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## A DISEASE IN WILD RATS WITH GROSS PATHOLOGY RESEMBLING PLAGUE

By N. E. WAYSON, Surgeon, United States Public Health Service

When it has been established by complete bacteriological evidence, including animal tests, that plague is present among the rodents of a particular locality, experience has shown that the practical diagnosis may be made in routine by the inspection of the pathological changes in the animal examined. Such diagnosis should be confirmed by reproducing the disease in a test animal by inoculating it with tissues or cultures from the infected wild rodent. This practice has been followed in the present survey of rats from Oakland, Alameda, and Berkeley, in California.

During the routine examination of 32,000 of these rats, it has been found that approximately between 0.5 per cent and 1 per cent of them exhibited some lesion, or lesions, characteristic of acute, subacute, or resolving plague. Of these, however, but 21 could be shown to be infected with *Pasteurella pestis* (*Bacillus pestis*). Tissues from many of them, when inoculated into guinea pigs, produced lesions which simulated acute or resolving plague in some feature, but which frequently lacked equally typical characteristics. However, *Past. pestis* was not found by microscopic, cultural, or animal tests; but there was constantly present a small coccoid bacillus, in both the rat lesions and in the lesions of the inoculated guinea pig. In 5 of the 21 rats proved infected with *Past. pestis*, this organism was also present.

The resemblance of the lesions in wild rats apparently produced by this organism, to those caused by *Past. pestis* in these animals, has made the diagnosis of plague more difficult in the present survey.

### LESIONS IN WILD RATS

This infection has been observed almost exclusively in fully grown or three-fourths grown Norway rats, collected from large rat centers, such as garbage dumps, slaughterhouses, and fertilizer plants. A few others have been found in scattered districts. Approximately 95 per cent of all the rats examined are of the Norway variety. The lesions, seemingly due to this coccoid bacillus, which resemble those of acute plague, are: Subcutaneous injection, occasionally with gelatinous subcutaneous edema; enlarged and congested superficial lymph

nodes; congested or normally pink colored lungs with the pleural cavities filled to overflowing with clear pleural fluid; dark or mottled yellow and brown liver with or without a fine stippling; enlarged dark firm spleens with the edges rounded and often with a fine stippling, or enlargement and prominence of the follicles.

Lesions which resemble subacute or resolving plague are: Occasional hard buboes with soft caseous centers, surrounded by congested vessels, and infiltration in the subcutaneous tissues; yellowish brown friable liver or abscesses in the liver; abscesses or large band-shaped or triangular caseous areas in the spleen; adhesions between the spleen and surrounding viscera or parietes, with scarring extending deep into the spleen.

The subcutaneous injection varies in degree and extent. The color produced in the subcutaneous tissues and the underlying muscles ranges from a pinkish red to a cyanotic red; and the injection may be limited to an area about the superficial lymph nodes or extend over the entire abdominal, thoracic, and cervical regions.

Gelatinous edema is not a common finding, and is usually limited to the cervical region.

The superficial lymph nodes are enlarged and congested, but are usually softer than is common to those of septicemic plague. The solitary buboes are not common, but are indistinguishable in appearance from those of plague. The nodes are firm, with caseous centers which are readily squeezed out of the capsules, and are surrounded with varying degrees of infiltration, edema, and injected vessels. The isolated lesions of the spleen and liver have also the characteristic appearance of plague. They are readily shelled out of the surrounding tissue, and are with difficulty mashed out on a glass slide.

The stippling of the liver is made up of pin-point sized areas of necrosis, frequently surrounded by an areola of deeper color than the surrounding tissue.

Aside from the pleural effusion, there is not infrequently present small areas of deeply congested lung which, on section, sink in water. There also occurs a pulmonary solidification of lobar distribution, resembling a gray hepatization in appearance. This lesion is not considered characteristic of plague.

The most frequent set of findings is that of subcutaneous injection with enlarged congested lymph nodes, pleural effusion, mottled, or stippled liver, and enlarged spleen with rounded edges.

#### LESIONS IN TEST ANIMALS

Guinea pigs die ordinarily within 36 to 48 hours after inoculation, either by the subcutaneous pocketing of the affected tissues or by scarification of the skin and the rubbing of the tissue into the scarified

area. Inoculations with cultures of the organism act in a similar manner on the guinea pig.

The post-mortem findings in these pigs are as follows: At the site of inoculation there is necrosis with fibrinous exudate and serosanguinous fluid; the subcutaneous vessels are deeply injected and an extensive gelatinous edema covers the abdominal and thoracic regions, most marked about the lymph nodes; the thoracic and abdominal muscles are often brick red in color; the lymph nodes are swollen and red; the thoracic organs may show no change, or the lungs may be congested, and the pleural sac may contain a small amount of viscid, cloudy exudate; the peritoneal cavity usually contains from 1 to 5 cubic centimeters of viscid, cloudy exudate; the intestines and omentum are deeply congested and often exhibit hemorrhages in their walls; hemorrhages are common also under the parietal peritoneum; the liver appears as though dipped in hot water, a grayish red color; the spleen is normal in size or slightly enlarged and dark, often with a thin veil of fibrinous exudate covering it.

Inoculated animals which live from three days to two weeks usually exhibit some of the above lesions and, in addition, some one or more of the following: Fibrinopurulent pericarditis; nodular areas of necrosis with an areola of congestion in the lung; mottling, or stippling of the liver; dark, firm, enlarged spleen; abscesses in the spleen and liver, and perisplenitis; enlargement of the superficial lymph nodes, which are firm and are surrounded by infiltration of the subcutaneous tissue.

While the lesions in the wild rat suggest plague infection, the pathological changes obtained in the guinea pig by inoculation from these lesions, or from cultures from them, are not characteristic of plague infection in these animals. The bacteriological findings are definite and different from those of plague.

Inoculated wild rats<sup>1</sup> and white rats often survive even though the inoculum is a portion of the same material introduced into the pig, and frequently survive inoculations of cultures unless given in large doses. Those that succumb exhibit usually the lesions seen in the acute deaths of the pigs, with the exception that the spleen is enlarged to twice or thrice its normal size and is very dark.

As stated, plague has been found in wild rats coexistent with infection with this smaller organism. Test animals inoculated with tissues from these coexistent infections usually die within 36 to 48 hours and exhibit the pathological changes which are common to infection with the coccoid organism. Plague bacilli may or may not be recovered from the test animal, or from a second animal inoculated simultaneously, or the presence of plague infection may be

<sup>1</sup> The wild rats used as test animals were obtained from a locality in San Francisco in which the disease had not been observed.

proved only by the isolation of *Past. pestis* from the lesions of the rat and the inoculation of the pure culture into a test animal. Also, test animals inoculated with tissues from plague-infected animals, then two to three days subsequently inoculated with material or cultures from animals infected with the small coccoid organism, usually die promptly within 36 hours after the second inoculation. The findings are those of acute deaths from the secondary inoculation with the coccoid organism. Plague bacilli can be seen in smears from the tissues, but the small coccoid organisms predominate. Cultures of *Past. pestis* can be obtained from the tissues, but there is often some difficulty in isolation because of the resemblance, especially after but 48 hours' growth, between the colonies of the two organisms.

#### THE CAUSATIVE ORGANISM

The organism causing this condition is apparently one of the hemorrhagic septicemia group. It is but half the size of *Past. pestis* when grown on artificial media, at 37° C., and one-fourth its size when found in tissue. Its size varies, as does that of *Past. pestis*, both in media and in tissue. Its morphology varies from that of a minute coccoid bacillus to one whose length is more than twice its width, with rounded ends, or somewhat spindle shaped. It stains most frequently in a uniform manner, but exhibits many forms with bipolar staining, especially in preparations from the spleen and lymph nodes. It does not stain by Gram's method and is stained by the counterstain. It is not motile. The growth on agar is often viscid, and the older colonies are firm and tend to adhere to the media, or give way en masse, so that the whole colony is picked up when touched with the needle. This feature is not uncommon in *pestis* growths. After 24 hours' incubation at 37° C., on plain agars of pH 6.8 to 7.4 reaction, the colonies are pin point in size, of a grayish pearly appearance, and translucent. Seventy-two hours' incubation increases their size to that of a third or half a millimeter. They do not increase much in size after 72 hours' incubation, but become more opaque. They are usually less viscid, however, than colonies of the plague organism, and present less of a capitate appearance as they grow older. There is among them the same tendency to produce small, nodularlike, secondary colonies on the original colony as is frequently seen with the plague organism.

The introduction of 0.025 per cent of gentian violet into the agar plates has a definite inhibitory effect on their growth, unless a relatively large amount of the infected tissue is carried over in preparing the plate. The taurocholate agar of MacConkey, used to inhibit the growth of members of the hemorrhagic septicemia group, has little or no effect on the appearance of the colonies.

So-called involution forms may be recognized in 3 per cent salt agar, but they are not so constant as those seen in *pestis* cultures and are never as large nor as bizarre in form. They usually appear as larger bacillary forms with bipolar staining or as occasional "doughnut" forms. The growth in broth exhibits slight pellicle formation, flaky sedimentation, and turbidity. Stalactites have not been observed, though this may have been due to the frequent vibration to which the incubators are subjected by reason of the location of the laboratory on a busy city street. The growth in litmus milk can not be differentiated from that of *Past. pestis*.

The fermentation reactions are characteristic of the hemorrhagic septicemia group. Acid but no gas is formed in dextrose, maltose, galactose, levulose, and mannit; whereas in lactose, sucrose, and dextrin some strains produce slight or no acid without gas. None fermented inulin.

#### DISCUSSION

There has been observed among the wild rats of Oakland, Calif., and the neighboring cities a disease the gross pathology of which resembles plague in rats. The specific factor in the disease is apparently one of the hemorrhagic septicemia group, which produces acute death in inoculated guinea pigs, wild rats, and white rats, with resultant lesions resembling somewhat very acute plague deaths in these animals.

The practical importance of the disease is the difficulty it interposes in the routine diagnosis of plague in rats. The difficulty arises because of the similarity of plague lesions and those of this disease in the wild rat, and because the presence of the disease in a plague-infected rat frequently results in the premature death of the inoculated test animal before the lesions of plague develop and before the plague organism has become widely disseminated through the tissues.

The sanitary significance of these findings is as yet uncertain, since the pathogenicity of the hemorrhagic septicemia group, other than that of *Past. pestis*, with regard to man is unknown.

NOTE.—Dr. Karl F. Meyer, Director of the Hooper Foundation for Medical Research, and Mr. A. P. Batchelder have cooperated in this report, and are pursuing in more detail the study of the identification and classification of the organism involved.

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### A NOTE ON THE METHOD USED TO PREVENT THE IMPORTATION OF SMALLPOX INTO THE PHILIPPINE ISLANDS

By H. F. SMITH and R. W. HART, Surgeons, United States Public Health Service

Manila is probably the most exposed to quarantinable disease of any port under control of the United States Government. It is entirely surrounded by badly infected territory and is less than a

two days' run from the China coast, where plague, cholera, and smallpox always exist, at least in endemic form.

During the year just passed, no less than four persons developed smallpox while en route from one or another of the China coast ports to Manila, while seven cases developed in newly landed Chinese immigrants domiciled in Manila. For a time the situation was so dangerous that it was considered necessary to remove from ship-board and detain at the quarantine station at Mariveles all Chinese immigrants arriving in the Philippine Islands.

This detention at quarantine was naturally the cause of some complaint and was quite expensive for the quarantine service. With the subsidence of the epidemic, detention at Mariveles was discontinued.

However, during March, 1925, a further number of Chinese passengers arriving in Manila from various ports on the China coast, chiefly from Hongkong and Amoy, were discovered to have developed smallpox subsequent to landing, though they showed no indication of disease at the time of arrival and had been vaccinated at the port of embarkation.

Prior to their embarkation for the Philippines, prospective passengers for Manila had usually been detained two or three days in Amoy or Hongkong, where they had their effects disinfected and where they were bathed and vaccinated by the United States Public Health Service officer stationed at the port.

It was realized by the quarantine officers in the Philippine Islands that, while this procedure was considerably better than no detention or inspection, passengers vaccinated in the port of embarkation three, four, or even more days prior to embarkation for Manila might, after the two days' journey to the Philippines, still be passed by the boarding officers in the Philippine ports and, subsequent to landing in the Philippines, develop smallpox.

It was further realized that the danger of imported cases of this disease might be obviated by again detaining arriving passengers of a certain type at the quarantine detention station at Mariveles for a sufficient period of time to determine their immunity to smallpox; but this procedure was open to objection due to the fact that the Mariveles Quarantine Station is located 30 miles down the bay from Manila, and, in the past, especially in stormy weather, considerable difficulty has been experienced in transporting passengers and supplies to and from the station. Also, there was considerable expense incident to detention at the Mariveles Quarantine Station, which had necessarily to be deducted from the quarantine fund of the Philippine government. On account of the above-mentioned difficulties, it was determined to institute in the various China coast ports a detention period against smallpox, this detention period to vary with

the passenger and with the degree of immunity to smallpox shown by the passenger. Arrangements were accordingly made with the Public Health Service officers on duty at the various ports on the China coast and with the shipping companies and special agents, to require all steerage, deck or third-class passengers, as well as certain cabin-class passengers, to report to the medical officer of the Public Health Service several days prior to sailing. When the prospective passenger reported to the medical officer, he was vaccinated and a notation to this effect was made on a special card provided for this purpose (see accompanying form). Each day, at a designated hour, the passenger again reported to the medical officer, who examined the vaccination; and when immunity to smallpox was found, he stamped the card for release from observation.

Upon the development of a typical immune reaction, the prospective passenger was immediately released from observation. In the case of Oriental passengers, approximately 50 per cent show immune reactions within 48 hours and are released from observation. Those who show an accelerated reaction are held until the eighth day, while those individuals who develop a "primary take" are not released until the twelfth day. This 12-day detention period, together with the 2 days in transit to the islands, completes the 14 days' incubation period subsequent to vaccination.

Several difficulties have been encountered in connection with this procedure. At one time it was found that the regular market price for used vaccination certificates in Manila was 1 peso, and that these certificates were collected from passengers who had passed through quarantine, were shipped back to China and sold there for one and a half to two dollars "Mex." Since many Chinese have three or four different names, the name on the certificate meant nothing, and, in addition, could be erased or altered. To obviate this difficulty, it was decided to staple to the vaccination card a photograph of each Chinese passenger. However, Americans and Europeans notoriously experience difficulty in identifying Chinese from their photographs, and it was found that, within a period of 10 or 15 days, the Chinese passenger commonly could and did alter his appearance to such an extent that it was difficult to tell whether the photograph was that of the holder or of someone else. Consequently a combined card was designed, modeled somewhat on that prescribed in the quarantine regulations for immigrant passengers, but having on the reverse side a space for the photograph of the prospective passenger and a blank space on white cardboard where the thumb print of the individual could be taken so that in case of doubt as to the identity of the passenger, another thumb print could be taken by the quarantine officer in the Philippines and compared with the one made at the time of vaccination.

### INSPECTION CARD

U. S. Public Health Service.

Name of Immigrant *Yung See Mao* Port of Departure **HONGKONG.**  
 Name of Ship **LEESANG** Last Permanent Residence **MANILA.**  
 Date of Departure **MAY 23 1925**  
 Inspected and Passed at *Hong Kong* Date Passed *May 15 1925*

Stamp or Initial of Medical Officer in Ink, <i>S. S. Graham</i>	Passed at Quarantine	Passed at Immigration Bureau
	Port of <b>MANILA, P. I.</b>	Port of <b>MANILA, P. I.</b>
	Date <b>MAY 26 1925</b>	Date <b>MAY 26 1925</b>

Vaccinated Date **13 MAY 1925**

*Recd. Pktd.*

Daily Inspection following Vaccination

1	2	3	4	5	6	7	8	9	10	11	12	13	14
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Indicate on above line day of immune reaction or "Take" and day of release.

Ship List or Manifest *1* No. on ship's Manifest **20**

Keep this Card to avoid detention at Quarantine in the Philippine Islands

難留生醫被時宋呂小到免存留須照此

Photo of Passenger

(Thumb or Finger Prints of Passenger)



Face (upper) and back (lower) of inspection card

The procedure used at present may be summarized as follows: The prospective passenger reports to the special agent, who takes him to the steamship company. The steamship company furnish him with a card (see illustration) and fill in his name, port of departure, and last permanent residence. They also affix to the reverse side of the card a photograph of the passenger, stamped across the border with the stamp of the company or the initials



of the passenger agent. With his card, the prospective passenger next reports to the United States Public Health Service officer stationed at the port who bathes him, disinfects his effects, and vaccinates him. At the time of vaccination he is compared with the photograph on the reverse side of the card, and immediately following vaccination his thumb print is taken for the purpose of future identification. Each day following this, at a designated hour, the passenger reports to the medical officer for inspection, at which time a notation is made on the face of the card as to the condition of the vaccination. The steamship company will not furnish transportation to a passenger until the Public Health Service officer has passed the passenger as an immune and has placed his stamp in the appropriate place on the front of the card and has initialed this stamp in ink. (It was found that unless initialing by hand were required, the whole procedure would be carried out in the special agent's office, including stamp, thumb prints, etc.) After the quarantine officer is satisfied as to the immunity of the individual, the shipping company furnishes him with his transportation and he is embarked on the first ship sailing for the Philippines.

In order to prevent substitution or the embarkation of passengers not immune to smallpox, all passengers and their cards are re-inspected immediately prior to sailing from Chinese ports. The boarding officer inspects the individual on arrival at a Philippine port in the usual manner, and, in addition, checks up and stamps his card. In case of doubt as to identity, a thumb print of the individual is taken on an ordinary piece of white cardboard and compared with that on his inspection card.

This seems to be rather an elaborate procedure to go through: yet, because of the extreme prevalence of smallpox in China, the comparatively short time required for passage from China to the Philippines, and the unscrupulousness shown by certain special agents and brokers in getting Orientals into the Philippines, nothing less than this procedure will prevent the introduction of smallpox into the islands.

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## **MEETING OF THE PERMANENT COMMITTEE OF THE OFFICE INTERNATIONAL D'HYGIÈNE PUBLIQUE**

**Summary of the Proceedings of the Extraordinary Session, April 27–May 6, 1925**

The following report is taken from the Bulletin Mensuel for June, 1925, published by the Office International d'Hygiène Publique, at Paris:

The permanent committee of the Office International d'Hygiène Publique held its extraordinary session of 1925, at Paris, April 27 to May 6, Mr. Velghe, of Belgium, chairman.

Delegates from the following countries (colonies, dominions, etc.) took part in this session: Australia, Belgium, British India, Czechoslovakia, Denmark, Egypt, France, French West Africa, French Indo-China, Great Britain, Italy, Japan, Madagascar, Monaco, Morocco, the Netherlands, Netherland Indies, Norway, Persia, Peru, Poland, Portugal, Rumania, Serb-Croat-Slovene State, Switzerland, Tunis, Union of South Africa, and Uruguay; also the Assistant Director of the Office International d'Hygiène Publique.

The committee took up the development in the international measures proposed during the preceding sessions.

The agreement in regard to furnishing seamen treatment for venereal diseases (the establishment and maintenance, at seaports, of facilities for furnishing seamen of all nationalities free treatment for venereal diseases) was signed at Brussels December 1, 1924, by the representatives of 13 countries, and others have manifested their intention to adhere.

The agreement regarding the shipment and employment of anti-diphtheritic serum was approved in principle by most of the governments. A cause of dissension, that which had originated through a slight inaccuracy of the text, was cleared up, and it was decided that the chairman of the committee should refer the agreement to the French Government to complete the negotiations necessary to secure the signatures.

The proposal of the International Office for the establishment of a standard uniform bill of health was submitted for the consideration of the various governments by a circular letter dated July 31, 1924. Up to the time of the meeting of the committee, of 37 maritime countries participating in the International Office, 19 had signified their acceptance of the proposed text, some had not expressed their opinion, while others had noted reservations or objections. When all the replies shall have been received, the proposal will be taken up again for the purpose of drawing up a form which will meet all the objections.

The committee considered provisions especially pertinent to the Far East to be proposed for inclusion in the International Sanitary Convention, to consider which a conference is to be called at an early date. The matter has been taken up by a commission and by the committee in full session, and the exchanges of views have resulted in the outline of proposals to be taken up at the October session of the committee.

The committee also took under consideration a number of provisions concerning emigrants, harmonizing them with the views expressed by the international conference of emigration and immigration which was held at Rome in 1924.

It also considered a model convention to be proposed for the agreement of bordering countries (by virtue of art. 53 of the International Sanitary Convention of 1912), drawn up by a mixed committee composed of representatives of the health organization and the committee on communications and travel of the League of Nations, and upon which the opinion of the permanent committee had been requested.

Acting as the technical consultative council of the Health Organization of the League of Nations, the committee approved the report of the work of the fourth session of the health committee of the league held at Geneva, April 20-25, 1925. The committee agreed to accept the mission which may be given to it under article 10 of the opium convention of 1925.

The following are the more important matters considered regarding the epidemiology and prophylaxis of certain diseases, subjects already on the calendar of business or introduced during the session by communications from the delegates:

*Industrial anthrax.*—A proposition relative to "the establishment of regulated control, in the countries of origin, of the exportation of animal hides for the protection of the importing countries against anthrax," was proposed by the Minister of Agriculture of Czechoslovakia. This proposition was discussed, but action was reserved until the results of an exhaustive study being made by the League of Nations shall have been completed. This investigation concerns the procedures employed for the disinfection of hides contaminated with anthrax spores. The data being collected again show that cases of anthrax incident to professions, although they have become rare, have not entirely disappeared; for example, in England during the past 15 years there were 873 cases of anthrax with 126 deaths.

*Scarlet fever.*—The replies to the questionnaire received since the last session or brought to the session were turned over to the compiler for the purpose of collective study. These reports were from Norway, the United States, Australia, Rumania, Denmark, and Morocco.

In Rumania, where the disease has always been grave, with high morbidity and mortality rates, it has followed a course of curious variations during recent years. During the World War it almost completely disappeared, only to reoccur later in a mild form. Studies that have been made show the great importance of hospitalization. In the cities, where hospitalization is more general, the case fatality rate has shown the greatest decrease, dropping from 25 per 100 in 1878 to 6.5 per 100 in 1923; whereas in the country, during the same period, it dropped only from 27 to 16.8. Even in the country considerable difference in the case fatality rates was shown between

patients treated at home and those isolated in rural hospitals, the rate in the former group being 48.37 per 100 in 1910 and only 12.11 for the latter.

Bacteriological studies on the virus of scarlet fever have been carried on actively in various countries, notably in England, Italy, and America, but it was considered too early to warrant the drawing of any conclusions. It is probable that the complete report upon the results of the studies will be presented at the October session.

*Species of rodents and their cutaneous parasites.*—It was noted that comment relative to studies on rodent species and their cutaneous parasites in Holland, Japan, Norway, and the colonies and mandatory countries of Great Britain were published in the May (1925) issue of the Bulletin.

In British India the matter has been made the subject of continuous research. The health services are working in unison to secure complete and accurate information on the geographic distribution and seasonal appearance of rats and fleas, (1) in regions in which plague has existed continuously for many years past, and (2) where it has never been reported. It is probable that a detailed report will be presented to the committee at its next session.

In Madagascar, at least at Tananarive, all the rats caught belonged to the species *M. alexandrinus*. The mice are very abundant, but they are not considered as playing any rôle in the spreading of plague. The majority of the fleas (60 per cent) collected from the rats belonged to the species *Xenopsylla cheopis*; the remainder to the species *Ctenopsylla musculi* and *Echidnophaga (Sarcopsylla) gallinacea* in about equal proportion. In the houses abundance of *Ctenocephalus canis* and, more rarely, *Pulex irritans*, were found.

It was learned that, in Europe, there was a general tendency for the black rat to reappear, which, in the eighteenth century, had been driven out by the gray rat. This is without doubt due to the fact that the latter has found modern construction in cities unsuitable to its existence.

With regard to the fleas, it becomes more and more evident that *X. cheopis* is the important disseminator of plague. It lives principally in tropical regions, but it clings to the rat, travels with it, and goes with it to temperate regions. *Ceratophyllus fasciatus* is also an intermediary; it lives principally in the nest of rats. Generally speaking, it can be said that in northern and southern Europe, and from the coast to the interior, *Ceratophyllus* is increasing in numbers while *Xenopsylla* is decreasing. *Pulex irritans*, parasite of man, is responsible for some cases of transmission of plague between human beings, but such cases are rare.

*Cancer.*—A note on cancer mortality in Spain, from 1900 to 1902, is published in the June Bulletin; as well as a report on the work

of the Cancer Commission of the Ministry of Health of Great Britain. The abstract of Czechoslovakian statistics shows that cancer is increasing in Czechoslovakia, with (as is the case generally elsewhere) a higher incidence among females than among males. The increase in incidence is significant. The number of cancer deaths per 1,000 deaths was 45.2 in 1919 and 60.1 in 1923.

An investigation undertaken in England, Italy, and the Netherlands with regard to cancers of the breast and uterus shows that the percentage of cases operated on early is very small, being about 10 per cent. This is regrettable. Probably the same condition exists in other countries, and it is one against which an intensive educational campaign should be launched.

In Belgium, where the mortality from cancer represents approximately 50 per 1,000 total deaths, a certain increase has been shown; but it does not appear to be greater than would naturally result from the increase in the average length of life.

*Relapsing fever and the spirochete of Obermeir.*—A note on the report of the inquiry undertaken by the Office International and also containing data regarding relapsing fever and the spirochete of Dutton, was published in the May issue of the Bulletin.

The question regarding the transmission of relapsing fever by the Miana tick (*Argas persicus*) is not yet fully settled. It seems that malaria, very prevalent in Persia, may account for a large number of cases of fever attributed to the bite of *Argas persicus*.

*Leprosy.*—The June issue of the Bulletin contains various communications regarding the prophylaxis of leprosy.

In Italy a census taken since the last session of the committee has shown a smaller number of cases of leprosy than that shown by the preceding census. As is the case with persons infected with venereal diseases, leprosy persons are cared for in State hospitals.

In Norway the plan that has been followed for the past 70 years has given the best results. From 1850 to 1855 an increase in the number of cases of leprosy occurred; in 1852 there were 2,858 cases, or about 2 per 1,000 inhabitants. At the present time the number of cases has fallen to 1 per 20,000 inhabitants.

In Algeria, according to figures furnished the conference of Strasbourg in 1923, the number of known leprosy cases in the colony in the past 30 years was about 150. There were very few cases among the Jewish race. With the natives the disease is not prevalent and has shown no tendency to spread. With Europeans the cases are almost entirely all imported from Spain and do not constitute foci. There have been discovered some apparent cases of contagion among the Spanish element.

In British India a very active campaign against leprosy is being undertaken, for which a fund of £30,000 has already been raised.

In Indo-China, in 1923, a census showed 5,813 cases of leprosy, of which 4,454 were in leprosariums, or villages of segregation. Isolation, which is apparently the most efficacious prophylactic measure, is carried out rationally in the segregated villages; only the recalcitrant patients are actually confined, while the others lead comparatively free lives. Children born of leprosy parents are taken from their parents, the custom in Indo-China being to permit their adoption within 48 hours after birth.

In New Caledonia, on May 1, 1924, a census showed 1,168 cases of leprosy, or 2.48 per 100 population. Villages of segregation appear to have given the best results in prophylaxis.

Treatment by the ethyl esters of chaulmoogra oil, adopted more or less everywhere, has given the most encouraging results, but conclusions regarding it are still reserved.

*Kala-azar*.—A special commission has been appointed by the government of British India to study kala-azar, which has shown particularly increased incidence in the Provinces of Bihar and Orissa, and perhaps also in the united Provinces of Agra and Oudh. The commission is concerned first with the determination of the mode of transmission of the disease. So far experiments have been made which seem to show that the causative parasite can develop in the organism of *Phlebotomus argentipes*. The report relative to this point was published in the May issue of the Bulletin.

*Tabes and general paralysis*.—Replies continue to come in relative to the inquiry regarding tabes and general paralysis undertaken by the International Office. A note on the information brought out by the Japanese statistics shows that it is impossible at this time to deny an effect of arsenical treatment of syphilis upon the frequency of tabes and general paralysis.

In British India, where the rudimentary condition of nosological statistics does not permit the drawing of definite conclusions, the general medical opinion is that tabes and general paralysis are much less frequent among native syphilitic patients than among Europeans, among whom already both affections are more frequent.

Certain observations, made notably in Germany, would seem to indicate that the ratio of cases of tabes and of general paralysis to the cases of syphilis shows a tendency to increase, as though the virulence of the virus of syphilis or its neurotropism were increased. On the contrary, the methodical researches carried out in England do not appear, up to the present time, to confirm that hypothesis.

*Alastrin and its relation to smallpox*.—During the year 1924 there were notified in England and Wales, 3,797 cases of smallpox. The disease was of mild form, for only 8 deaths were notified. Three of these deaths occurred in one home, where 10 cases occurred, one confluent and three fatal hemorrhagic. The origin of the cases was

not discovered, and no explanation was found for the abnormal virulence. The majority of the cases and the three deaths occurred in unvaccinated persons.

The studies undertaken on the occasion of this occurrence of mild form of smallpox lead the English physicians to the conclusion that it is simply a question of a variant infection, the toxic effect of which for the human organism has disappeared, while its relationship to other animal species has not been modified in an appreciable manner.

A new contribution to the study of alastrim and smallpox, based on the experience in Portugal, is to be published in the July issue of the Bulletin.

*Sundry communications.*—In Italy the gross mortality rate for 1923 was 16.48 per 1,000, a rate not higher than the most favorable pre-war rates. The rate for 1924 is not available; but the high figures for cases of communicable diseases which have been recorded indicate that the favorable health condition has not only been maintained but in general is better. This condition is due undoubtedly in great part to the application of sanitary measures, especially since the coordination following the decree of 1923.<sup>1</sup>

Among other communications presented in the course of the session, and which will be published in the Bulletin, may be mentioned the following:

A note on the use of vaccine attenuated by ether in antirabic treatment.

Three memoranda relative to (1) the state of knowledge on certain important questions regarding the epidemiology and prophylaxis of cholera (rôle of germ carriers, vaccination), (2) the history of cholera epidemics in Japan, and (3) the development of cholera in British India in 1924.

A note on the epidemiology of yellow fever in the French colonies of West Africa.

Information concerning the studies undertaken in Japan on the virus of typhus fever and the virus of scarlet fever.

A note concerning a practical apparatus for disinfection.

## DEATHS DURING WEEK ENDED SEPTEMBER 5, 1925

*Summary of information received by telegraph from industrial insurance companies for week ended September 5, 1925, and corresponding week of 1924. (From the Weekly Health Index, September 9, 1925, issued by the Bureau of the Census, Department of Commerce)*

	Week ended Sept. 5, 1925	Corresponding week, 1924
Policies in force.....	60, 930, 667	56, 873, 682
Number of death claims.....	9, 874	7, 418
Death claims per 1,000 policies in force, annual rate.....	8. 4	6. 8

<sup>1</sup> Bulletin de l'Office International d'Hygiène Publique, Vol. XVI, No. 8 (July, 1924), p. 841.

Deaths from all causes in certain large cities of the United States during the week ended September 5, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, September 9, 1925, issued by the Bureau of the Census, Department of Commerce)

City	Week ended Sept. 5, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate week ended Sept. 5, 1925 <sup>1</sup>
	Total deaths	Death rate <sup>1</sup>		Week ended Sept. 5, 1925	Corresponding week, 1924	
Total (66 cities).....	5,944	11.1	10.9	882	826	76
Akron.....	40			9	4	101
Albany.....	31	13.5	11.0	5	3	109
Atlanta.....	60			10	11	
Baltimore.....	168	11.0	11.7	25	30	75
Birmingham.....	56	14.2		6	8	
Boston.....	192	12.8	11.0	35	23	93
Bridgeport.....	26			3	4	48
Buffalo.....	129	11.3	13.4	25	22	101
Cambridge.....	24	11.1	11.6	11	3	189
Camden.....	25	10.1	12.0	6	4	95
Chicago.....	549	9.6	9.2	89	86	79
Cincinnati.....	112	14.3	11.1	16	11	95
Cleveland.....	158	8.8	9.3	34	33	85
Columbus.....	69	12.9	9.5	12	5	110
Dallas.....	46	12.4	9.7	7	3	
Dayton.....	33	9.9	6.5	4	5	63
Denver.....	75	13.9	14.5	11	16	
Des Moines.....	35	12.2	12.9	2	0	34
Detroit.....	247			59	40	101
Duluth.....	10	4.7	6.7	1	1	22
El Paso.....	38	18.9	17.6	9	6	
Erie.....	22			2	2	39
Fall River.....	23	9.9	9.9	4	5	58
Flint.....	24	9.6	6.3	11	3	174
Fort Worth.....	17	5.8	6.0	1	2	
Grand Rapids.....	34	11.6	8.1	4	1	63
Houston.....	41	13.0	11.7	11	3	
Indianapolis.....	100	14.5	12.8	14	16	100
Jersey City.....	58	9.6	13.7	8	14	57
Kansas City, Kans.....	44	18.5	12.0	7	2	148
Kansas City, Mo.....	85	12.1	9.0	11	8	
Los Angeles.....	203			25	21	69
Louisville.....	77	15.5	13.1	10	13	87
Lowell.....	28	12.5	11.3	2	5	35
Lynn.....	20	10.0	8.0	2	2	53
Memphis.....	65	19.4	27.2	10	19	
Milwaukee.....	105	10.9	7.5	29	6	135
Minneapolis.....	95	11.6	8.4	7	9	37
Nashville.....	31	11.9	19.4	2	7	
New Bedford.....	26	10.0	7.5	8	5	133
New Haven.....	42	12.2	9.5	7	4	91
New Orleans.....	135	17.0	16.9	16	16	
New York.....	1,187	10.1	10.8	148	157	59
Bronx borough.....	147	8.5	8.1	10	8	34
Brooklyn borough.....	397	9.3	10.1	60	69	62
Manhattan borough.....	502	11.6	12.6	64	66	67
Queens borough.....	105	9.5	8.9	12	9	56
Richmond borough.....	36	14.0	17.2	2	5	36
Newark, N. J.....	81	9.3	11.5	14	19	64
Norfolk.....	28			2	5	37
Oakland.....	47	9.7	7.4	4	1	46
Oklahoma City.....	35			3	3	
Omaha.....	66	16.3	9.3	17	7	175
Paterson.....	26	9.6	11.5	1	7	17
Philadelphia.....	394	10.4	11.3	60	74	76
Pittsburgh.....	161	13.3	12.2	34	23	113
Portland, Ore.....	63	11.6	8.6	3	8	30
Providence.....	53	11.3	11.8	6	13	48
Richmond.....	38	10.6	19.0	12	13	143
Rochester.....	69	10.9	11.3	13	11	104
St. Louis.....	211	13.4	10.2	28	10	
St. Paul.....	58	12.3	8.5	7	6	59
Salt Lake City.....	29	11.5	11.4	2	1	31
San Antonio.....	55	14.5	8.4	3	5	
San Diego.....	41	20.2	9.2	2	3	47
San Francisco.....	119	11.1	12.0	10	8	58
Schenectady.....	28	14.3	7.3	2	2	56
Seattle.....	53			3	2	29



Deaths from all causes in certain large cities of the United States during the week ended September 5, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, September 9, 1925, issued by the Bureau of the Census, Department of Commerce)—Contd.

City	Week ended Sept. 5, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate week ended Sept 5, 1925
	Total deaths	Death rate		Week ended Sept. 5, 1925	Corresponding week, 1924	
Somerville.....	12	6.1	9.9	1	1	27
Spokane.....	11	5.3	11.5	1	0	22
Springfield, Mass.....	26	8.9	9.5	4	6	60
Syracuse.....	48	13.1	8.9	6	2	75
Tacoma.....	17	8.5	16.2	0	5	0
Toledo.....	55	10.0	11.3	12	5	108
Trenton.....	25	9.9	11.7	3	5	49
Utica.....	25	12.2		3		64
Washington, D. C.....	108	11.3	11.5	11	18	62
Waterbury.....	10			0	4	0
Wilmington, Del.....	39	16.7	16.1	7	5	159
Worcester.....	34	8.9	11.5	2	8	23
Youngstown.....	27	8.8	4.7	4	4	49

<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 61 cities.

<sup>4</sup> Deaths for week ended Friday, Sept. 4, 1925.

<sup>5</sup> Data for 65 cities.

# 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 September 12, 1925

ALABAMA		Cases	ARKANSAS—continued		Cases
Cerebrospinal meningitis.....		1	Pellagra.....		6
Chicken pox.....		9	Poliomyelitis.....		1
Dengue.....		1	Scarlet fever.....		2
Diphtheria.....		38	Smallpox.....		1
Influenza.....		1	Trachoma.....		2
Malaria.....		148	Tuberculosis.....		6
Mumps.....		3	Typhoid fever.....		49
Ophthalmia neonatorum.....		1	Whooping cough.....		1
Paratyphoid fever.....		1			
Pellagra.....		4	CALIFORNIA		
Pneumonia.....		29	Cerebrospinal meningitis:		
Poliomyelitis.....		2	Bakersfield.....		1
Scarlet fever.....		24	Los Angeles.....		1
Smallpox.....		3	Diphtheria.....		53
Tetanus.....		1	Influenza.....		4
Tuberculosis.....		71	Leprosy—Los Angeles County.....		1
Typhoid fever.....		71	Lethargic encephalitis—Corona.....		1
Typhus fever.....		1	Measles.....		8
Whooping cough.....		17	Poliomyelitis:		
			Berkeley.....		1
ARIZONA			Covina.....		2
Chicken pox.....		3	Exeter.....		1
Influenza.....		3	Hawthorne.....		1
Measles.....		2	Long Beach.....		1
Paratyphoid fever.....		1	Los Angeles.....		2
Poliomyelitis.....		3	Los Angeles County.....		1
Scarlet fever.....		14	Orange County.....		1
Typhoid fever.....		1	Pasadena.....		1
Whooping cough.....		7	Sacramento.....		1
			San Bernardino.....		1
ARKANSAS			San Francisco.....		3
Cerebrospinal meningitis.....		2	Vacaville.....		1
Diphtheria.....		9	Scarlet fever.....		34
Influenza.....		23	Smallpox.....		14
Malaria.....		143	Typhoid fever.....		14
Mumps.....		4			

**COLORADO**  
(Exclusive of Denver)

**ILLINOIS**

Cases

	Cases
Chicken pox.....	2
Diphtheria.....	35
Measles.....	1
Mumps.....	2
Poliomyelitis.....	2
Scarlet fever.....	8
Tuberculosis.....	76
Typhoid fever.....	7
Whooping cough.....	30

**CONNECTICUT**

Chicken pox.....	2
Diphtheria.....	9
German measles.....	1
Influenza.....	4
Lethargic encephalitis.....	1
Measles.....	5
Pneumonia (broncho).....	9
Pneumonia (lobar).....	10
Poliomyelitis.....	2
Scarlet fever.....	20
Tuberculosis.....	30
Typhoid fever.....	10
Whooping cough.....	50

**DELAWARE**

Diphtheria.....	10
Measles.....	2
Pneumonia.....	1
Scarlet fever.....	1
Tuberculosis.....	2
Typhoid fever.....	2
Whooping cough.....	1

**FLORIDA**

Chicken pox.....	1
Dengue.....	2
Diphtheria.....	11
Malaria.....	7
Measles.....	3
Mumps.....	2
Scarlet fever.....	2
Smallpox.....	1
Tuberculosis.....	6
Typhoid fever.....	13
Whooping cough.....	6

**GEORGIA**

Cerebrospinal meningitis.....	1
Chicken pox.....	4
Diphtheria.....	15
Dysentery.....	2
Influenza.....	9
Lethargic encephalitis.....	1
Malaria.....	38
Measles.....	3
Mumps.....	21
Paratyphoid fever.....	3
Pellagra.....	3
Pneumonia.....	11
Scarlet fever.....	4
Septic sore throat.....	5
Trachoma.....	1
Tuberculosis.....	22
Typhoid fever.....	61
Whooping cough.....	11

Cerebrospinal meningitis—Cook County.....	2
Diphtheria:	
Cook County.....	31
Scattering.....	7
Influenza.....	9
Lethargic encephalitis—Cook County.....	2
Measles.....	45
Pneumonia.....	72
Poliomyelitis:	
Cook County.....	4
Fulton County.....	3
Henry County.....	2
Jefferson County.....	1
Kane County.....	1
Lake County.....	1
Madison County.....	1
Montgomery County.....	1
Ogle County.....	1
Rock Island County.....	1
Schuyler County.....	1
Tazewell County.....	1
Scarlet fever:	
Cook County.....	38
St. Clair County.....	7
Will County.....	5
Scattering.....	40
Smallpox.....	3
Tuberculosis.....	142
Typhoid fever:	
Jefferson County.....	20
Scattering.....	66
Whooping cough.....	171

**INDIANA**

Chicken pox.....	1
Diphtheria.....	24
Measles.....	4
Pneumonia.....	2
Poliomyelitis.....	2
Scarlet fever.....	23
Smallpox.....	6
Tuberculosis.....	27
Typhoid fever.....	43
Whooping cough.....	37

**IOWA**

Cerebrospinal meningitis:	
Collins.....	1
Stanhope.....	1
West Point.....	1
Diphtheria.....	11
Measles.....	1
Mumps.....	2
Poliomyelitis:	
Adair.....	3
Decorah.....	1
Des Moines.....	1
Mount Pleasant.....	1
Polk.....	1
Ridgeway.....	2
Rose Hill.....	1
Walker.....	1
Scarlet fever.....	12
Smallpox.....	1
Typhoid fever.....	1

KANSAS

Cases

MASSACHUSETTS

Cases

Cerebrospinal meningitis—Kansas City.....	2
Chicken pox.....	3
Diphtheria.....	5
Influenza.....	3
Malaria.....	1
Measles.....	4
Mumps.....	7
Pneumonia.....	10
Poliomyelitis:	
Atchison.....	1
Cunningham.....	2
Deerfield.....	1
Kansas City.....	1
Oakland.....	1
Oberlin.....	1
Strawn.....	1
Wichita.....	2
Scarlet fever.....	23
Tetanus.....	1
Tuberculosis.....	19
Typhoid fever.....	43
Whooping cough.....	55
LOUISIANA	
Diphtheria.....	25
Malaria.....	27
Pneumonia.....	26
Poliomyelitis.....	1
Scarlet fever.....	1
Smallpox.....	1
Tuberculosis.....	48
Typhoid fever.....	57
Whooping cough.....	9
MAINE	
Chicken pox.....	1
Diphtheria.....	2
Influenza.....	1
Mumps.....	1
Paratyphoid fever.....	4
Scarlet fever.....	9
Tuberculosis.....	3
Typhoid fever.....	3
Vincent's angina.....	1
Whooping cough.....	3
MARYLAND <sup>1</sup>	
Chicken pox.....	3
Conjunctivitis.....	1
Diphtheria.....	22
Dysentery.....	11
Influenza.....	4
Malaria.....	1
Measles.....	12
Mumps.....	2
Paratyphoid fever.....	3
Pneumonia (broncho).....	7
Pneumonia (lobar).....	8
Poliomyelitis.....	4
Scarlet fever.....	10
Septic sore throat.....	1
Tetanus.....	1
Tuberculosis.....	76
Typhoid fever.....	77
Whooping cough.....	60

Cerebrospinal meningitis.....	4
Chicken pox.....	18
Conjunctivitis (suppurative).....	8
Diphtheria.....	57
German measles.....	3
Influenza.....	1
Lethargic encephalitis.....	5
Measles.....	41
Mumps.....	12
Ophthalmia neonatorum.....	13
Pellagra.....	1
Pneumonia (lobar).....	27
Poliomyelitis.....	7
Scarlet fever.....	47
Septic sore throat.....	1
Tetanus.....	1
Tuberculosis (pulmonary).....	105
Tuberculosis (other forms).....	11
Typhoid fever.....	20
Whooping cough.....	147
MICHIGAN	
Diphtheria.....	63
Measles.....	7
Pneumonia.....	28
Scarlet fever.....	76
Smallpox.....	4
Tuberculosis.....	40
Typhoid fever.....	39
Whooping cough.....	140
MINNESOTA	
Chicken pox.....	11
Diphtheria.....	71
Measles.....	1
Poliomyelitis.....	54
Scarlet fever.....	65
Tuberculosis.....	51
Typhoid fever.....	7
Whooping cough.....	40
MISSISSIPPI	
Diphtheria.....	23
Scarlet fever.....	5
Smallpox.....	5
Typhoid fever.....	42
MISSOURI	
(Exclusive of Kansas City)	
Cerebrospinal meningitis.....	3
Chicken pox.....	4
Diphtheria.....	31
Influenza.....	4
Malaria.....	14
Measles.....	3
Mumps.....	3
Pneumonia.....	2
Poliomyelitis.....	12
Scarlet fever.....	45
Septic sore throat.....	1
Trachoma.....	2
Tuberculosis.....	59
Typhoid fever.....	104
Whooping cough.....	25

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

MONTANA		OKLAHOMA (Exclusive of Tulsa and Oklahoma City)	
	Cases		Cases
Diphtheria .....	2	Chicken pox .....	2
Measles .....	2	Diphtheria .....	20
Mumps .....	10	Influenza .....	13
Poliomyelitis—Scattering .....	5	Malaria .....	102
Scarlet fever .....	10	Mumps .....	1
Smallpox .....	2	Pellagra .....	3
Tuberculosis .....	3	Pneumonia .....	3
Typhoid fever .....	19	Poliomyelitis—Texas County .....	1
Whooping cough .....	16	Scarlet fever .....	12
<b>NEBRASKA</b>		Smallpox .....	1
Chicken pox .....	3	Typhoid fever:	
Diphtheria .....	6	Pittsburg County .....	16
Mumps .....	1	Scattering .....	98
Poliomyelitis .....	7	Whooping cough .....	20
Scarlet fever .....	1	<b>OREGON</b>	
Tetanus .....	1	Cerebrospinal meningitis .....	3
Typhoid fever .....	3	Diphtheria .....	9
Whooping cough .....	19	Measles .....	1
<b>NEW JERSEY</b>		Mumps .....	6
Anthrax .....	3	Pneumonia .....	14
Chicken pox .....	3	Poliomyelitis .....	3
Diphtheria .....	64	Scarlet fever .....	16
Dysentery .....	2	Septic sore throat .....	2
Influenza .....	2	Smallpox .....	4
Malaria .....	1	Tuberculosis .....	14
Measles .....	15	Typhoid fever .....	9
Pneumonia .....	43	Whooping cough .....	13
Poliomyelitis .....	2	<b>SOUTH DAKOTA</b>	
Scarlet fever .....	29	Diphtheria .....	3
Typhoid fever .....	29	Measles .....	1
Whooping cough .....	49	Scarlet fever .....	1
<b>NEW MEXICO</b>		Smallpox .....	2
Dysentery (amœbic) .....	1	Typhoid fever .....	1
Measles .....	2	Whooping cough .....	1
Poliomyelitis .....	1	<b>TEXAS</b>	
Tuberculosis .....	2	Chicken pox .....	1
Typhoid fever .....	14	Diphtheria .....	11
Whooping cough .....	5	Dysentery (epidemic) .....	6
<b>NEW YORK</b>		Leprosy .....	1
(Exclusive of New York City)		Mumps .....	6
Cerebrospinal meningitis .....	2	Scarlet fever .....	10
Diphtheria .....	67	Smallpox .....	2
Influenza .....	3	Tuberculosis .....	31
Lethargic encephalitis .....	5	Typhoid fever .....	23
Measles .....	39	Whooping cough .....	39
Pneumonia .....	92	<b>WASHINGTON</b>	
Poliomyelitis .....	22	Chicken pox .....	5
Scarlet fever .....	52	Diphtheria .....	10
Typhoid fever .....	60	German measles .....	3
Whooping cough .....	172	Mumps .....	16
<b>NORTH CAROLINA</b>		Poliomyelitis:	
Chicken pox .....	5	Bellingham .....	1
Diphtheria .....	104	Pierce County .....	1
German measles .....	1	Seattle .....	2
Measles .....	4	Skagit County .....	1
Poliomyelitis .....	2	Spokane .....	1
Scarlet fever .....	44	Thurston County .....	1
Septic sore throat .....	7	Scarlet fever .....	14
Smallpox .....	7	Smallpox .....	16
Typhoid fever .....	44	Tuberculosis .....	2
Whooping cough .....	66	Typhoid fever .....	10
		Whooping cough .....	24

WEST VIRGINIA		Cases
Diphtheria.....		6
Scarlet fever.....		9
<b>Typhoid fever:</b>		
Elkins.....		5
Scattering.....		9
WISCONSIN		
<b>Milwaukee:</b>		
Chicken pox.....		5
Diphtheria.....		10
German measles.....		1
Measles.....		2
Mumps.....		3
Pneumonia.....		7
Poliomyelitis.....		1
Scarlet fever.....		6
Tuberculosis.....		15
Whooping cough.....		68
<b>Scattering:</b>		
Cerebrospinal meningitis.....		1
Chicken pox.....		15
Diphtheria.....		17
German measles.....		5
Influenza.....		20

WISCONSIN—continued		Cases
<b>Scattering—Continued</b>		
Measles.....		42
Mumps.....		14
Ophthalmia neonatorum.....		1
Pneumonia.....		2
Poliomyelitis.....		25
Scarlet fever.....		24
Smallpox.....		4
Tuberculosis.....		23
Typhoid fever.....		11
Whooping cough.....		76
WYOMING		
Cerebrospinal meningitis—Crook County.....		1
Diphtheria.....		4
Influenza.....		2
Mumps.....		1
<b>Poliomyelitis:</b>		
Goshen County.....		1
Natrona County.....		1
Scarlet fever.....		2
Typhoid fever.....		3

**Reports for Week Ended September 5, 1925**

DISTRICT OF COLUMBIA		Cases
Diphtheria.....		1
Measles.....		1
Pneumonia.....		7
Scarlet fever.....		8
Tuberculosis.....		16
Typhoid fever.....		6
Whooping cough.....		10

NORTH DAKOTA		Cases
Cerebrospinal meningitis.....		2
Chicken pox.....		1
Diphtheria.....		4
German measles.....		7
Mumps.....		1
Poliomyelitis.....		11
Scarlet fever.....		22
Tuberculosis.....		4
Typhoid fever.....		5
Whooping cough.....		37

**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>July, 1925</i>										
Colorado.....		82			35			84	1	49
Hawaii, Territory.....	2	24	20		37			4		12
Rhode Island.....		15					7	18	16	8
<i>August, 1925</i>										
Arizona.....				1	2		12	8		21
Connecticut.....	3	64	2	2	47		14	71		43
Vermont.....	0	5	0	0	21		6	15		8
Wisconsin.....	3	166	25	0	310	0	54	171	41	22

**PLAGUE-ERADICATIVE MEASURES IN THE UNITED STATES**

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

*Los Angeles, Calif.*

Week ended Aug. 29, 1925:	
Number of rats trapped.....	2, 459
Number of rats found plague infected.....	0
Number of squirrels examined.....	714
Number of squirrels found plague infected.....	0
Number of mice trapped.....	3, 011
Number of mice found plague infected.....	0
Date of discovery of last plague-infected rodent, Aug. 22, 1925.	
Date of last human case, Jan. 15, 1925.	

*Oakland, Calif.*

(Including other East Bay communities)

Week ended Aug. 29, 1925:	
Number of rats trapped.....	976
Number of rats found plague infected.....	0
Totals:	
Number of rats trapped Jan. 1 to Aug. 29, 1925.....	66, 420
Number of rats found plague infected.....	21
Number of squirrels examined May 1 to Aug. 1, 1925.....	7, 277
Number of squirrels found 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 Aug. 29, 1925:	
Number of vessels inspected.....	12
Number of inspections made.....	23
Number of vessels fumigated with cyanide gas.....	8
Number of rodents examined for plague.....	2, 811
Number of rodents found plague infected.....	0
Totals, Dec. 5, 1924, to Aug. 29, 1925:	
Number of rodents examined for plague.....	162, 955
Number of rodents found 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.	

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

*Diphtheria.*—For the week ended August 29, 1925, 35 States reported 814 cases of diphtheria. For the week ended August 30, 1924, the same States reported 1,063 cases of this disease. One hundred cities, situated in all parts of the country and having an aggregate population of nearly 27,900,000, reported 411 cases of diphtheria for the week ended August 29, 1925. Last year for the corresponding week they reported 465 cases. The estimated

expectancy for these cities was 559 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

*Measles.*—Thirty-two States reported 358 cases of measles for the week ended August 29, 1925, and 269 cases of this disease for the week ended August 30, 1924. One hundred cities reported 153 cases of measles for the week this year and 113 cases last year.

*Poliomyelitis.*—The health officers of 34 States reported 289 cases of poliomyelitis for the week ended August 29, 1925. The same States reported 230 cases for the week ended August 30, 1924.

*Scarlet fever.*—Scarlet fever was reported for the week as follows: Thirty-five States—this year, 619 cases; last year, 659 cases; 100 cities—this year, 252, last year, 300 cases; estimated expectancy, 239 cases.

*Smallpox.*—For the week ended August 29, 1925, 35 States reported 101 cases of smallpox. Last year for the corresponding week they reported 205 cases. One hundred cities reported smallpox for the week as follows: 1925, 43 cases; 1924, 87 cases; estimated expectancy, 24 cases. No deaths from smallpox were reported by these cities for the week this year.

*Typhoid fever.*—One thousand and seventy-six cases of typhoid fever were reported for the week ended August 29, 1925, by 34 States. For the corresponding week of 1924 the same States reported 848 cases. One hundred cities reported 253 cases of typhoid fever for the week this year and 215 cases for the corresponding week last year. The estimated expectancy for these cities was 239 cases.

*Influenza and pneumonia.*—Deaths from influenza and pneumonia (combined) were reported for the week by 100 cities as follows: 1925, 360 deaths; 1924, 321 deaths.



## City reports for week ended August 29, 1935

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 reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
<b>NEW ENGLAND</b>									
<b>Maine:</b>									
Portland	73, 129	0	1	0	0	0	9	0	0
<b>New Hampshire:</b>									
Concord	22, 406	0	0	0	0	0	6	0	0
<b>Vermont:</b>									
Barre	10, 008	0	0	0	0	0	0	0	0
Burlington	23, 613	0	0	0	0	0	0	0	3
<b>Massachusetts:</b>									
Boston	770, 400	4	33	8	1	0	10	2	7
Fall River	123, 912	0	2	0	0	0	2	0	0
Springfield	144, 227	0	2	0	0	0	0	0	1
Worcester	191, 927	1	3	6	0	0	18	0	2
<b>Rhode Island:</b>									
Pawtucket	68, 799	0	0	0	0	0	0	0	1
Providence	242, 378	0	6	1	0	0	4	0	2
<b>Connecticut:</b>									
Bridgeport	143, 555	0	3	2	0	0	0	6	1
Hartford	138, 036	0	4	0	0	0	2	0	2
New Haven	172, 967	0	2	0	0	0	0	0	1
<b>MIDDLE ATLANTIC</b>									
<b>New York:</b>									
Buffalo	536, 718	1	12	0	0	0	6	0	9
New York	5, 927, 625	15	96	63	2	3	34	6	70
Rochester	317, 867	0	3	0	0	0	2	0	5
Syracuse	184, 511	0	4	1	0	0	1	4	0
<b>New Jersey:</b>									
Camden	124, 157	0	1	2	0	0	1	0	0
Newark	438, 699	5	7	6	0	0	1	2	6
Trenton	127, 390	0	3	2	0	0	0	0	2
<b>Pennsylvania:</b>									
Philadelphia	1, 922, 788	5	30	37	0	1	9	0	25
Pittsburgh	613, 442	4	17	8	1	2	11	1	12
Reading	110, 917	0	2	1	0	0	2	0	0
Scranton	140, 636	0	1	3	0	0	0	0	0
<b>EAST NORTH CENTRAL</b>									
<b>Ohio:</b>									
Cincinnati	406, 312	0	5	4	0	0	0	1	1
Cleveland	888, 519	4	20	15	3	2	1	1	10
Columbus	261, 082	0	2	2	0	0	0	0	1
Toledo	268, 338	4	5	15	0	0	1	0	1
<b>Indiana:</b>									
Fort Wayne	93, 573	0	1	2	0	0	0	0	2
Indianapolis	342, 718	0	7	3	0	0	3	0	5
South Bend	76, 709	0	1	0	0	0	0	0	0
Terre Haute	68, 939	0	1	0	0	0	0	0	0
<b>Illinois:</b>									
Chicago	2, 886, 121	5	69	44	12	3	15	2	21
Cicero	55, 968	1	1	1	0	0	0	0	0
Springfield	61, 833	0	1	1	0	0	1	0	1
<b>Michigan:</b>									
Detroit	995, 668	5	33	15	0	1	3	0	12
Flint	117, 968	0	4	0	1	0	0	0	1
Grand Rapids	145, 947	0	2	0	0	0	1	0	1

<sup>1</sup> Population Jan. 1, 1923.

## City reports for week ended August 29, 1925—Continued

Division, State, and city	Population July 1, 1923, estimated	Chick-en pox, cases reported	Diphtheria		Influenza		Meas-les, cases reported	Mumps, cases reported	Pneu-monia, deaths reported
			Cases, esti-mated expectancy	Cases re-ported	Cases re-ported	Death re-ported			
<b>EAST NORTH CENTRAL—continued</b>									
<b>Wisconsin:</b>									
Madison.....	42,519	0	0	4	0	0	0	0	1
Milwaukee.....	484,595	2	11	7	0	0	5	3	4
Racine.....	64,393	0	0	0	0	0	0	0	2
Superior.....	139,671	0	0	0	0	0	0	0	0
<b>WEST NORTH CENTRAL</b>									
<b>Minnesota:</b>									
Duluth.....	106,289	1	2	0	0	0	0	0	1
Minneapolis.....	409,125	12	12	29	0	0	0	0	5
St. Paul.....	241,891	1	11	3	0	0	1	0	3
<b>Iowa:</b>									
Davenport.....	61,262	0	1	0	0	0	0	0	—
Des Moines.....	140,923	0	2	0	0	0	0	0	—
Sioux City.....	79,662	0	1	0	0	0	0	0	—
Waterloo.....	39,667	0	0	0	0	0	0	2	—
<b>Missouri:</b>									
Kansas City.....	351,819	1	4	0	0	0	0	2	7
St. Joseph.....	78,232	0	1	0	0	0	0	0	0
St. Louis.....	803,853	0	20	21	1	1	0	1	0
<b>North Dakota:</b>									
Fargo.....	24,841	0	0	2	0	0	0	2	0
Grand Forks.....	14,547	0	0	0	0	0	0	0	—
<b>South Dakota:</b>									
Aberdeen.....	15,829	0	0	0	0	0	0	0	—
Sioux Falls.....	29,206	5	1	2	0	0	0	0	1
<b>Nebraska:</b>									
Lincoln.....	58,761	0	0	0	0	0	1	2	1
Omaha.....	204,382	0	6	0	0	0	0	0	6
<b>Kansas:</b>									
Topeka.....	52,555	0	0	0	0	0	1	0	0
Wichita.....	73,261	0	1	0	0	0	0	0	2
<b>SOUTH ATLANTIC</b>									
<b>Delaware:</b>									
Wilmington.....	117,728	0	1	0	0	0	0	0	0
<b>Maryland:</b>									
Baltimore.....	773,580	2	10	8	1	1	4	5	12
Cumberland.....	32,361	0	1	1	1	0	0	0	1
Frederick.....	11,301	0	1	0	0	0	0	0	1
<b>District of Columbia:</b>									
Washington.....	1437,571	0	3	0	0	0	2	0	7
<b>Virginia:</b>									
Lynchburg.....	30,277	0	0	1	0	0	0	0	0
Norfolk.....	159,089	0	0	1	0	0	0	0	2
Richmond.....	181,044	0	6	8	0	0	0	1	1
Roanoke.....	55,562	0	2	4	0	0	1	0	0
<b>West Virginia:</b>									
Charleston.....	45,597	0	1	0	0	0	1	0	0
Huntington.....	57,918	0	1	0	0	0	0	0	0
Wheeling.....	156,208	1	1	4	0	0	2	0	0
<b>North Carolina:</b>									
Raleigh.....	29,171	0	0	0	0	0	0	0	0
Wilmington.....	35,719	0	0	2	0	0	0	0	2
Winston-Salem.....	56,230	0	1	1	0	0	2	0	2
<b>South Carolina:</b>									
Charleston.....	71,245	0	0	1	0	0	0	0	2
Columbia.....	39,688	0	1	1	0	0	0	1	0
Greenville.....	25,789	0	0	0	0	0	0	0	—
<b>Georgia:</b>									
Atlanta.....	222,963	0	3	0	3	0	0	1	6
Brunswick.....	15,937	0	0	0	0	0	0	1	0
Savannah.....	89,448	0	1	1	2	0	0	1	3
<b>Florida:</b>									
St. Petersburg.....	24,403	0	0	0	0	0	0	0	—
Tampa.....	56,650	0	1	2	0	0	0	1	2

1 Population Jan. 1, 1920.

## City reports for week ended August 29, 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, es- ti- mated ex- pec- tancy	Cases re- ported	Cases re- ported	Deaths re- ported			
<b>EAST SOUTH CENTRAL</b>									
Kentucky:									
Covington.....	57,877	0	1	0	0	0	0	0	0
Louisville.....	257,671	0	3	0	1	0	0	0	1
Tennessee:									
Memphis.....	170,067	0	4	1	0	0	0	0	4
Nashville.....	121,128	0	1	1	0	1	0	0	2
Alabama:									
Birmingham.....	195,901	1	3	0	0	0	2	0	4
Mobile.....	63,868	0	1	0	0	0	0	0	1
Montgomery.....	45,383	0	1	5	0	0	0	0	0
<b>WEST SOUTH CENTRAL</b>									
Arkansas:									
Fort Smith.....	30,635	0	0	1	0	0	0	0	0
Little Rock.....	70,916	0	0	0	0	0	0	0	2
Louisiana:									
New Orleans.....	404,575	0	6	7	2	2	0	0	9
Shreveport.....	54,590	0	1	0	0	0	0	0	1
Oklahoma:									
Oklahoma.....	101,150	0	1	2	0	0	0	0	2
Tulsa.....	102,018	1	0	0	0	0	0	0	0
Texas:									
Dallas.....	177,274	0	3	4	0	1	0	0	3
Galveston.....	46,877	0	1	0	0	0	0	0	0
Houston.....	154,970	0	1	7	0	0	0	0	3
San Antonio.....	184,727	0	1	2	0	0	0	0	4
<b>MOUNTAIN</b>									
Montana:									
Billings.....	16,927	0	0	0	0	0	1	1	0
Great Falls.....	27,787	2	1	1	0	0	1	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	1	0	0	0	0	0	0
Colorado:									
Denver.....	272,031	2	8	8	0	1	0	0	7
Pueblo.....	43,519	0	2	8	0	0	0	0	0
New Mexico:									
Albuquerque.....	16,648	0	0	0	0	0	0	0	0
Arizona:									
Phoenix.....	33,899	0	0	0	0	0	0	0	0
Utah:									
Salt Lake City.....	128,241	2	2	1	0	0	1	2	1
Nevada:									
Reno.....	12,429	0	0	0	0	0	0	0	0
<b>PACIFIC</b>									
Washington:									
Seattle.....	1 315,685	3	3	2	0	0	0	10	0
Spokane.....	104,573	0	2	10	0	0	0	0	0
Tacoma.....	101,731	0	2	0	0	0	0	0	0
California:									
Los Angeles.....	666,853	4	20	20	6	0	0	8	15
Sacramento.....	69,950	1	1	0	0	0	0	1	0
San Francisco.....	539,088	6	15	6	2	0	2	8	2

1 Population Jan. 1, 1920.

## City reports for week ended August 29, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
<b>NEW ENGLAND</b>											
<b>Maine:</b>											
Portland.....	1	0	0	0	0	0	1	1	2	2	23
<b>New Hampshire:</b>											
Concord.....	0	0	0	0	0	0	1	0	0	0	4
<b>Vermont:</b>											
Barre.....	0	0	0	0	0	0	0	0	0	0	1
Burlington.....	1	0	0	0	0	1	0	0	0	0	18
<b>Massachusetts:</b>											
Boston.....	13	12	0	0	0	17	4	1	1	56	172
Fall River.....	1	2	0	0	0	1	2	2	0	0	24
Springfield.....	2	2	0	0	0	0	1	1	0	2	26
Worcester.....	2	2	0	0	0	4	0	2	0	10	-----
<b>Rhode Island:</b>											
Pawtucket.....	0	0	0	0	0	0	1	1	0	0	-----
Providence.....	2	2	0	0	0	1	1	1	0	0	45
<b>Connecticut:</b>											
Bridgeport.....	1	6	0	0	0	2	0	1	0	1	27
Hartford.....	1	1	0	0	0	2	2	0	0	2	41
New Haven.....	2	1	0	0	0	0	4	1	0	17	39
<b>MIDDLE ATLANTIC</b>											
<b>New York:</b>											
Buffalo.....	4	1	0	0	0	9	3	1	0	15	108
New York.....	22	17	0	0	0	176	45	38	4	69	1,088
Rochester.....	3	2	0	0	0	1	1	0	0	10	67
Syracuse.....	3	1	0	0	0	2	1	0	0	10	36
<b>New Jersey:</b>											
Camden.....	1	0	0	0	0	1	2	2	2	2	20
Newark.....	4	4	0	0	0	14	2	8	1	18	101
Trenton.....	1	0	1	0	0	2	2	0	0	1	38
<b>Pennsylvania:</b>											
Philadelphia.....	13	15	0	1	0	34	14	10	4	37	404
Pittsburgh.....	7	14	0	0	0	8	5	1	1	17	161
Reading.....	1	0	0	0	0	0	2	0	0	13	25
Scranton.....	0	0	0	0	-----	-----	0	0	-----	0	-----
<b>EAST NORTH CENTRAL</b>											
<b>Ohio:</b>											
Cincinnati.....	3	3	0	1	0	12	3	2	0	10	110
Cleveland.....	7	5	1	0	0	12	6	6	0	89	172
Columbus.....	2	0	0	0	0	6	2	1	0	11	64
Toledo.....	5	3	0	0	0	6	2	1	0	5	58
<b>Indiana:</b>											
Fort Wayne.....	0	4	0	0	0	0	1	10	0	0	-----
Indianapolis.....	3	2	0	3	0	10	3	1	0	19	89
South Bend.....	1	1	0	4	0	1	0	0	0	2	10
Terre Haute.....	0	0	0	0	0	1	0	0	2	1	22
<b>Illinois:</b>											
Chicago.....	26	22	0	0	0	42	7	7	0	79	534
Cicero.....	0	0	0	0	0	0	0	0	0	0	-----
Springfield.....	0	1	0	0	0	0	1	0	0	0	18
<b>Michigan:</b>											
Detroit.....	20	18	2	1	0	16	4	10	2	68	248
Flint.....	2	1	1	0	0	0	1	0	0	5	18
Grand Rapids.....	2	3	0	2	0	0	1	0	0	6	33
<b>Wisconsin:</b>											
Madison.....	0	4	0	0	0	0	0	0	0	0	4
Milwaukee.....	9	0	1	0	0	5	1	0	0	65	85
Racine.....	1	0	0	0	0	0	0	0	0	17	7
Superior.....	1	0	1	0	0	1	0	0	0	2	10
<b>WEST NORTH CENTRAL</b>											
<b>Minnesota:</b>											
Duluth.....	3	7	0	0	0	1	0	0	0	6	19
Minneapolis.....	7	6	1	0	0	4	2	0	0	1	79
St. Paul.....	3	6	1	0	0	3	1	1	0	17	60

1 Pulmonary tuberculosis only.

## City reports for week ended August 29, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
<b>WEST NORTH CENTRAL—continued</b>											
<b>Iowa:</b>											
Davenport	0	0	0	0			0	0		0	
Des Moines	3	0	1	2			0	0		0	
Sioux City	1	0	1	0			0	0		0	
Waterloo	1	0	0	0			0	0		0	
<b>Missouri:</b>											
Kansas City	2	4	0	0	0	5	3	4	0	12	80
St. Joseph	1	0	0	0	0	0	0	0	0	0	29
St. Louis	7	23	0	0	0	9	8	9	1	12	168
<b>North Dakota:</b>											
Fargo	0	0	1	0	0	1	0	0	0	3	9
Grand Forks	1	0	0	0			0	0		0	
<b>South Dakota:</b>											
Aberdeen	1	1	0	0			0	0		0	
Sioux Falls	0	2	0	0	0	0	0	0	0	0	7
<b>Nebraska:</b>											
Lincoln	0	0	1	0	0	0	1	1	0	4	16
Omaha	1	2	0	2	0	4	0	1	0	1	53
<b>Kansas:</b>											
Topeka	1	3	0	0	0	1	2	2	0	10	18
Wichita	1	1	1	0	0	1	2	0	1	4	29
<b>SOUTH ATLANTIC</b>											
<b>Delaware:</b>											
Wilmington	0	0	0	0	0	2	1	0	0	0	20
<b>Maryland:</b>											
Baltimore	6	2	0			16	10	11	0	65	163
Cumberland	0	1	0	0	0	0	0	1	0	0	7
Frederick	0	0	0	0	0	0	0	0	0	0	2
<b>District of Columbia:</b>											
Washington	3	7	0	0	0	10	5	3	0	16	117
<b>Virginia:</b>											
Lynchburg	0	2	0	0	0	2	1	3	0	2	8
Norfolk	1	0	0	0	0	3	2	1	0	4	
Richmond	3	2	0	0	0	1	3	0	0	0	38
Roanoke	1	1	0	0	0	4	3	1	1	0	21
<b>West Virginia:</b>											
Charleston	0	0	0	1	0	0	2	6	0	0	15
Huntington	1	0	0	0	0	0	1	0	0	0	
Wheeling	1	2	0	0	0	1	1	5	0	0	16
<b>North Carolina:</b>											
Raleigh	0	1	0	0	0	2	1	2	0	6	12
Wilmington	0	2	0	0	0	0	0	0	0	1	10
Winston-Salem	0	0	0	5	0	0	2	0	0	14	22
<b>South Carolina:</b>											
Charleston	0	0	0	0	0	1	2	8	0	0	26
Columbia	0	0	1	0	0	0	1	0	0	1	
Greenville	1		0				0				
<b>Georgia:</b>											
Atlanta	4	0	1	0	0	7	4	3	1	2	69
Brunswick	0	0	0	0	0	0	0	0	0	0	3
Savannah	0	0	0	0	0	5	1	1	0	0	32
<b>Florida:</b>											
St. Petersburg	0		0				0				
Tampa	0	0	0	0	0	3	1	1	0	1	26
<b>EAST SOUTH CENTRAL</b>											
<b>Kentucky:</b>											
Covington	0	0	0	0	0	1	1	0	0	0	
Louisville	1	1	0	0	0	3	6	7	0	0	63
<b>Tennessee:</b>											
Memphis	1	0	0	0	0	4	6	13	1	2	56
Nashville	1	2	0	0	0	0	6	3	1	2	39
<b>Alabama:</b>											
Birmingham	3	1	1	10	0	7	7	7	2	4	58
Mobile	0	0	0	0	0	1	1	1	0	0	20
Montgomery	0	1	0	0	0	0	1	0	0	0	10

## City reports for week ended August 29, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
<b>WEST SOUTH CENTRAL</b>											
Arkansas:											
Fort Smith.....	1	2	0	0	0	0	1	0	0	0	-----
Little Rock.....	0	0	0	0	0	1	2	6	0	0	-----
Louisiana:											
New Orleans.....	1	1	0	0	0	5	5	3	2	7	132
Shreveport.....	0	0	0	0	0	2	1	9	3	0	27
Oklahoma:											
Oklahoma.....	1	1	0	0	0	1	2	2	0	0	24
Tulsa.....	1	1	0	0	0	0	3	3	0	1	-----
Texas:											
Dallas.....	2	1	0	2	0	1	5	2	0	-----	39
Galveston.....	0	0	0	0	0	0	0	0	0	0	7
Houston.....	1	0	0	1	0	2	1	3	0	0	52
San Antonio.....	0	0	0	0	0	9	0	1	0	0	47
<b>MOUNTAIN</b>											
Montana:											
Billings.....	0	0	1	0	0	0	0	0	0	1	5
Great Falls.....	0	1	0	0	0	0	0	2	0	4	4
Helena.....	0	0	0	0	0	1	0	0	0	0	5
Missoula.....	0	0	0	0	0	1	0	0	0	0	9
Idaho:											
Boise.....	1	1	0	1	0	0	0	0	0	0	5
Colorado:											
Denver.....	2	0	3	0	0	10	5	4	0	17	86
Pueblo.....	0	1	0	0	0	0	0	5	0	0	12
New Mexico:											
Albuquerque.....	1	0	0	0	0	0	1	1	0	0	8
Arizona:											
Phoenix.....	0	-----	0	0	0	9	-----	0	0	2	22
Utah:											
Salt Lake City.....	1	0	0	0	0	0	1	1	0	5	22
Nevada:											
Reno.....	1	0	0	0	0	0	1	0	1	0	6
<b>PACIFIC</b>											
Washington:											
Seattle.....	3	0	1	4	-----	-----	2	2	-----	7	-----
Spokane.....	2	3	1	0	-----	-----	0	0	-----	8	-----
Tacoma.....	1	2	0	2	0	0	1	0	0	3	19
California:											
Los Angeles.....	6	15	2	2	0	14	5	4	0	27	189
Sacramento.....	0	0	0	1	0	1	1	5	0	0	18
San Francisco.....	5	4	1	1	0	9	2	8	0	4	119
Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)			Typhus fever	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths	Cases	Deaths
<b>NEW ENGLAND</b>											
Vermont:											
Burlington.....	0	0	0	0	0	0	0	1	0	0	0
Massachusetts:											
Boston.....	0	0	0	0	1	0	2	3	0	0	0
Worcester.....	0	0	4	0	0	0	0	0	0	0	0
Rhode Island:											
Providence.....	0	0	1	0	0	0	0	0	1	0	0
Connecticut:											
Bridgeport.....	0	0	0	0	0	0	0	1	1	0	0
New Haven.....	0	0	0	0	0	0	0	2	0	0	0

## City reports for week ended August 29, 1925—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Pollomyelitis (infantile paralysis)		Typhus fever		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths	Cases	Deaths
<b>MIDDLE ATLANTIC</b>											
New York:											
Buffalo.....	0	0	0	0	0	0	0	3	0	0	0
New York City..	3	0	9	5	0	0	8	16	3	0	0
New Jersey:											
Newark.....	1	1	1	0	0	0	1	1	1	0	0
Trenton.....	0	0	0	1	0	0	0	0	0	0	0
Pennsylvania:											
Philadelphia.....	0	1	0	0	0	0	1	0	0	0	0
Pittsburgh.....	0	0	0	0	0	0	0	6	1	0	0
<b>EAST NORTH CENTRAL</b>											
Ohio:											
Cleveland.....	0	0	1	1	0	0	1	9	2	0	0
Illinois:											
Chicago.....	0	0	1	0	0	1	6	3	0	0	0
Michigan:											
Detroit.....	0	0	1	1	0	0	1	1	1	0	0
<b>WEST NORTH CENTRAL</b>											
Minnesota:											
Duluth.....	0	0	0	0	0	0	0	2	0	0	0
Minneapolis.....	0	0	0	0	0	0	1	4	1	0	0
St. Paul.....	0	0	0	0	0	0	0	3	1	0	0
Iowa:											
Des Moines.....	0	0	0	0	0	0	0	1	0	0	0
Missouri:											
Kansas City.....	0	0	0	0	0	0	0	2	3	0	0
St. Joseph.....	1	1	0	0	0	0	0	2	0	0	0
Nebraska:											
Lincoln.....	0	0	0	0	0	0	0	1	0	0	0
Omaha.....	0	0	0	0	0	0	1	5	0	0	0
<b>SOUTH ATLANTIC</b>											
Maryland:											
Baltimore.....	0	0	1	1	0	0	2	0	0	0	0
District of Columbia:											
Washington.....	0	0	0	0	0	0	1	2	0	0	0
Virginia:											
Lynchburg.....	0	0	0	0	0	1	0	0	0	0	0
Norfolk.....	0	0	0	0	0	0	0	1	0	0	0
Richmond.....	1	0	0	0	0	1	0	0	0	0	0
North Carolina:											
Raleigh.....	0	0	0	0	0	1	0	0	0	0	0
Winston-Salem.....	0	0	0	0	4	0	0	0	0	0	0
South Carolina:											
Charleston.....	0	0	0	0	0	1	0	0	0	0	0
Georgia:											
Atlanta.....	0	0	0	0	4	1	0	1	1	0	0
<b>EAST SOUTH CENTRAL</b>											
Tennessee:											
Memphis.....	0	0	0	0	1	0	0	0	0	0	0
Alabama:											
Birmingham.....	0	0	1	0	1	0	0	2	0	0	0
Mobile.....	0	0	0	1	0	1	0	0	0	0	0
<b>WEST SOUTH CENTRAL</b>											
Louisiana:											
New Orleans.....	0	0	0	0	2	2	0	1	0	0	0
Shreveport.....	0	0	0	1	0	1	0	0	0	0	0
Texas:											
Houston.....	0	0	0	0	0	0	0	0	0	1	0
<b>MOUNTAIN</b>											
Colorado:											
Denver.....	0	0	0	1	0	0	0	1	0	0	0
<b>PACIFIC</b>											
Washington:											
Seattle.....	1	0	0	0	0	0	0	1	0	0	0
Spokane.....	1	0	0	0	0	0	0	1	0	0	0
Tacoma.....	0	0	0	0	0	0	0	3	0	0	0
California:											
Los Angeles.....	0	0	0	0	0	0	1	7	3	0	0
Sacramento.....	0	0	0	0	0	3	0	1	0	0	0
San Francisco.....	0	0	0	1	0	0	0	6	0	0	0

The following table gives the rates per hundred thousand population for 105 cities for the 10-week period ended August 29, 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, June 21 to August 29, 1925—Annual rates per 100,000 population<sup>1</sup>

## DIPHTHERIA CASE RATES

	Week ended—									
	June 27	July 4	July 11	July 18	July 25	Aug. 1	Aug. 8	Aug. 15	Aug. 22	Aug 29
105 cities.....	2 116	3 93	2 96	2 79	2 78	4 78	5 87	2 80	6 70	7 75
New England.....	127	117	62	62	62	62	82	92	52	42
Middle Atlantic.....	163	96	127	97	91	92	83	78	73	63
East North Central.....	2 84	2 87	2 89	2 73	2 68	2 74	2 101	2 72	2 55	2 72
West North Central.....	114	131	93	85	106	100	5 107	110	102	118
South Atlantic.....	73	41	55	26	45	9 50	55	73	10 64	11 73
East South Central.....	34	6	23	11	11	11	29	34	63	40
West South Central.....	46	60	42	28	70	46	23	51	60	97
Mountain.....	105	181	105	124	115	153	12 68	162	76	172
Pacific.....	107	13 145	125	99	104	67	148	84	104	110

## MEASLES CASE RATES

105 cities.....	2 303	3 228	2 193	2 159	2 105	4 73	5 53	2 48	6 31	7 28
New England.....	407	350	263	261	216	186	132	129	97	89
Middle Atlantic.....	382	258	249	199	128	77	69	57	38	34
East North Central.....	2 404	2 321	2 225	2 191	2 119	2 72	2 47	2 37	2 19	2 22
West North Central.....	60	31	35	29	19	29	8 11	31	6	4
South Atlantic.....	278	262	211	148	95	9 71	45	43	10 35	11 25
East South Central.....	132	97	120	80	63	29	11	17	6	11
West South Central.....	5	5	0	0	5	0	0	9	9	0
Mountain.....	95	38	57	29	38	105	12 20	19	29	29
Pacific.....	52	13 37	41	64	20	35	29	20	12	6

## SCARLET FEVER CASE RATES

105 cities.....	2 117	3 96	2 90	2 61	2 57	4 56	5 53	2 59	6 53	7 46
New England.....	107	112	147	80	72	75	102	84	92	70
Middle Atlantic.....	100	79	81	45	43	37	33	36	23	27
East North Central.....	2 157	2 122	2 97	2 67	2 67	2 64	2 52	2 58	2 58	2 48
West North Central.....	184	168	143	108	122	124	8 120	133	147	112
South Atlantic.....	45	59	45	47	16	9 35	22	41	10 43	11 41
East South Central.....	91	74	126	80	29	63	63	40	34	29
West South Central.....	56	46	9	23	32	31	56	70	51	19
Mountain.....	210	105	153	86	162	86	12 39	95	67	29
Pacific.....	107	13 71	52	61	46	49	64	87	44	70

<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> Cicero, Ill., not included. Report not received at time of going to press.

<sup>3</sup> Cicero, Ill., and Spokane, Wash., not included.

<sup>4</sup> Cicero, Ill., and Tampa, Fla., not included.

<sup>5</sup> Cicero, Ill., Waterloo, Iowa, and Helena, Mont., not included.

<sup>6</sup> Cicero, Ill., and St. Petersburg, Fla., not included.

<sup>7</sup> Cicero, Ill., Greenville, S. C., and St. Petersburg, Fla., not included.

<sup>8</sup> Waterloo, Iowa, not included.

<sup>9</sup> Tampa, Fla., not included.

<sup>10</sup> St. Petersburg, Fla., not included.

<sup>11</sup> Greenville, S. C., and St. Petersburg, Fla., not included.

<sup>12</sup> Helena, Mont., not included.

<sup>13</sup> Spokane, Wash., not included.



Summary of weekly reports from cities, June 21, to August 29, 1925—Annual rates per 100,000 population—Continued

## SMALLPOX CASE RATES

	Week ended—									
	June 27	July 4	July 11	July 18	July 25	Aug. 1	Aug. 8	Aug. 15	Aug. 22	Aug. 28
105 cities.....	25	14	16	15	10	10	9	7	6	8
New England.....	0	0	2	2	5	0	0	0	0	0
Middle Atlantic.....	0	1	0	1	0	0	0	0	0	1
East North Central.....	20	14	12	10	8	4	6	3	2	8
West North Central.....	37	17	21	17	12	15	9	17	6	4
South Atlantic.....	18	10	24	8	16	2	2	10	4	12
East South Central.....	132	63	80	46	40	23	51	23	40	57
West South Central.....	0	5	5	14	5	5	14	9	5	14
Mountain.....	29	29	19	19	0	57	20	10	10	10
Pacific.....	171	89	102	119	67	84	67	67	44	29

## TYPHOID FEVER CASE RATES

	27	35	35	38	34	41	41	48	57	47
105 cities.....	17	22	25	32	22	22	27	40	32	27
New England.....	18	15	17	25	21	30	23	33	45	30
Middle Atlantic.....	19	10	14	12	8	10	21	19	31	28
East North Central.....	10	21	44	44	39	48	43	56	48	35
West North Central.....	71	69	59	55	53	66	59	91	111	119
South Atlantic.....	91	200	177	223	177	183	274	217	183	177
East South Central.....	148	246	185	134	172	178	130	102	134	111
West South Central.....	0	10	29	19	48	57	107	105	105	115
Mountain.....	20	22	17	32	29	46	17	44	64	55
Pacific.....										

## INFLUENZA DEATH RATES

	6	4	2	2	2	1	3	2	2	4
105 cities.....	7	2	0	0	0	0	5	0	0	0
New England.....	6	2	2	2	3	1	2	2	2	3
Middle Atlantic.....	6	5	2	3	2	0	3	3	2	4
East North Central.....	4	0	0	0	4	0	0	0	0	2
West North Central.....	2	6	0	4	4	2	6	0	10	12
South Atlantic.....	17	11	17	0	6	0	6	6	11	6
East South Central.....	10	10	10	10	0	0	5	0	10	15
West South Central.....	10	0	0	0	10	0	10	10	10	10
Mountain.....	4	4	0	4	0	0	0	0	8	0
Pacific.....										

## PNEUMONIA DEATH RATES

	66	58	61	57	50	61	56	63	55	64
105 cities.....	60	45	45	50	52	55	37	30	40	42
New England.....	75	62	64	63	52	65	65	73	65	65
Middle Atlantic.....	42	45	59	47	40	52	38	51	43	54
East North Central.....	50	42	39	55	42	42	53	44	31	53
West North Central.....	96	75	67	51	55	63	73	81	64	85
South Atlantic.....	120	97	91	74	63	74	69	63	80	69
East South Central.....	76	61	61	76	66	111	71	87	82	112
West South Central.....	57	67	76	86	57	76	29	57	67	76
Mountain.....	53	82	74	45	65	69	78	90	53	69
Pacific.....										

<sup>1</sup> Cicero, Ill., not included. Report not received at time of going to press.

<sup>2</sup> Cicero, Ill., and Spokane, Wash., not included.

<sup>3</sup> Cicero, Ill., and Tampa, Fla., not included.

<sup>4</sup> Cicero, Ill., Waterloo, Iowa, and Helena, Mont., not included.

<sup>5</sup> Cicero, Ill., and St. Petersburg, Fla., not included.

<sup>6</sup> Cicero, Ill., Greenville, S. C., and St. Petersburg, Fla., not included.

<sup>7</sup> Waterloo, Iowa, not included.

<sup>8</sup> Tampa, Fla., not included.

<sup>9</sup> St. Petersburg, Fla., not included.

<sup>10</sup> Greenville, S. C., and St. Petersburg, Fla., not included.

<sup>11</sup> Helena, Mont., not included.

<sup>12</sup> Spokane, Wash., not included.

<sup>13</sup> Cicero, Ill., and Helena, Mont., not included.

*Number of cities included in summary of weekly reports and aggregate population of cities in each group, estimated as of July 1, 1925*

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
<b>Total</b> .....	<b>106</b>	<b>97</b>	<b>28,898,350</b>	<b>28,140,934</b>
New England.....	12	12	2,088,746	2,088,746
Middle Atlantic.....	10	10	10,304,114	10,304,114
East North Central.....	17	17	7,082,535	7,082,535
West North Central.....	14	11	2,515,339	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

*Report for the week ended August 22, 1925.*—The following report for the week ended August 22, 1925, was transmitted by the Far Eastern bureau of the health section of the League of Nations, located at Singapore, to the headquarters at Geneva:

Port	Plague		Cholera		Smallpox	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Calcutta.....				7	4	4
Bombay.....		4		0	2	1
Madras.....		0		3	13	1
Rangoon.....		12		1	2	1
Karachi.....		0	0	0	0	0
Negapatam.....		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
Makassar.....	0	0	0	0	0	0
Sandakan (North Borneo) <sup>1</sup> .....	0	0	0	0	0	0
Kuching (Sarawak).....	0	0	0	0	9	0
Bangkok.....	1	0	0	0	0	0
Saigon and Cholon.....	0	0	0	0	0	0
Hongkong.....	0	0	0	0	0	0
Shanghai.....	0	0	42	45	0	0
Manila.....	0	0	0	0	0	0
Colombo <sup>1</sup> .....	3	3	0	0	0	0
Nagasaki.....	0	0	0	0	0	0
Yokohama.....	0	0	0	0	0	0
Simonoseki.....	0	0	0	0	0	0
Moji.....	0	0	0	0	0	0
Kobe.....	0	0	0	0	0	0
Keelung (Formosa).....	0	0	0	0	0	0
Fou-San-Po (Korea).....	0	0	0	0	0	0
Adelaide.....	0	0	0	0	0	0
Brisbane.....	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.....	0	1	0	0	0	0
Port Said.....	0	0	0	0	6	0
Mombasa (Kenya).....	0	0	0	0	0	0
Massaua (Eritria).....	0	0	0	0	0	0
Djibuti.....	0	0	0	0	0	0
Durban (Natal).....	0	0	0	0	0	0
Cape of Good Hope.....	0	0	0	0	0	0

<sup>1</sup> No plague infection found among rats examined.

## PLAGUE ON VESSEL

*Steamship "Anatolia"—At Piræus, Greece, from Alexandria, Egypt—August 8, 1925.*—A case of plague occurring in a member of the crew, was reported removed at Piræus, Greece, from the steamship *Anatolia* from Alexandria, Egypt, August 8, 1925.

## ALGERIA

*Smallpox—Compulsory vaccination.*—During the period July 21 to 31, 1925, 23 cases of smallpox were reported at Algiers, with a greater prevalence than reports indicated. In the department of Constantine 32 cases were reported. At Algiers vaccination was stated to be compulsory and enforced by means of house-to-house visits.

*Typhus fever.*—During the same period four cases of typhus fever with one death were reported at Algiers, and in the departments of Constantine and Oran, seven and eight cases, respectively.

## BRAZIL

*Malaria mortality—Para—June 28–August 22, 1925.*—During the period June 28 to August 22, 1925, 51 deaths from malaria were reported at Para, Brazil. Population, estimated, 185,000.

*Leprosy.*—During the same period leprosy was reported present, with one death.

## CHINA

*Cholera nostras—Tientsin.*—During the week ended August 1, 1925, eight cases of cholera nostras were reported by one mission hospital at Tientsin, China.

## CUBA

*Malaria—Santiago—August 23–29, 1925.*—During the week ended August 29, 1925, 30 cases of malaria with 2 deaths were reported at Santiago de Cuba. The number of cases reported present in the city was 368.

## ECUADOR

*Plague-infected rats—Guayaquil—July 16–August 15, 1925.*—During the period July 16 to August 15, 1925, 21,440 rats were reported taken at Guayaquil and 91 rats found plague-infected.

## EGYPT

*Measles—Typhoid fever—Typhus fever—Cairo—May 21–June 10, 1925.*—During the period May 21 to June 10, 1925, measles, typhoid fever, and typhus fever were reported as follows at Cairo, Egypt: Measles—cases, 1,261; deaths, 481. Typhoid fever—cases, 109; deaths, 34. Typhus fever—cases, 227; deaths, 39. Population in 1924, 804,200.

*Plague—August 6–12, 1925—Summary (comparative).*—During the week ended August 12, 1925, six cases of plague, of which one case occurred at Port Said and five cases in the district of Beni-Souef, were reported in Egypt, making a total number of 96 cases reported in Egypt from January 1 to August 12, 1925. The total for the corresponding period of the year 1924 was 347.

**ESTHONIA**

*Communicable diseases—June, 1925.*—During the month of June, 1925; 33 cases of diphtheria, 38 of scarlet fever, 125 of tuberculosis, and 45 of typhoid fever were reported in Esthonia. During the same period a case of leprosy was reported.

**FINLAND**

*Communicable diseases—June 16–30, 1925.*—During the period June 16 to 30, 1925, 34 cases of diphtheria, 7 of lethargic encephalitis, 25 of paratyphoid fever, 54 of scarlet fever, and 27 of typhoid fever were reported in Finland. Population, 3,469,402.

**HAWAII TERRITORY**

*Plague-infected rodent—Paauhau.*—The finding of a plague-infected rodent was reported at Paauhau, Hawaii Territory, August 12, 1925.

**JAPAN**

*Cholera—Kobe.*—Information received under date of September 9, 1925, shows the occurrence at Kobe, Japan, of five cases of cholera, with two deaths reported September 4, 5, and 6, 1925.

**MADAGASCAR**

*Plague—Tananarive Province—July 1–15, 1925.*—During the period July 1 to 15, 1925, nine cases of plague with nine deaths were reported in the Province of Tananarive, Madagascar. The cases were distributed according to type as follows: Bubonic, 5; pneumonic, 2; septicemic, 2.

**MAURITIUS**

*Plague—May, 1925.*—During the month of May, 1925, four fatal cases of plague were reported in the Island of Mauritius. One case occurred at Pamplémousses, one at Plaines Wilhelm, and two cases at Port Louis.

**PALESTINE**

*Relapsing fever—Jaffa—Tiberias.*—During the week ended August 10, 1925, two cases of relapsing fever, of which one case occurred at Jaffa and one at Tiberias, were reported in Palestine.

*Typhus fever—Jerusalem.*—During the period July 29 to August 3, 1925, two cases of typhus fever were reported at Jerusalem, imported from the district of Ramleh.

## PANAMA CANAL

*Communicable diseases—July, 1925.*—During the month of July, 1925, communicable diseases were notified in the Canal Zone and at Colon and Panama as follows:

Disease	Canal Zone		Colon		Panama		Nonresident		Total	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Chicken pox.....	2		1		23		2		28	
Diphtheria.....					7	1			7	1
Dysentery.....			2		3		1		6	
Hookworm disease.....			7		47		41		115	
Leprosy.....							2		2	
Malaria.....	150		6	1	10		15		181	1
Measles.....	25		3		1				29	
Meningitis.....					2				2	
Mumps.....			1		1		1	1	3	1
Pneumonia <sup>1</sup> .....				5				3		18
Tuberculosis <sup>1</sup> .....		1		4		10		1		21
Typhoid fever.....			1	1					1	1
Whooping cough.....	2		1		1				4	
Yaws.....			1		3				4	

<sup>1</sup> Deaths only reported.

## PHILIPPINE ISLANDS

*Cholera—Manila—July 27–August 2, 1925.*—During the week ended August 2, 1925, four cases of cholera with three deaths were reported at Manila.

## UNION OF SOUTH AFRICA

*Smallpox—Typhus fever—June, 1925.*—During the month of June, 1925, smallpox and typhus fever were reported in the Union of South Africa as follows: *Smallpox*—one case, occurring in the colored population. *Typhus fever*—Cases, 61; deaths, 4, of which 5 cases occurred in the white population. For distribution according to locality see page 2014.

## CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW 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 September 18, 1925<sup>1</sup>

## CHOLERA

Place	Date	Cases	Deaths	Remarks
China:				
Shanghai.....	July 26–Aug. 8.....	4	18	Cases, foreign; deaths, native and foreign; in international concessions.
India.....				June 23–July 4, 1925: Cases, 1,813; deaths, 1,104.
Calcutta.....	July 12–25.....	20	13	
Rangoon.....	July 19–25.....	1	1	
Indo-China:				
Saigon.....	June 22–July 12.....	3	2	Including 100 kilometers of surrounding territory.
Japan:				
Kobe.....	Sept. 4–6.....	5	2	
Philippine Islands:				
Manila.....	July 27–Aug. 2.....	4	3	

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

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

## Reports Received During Week Ended September 18, 1925—Continued

### PLAGUE

Place	Date	Cases	Deaths	Remarks
Ecuador: Guayaquil				Plague-infected rats: July 16-Aug. 15, 1925—rats taken, 21,440; found infected, 91.
Egypt				
City— Port Said	Aug. 6-12	1		Aug. 6-12, 1925: Cases, 6. Total, Jan. 1-Aug. 12, 1925—cases, 96; corresponding period, year, 1924—cases, 347.
Provinces— Beni-Souef	do	5	2	
Hawaii Territory: Paauhau	Aug. 12			Plague-infected rodent. June 28-July 4, 1925: Cases, 175; deaths, 127.
India				
Rangoon	July 12-25	34	28	Province.
Java: Batavia	July 11-24	23	23	
Cheribon	July 11-17	1	1	At Piræus, Greece, from Alexandria, Egypt. In member of crew.
Soerabaya	June 28-July 4	16	1	
On vessel: S. S. Anatolia	Aug. 8	1		

### SMALLPOX

Algeria: Algiers	July 21-31	23		Stated to be very prevalent.
Constantine (Dept.)	do	32		
Brazil: Bahia	July 26-Aug. 1	1	1	June 28-July 8, 1925: Cases, 2,334; deaths, 714.
Bulgaria: Sophia	Aug. 13-19	1		
Canada: British Columbia— Vancouver	Aug. 10-15	2		June 1-30, 1925: One case. In colored population.
Ontario— North Bay	June 28-July 18	3		
Great Britain: England and Wales	Aug. 2-15	97		
India: Calcutta	July 12-25	24	17	May 10-23, 1925: Cases, 7; deaths, 1.
Rangoon	do	16	10	
Italy: Turin	Aug. 17-23	2		June 1-30, 1925: One case. In colored population.
Venice	July 27-Aug. 2	3		
Java: Batavia (Province)	July 18-24	2		June 1-30, 1925: One case. In colored population.
Soerabaya	June 28-July 4	16	1	
Mexico: Guadalajara	Aug. 25-31		1	
Poland				June 1-30, 1925: One case. In colored population.
Portugal: Lisbon	Aug. 2-15	6		
Sumatra: Padang	July 18-24	3		
Union of South Africa				

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

### Reports Received During Week Ended September 18, 1925—Continued

#### TYPHUS FEVER

Place	Date	Cases	Deaths	Remarks
Algeria:				
Algiers.....	July 21-31.....	4	1	
Constantine.....	do.....	7		Department.
Oran.....	do.....	8		Do.
Egypt:				
Cairo.....	May 21-June 10.....	165	30	
Port Said.....	Aug. 6-12.....	2	1	
Palestine:				
Jerusalem.....	July 29-Aug. 3.....	2		From two localities, Ramleh district.
Poland.....				May 10-16, 1925: Cases, 262; deaths, 18.
Union of South Africa.....				June, 1925: Cases, 61; deaths, 4. Of these, 5 cases were in the white population.
Cape Province.....				June, 1925: Cases, 26; deaths, 1.
Natal.....				June, 1925: Cases, 2.
Orange Free State.....				June, 1925: Cases, 27; deaths, 1.
Transvaal.....				June, 1925: Cases, 6; deaths, 2.
Johannesburg.....	July 19-25.....	1		
Yugoslavia:				
Belgrade.....	June 8-14.....	1		

### Reports Received from June 27 to September 11, 1925<sup>1</sup>

#### CHOLERA

Place	Date	Cases	Deaths	Remarks
Algeria:				
Algiers.....	May 11-26.....	1		
Ceylon:				
Colombo.....	May 10-16.....	2	2	Jan. 25-May 30, 1925: Cases, 78; deaths, 58.
China:				
Shanghai.....	July 26-Aug. 15.....	82	39	
India:				
Bombay.....	May 10-June 27.....	2	1	
Do.....	June 28-July 18.....	7	6	Apr. 26-June 27, 1925: Cases, 33,647; deaths, 19,950. (Corrected figures.)
Calcutta.....	May 3-9.....	58	49	
Do.....	May 17-23.....	79	61	
Do.....	June 14-20.....	12	11	
Do.....	July 5-11.....	9	7	
Madras Presidency:				
Do.....	June 6-20.....	4	1	
Do.....	July 5-Aug. 1.....	6	5	
Rangoon.....	May 3-June 6.....	22	15	Feb. 8-14, 1925: Cases, 2; deaths, 2. (Received out of date.)
Do.....	June 14-27.....	12	8	
Do.....	June 28-July 18.....	1	2	
Indo-China:				
Saigon.....	May 4-June 7.....	4	3	
Japan:				
Yokohama.....	Sept. 2.....	5	3	
Philippine Islands:				
Albay—				
Tabaco.....	June 14-20.....	1	1	
Bulacan.....	do.....	1	1	
Do.....	June 28-July 18.....	3	2	
Camaringes Sur.....	July 3-9.....	1		
Lagonoy.....	June 6-12.....	2	1	
Leyte.....	July 8-14.....	1	1	
Masina.....	June 15-24.....	3		
Do.....	June 29-July 26.....	12	1	June 1-Aug. 8, 1925: Cases, 17.
Mountain Province.....	June 23-29.....	1	1	
Siam:				
Bangkok.....	Apr. 29-June 27.....	9	4	
Turkey:				
Constantinople.....	May 16-22.....	1		

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



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

## Reports Received from June 27 to September 11, 1925—Continued

### PLAGUE

Place	Date	Cases	Deaths	Remarks
<b>Brazil:</b>				
Bahia	May 3-June 13	5	4	
<b>British East Africa:</b>				
Uganda	Feb. 1-28	28	28	
Entebbe	May 4-June 4	78	73	Apr. 1-May 31, 1925: Cases, 129 deaths, 118.
<b>Ceylon:</b>				
Colombo	May 10-June 30	11	10	
Do.	June 28-July 25	9	7	
<b>China:</b>				
Foochow	May 24-31			Reported present in epidemic form.
North Manchuria	May 27	2	1	
<b>Ecuador:</b>				
Guayaquil	June 1-15	1	1	May 16-June 30, 1925: Rats examined, 30,347; found infected, 95. July 1-15, 1925: Rats taken, 9,928; rats found infected, 16.
<b>Egypt</b>				Jan. 1-Aug. 5, 1925: Cases, 90. Corresponding period, 1924—cases, 344.
City—				Bubonic.
Alexandria	June 17-24	2	2	
Port Said	June 17-Aug. 6	8	3	
Do.	July 30-Aug. 5	1		
Suez	June 14-27	3	2	Do.
Province—				
Assiout	June 5	1	1	
Beni-Souef	June 10-16	8	4	
Charkeh	June 6-8	1	1	
Kena	June 17	1	1	
Minia	June 6-17	3	2	
<b>France:</b>				
Marseille	Aug. 18	2		
<b>Gold Coast</b>	March-April	3	3	
<b>Greece:</b>				
Athens	July 1-Aug. 14	26		
Pireus	July 18-Aug. 14	9		
<b>Hawaii Territory:</b>				
Honokaa	June 28			Plague-infected rat.
Do.	Aug. 7	1		
Do.	Aug. 15			Plague-infected rat, near Paanito.
Kukuhale	July 31			Plague-infected rat.
<b>India:</b>				Apr. 26-June 27, 1925: Cases, 10,166; deaths, 8,913. Corrected figures.
Bombay	Apr. 26-June 27	65	59	
Do.	June 28-July 18	9	6	
Calcutta	May 30-June 6	1	1	
Do.	July 5-11	1	1	
Karachi	May 18-June 6	4	3	
Madras	May 10-June 27	15	8	
Do.	June 28-Aug. 1	20	7	
Rangoon	May 3-June 27	113	95	Feb. 8-14, 1925: Cases, 13; deaths, 13. (Received out of date.)
Do.	June 28-July 4	20	18	
<b>Indo-China:</b>				
Cochin-China—				
Saigon	Apr. 20-June 21	3	3	Including 100 square kilometers of surrounding country.
<b>Iraq:</b>				
Bagdad	May 24-June 6	9		
Do.	June 21-27	5	1	
<b>Java:</b>				
Batavia	May 6-June 19	32	31	
Do.	July 5-10	19	19	In Province.
Cheribon	Apr. 2-June 13		78	
Pasoeroean Residency	Mar. 7-May 25			Epidemic in several localities.
Pekalongan	Apr. 9-June 13		86	
Soerabaya	May 7-27	3	3	
Soerakarta Residency	May 28			Epidemic at Kalidgambe.
Tegal	Apr. 2-16		36	
Do.	May 24-June 13		16	
<b>Madagascar:</b>				
Province—				
Itasy	Apr. 1-15	1	1	
Tananarive	Apr. 1-June 30	232	200	
Town—				
Tamatave (port)	Apr. 1-15	2		
Do.	June 1-7		1	
Tananarive Town	Apr. 16-May 31	5	5	

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

## Reports Received from June 27 to September 11, 1925—Continued

### PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Mauritius				April, 1925: One case.
Nigeria	December, 1924	17	13	
Do	January, 1925	10	6	
Do	March-April	18	14	
Peru:				
Callao	July, 1925			Present. Press reports.
Cafete	Aug., 1925			Do.
Lima	Aug. 14	14		Press reports.
Russia:				
Kalmyk District	May 19-31	10	8	
North Caucasus	June 6-7	2	2	
Urts	May 25-June 3	2	2	In laboratory worker and contact. Locality, Province of Bukevsk.
Slam:				
Bangkok	Apr. 26-June 20	13	11	
Do	June 28-July 11	2	2	
Straits Settlements:				
Singapore	May 3-30	9	9	
Do	June 28-July 18	2	2	
Tunis:				
Tunis	Aug. 12-18			Plague rodent.
Turkey:				
Constantinople	May 25-31	1		
Union of South Africa:				
Cape Province—				
Kimberley	June 14-20	1	1	In a Malay camp. One plague-infected house mouse.
Do				
Orange Free State—				
Boshof District	June 28-July 4	1	1	Native.
On vessel:				
Steamship Efstratios Cavoundis.	July 7-11	4	1	At Alexandria, Egypt. Vessel arrived July 7, 1925. Regular route, ports in Syria, Greece, and Port Said. Dead rats reported found on board.
Steamship Arcadia	July 24-27	2		At Piræus, Greece, from Alexandria, Egypt.

### SMALLPOX

Algeria:				
Algiers	May 1-June 30	43	2	
Do	July 1-20	28		
Constantine	do	15		
Brazil:				
Bahia	June 28-July 25	4	2	
Pernambuco	Apr. 26-May 30	40	21	
Do	June 7-27	5	3	
Do	July 5-18	1	1	
Porto Alegre	June 14-20		1	
Rio de Janeiro	May 9-June 27	5	1	
Do	June 28-July 25	29	17	
British East Africa:				
Kenya—				
Mombasa	Apr. 19-June 20	27	13	
Do	July 5-18	21		
Nairobi	May 3-9	3	2	
Tanganyika Territory	Apr. 5-May 23	82	24	
Do	June 14-27	48	3	
Uganda	Feb. 1-28	2		
British South Africa:				
Northern Rhodesia	Apr. 28-May 4	3		
Southern Rhodesia	June 11-July 1	2		
Bulgaria:				
Sofia	Aug. 6-12	1		
Canada:				
Alberta—				
Calgary	Aug. 2-8	1		From Crossfield, Alberta.
British Columbia—				
Vancouver	June 1-28	7		
Do	July 6-Aug. 9	10		
New Brunswick—				
Restigouche County	June 1-30	1		

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

Reports Received from June 27 to September 11, 1925—Continued

## SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Canada—Continued.				
Ontario—				
Galt	June 14-20	2		May 31-July 25, 1925: Cases, 20; deaths, 1. Corresponding period, 1924: Cases, 24.
Kingston	do	1		
Quebec—				
Quebec	July 26-Aug. 1	2	2	
Saskatchewan—				
Regina	May 24-30	3		
China:				
Amoy	May 17-June 30		7	Present.
Do.	July 12-25			
Antung	May 11-July 5	8		Do.
Do.	July 26	1		
Canton	May 10-June 13			Widespread.
Chungking	May 3-30			
Foochow	May 9-July 13			Present.
Hongkong	Apr. 19-June 18	15	12	
Manchuria—				
Dairen	Apr. 13-June 28	115	17	Do.
Do.	June 28-July 19	3	2	
Harbin	May 13-June 2	2		Do.
Nanking	May 9-July 25			
Shanghai	May 3-June 6	5	2	Do.
Do.	July 6-25	1	1	
Swatow	May 17-July 11			Stated to be endemic.
Tientsin	May 9-June 6	3		
Do.	July 12-18	1		
Chosen:				
Seoul	May 1-June 30	2		
Egypt:				
Alexandria	May 21-27	1	1	
Cairo	Mar. 19-May 13	5		
France:				
Paris	May 21-31	1		February-May, 1925: Cases, 77.
Germany:				
Baden (state)	July 12-25	2	1	
Stuttgart	July 5-11	3	1	
Gold Coast:				
Great Britain:				
England and Wales				January-April, 1925: Cases, 367; deaths, 29.
Birmingham	July 7-13	1		May 24-June 27, 1925: Cases, 441.
Cardiff	June 14-20	1		
Do.	Aug. 2-8	14	8	June 28-Aug. 1, 1925: Cases, 353
Newcastle-on-Tyne	May 31-June 27	4		
Do.	June 28-Aug. 8	8	1	
Greece:				
Athens	May 1-31		2	January-May, 1925: Cases, 46; deaths, 8.
Do.	June 24-30	27	3	
Do.	July 1-31	14	1	
Hungary:				
Budapest	July 5-18	13		
India:				
Bombay	Apr. 26-June 27	156	115	Apr. 26-June 27, 1925: Cases, 37,107; deaths, 9,152. Corrected figures.
Do.	June 28-July 4	6	3	
Calcutta	May 3-9	109	100	
Do.	May 17-23	75	61	
Do.	May 31-June 20	88	81	
Do.	July 5-11	12	8	
Karachi	May 18-June 27	6	1	
Do.	June 28-July 4	1	1	
Madras	May 18-June 27	152	66	
Do.	June 28-July 18	68	25	
Rangoon	May 3-June 27	207	99	
Do.	June 28-July 4	2	1	
Indo-China:				
Cochin-China—				
Saigon	Apr. 20-May 21	13	9	Including 100 square kilometers of surrounding country.
Iraq:				
Bagdad	Apr. 26-June 20	4	1	Jan. 11-May 30, 1925: Cases, 136; deaths, 46.
Italy:				
	Dec. 28-May 30	72		
Jamaica:				
				Apr. 26-June 27, 1925: Cases, 110.
Kingston	Apr. 26-June 27	19		June 28-Aug. 1, 1925: Cases, 159 (reported as alastrim).
Do.	June 28-Aug. 1	22		Reported as alastrim.
Do.				Do.

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

## Reports Received from June 27 to September 11, 1925—Continued

### SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
<b>Japan:</b>				
Kobe.....	May 24-June 27.....	2		
Nagasaki.....	May 15-21.....	2		
Do.....	July 6-19.....	1	1	
Taiwan.....	July 1-10.....	1		
Tokyo.....	June 14-20.....	1		
Yokohama.....	May 25-June 12.....	3		
<b>Java:</b>				
Batavia.....	May 2-June 26.....	2		
Do.....	July 4-10.....	1		
Brebes.....	Apr. 22-28.....	1		
Cheribon.....	Apr. 16-22.....		1	
Pekalongan.....	Apr. 2-8.....	1		
Rembang Residency.....	Apr. 23.....			Epidemic at Kawedanan.
Soerabaya.....	Apr. 16-June 27.....	304	41	
South Bantam.....	Apr. 16-22.....	1		
Tegal.....	Mar. 29-May 2.....	2	1	
Latvia.....				May-June, 1925: Cases, 4.
Lithuania.....				February-April, 1925: Cases 5.
Malta.....	June 1-30.....	9		
Do.....	July 1-31.....	5		
<b>Mexico:</b>				
Durango.....	do.....		11	
Do.....	do.....		13	
Guadalajara.....	June 2-29.....		10	
Do.....	June 20-Aug. 17.....		15	
Mexico City.....	May 24-June 27.....	12		Including municipalities in Federal district.
Do.....	July 5-11.....	3		Do.
Do.....	July 26-Aug. 15.....	7		Epidemic at El Hule and other localities.
Oaxaca, State.....	Aug. 14.....			
San Luis Potosi.....	Aug. 16-22.....		1	
Tampico.....	June 1-10.....		2	
Do.....	July 1-31.....	4		
<b>Morocco:</b>				
Tangier.....	May 17-June 5.....			Present among natives.
<b>Nigeria:</b>				
Do.....				December, 1924: Cases, 46; deaths, 16.
				January-April, 1925: Cases, 1,377; deaths, 123.
<b>Persia:</b>				
Teheran.....	Mar. 21-May 21.....		29	
<b>Peru:</b>				
Arequipa.....	June 1-30.....		1	
<b>Poland:</b>				
Do.....				Mar. 1-May 9, 1925: Cases, 23.
<b>Portugal:</b>				
Lisbon.....	Apr. 26-June 27.....	36	6	
Do.....	June 28-Aug. 1.....	34	14	
Oporto.....	June 14-20.....	1		
Do.....	July 19-Aug. 15.....	5		
<b>Rumania:</b>				
Do.....				January-February, 1925: Cases, 20.
<b>Russia:</b>				
Do.....				December, 1924: Cases, 1,000.
				January-March, 1925: Cases, 2,457. Later than previously published reports.
<b>Siam:</b>				
Bangkok.....	Apr. 26-June 27.....	27	19	
Do.....	June 28-July 11.....	2	1	
<b>Spain:</b>				
Malaga.....	May 24-June 20.....		15	
Do.....	July 5-Aug. 15.....		18	
Valencia.....	May 31-June 27.....	3	1	
<b>Straits Settlements:</b>				
Singapore.....	May 17-23.....	1		
Do.....	July 5-11.....	1	1	
<b>Switzerland:</b>				
Berne.....	June 7-13.....	1		
Lucerne.....	June 14-20.....	4		
<b>Syria:</b>				
Beirut.....	Apr. 21-30.....	1		
<b>Tripoli:</b>				
Do.....				Jan. 3-April, 1925: Cases, 14.
<b>Tunis:</b>				
Tunis.....	May 6-June 30.....		46	
Do.....	July 1-Aug. 11.....		27	

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

## Reports Received from June 27 to September 11, 1925—Continued

### SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Turkey:				
Constantinople	May 16-22	2		
Union of South Africa:				
Cape Province	May 24-July 11			Outbreaks.
Port Elizabeth	Apr. 18-25	8	1	
Transvaal	May 3-June 6			
Uruguay				
Do.				December, 1924: Cases, 8. February-March, 1925: Cases, 4.

### TYPHUS FEVER

Algeria:				
Algiers	May 11-20	6	2	In vicinity, 12 cases. Isolated. District.
Do.	July 1-20	13	7	
Constantine	July 1-10	17		
Bulgaria:				
Sofia	May 28-June 3	2	2	November-December, 1924: 1 case. January-March, 1925: Cases, 36; deaths, 2.
Chile:				
Valparaiso	May 10-July 18		9	
China:				
Manchuria—				
Harbin	May 19-June 2	2		
Czechoslovakia				April, 1925: 1 case.
Egypt:				
Alexandria	May 7-June 3	3	1	
Do.	July 9-15	1		
Cairo	Mar. 26-May 13	6	4	
Port Said	May 14-20	1	1	
Do.	July 30-Aug. 5	2		
Estonia				Apr. 1-May 30, 1925: Cases, 6.
Great Britain:				
Scotland—				
Greenock	Aug. 6-18	7		
Greece				January-May, 1925: Cases, 54; deaths, 6.
Athens	May 1-31		2	
Kalamata	Apr. 1-30		2	
Patras	June 28-July 4		2	
Iraq:				
Bagdad	July 12-18	1		
Ireland:				
Cork County	Aug. 25	3		
Latvia				April-June, 1925: Cases, 26.
Libau	July 14-20	1		
Lithuania				March-April, 1925: Cases, 118; deaths, 5.
Mexico:				
Mexico City	May 24-June 6	24		Including municipalities in Federal district.
Do.	June 28-Aug. 1	39		
San Luis Potosi	June 26-July 4		1	
Morocco				January-May, 1925: Cases, 362. Later than previously published reports.
Palestine:				
Dagania	July 21-27	1		
Ekron	do	1		
Jaffa District	June 2-8	2		
Majdal	May 26-June 8	3		
Ramleh	May 19-25	1		
Safad	June 9-15	1		
Do.	July 21-27	1		
Tel Aviv	do	1		
Persia:				
Teheran	Apr. 21-May 21		1	
Peru:				
Arequipa	Apr. 1-June 30		3	
Poland				Mar. 1-Apr. 11, 1925: Cases, 1,195; deaths, 74.
Portugal:				
Oporto	May 31-June 6	1		
Do.	July 6-11	1		
Rumania:				
Constantza	May 1-31	1		

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

Reports Received from June 27 to September 11, 1925—Continued

### TYPHUS FEVER—Continued

Place	Date	Cases	Deaths	Remarks
Russia.....				December, 1924: Cases, 5,062. January-March, 1925: Cases, 18,336. Later than previously published reports.
Spain: Valencia.....	June 7-13.....		1	
Tunis: Tunis.....	May 21-June 17.....	16	8	Outbreaks.
Do.....	July 8-Aug. 18.....	10	5	
Turkey: Constantinople.....	May 11-31.....	7	2	
Union of South Africa: Cape Province.....	Apr. 19-July 4.....	39	5	
Natal.....	May 3-July 11.....	14		
Durban.....	Feb. 1-July 4.....	18		
Orange Free State.....	Feb. 1-June 27.....	26	4	
Hoopstad.....	July 5-11.....			
Transvaal.....	do.....	11	2	
Yugoslavia: Zagreb.....	May 8-21.....	7	1	

### YELLOW FEVER

Gold Coast.....	Apr. 1-30.....	1		
Ivory Coast: Lahou.....	June 1-10.....	1	1	
Liberia: Monrovia.....	Aug. 7.....	4		
Nigeria: Ibadan.....	Apr. 24-30.....	1		
Lagos.....	Apr. 29-May 5.....	4	1	