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THE RELATIONSHIP OF ENDEMIC GOITER TO CERTAIN POTENTIAL FOCI OF INFECTION

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GENERAL CONSIDERATIONS

Whether or not goiter is caused by foci of infection is a question of manifest importance in both the prevention and treatment of the malady. Unfortunately, there appears to be no unanimity of opinion or uniformity of experience on the subject. The proponents of the iodine deficiency theory, believing the deprivation of iodine to be the principal if not the sole agent in the causation of goiter, seldom mention other possible etiological factors. Other observers, however, incline to the belief that foci of infection are definitely responsible for endemic goiter. Still others conclude, as the result of practical investigation, that there is no causal relation between such sources of infection and goiter. Consequently, the subject is surrounded by contradictory as well as confusing assumptions and statements.

During the course of a study in Cincinnati devoted primarily to the determination of the effects of endemic goiter upon physical growth, an opportunity was presented for making certain observations upon the condition of the teeth and tonsils. These facts have been correlated with the thyroid findings in an effort to discover, if possible, the existence of a possible relationship. In presenting this discussion the literature pertaining to the subject will first be reviewed briefly. Thereafter the scope and limitations of the study will be presented. Finally the results of the investigation will be given.

1. REFERENCES FROM THE LITERATURE

In this section a sufficient number of references will be cited to illustrate the trend of thought on the subject. The citations, of course, are far from complete, but, nevertheless, they illustrate the tendencies of experience and belief. Necessarily the opinions and the observations upon which they are based vary within wide limits.

Negative findings.—Categorical denial of the existence of a relationship between thyroid enlargement and foci of infection has been made by Hertzler (1). A study of the problem by Dillingham, one of Hertzler's assistants, resulted negatively.

Gamble (2) sent a questionnaire to physicians in Mississippi in order to learn their experience relative to the influence of focal infections upon the thyroid. The majority, contrary to Gamble's personal experience, had failed to note a correlation.

Foci of infection as cause of goiter.—The majority of the contributions to the literature on foci of infection as a cause of endemic goiter are positive and affirmative in character.

Harrower (3), for instance, believes that the coincident occurrence of oral and dental infections in simple goiter has been accurately demonstrated.

Evans (4) regards a deficiency of iodine as only one, although the most important, cause of goiter. In addition he cites bad teeth, infected tonsils, suppurations in the nose, digestive disturbances, mental shock, and other powerful emotions as responsible factors.

In addition to local infections, Pern (5) maintains that a calcium deficiency contributes to thyroid enlargement. Furthermore, in his opinion, goiter is caused by intestinal infection and a fat deficiency.

Bram (6) states that focal infections from teeth, tonsils, nasal sinuses, and, more remotely, from gastro-intestinal and genito-urinary affections, are commonly responsible for thyroid enlargement.

Other observers, while professing to believe that goiter is caused by foci of infection, are more cautious in expressing their opinions. Brown (7), for instance, mentions the possibility of a relationship between goiter and tonsillar infections. He inclines to the belief, however, that the tonsil is no more likely to be the focus of infection than any other nidus, e. g., sinuses, teeth, and gall bladder. Brown urges that throat specialists pay particular attention to the state of the thyroid in all cases of infected tonsils. All who treat thyroid disorders are urged by him to regard infected tonsils as a possible exciting factor.

Jackson (8), basing his conclusions upon an experience with 300 colloid goiters, believes that the removal of septic tonsils proves of some benefit in certain cases.

In discussing the indications for tonsillectomy, Greene (9) maintains that the diseased tonsil should be viewed with suspicion in the presence of thyroid enlargement. At the same time he warns that other foci of infection should not be overlooked.

Booth (10) has frequently noted improvement in adolescent goiter after foci of infection have been eliminated. He contends that goiter is the indirect result of focal or general infection rather than the direct result of some specific infection such as may be borne by water. He regards infection of the mouth, sinuses, tonsils, gall bladder, appendix, or the presence of abnormal flora in the intestinal tract, as possible causes of goiter.

From these extracts from the literature it will be apparent that there is considerable diversity of opinion concerning the possible influence of foci of infection upon endemic goiter.

2. SCOPE AND LIMITATIONS OF PRESENT STUDY

As previously mentioned, the present study concerning the possible relationship between potential foci of infection and endemic goiter was carried on while certain physical measurements were being secured in the Cincinnati public schools during the 1924-25 school session.

The children examined, all of whom were white, attended eight schools in Cincinnati selected because of their diversified character. Thus, three of the schools were located in the poorer sections of the city, two in the sections of moderate economic status, and one in the best section of the city. In addition to these there was one vocational school, attended largely by girls, and one junior high school.

In the six elementary schools visited, the children examined attended the fifth, sixth, seventh, and eighth grades. In the vocational and junior high schools most of the children were older and attended higher grades. By this process of selection a cross section of the elementary school population was obtained. Moreover, this cross section was representative of various school ages, grades, sections of the city, environment and social status.

The observations were all made by experienced physicians and included, for the purposes of the present investigation, the condition of the teeth and tonsils. Notations were made concerning the degree of dental decay (slight or marked) and the number of teeth involved. With regard to the tonsils, observations were made of the degree of enlargement (slight, moderate, or marked) and also whether the organs were cryptic in character. Notations were also made of the number of children with apparently normal tonsils and of those in whom the tonsils had been removed by operative procedure. At the same time the condition of the thyroid gland was ascertained.

Limitations of the observations on teeth:—It should be fully realized that dental decay is not synonymous with focal infection. In fact, it is probable that septic absorption occurs most freely when the decay has extended to the root canal. Obviously there was little opportunity for determining this fact accurately during the survey. However, very many of the markedly decayed teeth were presumably serving as foci of infection. It is also reasonable to suppose that the possibilities for systemic infection were increased with successively greater numbers of markedly decayed teeth. A distinction was made between slightly and markedly decayed teeth. In the former class were included teeth with small, distinct, and easily

remediable defects. Under the heading of markedly decayed teeth were included those with large cavities of manifestly long duration, perforations of the pulp cavity and those obviously in need of extraction.

Limitations of the observations on tonsils.—Enlarged tonsils are not necessarily diseased and not invariably sources of infection. Consequently the classification of tonsils as slightly, moderately, and markedly enlarged must be accepted as hypertrophy rather than invariable or actual infectivity. At the same time the enlarged tonsils, when inflamed or accompanied by frequent sore throat, are presumably diseased. Moreover, appropriate treatment is indicated. Probably more expressive of actually diseased condition is the cryptic tonsil with exudation of pus.

In all probability the examinations of teeth and tonsils during the present investigation were made just as carefully as those upon which other conclusions regarding the relationship between goiter and foci of infection have been based. Whatever mistakes have occurred through errors of judgment or failure to elicit subjective symptoms of marked dental decay or tonsillar disease have been uniformly distributed throughout the series of observations. Therefore, the differences if any, between the dental and tonsillar conditions of thyroid-normal and thyroid-enlarged children should be distinctive.

3. RESULTS

In this section the data secured during the study are presented. Moreover, by means of tables, and analyses of the available material, the presence or absence of a relationship between thyroid enlargement and infectious foci in teeth and tonsils will be brought out.

Ages, sex, and numbers of children.—Of the 2,917 white children included in the investigation, 1,341 were boys and 1,576 were girls. Among the boys, 515 instances of thyroid enlargement, 38.4 per cent, were noted. A greater number of enlargements, 927, or 58.8 per cent, were recorded among the girls. The number of children of each age and the number and percentage of thyroid involvements are set forth in Table 1. It will be seen that the percentage of thyroid enlargements is considerably greater among the girls, though relatively high in both sexes. The customary decline in the percentage of involvements among boys after the age of 13 years and the steady though uneven increase among the girls of increased age are particularly noteworthy.

Degrees of enlargement.—In classifying the degrees of enlargement the methods described in a previous publication (11) were utilized. However, owing to the relatively small number of some of the enlargements, it was found desirable, for statistical purposes, to reduce the

5 degrees to 3. Thus the "very slight" and "slight enlargements" were combined and termed "slight;" "moderate enlargements" was allowed to stand; and "marked" and "verymarked" thickenings were combined and called "marked."

The number and percentage of each degree of thyroid enlargement, at each age between 11 and 15 years, as well as for all ages combined, are also given in Table 1. It will be seen that slight enlargements were a little over one and one-third times more frequent among the girls than among the boys, 50.4 per cent against 37.2 per cent; moderate enlargements were approximately seven times more frequent among the girls, 6.9 per cent as compared with 1 per cent; and the combined marked and very marked involvements were about seven times more frequent among the girls.

TEETH

The results of the dental examinations are presented in Table 2, calculations being available for both boys and girls. Satisfactory dental hygiene and good economic conditions were found to be concomitant. Even with equal opportunity for free dental prophylaxis and treatment, the child of well-to-do parents has a decided advantage over a child of poor parents. This is not due solely to superior nutrition, but mainly to the desire and actual practice of timely dental attention on the part of those who can afford to secure private and skilled service.

Sixty-one and seven-tenths per cent of the 1,341 boys and 67.1 per cent of the 1,576 girls included in the survey were found without dental decay. This indicates a slight, and usual, superiority in oral hygiene among the girls, due probably to pride in appearance and possibly to the more sheltered positions of the girls in life.

Of the 826 thyroid-normal boys, 63 per cent had teeth without signs of decay, while a slightly smaller percentage (60 per cent) of the 515 thyroid-enlarged boys were also free from dental defects. Among the girls, 66.8 per cent of the normal and 67.3 per cent of the thyroid-enlarged individuals had no evidence of dental decay. These figures indicate no decided differences in the conditions of the two general groups.

In Table 2 certain age groupings have been made for more vivid statistical display. Thus, the ages of 9 and 10, 11 and 12, 13 and 14, and 15 years and over, have been combined, respectively. Furthermore, the enlargements have been shown as slight and marked, the former comprising the slight forms of Table 1, while the latter includes the moderate and marked enlargements of the same table.

Teeth without decay.—Among the 9 and 10 year and the 11 and 12 year groups of boys, normal teeth were more frequent among thyroid-normal children. However, among the 13 and 14 year and

15 and over groups, sound teeth were slightly more frequent among the thyroid-enlarged boys.

Among the girls of the 9 and 10 year group the percentage having sound teeth were the same among the thyroid-normal and thyroid-enlarged. In the 11 and 12 year and the 13 and 14 year groups the advantage in normal teeth was with the thyroid-enlarged girls. Among those over 15 years of age the thyroid-normal girls had a slight superiority in normal teeth over the thyroid-enlarged individuals.

Dental caries.—Dental decay was noted slightly more frequently among boys than girls, the marked degree being more prevalent among both than the slight. Thus, 13.2 per cent of the boys and 11.8 per cent of the girls had slight decay, whereas 25 per cent of the boys and 21.1 per cent of the girls had marked decay.

Slight dental decay.—Slight decay of 1 and 2 teeth was more prevalent among boys with thyroid enlargement. Among the girls slight decay of 1, 2, 3, 4, and more than 4 teeth was more prevalent among the thyroid-enlarged. However, the differences are small and neither noteworthy nor constant.

In the 9 and 10 year group slight dental decay was more frequent among the thyroid-normal boys. In the remaining groups the excess of slight decay was found among the boys with thyroid enlargement.

In the 9 and 10 year group more of the thyroid-normal girls had slight decay than did those with enlarged thyroids. In the 11 and 12 year group of girls, and also in the 15 year and over group, slight decay was more frequent among the thyroid-enlarged. In the 13 and 14 year group the same percentages of slight decay prevailed among the thyroid-normal and the thyroid-enlarged girls.

Marked dental decay.—A further study of Table 2 discloses the differences in the amount of marked dental caries in the two groups under consideration. It will be noted that the percentage of marked decay among the thyroid-enlarged boys both of the 9 and 10 year group and of the 11 and 12 year group is higher than the percentage among the thyroid-normal boys. However, in the succeeding groups the excess is reversed. Marked decay occurs more frequently among the thyroid-normal boys of the 13 and 14 year group, and also of the 15 year and over group.

Among the girls, marked dental decay occurs 38.1 per cent more frequently among the thyroid-enlarged individuals of the 9 and 10 year group. In the 11 and 12, 13 and 14, and 15 and over groups the excess of marked dental decay occurs among the thyroid-normal girls.

From the foregoing observations it will be noted that there is no constancy of trend in any of the age groups or for either sex.

With relatively few exceptions the differences between percentage occurrence of slight and marked dental decay in thyroid-normal and thyroid-enlarged children are slight and insignificant.

Dental decay and degree of thyroid enlargement.—Whether or not marked thyroid enlargement is more frequently associated with dental decay than the lesser degrees of enlargement is another point concerning which some information is available in Table 2. Because of the relatively few marked enlargements found among the boys, little information concerning this point can be obtained from the portion of the table dealing with the boys. However, an examination of the data relating to the girls shows that both slight and marked dental decay are less frequent in girls with marked thyroid enlargement than among thyroid-normal girls or those with slight thyroid enlargement. Therefore, it may be concluded, so far as this group is concerned, that dental decay exerts no marked effect upon size of thyroid enlargement.

TONSILS

The statistical data relating to the conditions of the tonsils in the children examined have been set forth in Table 3. In this table the tonsillar conditions have been divided according to normality, absence, enlargement, and cryptic degeneration. The thyroid enlargements have been shown as slight and marked. As in Table 1 there have been age groupings in order to facilitate the statistical interpretation.

Normal tonsils.—Normal tonsils were found to a greater extent among both boys and girls with thyroid enlargement than among those with normal thyroids, 42.7 per cent among the boys and 40.2 per cent among the girls. Thus, 18.4 per cent of the tonsils examined in 515 thyroid-enlarged boys appeared to be normal, whereas 12.9 per cent of the tonsils of 826 thyroid-normal boys were normal. Normal tonsils were found in 19.7 per cent of the 927 thyroid-enlarged and in 13.9 per cent of the 649 thyroid-normal girls who were examined.

Normal tonsils were most frequent among the 16-year-old boys and the 13-year-old girls. They were least frequent among the 13-year-old boys and the 10-year-old girls. It is also interesting to note that normal tonsils were found with slightly greater frequency among thyroid-normal and thyroid-enlarged girls than among boys.

Tonsils removed.—More of the boys than girls had been subjected to operation for removal of tonsils. Thus, 36.4 per cent of the thyroid-normal and 33.8 per cent of the thyroid-enlarged boys were without tonsils, a slight difference in favor of the former. Among the thyroid-normal girls, 31.6 per cent had had their tonsils removed, whereas a slightly smaller number, 29.3 per cent, of the thyroid-enlarged girls had had similar operations. According to the

findings, tonsil removal was more frequent among the younger children.

When the differences between the several groups of thyroid-normal and thyroid-enlarged children are considered with regard to the absence of tonsils through operation, some interesting facts are gleaned from Table 3. Thus, among boys in all four age groups a slightly greater number of tonsils had been removed among the thyroid-normal than among the thyroid-enlarged. However, the differences are relatively small and inconstant in trend. Absence of tonsils was also noted more frequently among the thyroid-normal girls in the first three age groups. In girls aged 15 years and over, however, the tonsils had been removed more frequently among those with thyroid enlargement. While differences, often in favor of the thyroid-normal individuals, are noted in this part of the study, the evidence can not be said to be particularly striking or significant. Nor can the removal of the tonsils be advocated as an aid to goiter prevention solely on the basis of these findings.

Enlargements of tonsils.—When the observations concerning the tonsils were made, 3 degrees of enlargement, "slight," "moderate," and "marked," were recorded. However, because of the comparatively few enlargements of each size, the numbers have been combined for ease of statistical analysis. A study of Table 3 (part of table giving totals) shows that enlarged tonsils were more frequent among the children with normal thyroids.

When the occurrence of tonsillar enlargement is considered by age groups it will be noted that the thyroid-normal boys of the 11 and 12 year group and also the 15 year and over group have enlarged tonsils more frequently than those with enlarged thyroids. In the 9 and 10 year group and again in the 13 and 14 year group tonsillar enlargement is more frequent among the thyroid-enlarged boys.

Enlargement of the tonsils is more frequent among the thyroid-normal girls in each of the four age groups shown in Table 3. However, the discrepancies are not uniform. While some of the evidence concerning tonsillar enlargement is suggestive, it is too uneven in trend to be convincing. If anything, the data here presented suggest that enlargement of the tonsils is more often than not associated with normal thyroid glands.

Cryptic tonsils.—Presumably the tonsils included in this grouping had a pathological status and were capable of exerting a deleterious influence upon such organs as the thyroid. The percentage of cryptic tonsils among the thyroid-normal boys exceeded similar conditions among individuals with enlarged thyroids. Among the girls, cryptic tonsils were more frequent among those with enlarged thyroids.

In the separate age groups, cryptic tonsils were more frequent among the thyroid-enlarged boys of the 9 and 10, 11 and 12, and the

15 and over groups, though the excess rates are small and uneven in trend. In the 13 and 14 year group the thyroid-normal boys had a slightly greater percentage of cryptic tonsils than the thyroid-enlarged.

Cryptic tonsils were encountered oftener among the thyroid-enlarged girls of the 9 and 10, 13 and 14, and 15 and over age groups than among the thyroid-normal individuals of the same ages. In the 11 and 12 year group of girls, however, cryptic tonsils were present more frequently among those with normal thyroids.

When these conflicting data are considered, it is apparent that there is no consistent or convincing evidence of relationship between cryptic tonsils and thyroid status.

Tonsillar conditions and degree of thyroid enlargement.—It is also interesting to learn, if possible, whether marked thyroid enlargements are more frequently associated with certain tonsillar abnormalities than are slight enlargements. Certainly there are no consistent trends in Table 3 which might be interpreted as indicative of a relationship between enlarged or cryptic tonsils and slight or marked thyroid enlargement. There are, however, certain facts that should be pointed out.

As the number of marked thyroid enlargements among the boys was not great, the percentages derived from the calculations for enlarged and cryptic tonsils are of no considerable value. On the other hand, the data available from observations of tonsil status among the girls offer a little better indication of trend. It will be seen that 39.9 per cent of the girls with marked thyroid enlargement and 42.4 per cent of those with slight enlargement had enlarged tonsils, while 47.3 per cent of the thyroid-normal girls had enlarged tonsils.

The percentage of girls having cryptic tonsils was greatest among those with slight thyroid enlargement, 9 per cent, and least among the thyroid-normal individuals, with 7.2 per cent. Of the girls with marked thyroid enlargement 8.3 per cent had cryptic tonsils. From these data it will be seen that in this group, marked thyroid enlargements are not associated with enlarged or cryptic tonsils as often as are slight enlargements. It may be concluded, therefore, that degree of enlargement was not dependent, in the present series, upon tonsillar conditions.

SUMMARY

1. Examinations were made of the teeth and tonsils of 1,341 white boys and 1,576 white girls in 8 schools in Cincinnati for the purpose of determining whether there was a relationship between potential foci of infection and thyroid enlargement.

2. Records were kept of slight and marked thyroid enlargements as well as of slight and marked decay of teeth. In addition, there were

recorded the number of apparently normal tonsils, the absence of tonsil through operation, hypertrophy, and cryptic degeneration.

3. Slight thyroid enlargements prevailed to the extent of 37.2 per cent among the boys and 50.4 per cent among the girls. Both moderate and marked enlargements were approximately seven times more prevalent among the girls than among the boys.

4. In the group studied, slight and marked dental decay is no more characteristically associated with thyroid enlargement than with normal thyroid status. Furthermore, the degree of thyroid enlargement appears not to be dependent upon the amount of dental decay.

5. Normal tonsils were found more frequently among both boys and girls with thyroid enlargement than among those with normal thyroids.

6. Approximately one-third of the children examined had had their tonsils removed by operation. A slightly greater percentage of thyroid-normal children had had their tonsils removed than those in whom the thyroid was enlarged at the time of the examination. While differences may be noted in the several age groups as regards absence of tonsils, removal often being associated with a higher percentage of thyroid-normal individuals, the evidence is suggestive rather than striking.

7. Enlargement of the tonsils was found more frequently among boys and girls without thyroid enlargement. While some of the evidence concerning hypertrophy of the tonsils in the several age groups is suggestive, the data are too uneven in trend to be convincing.

8. There was no consistent evidence of correlation between cryptic tonsils and thyroid status.

9. Marked thyroid enlargements among the girls are not associated with enlarged or cryptic tonsils as often as are slight thyroid enlargement. The size of the thyroid enlargement is probably independent of tonsillar or dental conditions.

10. Based upon the material gathered during the present investigation, it is believed that there is no definite relation between thyroid status and potential foci of infection presumably located in decayed teeth and enlarged or cryptic tonsils.

COMMENT

The number of children included in the present survey was small and the observations were subject to manifest limitations. Before the relationship between thyroid enlargement and potential foci of infection in the teeth and tonsils can be regarded as definitely determined it is desirable that additional studies be made in other sections of the country on a more comprehensive scale and possibly with different methods. Nevertheless it is felt that in so far as the present study is concerned, such a relationship is non-existent.

Despite these negative findings, neglect of oral hygiene is not advocated. On the contrary, renewed efforts to insure as nearly perfect denture as possible, through appropriate nutritional guidance and practice, as well as competent dental prophylaxis and treatment, are recommended and urged. Moreover, appropriate treatment for enlarged and diseased tonsils is likewise advised.

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TABLE 1.- *Number and percentage of normal and enlarged thyroids among 1,341 white boys and 1,576 white girls in the Cincinnati public schools, according to sex, age, and degree of thyroid enlargement*

Thyroid status	Age											
	All ages		11		12		13		14		15	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
NUMBER OF NORMAL AND ENLARGED THYROIDS												
Total.....	1,341	1,576	155	156	217	229	273	256	305	331	254	426
Normal.....	826	649	85	65	136	101	159	162	185	139	169	155
Enlarged.....	515	927	70	91	81	128	114	154	120	192	85	271
Slight.....	498	794	68	84	81	121	110	139	116	157	79	217
Moderate.....	14	109	2	7	-----	6	3	11	4	25	4	46
Marked.....	3	24	-----	-----	-----	1	1	4	-----	10	2	8
PERCENTAGE OF NORMAL AND ENLARGED THYROIDS												
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Normal.....	61.6	41.2	54.9	41.6	62.7	44.1	58.2	39.8	60.7	42.0	66.5	36.4
Enlarged.....	38.4	58.8	45.1	58.4	37.3	55.9	41.8	60.2	39.3	58.0	33.5	63.6
Slight.....	37.2	50.4	43.8	53.9	37.3	52.9	40.3	54.3	38.0	47.5	31.1	50.9
Moderate.....	1.0	6.9	1.3	4.5	-----	2.6	1.1	4.3	1.3	7.5	1.6	10.8
Marked.....	0.2	1.5	-----	-----	-----	0.4	0.4	1.6	-----	3.0	0.8	1.9

TABLE 2.—Numbers and percentages of individuals having no dental decay, slight, and marked dental decay among 1,341 white boys and 1,576 white girls in the Cincinnati public schools, according to ages of children and degrees of thyroid enlargement

Thyroid status	Dental condition							
	Boys							
	Numbers				Percentages			
	Total	Normal	Slight decay	Marked decay	Total	Normal	Slight decay	Marked decay
ALL AGES								
Total.....	1,341	829	177	335	100.0	61.7	13.2	25.0
Normal.....	826	520	93	213	100.0	63.0	11.3	25.7
Enlarged.....	515	309	84	122	100.0	60.0	16.3	23.7
Slight.....	498	298	81	119	100.0	59.8	16.2	23.8
Marked.....	17	11	3	3	100.0	64.8	17.6	17.6
9 AND 10 YEARS								
Total.....	90	47	18	25	100.0	52.3	20.0	27.8
Normal.....	53	31	11	11	100.0	58.6	20.7	20.7
Enlarged.....	37	16	7	14	100.0	43.2	18.9	37.9
Slight.....	37	16	7	14	100.0	43.2	18.9	37.9
Marked.....								
11 AND 12 YEARS								
Total.....	372	227	56	89	100.0	61.0	15.1	23.9
Normal.....	221	145	25	51	100.0	65.6	11.3	23.1
Enlarged.....	151	82	31	38	100.0	54.4	20.5	25.1
Slight.....	149	82	30	37	100.0	55.0	20.1	24.9
Marked.....	2		1	1	100.0		50.0	50.0
13 AND 14 YEARS								
Total.....	578	364	69	145	100.0	63.0	11.8	25.2
Normal.....	344	213	37	94	100.0	62.0	10.8	27.2
Enlarged.....	234	151	32	51	100.0	64.5	13.7	21.8
Slight.....	225	144	31	50	100.0	64.0	13.8	22.2
Marked.....	9	7	1	1	100.0	77.8	11.1	11.1
15 YEARS AND OVER								
Total.....	301	191	34	76	100.0	63.4	11.3	25.3
Normal.....	206	131	20	57	100.0	63.0	9.6	27.4
Enlarged.....	93	60	14	19	100.0	64.5	15.1	20.4
Slight.....	87	55	14	18	100.0	63.2	16.1	20.7
Marked.....	6	5		1	100.0	83.4		16.6

TABLE 2.—Numbers and percentages of individuals having no dental decay, slight, and marked dental decay among 1,341 white boys and 1,576 white girls in the Cincinnati public schools, according to ages of children and degrees of thyroid enlargement—Continued

Thyroid status	Dental condition							
	Girls							
	Numbers				Percentages			
	Total	Normal	Slight decay	Marked decay	Total	Normal	Slight decay	Marked decay
ALL AGES								
Total.....	1,576	1,057	187	332	100.0	67.1	11.8	21.1
Normal.....	649	433	73	143	100.0	66.8	11.2	22.0
Enlarged.....	927	624	114	189	100.0	67.3	12.3	20.4
Slight.....	794	529	101	164	100.0	66.6	12.7	20.7
Marked.....	133	95	13	25	100.0	71.4	9.8	18.8
9 AND 10 YEARS								
Total.....	95	60	10	25	100.0	63.2	10.5	26.3
Normal.....	57	36	8	13	100.0	63.2	14.0	22.8
Enlarged.....	38	24	2	12	100.0	63.2	5.3	31.5
Slight.....	35	23	1	11	100.0	65.7	2.8	31.5
Marked.....	3	1	1	1	100.0	33.3	33.3	33.3
11 AND 12 YEARS								
Total.....	385	271	48	66	100.0	70.4	12.5	17.1
Normal.....	166	116	19	31	100.0	69.9	11.4	18.7
Enlarged.....	219	155	29	35	100.0	70.3	13.2	16.0
Slight.....	205	144	28	33	100.0	70.2	13.7	16.1
Marked.....	14	11	1	2	100.0	78.6	7.1	14.3
13 AND 14 YEARS								
Total.....	587	394	68	125	100.0	67.1	11.6	21.3
Normal.....	241	158	28	55	100.0	65.5	11.6	22.9
Enlarged.....	346	236	40	70	100.0	68.2	11.6	20.2
Slight.....	296	201	35	60	100.0	67.9	11.8	20.3
Marked.....	50	35	5	10	100.0	70.0	10.0	20.0
15 YEARS AND OVER								
Total.....	509	332	61	116	100.0	65.2	12.0	22.8
Normal.....	185	123	18	44	100.0	66.4	9.8	23.8
Enlarged.....	324	209	43	72	100.0	64.6	13.2	22.2
Slight.....	258	161	37	60	100.0	62.4	14.3	23.3
Marked.....	66	48	6	12	100.0	72.8	9.1	18.1

TABLE 3.—Numbers and percentages of certain tonsillar conditions among 1,341 white boys and 1,576 white girls in the Cincinnati public schools, according to age and degree of thyroid enlargement

BOYS

Thyroid status	Number of tonsils					Percentage of tonsils				
	Total	Normal	Removed	Enlarged	Cryptic	Total	Normal	Removed	Enlarged	Cryptic

ALL AGES

Total.....	1,341	202	474	558	107	100.0	15.1	35.3	44.6	8.0
Normal.....	826	107	300	352	67	100.0	12.9	36.4	42.6	8.1
Enlarged.....	515	95	174	206	40	100.0	18.4	33.8	40.0	7.8
Slight.....	497	90	172	195	40	100.0	18.0	34.6	39.3	8.1
Marked.....	18	5	2	11	0	100.0	27.8	11.1	61.1	-----

9 AND 10 YEARS

Total.....	90	12	46	27	5	100.0	13.3	51.2	30.0	5.5
Normal.....	53	6	31	14	2	100.0	11.3	58.5	26.4	3.8
Enlarged.....	37	6	15	13	3	100.0	16.2	40.6	35.1	8.1
Slight.....	37	6	15	13	3	100.0	16.2	40.6	35.1	8.1
Marked.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

11 AND 12 YEARS

Total.....	372	55	140	143	34	100.0	14.8	37.6	38.5	9.1
Normal.....	221	25	84	92	20	100.0	11.3	38.0	41.6	9.0
Enlarged.....	151	30	56	51	14	100.0	19.9	37.1	33.8	9.2
Slight.....	149	29	56	50	14	100.0	19.5	37.6	33.5	9.4
Marked.....	2	1	-----	1	-----	100.0	50.0	-----	50.0	-----

13 AND 14 YEARS

Total.....	578	81	183	273	41	100.0	14.0	31.8	47.1	7.1
Normal.....	344	44	110	162	28	100.0	12.8	32.0	47.1	8.1
Enlarged.....	234	37	73	111	13	100.0	15.8	31.2	47.4	5.6
Slight.....	225	35	71	106	13	100.0	15.6	31.6	47.1	5.7
Marked.....	9	2	2	5	-----	100.0	22.2	22.2	55.6	-----

15 YEARS AND OVER

Total.....	301	54	105	115	27	100.0	17.9	34.9	38.2	9.0
Normal.....	208	32	75	84	17	100.0	15.4	36.0	40.4	8.2
Enlarged.....	93	22	30	31	10	100.0	23.7	32.3	33.3	10.7
Slight.....	86	20	30	26	10	100.0	23.3	34.9	30.2	11.6
Marked.....	7	2	-----	5	-----	100.0	28.6	-----	71.4	-----

TABLE 3.—Numbers and percentages of certain tonsillar conditions among 1,341 white boys and 1,576 white girls in the Cincinnati public schools, according to age and degree of thyroid enlargement—Continued

GIRLS

Thyroid status	Number of tonsils					Percentage of tonsils				
	Total	Normal	Re-moved	En-larged	Cryp-tic	Total	Normal	Re-moved	En-larged	Cryp-tic
ALL AGES										
Total.....	1,576	273	477	697	129	100.0	17.3	30.2	44.3	8.2
Normal.....	649	90	205	307	47	100.0	13.9	31.6	47.3	7.2
Enlarged.....	927	183	272	390	82	100.0	19.7	29.3	42.1	8.9
Slight.....	794	146	240	337	71	100.0	18.4	30.2	42.4	9.0
Marked.....	133	37	32	53	11	100.0	27.8	24.0	39.9	8.3
9 AND 10 YEARS										
Total.....	95	13	33	44	5	100.0	13.7	34.8	46.3	5.2
Normal.....	57	8	24	24	1	100.0	14.0	42.1	42.1	1.7
Enlarged.....	38	5	9	20	4	100.0	13.2	23.7	52.6	10.5
Slight.....	35	5	9	17	4	100.0	14.3	25.7	48.6	11.4
Marked.....	3			3		100.0			100.0	
11 AND 12 YEARS										
Total.....	385	56	128	168	33	100.0	14.6	33.3	43.6	8.5
Normal.....	166	17	56	75	18	100.0	10.2	33.8	45.2	10.8
Enlarged.....	219	39	72	93	15	100.0	17.8	32.9	42.5	6.8
Slight.....	205	33	71	87	14	100.0	16.1	34.7	42.4	6.8
Marked.....	14	6	1	6	1	100.0	42.9	7.1	42.8	7.1
13 AND 14 YEARS										
Total.....	587	109	174	261	43	100.0	18.6	29.6	44.5	7.5
Normal.....	241	32	79	117	13	100.0	13.3	32.8	48.5	5.4
Enlarged.....	346	77	95	144	30	100.0	22.3	27.5	41.6	8.6
Slight.....	296	63	84	124	25	100.0	21.3	28.4	41.9	8.4
Marked.....	50	14	11	20	5	100.0	28.0	22.0	40.0	10.0
15 YEARS AND OVER										
Total.....	509	95	142	225	47	100.0	18.7	27.9	44.2	9.2
Normal.....	185	33	46	92	14	100.0	17.9	24.9	49.7	7.5
Enlarged.....	324	62	96	133	33	100.0	19.1	29.7	41.0	10.2
Slight.....	258	45	76	109	28	100.0	17.5	29.5	42.2	10.8
Marked.....	66	17	20	24	5	100.0	25.8	30.3	36.4	7.5

COURT DECISIONS RELATING TO PUBLIC HEALTH

Legislature has power to change tuberculosis hospital district.—(Massachusetts Supreme Judicial Court; *Essex County v. City of Newburyport*, 150 N. E. 234; decided January 7, 1926.) By a 1916 law, Essex County, in common with other counties, was required to provide adequate hospital care for certain tuberculous persons. The county constructed a hospital and the expense of same was assessed upon cities and towns in the county. Certain cities, not including Newburyport, were exempted from all liability to contribute to the county hospital. By a law passed in 1917, the city of

Newburyport was also exempted from such liability. In 1924 a statute was enacted which provided that all the cities and towns in Essex County should constitute the Essex County tuberculosis hospital district, and the exemption from liability to contribute to the county hospital, formerly enjoyed by certain cities, including Newburyport, was expressly repealed. In an action by Essex County to recover the assessment required to be paid by the city of Newburyport to the county as specified by the 1924 statute, the supreme court held that the legislature could enact a law again including the defendant city in the tuberculosis hospital district and that the particular law in question was constitutional. A portion of the court's opinion follows:

The original unit established in the northeastern part of the Commonwealth for the administration of justice, the support of jails and houses of correction, and the registration of deeds and the transaction of other kindred public affairs was the county of Essex. When the legislature came to deal with the problem of proper provision for patients suffering from tuberculosis in Essex County in 1916 four cities were omitted from the district required to contribute for the cost of the hospital. It seems plain that at that time the whole county might have been made a unit for that purpose by the legislature and those four cities as well as all other cities and towns of the county required to contribute to that cost. The omitted cities did not have the same right to share in the benefits of the hospital as did those within the district. St. 1916, c. 286, now G. L. c. 111, sec. 88. By Sp. St. 1917, c. 107, in addition to the other four cities the defendant was exempted from the district. That that statute did not constitute a contract between the defendant and the Commonwealth is settled by *Boston, Pet'r*, 221 Mass. 468, 109 N. E. 389; *Chelsea v. City of Boston*, 245 U. S. 626, 38 S. Ct. 10, 62 L. Ed. 517. There is no sound constitutional ground for holding that the legislature could not do in 1924 with reference to the hospital district in Essex County that which it plainly had the right to do in 1916. Sp. St. 1917, c. 107, whereby the defendant was exempted from the provisions of St. 1916, was subject to change, modification, or repeal like any other statute. By St. 1924, c. 443, the defendant was reincorporated into the hospital district with whatever privileges and rights flow therefrom.

We are unable to perceive anything arbitrary, despotic, or constituting a flagrant misuse of legislative power. Such characteristics would render legislation contrary to constitutional guaranties. But they do not exist in St. 1924, c. 443.

Membership on city school committee and position of school medical inspector held incompatible.—(Massachusetts Supreme Judicial Court; *Barrett v. City of Medford*, 150 N. E. 159; decided January 8, 1926.) The plaintiff, while a member of the school committee of the city of Medford, was appointed by the said committee as medical inspector for the schools. He took no part officially as a member of the school committee in his appointment as medical inspector. After the plaintiff had served for several years as medical inspector, and at the same time as a member of the school committee, the mayor refused to approve the pay-roll item covering plaintiff's salary as medical inspector. The plaintiff continued to act as medical inspector for a period of several months without salary and then brought an action

against the city to recover for the services rendered as such inspector. While there was no statute, ordinance, or rule directly forbidding the appointment of a school-committee member as medical inspector, yet the supreme court decided that the two positions were inconsistent and denied recovery. The following is a portion of the opinion:

Having in mind that a member of either branch of a city council or of a municipal board of a city is not permitted to be personally interested directly or indirectly in a contract made by the city council, or other branch thereof, or by such board, or by authority derived therefrom, in which the city is an interested party, G. L. c. 268, sec. 9; that no "member of the city council shall, during the term for which he was chosen * * * be eligible to any office the salary of which is payable by the city," G. L. c. 39, sec. 8; that a board of health of a city, who are authorized to appoint a quarantine physician under an ordinance giving him a compensation fixed by the city council, may not appoint one of their own members such quarantine physician, *Gaw v. Ashley*, 195 Mass. 173, 80 N. E. 790, 122 Am. St. Rep. 229; that no member of a school committee shall be eligible to serve as teacher or superintendent in the public schools, St. 1904, c. 173; we think a school committee, in the absence of a statute permitting it, can not elect one of themselves to the salaried office of school physician. The duties he is to perform as physician are incompatible with the supervisory duties which as a member of the committee he should exercise over the incumbent of the office of school physician. Consistently he can not be master and servant.

Again, under the rules of the committee and G. L. c. 71, sec. 59, the superintendent of schools, under the direction of the school committee, is the "executive officer of the committee" who, among other services, has the duty to nominate for election "all principals, supervisors, teachers, janitors * * * and other school employees, make recommendations to the school committee regarding their duties, salaries, and dismissal." It is to be further observed that the superintendent of schools may hold his office by the deciding vote of the member whom he may subsequently nominate for school physician, with an accompanying recommendation of a stated salary for the incumbent of that office.

Examinations 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., May 3, 1926.

Chicago, Ill., May 3, 1926.

New Orleans, La., May 3, 1926.

San Francisco, Calif., May 3, 1926.

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.

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 March 20, 1926

ALABAMA		CALIFORNIA	
	Cases		Cases
Cerebrospinal meningitis.....	1	Cerebrospinal meningitis:.....	
Chicken pox.....	70	Los Angeles.....	1
Dengue.....	1	Ontario.....	1
Diphtheria.....	17	San Francisco.....	2
Influenza.....	1,607	Chicken pox.....	394
Lethargic encephalitis.....	1	Diphtheria.....	132
Malaria.....	7	Influenza.....	73
Measles.....	132	Lethargic encephalitis:	
Mumps.....	30	San Jose.....	1
Pellagra.....	6	Tulare County.....	1
Pneumonia.....	195	Measles.....	149
Scarlet fever.....	19	Mumps.....	334
Smallpox.....	21	Poliomyelitis:	
Tuberculosis.....	158	Long Beach.....	1
Typhoid fever.....	7	Los Angeles.....	2
Whooping cough.....	29	Los Angeles County.....	1
		Oakland.....	1
		San Jose.....	1
		Scarlet fever.....	152
		Smallpox:	
		Los Angeles.....	37
		Los Angeles County.....	13
		Oakland.....	20
		Scattering.....	28
		Typhoid fever.....	10
		Whooping cough.....	77
ARIZONA		COLORADO	
Chicken pox.....	3	Chicken pox.....	33
Diphtheria.....	2	Diphtheria.....	41
Influenza.....	226	German measles.....	2
Leprosy.....	1	Impetigo contagiosa.....	1
Mumps.....	3	Influenza.....	5
Pneumonia.....	1	Measles.....	5
Scarlet fever.....	6	Mumps.....	5
Trachoma.....	1	Pneumonia.....	5
Tuberculosis.....	27	Poliomyelitis.....	1
Whooping cough.....	1	Scarlet fever.....	51
		Smallpox.....	1
		Tuberculosis.....	16
		Typhoid fever.....	10
		Vincent's angina.....	2
		Whooping cough.....	65
ARKANSAS			
Chicken pox.....	29		
Dengue.....	1		
Diphtheria.....	3		
Hookworm disease.....	1		
Influenza.....	1,248		
Malaria.....	64		
Measles.....	54		
Mumps.....	26		
Pellagra.....	7		
Scarlet fever.....	12		
Smallpox.....	3		
Trachoma.....	7		
Tuberculosis.....	46		
Whooping cough.....	35		

CONNECTICUT		IDAHO	
	Cases		Cases
Cerebrospinal meningitis	1	Cerebrospinal meningitis	2
Chicken pox	56	Kellogg	5
Diphtheria	32	Post Falls	1
German measles	9	Weippe	1
Influenza	171	Chicken pox	1
Lethargic encephalitis	1	Diphtheria	3
Measles	1,171	Influenza	5
Mumps	7	Measles	8
Pneumonia (broncho)	97	Mumps	18
Pneumonia (lobar)	120	Pneumonia (broncho)	4
Scarlet fever	82	Scarlet fever	35
Septic sore throat	2	Smallpox:	
Tuberculosis (all forms)	28	Emmett	27
Typhoid fever	1	Scattering	12
Whooping cough	113	Typhoid fever	2
		Whooping cough	9
DELAWARE		ILLINOIS	
Chicken pox	2	Cerebrospinal meningitis—Tazewell County	1
Influenza	4	Diphtheria	85
Measles	92	Influenza	692
Pneumonia	4	Lethargic encephalitis—Lee County	1
Scarlet fever	8	Measles	977
Tuberculosis	2	Pneumonia	934
Whooping cough	4	Scarlet fever	468
DISTRICT OF COLUMBIA		Smallpox	31
Chicken pox	37	Tuberculosis	264
Diphtheria	9	Typhoid fever	9
Measles	459	Whooping cough	180
Pneumonia	38	INDIANA	
Scarlet fever	19	Cerebrospinal meningitis	1
Tuberculosis	33	Chicken pox	105
Whooping cough	30	Diphtheria	24
FLORIDA		Influenza	517
Cerebrospinal meningitis	1	Measles	1,785
Chicken pox	57	Mumps	3
Diphtheria	10	Pneumonia	55
German measles	1	Poliomyelitis	1
Influenza	20	Scarlet fever	246
Malaria	2	Smallpox	166
Measles	24	Tuberculosis	50
Mumps	26	Whooping cough	150
Pneumonia	8	KANSAS	
Scarlet fever	5	Chicken pox	89
Smallpox	129	Diphtheria	11
Tuberculosis	7	German measles	7
Typhoid fever	2	Influenza	54
Typhus fever	1	Lethargic encephalitis	1
Whooping cough	18	Measles	501
GEORGIA		Mumps	37
Anthrax	1	Pellagra	1
Cerebrospinal meningitis	1	Pneumonia	63
Chicken pox	60	Scarlet fever	95
Diphtheria	7	Septic sore throat	1
Hookworm disease	1	Smallpox	21
Influenza	757	Tetanus	1
Malaria	4	Tuberculosis	49
Measles	143	Typhoid fever	3
Mumps	43	Whooping cough	173
Pneumonia	86	LOUISIANA	
Scarlet fever	7	Diphtheria	12
Septic sore throat	8	Influenza	472
Smallpox	32	Lethargic encephalitis	1
Tuberculosis	32		
Whooping cough	13		

LOUISIANA—continued		MINNESOTA	
	Cases		Cases
Pneumonia.....	56	Chicken pox.....	141
Scarlet fever.....	10	Diphtheria.....	28
Smallpox.....	88	Influenza.....	3
Tuberculosis.....	31	Measles.....	289
Typhoid fever.....	8	Pneumonia.....	2
MAINE		Poliomyelitis.....	1
Cerebrospinal meningitis.....	1	Scarlet fever.....	335
Chicken pox.....	43	Smallpox.....	5
Diphtheria.....	4	Tuberculosis.....	52
German measles.....	16	Typhoid fever.....	1
Influenza.....	125	Whooping cough.....	81
Measles.....	283	MISSISSIPPI	
Mumps.....	47	Diphtheria.....	4
Pneumonia.....	34	Influenza.....	952
Scarlet fever.....	45	Scarlet fever.....	5
Tetanus.....	1	Smallpox.....	10
Tuberculosis.....	9	Typhoid fever.....	3
Vincent's angina.....	2	MISSOURI	
Whooping cough.....	35	Chicken pox.....	85
MARYLAND ¹		Diphtheria.....	59
Chicken pox.....	82	Influenza.....	58
Diphtheria.....	25	Measles.....	651
Dysentery.....	1	Mumps.....	71
German measles.....	2	Pneumonia.....	19
Influenza.....	445	Rabies (in animals).....	5
Measles.....	1,053	Scarlet fever.....	309
Mumps.....	150	Smallpox.....	14
Ophthalmia neonatorum.....	1	Trachoma.....	2
Pneumonia (broncho).....	99	Tuberculosis.....	30
Pneumonia (lobar).....	71	Typhoid fever.....	3
Scarlet fever.....	50	Whooping cough.....	59
Septic sore throat.....	3	MONTANA	
Tuberculosis.....	43	Cerebrospinal meningitis.....	1
Typhoid fever.....	8	Chicken pox.....	25
Whooping cough.....	49	Diphtheria.....	2
MASSACHUSETTS		German measles.....	43
Anthrax.....	1	Influenza.....	134
Cerebrospinal meningitis.....	2	Measles.....	20
Chicken pox.....	151	Mumps.....	22
Conjunctivitis (suppurative).....	4	Scarlet fever.....	60
Diphtheria.....	66	Smallpox.....	8
German measles.....	246	Tuberculosis.....	2
Influenza.....	272	Whooping cough.....	6
Lethargic encephalitis.....	4	NEBRASKA	
Measles.....	1,251	Chicken pox.....	19
Mumps.....	95	Diphtheria.....	4
Ophthalmia neonatorum.....	42	Influenza.....	2
Pneumonia (lobar).....	237	Measles.....	29
Poliomyelitis.....	1	Mumps.....	9
Scarlet fever.....	281	Pneumonia.....	4
Septic sore throat.....	1	Scarlet fever.....	46
Trachoma.....	1	Smallpox.....	18
Tuberculosis (pulmonary).....	109	Tuberculosis.....	12
Tuberculosis (other forms).....	24	Whooping cough.....	16
Typhoid fever.....	5	NEW JERSEY	
Whooping cough.....	520	Cerebrospinal meningitis.....	4
MICHIGAN		Chicken pox.....	173
Diphtheria.....	126	Diphtheria.....	66
Measles.....	1,698	Influenza.....	151
Pneumonia.....	364	Malaria.....	1
Scarlet fever.....	335	Measles—Trenton.....	182
Smallpox.....	11	Pneumonia.....	327
Tuberculosis.....	60	Poliomyelitis.....	3
Typhoid fever.....	7		
Whooping cough.....	264		

¹ Week ended Friday.

NEW JERSEY—continued	
	Cases
Scarlet fever.....	187
Typhoid fever.....	4
Whooping cough.....	79

NEW MEXICO

Chicken pox.....	9
Conjunctivitis.....	11
Diphtheria.....	3
Influenza.....	22
Measles.....	1
Mumps.....	14
Pneumonia.....	32
Rabies (in animals).....	4
Scarlet fever.....	2
Septic sore throat.....	3
Smallpox.....	1
Tuberculosis.....	49
Whooping cough.....	19

NEW YORK

(Exclusive of New York City)

Chicken pox.....	217
Diphtheria.....	77
German measles.....	282
Influenza.....	3,352
Lethargic encephalitis.....	4
Measles.....	1,283
Mumps.....	183
Pneumonia.....	831
Poliomyelitis.....	1
Scarlet fever.....	294
Septic sore throat.....	5
Smallpox.....	1
Tetanus.....	1
Typhoid fever.....	14
Vincent's angina.....	13
Whooping cough.....	477

NORTH CAROLINA

Chicken pox.....	163
Diphtheria.....	13
German measles.....	164
Measles.....	179
Scarlet fever.....	24
Septic sore throat.....	1
Smallpox.....	10
Typhoid fever.....	2
Whooping cough.....	81

OKLAHOMA

(Exclusive of Tulsa and Oklahoma City)

Chicken pox.....	32
Diphtheria.....	11
Influenza.....	2,511
Malaria.....	9
Measles.....	24
Mumps.....	4
Pellagra.....	1
Pneumonia.....	207
Scarlet fever.....	28
Smallpox.....	36
Typhoid fever.....	2
Whooping cough.....	61

1 Deaths

OREGON	
	Cases
Cerebrospinal meningitis.....	1
Chicken pox.....	48
Diphtheria.....	9
Influenza.....	136
Measles.....	37
Mumps.....	57
Pneumonia.....	210
Rocky Mountain spotted fever.....	1
Scarlet fever.....	52
Smallpox:	
Linn County.....	17
Scattering.....	21
Tuberculosis.....	5
Whooping cough.....	44

PENNSYLVANIA

Anthrax—Philadelphia.....	1
Cerebrospinal meningitis—Minersville.....	1
Chicken pox.....	500
Diphtheria.....	178
German measles.....	45
Impetigo contagiosa.....	7
Lethargic encephalitis:	
Bethlehem.....	1
Philadelphia.....	1
Measles.....	3,480
Mumps.....	145
Ophthalmia neonatorum—Philadelphia.....	3
Pneumonia.....	153
Scabies.....	5
Scarlet fever*.....	540
Tetanus—Woodlawn.....	1
Tuberculosis.....	82
Typhoid fever.....	22
Whooping cough.....	376

RHODE ISLAND

Chicken pox.....	2
Diphtheria.....	9
German measles.....	18
Influenza.....	127
Measles.....	165
Mumps.....	7
Scarlet fever.....	7
Septic sore throat.....	1
Tuberculosis.....	3
Whooping cough.....	4

SOUTH DAKOTA

Chicken pox.....	10
Diphtheria.....	1
Measles.....	15
Mumps.....	101
Pneumonia.....	6
Scarlet fever.....	41
Smallpox.....	3
Whooping cough.....	2

TENNESSEE

Chicken pox.....	46
Diphtheria.....	8
Influenza.....	672
Malaria.....	3

TENNESSEE—continued		WASHINGTON—continued	
	Cases		Cases
Measles.....	249	Pneumonia.....	1
Mumps.....	47	Scarlet fever.....	73
Pellagra.....	2	Smallpox:	
Pneumonia.....	106	Chelan County.....	11
Scarlet fever.....	25	Seattle.....	11
Smallpox.....	13	Tacoma.....	13
Trachoma.....	2	Scattering.....	42
Tuberculosis.....	37	Tuberculosis.....	16
Typhoid fever.....	4	Typhoid fever.....	2
Whooping cough.....	10	Whooping cough.....	57
TEXAS		WEST VIRGINIA	
Chicken pox.....	58	Diphtheria.....	5
Diphtheria.....	38	Measles.....	350
Influenza.....	636	Scarlet fever.....	11
Measles.....	14	Typhoid fever.....	2
Mumps.....	64	WISCONSIN	
Pellagra.....	2	Milwaukee:	
Pneumonia.....	57	Chicken pox.....	101
Scarlet fever.....	35	Diphtheria.....	18
Smallpox.....	69	German measles.....	3
Tuberculosis.....	21	Influenza.....	7
Typhoid fever.....	1	Measles.....	114
Whooping cough.....	50	Mumps.....	49
UTAH		Pneumonia.....	26
Cerebrospinal meningitis—Salt Lake City....	1	Scarlet fever.....	22
Chicken pox.....	15	Tuberculosis.....	25
Diphtheria.....	2	Typhoid fever.....	1
Influenza.....	13	Whooping cough.....	105
Mumps.....	31	Scattering:	
Pneumonia.....	1	Cerebrospinal meningitis.....	1
Scarlet fever.....	5	Chicken pox.....	155
Smallpox.....	2	Diphtheria.....	20
Whooping cough.....	64	German measles.....	23
VERMONT		Influenza.....	189
Chicken pox.....	9	Lethargic encephalitis.....	1
Diphtheria.....	1	Measles.....	546
Measles.....	19	Mumps.....	165
Mumps.....	33	Pneumonia.....	24
Scarlet fever.....	8	Poliomyelitis.....	1
Whooping cough.....	50	Scarlet fever.....	151
WASHINGTON		Smallpox.....	13
Cerebrospinal meningitis:		Tuberculosis.....	19
Seattle.....	2	Typhoid fever.....	4
Spokane.....	14	Whooping cough.....	145
Tacoma.....	1	WYOMING	
Chicken pox.....	86	Chicken pox.....	11
Diphtheria.....	17	Diphtheria.....	5
German measles.....	84	German measles.....	4
Influenza.....	22	Influenza.....	16
Measles.....	42	Measles.....	3
Mumps.....	108	Mumps.....	2
		Pneumonia.....	3
		Scarlet fever.....	21
		Whooping cough.....	6

Reports for Week Ended March 13, 1926

DISTRICT OF COLUMBIA		NORTH DAKOTA	
	Cases		Cases
Chicken pox.....	22	Chicken pox.....	19
Diphtheria.....	14	Diphtheria.....	9
Influenza.....	1	German measles.....	174
Lethargic encephalitis.....	1	Influenza.....	117
Measles.....	212	Measles.....	51
Pellagra.....	1	Mumps.....	19
Pneumonia.....	70	Pneumonia.....	33
Scarlet fever.....	17	Scarlet fever.....	124
Smallpox.....	1	Smallpox.....	4
Tuberculosis.....	36	Whooping cough.....	17
Typhoid fever.....	1		
Whooping cough.....	22		

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	Cerebro-spinal meningitis	Diphtheria	Influenza	Malaria	Measles	Pellagra	Polio-myelitis	Scarlet fever	Small-pox	Typhoid fever
<i>January, 1926</i>										
Hawaii.....	1	30	20	-----	23	-----	0	2	0	5
<i>February, 1926</i>										
Michigan.....	-----	381	28	0	7,807	-----	0	1,503	32	20
New Jersey.....	10	341	183	1	8,578	-----	0	813	0	17
North Dakota.....	-----	10	16	-----	88	-----	9	470	34	5
Tennessee.....	3	63	974	14	1,565	18	3	160	94	29

Number of Cases of Certain Communicable Diseases Reported for the Month of January, 1926, by State Health Officers

State	Chicken pox	Diphtheria	Measles	Mumps	Scarlet fever	Small-pox	Tuberculosis	Typhoid fever	Whooping cough
Alabama.....	415	118	78	425	98	157	167	50	113
Arizona.....	52	29	4	27	64	1	55	5	28
Arkansas.....	77	24	3	23	31	13	23	19	32
California.....	1,231	437	218	1,023	729	442	684	50	351
Colorado.....	284	106	40	32	143	1	159	8	214
Connecticut.....	601	186	2,600	58	338	0	151	12	332
Delaware.....	23	24	180	3	34	0	34	1	5
District of Columbia.....	128	132	99	-----	114	0	81	1	34
Florida.....	142	72	20	107	42	322	37	32	20
Georgia.....	89	83	171	134	59	74	106	49	55
Idaho.....	-----	23	-----	-----	63	0	-----	2	-----
Illinois.....	1,945	486	1,825	378	1,847	177	954	111	739
Indiana.....	397	189	1,297	11	975	526	195	28	309
Iowa.....	220	86	642	116	295	158	18	(1)	86
Kansas.....	594	101	250	77	411	32	194	11	322
Kentucky ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Louisiana.....	53	106	4	7	46	181	178	78	26
Maine.....	135	27	51	109	165	0	26	11	123
Maryland.....	715	131	4,380	595	205	0	344	21	255
Massachusetts.....	1,145	391	6,573	343	1,289	0	644	27	1,683
Michigan.....	956	400	4,834	97	1,452	89	329	39	1,032
Minnesota.....	749	282	134	-----	1,434	28	201	12	176
Mississippi.....	728	94	1,398	956	1,65	91	295	63	925
Missouri.....	448	376	229	282	1,030	48	228	18	139
Montana.....	144	27	31	250	147	46	44	2	76
Nebraska ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Nevada ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
New Hampshire ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
New Jersey.....	1,749	441	5,217	-----	927	2	457	38	279
New Mexico ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
New York.....	2,958	1,040	9,335	726	1,770	5	1,425	185	1,737
North Carolina.....	758	206	383	-----	249	156	-----	22	466
North Dakota.....	148	28	60	208	383	27	4	8	64
Ohio.....	1,492	513	11,997	158	1,655	463	523	87	1,093
Oklahoma ¹	168	128	40	29	1,55	73	74	60	196
Oregon.....	137	109	65	205	224	313	54	22	153
Pennsylvania ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Rhode Island.....	54	69	2,214	12	52	0	38	2	67
South Carolina.....	38	136	1	9	46	52	162	50	341
South Dakota.....	97	33	20	260	442	35	3	4	15
Tennessee.....	253	70	838	42	151	49	167	26	80
Texas ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Utah ¹	-----	-----	-----	-----	-----	-----	-----	-----	-----
Vermont.....	234	19	43	81	86	0	15	3	211
Virginia.....	847	228	933	-----	396	92	145	22	684
Washington.....	483	70	66	588	433	426	113	9	255
West Virginia.....	175	121	461	-----	242	31	35	39	192
Wisconsin.....	1,333	218	630	854	768	70	124	18	599
Wyoming.....	55	14	7	22	75	7	1	0	53

¹ Reports not required by law.² Reports received weekly.³ Pulmonary.⁴ Report not received at time of going to press.⁵ Reports received annually.⁶ Exclusive of Oklahoma City and Tulsa.

Case Rates per 1,000 Population (Annual Basis) for the Month of January, 1926

State	Chick- en pox	Diph- theria	Meas- les	Mumps	Scar- let fever	Small- pox	Tuber- culosis	Ty- phoid fever	Whoop- ing cough
Alabama	1.96	0.56	0.37	2.01	0.46	0.74	0.79	0.24	0.53
Arizona	1.45	0.81	0.11	.75	1.79	.03	1.54	.14	.78
Arkansas	.48	.15	.02	.14	.20	.08	.14	.12	.20
California	3.51	1.25	.62	2.92	2.08	1.26	1.95	.14	1.00
Colorado	3.23	1.21	.46	.36	1.63	.01	1.81	.09	2.44
Connecticut	4.54	1.41	19.64	.44	2.55	.00	1.14	.09	2.51
Delaware	1.14	1.19	8.95	.15	1.69	.00	1.69	.05	.25
District of Columbia	2.96	3.05	2.29		2.64	.06	1.87	.02	.79
Florida	1.50	.76	.21	1.13	.44	3.41	.39	.34	.21
Georgia	.34	.32	.65	.51	.22	.28	.40	.19	.21
Idaho		.54			1.47	.00		.05	
Illinois	3.25	.81	3.05	.63	3.08	.30	1.59	.19	1.23
Indiana	1.52	.72	4.95	.04	3.72	2.01	.74	.11	1.18
Iowa	1.03	.40	2.99	.54	1.38	.74	.06	(¹)	.40
Kansas	3.84	.65	1.62	.50	2.66	.21	1.25	.07	2.08
Kentucky ²									
Louisiana	.33	.66	.02	.04	.29	1.13	³ 1.11	.49	.16
Maine	2.02	.40	.76	1.63	2.47	.00	.39	.16	1.84
Maryland	5.42	.99	33.21	4.51	1.55	.00	2.61	.16	1.93
Massachusetts	3.22	1.10	18.52	.97	3.63	.00	1.81	.08	4.74
Michigan	2.65	1.11	13.41	.27	4.08	.25	.91	.11	2.86
Minnesota	3.40	1.28	.61		6.50	.13	.91	.05	.80
Mississippi	4.79	.62	9.19	6.29	.43	.60	1.94	.35	6.08
Missouri	1.52	1.27	.78	.95	3.49	.16	.77	.06	.47
Montana	2.55	.48	.55	4.43	2.60	.81	.78	.04	1.35
Nebraska ⁴									
Nevada ⁴									
New Hampshire ⁴									
New Jersey	5.77	1.45	17.21		3.06	.01	1.51	.13	.92
New Mexico ²									
New York	3.10	1.09	9.78	.76	1.85	.01	1.49	.19	1.82
North Carolina	3.19	.87	1.61		1.05	.66		.09	1.96
North Dakota	2.51	.48	1.02	3.53	6.50	.46	.07	.14	1.09
Ohio	2.73	.94	21.99	.29	3.03	.85	.96	.10	2.00
Oklahoma ⁴	.87	.66	.21	.15	.80	.38	.38	.31	1.01
Oregon	1.88	1.50	.89	2.62	3.08	4.30	.74	.30	2.10
Pennsylvania ⁴									
Rhode Island	.96	1.26	40.37	.22	.95	.00	.69	.04	1.22
South Carolina	.25	.89	.01	.06	.30	.34	1.06	.33	2.23
South Dakota	1.70	.58	.35	4.56	7.75	.61	.05	.07	.26
Tennessee	1.22	.34	4.04	.20	.73	.24	.81	.13	.39
Texas ²									
Utah ⁴									
Vermont	7.82	.63	1.44	2.71	2.87	.00	³ .50	.10	7.05
Virginia	4.03	1.08	4.44		1.88	.44	³ .69	.10	3.16
Washington	3.79	.55	.52	4.61	3.40	3.34	.89	.07	2.00
West Virginia	1.27	.88	3.34		1.75	.22	.25	.28	1.39
Wisconsin	5.54	.91	2.62	3.55	3.19	.29	.52	.07	2.49
Wyoming	2.85	.73	.86	1.14	3.89	.36	.06	.00	2.75

¹ Reports not required by law.² Reports received weekly.³ Pulmonary.⁴ Report not received at time of going to press.⁵ Reports received annually.⁶ Exclusive of Oklahoma City and Tulsa.

INFLUENZA AT SAULT STE. MARIE, MICH.

An epidemic of mild influenza was reported at Sault Ste. Marie, Mich., March 10, 1926.

TYPHUS FEVER AT EL PASO, TEX.

Under date of March 10, 1926, three cases of typhus fever with one death were reported at El Paso, Tex. All of the patients had visited Mexico. The health authorities are taking precautions to prevent the spread of the disease.

PLAGUE-ERADICATIVE MEASURES IN THE UNITED STATES

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

Week ended Mar. 6, 1926:

Number of rats trapped.....	2, 364
Number of rats found to be plague infected.....	0
Number of squirrels examined.....	841
Number of squirrels found to be plague infected.....	0
Number of mice trapped.....	2, 588
Number of mice found to be plague infected.....	0

Date of discovery of last plague-infected rodent, Nov. 6, 1925.

Date of last human case, Jan. 15, 1925.

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

Diphtheria.—For the week ended March 6, 1926, 37 States reported 1,245 cases of diphtheria. For the week ended March 7, 1925, the same States reported 1,478 cases of this disease. Ninety-nine cities, situated in all parts of the country and having an aggregate population of more than 29,500,000, reported 704 cases of diphtheria for the week ended March 6, 1926. Last year for the corresponding week they reported 882 cases. The estimated expectancy for these cities was 978 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Measles.—Thirty-four States reported 16,944 cases of measles for the week ended March 6, 1926, and 4,275 cases of this disease for the week ended March 7, 1925. Ninety-nine cities reported 10,294 cases of measles for the week this year, and 2,256 cases last year.

Poliomyelitis.—The health officers of 37 States reported 16 cases of poliomyelitis for the week ended March 6, 1926. The same States reported 17 cases for the week ended March 7, 1925.

Scarlet fever.—Scarlet fever was reported for the week as follows: Thirty-seven States—this year, 4,073 cases; last year, 4,478 cases; 99 cities—this year, 1,641 cases; last year, 2,019 cases; estimated expectancy, 1,200 cases.

Smallpox.—For the week ended March 6, 1926, 37 States reported 970 cases of smallpox. Last year for the corresponding week they reported 960 cases. Ninety-nine cities reported smallpox for the week as follows: 1926, 265 cases; 1925, 344 cases; estimated expectancy, 133 cases. Nine deaths from smallpox were reported by these cities for the week this year—8 at Los Angeles, Calif., and 1 at San Francisco, Calif.

Typhoid fever.—One hundred and eighty cases of typhoid fever were reported for the week ended March 6, 1926, by 36 States. For the corresponding week of 1925, the same States reported 215 cases of this disease. Ninety-nine cities reported 57 cases of typhoid

fever for the week this year and 57 cases for the corresponding week last year. The estimated expectancy for these cities was 43 cases.

Influenza and pneumonia.—Deaths from influenza and pneumonia were reported for the week by 92 cities, with a population of more than 28,800,000, as follows: 1926, 1,783 deaths; 1925, 1,220.

City reports for week ended March 6, 1926

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 1917 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, 1925, estimated	Chick- en pox, cases re- ported	Diphtheria		Influenza		Meas- les, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
			Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported			
NEW ENGLAND									
Maine:									
Portland.....	75,333	12	2	0	0	0	11		
New Hampshire:									
Concord.....	22,546	0	0	0	0	0	3	0	2
Manchester.....	83,097	0	3	0	0	0	14	0	1
Vermont:									
Barre.....	10,008	0	1	0	0	0	0	0	0
Massachusetts:									
Boston.....	779,620	54	61	22	13	1	191	31	39
Fall River.....	128,993	4	4	4	0	0	21	4	4
Springfield.....	142,065	12	4	0	3	2	264	0	1
Worcester.....	190,757	2	4	1	0	0	11	3	4
Rhode Island:									
Pawtucket.....	69,760	2	1	2	0	0	125	0	3
Providence.....	267,918	0	11	5	0	1	288	0	7
Connecticut:									
Bridgeport.....	(1)	1	8	5	2	0	13	0	
Hartford.....	160,197	4	9	0	0	0	75	0	5
New Haven.....	178,927	25	3	1	2	1	33	2	7
MIDDLE ATLANTIC									
New York:									
Buffalo.....	538,016	19	14	6	3	1	10	1	11
New York.....	5,873,356	158	220	129	208	61	2,349	32	361
Rochester.....	316,786	16	8	10	126	8	39	1	26
Syracuse.....	182,003	27	6	2	4	1	63	46	5
New Jersey:									
Camden.....	128,642	9	4	5	3	4	42	0	22
Newark.....	452,513	49	17	10	36	0	572	7	23
Trenton.....	132,020	2	4	1	44	5	4	1	13
Pennsylvania:									
Philadelphia.....	1,979,364	102	83	52	35	54	570	15	210
Pittsburgh.....	631,563	34	22	7		2	37	0	40
Reading.....	112,707	13	3	1	0	0	11	1	6
EAST NORTH CENTRAL									
Ohio:									
Cincinnati.....	409,333	11	10	4	1	5	6	6	9
Cleveland.....	936,485	37	29	27	2	0	798	1	36
Columbus.....	279,836	19	4	1	0	3	400	3	7
Toledo.....	287,380	51	6	4	0	3	85	0	5
Indiana:									
Fort Wayne.....	97,846	10	3	2	0	0	0	3	2
Indianapolis.....	358,819	33	8	4	0	0	1,250	2	22
South Bend.....	80,091	6	1	1	0	0	4	0	3
Terre Haute.....	71,071	6	1	0	0	1	7	0	1

No estimate made.

City reports for week ended March 6, 1926—Continued

Division, State, and city	Population July 1, 1925, estimated	Chick- en pox, cases re- ported	Diphtheria		Influenza		Meas- les, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
			Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported			
EAST NORTH CENTRAL— continued									
Illinois:									
Chicago.....	2,995,239	132	105	65	58	7	153	10	127
Peoria.....	81,564	5	2	0	0	0	19	23	4
Springfield.....	63,923	15	1	1	3	1	7	4	1
Michigan:									
Detroit.....	1,245,824	46	55	54	16	3	1,119	12	77
Flint.....	130,316	14	6	1	0	0	7	1	2
Grand Rapids.....	153,698	25	3	2	0	0	23	0	2
Wisconsin:									
Madison.....	46,385	9	1	0	0	0	115	0	1
Milwaukee.....	509,192	69	15	16	0	0	60	38	8
Racine.....	67,707	6	1	2	0	0	2	0	2
Superior.....	39,671	0	0	0	0	0	0	0	2
WEST NORTH CENTRAL									
Minnesota:									
Duluth.....	110,502	8	1	0	0	0	7	0	0
Minneapolis.....	425,435	100	17	13	9	0	115	4	9
St. Paul.....	246,001	25	14	11	0	1	6	6	11
Iowa:									
Davenport.....	(1)	3	1	2	0	—	0	0	—
Sioux City.....	(1)	3	2	0	9	—	1	0	—
Waterloo.....	36,771	4	0	0	0	—	30	0	—
Missouri:									
Kansas City.....	367,481	—	8	—	—	—	—	—	—
St. Joseph.....	78,342	2	2	2	0	0	0	0	3
St. Louis.....	821,543	42	42	74	2	—	110	5	—
North Dakota:									
Fargo.....	26,403	2	0	0	0	—	0	18	—
Grand Forks.....	14,811	0	0	0	0	—	3	0	—
South Dakota:									
Aberdeen.....	15,036	2	0	0	0	—	23	85	—
Sioux Falls.....	30,127	1	1	0	0	—	6	0	0
Nebraska:									
Lincoln.....	60,941	8	1	0	0	1	0	1	1
Omaha.....	211,768	18	5	1	0	0	14	1	10
Kansas:									
Topeka.....	55,411	8	1	1	0	0	11	1	0
Wichita.....	88,367	13	3	0	0	1	63	1	6
SOUTH ATLANTIC									
Delaware:									
Wilmington.....	122,049	4	2	7	0	0	151	0	25
Maryland:									
Baltimore.....	796,296	95	26	17	71	7	871	194	48
Cumberland.....	33,741	1	0	4	3	0	2	0	5
Frederick.....	12,035	0	0	0	0	1	10	0	0
District of Columbia:									
Washington.....	497,906	31	13	19	8	2	148	0	39
Virginia:									
Lynchburg.....	30,395	21	1	1	0	0	11	2	4
Norfolk.....	(1)	20	2	1	0	0	7	4	7
Richmond.....	186,403	1	2	2	0	4	9	4	10
Roanoke.....	58,208	1	1	2	0	0	73	1	3
West Virginia:									
Charleston.....	49,019	3	1	0	6	0	16	0	0
Wheeling.....	56,208	2	1	2	0	0	28	0	5
North Carolina:									
Raleigh.....	30,371	1	1	0	0	1	0	0	2
Wilmington.....	37,061	25	0	0	0	1	0	2	4
Winston-Salem.....	69,031	3	0	1	0	0	88	1	4
South Carolina:									
Charleston.....	73,125	0	0	0	40	4	4	0	3
Columbia.....	41,225	3	1	0	0	—	1	1	—
Greenville.....	27,311	0	1	0	0	0	0	4	2
Georgia:									
Atlanta.....	(1)	8	2	1	148	4	4	0	9
Brunswick.....	16,809	21	0	0	1	0	0	0	0
Savannah.....	93,134	1	1	1	20	—	12	0	5

¹ No estimate made.

City reports for week ended March 6, 1926—Continued

Division, State, and city	Population July 1, 1925, estimated	Chick- en pox, cases re- ported	Diphtheria		Influenza		Meas- les, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
			Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported			
SOUTH ATLANTIC—CON.									
Florida:									
St. Petersburg.....	26,847		0			0			1
Tampa.....	94,743	0	2	0	2	1	1	1	6
EAST SOUTH CENTRAL									
Kentucky:									
Covington.....	58,309	0	1	0	0		0	0	3
Louisville.....	305,935	9	6	3	10	0	140	0	17
Tennessee:									
Memphis.....	174,533	20	5	3	0	9	14	2	10
Nashville.....	136,220	4	1	0	0	7	92	1	6
Alabama:									
Birmingham.....	205,670	19	2	1	341	30	9	1	21
Mobile.....	65,955	2	1	1	5	4	0	0	3
Montgomery.....	46,481	9	0	1	5	0	0	13	0
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith.....	31,643	11	1	0	0		1	0	
Little Rock.....	74,216	5	0	0	27	3	0	1	1
Louisiana:									
New Orleans.....	414,493	6	11	10	24	14	1	0	19
Shreveport.....	57,857	5	1	0	11	0	0	0	0
Oklahoma:									
Oklahoma City.....	(1)	1	2	0	46	1	0	1	7
Tulsa.....	124,478	1	1	1	0		2	0	
Texas:									
Dallas.....	194,450	21	5	4	16	4	1	0	16
Galveston.....	48,375	4	1	1	0	0	0	0	3
Houston.....	164,954	1	2	7	0	1	1	1	27
San Antonio.....	198,069	1	2	2	1	6	0	0	16
MOUNTAIN									
Montana:									
Billings.....	17,971	1	0	0	0	0	4	7	0
Great Falls.....	29,883	18	1	0	0	1	1	23	2
Helena.....	12,037	0	0	0	0	0	0	0	1
Missoula.....	12,668	0	0	0	70	2	0	0	0
Idaho:									
Boise.....	23,042	1	0	0	0	0	0	0	0
Colorado:									
Denver.....	280,911	31	8	2		9	10	2	17
Pueblo.....	43,787	4	2	0	0	0	8	0	2
New Mexico:									
Albuquerque.....	21,000	1	1	5	0	0	1	7	5
Arizona:									
Phoenix.....	38,669	2		0	0	0	0	0	1
Utah:									
Salt Lake City.....	130,948	17	2	6	0	0	0	28	4
Nevada:									
Reno.....	12,665	0	0	0	0	0	0	2	0
PACIFIC									
Washington:									
Seattle.....	(1)	48	6	12	0		33	89	
Spokane.....	108,897	8	3	8	0		0	0	
Tacoma.....	104,455		1						
Oregon:									
Portland.....	282,383	19	5	13	10	1	8	8	4
California:									
Los Angeles.....	(1)	118	33	37	26	6	11	11	26
Sacramento.....	72,260	3	1	1	0	0	0	0	2
San Francisco.....	557,530	57	24	12	3	3	55	17	5

1 No estimate made.

City reports for week ended March 6, 1926—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expec- tancy	Cases re- ported	Cases, esti- mated expec- tancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expec- tancy	Cases re- ported	Deaths re- ported		
NEW ENGLAND											
Maine:											
Portland.....	2	2	0	0	0	1	0	1	0	11	17
New Hampshire:											
Concord.....	1	0	0	0	0	0	0	0	0	0	11
Manchester.....	2	6	0	0	0	0	0	0	1	0	12
Vermont:											
Barre.....	1	0	0	0	0	2	0	0	0	0	2
Massachusetts:											
Boston.....	61	83	0	0	0	9	2	2	0	184	274
Fall River.....	3	3	0	0	0	2	1	0	0	2	35
Springfield.....	7	9	0	0	0	7	0	0	0	18	31
Worcester.....	10	4	0	0	0	5	1	0	0	12	63
Rhode Island:											
Pawtucket.....	1	1	0	0	0	2	0	0	0	6	31
Providence.....	8	5	0	0	0	1	0	0	0	0	63
Connecticut:											
Bridgeport.....	9	19	0	0	0	2	0	0	0	0	43
Hartford.....	6	7	0	0	0	3	0	0	0	8	44
New Haven.....	6	14	0	0	0	0	0	2	0	22	42
MIDDLE ATLANTIC											
New York:											
Buffalo.....	19	18	0	0	0	14	1	1	0	29	143
New York.....	257	173	0	0	0	101	7	2	4	82	1,851
Rochester.....	18	8	0	0	0	2	1	2	0	15	120
Syracuse.....	16	3	0	0	0	2	0	0	0	60	67
New Jersey:											
Camden.....	4	14	0	0	0	2	0	0	0	0	66
Newark.....	24	35	1	0	0	10	0	0	0	26	131
Trenton.....	4	1	0	0	0	2	0	1	0	0	57
Pennsylvania:											
Philadelphia.....	74	65	0	0	0	49	3	2	0	49	870
Pittsburgh.....	26	47	0	0	0	9	0	1	1	36	217
Reading.....	2	8	0	0	0	3	0	0	0	5	45
EAST NORTH CENTRAL											
Ohio:											
Cincinnati.....	13	35	2	2	0	17	1	1	0	66	127
Cleveland.....	34	100	1	0	0	16	1	0	0	114	218
Columbus.....	9	16	1	7	0	11	0	0	0	5	94
Toledo.....	21	13	3	0	0	4	0	0	0	27	65
Indiana:											
Fort Wayne.....	4	8	1	0	0	0	1	0	0	1	23
Indianapolis.....	8	14	6	22	0	7	0	0	0	63	113
South Bend.....	4	2	1	2	0	0	0	0	0	4	14
Terre Haute.....	3	2	1	0	0	0	0	0	0	2	20
Illinois:											
Chicago.....	129	129	3	1	0	52	3	3	0	44	803
Peoria.....	4	6	1	0	0	0	0	0	0	11	32
Springfield.....	1	5	1	0	0	2	0	1	0	17	21
Michigan:											
Detroit.....	93	117	3	0	0	17	1	2	0	44	365
Flint.....	7	25	1	0	0	0	0	0	0	22	20
Grand Rapids.....	9	24	1	0	0	0	1	0	0	60	30
Wisconsin:											
Madison.....	4	4	0	0	0	1	0	0	0	4	8
Milwaukee.....	33	18	4	0	0	10	0	0	0	56	116
Racine.....	3	5	1	0	0	1	0	0	0	34	13
Superior.....	2	3	4	0	0	0	0	0	0	0	7
WEST NORTH CENTRAL											
Minnesota:											
Duluth.....	4	17	1	0	0	1	1	0	0	16	11
Minneapolis.....	40	69	11	0	0	3	0	0	0	5	89
St. Paul.....	28	48	7	0	0	2	1	0	0	49	67

¹ Pulmonary tuberculosis only.

City reports for week ended March 6, 1926—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuber- culosis, deaths re- ported	Typhoid fever			Whoop- ing cough, cases re- ported	Deaths, all causes
	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported		
WEST NORTH CENTRAL—contd											
Iowa:											
Davenport.....	2	2	2	0			1	0		4	
Sioux City.....	2	0	1	2			0	0		1	
Waterloo.....	2	1	1	1			0	0		1	
Missouri:											
Kansas City.....	11		2				0				
St. Joseph.....	3	3	0	0	0	0	0	0	0	0	34
St. Louis.....	32	185	5	10	0	14	1	0	0	10	237
North Dakota:											
Fargo.....	2	3	0	0	0	0	0	0	0	2	5
Grand Forks.....	0	2	0	0			0	0		0	
South Dakota:											
Aberdeen.....	4	0	0	0			0	0		1	
Sioux Falls.....	3	9	0	1	0	0	0	0	0	0	4
Nebraska:											
Lincoln.....	3	5	0	0	0	0	0	0	0	16	19
Omaha.....	5	10	6	13	0	3	0	0	0	3	52
Kansas:											
Topeka.....	2	0	0	0	0	0	0	0	0	0	6
Vichita.....	3	6	2	0	0	2	0	0	0	10	46
SOUTH ATLANTIC											
Delaware:											
Wilmington.....	2	3	0	0	0	4	0	0	0	3	76
Maryland:											
Baltimore.....	40	35	1	0	0	14	2	0	0	52	258
Cumberland.....	1	1	0	0	0	0	0	0	0	1	15
Frederick.....	1	1	0	0	0	0	0	0	0	0	4
District of Colum- bia:											
Washington.....	27	21	1	0	0	10	1	0	0	22	194
Virginia											
Lynchburg.....	1	0	0	0	0	0	0	1	0	6	11
Norfolk.....	1	9	0	0	0	1	0	0	0	4	
Richmond.....	3	6	0	0	0	2	0	0	0	0	60
Roanoke.....	1	0	1	8	0	0	0	0	0	3	15
West Virginia:											
Charleston.....	0	0	0	1	0	2	0	0	0	14	20
Wheeling.....	1	5	0	0	0	2	0	0	0	0	21
North Carolina:											
Raleigh.....	1	0	0	2	0	1	0	0	0	0	6
Wilmington.....	0	0	0	0	0	0	0	0	0	3	16
Winston-Salem.....	0	1	3	1	0	1	0	0	0	5	24
South Carolina:											
Charleston.....	0	0	0	0	0	2	1	0	0	0	33
Columbia.....	0	0	1	0	0	0	0	0	0	0	
Greenville.....	0	0	1	0	0	0	0	0	0	2	8
Georgia:											
Atlanta.....	5	2	3	6	0	5	0	1	1	0	80
Brunswick.....	0	0	0	0	0	0	1	0	0	0	7
Savannah.....	0	2	0	1	0	1	0	0	0	0	31
Florida:											
St. Petersburg.....	0	0	1	0	0	2	0	0	0	0	15
Tampa.....	0	1	0	34	0	2	2	0	0	0	32
EAST SOUTH CENTRAL											
Kentucky:											
Covington.....	2	0	0	0	0	0	0	0	0	0	23
Louisville.....	5	11	1	0	0	6	0	1	0	4	84
Tennessee:											
Memphis.....	3	14	2	2	0	4	1	0	0	1	79
Nashville.....	4	7	2	0	0	0	1	1	0	3	63
Alabama:											
Birmingham.....	2	4	7	11	0	10	1	0	0	13	110
Mobile.....	1	0	2	0	0	4	0	0	0	0	37
Montgomery.....	0	0	0	0	0	0	0	0	0	0	18

City reports for week ended March 6, 1926—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths
EAST NORTH CENTRAL									
Illinois:									
Chicago.....	1	1	0	0	0	0	0	0	0
Michigan:									
Detroit.....	0	0	0	1	0	0	1	0	0
WEST NORTH CENTRAL									
Minnesota:									
Minneapolis.....	0	0	1	0	0	0	0	0	0
Missouri:									
St. Louis.....	1	0	0	0	0	0	0	0	0
Nebraska:									
Lincoln.....	2	1	0	0	0	0	0	0	0
SOUTH ATLANTIC									
Maryland:									
Baltimore.....	1	1	2	0	0	0	0	0	0
District of Columbia:									
Washington.....	0	0	2	1	0	0	0	1	0
South Carolina:									
Charleston.....	0	0	0	0	0	2	0	0	1
Georgia:									
Atlanta.....	0	0	0	0	0	1	0	0	0
Brunswick.....	0	0	0	0	1	0	0	0	0
Savannah.....	0	0	0	0	1	0	0	0	0
WEST SOUTH CENTRAL									
Arkansas:									
Little Rock.....	0	1	0	0	0	1	0	0	0
Louisiana:									
New Orleans ¹	1	0	1	0	0	1	0	0	0
Shreveport.....	0	0	0	1	0	2	0	0	0
Texas:									
Houston.....	0	0	0	0	0	1	0	0	0
MOUNTAIN									
Colorado:									
Denver.....	0	0	0	1	0	0	0	0	0
PACIFIC									
Washington:									
Seattle.....	12	0	0	0	0	0	0	0	0
Spokane.....	9	0	0	0	0	0	0	0	0
Oregon:									
Portland.....	1	0	0	0	0	0	0	0	0
California:									
Los Angeles.....	0	0	2	1	0	0	0	1	0
Sacramento.....	1	2	1	0	0	0	0	0	0
San Francisco.....	1	0	0	0	0	0	0	0	0

¹Dengue, 1 case at New Orleans, La.

The following table gives the rates per 100,000 population for 103 cities for the five-week period ended March 6, 1926, compared with those for a like period ended March 7, 1925. The population figures used in computing the rates are approximate estimates as of July 1, 1925 and 1926, respectively, authoritative figures for many of the cities not being available. The 103 cities reporting cases had an estimated aggregate population of nearly 30,000,000 in

1925 and nearly 30,500,000 in 1926. The 96 cities reporting deaths had more than 29,250,000 estimated population in 1925 and more than 29,750,000 in 1926. The number of cities included in each group and the estimated aggregate populations are shown in a separate table below.

Summary of weekly reports from cities, January 31 to March 6, 1926—Annual rates per 100,000 population—Compared with rates for the corresponding period of 1925¹

DIPHTHERIA CASE RATES

	Week ended—									
	Feb. 7, 1925	Feb. 6, 1926	Feb. 14, 1925	Feb. 13, 1926	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926	Mar. 7, 1925	Mar. 6, 1926
103 cities.....	169	134	163	136	153	137	163	134	156	124
New England.....	185	97	237	123	232	116	184	102	225	95
Middle Atlantic.....	170	129	164	140	162	132	177	118	166	111
East North Central.....	136	119	124	132	116	134	111	140	107	123
West North Central.....	247	220	251	168	203	202	289	263	273	235
South Atlantic.....	145	133	173	135	148	105	108	73	98	109
East South Central.....	58	42	63	47	74	57	47	55	58	47
West South Central.....	167	138	154	116	119	90	154	116	137	103
Mountain.....	185	127	92	173	157	218	148	163	83	73
Pacific.....	257	189	171	140	157	205	246	216	224	200

MEASLES CASE RATES

103 cities.....	242	1,481	285	1,717	367	1,994	342	2,024	403	1,818
New England.....	556	2,408	637	2,347	695	2,709	569	2,188	633	2,457
Middle Atlantic.....	204	1,347	286	1,511	371	1,913	341	2,040	426	1,627
East North Central.....	415	2,152	479	2,633	637	2,929	589	3,031	738	2,691
West North Central.....	16	408	28	542	26	677	70	642	66	845
South Atlantic.....	46	2,579	92	3,112	104	3,276	77	102,856	94	2,697
East South Central.....	47	711	68	732	47	960	42	1,311	79	1,323
West South Central.....	35	34	48	13	13	9	48	0	22	17
Mountain.....	758	91	148	109	601	137	888	0	28	209
Pacific.....	58	105	28	167	61	202	58	162	102	282

SCARLET FEVER CASE RATES

103 cities.....	397	298	385	298	376	309	390	287	381	290
New England.....	592	402	544	362	585	362	543	354	563	349
Middle Atlantic.....	372	209	406	197	374	206	411	187	370	175
East North Central.....	398	338	371	358	403	372	402	334	403	345
West North Central.....	844	746	695	770	719	772	711	764	752	815
South Atlantic.....	241	163	261	171	157	150	192	203	161	163
East South Central.....	89	119	194	114	205	244	168	182	179	187
West South Central.....	154	138	114	108	119	108	137	112	176	90
Mountain.....	324	155	370	218	240	237	305	109	277	337
Pacific.....	246	326	168	310	177	332	213	313	207	331

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, 1925, and 1926, respectively.

² Wilmington, Del., not included.

³ Madison, Wis., not included.

⁴ Hartford, Conn., not included.

⁵ Madison, Wis., Kansas City, Mo., Winston-Salem, N. C., Covington, Ky., and Denver, Colo., not included.

⁶ Barre, Vt., Newark, N. J., Kansas City, Mo., and Tacoma, Wash., not included.

⁷ Barre, Vt., not included.

⁸ Newark, N. J., not included.

⁹ Kansas City, Mo., not included.

¹⁰ Winston-Salem, N. C., not included.

¹¹ Covington, Ky., not included.

¹² Denver, Colo., not included.

¹³ Tacoma, Wash., not included.

Summary of weekly reports from cities, January 31 to March 6, 1926—Annual rates per 100,000 population— Compared with rates for the corresponding period of 1925—Continued

SMALLPOX CASE RATES

	Week ended—									
	Feb. 7, 1925	Feb. 6, 1926	Feb. 14, 1925	Feb. 13, 1926	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926	Mar. 7, 1925	Mar. 6, 1926
103 cities.....	2 73	47	2 76	3 53	64	41	4 64	5 41	60	47
New England.....	0	0	0	0	0	0	0	0	0	0
Middle Atlantic.....	2	0	4	1	2	0	3	0	1	0
East North Central.....	36	16	33	23	52	33	26	19	40	23
West North Central.....	141	53	187	32	123	63	117	90	111	62
South Atlantic.....	58	101	92	81	63	51	40	60	48	100
East South Central.....	756	42	620	52	488	104	536	55	599	67
West South Central.....	119	155	132	112	79	142	110	133	70	194
Mountain.....	28	73	157	73	83	36	55	73	46	36
Pacific.....	254	324	210	461	204	194	298	245	196	254

TYPHOID FEVER CASE RATES

	2 13	7	2 12	3 6	10	7	4 13	5	10	10
103 cities.....	29	14	19	5	0	7	13	5	7	12
New England.....	13	3	6	6	10	4	8	2	10	5
Middle Atlantic.....	8	3	6	4	6	5	6	1	8	5
East North Central.....	0	6	10	4	4	6	16	2	6	0
West North Central.....	16	13	20	15	8	4	19	12	8	6
South Atlantic.....	11	21	37	10	32	5	32	11	32	10
East South Central.....	22	4	44	0	40	22	40	30	26	39
West South Central.....	28	36	18	0	37	18	74	18	9	146
Mountain.....	17	16	11	13	22	16	8	8	14	17
Pacific.....										

INFLUENZA DEATH RATES

	2 29	35	2 27	3 34	29	50	4 34	5 46	30	52
96 cities.....	46	12	26	19	17	2	39	19	17	12
New England.....	24	20	22	15	21	27	20	39	15	71
Middle Atlantic.....	12	12	16	11	17	11	23	14	25	14
East North Central.....	19	19	11	4	21	19	36	22	34	5
West North Central.....	44	68	52	64	52	137	46	93	50	47
South Atlantic.....	63	104	58	62	68	161	116	143	95	259
East South Central.....	92	180	116	302	145	298	140	227	135	132
West South Central.....	55	109	55	127	55	109	18	100	18	109
Mountain.....	36	67	4	35	11	96	25	35	25	34
Pacific.....										

PNEUMONIA DEATH RATES

	2 214	206	2 212	3 213	207	259	4 190	5 260	196	271
96 cities.....	204	201	230	156	232	175	235	165	218	188
New England.....	252	213	230	212	215	289	184	316	209	361
Middle Atlantic.....	152	145	158	161	173	180	160	180	182	206
East North Central.....	106	127	133	77	127	125	150	81	136	96
West North Central.....	295	344	247	406	232	486	275	456	251	340
South Atlantic.....	299	249	289	223	294	296	268	309	247	311
East South Central.....	334	387	440	553	387	553	203	378	218	387
West South Central.....	185	228	268	328	203	173	259	410	129	237
Mountain.....	175	185	171	138	189	174	145	142	124	126
Pacific.....										

¹ Wilmington, Del., not included.

² Madison, Wis., not included.

³ Hartford, Conn., not included.

⁴ Madison, Wis., Kansas City, Mo., Winston-Salem, N. C., Covington, Ky., and Denver, Colo., not included.

⁵ Barre, Vt., Newark, N. J., Kansas City, Mo., and Tacoma, Wash., not included.

⁶ Barre, Vt., not included.

⁷ Newark, N. J., not included.

⁸ Kansas City, Mo., not included.

⁹ Winston-Salem, N. C., not included.

¹⁰ Covington, Ky., not included.

¹¹ Denver, Colo., not included.

¹² Tacoma, Wash., not included.

Number of cities included in summary of weekly reports, and aggregate population of cities in each group, approximated as of July 1, 1925 and 1926, respectively

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	
			1925	1926	1925	1926
Total	103	96	29,944,996	30,473,129	29,251,658	29,764,201
New England	12	12	2,176,124	2,206,124	2,176,124	2,206,124
Middle Atlantic	10	10	10,346,970	10,476,970	10,346,970	10,476,970
East North Central	16	16	7,481,656	7,655,436	7,481,656	7,655,436
West North Central	14	11	2,594,962	2,634,662	2,461,380	2,499,036
South Atlantic	21	21	2,716,070	2,776,070	2,716,070	2,776,070
East South Central	7	7	993,103	1,004,953	993,103	1,004,953
West South Central	8	6	1,184,057	1,212,057	1,078,198	1,103,696
Mountain	9	9	563,912	572,773	563,912	572,773
Pacific	6	4	1,888,142	1,934,084	1,434,245	1,469,144

FOREIGN AND INSULAR

THE FAR EAST

Report for week ended February 20, 1926.—The following report for the week ended February 20, 1926, was transmitted by the far eastern bureau of the health section of the League of Nations' secretariat, located at Singapore, to the headquarters at Geneva.

Port	Plague		Cholera		Small-pox		Port	Plague		Cholera		Small-pox	
	Cases	Deaths	Cases	Deaths	Cases	Deaths		Cases	Deaths	Cases	Deaths	Cases	Deaths
Calcutta	0	0	37	63	36	0	Tsuruga	0	0	0	0	0	0
Bombay	6	0	0	12	5	0	Hakodate	0	0	0	0	0	0
Madras	0	0	7	8	3	0	Keelung	0	0	0	0	0	0
Rangoon	8	0	0	13	1	0	Fusan	0	0	0	0	0	0
Karachi	0	0	0	21	3	0	Dairen	0	0	0	0	6	0
Negapatam	0	0	11	5	5	0	Adelaide	0	0	0	0	0	0
Colombo	0	0	0	0	1	0	Brisbane	0	0	0	0	0	0
Basra	0	0	0	0	4	0	Fremantle	0	0	0	0	0	0
Singapore	0	0	0	0	3	0	Melbourne	0	0	0	0	0	0
Port Swettenham	0	0	0	0	0	0	Sydney	0	0	0	0	0	0
Penang	0	0	0	0	0	0	Rockhampton	0	0	0	0	0	0
Batavia	0	0	0	0	0	0	Townsville	0	0	0	0	0	0
Surabaya	2	2	0	0	0	0	Port Darwin	0	0	0	0	0	0
Samarang	0	0	0	0	0	0	Broome	0	0	0	0	0	0
Belawan Deli	0	0	0	0	0	0	Port Moresby	0	0	0	0	0	0
Makassar	2	1	0	0	0	0	Auckland	0	0	0	0	0	0
Pontianak (Borneo)	0	0	0	0	0	0	Wellington	0	0	0	0	0	0
Sandakan (North Borneo)	0	0	0	0	0	0	Christchurch	0	0	0	0	0	0
Kuching (Sarawak)	0	0	0	0	24	1	Invercargill	0	0	0	0	0	0
Timor Dilly	0	0	0	0	0	0	Honolulu	0	0	0	0	0	0
Manila	0	0	0	0	0	0	Suez	0	0	0	0	0	0
Zamboanga	0	0	0	0	0	0	Tor Quarantine Station	0	0	0	0	0	0
Bangkok	1	1	26	17	13	8	Alexandria	0	0	0	0	0	0
Saigon and Cholon	0	0	0	0	2	0	Port-Saïd	0	0	0	0	0	0
Haiphong	0	0	0	0	0	0	Mombasa (Kenya)	0	0	0	0	0	0
Tourane	0	0	0	0	0	0	Zanzibar	0	0	0	0	0	0
Hongkong	0	0	0	0	1	0	Massowah	0	0	0	0	0	0
Shanghai	0	0	0	0	9	0	Djibuti	0	0	0	0	0	0
Amoy	0	0	0	0	3	0	Berbera	0	0	0	0	0	0
Nagasaki	0	0	0	0	1	0	Mozambique	0	0	0	0	0	0
Yokohama	0	0	0	0	0	0	Lourenco Marques	0	0	0	0	0	0
Simonoseki	0	0	0	0	0	0	Durban	0	0	0	0	0	0
Moji	0	0	0	0	0	0	East London	0	0	0	0	0	0
Kobe	0	0	0	0	0	0	Port Elizabeth	0	0	0	0	0	0
Osaka	0	0	0	0	0	0	Cape Town	0	0	0	0	0	0
Niigata	0	0	0	0	0	0	Port-Louis (Mauritius)	0	0	0	0	0	0
							Seychelles	0	0	0	0	0	0

BRAZIL

Plague—Malaria—Typhoid fever—Bahia.—During the period from January 17 to February 13, 1926, 43 deaths from malaria, 3 cases of plague with 1 death, and 29 cases of typhoid fever with 7 deaths were reported at Bahia, Brazil.

CANADA

Communicable diseases—February 27–March 6, 1926.—The following table shows the number of cases of certain communicable diseases in seven Provinces of Canada during the week ended March 6, 1926. The information was supplied by the Canadian Ministry of Health.

Disease	Nova Scotia	New Brunswick	Quebec	Ontario	Manitoba	Saskatchewan	Alberta	Total
Cerebrospinal fever.....			1	1				2
Influenza.....	31							31
Polioimyelitis.....			1					1
Smallpox.....				4		5	3	12
Typhoid fever.....	1	1	6	7			2	17

Communicable diseases—Ontario—February, 1926 (comparative).—During the month of February, 1926, communicable diseases were reported in the Province of Ontario as follows:

Disease	February, 1926		February, 1925		Disease	February, 1926		February, 1925	
	Cases	Deaths	Cases	Deaths		Cases	Deaths	Cases	Deaths
Cerebrospinal meningitis.....	3	2	8	4	Mumps.....	588		1,112	
Chancroid.....			15		Pneumonia.....		227		241
Chicken pox.....	785		539		Polioimyelitis.....				3
Diphtheria.....	201	18	285	17	Scarlet fever.....	320	4	621	10
German measles.....	511		13	1	Septic sore throat.....	2		3	
Gonorrhea.....	190		216		Smallpox.....	86		13	1
Influenza.....		31		24	Syphilis.....	162		163	
Lethargic encephalitis.....	2	1	11	9	Tuberculosis.....	163	79	158	88
Measles.....	1,899	2	1,576	3	Typhoid fever.....	26		40	3
					Whooping cough.....	420	2	427	8

Smallpox distribution.—The occurrence of smallpox was distributed in 24 localities with the greatest number of cases reported at Kitchener, viz, 26. At Toronto 4 cases were reported; at Trenton, 8; North Bay, 3; Ottawa, 1 case. For further statement of occurrence according to locality see page 595.

Epidemic measles in border cities.—Press notice received under date of March 4, 1926, from Windsor, Ontario, Canada, shows spread of epidemic measles in cities on the Canadian border and urges cooperation of citizens with the health authorities in checking spread of infection by reporting suspect or actual cases of the disease. On March 3, 23 new cases of measles were reported at Windsor. During the month of January, 1926, 164 cases, and in February, 292 cases of measles, were reported in Windsor and the border cities of Walkerville, Ford, Sandwich, and Ojibway (total population, 88,000).

CHILE

Typhoid fever—Typhus fever—December 15–31, 1925.—During the period December 15 to 31, 1925, 13 cases of typhoid fever and 46 cases of typhus fever were reported in the Republic of Chile, occurring in 13 localities. The distribution of the occurrence was as follows:

Locality	Ty-phoid fever	Ty-phus fever	Popu-lation	Locality	Ty-phoid fever	Ty-phus fever	Popu-lation
Achao.....		1	1,657	Los Angeles.....		5	13,274
Bulnes.....		1	3,987	Penco.....		2	4,408
Chillan.....		24	30,881	San Carlos.....		1	7,510
Concepcion.....		6	64,074	San Javier de Loncom.....	1		4,808
Constitucion.....	4		7,827	Talca.....	1	1	36,079
Curico.....	7		15,879	Valparaiso.....		4	182,422
Linares.....		1	12,061				

JAMAICA

Communicable diseases—January 24–February 27, 1926.—A supplementary report for the week ended January 30, 1926, shows the occurrence of 1 case of chicken pox, 1 case of smallpox (reported as alastrim), 2 cases of pulmonary tuberculosis, and 4 cases of typhoid fever in Jamaica.

During the four weeks ended February 27, 1926, communicable diseases were reported in Jamaica as follows: Chicken pox, 23 cases; diphtheria, 2; leprosy, 1; smallpox (reported as alastrim), 121; pulmonary tuberculosis, 40; typhoid fever, 43 cases.

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 March 26, 1926 ¹

CHOLERA

Place	Date	Cases	Deaths	Remarks
India.....				Jan. 3–16, 1926: Cases, 4,680; deaths, 2,623.
Calcutta.....	Jan. 24–30.....	34	29	
Madras.....	Feb. 7–13.....	5	3	
Rangoon.....	Jan. 24–30.....	1	1	
Philippine Islands:				
Manila.....	Jan. 31–Feb. 6.....		2	
Province—				
Bataan.....	Jan. 2–16.....	1	1	
Bulacan.....	do.....	5	5	
Pampanga.....	Jan. 2–23.....	27	24	
Rizal.....	Dec. 20–31.....	14	11	
Siam:				
Bangkok.....	Jan. 24–30.....	31	19	

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 March 26, 1926—Continued

PLAGUE

Place	Date	Cases	Deaths	Remarks
Brazil:				
Bahia.....	Jan. 17-30.....	3	1	
Celebes:				
Makassar.....	Jan. 20-26.....	3	3	Netherlands Indies.
India:				Jan. 3-16, 1926: Cases, 4,867; deaths, 3,938.
Madras Presidency.....	Jan. 17-23.....	113	73	
Rangoon.....	Jan. 24-30.....	3	2	
Iraq:				
Bagdad.....	Jan. 10-16.....	1	1	
Java:				
Batavia.....	Jan. 23-29.....	61	57	Province.
Cheribon.....	Jan. 10-16.....	1	1	
Surabaya.....	do.....	6	6	East Java and Madoera.
Siam:				
Bangkok.....	Jan. 24-30.....		1	
Straits Settlements:				
Singapore.....	Jan. 3-9.....	2	2	

SMALLPOX

Canada:					
Ontario.....					Feb. 1-23, 1926: Cases, 86. Corresponding period, year 1925—cases, 13; deaths, 1.
Do.....	Feb. 21-27.....	20			Later report.
Admaston.....	Feb. 1-26.....	5			Township.
Alice and Fraser.....	do.....	6			Do.
Belleville.....	do.....	4			
King.....	do.....	7			Do.
Kitchener.....	do.....	26			
North Bay.....	do.....	3			
Toronto.....	do.....	4			
Trenton.....	do.....	8			
Wilmot.....	do.....	6			Do.
Ceylon:					
Colombo.....	Jan. 31-Feb. 6.....	3			Port cases, 2. Town case infected from India.
China:					
Chungking.....	Jan. 24-Feb. 6.....				Present.
Hongkong.....	Jan. 24-30.....	1			
Nanking.....	Jan. 24-Feb. 13.....				Prevalent.
South Manchuria Railway line.....					Feb. 7-13, 1926: Cases, 5.
An-shan.....	Feb. 7-13.....	3			
Changchun.....	do.....	1			
Mukden.....	do.....	1			
Swatow.....	Jan. 31-Feb. 13.....				Prevalent.
Chosen:					
Saishin.....	Jan. 1-31.....	5	2		
Egypt:					
Alexandria.....	Feb. 5-11.....	2			
Great Britain:					
England and Wales.....	Jan. 30-Feb. 20.....	885			
Hull.....	Feb. 21-27.....	1			
Newcastle-on-Tyne.....	Feb. 14-20.....	3			
India:					Jan. 3-16, 1926: Cases, 9,218; deaths, 2,241.
Bombay.....	Jan. 17-30.....	26	15		
Calcutta.....	Jan. 24-30.....	47	40		
Karachi.....	Jan. 31-Feb. 6.....	8	3		
Madras.....	Feb. 7-13.....	10			
Rangoon.....	Jan. 24-30.....	6			
Italy:					
Catania.....	Feb. 15-21.....	1			
Jamaica.....	Jan. 24-30.....	1			Reported as alastrim.
Do.....	Jan. 31-Feb. 27.....	121			Do.
Japan:					
Nagasaki.....	Feb. 15-21.....	1			
Java:					
Surabaya.....	Jan. 10-16.....	24	6		
Mexico:					
Aguaascalientes.....	Feb. 28-Mar. 6.....		3		
Guadalajara.....	Mar. 2-8.....		1		
Tampico.....	Feb. 22-28.....	1			

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued**Reports Received During Week Ended March 26, 1926—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
Palestine:				
Tiberias.....	Feb. 9-15.....	1		
Siam:				
Bangkok.....	Jan. 24-30.....	19	9	
Spain:				
Valencia.....	Feb. 14-27.....	5		
Straits Settlements:				
Singapore.....	Jan. 10-16.....	2	1	
Tunis:				
Tunis.....	Feb. 11-20.....	1		

TYPHUS FEVER

Algeria:				
Algiers.....	Feb. 1-10.....	8		
Chile:				Dec. 15-31, 1925: Cases, 46.
Achoa.....	Dec. 15-31.....	1		
Bulnes.....	do.....	1		
Chillan.....	do.....	24		
Concepcion.....	do.....	6		
Linares.....	do.....	1		
Los Angeles.....	do.....	5		
Penco.....	do.....	2		
San Carlos.....	do.....	1		
Talca.....	do.....	1		
Valparaiso.....	do.....	4		
Mexico:				
Mexico City.....	Feb. 21-27.....	8		Including municipalities in Federal District.
Poland:				Nov. 29-Dec. 19, 1925: Cases, 144; deaths, 12.
Union of South Africa:				
Cape Province—				
Grahamstown.....	Jan. 24-30.....	2		Outbreaks reported in districts of Harrismith, Libode, and Um-tata.

Reports Received from December 26, 1925, to March 19, 1926¹**CHOLERA**

Place	Date	Cases	Deaths	Remarks
Chosen.....	October, 1925.....	6		
India:				Oct. 18-Dec. 19, 1925: Cases, 18,697; deaths, 10,918. Dec. 27, 1925-Jan. 2, 1926: Cases, 2,619; deaths, 1,453.
Calcutta.....	Nov. 1-28.....	101	89	
Do.....	Dec. 6-26.....		54	
Do.....	Dec. 27-Jan. 16.....		41	
Madras.....	Nov. 15-Jan. 2.....	174	70	
Do.....	Jan. 3-Feb. 6.....	70	43	
Rangoon.....	Nov. 8-Dec. 5.....	4	4	
Indo-China:				September, 1925: Cases, 9; deaths, 5. September, 1924: Cases, 7; deaths, 4. (European cases, 2.)
Province—				September, 1924: None.
Annam.....	Sept. 1-30.....	2	2	
Cochin China.....	do.....	5	3	
Saigon.....	Jan. 4-17.....	2	2	September, 1924: 1 case; 1 death. Including 100 square kilometers of surrounding country.
Tonkin.....	September, 1925.....	2		September, 1924: None.
Japan.....	Aug. 30-Oct. 17.....	409		
Do.....	Oct. 25-Nov. 28.....	82		
Philippine Islands:				
Manila.....	Nov. 9-Jan. 3.....	15	10	
Do.....	Jan. 4-31.....	11	21	

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 December 26, 1925, to March 19, 1926—Continued

CHOLERA—Continued

Place	Date	Cases	Deaths	Remarks
Philippine Islands—Contd.				
Province—				
Bataan.....	Nov. 30-Dec. 26.....	29	25	
Bulacan.....	Oct. 18-Nov. 7.....	92	64	
Do.....	Nov. 23-Dec. 31.....	200	88	
Laguna.....	Nov. 23-Dec. 26.....	18	14	
Nueva Ecija.....	Nov. do.....	6	2	
Pampanga.....	Nov. 1-7.....	1	1	
Do.....	Nov. 23-Dec. 31.....	113	85	
Rizal.....	Sept. 27-Nov. 21.....	75	21	
Romblon.....	Dec. 7-13.....	23	12	
Russia.....	May-June.....	7		
Do.....	July-August.....	4		
Siam:				
Bangkok.....	Oct. 4-Nov. 14.....	108	68	
Do.....	Nov. 22-Dec. 26.....	270	149	
Do.....	Dec. 27-Jan. 23.....	115	83	
On vessel:				
Steamship.....	Oct. 3.....	9		Arrived at Bangkok, Siam: Cases in coolie passengers.

PLAGUE

Argentina.....					
Buenos Aires.....	Jan. 24-30.....	1			Jan. 24-30, 1926: 6 cases, occurring in interior provinces of Salta and Santa Fe.
Brazil:					
Bahia.....	Nov. 8-Dec. 27.....	3	1		
Do.....	Dec. 27-Jan. 2.....	1	1		
Santos.....	Dec. 8-21.....		2		
British East Africa:					
Kenya.....					
Kisumu.....	Nov. 22-Dec. 5.....	1	2		
Uganda Protectorate.....	September-November.....	338	308		
Canary Islands:					
La Laguna.....	Dec. 24.....	3	2		
Las Palmas.....	do.....	1			
Do.....	Jan. 7.....	1	1		
Santa Cruz de Tenerife.....	Dec. 18-27.....	3			
Do.....	Dec. 28-Feb. 1.....	3			
Celebes:					
Makassar.....	Dec. 29-Jan. 4.....	4	4		Netherlands East Indies.
Ceylon:					
Colombo.....	Nov. 15-Dec. 5.....	3	3		1 plague rodent.
Do.....	Dec. 27-Jan. 16.....	2	2		
Do.....	Jan. 24-30.....				Do.
China:					
Nanking.....	Nov. 15-Jan. 23.....				Prevalent.
Ecuador:					
Eloy Alfaro.....	Jan. 1-15.....	1			
Guayaquil.....	Nov. 1-Dec. 31.....	31	12		
Do.....	Jan. 1-31.....	34	14		Rats taken, Nov. 1-Dec. 31, 1925, 49,370; rats found infected, 281. Rats taken, Jan. 1-31, 1926, 24,672; rats found infected, 234.
Recreo (country estate).....	do.....	1			Jan. 1-Dec. 9, 1925: Cases, 138. Corresponding period, 1924: Cases, 365.
Egypt.....					
Beni Suef.....	Nov. 18.....	1	1		
Fayoum Province.....	Dec. 3-9.....	1	1		
Greece:					
Athens.....	Nov. 1-30.....	18	4		Including Piræus.
Do.....	Jan. 1-31.....	14	3		
Herakleion.....	Feb. 4.....	1			On island of Crete.
Patras.....	Nov. 13-Dec. 12.....	4	1		
Hawaii Territory:					
Paaulo.....					Jan. 29, 1926: Plague-infected rat found in vicinity.
India.....					Oct. 18-Dec. 26, 1925: Cases, 13,259; deaths, 9,344. Dec. 27, 1925-Jan. 2, 1926: Cases, 1,876; deaths, 1,553.
Bombay.....	Dec. 6-12.....	1	1		
Do.....	Jan. 3-9.....	2	2		
Calcutta.....	Dec. 6-12.....	1	1		
Karachi.....	Nov. 1-Dec. 19.....	4	3		
Madras.....	Oct. 25-Nov. 7.....	75	41		
Do.....	Nov. 15-21.....	35	22		
Do.....	Dec. 20-26.....	108	64		
Do.....	Jan. 3-9.....	135	83		

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

Reports Received from December 26, 1925, to March 19, 1926—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
India—Continued.				
Rangoon.....	Oct. 25-Dec. 26....	23	15	
Do.....	Dec. 27-Jan. 23.....	14	12	
Indo-China.....				September, October, 1925: Cases, 25; deaths, 23. September, 1924, fatal 12.
Province—				September, 1924: Cases, 9; deaths, 9.
Cambodia.....	Sept. 1-30.....	11	11	
Cochin China.....	September-October.	14	12	September, 1924; 1 case, 1 death.
Iraq:				
Bagdad.....	Dec. 13-Jan. 2.....	7	3	
Do.....	Jan. 24-30.....		4	
Java:				
Batavia.....	Oct. 24-Nov. 6.....	94	89	Province.
Do.....	Nov. 14-Jan. 1.....	315	297	
Do.....	Jan. 2-22.....	121	117	
Cheribon.....	Sept. 27-Oct. 17.....		166	
Do.....	Nov. 15-Dec. 19.....		96	
Djokjakarta.....	Oct. 20-Nov. 9.....			Epidemic in 1 locality.
Kediri.....	Dec. 7.....			Do.
Pekalongan.....	Sept. 27-Oct. 17.....		43	
Do.....	Nov. 8-Dec. 19.....		131	
Rembang.....	Oct. 20.....			Do.
Surabaya.....	Oct. 11-Dec. 26.....	59	59	
Do.....	Dec. 27-Jan. 9.....	16	16	
Tegal.....	Sept. 27-Oct. 17.....	6	6	
Do.....	Nov. 8-Dec. 19.....		29	
Madagascar.....				Nov. 1-30, 1925: Cases, 232; deaths, 220.
Province—				
Itasy.....	Sept. 16-Oct. 31....	20	20	
Do.....	Nov. 16-30.....	13	13	
Moramanga.....	Sept. 16-Nov. 30....	25	25	
Tananarive.....	do.....	368	341	
Town—				
Fort Dauphin.....	do.....	6	3	
Tamatave (port).....	Sept. 16-30.....	3	2	
Do.....	Oct. 16-Nov. 30.....	9	9	
Tananarive.....	Sept. 16-30.....	2	2	
Do.....	Nov. 1-30.....	11	11	
Mauritius Island.....	Sept. 20-Dec. 26.....	21	18	
Pamplemousses.....	Oct. 1-Nov. 30.....	3	2	
Port Louis.....	do.....	4	1	
Rivière du Rempart.....	do.....	2		
Netherlands Indies:				
Celebes Island—				
Makassar.....	Dec. 12.....			Epidemic.
Do.....	Jan. 6-12.....	2	2	
Nigeria.....	August-October.....	496	371	
Peru:				
Huacho.....	Jan. 26.....	15		Port 60 miles north of Callao.
Lima.....	Jan. 1-31.....	20		In hospital. Some cases in province.
Mollendo.....	do.....			12 or 15 cases reported unofficially.
Russia.....	May-June.....	67		
Do.....	July-September.....	157		
Senegal.....	September-October.	45	25	
Siam.....	Aug. 23-Oct. 31.....	53	43	
Bangkok.....	Nov. 15-28.....	3	3	
Do.....	Jan. 3-23.....	38	32	
Straits Settlements:				
Singapore.....	Nov. 1-Dec. 5.....	8	8	
Syria:				
Beirut.....	Nov. 11-20.....	1		
Union of South Africa:				
Cape Province—				
Kimberley district.....	Dec. 13-19.....	1		European.
Middleburg district.....	Dec. 6-12.....	1		Native. On farm.
Steynsburg district.....	Nov. 15-21.....	1		
Orange Free State—				
Boshof district.....	Nov. 29-Dec. 5.....	1	1	In native.
Bothaville district.....	Dec. 6-12.....	1	1	Native. On farm.

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

Reports Received from December 26, 1925, to March 19, 1926—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
On vessel: Steamship Cid.....				Jan. 29, 1926. At Buenaventura, Columbia. Rat was killed while jumping ashore from vessel. (See Public Health Reports, Feb. 26, 1926, p. 408.)

SMALLPOX

Algeria:				
Algiers.....	Nov. 21-Dec. 31.....	177		
Do.....	Jan. 1-10.....	64		
Do.....	Jan. 21-31.....	36		
Arabia:				
Aden.....	Nov. 29-Dec. 5.....	1		Imported.
Do.....	Jan. 10-Feb. 6.....	3	1	
Argentina:				
Rosario.....	October.....		1	
Australia:				
Queensland— Brisbane.....	Dec. 9-15.....	1		
Bahamas.....				In Nassau district. Stated to have been imported. Reported under date of Feb. 23, 1926.
Brazil:				
Para.....	Jan. 10-30.....	25	5	
Rio de Janeiro.....	Nov. 1-28.....	134	72	
Do.....	Dec. 6-26.....	65	26	
Do.....	Dec. 27-Jan. 16.....	37	29	
British East Africa:				
Kenya—				
Mombasa.....	Nov. 15-Dec. 19.....	14	6	
Do.....	Dec. 27-Jan. 2.....	1		From mainland.
Uganda Protectorate.....	Sept. 1-Oct. 31.....	8	4	
British South Africa:				
Northern Rhodesia.....	Jan. 5-11.....	2		
Southern Rhodesia.....	Nov. 13-Dec. 23.....	3		
Canada.....				Sept. 13-Jan. 2: In 7 Provinces, 186 cases. Jan. 3-23, 1926, cases, 115. Jan. 31-Feb. 6, 1926, cases, 33. Feb. 21-27, 1926, cases, 36.
Alberta.....	Jan. 10-Feb. 27.....	29		
Calgary.....	Dec. 13-19.....	1		From Drumheller, vicinity of Calgary.
British Columbia—				
Vancouver.....	Jan. 4-10.....	1		
Manitoba.....	Jan. 3-Feb. 27.....	26		
Winnipeg.....	Dec. 13-19.....	2		
Do.....	Jan. 3-Feb. 6.....	9		
New Brunswick—				
Northumberland.....	Dec. 6-13.....	1		
Ontario.....	December, 1925.....	32	1	
Do.....	Jan. 1-Feb. 13.....	103		
Do.....	Feb. 21-27.....	19		
Admaston.....	Jan. 1-31.....	11		
Ottawa.....	Dec. 6-12.....	2		
Do.....	Jan. 3-Feb. 6.....	2		
Toronto.....	Dec. 27-Jan. 2.....	1		
Do.....	Jan. 3-23.....	21		
Do.....	Feb. 6-27.....	4		
Trenton.....	Jan. 1-31.....	7		
Saskatchewan.....	Jan. 3-Feb. 13.....	39		
Do.....	Feb. 21-27.....	10		
Moose Jaw.....	do.....	2		
Regina.....	Jan. 24-30.....	1		
Saskatoon.....	Feb. 14-20.....	1		
Ceylon:				
Colombo.....	Dec. 6-12.....	1		Port case.
Do.....	Jan. 3-9.....	2		Do

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued**Reports Received from December 26, 1925, to March 19, 1926—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
China:				
Amoy.....	Oct. 25-Dec. 19.....	-----	1	
Do.....	Jan. 10-30.....	-----	-----	Present.
Antung.....	Dec. 7-20.....	2	-----	
Chungking.....	Nov. 15-Jan. 23.....	-----	-----	Do.
Foochow.....	Nov. 1-Jan. 23.....	-----	-----	Do.
Hankow.....	Nov. 14-Dec. 26.....	4	-----	
Do.....	Jan. 10-16.....	1	-----	
Hongkong.....	Nov. 22-Dec. 26.....	4	-----	
Do.....	Jan. 3-23.....	4	-----	
Manchuria—				
An-shan.....	Dec. 6-12.....	1	-----	
Do.....	Jan. 10-30.....	3	-----	South Manchurian Railway.
Changchun.....	Do.....	10	-----	Do.
Dairen.....	Oct. 19-Dec. 27.....	73	15	
Do.....	Dec. 28-Jan. 17.....	27	6	
Changchun.....	Jan. 31-Feb. 6.....	4	-----	
Fushun.....	Jan. 17-23.....	1	-----	Do.
Harbin.....	Jan. 1-7.....	1	-----	
Kai-yuan.....	Jan. 10-30.....	4	-----	Do.
Kungchuling.....	Jan. 31-Feb. 6.....	1	-----	
Liao-yang.....	Jan. 17-23.....	1	-----	Do.
Mukden.....	Oct. 24-Nov. 15.....	1	-----	Do.
Do.....	Jan. 24-30.....	1	-----	Do.
Tieh-ling.....	Do.....	2	-----	
Nanking.....	Nov. 21-Dec. 26.....	-----	-----	Present.
Do.....	Dec. 27-Jan. 9.....	-----	-----	Do.
Shanghai.....	Oct. 25-Jan. 2.....	37	36	
Do.....	Jan. 3-Feb. 6.....	39	77	Cases, foreign only.
Swatow.....	Nov. 22-Jan. 30.....	-----	-----	Prevalent.
Tientsin.....	Nov. 1-Dec. 19.....	2	-----	
Do.....	Jan. 23-30.....	1	-----	
Egypt:				
Alexandria.....	Dec. 3-31.....	5	2	
Do.....	Jan. 8-14.....	2	1	
Do.....	Jan. 29-Feb. 4.....	2	1	
Esthonia.....				November, 1925: Cases, 3.
France.....				September-October, 1925: Cases, 91.
Gold Coast.....	September, 1925.....	14	4	
Great Britain:				
England and Wales.....				Nov. 15-Dec. 26, 1925: Cases, 790.
				Dec. 27-Jan. 30, 1926: Cases, 1,526.
Hull.....	Dec. 27-Jan. 23.....	29	-----	
Do.....	Feb. 7-20.....	6	-----	
Leeds.....	Jan. 14-Feb. 6.....	4	-----	
Newcastle-on-Tyne.....	Nov. 29-Dec. 19.....	6	-----	
Do.....	Dec. 27-Feb. 20.....	21	-----	
Nottingham.....	Nov. 22-Dec. 26.....	9	-----	
Do.....	Dec. 27-Jan. 9.....	2	-----	
Sheffield.....	Nov. 22-Dec. 12.....	7	-----	
Do.....	Dec. 20-26.....	3	-----	
Do.....	Dec. 27-Feb. 6.....	12	-----	
South Shields.....	Feb. 9.....	-----	-----	Reported present in several form.
Greece.....				Oct. 1-31, 1925: Cases, 16.
Athens.....	Nov. 1-30.....	17	1	
Do.....	Jan. 1-31.....	23	1	
India.....				
Bombay.....	Nov. 8-Dec. 26.....	26	20	Oct. 18-Dec. 26, 1925: Cases, 19,472; deaths, 4,440.
Do.....	Dec. 27-Jan. 16.....	45	22	Dec. 27, 1925-Jan. 2, 1926: Cases, 3,869;
Calcutta.....	Nov. 29-Dec. 26.....	48	25	deaths, 986.
Do.....	Dec. 27-Jan. 23.....	129	63	
Karachi.....	Nov. 1-21.....	23	-----	
Do.....	Nov. 29-Dec. 5.....	4	2	
Do.....	Dec. 13-19.....	3	-----	
Do.....	Dec. 29-Jan. 30.....	21	9	
Madras.....	Jan. 24-30.....	4	1	
Rangoon.....	Oct. 25-Nov. 23.....	3	-----	
Do.....	Dec. 6-26.....	4	1	
Do.....	Dec. 27-Jan. 16.....	13	1	

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

Reports Received from December 26, 1925, to March 19, 1926—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Indo-China.....				September-October, 1925: Cases, 204; deaths, 62. September, 1924: Cases, 78; deaths, 22.
Province—				
Annam.....	Sept. 1-Oct. 31.....	90	23	September, 1924: Cases, 8; deaths, 2.
Cambodia.....	do.....	72	30	September, 1924: Cases, 16; deaths, 1.
Cochin China.....	do.....	61	30	September, 1924: Cases, 43; deaths, 19.
Saigon.....	Dec. 21-27.....	2	1	
Do.....	Jan. 1-17.....	2		Including 100 kilometers of surrounding country.
Tonkin.....	Dec. 2-Jan. 2.....	22		
Iraq.....				Sept. 6-Oct. 17, 1925: Cases, 81; deaths, 40.
Bagdad.....	Nov. 1-Dec. 26.....	19	15	
Do.....	Dec. 27-Jan. 30.....	11	4	
Italy.....				Aug. 2-Oct. 31, 1925: Cases, 38.
Genoa.....	Jan. 21-Feb. 10.....	4		
Rome.....	Oct. 12-25.....	1		
Jamaica.....				Nov. 29-Dec. 26, 1925: Cases, 95. Dec. 27-Jan. 30, 1926: Cases, 138. Reported as alastrim.
Kingston.....	Nov. 29-Dec. 26.....	43		Reported as alastrim.
Do.....	Dec. 27-Jan. 30.....	48		Do.
Japan:				
Taiwan.....	Nov. 11-Dec. 10.....	3		
Yokohama.....	Dec. 14-20.....	1		
Do.....	Feb. 23.....	7		
Java:				
Batavia.....	Oct. 24-30.....	1		
Do.....	Nov. 14-Dec. 25.....	7		
Buitenzorg.....	Nov. 29-Dec. 5.....	1		
Cheribon.....	Nov. 8-Dec. 12.....	2		
Kruksaan.....	Oct. 11-17.....	11		
Malang.....	Oct. 11-Jan. 2.....	3		
North Bantam.....	Oct. 4-17.....	4		
Pekalongan.....	Oct. 25-31.....	1		
Probolingo.....	Oct. 11-17.....	1		
Surabaya.....	Oct. 11-Dec. 26.....	633	104	
Do.....	Dec. 27-Jan. 9.....	42	16	
South Bantam.....	Oct. 11-17.....	1		
Tegal.....	Oct. 4-10.....	9	1	
Latvia.....				December, 1925: Cases, 3.
Malta.....	Nov. 1-Dec. 31.....	21	3	
Do.....				Jan. 1-31, 1926: Cases, 15.
Mexico:				July-September, 1925: Deaths, 1,157.
Aguascalientes.....	Dec. 13-Jan. 2.....	4	3	
Do.....	Jan. 3-30.....		7	
Do.....	Feb. 14-27.....		4	
Durango.....	Dec. 1-31.....		1	
Do.....	Jan. 1-31.....		2	
Guadalajara.....	Dec. 27-Mar. 1.....		11	
Mexico City.....	Nov. 28-Dec. 5.....	1		Including municipalities in Federal District.
Do.....	Jan. 3-Feb. 6.....	4		Do.
San Luis Potosi.....	Jan. 17-Feb. 27.....		33	
Tampico.....	Dec. 21-Jan. 2.....	1	1	
Do.....	Jan. 2-Feb. 20.....	5		
Torreon.....	Nov. 1-Dec. 31.....		51	
Do.....	Jan. 1-31.....		33	
Netherlands:				
The Hague.....	Jan. 30-Feb. 6.....	1	1	
Nigeria.....				Aug.-Oct., 1925: Cases, 211; deaths, 6.
Palestine:				
Hebron.....	Jan. 26-Feb. 1.....	2		
Persia:				
Teheran.....	July 23-Oct. 22.....		465	
Peru:				
Arequipa.....	Oct. 1-Dec. 31.....		2	
Poland.....				Nov. 1-28, 1925: Cases, 9.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued**Reports Received from December 26, 1925, to March 19, 1926—Continued****SMALLPOX—Continued**

Place	Date	Cases	Deaths	Remarks
Portugal:				
Lisbon.....	Oct. 4-31.....	124	-----	
Do.....	Nov. 16-Dec. 27.....	-----	60	
Do.....	Nov. 14-Dec. 26.....	187	-----	
Do.....	Dec. 27-Jan. 31.....	40	23	
Oporto.....	Nov. 22-Dec. 19.....	2	3	
Do.....	Dec. 27-Feb. 13.....	2	1	
Russia.....				May-June, 1925: Cases, 2,333.
Do.....	July-August.....	760	-----	
Siam.....				July 12-Sept. 5, 1925: Cases, 21; deaths, 6.
Bangkok.....	Dec. 20-25.....	3	1	
Do.....	Dec. 26-Jan. 23.....	13	1	
Sierra Leone:				
Konno district.....	Dec. 16-31.....	5	-----	
Spain:				
Madrid.....	Year 1925.....	-----	18	
Malaga.....	Nov. 29-Dec. 5.....	-----	2	
Do.....	Dec. 27-Jan. 2.....	-----	1	
Valencia.....	Dec. 20-28.....	1	-----	
Do.....	Dec. 27-Jan. 2.....	1	-----	
Do.....	Jan. 10-Feb. 6.....	9	-----	
Straits Settlements:				
Singapore.....	Dec. 20-26.....	1	-----	
Switzerland.....				June 28-Nov. 21, 1925: Cases, 62.
Lucerne.....	Oct. 1-Nov. 30.....	8	-----	
Zurich.....	Dec. 27-Jan. 2.....	1	-----	
Trinidad (West Indies):				
Port of Spain.....	Jan. 22.....	1	-----	Imported.
Tunisia:				
Tunis.....	Nov. 21-30.....	2	-----	
Do.....	Dec. 11-31.....	10	1	
Do.....	Jan. 1-20.....	5	-----	
Union of South Africa:				
Cape Province.....	Jan. 17-23.....	-----	-----	Outbreaks.
Orange Free State—				
Kuruman district.....	Jan. 10-16.....	-----	-----	Do.
Ladybrand district.....	Dec. 27-Jan. 2.....	-----	-----	Do.
Transvaal—				
Belfast district.....do.....	-----	-----	Do.
Germiston district.....	Jan. 2-9.....	-----	-----	Do.
Pretoria district.....	Dec. 6-12.....	-----	-----	Outbreaks. In native compound.
On vessel.....	Feb. 21.....	2	-----	Mexican steamer Montezuma, at Port of Ensenada, Mexico.

TYPHUS FEVER

Algeria:				
Algiers.....	Nov. 1-Dec. 20.....	2	-----	
Argentina:				
Rosario.....	Oct. 13-Dec. 31.....	2	-----	
Bulgaria.....	Sept. 1-Nov. 30.....	29	2	
Sofia.....	Dec. 25-31.....	1	-----	
Do.....	Jan. 8-14.....	2	-----	
Chile:				
Valparaiso.....	Nov. 29-Jan. 2.....	-----	2	
China:				
Antung.....	Nov. 29-Dec. 27.....	5	1	
Do.....	Jan. 4-10.....	1	-----	
Hongkong.....	Dec. 27-Jan. 2.....	1	-----	
Manchuria—				
Harbin.....	Dec. 17-Feb. 4.....	3	-----	
Czechoslovakia.....	October-November.....	94	-----	
Egypt:				
Alexandria.....	Jan. 8-14.....	1	-----	
Cairo.....	Nov. 5-11.....	2	2	
Port Said.....	Nov. 19-25.....	1	-----	
Finland.....				October, 1925: 1 case.
France.....	July-October.....	4	-----	
Germany.....	Oct. 25-31.....	1	-----	
Greece:				
Athens.....	Nov. 1-30.....	11	2	
Do.....	Jan. 1-31.....	19	4	
Saioniki.....	Dec. 29-Jan. 4.....	1	-----	
Hungary.....				November, 1925: Cases, 3.

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

Reports Received from December 26, 1925, to March 19, 1926—Continued

TYPHUS FEVER—Continued

Place	Date	Cases	Deaths	Remarks
Ireland:				
Cork County—				
Cork.....	Dec. 26-Jan. 1.....	2		
Do.....	Jan. 2-8.....	5		
Dumanway.....	Nov. 14.....	1		
Galway County.....	Oct. 17.....	1		
Latvia.....	October-December.....	4		
Lithuania.....				September-October, 1925: Cases, 9; deaths, 1.
Mexico.....				July-September, 1925: Deaths, 90.
Aguascalientes.....	Dec. 14-19.....	1		
Durango.....	Dec. 1-31.....		1	
Do.....	Jan. 1-31.....		1	
Guadalajara.....	Dec. 8-28.....		2	
Do.....	Dec. 29-Jan. 4.....		1	
Mexico City.....	Nov. 22-Dec. 26.....	145		Including municipalities in Federal District. Do.
Do.....	Dec. 27-Feb. 20.....	58		
San Luis Potosi.....	Feb. 6-13.....		1	
Tampico.....	Dec. 21-Jan. 10.....	1	1	
Torreon.....	November, 1925.....		1	
Vera Cruz.....	Feb. 12.....		1	
Morocco.....	August-November.....	39		
Norway.....				November, 1925: Case, 1.
Palestine:				
Gaza.....	Dec. 18.....	1		
Jaffa.....	Dec. 1-7.....	1		
Nazareth.....	Nov. 3-9.....	1		
Safad.....	Nov. 24-30.....	1		
Tel-Aviv.....	do.....	1		
Peru:				
Arequipa.....	October-December.....		3	
Poland.....	Oct. 11-Nov. 14.....	142	16	
Rumania.....				July-August, 1925: Cases, 107; deaths, 15.
Russia.....				May-June, 1925: Cases, 10,680.
Do.....				July-September, 1925: Cases, 3,851.
Turkey:				
Constantinople.....	Jan. 24-30.....	3		
Union of South Africa.....				October, 1925: Cases, 88; deaths, 7 (colored). Cases, European, 7. December, 1925: Cases, 78; deaths, 9. Colored: Cases, 73; deaths, 9.
Cape Province.....	Oct. 1-31.....	63	5	Colored.
Do.....	Nov. 8-Dec. 31.....	47	8	
Do.....	Jan. 3-23.....			Outbreaks.
Middleburg district.....	Dec. 6-12.....	1		European. On farm.
Natal.....	Oct. 1-Dec. 5.....	1		
Durban.....	Jan. 3-16.....	1		
Orange Free State.....	Nov. 29-Dec. 5.....	23	1	
Do.....	Dec. 1-31.....	8	1	
Bethulia district.....	Dec. 6-12.....			Outbreaks.
Bothaville district.....	do.....	1		Native. On farm.
Transvaal.....	Oct. 1-31.....	1	1	
Do.....	Dec. 1-31.....	18		
Bloemhof district.....	Dec. 27-Jan. 2.....			Outbreaks. On farm.

YELLOW FEVER

Gold Coast.....	September - October.....	2	1
Nigeria.....	August-October.....	3	2
Senegal.....	November, 1925.....	3	2