

# PUBLIC HEALTH REPORTS

VOL. 40

JULY 24, 1925

No. 30

## **A Plan to Establish in the United States a Morbidity Registration Area, that is, an Area for the more Complete Collection of Data Relating to the Diseases of Man<sup>1</sup>**

By B. J. LLOYD, Assistant Surgeon General, United States Public Health Service

Reports of communicable and other diseases have an intensive value in the community where the diseases occur. This value can not, however, be rightly interpreted in any community without comparable data from other communities. One State or city can not rightly evaluate the results of its efforts in the protection of the health of its citizens without comparable data from other States and cities.

We, as a Nation, should be able to present to other nations and to ourselves for comparison a picture of health conditions in the United States as a whole. At the present time our situation with regard to morbidity reports resembles somewhat a cross-word puzzle with most of the words missing.

Before attempting to outline a plan to establish a morbidity registration area, let us do two things; namely, first let us visualize our ultimate purpose, I should say our theoretical goal, which I am afraid is a long way off. My conception of such a goal would be a working system of reporting all of the diseases of man for all of the people of the United States and making the best use of these reports possible. To attempt this under present conditions is, of course, unthinkable. We have not yet succeeded in getting complete reports of one disease for the entire United States. Having visualized our goal, let us forget that, and, as the second step in the development of the plan for a morbidity area, let us take stock of the facilities for the collection of data which we already have and of the reports we now receive.

In the past, the Federal Government has manifested its greatest interest in the reporting of the major quarantinable diseases, such as plague, cholera, yellow fever, and smallpox. Congress, however, instructs the Public Health Service to collect information with regard to disease throughout the United States, but does not furnish the means with which to do it. The Public Health Service, by the direction of Congress, obtains its data on reportable diseases in the United States through the cooperation of State and local health officers.

The aid that the Public Health Service renders in collecting this information is based on the principle of mutual advantage and coop-

<sup>1</sup> Read as a part of the proceedings of the Annual Conference of State and Territorial Health Officers with the Surgeon General, Washington, D. C., June 1, 1925.

eration. For the purpose of getting prompt and more accurate morbidity reports, the Public Health Service furnishes blank report forms and appoints as its agents in the various States, at nominal salaries, collaborating and assistant collaborating epidemiologists, who are authorized by law to use the penalty envelope in collecting these data for the Federal Government. These epidemiologists may also be, and most often are, State or local health officers, thus making their work in the improvement of morbidity reporting mutually beneficial to both the Federal Government and the States. In addition, the Public Health Service furnishes to State and local health officers, through the weekly Public Health Reports, the data which it gets from all States and cities, together with the data from foreign countries and other pertinent sanitary information. In order to understand just how the Federal Government functions in this cooperative work of collecting data, it is well to know something of the development of the present system and of its actual operation.

In 1878 Congress provided that "Consular officers of the United States shall make weekly reports to him [the Supervising Surgeon General of the Marine Hospital Service] of the sanitary condition of the ports at which they are respectively stationed. \* \* \*" These reports were published as "Bulletins of the Public Health."

In 1879 Congress established the National Board of Health, charged with the duty, among other duties, of obtaining and disseminating information upon all matters affecting the public health, and this body took over the issuing of the Bulletins of Public Health, changing the title to "Abstracts of Sanitary Reports."

The National Board of Health was discontinued in 1883 and the Marine Hospital Service, now the Public Health Service, being charged with its duties, again assumed the publication of the Abstracts of Sanitary Reports, but the name was not changed to "Public Health Reports" until January, 1896.

In 1902, in order to secure uniformity in the registration of morbidity data, Congress enacted a law directing the Surgeon General to provide forms for the collection and compilation of morbidity data.

The first morbidity reports collected related principally to yellow fever, cholera, plague, and smallpox. From time to time other diseases were included and morbidity data for cities and States were received, compiled, published, and distributed.

The data received have increased in volume and completeness until at the present time the Public Health Service is receiving reports from about 560 out of 824 cities in the United States having a population of 10,000 or more, and from practically all States and insular possessions, as well as reports from American consuls and diplomatic officers and medical officers of the Public Health Service

stationed abroad. Reports are also received through certain co-operative agencies.

At the present time a very large part of the population of the continental United States is covered by morbidity reports of some kind transmitted to the Surgeon General of the Public Health Service with some degree of regularity. The current reports are of three kinds—namely, weekly telegraphic reports or prompt mail reports from 37 States and the District of Columbia; weekly mail reports from approximately 560 cities of 10,000 population or over; telegraphic reports of unusual conditions in the United States (or abroad).

The collection of morbidity reports is still in the formative stage. There are many rural communities in the United States in which practically no morbidity reports are collected and no records of disease prevalence are kept. Many incorporated places of considerable size make no attempt to secure systematic reports of preventable diseases, and in some State health departments the small force available and the limited appropriations make it impossible to secure reports which are of much real value. Even in those States which have the best health departments and in which the best records are kept it must be admitted that reports of notifiable diseases are incomplete and are not always comparable in completeness as between one State or city and another, and much information that is needed is not available. Statistics compiled from these incomplete reports must be used with caution. They are of value as they show the presence (or absence) of epidemics, however, and it is usually possible to compare the reports for one year with those of another in the same community; but comparisons of the prevalence of a certain disease based on reports from different communities are likely to be misleading, as the reliability of the reports varies greatly in different localities and usually the percentage of the cases which are reported in a community is not known.

However, the outlook is not entirely dark. Since 1912 the Public Health Service has published annual summaries of the reported cases of preventable diseases in States and cities of the United States. An examination of these reports shows progress. Each year the number of States and cities reporting has increased, and an analysis of the figures shows that in most communities a larger percentage of the cases are being reported than ever before.

Let us examine now the cooperative plan followed in many States in collecting morbidity statistics. As you well know, in order to comply with the law authorizing the use of the penalty envelope in obtaining these data there must be appointed as officers of the Federal Government persons to whom these penalty envelopes bearing the information may be mailed. There is appointed in the office of the

State health officer of the State using the plan, at \$1 a year, an individual known as the collaborating epidemiologist of the State. The collaborating epidemiologist, usually the State health officer, recommends for appointment as many assistant collaborating epidemiologists in cities, towns, and communities throughout the State as he thinks are needed for the service. Usually these assistant collaborating epidemiologists are members of local health departments.

Penalty cards and penalty envelopes, furnished by the Public Health Service as required, are distributed to private physicians, who make out their reports of communicable diseases on these cards and mail them to the nearest local collaborating epidemiologist, who in turn transmits a summary of the data received to the State collaborating epidemiologist and to the Surgeon General of the Public Health Service. In some districts the original cards or reports are sent direct to the State collaborating epidemiologist. Usually this is in rural districts. The details of selecting assistants, collecting the data, and determining the data and the diseases to be reported on in any given State are left to the discretion of the State health officer.

Laws or enforceable regulations requiring the reporting of communicable diseases are necessary. The Model State Law for Morbidity Reports, approved by the Annual Conference of State and Territorial Health Authorities with the United States Public Health Service in 1913, and amended by the conference in 1915, has been made the basis for laws or regulations in many States and for ordinances or regulations in a large number of cities.

With these preliminary statements, let me take up now the plan for establishing a morbidity registration area. In doing so I wish to emphasize the fact that I claim no credit for this plan. It seems to me that it is merely the next step in the logical development of the system that State and local health officers have helped the Public Health Service to construct.

In the first place, such an area must be built up of units, all functioning as nearly alike as possible along certain broad, general lines. In minor details there may be as much individualization as may be desired. These units may be States, districts, cities, counties, parishes, or any form of unit that can meet the requirements of eligibility. As it appears now it would seem that, in the immediate future, registration units may consist mostly of cities. There may be two or three States and a county here and there that could qualify.

What are the requirements proposed?

Inasmuch as this is a pioneer work, much of what is suggested here is, of course, tentative.

The first requirement is, I think, a *sine qua non*—the unit must report directly to the Surgeon General of the Public Health Service.

In the cases of cities, reports must go to the collaborating epidemiologist in the State health office as well. The reasons for asking that reports be sent direct to the Surgeon General are twofold: (1) It is required by the statutory provisions involved, and (2) if they are not sent direct they will not reach the office of the Surgeon General in time to be of value when published as current reports. This will leave out temporarily some cities which probably could meet all other requirements.

Second. The unit seeking and maintaining its status in the registration area must be able to attain a percentage of completeness in the reporting of contagious diseases corresponding to the minimum rates adopted for these diseases. For example, the minimum rates for smallpox and diphtheria might well be 90 per cent of the cases occurring in a given locality; of measles possibly 75 per cent. Inasmuch as the number of cases of some of the diseases to be reported manifestly can not be determined by actual count, a system must be devised for *estimating* the percentage of completeness of these reports if percentage is to be used as a criterion of eligibility. I shall discuss this phase of the problem in another part of this paper.

Third. Reports must be mailed to the Surgeon General at the close of each week.

Fourth. Reports must include the following 10 diseases as a minimum,<sup>2</sup> namely, diphtheria, influenza, measles, pneumonia, poliomyelitis, scarlet fever, smallpox, tuberculosis, typhoid fever, and whooping cough. Cities should be required to report both cases and deaths, except that in the case of influenza and pneumonia, deaths only are required. States will have to be excused from reporting deaths for districts other than cities for the present.

The data asked for in these reports (the numbers of cases and deaths) may seem to you inadequate; but the Public Health Service does not have the facilities for working up other important data, such as age groups, race, sex, etc. There is no objection to these data being required by the units concerned, but we can not use them at this time.

We come now to the question of checking the accuracy of these reports, and this, I think, should be done by personal visit of a representative of the Public Health Service, first, to the health department of the unit which is to be checked, and, second, to as many physicians and others who treat disease as possible, the visit to the physicians to be preceded by the mailing of a letter and a questionnaire.

---

<sup>2</sup> It has been suggested that this list should be revised—that, perhaps, reports should be required for 3 out of 10 of these diseases, or that 2 others should be added and reports on 10 out of 12 diseases should be required.

(NOTE.—Certain parts of the original paper have been slightly changed to conform to certain very excellent suggestions brought out in the discussion of this paper by members of the conference.)

In checking up the work of the health department, the following questions may be asked, not as indispensable prerequisites of eligibility, but in order that a judgment may be formed or the percentage of cases reported may be estimated. These questions are:

#### A. GENERAL REQUIREMENTS

- (1) Is the unit which is being checked in the registration area for deaths?
- (2) Is it in the registration area for births?
- (3) Is it served by a whole-time health officer?
- (4) Is there a service of medical inspection of schools?
- (5) Is the health department able to impose penalties through the medium of the courts for failure to report cases of communicable disease?
- (6) Has the unit adopted (in substance) the model morbidity law as recommended by this conference?
- (7) Can the license of a physician who persistently fails or refuses to report cases of communicable diseases be revoked?
- (8) Does the health department maintain as a check a card index of the physicians and others who are required to report?

These requirements are general and would tend to enable one to begin to form a judgment.

In addition to the foregoing general questions, the following might well be asked with regard to individual diseases:

#### B. REQUIREMENTS FOR SPECIFIC DISEASES

##### (1) DIPHTHERIA:

- (a) Reportable by name of patient?
- (b) Is diagnosis verified by health department?
- (c) Is free culture media furnished at convenient places for use in making cultures?
- (d) Are negative cultures required before releasing?
- (e) Is residence placarded by personal visit, and is case maintained in strict quarantine?
- (f) Are contacts kept out of school unless immune and noncarriers?
- (g) Is certificate required for return to school?
- (h) Are permits required for removal from premises in case of change of residence?
- (i) Is terminal disinfection (or mechanical cleaning) of premises required?
- (j) Is free antitoxin furnished to indigent cases?

##### (2) INFLUENZA:

- (a) Report of deaths.

##### (3) MEASLES:

- (a) Reportable by name of patient?
- (b) Is case quarantined?
- (c) Is residence placarded by personal visit?
- (d) Are contacts kept from school unless immune?
- (e) Is release required for child to attend school?

##### (4) POLIOMYELITIS:

- (a) Reportable by name of patient?
- (b) Is case quarantined?
- (c) Is residence placarded by personal visit?
- (d) Is release required for attendance at school?

## (5) SCARLET FEVER:

- (a) Reportable by name of patient?
- (b) Is patient quarantined?
- (c) Is residence placarded by personal visit?
- (d) Are child contacts kept under supervision to cover incubation period?
- (e) Is release required for attending school?
- (f) Is terminal disinfection (or mechanical cleaning) of premises required?
- (g) Are permits required for change of residence?

## (6) SMALLPOX:

- (a) Reportable by name of patient?
- (b) Is vaccination history required in report?
- (c) Are patients treated in isolation hospital?
- (d) If not, is residence quarantined or placarded by personal visit?
- (e) Are contacts vaccinated, or if not, held to complete 14 days from last exposure?
- (f) Is release from quarantine required?
- (g) Is terminal disinfection (or mechanical cleaning) of premises required?
- (h) Are reports of chicken pox obligatory?
- (i) Are reports of chicken pox verified by health department?
- (j) Are residences of patients suffering from chicken pox placarded by personal visit?

## (7) TUBERCULOSIS:

- (a) Reportable by name of patient?
- (b) Are clinics available for indigent cases?
- (c) What is the ratio of fatalities to cases?

## (8) TYPHOID FEVER:

- (a) Reportable by name of patient?
- (b) Are attempts made to determine origin?
- (c) Are residences placarded by personal visit?
- (d) Are permits required for change of residence?
- (e) What is the ratio of fatalities to cases?

## (9) WHOOPING COUGH:

- (a) Reportable by name of patient?
- (b) Is residence placarded by personal visit?
- (c) Is patient quarantined or tagged during active period?
- (d) Is release required for school attendance?
- (e) Is permit required for change of residence?
- (f) Are contacts kept from school unless immune?

## (10) PNEUMONIA:

- (a) Report of deaths.

I mentioned as a second means of checking the accuracy of morbidity reports a letter, a questionnaire, and a visit to the physicians. I would consider sending a modified form of the letter and questionnaire to the Christian Scientist practitioners, the osteopaths, the chiropractors, and to all others who are authorized in any way to treat the sick, and if it is determined to include them in the survey, visit them as well.

The letter and questionnaire should be mailed to every physician and to others concerned and followed within a few days by the visit.

If it is not possible to visit all physicians, then a follow-up letter should be sent to those not seen, asking that the questionnaires be mailed.

The following is suggested as the letter to the physicians:

DEAR DOCTOR: Every right-thinking physician recognizes the desirability, the necessity, of reporting communicable disease. In conferring upon the physician the responsible privileges inseparable from the practice of his profession, the State justly imposes on him the duty of safeguarding the public health by requiring him to report cases of communicable disease that he attends.

Your State and local authorities, in cooperation with the United States Public Health Service, are at present engaged in checking the completeness of the reports of communicable disease in this city, in order to determine its eligibility for authoritative inclusion in the United States Registration Area for Morbidity Reports.

The inclosed numbered questionnaire is sent you with the request that you fill it out at your earliest convenience and retain it in your office until called for (within the next few days) by a representative of the United States Public Health Service. The information you give will be treated as confidential and will be used for one purpose, and one only, namely, as a check on the completeness of the reports of communicable diseases in this city. You will never hear from it in any other way. It is desired that you sign the questionnaire, but this is not necessary if you prefer not to do so.

Respectfully,

SURGEON GENERAL

The questionnaire to be inclosed would read as follows:

#### REPORT OF COMMUNICABLE DISEASES

1. Check on the list given below the diseases which are and which are not reportable:

Disease	Reportable		Disease	Reportable	
	Yes	No		Yes	No
Actinomycosis.....			Plague.....		
Acute infectious conjunctivitis.....			Pneumonia (acute lobar).....		
Anchylostomiasis (hookworm).....			Polomyelitis.....		
Anthrax.....			Rabies.....		
Cerebrospinal meningitis (epi- demic).....			Rocky Mountain spotted or tick fever.....		
Chicken pox.....			Scarlet fever.....		
Cholera.....			Septic sore throat.....		
Dengue.....			Smallpox.....		
Diphtheria.....			Syphilis.....		
Dysentery (amebic).....			Tetanus.....		
Dysentery (bacillary).....			Trachoma.....		
Favus.....			Trichinosis.....		
German measles.....			Tuberculosis (pulmonary).....		
Glanders.....			Tuberculosis (other than pul- monary).....		
Gonorrhea.....			Typhoid fever.....		
Leprosy.....			Typhus fever.....		
Malaria.....			Whooping cough.....		
Measles.....			Yellow fever.....		
Mumps.....					
Paratyphoid fever.....					



2. Indicate on the list following this paragraph the number of cases of the diseases mentioned which you attended during the last four weeks and the number you reported to your health department. (Do not include those in which you were a consultant only, and which you know were reported by another physician.)

Disease	Attended	Reported	Disease	Attended	Reported
Diphtheria.....	-----	-----	Scarlet fever.....	-----	-----
Influenza.....	-----	-----	Smallpox.....	-----	-----
Measles.....	-----	-----	Tuberculosis.....	-----	-----
Pneumonia.....	-----	-----	Typhoid fever.....	-----	-----
Poliomyelitis.....	-----	-----	Whooping cough.....	-----	-----

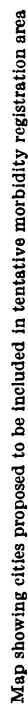
3. From your knowledge of the practices of the physicians of this city, is it your opinion that 95 per cent of them report at least 90 per cent of their cases of the following-named diseases:

Disease	95 per cent of physicians report 90 per cent of their cases (opinion)	
	Yes	No
Diphtheria.....	-----	-----
Influenza (deaths).....	-----	-----
Pneumonia (deaths).....	-----	-----
Poliomyelitis.....	-----	-----
Smallpox.....	-----	-----
Typhoid fever.....	-----	-----
Whooping cough.....	-----	-----

4. What is your estimate of the percentage of cases of the following-named diseases that are reported to your health department:

Disease	Estimate of cases reported (per cent)
Measles.....	-----
Scarlet fever.....	-----
Tuberculosis.....	-----

Finally we come to the question of the component units of the registration area itself, and I would recommend for inclusion the 91 cities noted on the map. These cities have an aggregate population of 27,700,000 and are selected because they are already regularly submitting weekly reports which are believed to be of the degree of accuracy stipulated, though if any of them should be found deficient on check they would be left out until the necessary requirements are met. Perhaps some cities have been omitted that deserve to be included. This can be determined later. It is possible that the States of Maryland and Massachusetts and the county of Harrison of the State of Mississippi might be able to qualify as units at once. Whether there are other States that could do so I am at present unable to say. I think it is quite possible. The health officers of the individual States will know better than I as to whether they could so qualify.



I may also say (and this is quite important) that the establishment of a registration area will not, for the time being at least, prevent the Public Health Service from receiving and publishing informally data from those States and cities which can not qualify as portions of the registration area, nor will it cease to publish such data as may be obtained with regard to diseases not included in the list I have indicated.

In concluding, I want to express my thanks to Doctor Fulton, Doctor Leathers, Doctor Kelley, Doctor Riley, Doctor Olin, and others for aid and encouragement; to my predecessors in my division; and to Mr. Jason Waterman, also of my division, for a foundation to work on; and to the Surgeon General and my colleagues for aid and encouragement, and for this opportunity of presenting the plan as outlined.

---

### **SMALLPOX IN MILWAUKEE—SPECIAL RULES RESCINDED**

The State health officer of Wisconsin, on June 24, 1925, rescinded the special rules for the control of smallpox in Milwaukee. These rules were adopted by the Wisconsin State Board of Health and became effective May 22, 1925. They read as follows:

Rule 1. Whenever within any square block in the city of Milwaukee there shall have developed within a period of 14 days cases of smallpox in three or more homes in such square block, then said square block, with all the houses abutting on the streets surrounding said square block, shall be known as an infected area and such area is hereby quarantined.

Rule 2. The commissioner of health of Milwaukee is hereby authorized to make such rules and regulations as he deems advisable for enforcing this quarantine, and shall have power to suspend the operation of this quarantine in respect to any person or persons in this infected area or any part thereof as he shall deem advisable.

Rule 3. These rules, regulations, and orders shall become null and void when the State health officer shall notify the commissioner of health of the city of Milwaukee that the emergency no longer exists.

The decrease in the number of cases of smallpox in Milwaukee was the reason for the decision that the emergency no longer existed.

---

### **ABSTRACT OF CURRENT PUBLIC HEALTH COURT DECISION**

*Pollution of public water supply enjoined.*—(Pennsylvania Supreme Court.) The complainants brought suit to enjoin the defendants from discharging acid mine waters into a stream from which, at a point below defendants' mines, the public was supplied with water and from which water was taken for use by the plaintiff railroad company. The drainage of the mine waters into the stream polluted it, and the court, after stating facts showing that public use was made of the stream, reached the conclusion that the defendants had "no

right of any kind to drain their mine waters into the stream, considering the public use which is made of its waters, and that their so doing constitutes a nuisance which must be restrained." (Pennsylvania R. Co. v. Sagamore Coal Co. et al., 126 Atl. 386.)

---

## **A METHOD OF PREPARING EFFECTIVE HEALTH POSTERS QUICKLY**

Occasions frequently arise in public health work, especially in times of epidemics, when there is urgent need for the speedy application of all measures that may aid in controlling an acute situation. One of the most important and effective of such measures, in many instances, is the use of specially prepared posters which will arrest attention and present a graphic lesson in prevention that is more effective than other forms of health education such as circulars and pamphlets. While there is nothing new in the method described below, its use and possibilities have probably been overlooked, and it is presented here merely as a suggestion to public health authorities who may have occasion to employ it.

During a recent outbreak of smallpox in the cities of Rock Island and Moline, Ill., and Davenport, Iowa, Acting Asst. Surg. H. W. Keatley, of the United States Public Health Service, was called upon to assist the local authorities in furnishing publicity material showing the value and necessity of vaccination against smallpox. As this material was needed immediately, and as there were no funds available for printing, he prepared some posters by making use of the photostat. He took two photographs of a severe case of the disease, pasted these photographs on a large cardboard 16 by 20 inches, and had the legends lettered on it. From this, by means of the photostat, he produced a negative and from the negative as many positives (as shown in the accompanying illustration) as were required. These posters were ready for distribution in less than 24 hours after Doctor Keatley had been called upon to assist the local health authorities.

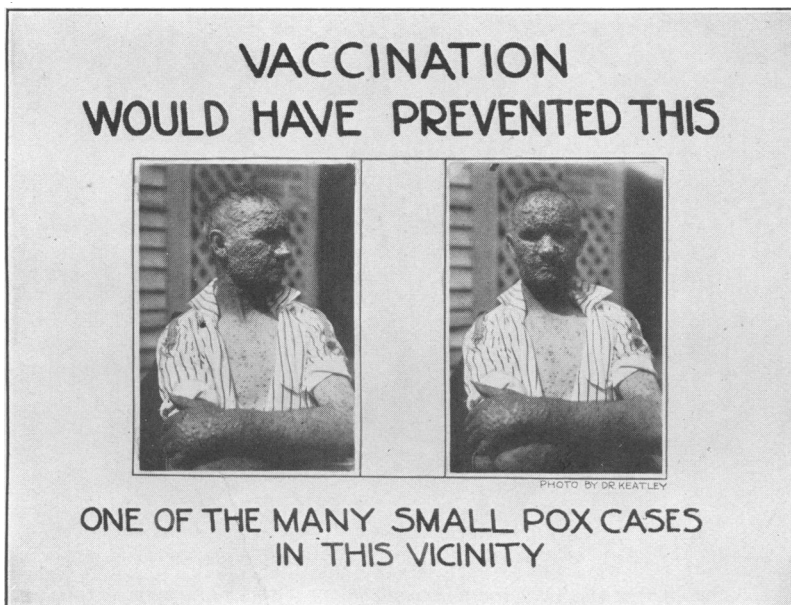
---

## **DEATH RATES IN A GROUP OF INSURED PERSONS**

**COMPARISON OF PRINCIPAL CAUSES OF DEATH, APRIL AND MAY, 1925, AND MAY AND YEAR, 1924**

The accompanying table is taken from the Statistical Bulletin for June, 1925, published by the Metropolitan Life Insurance Co., and presents the mortality experience of the company for the month of May, 1925, as compared with April and with May, 1924. The rates are based on a strength of approximately 16,000,000 insured persons.

For the fifth successive month of 1925 the death rate for this group of persons showed improvement over the corresponding month of



Appearance of finished poster, about 13 by 17 inches, prepared quickly by means of the photostat

last year. The rate for May (8.8 per 1,000) is stated to be the lowest ever recorded for that month, excepting for the year 1921, and to make this comparison the calculation must be carried to the second decimal place. This year's rate for May is nevertheless considered to mark a new low rate for that month, as it is based on an exposure to risk of several hundred thousand infant lives, whereas in 1921 no infants were insured.

The usual seasonal decline as compared with April (10.1 per 1,000) is shown. The Bulletin states:

"The table shows that a favorable report may be made for all of the more important diseases. The combined rate for the epidemic diseases of childhood continues remarkably low. Mortality from tuberculosis is much lower than ever before recorded for the month of May. The record for the degenerative diseases is altogether favorable. The heart disease death rate, as in April, shows a reduction as compared with 1924, which is the reverse of the experience for January, February, and March. Even diabetes, which for the majority of the months since midyear of 1924 has been registering increases, recorded declines in May and April. Deaths from maternal diseases fell sharply, both from the April, 1925, figure and from that of May, 1924.

"The fatal accident rate, however, rose slightly over last year's May figure, and there was again a sharp rise in automobile casualties. The homicide rate for the fifth successive month of 1925 showed an increase over the corresponding period of the preceding year."

*Death rates (annual basis) for principal causes per 100,000 lives exposed, April and May, 1925, and May and year, 1924*

[Industrial department, Metropolitan Life Insurance Co.]

Cause of death	Rate per 100,000 lives exposed <sup>1</sup>			
	May, 1925	April, 1925	May, 1924	Year 1924 <sup>2</sup>
Total, all causes.....	884.2	1,014.9	957.2	907.5
Typhoid fever.....	2.0	2.0	2.5	4.4
Measles.....	5.0	4.5	10.2	7.2
Scarlet fever.....	4.6	4.8	6.4	4.4
Whooping cough.....	7.9	8.8	8.0	7.4
Diphtheria.....	10.4	12.8	9.8	13.2
Influenza.....	25.0	44.5	18.8	16.0
Tuberculosis (all forms).....	102.6	105.4	111.5	104.5
Tuberculosis of respiratory system.....	87.6	92.3	101.6	92.6
Cancer.....	65.9	70.0	66.5	70.4
Diabetes mellitus.....	14.1	16.1	16.3	14.9
Cerebral hemorrhage.....	49.6	56.6	66.2	60.2
Organic diseases of heart.....	124.3	138.5	129.9	123.7
Pneumonia (all forms).....	94.7	134.0	103.8	88.8
Other respiratory diseases.....	14.2	16.8	17.0	13.9
Diarrhea and enteritis.....	19.0	17.5	20.7	32.2
Bright's disease (chronic nephritis).....	66.7	76.1	68.4	65.5
Puerperal state.....	15.4	18.9	17.6	16.8
Suicides.....	5.3	7.2	8.2	7.2
Homicides.....	6.7	7.7	5.4	7.1
Other external causes (excluding suicides and homicides).....	55.6	57.3	54.3	62.7
Traumatism by automobile.....	14.1	13.6	11.5	15.7
All other causes.....	195.1	215.2	215.6	187.0

<sup>1</sup> All figures include infants insured under 1 year of age.

<sup>2</sup> Based on provisional estimate of lives exposed to risk in 1924.

## DEATHS DURING WEEK ENDED JULY 11, 1925

Summary of information received by telegraph from industrial insurance companies for week ended July 11, 1925, and corresponding week of 1924. (From the Weekly Health Index, July 14, 1925, issued by the Bureau of the Census, Department of Commerce)

	Week ended July 11, 1925	Corresponding week, 1924
Policies in force.....	60, 488, 896	56, 537, 305
Number of death claims.....	9, 399	9, 565
Death claims per 1,000 policies in force, annual rate.....	8. 1	8. 8

Deaths from all causes in certain large cities of the United States during the week ended July 11, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, July 14, 1925, issued by the Bureau of the Census, Department of Commerce)

City	Week ended July 11, 1925		Annual death rate per 1,000 corre- sponding week, 1924	Deaths under 1 year		Infant mortality rate week ended July 11, 1925 <sup>2</sup>
	Total deaths	Death rate <sup>1</sup>		Week ended July 11, 1925	Corre- sponding week, 1924	
Total (66 cities).....	6, 306	11. 8	11. 3	748	676	61
Akron.....	32			2	6	22
Albany <sup>3</sup> .....	42	18. 3	11. 0	5	1	109
Atlanta.....	83			11	14	
Baltimore <sup>4</sup> .....	194	12. 7	12. 6	29	21	87
Birmingham.....	61	15. 5	13. 2	14	7	
Boston.....	210	14. 0	13. 6	21	25	56
Bridgeport.....	21			1	1	16
Buffalo.....	161	15. 2	10. 1	19	12	77
Cambridge.....	25	11. 6	13. 0	4	3	69
Camden.....	34	13. 8	13. 2	2	4	32
Chicago <sup>5</sup> .....	603	10. 5	9. 9	57	77	50
Cincinnati.....	93	11. 8	12. 3	12	10	71
Cleveland.....	188	10. 5	9. 8	23	26	57
Columbus.....	69	12. 9	13. 8	9	5	83
Dallas.....	42	11. 3	8. 9	9	2	
Dayton.....	28	8. 4	11. 4	3	6	47
Denver.....	74	13. 7	11. 7	5	14	
Des Moines.....	33	11. 5	6. 1	2	0	34
Detroit.....	228			43	42	74
Duluth.....	22	10. 4	13. 5	5	3	108
El Paso.....	33	16. 4		7		
Erie.....	16			0	2	0
Fall River <sup>6</sup> .....	23	9. 9	9. 0	5	6	72
Flint.....	22	8. 8	10. 1	4	3	63
Fort Worth.....	36	12. 3	9. 2	5	8	
Grand Rapids.....	44	15. 0	12. 0	8	3	126
Houston.....	50	15. 8	12. 4	8	8	
Indianapolis.....	101	14. 7	11. 0	11	5	78
Jersey City.....	57	9. 4	10. 5	6	5	43
Kansas City, Kans.....	37	15. 6	11. 1	6	4	127
Kansas City, Mo.....	99	14. 0	13. 3	6	7	
Los Angeles.....	196			25	23	69
Louisville.....	99	19. 9	13. 5	13	4	114
Lowell.....	35	15. 7	13. 5	3	7	52
Lynn.....	24	12. 0	10. 1	2	1	53
Memphis.....	56	16. 7	23. 9	6	11	
Milwaukee.....	75	7. 8	11. 1	6	14	28
Minneapolis.....	82	10. 1	9. 9	6	10	32
Nashville <sup>7</sup> .....	51	19. 5	19. 4	7	10	
New Bedford.....	24	9. 3	9. 0	7	2	116
New Haven.....	39	11. 4	11. 6	2	7	26
New Orleans.....	157	19. 7	18. 8	24	17	
New York.....	1, 210	10. 3	9. 9	163	132	65
Bronx Borough.....	153	8. 8	8. 0	16	12	55
Brooklyn Borough.....	382	8. 9	9. 3	56	50	58
Manhattan Borough.....	521	12. 0	11. 2	75	54	78
Queens Borough.....	109	9. 9	9. 2	12	13	56
Richmond Borough.....	45	17. 5	13. 6	4	3	72

*Deaths from all causes in certain large cities of the United States during the week ended July 11, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, July 14, 1925, issued by the Bureau of the Census, Department of Commerce)—Continued*

City	Week ended July 11, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate week ended July 11, 1925 <sup>1</sup>
	Total deaths	Death rate <sup>1</sup>		Week ended July 11, 1925	Corresponding week, 1924	
Newark, N. J.	113	13.0	7.6	17	10	77
Norfolk	36			5	9	92
Oakland	48	9.9	9.5	7	6	81
Oklahoma City	21			5	6	
Omaha	54	13.3	10.8	2	5	21
Paterson	27	9.9	13.3	0	4	0
Philadelphia	395	10.4	10.6	51	47	64
Pittsburgh	127	10.5	12.4	19	14	63
Portland, Oreg.	52	9.6	13.5	4	6	40
Providence	63	13.4	10.5	3	4	24
Richmond	61	17.1	11.4	11	4	131
Rochester	68	10.7	9.5	4	6	32
St. Louis	239	15.2	13.2	23	11	
St. Paul	49	10.4	14.3	3	5	25
Salt Lake City <sup>1</sup>	27	10.8	15.8	5	6	78
San Antonio	66	17.4	14.4	18	11	
San Diego	31	15.2	20.5	2	2	47
San Francisco	151	14.1	14.4	8	7	46
Schenectady	16	8.2	6.2	2	2	58
Seattle	57			6	1	53
Somerville	18	9.2	9.9	1	1	27
Spokane	23	11.0	10.0	3	1	67
Springfield, Mass.	31	10.6	10.5	4	3	60
Syracuse	54	14.7	13.3	1	6	13
Tacoma	16	8.0	10.1	1	1	23
Toledo	61	11.1	13.0	4	7	36
Trenton	44	17.4	17.3	6	2	99
Washington, D. C.	117	12.3	11.6	12	12	67
Waterbury	17			3	2	65
Wilmington, Del.	29	12.4	7.8	2	1	45
Worcester	43	11.3	14.7	5	4	58
Yonkers	19	8.9	7.1	3	3	66
Youngstown	31	10.1	7.7	5	5	62

<sup>1</sup> Annual rate per 1,000 population.

<sup>2</sup> Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1924. Cities left blank are not in the registration area for births.

<sup>3</sup> Data for 65 cities.

<sup>4</sup> Data for 61 cities.

<sup>5</sup> Deaths for week ended Friday, July 10, 1925.



# 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 WEEKLY STATE REPORTS

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 July 18, 1925

ALABAMA		CALIFORNIA	
	Cases		Cases
Cerebrospinal meningitis.....	2	Cerebrospinal meningitis—Ukiah.....	1
Chicken pox.....	6	Diphtheria.....	55
Dengue.....	1	Influenza.....	6
Diphtheria.....	13	Leprosy—Sacramento County.....	1
Influenza.....	2	Lethargic encephalitis:	
Malaria.....	98	Colton.....	1
Measles.....	6	San Francisco.....	1
Mumps.....	9	Measles.....	34
Pellagra.....	21	Poliomyelitis:	
Pneumonia.....	8	Berkeley.....	1
Poliomyelitis.....	5	Bishop.....	1
Scarlet fever.....	19	Contracosta County.....	1
Smallpox.....	20	Fresno County.....	2
Tuberculosis.....	31	Kern County.....	1
Typhoid fever.....	105	Long Beach.....	1
Whooping cough.....	16	Los Angeles.....	21
		Los Angeles County.....	3
ARIZONA		Oakland.....	2
Diphtheria.....	2	Orange County.....	1
Dysentery.....	1	Pomona.....	1
Measles.....	4	Sacramento.....	2
Pneumonia.....	1	Sacramento County.....	1
Scarlet fever.....	2	San Diego.....	1
Tuberculosis.....	59	San Francisco.....	1
Typhoid fever.....	2	Venice.....	1
Whooping cough.....	6	Scarlet fever.....	42
ARKANSAS		Smallpox:	
Cerebrospinal meningitis.....	1	Los Angeles.....	25
Chicken pox.....	17	Scattering.....	24
Diphtheria.....	1	Typhoid fever.....	16
Hookworm disease.....	4		
Influenza.....	17	COLORADO	
Malaria.....	113	(Exclusive of Denver)	
Measles.....	9	Diphtheria.....	12
Mumps.....	12	Mumps.....	2
Paratyphoid fever.....	3	Scarlet fever.....	3
Pellagra.....	13	Smallpox.....	1
Scarlet fever.....	3	Tuberculosis.....	23
Trachoma.....	1	Typhoid fever.....	2
Tuberculosis.....	13	Whooping cough.....	10
Typhoid fever.....	68		
Whooping cough.....	11		

## CONNECTICUT

	Cases
Cerebrospinal meningitis.....	2
Chicken pox.....	14
Diphtheria.....	25
German measles.....	4
Lethargic encephalitis.....	2
Malaria.....	2
Measles.....	58
Mumps.....	5
Pneumonia (all forms).....	15
Poliomyelitis.....	1
Scarlet fever.....	21
Tetanus.....	8
Tuberculosis (all forms).....	47
Typhoid fever.....	4
Whooping cough.....	106

## DELAWARE

Measles.....	6
Mumps.....	1
Tuberculosis.....	4
Typhoid fever.....	7
Whooping cough.....	5

## FLORIDA

Chicken pox.....	1
Diphtheria.....	7
Influenza.....	6
Malaria.....	9
Mumps.....	2
Pneumonia.....	2
Scarlet fever.....	3
Tuberculosis.....	7
Typhoid fever.....	9
Whooping cough.....	3

## GEORGIA

Chicken pox.....	1
Conjunctivitis.....	2
Dengue.....	2
Diphtheria.....	7
Dysentery.....	9
Hookworm disease.....	7
Influenza.....	3
Malaria.....	78
Measles.....	2
Mumps.....	10
Paratyphoid fever.....	9
Pellagra.....	8
Pneumonia.....	7
Poliomyelitis.....	3
Scarlet fever.....	4
Septic sore throat.....	1
Smallpox.....	4
Tetanus.....	1
Tuberculosis.....	20
Typhoid fever.....	66
Typhus fever.....	2
Whooping cough.....	24

## ILLINOIS

Diphtheria:	
Cook County.....	46
Scattering.....	12
Influenza.....	4
Measles.....	239
Pneumonia.....	72

## ILLINOIS—continued

	Cases
Poliomyelitis:	
Cook County.....	3
McHenry County.....	1
Morgan County.....	1
Scarlet fever:	
Cook County.....	32
Scattering.....	31
Smallpox:	
Cook County.....	5
Scattering.....	7
Tuberculosis.....	250
Typhoid fever:	
Cook County.....	5
Scattering.....	39
Whooping cough.....	255

## INDIANA

Cerebrospinal meningitis—Marion.....	1
Chicken pox.....	24
Diphtheria.....	17
Influenza.....	24
Measles.....	56
Pneumonia.....	2
Scarlet fever.....	21
Smallpox.....	23
Tuberculosis.....	50
Typhoid fever.....	33
Whooping cough.....	52

## IOWA

Diphtheria.....	4
Scarlet fever.....	9
Smallpox.....	3

## KANSAS

Chicken pox.....	11
Diphtheria.....	9
Dysentery.....	2
Measles.....	1
Mumps.....	35
Pellagra.....	1
Pneumonia.....	6
Poliomyelitis.....	1
Scarlet fever.....	13
Smallpox.....	8
Tetanus.....	2
Tuberculosis.....	43
Typhoid fever.....	31
Whooping cough.....	111

## LOUISIANA

Diphtheria.....	7
Leprosy.....	1
Malaria.....	11
Paratyphoid fever.....	2
Pneumonia.....	17
Scarlet fever.....	7
Smallpox.....	2
Tuberculosis.....	29
Typhoid fever.....	71
Whooping cough.....	30

## MAINE

Chicken pox.....	5
Diphtheria.....	2
German measles.....	1

## MAINE—continued

	Cases
Measles.....	7
Mumps.....	11
Pneumonia.....	3
Scarlet fever.....	4
Tetanus.....	4
Tuberculosis.....	5
Typhoid fever.....	2
Whooping cough.....	1

MARYLAND<sup>1</sup>

Chicken pox.....	14
Diphtheria.....	10
Dysentery.....	21
German measles.....	7
Influenza.....	1
Malaria.....	4
Measles.....	29
Mumps.....	22
Pellagra.....	1
Pneumonia (broncho).....	5
Pneumonia (lobar).....	7
Poliomyelitis.....	2
Rabies.....	1
Scarlet fever.....	5
Tetanus.....	1
Tuberculosis.....	51
Typhoid fever.....	18
Whooping cough.....	109

## MASSACHUSETTS

Cerebrospinal meningitis.....	3
Chicken pox.....	58
Conjunctivitis (suppurative).....	12
Diphtheria.....	52
German measles.....	31
Hookworm disease.....	1
Lethargic encephalitis.....	3
Measles.....	276
Mumps.....	19
Ophthalmia neonatorum.....	17
Pellagra.....	1
Pneumonia (lobar).....	35
Poliomyelitis.....	2
Scarlet fever.....	49
Septic sore throat.....	1
Tetanus.....	1
Trachoma.....	1
Tuberculosis (pulmonary).....	123
Tuberculosis (other forms).....	20
Typhoid fever.....	27
Whooping cough.....	142

## MICHIGAN

Diphtheria.....	43
Measles.....	84
Pneumonia.....	33
Scarlet fever.....	98
Smallpox.....	5
Tuberculosis.....	65
Typhoid fever.....	13
Whooping cough.....	215

## MINNESOTA

Chicken pox.....	95
Diphtheria.....	39
Measles.....	7

## MINNESOTA—continued

	Cases
Poliomyelitis.....	19
Scarlet fever.....	65
Smallpox.....	5
Tuberculosis.....	84
Typhoid fever.....	4
Whooping cough.....	22

## MISSISSIPPI

Diphtheria.....	4
Scarlet fever.....	9
Smallpox.....	12
Typhoid fever.....	64

## MISSOURI

(Exclusive of Kansas City)

Chicken pox.....	10
Diphtheria.....	22
Measles.....	8
Mumps.....	9
Pneumonia.....	4
Scarlet fever.....	34
Smallpox.....	6
Tetanus.....	4
Trachoma.....	2
Tuberculosis.....	67
Typhoid fever.....	40
Whooping cough.....	68

## MONTANA

Chicken pox.....	6
Diphtheria.....	2
Mumps.....	2
Pneumonia.....	1
Poliomyelitis.....	1
Scarlet fever.....	13
Smallpox.....	6
Tuberculosis.....	13
Typhoid fever.....	4
Whooping cough.....	4

## NEW JERSEY

Cerebrospinal meningitis.....	4
Chicken pox.....	39
Diphtheria.....	56
Dysentery.....	1
Influenza.....	3
Malaria.....	1
Measles.....	163
Pneumonia.....	34
Poliomyelitis.....	7
Scarlet fever.....	44
Smallpox.....	5
Typhoid fever.....	26
Whooping cough.....	225

## NEW MEXICO

Chicken pox.....	4
Diphtheria.....	16
Malaria.....	2
Mumps.....	5
Pneumonia.....	3
Rabies in animals.....	2
Scarlet fever.....	1
Tuberculosis.....	8
Tularaemia.....	2
Typhoid fever.....	3
Whooping cough.....	6

<sup>1</sup>Week ended Friday.

NEW YORK		Cases
(Exclusive of New York City)		
Cerebrospinal meningitis.....	2	
Diphtheria.....	61	
Influenza.....	6	
Lethargic encephalitis.....	2	
Measles.....	183	
Pneumonia.....	57	
Poliomyelitis.....	18	
Scarlet fever.....	49	
Smallpox.....	3	
Typhoid fever.....	30	
Whooping cough.....	232	
NORTH CAROLINA		
Chicken pox.....	3	
Diphtheria.....	24	
German measles.....	1	
Measles.....	6	
Scarlet fever.....	6	
Septic sore throat.....	1	
Smallpox.....	12	
Trachoma.....	1	
Typhoid fever.....	72	
Whooping cough.....	109	
OKLAHOMA		
(Exclusive of Oklahoma City and Tulsa)		
Cerebrospinal meningitis:		
Grady.....	1	
Leflore.....	1	
Osage.....	1	
Chicken pox.....	2	
Diphtheria.....	3	
Influenza.....	14	
Malaria.....	96	
Mumps.....	15	
Pellagra.....	14	
Pneumonia.....	8	
Poliomyelitis:		
Blaine.....	1	
Choctaw.....	1	
Washington.....	1	
Scarlet fever.....	10	
Smallpox.....	6	
Typhoid fever:		
Garvin.....	11	
Johnston.....	11	
Stephens.....	12	
Washington.....	20	
Scattering.....	54	
Whooping cough.....	29	
OREGON		
Cerebrospinal meningitis.....	1	
Chicken pox.....	6	
Diphtheria.....	5	
Dysentery.....	2	
Measles.....	1	
Mumps.....	2	
Pneumonia.....	12	
Scarlet fever.....	13	
Smallpox.....	4	
Tuberculosis.....	14	
Typhoid fever.....	5	
Whooping cough.....	4	

<sup>1</sup> Deaths.

SOUTH DAKOTA		Cases
Diphtheria.....	4	
Measles.....	5	
Poliomyelitis.....	1	
Scarlet fever.....	11	
Smallpox.....	2	
Tuberculosis.....	5	
Whooping cough.....	8	
TEXAS		
Chicken pox.....	2	
Diphtheria.....	12	
Measles.....	4	
Mumps.....	8	
Paratyphoid fever.....	5	
Pellagra.....	6	
Pneumonia.....	2	
Poliomyelitis.....	3	
Scarlet fever.....	2	
Smallpox.....	3	
Tuberculosis.....	38	
Typhoid fever.....	37	
Typhus fever.....	2	
Whooping cough.....	24	
VERMONT		
Chicken pox.....	5	
Diphtheria.....	3	
Measles.....	12	
Mumps.....	3	
Scarlet fever.....	3	
Whooping cough.....	5	
VIRGINIA		
Poliomyelitis—Rockbridge County.....	1	
Smallpox—Roanoke.....	1	
WASHINGTON		
Cerebrospinal meningitis:		
Spokane.....	3	
Thurston County.....	1	
Chicken pox.....	33	
Diphtheria.....	19	
German measles.....	5	
Measles.....	3	
Mumps.....	42	
Pneumonia.....	4	
Scarlet fever.....	25	
Smallpox.....	50	
Tuberculosis.....	13	
Typhoid fever.....	13	
Whooping cough.....	103	
WEST VIRGINIA		
Scarlet fever.....	4	
Smallpox.....	6	
Typhoid fever.....	3	
WISCONSIN		
Milwaukee:		
Chicken pox.....	15	
Diphtheria.....	11	
Measles.....	32	
Mumps.....	12	
Pneumonia.....	6	
Scarlet fever.....	5	
Smallpox.....	2	
Tuberculosis.....	23	
Whooping cough.....	39	

## WISCONSIN—continued

Scattering:	Cases
Chicken pox.....	33
Diphtheria.....	26
German measles.....	22
Influenza.....	2
Lethargic encephalitis.....	1
Measles.....	63
Mumps.....	34

## WISCONSIN—continued

	Cases
Pneumonia.....	3
Poliomyelitis.....	13
Scarlet fever.....	47
Smallpox.....	7
Tuberculosis.....	27
Typhoid fever.....	3
Whooping cough.....	119

## Reports for Week Ended July 11, 1925

## DISTRICT OF COLUMBIA

	Cases
Diphtheria.....	4
Measles.....	25
Pneumonia.....	7
Scarlet fever.....	6
Tuberculosis.....	26
Typhoid fever.....	3
Whooping cough.....	22

## NEBRASKA

Chicken pox.....	1
Diphtheria.....	6
Measles.....	1
Mumps.....	4
Scarlet fever.....	2
Smallpox.....	2
Typhoid fever.....	2
Whooping cough.....	17

## NORTH DAKOTA

	Cases
Cerebrospinal meningitis.....	1
Chicken pox.....	4
Diphtheria.....	1
Mumps.....	8
Pneumonia.....	2
Poliomyelitis.....	6
Scarlet fever.....	9
Smallpox.....	1
Tuberculosis.....	1
Whooping cough.....	21

## WYOMING

Chicken pox.....	2
German measles.....	1
Influenza.....	1
Mumps.....	1
Scarlet fever.....	4
Smallpox.....	1
Whooping cough.....	4

## SUMMARY OF MONTHLY REPORTS FROM STATES

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

State	Cerebrospinal meningitis	Diphtheria	Influenza	Malaria	Measles	Pellagra	Poliomyelitis	Scarlet fever	Smallpox	Typhoid fever
<i>May, 1925</i>										
Georgia.....	3	34	491	279	88	70	1	25	128	155
<i>June, 1925</i>										
Delaware.....	0	4	1		41		2	4	2	3
District of Columbia.....	0	31	0		106	0	0	44	2	8
Florida.....	2	42	51	48	12	17	7	12	19	70
Indiana.....	3	78	74					292		45
Missouri.....	4	176	9	6	61	0	1	390	99	41
North Carolina.....	2	82			36		11	43	174	159
Oklahoma <sup>1</sup> .....	4	28	129	187	15	52	4	58	37	295
Vermont.....	0	6	0		203		0	26	0	1
Wyoming.....		5	1					23	2	3

<sup>1</sup> Cities of Tulsa and Oklahoma excluded.

**Number of Cases of Certain Communicable Diseases Reported for the Month  
of April, 1925, by State Health Officers**

	Chick- en pox	Diph- theria	Mea- sles	Mumps	Scarlet fever	Small- pox	Tuber- culosis	Ty- phoid fever	Whoop- ing cough
Alabama.....	210	34	90	239	104	497	207	48	98
Arizona.....	20	14	171	42	36	5	94	2	35
Arkansas.....	65	13	104	162	19	38	1 56	27	73
California.....	1,423	560	555	1,824	620	827	1,119	54	2,060
Colorado.....	136	86	28	371	107	2	1 67	8	45
Connecticut.....	207	138	780	126	480	2	174	11	402
Delaware.....	10	8	37	18	17	1	19	1	9
District of Columbia.....	88	31	194	---	106	26	142	4	72
Florida.....	72	33	24	417	25	32	157	76	65
Georgia.....	182	59	92	372	28	46	1 141	42	206
Idaho.....	---	15	---	---	13	---	---	11	---
Illinois.....	830	391	5,985	1,037	1,772	215	1,101	58	1,352
Indiana.....	---	119	---	---	856	---	---	25	---
Iowa.....	94	65	37	62	131	37	8	(*)	34
Kansas.....	325	68	61	938	397	35	287	6	127
Kentucky <sup>1</sup> .....	---	---	---	---	---	---	---	---	---
Louisiana.....	69	53	8	4	50	83	1 172	98	87
Maine.....	120	12	85	406	85	---	48	12	24
Maryland.....	387	132	154	379	280	6	440	22	405
Massachusetts.....	612	394	3,846	335	1,148	1	703	42	622
Michigan.....	527	307	1,039	381	1,605	93	668	38	637
Minnesota.....	357	259	77	---	928	73	307	12	72
Mississippi.....	777	51	605	2,091	14	145	357	134	783
Missouri.....	293	264	79	298	1,061	61	278	24	104
Montana.....	56	36	97	83	144	35	71	5	21
Nebraska.....	---	42	---	---	66	---	---	1	---
Nevada <sup>1</sup> .....	---	---	---	---	---	---	---	---	---
New Hampshire <sup>1</sup> .....	---	---	---	---	---	---	---	---	---
New Jersey.....	616	310	1,322	---	1,172	23	487	24	1,083
New Mexico.....	31	9	74	49	32	2	80	7	46
New York.....	1,747	1,576	3,258	1,374	2,898	14	1,893	142	1,597
North Carolina.....	501	90	97	---	107	350	---	10	442
North Dakota.....	41	19	16	43	136	33	5	1	105
Ohio.....	950	294	1,258	557	1,827	539	824	42	849
Oklahoma.....	140	---	21	105	---	77	151	29	144
Oregon.....	93	131	16	171	125	31	70	14	97
Pennsylvania.....	1,282	957	7,289	2,516	2,534	63	663	69	1,006
Rhode Island.....	---	49	---	---	143	27	---	4	---
South Carolina.....	45	146	18	13	28	129	282	84	638
South Dakota.....	49	13	4	5	199	57	10	---	11
Tennessee.....	170	42	264	6	145	221	174	22	171
Texas <sup>1</sup> .....	---	---	---	---	---	---	---	---	---
Utah.....	321	39	18	272	35	---	6	30	346
Vermont.....	96	17	23	224	63	---	1 19	3	13
Virginia.....	569	83	970	---	106	19	1 141	70	728
Washington.....	387	105	22	538	119	196	128	13	544
West Virginia.....	170	51	481	---	170	96	67	40	113
Wisconsin.....	707	203	2,440	1,727	719	157	212	25	413
Wyoming.....	22	7	53	46	34	---	1	2	31

<sup>1</sup> Pulmonary.<sup>2</sup> Reports not required by law.<sup>3</sup> Reports received weekly.<sup>4</sup> Reports received annually.

## Case Rates Per 1,000 Population (Annual Basis) for the Month of April, 1925

	Chick- en pox	Diph- theria	Meas- les	Mumps	Scarlet fever	Small- pox	Tuber- culosis	Ty- phoid fever	Whoop- ing cough
Alabama.....	1.08	0.17	0.46	1.23	0.53	2.85	1.06	0.25	0.50
Arizona.....	.62	.43	5.31	1.30	1.12	.16	2.92	.06	1.09
Arkansas.....	.44	.09	.71	1.11	.13	.26	1.28	.18	.50
California.....	4.48	1.76	1.75	5.75	1.95	2.61	3.52	.17	6.49
Colorado.....	1.69	1.07	.35	4.61	1.33	.02	1.83	.10	.56
Connecticut.....	1.71	1.14	6.45	1.04	3.97	.02	1.44	.09	3.33
Delaware.....	.54	.43	2.00	.97	.92	.05	1.03	.05	.49
District of Columbia.....	2.24	.79	4.94		2.70	.66	3.61	.10	1.83
Florida.....	.84	.38	.28	4.84	.29	.37	1.82	.88	.75
Georgia.....	.75	.24	.38	1.54	.12	.19	.58	.17	.85
Idaho.....		.39			.33			.28	
Illinois.....	1.51	.71	10.89	1.89	3.22	.39	2.00	.11	2.46
Indiana.....		.49			3.54			.10	
Iowa.....	.48	.33	.19	.31	.66	.19	.04	( <sup>9</sup> )	.17
Kansas.....	2.27	.47	.43	6.55	2.77	.24	2.00	.04	.89
Kentucky <sup>1</sup> .....									
Louisiana.....	.47	.36	.05	.03	.34	.56	1.16	.66	.59
Maine.....	1.94	.19	1.38	6.57	1.38		.78	.19	.39
Maryland.....	3.19	1.09	1.27	3.12	2.31	.05	3.63	.18	3.34
Massachusetts.....	1.88	1.21	11.80	1.03	3.52	.00	2.16	.13	1.91
Michigan.....	1.61	.94	3.17	1.16	4.89	.28	2.04	.12	1.94
Minnesota.....	1.76	1.28	.38		4.50	.36	1.52	.06	.36
Mississippi.....	5.50	.36	4.28	14.79	.10	1.03	2.53	.95	5.54
Missouri.....	1.03	.96	.29	1.09	3.88	.22	1.02	.09	.38
Montana.....	1.10	.70	1.90	1.63	2.82	.69	1.39	.10	.41
Nebraska.....		.39			.62			.01	
Nevada <sup>1</sup> .....									
New Hampshire <sup>1</sup> .....									
New Jersey.....	2.22	1.12	4.78		4.23	.08	1.76	.09	3.91
New Mexico.....	1.04	.30	2.47	1.64	1.07	.07	2.67	.23	1.54
New York.....	1.99	1.80	3.72	1.57	3.31	.02	2.16	.16	1.82
North Carolina.....	2.30	.41	.45		.49	1.61		.05	2.03
North Dakota.....	.76	.35	.30	.79	2.51	.61	.09	.02	1.94
Ohio.....	1.90	.59	2.52	1.12	3.66	1.08	1.65	.08	1.70
Oklahoma.....	.79		.12	.59		.44	.85	.16	.81
Oregon.....	1.39	1.96	.24	2.56	1.87	.46	1.05	.21	1.45
Pennsylvania.....	1.74	1.30	9.91	3.42	3.44	.09	.90	.09	1.37
Rhode Island.....		.97			2.83	.53		.08	
South Carolina.....	.32	1.04	.13	.09		.92	2.01	.60	4.54
South Dakota.....	.93	.25	.06	.10	3.78	1.08	.19		.21
Tennessee.....	.89	.22	1.38	.03	.76	1.15	.91	.11	.89
Texas <sup>1</sup> .....									
Utah.....	8.26	1.00	.46	7.00	.99		.15	.26	8.90
Vermont.....	3.45	.61	.83	8.05	2.26		1.68	.11	.47
Virginia.....	2.94	.43	5.02		.55	.10	.73	.36	3.76
Washington.....	3.32	.90	.19	4.61	1.02	1.68	1.10	.11	4.66
West Virginia.....	1.34	.40	3.81		1.34	.76	.53	.32	.89
Wisconsin.....	3.20	.92	11.03	7.81	3.25	.71	.96	.11	1.87
Wyoming.....	1.26	.40	3.03	2.63	1.94		.06	.11	1.77

<sup>1</sup> Pulmonary.<sup>2</sup> Reports not required by law.<sup>3</sup> Reports received weekly.<sup>4</sup> Reports received annually.

## PLAGUE-ERADICATIVE MEASURES IN THE UNITED STATES

The following items were taken from the reports of plague-eradicative measures from the cities named:

*Los Angeles, Calif.*

2 weeks ended July 4, 1925:

Number of rats trapped.....	1,751
Number of rats found plague infected.....	1
Number of squirrels examined.....	1,623
Number of squirrels found plague infected.....	0

Date of discovery of last plague-infected rat, June 25, 1925.

*Oakland, Calif.*

(Including other East Bay communities)

## Week ended July 4, 1925:

Number of rats trapped.....	1, 341
Number of rats found to be plague infected.....	0
Number of squirrels examined.....	630
Number of squirrels found to be plague infected.....	0

## Totals:

Number of rats trapped Jan. 1 to July 4, 1925.....	57, 072
Number of rats found to be plague infected.....	21
Number of squirrels examined May 1 to July 4, 1925.....	5, 130
Number of squirrels found to be plague infected.....	0

Date of discovery of last plague-infected rat, Mar. 4, 1925.

Date of last human case, Sept. 10, 1919.

*New Orleans, La.*

## Week ended July 4, 1925:

Number of vessels inspected.....	242
Number of inspections made.....	559
Number of vessels fumigated with cyanide gas.....	12
Number of rodents examined for plague.....	3, 130
Number of rodents found to be plague infected.....	0

## Totals, Dec. 5, 1924, to July 4, 1925:

Number of rodents examined for plague.....	137, 128
Number of rodents found to be plague infected.....	12

Date of discovery of last plague-infected rat, Jan. 17, 1925.

Date of last human case occurring in New Orleans, Aug. 20, 1920.

**POLIOMYELITIS IN SOUTH CAROLINA**

IN PUBLIC HEALTH REPORTS for July 10, 1925, page 1049, a brief note was printed regarding the prevalence of poliomyelitis in South Carolina as reported to the State health officer. The following paragraphs are taken from a letter dated July 9, 1925, sent out by Dr. James A. Hayne, the State health officer, to the physicians in the State, requesting further information regarding cases which have come to their attention:

The situation as regards poliomyelitis (infantile paralysis) in South Carolina, while disquieting, has not been severe enough to justify drastic measures in any part of the State. The State board of health so far has been informed of 70 cases, a greater number than has been reported up to this date (July 9) in any summer record. The outbreak has been chiefly in the northern counties, apparently subsiding in one county while extending in some other county attacked later. The greatest number of cases reported for any one county has been 16.

The evidence goes to show that though the patient himself harbors the virus, the disease is spread largely through "carriers." Children should therefore be protected from such close contact with others, even with their parents, as would expose them to nose and throat



secretions. On account of the probably large and entirely unknown number of "carriers" in a community, definite protective measures are difficult, but much can be done by insuring that the cases come under medical attention early and remain under competent supervision.

#### GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

*Diphtheria.*—For the week ended July 4, 1925, 35 States reported 806 cases of diphtheria. For the week ended July 5, 1924, the same States reported 1,081 cases of this disease. One hundred and one cities, situated in all parts of the country, and having an aggregate population of more than 27,250,000, reported 489 cases of diphtheria for the week ended July 4, 1925. Last year, for the corresponding week, they reported 620 cases. The estimated expectancy for these cities was 709 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

*Measles.*—Thirty-two States reported 2,159 cases of measles for the week ended July 4, 1925, and 3,468 cases of this disease for the week ended July 5, 1924. One hundred and one cities reported 1,199 cases of measles for the week this year, and 1,131 cases last year.

*Scarlet fever.*—Scarlet fever was reported for the week as follows: 35 States—this year, 1,035 cases; last year, 1,210 cases; 101 cities—this year, 504 cases; last year, 532; estimated expectancy, 443 cases.

*Smallpox.*—For the week ended July 4, 1925, 35 States reported 306 cases of smallpox. Last year for the corresponding week they reported 570 cases. One hundred and one cities reported smallpox for the week as follows: 1925, 78 cases; 1924, 155 cases; estimated expectancy, 75 cases. Six deaths from smallpox were reported by these cities for the week this year—two at Milwaukee, Wis., and one each at Philadelphia, Pa., Cleveland, Ohio, Superior, Wis., and St. Paul, Minn.

*Typhoid fever.*—Six hundred and forty-two cases of typhoid fever were reported for the week ended July 4, 1925, by 34 States. For the corresponding week of 1924 the same States reported 392 cases. One hundred and one cities reported 186 cases of typhoid fever for the week this year, and 128 cases for the corresponding week last year. The estimated expectancy for these cities was 116 cases.

*Influenza and pneumonia.*—Deaths from influenza and pneumonia (combined) were reported for the week by 101 cities as follows: 1925, 323 deaths; 1924, 354 deaths.

## City reports for week ended July 4, 1925

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	Population July 1, 1923, estimated	Chicken pox, cases re-ported	Diphtheria		Influenza		Meas-les, cases re-ported	Mumps, cases re-ported	Pneu-monia, deaths re-ported
			Cases, esti-mated expec-tancy	Cases re-ported	Cases re-ported	Deaths re-ported			
NEW ENGLAND									
Maine:									
Portland	73, 129	0	1	1	0	0	1	0	1
New Hampshire:									
Concord	22, 408	0	0	0	0	0	3	0	0
Vermont:									
Barre	10, 008	0	0	0	0	0	1	0	0
Burlington	23, 613	0	0	0	0	0	0	2	0
Massachusetts:									
Boston	770, 400		48						
Fall River	120, 912	0	2	2	0	0	23	0	0
Springfield	144, 227	0	2	3	0	0	1	0	0
Worcester	191, 927	5	3	5	0	0	25	1	4
Rhode Island:									
Pawtucket	68, 799	0	1	0	0	0	1	0	0
Providence	242, 378	0	8	6	0	1	2	0	2
Connecticut:									
Bridgeport	143, 555	0	4	4	0	0	4	1	1
Hartford	138, 036	1	5	0	0	0	2	2	1
New Haven	172, 967	0	2	0	0	0	18	0	2
MIDDLE ATLANTIC									
New York:									
Buffalo	536, 718	2	11	4	2	0	68	1	5
New York	5, 927, 625	76	219	199	1	3	90	9	70
Rochester	317, 867		5	5		0	47	0	2
Syracuse	184, 511	11	5	1		0	9	7	1
New Jersey:									
Camden	124, 157	4	3	1		0	13	0	2
Newark	438, 699	31	13	7	1	0	66	1	6
Trenton	127, 390	2	3	1	0	0	6	0	1
Pennsylvania:									
Philadelphia	1, 922, 788	50	49	51		1	108	8	23
Pittsburgh	613, 442	15	16	7		0	85	4	11
Reading	110, 917	1	2	3	0	0	18	2	1
Scranton	140, 636	1	2	5	0	0	0	0	1
EAST NORTH CENTRAL									
Ohio:									
Cincinnati	406, 312	1	7	1	0	1	0	2	5
Cleveland	888, 519	56	20	9	0	3	28	6	7
Columbus	261, 082	0	2	1		0	4	0	4
Toledo	268, 338	24	5	7		0	53	0	0
Indiana:									
Fort Wayne	93, 573	5	2	0	0	0	2	0	0
Indianapolis	342, 718	1	5	0		0	11	1	3
South Bend	76, 709	0	1	2	0	0	0	0	3
Terre Haute	68, 939	0	0	0	0	0	7	0	0
Illinois:									
Chicago	2, 886, 121	52	88	62	4	2	202	7	21
Cicero	55, 968		1						
Springfield	61, 833	1	1	3	0	0	23	2	1
Michigan:									
Detroit	995, 668	20	42	27	0	1	13	2	12
Flint	117, 968	1	3	1	0	0	8	0	1
Grand Rapids	145, 947	4	2	0	0	0	42	0	2

<sup>1</sup> Population Jan. 1, 1920.

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Population July 1, 1923, estimated	Chick- en pox, cases re-ported	Diphtheria		Influenza		Meas- les, cases re-ported	Mumps, cases re-ported	Pneu- monia, deaths re-ported
			Cases, esti- mated expec- tancy	Cases re-ported	Cases re-ported	Deaths re-ported			
EAST NORTH CENTRAL— continued									
Wisconsin:									
Madison.....	42,519	3	0	0	0	0	0	0	0
Milwaukee.....	484,595	19	11	10	0	0	90	11	0
Racine.....	64,393	1	1	0	0	0	0	0	0
Superior.....	139,671	0	0	0	0	0	0	0	1
WEST NORTH CENTRAL									
Minnesota:									
Duluth.....	106,289	11	1	0	0	0	0	0	0
Minneapolis.....	409,125	45	10	20	0	0	1	2	1
St. Paul.....	241,891	19	11	7	0	0	1	5	8
Iowa:									
Davenport.....	61,262	0	1	0	0	0	0	0	0
Des Moines.....	140,923	1	1	3	0	0	0	0	0
Sioux City.....	79,662	1	1	2	0	0	0	2	0
Waterloo.....	39,667	0	0	0	0	0	0	0	0
Missouri:									
Kansas City.....	351,819	0	5	0	0	0	1	5	6
St. Joseph.....	78,232	2	1	0	0	0	0	1	0
St. Louis.....	803,853	4	27	32	0	0	12	6	0
North Dakota:									
Fargo.....	24,841	1	0	0	0	0	0	4	0
Grand Forks.....	14,547	1	0	0	0	0	0	0	0
South Dakota:									
Aberdeen.....	15,829	0	0	0	0	0	0	0	0
Sioux Falls.....	29,206	0	0	0	0	0	0	0	0
Nebraska:									
Lincoln.....	58,761	0	1	1	0	0	0	1	1
Omaha.....	204,382	6	3	2	0	0	0	0	4
Kansas:									
Topeka.....	52,555	0	1	0	0	0	0	5	0
Wichita.....	79,261	0	1	0	0	0	0	1	0
SOUTH ATLANTIC									
Delaware:									
Wilmington.....	117,728	0	1	0	0	0	13	1	0
Maryland:									
Baltimore.....	773,580	27	12	7	0	2	49	20	15
Cumberland.....	32,361	0	0	1	0	0	0	0	1
Frederick.....	11,301	0	0	0	0	0	1	0	0
District of Columbia:									
Washington.....	1437,571	2	5	4	0	1	24	0	5
Virginia:									
Lynchburg.....	30,277	8	0	1	0	0	0	5	0
Norfolk.....	159,089	0	0	0	0	0	1	2	2
Richmond.....	181,044	0	1	0	0	0	17	0	4
Roanoke.....	55,502	0	1	0	0	0	14	0	0
West Virginia:									
Charleston.....	45,597	0	1	0	0	0	6	0	0
Huntington.....	57,918	0	1	0	0	0	0	0	0
Wheeling.....	156,208	1	0	0	0	0	3	0	0
North Carolina:									
Raleigh.....	29,171	0	0	0	0	0	0	0	0
Wilmington.....	35,719	0	0	0	0	0	0	2	0
Winston-Salem.....	56,230	0	0	1	0	0	0	0	2
South Carolina:									
Charleston.....	71,245	0	0	0	0	0	0	0	1
Columbia.....	39,688	1	0	0	0	0	0	0	0
Greenville.....	25,789	0	0	1	0	0	0	0	1
Georgia:									
Atlanta.....	222,963	2	1	2	4	0	1	0	5
Brunswick.....	15,937	1	0	0	0	0	0	0	0
Savannah.....	89,448	0	1	1	0	0	0	2	0
Florida:									
St. Petersburg.....	24,403	0	0	0	0	0	0	0	0
Tampa.....	56,050	0	0	2	0	0	0	1	1

¹ Population Jan. 1, 1920.

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Population July 1, 1923, estimated	Chick- en pox, cases re- ported	Diphtheria		Influenza		Meas- les, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
			Cases, esti- mated expec- tancy	Cases re- ported	Cases re- ported	Deaths re- ported			
EAST SOUTH CENTRAL									
Kentucky:									
Covington.....	57,877		1						
Louisville.....	257,671	0	3	0	0	0	1	0	7
Tennessee:									
Memphis.....	170,067	1	1	0		1	5	0	5
Nashville.....	121,128	0	0	1		0	11	0	0
Alabama:									
Birmingham.....	195,901	3	1	0	1	0	0	0	3
Mobile.....	63,858	0	0	0		1	0	0	0
Montgomery.....	45,383	0	0	0	0	0	0	0	1
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith.....	30,635	0	0	1			0	1	
Little Rock.....	70,916	0	0	0	0	0	1	0	2
Louisiana:									
New Orleans.....	404,575	1	5	2	0	0	0	0	4
Shreveport.....	54,590	0		0	0	0	0	0	0
Oklahoma:									
Oklahoma.....	101,150	0	1	0	0	0	2	0	2
Texas:									
Dallas.....	177,274	1	2	2	0	1	0	0	2
Galveston.....	46,877	1	0	0	0	0	0	0	1
Houston.....	154,970		2	4	0	0	0		1
San Antonio.....	184,727	0	1	4	0	1	0	0	2
MOUNTAIN									
Montana:									
Billings.....	16,927	1	0	0	0	0	0	5	0
Great Falls.....	27,787	0	0	0	0	0	0	1	0
Helena.....	12,037	0	0	0	0	0	0	0	0
Missoula.....	12,668	0	0	0	0	0	0	0	0
Idaho:									
Boise.....	22,806	0	0	1	0	0	0	0	0
Colorado:									
Denver.....	272,031	9	9	11		0	2	7	3
Pueblo.....	43,519	0	2	1		0	1	0	0
New Mexico:									
Albuquerque.....	16,648	0	1	0	0	0	0	2	0
Arizona:									
Phoenix.....	33,899	0		0		0	0	0	1
Utah:									
Salt Lake City.....	126,241	39	2	6	0	0	1	12	4
Nevada:									
Reno.....	12,429	0	0	0	0	0	0	0	0
PACIFIC									
Washington:									
Seattle.....	1315,685	29	5	1	0		0	11	
Spokane.....	104,573		2						
Tacoma.....	101,731	0	1	11			0	1	
California:									
Los Angeles.....	666,853	23	33	28	3	1	10	11	14
Sacramento.....	69,950	4	1	2	0	0	1	0	2
San Francisco.....	539,038	9	18	5	3	0	1	7	4

¹ Population Jan. 1, 1920.

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re-ported	Typhoid fever			Whoop- ing cough, cases re-ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
NEW ENGLAND											
Maine:											
Portland.....	1	1	0	0	0	0	1	0	0	0	11
New Hampshire:											
Concord.....	0	0	0	0	0	0	0	0	0	0	12
Vermont:											
Barre.....	0	0	0	0	0	0	0	0	0	2	0
Burlington.....	1	0	0	0	0	0	0	0	0	0	7
Massachusetts:											
Boston.....	25		0				2				
Fall River.....	1	1	0	0	0	4	3	0	0	0	20
Springfield.....	3	2	0	0	0	1	0	0	0	2	22
Worcester.....	3	7	0	0	0	2	0	0	0	5	42
Rhode Island:											
Pawtucket.....	0	0	0	0	0	0	0	0	0	0	15
Providence.....	4	3	0	0	0	3	1	4	0	2	59
Connecticut:											
Bridgeport.....	3	4	0	0	0	4	0	0	0	0	25
Hartford.....	2	0	0	0	0	1	0	0	0	5	17
New Haven.....	1	1	0	0	0	1	2	0	0	17	33
MIDDLE ATLANTIC											
New York:											
Buffalo.....	13	14	0	0	0	9	1	2	0	14	104
New York.....	89	46	0	0	0	179	16	19	0	50	990
Rochester.....	5	5	0	0	0	3	0	0	0		64
Syracuse.....	5	1	0	0	0	0	1	0	0	7	37
New Jersey:											
Camden.....	1	4	0	0	0	2	0	0	0	1	22
Newark.....	11	11	0	0	0	12	0	1	0	20	107
Trenton.....	1	1	0	2	0	2	1	0	0	0	23
Pennsylvania:											
Philadelphia.....	37	37	1	0	1	43	6	6	3	101	396
Pittsburgh.....	12	35	0	0	0	6	2	1	0	11	118
Reading.....	1	2	0	0	0	2	1	0	0	18	27
Scranton.....	1	0	0	0	0	0	0	4	0	1	
EAST NORTH CENTRAL											
Ohio:											
Cincinnati.....	5	3	1	0	0	11	1	3	0	5	98
Cleveland.....	14	9	1	2	1	16	2	0	0	49	156
Columbus.....	3	3	1	4	0	7	1	1	1	2	74
Toledo.....	11	9	1	0	0	3	1	4	0	11	51
Indiana:											
Fort Wayne.....	1	0	1	0	0	1	0	0	0	2	27
Indianapolis.....	4	1	3	2	0	5	2	1	0	30	77
South Bend.....	1	0	1	0	0	1	1	0	0	1	16
Terre Haute.....	1	1	0	3	0	0	0	0	0	0	19
Illinois:											
Chicago.....	43	76	1	0	0	64	3	7	1	92	597
Cicero.....	0		0				0				
Springfield.....	1	1	1	0	0	2	0	0	0	0	18
Michigan:											
Detroit.....	38	33	7	1	0	15	3	2	0	51	191
Flint.....	2	3	1	0	0	0	1	1	0	6	13
Grand Rapids.....	2	16	0	0	0	2	1	0	0	7	37
Wisconsin:											
Madison.....	1	4	0	0	0	0	0	0	0	4	4
Milwaukee.....	17	7	2	3	2	7	1	0	0	25	104
Racine.....	2	0	1	2	0	0	0	0	0	6	8
Superior.....	1	6	2	2	1	0	0	0	0	0	10
WEST NORTH CENTRAL											
Minnesota:											
Duluth.....	2	7	2	0	0	0	0	0	0	1	12
Minneapolis.....	13	25	6	0	0	1	1	0	1	7	79
St. Paul.....	8	10	3	0	1	4	1	0	0	18	55

¹ Pulmonary tuberculosis only.

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
WEST NORTH CENTRAL—contd.											
Iowa:											
Davenport.....	1	1	2	2	-----	-----	0	0	-----	0	-----
Des Moines.....	2	0	3	1	-----	-----	0	0	-----	0	-----
Sioux City.....	1	0	1	3	-----	-----	0	0	-----	0	-----
Waterloo.....	1	0	1	0	-----	-----	0	0	-----	2	-----
Missouri:											
Kansas City.....	2	8	3	0	0	9	1	1	0	14	97
St. Joseph.....	1	0	0	0	0	3	0	1	0	3	24
St. Louis.....	12	22	1	3	0	12	2	7	1	20	179
North Dakota:											
Fargo.....	0	2	1	0	0	0	0	0	0	0	8
Grand Forks.....	0	0	0	0	-----	-----	0	0	-----	0	-----
South Dakota:											
Aberdeen.....	0	0	1	0	0	0	0	0	0	0	-----
Sioux Falls.....	0	6	0	0	0	0	0	0	0	0	8
Nebraska:											
Lincoln.....	1	0	0	0	0	1	0	0	0	4	21
Omaha.....	2	0	3	2	0	2	0	0	0	6	48
Kansas:											
Topeka.....	1	0	1	0	0	1	1	1	0	8	12
Wichita.....	1	1	2	0	0	1	1	0	0	14	29
SOUTH ATLANTIC											
Delaware:											
Wilmington.....	2	0	0	1	0	1	0	0	0	1	13
Maryland:											
Baltimore.....	11	9	0	0	0	24	4	2	0	96	166
Cumberland.....	1	0	0	0	0	0	0	0	0	0	8
Frederick.....	0	0	0	0	0	0	0	0	0	0	3
District of Colum- bia:											
Washington.....	6	5	0	0	0	14	3	2	0	8	110
Virginia:											
Lynchburg.....	0	1	0	0	0	0	0	2	0	4	11
Norfolk.....	0	0	1	0	0	1	2	0	0	2	-----
Richmond.....	1	4	0	0	0	1	1	4	1	3	34
Roanoke.....	0	0	1	0	0	2	0	0	0	0	20
West Virginia:											
Charleston.....	1	1	0	1	0	0	1	0	1	4	10
Huntington.....	0	0	0	0	-----	-----	0	0	-----	0	-----
Wheeling.....	1	6	0	0	0	0	1	0	0	0	16
North Carolina:											
Raleigh.....	0	1	1	0	0	0	0	0	0	1	7
Wilmington.....	0	1	0	0	0	0	0	0	0	0	9
Winston-Salem.....	1	0	1	3	0	1	2	1	0	13	13
South Carolina:											
Charleston.....	0	1	0	0	0	1	2	1	0	3	23
Columbia.....	0	0	0	0	0	0	1	0	0	1	-----
Greenville.....	0	0	0	0	0	1	1	1	4	3	14
Georgia:											
Atlanta.....	2	0	5	0	0	0	3	20	2	6	70
Brunswick.....	0	0	0	0	0	1	0	0	0	0	3
Savannah.....	0	0	0	0	0	1	2	1	0	0	21
Florida:											
St. Petersburg.....	0	0	0	0	0	0	0	0	0	0	16
Tampa.....	0	0	0	0	0	1	0	0	0	-----	14
EAST SOUTH CENTRAL											
Kentucky:											
Covington.....	1	-----	0	-----	-----	-----	1	-----	-----	-----	-----
Louisville.....	2	5	0	0	0	5	3	2	0	2	72
Tennessee:											
Memphis.....	1	0	1	0	0	3	3	15	2	18	68
Nashville.....	1	1	0	0	0	3	4	9	0	3	46
Alabama:											
Birmingham.....	1	6	0	11	0	6	4	4	0	6	59
Mobile.....	0	0	1	0	0	2	1	2	0	1	17
Montgomery.....	0	0	0	0	0	2	1	3	0	0	14

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- cu- osis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
WEST SOUTH CENTRAL											
Arkansas:											
Fort Smith.....	0	0	0	0	-----	-----	0	3	-----	11	-----
Little Rock.....	0	0	0	0	0	1	2	8	1	0	-----
Louisiana:											
New Orleans.....	1	3	1	1	0	11	4	21	3	5	165
Shreveport.....	-----	0	-----	0	0	1	0	12	1	3	26
Oklahoma:											
Oklahoma.....	1	0	3	2	0	3	1	6	0	0	35
Texas:											
Dallas.....	1	1	1	0	0	0	3	2	1	2	57
Galveston.....	0	0	0	0	0	1	1	1	0	0	14
Houston.....	0	6	1	0	0	2	1	3	0	55	-----
San Antonio.....	1	0	1	0	0	6	0	3	0	0	52
MOUNTAIN											
Montana:											
Billings.....	0	1	0	1	0	0	0	0	0	2	6
Great Falls.....	1	3	1	0	0	2	0	1	0	8	5
Helena.....	0	0	0	0	0	0	0	0	0	0	2
Missoula.....	0	1	0	0	0	1	0	0	0	0	4
Idaho:											
Boise.....	1	0	1	2	0	0	0	0	0	0	2
Colorado:											
Denver.....	6	1	0	0	0	11	1	0	0	32	65
Pueblo.....	1	0	1	0	0	1	0	0	0	0	6
New Mexico:											
Albuquerque.....	1	0	0	0	0	4	0	0	0	0	12
Arizona:											
Phoenix.....	-----	0	-----	0	0	4	-----	0	0	0	13
Utah:											
Salt Lake City.....	2	5	1	0	0	0	1	0	0	13	31
Nevada:											
Reno.....	0	0	1	0	0	1	0	0	0	0	1
PACIFIC											
Washington:											
Seattle.....	5	3	3	6	-----	-----	1	1	-----	51	-----
Spokane.....	2	-----	3	-----	-----	-----	1	-----	-----	-----	-----
Tacoma.....	1	1	1	5	-----	-----	0	0	-----	5	-----
California:											
Los Angeles.....	9	13	1	15	0	24	3	3	0	53	197
Sacramento.....	1	0	0	0	0	2	1	0	0	2	36
San Francisco.....	9	6	1	3	0	10	1	3	0	25	107

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Deaths
<b>NEW ENGLAND</b>								
Rhode Island:								
Providence.....	1	0	0	0	0	0	0	0
<b>MIDDLE ATLANTIC</b>								
New York:								
Buffalo.....	0	0	1	0	0	0	0	0
New York.....	1	1	2	3	0	0	3	0
New Jersey:								
Newark.....	0	0	4	0	0	0	1	0
Pennsylvania:								
Philadelphia.....	1	1	0	0	1	1	0	0

## City reports for week ended July 4, 1925—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths
<b>EAST NORTH CENTRAL</b>									
Ohio:									
Cleveland.....	0	0	0	2	0	0	0	0	0
Columbus.....	0	0	0	3	0	0	0	0	0
Illinois:									
Chicago.....	1	1	0	0	0	0	1	0	0
Michigan:									
Detroit.....	0	0	1	1	0	0	0	0	0
<b>WEST NORTH CENTRAL</b>									
Minnesota:									
Minneapolis.....	0	0	0	1	0	0	0	0	0
Missouri:									
Kansas City.....	0	0	0	0	0	0	0	4	0
St. Louis.....	1	0	0	0	0	0	0	0	0
<b>SOUTH ATLANTIC</b>									
District of Columbia:									
Washington.....	0	0	1	0	0	0	0	0	0
Virginia:									
Lynchburg.....	0	0	0	0	1	0	0	0	0
West Virginia:									
Wheeling.....	0	0	0	0	0	0	0	1	0
North Carolina:									
Raleigh.....	0	0	0	0	0	1	0	1	0
Winston-Salem.....	0	0	0	0	1	1	0	0	0
South Carolina:									
Charleston.....	0	0	0	0	0	1	0	0	0
Columbia.....	0	0	0	0	0	0	0	2	0
Georgia:									
Atlanta.....	0	0	0	0	0	1	0	0	0
Brunswick.....	0	0	0	0	1	0	0	0	0
<b>EAST SOUTH CENTRAL</b>									
Tennessee:									
Memphis.....	1	0	0	0	2	2	0	1	0
Nashville.....	0	0	0	0	1	0	0	0	0
Alabama:									
Birmingham.....	0	0	0	0	0	0	0	1	1
Mobile.....	0	0	0	0	1	0	0	0	0
Montgomery.....	0	0	0	0	0	1	0	0	0
<b>WEST SOUTH CENTRAL</b>									
Louisiana:									
New Orleans.....	0	0	1	1	0	2	1	0	0
Shreveport.....	0	0	0	0	0	2	0	1	0
Texas:									
Dallas.....	0	0	0	0	1	0	0	1	2
Houston.....	0	1	0	0	1	3	0	0	0
<b>MOUNTAIN</b>									
Utah:									
Salt Lake City.....	0	0	0	0	0	1	0	0	0
<b>PACIFIC</b>									
California:									
Los Angeles.....	0	0	0	0	0	0	1	5	3
Sacramento.....	0	0	0	0	0	0	0	5	0
San Francisco.....	0	1	2	2	1	0	0	1	0

The following table gives the rates per hundred thousand population for 105 cities for the 10-week period ended July 4, 1925. The population figures used in computing the rates were estimated as of July 1, 1923, as this is the latest date for which estimates are available. The 105 cities reporting cases had an estimated aggregate population of nearly 29,000,000 and the 97 cities reporting deaths



had more than 28,000,000 population. The number of cities included in each group and the aggregate populations are shown in a separate table below.

*Summary of weekly reports from cities, April 26 to July 4, 1925—Annual rates per 100,000 population<sup>1</sup>*

#### DIPHTHERIA CASE RATES

	Week ended—									
	May 2	May 9	May 16	May 23	May 30	June 6	June 13	June 20	June 27	July 4
105 cities.....	158	<sup>2</sup> 157	<sup>3</sup> 164	153	<sup>4</sup> 149	158	120	119	<sup>5</sup> 116	<sup>6</sup> 91
New England.....	127	109	154	127	114	129	94	97	127	<sup>7</sup> 82
Middle Atlantic.....	213	212	238	203	211	244	156	166	163	<sup>8</sup> 96
East North Central.....	110	113	110	108	106	99	95	93	<sup>9</sup> 84	<sup>10</sup> 87
West North Central.....	201	278	211	251	197	189	145	133	114	131
South Atlantic.....	104	104	85	87	<sup>11</sup> 77	91	57	51	73	41
East South Central.....	40	11	34	40	11	11	11	6	34	<sup>12</sup> 6
West South Central.....	70	65	56	42	65	42	70	74	46	60
Mountain.....	115	105	153	134	143	76	181	191	105	181
Pacific.....	206	<sup>13</sup> 123	<sup>14</sup> 138	165	168	145	165	113	107	<sup>15</sup> 145

#### MEASLES CASE RATES

105 cities.....	581	<sup>2</sup> 627	<sup>3</sup> 624	601	<sup>4</sup> 593	619	582	434	<sup>5</sup> 303	<sup>6</sup> 224
New England.....	1,004	984	1,188	1,051	867	872	892	634	407	<sup>7</sup> 318
Middle Atlantic.....	734	797	768	617	704	774	727	544	382	258
East North Central.....	761	890	854	954	913	893	844	592	<sup>8</sup> 404	<sup>9</sup> 321
West North Central.....	79	112	79	236	145	114	135	87	60	31
South Atlantic.....	305	240	329	327	<sup>10</sup> 256	410	297	349	278	262
East South Central.....	200	343	166	337	217	132	212	114	132	<sup>11</sup> 104
West South Central.....	28	32	14	23	14	23	14	19	5	5
Mountain.....	534	181	57	181	248	38	95	76	95	38
Pacific.....	162	<sup>12</sup> 95	<sup>13</sup> 178	131	165	165	87	84	52	<sup>14</sup> 37

#### SCARLET FEVER CASE RATES

105 cities.....	309	<sup>2</sup> 323	<sup>3</sup> 352	307	<sup>4</sup> 278	267	174	165	<sup>5</sup> 117	<sup>6</sup> 94
New England.....	430	415	358	350	211	266	179	142	107	<sup>7</sup> 75
Middle Atlantic.....	323	319	331	265	271	263	156	145	100	79
East North Central.....	324	366	390	413	346	317	204	217	<sup>8</sup> 157	<sup>9</sup> 122
West North Central.....	518	618	728	556	531	481	325	328	184	168
South Atlantic.....	132	106	165	146	<sup>10</sup> 122	130	61	61	45	59
East South Central.....	263	263	326	246	183	126	160	160	91	<sup>11</sup> 73
West South Central.....	111	88	74	23	65	88	46	37	56	46
Mountain.....	334	277	353	324	410	334	277	143	210	105
Pacific.....	125	<sup>12</sup> 151	<sup>13</sup> 197	162	139	161	162	116	107	<sup>14</sup> 71

#### SMALLPOX CASE RATES

105 cities.....	50	<sup>2</sup> 46	<sup>3</sup> 46	60	<sup>4</sup> 48	46	37	36	<sup>5</sup> 25	<sup>6</sup> 15
New England.....	0	2	0	0	0	0	0	0	0	<sup>7</sup> 0
Middle Atlantic.....	8	6	7	2	2	4	2	1	0	1
East North Central.....	30	44	56	70	58	65	42	45	<sup>8</sup> 20	<sup>9</sup> 14
West North Central.....	75	60	79	68	70	95	52	60	37	17
South Atlantic.....	63	45	37	65	<sup>10</sup> 10	39	22	30	18	10
East South Central.....	435	377	189	440	423	114	297	200	132	<sup>11</sup> 67
West South Central.....	32	28	37	130	56	32	5	19	0	5
Mountain.....	10	48	29	29	57	38	29	19	29	29
Pacific.....	206	<sup>12</sup> 176	<sup>13</sup> 191	186	168	191	148	154	171	<sup>14</sup> 89

<sup>1</sup> The figures given in this table are rates per 100,000 population, annual basis, and not the number of cases reported. Populations used are estimated as of July 1, 1923.

<sup>2</sup> Spokane, Wash., not included. Report not received at time of going to press.

<sup>3</sup> Tacoma, Wash., not included.

<sup>4</sup> Charleston, W. Va., not included.

<sup>5</sup> Cicero, Ill., not included.

<sup>6</sup> Boston, Mass., Cicero, Ill., Covington, Ky., and Spokane, Wash., not included.

<sup>7</sup> Boston, Mass., not included.

<sup>8</sup> Covington, Ky., not included.

*Summary of weekly reports from cities, April 26 to July 4, 1925—Annual rates  
per 100,000 population—Continued*

**TYPHOID FEVER CASE RATES**

	Week ended—									
	May 2	May 9	May 16	May 23	May 30	June 6	June 13	June 20	June 27	July 4
105 cities.....	18	<sup>1</sup> 14	<sup>1</sup> 13	19	<sup>1</sup> 16	25	28	22	<sup>1</sup> 27	<sup>1</sup> 35
New England.....	10	5	12	25	17	30	25	20	17	<sup>7</sup> 16
Middle Atlantic.....	22	13	10	19	9	26	17	14	18	15
East North Central.....	4	9	6	5	7	10	10	4	<sup>1</sup> 9	<sup>1</sup> 10
West North Central.....	12	2	0	4	10	8	25	12	10	21
South Atlantic.....	28	28	26	39	<sup>1</sup> 41	41	65	49	71	69
East South Central.....	46	46	63	74	51	40	120	80	91	<sup>1</sup> 214
West South Central.....	51	46	79	65	74	88	116	130	148	246
Mountain.....	0	0	0	19	10	76	48	38	0	10
Pacific.....	17	<sup>1</sup> 9	<sup>1</sup> 3	6	9	9	15	6	20	<sup>1</sup> 22

**INFLUENZA DEATH RATES**

105 cities.....	22	15	14	14	<sup>1</sup> 12	11	7	6	<sup>1</sup> 6	<sup>1</sup> 4
New England.....	20	10	7	5	7	2	5	2	7	<sup>7</sup> 4
Middle Atlantic.....	14	10	12	11	9	11	6	4	6	2
East North Central.....	23	16	11	12	14	10	7	7	<sup>1</sup> 6	<sup>1</sup> 5
West North Central.....	31	11	11	18	18	4	9	7	4	0
South Atlantic.....	26	24	10	6	<sup>1</sup> 12	6	4	6	2	6
East South Central.....	51	51	80	86	40	54	17	34	17	<sup>1</sup> 12
West South Central.....	31	15	20	24	31	5	20	10	10	10
Mountain.....	48	19	57	19	0	29	10	0	10	0
Pacific.....	12	16	12	25	8	12	4	4	4	4

**PNEUMONIA DEATH RATES**

105 cities.....	167	151	127	128	<sup>1</sup> 117	128	104	81	<sup>1</sup> 66	<sup>1</sup> 58
New England.....	149	161	134	119	114	72	117	62	60	<sup>7</sup> 39
Middle Atlantic.....	206	185	143	144	146	168	130	93	75	62
East North Central.....	148	130	125	125	119	114	89	81	<sup>1</sup> 42	<sup>1</sup> 45
West North Central.....	72	77	58	79	59	57	59	33	50	42
South Atlantic.....	195	156	136	134	<sup>1</sup> 157	146	122	77	96	75
East South Central.....	194	160	166	137	172	126	63	103	120	<sup>1</sup> 98
West South Central.....	127	138	112	84	76	66	87	92	76	61
Mountain.....	124	124	162	172	76	95	105	143	57	67
Pacific.....	127	123	78	135	82	131	49	65	53	82

<sup>2</sup>Spokane, Wash., not included. Report not received at time of going to press.

<sup>3</sup>Tacoma, Wash., not included.

<sup>4</sup>Charleston, W. Va., not included.

<sup>5</sup>Cicero, Ill., not included.

<sup>6</sup>Boston, Mass., Cicero, Ill., Covington, Ky., and Spokane, Wash., not included.

<sup>7</sup>Boston, Mass., not included.

<sup>8</sup>Covington, Ky., not included.

<sup>9</sup>Boston, Mass., Cicero, Ill., and Covington, Ky., not included.

*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	2,098,746
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

### THE FAR EAST

*Reports for two weeks ended June 27, 1925.*—The following reports, covering the two-week period ended June 27, 1925, were transmitted by the Far Eastern Bureau of the Health Section of the League of Nations, located at Singapore, to the headquarters at Geneva:

WEEK ENDED JUNE 20, 1925

Port	Plague		Cholera		Smallpox	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Bombay.....		3	0	0	13	12
Madras.....	0	0	0	0	19	8
Rangoon.....		15		5	17	8
Karachi.....	0	0	0	0	0	0
Negapatam.....	0	0	0	0	0	0
Singapore.....	0	0	0	0	0	0
Port Swettenham.....	0	0	0	0	0	0
Penang.....	0	0	0	0	0	0
Batavia.....	0	0	0	0	0	0
Soerabaya.....	0	0	0	0	0	0
Samarang.....	0	0	0	0	0	0
Belawan Deli.....	0	0	0	0	0	0
Macassar.....	0	0	0	0	0	0
Sandakan (North Borneo).....	0	0	0	0	0	0
Sarawak.....	0	0	0	0	1	0
Bangkok*.....	2	2	1	1	1	1
Saigon and Cholon.....	1	1	0	0	0	0
Hongkong.....	0	0	0	0	0	0
Shanghai.....	0	0	0	0	3	1
Manila.....	0	0	1	0	0	0
Colombo.....	5	4	0	0	0	0
Nagasaki.....	0	0	0	0	0	0
Yokohama.....	0	0	0	0	0	0
Shimonoseki.....	0	0	0	0	0	0
Kobe.....	0	0	0	0	0	0
Adelaide.....	0	0	0	0	0	0
Fremantle.....	0	0	0	0	0	0
Melbourne.....	0	0	0	0	0	0
Sydney.....	0	0	0	0	0	0
Suez.....	2	1	0	0	0	0
Port Said.....	1	1	0	0	0	0

\*Infected rats found.

## WEEK ENDED JUNE 27, 1925

Port	Plague		Cholera		Smallpox	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Calcutta.....	0	0	-----	10	22	20
Bombay.....	5	0	0	0	6	3
Madras.....	0	0	0	0	28	13
Rangoon.....	15	0	3	9	5	5
Karachi.....	0	0	0	0	1	0
Negapatam.....	0	0	0	0	0	0
Singapore.....	0	0	0	0	0	0
Port Swettenham.....	0	0	0	0	0	0
Penang.....	0	0	0	0	0	0
Batavia.....	0	0	0	0	0	0
Soerabaya.....	0	0	0	0	0	0
Samarang.....	0	0	0	0	0	0
Belawan Deli.....	0	0	0	0	0	0
Macassar.....	0	0	0	0	0	0
Sandakan (North Borneo).....	0	0	0	0	0	0
Sarawak.....	0	0	0	0	2	1
Bangkok.....	0	0	1	1	2	1
Saigon and Cholon.....	1	1	0	0	0	0
Hongkong.....	0	0	0	0	0	0
Shanghai.....	0	0	0	0	5	3
Manila.....	0	0	2	0	0	0
Colombo.....	1	0	0	0	0	0
Nagasaki.....	0	0	0	0	0	0
Yokohama.....	0	0	0	0	0	0
Shimonoseki.....	0	0	0	0	0	0
Kobe.....	0	0	0	0	0	0
Adelaide.....	0	0	0	0	0	0
Brisbane.....	1	0	0	0	0	0
Fremantle.....	0	0	0	0	0	0
Melbourne.....	0	0	0	0	0	0
Sydney.....	0	0	0	0	0	0
Suez.....	1	1	0	0	0	0
Port Said *.....	-----	-----	-----	-----	-----	-----
Mombasa.....	0	0	0	0	0	0

\* Two cases of plague reported June 23, 1925.

## CANADA

*Communicable diseases—Ontario—May 31–June 27, 1925 (comparative).—*During the four-week period ended June 27, 1925, communicable diseases were reported in the Province of Ontario, Canada, as follows:

Disease	1925		1924	
	Cases	Deaths	Cases	Deaths
Cerebrospinal meningitis.....	5	2	9	5
Chancroid.....	1	-----	3	-----
Chicken pox.....	457	1	265	-----
Diphtheria.....	142	12	227	12
German measles.....	23	-----	150	-----
Goiter.....	16	1	1	1
Gonorrhea.....	132	-----	132	-----
Influenza.....	10	7	9	6
Lethargic encephalitis.....	-----	4	1	1
Measles.....	1,063	2	4,321	12
Mumps.....	300	-----	729	-----
Pneumonia.....	-----	126	-----	149
Scarlet fever.....	326	1	510	14
Smallpox.....	12	1	24	-----
Syphilis.....	48	-----	96	-----
Tuberculosis.....	165	85	162	89
Typhoid fever.....	46	3	47	1
Whooping cough.....	269	7	104	3

*Smallpox distribution—Localities.*—The 12 cases of smallpox notified in the Province of Ontario during the period under report were distributed in seven localities, the greatest number of cases, viz, 6, occurring at Kingston and at the remaining six localities, one case each, with one death at London.

#### EGYPT

*Plague—June 11–17, 1925—Summary, January 1–June 17, 1925 (comparative).*—During the week ended June 17, 1925, 11 cases of plague with eight deaths were reported in Egypt. The occurrence in cities was as follows: *Alexandria*—1 case, 1 death; *Port Said*—1 case, 1 death; *Suez*—2 cases, 1 death. The type of the urban cases was stated to have been bubonic. The remaining cases reported were distributed in the Provinces of Beni-Souef, Kena, and Minia. From January 1 to June 17, 1925, inclusive, 75 cases of plague were reported in Egypt as compared with 298 cases reported from the corresponding period of the year 1924.

#### INDIA

*Cholera nostras—Calcutta—May 31–June 6, 1925*—During the week ended June 6, 1925, 31 cases of cholera nostras with 23 deaths were reported at Calcutta, India. Population, 1,077,264.

#### ITALY

*Leprosy—Province of Syracuse—Sicily.*—Information received under date of June 3, 1925, indicates the prevalence of leprosy and gives its distribution according to locality and population in the Province of Syracuse, Island of Sicily, Italy, as follows:

*Avola.*—Population, 17,481. Stated to have been infected from a remote period of history and to be the locality from which spread of the disease to other localities has occurred.

*Floridia.*—Population, 13,541. Stated to have been a continuous focus, with the disease still present. Cases are reported in the neighboring village of Marzamemi.

*Pachino.*—Population, 12,190. Cases are stated to be of constant occurrence, infected persons in the past having been permitted to mingle freely with the population, live in equal social relations, and to engage in the sale of food. It was stated that no sanitary measures were taken.

*Vittoria.*—Population, 30,362. Stated to have had a continuous focus of infection and to be still infected.

*Sporadic cases.*—Sporadic cases of leprosy have been reported at Augusta, Chiaramonte Gulfi, Pozzallo, Ragusa, and Sortino.

#### JAMAICA

*Smallpox (reported as alastrim)—May 31–June 27, 1925.*—During the four-week period ended June 27, 1925, 33 cases of smallpox

(reported as alastrim) were notified in the Island of Jamaica, exclusive of Kingston, and 13 cases in Kingston. Two additional cases were reported for the island occurring during the week ended May 30, 1925.<sup>1</sup>

*Chicken pox—Typhoid fever.*—During the same period, 16 cases of chicken pox were reported in the island, and two cases at Kingston. Typhoid fever was reported as follows: Kingston, 29 cases; localities other than Kingston, 49 cases.

## PERU

*Pernicious malaria in northern Peru.*—Under date of June 4, 1925, pernicious malaria was stated to be epidemic in the Department of Piura, northern Peru. Two thousand persons were said to have been ill in the city of Catacaos and vicinity.

*Epidemic bacillary dysentery in Callao.*—Epidemic bacillary dysentery, with many fatalities, was reported at Callao, Peru, June 2, 1925.

*Quarantine by Ecuador against Peruvian ports terminated.*—On June 12, 1925, quarantine restrictions imposed at ports of Ecuador against vessels from the northern coast of Peru were discontinued. The restrictions were imposed because of rumors of yellow fever, but the disease was found to be acute malaria.

## TURKEY

*Communicable diseases—Mortality—Constantinople—Year 1924.*—During the year 1924, 8,064 cases of communicable diseases were reported at Constantinople, Turkey, including influenza, 2,171; malaria, 2,034; tuberculosis, 2,881. The number of deaths from all causes reported for the year was 15,139. Population, estimated, 1,000,000.

## CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER

The reports 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 July 24, 1925<sup>a</sup>

#### CHOLERA

Place	Date	Cases	Deaths	Remarks
India.....				May 3-23, 1925: Cases, 17,350; deaths, 10,891.
Madras.....	June 6-13.....	2	1	
Rangoon.....	May 24-30.....	3	2	
Indo-China:				Including 100 square kilometers of surrounding country.
Saigon.....	May 25-31.....	2	2	
Siam:				
Bangkok.....	May 17-23.....	2		

<sup>1</sup> Public Health Reports, July 10, 1925, p. 1500.

<sup>a</sup> From medical officers of the Public Health Service, American consuls, and other sources.

**CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued****Reports Received During Week Ended July 24, 1925—Continued****PLAGUE**

Place	Date	Cases	Deaths	Remarks
Ceylon:				
Colombo.....	May 24-30.....	1	1	
China:				
Foochow.....	do.....			Reported present in epidemic form.
Egypt.....				June 11-17, 1925: Cases, 11. Jan. 1-June 17, 1925: Cases, 75; corresponding period, 1924—cases, 298.
City—				
Alexandria.....	June 17.....	1	1	Bubonic.
Port Said.....	June 17-18.....	1	1	Do.
Suez.....	June 14-15.....	2	1	Do.
Province—				
Beni-Souef.....	June 13-16.....	5	3	Bubonic and septicemic.
Kena.....	June 17.....	1	1	Septicemic.
Minia.....	do.....	1	1	Do.
India.....				May 3-23, 1925: Cases, 17,667; deaths, 14,303.
Bombay.....	May 17-30.....	20	18	
Calcutta.....	May 30-June 6.....	1	1	
Karschi.....	do.....	1		
Madras Presidency.....	May 10-16.....	2	1	
Rangoon.....	May 24-30.....	5	4	
Indo-China:				
Saigon.....	May 25-31.....	1	1	
Iraq:				
Bagdad.....	May 24-30.....	2		
Java:				
Batavia.....	May 23-29.....	12	12	
Socrabaya.....	May 7-13.....	2	2	
Straits Settlements:				
Singapore.....	May 17-30.....	2	2	
Turkey:				
Constantinople.....	May 25-31.....	1		

**SMALLPOX**

Brazil:				
Pernambuco.....	May 17-23.....	6	2	
Canada:				
British Columbia—				
Vancouver.....	June 22-28.....	2		
Ontario.....				May 31-June 27, 1925: Cases, 12; deaths, 1. Corresponding period, 1924—cases, 24.
China:				
Canton.....	May 31-June 6.....			Present.
Foochow.....	May 24-June 6.....			Do.
Hongkong.....	May 10-16.....	1	1	
Do.....	May 24-30.....	2	2	
Manchuria—				
Dairen.....	May 18-June 7.....	25	7	
Tientsin.....	May 30-June 6.....	1		Mission hospital.
Chosen:				
Seoul.....	May 1-31.....	1		
Egypt:				
Cairo.....	Apr. 16-22.....	1		
Great Britain:				
England and Wales.....	June 7-29.....	186		
Greece:				
Athens.....	May 1-31.....		2	
India:				
Bombay.....	May 23-30.....	38	27	
Calcutta.....	May 31-June 6.....	50	45	
Karachi.....	May 31-June 13.....	3		
Madras.....	do.....	51	23	
Rangoon.....	May 24-30.....	28	15	
Jamaica:				
Kingston.....	May 31-June 27.....	13		May 31-June 27, 1925: Cases, 33 (reported as alastrim). For week ended May 30, 1925—2 additional cases reported.

**CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued****Reports Received During Week Ended July 24, 1925—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
Java:				
Soerabaya.....	May 7-13.....	28	6	
Mexico:				
Durango.....	June 1-30.....		11	
Guadalajara.....	June 30-July 6.....		1	
Mexico City.....	June 6-27.....	11		Including municipalities in Federal District.
Poland.....				Mar. 22-Apr. 4, 1925: Cases, 9.
Siam:				
Bangkok.....	May 17-23.....	5	3	
Spain:				
Malaga.....	June 14-20.....		3	
Straits Settlements:				
Singapore.....	May 17-23.....	1		
Union of South Africa:				
Cape Province.....	May 24-30.....			Outbreaks.

**TYPHUS FEVER**

Egypt:				
Cairo.....	Apr. 16-22.....	1		
Palestine:				
Safad.....	June 9-15.....	1		
Poland.....				Mar. 22-Apr. 11, 1925: Cases, 603; deaths, 38.
Portugal:				
Oporto.....	May 31-June 6.....	1		
Rumania:				
Constantza.....	May 1-31.....	1		
Tunis:				
Tunis.....	May 21-June 17.....	16	8	
Turkey:				
Constantinople.....	May 25-31.....	1		
Union of South Africa:				
Cape Province.....	May 24-30.....			Outbreaks.
Orange Free State.....	do.....			Do.
Transvaal.....	do.....			Do.

**Reports Received from June 27 to July 17, 1925<sup>1</sup>****CHOLERA**

Place	Date	Cases	Deaths	Remarks
Algeria:				
Algiers.....	May 11-20.....	1		
Ceylon:				
Colombo.....	May 10-16.....	2	2	Jan. 25-Apr. 4, 1925: Cases, 10; deaths, 10.
India:				
Calcutta.....	May 3-9.....	58	49	Apr. 20-May 2, 1925: Cases, 5,421; deaths, 3,120.
Do.....	May 17-23.....	79	61	
Rangoon.....	May 3-23.....	16	11	Feb. 8-14, 1925: Cases, 2; deaths, 2. Received out of date.
Indo-China:				
Saigon.....	May 4-10.....	1	1	
Siam:				
Bangkok.....	Apr. 29-May 16.....	3	2	
Turkey:				
Constantinople.....	May 16-22.....	1		

<sup>1</sup> From medical officers of the Public Health Service, American consuls, and other sources. For reports received from Dec. 27, 1924, to June 26, 1925, see Public Health Reports for June 26, 1925. The tables of epidemic diseases are terminated semiannually and new tables begun.



**CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued****Reports Received from June 27 to July 17, 1925—Continued****PLAGUE**

Place	Date	Cases	Deaths	Remarks
Brazil:				
Bahia.....	May 3-June 13....	5	4	
British East Africa:				
Uganda.....	Feb. 1-28.....	28	28	
Ceylon:				
Colombo.....	May 10-16.....	-----	1	
Ecuador:				
Guayaquil.....	June 1-15.....	1	1	May 16-June 16, 1925: Rats examined, 20, 967; found infected, 78.
Egypt.....				Jan. 1-June 10, 1925: Cases 64, Corresponding period 1924—cases, 284.
Province—				
Assiout.....	June 5.....	1	1	
Beni Souef.....	June 10.....	3	1	
Charkieh.....	June 6-8.....	1	1	
Minia.....	June 6.....	2	1	
India.....				Apr. 26-May 2, 1925: Cases, 3,858; deaths, 3,359.
Bombay.....	Apr. 26-May 9.....	15	16	
Karachi.....	May 18-23.....	3	3	
Rangoon.....	May 3-23.....	44	37	Feb. 8-14, 1925: Cases, 13; deaths, 13. (Received out of date.)
Indo-China:				
Cochin China—				
Saigon.....	Apr. 20-26.....	1	1	Including 100 square kilometers of surrounding country.
Java:				
Batavia.....	May 6-22.....	9	9	Province.
Paseroean Residency.....	Mar. 7.....	-----	-----	Epidemic in one locality.
Madagascar:				
Province—				
Itasy.....	Apr. 1-15.....	1	1	
Tananarive.....	Apr. 1-30.....	128	104	Bubonic, cases, 80, deaths, 61; pneumonic, cases 22; deaths, 17; septicemic, cases, 26; deaths, 26.
Town—				
Tamatave (port).....	Apr. 1-15.....	2	-----	
Tananarive Town.....	Apr. 16-30.....	1	1	
Nigeria.....	Dec., 1924.....	17	13	
Do.....	Jan., 1925.....	10	6	
Siam:				
Bangkok.....	Apr. 26-May 9.....	5	5	
Straits Settlements:				
Singapore.....	May 3-16.....	7	7	

**SMALLPOX**

Algeria:				
Algiers.....	-----	-----	-----	May 1-31, 1925: Cases, 17; deaths, 2
Brazil:				
Pernambuco.....	Apr. 26-May 16.....	33	13	
Rio de Janeiro.....	May 9-16.....	1	-----	
British East Africa:				
Kenya—				
Mombasa.....	Apr. 19-May 23.....	21	9	
Nairobi.....	May 3-9.....	3	2	
Tanganyika Territory.....	Apr. 5-May 9.....	22	6	
Uganda.....	Feb. 1-28.....	2	-----	
British South Africa:				
Northern Rhodesia.....	Apr. 28-May 4.....	3	-----	
Canada:				
British Columbia—				
Vancouver.....	June 1-14.....	5	-----	
New Brunswick—				
Restigouche County.....	June 1-30.....	1	-----	
Ontario—				
Galt.....	June 14-20.....	2	-----	
Kingston.....	do.....	1	-----	
Saskatchewan—				
Regina.....	May 24-30.....	3	-----	
China:				
Amoy.....	May 17-30.....	-----	4	Prevalent in surrounding country.
Antung.....	May 11-June 7.....	2	-----	Present.
Canton.....	May 10-30.....	-----	-----	Widespread.
Chungking.....	May 3-30.....	-----	-----	Present.
Foochow.....	May 9-23.....	-----	-----	
Hongkong.....	Apr. 19-May 23.....	13	12	

**CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued****Reports Received from June 27 to July 17, 1925—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
<b>China—Continued.</b>				
Manchuria—				
Dairen	Apr. 13–May 17	82	9	Present.
Harbin	May 13–June 2	2		
Nanking	May 9–June 6			
Shanghai	May 3–June 6	5	2	Stated to be endemic.
Swatow	May 17–June 6			
Tientsin	May 9–23	1		
Egypt:				
Alexandria	May 21–27	1	1	
Cairo	Mar. 19–25	1		
France:				
Paris	May 21–31	1		February–March, 1925: Cases, 48.
Gold Coast				January–February, 1925: Cases, 114; deaths, 17.
Great Britain:				
England and Wales				May 24–June 6, 1925: Cases, 187.
Birmingham	June 7–13	1		
Cardiff	June 14–20	1		
Newcastle-on-Tyne	May 31–June 13	4		
Greece				January–February, 1925: Cases, 43; deaths, 6.
India				Apr. 26–May 2, 1925: Cases, 6,675; deaths, 1,719.
Bombay	Apr. 26–May 9	48	42	
Calcutta	May 3–9	109	100	
Do	May 17–23	75	61	
Karachi	May 18–30	2	1	
Madras	do	54	22	
Rangoon	May 3–23	129	65	
Indo-China:				
Cochin-China—				
Saigon	Apr. 20–May 24	13	9	
Iraq				Jan. 11–Apr. 4, 1925: Cases, 87; deaths, 42.
Bagdad	Apr. 26–May 2	3		
Jamaica				Apr. 26–May 30, 1925: Cases, 75 (reported as alastrim).
Kingston	Apr. 26–May 30	6		Reported as alastrim.
Japan:				
Kobe	May 24–30	1		
Nagasaki	May 15–21	2		
Yokohama	May 25–31	1		
Java:				
Batavia	May 2–8	1		Province.
Rembang Residency	Apr. 23			Epidemic at Kawedanam.
Socrabaya	Apr. 16–May 6	93	10	
Tegal	Mar. 29–Apr. 4	2		
Malta	June 1–15	2		
Mexico:				
Guadalajara	June 2–29		10	
Mexico City	May 24–30	1		Including municipalities in Federal District.
Tampico	June 1–10		1	
Morocco:				
Tangier	May 17–June 5			Present among natives.
Nigeria				December, 1924: Cases, 40; deaths, 16.
Do				January–February, 1925: Cases, 421; deaths, 11.
Persia:				
Teheran	Mar. 21–Apr. 21		11	
Poland				Mar. 1–21, 1925: Cases, 10.
Portugal:				
Lisbon	Apr. 26–June 13	35	6	
Russia				December, 1924: Cases, 890.
				January, 1925: Cases, 383.
Siam:				
Bangkok	Apr. 26–May 16	9	6	
Spain:				
Malaga	May 24–June 13		12	
Valencia	May 31–June 6	1		
Syria:				
Beirut	Apr. 21–30	1		

**CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued.****Reports Received from June 27 to July 17, 1925—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
Tripoli.....				Jan. 3-Feb. 20, 1925: Cases, 6.
Tunis:				
Tunis.....	May 6-June 10.....		23	
Turkey:				
Constantinople.....	May 16-22.....	2		
Union of South Africa:				
Transvaal.....	May 3-9.....			Outbreaks.
Uruguay.....				December, 1924: Cases, 8.

**TYPHUS FEVER**

Algeria:				
Algiers.....	May 11-20.....	6	2	In vicinity, 12 cases. Isolated.
Bulgaria:				November-December, 1924: 1
Sofia.....	May 28-June 3.....	2		case. January-March, 1925:
Chile:				Cases, 36; deaths, 2.
Valparaiso.....	May 10-16.....		1	
China:				
Manchuria—				
Harbin.....	May 19-June 2.....	2		
Egypt:				
Alexandria.....	May 7-June 3.....	3		
Cairo.....	Mar. 26-Apr. 8.....	4	4	
Port Said.....	May 14-20.....	1	1	
Greece:				January-February, 1925: Cases,
Athens.....	May 1-31.....		2	40; deaths, 4.
Latvia:				April, 1925: Cases, 12.
Mexico:				
Mexico City.....	May 24-June 6.....	24		Including municipalities in Fed-
Morocco:				eral district.
Palestine:				January, 1925: Cases, 63.
Jaffa District.....	June 2-8.....	2		
Majdal.....	May 26-June 8.....	3		
Ramleh.....	May 19-25.....	1		
Peru:				
Arequipa.....	Apr. 1-30.....		2	
Poland:				Mar. 1-21 1925: Cases, 592;
Russia:				deaths, 36.
Spain:				December, 1924: Cases, 4,227.
Valencia.....	June 7-13.....		1	January, 1925: Cases, 3,828.
Turkey:				
Constantinople.....	May 11-20.....	6	2	
Union of South Africa:				
Cape Province.....	Apr. 19-May 23.....			Outbreaks.
Natal.....	May 3-9.....			Do.
Durban.....	Feb. 1-May 9.....	14		European.
Orange Free State.....	Feb. 1-May 23.....			Outbreaks.
Transvaal.....	Feb. 1-Apr. 15.....			Do.
Johannesburg.....	May 17-23.....	1		
Yugoslavia:				
Zagreb.....	May 8-21.....	7	1	