (in 12 instances friction with the parents and in 9 instances with step-parents). The underlying causes of the antagonism can not be traced from the data given in the records. The outstanding causes of the difficulty are, in some cases, reported to be that the stepmother is impatient; that the boy and his stepmother "never got on well"; that the boy dislikes his father and mother; or that the mother is antagonistic to the boy. One man of peculiar disposition treated his sons harshly and neglected them until they hated him. In one family the mother would not allow the father to correct the children, while she herself screamed at them and slapped them, with the result that the children were disobedient and disrespectful and the house was continually full of noisy quarreling.

Whether such conditions had their origin in mental attitude peculiar to the immigrant can not be discovered from the records. There was no case of mental disorder in which difficulties of adaptation could be considered a factor as judged by the evidence of data given in the records. With the exception of a few scattered references, the mental attitudes toward this country, both of the boys and the parents, are not reported. There is no record of the reasons for coming to this country; of the tendencies either to adopt or resist American customs; the immigrant's success or failure here compared with his status in his own country; his conception of his status in the eyes of his American neighbors; and whether he feels "at home" or regards himself as a foreigner. From a study of the available records it is impossible to obtain any indication of the relation of experiences peculiar to immigrant families to social maladjustments as seen in the applications to a social agency.

RECAPITULATION.

The material available for this study does not afford any clear indication of the relation of mental disorder to social maladjustments among the foreign born. No conclusions can be drawn from the facts obtained in the case records. These are not sufficiently detailed to indicate difficulties experienced by immigrants in adapting themselves to American customs and institutions. There is not sufficient information available to show what rôle social factors that are peculiar to immigrants play in aggravating latent mental diseases or producing unusual mental strain that may lead to asocial conduct.

The records studied deal chiefly with existing situations and, to some extent, with past situations and conditions in the lives of these families. They do not show the causes of these conditions, which must be sought in the personal characteristics, the thoughts and behavior of the persons concerned, their effect upon one another, and the effects of environmental circumstances upon them. In a certain number of cases in which psychiatric studies of the boys were made, data of this kind had been recorded; but here, too, the foreign element does not often appear as a causative factor, and it is impossible to be sure whether there were no such causes of difficulty or whether they were overlooked. The miscellaneous character of the records must be taken into consideration. They vary all the way from a brief statement of the present situation from one or two sources to the intensive studies just referred to. The majority contain a fairly complete account of conditions at the time of application and of past movements of the family.

A review of the existing conditions in these families shows an array of mental and physical disorder, of delinquency, and of unstable family life. A comparison of these cases with a similar group of native-born families would be desirable. In 42 per cent of all cases mental disorder was a factor, occurring either in the boy or in one parent. It has been estimated¹ that at least 50 per cent of all social cases present some problem of mental disorder, so that this percentage is no higher than one would expect. In 33 per cent, physical disease appears in one of the parents. In 55 per cent, delinquency either of the boy or one parent is a factor. Forty per cent of the boys lacked the care of either father or mother. Sixty-one per cent lacked family life in a home with both parents. The potentiality for normal family life with their parents existed for only 31 per cent of the boys. The general character of the home in which the boy was living was considered satisfactory in 38 per cent of the cases; and this rating does not take into account in all cases of possible lack of harmony in the

¹ Southard, E. E., and Jarrett, M. C.: "The Kingdom of Evils." The Macmillan Co., 1922. Pp. 375-376.

home, lack of affection, or unsatisfactory family relationships outside the home.

A comparison of the families of delinquent and nondelinquent boys does not throw light upon the causation of delinquency in these cases; for the two groups can not fairly be compared, since 89 per cent of the nondelinquent boys were from 3 to 15 years of age and 76 per cent were under 12, and so, for the most part, had not reached the age when delinquent tendencies ordinarily become conspicuous. A larger proportion of the nondelinquent boys had bad home conditions. Thirty-five per cent of nondelinquents and 46 per cent of delinquents were living with both parents. Thirty-one per cent of nondelinquents and 20 per cent of delinquents had either no home or a decidedly unsatisfactory one. Of the families whose financial condition was "comfortable," 42 per cent had delinquent boys; and of those whose condition was "marginal" or "dependent," 23 per cent had delinquent boys. Sixty per cent of delinquent boys had decidedly unsatisfactory companions; but it is not possible to learn, except in a few cases, whether this association was a cause or result of delinquency.

Delinquent boys were found in homes that appeared to afford every advantage for normal development, and boys without delinquent tendencies were found in the most unsatisfactory homes. In a family in which both parents were dull and slack and, in spite of owning their own house and having a fair income, continued to live in crowded, filthy rooms, there were three feeble-minded children who were quiet and well-behaved, a boy who was backward in school and beginning to get into mischief, and an older boy who was bright and successful in his work and took a very responsible attitude toward his family.

In 32 per cent of the cases the family was known to more than one social agency. The average number of agencies dealing with one family of this group was six. The number of agencies per family was as follows:

Number of families	Number of social agencies.
5.....	2
5.....	3
9.....	4
19.....	5
13.....	6
12.....	7
5.....	8
1.....	9
5.....	10
2.....	11
1.....	13
1.....	15

The rôle of accident and misfortune in creating the necessity for application to a social agency can not be estimated. Illness or death was the immediate cause of the application in 47 per cent of the cases; but the problem was complicated in most instances by other factors, some of which can not be evaluated from the information available. A number of striking examples of good adaptation in spite of adversity were found. An Italian, after his wife's sudden death from pneumonia, boarded his youngest child through the children's agency, got relatives to keep a little girl, and kept house for three sons at work and two younger boys until, after many attempts, he found a suitable housekeeper and had all the children at home. This man had high standards and was efficient. He owned his house, although mortgaged, and it was very well kept. All of the boys were well-behaved, and the oldest son had a strong sense of responsibility toward the family.

A Swede, one of three brothers in this country who had the reputation of being "strong, Christian men," died suddenly, leaving his wife and two children with a little property. The wife opened a lunch room with a woman partner and engaged a housekeeper to care for the children.

When an Italian mother died during the influenza epidemic the father, a superior man of the peasant class, kept house for seven children and boarded the baby in a family near by while he sent to Italy for his sister.

In an Austrian family the father earned small wages as a clothes presser, and the mother did factory work four days a week to meet expenses. Their home was neat and clean and the children were well clothed and well behaved. When the mother required a severe operation they boarded the children in a family for two months, paying the board with their savings.

A Pole had saved \$500 and brought over his wife and child. His wife having been ill with a chronic disease much of the time after coming to this country, his savings had gone for medical care. He earned \$15 a week, but was not in debt and their home and the children were well cared for.

The absence in these records of information that would throw light upon the problem of the mental hygiene of the immigrant indicates the necessity for studies of the process of adaptation in the immigrant family while the process is going on. The social agency from which these records came is an organization of the highest standing and no more complete social records than these are likely to be found. The average social record contains only such information as the social worker believes that he needs to relieve the situation presented, and, in certain cases that are likely to remain for some time

under the supervision of the agency, further information needed in order to understand the practical problems of the individual or family involved. It is a question whether it is possible for a social agency that is meeting daily, under pressure, acute situations of distress, to obtain or to record the required information in more than a small number of cases which might be selected for special study with a view to throwing light upon the general problems of the immigrant and not merely upon the problem of a particular individual or family.

The question may be raised whether the same knowledge of personality traits and mental experiences necessary to an understanding of immigrant adaptation is not also required for adjustment of a particular foreign-born family. However this question may be answered, it seems to be true that in the practice of all social agencies very little information is recorded which would distinguish the experiences of an immigrant family from those of a native-born family. Further discussion of the character of social records will be taken up in a later report, which will give a résumé of the combined findings in the cases of 210 girls studied in the first section of this report and of 240 boys studied in the second section, making 450 cases in all.

With the exception of a few notable works, particularly Thomas's studies of Polish peasants,¹ and some of the sections of the Americanization Studies² of the Carnegie Corporation, our knowledge of the immigrant does not go back of his apparent relationships and behavior to the mental attitudes and experiences that caused them. Mr. Foerster in his book "The Italian Emigrant of Our Times,"³ said: "Of the externals of the emigrant's life much has been written. How he thinks and feels, however, what his deeper moods are, and the springs of his action are matters mainly hidden, guarded, and unconfessed."

The importance of mental hygiene in the immigration problem lies not only in the prevention of mental disorder and its resulting social disorder, but chiefly in the development of mental health and stability among the foreign-born members of our population. Americanization is not only a matter of informing the mind and developing the intelligence, but also of forming helpful emotional attitudes and habits of mental control. The importance to industry, to education, and to politics of the mental habits that the children of our foreign-born people are forming now in the schools can not be overstated.

A third section of this report will deal with practical suggestions for a more complete study by social agencies of mental problems of immigrants.

¹ Thomas, William I., and Znaniecki, Florian: *The Polish Peasant in Europe and America*. Badger, Boston. 1918.

² Burns, Allen T. (editor): *Americanization Studies*. Harper and Bros. 1923.

³ Foerster, Robert F.: *The Italian Emigrant of Our Times*. Harvard University Press, 1919.

Appendix.

ILLUSTRATIVE CASES IN BRIEF.

(a) Delinquency of immigrant parents:

(1) A 14-year-old boy, suspected of being tuberculous, was deserted by an alcoholic father. The mother, also alcoholic, kept an untidy home and was regarded as immoral. An older brother and sister were defective delinquents, both having been in reform schools. Another sister, who had formerly loitered about the streets, later made an apparently satisfactory marriage. The boy and a younger sister were intellectually normal and well-behaved. He was placed in a foster home. There he annoyed the neighbors and his boy companions by throwing stones. He was a good student and a great reader.

(2) A 17-year-old boy, who was formerly disobedient and stubborn and cruel to animals, was, at the age of 11, committed by the court to the custody of a public department. His father, an ignorant and abusive alcoholic, was said to be "neurotic." The mother, possessed of exceptional qualities, kept the family together. After training in four foster homes he was allowed to go home, but was later sent to a reform school for stealing. On parole and under supervision he did well while at home and was spoken of as a "strong, steady boy." There was much friction between the older sons and the father. This boy wanted to leave home and go on a farm.

(3) A boy, 17 years old, when 12 had been placed in a foster home with a younger brother and sister. The mother was immoral and had deserted the family several times. The father, a hard-working man, paid the children's board, but seldom visited them. When placed out in the foster home the children were cowed and neglected. The boy developed well in the foster home, but at 15 he became untruthful, unreliable, and independent. He found work for himself and later, in a poor physical condition, returned to the social agency for help. After being employed at several jobs for short periods of time he joined the Navy.

(4) The father of a family of eight, a laborer, loafed considerably and, even when working, provided his family with but little money for support. His oldest son also seldom worked. The mother, who had once kept the home neat, had gradually fallen off in her standards until the house was dirty and untidy. The eight children never had proper food or clothing. The mother was ill from neglect. A boy of 5 had always been uncontrollable. He pounded his head, screamed, and bit. The other children showed nothing unusual in their behavior.

(5) The parents of the child concerned in this case had both come to this country in early childhood. The father was alcoholic, a

gambler, never supported his family, and finally deserted his wife and five children. The mother was later arrested for immoral acts. In other ways she was a reliable woman. One child was with the grandmother, one with the mother, another in a chronic hospital, and two boys were in a children's home. One boy was writing notes on sex subjects to girls. He was a nervous type and unhappy in the Home.

(6) A 3-year-old child, who had some physical disability, was not allowed by his father to have a medical examination. Both parents had been on probation. The father was quick tempered. The mother was alcoholic. She was fond of the child and kept him clean, though the home was very untidy. The father, a laborer, was out of work a good deal, and from time to time the family received charitable aid. Six social agencies had been concerned with them.

(b) *Mental disorder of parents:*

(1) The mother of five children between the ages of 2 and 12 suddenly became violently insane and was sent to a State hospital. The father, a laborer, had no means of caring for the children, so they were boarded in foster homes by the State until the mother was well enough to come home again. The husband said she had always been "lazy" and for a month at a time would do almost no work. The oldest child in this family was feeble-minded.

(2) An insurance agent, the father of several children, had been in this country 24 years. One of his sons, a boy of 11, had been diagnosed as psychoneurotic. At home the father was said to be domineering and cranky. He claimed that his wife had epilepsy, but no evidence of this condition was found upon medical examination. She was slack about the house and had a disagreeable disposition. After her second child was born she claimed that her husband did not support her. She then deserted. The children were boarded by the agency until the parents could be brought together again. Later they applied for care for the youngest boy, a self-willed, restless child whom they found impossible to manage. In a foster home the boy did well. The older children in this family presented no difficulties.

(3) A boy of 12 who had been arrested four times for gaming and larceny had a mother who had been in a State hospital for mental diseases. The father, a saloon keeper, was prosperous and anxious for the welfare of his children, but had no control over them. An older brother was in a reform school. This boy was energetic and of superior intelligence. At the age of 15 he ran away and joined the Navy.

(4) A boy of 14 who had been brought to court for stealing was sent to a reform school. His mother was feeble-minded, with a

mental age of 9 years. It was thought that she also had a mental disease for she was extremely excitable, quarrelsome, and paranoid. It was said that in her own country she was thought to be "not quite all right." The father, who had a junk shop, was a miser and deprived his family of proper food and clothing in order to put money in the bank. One of the daughters had contracted gonorrhœa. Two other girls were feeble-minded.

(5) Several children whose mother was under treatment in a hospital for tuberculosis were placed in a foster home. The father, a barber, failed to keep his agreement to pay their board. He took the children home when their mother returned. A few days later he became violently insane and was sent to a hospital for mental diseases. After two months he was well enough to come home, but was still unable to work. He had come to this country at the age of 13, but did not learn to speak English until after he was 20. The mother, whose father and brother were musicians of some standing, played in restaurants and hotels. She owned property which was heavily mortgaged.

(6) The mother of a 4-year-old child who had been sent to the country for convalescent care, was ignorant and inefficient. Her mental age was not known. The father was alcoholic and had at one time been in a State hospital. There were eight children, the oldest feeble-minded, the second a boy who refused to work. All of the children were sickly. The boy, whom the agency boarded for convalescent care, was taken home too soon. The home was filthy and disorderly. No social agency had been able to effect any improvement in the situation, though 10 agencies had dealt with this family. One social record stated that they were "ignorant of American ways and unwilling to learn."

(c) *Some adaptive difficulties in an American environment:*

(1) A poorly developed boy of 14 was brought to court for "breaking and entering." His home life had been a continuous story of illness, slackness, and neglect. The parents were illiterate and had low standards of living. At one time the father was sentenced to the house of correction for preparing a poisoned cake to be sent to an enemy of a friend. The boy complained that the father took all of his wages when he started to work. When placed on a farm, the boy did well. Later he returned to his home and his former companions, with the result that he again got into trouble and was sent by the court to a reform school. A brother who was also delinquent was placed in a foster home and showed a gradual improvement and development.

(2) The parents of a 15-year-old boy, twice in court for larceny, belonged to successful families in Europe, held high standards, were

reliable and responsible persons, and very anxious for the success of this boy. The father had become overwrought about the son's delinquencies and the unhappiness they created in the home. After 12 years in this country the family still spoke no English in the home. For two years the boy had consorted with bad companions, spending his time on the streets until late at night, and taking part in petty stealing and gambling. He was a bright, capable boy with a good disposition and good intentions. He had been severely punished by his father for every slight misdeed without discrimination. Under supervision his conduct began to improve.

(3) A boy of 17, after graduating from junior high school, went to work, but continued his studies by taking evening courses in electricity, with which he was doing well. Suddenly and without warning, he ran away. The mother was dead and an older sister was keeping house. He had quarreled with his father who kept him at home in the evenings. The boy said that he had been upset ever since his mother's death, five years previously. His sister considered him "nervous" and said that he tore the sheets at night. The home life of the family was pleasant, apart from the friction between the boy and his father.

(4) An 11-year-old boy was in court for breaking into a school with other boys. He was well behaved and pleasant at home, but spent most of his time on the streets, playing truant, and "bunking-out." The father, though alcoholic, took a responsible attitude toward his family, but could not manage this boy. He was an intelligent man, the son of a contractor owning some property in Europe. Two of his brothers were priests and one a doctor in his own country. The boy when placed in a foster home gave no trouble, but on return to his home he relapsed somewhat into his previous habits. The oldest daughter in the family, a competent, well-behaved girl, rebelled against the strictness of her father's control and left home.

(5) A boy of 13 was one of a gang who were stealing and "bunking out." The father and mother had tried to control their children by severe beatings. All of the other children had left home as soon as they were old enough. The mother had recently died. Two older brothers were living with a married sister and did not speak to their father, though they all lived in the same tenement house. The youngest boy was placed out in different foster homes for four years and did very well, except for an occasional episode of wilfulness.

(6) The father of a 14-year-old boy beat him severely when he did not bring home the amount of money he thought the boy should earn from selling papers. As a result, the boy stole from his parents to make up the sum expected of him. Through fear of his father he

took to "bunking out." When the father was urged to be less severe in the use of his parental authority, the boy said he thought that "a father should beat his son for misconduct," but he felt that his father was unjust to him. This boy, of average intelligence, was ambitious for education and willing to work.

REPORTS OF THE HEALTH SECTION OF THE LEAGUE OF NATIONS.

The following is a summary of the statistics of disease prevalence published in the March number of the Monthly Epidemiological Report of the Health Section of the League of Nations Secretariat at Geneva, Switzerland:

Plague.—Plague was reported present in 26 countries and colonies during January and February. No unusual conditions were noted except for Southeastern Russia. In the Bukeiev and Ural Governments of the Kirghiez Republic, in the Kalmuk Region, and in the Government of Astrakhan of this section of Russia, plague cases continued to be reported. In the Ural Government, where 50 fatal cases, apparently in pneumonic form, were reported in the second half of January, the latest official report states that the foci are extinguished.

Cholera.—No unusual occurrence of cholera was reported, this disease being prevalent during December and January in British India, Indo-China, and Siam.¹

Typhus and relapsing fever.—According to information received by the Russian health authorities at Moscow up to January 29, 1924, 221,996 cases of typhus and 230,611 cases of relapsing fever had been reported in Russia during the first 11 months of 1923. A very great decrease in the prevalence of this disease is shown as compared with 1922, the 1923 rate (annual basis) being 168 per 100,000 for typhus as against 1,127 in 1922, and 191 for relapsing fever as against 1,092 in 1922. The incidence of relapsing fever continued to be relatively high as compared with typhus. For Poland the prevalence of typhus is about one-third of what it was in 1922. Local outbreaks of typhus were reported in the Union of South Africa.

Smallpox.—Mention is made of the prevalence of smallpox in Switzerland, the United States, Hongkong, and Russia. The serious epidemic of smallpox in Hongkong was reported as subsiding. No marked change in the smallpox situation in Russia as a whole is indicated by the figures for 1923 as compared with 1922; in certain governments a considerable increase is shown, while in the Ukraine a decline has been manifested.

¹ It was stated that cholera was present in December in the Dominican Republic. This, however, is believed to be an error. The consul at La Romana reports cholera nostras, but no reports of cholera have been received by the Public Health Service.

Dysentery and typhoid fever.—The incidence of dysentery reached its usual low seasonal level in all the countries from which reports on this disease are received. A marked decline in typhoid fever is indicated in the 1923 reports for Russia.

Influenza.—A sharp increase in influenza occurred during January and February, 1924, throughout western Europe. This was especially noted in England and Wales, Paris, Norway, Sweden, and Moscow. The statistics of mortality and morbidity in influenza are given in considerable detail in this number of the Monthly Epidemiological Report, the mortality by age groups in London being analyzed and showing some evidence of the characteristic epidemic age distribution. The greatest prevalence of influenza, as shown by current mortality statistics, was in the British Isles, the epidemic appearing to have been much more severe than during the previous year but smaller than during the outbreak of 1891–1892.

Lethargic encephalitis.—A slight increase in the number of cases of lethargic encephalitis has appeared in several countries since the beginning of the year. This was especially true of certain localities in England and Wales, in Sweden, and Switzerland.

Poliomyelitis.—A continued decline in this disease is shown for those countries where an increased prevalence had appeared in the second and third quarters of 1923.

Cerebrospinal meningitis.—What may be termed sporadic cases appeared in the reports from a large number of countries in nearly all parts of the world, but no significant variation was shown for the month under review.

Scarlet fever.—The general seasonal increase in scarlet fever was reported to have reached its maximum. In most of the countries of northwestern Europe the incidence was lower in the first weeks of 1924 than in the same period of 1923. In some of the European countries, however, an increase over the previous year is indicated, although the seasonal maximum seems to have been reached. This increase is apparent in Poland, Czechoslovakia, Bulgaria, Rumania, and Italy. A higher incidence of the disease is shown in Russia for the first eleven months of 1923 than for 1922.

Diphtheria.—A decrease of the incidence of diphtheria in most northwestern countries and Great Britain is indicated for the first few weeks of 1924 as compared with 1923. In other countries no significant change appears to have occurred except in Russia, where it appears likely that the rate for 1923 will exceed that of any year since 1919.

Measles.—A rather wide-spread increase in the prevalence of measles is indicated in the reports of European countries, the United States being mentioned in this connection. The extraordinary high mortality of measles in Egypt which prevailed during 1923 has

ceased. For 51 weeks of 1923 there was a total of 7,616 deaths from this disease recorded, the maximum having been reached during the week ending June 23, when 356 deaths were reported.

Scurvy in Russia.—A special note is made of recent reports on the prevalence of scurvy in Russia which show that during the first eleven months of 1923, 41,913 cases were reported. This incidence is higher than in any pre-war years, but far below the reported incidence for 1920 and 1921.

Malaria in the Ukraine.—Statistics of malaria notifications in the Ukraine, which have just been made available, show that during the first ten months of 1923 a total of 446,873 cases were reported, indicating an annual rate of 2,156 per 100,000. It is officially estimated by the Ukrainian health authorities that this total should be multiplied by three or four in order to express the actual incidence of the disease. The prevalence of subtertian malaria is suggested in the seasonal distribution of the disease in the southeastern parts of the Ukraine.

Mortality reports.—The current weekly rates (annual basis) for mortality from all causes are given for more than 260 cities. The outstanding features of these reports for the latest periods for which they are shown are the effect of the influenza epidemic upon mortality from all causes in the 105 English cities, and the relatively low mortality in the 46 German cities as a group. Infant mortality rates are shown by 4-week periods for a large number of cities from January 1, 1923, to February 23, 1924, and unusually high rates are indicated for Glasgow, Belfast, and Dublin. The current infant mortality for the 46 large German cities is considerably less than it was for the corresponding period of 1923, the rate for the four weeks ending January 26 being 108 as compared with 141 for the corresponding period of 1923. Mortality from some of the principal causes was given for a considerable number of the principal cities of the world by 4-week periods.

DEATH RATES IN A GROUP OF INSURED PERSONS.

COMPARISON OF PRINCIPAL CAUSES OF DEATH, JANUARY AND FEBRUARY, 1924, AND FEBRUARY AND YEAR, 1923.

The accompanying table is taken from the Statistical Bulletin of the Metropolitan Life Insurance Co. for March, 1924, and presents the mortality experience of the industrial insurance department of the company for February, 1924, and comparisons with January, 1924, and February, 1923. The rates are based on a strength of approximately 15,000,000 insured persons.

The gross death rate for February, 1924, is 9.9 per 1,000, the same as that for February, 1921; but in view of the fact that the 1921 rate

does not include infant lives whereas these lives were insured in February, 1924, the comparison is decidedly favorable for the present year. If the relatively high mortality of infant lives were left out of consideration it is obvious that the rate for February of this year would be materially lower.

The Bulletin states:

“The usual seasonal rise appears, as compared with January, but the health situation, not only for all causes combined, but for each of the numerically important causes (save accidents), is the most hopeful we have ever experienced at this time of the year. Comparison of the month’s tuberculosis death rate with that of February, 1923, shows a drop of 13 per cent; organic heart disease and pneumonia rates declined 22 per cent, and those for cerebral hemorrhage and Bright’s disease, 11 and 14 per cent, respectively. Mortality from influenza in February was approximately only one-fourth last year’s figure for the same month. At this period in 1923, it will be recalled, we were experiencing the peak of an influenza outbreak.

“The outlook for lower mortality from diabetes mellitus in 1924 continues favorable. In the February Bulletin we quoted a January death rate of 17.2 per 100,000, as compared with 20.3 for January, 1923. The decline in February was even more pronounced, with a death rate of 15.2 as compared with 22.3 for the same month of 1923.”

Death rates (annual basis) for principal causes per 100,000 lives exposed, January and February, 1924, and February and year, 1923.

[Industrial department, Metropolitan Life Insurance Co.]

Cause of death.	Death rate per 100,000 lives exposed. ¹			
	Feb., 1924.	Jan., 1924.	Feb., 1923.	Year 1923. ²
Total, all causes.....	991.2	971.0	1,166.6	923.9
Typhoid fever.....	2.5	2.9	2.8	5.1
Measles.....	9.3	8.5	10.8	9.4
Scarlet fever.....	6.4	6.8	4.5	4.4
Whooping cough.....	7.8	5.7	6.5	7.4
Diphtheria.....	16.8	19.9	17.6	15.5
Influenza.....	25.3	16.1	91.6	30.2
Tuberculosis (all forms).....	105.0	107.0	121.0	109.6
Tuberculosis of respiratory system.....	94.5	97.4	111.5	99.2
Cancer.....	68.5	72.3	71.1	71.5
Diabetes mellitus.....	15.2	17.2	22.3	15.9
Cerebral hemorrhage.....	66.1	65.9	74.5	61.0
Organic diseases of heart.....	134.0	135.9	171.9	126.7
Pneumonia (all forms).....	132.9	122.6	170.7	83.5
Other respiratory diseases.....	18.0	15.7	22.7	13.9
Diarrhea and enteritis.....	17.1	17.8	6.0	28.1
Bright's disease (chronic nephritis).....	73.5	71.4	85.3	68.5
Puerperal state.....	18.9	10.8	19.3	17.6
Suicides.....	6.1	5.5	5.5	7.3
Homicides.....	5.6	5.6	5.2	7.2
Other external causes (excluding suicides and homicides).....	53.0	62.3	52.8	62.7
Traumatism by automobile.....	9.2	12.9	9.5	15.2
All other causes.....	209.3	195.4	204.8	178.6

¹ With the exception of February, 1923, figures include mortality of infants under one year of age.

² Based on provisional estimate of lives exposed to risk in 1923.

MENTALLY DISEASED, FEEBLE-MINDED, AND EPILEPTICS IN INSTITUTIONS IN THE UNITED STATES, 1922 AND 1910.

The Department of Commerce makes the following announcement for the United States as a whole, of the movement during the calendar year 1922, of the patient population in hospitals for mental disease and in institutions for the feeble-minded and epileptics. The figures given for admissions include first admissions, readmissions, and transfers from other institutions; those for departures include discharges, deaths, and transfers to other institutions.

The figures are preliminary and subject to correction.

The figures for 1910 are also shown. The mental hygiene movement has made great progress since 1910, accounting, in all probability, for the increased number of institutions caring for mental disorders and the number of patients reported.

Mentally diseased, feeble-minded, and epileptics in institutions in the United States, 1922 and 1910.

1922.

Class of institution.	Number of institutions.	Patients on books Jan. 1.	Admissions.	Departures.	Patients on books Dec. 31.
Total.....	1 778	334, 153	137, 624	123, 501	348, 186
Hospitals for mental disease.....	2 526	279, 559	94, 114	83, 216	290, 457
Psychopathic wards of general hospitals.....	3 84	2, 135	33, 432	33, 725	1, 842
Institutions for feeble-minded.....	1 136	43, 636	8, 373	5, 275	46, 734
Institutions for epileptics.....	1 32	8, 823	1, 705	1, 375	9, 153

1910.

Total.....	429	208, 522	64, 594	56, 045	217, 071
Hospitals for mental disease.....	3 366	187, 791	60, 769	53, 837	194, 723
Institutions for feeble-minded.....	63	20, 731	3, 825	2, 208	22, 348
Institutions for epileptics ⁴					

¹ Fourteen hospitals for mental disease are included in the number of institutions for feeble-minded and for epileptics also, as they care for all three classes of mental disorders.

² Includes hospitals controlled by U. S. Veterans' Bureau.

³ Includes two hospitals for epileptics which reported 636 patients present Jan. 1, 1910, 174 admissions, 111 departures, and 699 on books Dec. 31, 1910.

⁴ Not separately returned in 1910; included with hospitals for mental disease and other benevolent institutions.

PUBLIC HEALTH SERVICE PUBLICATIONS.

A List of Publications Issued Between October, 1923, and April, 1924.

Below is given a list of publications of the United States Public Health Service issued between October, 1923, and April, 1924, since the publication of the last list in Public Health Reports, November 9, 1923 (Reprint No. 880).

The most important articles that appear each week in the Public Health Reports are reprinted in pamphlet form, making possible a wider and more economical distribution of articles that are of interest to the general public.

All of the publications listed, except those marked with an asterisk (*), are available for free distribution and, as long as the supply lasts, may be obtained by addressing the Surgeon General, United States Public Health Service, Washington, D. C. Those publications marked with an asterisk are not available for free distribution, but may be purchased from the Superintendent of Documents, Government Printing Office, Washington, D. C., *at the prices noted.* (Send no remittances to the Public Health Service.)

Reprints from the Public Health Reports.

872. The pyrotannic acid method for the quantitative determination of carbon monoxide in blood and air. By R. R. Sayers, W. P. Yant, and G. W. Jones. October 5, 1923. 12 pages.
873. Health conditions among chemical workers with respect to earnings. By Frank M. Phillips, Ph. D., and Gertrude A. Sager, M. A. October 5, 1923. 4 pages.
874. Pellagra prevention by diet among institutional inmates. By Joseph Goldberger, C. H. Waring, and W. F. Tanner. October 12, 1923. 10 pages.
875. Campaign against hookworm in the Province of Cebu, Philippine Islands. October 12, 1923. 4 pages.
876. City health officers—Directory of those in cities of 10,000 or more population. October 19, 1923. 12 pages.
877. Results of a three-year trachoma campaign begun in Knott County, Kentucky, in 1913, as shown by a survey made in the same locality 10 years later. By John McMullen. October 26, 1923. 6 pages.
878. The spleen rate of schoolboys in the Mississippi Delta. By K. F. Maxcy and C. P. Coogle. October 26, 1923. 8 pages.
879. The notifiable diseases—Prevalence in States, 1922. November 2, 1923. 115 pages.
880. Public Health Service publications—A list of publications issued between April and October, 1923. November 9, 1923. 4 pages.
881. A case of black tongue.—With post-mortem findings. By Joseph Goldberger, W. F. Tanner, and E. B. Saye. November 16, 1923. 7 pages.
882. Fundamentals of rural health work. By W. F. Draper. November 16, 1923. 8 pages.
883. Fleas found on wild animals in the Bitterroot Valley, Montana. By L. H. Dunn and R. R. Parker. November 23, 1923. 15 pages.
884. Collection of morbidity data and other sanitary information by the United States Public Health Service. By Brock C. Hampton. November 30, 1923. 16 pages.
885. The powers, duties, and policies of the Sanitary Water Board of the Commonwealth of Pennsylvania. By W. L. Stevenson. November 30, 1923. 11 pages.
886. An epidemiological study of folliculosis of the conjunctiva. By Milton V. Veldee. December 7, 1923. 12 pages.
887. Cooperative rural health work of the Public Health Service in the fiscal year 1923. By L. L. Lumsden. December 14, 1923. 24 pages.
888. Studies on the permeability of living and dead cells: IV. The penetration of trivalent and pentavalent arsenic into living and dead cells. By Matilda Moldenhauer Brooks. December 14, 1923. 16 pages.

889. Preliminary note on observations made on physical condition of persons engaged in measuring radium preparations. By R. C. Williams. December 21, 1923. 24 pages.
890. The program for oral hygiene in the public schools of Minneapolis, Minnesota. By F. Denton White, D. D. S. December 21, 1923. 6 pages.
891. Biological products.—Establishments licensed for the propagation and sale of viruses, serums, toxins, and analogous products. (December, 1923.) December 28, 1923. 11 pages.
892. Hydrogen sulphide literature. By C. W. Mitchell and S. J. Davenport. January 4, 1924. 13 pages.
893. Methods of administering iodine for prophylaxis of endemic goiter. By Robert Olesen. January 11, 1924. 11 pages.
894. Rocky Mountain spotted fever.—Viability of the virus in animal tissues. By R. R. Spencer and R. R. Parker. January 11, 1924. 4 pages.
895. A study of the treatment and prevention of pellagra. Experiments showing the value of fresh meat and of milk, the therapeutic failure of gelatin, and the preventive failure of butter and of cod-liver oil. By Joseph Goldberger and W. F. Tanner. January 18, 1924. 21 pages.
896. The importance of our knowledge of thyroid physiology in the control of thyroid diseases. By Taliaferro Clark. January 18, 1924. 4 pages.
897. Some notes on the relation of domestic animals to anopheles. By M. A. Barber and T. B. Hayne. January 25, 1924. 6 pages.
898. Viscosity and toxicity of arsphenamine solutions. By Carl Voegtlin, James M. Johnson, and Helen Dyer. February 1, 1924. 17 pages.
899. Some observation on the dispersal of adult anopheles. By M. A. Barber and T. B. Hayne. February 1, 1924. 9 pages. February 15, 1924.
900. Some observations on the winter activities of anopheles in Southern United States. By M. A. Barber, W. H. W. Komp, and T. B. Hayne. February 8, 1924. 15 pages.
901. Is the prophylactic use of diphtheria antitoxin justified? By James A. Doull and Roy P. Sandidge. February 15, 1924. 11 pages.
902. The preparation of a crystalline picrate having the antineuritic properties of vitamine. By Atherton Seidell, Ph. D. February 15, 1924. 6 pages.
903. Mercurial poisoning.—A report on poisoning from small quantities of mercurial vapor. By J. A. Turner. February 22, 1924. 13 pages.
904. Studies on oxidation-reduction: V. Electrode potentials of simple indophenols, each in equilibrium with its reduction product. By Barnett Cohen, H. D. Gibbs, and W. Mansfield Clark. February 29, 1924. 34 pages.
905. Factors in the mental health of girls of foreign parentage. By Mary J. Jarrett. A study of 210 girls of foreign parentage who received advice and assistance from a social agency, 1919-1922. March 7, 1924. 26 pages.
906. Malta fever.—Cattle suggested as a possible source of infection, following a serological study of human serums. By Alice C. Evans. March 14, 1924. 18 pages.
907. The new Baldwin-Wood weight-height-age tables as an index of nutrition.—The application of the Baldwin-Wood standard of nutrition to 506 native white children without physical defects and with "good" or "excellent" nutrition as judged from clinical evidence. By Taliaferro Clark, Edgar Sydenstricker, and Selwyn D. Collins. March 14, 1924. 8 pages.
908. Absenteeism among white and negro school children in Cleveland, 1922-23. By G. E. Harmon and G. E. Whitman. March 21, 1924. 9 pages.
909. Workmen's compensation acts in the United States: The medical aspect. By E. C. Ernst. March 21, 1924. 5 pages.
910. The effect of *Chara robbinsii* on mosquito larvæ. By M. A. Barber. March 28, 1924. 4 pages.

Supplements to the Public Health Reports.

44. Municipal ordinances, rules, and regulations pertaining to public health, 1920-1922.

Public Health Bulletins.

138. Tuberculosis survey of the Island of Porto Rico. By J. G. Townsend.
 139. Transactions of the Twenty-First Annual Conference of State and Territorial Health Officers, with the Public Health Service.
 140. Studies in illumination. (In press.)
 141. Studies upon leprosy. (In press.)
 142. Transactions of the Fourth Annual Conference of State Sanitary Engineers. (In press.)
 143. A study of the pollution and natural purification of the Ohio River. (In press.)

Hygienic Laboratory Bulletins.

135. Three papers on arsphenamine and neoarsphenamine.
 136. Studies on organisms concerned as causative factors in botulism.
 137. Digest of comments on the Pharmacopœia of the United States and on the National Formulary for the calendar year 1923.
 138. Studies on the bio-assay of pituitary extracts. (In press.)
 139. 1. Use of cooked meat media for the detection of *C. tetani*. 2. Studies of the potency test of pneumococcus vaccine. 3. The adaptability of various American peptones for use in cholera. By Ida A. Bengtson. (In press.)

Venereal Disease Bulletins.

- *73. Placard—Warning against venereal diseases. (For use by railroads, industrial plants, etc. Prices quoted by the Superintendent of Documents, Government Printing Office.)
 *74. The need for sex education. Includes lists of carefully selected books. One page. 5 cents.
 *75. Manual—High schools and sex education. A 98-page book (buckram) setting forth the nature of sex education and describing the courses into which a limited amount of sex information may be introduced when well-qualified teachers are available. 50 cents.
 *76. Venereal disease handbook for community leaders. 65 pages (buckram). 50 cents.

Card Exhibits.

- Adolescence and sex education—34 cards, 9 by 12 inches. For teachers. This exhibit is not for sale, but may be borrowed from many of the State departments of health and from the United States Public Health Service.
 *The venereal disease menace.—50 cards, 9 by 12 inches. For adults. (To be published in the spring, 1924. May be purchased from the Superintendent of Documents, Washington, D. C., 75 cents.

Periodical Publications.

- *Venereal disease information.—A monthly publication. Presents the medical aspects of venereal disease control work. 5 cents per copy. Subscription price, 50 cents per year.
 Social pathology.—Published bimonthly. Presents the socio-economic aspects of venereal disease control work.

DEATHS DURING WEEK ENDED APRIL 12, 1924.

Summary of information received by telegraph from industrial insurance companies for week ended April 12, 1924, and corresponding week of 1923. (From the Weekly Health Index, April 15, 1924, issued by the Bureau of the Census, Department of Commerce.)

	Week ended April 12, 1924.	Corresponding week, 1923.
Policies in force.....	56, 935, 986	52, 992, 445
Number of death claims.....	12, 089	11, 836
Death claims per 1,000 policies in force, annual rate.....	11. 1	11. 6

Deaths from all causes in certain large cities of the United States during the week ended April 12, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, April 15, 1924, issued by the Bureau of the Census, Department of Commerce.)

City.	Week ended Apr. 12, 1924.		Annual death rate per 1,000, corre- sponding week, 1923.	Death under 1 year.		Infant mortality rate, week ended Apr. 12, 1924. ²
	Total deaths.	Death rate. ¹		Week ended Apr. 12, 1924.	Corre- sponding week, 1923.	
Total (65 cities).....	7, 595	14. 6	³ 14. 3	974	³ 932	-----
Akron.....	40	-----	-----	11	8	116
Albany ⁴	38	16. 7	18. 2	1	5	22
Atlanta.....	93	21. 3	15. 9	10	11	-----
Baltimore ⁴	239	15. 9	14. 6	30	22	87
Birmingham.....	66	17. 1	20. 0	7	14	-----
Boston.....	258	17. 3	16. 6	34	41	94
Bridgeport.....	29	-----	-----	4	10	63
Buffalo.....	131	12. 5	16. 6	15	23	64
Cambridge.....	29	13. 5	15. 9	2	6	35
Camden.....	49	20. 2	10. 5	8	5	126
Chicago ⁴	705	12. 5	14. 5	102	123	94
Cincinnati.....	126	16. 1	17. 6	10	13	63
Cleveland.....	205	11. 7	11. 6	41	19	107
Columbus.....	68	13. 3	15. 0	4	3	38
Dallas.....	49	13. 6	13. 2	4	5	-----
Dayton.....	34	10. 5	8. 5	5	1	84
Denver.....	91	-----	-----	9	9	-----
Des Moines.....	39	14. 0	17. 4	1	6	-----
Detroit.....	318	-----	-----	59	45	110
Duluth.....	19	9. 1	8. 8	5	3	107
Erie.....	32	-----	-----	5	2	103
Fall River ⁴	34	14. 6	13. 8	9	5	127
Flint.....	27	-----	-----	11	4	190
Fort Worth.....	41	14. 4	10. 5	3	3	-----
Grand Rapids.....	42	14. 8	12. 9	7	6	109
Houston.....	40	-----	-----	3	3	-----
Indianapolis.....	105	15. 6	16. 6	10	12	76
Jacksonville, Fla.....	36	18. 3	15. 6	4	4	-----
Jersey City.....	100	16. 7	15. 0	16	8	116
Kansas City, Kans.....	29	12. 8	15. 3	3	4	60
Kansas City, Mo.....	115	16. 7	16. 0	18	11	-----
Los Angeles.....	260	-----	-----	33	21	103
Louisville.....	82	16. 5	17. 4	6	15	58
Lowell.....	28	12. 6	19. 9	5	6	89
Lyan.....	25	13. 1	9. 1	3	2	76
Memphis.....	60	18. 2	18. 7	6	8	-----
Milwaukee.....	105	11. 1	13. 6	22	15	101
Minneapolis.....	130	16. 2	8. 5	21	10	113
Nashville ⁴	39	16. 5	24. 2	3	8	-----
New Bedford.....	30	11. 8	11. 6	6	7	94
New Haven.....	54	16. 0	10. 9	7	5	91
New Orleans.....	132	16. 8	18. 7	12	16	-----
New York.....	1, 622	14. 1	13. 2	205	197	83
Bronx Borough.....	700	12. 0	10. 7	20	17	70
Brooklyn Borough.....	561	13. 3	11. 6	78	56	84
Manhattan Borough.....	694	16. 0	15. 6	94	101	92
Queens Borough.....	118	11. 1	12. 4	9	19	49
Richmond Borough.....	49	19. 5	18. 8	4	4	73

¹ Annual rate per 1,000 population.

² Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1923. Cities left blank are not in the registration area for births

³ Data for 64 cities.

⁴ Deaths for week ended Friday, Apr. 11, 1924

Deaths from all causes in certain large cities of the United States during the week ended April 12, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, April 15, 1924, issued by the Bureau of the Census, Department of Commerce)—Continued.

City.	Week ended Apr. 12, 1924.		Annual death rate per 1,000, corresponding week, 1923.	Death under 1 year.		Infant mortality rate, week ended Apr. 12, 1924.
	Total deaths.	Death rate.		Week ended Apr. 12, 1924.	Corresponding week, 1923.	
Newark, N. J.	110	12.9	10.9	11	17	52
Norfolk	26	8.3	10.2	3	4	55
Oakland	60	12.7	12.2	2	8	25
Oklahoma City	32	16.0		2		
Omaha	62	15.5	15.3	13	10	139
Paterson	33	12.2	16.8	5	7	81
Philadelphia	599	16.0	16.0	68	63	86
Pittsburgh	244	20.3	16.6	32	30	109
Portland, Oreg.	83	15.6	8.8	5	4	52
Providence	94	20.1	19.6	14	10	114
Richmond	57	16.2	15.8	7	12	82
Rochester	83	13.3	11.0	9	9	71
St. Louis	295	17.0	15.2	41	20	
St. Paul	67	14.3	15.1	9	10	77
Salt Lake City ⁴	27	11.0	15.3	2	4	33
San Antonio	72	19.6	13.8	15	3	
San Francisco	158	15.0	14.2	9	11	54
Schenectady	24	12.5	11.1	4	2	113
Seattle	75			8	10	77
Somerville	15	7.8	13.7	2	2	54
Spokane	26			5	4	106
Springfield, Mass.	44	15.5	13.7	6	5	101
Syracuse	61	16.9	15.3	8	8	99
Tacoma	24	12.1	10.8	3	2	69
Toledo	71	13.4	15.7	10	9	95
Trenton	37	14.9	20.9	6	2	98
Utica	27	13.4	10.6	11	3	238
Washington, D. C.	123	13.2	14.0	21	16	121
Waterbury	26			4	2	89
Wilmington, Del.	21	9.1	15.9	1	1	22
Worcester	42	11.2	13.0	3	6	36
Yonkers	29	13.8	10.7	1	4	22
Youngstown	47	15.8	12.5	6	8	87

⁴ Deaths for week ended Friday, Apr. 11, 1924.

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.

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

Reports for Week Ended April 19, 1924.

ALABAMA.		Cases.	CALIFORNIA.		Cases.
Cerebrospinal meningitis	-----	2	Diphtheria	-----	202
Chicken pox	-----	31	Influenza	-----	16
Diphtheria	-----	5	Lethargic encephalitis:		
Influenza	-----	71	Los Angeles	-----	2
Lethargic encephalitis	-----	1	San Francisco	-----	3
Malaria	-----	18	Measles	-----	1,078
Measles	-----	423	Poliomyelitis—Oakland	-----	1
Pneumonia	-----	76	Rocky Mountain spotted fever—Lassen		
Scarlet fever	-----	5	County	-----	2
Smallpox	-----	71	Scarlet fever	-----	189
Tuberculosis	-----	28	Smallpox:		
Typhoid fever	-----	12	Burbank	-----	11
Whooping cough	-----	33	Long Beach	-----	16
ARIZONA.			Los Angeles	-----	107
Chicken pox	-----	9	Los Angeles County	-----	52
Diphtheria	-----	5	Ontario	-----	16
Measles	-----	94	Orange County	-----	45
Mumps	-----	1	San Bernardino	-----	8
Scarlet fever	-----	6	San Bernardino County	-----	11
Trachoma	-----	4	Scattering	-----	85
Tuberculosis	-----	117	Typhoid fever	-----	13
Whooping cough	-----	1	COLORADO.		
ARKANSAS.			(Exclusive of Denver.)		
Chicken pox	-----	61	Chicken pox	-----	18
Diphtheria	-----	2	Diphtheria	-----	13
Hookworm disease	-----	7	Measles	-----	274
Influenza	-----	128	Mumps	-----	81
Malaria	-----	55	Rocky Mountain spotted fever	-----	1
Measles	-----	293	Scarlet fever	-----	16
Mumps	-----	27	Trachoma	-----	2
Ophthalmia neonatorum	-----	1	Tuberculosis	-----	41
Pellagra	-----	18	Whooping cough	-----	6
Scarlet fever	-----	3	CONNECTICUT.		
Smallpox	-----	5	Chicken pox	-----	47
Trachoma	-----	1	Diphtheria	-----	29
Tuberculosis	-----	21	German measles	-----	4
Typhoid fever	-----	7	Influenza	-----	5
Whooping cough	-----	85	Lethargic encephalitis	-----	1

CONNECTICUT—continued.

	Cases.
Measles.....	156
Mumps.....	83
Pneumonia (lobar).....	23
Scarlet fever.....	130
Smallpox.....	2
Tuberculosis (all forms).....	42
Whooping cough.....	25

DELAWARE.

Chicken pox.....	3
Diphtheria.....	2
Measles.....	4
Mumps.....	7
Pneumonia.....	2
Scarlet fever:	
Wilmington.....	8
Scattering.....	4
Tuberculosis.....	2
Whooping cough.....	9

DISTRICT OF COLUMBIA.

Chicken pox.....	49
Diphtheria.....	4
Influenza.....	1
Measles.....	17
Scarlet fever.....	40
Smallpox.....	1
Tuberculosis.....	22
Whooping cough.....	10

FLORIDA.

Cerebrospinal meningitis.....	1
Diphtheria.....	22
Influenza.....	29
Leprosy.....	1
Malaria.....	27
Pneumonia.....	164
Scarlet fever.....	18
Smallpox.....	6
Typhoid fever.....	14

GEORGIA.

Chicken pox.....	18
Diphtheria.....	7
Dysentery.....	2
German measles.....	9
Hookworm disease.....	27
Influenza.....	24
Malaria.....	11
Measles.....	56
Mumps.....	35
Pneumonia.....	40
Scarlet fever.....	5
Smallpox.....	82
Tetanus.....	1
Tuberculosis (pulmonary).....	10
Typhoid fever.....	2
Whooping cough.....	14

ILLINOIS.

Cerebrospinal meningitis—Cook County.....	1
Diphtheria:	
Cook County.....	87
Scattering.....	39
Influenza.....	24
Measles.....	245
Pneumonia.....	435

ILLINOIS—continued.

	Cases.
Scarlet fever:	
Cook County.....	138
De Kalb County.....	8
Kane County.....	10
Scattering.....	103
Smallpox:	
Cook County.....	14
Scattering.....	18
Tuberculosis.....	276
Typhoid fever.....	13
Whooping cough.....	121

INDIANA.

Cerebrospinal meningitis:	
Harrison County.....	1
Jackson County.....	1
Lawrence County.....	1
Chicken pox.....	93
Diphtheria.....	47
Influenza.....	47
Measles.....	465
Pneumonia.....	22
Scarlet fever:	
Lake County.....	9
St. Joseph County.....	13
Scattering.....	59
Smallpox:	
Clark County.....	24
Delaware County.....	13
Lake County.....	9
Marion County.....	48
Vigo County.....	9
Scattering.....	53
Tuberculosis.....	10
Typhoid fever.....	9
Whooping cough.....	59

IOWA.

Diphtheria.....	8
Scarlet fever.....	48
Smallpox.....	21

KANSAS.

Cerebrospinal meningitis.....	1
Chicken pox.....	50
Diphtheria.....	27
German measles.....	5
Influenza.....	4
Lethargic encephalitis.....	1
Measles.....	706
Mumps.....	346
Pneumonia.....	41
Scarlet fever.....	60
Smallpox.....	67
Tuberculosis.....	54
Typhoid fever.....	1
Whooping cough.....	77

LOUISIANA.

Diphtheria.....	25
Influenza.....	13
Malaria.....	5
Measles.....	181
Pneumonia.....	52
Scarlet fever.....	18
Smallpox.....	11
Tuberculosis.....	44
Typhoid fever.....	11
Whooping cough.....	5

MAINE.		MINNESOTA—continued.	
	Cases.		Cases.
Chicken pox.....	46	Scarlet fever.....	250
Diphtheria.....	17	Smallpox.....	44
German measles.....	43	Tuberculosis.....	82
Influenza.....	5	Typhoid fever.....	7
Measles.....	118	Whooping cough.....	19
Mumps.....	133		
Pellagra.....	1	MISSISSIPPI.	
Pneumonia.....	25	Diphtheria.....	8
Scarlet fever.....	26	Scarlet fever.....	3
Smallpox.....	6	Smallpox.....	22
Typhoid fever.....	5	Typhoid fever.....	2
Tuberculosis.....	10		
Vincent's angina.....	1	MISSOURI.	
Whooping cough.....	16	Cerebrospinal meningitis.....	1
		Chicken pox.....	44
MARYLAND. ¹		Diphtheria.....	54
Chicken pox.....	114	Influenza.....	23
Diphtheria.....	38	Measles.....	308
German measles.....	83	Mumps.....	109
Influenza.....	23	Pneumonia.....	8
Lethargic encephalitis.....	3	Scarlet fever.....	134
Measles.....	259	Smallpox.....	10
Mumps.....	33	Tuberculosis.....	45
Pneumonia (all forms).....	97	Typhoid fever.....	5
Poliomyelitis.....	2	Whooping cough.....	58
Scarlet fever.....	147		
Smallpox.....	1	MONTANA.	
Tuberculosis.....	65	Diphtheria.....	10
Typhoid fever.....	6	Scarlet fever.....	14
Whooping cough.....	38	Smallpox.....	18
MASSACHUSETTS.		NEBRASKA.	
Cerebrospinal meningitis.....	2	Cerebrospinal meningitis.....	1
Chicken pox.....	169	Chicken pox.....	23
Conjunctivitis (suppurative).....	11	Diphtheria.....	10
Diphtheria.....	159	Influenza.....	1
German measles.....	87	Measles.....	175
Influenza.....	14	Mumps.....	6
Measles.....	812	Pneumonia.....	1
Mumps.....	358	Scarlet fever.....	20
Ophthalmia neonatorum.....	15	Smallpox.....	9
Pneumonia (lobar).....	27	Typhoid fever.....	2
Poliomyelitis.....	5	Whooping cough.....	7
Scarlet fever.....	332		
Septic sore throat.....	1	NEW JERSEY.	
Trachoma.....	4	Cerebrospinal meningitis.....	5
Tuberculosis (all forms).....	136	Chicken pox.....	203
Typhoid fever.....	6	Diphtheria.....	90
Whooping cough.....	80	Influenza.....	8
		Measles.....	697
MICHIGAN.		Paratyphoid fever.....	1
Diphtheria.....	80	Pneumonia.....	146
Measles.....	667	Poliomyelitis.....	2
Pneumonia.....	116	Scarlet fever.....	139
Scarlet fever.....	338	Typhoid fever.....	5
Smallpox.....	161	Whooping cough.....	127
Tuberculosis.....	268		
Typhoid fever.....	14	NEW MEXICO.	
Whooping cough.....	69	Chicken pox.....	28
		Conjunctivitis.....	3
MINNESOTA.		Diphtheria.....	7
Chicken pox.....	90	Influenza.....	2
Diphtheria.....	36	Measles.....	188
Influenza.....	3	Mumps.....	4
Measles.....	206	Pneumonia.....	913
Pneumonia.....	3		

¹ Week ended Friday.

NEW MEXICO—continued.		Cases.	VERMONT.		Cases.
Scarlet fever.....		5	Chicken pox.....		25
Tuberculosis.....		13	Diphtheria.....		2
Typhoid fever.....		1	Measles.....		87
Whooping cough.....		1	Mumps.....		26
NEW YORK.			Scarlet fever.....		14
(Exclusive of New York City.)			Typhoid fever.....		1
Cerebrospinal meningitis.....		5	Whooping cough.....		30
Diphtheria.....		107	VIRGINIA.		
Influenza.....		16	Smallpox—Smyth County.....		2
Lethargic encephalitis.....		3	WASHINGTON.		
Measles.....		1,127	Cerebrospinal meningitis—Tacoma.....		1
Pneumonia.....		310	Chicken pox.....		109
Scarlet fever.....		346	Diphtheria.....		33
Smallpox.....		8	Measles.....		154
Typhoid fever.....		11	Mumps.....		33
Whooping cough.....		281	Pneumonia.....		3
NORTH CAROLINA.			Scarlet fever.....		49
Cerebrospinal meningitis.....		1	Smallpox.....		37
Chicken pox.....		158	Tuberculosis.....		27
Diphtheria.....		22	Typhoid fever.....		5
German measles.....		18	Whooping cough.....		14
Measles.....		1,621	WEST VIRGINIA.		
Scarlet fever.....		71	Cerebrospinal meningitis—Fairmont.....		1
Septic sore throat.....		2	Diphtheria.....		9
Smallpox.....		194	Scarlet fever.....		6
Typhoid fever.....		2	Smallpox.....		1
Whooping cough.....		340	WISCONSIN.		
OREGON.			Milwaukee:		
Chicken pox.....		22	Chicken pox.....		38
Diphtheria:			Diphtheria.....		8
Portland.....		8	German measles.....		2
Scattered.....		11	Influenza.....		5
Influenza.....		6	Lethargic encephalitis.....		1
Measles.....		111	Measles.....		25
Mumps.....		9	Ophthalmia neonatorum.....		1
Pneumonia.....		15	Pneumonia.....		7
Scarlet fever.....		16	Scarlet fever.....		32
Smallpox:			Smallpox.....		1
Portland.....		16	Tuberculosis.....		13
Scattering.....		10	Whooping cough.....		31
Tuberculosis.....		9	Scattering:		
Typhoid fever.....		5	Cerebrospinal meningitis.....		2
Whooping cough.....		4	Chicken pox.....		145
SOUTH DAKOTA.			Diphtheria.....		34
Chicken pox.....		6	German measles.....		29
Diphtheria.....		4	Influenza.....		193
Influenza.....		2	Lethargic encephalitis.....		1
Measles.....		141	Measles.....		342
Pneumonia.....		3	Pneumonia.....		53
Scarlet fever.....		33	Scarlet fever.....		213
Smallpox.....		5	Smallpox.....		22
TEXAS.			Tuberculosis.....		28
Cerebrospinal meningitis.....		1	Typhoid fever.....		3
Chicken pox.....		55	Whooping cough.....		94
Diphtheria.....		18	WYOMING.		
Influenza.....		25	Chicken pox.....		10
Measles.....		203	Diphtheria.....		1
Mumps.....		26	Measles.....		102
Pellagra.....		2	Mumps.....		3
Pneumonia.....		16	Pneumonia.....		3
Scarlet fever.....		13	Scarlet fever.....		2
Smallpox.....		28	Whooping cough.....		1
Trachoma.....		2			
Tuberculosis.....		17			
Typhoid fever.....		3			
Whooping cough.....		12			

¹Deaths.

Reports for Week Ended April 12, 1924.

NORTH DAKOTA.		NORTH DAKOTA—continued.	
	Cases.		Cases.
Chicken pox.....	11	Scarlet fever.....	35
Diphtheria.....	17	Smallpox.....	11
Measles.....	97	Tuberculosis.....	2
Mumps.....	14	Typhoid fever.....	1
Pneumonia.....	12	Whooping cough.....	4
Poliomyelitis.....	1		

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.	Cerebro-spinal meningitis.	Diphtheria.	Influenza.	Malaria.	Measles	Pellagra.	Poliomyelitis.	Scarlet fever.	Smallpox.	Typhoid fever.
<i>March, 1924.</i>										
Alabama.....	4	40	572	80	3,159	14	0	27	218	51
Delaware.....		17	2	1	35			59		
Georgia.....		67	229	38	1,082	1	1	60	583	9
Louisiana.....	3	81	146	31	1,308		2	41	86	26
Massachusetts.....	12	648	52	1	4,052		9	2,103	1	24
New Jersey.....	13	448	130	2	2,735		3	810	41	21

MORBIDITY REPORTS FROM CITIES.

Data are available for the years 1923 and 1924 from 102 of the cities included in the following tables. These 102 cities have an aggregate population of about 28,600,000.

Diphtheria.—For the week ended April 5, 1924, 102 cities, reported 1,012 cases of diphtheria. For the week ended April 7, 1923, they reported 1,009 cases, and the estimated expectancy was 1,003 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Influenza and pneumonia.—For the week ended April 5, 1924, 102 cities reported 1,335 deaths from influenza and pneumonia combined. For the corresponding week of last year, the same cities reported 1,094 deaths from these diseases.

Measles.—This disease has been increasing somewhat in the eastern part of the country since early in the year, but it has been decreasing in the Rocky Mountain and Pacific Coast cities. One hundred and two cities reported 6,059 cases for the week ended April 5, 1924. The same cities reported 8,534 cases for the corresponding week of last year.

Scarlet fever.—The figures for scarlet fever have been somewhat high since the first of the year. Seventeen hundred and twenty-nine cases were reported by 102 cities for the week ended April 5, 1924. The estimated expectancy was 1,035 cases, and for the corresponding week of last year these cities reported 1,311 cases.

Smallpox.—The cities reported 538 cases of smallpox for the week. The calculated expectancy was 179 cases, and last year the same cities reported 118 cases for the corresponding week. An examination of the table shows that most of the cases of smallpox are reported from comparatively few cities, which are now suffering because vaccination has been neglected in the past.

Typhoid fever.—One hundred and two cities reported 53 cases of typhoid fever for the week. The estimated expectancy for these cities was 58 cases. For the corresponding week of last year they reported 41 cases of this disease.

City reports for week ended April 5, 1924.

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics, or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimated expectancy is the mean number of cases reported for the week during nonepidemic years. If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1915 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

Division, State, and city.	Chicken pox, cases re-reported.	Diphtheria.		Influenza.		Measles, cases re-reported.	Mumps, cases re-reported.	Pneumonia, deaths re-reported.	Scarlet fever.	
		Cases, estimated expectancy.	Cases re-reported.	Cases re-reported.	Deaths re-reported.				Cases, estimated expectancy.	Cases re-reported.
NEW ENGLAND.										
Maine:										
Lewiston.....	1	1	2	0	0	11	1	0	2	0
Portland.....	12	0	3	0	0	1	34	6	3	6
New Hampshire:										
Concord.....	0	1	0	0	0	34	0	1	1	0
Vermont:										
Barre.....	0	0	0	0	0	0	0	0	1	0
Burlington.....	1	1	0	0	0	2	0	0	1	0
Massachusetts:										
Boston.....	40	60	64	7	1	140	34	31	57	103
Fall River.....	2	4	2	1	1	35	7	2	3	25
Springfield.....	4	4	6	1	1	87	4	2	5	16
Worcester.....	11	4	8	0	0	8	54	7	7	24
Rhode Island:										
Pawtucket.....	1	1	0	0	0	1	5	5	1	7
Providence.....	0	11	14	0	0	0	0	8	8	50
Connecticut:										
Bridgeport.....	0	7	2	2	2	4	3	3	5	15
Hartford.....		8	5	0	0	52		4	4	49
New Haven.....	6	4	1		1	3	54	6	7	17
MIDDLE ATLANTIC.										
New York:										
Buffalo.....	0	13	8	0	0	34	0	21	20	23
New York.....	236	294	206	74	18	2,034	268	252	203	263
Rochester.....	6	8	2	0	0	8	7	6	12	16
Syracuse.....	21	7	8	0	0	46	8	6	14	53
New Jersey:										
Camden.....		3	18	0	0	2		9	3	8
Newark.....		20	22	12	0	103		10	23	28
Trenton.....	8	5	3		1	36	2	4	3	1
Pennsylvania:										
Philadelphia.....	115	68	80	2	9	102	0	95	65	93
Pittsburgh.....	61	19	32	3	16	25	130	95	16	26
Reading.....	9	3	4	0	0	4	46	2	3	6
Scranton.....	10	3	1	0	0	8	1	8	2	1

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Chick- en pox, cases re- ported.	Diphtheria.		Influenza.		Meas- les, cases re- ported.	Mumps, cases re- ported.	Pneu- monia, deaths re- ported.	Scarlet fever.	
		Cases, esti- mated expect- ancy.	Cases re- ported.	Cases re- ported.	Deaths re- ported.				Cases, esti- mated expect- ancy.	Cases re- ported.
E. NORTH CENTRAL.										
Ohio:										
Cincinnati.....	21	11	12	2	1	135	21	22	13	9
Cleveland.....	81	24	27	3	2	92	226	42	27	19
Columbus.....	13	3	7	1	1	6	1	7	6	18
Toledo.....	54	3	5	0	0	103	2	6	14	13
Indiana:										
Fort Wayne.....		3	7	0	0	14		2	2	6
Indianapolis.....	0	8	4	0	3	80	131	18	15	2
South Bend.....		0	1	0	0	0		6	2	19
Terre Haute.....	1	1	1	0	0	2	0	1	2	0
Illinois:										
Chicago.....	168	94	79	22	7	154	110	109	112	108
Cicero.....	13	2	2	1	0	0	56	4	1	5
Peoria.....		1							2	
Springfield.....	23	2	2	0	0	6	0	2	1	0
Michigan:										
Detroit.....	69	61	52	5	4	261	92	60	68	90
Flint.....	1	3	4	1	2	12	15	6	6	6
Grand Rapids.....	6	3	3	0	0	3	27	5	8	8
Wisconsin:										
Madison.....	11	1	0	0	0	0	0	0	2	11
Milwaukee.....	61	13	15	0	0	41	18	0	32	22
Racine.....	3	1	3	0	0	0	0	1	4	21
Superior.....		1	0	0	0	0		1	1	2
W. NORTH CENTRAL.										
Minnesota:										
Duluth.....	17	1	4	0	0	7	0	4	4	14
Minneapolis.....	51	14	15	1	45	6	14	25	52	
St. Paul.....		14	13	0	29		11	22	31	
Iowa:										
Sioux City.....	0	1	2	1	1	0	0	2	2	1
Waterloo.....	1	0	0	0	3	17		3	1	
Missouri:										
Kansas City.....	18	8	3	1	1	95	32	17	10	9
St. Joseph.....		2	1	0	0	7		5	3	1
St. Louis.....	28	47	25	1	0	65	35		30	66
North Dakota:										
Fargo.....	0	1	0	0	0	0	0	1	2	0
Grand Forks.....	0	0	0	0	0	29	0	0	0	1
South Dakota:										
Aberdeen.....	2	0	0	0	0	47	0	0	0	0
Sioux Falls.....	2	0	1	0	0	0	0	4	3	4
Nebraska:										
Lincoln.....		1	3	0	0	17		0	3	1
Omaha.....	6	4	2	0	0	122	0	7	12	0
Kansas:										
Topeka.....	9	1	6	0	0	104	4	4	3	4
Wichita.....		1	2	0	0	62	150	4	4	0
SOUTH ATLANTIC.										
Delaware:										
Wilmington.....	1	2	2	0	0	1	1	0	1	2
Maryland:										
Baltimore.....	116	22	27	30	2	251	29	31	32	85
Cumberland.....		1	0	0	0	0		4	1	0
Frederick.....		0	1	0	0	6		0	0	21
District of Columbia:										
Washington.....	55	11	14	1	1	23	0	17	18	49
Virginia:										
Lynchburg.....	1	0	1	0	0	1	4	2	0	0
Norfolk.....	8	1	4	0	0	56	7	4	1	2
Richmond.....	22	2	1	0	0	65	3	10	2	6
Roanoke.....	1	0	0	0	0	0	0	2	1	1
West Virginia:										
Charleston.....	1	1	0	0	0	1	1	2	0	1
Huntington.....	0	1	0	1	1	0	0	7	1	0
Wheeling.....		2	0	0	0	3		4	2	3

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Chick- en pox, cases re- ported.	Diphtheria.		Influenza.		Meas- les, cases re- ported.	Mumps, cases re- ported.	Pneu- monia, deaths re- ported.	Scarlet fever.	
		Cases, esti- mated expect- ancy.	Cases re- ported.	Cases re- ported.	Deaths re- ported.				Cases, esti- mated expect- ancy.	Cases re- ported.
SOUTH ATLANTIC— continued.										
North Carolina:										
Raleigh.....	26	0	0	0	0	21	0	1	0	0
Wilmington.....	8	0	0	0	0	47	7	1	1	0
Winston-Salem.....	3	1	2	0	0	34	7	5	1	21
South Carolina:										
Charleston.....	5	1	0	0	0	0	0	7	0	0
Columbia.....	10	1	0	0	0	16	6	1	1	0
Greenville.....	0	0	0	0	0	16	5	2	0	0
Georgia:										
Atlanta.....	4	1	6	9	0	5	4	28	4	2
Brunswick.....	0	0	0	0	0	8	0	0	0	0
Savannah.....	5	0	1	1	0	10		2	1	0
Florida:										
St. Petersburg.....	2		1	0	0	0	0	0		7
Tampa.....	1	1	1	0	0	8	0	2	0	0
EAST SOUTH CENTRAL.										
Kentucky:										
Covington.....	0	1	2	1	0	4	0	4	1	3
Louisville.....		6							5	
Tennessee:										
Memphis.....	23	5	4		2	33	32	14	3	2
Nashville.....	12	1	0		8	0	3	4	2	1
Alabama:										
Birmingham.....	17	2	0	7	2	65	48	18	1	2
Mobile.....	6	1	1	0	0	14	0	3	0	1
Montgomery.....		0	0	3	0	4		1	0	0
WEST SOUTH CENTRAL.										
Arkansas:										
Fort Smith.....	0	1	0	0		111	6		1	2
Little Rock.....	1	1	0	4		35	1		1	0
Louisiana:										
New Orleans.....	6	8	11	4	4	117	0	27	4	7
Shreveport.....	1		1	0	0	4	0	3		0
Texas:										
Dallas.....	16	3	6	1	2	33	8	11	1	4
Galveston.....	0	1	0	0	0	10	0	6	0	1
Houston.....		1	4	0	0	16		7	1	1
San Antonio.....	0	1	1	0	0	28	1	13	1	0
MOUNTAIN.										
Montana:										
Billings.....	1	0	0	0	0	5	0	2	1	0
Great Falls.....	11	1	0	0	0	41	0	2	1	1
Helena.....	0	0	0	0	0	0	0	2		0
Missoula.....	2	0	2	0	0	48	0	0	1	0
Idaho:										
Boise.....	0	0	1	0	0	56	0	0	0	0
Colorado:										
Denver.....	23	9	25	0	0	113	6	29	9	9
Pueblo.....	0	1	1	0	0	12	2	2	1	5
New Mexico:										
Albuquerque.....	2	2	0	0	0	50	0	9	3	1
Utah:										
Salt Lake City.....	8	2	1		1	124	10	2	4	1
Nevada:										
Reno.....	1	0	0	1	0	6	0	0	0	0
PACIFIC.										
Washington:										
Seattle.....	4	4	4	0		31	1		8	4
Spokane.....	48	1	6	0		13	0		3	18
Tacoma.....	11	1	2	0		9	6		1	1
Oregon:										
Portland.....	10	3	15	0	0	5	3	4	6	8
California:										
Los Angeles.....		23	73	6	0	308		11	14	64
Sacramento.....	7	1	8		1	6	0	4	1	0
San Francisco.....	49	18	34	2	1	103	23	12	15	49

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Population July 1, 1923, estimated.	Smallpox.			Tuberculosis deaths reported.	Typhoid fever.			Whooping cough cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
NEW ENGLAND.										
Maine:										
Lewiston.....	33,790	0	0	0	0	0	0	0	2	13
Portland.....	73,129	0	0	0	0	0	0	0	4	27
New Hampshire:										
Concord.....	22,408	0	0	0	0	0	0	0	0	4
Vermont:										
Barre.....	110,008	0	0	0	0	0	0	0	0	3
Burlington.....	23,613	0	0	0	0	0	0	0	0	4
Massachusetts:										
Boston.....	770,400	0	0	0	18	1	0	0	7	245
Fall River.....	120,912	0	0	0	2	1	0	0	14	31
Springfield.....	144,227	0	0	0	3	0	1	0	21	37
Worcester.....	191,927	0	0	0	2	0	0	0	28	50
Rhode Island:										
Pawtucket.....	68,799	0	0	0	1	0	0	0	2	15
Providence.....	242,378	0	0	0	4	0	0	0	2	76
Connecticut:										
Bridgeport.....	1143,555	0	0	0	2	1	0	0	4	37
Hartford.....	1138,036	0	0	0	2	0	0	0	0	45
New Haven.....	172,967	0	0	0	1	0	0	0	5	57
MIDDLE ATLANTIC.										
New York:										
Buffalo.....	536,718	0	0	0	14	1	0	0	26	159
New York.....	5,927,625	0	0	0	102	9	7	0	173	1,605
Rochester.....	317,867	0	0	0	5	0	0	0	7	83
Syracuse.....	184,511	0	0	0	3	0	1	0	0	58
New Jersey:										
Camden.....	124,157	0	0	0	0	0	0	0	0	36
Newark.....	438,699	0	0	0	7	1	0	0	0	96
Trenton.....	127,390	0	0	0	4	0	0	0	0	41
Pennsylvania:										
Philadelphia.....	1,922,788	0	0	0	54	5	1	0	41	595
Pittsburgh.....	613,442	0	1	0	10	1	0	0	49	271
Reading.....	110,917	0	0	0	0	0	0	0	6	33
Scranton.....	140,636	0	0	0	1	0	0	0	0	0
EAST NORTH CENTRAL.										
Ohio:										
Cincinnati.....	406,312	2	6	0	19	1	0	0	31	136
Cleveland.....	888,519	1	2	0	20	2	1	0	42	188
Columbus.....	261,082	1	1	0	3	0	0	0	2	81
Toledo.....	268,338	4	19	0	11	1	0	0	9	82
Indiana:										
Fort Wayne.....	93,573	3	5	0	2	0	0	0	0	22
Indianapolis.....	342,718	4	56	0	3	0	0	0	18	108
South Bend.....	76,709	0	3	0	0	0	0	1	0	14
Terre Haute.....	68,939	1	0	0	0	0	0	0	2	15
Illinois:										
Chicago.....	2,886,121	2	9	0	45	3	0	0	41	748
Cicero.....	55,968	0	0	0	1	0	0	0	14	8
Peoria.....	79,675	3	0	0	0	0	0	0	0	0
Springfield.....	61,833	1	0	0	0	0	2	2	1	19
Michigan:										
Detroit.....	695,608	3	43	1	30	3	0	0	31	283
Flint.....	117,968	1	10	0	1	0	2	0	3	28
Grand Rapids.....	145,947	1	1	0	0	2	1	0	1	52
Wisconsin:										
Madison.....	42,519	2	0	0	0	0	0	0	4	4
Milwaukee.....	484,595	4	1	0	3	2	1	0	30	102
Racine.....	64,393	1	10	0	0	0	0	0	0	13
Superior.....	139,671	3	6	0	0	0	0	0	0	13
WEST NORTH CENTRAL.										
Minnesota:										
Duluth.....	106,289	3	15	0	0	1	0	1	0	24
Minneapolis.....	409,125	16	8	0	5	1	2	0	1	102
St. Paul.....	241,891	9	14	0	7	0	1	0	0	60
Iowa:										
Sioux City.....	79,662	2	0	0	0	0	0	0	1	0
Waterloo.....	39,667	0	0	0	0	0	0	0	2	0

1 Population Jan. 1, 1920.

2 Pulmonary only.

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Popula- tion July 1, 1923, estimated.	Smallpox.			Tuberculosis deaths reported.	Typhoid fever.			Whooping cough cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
WEST NORTH CENTRAL—contd.										
Missouri:										
Kansas City.....	351,819	6	0	0	5	0	0	0	29	132
St. Joseph.....	78,232	7	0	0	3	0	0	0	28	28
St. Louis.....	803,853	5	1	0	12	2	3	0	38	244
North Dakota:										
Fargo.....	24,841	0	0	0	0	0	0	0	0	5
Grand Forks.....	14,547	0	0	0	0	0	0	0	0	---
South Dakota:										
Aberdeen.....	15,829	---	0	0	0	---	0	0	---	---
Sioux Falls.....	29,206	3	0	0	0	0	0	0	0	12
Nebraska:										
Lincoln.....	58,761	4	1	0	0	0	0	0	---	12
Omaha.....	204,382	9	0	0	2	0	0	0	0	50
Kansas:										
Topeka.....	52,555	1	0	0	0	0	0	0	2	9
Wichita.....	79,261	6	14	0	1	0	1	0	2	30
SOUTH ATLANTIC.										
Delaware:										
Wilmington.....	117,728	0	0	0	0	1	0	0	3	18
Maryland:										
Baltimore.....	773,580	0	2	0	16	4	2	0	27	219
Cumberland.....	32,361	0	0	0	0	0	0	0	---	16
Frederick.....	11,301	0	0	0	0	0	0	0	---	3
District of Columbia:										
Washington.....	1 437,571	1	19	0	10	2	2	1	14	145
Virginia:										
Lynchburg.....	30,277	0	0	0	0	0	0	0	8	7
Norfolk.....	159,089	1	0	0	3	1	0	0	10	---
Richmond.....	181,044	0	6	0	2	0	1	0	9	61
Roanoke.....	55,502	1	0	0	4	1	0	0	5	19
West Virginia:										
Charleston.....	45,597	0	0	0	1	0	0	0	1	17
Huntington.....	57,918	0	0	0	1	0	0	0	0	24
Wheeling.....	1 56,208	0	0	0	0	1	0	0	---	20
North Carolina:										
Raleigh.....	29,171	0	0	0	1	0	0	0	1	16
Wilmington.....	35,719	0	0	0	0	0	1	0	1	6
Winston-Salem.....	56,230	2	3	0	0	0	0	0	6	22
South Carolina:										
Charleston.....	71,245	1	10	0	0	1	0	0	0	23
Columbia.....	39,688	1	0	0	0	0	0	0	0	20
Greenville.....	25,789	0	0	0	2	0	0	0	4	11
Georgia:										
Atlanta.....	222,963	4	76	0	2	0	0	0	---	102
Brunswick.....	15,937	0	0	0	0	0	0	0	1	1
Savannah.....	89,448	0	0	0	6	0	0	0	---	29
Florida:										
St. Petersburg.....	24,403	---	0	0	0	---	2	0	0	10
Tampa.....	56,050	0	0	0	0	1	1	1	0	18
EAST SOUTH CENTRAL.										
Kentucky:										
Covington.....	57,877	0	0	0	3	0	0	0	1	14
Louisville.....	257,671	1	---	---	---	1	---	---	---	---
Tennessee:										
Memphis.....	170,067	3	1	0	6	1	1	0	6	80
Nashville.....	121,128	1	2	0	2	0	0	0	8	41
Alabama:										
Birmingham.....	195,901	2	45	1	4	1	0	0	1	76
Mobile.....	63,858	0	1	0	2	0	0	0	0	25
Montgomery.....	45,383	1	0	0	1	0	0	0	---	22

1 Population Jan. 1, 1920.

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Popula- tion July 1, 1923, estimated.	Smallpox.			Tuberculosis, deaths reported.	Typhoid fever.			Whooping cough cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
WEST SOUTH CENTRAL.										
Arkansas:										
Fort Smith.....	30,635	1	0			0	0		2	
Little Rock.....	70,916	1	1			0	0		0	
Louisiana:										
New Orleans.....	404,575	6	0	0	16	3	4	0	2	172
Shreveport.....	54,590		6	0	0		0	0	0	21
Texas:										
Dallas.....	177,274	4	0	0	0	0	1	0	0	26
Galveston.....	46,877	0	1	0	3	0	0	0	0	16
Houston.....	154,970	1	1	0	3	0	2	0		33
San Antonio.....	184,727	0	1	0	11	0	2	1	0	62
MOUNTAIN.										
Montana:										
Billings.....	16,927	1	1	0	1	0	0	0	1	7
Great Falls.....	27,787	1	1	0	0	0	0	0	3	11
Helena.....	¹ 12,037		0	0	2		0	0	0	7
Missoula.....	¹ 12,668	1	4	0	0	0	0	0	0	2
Idaho:										
Boise.....	22,806	0	2	0	0	0	0	0	0	5
Colorado:										
Denver.....	272,031	10	0	0	12	0	2	1	4	106
Pueblo.....	43,519	0	0	0	1	0	0	0	1	12
New Mexico:										
Albuquerque.....	16,648	0	0	0	3	0	0	0	0	24
Utah:										
Salt Lake City.....	126,241	6	0	0	3	0	0	0	6	42
Nevada:										
Reno.....	12,429	0	0	0	0	0	0	0	0	3
PACIFIC										
Washington:										
Seattle.....	¹ 315,685	8	0			0	1		1	
Spokane.....	104,573	14	26			0	0		0	
Tacoma.....	101,731	3	3			0	0		1	
Oregon:										
Portland.....	273,621	8	10	0	5	0	3	1	0	64
California:										
Los Angeles.....	666,853	3	128	1	28	1	4	1		237
Sacramento.....	69,950	0	0	0	4	1	0	0	0	29
San Francisco.....	539,038	3	0	0	15	2	1	0	4	180

¹ Population Jan. 1, 1920.

City reports for week ended April 5, 1924—Continued.

Division, State, and city.	Cerebro-spinal meningitis.		Lethargic encephalitis.		Pellagra.		Poliomyelitis (infantile paralysis).			Typhus fever.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases, est. expectancy.	Cases.	Deaths.	Cases.	Deaths.
NEW ENGLAND.											
Maine:											
Lewiston.....	1	1	0	0	0	0	0	0	0	0	0
Massachusetts:											
Boston.....	0	0	0	1	0	0	0	0	0	0	0
Springfield.....	0	0	0	0	3	0	0	0	0	0	0
Connecticut:											
New Haven.....	1	1	0	0	0	0	0	0	0	0	0
MIDDLE ATLANTIC.											
New York:											
New York.....	2	1	9	9	0	0	1	1	0	0	0
New Jersey:											
Newark.....	0	1	0	0	0	0	0	0	0	0	0
Pennsylvania:											
Philadelphia.....	0	0	2	1	0	0	0	0	0	0	0
Scranton.....	0	1	0	0	0	0	0	0	0	0	0
E. NORTH CENTRAL.											
Ohio:											
Cleveland.....	1	0	3	0	0	0	0	1	0	0	0
Illinois:											
Chicago.....	0	0	2	0	0	0	0	0	0	0	0
Michigan:											
Detroit.....	2	0	0	1	0	0	0	0	0	0	0
Flint.....	0	1	0	0	0	0	0	0	0	0	0
Wisconsin:											
Milwaukee.....	1	0	0	0	0	0	0	0	0	0	0
W. NORTH CENTRAL.											
Minnesota:											
Minneapolis.....	0	0	0	1	0	0	0	0	0	0	0
Missouri:											
Kansas City.....	0	0	3	3	0	0	0	0	0	0	0
St. Louis.....	2	1	0	0	0	0	0	0	0	0	0
SOUTH ATLANTIC.											
Maryland:											
Baltimore.....	0	0	0	0	0	0	0	0	1	0	0
District of Columbia:											
Washington.....	0	0	1	1	0	0	0	0	0	0	0
West Virginia:											
Charleston.....	0	1	0	0	0	0	0	0	0	0	0
Huntington.....	0	2	0	0	0	0	0	0	0	0	0
South Carolina:											
Columbia.....	0	0	0	0	0	2	0	0	0	0	0
W. SOUTH CENTRAL.											
Louisiana:											
New Orleans.....	0	0	0	0	0	1	0	0	0	0	0
Texas:											
Dallas.....	0	0	0	0	0	1	0	0	0	0	0
San Antonio.....	1	0	0	0	0	0	0	0	0	0	0
MOUNTAIN.											
Colorado:											
Denver.....	0	0	0	1	0	0	0	0	0	0	0
New Mexico:											
Albuquerque.....	0	0	0	1	0	0	0	0	0	0	0
PACIFIC.											
California:											
Los Angeles.....	0	0	0	0	0	0	0	0	0	1	0
San Francisco.....	3	1	1	2	0	0	0	0	0	0	0

The following table gives a summary of the reports from 105 cities for the nine-week period ended April 5, 1924. The cities included in this table are those whose reports have been published for all nine weeks in the Public Health Reports. Eight of these cities did not report deaths. The aggregate population of the cities reporting cases was estimated at nearly 29,000,000 on July 1, 1923, which is the latest date for which estimates are available. The cities reporting deaths had more than 28,000,000 population on that date. The number of cities included in each group and the aggregate population are shown in a separate table below.

Summary of weekly reports from cities, February 3 to April 5, 1924.

DIPHTHERIA CASES

	1924, week ended—								
	Feb. 9.	Feb. 16.	Feb. 23.	Mar. 1.	Mar. 8.	Mar. 15.	Mar. 22.	Mar. 29.	Apr. 5.
Total.....	1,305	1,226	1,075	1,103	1,028	1,052	1,115	1,035	1,033
New England.....	136	115	109	125	86	110	135	103	105
Middle Atlantic.....	490	434	394	388	351	401	415	391	383
East North Central.....	284	247	225	230	218	234	229	200	219
West North Central.....	97	128	102	186	114	176	288	66	74
South Atlantic.....	50	57	31	54	43	37	61	42	61
East South Central.....	13	17	13	11	9	12	17	10	11
West South Central.....	33	37	34	34	34	18	21	32	23
Mountain.....	21	23	27	19	24	24	25	23	30
Pacific.....	181	168	140	156	149	140	124	163	127

MEASLES CASES.

Total.....	5,794	6,577	6,002	7,258	7,110	6,946	7,024	6,592	6,072
New England.....	265	334	294	469	356	460	430	443	374
Middle Atlantic.....	1,004	1,183	1,388	1,838	1,971	2,258	2,467	2,354	2,394
East North Central.....	292	378	322	476	541	604	659	674	806
West North Central.....	643	814	835	1,056	1,051	1,112	923	766	569
South Atlantic.....	508	655	578	683	801	579	675	621	572
East South Central.....	98	118	163	263	155	196	231	173	128
West South Central.....	511	710	738	781	693	410	514	590	354
Mountain.....	975	1,216	871	879	819	739	634	446	405
Pacific.....	1,498	1,169	813	813	723	588	491	525	470

SCARLET FEVER CASES.

Total.....	1,934	1,798	1,677	1,873	1,934	1,916	1,927	1,967	1,739
New England.....	307	276	301	330	237	413	337	363	312
Middle Atlantic.....	572	525	450	519	532	520	532	532	517
East North Central.....	426	383	317	380	347	349	376	370	346
West North Central.....	248	258	272	250	253	249	269	254	184
South Atlantic.....	183	157	142	188	209	175	221	202	200
East South Central.....	18	14	12	12	28	22	17	30	13
West South Central.....	19	12	8	9	11	19	13	17	15
Mountain.....	27	41	24	30	25	27	22	29	16
Pacific.....	134	132	151	155	142	142	140	170	136

SMALLPOX CASES.

Total.....	427	473	486	521	488	522	565	602	544
New England.....	0	0	0	0	0	0	0	0	0
Middle Atlantic.....	0	0	0	0	1	2	0	6	1
East North Central.....	87	143	101	145	160	125	186	162	153
West North Central.....	59	49	65	151	56	76	77	72	52
South Atlantic.....	118	117	117	121	117	144	123	171	116
East South Central.....	8	5	9	35	35	25	25	38	49
West South Central.....	6	12	14	4	2	5	6	7	10
Mountain.....	4	3	2	11	11	3	4	4	8
Pacific.....	145	144	178	154	106	142	144	139	155

¹ Figures for Kansas City, Mo., estimated. Report not received at time of going to press.

² Figures for Sioux City, Iowa, estimated.

³ Figures for Louisville, Ky., estimated.

⁴ Figures for Salt Lake City, Utah, estimated.

Summary of weekly reports from cities, February 3 to April 5, 1924—Continued.

TYPHOID FEVER CASES.

	1924, week ended—								
	Feb. 9.	Feb. 16.	Feb. 23.	Mar. 1.	Mar. 8.	Mar. 15.	Mar. 22.	Mar. 29.	Apr. 5.
Total.....	76	74	52	49	46	56	60	75	53
New England.....	0	3	5	8	7	3	2	4	1
Middle Atlantic.....	24	23	8	11	16	20	19	26	9
East North Central.....	8	18	8	9	8	11	8	7	7
West North Central.....	7	2	0	11	3	11	15	5	7
South Atlantic.....	15	7	11	7	3	8	1	11	9
East South Central.....	2	2	4	4	1	7	13	10	13
West South Central.....	10	3	6	3	2	3	2	8	9
Mountain.....	1	4	2	1	2	0	1	10	2
Pacific.....	9	12	8	5	4	3	9	4	6

INFLUENZA DEATHS.

Total.....	100	92	99	96	118	107	85	97	97
New England.....	3	5	4	3	5	10	5	3	6
Middle Atlantic.....	33	30	36	33	45	37	28	45	44
East North Central.....	19	13	18	14	19	23	13	11	20
West North Central.....	6	6	4	12	1	13	13	4	12
South Atlantic.....	14	17	10	13	15	7	15	10	3
East South Central.....	13	6	12	10	15	16	9	8	13
West South Central.....	7	11	8	15	12	8	8	10	6
Mountain.....	2	0	2	2	4	1	2	13	1
Pacific.....	3	4	5	4	2	2	2	3	2

PNEUMONIA DEATHS.

Total.....	1,064	1,125	1,191	1,165	1,218	1,194	1,171	1,203	1,251
New England.....	73	79	87	84	71	85	67	58	75
Middle Atlantic.....	421	407	461	469	516	466	495	525	500
East North Central.....	216	255	226	235	221	240	226	255	286
West North Central.....	46	52	50	149	62	166	152	72	171
South Atlantic.....	134	146	171	166	177	161	152	111	125
East South Central.....	63	65	65	55	61	55	69	47	61
West South Central.....	53	59	71	55	62	61	56	61	67
Mountain.....	24	30	27	19	14	31	20	36	39
Pacific.....	34	32	33	33	34	29	34	38	27

Number of cities included in summary of weekly reports and aggregate population of cities in each group, estimated as of July 1, 1923.

Group of cities.	Number of cities reporting cases.	Number of cities reporting deaths.	Aggregate population of cities reporting cases.	Aggregate population of cities reporting deaths.
Total.....	105	97	28,898,350	28,140,934
New England.....	12	12	2,098,746	2,098,716
Middle Atlantic.....	10	10	10,304,114	10,304,114
East North Central.....	17	17	7,032,535	7,032,535
West North Central.....	14	11	2,515,330	2,381,454
South Atlantic.....	22	22	2,566,901	2,566,901
East South Central.....	7	7	911,885	911,885
West South Central.....	8	6	1,124,564	1,023,013
Mountain.....	9	9	546,445	546,445
Pacific.....	6	3	1,797,830	1,275,841

FOREIGN AND INSULAR.

SMALLPOX ON VESSELS.

Steamship "Coppename"—At New Orleans from Puerto Barrios.

Information received under date of April 2, 1924, shows the occurrence of smallpox in a seaman who was removed from the steamship *Coppename* March 19, 1924. He remained in the Station hospital until discharged on April 1.

The patient was stated to have sailed from New Orleans March 1, after working on shore during the three weeks previous. He was in Puerto Barrios, Guatemala, March 4, but stated that he was on the dock for only a few minutes. The ship, however, was in port four days. He became ill March 14, 1924, the eruption appearing March 17, 1924.

U. S. Naval Hospital Ship "Mercy"—At St. Thomas, Virgin Islands—From Culebra, P. I.

Information received under date of April 1, 1924, shows the arrival of the U. S. Naval hospital ship *Mercy*, at St. Thomas, Virgin Islands, with a well-developed case of smallpox (alastrim) on board. The patient was stated to have been removed from another Naval vessel eight days before the arrival of the *Mercy* at Culebra, and to have been immediately isolated in the contagious wards, all hospital attendants and contacts being quarantined in the contagious wards.

The patient gave a history of having been on shore in Jamaica, West Indies, approximately two weeks before the onset of the disease, at which time about 30 cases of "alastrim" were reported present.

CANADA.

German Measles—Scarlet Fever—Fort William, Ontario.

During the month of March, 1924, 42 cases of German measles, as compared with no cases reported in the corresponding period of the preceding year, and 13 cases of scarlet fever as compared with one case in March, 1923, were reported at Fort William, Canada. (Population, 20,953.)

CANARY ISLANDS.

Plague—Santa Cruz de Teneriffe.

A new case of plague was reported, March 20, 1924, at Santa Cruz de Teneriffe, Canary Islands.

CUBA.

Communicable Diseases—Habana.

Communicable diseases have been notified at Habana as follows:

Disease.	Apr. 1-10, 1924.		Remain- ing under treatment Apr. 10, 1924.	Disease.	Apr. 1-10, 1924.		Remain- ing under treatment Apr. 10, 1924.
	New cases.	Deaths.			New cases.	Deaths.	
Cerebrospinal meningitis.....	-----	-----	1	Malaria.....	11	-----	14
Chicken pox.....	50	-----	32	Measles.....	15	-----	2
Diphtheria.....	7	-----	4	Paratyphoid fever.....	1	-----	3
Leprosy.....	-----	-----	14	Scarlet fever.....	4	-----	3
				Typhoid fever.....	13	2	26

¹ From the interior.

² From the interior, 11.

³ From the interior, 7.

JAMAICA.

Smallpox (Alastrim).

Smallpox (alastrim) has been reported in the Island of Jamaica for the period February 24 to March 29, 1924 as follows: Week ended March 1—new cases, 46 (one case in the Parish of Kingston); week ended March 8—12 new cases (Kingston, one case); week ended March 15—new cases, 15; week ended March 22—71 new cases; week ended March 29—36 new cases.

JAVA.

Plague—January, 1924.

During the month of January, 1924, 967 deaths from plague were reported in the six provinces of Java. For distribution of occurrence according to province, see page 910.

LITHUANIA.

Communicable Diseases—Year, 1923.

During the year 1923, communicable diseases were notified in the Republic of Lithuania as follows:

Disease.	Cases.	Deaths.	Disease.	Cases.	Deaths.
Diphtheria.....	231	11	Trachoma.....	1,799	-----
Influenza.....	3,200	5	Tuberculosis.....	2,656	67
Lethargic encephalitis.....	60	8	Typhoid fever.....	777	31
Malaria.....	117	-----	Typhus fever.....	819	86
Measles.....	415	7	Typhus fever, recurrent.....	13	-----
Scarlet fever.....	247	10	Whooping cough.....	1,119	13

Dysentery—Venereal Diseases.

During the same period, 182 cases of dysentery with 14 deaths and 2,079 cases of venereal diseases were notified in the Republic. (Population, 4,800,000.)

POLAND.

Communicable Diseases—January 6-19, 1924.

Communicable diseases have been notified in Poland as follows:

January 6-12, 1924.

Disease.	Cases.	Deaths.	Districts showing greatest number of deaths.
Cerebrospinal meningitis.....	2	1	Posen.
Diphtheria.....	68	14	Warsaw.
Measles.....	303	5	Kielce.
Scarlet fever.....	333	25	Warsaw.
Smallpox.....	20	4	Kielce.
Tuberculosis.....	105	219	Warsaw.
Typhoid fever.....	282	30	Lwow.
Typhus fever.....	132	12	Lwow.
Typhus fever, recurrent.....	3	-----	-----
Whooping cough.....	26	11	Stanislawow.

January 13-19, 1924.

Cerebrospinal meningitis.....	8	6	Lodz.
Diphtheria.....	74	16	Warsaw.
Measles.....	230	7	Lodz.
Scarlet fever.....	319	44	Krakow.
Smallpox.....	16	5	Kielce.
Tuberculosis.....	119	240	Warsaw.
Typhoid fever.....	252	22	Lwow.
Typhus fever.....	209	14	Tarnopol.
Typhus fever, recurrent.....	15	-----	-----
Whooping cough.....	37	5	Warsaw.

Dysentery—Malaria.

During the period under report, 22 cases of dysentery and 15 cases of malaria were reported in Poland.

TURKEY.

Communicable Diseases—December, 1923.

During the month of December, 1923, communicable diseases were reported in Turkey as follows:

Disease.	Cases.	Deaths.	Number of districts or localities affected.
Diphtheria.....	14	2	5
Measles.....	244	6	13
Plague.....	2	-----	1 ¹
Scarlet fever.....	72	6	9
Smallpox.....	120	15	20
Typhoid fever.....	29	5	13
Typhus fever.....	41	5	10 ²

¹ Constantinople.

² Also one case paratyphus at Angora.

UNION OF SOUTH AFRICA.

Plague—Cape Province—Orange Free State.

Under date of March 11, 1924, five cases of plague with four deaths, were reported in the Cape Province, Union of South Africa. The cases occurred in natives in the Albert district.

During the week ended March 1, 1924, 31 cases of plague (white, 3, native, 28) with 17 deaths (white, 2, native, 15), were reported in the Orange Free State, occurring in the Kroonstad, Winburg, and Vredefort districts.

The total number of cases which have occurred in this area since the beginning of the outbreak, December 16, 1924, is 122 (white, 22, native, 100), with 70 deaths (white, 10, native, 60).

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

The report contained in the following tables must not be considered as complete or final as regards either the lists of countries included or the figures for the particular countries for which reports are given.

Reports Received During Week Ended April 25, 1924.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
India.....				Feb. 3-9, 1924: Cases, 1,353; deaths, 778.
Calcutta.....	Mar. 2-8.....	71	54	
Rangoon.....	Feb. 24-Mar. 1.....	1		

PLAGUE.

British East Africa:				
Kenya—				
Kisumu.....	Feb. 24-Mar. 8.....	1	1	
Tanganyika.....	Feb. 3-9.....	5	3	
Uganda—				
Entebbe.....	Dec. 1-31.....	60	56	
Do.....	Jan. 1-31.....	36	35	
Canary Islands:				
Santa Cruz de Teneriffe.....	Mar. 20.....	1		
India.....				Feb. 3-9, 1924: Cases, 6,169; deaths, 4, 839.
Bombay.....	Mar. 2-8.....	49	33	
Karachi.....	Mar. 9-15.....	3	2	
Rangoon.....	Feb. 17-Mar. 1.....	16	12	
Iraq:				
Bagdad.....	Feb. 21-27.....	1	1	
Java.....				Jan. 1-31, 1924: Deaths, 967.
Province—				
Djakakarta.....	Jan. 1-31.....		44	
Kedoe.....	do.....		402	
Pekalongan.....	do.....		57	
Samarang.....	do.....		81	
Soerabaya.....	do.....		11	
Soerakarta.....	do.....		372	
Siam:				
Bangkok.....	Feb. 24-Mar. 1.....	1	1	
Straits Settlements:				
Penang.....	Jan. 27-Feb. 2.....	1	1	
Singapore.....	Feb. 24-Mar. 1.....	1	1	
Union of South Africa:				
Cape Province.....				Reported Mar. 5, 1924: Cases, 5; deaths, 4.
Orange Free State.....	Feb. 24-Mar. 5.....	31	17	White, cases, 3; deaths, 2. The occurrence was in the Kroonstad, Winburg, and Vredefort districts.
				Total from Dec. 16, 1923-Mar. 1, 1924: Cases, 122 (white, 22); deaths, 70 (white, 10).

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 April 25, 1924—Continued.

SMALLPOX.

Place.	Date.	Cases.	Deaths.	Remarks.
Arabia:				
Aden.....	Mar. 16-22.....	4		Imported.
Brazil:				
Pernambuco.....	Feb. 17-23.....		1	
Porto Alegre.....	Mar. 2-8.....		1	
Rio de Janeiro.....	do.....		1	
British East Africa:				
Uganda—				
Entebbe.....	Dec. 1-31.....	1		
Canada:				
British Columbia—				
Victoria.....	Mar. 23-29.....	1		
Ontario—				
Gloucester County.....	Mar. 30-Apr. 5.....	3		
London.....	Mar. 29-Apr. 5.....	1		
Westmoreland County.....	Mar. 30-Apr. 5.....	1		
China:				
Foochow.....	Mar. 2-8.....			Present.
Hongkong.....	Feb. 3-16.....	141	130	
Manchuria—				
Dairen.....	Mar. 3-9.....	1		
Shanghai.....	Mar. 2-15.....	2	7	Cases foreign; deaths, foreign and Chinese.
Chosen:				
Seoul.....	Feb. 1-29.....	2		
Dominican Republic:				
La Romana.....	Mar. 2-8.....	4		
Haiti:				
Cape Haitien.....	Mar. 9-15.....			2 cases in hospital.
India.....				Feb. 3-9, 1924: Cases, 3,216; deaths, 657.
Bombay.....	Mar. 2-8.....	104	62	
Calcutta.....	do.....	1		
Karachi.....	Mar. 9-15.....	5		
Madras.....	do.....	31	1	
Rangoon.....	Feb. 17-Mar. 1.....	12	2	
Indo-China:				
Saigen.....	Feb. 17-23.....	68	33	
Jamaica.....				Feb. 24-Mar. 29, 1924: Cases, 180.
Kingston.....	Feb. 24-Mar. 8.....	2		
Java:				
East Java—				
Soerabaya.....	Feb. 3-23.....	83	24	
West Java—				
Batavia.....	Feb. 9-15.....	6	2	Province.
Japan:				
Kobe.....	Mar. 17-23.....	1	4	
Tokyo.....	Feb. 17-23.....	4		
Latvia.....				Jan. 1-31, 1924: Cases, 4.
Mexico:				
Mazatlan.....	Mar. 31-Apr. 6.....		2	
Mexico City.....	Mar. 9-15.....	20		Including municipalities in Federal District.
Tampico.....	Mar. 21-31.....	1		
Persia:				
Teheran.....	Dec. 22-Jan. 20.....		1	
Poland.....				Jan. 6-19, 1924: Cases, 36; deaths, 9.
Portugal:				
Lisbon.....	Mar. 16-22.....	8		Mar. 17-23: One death.
Oporto.....	do.....	9	2	
Siam:				
Bangkok.....	Feb. 24-Mar. 1.....	3		
Spain:				
Barcelona.....	Mar. 13-26.....		2	
Valencia.....	Mar. 23-29.....	23	3	
Switzerland:				
Berne.....	Mar. 9-22.....	16	1	
Lucerne.....	Jan.-Feb.....	7		
Turkey.....				Dec. 1-31, 1924: Cases, 120; deaths, 15.
Union of South Africa:				
Cape Province.....	Feb. 24-Mar. 1.....			Outbreaks.
On vessels:				
Steamship Coppename.....	Mar. 19.....	1		At New Orleans from Puerto Barrios, Guatemala.
U. S. Naval Hospital ship Mercy.....	Apr. 1.....	1		At St. Thomas, Virgin Islands, from Culebra, P. I. Patient had been in Jamaica, W. I., two weeks previous. Case reported as alastrim.

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

Reports Received During Week Ended April 25, 1924—Continued.

TYPHUS FEVER.

Place.	Date.	Cases.	Deaths.	Remarks.
Algeria:				
Algiers.....	Mar. 1-10.....	3		
Chosen:				
Chemulpo.....	Feb. 1-29.....	1	1	
Seoul.....	do.....	30	1	
Hungary:				
Budapest.....	Mar. 9-15.....	10		
Lithuania.....				Year 1923: Cases, 819; deaths, 86. Recurrent typhus cases, 13.
Mexico:				
Mexico City.....	Mar. 9-15.....	8		Including municipalities in Federal District.
Torreon.....	Mar. 1-31.....		4	
Poland.....				Jan. 6-19, 1924: Cases, 34; deaths, 26. Recurrent fever ¹ cases, 18.
Turkey.....				Dec. 1-31, 1923: Cases, 41; deaths, 5.
Union of South Africa:				
Cape Province.....	Feb. 24-Mar. 1.....			Outbreaks.
Natal.....	do.....			Do.
Orange Free State.....	do.....			Do.

Reports Received from December 29, 1923, to April 18, 1924¹.

CHOLERA.

China:				
Hongkong.....	Nov. 18-24.....	1		
India.....				Oct. 14-Dec. 22, 1923: Cases, 14,117; deaths, 9,148.
Do.....				Dec. 30, 1923-Feb. 2, 1924: Cases, 7,138; deaths, 3,694.
Bombay.....	Dec. 23-29.....	1	1	
Do.....	Feb. 3-16.....	17	17	
Calcutta.....	Nov. 11-Dec. 29.....	85	69	
Do.....	Dec. 30-Mar. 1.....	210	175	
Madras.....	Nov. 25-Dec. 29.....	17	5	
Do.....	Dec. 30-Mar. 8.....	27	10	
Rangoon.....	Nov. 11-Dec. 29.....	8	5	
Do.....	Feb. 3-16.....	3	3	
Indo-China:				
Saigon.....	Dec. 31-Jan. 5.....	1	1	Including 100 square kilometers in surrounding country.
Philippine Islands:				
Manila.....	Feb. 3-9.....	1	1	
Siam:				
Bangkok.....	Nov. 18-Dec. 8.....	4	2	
Do.....	Dec. 31-Feb. 23.....	7	4	
Turkey:				
Constantinople.....	Dec. 2-8.....		1	

¹ From medical officers of the Public Health Service, American consuls, and other sources.

PLAGUE.

Azores:				
St. Michael Island.....	Oct. 20-Nov. 10.....	9	5	At localities 3 to 9 miles from port of Ponta Delgada.
Bolivia:				
La Paz.....	Oct. 1-31.....		3	
Do.....	Feb. 1-29.....		6	
Brazil:				
Bahia.....	Nov. 11-Dec. 22.....	5	3	
Do.....	Dec. 30-Feb. 16.....	6	6	
Porto Alegre.....	Feb. 10-16.....		1	
Rio de Janeiro.....	Jan. 20-26.....	1		
British East Africa:				
Kenya—				
Mombasa.....	Oct. 14-20.....	1	1	Infected rats, 2. Dec. 9-15, 1923: Cases, 4; deaths, 2; removed from vessel arrived Dec. 11, 1923.
Do.....	Dec. 30-Jan. 5.....	1	1	
Nairobi.....	Nov. 1-21.....	40		In rural districts, several hundred.

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
British East Africa—Contd.				
Tanganyika				
Do	Jan. 27-Feb. 2	3	2	To Nov. 24, 1923: Cases, 39; deaths, 25.
Uganda	Aug. 1-Oct. 31	734	719	
Entebbe	Oct. 1-Nov. 30	191	183	
Canary Islands:				
Las Palmas	Oct. 15-Nov. 15	14	14	
Santa Cruz de Teneriffe	Feb. 19-Mar. 15	3		Locality 52 km. from Teneriffe. Epidemic.
San Juan de la Rambla	Dec. 11	1		
Celebes Island				
Do	Nov. 30			
Ceylon:				
Colombo	Nov. 11-Dec. 29	31	21	Plague rodents, 24.
Do	Dec. 30-Feb. 23	68	64	Plague rodents, 29.
China:				
Nanking	Dec. 16-29			Present.
Do	Dec. 30-Feb. 9			Do.
Ecuador:				
Guayaquil	Nov. 16-Dec. 31	45	13	Rats taken, 53,240; found infected, 133.
Do	Jan. 1-Mar. 15	96	31	Rats taken, 93,454; found infected, 453.
Jipijapa	Nov. 16-Dec. 15			Present.
Quevedo	Jan. 1-31	3	2	
Quito	Nov. 1-30	11	1	
Santa Rosa	Feb. 16-29			Do.
Vino del Milagro	Dec. 1-15	1		
Egypt.				
City—				
Alexandria	Year 1923	65	33	Jan. 1-Dec. 31, 1923: Cases, 1,519; deaths, 725. Jan. 1-Feb. 28, 1924: Cases, 39; deaths, 24.
Cairo	do	2	2	
Port Said	do	51	29	
Suez	do	46	24	
Do	Jan. 2-Feb. 16	6	3	
Province—				
Assiout	Year 1923	370	211	
Beni-Souef	do	63	23	
Charkieh	Jan. 31	1	1	
Dakhaliéh	Year 1923	2	2	
Fayoum	do	34	9	
Do	Feb. 18	1	1	
Gharbieh	Year 1923	23	9	
Girgeh	do	337	193	
Do	Jan. 17-Feb. 11	3	2	
Gizeh	Year 1923	3	4	
Kalioubiah	do	76	10	
Do	Jan. 6	1		
Kena	Year 1923	50	34	
Menoufeh	do	290	98	
Do	Jan. 2-Feb. 23	26	16	
Minia	Year 1923	106	44	
Do	Feb. 5	1	1	
Hawaii:				
Honokaa				Jan. 8-Mar. 14, 1924: Four plague-infected rodents.
Paauhau				Dec. 14, 1923: One plague rat. Feb. 14, 1924: One plague rat.
India.				
Do				Oct. 14-Dec. 29, 1923: Cases, 34,542; deaths, 23,778. Dec. 30, 1923-Feb. 2, 1924: Cases, 22,743; deaths, 16,945.
Bombay	Oct. 28-Dec. 22	5	5	
Do	Dec. 30-Mar. 1	38	32	
Calcutta	Dec. 23-29	1	2	
Do	Jan. 6-Feb. 23	2	2	
Karachi	Nov. 11-Dec. 29	42	33	
Do	Dec. 30-Mar. 8	16	10	
Madras Presidency	Nov. 4-Dec. 29	1,657	1,021	
Do	Jan. 27-Mar. 8	582	367	
Rangoon	Jan. 27-Feb. 16	20	15	
Do	Dec. 30-Feb. 16	50	48	
Indo-China:				
Saigon	Oct. 28-Dec. 8	19	6	Including 100 square kilometers in surrounding country.
Do	Jan. 27-Feb. 2	1		Do.
Iraq:				
Bagdad	Nov. 11-Dec. 29	8	6	
Do	Jan. 6-Feb. 16	16	6	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.
Reports Received from December 29, 1923, to April 18, 1924—Continued.
PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Java				Oct. 1-Dec. 31, 1923: Deaths, 2,908.
Province—				
Djokjakarta	Oct. 1-Dec. 31		146	
Kedoe	do		1,287	
Pekalongan	do		150	
Samarang	do		430	
Soerabaya	do		9	
Do	Dec. 26-Feb. 2	26	26	
Soerakarta	do		886	
Madagascar:				
Tananarive Province	Oct. 1-Dec. 31	324	272	Bubonic, pneumonic, septice-mic. July 1-Dec. 31, 1923—city and Province: Cases, 429; deaths, 367. Jan. 1-Feb. 4, 1924—city and Province: Cases, 271; deaths, 242.
Tananarive town	do	74	74	
Do	Jan. 29-Feb. 4	18	18	
Paraguay:				
Asuncion	Dec. 18	6	4	
Peru				Nov. 1-Dec. 31, 1923: Cases, 33; deaths, 24. Jan. 1-31, 1924: Cases, 37; deaths, 15. Feb. 1-29, 1924: cases, 58; deaths, 11.
Locality—				
Callao	Jan. 1-Feb. 29	4	1	
Canete	Nov. 1-30	1	1	
Do	Feb. 1-29	2		
Chancay	Dec. 1-31	2		
Chopen	Nov. 1-30	1		
Chiclayo	Nov. 1-Dec. 31	2	1	
Chilca	Jan. 1-31	1		
Guadalupe	Feb. 1-29	1		
Huaral	do	8	1	
Huarmey	Jan. 1-Feb. 29	20	3	
Lima (city)	Nov. 1-Dec. 31	22	15	
Do	Jan. 1-Feb. 29	29	15	
Lima (country)	Nov. 1-Dec. 31	8	7	
Do	Jan. 1-Feb. 29	6	1	
Lurin	do	2		
Mollendo	do	2	1	
Paita (city)	do	1	1	
Paita (country)	do	8	1	
Reque	do	4		
Sullana	do	2		
Trujillo	do	4	1	Country.
Portugal:				
Lisbon	Dec. 13-21	7		
Do	Dec. 31-Jan. 6		1	
Portuguese West Africa:				
Angola—				
Loanda	Oct.-Nov	59	23	
Do	Dec. 2-29		6	
Do	Dec. 30-Feb. 2		4	
Russia:				
Bukeeve Province				Oct. 1, 1923-Feb. 4, 1924: Cases, 319; deaths, 294. 66 plague centers.
Ural Provinces				Oct. 1, 1923-Feb. 4, 1924: Cases, 441. 4 plague centers.
Siam:				
Bangkok	Nov. 4-Dec. 8	3	2	
Do	Jan. 13-19	1	1	
Siberia:				
Transbaikalia—				
Chita	Jan. 27	2	2	Pneumonic. Occurring in veterinary laboratory workers.
Spain:				
Malaga	Dec. 1-31	4		
Straits Settlements:				
Singapore	Nov. 11-Dec. 22	4	4	
Do	Dec. 30-Feb. 16	11	8	
Syria:				
Beirut	Nov. 1-Dec. 10	3		
Do	Jan. 1-10	1		
Turkey:				
Constantinople	Dec. 2-22	6	3	

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa.....				Sept. 16, 1923–Feb. 16, 1924: Cases, 66; deaths, 36 (European cases, 18; deaths, 5).
Cape Province—				Plague rodent found in vicinity Haarhoff's Kraal farm.
Uitenhage district.....	Dec. 9-15.....			
Orange Free State.....				Jan. 27–Feb. 23, 1924: Cases, 55; deaths, 33. (White cases, 7; colored cases, 24; deaths, 14).
Hoopstad district.....	Feb. 3-9.....	1		Feb. 10: Death of case (white) previously reported. Total, Dec. 16, 1923–Feb. 23, 1924: Cases, 145; deaths, 82. (White cases, 36; deaths, 13. Colored cases, 37; deaths, 24.)
Kroonstad district.....	Dec. 16-27.....	7	3	Cases, 24; deaths, 15, reported since outbreak.
Do.....	Jan. 6–Feb. 9.....	43	20	
Winburg district.....	Feb. 3-9.....	1		
Wonderfontein farm.....	Dec. 2-8.....	4		Vicinity of Hoopstad. At Hoopstad, Dec. 9-15, 1923, one death of case previously reported.
West Africa.....				Apr. 2, 1924: Reported present in one locality.
On vessels:				
.....	Dec. 11.....	4	2	At Mombasa, British East Africa.
.....	Jan. 24.....	2		At Varna, Bulgaria, from Syrian port.

SMALLPOX.

Algeria:				
Algiers.....	Nov. 1-30.....	1		
Arabia:				Imported.
Aden.....	Dec. 16-22.....	1		
Do.....	Jan. 13-19.....	1		
Belgium:				
Brussels.....	do.....	10		
Bolivia:				
La Paz.....	Oct. 1–Dec. 31.....	45	15	
Do.....	Jan. 1–Feb. 29.....	11	8	
Brazil:				
Bahia.....	Jan. 6-12.....	2		
Pernambuco.....	Nov. 4–Dec. 1.....	15	3	
Do.....	Jan. 6–Feb. 16.....		7	
Porto Alegre.....	Dec. 23-29.....		1	
Do.....	Dec. 30–Feb. 16.....		1	
Rio de Janeiro.....	Nov. 18-24.....	3	4	
Do.....	Jan. 6-26.....	3	1	
Sao Paulo.....	Sept. 3-9.....	1		
British East Africa:				
Tanganyika Territory.....	Sept. 30–Oct. 27.....	14	1	
Do.....	Nov. 25–Dec. 29.....	8	3	
Do.....	Jan. 6-12.....	2		
Uganda.....	Sept. 1-30.....	6	1	
Entebbe.....	Oct. 1–Nov. 30.....	4	1	
Zanzibar.....	Sept. 1–Oct. 31.....	116	18	Sept. 1-30, 1923: In areas 27 miles from town of Zanzibar. Oct. 1-31, 1923: In vicinity, 1 case, 1 death. In Mikotoni district, 30 cases, 14 deaths reported.
Canada:				
Alberta—				
Calgary.....	Jan. 27–Mar. 29.....	36		
British Columbia—				
Vancouver.....	Dec. 22-29.....	10		
Do.....	Dec. 30–Feb. 23.....	54		
Victoria.....	Feb. 10–Mar. 1.....	2		
Manitoba—				
Winnipeg.....	Nov. 25–Dec. 29.....	21		
Do.....	Dec. 30–Mar. 29.....	71		
New Brunswick—				Feb. 1-29, 1924: Cases, 8.
Frederickton.....				
Gloucester County.....	Mar. 2-8.....	1		
Madawaska County.....	Dec. 8-15.....	1		
Restigouche County.....				Jan. 1–Feb. 29, 1924: Cases, 3.
Victoria County.....	Feb. 10-16.....	2		
Westmoreland County.....	do.....	3		

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Canada—Continued.				
Ontario				Jan. 1—Feb. 29, 1924: Cases, 176.
Amherstburg	Mar. 1-31	16	8	Mar. 1-15, 1924: Cases, 166;
Chapleau	do	13	1	deaths, 28.
Cochrane	do	15	5	
Essex Border	do	12	6	
Fort William and Port Arthur	Dec. 16-29	3		Occurring at Fort William.
London	Feb. 3—Mar. 31	6		
North Bay	do	1		
Perth	Mar. 1-31	417		
Toronto	Jan. 17—Mar. 31	15	1	
Windsor	Feb. 1—Mar. 15	52	11	
Quebec				
Montreal	Nov. 30—Feb. 23	7		
Saskatchewan—				
Regina	Dec. 9-15	1		
Do	Dec. 30—Feb. 23	6	1	
Ceylon:				
Colombo	Nov. 11-17	3	1	
Do	Jan. 20—Feb. 23	5	1	
Chile:				
Antofagasta	Jan. 6-19	4	1	
Concepcion	Oct. 1—Dec. 31		14	
Talcahuano	Nov. 26—Dec. 2	3		Dec. 22, 1923: Five cases present.
Valparaiso	Dec. 9-15		1	
Do	Jan. 13—Mar. 15		8	
China:				
Amoy	Nov. 18—Dec. 8			Present.
Do	Jan. 6—Mar. 5		9	Including Kulangsu, 14 deaths; and in hospital, Feb. 9, 1924, more than 30 cases stated to be present.
Antung	Dec. 31—Feb. 3	2	2	
Canton	Dec. 23—Feb. 23			Present.
Chungking	Nov. 4—Dec. 29			Present and endemic.
Do	Dec. 30—Mar. 1			Present.
Foochow	Nov. 4—Dec. 15			Do.
Do	Dec. 31—Feb. 2			Do.
Hongkong	Oct. 28—Dec. 29	718	630	
Do	Dec. 30—Feb. 23	294	322	
Kulangsu	Mar. 5			Do.
Manchuria—				
Dairen	Dec. 31—Jan. 20	2		
Harbin	Nov. 12—Dec. 22	36		
Do	Jan. 1—Mar. 3	17	5	
Nanking	Dec. 2-15			Do.
Do	Dec. 30—Mar. 16			Do.
Shanghai	Dec. 29			Prevalent.
Do	Jan. 6—Mar. 1	27	65	Cases, foreign; deaths, Chinese and foreign.
Chosen (Korea):				
Chemulpo	Jan. 1-31	1		
Seoul	Nov. 1-30	1		
Colombia:				
Buenaventura	Nov. 18—Dec. 15	8		
Costa Rica:				
Port Limon	Feb. 18-24	1		
Czechoslovakia				Oct. 1—Dec. 31, 1923: Cases, 1; deaths, 1; occurring in Slovakia.
Dominican Republic:				
La Romana	Jan. 27—Mar. 1	9		
Ecuador:				
Esmeraldas	Nov. 16-30	4		
Guayaquil	Dec. 1-31	1		
Do	Jan. 1—Feb. 29	3		
Quito	Nov. 1-30	167	26	
Egypt:				
Alexandria	Feb. 27—Mar. 18	2	7	
Cairo	Jan. 1-7	1	1	
Port Said	Nov. 24—Dec. 2	1		
Estonia				Nov. 1—Dec. 31, 1923: Cases, 38. Jan. 1-31, 1924: Cases, 9.
France:				
Cherbourg	Feb. 9-15	1		British seaman.
Gibraltar	Mar. 3-9	1		
Great Britain:				
Liverpool	Mar. 2-8	1		In family of seaman recently returned from Oporto, Portugal.

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Greece:				
Saloniki.....	Oct. 22-Dec. 30.....		11	
Do.....	Dec. 31-Feb. 24.....	4	3	
Guadeloupe (West Indies)				Jan. 2-16, 1924: Present.
Abymes.....	Feb. 16.....			Present. Vicinity of Point à Pitre.
Basse Terre.....	Dec. 18.....			Present.
Do.....	Jan. 12-Feb. 16.....			Do.
Marie Galante Island				Off shore island; present.
Do.....	Feb. 16.....			Present. Estimated 60 cases.
Moule.....	Jan. 12-Feb. 16.....			Present.
Point à Pitre.....	Dec. 18.....			Present in vicinity.
Haiti:				
Cape Haitien.....	Feb. 3-9.....	3		
Hinche.....	Feb. 10-16.....	1		
Port au Prince.....	Feb. 17-Mar. 1.....	2	1	Developed at Limbe, Haiti.
India:				Oct. 14-Dec. 29, 1923: Cases, 9,720; deaths, 2,241.
Do.....				Dec. 30, 1923-Feb. 2, 1924: Cases, 8,442; deaths, 2,263.
Bombay.....	Oct. 28-Dec. 29.....	55	25	
Do.....	Dec. 30-Mar. 1.....	354	159	
Calcutta.....	Dec. 16-29.....	4	4	
Do.....	Dec. 30-Mar. 1.....	7	7	
Karachi.....	Dec. 30-Mar. 8.....	29	6	
Madras.....	Nov. 4-Dec. 29.....	23	3	
Do.....	Dec. 30-Mar. 8.....	138	8	
Rangoon.....	Nov. 4-Dec. 29.....	12	4	
Do.....	Dec. 30-Feb. 16.....	7	1	
Indo-China:				
City—				
Saigon.....	Nov. 4-Dec. 29.....	133	74	Including 100 square kilometers
Do.....	Dec. 31-Jan. 16.....	284	168	of surrounding country.
Iraq:				
Bagdad.....	Oct. 24-Dec. 29.....	46	28	
Do.....	Dec. 30-Feb. 16.....	44	33	
Italy:				
Trieste.....	Feb. 17-23.....	4		
Turin.....	Feb. 18-24.....	1		
Jamaica:				Nov. 25-Dec. 29, 1923: Cases, 115.
Do.....				Dec. 30, 1923-Feb. 16, 1924: Cases, 153. Reported as alastrim.
Kingston.....	Nov. 25-Dec. 29.....	3		
Do.....	Dec. 30-Feb. 2.....	6		
Japan:				
Kobe.....	Feb. 14-Mar. 14.....	10	2	
Taiwan.....	Jan. 1-Feb. 29.....	7		
Tokyo.....	Jan. 1-Mar. 7.....	127		
Java:				
East Java—				
Soerabaya.....	Oct. 23-Dec. 29.....	348	60	
Do.....	Dec. 30-Jan. 19.....	67	13	
West Java—				
Batavia.....	Oct. 27-Dec. 28.....	65	13	
Do.....	Dec. 29-Feb. 8.....	25	4	
Latvia.....				Oct. 1-31, 1923: Cases, 3. Nov. 1-30, 1923: Case, 1. Dec. 1-31, 1923: Cases, 2. Jan. 1-31, 1924: Cases, 4.
Mexico:				
Guadalajara.....	Jan. 27-Mar. 15.....		5	
Manzanillo.....	Dec. 4-10.....		1	
Mexico City.....	Nov. 25-Dec. 29.....	32		Including municipalities in Federal District.
Do.....	Jan. 30-Mar. 8.....	82	23	Do.
Monterey.....				Mar. 24, 1924, 11 cases officially announced.
Salina Cruz.....	Jan. 1-31.....	1		
San Luis Potosi.....	Mar. 16-22.....		1	
Tampico.....	Jan. 21-Mar. 20.....	28		From Irapuato, 9; La Barra, 1.
Vera Cruz.....	Nov. 3-Dec. 30.....		4	
Do.....	Jan. 6-27.....	1	2	
Netherlands:				
Rotterdam.....	Jan. 20-26.....	3		
Palestine:				
Jaffa.....	Jan. 15-28.....	3		
Jerusalem.....	Feb. 18-25.....	1		
Persia:				
Teheran.....	Sept. 24-Dec. 23.....		4	

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Poland.....				Sept. 23-Dec. 31, 1923: Cases, 83, deaths, 20. Jan. 1-5, 1924: Cases, 15, deaths, 1.
Portugal:				
Lisbon.....	Nov. 11-Dec. 29.....	19	10	Corrected report.
Do.....	Dec. 31-Mar. 9.....	78	15	
Oporto.....	Nov. 25-Dec. 29.....	39	23	
Do.....	Dec. 30-Mar. 15.....	73	43	
Portuguese East Africa:				
Lourenco Marques.....	Dec. 30-Jan. 5.....	2		
Portuguese West Africa:				
Angola—				
Loanda.....	Dec. 2-29.....		5	
Russia:				
Ukraine.....				August, 1923: Cases, 77. September, 1923: Cases, 66.
Siam:				
Bangkok.....	Oct. 28-Dec. 8.....	33	18	Nov. 25-Dec. 1, 1923: Epidemic.
Do.....	Dec. 30-Feb. 9.....	4	2	
Siberia:				
Dauria Station.....	Oct. 21.....			Present. Locality on Chita Railway, Manchurian frontier.
Sierra Leone:				
Sherbro District—				
Tagbail.....	Nov. 1-15.....	3		
Spain:				
Barcelona.....	Nov. 15-Dec. 26.....		2	
Do.....	Jan. 3-Mar. 12.....		3	
Valencia.....	Nov. 25-Dec. 29.....		12	
Do.....	Dec. 30-Mar. 22.....	152	31	
Straits Settlements:				
Singapore.....	Dec. 16-29.....	2	1	
Do.....	Dec. 30-Jan. 25.....	3		
Switzerland:				
Basel.....	Jan. 27-Feb. 9.....	4		Corrected.
Berne.....	Nov. 17-Dec. 22.....	15		
Do.....	Jan. 6-Mar. 8.....	15		
Lucerne.....	Nov. 1-30.....	34		
Do.....	Dec. 1-31.....	26		
Zurich.....	Jan. 27-Mar. 8.....	2		
Syria:				
Aleppo.....	Nov. 25-Dec. 1.....	1		In vicinity, at Djsir Choughour.
Beirut.....	Jan. 21-Feb. 20.....	2		
Damascus.....	Nov. 16-Dec. 15.....	7		
Do.....	Jan. 29-Mar. 3.....	29		
Tunis:				
Tunis.....	Oct. 27-Nov. 2.....	5	1	
Do.....	Jan. 8-Mar. 24.....	4	4	
Turkey:				
Constantinople.....	Nov. 11-Dec. 8.....	3		
Do.....	Jan. 6-Feb. 16.....	1	1	
Union of South Africa:				
Cape Province.....	Oct. 28-Dec. 8.....			Oct. 1-31, 1923: Colored, cases, 41; deaths, 2; white, cases, 3. Outbreaks.
Do.....	Jan. 20-Feb. 23.....			
Natal.....	Oct. 28-Nov. 3.....			
Northern Rhodesia.....	Dec. 4-31.....	40	5	
Do.....				Jan. 1-31, 1924: Cases, 50; deaths, 11; reported from Balovale, Kalabo, and Mankoya districts. Outbreaks.
Orange Free State.....	Oct. 28-Nov. 24.....			Do.
Do.....	Jan. 20-Feb. 23.....			
Transvaal.....	Nov. 18-Dec. 1.....			Do.
Johannesburg.....	Nov. 25-Dec. 15.....	3		
Do.....	Feb. 3-23.....	2		
Uruguay:				
Montevideo.....	Oct. 1-31.....	1		
Venezuela:				
Caracas.....	Jan. 22.....			Epidemic.
Margarita Island:				
Punta Piedra.....	Mar. 21.....	60		20 miles from mainland.
On vessels:				
S. S. Torres.....	Jan. 14.....	1		At New Orleans quarantine station from Tampico, Mexico, via ports. Case in seaman signed on at Galveston, Tex., on outward voyage.

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
On vessels—Continued.				
S. S. Tupper.....	Jan. 20-26.....	1		At Gonaives, Haiti.
S. S. Vasari.....	Dec. 31.....	1		At Trinidad, West Indies, from Buenos Aires, Argentina. Vessel left Buenos Aires, Dec. 15, 1923, for New York, via Santos, Rio de Janeiro, Trinidad, Barbados.
Sch. Annie M. Parker.....	Jan. 23.....	3		At sea. Vessel abandoned and crew removed to vessel bound for Rotterdam. Patients removed at Liverpool. Feb. 28, bound for Newfoundland.

TYPHUS FEVER.

Algeria:				
Algiers.....	Nov. 1-Dec. 31.....	7	3	
Do.....	Jan. 1-Feb. 10.....	8	5	
Bolivia:				
La Paz.....	Oct. 1-Dec. 31.....	43	5	
Do.....	Jan. 1-Feb. 29.....	16	1	
Brazil:				
Porto Alegre.....	Feb. 24-Mar. 1.....		1	
Bulgaria:				
Sofia.....				Nov. 18-Dec. 15, 1923: Paratyphus fever, cases, 17. Jan. 6-Feb. 9, 1924: Paratyphus fever, cases, 6.
Canary Islands:				
Teneriffe.....	Jan. 14-Feb. 17.....		2	
Chile:				
Antofagasta.....	Dec. 2-8.....	4		
Concepcion.....	Oct. 1-Nov. 30.....		5	Dec. 11-24, 1923: Deaths, 3.
Do.....	Jan. 8-Feb. 25.....	2	2	In district, at 12 localities, 92 cases.
Iquique.....	Jan. 20-26.....		1	
Talcahuano.....	Dec. 31-Feb. 23.....	4		Dec. 5, 1923: 3 cases under treatment. Jan. 12, 1924: 1 case under treatment.
Valparaiso.....	Nov. 25-Dec. 15.....		29	Dec. 24, 1923: In hospital, 34 cases.
Do.....	Dec. 30-Mar. 15.....		44	Reports from two districts of the Province of Valparaiso.
China:				
Antung.....	Nov. 12-Dec. 30.....	5		
Chungking.....	Nov. 18-24.....			Present.
Do.....	Dec. 16-29.....			Endemic.
Do.....	Dec. 30-Feb. 16.....			Do.
Czechoslovakia:				
Danzig-Polish frontier:				
Mühlbanz.....	Mar. 6.....			Present. Origin stated to be focus at Mallinia.
Ecuador:				
Quito.....	Nov. 1-30.....	14	1	
Egypt:				
Alexandria.....	Nov. 19-Dec. 23.....	3		
Do.....	Jan. 8-Mar. 18.....	6		
Cairo.....	Sept. 10-Dec. 31.....	39	11	
Esthonia.....				Nov. 1-30, 1923: Paratyphus fever, cases, 8. Dec. 1-31, 1923: Typhus fever, cases, 15; paratyphus, cases, 4. January, 1924: Paratyphus fever, cases, 6.
Finland.....				Dec. 1-15, 1923: Paratyphus fever, cases, 15. Feb. 15-29, 1924: Paratyphus, cases, 7.
Germany:				
Coblenz.....	Jan. 27-Feb. 2.....	1		
Greece:				
Athens.....	Jan. 11-Feb. 20.....		7	
Saloniki.....	Nov. 26-Dec. 30.....	7	3	
Hungary:				
Budapest.....	Jan. 27-Feb. 23.....	13	7	July 1-Aug. 31, 1923: Cases, 24.

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Java:				
East Java—				
Soerabaya	Dec. 9-29	12		
Do	Dec. 30-Jan. 5	2		
Latvia				Oct. 1-31, 1923: Cases, 12; paratyphus fever, 7; recurrent typhus, 3. Nov. 1-30, 1923: Case, 1; paratyphus fever, cases, 2. Dec. 1-31, 1923: Cases, 9; paratyphus, cases, 3. Jan. 1-31, 1924: Cases, 35.
Mexico:				
Durango	Dec. 1-31		2	
Do	Jan. 1-Feb. 29		3	
Guadalajara	Jan. 27-Mar. 29	2	3	Feb. 1-29, 1924: Cases, 2; deaths, 1.
Mexico City	Nov. 25-Dec. 29	86		Including municipalities in Federal District.
Do	Dec. 30-Mar. 12	53	8	Do.
San Luis Potosi	Jan. 17-23		1	
Torreon	Feb. 1-29		2	
Netherlands:				
Amsterdam	Mar. 2-8	2		
Norway:				
Stavanger	Dec. 25-31	1		
Palestine:				
Jaffa	Jan. 1-Feb. 26	4		
Jerusalem	Feb. 19-28	2		
Persia:				
Teheran	Sept. 24-Oct. 23		1	
Poland				Sept. 23-Dec. 31, 1923: Cases, 947; deaths, 92; recurrent typhus, cases, 67; deaths, 1. Jan. 1-15, 1924: Cases, 129; deaths, 11. Recurrent cases, 6.
Portugal:				
Oporto	Jan. 27-Feb. 2	2		
Rumania:				
Kishineff District	Nov. 1-Dec. 31	15		
Russia:				
Ukraine				August, 1923: Cases, 454. September, 1923: Cases, 314. Recurrent typhus: August, 1923, cases, 1,366; September, 1923, cases, 941.
Spain:				
Barcelona	Nov. 29-Dec. 12		2	
Do	Jan. 3-Feb. 13		5	
Madrid	Dec. 1-31		7	
Syria:				
Damascus	Jan. 27-Feb. 2	1		
Tunis:				
Tunis	Feb. 5-11	1		
Turkey:				
Constantinople	Nov. 11-Dec. 29	15	1	
Do	Dec. 30-Feb. 23	8		
Union of South Africa:				
Cape Province				Oct. 1-31, 1923: Colored, 287 cases, 58 deaths; white, 2 cases; total, 289 cases, 58 deaths. Jan. 1-31, 1924: Cases, 196; deaths, 25 (colored). Among white population 3 cases. Total, cases, 199; deaths, 25.
Do	Oct. 28-Dec. 8			Oct. 1-31, 1923: Colored, cases, 245; deaths, 47.
Do				Outbreaks. Jan. 1-31, 1924: Cases, 93; deaths, 11.
Natal				Oct. 1-31, 1923: Colored, cases, 4; deaths, 3.
Do	Oct. 28-Nov. 3			Outbreaks. Jan. 1-31, 1924: Cases, 81; deaths, 11.
Do				Cases occurring among native stevedores in the harbor area of the port and confined to one barracks.
Durban	Nov. 24-Dec. 1	73		

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

Reports Received from December 29, 1923, to April 18, 1924—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa—Contd.				
Orange Free State.....				Oct. 1-31, 1923: Colored, cases, 25; deaths, 8.
Do.....	Dec. 15.....			Outbreaks.
Do.....				Jan. 1-31, 1924: Cases, 17; deaths, 3.
Kroonstad District.....	Jan. 20-26.....			Outbreaks on two farms.
Transvaal.....				Oct. 1-31, 1923: Colored, cases, 13.
Do.....	Oct. 28-Dec. 1.....			Outbreaks.
Do.....	Jan. 1-31.....	5	1	
Johannesburg.....	Oct. 1-Dec. 31.....	3	4	
Do.....	Jan. 6-Feb. 16.....	7		
Potschefstrom District.....	Jan. 20-26.....			Outbreaks on seven farms.
Venezuela:				
Maracaibo.....	Dec. 16-22.....		1	
Do.....	Feb. 17-Mar. 1.....		2	
Yugoslavia:				
Croatia—				
Zagreb.....	Dec. 2-15.....	3		
Do.....	Feb. 17-23.....	1		
Serbia—				
Belgrade.....	Nov. 25-Dec. 1.....	1		

YELLOW FEVER.

Brazil:				
Pernambuco City.....	Nov. 16.....	3	2	