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COOPERATIVE RURAL HEALTH WORK OF THE PUBLIC HEALTH SERVICE IN THE FISCAL YEAR 1925 [1]

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In the fiscal year ended June 30, 1925, the United States Public Health Service cooperated in demonstration projects in rural health work in 79 counties, or districts comparable to counties, in 19 States, as follows:

Alabama.—Calhoun, Colbert, Franklin, Lauderdale, Limestone, Madison, Talladega, and Walker Counties.

Arkansas.—Pulaski County.

California.—San Diego and Santa Barbara Counties, and San Joaquin district.

Georgia.—Baker, Decatur, Floyd, Glynn, Laurens, Miller, Seminole, and Walker Counties.

Illinois.—Crawford County.

Iowa.—Dubuque County.

Kansas.—Cherokee County.

Kentucky.—Mason County.

Louisiana.—De Soto, Lafourche, and Washington Parishes.

Massachusetts.—Cape Cod district.

Mississippi.—Harrison, Hinds, and Washington Counties.

Missouri.—Dunklin, Gentry, Greene, Jackson, New Madrid, Nodaway, Pettis, Polk, and St. Francois Counties.

Montana.—Cascade and Lewis and Clark Counties.

New Mexico.—Bernalillo, Chaves, Colfax, Dona Ana, Eddy, McKinley, Santa Fe, Union, and Valencia Counties.

North Carolina.—Edgecombe, Sampson, and Surry Counties.

Oklahoma.—Oklahoma, Okmulgee, and Ottawa Counties.

South Carolina.—Georgetown County.

Virginia.—Carroll, Charlotte, Chesterfield, Greensville, Henry, Nansemond, Prince Edward, Pulaski, Roanoke, Smyth, Washington, and Wise Counties.

West Virginia.—Gilmer, Hancock, Harrison, Logan, Marion, Marshall, Mineral, Preston, and Taylor Counties.

The results were in line with the conclusions in the reports on this activity in the fiscal years 1020,[2] 1921,[3] 1922,[4] 1923,[5] and 1924.[6]

[1] This report applies to work in rural sanitation which is conducted in support of and as a part of whole-time local official health service. It does not include all cooperative activities of the Public Health Service in rural communities.

[2] Reprint No. 615, from Public Health Reports of Oct. 1, 1920, p. 15.

[3] Reprint No. 699, from Public Health Reports of Oct. 7, 1921, p. 17.

[4] Reprint No. 788, from Public Health Reports of Sept. 29, 1922, p. 22.

[5] Reprint No. 887, from Public Health Reports of Dec. 14, 1923, p. 24.

[6] Reprint No. 964, from Public Health Reports of Oct. 17, 1924, p. 23.

Plan of Work

The plan of the work was the same as that carried out in the five preceding fiscal years and is described in previous reports (Reprints Nos. 615, 699, 887, and 964).

The authorization for this activity is in the act of February 15, 1893 (ch. 114, 27 Stat. L. 449); the act of August 14, 1912 (ch. 288, 37 Stat. L. 309); and in the annual appropriation acts. The appropriation is specifically for "special studies of and demonstration work in rural sanitation."

The work is conducted in cooperation with State and local health authorities. It is made a part of a well-rounded comprehensive program of local health service. Experience has taught that under such arrangement the work can be carried out more economically and with better and more lasting results than if conducted as a separate specialized activity. The studies are of a distinctly practical nature. They are made with due consideration for the general conditions at the homes in the community and with the purpose of determining (1) improvements in sanitary devices and in methods for securing the installation and operation of such devices, and (2) the most effective and economical program of health work for each situation.

The demonstration work in rural sanitation can not, under the provisions of the appropriating act, be conducted in a community unless the State, county, or municipality, in which the community is located, agrees to pay at least one-half the expenses of such demonstration work. The funds provided by the State, county, and municipalities, together, for support of the average demonstration project far exceed the allotment from the Federal fund, and in almost all instances the appropriation from the local official sources (county, township, or town) covers considerably more than 50 per cent of the budget.

The county, or a group of townships, as a rule, is the unit for the work. Under the cooperative arrangements, a good program of health work can be carried out in practically any rural county in the United States at a cost to the county readily within its means, and in accordance with what logically should be its desires for public health service. The average cooperative demonstration project is conducted on a cost basis of less than 50 cents per capita of population served and furnishes a striking example of efficiency with economy in public service. By having all salient branches of health work for the community conducted under the direction of one head, the whole-time county health officer, who is given a status of field agent in the United States Public Health Service, and in some of the States that of deputy State health officer, a maximum of service can be

rendered with a minimum of overhead expense, lost motion, and friction. Through good business management, every dollar invested in the enterprise can be made to yield a remarkable dividend in the protection and promotion of human health, and in a money saving to the community amounting to many times the cost of the service.

This plan of cooperative rural health work has been evolved in the course of field experience and has been tested under a wide range of local conditions. If provision were made for extension of this work, much could be done at comparatively little cost for the promotion of the general welfare.

Appropriation

The appropriation for the rural sanitation work of the Public Health Service in the fiscal year 1925 was $74,300. This was an increase of $24,300 over the appropriation for each of the several previous fiscal years. Against the amount appropriated was set up a budget saving of $2,000, leaving $72,300 available. To this was added a bonus adjustment of $1,460, making a total of $73,760.

Rural health work is directly applicable to over 50,000,000 (or nearly 50 per cent) of our population; and, because of the increased and increasing facilities for traffic, transportation, and travel, it affects the welfare of our city dwellers. The sanitary quality of the tremendous volume of raw foods now shipped daily through interstate traffic from our rural districts to our cities has an obviously important bearing on urban health, and, in view of the interstate feature, is a matter with which our Federal Government is to some extent concerned. Because of lack of efficient, whole-time rural health service, infections of man are conveyed very frequently across interstate lines. The degree of preventable physical defectiveness among the young people in our rural communities has an important bearing on the productive and defense powers of our Nation. Efficient health service prevents much more money loss than it costs. Most of our rural county governments are not disposed to establish reasonably adequate county health service without an offer of financial assistance and competent counsel from some outside agency. The lack of efficient health service in our extensive rural districts is serious and is a matter which should be of acute concern to all our units of government—individual, local, State, and National.

The appropriation for cooperative rural sanitation work in each of the last three fiscal years has been less than one forty-thousandths of the total congressional appropriation and less than 1 per cent of the amount appropriated for all the activities of the United States Public Health Service. As the expenditures from the rural sanitation funds are made on a contractual basis, it is difficult to arrange

them in a satisfactory, business-like way with annual appropriations, the amounts of which can not be known by those who are to administer the work until a short time before or even after the beginning of the new fiscal year. It would appear highly advantageous to the cooperative rural sanitation work, therefore, if it could be placed on a basis of appropriation somewhat similar to that provided in the act approved February 24, 1925, to authorize the more complete endowment of agricultural experiment stations.

Expenditures

The expenditures in the fiscal year 1925 totalled $73,192.32. Of this sum, $67,314.47 was expended in allotments for direct support of cooperative projects in counties or districts, and $5,877.85 was expended for general administration, supervision of local projects, and special studies of the problem of rural sanitation.

For the support of the work in the 79 local projects, the expenditures from all sources totalled $708,909.30. Of this sum, $67,314.47 was allotted from the rural sanitation funds of the Public Health Service; an aggregate of $569,510.66 was derived from State, county, and municipal governmental sources; and $72,084.17 was derived from other sources, including local health associations, tuberculosis associations, local Red Cross chapters, the International Health Board, and the Children's Bureau of the United States Department of Labor. Thus, this investment of the Federal funds appropriated for rural sanitation work was met with odds of over 9 to 1.

It is both significant and encouraging that organizations entering the public-health field to promote or conduct some specialized activity—such as typhoid-fever prevention, hookworm control, tuberculosis prevention, trachoma control, malaria control, venereal-disease prevention, or advancement of child and maternity hygiene—realize, after practical experience, the advantage of dovetailing their specific activities in with and making them a part of a well-rounded, comprehensive program of local official health service under the immediate direction of a qualified, whole-time local health officer. Such arrangement is obviously in the interest of efficiency with economy in public-health work in our rural districts.

Compiled Data

The expenditures from the different sources for support of the cooperative demonstration projects, the scope, the principal activities, and some of the results of the work are presented in the accompanying tabular statement.

In attempting to measure the efficiency of health service, consideration is to be given to the local conditions—climatic, topographical, geographical, social, economic, and other—under which the work is

done, the duration, nature, and scope of the activities, the cost of the service, and the results (tangible and potential) achieved. The 79 cooperative projects listed in this tabular statement present a very wide range of local conditions. From equivalent, well-directed efforts much larger results are obtainable in one project than in another. Considering the cost of the service, the activities and results reported, and the findings from direct surveys of the situations by representatives of the Public Health Service and the State boards of health concerned, it is apparent that some of the projects were highly successful in the fiscal year 1925, others were not up to reasonable expectations, and the average was good. In rural health work, as in other business, the personal equation of the director of the unit is the main factor making for success or failure.

A careful, analytical, and comparative study of the data in the table should be of interest to anyone competent to make such a study and should be of especial interest to existing and prospective whole-time county (or local district) health officers.

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925

Counties (or districts)	Baker, Ga.	Bernalillo, N. Mex.	Calhoun, Ala.	Cape Cod Health District, Mass.	Cascade, Mont.	Chaves, N. Mex.	Cherokee, Kans.	Colbert, Ala	Colfax, N. Mex.	Crawford, Ill.	Decatur, Ga.
Period of work in fiscal year 1925	Apr. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to July 31, 1924	July 1, 1924, to June 30, 1925	July 1, 1924, to May 31, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to Dec. 31, 1924	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
A. EXPENDITURES											
Rural sanitation fund (P. H. S.)	$250.00	$300.00	$73.33	$2,499.96	$2,200.00	$313.62	$1,140.50	$600.00	$150.00	$2,400.00	$945.84
State	250.00		335.00					4,813.36	1,050.00	600.00	1,000.00
County	479.50	10,860.85	509.81		9,401.04	4,922.14	6,867.99	4,835.83	2,460.00	5,030.75	4,470.46
Municipalities			308.33	5,238.90	9,401.05		2,074.90	2,056.56			
Other agencies			200.00		1,410.00	1,425.00	4,395.37				
Total	979.50	11,160.85	1,426.47	7,738.86	22,412.09	6,660.76	14,478.76	12,305.75	3,660.00	8,030.75	6,416.30
B. ACTIVITIES											
1. Educational:											
(a) Lectures	5	30	2	73	22	13	31	116	106	40	136
(b) Attendance	555	1,649	66	354	1,602	490	1,755	6,961	2,295	4,992	4,478
(c) Bulletins distributed	901	1,586	258	303	3,882	460	6,535	2,057	330	1,352	936
(d) Newspaper articles	17	523	2	26	67	27	115	48	12	136	22
(e) Circular letters		620		255			92	8,912		879	85
(f) Health exhibits	1			10	3	10	3		14	20	1
2. Sanitary inspections:											
(a) Private premises	311	3,355	48	110	56	2,687	74	3,183	318	52	4,991
(b) Public premises—schools, churches, stores, camps, etc	28	7,820	70	266	562	230	123	1,372	91	133	166
3. Special inspections:											
(a) Dairies		254	12	858	127	145	325	55	4	19	9
(b) Other food-producing or food-handling places	27	1,163	428	98	167	220		2,361	27	15	41
4. Examinations:											
(a) For life-extension advice			4		55		52	96		5	2
(b) For marriage licenses								4		1	
(c) For work certificates (children)			14	4				2		11	
(d) For lunacy				1				4			
(e) Of prisoners		16				2		12			
(f) Of food handlers	1	970		1		57		68	3	2	
5. Acute communicable disease control:											
(a) Visits to cases, carriers, contacts, or suspects		3,726	106	266	2,141	1,452	66	337	188	570	107
(b) Cases or carriers quarantined		735	1	239	856	498	344	139	81	179	44

6. Venereal disease control:											
(a) Suspects examined		17	10	21	30	41	25	52	7	14	11
(b) Prophylactic treatments							5	10	3		
(c) Curative treatments		528	64		73		9	7	48	102	4
7. Tuberculosis control:											
(a) Number examined			20	80	138	1	206	57		22	
(b) Positive				20	50	1	47	42		4	
(c) Negative			20	60	88		159	15		18	
(d) Placed in institutions				1	19		2	3			
(e) Home visits			66	281	361	10	446	164		233	3
8. Persons treated for removal hookworm	346							1			827
9. Persons treated for prevention or cure of goiter					75						
10. Schick tests				2				700			
11. Cows tuberculin tested		1, 108		1, 135		255	260	460			
12. Immunization:											
(a) Complete antityphoid inoculations	611	40	1, 000	11	221	7	66	2, 648	13	4	1, 679
(b) Antismallpox vaccinations		2, 337		408	214	396	27	47	133	105	66
(c) Complete diphtheria toxin-antitoxin inoculations		277			542			5	113		46
(d) Persons treated with antitoxin for immediate protection against diphtheria		49		29		15			4		
13. Child hygiene:											
(a) Prenatal—											
(1) Cases for advice				87	2	31	148	92	39		
(2) Examinations					78	1		12			
(3) Office consultations				18			12	5			
(4) Group conferences			39		22			121	2		
(5) Home visits			62	124	13	38	215	136	39		38
(6) Midwives instructed	7		2	12				350			
(b) Infant and preschool—											
(1) Babies and children examined			39	174	531	105	229	620		492	42
(2) Examinations			39	174	626	105	229	620		509	42
(3) Office consultations, mothers				79	138	17	74	31		10	42
(4) Group conferences with mothers	3			32			2	228	2	3	8
(5) Home visits			172	508	366	514	188	532	70	69	210
(c) School—											
(1) Children examined	42	2	6	4, 904	4, 667	1, 925	599	1, 697	563	3, 866	2, 963
(2) Found defective	16	2	6	1, 556	4, 188	1, 195	217	554	370	1, 871	1, 860
(3) Defects found	16	2	8	1, 782	5, 425	2, 375	155	699	550	2, 182	2, 165
(4) Consultations, parents (office and school)	245	2	4	106	172	135	168	13		15	165
(5) Home visits	167	3	91	1, 325	1, 159	289	513	243	66	158	173
(6) Talks to classes or drills in hygiene	20	101		66	66	254	516	5		35	126
(7) Exclusions for communicable disease		368		263	381	243	203	29		160	
(d) Nutritional classes—cases attending							134			5	
14. Antimalaria work	(1)	(2)	(1)	(2)	(2)	(2)	(1)	(1)	(2)	(2)	(1)
15. Laboratory examinations:											
(a) Positive	109	263	79	41	508	262	20	145	2	32	796
(b) Negative	103	3, 347	270	12	2, 435	345	40	513	7	51	841
Total	212	3, 610	349	53	2, 943	607	60	658	9	83	1, 637

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Baker, Ga.	Bernalillo, N. Mex.	Calhoun, Ala.	Cape Cod Health District, Mass.	Cascade, Mont.	Chaves, N. Mex.	Cherokee, Kans.	Colbert, Ala.	Colfax, N. Mex.	Crawford, Ill.	Decatur, Ga.
Period of work in fiscal year 1925	Apr. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to July 31, 1924	July 1, 1924, to June 30, 1925	July 1, 1924, to May 31, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to Dec. 31, 1924	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
C. RESULTS											
1. Sanitary privies installed:											
(a) Septic or L. R. S.							3	10			
(b) Water-tight vault							16				
(c) Bucket and box							44				
(d) Pit		368	6	1		38	40	1,094			35
Total		368	6	1		38	103	1,104			35
2. Privies restored to sanitary type		136				179	47	144	19	11	15
3. Septic tanks installed	1	20				14		12			12
4. New sewer connections		135	62		76	33		100	7		
5. New water connections		669			23	21	50			1	
6. Wells improved	2	12	1			15	25	1	10	3	13
7. Springs improved		10						1			
8. Public milk supplies radically improved		30		2		27		1		3	
9. Treatments induced for correction of physical defects:											
(a) In infants				55		41	4	18	2	12	
(b) In preschool children			13	54		43	4	116			
(c) In school children		2	6	438	407	269	155	93	37	173	123
(d) In adults				42		37	6	10			
10. Nutritional cases improved							31	8		5	
11. Convictions for violation sanitary laws		4		1	6	5					
12. Nuisances corrected	1	7,146	4	21	563	1,310	114	491	49	14	62

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	DeSoto, Parish, La.	Dona Ana, N. Mex.	Dubuque, Iowa	Dunklin, Mo.	Eddy, N. Mex.	Edgecombe, N. C.	Floyd, Ga.	Franklin, Ala.	Gentry, Mo.	Georgetown, S. C.
Period of work in fiscal year 1925	July 1, 1924, to May 10, 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to May 10, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$515.00	$136.34	$300.00	$900.00	$538.33	$999.96	$300.00	$275.00	$900.00	$3,000.00
State	3,520.27		4,589.88	900.00		1,462.44		2,562.47	900.00	1,698.88
County	3,904.15	3,109.73	7,249.92	3,740.95	3,119.81	5,867.93	7,163.60	4,934.91	3,356.11	1,675.53
Municipalities	806.15						2,400.00			
Other agencies	230.34	300.00	5,600.00	1,800.00	650.00			1,590.00	1,650.00	206.46
Total	8,975.91	3,546.07	17,739.80	7,340.95	4,308.14	8,330.33	9,863.60	9,362.38	6,806.11	6,580.87
B. ACTIVITIES										
1. Educational:										
(a) Lectures	18	11	76	164	22	27	180	165	183	28
(b) Attendance	2,562	548	4,486	12,300	2,945	2,087	6,295	11,762	4,335	2,176
(c) Bulletins distributed	2,787	96	14,419	1,611	148	118	6,934	3,129	7,932	8,332
(d) Newspaper articles	25	17	30	215	11	16	41	55	47	59
(e) Circular letters	4,708	129	479	1,555	92	870		5,950	636	143
(f) Health exhibits	3		1	4		7		6	10	
2. Sanitary inspections:										
(a) Private premises	759	339	999	318	15	34	206	6,590	57	170
(b) Public premises—schools, churches, stores, camps, etc.	219	256	835	137	34	88	137	315	92	114
3. Special inspections:										
(a) Dairies	59	103	170		67	66	39	31	10	
(b) Other food producing or food handling places	757	20	723		72	236	68	556	12	43
4. Examinations:										
(a) For life extension advice	79			66		176		64	184	14
(b) For marriage license						163		17		
(c) For work certificates (children)						77				
(d) For lunacy		2		27	2	24		5	1	2
(e) Of prisoners		33			5	72	2	12	2	
(f) Of food handlers		16				27		12	1	2
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	45	863	373	495	45	141	334	267	63	109
(b) Cases or carriers quarantined	37	586	71	27	6	147	106	188	53	

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	DeSoto, Parish, La.	Dona Ana, N. Mex.	Dubuque, Iowa	Dunklin, Mo.	Eddy, N. Mex.	Edgecombe, N. C.	Floyd, Ga.	Franklin, Ala.	Gentry, Mo.	Georgetown, S. C.
Period of work in fiscal year 1925	July 1, 1924, to May 10, 1925	Feb 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to May 10, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
B. ACTIVITIES—continued										
6. Venereal disease control:										
(a) Suspects examined	1		106			219	25	32		58
(b) Prophylactic treatments							18			
(c) Curative treatments			494			402	11	16		
7. Tuberculosis control:										
(a) Number examined		1	61	89	7	60	4	31	21	9
(b) Positive			9	13	4	41	1	8	10	4
(c) Negative		1	52	76	3	19	3	23	11	5
(d) Placed in institutions			2	8		54	6			1
(e) Home visits	8		111	116	5	212	244	47	20	73
8. Persons treated for removal hookworm	14					8		128		51
9. Persons treated for prevention or cure of goiter			22						33	
10. Schick tests	745		28	32			1,101	130	241	
11. Cows tuberculin tested	169	78	3,642		118			35	281	
12. Immunization:										
(a) Complete antityphoid inoculations	3,083	139	12	113	107	2,830	3,693	2,336	35	112
(b) Antismallpox vaccinations	160	69	272	262	554	2,894	715	57	26	759
(c) Complete diphtheria toxin-antitoxin inoculations	1,034		18	201	18	1,196	179	51	130	
(d) Persons treated with antitoxin for immediate protection against diphtheria		18	38	6	6		1	45	7	
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice	23	165	115	14	2	172	45	117	58	28
(2) Examinations		4		2						3
(3) Office consultations		29	93	1	13			19	1	10
(4) Group conferences			2		16					3
(5) Home visits	20	137	432		3		222	144	8	41
(6) Midwives instructed	37	59			2	61		26		238
(b) Infant and preschool—										
(1) Babies and children examined	489		262	185	4	496	83	307	284	241
(2) Examinations	506		262	185	4	496	83	307	305	241
(3) Office consultations, mothers	286		101	193		36		58	197	31
(4) Group conferences with mothers	73		3	129		26		17	1	
(5) Home visits	594	2,481	2,015	267		738		275	37	65

(c) School—										
(1) Children examined	2,329	3	10,034	6,547	1,578	1,180	6,017	3,540	2,597	1,501
(2) Found defective	2,116	3	6,413	4,187	650	463	1,927	2,984	1,201	829
(3) Defects found	4,732	4	11,001	5,678	1,830	865	2,210	4,297	1,800	1,395
(4) Consultations, parents (office and school)	42	7	900	607	1			146	375	48
(5) Home visits	185		1,415	1,013	5		1,336	266	383	74
(6) Talks to classes or drills in hygiene	40		475	277	22	59		2	100	69
(7) Exclusions for communicable disease	3	128	249	144	10			92	32	30
(d) Nutritional classes—cases attending										8
14. Antimalaria work	(1)	(2)	(2)	(1)	(2)	(2)	(2)	(1)	(2)	(1)
15. Laboratory examinations:										
(a) Positive	55	27	416	31	7	221	35	260	61	182
(b) Negative	56	157	2,685	82	12	280	126	523	68	328
Total	111	184	3,101	113	19	501	161	728	129	510
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S				4					1	
(b) Water-tight vault									5	
(c) Bucket and box				6			1	4	5	
(d) Pit	180	12	8	40		476	89	434	31	33
Total	180	12	8	50		476	90	438	40	33
2. Privies restored to sanitary type	115	97	55		3		166	2	16	
3. Septic tanks installed	9		7				25	9	3	
4. New sewer connections	35	24	448		3	57	125	113	112	2
5. New water connections		66	456				64	332	14	
6. Wells improved	6	21	22			2		16	16	4
7. Springs improved					1			2		
8. Public milk supplies radically improved	1	31	19				5			
9. Treatments induced for correction of physical defects:										
(a) In infants			21					2		26
(b) In preschool children			52	55				7	6	48
(c) In school children	196		757	1,761	5	379	786	957	832	111
(d) In adults	1					3		2	3	24
10. Nutritional cases improved		1,374						188	98	84
11. Convictions for violation sanitary laws	6	5	1		1			30		
12. Nuisances corrected	1,261	163	568		3	91	134	146	15	13

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Gilmer, W. Va.	Glynn, Ga.	Greene, Mo.	Hancock, W. Va.	Harrison, W. Va.	Harrison, Miss.	Hinds, Miss.	Jackson, Mo.	Lafourche Parish, La.	Lauderdale, Ala.
Period of work in fiscal year 1925	Jan. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	Mar. 1, 1925, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$199.98	$300.00	$450.00	$1,499.96	$1,197.50	$2,099.91	$250.00	$1,490.00	$250.00	$1,174.96
State	1,623.43		1,374.69	1,349.96		884.56	945.26		500.00	2,518.06
County	1,623.46	11,914.58	10,222.10	4,603.33	12,256.20	13,347.84	2,289.48	2,218.56	750.00	4,947.71
Municipalities			2,630.00			1,455.20	4,146.42			1,730.25
Other agencies			3,350.00	999.96	1,045.35	483.75	945.26			5,266.85
Total	3,446.87	12,214.58	18,026.79	8,453.21	14,499.05	18,271.26	8,576.42	3,708.56	1,500.00	15,637.83
B. ACTIVITIES										
1. Educational:										
(a) Lectures	82	62	147	56	684	61	50	110	30	41
(b) Attendance	2,993	2,475	3,566	2,552	9,685	6,206	3,250	4,836	4,672	7,052
(c) Bulletins distributed	8,979	4,416	10,533	2,754	40,713	4,487	1,787	4,456		3,756
(d) Newspaper articles	14	38	91	149		391	57	43		43
(e) Circular letters	1,333	1,267	4,222	342	878	1,082	963	1,154	192	2,073
(f) Health exhibits	4			1	1	2			1	9
2. Sanitary inspections:										
(a) Private premises	60	9,609	30	293	917	14,802	1,683	60		3,336
(b) Public premises—schools, churches, stores, camps, etc	27	229	136	45	28	2,989	46	37	19	305
3. Special inspections:										
(a) Dairies		435	106	22	20	148	189			138
(b) Other food producing or food handling places	1	838		29	11	193	1,562		12	178
4. Examinations:										
(a) For life extension advice	12	20	43			81			33	161
(b) For marriage license						1			4	3
(c) For work certificates (children)				3				1		52
(d) For lunacy			21	2	1	2				7
(e) Of prisoners	23	3	8		15	10				51
(f) Of food handlers	4	191		3		21	2			38
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	29	754	230	1,251	134	561	33	29	7	637
(b) Cases or carriers quarantined	9	78	274	343	224	172	26	120	2	181

6. Venereal disease control:										
(a) Suspects examined	3	413	246	1	140	72	5			637
(b) Prophylactic treatments										
(c) Curative treatments	14	454	2,714	1	538	173				51
7. Tuberculosis control:										
(a) Number examined	11	104	208	5	201	31	7			192
(b) Positive	8	9	58	3	33	19	7			48
(c) Negative	3	95	150	2	168	12				144
(d) Placed in institutions		1	43			2	2			
(e) Home visits	5	275	304	67	123	31		1		176
8. Persons treated for removal of hookworm		78				470	13		1	33
9. Persons treated for prevention or cure of goiter	151		1	1,011		10				1
10. Schick tests				303		4	872			1
11. Cows tuberculin tested		260	1	80		750				1,217
12. Immunization:										
(a) Complete antityphoid inoculations	423	881	79	1		71	996	2	4,391	2,520
(b) Antismallpox vaccinations	3	1,022	19	1,656	2	2,286	643		270	22
(c) Complete diphtheria toxin-antitoxin inoculations	231	107	1,684	653		38	1			67
(d) Persons treated with antitoxin for immediate protection against diphtheria		98		65		5	6			28
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice	1	220	153		106	193	24	21		122
(2) Examinations	2		4			158	17			
(3) Office consultations	3	27	12		1	23	18			1
(4) Group conferences										8
(5) Home visits	2	166	153	3	110	188	41	6		216
(6) Midwives instructed		39				84	5	5		31
(b) Infant and preschool—										
(1) Babies and children examined	15	18	480	111	394	1,303	4	80	194	299
(2) Examinations	16	18	480	111	394	1,303	4	80	194	299
(3) Office consultations, mothers	8	120	165	29	3	137	1	116		44
(4) Group conferences with mothers		15	26	21				41		59
(5) Home visits	8	228	2,711	246	1,030	1,182	70	125		807
(c) School—										
(1) Children examined	248	1,131	2,250	733	6,441	1,229	739	4,047	799	6,394
(2) Found defective	181	661	782	348	4,441	553	311	2,572	624	3,013
(3) Defects found	318	948	1,074	536	6,045	938	540	3,571	1,369	4,945
(4) Consultations, parents (office and school)	5	272	499	66		1,139	140	99	30	20
(5) Home visits	9	1,522	1,083	225	235	1,520	171	282		1,127
(6) Talks to classes or drills in hygiene	7	28	07		206	14		69		78
(7) Exclusions for communicable disease	7	204	18	43		38	84	121	3	182
(d) Nutritional classes—cases attending			103		16	118				27
14. Antimalaria work	(2)	(1)	(2)	(2)	(2)	(1)	(1)	(2)	(2)	(1)
15. Laboratory examinations:										
(a) Positive	7	402	494	7	192	455	19	4	12	426
(b) Negative	13	985	626	33	233	1,018	141	1	7	1,819
Total	20	1,387	1,120	40	425	1,473	160	5	19	2,245

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Gilmer, W. Va.	Glynn, Ga.	Greene, Mo.	Hancock, W. Va.	Harrison, W. Va.	Harrison, Miss.	Hinds, Miss	Jackson, Mo.	Lafourche Parish, La.	Lauderdale, Ala.
Period of work in fiscal year 1925	Jan. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	Mar. 1, 1925, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S.		59			7	156				2
(b) Water-tight vault						2				
(c) Bucket and box										
(d) Pit	15			1	1,247	283	517			693
Total	15	59		1	1,254	441	517			695
2. Privies restored to sanitary type	27	165	11			2,560	649			328
3. Septic tanks installed		14		1		183	5	1		38
4. New sewer connections					1,196	35	65	2		317
5. New water connections						233	23			146
6. Wells improved					18					10
7. Springs improved								2		2
8. Public milk supplies radically improved		24			8	48				9
9. Treatments induced for correction of physical defects:										
(a) In infants		50	210							62
(b) In preschool children	3	18	96	2		42				256
(c) In school children	47	260	408	366		115			5	595
(d) In adults	2		56						2	29
10. Nutritional cases improved		57	291		14	46				22
11. Convictions for violation sanitary laws			1		2	233	11			166
12. Nuisances corrected		72	14	59	58	15	37	46	2	510

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Laurens, Ga.	Lewis and Clark, Mont.	Limestone, Ala.	Logan, W. Va.	Madison, Ala.	Marion, W. Va.	Marshall, W. Va.	Mason, Ky.	McKinley, N. Mex.	Miller, Ga.
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Oct. 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$300.00	$2,400.00	$300.00	$606.50	$886.64	$1,500.00	$999.98	$1,950.00	$262.50	$998.33
State			2,475.00	950.00	2,829.98		1,285.00	1,781.60	2,204.11	1,000.01
County	3,900.00	2,052.96	5,102.94	8,685.12	8,241.02	4,837.30	3,656.92	3,563.19	2,875.75	1,961.80
Municipalities		2,090.45			5,758.39		75.00	800.00		
Other agencies		1,462.50	1,570.00	950.00	3,416.44		2,134.94	981.59	1,800.00	
Total	4,200.00	8,005.91	9,447.94	11,191.62	21,132.47	6,337.30	8,151.84	9,076.38	7,142.36	3,960.14
B. ACTIVITIES										
1. Educational:										
(a) Lectures	228	30	55	7	141	109	44	220	103	39
(b) Attendance	6,860	1,391	5,015	685	17,046	4,001	3,564	4,100	3,398	1,787
(c) Bulletins distributed	2,770	7,052	6,022	2,921	3,805	12,773	1,019	1,404	967	1,782
(d) Newspaper articles	196	107	25	64	241	51	26	191	47	62
(e) Circular letters	1,925	251	2,105	535	3,220	20			172	
(f) Health exhibits	17	2	18	4	4	6	4	4	6	
2. Sanitary inspections:										
(a) Private premises	236	160	1,562	4,270	13,330	199	77	371	835	767
(b) Public premises—schools, churches, stores, camps, etc	221	209	399	353	320	285	31	398	164	56
3. Special inspections:										
(a) Dairies	66	160	25	44	420	18	100	219	36	
(b) Other food producing or food handling places	129	191	790	159	884	41	25	1,363	97	
4. Examinations:										
(a) For life-extension advice	28	95	137		171	60				
(b) For marriage licenses	3		84		387	1				
(c) For work certificates (children)			2		486	33	4			
(d) For lunacy	7		24		28	40	1		4	
(e) Of prisoners	83		51	2	296	1,189	9		7	
(f) Of food handlers	128	23	4		101					
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	290	801	1,513	567	387	149	512	232	826	5
(b) Cases or carriers quarantined	117	166	304	206	136	146	256	26	631	

6. Venereal disease control:										
(a) Suspects examined	70	83	74	123	565	56	6	51	9	
(b) Prophylactic treatments	42			1						
(c) Curative treatments	20		120	499	5,506	170		173		
7. Tuberculosos control:										
(a) Number examined	39	45	25	7	72	26	82	100	12	
(b) Positive	13	15	4	7	29	15	33	13	12	
(c) Negative	26	30	21		43	11	49	87		
(d) Placed in institutions	9	9		14		15	24	2		
(e) Home visits	31	195	144	200	363	29	123	328	6	
8. Persons treated for removal of hookworm	387									745
9. Persons treated for prevention or cure of goiter	3		17			162				
10. Schick tests		302								
11. Cows tuberculin tested	23	2,588	621	173	2,493	119	6,997	2,650		
12. Immunization:										
(a) Complete antityphoid inoculations	3,838	13	2,919	90	3,411	275		1		1,195
(b) Antismallpox vaccinations	3,796	220	830	208	1,555	415	30	3	389	2
(c) Complete diphtheria toxin-antitoxin inoculations	36	884		21		31				10
(d) Persons treated with antitoxin for immediate protection against diphtheria	72	36	13	14	25	12	22	3		
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice	143	119	135	163	401			208	38	
(2) Examinations	113	53	38		324			271	34	
(3) Office consultations	85	82	25		93			111	10	
(4) Group conferences	36	42	2	11	7				4	
(5) Home visits	59	285	222	629	574			467	15	
(6) Midwives instructed	92		52		71				11	
(b) Infant and preschool—										
(1) Babies and children examined	101	167	735	469	1,740	202		621	713	
(2) Examinations	102	406	898	469	1,740	202		688	713	
(3) Office consultations, mothers	73	189	172		218	12		169	6	
(4) Group conferences with mothers	36	81	13	19	35			12	18	
(5) Home visits	56	496	706	205	2,310			993	48	
(c) School—										
(1) Children examined	940	2,496	3,967	1,457	5,610	2,505	1,304	4,386	2,722	
(2) Found defective	723	1,916	2,332	1,386	3,982	1,961	734	796	639	
(3) Defects found	768	3,827	3,041	2,648	7,532	3,596	978	1,506	1,046	
(4) Consultations, parents (office and school)	143	207	227	90	147	225		280	3	180
(5) Home visits	98	879	604	836	1,056	46	40	838	1,234	153
(6) Talks to classes or drills in hygiene	124	67	140	98	60	131		173	32	65
(7) Exclusions for communicable disease	186	346	796	61	68		734	102	322	
(d) Nutritional classes—cases attending	136	226	950	55						
14. Antimalaria work	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
15. Laboratory examinations:										
(a) Positive	459	135	385	111	753	95	38	55	17	588
(b) Negative	902	379	1,495	146	2,559	57	91	189	32	527
Total	1,361	514	1,880	257	3,312	152	129	244	49	1,115

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Laurens, Ga.	Lewis and Clark, Mont.	Limestone, Ala.	Logan, W. Va.	Madison, Ala.	Marion, W. Va.	Marshall, W. Va.	Mason, Ky.	McKinley, N. Mex.	Miller, Ga.
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Oct. 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S.		96		1	62	63	2	51		
(b) Water-tight vault		7				4				
(c) Bucket and box			9		147					
(d) Pit	136	3	115	366	217		6		18	
Total	136	106	124	367	426	67	8	51	18	
2. Privies restored to sanitary type	123	254		2,082	756	44	12	89	208	
3. Septic tanks installed		16		2	1	7		3		7
4. New sewer connections	52	49	32	154	240	33	12	96	2	2
5. New water connections	52	44	32	279	214			108	1	2
6. Wells improved	37	30	37	41	91	6		45	7	1
7. Springs improved	20	18	2		4	3		1	2	
8. Public milk supplies radically improved	18	67		10	24	1		3	8	
9. Treatments induced for correction of physical defects:										
(a) In infants	102	2	67						17	
(b) In preschool children	57	36	91						5	
(c) In school children	544	207	539		1,274	6		500	183	
(d) In adults	190	16	76		11				7	
10. Nutritional cases improved	220	226	370				11		10	
11. Convictions for violation sanitary laws	6	3	19	14	23	11			7	
12. Nuisances corrected	138	174	260	222	994	286	31	131	266	37

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Mineral, W. Va.	Nansemond, Va.	New Madrid, Mo.	Nodaway, Mo.	Oklahoma, Okla.	Okmulgee, Okla.	Ottawa, Okla.	Pettis, Mo.	Polk, Mo.	Preston, W. Va.
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Jan. 1, 1925, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$600.00	$300.00	$900.00	$1,300.00	$1,187.48	$929.15	$360.50	$775.00	$600.00	$1,200.00
State	237.00	2,689.29	2,050.00	1,606.00	330.03	1,095.23		1,925.00	1,800.00	3,923.83
County	400.00	5,378.58	3,600.00	6,644.94	1,093.05	1,035.81	2,148.33	3,000.00	3,600.00	7,843.75
Municipalities	647.25	2,689.27						1,800.00		
Other agencies		2,689.27	1,150.00	375.00	994.31	1,587.50	2,330.02	2,253.97	1,050.00	1,500.00
Total	1,884.25	13,746.41	7,700.00	9,925.94	3,604.87	4,647.69	4,838.85	9,753.97	7,050.00	14,467.58
B. ACTIVITIES										
1. Educational:										
(a) Lectures	20	30	176	87	74	52	60	42	45	499
(b) Attendance	3,550	1,797	6,247	9,226	2,792	2,007	1,433	1,560	1,900	10,718
(c) Bulletins distributed	926	5,712	3,600	10,615	1,150	1,809	292	5,150	2,104	5,110
(d) Newspaper articles	4	189	257	140	1	44	22	58	70	29
(e) Circular letters	1,025	1,742	10,160			1		2,582	1,916	1,210
(f) Health exhibits	1	28				1	73	1	13	3
2. Sanitary inspections:										
(a) Private premises	1,065	511	15	250	71	2	48	25	17	5,149
(b) Public premises—schools, churches, stores, camps, etc	47	1,315	116	204	73	740	671	158	103	700
3. Special inspections:										
(a) Dairies	3	42	4		16	77	16			23
(b) Other food-producing or food-handling places	13	186			6	322	261		3	279
4. Examinations:										
(a) For life-extension advice		49	130	134				69	121	221
(b) For marriage licenses			1					5		
(c) For work certificates (children)	12	147								2
(d) For lunacy		3	27			2	19	8	7	6
(e) Of prisoners			192				107	5	3	14
(f) Of food handlers			1			1	169	8		84
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	57	393	352	226	606	82	41	391	138	164
(b) Cases or carriers quarantined	50	96	94	183	32	50	22	45	53	83

6. Venereal disease control:										
(a) Suspects examined	1	35	46		1	66	89	228	8	35
(b) Prophylactic treatments								10	4	
(c) Curative treatments		10	67			12	55	1,722	7	51
7. Tuberculosis control:										
(a) Number examined		468	46	17	2	24	21	42	35	24
(b) Positive		121	37	6		23	14	8	10	3
(c) Negative		347	9	11	2	1	7	34	25	21
(d) Placed in institutions		19	12	3		2		1	1	3
(e) Home visits		598	51	1	22	47	19	122	42	20
8. Persons treated for removal of hookworm		7								
9. Persons treated for prevention or cure of goiter	38		10	96				3	3	1,447
10. Schick tests		1,112							16	
11. Cows tuberculin tested		187	16			585	83			123
12. Immunization:										
(a) Complete antityphoid inoculations	35	576	1,146	5	1,145		28	23	413	329
(b) Antismallpox vaccinations	16	1,472	338		522		41	26	3	2,474
(c) Complete diphtheria toxin-antitoxin inoculations		1,186	387	1,862				11	170	124
(d) Persons treated with antitoxin for immediate protection against diphtheria		2	18				60	13	6	49
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice		25	33	106	8	21	49	51	7	253
(2) Examinations		6	1				15	22	5	
(3) Office consultations			19	6		15	9	8	3	19
(4) Group conferences							18			125
(5) Home visits		23	33	94		35	30	47	4	171
(6) Midwives instructed		15	21			29	5			4
(b) Infant and preschool—										
(1) Babies and children examined		746	640	309		212	210	439	145	704
(2) Examinations		746	640	309		212	210	439	145	806
(3) Office consultations, mothers			195	172		8	69	111	65	97
(4) Group conferences with mothers		16	119			42	39	51	1	99
(5) Home visits		740	109	799	4	130	31	542	37	476
(c) School—										
(1) Children examined	425	5,220	4,100	1,737	3,166	502	963	3,788	2,659	6,683
(2) Found defective	165	2,811	3,487	1,416	1,577	447	431	1,999	1,928	4,193
(2) Defects found	257	3,810	4,860	2,962	3,187	640	971	4,880	4,048	5,663
(4) Consultations, parents (office and school)	47	4,390	546	575	16	5	26	484	161	205
(5) Home visits	32	715	253	384	101	33	57	316	88	290
(6) Talks to classes or drills in hygiene	31	1	145	73	7	26	4	316	41	391
(7) Exclusions for communicable disease	59	145	110		7	22	3	129	66	53
(d) Nutritional classes—cases attending		52					79	7		
14. Antimalaria work	(2)	(1)	(1)	(2)	(2)	(2)	(2)	(2)	(2)	(2)
15. Laboratory examinations:										
(a) Positive		176	12	33	21	66	21	219	70	101
(b) Negative		290	39	86	77	27	10	344	118	216
Total		466	51	119	98	93	31	563	188	317

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Mineral, W. Va.	Nansemond, Va.	New Madrid, Mo.	Nodaway, Mo.	Oklahoma, Okla.	Okmulgee, Okla.	Ottawa, Okla.	Pettis, Mo.	Polk, Mo.	Preston, W. Va.
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Jan. 1, 1925, to June 30, 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S.	10	1	6							26
(b) Water-tight vault	2	1								26
(c) Bucket and box	4	4					210			175
(d) Pit		265	47	6	1		7	6	1	904
Total	16	271	53	6	1		217	6	1	1,131
2. Privies restored to sanitary type	14	214		191			155	23	2	224
3. Septic tanks installed		11	9				1			38
4. New sewer connections	165	44		9						285
5. New water connections	166	10						17		271
6. Wells improved	12	5		16		2	2	13	14	123
7. Springs improved		2							4	63
8. Public milk supplies radically improved		19								
9. Treatments induced for correction of physical defects:										
(a) In infants			262				5	60	4	15
(b) In preschool children		59	213	1		7	29	37	8	67
(c) In school children		563	872	716		1	101	1,119	114	1,608
(d) In adults		4	323		1		11	82	16	16
10. Nutritional cases improved		52	200	122			101	81	16	158
11. Convictions for violation sanitary laws	6						2			
12. Nuisances corrected	30	405	6			18	248	4	10	616

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Pulaski, Ark.	St. Francois, Mo.	Sampson, N. C.	San Diego, Calif.	San Joaquin District, Calif.	Santa Barbara, Calif.	Santa Fe, N. Mex.	Seminole, Ga.	Surry, N. C.	Talladega, Ala.
Period of work in fiscal year 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Oct. 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Apr. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to Mar. 31, 1925	July 1, 1924, to Sept. 30, 1924	July 1, 1924, to June 30, 1925
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$1,358.33	$900.00	$300.00	$1,874.97	$1,000.00	$520.82	$300.00	$748.33	$75.00	$1,999.92
State	250.00	2,352.11	2,499.98	1,350.00				749.99	601.00	3,383.13
County	2,421.04	3,874.62	4,000.00	13,226.03	87,805.25	1,245.82	4,040.50	1,442.01	2,221.70	5,714.50
Municipalities			725.00							1,920.98
Other agencies		7,439.01			1,800.00					872.00
Total	4,029.37	14,565.74	7,524.98	16,451.00	90,605.25	1,766.64	4,340.50	2,940.33	2,897.70	13,890.53
B. ACTIVITIES										
1. Educational:										
(a) Lectures	63	40	13	7	138	15	55	61		99
(b) Attendance	3,866	3,310	790	25	6,917	850	1,558	3,134		4,358
(c) Bulletins distributed	581	1,792	228	1,161	2,745		113	1,950		606
(d) Newspaper articles	5	48	8	41	298	9	57	10		31
(e) Circular letters	5	6,920	7	2,861	26,749	8	85			4,081
(f) Health exhibits		4			17		1	1		1
2. Sanitary inspections:										
(a) Private premises	94	827	2	36	2,921	7	435	996		2,999
(b) Public premises—schools, churches, stores, camps, etc	43	98	82	233	540	25	134	45		198
3. Special inspections:										
(a) Dairies	51	8		264	5,112	22	62	7	3	50
(b) Other food producing or food handling places	3	49	4,364	964	6,821		55	2		494
4. Examinations:										
(a) For life-extension advice	8	7	6		13,482				12	42
(b) For marriage licenses			327				1		1	21
(c) For work certificates (children)		1	11		15				8	28
(d) For lunacy			17		16					11
(e) Of prisoners		2	69		4		9			74
(f) Of food handlers			74		20		1			15
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	96	1,607	102	1,942	13,164	9	129	12	4	535
(b) Cases or carriers quarantined	8	390	319	386	323		106		38	80

6. Venereal disease control:										
(a) Suspects examined	1	49	159		927	1	17			225
(b) Prophylactic treatments										
(c) Curative treatments		383	524		9,008		9			1,593
7. Tuberculosis control:										
(a) Number examined	11	33	13	5	329	7				55
(b) Positive	4	17	8	4	84	1				33
(c) Negative	7	16	5	1	245	6				22
(d) Placed in institutions	1	6		3	46					1
(e) Home visits	8	70	2	29	573	7	5		8	146
8. Persons treated for removal of hookworm			59					969		3
9. Persons treated for prevention or cure of goiter					1	1	5			
10. Shick tests		51			91					
11. Cows tuberculin tested				5,322	1,883		462			602
12. Immunization:										
(a) Complete antityphoid inoculations	284	76	5,009		432		52	694	2,937	872
(b) Antismallpox vaccinations	105		366	669	2,472	1	190		154	1,813
(c) Complete diphtheria toxin-antitoxin inoculations		770	450	36	1,647		43		752	1,259
(d) Persons treated with antitoxin for immediate protection against diphtheria					165		35			31
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice	2	5	408	24	321	2	26		3	67
(2) Examinations		1	22		307		4			22
(3) Office consultations	2	5	147	6	360		15		2	1
(4) Group conferences		2	304							9
(5) Home visits		10	214	30	186	2	9		15	82
(6) Midwives instructed			72				29			78
(b) Infant and preschool—										
(1) Babies and children examined	100	84	1,830	944	2,009	3	83			1,946
(2) Examinations	100	84	1,830	944	3,365	3	83			2,241
(3) Office consultations, mothers	13	23	121	418	2,426		38			66
(4) Group conferences with mothers		12	484	14	45		18			56
(5) Home visits	18	151	2,953	459	9,581		27		8	1,539
(c) School—										
(1) Children examined	565	2,143	7,027	3,782	13,565	291	2,071	781		3,748
(2) Found defective	135	1,658	2,073	1,581	7,371	105	175	194		2,805
(3) Defects found	194	3,164	2,073	2,186	8,924	167	202	250		3,858
(4) Consultations, parents (office and school)	66	128	285	95	1,488	42	77	313		195
(5) Home visits	26	303	2	231	12,020	349	27	219		543
(6) Talked to classes or drills in hygiene		165		18	405	25	50	77		179
(7) Exclusions for communicable diseases	28	88	419	193	1,250	3	77			27
(d) Nutritional classes—cases attending	1									608
14. Antimalaria work	(2)	(1)	(2)	(2)	(2)	(2)	(2)	(1)	(2)	(1)
15. Laboratory examinations:										
(a) Positive	59	156	106	32	1,149		46	521		484
(b) Negative	44	250	291	611	4,089	4	30	461		1,715
Total	103	406	397	643	5,238	4	76	982		2,199

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Pulaski Ark.	St. Francois, Mo.	Sampson, N. C.	San Diego, Calif.	San Joaquin District, Calif.	Santa Barbara, Calif.	Santa Fe, N. Mex.	Seminole, Ga.	Surry, N. C.	Talladega, Ala.
Period of work in fiscal year 1925	Feb. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Oct. 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	Apr. 1, 1925, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to Mar. 31, 1925	July 1, 1924, to Sept. 30, 1924	July 1, 1924, to June 30, 1925
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S.		7		1	16					1
(b) Water-tight vault		1		7						
(c) Bucket and box										100
(d) Pit		111	437		5		26	16	1,246	366
Total		119	437	8	21		26	16	1,246	467
2. Privies restored to sanitary type		97				1	71			196
3. Septic tanks installed		19		163			3			13
4. New sewer connections		138	36	111	977		5		69	62
5. New water connections		172	36	517	859		15			77
6. Wells improved		16		1			11			14
7. Springs improved		5					1	4		2
8. Public milk supplies radically improved					2		9			3
9. Treatments induced for correction of physical defects:										
(a) In infants			7		92					7
(b) In preschool children	26			14	27					31
(c) In school children	111	606	770	246	6,424	29	19		618	1,305
(d) In adults				150	474		1			3
10. Nutritional cases improved		1,146		353			14			141
11. Convictions for violation sanitary laws	1	1	2		9		29			4
12. Nuisances corrected	1	121		55	584	1	305	7		520

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Taylor, W. Va.	Union, N. Mex.	Valencia, N. Mex.	Walker, Ala.	Walker, Ga.	Washington Parish, La.	Washington, Miss.	Wise, Va.	10 Virginia counties	Total
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	
A. EXPENDITURES										
Rural sanitation fund (P. H. S.)	$399.96	$442.38	$300.00	$900.00	$1,740.00	$2,100.00	$1,199.99	$300.00	$4,848.50	$67,314.47
State	1,800.00		1,050.00	2,349.96		2,000.00	1,299.96		10,117.09	90,863.56
County	4,988.30	4,512.82	6,068.17	4,549.92	4,346.12	3,445.80	3,099.96	17,345.76	14,908.95	427,013.00
Municipalities						500.00	2,380.00			51,634.10
Other agencies	1,800.00	578.20		1,801.08						72,084.17
Total	8,988.26	5,533.40	7,418.17	9,600.96	6,086.12	8,045.80	7,979.91	17,645.76	29,874.54	708,909.30
B. ACTIVITIES										
1. Educational:										
(a) Lectures	88	13	35	87	105	76	350	491	324	6,892
(b) Attendance	3,340	168	733	8,337	7,443	11,451	14,823	5,737	19,803	307,700
(c) Bulletins distributed	15,309	2,140	1,716	2,882	630	4,277	3,638	3,008	21,279	287,525
(d) Newspaper articles	66	37	27	28	7	26	22	38	200	5,120
(e) Circular letters	5,173	706	864	2,145	820	2,515	1,727	205		120,855
(f) Health exhibits	5		93	4		27		1	8	458
2. Sanitary inspections:										
(a) Private premises	125	181	84	4,301	3,893	912	8,178	1,779	26,931	139,023
(b) Public premises—schools, churches, stores, camps, etc	75	15	106	484	304	172	572	1	799	27,623
3. Special inspections:										
(a) Dairies			7	10	66	166	21	96		10,625
(b) Other food producing or food handling places	211	21	15	522	173	428	473	65	1,469	30,736
4. Examinations										
(a) For life-extension advice	130	12		75		49	12			23,622
(b) For marriage licenses				141		2				1,167
(c) For work certificates (children)				49				25		963
(d) For lunacy	9	11	1	36						378
(e) Of prisoners	88	12	23	81			12	30		2,628
(f) Of food handlers	148			19	13	113				2,341
5. Acute communicable disease control:										
(a) Visits to cases, carriers, contacts, or suspects	274	928	621	301	113	154	231	78		43,391
(b) Cases or carriers, quarantined	156	181	53	125	31	105	221	49	727	11,760

6. Venereal disease control:										
(a) Suspects examined	80	7	3	74	5		11	230		5,521
(b) Prophylactic treatments				12						105
(c) Curative treatments	426	7	8	59		9	88	2,932		29,251
7. Tuberculosis control:										
(a) Number examined	46	1	2	54		7	26	293	125	3,660
(b) Positive	12		2	17		4	25	95		1,108
(c) Negative	34	1		37		3	1	198		2,427
(d) Placed in institutions	3					1	4	19		342
(e) Home visits	9	7	2	162		10	506	156		7,423
8. Persons treated for removal of hookworm				205		241	1	67		4,654
9. Persons treated for prevention or cure of goiter	926	2	5							4,022
10. Shick tests						321		457		6,509
11. Cows tuberculin tested	173	4,843				1,134	496	110	485	42,017
12. Immunization:										
(a) Complete antityphoid inoculations	793	9	18	7,502	1,590	1,564	2,701	144	2,913	71,156
(b) Antismallpox vaccinations	1,251	12	1,338	3,622	295	235	4,178	416	2,607	47,488
(c) Complete diphtheria toxin-antitoxin inoculations	1,336	30	297		42	39	24	96	1,005	19,089
(d) Persons treated with antitoxin for immediate protection against diphtheria	6	8	81	110		10	24			1,280
13. Child hygiene:										
(a) Prenatal—										
(1) Cases for advice	179	11	62	345		81	75	95		5,444
(2) Examinations	22									1,541
(3) Office consultations	5	1	5				38			1,358
(4) Group conferences		6					6	14		799
(5) Home visits	82	11	54	303		82	53	145		6,524
(6) Midwives instructed		10	193	22		25	518			2,205
(b) Infant and preschool—										
(1) Babies and children examined	97	10	358	88		183	6	268		23,643
(2) Examinations	97	23	421	88		183	6	268		26,093
(3) Office consultations, mothers	6	22		21		30		28		6,684
(4) Group conferences with mothers	49	20	23	3		116		37		2,147
(5) Home visits	105	26	401	263		257	42	796		39,811
(c) School—										
(1) Children examined	3,829	960	1,563	6,047	1,276	305	3,193	10,857		197,204
(2) Found defective	2,742	416	451	3,719	929	275	2,189	6,951		112,036
(3) Defects found	4,561	565	618	7,333	1,564	653	2,973	13,171		178,061
(4) Consultations, parents (office and school)	125	45	45	41		139	218	60		16,840
(5) Home visits	593	10	107	48		351	242	1,169		39,330
(6) Talks to classes or drills in hygiene	230	24	130	45		53	48	312		6,459
(7) Exclusions for communicable disease	245	168	38	14		87		39		8,920
(d) Nutritional classes—cases attending	108			7,162		49		25		9,864
14. Antimalaria work	(2)	(2)	(2)	(1)	(2)	(1)	(1)	(2)	(1)	
15. Laboratory examinations:										
(a) Positive	117	25	8	341	20	104	288	513		12,834
(b) Negative	114	73	80	285	47	146	1,895	727		35,603
Total	231	98	88	626	67	250	2,183	1,240	1,143	48,580

Compilation of data, by counties, on cooperative demonstration work in rural sanitation in the fiscal year 1925—Continued

Counties (or districts)	Taylor, W. Va.	Union, N. Mex.	Valencia, N. Mex.	Walker, Ala.	Walker, Ga.	Washington Parish, La.	Washington, Miss.	Wise, Va.	10 Virginia counties	Total
Period of work in fiscal year 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	July 1, 1924, to June 30, 1925	
C. RESULTS										
1. Sanitary privies installed:										
(a) Septic or L. R. S	2			7	18			73	49	734
(b) Water-tight vault									36	107
(c) Bucket and box			1	118		1	197	6	357	1,387
(d) Pit	40	11	8	447	197	163	645	277	3,453	15,187
Total	42	11	9	572	215	164	842	356	3,895	17,415
2. Privies restored to sanitary type	4	97	14	275	41	35		280	2,128	12,375
3. Septic tanks installed				8	17	20		111	453	1,256
4. New sewer connections	28			46	89	58	448	89	561	6,839
5. New water connections				62	90	46		88	344	5,700
6. Wells improved		16	3	38	1	15		6	43	843
7. Springs improved				13	1	1		5	68	237
8. Public milk supplies radically improved	20				3	14				409
9. Treatments induced for correction of physical defects:										
(a) In infants			11	21						1,175
(b) In preschool children		2	19	53		2		298		1,897
(c) In school children	3,015	132	26	114	155	221	1,800	2,199	14	35,524
(d) In adults		3	7	5		59				1,672
10. Nutritional cases improved	40		15	250		25	160			5,929
11. Convictions for violation sanitary laws				6		6	33			654
12. Nuisances corrected	41	44	31	338	229	33	645	17	566	20,396

[1] Considerable. [2] None. [3] Little.

The Cape Cod Project

The cooperative rural health work begun in May, 1921, under the direction of a whole-time district health officer in a group of the towns (townships) in Cape Cod, Mass.,[7] has continued. In the first year of the work, the number of towns participating was 10 and their pooled appropriations for support of the project was $5,100. In the fiscal year 1925, the number of towns participating was 10 and their appropriations aggregated $5,840. The survival of this cooperative project for a period of five years, under the New England town system of government, wherein the appropriation for the health service has to be authorized for each year by each town at a town meeting under a practically unanimous consent agreement of the citizens, is significant. The plan appears sound. With its demonstrated success on Cape Cod, it seems to have a considerable range of applicability in those States in which the town, township, or borough, instead of the county, is the rural unit of local government with respect to public health administration.

The cooperative health service on the Cape appears to have had a distinct commercial value in promoting, through its sanitary supervision, the local milk industry especially and, to some extent, the local shellfish, scalefish, and vegetable industries.

Special Demonstration Work in Virginia Counties

The plan of special demonstration work in rural sanitation inaugurated in Virginia in the fiscal year 1920 was carried out in 10 counties [8] in that State in the fiscal year 1925. This plan, which is described in previous reports,[9] continues to prove highly successful. It meets remarkably well the situations in rural counties in which effective health work, if done at all, must be done on a low-cost basis, and in which outdoor sanitary measures are especially needed. The cost for such service in the average county is about $2,750 a year. The county sanitary officer is engaged on a whole-time basis. He does not have to be a graduate in medicine or engineering, but he must be a trained, practical sanitarian. Along with his sanitary work, he carries out, with the active cooperation of the local physicians, most of the other activities expected of a whole-time county health officer with a medical degree.

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[7] Reprint No. 699, from Public Health Reports of Oct. 7, 1921, pp. 11, 12; Reprint No. 788, from Public Health Reports of Sept. 29, 1922, p. 14; Reprint No. 887, from Public Health Reports of Dec. 14, 1923, p. 16; and Reprint No. 964, from Public Health Reports of Oct. 17, 1924, p. 18.

[8] Carroll, Charlotte, Chesterfield, Greensville, Henry, Prince Edward, Pulaski, Roanoke, Smyth, and Washington.

[9] Reprint No. 615, from Public Health Reports of Oct. 1, 1920, pp. 10, 12; Reprint No. 699, from Public Health Reports of Oct. 7, 1921, pp. 12, 14; Reprint No. 788, from Public Health Reports of Sept. 29, 1922, pp. 14–17; Reprint No. 887, from Public Health Reports of Dec. 14, 1923, pp. 16–18; and Reprint No. 964, from Public Health Reports of Oct. 17, 1924, pp. 18–21.

The results accomplished in the Virginia county sanitary officer projects become more impressive from year to year. Some of these counties are now among the foremost in the list of rural counties in the United States presenting high-grade demonstrations in sanitary progress.

This county sanitary officer plan after six years of testing appears to offer to the counties to which it is appropriate as large a return on the investment for county health service as any other yet tried or proposed. The State health commissioner of Virginia regards the county sanitary officer system as the one best suited to the needs for health work in 44 of the 100 counties in that State, and has formulated accordingly the program for extension of whole-time local health service throughout his jurisdiction.

In view of its successful operation in the Virginia counties, the adoption of this plan is to be expected by counties in other States.

Three-County Project in Georgia

The project in the southwestern part of Georgia inaugurated in the fiscal year 1924 and described in the report for that year [10] was continued in the fiscal year 1925, and now seems established on a stable and good working basis. In this project, one whole-time health officer, a physician with training in health work, serves as health officer of each of three adjacent counties. Under his direction there is on duty in each of the three counties an assistant health officer who is a layman with practical training in sanitary work.

The plan seems well suited for counties with populations, areas, and resources too limited to support readily a complete, whole-time, county health department. If it proves as successful as it now promises, it will furnish a demonstration of far-reaching importance.

In the latter half of the fiscal year 1925, the authorities of Seminole County, which was in the original combination, declined, on the grounds of "economy," to make the appropriation to continue that county in the project. The authorities of Baker County which is adjacent to Decatur and Miller, the other counties in the original three, immediately made an appropriation and had their county given the place of Seminole in the project. Thus, the three-county program was continued without interruption. It is reported that the authorities of Seminole County, a short time after their adverse action, expressed a desire for their county to be included again in the project. By that time, however, it was too late for reconsideration as the cooperating agencies, the State Board of Health, and the Public Health Service, had already entered into agreement with the authorities of Baker County.

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[10] Reprint No. 964, from Public Health Reports of Oct. 17, 1924, p. 22.

In the section in which these counties are located, hookworm disease and malaria are highly prevalent. In some of the schools examined, 100 per cent of the children have been found infested with hookworm, and in others over 40 per cent of the children have been found to be suffering from the effects of chronic malaria. With such conditions, the efficiency of the public school system is necessarily low, and it is clear that by diverting to public health work some of the money appropriated for schools—even to the extent, if necessary, of causing all the public schools to be closed for one year in five—a net gain could be realized in the educational results from the public school system.[11]

Special Features

A voluminous report might be written without extravagance of detail on especially interesting features of the activities or the results in any of the 79 projects. The following are mentioned merely for the purpose of illustration:

In Roanoke County, Va., the work of the county sanitary officer since 1920, costing from $2,000 to $2,500 a year, has resulted in the installation of 328 sewer connections, 909 septic tanks, 131 septic privies, 31 concrete vault privies, 154 chemical closets, 986 box and can privies, and 435 pit privies, thus effecting radical sanitary improvements in excreta disposal at 2,974 (or 68%) of the 4,356 homes in the county outside the city of Roanoke. The investment by property owners for these sanitary improvements has been about $141,000. The cost would have been at least twice as much if the installations had been undertaken without the services of the sanitary officer.

In Greensville County, Va., the county sanitary officer and the supervising officer, representing the State board of health and the Public Health Service, devised a system of drain pipes [12] for mosquito prevention and malaria control which was installed at a cost of only about one-third of the amount which would have been necessary under previous methods.

In Lewis and Clark County, Mont., there was not a case of typhoid fever of local origin reported in the calendar year 1924, only 1 case of gastro-enteritis among children under 2 years of age, and only 3 cases of smallpox (all of which were imported) were reported, as against 57 cases of smallpox in 1921, the year before the whole-time county health service was established.

In Talladega, Madison, Walker, and other counties in Alabama, a striking reduction in the mortality and morbidity rates has occurred since the inauguration of their respective whole-time county health services. The lessened cost for sickness and premature death in these counties seems definitely attributable to the activities of the cooperative local health departments.

[11] American Journal of Public Health, December, 1924, p. 1013.
[12] Reprint No. 995, from Public Health Reports of Mar. 13, 1925.

In Gilmer County, W. Va., effective work has been done by the county health department to bring about correction of physical defects in children. An important factor in this work has been the distribution of a series of "Healthograms" along practical lines to interest and instruct the citizens in sanitary and hygienic measures. A sample is shown in the accompanying illustration.

Gilmer County

CLASS OF SERVICE
Health Education
Child Welfare
Tuberculosis
Contagious Disease
General Sanitation

Healthogram

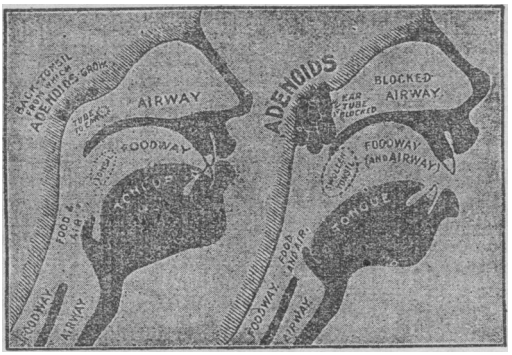
BOARD OF HEALTH
Homer Sheets
B. W. Craddock
Dr E. O. Chimene,
Field Agent,
U. S. P H. S.

THE TRUTH ABOUT TONSILS AND ADENOIDS

MOTHERS! FATHERS!

Study the picture and see how bad tonsils and adenoids deform the face. Are you going to let this happen to your child?

(NORMAL) (DISEASED)



Notice how the swollen tonsils block the passage to the ear—often causing deafness, ear disease and mastoid infection. Poison from little pockets in the tonsils may be carried to all parts of the body, and produce heart disease or rheumatism. Adenoids, by closing the air passage, cause deformities of the chest and make the development of tuberculosis easy.

STUPID CHILDREN

In school many children who are restless and seem stupid are often merely the victims of diseased tonsils and adenoids. They are unable to hear what the teacher says, their brains will not function properly because their body is suffering from want of air. Give these children a chance!

HOW THE COUNTY HEALTH DEPARTMENT CAN HELP YOU HELP THESE CHILDREN.

Every school child, and every child of pre-school age who is brought to a Child Health conference is examined, and if any defect is found the parent is notified. Visits are made to the home by the nurse, and the need of correction explained to the mother. Arrangements are being made for a tonsil and adenoid clinic in Glenville. If you wish to, have your child operated on at this clinic free, if you cannot afford to pay.

CONSULT THE COUNTY HEALTH DEPARTMENT!

In Dunklin County, Mo., the county health officer induced the pupils in the biology class of the local high school to make a sanitary survey of Senath, a town with a population of about 2,000, but without a public water supply or sewerage system. The survey form used was as follows:

DUNKLIN COUNTY HEALTH DEPARTMENT

Cooperating with

STATE BOARD OF HEALTH OF MISSOURI AND UNITED STATES PUBLIC HEALTH SERVICE

SANITARY SURVEY OF SENATH, MO.

Made by the Senath High School Biology Class

Date, March, April, 1925

A. *Water supply.*

(1) Public water supply: Source_____ Treatment, if any_____ Result, analyses_____ Number of service connections_____ Number having connections using city water for drinking purposes_____

(2) Private water supplies: Type—Driven_____ Drilled_____ Dug_____ Bored_____ Cisterns_____ Total_____ Good surface drainage: Yes_____ No_____ Concrete platform: Yes_____ No_____ Waste water trough: Yes_____ No_____ Distance from privy, cesspool, or pollution: Over 100 feet_____ 50 to 100 feet_____ Less than 50 feet_____ Number of houses and buildings having pressure water supply_____.

B. *Excretia disposal.*

(1) City sewerage system: Outlet_____ Treatment, if any_____ Number of houses with access to sewers_____ Number without_____ Number connected to sewers_____ Per cent connected of those having access to sewers_____ Per cent connected to total number_____.

(2) Number of houses having private sewage disposal systems_____ Type: Cesspools_____ Septic tank_____ Outlet: Surface (unsafe)_____ Underground_____.

(3) Outdoor toilets: Type—Surface_____ Pit type_____ Septic privies_____ Other types_____ Total_____ Flyproof (tight seat box and seat lids) Not flyproof_____ Contents accessible to domestic animals (open back)_____ Inaccessible_____.

C. *Malaria prevention.*

(1) Condition of screening of houses and buildings:
Good (with no holes—well-fitted and with all wire No. 16, or No. 14, painted_____
Fair_____ Poor_____.

(2) Breeding places and shelters for mosquitos: Low places and ditches in which water pools—Not oiled_____ Oiled_____ Open rain barrels_____ Tin can dumps_____ Open wells_____Shelters of brush and high weeds not cleared or cut_____.

(3) Breeding places outside city within one mile:
Swamp area—Extent_____ Obstructed ditches_____ Pools_____.

(4) Mosquito control measures in force:
Ditching_____ Ditch maintenance_____ Oiling_____ Top minnows_____.

D. *Garbage disposal.*

Provision for regular collection_____ Number of houses and buildings using regular service_____ Number using private disposal: Burning_____ Burying_____ Surface of ground_____ Feeding fowl or hogs_____.

E. *Manure disposal.*

Number of places keeping horses, mules_____ Cows_____ Number of places removing manure at least weekly during warm weather to prevent fly breeding in city_____ Number not doing so_____.

The interest aroused by this survey along with other factors set in operation by the county health department resulted in the calling of an election which was carried by an overwhelming majority for the installation of a public sanitary water supply and sewerage system.

Within the fiscal year 1925 four trachoma clinics were held in this county at each of which about 50 active cases of trachoma were found. Those having a mild form of the disease were treated locally and the severe cases were sent to the trachoma hospital at Rolla, Mo.

In Gentry County, Mo., a contest was inaugurated among the public schools for the highest rating in the correction of physical defects among the school children. Twenty rural and several town schools entered the contest. The rural school winning the prize, a silver cup, scored 100 per cent corrections. The percentage of corrections in the other schools in the contest ranged from 19 to 98, with an average of 52.

General Progress in Rural Health Work

Progress in the development of whole-time rural (county) health service in the United States continued in the fiscal year 1925. According to data [13] collected by the rural sanitation office from the State health departments, the number of counties, or equivalent divisions, provided with local health service reaching all rural sections thereof, under the direction of whole-time county or district health officers, was 280 at the beginning of the calendar year 1925 as against 250 at the beginning of the calendar year 1924, 230 at the beginning of the calendar year 1923, 202 at the beginning of the calendar year 1922, 161 at the beginning of the calendar year 1921, and 109 at the beginning of the calendar year 1920. The gain of 171 within this five-year period, though much less than it might have been had means been provided for a due and reasonably adequate degree of cooperation from the Federal and State official agencies, is significant.

The prospects are good for a better rate of progress in this vitally important field in the next five years. Our public health administrators generally now appear convinced that local official health service under the direction of a whole-time local health officer is the most essential element in the development of an adequate system of effective and economical public health service in the United States, and that most of the work of the Federal and State health agencies should be conducted with and through such local health departments. The principle of cooperative rural health work appears sound in theory and obviously is successful in practice. State health departments in increasing number from year to year are obtaining authorization and appropriations to enable them more nearly to do their due and proportionate part in the development and maintenance of whole-time county health service.

Within the fiscal year 1925 the legislature of one of our wealthier States, Pennsylvania, adopted an act to enable county governments in that State to appropriate for county health service. In another

[13] Reprint No, 1010 from Public Health Reports of May 8, 1925.

such State, Illinois, the attitude of the legislature was different. In May, 1924, an officer of the Public Health Service, with extensive experience in rural health work, was detailed to cooperate with the Illinois State health department in the study of rural health problems and in the development of whole-time county health service. Several counties were soon found whose authorities were willing to appropriate for whole-time county health departments. In September, 1924, the attorney general of the State ruled that under the existing statutes the county government in Illinois could not appoint a county health officer nor expend money for the support of a county health department. A bill to provide the enabling legislation needed was introduced in the legislative session beginning in January, 1925. That the governor of the State was favorable to the measure is indicated in the following excerpt from his inaugural address on January 12, 1925:

> These and other public health problems can be solved only through an adequate and sound system of public health service. Such service ought to be organized so as to reach the urban and rural districts in like measure.
>
> I therefore recommend that provision be made for erecting full-time county health departments that will operate under medical officers whose first and only duty will be to protect, preserve, and promote the public health. The county is the logical unit for this service. It preserves the home-rule idea and makes for economy and permanency. At the present time the right of counties to create full-time health departments is questioned and enabling legislation is needed.
>
> Ranking third in population and wealth, Illinois stood thirtieth in per capita appropriations for public health services last year. This State appropriated 7 cents per capita, while New York appropriated 14 cents and Pennsylvania 26 cents.

The bill passed the senate but on the last day of the session was defeated in the house. Therefore, the present inadequate and uneconomical system of part-time township health service is to be continued for a while in Illinois.

Summary

The 79 cooperative projects in the fiscal year ended June 30, 1925, yielded results exceeding in value manyfold the cost of the work. Among the activities and results presented in the tabular statement (pp. 2258 to 2278), to which especial consideration may be given, are the following:

1. Public lectures presenting the principles and details of sanitation to over 307,700 persons.

2. Over 166,600 sanitary inspections of premises, with explanation of findings to occupants or owners of the properties.

3. Physical examination of over 197,200 school children, of whom over 112,000 were found to have incapacitating physical defects, with notification to parents or guardians of defects found.

4. Thirty-five thousand five hundred and twenty-four recorded treatments effecting correction of incapacitating physical defects among school children. These were brought about by written notification of defects found to parents or guardians, follow-up visits to homes of the children, making available proper clinical facilities, and other activities of the county or district health departments.

5. Bringing about treatments for correction of serious physical defects in 1,175 infants and 1,897 preschool children.

6. Treatments to correct iodine deficiency in 4,022 persons in endemic goiter districts.

7. Forty-three thousand three hundred and ninety-one visits to homes of cases of communicable disease to advise and show the afflicted households how to prevent spread of the infections.

8. Six thousand five hundred and twenty-four visits by health nurses to prenatal cases to advise with and assist expectant mothers in carrying out hygienic and physiological measures making for healthy mothers and healthy babies.

9. Instruction of 2,205 midwives in cleanly and careful methods.

10. Twenty-three thousand six hundred and forty-three infants and children of preschool age examined and over 39,800 home visits by health nurses or health officers to demonstrate hygienic measures for the promotion of the health and the protection of the lives of infants.

11. Seventy-one thousand one hundred and fifty-six persons inoculated for protection against typhoid fever.

12. Forty-seven thousand four hundred and eighty-eight persons vaccinated against smallpox.

13. Nineteen thousand and eighty-nine children inoculated with toxin-antitoxin mixture for immunization against diphtheria.

14. Forty-two thousand and seventeen cows tuberculin tested, with elimination of reactors from herds, to prevent communication of bovine tuberculosis to persons through the medium of milk.

15. Four thousand six hundred and fifty-four persons treated effectively for relief from hookworm disease and for the prevention of the spread of the infection.

16. Marked reduction in the spread of malaria in hundreds of localities, with an aggregate population of several hundred thousand.

17. Twenty-nine thousand two hundred and fifty-one treatments to rid persons of venereal disease infection and prevent the spread of the infection.

18. Special examination of 3,660 persons for tuberculosis, of whom 1,108 were found with an active tubercular process and were advised to place themselves in the care of their private physicians and to carry out hygienic measures. Three hundred and forty-two of the

positive cases were sent to institutions maintained in whole or in part for the treatment of tuberculosis.

19. Eleven thousand seven hundred and sixty cases of dangerous communicable diseases quarantined to prevent the spread of infection in the local community, the State, and throughout the country.

20. The installation of 17,415 sanitary privies and 1,256 septic tanks at dwellings where previously there had been either grossly insanitary privies or no toilets of any sort.

21. Twelve thousand three hundred and seventy-five privies repaired so as again to be of sanitary type.

22. Six thousand eight hundred and thirty-nine homes connected for the first time with sanitary sewers.

23. Six thousand seven hundred and eighty homes provided with safe water supplies in place of contaminated water supplies.

24. Radical improvement of 409 public milk supplies, the milk from which was being distributed to a considerable extent through the channels of interstate commerce, to prevent the spread, through milk and milk products, of such infections as typhoid fever, scarlet fever, diphtheria, tuberculosis, septic sore throat, and infant diarrhea.

25. Twenty-three thousand six hundred and twenty-two adult persons (most of them over 40 years of age) examined and advised about measures to conserve their health and prolong their lives.

Such activities and results indicate that the plan of the work is both comprehensive and effective. They mean prevention of premature human death, prevention of human illness, promotion of human health, conservation of economic resources. The total result of such work stands in importance to our national welfare second to none other obtainable from equivalent investment of public funds.

DEATH RATES IN A GROUP OF INSURED PERSONS

COMPARISON OF PRINCIPAL CAUSES OF DEATH, JULY AND AUGUST, 1925, AND AUGUST AND YEAR, 1924

The accompanying table is taken from the September issue of the Statistical Bulletin, published by the Metropolitan Life Insurance Co., and presents the mortality experience of the company for August, 1925, as compared with July, 1925, and with August and year 1924. The rates are based on a strength of approximately 16,000,000 insured persons in the United States and Canada.

The death rate in this group of persons for August, 1925, was 7.5 per 1,000, the same as the rate for August of last year. The usual seasonal decline from the rate for July (8.1 per 1,000) is shown.

Among the epidemic diseases of childhood, whooping cough is the only disease that shows an increase over August, 1924; but the death rate for this disease is not high, and the cumulative rate for the year up to and including August is stated to be lower than the rates for the corresponding period of both 1923 and 1924, as are also the cumulative rates for measles, scarlet fever, and diphtheria.

The Bulletin states:

> The death rate for tuberculosis in August (81.6 per 100,000) is the lowest ever recorded for that disease in that month; indeed, with a single exception (81.2 in November, 1924), this is the minimal monthly rate ever recorded for this disease. The death rates for the principal degenerative diseases—cerebral hemorrhage, organic heart disease, and Bright's disease—are low and show a slight reduction as compared with August of last year.
>
> While far from alarming, the typhoid fever rate is not quite as good as it was last year. August is the fifth of the first eight months of 1925 in which the death rate for this disease has exceeded that for the corresponding month of 1924. The cumulative death rate for typhoid for the year, up to September 5, was 3.8 per 100,000, as compared with 3.6 for the corresponding period of last year. Measured by the standards of 5 or 10 years ago, the above figures are very low. Nevertheless, it is now probable that 1925 will break the long chain of successive years during which a continuous decline has been registered for the typhoid fever death rate.
>
> The record for diseases and conditions connected with pregnancy and childbirth during 1925 has also been far from satisfactory. Up to September 5 there had been no decline in the death rate for these puerperal diseases as compared with last year, and deaths from puerperal septicemia, the most important numerically of this group, had shown a considerable increase over the 1924 record. The death rate for puerperal diseases in August increased sharply over that for August, 1924, although a decline was registered as compared with July, 1925.

While the total rate for fatal accidents showed a decrease in August as compared with July, the rate for automobile fatalities increased, reaching the highest figure ever recorded for this group of persons for any month, namely, 18.4 per 100,000. This is higher than the combined rates for measles, scarlet fever, whooping cough, and diphtheria. The Bulletin states that the cumulative death rate for automobile fatalities up to and including August of this year is higher than that for any past year.

Death rates (annual basis) for principal causes per 100,000 lives exposed, July and August, 1925, and August and year, 1924

[Industrial department, Metropolitan Life Insurance Co.]

Cause of death	Rate per 100,000 lives exposed [1]			
	August, 1925	July, 1925	August, 1924	Year 1924
Total, all causes	747.2	810.5	746.2	905.2
Typhoid fever	6.9	5.2	6.1	4.4
Measles	1.4	3.9	1.7	7.2
Scarlet fever	1.8	2.2	1.8	4.4
Whooping cough	8.6	8.1	6.3	7.4
Diphtheria	5.1	6.6	5.8	13.1
Influenza	3.8	6.8	4.1	16.0
Tuberculosis (all forms)	81.6	95.6	92.9	104.2
Tuberculosis of respiratory system	70.3	84.0	80.6	92.3
Cancer	62.6	68.1	62.6	70.2
Diabetes mellitus	11.1	12.7	11.6	14.8
Cerebral hemorrhage	42.3	46.7	47.9	60.1
Organic diseases of heart	94.6	108.0	97.3	123.4
Pneumonia (all forms)	32.8	40.4	33.0	88.6
Other respiratory diseases	9.4	8.5	7.8	13.8
Diarrhea and enteritis	60.2	40.6	50.9	32.2
Bright's disease (chronic nephritis)	56.0	59.5	50.3	65.3
Puerperal state	13.9	14.7	12.2	16.8
Suicides	5.1	7.1	5.1	7.2
Homicides	6.6	6.6	7.3	7.1
Other external causes (excluding suicides and homicides)	69.7	73.5	68.1	62.5
Traumatism by automobile	18.4	17.9	15.1	15.7
All other causes	173.6	196.0	173.4	186.5

[1] All figures include infants insured under one year of age.

ABSTRACTS OF CURRENT PUBLIC HEALTH COURT DECISIONS

County liable for expenses of women in returning to home after discharge from State quarantine hospital.—(Kansas Supreme Court.) It was decided that, where venereally-infected women and girls were sent from a county to the State quarantine hospital for women pursuant to orders of isolation duly issued by the health authority, the county was liable for the actual, necessary, and reasonable expenses of such women and girls in returning to their homes in the county upon discharge from the hospital. The board of county commissioners was directed to make timely and adequate provision for the payment of such expenses in conformity with the reasonable regulations of the State authorities in charge of the State quarantine hospital. (State ex rel. Griffith, Atty. Gen., *v.* Conner, Sheriff of Sedgwick County, et al., 237 Pac. 385.)

Status of city dairy inspector.—(Kansas Supreme Court.) A dairy inspector of Kansas City was held to be an expert employee rather than an officer, it thus being lawful, under the statutes, for a person not a resident of the city to hold the position. It was further held that the position of dairy inspector was within the operation of the civil service act and that the incumbent could be removed only in the manner and on the grounds therein stated and not otherwise. (Bassler *v.* Gordon, Mayor, et al., 237 Pac. 907.)

Ordinance prohibiting keeping of cows within certain limits upheld.—(North Carolina Supreme Court.) The defendant was convicted of violating an ordinance of the city of Charlotte which made it unlawful to keep any cows within certain specified limits of the city. The supreme court held the ordinance in question to be valid. (State et al. *v.* Stowe, 128 S. E. 481.)

City may avail itself of other reasons for refusing food license in addition to reason given applicant.—(Minnesota Supreme Court.) A food license was refused, the reason given for such refusal being that the place of business was within a restricted residence district under the zoning ordinance. In mandamus proceedings to compel the issuance of a license the city pleaded, in addition to the zoning ordinance, the regulatory ordinance and the failure of the applicant to comply with the conditions precedent to acquiring a food license thereunder. The lower court decided in favor of the applicant, declining to make findings on the question of the failure of the applicant to meet the requirements of the regulatory ordinance because no such reason was given when the license was refused. In remanding the cause the supreme court said:

> The public records showed more than one reason for not granting the "food license." The mere fact that only one of these reasons was given by a city employee, in justification of the refusal when the demand was made, does not prevent the city from pleading and relying on all its reasons in a mandamus proceeding to compel the issuance of the license. It is not the character of the refusal, but the right of petitioner to the remedy, which must control. The public welfare can not yield to the failure of such employee or minor official to state all the existing legal grounds in support of a refusal to issue a license. * * * When there is a refusal, the petitioner must establish his claim of right that will successfully withstand any defense which may be pleaded in opposition thereto. Relator failed to show a clear right to the relief demanded. * * * The burden is on petitioner to show the full facts which entitle him to the relief sought. The questions as to whether he brought himself within the provisions of the regulatory ordinance, whether the provisions of the law had been complied with, and whether the municipal officers, in denying the license, acted arbitrarily and unreasonably, should have been determined by the trial court. * * * (State ex rel. Ratner *v.* City of Minneapolis et al., 204 N. W. 632.)

Examination for Entrance into the Regular Corps of the Public Health Service

Examinations of candidates for entrance into the regular corps of the United States Public Health Service will be held at the following-named places on the dates specified:

Washington, D. C., December 7, 1925.
Chicago, Ill., December 7, 1925.
New Orleans, La., December 7, 1925.
San Francisco, Calif., December 7, 1925.

Candidates must be not less than 23 nor more than 32 years of age, and they must have been graduated in medicine at some reputable medical college, and

have had one year's hospital experience or two years' professional practice. They must pass satisfactorily oral, written, and clinical tests before a board of medical officers and undergo a physical examination.

Successful candidates will be recommended for appointment by the President with the advice and consent of the Senate.

Requests for information or permission to take this examination should be addressed to the Surgeon General, United States Public Health Service, Washington, D. C.

DEATHS DURING WEEK ENDED OCTOBER 10, 1925

Summary of information received by telegraph from industrial insurance companies for week ended October 10, 1925, and corresponding week of 1924. (From the Weekly Health Index, October 14, 1925, issued by the Bureau of the Census, Department of Commerce.)

	Week ended Oct. 10, 1925	Corresponding week, 1924
Policies in force	61,295,734	57,217,106
Number of death claims	9,559	9,453
Death claims per 1,000 policies in force, annual rate	8.1	8.6

Deaths from all causes in certain large cities of the United States during the week ended October 10, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, October 14, 1925, issued by the Bureau of the Census, Department of Commerce)

City	Week ended Oct. 10, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate week ended Oct. 10, 1925 [2]
	Total deaths	Death rate [1]		Week ended Oct. 10, 1925	Corresponding week, 1924	
Total (69 cities)	6,224	11.1	[3] 11.4	854	[3] 841	[4] 69
Akron	40			6	8	67
Albany [5]	32	13.9	12.8	1	3	22
Atlanta	63			3	11	
Baltimore [5]	173	11.3	12.9	24	35	72
Birmingham	47	11.9	13.2	6	5	
Boston	241	16.0	14.0	41	29	109
Bridgeport	21			3	3	48
Buffalo	136	12.8	11.8	26	22	105
Cambridge	22	10.2	8.9	5	2	86
Camden	25	10.1	7.8	4	1	64
Canton	22	10.8	6.1	7	2	147
Chicago [5]	528	9.2	10.7	78	84	69
Cincinnati	122	15.5	12.9	24	6	142
Cleveland	150	8.4	9.9	22	21	55
Columbus	70	13.0	11.5	7	13	64
Dallas	42	11.3	13.0	7	5	
Dayton	25	7.5	8.6	5	5	79
Denver	73	13.5	16.8	7	8	
Des Moines	27	9.4	10.4	4	3	69
Detroit	265	11.1	9.8	42	44	72
Duluth	23	10.9	11.1	2	3	43
El Paso	26	12.9	13.0	6	0	
Erie	12			2	3	39
Fall River [5]	26	11.2	17.7	5	13	72
Flint	15	6.0	7.1	6	6	95
Fort Worth	23	7.9	8.1	3	7	
Grand Rapids	30	10.2	7.0	11	0	173
Houston	37	11.7	11.4	4	3	

[1] Annual rate per 1,000 population.
[2] Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1924. Cities left blank are not in the registration area for births.
[3] Data for 68 cities.
[4] Data for 62 cities.
[5] Deaths for week ended Friday, Oct. 9, 1925.

Deaths from all causes in certain large cities of the United States during the week ended October 10, 1925, infant mortality, annual death rate, and comparison with corresponding week of 1924. (From the Weekly Health Index, October 14, 1925, issued by the Bureau of the Census, Department of Commerce)—Continued

City	Week ended Oct. 10, 1925		Annual death rate per 1,000 corresponding week, 1924	Deaths under 1 year		Infant mortality rate week ended Oct. 10, 1925
	Total deaths	Death rate		Week ended Oct. 10, 1925	Corresponding week, 1924	
Indianapolis	78	11.3	11.7	9	4	64
Jersey City	58	9.6	12.7	12	10	85
Kansas City, Kans	21	8.8	10.3	2	0	42
Kansas City, Mo	90	12.8	14.8	9	12	
Los Angeles	182			18	25	50
Louisville	68	13.7	11.1	6	10	52
Lowell	30	13.4	12.2	1	8	17
Lynn	12	6.0	11.1	2	1	53
Memphis	49	14.6	17.6	8	12	
Milwaukee	102	10.6	8.0	17	10	79
Minneapolis	73	8.9	8.6	10	4	53
Nashville [5]	33	12.6	16.5	4	8	
New Bedford	29	11.2	9.8	3	4	50
New Haven	46	13.4	14.5	5	6	65
New Orleans	158	19.9	16.2	25	13	
New York	1,225	10.5	11.0	134	155	54
Bronx Borough	128	7.4	8.0	9	17	31
Brooklyn Borough	398	9.3	10.0	52	56	54
Manhattan Borough	536	12.4	13.0	63	80	66
Queens Borough	122	11.1	10.9	5	10	23
Richmond Borough	41	16.0	13.2	5	2	89
Newark, N. J	86	9.9	7.3	15	9	68
Norfolk	30			3	2	55
Oakland	49	10.1	9.3	5	5	58
Oklahoma City	17			1	1	
Omaha	51	12.6	13.5	7	9	72
Paterson	38	14.0	9.6	2	2	34
Philadelphia	426	11.2	10.8	57	65	72
Pittsburgh	130	10.7	14.5	23	26	76
Portland, Oreg	65	12.0	10.5	6	3	60
Providence	55	11.7	12.0	6	10	48
Richmond	46	12.9	14.8	13	4	155
Rochester	55	8.7	11.2	8	12	64
St. Louis	176	11.2	12.5	13	18	
St. Paul	53	11.2	10.5	5	4	42
Salt Lake City [5]	32	12.7	9.3	2	4	31
San Antonio	50	13.2	13.6	9	5	
San Diego	34	16.7	17.8	3	3	70
San Francisco	130	12.2	12.6	5	6	29
Schenectady	17	8.7	10.9	3	3	84
Somerville	16	8.2	9.9	6	2	161
Spokane	28	13.4	13.0	3	2	67
Springfield, Mass	31	10.6	8.4	5	6	74
Syracuse	37	10.1	15.0	5	9	63
Tacoma	30	15.0	8.6	6	1	140
Toledo	64	11.6	11.7	17	11	153
Trenton	37	14.6	16.9	5	8	82
Utica	27	13.1		2		43
Washington, D. C	100	10.5	11.9	13	17	73
Waterbury	16			5	3	108
Wilmington, Del	19	8.1	12.2	3	6	68
Worcester	41	10.7	12.5	4	5	46
Yonkers	21	9.8	9.0	3	2	66
Youngstown	28	9.1	11.4	6	7	74

[5] Deaths for week ended Friday, Oct. 9, 1925.

PREVALENCE OF DISEASE

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

UNITED STATES

CURRENT WEEKLY STATE REPORTS

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

Reports for Week Ended October 17, 1925

ALABAMA

	Cases
Cerebrospinal meningitis	2
Dengue	17
Diphtheria	42
Influenza	10
Malaria	114
Measles	1
Mumps	13
Pellagra	16
Pneumonia	9
Poliomyelitis	1
Scarlet fever	29
Smallpox	13
Tetanus	1
Tuberculosis	46
Typhoid fever	38
Whooping cough	6

ARIZONA

Chicken pox	2
Diphtheria	1
Dysentery (amebic)	1
Paratyphoid fever	3
Poliomyelitis	1
Scarlet fever	15
Trachoma	2
Tuberculosis	2
Typhoid fever	4
Whooping cough	2

ARKANSAS

Cerebrospinal meningitis	1
Chicken pox	8
Diphtheria	13
Hookworm disease	1
Influenza	11
Malaria	97
Mumps	4
Paratyphoid fever	4
Pellagra	7
Poliomyelitis	1
Scarlet fever	7
Tuberculosis	8
Typhoid fever	31
Whooping cough	1

CALIFORNIA

	Cases
Cerebrospinal meningitis—Los Angeles County	1
Diphtheria	101
Influenza	9
Leprosy—Los Angeles County	1
Lethargic encephalitis—San Joaquin County	1
Measles	12
Poliomyelitis—	
Berkeley	1
Fresno	1
Madera	1
Los Angeles	1
Los Angeles County	1
San Diego	1
San Francisco	1
San Joaquin County	1
Stockton	2
Scarlet fever	89
Smallpox—	
Los Angeles	8
Scattering	13
Typhoid fever	13

COLORADO

(Exclusive of Denver)

Chicken pox	14
Diphtheria	22
Measles	4
Mumps	4
Poliomyelitis	2
Scarlet fever	3
Tuberculosis	23
Typhoid fever	15
Whooping cough	14

CONNECTICUT

Anthrax	1
Cerebrospinal meningitis	1
Chicken pox	15
Diphtheria	28
German measles	2
Influenza	1
Measles	20
Mumps	1
Pneumonia (broncho)	13

CONNECTICUT—continued

	Cases
Pneumonia (lobar)	33
Scarlet fever	29
Septic sore throat	1
Tuberculosis (all forms)	25
Typhoid fever	9
Whooping cough	32

DELAWARE

Chicken pox	4
Diphtheria	3
Mumps	1
Pneumonia	2
Scarlet fever	1
Typhoid fever	9
Whooping cough	6

FLORIDA

Cerebrospinal meningitis	2
Chicken pox	1
Dengue	2
Diphtheria	26
Influenza	13
Lethargic encephalitis	1
Malaria	42
Mumps	1
Pneumonia	80
Poliomyelitis	4
Scarlet fever	2
Tetanus	5
Tuberculosis	100
Typhoid fever	20
Whooping cough	9

GEORGIA

Chicken pox	4
Conjunctivitis (infectious)	1
Diphtheria	36
Dysentery	16
Hookworm disease	7
Influenza	10
Malaria	35
Measles	2
Mumps	2
Paratyphoid fever	9
Pellagra	8
Pneumonia	4
Poliomyelitis	1
Scarlet fever	4
Septic sore throat	9
Smallpox	1
Tetanus	1
Trachoma	1
Tuberculosis	10
Typhoid fever	27
Whooping cough	2

ILLINOIS

Diphtheria:	
Cook County	65
Christian County	5
Du Page County	7
Madison County	6
Scattering	26
Influenza	10
Lethargic encephalitis:	
Henry County	1
Livingston County	1
Rock Island County	1
Measles	42

ILLINOIS—continued

	Cases
Pneumonia	108
Poliomyelitis:	
Cook County	5
De Kalb County	1
Fulton County	1
Livingston County	2
McLean County	1
Sangamon County	1
Stark County	2
Stephenson County	1
Winnebago County	2
Scarlet fever	162
Smallpox—Cook County	1
Tuberculosis	151
Typhoid fever:	
Cook County	6
Crawford County	7
Franklin County	5
Saline County	5
Scattering	51
Whooping cough	102

INDIANA

Cerebrospinal meningitis	2
Chicken pox	32
Diphtheria	79
Influenza	25
Measles	5
Pneumonia	4
Poliomyelitis	7
Scarlet fever	93
Smallpox	16
Tuberculosis	49
Typhoid fever	40
Whooping cough	35

IOWA

Chicken pox	15
Diphtheria	68
Impetigo contagiosa	1
Measles	1
Mumps	3
Pneumonia	4
Poliomyelitis	13
Scarlet fever	44
Smallpox	3
Tuberculosis	2
Typhoid fever	3
Whooping cough	9

KANSAS

Cerebrospinal meningitis—Stark	1
Chicken pox	17
Diphtheria	27
German measles	1
Measles	3
Mumps	1
Pneumonia	23
Poliomyelitis:	
Coldwater	1
Huron	1
Kansas City	1
Narka	1
Wichita	1
Scarlet fever	39
Trachoma	1
Tuberculosis	45
Typhoid fever	27
Whooping cough	26

LOUISIANA

	Cases
Cerebrospinal meningitis	2
Diphtheria	15
Influenza	8
Malaria	7
Pneumonia	20
Scarlet fever	3
Smallpox	1
Tuberculosis	37
Typhoid fever	33
Whooping cough	13

MAINE

Chicken pox	2
Diphtheria	4
German measles	1
Mumps	3
Pneumonia	7
Scarlet fever	9
Tuberculosis	4
Typhoid fever	5

MARYLAND [1]

Cerebrospinal meningitis	1
Chicken pox	27
Diphtheria	43
Dysentery	11
Impetigo contagiosa	2
Influenza	12
Measles	19
Mumps	13
Pneumonia (broncho)	36
Pneumonia (lobar)	17
Poliomyelitis	2
Scarlet fever	18
Tuberculosis	64
Typhoid fever	79
Vincent's angina	1
Whooping cough	40

MASSACHUSETTS

Cerebrospinal meningitis	1
Chicken pox	52
Conjunctivitis (suppurative)	3
Diphtheria	73
German measles	6
Influenza	4
Lethargic encephalitis	2
Measles	267
Mumps	12
Ophthalmia neonatorum	25
Pneumonia (lobar)	67
Poliomyelitis	5
Scarlet fever	124
Septic sore throat	1
Tetanus	1
Tuberculosis (pulmonary)	93
Tuberculosis (other forms)	17
Typhoid fever	14
Whooping cough	117

MICHIGAN

Diphtheria	105
Measles	31
Pneumonia	68
Scarlet fever	158
Smallpox	1
Tuberculosis	43
Typhoid fever	33
Whooping cough	113

MINNESOTA

	Cases
Chicken pox	41
Diphtheria	86
Lethargic encephalitis	5
Measles	5
Pneumonia	1
Poliomyelitis	23
Scarlet fever	116
Smallpox	2
Trachoma	5
Tuberculosis	46
Typhoid fever	11
Whooping cough	39

MISSISSIPPI

Diphtheria	44
Scarlet fever	6
Smallpox	1
Typhoid fever	28

MISSOURI

Chicken pox	15
Diphtheria	86
Influenza	8
Measles	3
Mumps	10
Pneumonia	10
Poliomyelitis	5
Scarlet fever	90
Septic sore throat	1
Smallpox	1
Tetanus	1
Trachoma	10
Tuberculosis	56
Typhoid fever	39
Whooping cough	50

MONTANA

Chicken pox	25
Mumps	41
Poliomyelitis:	
Eden	1
Westby	1
Scarlet fever	7
Smallpox	2
Trachoma	6
Tuberculosis	5
Typhoid fever	11
Whooping cough	6

NEW JERSEY

Chicken pox	44
Diphtheria	94
Influenza	10
Malaria	1
Measles	31
Pneumonia	47
Poliomyelitis	3
Scarlet fever	74
Typhoid fever	36
Whooping cough	29

NEW MEXICO

Chicken pox	6
Conjunctivitis	4
Diphtheria	6
Mumps	1
Pellagra	2

[1] Week ended Friday.

NEW MEXICO—continued

	Cases
Pneumonia	3
Scarlet fever	15
Tuberculosis	6
Typhoid fever:	
Gallup	3
Las Cruces	4
Scattering	13
Whooping cough	4

NEW YORK
(Exclusive of New York City)

Cerebrospinal meningitis	3
Diphtheria	95
Influenza	9
Measles	149
Pneumonia	120
Poliomyelitis	17
Scarlet fever	111
Typhoid fever	36
Whooping cough	113

NORTH CAROLINA

Cerebrospinal meningitis	1
Chicken pox	6
Diphtheria	217
German measles	1
Measles	7
Poliomyelitis	1
Septic sore throat	8
Smallpox	4
Typhoid fever	20
Whooping cough	37

OKLAHOMA
(Exclusive of Tulsa and Oklahoma City)

Chicken pox	2
Diphtheria	37
Influenza	28
Malaria	33
Measles	1
Mumps	3
Pellagra	2
Pneumonia	10
Poliomyelitis—Sequoyah County	1
Scarlet fever	13
Smallpox	1
Typhoid fever:	
Pawnee	8
Scattering	62
Whooping cough	10

OREGON

Chicken pox	8
Diphtheria	32
Influenza	1
Measles	5
Mumps	27
Pneumonia	2
Scarlet fever	24
Smallpox	14
Tuberculosis	13
Typhoid fever	11
Whooping cough	5

SOUTH DAKOTA

	Cases
Chicken pox	1
Mumps	6
Pneumonia	1
Poliomyelitis	2
Scarlet fever	34
Smallpox	2
Tuberculosis	1
Typhoid fever	4
Whooping cough	2

TEXAS

Cerebrospinal meningitis	2
Chicken pox	4
Diphtheria	19
Influenza	6
Mumps	3
Paratyphoid fever	4
Pellagra	2
Scarlet fever	7
Smallpox	1
Trachoma	1
Tuberculosis	15
Typhoid fever	19
Whooping cough	21

VERMONT

Chicken pox	16
Measles	9
Mumps	18
Poliomyelitis	5
Scarlet fever	3
Whooping cough	5

VIRGINIA

Poliomyelitis—Pulaski County	1
Smallpox	1

WASHINGTON

Chicken pox	15
Diphtheria	20
German measles	4
Measles	1
Mumps	9
Pneumonia	6
Poliomyelitis:	
King County	1
Pierce County	1
Seattle	1
Scarlet fever	43
Smallpox	15
Tuberculosis	7
Typhoid fever	12
Whooping cough	16

WEST VIRGINIA

Diphtheria	12
Scarlet fever	14
Typhoid fever:	
Charleston	2
Elkins	3
Fairmont	4
Hinton	1
Huntington	3

WEST VIRGINIA—continued

Typhoid fever—Continued.	Cases
Keyser	2
Morgantown	2
Sutton	1
Wellsburg	3
Weston	2
Wheeling	3

WISCONSIN

Milwaukee:	
Chicken pox	16
Diphtheria	24
Lethargic encephalitis	1
Measles	1
Mumps	5
Pneumonia	21
Scarlet fever	7
Tuberculosis	16
Whooping cough	40
Scattering:	
Chicken pox	15
Diphtheria	30

WISCONSIN—continued

Scattering—Continued.	Cases
German measles	2
Influenza	17
Measles	43
Mumps	15
Pneumonia	7
Poliomyelitis	14
Scarlet fever	51
Smallpox	8
Tuberculosis	31
Typhoid fever	11
Whooping cough	72

WYOMING

Chicken pox	6
Diphtheria	2
Mumps	2
Poliomyelitis—Campbell	1
Scarlet fever	10
Septic sore throat	4
Typhoid fever	2
Whooping cough	4

Reports for Week Ended October 10, 1925

CONNECTICUT

	Cases
Cerebrospinal meningitis	2
Diphtheria	26
Dysentery (bacillary)	1
Dysentery (undefined)	2
German measles	1
Influenza	5
Lethargic encephalitis	2
Measles	22
Mumps	2
Paratyphoid fever	1
Pneumonia (broncho)	11
Pneumonia (lobar)	9
Poliomyelitis	1
Scarlet fever	23
Septic sore throat	1
Tuberculosis (all forms)	25
Typhoid fever	10
Whooping cough	19

DISTRICT OF COLUMBIA

Chicken pox	3
Diphtheria	15
Lethargic encephalitis	1
Pneumonia	16
Poliomyelitis	3
Scarlet fever	11

DISTRICT OF COLUMBIA—continued

	Cases
Tuberculosis	20
Typhoid fever	2
Whooping cough	15

NEBRASKA

Chicken pox	4
Diphtheria	32
Measles	1
Pneumonia	1
Poliomyelitis	6
Scarlet fever	18
Smallpox	4
Tuberculosis	5
Typhoid fever	2
Whooping cough	6

NORTH DAKOTA

Chicken pox	4
Diphtheria	5
Mumps	5
Paratyphoid fever	1
Pneumonia	5
Poliomyelitis	12
Scarlet fever	20
Tuberculosis	2
Typhoid fever	2
Whooping cough	27

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
September, 1925										
Massachusetts	12	288	8	-------	269	1	44	225	1	80
Missouri	4	135	8	27	8	1	25	165	6	184
New Jersey	5	255	16	5	70	-------	20	153	-------	141
North Carolina	1	564	-------	-------	15	-------	9	190	47	174
North Dakota	4	25	-------	-------	1	-------	49	83	8	29

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

State	Chicken pox	Diphtheria	Measles	Mumps	Scarlet fever	Smallpox	Tuberculosis	Typhoid fever	Whooping cough
Alabama	-------	34	-------	-------	73	80	-------	339	-------
Arizona	4	5	13	-------	2	-------	87	11	26
Arkansas	54	7	20	49	8	1	[1] 51	230	69
California	273	333	151	382	254	294	835	130	964
Colorado	45	82	35	40	84	1	218	49	145
Connecticut	60	80	358	30	75	-------	132	17	410
Delaware	-------	1	28	8	1	2	22	11	9
District of Columbia [2]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Florida	3	51	2	27	4	9	134	81	35
Georgia	17	30	7	65	10	6	85	363	111
Idaho	-------	8	-------	-------	10	-------	-------	-------	-------
Illinois	250	287	982	185	351	46	1,051	217	1,149
Indiana	-------	54	-------	-------	129	-------	-------	147	-------
Iowa [2]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Kansas	16	27	18	104	81	18	213	136	331
Kentucky [3]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Louisiana	3	30	3	2	23	21	[1] 169	357	82
Maine	26	12	33	83	35	-------	32	15	27
Maryland	58	67	158	99	54	1	355	101	545
Massachusetts	197	259	1,037	65	269	-------	652	82	619
Michigan	209	203	456	63	434	43	549	69	732
Minnesota	233	396	22	-------	335	23	270	33	194
Mississippi	259	48	168	741	19	63	411	851	712
Missouri	25	114	39	62	155	34	231	168	219
Montana	19	19	1	39	53	19	49	19	62
Nebraska [2]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Nevada [4]	-------	-------	-------	-------	-------	-------	-------	-------	-------
New Hampshire [4]	-------	-------	-------	-------	-------	-------	-------	-------	-------
New Jersey	174	268	533	-------	185	11	414	104	683
New Mexico [2]	-------	-------	-------	-------	-------	-------	-------	-------	-------
New York	701	868	1,400	329	496	5	1,872	284	1,382
North Carolina	47	112	15	-------	42	56	-------	303	528
North Dakota	15	5	1	15	49	1	12	1	70
Ohio	300	211	507	80	303	180	585	125	1,036
Oklahoma	19	12	5	8	36	34	80	514	101
Oregon	40	58	10	30	41	24	63	22	41
Pennsylvania	255	537	1,630	232	517	1	533	198	1,239
Rhode Island	-------	15	-------	-------	18	16	-------	8	-------
South Carolina	3	120	40	9	21	54	207	439	427
South Dakota	12	14	8	1	93	7	10	21	16
Tennessee [3]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Texas [4]	-------	-------	-------	-------	-------	-------	-------	-------	-------
Utah	166	35	28	47	22	1	[1] 13	13	389
Vermont	45	10	112	123	18	-------	17	1	39
Virginia	83	82	283	-------	67	30	[1] 173	340	510
Washington	118	63	11	106	61	114	116	32	350
West Virginia	22	33	65	-------	44	30	42	111	108
Wisconsin	277	167	568	204	266	79	228	14	662
Wyoming	10	4	1	8	18	2	4	4	12

[1] Pulmonary tuberculosis only.
[2] Report not received at time of going to press.
[3] Reports received weekly.
[4] Reports received annually.

Case Rates per 1,000 Population (Annual Basis) for the Month of July, 1925

State	Chicken pox	Diphtheria	Measles	Mumps	Scarlet fever	Smallpox	Tuberculosis	Typhoid fever	Whooping cough
Alabama		0.16			0.35	0.38		1.62	
Arizona	0.12	.14	0.38		.06		2.51	.32	0.75
Arkansas	.34	.04	.13	0.31	.05	.01	[1].32	1.46	.44
California	.80	.98	.44	1.12	.74	.86	2.44	.38	2.82
Colorado	.52	.95	.40	.46	.97	.01	2.52	.57	1.67
Connecticut	.46	.62	2.75	.23	.58		1.01	.13	3.15
Delaware		.05	1.40	.40	.05	.10	1.10	.55	.45
District of Columbia [2]									
Florida	.03	.55	.02	.29	.04	.10	1.45	.87	.38
Georgia	.07	.12	.03	.25	.04	.02	.33	1.40	.43
Idaho		.19			.24				
Illinois	.42	.49	1.66	.31	.59	.08	1.78	.37	1.94
Indiana		.21			.50			.57	
Iowa [2]								(2)	
Kansas	.10	.18	.12	.68	.53	.12	1.38	.88	2.15
Kentucky [3]									
Louisiana	.02	.19	.02	.01	.14	.13	[1]1.06	2.24	.51
Maine	.39	.18	.50	1.25	.53		.48	.23	.41
Maryland	.44	.51	1.21	.76	.41	.01	2.72	.77	4.17
Massachusetts	.56	.74	2.96	.19	.77		1.86	.23	1.77
Michigan	.59	.58	1.29	.18	1.23	.12	1.56	.20	2.07
Minnesota	1.07	1.82	.10		1.54	.11	1.24	.15	.89
Mississippi	1.70	.32	1.10	4.87	.12	.41	2.70	5.60	4.68
Missouri	.08	.39	.13	.21	.53	.12	.78	.57	.74
Montana	.35	.35	.02	.71	.96	.35	.89	.35	1.13
Nebraska [2]									
Nevada [4]									
New Hampshire [4]									
New Jersey	.58	.90	1.79		.62	.04	1.39	.35	2.29
New Mexico [2]									
New York	.74	.92	1.48	.35	.53	.01	1.98	.30	1.46
North Carolina	.20	.48	.06		.18	.24		1.29	2.25
North Dakota	.26	.09	.02	.26	.84	.02	.21	.02	1.20
Ohio	.56	.39	.94	.15	.56	.34	1.09	.23	1.93
Oklahoma	.10	.06	.03	.04	.19	.18	.42	2.70	.53
Oregon	.56	.81	.14	.42	.57	.33	.88	.31	.57
Pennsylvania	.32	.68	2.06	.29	.65	.00	.67	.25	1.57
Rhode Island		.28			.33	.29		.15	
South Carolina	.02	.79	.26	.06	.14	.36	1.37	2.91	2.83
South Dakota	.21	.25	.14	.02	1.64	.12	.18	.37	.28
Tennessee [2]									
Texas [4]									
Utah	3.97	.84	.67	1.12	.53	.02	[1].31	.31	9.30
Vermont	1.50	.33	3.74	4.11	.60		.57	.03	1.30
Virginia	.40	.39	1.36		.32	.14	[1].83	1.63	2.45
Washington	.94	.50	.09	.84	.49	.91	.92	.25	2.79
West Virginia	.16	.24	.48		.32	.22	.31	.82	.79
Wisconsin	1.16	.70	2.39	.86	1.12	.33	.96	.06	2.78
Wyoming	.53	.21	.05	.42	.96	.11	.21	.21	.64

[1] Pulmonary tuberculosis only.
[2] Report not received at time of going to press.
[3] Reports received weekly.
[4] Reports received annually.

PLAGUE-ERADICATIVE MEASURES IN THE UNITED STATES

The following items were taken from the report of plague-eradicative measures from Los Angeles, Calif.:

Week ended October 3, 1925:

Number of rats trapped	2,375
Number of rats found plague infected	3
Number of squirrels examined	720
Number of squirrels found plague infected	0
Number of mice trapped	4,548
Number of mice found plague infected	0

Date of discovery of last plague-infected rodent, October 2, 1925.
Date of last human case, January 15, 1925.

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

Diphtheria.—For the week ended October 3, 1925, 36 States reported 1,360 cases of diphtheria. For the week ended October 4, 1924, the same States reported 1,891 cases of this disease. Ninety-nine cities situated in all parts of the country and having an aggregate population of over 28,000,000, reported 651 cases of diphtheria for the week ended October 3, 1925. Last year for the corresponding week they reported 735 cases. The estimated expectancy for these cities was 921 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Measles.—Thirty-four States reported 428 cases of measles for the week ended October 3, 1925, and 411 cases of this disease for the week ended October 4, 1924. Ninety-nine cities reported 215 cases of measles for the week this year, and 113 cases last year.

Poliomyelitis.—The health officers of 37 States reported 259 cases of poliomyelitis for the week ended October 3, 1925. The same States reported 247 cases for the week ended October 4, 1924.

Scarlet fever.—Scarlet fever was reported for the week as follows: Thirty-six States—this year, 1,144 cases; last year, 1,657 cases. Ninety-nine cities—this year, 466 cases; last year, 549 cases; estimated expectancy, 457 cases.

Smallpox.—For the week ended October 3, 1925, 36 States reported 67 cases of smallpox. Last year for the corresponding week they reported 363 cases. Ninety-nine cities reported smallpox for the week as follows: 1925, 11 cases; 1924, 83 cases; estimated expectancy, 20 cases.

Typhoid fever.—Ten hundred and fifty-five cases of typhoid fever were reported for the week ended October 3, 1925, by 35 States. For the corresponding week of 1924 the same States reported 924 cases of this disease. Ninety-nine cities reported 216 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 221 cases.

Influenza and pneumonia.—Deaths from influenza and pneumonia were reported for the week as follows: 1925, 348; 1924, 430.

City reports for week ended October 3, 1925

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimated expectancy is the mean number of cases reported for the week during nonepidemic years.

If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1915 is included. In obtaining the estimated expectancy the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

Division, State, and city	Population July 1, 1923, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
NEW ENGLAND									
Maine:									
Portland	73,129	0	1	0	0	0	1	1	1
New Hampshire:									
Concord	22,408	0	1	0	0	0	0	0	0
Manchester	81,383	0	4	0	0	0	0	0	0
Vermont:									
Barre	[1] 10,008	0	0	0	0	0	0	0	0
Burlington	23,613	2	0	0	0	0	0	0	0
Massachusetts:									
Boston	770,400	7	39	17	0	0	12	0	7
Fall River	120,912	0	4	3	0	0	6	0	1
Springfield	144,227	1	3	0	0	0	1	0	0
Worcester	191,927	6	5	6	0	0	77	0	3
Rhode Island:									
Pawtucket	68,799	0	1	1	0	0	0	0	1
Providence	242,378	0	8	1	0	0	2	0	0
Connecticut:									
Bridgeport	[1] 143,555	0	8	2	0	0	1	0	0
Hartford	[1] 138,036	0	6	1	0	0	0	0	0
New Haven	172,967	1	3	0	0	0	1	0	0
MIDDLE ATLANTIC									
New York:									
Buffalo	536,718	6	20	7	0	0	0	1	2
New York	5,927,625	10	111	83	5	2	38	10	73
Rochester	317,867	2	4	1	0	0	4	1	4
Syracuse	184,511	0	7	1	0	0	1	0	3
New Jersey:									
Camden	124,157	1	5	1	0	0	0	0	2
Newark	438,699	3	10	11	0	0	7	3	7
Trenton	127,390	0	4	0	6	0	0	0	1
Pennsylvania:									
Philadelphia	1,922,788	14	39	53	0	3	6	2	24
Pittsburgh	613,442		23						
Reading	110,917	0	3	0	0	0	4	0	1
EAST NORTH CENTRAL									
Ohio:									
Cincinnati	406,312	0	12	6	0	2	0	0	3
Cleveland	888,519	2	35	53	2	1	14	0	12
Columbus	261,082	3	6	1	0	0	1	0	2
Toledo	268,338	2	12	5	0	2	1	0	3
Indiana:									
Fort Wayne	93,573		3						
Indianapolis	342,718	0	20	3	0	0	2	0	2
South Bend	76,709	0	1	3	0	0	0	0	0
Terre Haute	68,939	0	2	0	0	0	0	0	0
Illinois:									
Chicago	2,886,121	11	119	50	8	2	10	3	18
Springfield	61,833	1	2	1	0	0	0	0	1
Michigan:									
Detroit	995,668	9	55	43	7	3	1	1	17
Flint	117,968	2	10	1	0	0	0	0	1
Grand Rapids	145,947	2	5	3	0	0	0	1	2
Wisconsin:									
Madison	42,519	1	1	2	0		3	0	
Milwaukee	484,595	20	16	15	1	1	3	3	4
Racine	64,393	0	1	3	0	0	0	3	0
Superior	[1] 39,671		1						

[1] Population Jan. 1, 1920

City reports for week ended October 3, 1925—Continued

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			
WEST NORTH CENTRAL									
Minnesota:									
Duluth	106,289	4	4	0	0	0	0	0	1
Minneapolis	409,125	5	25	29	0	0	0	1	0
St. Paul	241,891	2	18	16	0	0	0	0	2
Iowa:									
Davenport	61,262	0	2	1	0	0	1	0	0
Sioux City	79,662	0	2	2	0	---	0	0	---
Waterloo	39,667	0	1	0	0	---	1	0	---
Missouri:									
Kansas City	351,819	1	10	3	1	1	1	3	5
St. Joseph	78,232	0	2	2	0	0	0	0	4
St. Louis	803,853	3	42	33	2	2	1	0	0
North Dakota:									
Fargo	24,841	0	1	1	0	0	0	3	0
Grand Forks	14,547	0	1	0	0	---	1	0	---
South Dakota:									
Aberdeen	15,829	0	0	0	0	---	0	5	---
Sioux Falls	29,206	3	1	0	0	0	0	0	0
Nebraska:									
Lincoln	58,761	0	1	1	0	0	0	1	1
Omaha	204,382	1	14	7	0	0	0	0	4
Kansas:									
Topeka	52,555	2	2	0	0	0	0	1	1
Wichita	79,261	0	2	1	0	0	0	1	0
SOUTH ATLANTIC									
Delaware:									
Wilmington	117,728	0	1	4	0	0	0	0	1
Maryland:									
Baltimore	773,580	4	22	24	3	2	7	17	17
Cumberland	32,361	0	1	12	0	0	0	0	0
Frederick	11,301	1	1	0	0	0	0	0	0
District of Columbia:									
Washington	[1] 437,571	2	10	11	1	0	1	0	4
Virginia:									
Lynchburg	30,277	0	1	5	0	0	1	0	0
Norfolk	159,089	1	3	3	0	0	0	1	3
Richmond	181,044	0	16	27	0	0	1	0	1
Roanoke	55,502	0	4	8	0	0	1	0	0
West Virginia:									
Charleston	45,597	0	2	6	0	0	0	0	0
Huntington	57,918	0	4	2	0	0	2	0	1
Wheeling	[1] 56,208	1	2	0	0	0	0	0	3
North Carolina:									
Raleigh	29,171	0	4	4	0	0	0	0	1
Wilmington	35,719	---	1	---	---	---	---	---	---
Winston-Salem	56,230	1	4	0	0	0	0	0	1
South Carolina:									
Charleston	71,245	0	1	0	0	0	1	0	1
Columbia	39,688	0	2	1	0	---	0	1	---
Greenville	25,789	0	2	2	0	0	0	0	1
Georgia:									
Atlanta	222,963	0	8	1	0	0	0	0	4
Brunswick	15,937	0	0	0	0	0	0	0	1
Savannah	89,448	0	2	0	0	0	0	0	3
Florida:									
St. Petersburg	24,403	---	0	---	---	---	---	---	---
Tampa	56,050	0	1	0	0	0	0	0	1
EAST SOUTH CENTRAL									
Kentucky:									
Covington	57,877	0	3	5	0	0	0	0	1
Louisville	257,671	0	9	0	1	0	0	0	5
Tennessee:									
Memphis	170,067	0	10	1	0	2	0	0	7
Nashville	121,128	0	4	2	0	0	1	0	2
Alabama:									
Birmingham	195,901	1	8	2	0	1	1	1	4
Mobile	63,858	0	2	1	0	0	0	0	0
Montgomery	45,383	0	2	1	0	0	0	3	0

City reports for week ended October 3, 1925—Continued

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			
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith	30,635	0	2	0	0	----	0	0	----
Little Rock	70,916	1	1	0	0	0	0	0	1
Louisiana:									
New Orleans	404,575	0	9	9	5	4	0	0	5
Shreveport	54,590	0	0	1	0	0	0	0	1
Oklahoma:									
Oklahoma	101,150	0	2	1	0	0	1	0	1
Texas:									
Dallas	177,274	0	7	1	0	0	0	0	1
Galveston	46,877	0	1	0	0	0	0	0	2
Houston	154,970	----	2	3	0	0	0	----	2
San Antonio	184,727	0	1	0	0	0	0	0	1
MOUNTAIN									
Montana:									
Billings	16,927	1	1	0	0	0	0	0	1
Great Falls	27,787	5	1	0	0	0	1	0	2
Helena	[1] 12,037	0	1	0	0	0	0	0	0
Missoula	[1] 12,668	0	0	1	0	0	0	0	1
Idaho:									
Boise	22,806	0	1	0	0	0	0	0	0
Colorado:									
Denver	272,031	8	12	2	0	0	0	1	8
Pueblo	43,519	1	3	7	0	0	0	----	0
New Mexico:									
Albuquerque	16,648	0	1	0	0	0	0	0	0
Arizona:									
Phoenix	33,899	----	----	0	0	0	0	----	1
Utah:									
Salt Lake City	126,241	7	3	4	0	0	0	2	3
Nevada:									
Reno	12,429	0	0	0	0	0	0	0	0
PACIFIC									
Washington:									
Seattle	[1] 315,685	13	5	6	0	----	0	4	----
Spokane	104,573	2	4	5	0	----	0	0	----
Tacoma	101,731	3	2	6	0	0	0	1	2
Oregon:									
Portland	273,621	2	5	7	0	0	0	2	4
California:									
Los Angeles	666,853	2	30	14	2	0	1	10	13
Sacramento	69,950	0	2	3	0	0	0	0	1
San Francisco	539,038	13	16	3	0	0	0	2	8

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		
NEW ENGLAND											
Maine:											
Portland	1	1	0	0	0	0	1	6	0	1	17
New Hampshire:											
Concord	0	0	0	0	0	0	0	0	0	0	10
Manchester	1	0	0	0	0	0	1	0	0	0	17
Vermont:											
Barre	0	0	0	0	0	0	0	0	0	0	3
Burlington	1	0	0	0	0	1	0	0	0	0	6

[1] Population Jan. 1, 1920.

City reports for week ended October 3, 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		
NEW ENGLAND—continued											
Massachusetts:											
Boston	16	19	0	0	0	15	4	0	0	46	198
Fall River	1	1	0	0	0	0	3	4	0	2	23
Springfield	4	0	0	0	0	0	0	1	0	0	27
Worcester	4	7	0	0	0	2	1	0	0	14	44
Rhode Island:											
Pawtucket	1	1	0	0	0	0	0	0	0	0	27
Providence	3	2	0	0	0	0	2	3	0	1	39
Connecticut:											
Bridgeport	2	4	0	0	0	2	1	0	0	2	28
Hartford	2	1	0	0	0	0	2	0	0	2	36
New Haven	2	0	0	0	0	0	4	5	0	19	38
MIDDLE ATLANTIC											
New York:											
Buffalo	10	5	0	0	0	13	2	1	0	10	133
New York	45	38	0	0	0	[1] 67	39	40	6	53	1,109
Rochester	4	3	0	0	0	3	2	2	1	11	64
Syracuse	5	0	0	0	0	1	2	1	0	13	39
New Jersey:											
Camden	2	13	1	0	0	2	1	3	1	0	40
Newark	6	9	0	0	0	5	3	3	0	15	102
Trenton	1	1	0	0	0	3	1	0	0	0	28
Pennsylvania:											
Philadelphia	24	22	0	0	0	33	15	10	0	47	426
Pittsburgh	16	----	0	----	----	----	4	----	----	----	----
Reading	1	0	0	0	0	1	3	2	0	8	20
EAST NORTH CENTRAL											
Ohio:											
Cincinnati	8	6	0	0	0	7	2	0	0	7	102
Cleveland	14	11	0	0	0	16	4	3	0	46	195
Columbus	5	7	1	0	0	2	2	0	1	5	64
Toledo	6	8	0	0	0	3	4	2	1	3	70
Indiana:											
Fort Wayne	1	----	1	----	----	----	1	----	----	----	----
Indianapolis	5	5	1	0	0	5	2	2	1	16	71
South Bend	2	0	0	0	0	0	0	1	0	3	8
Terre Haute	1	7	0	0	0	0	0	0	0	0	17
Illinois:											
Chicago	60	32	1	0	0	40	7	8	1	39	532
Springfield	1	3	0	0	0	1	2	1	0	2	17
Michigan:											
Detroit	37	42	3	0	0	18	7	6	1	71	256
Flint	5	1	0	0	0	3	1	1	0	13	25
Grand Rapids	4	8	0	0	0	1	1	2	0	10	32
Wisconsin:											
Madison	0	0	1	0	----	----	1	0	----	1	----
Milwaukee	16	11	0	0	0	6	1	0	0	40	101
Racine	3	3	0	0	0	0	0	0	0	4	8
Superior	1	----	1	----	----	----	0	----	----	----	----
WEST NORTH CENTRAL											
Minnesota:											
Duluth	3	15	0	0	0	0	0	0	0	4	19
Minneapolis	16	26	1	0	0	3	1	4	0	0	67
St. Paul	8	12	3	0	0	3	2	2	0	5	59
Iowa:											
Davenport	1	0	0	0	----	----	0	0	----	0	----
Sioux City	1	0	0	0	----	----	1	0	----	0	----
Waterloo	1	2	0	0	----	----	0	0	----	0	----
Missouri:											
Kansas City	5	9	0	0	0	4	3	0	0	16	91
St. Joseph	2	3	0	0	0	0	0	0	0	0	27
St. Louis	20	15	0	0	0	6	5	11	0	3	167
North Dakota:											
Fargo	1	0	0	0	0	2	0	0	0	10	7
Grand Forks	1	0	0	10	----	----	0	0	----	1	----

[1] Pulmonary tuberculosis only.

City reports for week ended October 3, 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		
WEST NORTH CENTRAL—contd.											
South Dakota:											
Aberdeen	1	1	0	0	----	----	0	0	----	1	----
Sioux Falls	1	8	0	0	----	----	0	0	0	0	5
Nebraska:											
Lincoln	1	1	0	0	0	0	0	1	0	0	13
Omaha	2	2	1	1	0	2	2	0	0	5	47
Kansas:											
Topeka	1	0	0	0	0	1	1	0	0	3	17
Wichita	1	2	0	0	0	1	2	0	0	0	28
SOUTH ATLANTIC											
Delaware:											
Wilmington	1	0	0	0	0	2	2	0	0	0	25
Maryland:											
Baltimore	8	7	0	0	0	17	11	6	1	18	187
Cumberland	1	0	0	0	0	0	1	1	0	0	12
Frederick	0	0	0	0	0	0	0	0	0	0	2
District of Columbia:											
Washington	7	6	0	0	0	6	5	1	0	19	117
Virginia:											
Lynchburg	1	2	0	0	0	1	1	0	0	0	16
Norfolk	1	0	0	0	0	3	1	0	0	1	----
Richmond	5	9	0	0	0	0	2	0	1	0	47
Roanoke	1	3	0	0	0	0	2	0	0	0	12
West Virginia:											
Charleston	1	0	0	0	0	1	2	7	0	1	18
Huntington	2	2	0	0	0	4	0	1	0	0	14
Wheeling	2	4	0	0	0	1	2	2	0	0	16
North Carolina:											
Raleigh	2	0	0	0	0	1	1	0	1	0	17
Wilmington	0	----	0	----	----	----	0	----	----	----	----
Winston-Salem	1	1	0	0	0	2	2	0	1	0	21
South Carolina:											
Charleston	0	1	0	0	0	3	3	4	1	0	24
Columbia	1	0	0	0	----	0	0	0	----	1	----
Greenville	1	0	0	0	0	0	0	0	0	0	15
Georgia:											
Atlanta	6	0	1	0	0	4	3	5	1	1	52
Brunswick	0	0	0	0	0	1	0	0	0	0	4
Savannah	1	0	0	0	0	4	1	0	0	0	21
Florida:											
St. Petersburg	0	----	0	----	----	----	0	----	----	----	----
Tampa	0	0	0	0	0	2	1	0	0	0	20
EAST SOUTH CENTRAL											
Kentucky:											
Covington	1	0	0	0	0	1	0	0	0	0	18
Louisville	2	2	0	0	0	5	4	5	0	2	79
Tennessee:											
Memphis	2	0	0	0	0	4	4	0	1	6	46
Nashville	3	5	0	0	0	0	4	8	0	0	41
Alabama:											
Birmingham	5	6	0	0	0	2	5	10	1	2	65
Mobile	1	0	0	0	0	0	1	0	0	0	13
Montgomery	1	1	0	0	0	0	1	2	0	1	10
WEST SOUTH CENTRAL											
Arkansas:											
Fort Smith	0	1	0	0	----	----	1	0	----	3	----
Little Rock	1	2	0	0	0	2	1	6	0	0	----
Louisiana:											
New Orleans	2	2	0	0	0	12	5	7	3	12	124
Shreveport	0	1	0	0	0	0	0	4	2	0	26
Oklahoma:											
Oklahoma	2	0	0	0	0	2	2	5	0	0	23
Texas:											
Dallas	2	4	0	0	0	0	2	1	0	6	41
Galveston	0	0	0	0	0	1	0	1	0	0	10
Houston	1	1	0	0	0	5	0	1	0	----	45
San Antonio	0	0	0	0	0	7	0	1	0	0	45

City reports for week ended October 3, 1925—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever		Deaths reported	Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported			
MOUNTAIN											
Montana:											
Billings	0	0	0	0	0	0	0	0	0	0	6
Great Falls	1	3	0	1	0	0	0	0	0	0	10
Helena	0	3	0	0	0	0	0	0	0	0	2
Missoula	0	1	0	0	0	0	1	0	0	1	8
Idaho:											
Boise	1	0	0	0	0	0	0	1	0	0	4
Colorado:											
Denver	4	8	1	0	0	8	5	4	0	22	60
Pueblo	1	1	1	0	0	0	0	4	0	1	8
New Mexico:											
Albuquerque	0	1	0	0	0	5	2	4	0	0	12
Arizona:											
Phoenix	-------	1	-------	0	0	5	-------	1	0	--------	6
Utah:											
Salt Lake City	2	3	0	0	0	4	2	3	1	7	28
Nevada:											
Reno	1	0	0	0	0	0	0	0	0	0	3
PACIFIC											
Washington:											
Seattle	6	7	1	0	--------	-------	2	2	--------	5	--------
Spokane	5	1	2	2	--------	-------	1	1	--------	1	--------
Tacoma	2	2	0	0	0	1	1	2	0	0	24
Oregon:											
Portland	4	15	3	0	0	1	2	5	0	0	--------
California:											
Los Angeles	8	14	1	6	0	23	5	1	1	8	206
Sacramento	1	1	0	0	0	0	1	1	1	0	23
San Francisco	6	7	0	1	0	11	2	3	0	7	134

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
NEW ENGLAND											
Massachusetts:											
Boston	1	1	0	0	0	0	2	3	2	0	0
Worcester	0	0	0	1	0	0	0	0	0	0	0
Rhode Island:											
Providence	0	0	0	0	0	0	0	2	1	0	0
Connecticut:											
Hartford	0	0	0	0	0	0	0	2	0	0	0
MIDDLE ATLANTIC											
New York:											
Buffalo	0	0	0	0	0	0	1	4	0	0	0
New York City	3	5	5	1	0	0	16	15	3	1	0
Rochester	0	0	0	0	0	0	1	9	1	0	0
New Jersey:											
Newark	0	0	0	0	0	0	1	2	0	0	0
Pennsylvania:											
Philadelphia	0	0	0	0	0	0	1	1	0	0	0
EAST NORTH CENTRAL											
Ohio:											
Cincinnati	0	0	0	0	0	0	1	0	1	0	0
Cleveland	0	0	0	0	0	0	1	11	3	0	0
Columbus	0	0	0	1	0	0	0	0	0	0	1

City reports for week ended October 3, 1925—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)			Typhoid fever	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths	Cases	Deaths
EAST NORTH CENTRAL—continued											
Illinois:											
Chicago	0	0	0	0	0	0	5	2	0	0	0
Michigan:											
Detroit	0	0	1	1	0	0	1	4	1	0	0
Wisconsin:											
Madison	0	0	0	0	0	0	0	1	0	0	0
Milwaukee	1	1	0	0	0	0	0	2	0	0	0
WEST NORTH CENTRAL											
Minnesota:											
Duluth	0	0	0	0	0	0	0	0	1	0	0
Minneapolis	0	0	0	0	0	0	0	5	0	0	0
St. Paul	0	0	0	0	0	0	1	1	0	0	0
Missouri:											
Kansas City	0	0	0	1	0	0	1	1	0	0	0
St. Joseph	0	0	0	1	0	0	0	0	0	0	0
North Dakota:											
Fargo	0	0	0	0	0	0	0	1	0	0	0
Nebraska:											
Lincoln	0	0	0	0	0	0	0	2	0	0	0
Omaha	0	0	0	0	0	0	0	5	3	0	0
Kansas:											
Wichita	0	0	0	0	0	0	0	3	0	0	0
SOUTH ATLANTIC											
Maryland:											
Baltimore	0	0	3	1	0	0	2	1	0	0	0
District of Columbia:											
Washington	0	0	0	0	0	0	0	3	1	0	0
North Carolina:											
Winston-Salem	0	0	1	1	0	0	0	0	0	0	0
EAST SOUTH CENTRAL											
Kentucky:											
Louisville	0	0	0	0	0	0	0	7	0	0	0
Alabama:											
Birmingham	0	0	0	0	2	1	0	0	0	0	0
WEST SOUTH CENTRAL											
Arkansas:											
Little Rock	0	0	0	0	0	1	0	0	0	0	0
Louisiana:											
New Orleans	0	0	0	0	0	1	0	0	0	0	0
Texas:											
Dallas	0	0	0	0	0	1	0	0	0	0	0
Galveston	0	0	0	1	0	0	0	0	0	0	0
Houston	0	0	0	0	0	2	0	0	0	0	0
San Antonio	0	0	0	0	0	0	0	1	0	0	0
MOUNTAIN											
Colorado:											
Denver	0	0	0	0	0	0	0	1	0	0	0
PACIFIC											
Washington:											
Seattle	0	0	0	0	0	0	0	1	0	0	0
Spokane	0	0	0	0	0	0	0	1	0	0	0
Tacoma	0	0	0	0	0	0	0	2	0	0	0
Oregon:											
Portland	0	0	0	0	0	0	0	1	0	0	0
California:											
Los Angeles	0	0	0	0	0	0	1	1	0	0	0
Sacramento	1	1	0	0	0	1	0	0	0	0	0
San Francisco	0	0	0	0	0	0	0	2	0	0	0

The following table gives the rates per hundred thousand population for 104 cities for the 10-week period ended October 3, 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 104 cities reporting cases had an estimated aggregate population of nearly 29,000,000, and the 96 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, July 26 to October 3, 1925—Annual rates per 100,000 population [1]

DIPHTHERIA CASE RATES

	Week ended—									
	Aug. 1	Aug. 8	Aug. 15	Aug. 22	Aug. 29	Sept. 5	Sept. 12	Sept. 19	Sept. 26	Oct. 3
104 cities	[2] 78	[3] 87	80	70	[4] 75	[5] 72	96	99	[3] 102	[6] 121
New England	62	82	92	52	42	45	77	144	84	77
Middle Atlantic	92	83	78	73	63	62	89	83	81	[7] 84
East North Central	74	101	72	55	72	61	75	81	113	[8] 140
West North Central	100	107	113	102	118	102	145	149	155	195
South Atlantic	[2] 50	55	73	63	[4] 72	112	127	94	116	[9] 225
East South Central	11	29	34	63	40	34	80	80	63	69
West South Central	46	23	51	60	97	32	125	60	79	65
Mountain	153	[3] 68	162	76	172	315	200	224	[3] 195	134
Pacific	67	148	84	104	110	[5] 80	78	136	107	107

MEASLES CASE RATES

104 cities	[2] 73	[3] 53	48	31	[4] 28	[5] 22	23	30	[3] 36	[6] 40
New England	186	132	129	97	89	52	94	112	184	250
Middle Atlantic	77	69	57	38	34	25	25	34	32	[7] 32
East North Central	72	47	37	19	22	21	17	24	24	[8] 26
West North Central	29	11	30	6	4	6	4	10	6	8
South Atlantic	[2] 71	45	43	35	[4] 25	24	23	16	30	[9] 25
East South Central	29	11	17	6	11	0	0	6	11	11
West South Central	0	0	9	9	0	0	5	5	0	0
Mountain	105	[3] 20	19	29	29	0	10	10	[3] 29	10
Pacific	35	29	20	12	6	[5] 28	9	15	20	3

SCARLET FEVER CASE RATES

104 cities	[2] 56	[3] 53	59	53	[4] 40	[5] 56	54	63	[3] 66	[6] 87
New England	75	102	84	92	70	47	65	62	47	89
Middle Atlantic	37	33	36	23	27	30	31	47	49	[7] 49
East North Central	64	52	58	58	48	62	61	62	70	[8] 104
West North Central	124	120	137	147	112	125	114	151	147	195
South Atlantic	[2] 35	22	41	43	[4] 41	59	57	39	65	[9] 69
East South Central	63	63	40	34	29	143	120	57	80	80
West South Central	31	56	70	51	19	37	32	42	14	51
Mountain	86	[3] 39	95	67	29	76	38	166	[3] 88	181
Pacific	49	64	87	44	70	[5] 52	38	67	81	93

[1] 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.
[2] Tampa, Fla., not included. Report not received at time of going to press.
[3] Helena, Mont., not included.
[4] Greenville, S. C., not included.
[5] Spokane, Wash., not included.
[6] Pittsburgh, Pa., Fort Wayne, Ind., Superior, Wis., Wilmington, N. C., and St. Petersburg, Fla., not included.
[7] Pittsburgh, Pa., not included.
[8] Fort Wayne, Ind., and Superior, Wis., not included.
[9] Wilmington, N. C., and St. Petersburg, Fla., not included.

Summary of weekly reports from cities, July 26 to October 3, 1925—Annual rates per 100,000 population—Continued

SMALLPOX CASE RATES

	Week ended—									
	Aug. 1	Aug. 8	Aug. 15	Aug. 22	Aug. 29	Sept. 5	Sept. 12	Sept. 19	Sept. 26	Oct. 3
104 cities	[2] 10	[3] 9	7	6	[4] 8	[5] 5	6	7	[3] 6	[6] 2
New England	0	0	0	0	0	0	0	0	0	0
Middle Atlantic	0	0	0	0	1	0	0	0	0	[7] 0
East North Central	4	6	3	2	8	5	2	2	2	[8] 0
West North Central	15	9	11	6	4	4	4	4	2	2
South Atlantic	[2] 2	2	2	4	[4] 12	2	12	12	6	[9] 0
East South Central	23	51	23	40	57	11	23	40	34	0
West South Central	5	14	9	5	14	5	5	5	0	0
Mountain	57	[3] 20	10	10	10	10	19	0	[3] 39	10
Pacific	84	67	67	44	29	[5] 40	44	49	41	26

TYPHOID FEVER CASE RATES

104 cities	[2] 41	[3] 41	48	57	[4] 47	[5] 40	42	51	[3] 45	[6] 40
New England	22	27	40	32	27	30	35	30	22	47
Middle Atlantic	30	23	33	45	30	29	27	35	34	[7] 33
East North Central	10	21	19	31	28	19	22	19	31	[8] 18
West North Central	48	43	58	48	35	21	62	58	17	35
South Atlantic	[2] 66	99	91	110	[4] 94	61	51	110	93	[9] 54
East South Central	183	274	217	183	177	183	246	212	217	143
West South Central	178	130	102	134	111	176	74	167	102	97
Mountain	57	[3] 107	105	105	115	29	133	88	[3] 98	115
Pacific	46	17	44	64	55	[5] 31	29	29	23	29

INFLUENZA DEATH RATES

96 cities	[2] 1	[3] 3	2	2	[4] 4	3	5	5	[3] 3	[6] 5
New England	0	5	0	0	0	0	2	0	0	0
Middle Atlantic	1	2	2	2	3	3	3	6	3	[7] 3
East North Central	0	3	3	1	4	3	7	4	5	[8] 7
West North Central	0	0	0	0	2	2	0	7	4	7
South Atlantic	[2] 2	6	0	0	[4] 2	2	0	2	2	[9] 4
East South Central	0	6	6	11	6	0	6	6	0	17
West South Central	0	5	0	10	15	5	5	10	0	20
Mountain	0	[3] 0	10	10	10	19	29	20	[3] 10	0
Pacific	0	0	0	8	0	0	4	0	4	0

PNEUMONIA DEATH RATES

96 cities	[2] 61	[3] 56	63	55	[4] 64	73	64	62	[3] 57	[6] 62
New England	55	37	30	40	42	55	52	70	55	32
Middle Atlantic	65	65	73	65	65	84	68	62	66	[7] 63
East North Central	52	38	51	43	54	64	49	47	42	[8] 47
West North Central	42	53	44	31	53	33	37	46	28	37
South Atlantic	[2] 63	73	81	63	[4] 84	57	64	86	91	[9] 87
East South Central	74	69	63	80	69	143	154	86	46	109
West South Central	111	71	87	82	112	76	87	82	51	66
Mountain	76	[3] 29	57	67	76	86	38	117	[3] 78	143
Pacific	69	78	90	53	69	106	102	69	57	98

[2] Tampa, Fla., not included. Report not received at time of going to press.
[3] Helena, Mont., not included.
[4] Greenville, S. C., not included.
[5] Spokane, Wash., not included.
[6] Pittsburgh, Pa., Fort Wayne, Ind., Superior, Wis., Wilmington, N. C., and St. Petersburg, Fla, not included.
[7] Pittsburgh, Pa., not included.
[8] Fort Wayne, Ind., and Superior, Wis., not included.
[9] Wilmington, N. C., and St. Petersburg, Fla., not included.

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

Group of cities	Number of cities reporting cases	Number of cities reporting deaths	Aggregate population of cities reporting cases	Aggregate population of cities reporting deaths
Total	104	96	28,842,382	28,084,966
New England	12	12	2,098,746	2,098,746
Middle Atlantic	10	10	10,304,114	10,304,114
East North Central	16	16	6,976,567	6,976,567
West North Central	14	11	2,515,330	2,381,454
South Atlantic	22	22	2,566,901	2,566,901
East South Central	7	7	911,885	911,885
West South Central	8	6	1,124,564	1,023,013
Mountain	9	9	546,445	546,445
Pacific	6	3	1,797,830	1,275,841

FOREIGN AND INSULAR

PLAGUE ON VESSEL

"Naxos"—At Rhodes from the Dodecanese and Alexandria, Egypt.—On September 12, 1925, a case of plague was removed at Rhodes from the Greek vessel *Naxos*, from the Dodecanese Islands via Alexandria, Egypt. The vessel left Alexandria September 9, 1925.

AUSTRIA

Typhoid fever—Vienna.—On September 15, 1925, epidemic typhoid fever was reported present at Vienna, with 20 cases under treatment in hospital. The epidemic was stated to have originated at a summer resort in the vicinity of the city.

CHINA

Cholera—Swatow.—Cholera was reported present at Swatow, China, October 8, 1925.

MALTA

Communicable diseases—August, 1925.—During the month of August, 1925, communicable diseases were reported in the island of Malta as follows:

Disease	Cases	Deaths	Disease	Cases	Deaths
Chicken pox	9		Smallpox	4	1
Lethargic encephalitis	2		Trachoma	18	
Malta (undulant) fever	90		Tuberculosis	12	11
Pneumonia (all forms)	12		Typhoid fever	27	6
Scarlet fever	6		Whooping cough	1	

Population, civil, 224,088

SICILY

Antimosquito measures—Catania.—According to a recent report of the American consul at Catania, Sicily, engineering projects are being considered to eradicate mosquito-breeding places in the malaria-infected lowlands south of Catania. The plans for improved sanitation in this region include the following:

(1) Changing the course of the Buttaceto, a stream now flowing into a swampy area, so that it will flow directly into the sea at a grade that will at the same time drain the lowlands.

(2) The installation of drainage canals in two other malarial zones—the Plaia-Zia and the Lisa-Fontanarossa.

(3) The construction of covered reservoirs in a fourth zone in which are located many small springs, and through which, because of the small gradient, the water now flows very slowly—these reservoirs to collect the slow-flowing water and discharge it through a concrete canal at the rate of 700 to 800 gallons per minute during a period of 1 hour every 24 hours.

(4) The filling and reclaiming of marsh land in the Plaia section.

(5) The improvement of the present system of canals in the Giuseppe Arena region.

In June, 1924, the expenditure of 240,000 lire was authorized for carrying out part of these proposed improvements, which, it is believed, will contribute very materially to the improvement of health conditions in these malarial districts.

UNION OF SOUTH AFRICA

Plague—Orange Free State.—During the week ended August 15, 1925, two cases of plague were reported in the Boshof district of the Orange Free State, Union of South Africa.

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 October 23, 1925 [1]

CHOLERA

Place	Date	Cases	Deaths	Remarks
China:				
Swatow	Oct. 8			Present.
India:				
Calcutta	Aug. 23–Sept. 5	12	10	

PLAGUE

Java:				
Batavia	Aug. 22–28	30	23	Province.
Soerabaya	Aug. 9–15	2	2	
Straits Settlements:				
Singapore	July 26–Aug. 1	1	1	
Syria:				
Beirut	Sept. 4–10	2		
Union of South Africa:				
Orange Free State—				
Boshof District	Aug. 9–15	2		
On vessel:				
Naxos	Sept. 12	1		Case removed from Greek vessel Naxos, at Rhodes, from Dodecanese Islands via Alexandria, Egypt. The vessel left Alexandria Sept. 9, 1925.

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

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

Reports Received During Week Ended October 23, 1925—Continued

SMALLPOX

Place	Date	Cases	Deaths	Remarks
Bolivia:				
La Paz	Apr. 1–June 30	10		
Do	July 1–Aug. 31	8		
Brazil:				
Bahia	Aug. 30–Sept. 5	1		
Rio de Janeiro	Aug. 29–Sept. 19	86	50	
Canada:				
Ontario				Sept. 1–30, 1925: Cases, 25. Corresponding period year 1924, 13 cases.
China:				
Amoy	Aug. 9–Sept. 15			Present.
Swatow	Aug. 30–Sept. 12			Do.
Great Britain:				
England and Wales	Sept. 6–26	91		
Newcastle-on-Tyne	Sept. 20–26	4		
India:				
Calcutta	Aug. 22–Sept. 5	4	4	
Jamaica				Aug. 30–Sept. 26, 1925: Cases, 59 (exclusive of Kingston). (Reported as alastrim.)
Kingston	Aug. 30–Sept. 26	24		
Malta				Aug., 1925: Cases, 4; deaths, 1.
Portugal:				
Lisbon	Aug. 16–Sept. 12	38		Deaths: Aug. 3–Sept. 12, 1925, 12.
Spain:				
Malaga	Sept. 13–26		11	
Tunis:				
Tunis	Sept. 16–22	7	13	
Union of South Africa:				
Orange Free State	Aug. 9–15			Outbreak in Ladybrand district, native location.

TYPHUS FEVER

Bolivia:				
La Paz	Apr. 1–June 30	5		
Do	Aug. 1–31	1		
Chile:				
Valparaiso	Aug. 30–Sept. 5		2	
Egypt:				
Alexandria	Sept. 3–9	1		
Mexico:				
Mexico City	Sept. 10–26	7		Including municipalities in Federal district.
Poland				July 19–Aug. 1, 1925: Cases, 57; deaths, 6.
Portugal:				
Oporto	Sept. 20–26	1		
Union of South Africa:				
Cape Province	Aug. 9–15			Outbreaks.
Transvaal	do			Do.

Reports Received from June 27 to October 16, 1925[1]

CHOLERA

Place	Date	Cases	Deaths	Remarks
Algeria:				
Algiers	May 11–20	1		
Ceylon				Jan. 25–June 27, 1925: Cases, 172; deaths, 120. June 28–July 11, 1925: Cases, 19; deaths, 15.
Colombo	May 10–16	2	2	
China:				
Foochow	Aug. 23–29			Present.
Shanghai	July 26–Aug. 15	82	39	
Do				Aug. 22, 1925: Prevalent with 100 new cases (estimated) daily.

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

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

Reports Received from June 27 to October 16, 1925—Continued

CHOLERA—Continued

Place	Date	Cases	Deaths	Remarks
India				Apr. 26–June 27, 1925: Cases, 33,647; deaths, 19,950. June 28–Aug. 15, 1925: Cases, 12,827; deaths, 7,227.
Bombay	May 10–June 27	2	1	
Do	June 28–Aug. 15	11	7	
Calcutta	May 3–9	58	49	
Do	May 17–23	79	61	
Do	June 14–20	12	11	
Do	July 5–Aug. 22	64	51	
Karachi	Aug. 30–Sept. 5	1	1	
Madras Presidency	June 6–20	4	1	
Do	July 5–Sept. 5	34	12	
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–Aug. 22	6	6	
Indo-China:				
Saigon	May 4–June 7	4	3	Including 100 square kilometers of surrounding country.
Do	June 22–July 12	3	2	Do.
Do	Aug. 3–9	1	1	
Japan:				
Kobe	Sept. 4–6	5	2	
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	
Camarines Sur	July 3–9	1		
Lagonoy	June 6–12	2	1	
Leyte	July 8–14	1	1	
Manila	June 15–28	3		
Do	June 29–Aug. 16	17	4	June 1–Aug. 8, 1925: Cases, 17.
Mountain Province	June 23–29	1	1	
Rizal Province	Aug. 2–8	2		
Siam:				
Bangkok	Apr. 29–June 27	9	4	
Turkey:				
Constantinople	May 16–22	1		
On vessel:				
———		1		At Nagasaki. Reported Sept. 2, 1925, arrived on vessel from China.
Steamship President Lincoln.		1		At Kobe, Sept. 5, 1925, from Shanghai.

PLAGUE

Brazil:				
Bahia	May 3–June 13	5	4	
British East Africa:				
Uganda	Feb. 1–28	28	28	
Entebbe	May 4–June 4	78	73	Apr. 1–May 31, 1925: Cases, 129; deaths, 118.
Ceylon:				
Colombo	May 10–June 30	11	10	
Do	June 28–Aug. 15	16	13	
China:				
Foochow	May 24–31			Reported present in epidemic form.
Do	Aug. 23–29			Present.
Nanking	July 25–Aug. 22			Do.
North Manchuria	May 27	2	1	
Ecuador:				
Guayaquil	June 1–15	1	1	May 16–June 30, 1925: Rats examined, 30,347; found infected, 95. July 1–Sept. 15, 1925: Rats taken, 43,295; rats found infected, 169.
Do	Sept. 1–15		1	
Egypt				Jan. 1–Sept. 9, 1925: Cases, 111. Corresponding period year 1914: Cases, 354.
City—				
Alexandria	June 17–24	2	2	Bubonic.
Port Said	June 17–18	1	1	
Do	June 28–Sept. 3	11	3	
Suez	June 14–27	3	2	
Do	Aug. 19	1	1	Septicemic.

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

Reports Received from June 27 to October 16, 1925—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Egypt—Continued.				
Province—				
Assiout	June 5	1	1	
Beni-Souef	June 10–16	8	4	
Do	Aug. 6–12	5	2	
Charkieh	June 6–8	1	1	
Kena	June 17	1	1	
Minia	June 6–17	3	2	
France:				
Marseille	Aug. 13–18	3		
Gold Coast	March–April	3	3	
Greece:				
Athens	July 1–Aug. 14	26		
Piræus	July 18–Aug. 14	9		
Pyrgos	Sept. 1	1		
Saloniki	Oct. 3	1		
Hawaii Territory:				
Honokaa	June 28			Plague-infected rat.
Do	Aug. 7	1		
Do	Aug. 15			Plague-infected rat, near Paauilo.
Kukuihaele	July 31			Plague-infected rat.
Paauhau	Aug. 12			Do.
India				Apr. 26–June 27, 1925: Cases, 10,166; deaths, 8,913. June 28–Aug. 15, 1925: Cases, 2,291, deaths, 1,548.
Bombay	Apr. 26–June 27	65	59	
Do	June 28–Aug. 25	16	11	
Calcutta	May 30–June 6	1	1	
Do	July 5–11	1	1	
Karachi	May 18–June 6	4	3	
Do	July 31–Aug. 6	1	1	
Madras	May 10–June 27	15	8	
Do	June 28–Aug. 15	55	30	
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	
Do	July 12–Aug. 29	150	126	
Indo-China:				
Cochin-China—				
Saigon	Apr. 20–June 21	3	3	Including 100 square kilometers of surrounding country.
Iraq:				
Bagdad	May 24–June 6	9		
Do	June 21–27	5	1	
Japan:				
Taiwan—				
Taihoku	Oct. 2–6	1	1	
Java:				
Batavia	May 6–June 19	32	31	
Do	July 5–31	65	65	In Province.
Do	Aug. 8–14	28	26	Do.
Cheribon	Apr. 1–June 27		102	
Do	June 28–July 25		65	
Pasoerocan Residency	Mar. 7–May 25			Epidemic in several localities.
Do	July 13			Do.
Pekalongan	Apr. 9–June 27		96	
Do	June 28–July 25		9	
Soerabaya	May 7–27	3	3	
Do	June 28–Aug. 1	18	3	
Soerakarta Residency	May 28			Epidemic at Kalidgambe.
Tegal	Apr. 2–May 16		36	
Do	May 24–June 13		16	
Madagascar:				
Province—				
Itasy	Apr. 1–15	1	1	
Do	July 1–15	4	4	Bubonic, 3; septicemic, 1.
Tananarive	Apr. 1–June 30	232	200	
Do	July 1–31	19	19	Bubonic, 5; pneumonic, 8; septicemic, 6.
Town—				
Tamatave (port)	Apr. 1–15	2		
Do	June 1–7		1	
Tananarive Town	Apr. 16–May 31	5	5	
Mauritius				April, 1925: One case.
Nigeria	December, 1924	17	13	
Do	January, 1925	10	6	
Do	March–May	25	18	
Peru:				
Callao	July, 1925			Present. Press reports.
Cañete	August, 1925			Do.
Lima	Aug. 14	14		Press reports.

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

Reports Received from June 27 to October 16, 1925—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Russia:				
Kalmyk District	May 19-31	10	8	
North Causasus	June 6-7	2	2	
Urts	May 25-June 3	2	2	In laboratory worker and contact. Locality, Province of Bukeevsk.
Siam:				
Bankok	Apr. 26-June 20	13	11	
Do	June 28-Aug. 22	5	4	
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.
Do	July 5-11			One plague-infected house mouse.
Orange Free State—				
Boshof District	June 28-Aug. 8	3	2	Natives.
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 Pirœus, Greece, from Alexandria, Egypt.
Steamship Anatolia	Aug. 8	1		Do.
Steamship City of Norwich.	Apr. 15	1		At Port Said, Egypt, Apr. 14, 1925, from Rangoon, Colombo, and Perim; destination, London. Case occurred in first officer of vessel.

SMALLPOX

Algeria:			
Algiers	May 1-June 30	43	2
Do	July 1-Aug. 20	67	
Constantine	---do	47	
Brazil:			
Bahia	June 28-Aug. 22	7	6
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
Do	Aug. 9-15		1
Rio de Janeiro	May 9-June 27	5	1
Do	June 28-Aug. 15	122	36
British East Africa:			
Kenya—			
Mombasa	Apr. 19-June 20	27	13
Do	July 5-Aug. 8	56	9
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. 6-19	2	
Canada:			
Alberta—			
Calgary	Aug. 2-Sept. 26	2	
British Columbia—			
Vancouver	June 1-28	7	
Do	July 6-Sept. 13	15	1
New Brunswick—			
Restigouche County	June 1-30	1	

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

Reports Received from June 27 to October 16, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Canada—Continued.				
Ontario				May 31-Aug. 31, 1925: Cases, 27; deaths, 1. Corresponding period, 1924: Cases, 30.
Galt	June 14-20	2		
Kingston	do	1		
Do	Aug. 23-29	1		
North Bay	June 28-July 18	3		
Saskatchewan—				
Regina	May 24-30	3		
China:				
Amoy	May 17-June 30		7	
Do	July 12-Aug. 8			Present.
Antung	May 11-June 21	7		
Do	June 29-Aug. 9	3		
Canton	May 10-June 13			Do.
Chungking	May 3-30			Widespread.
Foochow	May 9-Aug. 22			Present.
Hongkong	Apr. 19-June 13	15	12	
Do	July 19-25	1		
Manchuria—				
Dairen	Apr. 13-June 28	115	17	
Do	June 28-July 26	4	2	
Harbin	May 13-June 2	2		
Nanking	May 9-Aug. 29			Do.
Shanghai	May 3-June 6	5	2	
Do	July 6-25	1	1	
Swatow	May 17-Aug. 29			Stated to be endemic.
Tientsin	May 9-June 6	3		
Do	July 12-18	1		
Chosen	January-April	1,067	243	
Seoul				Jan.-June, 1925: Cases, 341; deaths, 74.
Colombia—				
Buenaventura	Sept. 15-29	1		
Egypt				January-July, 1925: Cases, 341; deaths, 74.
Alexandria	May 21-27	1	1	
Cairo	Mar. 19-May 13	5		
Do	June 18-24	17	5	
France				February-June, 1925: Cases, 102.
Paris	May 21-31	1		
Germany:				
Baden (State)	July 12-25	2	1	
Stuttgart	July 5-11	3	1	
Gold Coast				January-May, 1925: Cases, 379; deaths, 29.
Great Britain:				
England and Wales				May 24-June 27, 1925: Cases, 441. June 28-Sept. 5, 1925: Cases 569.
Birmingham	July 7-13	1		
Cardiff	June 14-20	1		
Do	Aug. 2-8	14	8	
Newcastle-on-Tyne	May 31-June 27	4		
Do	June 28-Sept. 19	11	1	
Greece				January-June, 1925: Cases, 47; deaths, 8.
Athens	May 1-31		2	
Do	June 24-30	27	3	
Do	July 1-31	14	1	
Haiti:				
Port au Prince	Aug. 23-29	1		Reported at Jean Rabel Aug. 27.
Hungary:				
Budapest	July 5-18	13		
India				Apr. 26-June 27, 1925: Cases, 37,107; deaths, 9,152. June 28-Aug. 15, 1925: Cases, 15,848; deaths, 3,840.
Bombay	Apr. 26-June 27	156	115	
Do	June 28-Aug. 15	25	17	
Calcutta	May 3-9	109	100	
Do	May 17-23	75	61	
Do	May 31-June 20	88	81	
Do	July 5-Aug. 22	58	47	
Karachi	May 18-June 27	6	1	
Do	June 28-July 4	1	1	
Do	Aug. 30-Sept. 5	4	2	
Madras	May 18-June 27	152	66	
Do	June 28-July 18	68	25	
Do	Aug. 2-Sept. 5	89	35	
Rangoon	May 3-June 27	207	99	
Do	June 28-July 4	2	1	
Do	July 12-Aug. 29	27	12	

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

Reports Received from June 27 to October 16, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Indo-China:				
Cochin-China—				
Saigon	Apr. 20–May 21	13	9	Including 100 square kilometers of surrounding country.
Do	Aug. 17–23	1	1	Do.
Irak				Jan. 11–May 30, 1925: Cases, 13 deaths, 46.
Bagdad	Apr. 26–June 20	4	1	
Italy	Dec. 28–June 27	97		
Do	June 28–July 4	9		
Catania	Aug. 17–23	1		
Syracuse Province	do	1		
Turin	Aug. 17–Sept. 13	7		
Venice	July 27–Aug. 2	3		
Jamaica				Apr. 26–June 27, 1925: Cases, 110. June 28–Aug. 29, 1925: Cases, 102 (reported as alastrim).
Kingston	Apr. 26–June 27	19		Reported as alastrim.
Do	June 28–Aug. 29	35		Do.
Japan:				
Kobe	May 24–June 27	2		
Nagasaki	May 15–21	2		
Do	July 6–19	1	1	
Taiwan	June 1–30	11		
Do	July 1–10	1		
Tokyo	June 14–20	1		
Yokohama	May 25–June 12	3		
Java:				
Bantam Residency	June 14–27	2		
Batavia	May 2–June 26	2		
Do	July 4–31	5		
Do	Aug. 8–22	5		Province.
Brebes	Apr. 22–28	1		
Cheribon	Apr. 16–22		1	
Do	July 12–18	1		Do.
Kediri Residency	July 14			Epidemic.
Pekalongan	Apr. 2–8	1		
Rembang Residency	Apr. 23			Epidemic at Kawedanan.
Soerabaya	Apr. 16–June 27	304	41	
Do	June 28–Aug. 8	373	43	
South Bantam	Apr. 16–22	1		
Tegal	Mar. 29–May 2	2	1	
Latvia				May–June, 1925: Cases, 4. July, 1925: Case, 1.
Lithuania				February–May, 1925: Cases, 6.
Malta	June 1–30	9		
Do	July 1–31	5		
Mexico				January–May, 1925: Deaths, 2,166.
Durango	July–August		22	
Guadalajara	June 2–29		10	
Do	June 30–Sept. 21		3	
Merida	Sept. 20–26			Outbreak.
Mexico City	May 24–June 27	12		Including municipalities in Federal district.
Do	July 5–11	3		Do.
Do	July 26–Sept. 5	8		Epidemic at El Hule and other localities.
Oaxaca, State	Aug. 14			
San Luis Potosi	Aug. 16–Sept. 19	3	2	
Tampico	June 1–10		1	
Do	July 1–31	4	2	
Torreon	Aug. 1–31	2	2	
Morocco:				
Tangier	May 17–June 5			Present among natives.
Nigeria				December, 1924: Cases, 40; deaths, 16.
Do				January–May, 1925: Cases, 1,538; deaths, 132.
Persia:				
Teheran	Mar. 21–May 21		29	
Peru:				
Arequipa	June 1–30		1	
Poland				Mar. 1–June 27, 1925: Cases, 41. July 5–12, 1925: Cases, 2.
Portugal:				
Lisbon	Apr. 26–June 27	36	6	
Do	June 28–Aug. 15	40	14	
Oporto	June 14–20	1		
Do	July 19–Aug. 29	7		

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

Reports Received from June 27 to October 16, 1925—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Rumania				January-May, 1925: Cases, 22; deaths, 1.
Russia				December, 1924: Cases, 1,000. January-April, 1925: Cases, 5,733.
Siam:				
Bangkok	Apr. 26-June 27	27	19	
Do	June 28-July 11	2	1	
Spain:				
Malaga	May 24-June 20		15	
Do	July 5-Sept. 12		29	
Valencia	May 31-June 27	3	1	
Straits Settlements:				
Singapore	May 17-23	1		
Do	July 5-11	1	1	
Sumatra:				
Pedang	July 12-25	5		
Switzerland:				
Berne	June 7-13	1		
Lucerne	June 14-20	4		
Syria:				
Beirut	Apr. 21-30	1		
Tripoli				Jan. 3-Apr. 15, 1925: Cases, 14.
Tunis:				
Tunis	May 6-June 30		46	
Do	July 1-Sept. 15		59	
Turkey:				
Constantinople	May 16-22	2		
Union of South Africa:				
Cape Province	May 24-Aug. 8			Outbreaks.
Port Elizabeth	Apr. 18-25	8	1	
Transvaal	May 3-June 6			Do.
Uruguay				December, 1924: Cases, 8.
Do				February-April, 1925: Cases, 10.

TYPHUS FEVER

Algeria:				
Algiers	May 11-20	6	2	In vicinity, 12 cases. Isolated.
Do	July 1-Aug. 20	18	8	
Constantine	July 1-10	17		District.
Do	July 21-31	7		Department.
Oran	do	8		Do.
Bulgaria				November-December, 1924: 1 case. January - June, 1925: Cases, 124; deaths, 7.
Sofia	May 28-June 3	2		
Chile:				
Iquique	Aug. 8-22		2	
Valparaiso	May 10-July 18		9	
China:				
Manchuria—				
Harbin	May 19-June 2	2		
Czechoslovakia				April, 1925: 1 case.
Egypt				January-June, 1925: Cases, 1,011; deaths, 211.
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. 12	4	1	
Do	Aug. 20-26	3		
Esthonia				Apr. 1-May 30, 1925: Cases, 6.
Great Britain:				
Scotland—				
Glasgow	Sept. 6-12	1		
Greenock	May		2	
Do	Aug. 6-18	7		
Greece				January-June, 1925: Cases, 57; deaths, 6.
Athens	May 1-31		2	
Do	July 1-31	3		
Kalamata	Apr. 1-30		2	
Patras	June 28-July 4		2	
Iraq:				
Bagdad	July 12-18	1		
Ireland:				
Cork County	Aug. 25	3		

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

Reports Received from June 27 to October 16, 1925—Continued

TYPHUS FEVER—Continued

Place	Date	Cases	Deaths	Remarks
Latvia				April–June, 1925: Cases, 26.
Libau	July 14–20	1		July, 1925: Cases, 6.
Lithuania				March–May, 1925: Cases, 158; deaths, 7.
Mexico				January–May, 1925: Deaths, 108.
Mexico City	May 24–June 6	24		Including municipalities in Federal district.
Do	June 28–Aug. 1	39		Do.
Do	Aug. 16–Sept. 12	41		Do.
San Luis Potosi	June 26–July 4		1	
Tampico	Aug. 20–31	1		
Morocco				January–June, 1925: Cases, 421.
Palestine:				
Dagania	July 21–27	1		
Ekron	do	1		
Haifa	Aug. 20	1		
Jaffa district	June 28	2		
Do	Aug. 20–Sept. 14	3		
Jerusalem	July 29–Sept. 14	3		From Ramleh district.
Maijdal	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	
Do	July 1–31		1	
Poland				Mar. 1–Apr. 11, 1925: Cases, 1,195; deaths, 74. Apr. 19–June 27, 1925: Cases, 1,001; deaths, 87. July 5–18, 1925: Cases, 89; deaths, 7.
Portugal:				
Oporto	May 31–June 6	1		
Do	July 5–11	1		
Rumania	January–May	1,360	152	
Constantza	May 1–June 30	2		
Russia				December, 1924: Cases, 5,062. January–April, 1925: Cases, 30,107.
Spain:				
Seville	Aug. 20–26		1	
Valencia	June 7–13		1	
Tunis:				
Tunis	May 21–June 17	16	8	
Do	July 8–Sept. 8	12	5	
Turkey:				
Constantinople	May 11–31	7	2	
Union of South Africa				June, 1925: Cases, 61; deaths, 4.
Cape Province	Apr. 19–July 25	39	5	June, 1925: Cases, 26; deaths, 1.
Natal	May 3–July 11	14		June, 1925: Cases, 2.
Durban	Feb. 1–July 4	18		
Orange Free State	Feb. 1–June 27	26	4	June, 1925: Cases, 27; deaths, 1.
Hoopstad	July 5–11			Outbreaks.
Transvaal	May–June	17	4	
Johannesburg	July 19–25	1		
Yugoslavia:				
Belgrade	June 8–14	1		
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:				
Ibaden	Apr. 24–30	1		
Lagos	Apr. 29–May 5	4	1	

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