HOW TO GIVE ARTIFICIAL RESPIRATION BY THE PRONE PRESSURE METHOD¹

1. Lay the patient on his belly, one arm extended directly overhead, the other arm bent at elbow and with the face turned outward and resting on hand or forearm, so that the nose and mouth are free for breathing. (See fig. 1.)

2. Kneel straddling the patient's thighs with your knees placed at such a distance from the hip bones as will allow you to assume the position shown in Figure 1.

Place the palms of the hands on the small of the back with fingers resting on the ribs, the little finger just touching the lowest rib, with the thumb and fingers in a natural position, and the tips of the fingers just out of sight. (See fig. 1.)

3. With arms held straight, swing forward slowly, so that the weight of your body is gradually brought to bear upon the patient. The shoulder should be directly over the heel of the hand at the end of the forward swing. (See fig. 2.) Do not bend your elbows. This operation should take about two seconds.

4. Now immediately swing backward, so as to remove the pressure completely. (See fig. 3.)

5. After two seconds, swing forward again. Thus repeat deliberately twelve to fifteen times a minute the double movement of compression and release, a complete respiration in four or five seconds.

6. Continue artificial respiration without interruption until natural breathing is restored, if necessary, four hours or longer, or until a physician declares the patient is dead.

7. As soon as this artificial respiration has been started and while it is being continued, an assistant should loosen any tight clothing about the patient's neck, chest, or waist. *Keep the patient* warm. Do not give any liquids whatever by mouth until the patient is fully conscious.

8. To avoid strain on the heart when the patient revives, he should be kept lying down and not allowed to stand or sit up. If

¹ This method has been approved by the following organizations: American Telephone & Telegraph Co.; American Red Cross; American Gas Association; Bethlehem Steel Co.; National Electric Light Association; National Safety Council; Bureau of Medicine and Surgery, Navy Department; Office of the Surgeon General, War Department; U. S. Bureau of Mines; U. S. Bureau of Standards; and U. S. Public Health Service.

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FIGURE 1



FIGURE 2



the doctor has not arrived by the time the patient has revived, he should be given some stimulant, such as one teaspoonful of aromatic spirits of ammonia in a small gloss of water or a hot drink of coffee or tea, etc. The patient should be kept warm.

9. Resuscitation should be carried on at the nearest possible point to where the patient received his injuries. He should not be moved from this point until he is breathing normally of his own volition and then moved only in a lying position. Should it be necessary, due to extreme weather conditions, etc., to move the patient before he is breathing normally, resuscitation should be carried on during the time that he is being moved.

10. A brief return of natural respiration is not a certain indication for stopping the resuscitation. Not infrequently the patient, after a temporary recovery of respiration, stops breathing again. The patient must be watched and if natural breathing stops, artificial respiration should be resumed at once.

11. In carrying out resuscitation it may be necessary to change the operator. This change must be made without losing the rhythm of respiration. By this procedure no confusion results at the time of change of operator, and a regular rhythm is kept up.



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PREVALENCE OF SCARLET FEVER IN THE UNITED STATES

Preliminary reports of cases of scarlet fever from the health officers of 37 States for 52 weeks of the years 1925, 1926, and 1927 show that the disease was more prevalent during 1927 than it was during the two preceding years. The figures are as follows:

	Cases
1925	135, 937
1926	143, 150
1927	158, 978

The estimated population of these States was 86,571,000 in 1925 and 90,482,000 in 1927.

The number of cases of scarlet fever reported by these 37 States for the last eight weeks of the year was less in 1927 than it was in either 1925 or 1926. The following table gives a comparison of the reports by four-week periods for the last 20 weeks of the years 1925 to 1927, inclusive:

	Corresponding week				
Four weeks ended—	1927	1926	1925		
Sept. 10, 1927. Oct. 8, 1927. Nov. 5, 1927. Dec. 3, 1927. Dec. 31, 1927.	3, 419 5, 378 8, 586 10, 860 11, 943	3, 121 5, 624 9, 823 13, 330 13, 876	2, 812 4, 294 8, 122 11, 617 12, 222		
Total	40, 186	45, 774	39, 067		

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2. Kneel straddling the patient's thighs with your knees placed at such a distance from the hip bones as will allow you to assume the position shown in Figure 1.

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Place the palms of the hands on the small of the back with fingers resting on the ribs, the little finger just touching the lowest rib, with the thumb and fingers in a natural position, and the tips of the fingers just out of sight. (See fig. 1.)

3. With arms held straight, swing forward slowly so that the weight of your body is gradually brought to bear upon the patient. The shoulder should be directly over the heel of the hand at the end of the forward swing. (See fig. 2.) Do not bend your elbows. This operation should take about two seconds.

4. Now immediately swing backward so as to remove the pressure completely. (See fig. 3.)

5. After two seconds, swing forward again. Thus repeat deliberately twelve to fifteen times a minute the double movement of compression and release, a complete respiration in four or five seconds.

6. Continue artificial respiration without interruption until natural breathing is restored, if necessary, four hours or longer, or until a physician declares the patient is dead.

7. As soon as this artificial respiration has been started and while it is being continued, an assistant should loosen any tight clothing about the patient's neck, chest, or waist. *Keep the patient* warm. Do not give any liquids whatever by mouth until the patient is fully conscious.

8. To avoid strain on the heart when the patient revives, he should be kept lying down and not allowed to stand or sit up. If the doctor has not arrived by the time the patient has revived, he should be given some stimulant, such as one teaspoonful of aromatic spirits of ammonia in a small glass of water or a hot drink of coffee or tea, etc. The patient should be kept warm.

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11. In carrying out resuscitation it may be necessary to change the operator. This change must be made without losing the rhythm of respiration. By this procedure no confusion results at the time of change of operator and a regular rhythm is kept up. Public Health Reports, Vol. 43, No. 3, January 20, 1928



FIGURE 1



FIGURE 2



A RESURVEY OF ÉNDEMIC THYROID ENLARGEMENT IN CINCINNATI

By ROBERT OLESEN, Surgeon United States Public Health Service

The incidence of endemic thyroid enlargement among the school children of Cincinnati was less in 1927 than it was in 1924. Moreover, there was a notable decrease in the number of enlargements of considerable size during the three-year period. These conclusions are apparently substantiated by a resurvey made during the 1926–27 school session. Therefore, it becomes a matter of importance to determine, if possible, what were the factors involved in the changes. However, before proceeding to the consideration of the probable causes for the improvement in the goiter situation, it may be of interest to discuss briefly the purpose and value of resurveys, incidentally citing instances in which such investigations have been undertaken.

The purpose and value of resurveys.—Just as a primary thyroid survey is valuable in indicating the extent to which endemic goiter prevails in a given community, so does a reexamination of the same group indicate the extent to which prophylactic endeavor has proved successful. A reexamination of thyroids also accomplishes other useful purposes, among which may be mentioned the determination of the results of goiter treatment and the extent to which thyroid enlargement disappears spontaneously.

Resurveys, however, are seldom made, and if they are made, usually fail to find their way into the literature. Yet, it is obvious that the real effect of goiter prophylaxis can not be ascertained without a carefully planned check up. Among the conspicuous resurveys, attesting the value of iodine prophylaxis, were those of Marine and Kimball in Akron, Ohio. Four annual examinations of the same girls showed a decrease in the size of many existing enlargements and maintenance of thyroid equilibrium among normal individuals.

In Rochester, N. Y., resurveys have followed iodization of the water supply. Apparently endemic thyroid enlargements were reduced in number after the institution of this procedure, though other prophylactics were undoubtedly used at the same time. The failure to record the total number of examinations made in each survey casts doubt upon the validity of the conclusion that goiter incidence was reduced. Moreover, no attempt appears to have been made to determine the possible coincident effect of other iodine-containing prophylactics which may have been used. Resurveys are also available from Lorain, Ohio, and Aroostook County, Me., though no significant changes are recorded. Provided goiter surveys are made by the same observers, under similar conditions, the resulting information serves to indicate changes, or lack of changes, which either have come about naturally or followed definitely planned prophylaxis. While the desirability of thyroid examinations is obvious, it may be pointed out that the best results will accrue when the examiners possess a reasonable amount of skill, training, and experience. Especially are these qualifications essential when it is recalled that the dividing line between the normal and abnormal thyroid gland is not definite and that classification of thyroid size is entirely arbitrary.

Findings during first Cincinnati survey.—During the 1923-24 school session a thyroid survey was made of 47,493 children in the elementary schools of Cincinnati, Ohio.¹ The purpose of this survey was twofold; first, to determine the incidence of endemic goiter; and, second, to make appropriate recommendations for dealing with the conditions discovered.

Examination of 23,710 boys during the first Cincinnati survey disclosed an incidence of thyroid enlargements of all degrees amounting to 26.6 per cent. Among 23,783 girls the percentage was higher, 39.8 per cent. It was particularly noted that a considerable number of goiters of moderate and marked size were present among those examined. As a result of the findings it was recommended to the board of health of Cincinnati that the general use of iodized table salt be advocated for the prevention of simple thyroid enlargement. Following this recommendation iodized salt was used to a considerable extent in the city. The Cincinnati Academy of Medicine withheld its official sanction of this prophylactic, but did not go on record against it.

Methods employed and scope of the 1927 survey.—The method of examining and the classification of enlargements noted during the 1927 survey was identical with the procedure adopted in 1924. The conduct of the thyroid survey has been presented in several service publications.^{1, 2}. In 1924 the examinations were made by the writer in conjunction with the district physicians of the board of health, all of whom had been carefully schooled in uniform procedure. In 1927 the examinations were made exclusively by two examiners, the writer being assisted by Acting Assistant Surgeon Neil E. Taylor, who had already had two years of experience with the original method of examination.

In 1924 the thyroid survey included the children in 61 elementary public and 43 elementary parochial schools. In 1927 fewer children, 12,722 boys and 12,818 girls, were examined, but 5 high schools,

¹ Robert Olesen: Thyroid survey of 47,493 clementary school children in Cincinnati. Pub. Health Rep., vol. 39, No. 30, pp. 1777-1802 (July 25, 1924). (Reprint No. 941.)

³Robert Olesen: Endemic goiter in Colorado. Pub. Health Rep., vol. 40, No. 1, pp. 1-23 (Jan. 1, 1926). (Reprint No. 983.)

as well as 31 elementary public and 4 elementary papechial schools, were included. The schools included in the 1927 survey, while fewer in number than in 1924, were equally representative of location, environment, economic condition and other factors likely to exert an influence upon thyroid status.

RESULTS OF 1927 SURVEY

Age incidence of goiter.—Among the 12,722 boys surveyed in 1927 there were 2,859 boys having enlargements of all degrees, a percentage of 22.5. Among the girls, on the other hand, there were 5,026 having enlargements, a percentage of 39.2. The numbers and percentages of children having thyroid enlargement have been set forth in Table 1, according to age, sex, and color. The percentage incidence of simple goiter at each age among the boys is shown in Chart 1. In the same chart is displayed the incidence among the



CHART 1.—Comparison of age incidence of endemic thyroid enlargement among 23,710 boys examined in 1924 and 12,722 boys examined in 1927 in Cincinnati

boys examined in 1924. A similar graphic representation for the girls of each age is presented in Chart 2. In these charts it will be noted that there is a gradual though steady increase in the incidence of thyroid enlargement among boys, beginning at the age of 6 and reaching a peak between 12 and 14 years. Thereafter there is a similarly gradual decrease in thyroid involvement until the age of 18 is reached. Among the girls the increase in percentage incidence of thyroid enlargement is steady from 6 to 16 years of age.

Incidence of various degrees of thyroid enlargement.—That the vast majority of enlargements present in both sexes were very slight in character is indicated in Table 2. Ninety-four and five-tenths per cent of the boys and $78\frac{5}{10}$ per cent of the girls having enlargements were so classified. Slight enlargements were present to the extent of 5 per cent among the boys and 16.8 per cent among the girls having enlargements. Contrary to the findings in the 1924 survey,

there were very few moderate and marked thickenings among the boys examined in 1927. There were also fewer of the larger goiters among the girls, 2.1 per cent of the girls with enlargements being classed as having moderate and 0.28 per cent as having marked enlargements. Among the 2,859 boys with some degree of thyroid enlargement, 67 or 2.3 per cent were presumably adenomatous in character. There were 314 or 6.2 per cent of adenomatous glands among the 5,026 girls with enlargements. The numbers, degrees, and percentages of endemic thyroid enlargement among the boys and girls at each age period are shown in Table 3.

COMPARISON OF 1924 AND 1927 FINDINGS

When a comparison is made of the results of the 1924 and 1927 thyroid surveys, some interesting observations are possible. In the



CHART 2.—Comparison of age incidence of endemic thyroid enlargement among 23,783 girls examined in 1924 and 12,818 girls examined in 1927 in Cincinnati

aggregate, the incidence of endemic thyroid enlargement differs little in the two surveys. Thus, the total percentage of thyroid enlargement among the boys in 1924 was 26.6, and it was 22.5 in 1927; among the girls 39.8 in 1924 and 39.3 in 1927.

Inasmuch as the aggregate rates were approximately the same in the two surveys, it becomes necessary to institute a careful study in order to detect evidence of changes that may have occurred in the three-year interval. In chart 1 the curves showing the incidence of endemic thyroid enlargement among the boys examined in 1924 and 1927 are presented graphically. Similar curves for the girls are shown in chart 2. A study of the curves in these charts shows uniform trends for each sex and a lessened incidence at each age in 1927. The apparent discrepancy between the approximately similar total incidence rates and the interval between the age incidence can probably be explained by the inclusion of the 17 and 18 year age groups in the 1927 survey.

Differences in degrees of thyroid enlargement.—The percentages of each degree of thyroid enlargement encountered during the 1924 and 1927 surveys are set forth in Table 3. These data are shown graphically in chart 3. It will be seen that more very slight thyroid enlargements were recorded in 1927 than in 1924, the excess being more marked among the girls. However, among the other degrees of enlargement there were marked reductions in the precentages noted in 1927 when compared with the findings of the earlier survey.



CHART 3.—Comparison of degrees of endemic thyroid enlargement among 23,710 boys and 23,783 girls examined in 1924 and 12,722 boys and 12,818 girls examined in 1927 in Cincinnati

In fact, moderate and marked thickenings were comparatively infrequent among the girls and rare among the boys examined in 1927.

A point of considerable interest in connection with the resurvey in 1927 was the increased incidence of simple thyroid enlargement among the colored girls. Repeated inquiry has elicited the information that relatively few colored children receive either prophylaxis or treatment for goiter. Then, too, it is known, as a result of studies made in Cincinnati, that the natural incidence of simple goiter is greater among colored children, and particularly among the girls.

CAUSES OF CHANGES OCCURRING BETWEEN THE TWO SURVEYS

The same children examined in both surveys.—The children included in the 1927 survey were, with minor exceptions due to the extensive turnover peculiar to a large city, those examined in 1924. The children attending the first, second, and third grades in 1927 were not, of course, examined in 1924 because they were not in school at that time. However, those attending the sixth, seventh, and eighth grades in 1924 were again examined in 1927 by including the high schools, to which many of them had in the meantime advanced. In view of these facts, it may be concluded that the children examined in the two surveys were, with minor exceptions difficult of control, the same.

Reasons for changes in goiter incidence.—In seeking for an explanation of the reduction in the general incidence of goiter and the marked decrease in the number of thyroid enlargements of considerable size, a number of factors deserve consideration. Among these may be mentioned changes in methods of examining, altered standards of recording, and changes in the personnel engaged in making the examinations. The possibility of spontaneous disappearance or natural reduction in size of thyroid enalgements must likewise receive a share of attention. Furthermore, the influence of prophylaxis and treatment also enters into the problem.

Variations in estimates of thyroid involvement.—As previously indicated, the writer supervised and actively participated in both surveys, coaching the other examiners in uniform methods of examining and classifying the thyroids. Consequently the results of the surveys may be regarded as comparable. As additional experience and skill in palpating the thyroid gland are gained there may be a tendency, unconsciously, to revise the arbitrary standards for classifying enlargements. An effort was made to prevent such errors from creeping into the work. As a matter of fact, it is believed that the thyroid enlargements were more sharply classified in 1927 than during the earlier investigation. All things considered, it is believed that no detectable changes in methods occurred which might distort the comparative figures. To some extent this contention is borne out by the similarity of trends, as indicated in charts 2 and 3.

Spontaneous reduction in thyroid enlargement.—It is well known that many endemic goiters tend to disappear spontaneously as children grow older. This tendency is particularly marked among boys after the age of 12 or 13 years. As to the factors involved in the voluntary subsidence of thyroid swelling, little is known beyond the fact that it does occur. However, it is not felt that spontaneous resolution of thyroid involvement accounts either for the decrease in goiter incidence or the reduction in size of existing enlargements noted between the two surveys.

Decrease in number of larger goiters.—The marked decrease in the number of goiters of considerable size is probably due to the action taken in behalf of many children who, in 1924, were found to have such enlargements. The results of the 1924 goiter survey were afforded much publicity. Consequently many children received treatment from their family physicians. That such treatment was successful to a large extent is attested by the reduction in the sizes of many goiters. Credit must also be given the nurses of the Cincinnati Health Department, who "followed up" the children having moderate or marked thyroid enlargements and saw that appropriate medical treatment was secured. That goiter of marked size became less frequent in occurrence after the 1924 survey in Cincinnati was a fact noted by many lay observers, particularly school teachers, whose close contact with the children enabled them to see the changes.

Influence of prophylaxis.—Following the announcement that endemic goiter prevailed to a considerable extent in Cincinnati prophylactic measures were advocated and widely practiced. In addition to the rather general use of iodized table salt, various other iodine prophylactics were obtained by many children from their family physicians. The reduction in goiter incidence, though comparatively slight, suggested the possibility that iodized salt, the principal prophylactic recommended, may have had a share in the inprovement. However, as other preparations were undoubtedly used at the same time, it can not be asserted that iodized salt played the sole or principal rôle.

It is also difficult to estimate the influence of iodized salt or other prophylactics upon existing enlargements. Ordinarily it is doubtful whether iodine in prophylactic doses assists in reducing thyroid enlargements. However, in the present instance it may be surmised that iodized table salt and other iodine-containing preparations aided to some extent in reducing the size of the goiters. Further observations of more extensive and accurate character are manifestly required before a conclusion can be reached.

SUMMARY

1. A resurvey of endemic thyroid enlargement in Cincinnati, Ohio, in 1927, three years after the original thyroid survey, showed a lessened incidence of the disease and a considerable reduction in the number of goiters of moderate and marked degree.

2. The aggregate incidence of endemic goiter in 1927 was only slightly less than in 1924 but the age incidence was distinctly less in 1927. While iodized table salt was the chief prophylactic recommended and used, it is known that other iodine-containing preparations were also used. It may be surmised that iodized salt was a factor in the slight reduction of goiter revealed by the 1927 survey.

3. There was a notable decrease in the thyroid enlargements of considerable size noted in 1924 and again in 1927. This was due largely to efficient treatment instituted by physicians at the instigation of parents. It is possible that iodized salt and other prophylactics may also have exerted a favorable influence.

TABLE 1.—Number and percentage of thyroid enlargements among 12,722 boys and 12,818 girls examined in the schools of Cincinnati, Ohio, during the 1927 session, by age, color, and sex

	Boys						Girls											
Age	v	Vhite		0	Colo	red	Total		v	White		Colored		Total				
	A	в	c	A	в	С	A	в	C	A	в	c	A	в	c	A	в	c
6 7 8 9 10 11. 12 13 15.	106 710 1, 159 1, 166 1, 164 1, 238 1, 217 1, 215 1, 299 1, 357	15 86 152 241 250 289 324 312 349 347	14. 1 12. 1 13. 1 20. 7 21. 5 23. 3 26. 6 25. 7 26. 9 25 5	1 39 42 60 54 86 57 56 31 48	1 5 15 15 32 20 11 17	100. 0 12. 8 19. 0 25. 0 27. 8 37. 2 38. 6 35. 7 35. 5 35. 4	107 749 1, 201 1, 226 1, 218 1, 324 1, 274 1, 271 1, 330 1, 405	16 91 160 256 265 321 346 332 360 364	14.9 12.1 13.3 20.9 21.7 24.2 27.2 26.1 27.1 25.9	79 758 1, 151 1, 157 1, 098 1, 188 1, 117 1, 151 1, 377 1, 434	14 148 291 335 372 471 478 501 604 679	17. 7 19. 5 25. 3 28. 9 33. 9 39. 7 42. 8 43. 5 43. 9 47. 4	2 22 65 77 72 65 66 69 80 90	8 29 28 30 29 38 36 48 54	36. 4 44. 6 36. 4 41. 7 44. 6 57. 6 52. 2 56. 0 60. 0	81 780 1, 216 1, 234 1, 170 1, 253 1, 183 1, 220 1, 457 1, 524	14 156 320 363 402 500 516 537 652 733	17. 3 20. 0 26. 3 29. 4 34. 3 39. 9 43. 7 44. 0 44. 8 48. 1
16 17 18 19 and over	763 532 199 52	177 112 32 12	23. 2 21. 1 16. 1 23. 0	35 19 10 7	7 4 3 1	20.0 21.0 30.0 14.3	798 551 209 59	184 116 35 13	23.0 21.1 16.7 22.0	845 535 169 28	403 257 76 15	47. 8 48. 0 44. 9 53. 6	77 44 1 1	57 23 1 1	74. 1 52. 3 100. 0 100. 0	922 579 170 29	460 280 77 16	49. 9 48. 4 45. 3 55. 2
Total	12, 177	2, 698	22. 1	545	161	29. 5	12, 722	2, 859	22. 5	12, 087	4, 644	38. 4	731	382	52. 2	12, 818	5, 026	39. 2

Explanation: A, number of children; B, number of thyroid enlargements; C, percentage of thyroid enlargements.

 TABLE 2.—Numbers and percentages of each degree of thyroid enlargement among 2,859 boys and 5,026 girls in the 1927 survey in Cincinnati

Sex		Degrees of enlargement								
	Number and percentage	Very slight	Slight	Moder- ate	Marked	Very marked	Total			
BoysGirls	{Number Percentage {Number Percentage	2, 703 94. 5 4, 057 80. 7	144 5. 0 847 16. 8	10 0.35 107 2.1	2 0.07 14 0.28	 1 0. 02	2, 859 100. 0 5, 026 100. 0			

TABLE	3.—Numbers	and deg	rees of	thyroid	enlargement	among	12,722	boys	and
		12,81	8 girls	in Cinc	innati (1927)			•	

				В	oys			
		۲						
Age		Degree of	enlargeme	nt			Normal	Total
	Very slight	Slight	Mod- erate	Marked	Total	Per cent		Total
6	16 91 160 246 261 312 328 309 329 329 172 107 30	10 4 7 18 229 29 32 10 9 3	2 2 2 2 2 2 2 2		16 91 160 2565 321 346 332 360 364 184 116 35	14. 9 12. 1 13. 3 20. 9 21. 7 24. 2 27. 2 26. 1 27. 1 25. 9 23. 0 21. 1 16. 7	91 658 1,041 970 953 1,003 928 939 970 1,041 614 435 174	107 749 1, 201 1, 226 1, 218 1, 324 1, 274 1, 271 1, 330 1, 405 798 551 209
19 and over	13				13	22.0	<u>.</u> 46	59
Total Per cent	2, 703 21. 2	144 1. 2	10 0.08	2 0.0016	2, 859	22. 5 22. 5	9, 868 77. 5	12, 722 100. 0

	Girls											
		With enlarged thyroids										
Age		Degree	e of enlar	gement		Bon	Nor- mal	Total				
	Very slight	Slight	Mod- erate	Marked	Very marked	Total	cent					
6 7	14 155		1			14 156 220	17.3 20.0 26.3	67 624 806	81 780			
89. 10	310 340 373 424	10 21 26 73	2 3 2			363 402 500	20. 3 29. 4 34. 3 39. 9	871 768 753	1, 234 1, 170 1, 253			
12 13 14	416 416 488	91 109 138	7 9 24	2 3 1	1	516 537 652	43.7 44.0 44.8	667 683 805	1, 183 1, 220 1, 457			
15 16 17	509 339 198 61	192 98 73 14	30 19 8 2	2 4 1	 	733 460 280 77	48. 1 49. 9 48. 4 45. 3	791 462 299 93	1, 524 922 579 170			
19 and over	14 4, 057	2 847	107	14	1	16 5, 026	55. 2 39. 2	13 7, 792	29 12, 818			
Per cent	31.7	6.6	0.84	0.017	0.008		39.2	60.7	100. 0			

TABLE 3.—Numbers and degrees of thyroid enlargement among 12,722 boys and 12,818 girls in Cincinnati (1927)—Continued

TABLE 4.—Comparison of percentages of each degree of endemic thyroid enlargement (by sex and color) of 47,493 children examined in Cincinnati schools during the 1924 session and 25,540 children examined during the 1927 session

		Degree and percentage of enlargement								
Sex and color	Year of examina- tion	Very slight	Slight	Moderate	Marked and very marked	Total				
White boys	{ 1924 1927	17.4 20.9	7.4	1.5 .075	. 43 . 008	26. 7 22. 1				
White girls	{ 1924 1927	17.4 31.3	14.2 6.3	5.7 .75	2.4	39. 7 38. 4				
Colored boys	{ 1924 1927	17.4 27.7	9.0 1.4	1.2	.57	28. 2 29. 5				
Colored girls	{ 1924 { 1927	18. 2 37. 5	18.4 11.5	7. 2 2. 3	2.9 .9	46. 7 52. 2				

LEAD POISONING FROM THE USE OF SNUFF

A case of lead poisoning traced to the use of snuff adulterated by the addition of coloring materials containing lead, was reported in the Weekly Bulletin for November 5, 1927, issued by the New York City Department of Health. Attention is also called to the fact that snuff may be adulterated by lead pigments either for coloring purposes or to give spurious weight. The case reported is of clinical interest in showing the alertness that is sometimes necessary in discovering the cause of such poisoning. The following is taken from the Weekly Bulletin:

"One of the medical staff of Mount Sinai Hospital recently called the attention of the department of health to a male patient, who, upon examination, presented a marked polyneuritic condition that was suggestive of poisoning by one of the heavy metals. Lead was suspected, and the only possible etiological factor in this case was thought to be snuff, which the patient habitually used. The patient's stool contained lead, and an examination of the specimen of the snuff used by the patient in the chemical laboratory of the department of health showed lead present.

"Investigation by the bureau of food and drugs, at the plant where the snuff used by this patient was manufactured, proved conclusively that the lead content of the snuff was due to the use of a yellow and green coloring material. When the analysis of the chemical laboratory indicated the source of the lead content, an embargo was placed on all coloring materials in the plant, and the manufacturer was ordered to discontinue the use of all coloring matter at once. Prosecution proceedings have been instituted against the manufacturer."

DEATH RATES IN A GROUP OF INSURED PERSONS

Rates for Principal Causes for November, 1927

The death rate for November among approximately 18,000,000 industrial policyholders in the United States and Canada was 8.5 per 1,000, according to the Statistical Bulletin for December, published by the Metropolitan Life Insurance Co. This is the same rate as that for November of last year for this group of persons.

	Rate	per 100,00	0 lives expe	osed 1
Cause of death	Nov. 1927	Oct. 1927	Nov. 1926	Year 1926
Total, all causes	849. 8	769. 7	850. 2	945.6
Typhoid fever	4.3 1.0 2.6 3.9 12.4 11.0 79.2 70.3 73.5 16.2 53.2 135.2 66.0 14.9 23.1 66.7 14.5 8.0 7.6 62.4 20.8	$\begin{array}{r} 3.7\\ 4.5\\ 5.6\\ 6.5\\ 74.7\\ 74.7\\ 74.7\\ 74.7\\ 71.6\\ 15.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 112.0\\ 12.0\\$	6.2 1.2 8.1 12.9 13.5 85.9 76.4 772.2 16.1 50.6 125.5 71.6 11.8 27.7 70.5 11.1 8.0 7.3 8 0.2 6 19.8 19.8 19.8 19.8 19.8 19.8 19.8 19.8	4.2 10.2 3.4 9.6 9.7 31.1 99.0 88.7 73.5 16.7 73.7 16.7 73.5 134.3 98.2 134.3 98.2 134.3 98.2 134.3 7.7 7.0 62.3 16.8 101.0 8

Death rates (annual basis) for principal causes per 100,000 lives exposed, November 1927, as compared with October and with November, 1926

¹ All figures include infants insured under 1 year of age.

The mortality rates for the principal causes of death of major public health interest were lower than those prevailing last year, with the single exception of the rate for puerperal causes.

The mortality from organic heart disease was 7.7 per cent higher in November than it was a year ago. The rates for cancer and cerebral hemorrhage were also a little higher, while the death rate for Bright's disease was lower.

COURT DECISIONS RELATING TO PUBLIC HEALTH

Liability of town for antirabic treatment.—(Massachusetts Supreme Judicial Court; Bryant v. Nolin et al., 158 N. E. 791; decided November 23, 1927.) The chairman of a town board of health requested the town physician to "look into the case" of a boy who had been bitten by a rabid dog. The boy's parents permitted antirabic treatment to be given, but with the expectation that the town would pay for same. "Rabies" and "dog bite requiring antirabic treatment" were diseases defined by the State department of public health as dangerous to the public health. In an action brought by the physician against the parents to recover for medical services rendered the child, the supreme court upheld the action of the trial court in directing a verdict for the defendants, saying:

The order was clearly right. There was no express contract, and no contract was implied in fact or in law, to pay the plaintiff for the services rendered in the circumstances disclosed. Assuming the physician rendered services outside the terms of his employment as town physician to the board of health, and further assuming that such services were reasonably required by the board of health in making the provisions required by law for persons infected with a disease dangerous to the public health, the town was obligated to pay to the plaintiff the reasonable value of the services rendered at the request or at the direction of the board of health, and had a remedy over against the defendant[s] if they were able to pay. (G. L. c. 111, sec. 116; Haverhill v. Marlborough, 187 Mass. 150, 72 N. E. 943.)

Town held liable for sewage pollution of stream.—(Iowa Supreme Court; Stovern v. Town of Calmar, Winneshiek County, 216 N. W. 112; decided November 22, 1927.) An action was brought against a town for an injunction and damages on account of the pollution by sewage of a creek which flowed through the edge of plaintiff's farm. At the time of the trial in the lower court in October, 1926, the town had a sanitary sewage disposal plant about three-fourths completed. The trial court allowed the plaintiff damages, refused an injunction, and ordered the nuisance abated on or before January 1, 1927. Both parties appealed. The supreme court approved the amount allowed as damages by the trial court, but held that the latter court "should not have made its decree final, but the same should have been in its nature interlocutory, giving the defendant a reasonable time in which to abate the nuisance, but holding jurisdiction for the final determination herein as to the rights of the parties in this respect." The supreme court stated that it did not know whether the nuisance had been abated and remanded the case to the district court "for the purpose of taking evidence upon the single proposition as to whether a nuisance still exists, and for the purpose, that, upon said hearing, such decree with reference thereto as may be warranted by the evidence may be rendered."

Ordinance for prevention of pollution of source of city's water supply, located in United States forest reservation, held invalid.-(Washington Supreme Court; Brown v. City of Cle Elum, 261 P. 112; decided November 23, 1927.) The city of Cle Elum, under contract with the United States, took its water supply from a lake outside the city and within the limits of a United States forest reservation. The city, pursuant to statutory authority, passed an ordinance designed to prevent the pollution of the source of its water supply. This ordinance, among other things, prohibited swimming, fishing, and boating in the said lake. The United States had rented cottage sites along part of the lake, and the plaintiff in this case was a tenant of the United States. He sought to restrain the defendant city from enforcing or attempting to enforce the ordinance, particularly in so far as it prohibited or attempted to prohibit swimming, fishing, or boating in the lake. The validity of the ordinance was attacked on two grounds: (1) That its enactment was an attempted exercise of the police power of the city over lands and waters owned by the United States, and (2) that it was unreasonable. The case was heard before department 2 of the supreme court, and on April 28, 1927, a decision (255 P. 961) was rendered in favor of the city. Upon a reargument of the case before the court en banc the question was presented to the court as to whether or not the legislature could constitutionally delegate to a city authority to exercise police power beyond its territorial limits and outside the boundaries of property it may own beyond its territorial limits by the passing and enforcing of ordinances assuming to regulate the conduct of citizens beyond such limits and boundaries. The State constitution provided:

Any county, city, town, or township may make and enforce within its limits all such local, police, sanitary, and other regulations as are not in conflict with general laws.

The court then held that, in view of this provision, those statutory provisions, which purported to give to the city the power to pass such an ordinance as the one involved in the instant case, could have no validity. The court said:

This delegation of its police power by the State to various municipalities is strictly limited to the exercise of that power *within the limits* of such municipalities. Authorities are cited to the effect that the State, by legislative enactment, might delegate its police power to various municipalities to be exercised beyond their limits, but those authorities will be found to have not arisen where a constitutional provision obtains such as the one existing in this State. In order for the appellant in this case to pass a valid ordinance under the sections of the code relied on, it would be necessary for the court to read out of the constitutional provision the words, "within its limits," and no case has been cited to us, and we have been unable to find one, where legislation similar to that here under consideration has been sustained where there also existed a constitutional provision such as ours. * *

THE EIGHTH PAN AMERICAN SANITARY CONFERENCE— RESOLUTIONS—CORRECTION

In the report of the resolutions adopted at the Eighth Pan American Sanitary Conference, published in Public Health Reports for January 6, 1928, the word "maritime" was omitted before the last word, "travel," in paragraph (b), page 9. The concluding part of this paragraph should read, "during the time in which he is not engaged in maritime travel."

PUBLIC HEALTH ENGINEERING ABSTRACTS

Distribution and Succession of Protozoa in Imhoff Tanks. James B. Lackey. Report of sewage substation of the New Jersey Agricultural Experiment Station for year ending June 30, 1926, pp. 506-520.

A study to determine how and why protozoa are distributed throughout the depth of Imhoff tanks. Six diagrams and three tables present numerical data.

"(1) Flagellates are far more numerous than ciliates in Imhoff tanks; (2) vertically, flagellates are present in maximum numbers usually between 5 and 7 feet; (3) there is no definitely located point for the ciliate maximum; it varies greatly; (4) there is as yet no proof of a well-defined seasonal succession for any of the protozoa; (5) tanks which are not foaming have relatively small protozoan populations; (6) the numbers of protozoa decrease to the point of defaunation in tanks which are shut off; conversely, they increase enormously if a tank runs indefinitely; (7) their numbers are independent of observed ranges of pH and temperature in the tanks; (8) they are largely saprophytic forms, so a continuously running tank offers a constant food supply for them; (9) there is an absolute correlation between large increases in their numbers and foaming; (10) no definite explanation is at hand for the part they play in foaming."

But an increase in protozoa marks a danger point for the tank, and "if their increase be noted, the tank should be shut off or, better, corrected with lime."

English View of Sewage Disposal. Anon. Public Works, vol. 58, No. 10, October, 1927, pp. 400-402. (Abstract by W. J. Downer.)

Compares present status of dilution, irrigation, contact beds, percolating filters, activated sludge, tank treatment, and sludge disposal. Operation and advantages of each are briefly described.

Activated sludge treated more fully. Dilution is an authenticated method when sewage volume is reasonably apportioned to volume of diluent, salt or fresh. The Royal Commission has stated that 1 cubic yard of medium used in form of percolating filters is capable of performing same duty as 2 cubic yards of medium used in form of contact beds. Lagooning has taken the place of pressing in English practice to a large extent and is far from ideal as regards smell nuisance.

Research on the Composition of the Gray Slimy Growth on the Surface of Sewage Filters. H. D. Bell. (Surveyor, 1926, v. 70, 561-565. Abstract by W. Rushton in the Bulletin of Hygiene, vol. 2, No. 7, July, 1927, pp. 546-547.

"The author describes attempts to isolate the various mixed growths of organisms which make up the flora of the gray slime of sewage filters and to investigate their relationships to the insect Achorutus viaticus.

"By the use of dilute solutions of copper sulphate and formalin it was found that two types of fungi and two types of bacteria were the principal living forms, namely: Oidium lactis, a mold; Torula rosea, a pink wild yeast; Bacillus subtilis and Bacillus coli communis.

"In 1922 a slimy growth was found on the walls of a cellar in which food, beer, etc., had been stored, and thriving on this growth types of the insect *Achorutus viaticus* were found. In general appearance this growth resembled the sewage filter growths except in color.

"Isolation of the growths showed-

Slimy growths from Barnsley sewage	Slimy growths from Ripon cellar
Torula rosea (wild yeast).	Torula rosea.
Mucor mucedo (mold).	Mucor rouxii (mold).
Oidium lactis (mold).	Oidium lactis.
Penicillium (mold).	Penicillium glaucum (mold).
Racillus coli communis	

"The growth from the Ripon cellar had no contact with sewage, yet it contained two organisms in common with sewage, viz, Oidium lactis and Torula rosea.

"The molds produce hyphal threads and spores, and *Torula rosea* has a somewhat similar structure in media containing carbohydrates.

"As Schorutus viaticus thrived equally well on both sewage and cellar growths it would appear that their food was the filamentous structures of the molds O. lactis and Mucor and Penicillium.

"The author suggests a theory as to the formation of the gray slimy growths, showing how the sticky fluid having attached a mold to a piece of solid matter such as filter media, offers a surface upon which another film of tank effluent may rest, and so accelerate the production of more molds from spores, thus forming a network of molds which prevents free aeration, and encourages anærobic growths, causing the surface to become foul. This is what is known as the beginning of clogging. As *Achorutus viaticus* is unable to live under the surface of a liquor, nor in the absence of air, it must either attack the molds or the slimy growths formed below, and prevent the formation of spores, or it must walk on the surface of the liquor and attack the hyphal threads with attached spores. Probably it does both, and in doing so aids in opening up the filter surface, thus restarting the free circulation of air by which the oxidizing and nitrifying organisms can propagate at a greater rate.

"The effect of this action is borne out by the increase of nitric nitrogen and suspended matter from a filter after colonization by *Achorutus*.

"If this theory is correct, it explains why a sewage filter is kept clean by means of the insect named, and also why a sewage filter will eventually 'pond,' even in the presence of the insect if an excessive amount of tank effluent is sprayed on the filter without suitable resting periods.

"Proof of the food of the insect was demonstrated by feeding it on pure cultures of the molds O. lactis, M. mucedo, M. rouxii and Penicillium, when it was seen that it lives at the expense of the mycelium of the molds. "Since the author published his paper on The Maintenance of Clean Filtering Media on Sewage Filters (Assn. Managers Sewage Disposal, Leeds, Nov. 12, 1921) he has sent boxes of media containing eggs of the insect to nearly 40 sewage installations, including many abroad, some of which had to withstand tropical conditions and others extreme cold. On nearly 20 sewage installations in this country the insect has appeared naturally, and on these works ponding has scarcely been seen; this is attributed to its activities.

"The author desires information from sewage-disposal works where the insect is present naturally or introduced, (a) whether the insects are doing good work, (b) whether they appeared naturally or were introduced, (c) whether their colonization has been attempted and found successful.

"In conclusion, the author affirms that the interlacing hyphæ of O. lactis, the Mucors and probably other fungi is the probable origin of the gray, slimy growth of sewage filters, that the insect Achorutus viaticus feeds on it, and that neither copper sulphate 1-50,000 nor formalin 1-100,000 sprayed on the surface will prevent the formation of the gray, slimy growths on filters where the insect named has failed to colonize.

"In discussion, some speakers confirmed in all respects the usefulness of *Achorutus*; one pointed out that the winter period is the time when the slimy deposits are most prolific, suggesting a temperature factor. Others associated the slimy growth rather with bacterial activity than fungal, i. e., a bacterial factor as the dominant one. Attention was drawn to the Report of the Royal Commission on Sewage Disposal, where some of the workers tried various chemical ingredients, such as quicklime, chloros, and reported that caustic soda removed the growths.

"In reply the author stated his investigations had been confined to two or three works where the trade wastes had not been large, and it was possible other growths might appear at other sewage works."

Digestion of Activated Sludge. W. Rudolfs and P. J. A. Zellar. Public Works, vol. 18, No. 7, July, 1927, pp. 253–255. (Abstract by H. H. Hasson.)

This article is a summary of experiments on the effect of seeding activated sludge with ripe Imhoff sludge, mixing ripe sludge and fresh solids with it in proportion to secure most rapid digestion, and the effect of reaction control on digestion. Mixtures of ripe sludge and fresh solids, ripe sludge, fresh solids and activated sludge, ripe sludge and activated sludge, and activated sludge alone were used. Regular analyses (detailed description of method to be published later) of solids and ash and pH determinations were made. Bacterial and protozoan numbers were obtained and gas production of all materials was measured and analyzed.

The conclusions reached were that the activated sludge digests most rapidly when seeded with proper amounts of ripe sludge; that properly seeded activated sludge digests more rapidly and with less odors than properly seeded fresh solids; and that if gasification be desired properly seeded activated sludge should be treated with hydrated lime to a pH value of 7.5 to 7.6 (when necessary).

Effect of Lime on Sludge Digestion. W. Rudolfs, H. Heukelekian, P. J. A. Zeller, D. Peterson, J. R. Downes. Report of the Sewage Substation of the New Jersey Agricultural Experiment Station, year ending June 30, 1926, pp. 412-498. (Abstract by W. M. Olson.)

Presents detailed results of exhaustive research to determine the effect of lime under different conditions prevailing during digestion. Thirty-eight figures show 230 series of observed relations. Thirteen tables of data are given.

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The report describes experiments with a series of bottles in the laboratory, with three Imhoff tanks in operation and at rest, and with a separate sludgedigestion tank. In each case methods and results (chemical, bacteriological, and zoological) are stated, followed by a discussion and summary. The amounts of lime necessary for the adjustment of fresh solids and other material in digestion tanks are discussed at some length, previous to the concluding general discussion of the study as a whole.

The laboratory work showed that lime has a pronounced effect upon sludge digestion, influencing the flora and fauna and consequently the chemical intermediate and end products. "Most rapid and satisfactory digestion proceeds at pH values of 7.3 to 7.8. If the reaction of incoming fresh solids is kept at pH 7.3 to 7.6, odors are practically absent." In a previous report (American Journal of Public Health, 16: 365-368) it was stated that digestion takes a normal course when two parts of dry fresh solids are added daily to 98 parts of ripe sludge (dry With the use of lime to adjust the pH values of incoming fresh solids basis). to 7.3 to 7.6, the above mentioned ratio may be increased from 2.0 to 3.5 or possibly 5 per cent, reducing greatly the volume of ripe sludge necessary for efficient Using the ratio of 2 parts fresh solids to 98 parts ripe sludge, "unaddigestion. justed but properly seeded material requires a per capita digestion space (in summer) of not less than 2.6 to 2.7 cubic feet. With reaction control * * * capacity can be reduced to 1.4 to 1.5 cubic feet." this

In the plant experiments, "A comparison of two Imhoff tanks, one treated with lime to adjust the reaction of its contents, and the other untreated, showed that the treated tank gave no sign of foaming and was free from scum for several months in spite of the fact that it was continuously operating, whereas the untreated tank had to rest and could not be put into operation for a long time on account of heavy foaming."

On account of special conditions prevailing at the treatment plant it was not possible to carry the experiments on the separate sludge-digestion tank far enough to determine the maximum load which the tank could handle. With reaction control and the application of heat toward the end of the test, the tank provided satisfactory digestion in winter of 2.3 per cent fresh solids (dry basis) daily. The practicability of maintaining a comparatively high temperature in a sludge-digestion tank was demonstrated. The separate sludge-digestion tank did as well as a good working Imhoff tank. "Whether Imhoff tanks or separate sludge-digestion tanks are to be used depends upon the cost (construction and operating) and upon their flexibility and their ease of control." The control of the reaction of the contents and of the daily addition of definite quantities of fresh solids is simpler in separate sludge-digestion tanks than in Imhoff tanks. Likewise it is easier to heat a separate sludge-digestion tank.

"Figures and curves are presented to show the amounts of lime necessary to adjust the reaction of incoming fresh solids of different concentration. Examples are given for correction of poorly working, acid tanks. The reasons for adjustment are briefly discussed. Lime, if needed, should be added daily * * *. Examples of adjustment and methods of application of lime are given. The amount of lime necessary to adjust Plainfield fresh sewage solids to pH 7.3 is from 3 to 4 pounds per million gallons sewage daily; to adjust them to a pH value of 7.6 about 25 pounds per million gallons daily. * * * Good results in the correction of an Imhoff tank were obtained by adding dry hydrated lime to the digestion compartment with the aid of a small pump * * *. Material was pumped out of one compartment into the other and lime added. * * * With increased hardness of water the rate of sludge digestion should increase." "Summarizing the discussion on the effect of lime on digestion we can state that probably several factors are of more or less importance: (a) Its effect on the activities of microorganism; (b) chemical reactions induced; (c) cause of change in physical conditions of digesting material.

"The effect on the activities of microorganisms may be: (1) Making the medium more favorable for acid producing organisms; (2) inducing the establishment of a predominantly different flora; (3) making the medium less (or more) favorable for protozoa.

"Chemically it affects the organic and mineral acids and under certain circumstances favors the liberation of ammonia.

"Physically it flocculates the finely divided materials (hydrophyllic colloids) changing the viscosity and affects the surface tension of the liquid."

Bushy, Hertz, Sewerage and Sewage Disposal. Anon. Surveyor, vol. 72, No. 1867, November 4, 1927, p. 406. (Abstract by J. B. Harrington.)

This is a brief article describing the sewage-disposal plant for the urban district of Bushy, present population 12,743. All sewage, with the exception of a small area flows by gravity to the purification works located on a $31\frac{1}{2}$ -acre tract of land in the district of Watford.

Previous treatment of sewage consisted of chemical precipitation and downward filtration through 5 acres of land. Unsatisfactory results by this method were responsible for the construction in 1910 of a more modern plant comprising the following units: Duplicate grit and screening chambers, two sedimentation tanks 28 feet in diameter by 14 feet deep, four rectangular sedimentation tanks $40\frac{1}{2}$ by 35 by $4\frac{1}{2}$ feet, one dosing chamber with two automatic siphons, two sludge tanks $17\frac{1}{2}$ by 15 by 15 feet, five trickling filters 90 feet in diameter by 5 feet deep, six sand filters, combined area 2,300 square yards, and two rectangular storm-water tanks 80 by 22 feet by 2 feet 9 inches.

Increased population made it necessary to provide the following minor changes: Two new grit and screening chambers, remodeling of one circular sedimentation tank, construction of an octagonal humus tank 25 feet in diameter by 24 feet 2 inches deep, between the trickling filters and sand filters, and three new sludge digestion tanks and five sludge drying beds.

The construction of the supplementary units makes it possible to deliver practically an odorless effluent and sludge.

Production of Illuminating Gas from the Stuttgart Sewage Filter Plant. W. Sohler, Gas. u. Wasserfach, 70, 945–9 (1927). Abstract by R. W. Ryan in Chemical Abstracts, vol. 21, No. 22, Part I, November 20, 1927, p. 4000.

"A daily gas production of 3,000 to 4,000 cubic meters of gas is obtained from the anærobic fermentation of sludge from the Stuttgart sewage (population of Stuttgart, 350,000). The gas analyzes about 12 to 20 per cent CO₂, 4.8 per cent H₂, 75.5 per cent CH₄, and 4.7 per cent N₂, and has a calorific value of 7,500 to 8,500 cal. per cu. m. The method of recovery of this gas is described and illustrated. The gas is sold to the Gaisburg gas works."

The Aluminate-Alum Coagulation of Water. C. H. Christman. Bulletin 18-A, issued by the Chicago Chemical Co. 6 pages. (Abstract by W. A. Hardenbergh.)

Alum has been used almost universally as a coagulent in water purification, but its use with certain waters or under certain conditions has not been satisfactory. In some waters in the Great Lakes region, 0.2 to 0.4 grains per gallon is an efficient dose, but some plants in other sections require as much as 5 or 6 grains per gallon. Studies of these phenomena have shown that colloidal waters do not yield readily to treatment by alum. The application of hydrogen-ion control resulted in great advances, but the principles of colloid chemistry, it is felt, will yield still further advances.

Many workers have sought a coagulant that would meet the conditions required by their water supply, and also yield an effluent of sufficient alkalinity to be noncorrosive. Sodium aluminate therefore came into use, but was not entirely satisfactory, until a certain type of the chemical, itself possessing colloidal properties, was used. Further research is now going on. An account of the results at several plants is given.

Ueber die Abwasserreinigung mit Aktiviertem Schlamm Nach Versuchen mit Muenchener Kanalwasser. (Experiments with activated sludge, etc.) M. Strell. Gesundheits-Ingenieur. 1927, vol. 50, pp. 179–182. Abstract by M. E. Delafield in the Bulletin of Hygiene, vol. 2, No. 7, July, 1927, pp. 549–550.

"This is in the main a description of certain experiments with the activated sludge process. It is maintained that the mode of action is only to a slight extent a physical one and that by far the greatest part is a biological action brought about by bacteria, protozoa, and metazoa. In activated sludge it is possible to demonstrate the existence of such enzymes as diastase, invertase, glycogenase, maltase, lipase, pepsin, trypsin, urease, oxydase, and katalase. The experiments consisted in determining the variation in the purification of crude sewage resulting from varying the time and the amount of aeration, and the proportion of added sludge.

"The general conclusions reached were: (1) That the addition of about onethird of activated sludge was the most effective; (2) that the greatest purification occurred in the first hour and was about 60 to 70 per cent; (3) provided there is sufficient aeration to keep the sludge in movement, further increasing the amount of air does not improve the purification materially; (4) too great an aeration has the effect of breaking up still further the sludge particles and so producing a turbid effluent containing more suspended matter."

Residential Sewage Treatment Plants. Lindon J. Murphy. Bulletin 93, Iowa State College of Agriculture and Mechanic Arts Official Publication, vol. 25, No. 70, May 28, 1927. 23 pages. (Abstract by W. L. Havens.)

This article summarizes the essential design and construction details of house plumbing, grease traps, house sewers, cesspools, Imhoff tanks, septic tanks, subsurface irrigation, trickling filters and intermittent sand filters as applied to sewerage facilities for residences and small communities. Sketches of the various devices are given, together with methods of construction and methods of estimating the costs of the different systems. Basic features of design and general operating suggestions are also given. The article should be of particular interest to those who contemplate the installation of small residential plants and who depend upon a carpenter contractor for engineering advice.

MORTALITY SUMMARY FOR 75 LARGE CITIES, 1927

Number of deaths, death rates, and infant mortality in 75 large cities of the United States for 1927 and comparison with 1926

[From the Weekly Health Index, Bureau of the Census, Department of Commerce]

	(The fact	Deeth	Deaths	Pro- visiona infant	l Infant mor-	Mortalii dar	ty data fo year, 192	or calen- 26 ^{\$}
City	deaths 3	rate 3	under 1 year ¹	mor- tality rate, 1927 3 4	tality rate, 1926	Total deaths	Death rate	Deaths under 1 year
Total (67 cities)	363, 799	12.3	39, 054	• 62	• 72	384, 746	13. 2	45, 727
Akron 7 Albany	1,906 1,905 3,793 1,976 1,817 11,535 8,583 2,952	16.0 15.3 11.3 24.7 14.1 12.3 24.6	283 168 473 207 266 1, 330 894 436	59 66 	82 61 83 71 128	2,060 1,989 3,907 1,901 2,006 12,210 9,220 2,000	16.8 16.0 11.1 27.6 15.1 13.4 25.1	392 152 543 262 281 1, 359 932
Birmingham White Colored Boston	3, 405 1, 575 1, 830 11, 006	15.7 11.9 21.7 13.9	450 197 253 1, 449	74 52 109 77		3,718 1,731 1,987 11,720	17.7 13.5 24.0 14.9	537 239 298
Bridgeport ⁷ Buffalo Cambridge Camden Canton	1, 505 7, 275 1, 385 1, 634	13.3 11.2 12.3	132 836 156 220	46 69 53 67	73 84 68 87	1, 692 7, 779 1, 481 1, 768	14.3 12.1 13.5	1, 073 223 1, 037 199 264
Chicago Cincinnati Cleveland Columbus Dellee t	35, 582 6, 887 9, 463 3, 886 2, 411	11.5 16.8 9.8 13.4	3, 813 646 1, 043 352	63 75 54 63	67 89 72 75	35, 625 7, 104 10, 640 3, 968	10.4 11.7 17.3 11.1 13.9	4, 005 764 1, 396 424
White Colored Dayton Denver ⁸	1, 880 531 2, 210 4, 187	10. 2 19. 4 12. 3 14. 5	269 49 231 403	73	84	2, 130 2, 104 626 2, 162 3, 963	13. 5 11. 9 23. 4 12. 2 13. 9	358 82 264 385
Des Moines Detroit Duluth El Paso 8 Erie 7	1, 586 14, 393 1, 122 1, 610 1, 269	10.7 10.8 9.8 14.2	131 2, 323 97 293 132	42 69 43 52	68 84 59 	1, 716 16, 229 1, 195 1, 762 1, 509	11.8 12.6 10.6 16.1	202 2, 875 142 372 218
Fall River Flint Fort Worth ⁸ White Colored	1, 431 1, 389 1, 752 1, 399 353	10.8 9.8 10.7 9.7	222 311 188 161 27	73 76	91 85 	1, 707 1, 295 1, 551 1, 260	13.0 9.5 9.7 9.0	277 280 202 169
Grand Rapids Houston ^{7,8} White Colored	1, 587 2, 957 1, 954 1, 003	9.8	190 353 253 100	54	66	1, 773 2, 881 1, 929 952	10. 1 11. 3	235 336 229 107
Indianapolis White Colored Jersey City	4, 900 4, 101 799 3, 541	13. 1 12. 5 17. 9 11. 0	414 329 85 425	61 55 99 61	77 70 123 67	5, 146 4, 331 815 3, 802	14.0 13.4 18.7 11.9	527 421 106 463
White Colored Kansas City, Mo Knoxville	1, 533 1, 136 397 4, 994 1, 470	13. 1 11. 8 18. 8 13. 1 14. 4	162 110 52 448 156	66 52 145 61 65	84 78 122	1, 590 1, 210 380 5, 137 1, 423	13.6 12.6 18.5 13.7 14.4	209 165 44 578 185
White Colored Los Angeles ⁷ Lowell	1, 144 326 12, 926 1, 394	12. 8 26. 8 12. 7	128 28 1, 186 216	59 115 65 87	59 89	1, 062 361 12, 222 1, 549	12. 2 29. 8 14. 0	144 41 1, 083 220
Lynn Memphis. White Colored	1, 137 3, 444 1, 738 1, 706	10. 9 19. 3 15. 1 27. 0	119 347 168 179	58 78 60 108	66	1, 178 3, 529 1, 737 1, 792	11.3 20.0 15.3 28.4	125 416 199 217

¹ For the cities for which deaths are shown by color, the colored population in 1920 constituted the fol-lowing percentages of the total population: Atlanta, 31; Baltimore, 15; Birmingham, 39; Dallas, 15; Fort Worth, 14; Houston, 25; Indianapolis, 11; Kansas City, Kans., 14; Knoxville, 15; Memphis, 38; Nashville, 30; New Orleans, 26; Richmond, 32; and Washington, D. C., 25. ³ Based upon telegraphic reports received each week from city health officers. ³ Allowance has been made for the extra day which must be added to the 52 weeks to give a period of 265 down

365 days. Infant mortality rate is based upon deaths under 1 year as returned each week and estimated births, 1927.

Based upon deaths which occurred within the calendar year.

Based upon deaths which declined within the calendar year.
 Infant mortality rate for the cities in the birth registration area appearing in the summary.
 Mortality rates are omitted, pending the establishment of more satisfactory estimates of population.
 Cities with no infant mortality rate are not in the registration area for births.

Number of deaths, death rates, and infant mortality in 75 large cities of the United States for 1927 and comparison with 1926—Continued

[From the Weekly Health Index, Bureau of the Census, Department of Commerce]

			Deaths	Pro- visional	Infant	Mortalit dau	y data fe year, 19	or calen- 28
City	deaths	rate	under 1 year	mor- tality rate, 1927	tality rate, 1926	Total deaths	Death rate	Deaths under 1 year
Milwaukee	5, 706	10.7	770	66	75	5, 730	11.1	856
Minneapolis	4, 702	10.5	377	43	56	5,002	11.5	518
Nasnville	2,405	17.5	221	67		2,698	19.7	337
Colored	1,439	14.8 94.4	13/	30		1, 300	29.0	120
New Bedford	1.303	10.9	161	67	102	1, 500	12.5	283
New Haven	2,028	11.0	178	48	54	2, 212	12.2	200
New Orleans	7, 917	18.7	918	85		7, 933	18.9	, 808
White	4, 641	14.8	450	63		4,656	15.0	411
New Vork	3,2/6	29.8	408	130		3,211	10.0	397
Bronx Borough	8 574	11.0	604	40	58	9 244	10.3	947
Brooklyn Borongh	23, 763	10.5	2.856	55	66	26, 930	12.0	3.282
Manhattan Borough	29,075	16.1	2, 923	66	72	30, 068	16.0	3, 157
Queens Borough	6, 735	8.3	633	49	75	7, 833	10.3	894
Richmond Borough	2,096	14.3	148	51	72	1,990	14.0	200
Oakland	5,081	11.2	CU2	59	(V) 67	0, 101	10.8	. 131
Oklahoma City 7. 1	1,509	11.1	169	04	65	1, 186	10.0	134
Omaha	2,670	12.2	237	53	64	2, 794	13.0	295
Paterson	1, 729	12.1	162	54	64	1,830	12.8	187
Philadelphia	24, 811	12.2	2, 465	64	78	27, 667	13.8	3,007
Pittsburgh	9,055	13.6	1, 147	72	82	9,001	14.1	1,234
Providence	3, 516	11 2	205	42	39	3, 317	12 0	189
Richmond	2 600	14 1	274	60	107	3 035	16.0	430
White	1, 559	11.5	133	52	76	1,711	12.8	197
Colored	1, 140	20.6	141	99	164	1, 324	23.9	233
Rochester	3, 755	11.6	405	63	67	4, 103	12.8	414
St. LOUIS	10, 817	12.9	817	52		11, 540	13.9	1,146
Selt Lake City	2,812	11.0	195	30 61	68	3,032	12.3	318 917
San Antonio 8	2,978	14.1	522	01		3,015	14.7	606
San Diego	2,074	18.0	160	58	46	1,849	16.7	108
San Francisco	7,907	13.8	390	47	50	7, 662	13.5	415
Schenectady	984	10.6	111	67	71	1,087	11.7	124
Somerville	3, 335	9.5	181	31	9/ 81	3, 204	10.9	228
Springfield, Mass	1.663	11.3	170	52	69	1,820	12.6	229
Syracuse	2, 394	12.2	243	57	69	2, 513	13.6	277
Toledo	3, 631	11.9	335	62	82	3, 733	12.6	448
Trenton	1,927	14.1	226	73	77	1,890	14.1	228
Washington D C	1,578	15.3	130	56	81	1,081	10,4	182
White	4 339	10.8	305	48	67	4 583	11.6	108 407
Colored	2,632	19.4	300	106	123	2, 805	21.0	351
Waterbury 7	1,021		118	66	82	1, 194		182
Wilmington, Del	1, 446	11.5	145	73	87	1, 615	13.0	183
Worcester	2, 504	12.8	245	57	75	2,701	14.0	322
Y ONKERS	1,106	9.3	138	60	75	1, 215	10.4	170
1 0011g240WII	1, (10	10. 2	201	00	60	1, //0	10.7	332
,		•	•		,	1	1	

⁷ Mortality rates are omitted, pending the establishment of more satisfactory estimates of population. ⁸ Cities with no infant mortality rate are not in the registration area for births.

DEATHS DURING WEEK ENDED DECEMBER 31, 1927

Summary of information received by telegraph from industrial insurance companies for the week ended December 31, 1927, and corresponding week of 1926. (From the Weekly Health Index, January 7, 1928, issued by the Bureau of the Census, Department of Commerce)

	Week ended	Corresponding
	Dec. 31, 1927	week, 1926
Policies in force	69, 653, 164	66, 378, 884
Number of death claims	14, 773	13, 103
Death claims per 1,000 policies in force, annual rate.	11. 1	10. 3

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Deaths from all causes in certain large cities of the United States during the week ended December 31, 1927, infant mortality, annual death rate, and comparison with corresponding week of 1926. (From the Weekly Health Index, January 7, 1928, issued by the Bureau of the Census, Department of Commerce)

	Week er 31,	nded Dec. 1927	Annual death rate per	Death 1 y	Deaths under 1 year		
City	Total deaths	Death rate ¹	1,000 corre- sponding week, 1926	• Week ended Dec. 31, 1927	Corre- sponding week, 1926	rate, week ended Dec. 31, 1927 3	
Total (68 cities)	7, 917	13.8	3 14.2	786	³ 813	4 67	
Akron Albany * Atlanta * White Colored Baltimore * * White Colored Barmingham * White Colored Boston Bridgeport Buffalo Cambridge Canden Carden Cardon Chicago * Cleveland Colored Daltas * White Colored Detroit Dayton Denver Detroit Duluth El Paso Erie Fall River 5 Filint Fort Worth * White Colored Grand Rapids Houston * White Colored Jersey City Kansas City, Kans.* White Colored Lowell Lowell Loored Kansas City, M	7,917 299 47 88 533 234 1711 133 900 433 1439 2200 900 71 155 365 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 283 299 420 900 71 565 105 57 200 900 500 203 429 209 900 71 565 15 565 15 565 188 283 299 500 500 209 209 209 209 209 209 209 2	13.8 20.5 18.4 15.8 24.7 12.8 24.7 12.8 24.7 12.8 24.7 12.8 24.7 30.8 14.9 12.9 13.0 12.9 13.0 13.0 11.1 13.2 11.1 13.2 11.1 13.2 11.1 13.2 11.1 13.2 11.1 13.2 11.1 13.2 11.1 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9 13.9	• 14. 2 18. 0 15. 6 12. 8 16. 0 15. 6 12. 2 17. 8 16. 0 33. 7 21. 0 33. 7 21. 0 16. 5 29. 6 16. 9 12. 2 14. 5 11. 6 12. 3 13. 0 17. 8 11. 1 15. 9 12. 1 15. 7 12. 2 12. 2 12. 7 15. 9 12. 9 12. 6 15. 7 12. 9 12. 8 9. 2 11. 8 12. 8 9. 3 12. 7 15. 1 14. 8 16. 5 20. 1 14. 7 12. 2 11. 3 10. 7 16. 5 </td <td>786 6 3 10 10 9 4 5 28 100 28 110 28 100 26 33 5 00 28 100 26 35 5 00 9 4 35 15 3 30 4 9 8 11 10 10 3 2 1 1 3 2 1 1 3 2 1 1 1 10 3 2 1 1 3 2 1 3 2 1 4 18 11 9 0 4 4</td> <td></td> <td>4 67 65 63 79 60 156 78 119 55 68 48 70 60 70 99 99 99 99 99 99 99 99 99 99 99 99 99 99 99 99 64 84 87 60 75 63 49 145 55 55 55 63 63 64 87 60 75 63 55 55 55 63</td>	786 6 3 10 10 9 4 5 28 100 28 110 28 100 26 33 5 00 28 100 26 35 5 00 9 4 35 15 3 30 4 9 8 11 10 10 3 2 1 1 3 2 1 1 3 2 1 1 1 10 3 2 1 1 3 2 1 3 2 1 4 18 11 9 0 4 4		4 67 65 63 79 60 156 78 119 55 68 48 70 60 70 99 99 99 99 99 99 99 99 99 99 99 99 99 99 99 99 64 84 87 60 75 63 49 145 55 55 55 63 63 64 87 60 75 63 55 55 55 63	
New Orleans 6. White	216 142 74	8.7 26.5 23.6 35.0	14. 0 17. 9 15. 3 25. 3	18 14 4	3 7 2 5		

(See footnotes at end of table.)

January 20, 1928

	Week en 31,	nded Dec. 1927	Annual death	Death 1 y	Infant mortality	
City	Total deaths	Death rate	1,000 corre- sponding week, 1926	Week ended Dec. 31, 1927	Corre- sponding week, 1926	rate, week ended Dec. 31, 1927
New York. Bronx boro. Brooklyn boro. Manhattan boro. Queens boro. Richmond boro. Newark, N. J. Oakland. Oklahoma City. Omaha. Paterson. Philadelphia Pittsburgh. Portland, Oreg. Providence. Richmond ⁶ . White. Colored. Rochester. St. Louis. St. Paul. Salt Lake City ⁵ . San Antonio. San Prancisco. Schenectady. Seattle. Somer ville. Spragfield, Mars. Syracuse. Tacoma. Toledo Trenton. Utica. White. Colored. Schenectady. Seattle. Somer ville. Spragfield, Mars. Syracuse. Tacoma. Toledo Trenton. Utica. White. Colored. White. Colored. St. Louis. St. Paul. Somer ville. Sprace. Tacoma. Colored. Washington, D. C. White. Colored. Waterbury. Wilmington, Del.	$\begin{array}{c} 1, 514\\ 1, 514\\ 191\\ 473\\ 654\\ 48\\ 48\\ 48\\ 94\\ 47\\ 74\\ 27\\ 600\\ 27\\ 600\\ 27\\ 600\\ 216\\ 216\\ 216\\ 226\\ 216\\ 200\\ 700\\ 56\\ 311\\ 25\\ 251\\ 52\\ 251\\ 52\\ 251\\ 52\\ 251\\ 52\\ 251\\ 38\\ 48\\ 48\\ 166\\ 16\\ 14\\ 76\\ 25\\ 38\\ 48\\ 48\\ 16\\ 16\\ 16\\ 28\\ 38\\ 33\\ 47\\ 36\\ 162\\ 81\\ 61\\ 16\\ 28\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 42\\ 32\\ 33\\ 33\\ 33\\ 32\\ 32\\ 33\\ 33\\ 32\\ 32$	$\begin{array}{c} 13.2\\ 10.8\\ 10.8\\ 10.8\\ 10.8\\ 10.8\\ 10.8\\ 10.5\\ 17.1\\ 10.5\\ 14.4\\ 10.5\\ 14.3\\ 9.8\\ 12.8\\ 16.9\\ 15.2\\ 11.9\\ 23.4\\ 10.4\\ 15.6\\ 10.8\\ 17.3\\ 19.2\\ 21.7\\ 15.0\\ 7.8\\ 10.4\\ 11.6\\ 9.7\\ 15.0\\ 12.8\\ 13.4\\ 11.6\\ 9.7\\ 15.0\\ 12.8\\ 13.4\\ 11.6\\ 9.7\\ 15.0\\ 12.8\\ 13.4\\ 11.6\\ 9.7\\ 14.5\\ 23.4\\ 11.6\\ 13.6\\ 11.6\\ 11.6\\ 11.2\\ 13.6\\ 13.6\\ 11.2\\ 13.6\\ 11.2\\ 13.6\\ 13.6\\ 11.2\\ 13.6\\ 13.6\\ 11.2\\ 13.6\\ 13.6\\ 11.2\\ 13.6\\ 13.6\\ 11.2\\ 13.6\\$	14. 1 12. 3 13. 2 17. 4 10. 6 14. 6 10. 6 11. 9 16. 8 11. 9 10. 6 14. 8 16. 8 9. 3 18. 2 14. 4 27. 3 12. 0 16. 9 13. 2 14. 5 15. 9 16. 9 13. 5 15. 1 15. 1 15. 1 13. 8 12. 8 13. 6 17. 3 13. 6 11. 8 13. 0 12. 1	$\begin{array}{c} 150\\ 220\\ 565\\ 565\\ 16\\ 3\\ 14\\ 9\\ 1\\ 12\\ 2\\ 47\\ 25\\ 2\\ 6\\ 5\\ 3\\ 2\\ 6\\ 17\\ 2\\ 4\\ 12\\ 6\\ 10\\ 2\\ 5\\ 3\\ 5\\ 4\\ 1\\ 4\\ 4\\ 0\\ 15\\ 3\\ 12\\ 1\\ 4\\ 1\\ 4\\ 1\\ 4\\ 1\\ 4\\ 1\\ 1\\ 4\\ 1\\ 1\\ 4\\ 1\\ 1\\ 4\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\$	$\begin{array}{c} 160\\ 17\\ 58\\ 64\\ 17\\ 4\\ 15\\ 3\\ 2\\ 3\\ 0\\ 17\\ 6\\ 4\\ 4\\ 2\\ 2\\ 5\\ 27\\ 3\\ 8\\ 4\\ 6\\ 3\\ 6\\ 4\\ 4\\ 4\\ 1\\ 4\\ 5\\ 3\\ 11\\ 3\\ 8\\ 4\\ 4\\ 6\end{array}$	63 64 58 66 66 70 57 70 106 63 63 87 21 52 65 61 73 52 65 61 73 51 132 62 60 53 87 79 79 752 233 88 87 71 0 88 826 219 9 70 25 52 48
Yonkers Youngstown	26 42	11. 4 12. 9	11.7 14.6	4 3	11	92 40

¹ Annual rate per 1,000 population.

² Deaths under 1 year per 1,000 births. Cities left blank are not in the registration area for births. ³ Data for 67 cities.

4 Data for 61 cities.

⁶ Death for orefres. ⁶ Death for week ended Friday, Dec. 30, 1927. ⁶ In the cities for which deaths are shown by color, the colored population in 1920 constituted the fol-lowing percentages of the total population: Atlanta, 31; Baltimore, 15; Birmingham, 39; Dallas, 15; Fort Worth, 14; Houston, 25; Indianapolis, 11; Kansas City, Kans., 14; Knoxville, 15; Memphis, 38; Nashville, 30; New Orleans, 26; Richmond, 32; and Washington, D. C., 25.

DEATHS DURING WEEK ENDED JANUARY 7, 1928

Summary of information received by telegraph from industrial insurance companies for week ended January 7, 1928, and corresponding week of 1927. (From the Weekly Health Index, January 12, 1928, issued by the Bureau of the Census, Department of Commerce)

• •	Week ended	Corresponding
	Jan. 7, 1928	week, 1927
Policies in force	69, 402, 221	66, 407, 940
Number of death claims	9, 325	11, 467
Death claims per 1,000 policies in force, annual rate_	7.0	9.0

Deaths from all causes in certain large cities of the United States during the week ended January 7, 1928, infant mortality, annual death rate, and comparison with corresponding week of 1927. (From the Weekly Health Index, January 12, 1928, issued by the Bureau of the Census, Department of Commerce).

	Week end	ied Jan. 7, 28	Annual death rate per	Death 1 y	s under zear	Infant mortality
City	Total deaths	Death rate ¹	1,000, corre- sponding week, 1927	Week ended Jan. 7, 1928	Corre- sponding week, 1927	veck ended Jan. 7, 1928 ²
Total (66 cities)	7, 862	13. 7	3 14. 7	762	3 895	1 63
Akron Atlanta White Colored Baltimore ' White Colored Birmingham White Colored Birdigeport Buifalo Cambridge Cambridge Canbridge Canden Colored Boston Bridgeport Buffalo Cambridge Canden Canbridge Canden Canbridge Canden Colored Dallas White Colored Dayton Denver Des Moines Detroit Duluth El Paso Krie Fall River 4 Flint Flint Fort Worth White Colored Indianapolis White Colored Indianapolis White	$\begin{array}{c} \textbf{36} \\ \textbf{377} \\ \textbf{45} \\ \textbf{233} \\ \textbf{258} \\ \textbf{71} \\ \textbf{46} \\ \textbf{2377} \\ \textbf{1683} \\ \textbf{2577} \\ \textbf{277} \\ $	(*) 15. 2 15. 9 (*) 15. 9 (*) 20. 5 (*) 15. 5 15. 8 13. 7 7. 6 13. 4 16. 2 8. 0 15. 1 13. 7 (*) 7. 7 14. 4 10. 0 12. 1 5. 8 15. 5 12. 1 15. 5 (*) 10. 8 15. 5 (*) 10. 8 15. 5 (*) 10. 8 15. 5 (*) 10. 8 15. 5 (*) 15. 5 (*) 10. 8 15. 5 (*) 15. 5 (*) 16. 2 16. 2 17. 1 16. 2 17. 1 17. 4 17. 2 17. 1 17. 4 17. 2 17. 4 17.	20, 1 19, 5 14, 0 32, 5 17, 0 14, 9 29, 4 19, 4 10, 4 12, 5 6, 0 14, 5 20, 2 11, 4 12, 9 13, 8 26, 6 15, 6 16, 8 13, 9 6, 8 13, 9 14, 9 14, 9 15, 26 6, 0 14, 5 20, 2 11, 4 12, 7 16, 0 10, 6 13, 1 12, 7 16, 0 13, 8 9, 9 9, 9 9, 9 9, 9 9, 9 18, 4 16, 9 18, 4 16, 5 16, 5 18, 7 18, 27 18, 0 19, 4 19, 4 19, 4 11, 8 26, 6 18, 7 19, 4 19, 4 11, 8 26, 6 18, 7 19, 6 19, 6 19, 7 19, 6 19, 7 19, 6 19, 9 19, 9 19, 9 19, 9 18, 4 16, 9 18, 1 13, 5 26, 6 18, 7 19, 6 19, 6 19, 7 19, 9 19, 9 19, 9 19, 9 19, 9 19, 9 10, 9 11, 4 11, 12, 7 16, 0 13, 9 19, 9 18, 4 16, 9 18, 1 13, 5 26, 6 18, 7 18, 9 19, 9 18, 4 16, 9 18, 1 13, 5 26, 6 18, 7 14, 5 14, 5 26, 6 10, 9 13, 4 14, 5 26, 6 10, 9 13, 4 14, 5 26, 6 10, 9 14, 4 14, 5 14, 5	8 2 11 5 6 24 44 01 12 7 5 25 3 17 6 3 0 65 6 7 1 4 10 8 2 5 6 3 56 1 7 2 2 4 5 3 2 4 5 5 0 8 7 1 8 6 1 1 0 31 I 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 31 I 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 5 0 8 7 1 8 6 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 4 5 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 1 1 0 3 1 1 1 9 5 5 4 19 8 6 5 1 1 1 0 3 1 1 1 1 9 5 5 4 19 8 6 5 1 1 1 0 3 1 1 1 1 9 5 5 4 19 8 6 5 1 1 1 0 3 1 1 1 1 9 5 5 4 19 8 6 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\begin{array}{c} 10\\ 3\\ 11\\ 4\\ 7\\ 3\\ 7\\ 16\\ 12\\ 5\\ 7\\ 22\\ 6\\ 30\\ 0\\ 3\\ 1\\ 9\\ 17\\ 4\\ 7\\ 4\\ 3\\ 1\\ 4\\ 8\\ 4\\ 7\\ 2\\ 11\\ 2\\ 5\\ 7\\ 4\\ 4\\ 0\\ 1\\ 9\\ 6\\ 3\\ 16\\ 13\\ 9\\ 17\\ 3\\ 2\\ 1\\ 2\\ 3\\ 2\\ 1\\ 2\\ 4\\ 4\\ 8\\ 4\\ 4\\ 2\\ 8\\ 6\\ 5\\ 1\\ 3\\ 1\\ 3\\ 9\\ 1\\ 3\\ 2\\ 1\\ 2\\ 2\\ 2\\ 3\\ 2\\ 2\\ 3\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\$	87 41 76 56 157 103 97 113 69 55 73 107 48 0 56 36 46 36 36 36 41 34 34 31 60 56 23 50 80 23 60 60 80 23 60 60 80 23 21 24 22 24 90 21 25 105 94 125 125 85 85 94 107 60 87 87

(See footnotes at end of table.)

January 20, 1928

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Deaths from all causes in certain large cities of the United States during the week ended January 7, 1928, infant mortality, annual death rate, and comparison with corresponding week of 1927. (From the Weekly Health Index, January 12, 1928, issued by the Bureau of the Census, Department of Commerce)—Continued

	Week end	led Jan. 7, 928	Annual death rate per	Death 1 y	Infant mortality	
City	Total deaths	Death rate	1,000, corre- sponding week, 1927	Week ended Jan. 7, 1928	Corre- sponding week, 1927	week ended Jan. 7, 1928
New York Bronx Borough Brooklyn Borough Manhatan Borough Queens Borough Richmond Borough Newark, N. J. Oakland Oklahoma City Omaha Paterson Philadelphia Pittsburgh Portland, Oreg Providence Richmond White Colored Rochester St. Louis St. Paul Salt Lake City ⁸ San Antonio San Diego San Francisco Schenectady Somerville Springfield, Mass Syracuse Tacoma Toledo Trenton Washington, D. C. White	$\begin{array}{c} 1,574\\ 1986\\ 515\\ 6500\\ 1644\\ 47\\ 1044\\ 68\\ 344\\ 58\\ 47\\ 7551\\ 192\\ 722\\ 722\\ 722\\ 68\\ 68\\ 67\\ 38\\ 29\\ 93\\ 34\\ 183\\ 111\\ 30\\ 33\\ 27\\ 52\\ 26\\ 79\\ 94\\ 44\\ 148\\ 81\\ 148\\ 81\\ \end{array}$	(*) 13. 7 10. 9 11. 7 19. 4 10. 0 16. 3 11. 5 13. 0 14. 0 14. 0 14. 9 12. 4 18. 0 (*) 14. 8 14. 2 17. 0 12. 9 21. 6 21. 0 16. 3 6. 21. 0 16. 3 13. 6 12. 9 21. 6 21. 0 16. 3 15.	$\begin{array}{c} 13.2\\ 10.3\\ 11.7\\ 17.8\\ 9.6\\ 18.5\\ 16.2\\ 16.6\\ 16.7\\ 13.4\\ 13.7\\ 13.4\\ 13.7\\ 13.4\\ 15.2\\ 15.2\\ 13.8\\ 11.2\\ 15.2\\ 13.8\\ 11.2\\ 15.2\\ 13.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 15.2\\ 10.8\\ 11.2\\ 10.8\\ $	$\begin{array}{c} 145\\ 12\\ 46\\ 66\\ 66\\ 66\\ 20\\ 1\\ 7\\ 7\\ 5\\ 5\\ 9\\ 28\\ 4\\ 3\\ 6\\ 4\\ 2\\ 28\\ 4\\ 3\\ 6\\ 4\\ 2\\ 20\\ 8\\ 8\\ 2\\ 20\\ 8\\ 8\\ 2\\ 16\\ 13\\ 2\\ 4\\ 1\\ 1\\ 3\\ 3\\ 4\\ 2\\ 2\\ 7\\ 7\\ 5\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\ 1\\$	$\begin{array}{c} 138\\ 11\\ 45\\ 67\\ 13\\ 22\\ 22\\ 22\\ 22\\ 22\\ 22\\ 22\\ 22\\ 23\\ 229\\ 4\\ 8\\ 4\\ 4\\ 0\\ 4\\ 18\\ 1\\ 7\\ 11\\ 7\\ 11\\ 7\\ 4\\ 23\\ 2\\ 8\\ 8\\ 2\\ 8\\ 8\\ 8\\ 8\\ 8\\ 15\\ 10\\ 5\end{array}$	599 366 466 788 81 386 766 767 70 876 922 433 266 788 81 332 677 777 777 777 777 777 777 333 32 67 822 63 3138 266 82 81 81 332 82 63 81 82 83 81 82 83 83 83 83 82 83 83 83 83 83 83 83 83 83 83 83 83 84 84 84 84 85 82 83 83 83 83 84 84 84 84 84 84 85 85 85 85 85 85 85 85 85 85 85 85 85
Waterbury	18 45 63 21 30	18.3 16.7 9.1 9.0	18.6 15.2 9.7 13.2	3 5 6 2 2	5 3 5 2 9	87 132 73 46 27

Annual rate per 1,000 population.
 Deaths under 1 year per 1,000 births. Cities left blank are not in the registration area for births.

³ Date for 59 cities. ⁴ Date for 66 cities.

^a Death for on cities. ^b Death for one cities. ^c In the cities for which deaths are shown by color, the colored population in 1920 constituted the fol-lowing percentages of the total population: Atlanta, 31; Baltimore, 15; Birmingham, 39; Dallas, 15; Fort Worth, 14; Houston, 25; Indianapolis, 11; Knoxville, 15; Memphis, 38; Nashville, 30; New Orleans, 26; Richmond, 32; Washington, D. C., 25.

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 Weeks Ended January 15, 1927, and January 14, 1928

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended January 15, 1927, and January 14, 1928

	Diph	Diphtheria		Influenza		Mc a 3les		Meningococcus meningitis	
Division and State	Week ended Jan. 15, 1927	Week ended Jan. 14 1928	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928	
New England States:	1			,					
New Hampshire	1	-	1 0	0	201	- 59		0	
Vermont	2			1	91	2	0	0	
Massachusetts	109	129	12	10	197	1.202	ı i	ĺĭ	
Rhode Island	16	17			2	-, 5	ô	Ô	
Connecticut	31	44	24	3	17	142	2	· 0	
Middle Atlantic States:							_	-	
New York	288	421	1 98	1 22	821	1, 119	9	2	
New Jersey	134	198	28	24	62	188	1	3	
Pennsylvania	213	2 51			860	857	2	2	
East North Central States:									
Ohio									
Indiana	65	47	139	33	90	87	0	0	
lilinois	136	184	88	33	1,137	58	4	9	
Michigan	139	109		9	91	354	0	1	
wisconsin.	43	40	35	87	814	28	6	3	
West North Central States:								_	
Minnesota	36	39	3	1	130	. 6 j	0	2	
	36				199		0		
Missouri	- 50	40	3		186	30	1	5	
South Dakota	4	9			130		2	3	
Nobrocko				1	20	40	0	Ň	
Venera	.0	11			73	4	U U	3	
South Atlantic States:	17	32	22	10	137	20	2	1	
Dolowaro		1	1		2	17		•	
Maryland 1	75	25	- -	40	20	240	Ŷ	1	
District of Columbia	20	20	10	13	20	245		1	
Virginia	20		10				v		
West Virginia	30	14	61	31	08	71	·····i	·····i	
North Carolina	43	80			161	3 680		5	
South Carolina	21	40	914	1 430	40	1 450	ň	ň	
Georgia	32	23	107	184	56	173	Ň	ň	
Florida	30	28	101	11	6	117	ől	ĭ	
F 101108	30	28	!	11	0	1	01		

¹ New York City only.

² Week ended Friday.

Cases of certain communicable for weeks ended January	diseases reported by tel 15, 1927, and Januar	egraph by State health officers ry 14, 1928—Continued
<u> </u>		

	Dipl	Diphtheria		Influenza		Measles		gococcus ingitis
Division and State	Week ended Jan. 15 1927	Week ended Jan. 14, 1928	Week ended Jan. 15 1927	Week ended Jan. 14, 1928	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928
East South Central States: Kentucky Tennessee Alabama	- 39 - 72	. 13 17 33	83 99	8 141 224	- 136 75	51 445 165	10	0
West South Central States: Arkansas. Louisiana. Oklahoma ³	21 12 28 34 76	10 19 29 55 80	121 21 278 408	266 48 187 65	11 83 37 19	183 62 60 36	1 0 1 0	2 0 1 2 1
Mountain States: Montana Idaho Wyoming Colorado	7 2 5	1 1 18			67 77 66 15	1 2 	6 0 3 1	0 0 7 3
New Mexico Arizona Utab ² Nevada Pacific States: Weshington	4 8	7 35 9		4	7 491	46 27	0 0	0 1 3
Vrasungton Oregon California	19 152	14 129	23 41	23 34	55 55 1, 537	209 46 96	8 5 3	9 9
	Poliomyelitis		Scarlet fever		Smallpox		Typhoid fever	
Division and State	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928						
New England States: Maine	0	1	31	26	0	0	1	1
New Hampsnire	0 2 0 0	0 6 0 0	3 495 14 101	0 364 38 112	0 0 0 0	0 0 0 53	0 12 1 1	0 5 1 3
New York New Jersey Pennsylvania East North Central States:	1 1 1	6 1 3	720 266 508	626 205 450	18 0 0	18 0 0	27 5 40	15 5 20
Indiana Illinois Michigan Wisconsin West North Cantral States:	0 1 0 1	1 1 2 1	210 334 395 202	115 366 306 164	129 27 45 29	125 25 49 27	3 8 11 4	2 16 9 0
Minnesota Iowa ³ Missouri North Dakota Sonth Dakota	0 0 1 0	1 2 3	254 75 171 88	137 98 ⁻ 29	4 16 10 11	3 51 6	5 0 6 0	4
Nebraska Kansas South Atlantic States: Delaware	0 1 0	1 4 0	52 134 47	83 192 5	23 40 0	44 125 0	1 8 0	1 1 1 0
District of Columbia Virginia West Virginia	0 0	 	32 	69 56	0 0 	0 	10 0 	6 10
North Carolina South Carolina Georgia Florida	0 2 0 2	1 1 0 0	66 12 24 16	81 10 24 14	99 16 71 40	106 33 0 10	5 12 4 15	-0 4 9 3

² Week ended Friday.

³ Exclusive of Tulsa.

	Poliomyelitis		Scarlet fever		Smallpox		Typhoid fever	
Division and State	Week ended Jan. 15, 1927	Week ended Jan. 14, 1928						
East South Central States: Kentucky Tennessee Alabama.	0	010	51 18	58 21 16		27 23 4	21 7	3 7 12
Mississippi West South Central States:	0	Ó	14	20	9	7	2	5
Arkansas Louisiana Okishoma ³	0 1 0		8 8 61	26 11 41	4 7 39	9 11 201	11 8 11	3 11 7
Texas. Mountain States:	Ō	2	76	90	406	78	10	6
Montana Idaho Wyoming	0	0	30 35	25 34	6 0	11 18	0	1
Colorado New Mexico	0	2 0	67 	151 9	9	18 0	0	01
Utah ²	Ó	ŏ	17	17	3	33	Ō	Ō
Pacific States: Washington Oregon	0 0 3	6 4 8	116 80 280	54 32 206	61 26 23	70 49 23	4 9 14	4 3 13
~ united inter		Ŭ			\ 	-		

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended January 15, 1927, and January 14, 1928—Continued

Week ended Friday.

³ Exclusive of Tulsa.

Reports for Week Ended January 7, 1928

DIPHTHERIA	Cases	MENINGOCOCCUS MENINGITIS	Cases
District of Columbia	27	North Dakota	1
North Dakota	6	POLIOMYELITIS	
INFLUENZA		New Hampshire	1
District of Columbia	2	SCARLEI FEVER	
New Hampshire	56	District of Columbia	29
		New Hampshire	12
M EASLES		North Dakota	48
District of Columbia	3	SMALLPOX	
New Hampshire	8	North Dakota	1

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	Menin- gococ- cus menin- gitis	Diph- theria	Influ- enza	Ma- laria	Mea- sles	Pella- gra	Polio- mye- litis	Scarlet fever	Small- pox	Ty- phoid fever
October, 1927 Pennsylvania November, 1927	16	916			1, 059		119	1, 070	0	. 164
California Hawaii Territory Pennsylvania South Dakota December, 1927	21 5 9 1	747 17 1, 187 25	98 7 7	9	261 17 1, 735 70	5 1 	139 1 70 19	794 2 1, 626 191	52 •0 0 13	46 8 132 13
Arizona Connecticut Indiana	5 1 3	41 196 216	1 51 127		18 193 178	 	1 5 11	11 302 421	2 0 216	10 6 24

140

October, 1927		
Pennsylvania:	Cases	
Anthrax	1	
Chicken pox	1, 183	
Dysentery (epidemic)	1	
German measles	37	
Impetigo contagiosa	59	
Lead poisoning	2	
Lethargic encephalitis	3	
Mumps	545	
Ophthalmia neonatorum	10	
Tetanus	1	
Trachoma	2	
Whooping cough	551	
Man and Lon 1007		L
Anthrony		
Anthrax:	1	
California	1	
Pennsylvania	1	
Chicken pox:		
California	1, 340	
Hawaii Territory	13	
Pennsylvania	2,832	
South Dakota	37	
Conjunctivitis (follicular):		
Hawaii Territory	48	
Dysentery:	_	
California (bacillary)	7	
Hawaii Territory (amoebic)	1	
German measles		
California	409	
Pennsylvania	62	
Lead poisoning:		
Pennsylvania	1	
Leprosy:		
California	1	
Hawaii Territory	5	
Lethargic encephalitis:		
California	9	
Pennsylvania	7	
Mumps:		
California	348	i
Pennsylvania	1, 292	
South Dakota	21	1
Ophthalmia neonatorum:		
California	1	
Pennsylvania	15	
Paratyphoid fever:		
California	2	
•		

Pennsylvania. Rabies in animals: California. Rabies in man: California. Tetanus: California. Hawaii Territory. Pennsylvania. Trachoma: California. Yeansylvania. Trachoma: California. Yeansylvania. Trachoma: California. Yeansylvania. Trachoma: California. Yeansylvania. Trichinosis: California. California. Tularaemia: California. Whooping cough: California. Hawaii Territory. Pennsylvania. South Dakota. December, 1927 Chicken pox: Arizona. Connecticut. Arizona. Connecticut. German measles: Connecticut. Mumps: Arizona. Connecticut. Septic sore throat: <td< th=""><th>Puerperal lever:</th><th>Cases</th></td<>	Puerperal lever:	Cases
Rabies in animals: California Rabies in man: California California Tetanus: California Hawaii Territory Pennsylvania Trachoma: California 2 Hawaii Territory South Dakota Trichinosis: California California 2 Hawaii Territory South Dakota Trularaemia: California California 2 Hawaii Territory South Dakota Tularaemia: California California 2 Hawaii Territory Pennsylvania Pennsylvania 7 South Dakota 7 Connecticut 4 Indiana 3 Conjunctivitis (infectious): 7 Connecticut 1 Indiana <	Pennsylvania.	. 11
California Rabies in man: California Tetanus: California Hawaii Territory Pennsylvania Trachoma: California Hawaii Territory Pennsylvania Trachoma: California Hawaii Territory South Dakota Trichinosis: California California California California California California California Yhooping cough: California California Yhooping cough: California Yhooping cough: California Yhooping cough: California Z Hawaii Territory Pennsylvania Z Pennsylvania Z California Z Pennsylvania Z Ponsylvania Z Connecticut	Rabies in animals:	
Rabies in man: California	California	. 46
California Tetanus: California Hawaii Territory Pennsylvania Trachoma: California Trachoma: California Trachoma: California Trachoma: California Trichinosis: California Tularaemia: California Whooping cough: California Whooping cough: California Pennsylvania South Dakota December, 1927 Chicken pox: Arizona Connecticut Minaa Connecticut German measles: Connecticut Mumps: Arizona Connecticut Mumps: Arizona Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Septic sore throat:	Rabies in man:	
Tetanus: California. Hawaii Territory. Pennsylvania. Trachoma: California. California. 2 Hawaii Territory. South Dakota. Trichinosis: California. California. 2 Trichinosis: California. California. 2 Tularaemia: California. California. 4 Moboping cough: 6 California. 7 South Dakota. 7 Connecticut. 4 Indiana. 8 Connecticut. 1 Indiana. 1 Indiana.	California	. 1
California Hawaii Territory Pennsylvania Trachoma: California Hawaii Territory South Dakota Trichinosis: California California Trichinosis: California California Trichinosis: California California California California Yhooping cough: California California Yennsylvania South Dakota December, 1927 Chicken pox: Arizona Connecticut Arizona Connecticut German measles: Connecticut Mumps: Arizona Connecticut Mumps: Arizona Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Trachoma:	Tetanus:	
Hawaii Territory	California	. 5
Pennsylvania Trachoma: California Hawaii Territory South Dakota Trichinosis: California Trichinosis: California Trichinosis: California Trichinosis: California Tularaemia: California Whooping cough: California Hawaii Territory Pennsylvania South Dakota December, 1927 Chicken por: Arizona Connecticut Minaa Connecticut German measles: Connecticut Mumps: Arizona Connecticut Mumps: Arizona Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Connecticut Septic sore throat: Connecticut Trachoma:	Hawaji Territory	- 2
Trachoma: 2 Hawaii Territory. 5 South Dakota. 7 Trichinosis: California. Tularaemia: California. California. 4 Mbooping cough: 6 California. 7 South Dakota. 7 Tularaemia: 6 California. 6 Hawaii Territory. 7 Pennsylvania. 7 South Dakota. 7 Connecticut. 4 Indiana. 3 Connecticut. 1 Indiana. 1 Connecticut. 1 Indiana. 1 Rabies in animals: 1 Connecticut. 1 <td< td=""><td>Pennsylvania</td><td>4</td></td<>	Pennsylvania	4
California 2 Hawaii Territory 5 South Dakota 7 Trichinosis: California Tularaemia: 6 California 7 California 7 Tularaemia: 6 California 7 California 7 California 7 Pennsylvania 7 South Dakota 7 Chicken pox: Arizona Arizona 8 Conjunctivitis (infectious): 6 Connecticut 9 Lethargic encephalitis: 6 Connecticut 1 Indiana 1 Connecticut 1 Indiana 1 Rabies in animals: 6 Connecticut 1 Septic sore	Trachoma	-
Hawaii Territory South Dakota Trichinosis: California Tularaemia: California Whooping cough: California Whooping cough: California Whooping cough: California Whooping cough: California Pennsylvania South Dakota December, 1927 Chicken pox: Arizona Connecticut Hamaii (infectious): Connecticut German measles: Connecticut Mumps: Arizona Connecticut Mumps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut Arizona Connecticut Arizona Connecticut	California	214
South Dakota Trichinosis: California Tularaemia: California Whooping cough: California Whooping cough: California Yennsylvania South Dakota December, 1927 Chicken pox: Arizona Connecticut Hamais: Connecticut German measles: Connecticut Mumps: Arizona Connecticut Mumps: Arizona Connecticut Indiana Septic sore throat: Connecticut Septic sore throat: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Connecticut Yeoping cough: Arizona Connecticut Connecticut Yeoping cough: Arizona Connecticut Arizona Connecticut	Howaii Territory	43
South Trichinosis: California. Tularaemia: California. Whooping cough: California. California. Whooping cough: California. California. Hawaii Territory. Pennsylvania. South Dakota December, 1927 Chicken pox: Arizona. Connecticut. Arizona. Connecticut. German measles: Connecticut. Mumps: Arizona. Connecticut. Mumps: Arizona. Connecticut. Mumps: Arizona. Connecticut. Indiana. Rabies in animals: Connecticut. Septic sore throat: Connecticut. Trachoma: Arizona. Connecticut. Yhooping cough: Arizona. Connecticut. Yhooping cough: Arizona. Connecticut. <td>South Dekote</td> <td></td>	South Dekote	
California. California. Tularaemia: California. Whooping cough: California. California. Whooping cough: California. Pennsylvania. Pennsylvania. South Dakota. December, 1927 Chicken pox: Arizona. Connecticut. 4 Indiana. 3 Conjunctivitis (infectious): Connecticut. Jethargic encephalitis: Connecticut. Mumaps: Arizona. Connecticut. Mumaps: Arizona. Connecticut. Indiana. Rabies in animals: Connecticut. Septic sore throat: Connecticut. Trachoma: Arizona. Connecticut. Yhooping cough: Arizona. Connecticut. 4 Indiana.	Diabinosis:	• •
California. Tularaminis: California. Whooping cough: California. Pansi Territory. Pennsylvania. South Dakota December, 1927 Chicken pox: Arizona. Connecticut. Hamais (infectious): Connecticut. German measles: Connecticut. Lethargic encephalitis: Connecticut. Mumps: Arizona. Rabies in animals: Connecticut. Indiana. Rabies in animals: Connecticut. Yrachoma: Arizona. Wuhooping cough: Arizona. Connecticut. Yrachoma: Arizona. Connecticut. Yrachoma: Arizona. Connecticut. Yrachoma: Arizona. Yhooping cough: Arizona. Connecticut. Arizona.	California	9
Tubraema. California. California. California. Pennsylvania. Pennsylvania. South Dakota December, 1927 Chicken pox: Arizona. Connecticut. Hamasi infectious): Connecticut. German measles: Connecticut. Lethargic encephalitis: Connecticut. Mumps: Arizona. Connecticut. Indiana. Septic sore throat: Connecticut. Trachoma: Arizona. Connecticut. Yhooping cough: Arizona. <td< td=""><td></td><td>• •</td></td<>		• •
California. Image: California. California. Image: California. Hawaii Territory. Pennsylvania. Pennsylvania. 7 South Dakota 7 South Dakota 7 South Dakota 7 Chicken pox: Arizona. Arizona. 6 Connecticut. 4 Indiana. 3 Conjunctivitis (infectious): 6 Connecticut. 6 German measles: 6 Connecticut. 1 Lethargic encephalitis: 6 Connecticut. 1 Mumps: 1 Arizona. 1 Connecticut. 1 Indiana. 1 Rabies in animals: 6 Connecticut. 1 Septic sore throat: 1 Connecticut. 1 Trachoma: 1 Arizona. 1 Connecticut. 4 Indiana. 4	I ularaemia.	1
whooping couga: 6 California		. 1
Cantornia 4 Hawaii Territory	w nooping cough:	504
Hawain Territory		. 504
Pennsylvania 2 South Dakota December, 1927 Chicken pox: Arizona Arizona 3 Connecticut 4 Indiana 3 Conjunctivitis (infectious): 5 Connecticut 4 Indiana 3 Connecticut 4 Iderman measles: Connecticut Connecticut 4 Mumps: Arizona Arizona 1 Indiana 1 Rabies in animals: Connecticut Connecticut 1 Septic sore throat: Connecticut Trachoma: Arizona Mhooping cough: Arizona Connecticut 4 Indiana 4	Hawan Territory	. 1
South Dakota December, 1927 Chicken pox: Arizona Connecticut Indiana Conjunctivitis (infectious): Connecticut German measles: Connecticut Iethargic encephalitis: Connecticut Mumps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	Pennsylvania	. /11
December, 1927 Chicken pox: Arizona	South Dakota	. 20
Chicken pox: Arizona	December, 1927	
Arizona	Chicken pox:	
Connecticut 4 Indiana 3 Conjunctivitis (infectious): 3 Connecticut 4 German measles: Connecticut Lethargic encephalitis: 6 Connecticut 1 Mumps: 1 Arizona 1 Connecticut 1 Indiana 1 Rabies in animals: 1 Connecticut 1 Septic sore throat: 1 Connecticut 1 Trachoma: 1 Arizona 4 Connecticut 4	Arizona	. 29
Indiana 3 Conjunctivitis (infectious): 3 Connecticut 3 German measles: 6 Connecticut 1 Lethargic encephalitis: 1 Connecticut 1 Mumps: 1 Arizona 1 Connecticut 1 Indiana 1 Rabies in animals: 1 Connecticut 1 Septic sore throat: 1 Connecticut 1 Trachoma: 1 Arizona 4 Connecticut 4 Indiana 4	Connecticut	428
Conjunctivitis (infectious): Connecticut	Indiana	. 322
Connecticut German measles: Connecticut Lethargic encephalitis: Connecticut Mumps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	Conjunctivitis (infectious):	
German measles: Connecticut Lethargic encephalitis: Connecticut Mumps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	Connecticut	. 4
Connecticut Lethargic encephalitis: Connecticut Mumps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	German measles:	-
Lethargic encephalitis: Connecticut Mumaps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	Connecticut	. 8
Connecticut	Lethergic encenhalitis	. 0
Mumaps: Arizona Connecticut Indiana Rabies in animals: Connecticut Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut 4 Indiana	Connectignt	1
Arizona	Mumpe	-
Connecticut 1 Indiana 1 Rabies in animals: 1 Connecticut 1 Septic sore throat: 1 Connecticut 1 Trachoma: 1 Arizona 1 Whooping cough: 1 Arizona 2 Connecticut 4 Indiana 1	A risono	22
Indiana	Connecticut	146
Indiana: Rabies in animals: Connecticut. Septic sore throat: Connecticut. Trachoma: Arizona Whooping cough: Arizona. Connecticut. 4 Indiana.	Terdiana	140
Rables in animals: Connecticut	Indiana.	00
Connecticut	Radies in animals:	e
Septic sore throat: Connecticut Trachoma: Arizona Whooping cough: Arizona Connecticut	Connecticut	9
Connecticut Trachoma: Arizona Whooping cough: Arizona	Septic sore throat:	10
Trachoma: Arizona Whooping cough: Arizona	Connecticut	10
Arizona Whooping cough: Arizona	Tracnoma:	
Whooping cough: Arizona Connecticut	Arizona	14
Arizona Connecticut Indiana	Whooping cough:	
Connecticut 4 Indiana	Arizona	6
Indiana	Connecticut	470
	Indiana	77

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

The 97 cities reporting cases used in the following table are situated in all parts of the country and have an estimated aggregate population of more than 30,500,000. The estimated population of the 93 cities reporting deaths is more than 29,900,000. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

	1927	1926	Estimated expectancy
Cases reported			
Diphtheria:			
42 States	2.283	1 907	
\$7 eities	1 096	1 017	1 150
Measler	,	1,011	1,100
41 States	6 419	6.660.3	
97 eities	1 846	1 345	
Poliomvelitis:	1,010	1,010	
42 States	5.0	17	
Secriat favor	~		
A9 States	8 750	4 297	
12 Diavo	1 220	1 549	1 102
Smellner:	1, 220	1, 042	1, 195
An Stotos	711	075	
42 Olavo	· · · · · · · · · · · · · · · · · · ·	0/0	
Typhoid form	9 0 :	10	08
A States	949	210	
42 0 5815 3	242	312	
97 CIERS	41	64	47
Deaths reported			
	:		
Influenza and preumonia:			
93 cifies	1, 013	1,014	
Smallpox:			ł
93 eities	0	0	

Weeks ended December 31, 1927, and January 1, 1927 1

¹ The week ended Jan. 1, 1927, is considered to be the last week of 1926.

City reports for week ended December 31, 1927

The "estimated expectancy" given for diphtheria, poliomyelitis, searlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence the number of cases of the disease under consideration that 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 1918 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.

		Chieł	Diph	theria	Infa	ienza	Max		
Division, State, and city	Population, July 1, 1925, estimated	Chiek- en pox, cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported	Mea- sles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
NEW ENGLAND									
Maine						•			-
Postland	75 222						•		
New Hampshire:	10,000		4	1	0	U		9	4
Concord	22. 546	0	0	0	6	6 0	1	0	<u>ہ</u>
Manchester	83, 097	ā	3	Ā	Ă	ň	ā	Å	ĭ
Nashna	29 723	Ă	Ă	Å	ñ	Ň	ň		
Vermont	20,120	•		•		U	v	u	U
Barro	10 000								
Dunkington	-10, 000			<u> </u>		, v	U U	Ū,	U
Magaabaatta	24,009	1	0	9	0		0	0	0
Massachusetts:					-			_ 1	
Boaren	779, 620	68	59	26	2	0	266	2	22
Fan River	128, 993	1	5	3	1	1	0	0	3
Springfield	142, 065	8	4	8	0	0	1	8	3
Wercester	190, 757	5	5	5	0	0	0	21	2
Rhode Island:			- 1	- 1	- 1	-	-		
Pawtucket	69, 760	0	1	2	0	0	0	3	2
Providence	267.918	2	10	ā	ăl	ĭ	2	4	6
		-,	-• ,		• •	- /	- 1	- 1	•

			Diph	theria	Influ	lenza			
Division, State, and city	Population, July 1, 1925, estimated	Chick- en pox, cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported	Mea- sles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
NEW ENGLAND-could.									
Connecticut: Bridgeport Hartford New Haven	(1) 160, 197 178, 927	2 7 5	9 8 4	10 8 2	0 0 1	000	1 0 34	0 0 6	10 7 4
MIDDLE ATLANTIC									
New York: Buffalo New York Rochester Syracuse New Jersey:	538, 016 5, 873, 356 316, 786 182, 003	27 105 2 14	93 202 12 6	21 275 12 0	14	0 14 0 0	200 101 3 44	0 20 7 6	13 194 7 9
Camden Newark Trenton Pennsylvania	128, 642 452, 513 139, 020	3 27 1	5 17 6	7 17 3	0 7 1	0	0 49 10	0 10 0	5 11 5
Philadelphia Pittsburgh Reading	1, 979, 364 631, 563 112, 707	33 16	84 24 4	47 61 5	••••••	8 4 0	2 6 2 2	74 2	50 24 3
EAST NORTH CENTRAL									
Ohio: Cincinnati Cleveland Columbus Toledo	409, 333 936 , 485 279, 836 287, 380	16 23 11 35	14 40 6 13	8 62 10 8	011	3 5 1 2	55 11 1 44	0 84 3 11	17 19 8 3
Indiana: Fort Wayne	97, 846	2	5	8	0	0	0	0	1
Indianapolis South Bend Terre Haute Illinois:	358, 819 80, 091 71, 071	11 2 1	13 1 2	420	0 0 0	0 0 0	6 0 0	36 0 0	18 1 6
Chicago Springfield Michigan	2, 995, 239 63, 923	91 0	113 2	139 0	23 0	4 0	9 0	23 9	91 2
Detroit Flint. Grand Rapids	1, 245, 824 130, 316 153, 698	34 10 1	74 9 4	4 5 6 1	4 0 0	2 9 0	133 1 21	16 11 0	24 5 1
Kenosha. Milwaukee Racine Superior	50, 891 509, 192 67, 707 39, 671	10 44 2 5	2 24 3 0	6 11 3 0	0 6 0	0 0 0	0 2 0 0	1 7 2 0	1 7 0 1
WEST NORTH CENTRAL									
Minnesota: Duluth Minneapolis St. Paul	110, 502 425, 435 246, 001	0 64 2	2 20 16	0 16 4	0 0	0 3 0	1 0 0	0 7 0	2 18 8
Iowa: Davenport Des Moines	52, 469 141, 44 1	1 0	1 5	2 0	0		0	0	
Waterloo	36, 771	4	0	0	0		0	0	
Kansas City St. Joseph St. Louis	367, 481 78, 342 821, 543	16 5 21	12 3 51	2 0 31	0	1 0 0	0 0 18	31 1 8	14 1
North Dakota: Fargo Grand Forks	26, 403 14, 811	3 0	0	0	0	. 0	0	0	2
Aberdeen	15, 036 30, 127	4 0	0 1	00	0		0	· 0	
Lincoln	60, 941 211, 768	9	15	43	0	8	1	8	0
Kansas: Topeka Wichita	55, 411 88, 367	20 3	26	6	0	0	0	20	03

City reports for week ended December 31, 1927-Continued

¹No estimate made.

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City reports for	week ended	December 31	, 1927-Continued

······			Diph	theria	Influ	10nza			
Division, State, and city	Population, July 1, 1925, estimated	Chick- en pox, cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Cases re- ported	Deaths re- ported	Mea- sles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths re- ported
SOUTH ATLANTIC									
Delaware: Wilmington	122, 049	o	2	1	0	0	1	1	3
Baltimore	796, 296	67	36	35	15	0	87	4	35
Frederick	33, 741 12, 035	0	1	Ö	ŏ	ŏ	Ó	Ö	Ő
District of Columbia:	407 006	4	20	13	4	4	4	0	18
Virginia:	401,000	1							
Lynchburg	30, 395 (1)	0 10	23	2	Ö	0	1	0	8
Richmond	186, 403	2	8	4	0	2	24	0	5
West Virginia:	00, 200		4	1			1		0
Charleston	49, 019 56, 208	1	$\frac{1}{2}$	0 1		0	0	0	0 6
North Carolina:	20, 271		-	-			9		
Wilmington	30, 371 37, 061	4	0		Ö	0	117	ŏ	1
Winston-Salem	69, 031	0	1	4	0	0	10	13	1
Charleston	73, 125	0	2	0	87	1	1	0	2
Greenville	41, 225 27, 311	0	0	0			100	20	·····
Georgia:	m	9	4	3	37	5	2	2	8
Brunswick	16, 809	Õ	Ō	ŏ	Ő	ŏ	ō	ĩ	ŏ
Savannah Florida:	93, 134	0	、 ²	0	4	0	41	Ū	8
Miami St. Petersburg	69, 754 26, 847	1	·····i	1	0	0	0	0	3
Tampa	94, 743	7	î	2	0	ŏ	0	0	3
EAST SOUTH CENTRAL									
Kentucky:	F0 000				•	,		0	
Lexington	46, 895	ŏ		1	ŏ	i	ŏ	ŏ	2
Louisville	305, 935		8						
Memphis	174, 533	5	6	7	0	õ	67	5	. 6
Alabama:	130, 220	2	2	U		5	2	3	14
Birmingham	205, 670	0	3	6	0	4	5	0	92
Montgomery	46, 481	ō	ĩ	7	3	·ō	Ō	Ō	ō
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith	31, 643 74, 216		1	;-	4				
Louisiana:	11, 210			-		10			97
New Orleans	414, 493 57, 857	02	12	19 2	18	12	10	Ö	35 5
Oklahoma:	(1)			,			,	0	4
Texas:		1	2	1	T				-
Dallas	194, 450 48, 375	11	12	23	4	5	3	0	5 2
Houston	164, 954	ĩ	5	13	Õ	0	1	0	8
NOUNTAIN	198,009	U I	3	э	U	2	Ţ	U	11
Montana.									
Billings	17, 971	1	0	0	0	o	0	0	0
Great Falls	29, 883 12, 037	0	1	0	0	0	0	0	0
Missoula	12, 668	ŏ	ŏ	ō	ŏ	ŏ	õ	Ō	1
Boise	23, 042	o	0	1	0	0	0	5	0
						-			

¹ No estimate made.

77455°-28--3

	1				Diph	theria		Influ	enza			
Division, State, city	and	Populati July 1 1995, estimat	on, Cr en d 1 po	nck- pox, ses e- rted	Cases, esti- mated expect- ancy	Case re- porte	s d 1	Cases re- ported	Deaths Re- ported	Mea- sles, eases re- ported	Mumps, cases re- ported	Pneu- monia, desths re- ported
mountlin-Conti	nued											
Colorado: Denver Pueblo New Mexico:		280, 9 43, 7	11 87	19 9	11 3		2 1	Ō	7 1	4 0	12 1	18 0
Albuquerque Utah:		21,0	60	1	1		1	0	0	10	0	2
Salt Lake City		130, 9	48	17	3		2	0	0	0	0	3
Reno		12, 6	65	0	0		0	0	0	0	0	. 0
PACIFIC												
Washington: Seattle Spokane Tacoma		(1) 108, 8 104, 4	97 55	8 10 0	7 4 3	-	2 0 0	0 0 0	0	97 0 0	10 0 0	2
Portland		282, 3	33	18	10		6	Ð	0	3	0	10
California:		(1)		21	41	,		16		,	15	91
Sacramento		72, 2	50	0	2	0	î	Ĩ	1	õ	ŏ	1
San Francisco		557, 5	80	31	20	1	9	•	2	8	. 7	6
	Scarl	et fever		Smal	lpox	T 1	uber	т	yphoid f	lever	Whoop-	
Division, State, and city	Cases, esti- mated expect ancy	Cases re- ported	Cases, esti- mated expect ancy	Cas re- port	es Dea re ed port	ths de	ulo- sis, aths re- rted	Cases esti- mate expect ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
NEW ENGLAND												
Maine:	2		<u>م</u>		0	2	0	0	1	Δ.	_	15

City reports for week ended December 31, 1987-Continued

	Scarle	et fever		Smallp	x	Tuber-	Т	phoid f	Whoop		
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
NEW ENGLAND											
Maina											
Itertland	2		0	•	n	_	0	1	٥		15
New Hempshire:	0	- 4	v	U	U	v,	U		U		10
Concord	,			0			•	•	0		12
Manchester		1	Ň				Ň	Ň	Ň	, and a set	10
Nanchester			Ň	Ň			10		Ň	Ň	19
Nasilua		v	U	U	01		0		U	v	5
Porro			•		0		•			1	
Dalie	, i		8	Ň	Ň	0			1 I		10
Messechusette	1	A I	U I	v	v	-	U		- 1	-	19
Boston	57	77	0	0	0	16	1	1	0	97	202
Fall River	3	· · ;	ă l	ň	Ň		6	â	ň	-	20
Springfield	7	17	ň	ň	ň	ถึ	ň	ă	ŏ	ě	43
Worcester	12	14	ő	ň	ň	il	ň	3	ň	ă	42
Rhode Island		· · ·	•	•	•	1		•	v		14
Pawtucket	2	1	0	0	0	1	0	0	0	0	-23
Providence	7	26	ŏ	ŏ	ŏ	2	ŏ	ĭ	ŏ	ĩ	70
Connecticut		;	-		•	-:	•		-		
Bridgeport	9	10	0	0	0	2	0	0	0	0	43
Hartford	- Ő	2	ōl	ŏ	ŏ	ō	ŏ	ŏ	. Č	õ	52
New Haven	9	2	Ō	ŏ	ō	2	ŏl	ŏ	Ō	11	81
NIDDLE ATLANTIC		-			-	_			-		
MIDDLE AILANIE	1	1									
New York:			. 1								
Buffalo	25	42	1	0	0	7	1	0	0	21	134
New York	201	188	1	0	0	102	- 11	7	2	134	1, 514
Rochester	13	9	01	0	0	1	1	0	0	2	61
Syracuse	12	15	0	0	0	2	0	0	0	29	44
New Jersey:	_						- 1				~~
Camden	.5	6	N N	N I	0	0	- 11	0	0		33
Newark	20	17	01	N I	N N	4	1	N I	N N	24	109
Trenton	· •	1	v	U	U	U	v	v	v	ע	47
rennsylvania:		75				25				95	400
Pinadelpina	11	10	21	N N	N N	30	7			30	930 014
Pittsburgn	30	40			N N	12				39	210
resume	T 1	4 1	01	01	U (• • •	U I	01		ا <u>ت</u> ه	00

¹No estimate made.

	Scarle	et fever		Smallp	0X	Tuber-	Ту	phoid f	ever	Whoop	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
EAST NORTH Central											
Ohio: Cincinnati Cleveland Columbus Toledo Indiana:	14 37 10 14	10 24 32 6	0 0 0 1	0 0 1 0	0 0 0 0	17 6 6	0 2 0 0	1 0 2 0	2 2 0 0	2 33 1 11	149 220 90 83
Fort Wayne Indianapolis South Bend Terre Haute Illinois:	4 9 4 3	4 10 2 0	0 7 0 1	0 1 0 6	0 0 0 0	0 6 0 2	0 0 0 0	1 0 0 0	0 0 0 0	0 4 1 0	15 100 12 21
Chicago Springfield Michigan:	122 2	130 2	0	8 0	0 0	47 1	5 0	. 1 0	0 0	99 1	773 22
Detroit Flint Grand Rapids. Wisconsin:	90 8 11	93 16 8	2 0 0	2 0 0	0 0 0	21 2 2	2 0 0	0 1 0	0 0 0	47 5 3	283 42 35
Kenosha Milwaukee Racine Superior	1 25 6 2	5 39 4 6	1 2 0 2	0 0 0 0	0 0 0	0 8 1 0	0 1 0 0	0 2 0 0	0 0 0 0	1 17 5 0	7 111 9 10
WEST NORTH CENTRAL											
Minnesota: Duluth Minneapolis St. Paul Iowa:	8 51 27	0 23 14	1 9 7	0 2 0	0 0 0	0 7 4	0 1 0	1 0 0	0 0 0	2 0 2	29 120 59
Davenport Des Moines Sioux City	2 6 2	5 14	1 1 0.	0 10			0	0		1 0	
Missouri: Kansas City	12		0	0			0	0		3	
St. Joseph St. Louis North Dakota:	2 38	2 32	0	23 0	0	2 16	0 2	2 0 2	0 0 1	3 0 21	128 27 251
Fargo Grand Forks South Dakota:	2 0	0	0 0	0	0	0	00	00-	0	1 0 -	9
Aberdeen Sioux Falls Nebraska:	01	0 5	0	0			0	0 - 0 -		1	
Omaha Kansas:	6	10	0 5	ő	0	0	0	0	0	0	13 60
Topeka Wichita	2 4	1 8	0 0	0 12	0 0	1	0	0 0	0	7 6	12 27
SOUTH ATLANTIC											
Wilmington	4	1	0	0	0	1	o	0	0	0	33
Baltimore Cumberland Frederick District of Colum-	29 0 0	13 0 0	0 0 0	0 0 0	0 0 0	19 0 0	3 0 0	1 0 0	0 0 0	16 0 0	234 6 4
bia: Washington	22	33	o	0	0	11	2	o	o	4	142
Lynchburg	0	0	o	0	o	1	0	0	0	0	15
Richmond Roanoke West Virginia	6 1	6 4	0 1	0 0	0 0	2 1	0	10	0	0	52 12
Charleston	1 2	4 0	8	0	0	1 0	0	C 0	0	0	12 15

City reports for week ended December 31, 1927-Continued

				~ ~ ~							
	Scarle	et føver		Smallp	x	Tuber-	T	phoid i	Whoop	-	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Desths re- ported	ing cough, cases re- ported	Deaths, all causes
SOUTH ATLANTIC											
North Carolina: Raleigh Wilmington Winston-Salem	0 0 1	1 0 3	0 0 1	0 0 0	0 0	1 1 2	0 0 9	0 9 0	0 0 0	2 0 0	13 14
South Carolina: Charleston Columbia	000	0 1	0 0 1	0 0	0	2	0 0	0 Q	0	0 0	26 10
Georgia: Atlanta Brunswick Savannah	4 0 1	3 1 3	1 0 0	0 0 2	0 0 0	3 0 3	0 0 1	1 0 3	1 0 1	1 0 0	88 5
Miami St. Petersburg Tampa	0 1	2 5	 0 1	0 0	0 0 0	0 1 4	0 0	0 1	0 0 0	0	39 15 31
EAST SOUTH CEN- TRAL											
Kentucky: Covington Lexington Louisville	2 5	0	0	0 0	0 0	3 2	0 0	0 0	0	0	19 18
Tennessee: Memphis Nashville	5 3	4 2	1 0	0 1	0 0	8 5	0 0	0 0	0 0	0 0	H 65 58
Birmingham Mobile Montgomery	4 0 0	2 0 0	1 1 1	1 0 0	0 0 0	4 2 0	0 0 0	0 0 2	0 0 0	3 0 0	90 33
WEST SOUTH CEN- TRAL											
Arkansas: Fort Smith Little Rock	1 · 2	2	0 0	·····	0	5	0 0	0	0	0	
New Orleans Shreveport Oklahoma:	5 2	3 3	0 1	0 0	0 0	12 0	2 0	2 0	0	3 0	216 29
Oklahoma City Texas:	3	4	1	9	Q	3	0	1	0	0	27
Dallas Galveston Houston San Antonio	3 0 2 1	6 1 8 7	0 0 1 0	0 0 0	0 0 0 0	5 0 3 10	0 0 0 0	0 0 0 1	0 0 1 0	2 0 0 0	71 11 70 78
MOUNTAIN											
Montana: Billings Great Falls Helena Missoula	1 1 0 1	1 3 3 0	0 1 0 0	1 0 2 0	0 0 0 0	0 0 0 0	0 0 0 0	0 1 0 0	0 0 0 0	1 0 0 0	7 8 8
Idaho: Boise Colorado:	2	o	0	0	o	o	0	o	0	0	6
Denver Pueblo	12 2	6 9	1 0	1 6	0 0	11 0	0 0	1 0	00	4	105 7
Albuquerque Utah:	0	2	0	0	0	8	0	0	0	0	17
Salt Lake City Nevada: Reno	2 0	3	1	6 0	0	0	0	0	0	0	- 45

City reports for weeks ended December 31, 1987-Continued

T

	Scarle	et fever		Smallpox				Т	yphoid i	Whoop	Ì	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Dear re port	ths ied	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
PACIFIC Washington: Seattle Spokane	95	3 11	2	15				1	0		1	
Tacoma	3	ī	3	ĩ		0	1	Ŏ	Ŏ	0	·ŏ	20
Portland	7	8	6	11		0	3	0	1	0	0	80
Los Angeles	24	23	4	0		0	25	2	0	0	7	306
Sacramento San Francisco.	2 13	1 9	1	0 4		0	2 5	0 1	0	0	0 3	24 164
	M	eningo- coccus ningiti:	s e	Lei	thargic phalitis	P	ellagra	Polio tij	Poliomyelitis (infan- tile paralysis)			
Division, Sta	te, and d	city	Case	s Deat	hs Ca	ases	Death	s Case	Death	Cases, esti- s mated expect ancy	Cases	Deaths
NEW ENG	GLAND											
Massachusetts:			.			•						•
Fall River			. 0		0	Ŭ				0		
Worcester			0		0	0	0	0	0	0	1	1
MIDDLE AT	LANTIC			1								
New York: New York						2	19					,
Pennsylvania:				1			12					-
Ther NORTH				'		Ů	U		1	0		U
Ohio:		-										
Cleveland Illinois:			- 2		D	0	0	0	0	0	0	0
Chicago			. 4	:	2	0	0	0	0	0	0	0
Detroit			. 0	1	L	0	0	0	0	0	1	0
Milwaukee	•••••		. 2	(0	0	0	0	0	0	0
WEST NORTH	CENTRA	L										
Minnesota:												
Minneapolis					2	0	1	0	0	0		0
Missouri: St. Joseph			1 1	6		0	0	0	0	0	0	0
Nebraska: Omaha			1			oİ	0	0	n N	n 1		0
Kansas: Wichita	Kansas: Wichita		0	1		0	ñ	0	۰ ۱	0	ů	0
SOUTH ATL	ANTIC						J	Ű			Ť	•
North Carolina:												-
Georgia:			- 0	1		0	0	0	0	0	0	0
Savannah ¹			.) 0	0		0 (0	01	1	0	01	0

City reports for week ended December 31, 1927-Continued

T

T

¹ Typhus fever: 2 cases at Savannah, Ga.

Т

	Me ce mer	ningo- ceus ingitis	Lei	thargic phalitis	P	ellagra	Poliomyelitis (infan- tile paralysis)		
Division, State, and city	Cases	Deaths	Cases	Deaths	Case	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
EAST SOUTH CENTRAL							-		
Tennesse: Memphis	Ó	0	0	0	1	o	0	0	0
WEST SOUTH CENTRAL									
Arkanses: Little Rock	0	0	0	0	0	1		0	17 0
New Orleans	0	0	0	0	3	0	. 0	0	0
Oklahoma City	0	o	0	1	0	0	0	0	0
Texas: Dallas	0	1	0	0	2	1	0	0	0
MOUNTAIN									
Montana: Missoula	1	0	0	0	0	0	0	0	0
Denver	2	1	0	0	0	0	0	0	0
Utah: Salt Lake City	2	1	0	o	0	0	0	0	0
PACIFIC									
Washington: Seattle Spokane	12		0	•••••	0		0	0	
Oregon:					Å				••••••
California:	1	2	U I	0	e e	U	۷I	1	3
Los Angeles Sacramento San Francisco	0 1 0	0 0 0	0 0 0	0 0 0	1 0 0	1 0 0	0 0 0	2 0 1	0 0 1

City reports for week ended December 31, 1927-Continued

The following table gives the rates per 100,000 population for 101 cities for the five-week period ended December 31, 1927, compared with those for a like period ended January 1, 1927. The population figures used in computing the rates are approximate estimates as of July 1, 1926 and 1927, respectively, authoritative figures for many of the cities not being available. The 101 cities reporting cases had estimated aggregate populations of approximately 30,445,000 in 1926 and 30,966,000 in 1927. The 95 cities reporting deaths had nearly 29,785,000 estimated population in 1926 and nearly 30,296,000 in 1927. 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, November 27 to December 31, 1927—Annual rates per 100,000 population, compared with rates for the corresponding period of 1926 ¹

DIPHTHERIA CASE RATES

		Week ended-									
	Dec. 4, 1926	Dec. 3, 1927	Dec. 11, 1926	Dec. 10, 1927	Dec. 18, 1928	Dec. 17, 1927	Dec. 25, 1926	Dec. 24, 1927	Jan. 1, 1927	Dec. 31, 1927	
101 cities	224	233	201	204	188	2 206	3 163	203	176	4 187	
New England	172	267	163	216	160	200	160	193	158	165	
Middle Atlantic	177	252	161	228	167	226	140	233	171	221	
East North Central	266	220	223	228	213	248	³ 182	212	193	200	
West North Central	210	179	194	129	129	129	113	123	165	6 129	
South Atlantic	240	225	237	190	216	140	7 214	143	173	\$ 128	
East South Central	300	168	284	71	145	\$ 162	150	2 177	186	2 147	
West South Central	318	273	266	218	258	218	168	344	223	9 271	
Mountain	228	144	246	144	164	162	137	117	137	63	
Pacific	268	259	238	168	252	168	225	157	155	141	

MEASLES CASE RATES

177	189	197	22 5	193	2 249	3 209	2 288	231	4 315
101	539	165	539	229	604	167	536	184	708
37	180	23	199	24	206	22	251	22	331
151	122	212	140	256	117	\$ 249	157	294	160
113	24	129	50	109	46	77	38	61	6 39
48	308	54	527	89	607	7 62	797	179	\$ 730
26	224	78	367	21	2 737	31	2 1.032	78	2 545
142	122	146	134	82	252	103	84	-13	9 116
2.844	27	3.217	36	2.351	27	2.780	18	3. 545	36
699	228	613	178	603	238	879	257	697	283
	177 101 37 151 113 48 26 142 2,844 699	177 189 101 539 37 180 151 122 113 24 48 308 26 224 142 122 2, 844 27 609 228	177 189 197 101 539 165 37 180 23 151 122 212 113 24 129 48 306 54 26 224 78 142 122 146 2, 844 27 3, 217 699 228 613	177 189 197 225 101 539 165 539 37 180 23 199 151 122 212 140 113 24 129 50 48 305 54 527 26 224 78 367 142 122 146 134 2, 844 27 3, 217 36 699 228 613 178	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$

SCARLET FEVER CASE RATES

101 cities	242	184	238	184	279	2 212	3 253	2 187	267	4 210
New England	325	276	340	320	387	325	248	281	356	345
Middle Atlantic	157	155	178	156	214	199	212	173	235	200
East North Central	237	192	235	216	241	243	\$ 255	212	245	257
West North Central	436	250	432	206	413	204	371	202	385	6 194
South Atlantic	181	174	173	134	199	163	7 171	145	238	\$ 150
East South Central	243	148	150	82	248	\$ 147	243	2 103	176	2 59
West South Central	210	143	142	117	236	172	125	92	150	9 129
Mountain	930	360	802	306	1.112	243	975	171	893	234
Pacific	265	128	230	152	383	154	303	191	252	126
							1			

SMALLPOX CASE RATES

101 cities	14	17	11	13	16	2 19	3 14	* 16	14	4 15
New England Middle Atlantic. East North Central West North Central. South Atlantic. East South Central. West South Central. Mountain. Pacific.	0 0 21 48 19 0 9 18 35	0 0 10 115 5 10 8 45 39	0 1 7 38 19 21 9 18 43	0 0 4 75 7 5 8 99 39	0 1 11 46 26 78 43 0 40	0 0 17 115 5 27 0 117 31	0 5 16 28 7 30 36 26 18 43	0 0 12 77 20 29 13 99 26	0 1 7 40 41 47 21 9 21	0 12 6 82 8 4 2 15 9 4 144 29

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, 1926 and 1927, respectively.
² Louisville, Ky., not included.
³ Terre Haute, Ind., and Norfolk, Va., not included.
⁴ Sioux City, Iowa, Greenville, S. C., Louisville, Ky., and Fort Smith, Ark., not included.
⁵ Sioux City, Iowa, not included.
⁶ Fortolk, Va., not included.
⁶ Fort Smith, Ark., not included.

January 20, 1928

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Summary of weekly reports from cities, November 27 to December 31, 1987-Annual rates per 100,000 population, compared with rates for the corresponding period of 1926 -Continued

					Week e	ended				
	Dec. 4, 1926	Dec. 3, 1927	Dec. 11, 1926	Dec. 10, 1927	Dec. 18, 1926	Dec. 17, 1927	Dec. 25, 1926	Dec. 24, 1927	Jan. 1, 1927	Dec. 31, 1927
101 cities	· 10	9	18	11	12	18	3 10	* 11	12	17
New England	7	7	2 18	12	31	0	40 5	9 10	24	14
East North Central	6 10	5 12	8	9 14	5 10	3 6	53 10	8	5 4	• 10
South Atlantic. East South Central	17 41	16 15	24 41	9 31	19 21	9 29	⁷ 16 16	16 29	34 21	• 13 • 15
West South Central Mountain	9 9 16	21 9 5	13 9 16	21 9 13	21 9 24	17 18 16	17 0 21	17 9 10	17 27 16	13 18 0

TYPHOID FEVER CASE RATES

INFLUENZA DEATH RATES

		1	1	1	1	1 1	1	1	14	1
95 cities	14	12	17	12	14	2 14	3 15	2 17	17	10 19
w England	7	5	9	9	7	12	7	5	12	5
ddle Atlantic	13	11	12	7	13	9	14	11	21	14
st North Central	9	9	14	9	12	11	\$ 10	13	15	10
st North Central	4	4	15	6	15	6	11	10	8	8
th Atlantic	21	1 13	34	17	26	15	7 34	20	17	\$ 22
st South Central	41	46	41	56	5	2 88	36	2 59	26	2 81
st South Central	40	43	40	47	40	56	18	73	13	82
untain	46	27	36	9	9	9	27	27	46	72
cific	ñ	14	ii	3	7	17	4	24	Ŏ	81
w England (ddle Atlautic	14 7 13 9 4 21 41 40 46 11	12 5 11 9 4 13 46 43 27 14	9 12 14 15 34 41 40 36 11	9 7 9 6 17 566 47 9 3	18 7 13 12 15 26 5 40 9 7	12 9 11 6 15 288 56 9 17	7 14 5 10 11 7 34 36 18 27 4	5 11 13 10 20 259 73 27 24	12 21 15 8 17 26 13 46 0	8

PNEUMONIA DEATH RATES

95 cities	123	114	129	110	137	² 118	3 137	² 1 3 5	164	10 157
New England Middle Atlantic. Bast North Central West North Central Botth Atlantic. Bost Atlantic. Bast South Central West South Central Mountain. Pacific.	118 151 89 74 106 134 163 210 152	100 123 103 71 149 199 108 54 103	. 134 140 103 118 155 171 150 109 113	51 119 97 100 138 148 103 216 110	149 147 117 120 127 129 172 273 124	102 117 97 91 164 2 162 194 135 131	151 166 5 109 91 7 153 109 84 164 148	 121 127 105 98 186 243 233 243 165 	172 180 134 118 187 191 150 201 198	146 158 135 108 * 189 * 221 310 198 138

Number of cities included in summary of weekly reports, and aggregate population of cities in each group, approximated as of July 1, 1926, and 1927, respectively

Group of cities	Number of cities	Number of cities	Aggregate p cities repo	opulation of orting cases	pulation of Aggregate population ting cases cities reporting deat				
	cases	deaths	1926	1927	1926	1927			
Total	101	- 95	30, 443, 800	30, 966, 700	29, 783, 700	30, 295, 900			
New England	12 10	12	2,211,000	2, 245, 900	2,211,000	2, 245, 900			
East North Central	16 12	16	7,650,200	7, 810, 600	7,650,200	7,810,600			
South Atlantic East South Central	21 7	20 7	2, 799, 500	2, 878, 100 1, 023, 500	2,757,700	2, 835, 700 1, 023, 500			
West South Central Mountain	8 9	7 9	1, 213, 800 572, 100	1, 243, 300 580, 000	1, 181, 500 572, 100	1, 210, 400 580, 000			
Pacific	6	4	1, 946, 400	1, 991, 700	1, 475, 300	1, 512, 800			

² Louisville, Ky., not included.
³ Terre Haute, Ind., and Norfolk, Va., not included.
⁴ Sioux City, Iowa, Greenville, S. C., Lonisville, Ky., and Fort Smith, Ark., not included.
⁶ Sioux City, Iowa, not included.
⁷ Norfolk, Va., not included.
⁸ Greenville, S. C., not included.
⁹ Fort Smith, Ark., not included.
⁹ Greenville, S. C., and Louisville, Ky., not included.

FOREIGN AND INSULAR

PLAGUE ON VESSEL

Vessel at La Plata from Rosario, Argentina.—Information dated January 4, 1928, shows the arrival of a case of plague at La Plata on a vessel coming from Rosario, Argentina.

THE FAR EAST

Report for the week ended December 24, 1927.—The following report for the week ended December 24, 1927, was transmitted by the Eastern Bureau of the Health Section of the Secretariat of the League of Nations, located at Singapore, to the headquarters at Geneva:

Plague, cholera, or smallpox was reported present in the following ports:

PLAGUE	CHOLERA
Egypt.—Alexandria.	Indis.—Calcutta, Rangoon.
Dutch East Indies.—Balik-Papan, Makassar.	Straits Settlements.—Singapore.
India.—Bassein, Rangoon.	Siam.—Bangkok.

SMALLPOX

Manchuria.--Mukden.

India.—Bombay, Calcutta, Rangoon, Moulmein. Kwangtung.—Dairen.

Returns for the week ended December 24 were not received from the following ports:

Aden Protectorate.—Aden, Kamaran, Perim. Iraq.—Basta. India.—Madras, Tuticorin. Ceylon.—Colombo. Dutch East Indies.—Pontianak. China.—Canton. Union of Socialist Soviet Republics,—Wladivostok.

ANGOLA

Communicable diseases—October, 1927.—During the month of October, 1927, communicable diseases were reported in Angola as follows:

October, 1927-Cases

Disease	Coast district	Interior	Land frontier	Total
Ancylostomiasis	13	7		20
Beriberi	2	8	1	10
Bilharzia	6	2		i š
Chicken pox.	25	11	3	39
Dysentery	39	11	13	63
Hemogobin fever	2	9		ii ii
Influenza	54	81	56	191
Leprosy		1		1
Malaria	266	72	90	428
Measles	26			26
Meningitis			1	· 1
Mumps	4		Â	10
Pneumonia	32	6	3	41
Relapsing fever	ī	ĭ	2	4
Scables	Ğ	-	-	Ĝ
Smallpox	6	77		8 3
Tuberculosis	19		5	24
Trypanosomiasis	128	14	99	241
Venereal diseases	122	26	67	215
Whooping cough	37	_0	2	39
Yaws	168	76	48	292

ARGENTINA

Campaign of disinfection and rat destruction—Rosario.—Under date of December 24, 1927, a campaign of intensive disinfection and destruction of rats was reported as being carried out at Rosario, Argentina.

BARBADOS (BRITISH WEST INDIES)

Malarial fever—October, 1927.—Information dated November 15, 1927, shows the occurrence of an outbreak of malarial fever in the Island of Barbados, British West Indies, during October, 1927, with 200 cases distributed in two districts of the island. The infection was attributed to importation of mosquitoes on a vessel arrived from a port in Cuba. Later information shows rapid spread of the epidemic and a total of about 400 cases by the last of October. The outbreak was stated to be among plantation laborers.

CANADA

Communicable diseases—Week ended December 24, 1927.—The Canadian Department of Health reports cases of certain communicable diseases from six Provinces of Canada for the week ended December 24, 1927, as follows:

Disease	Nova Scotia	New Bruns- wick	Quebec	Mani- toba	Sas- katche- wan	Alberta	Total
Influenza	3						3
Poliom velitis			1			1	2
Smallpox				2	12		14
Typhoid fever		48	10	Ī		1	60

Report from Ontario for week ended Dec. 17, cerebrospinal fever, 1; lethargic encephalitis, 1; smallpox, 104; typhoid fever, 11.

Communicable diseases—Week ended December 31, 1927.—The Canadian Ministry of Health reports cases of certain communicable diseases from seven Provinces of Canada for the week ended December 31, 1927, as follows:

Disease	Nova Scotia	New Bruns- wick	Quebec	On- tario	Mani- toba	Sas- katch- ewan	Alberta	Total
Cerebrospinal fever				1				1
Influenza	9			!	3			12
Lethargic encephalitis				1				1
Poliomyelitis				1			1	$\overline{2}$
Smallpox				53		13	3	69
Typhoid fever	26	78	7	5	1	1	Ĩ	119

Communicable diseases—Quebec—Week ended December 24, 1927.— The Bureau of Health of the Province of Quebec reports cases of certain communicable diseases for the week ended December 24, 1927, as follows:

Disease	Cases	Disease	Cases
Chicken pox	47	Scarlet fever	88
Diphtheria	78	Smallpox	14
Influenza	3	Tuberculosis	43
Measles	80	Typhoid fever	10
Poliomyelitis	1	Whooping cough	21

Communicable diseases—Quebec—Week ended December 31, 1927.— The bureau of health of the Province of Quebec reports cases of certain communicable diseases for the week ended December 31, 1927, as follows:

Disease	Case	Distance	Cases
Chicken por Diphtheria Influenza Measles Scarlet fever	61 33 86 74	Smallpox	3 23 7 9

Communicable diseases—Onterio—November, 1927—Comparison with corresponding period, year 1926.—During the month of November, 1927, communicable diseases were reported in the Province of Ontario, Canada, as follows:

	Novem	ber, 1927	Novem	ber, 1926
Discase	Cases	Deaths	Cases	Deaths
Cerebrospinal meningitis. Chiancroid. Chiancroid. Chicken pox Diphtheria. Dysentery. German meales. Gonorrhea. Influentsa. Lethargic encephalitis. Mumps. Pneumonia. Poliomyelitis. Scarlet fever. Small pox. Syphilis. Tuberculosis. Typhoid fever.	1 7 1,080 343 343 14 190 4 542 1,007 7 4 02 271 115 59 94 59 285	17 4 3 1 74 4 	1 1,527 383 115 157 2 746 47 47 546 95 99 99 84 46 48	2
w nooping couga	260		312	2

Smallpox.—Smallpox was reported present in 21 localities, the greatest prevalence being reported at Ottawa, with 97 cases, Toronto 59, and East York, 51. At eight localities one case each was reported.

CUBA

Communicable diseases—Habana, Cuba—December, 1927.—During the month of December, 1927, communicable diseases were reported in Habana, Cuba, as follows:

Disease	New cases	Deaths	Remain- ing under treat- ment Dec. 31, 1927	Disease	New cases	Deaths	Remain- ing under treat- ment Dec. 31, 1927
Chicken pox Diphtheria	3 8	1 1	1 4 18	Mcasles Paratyphoid fever Scarlet fever	9 1	1	4
Malaria 1	77		13	Typhoid fever 1	47	5	44

¹ Many of these cases from the interior.

154

ECUADOR

Plague—Plague-infected rats—Guayaquil—November, 1927.—During the month of November, 1927, nine cases of plague, with three deaths, were reported at Guayaquil, Ecuador.

During the same period, of 23,240 rats taken at Guayaquil, 6 rats were found plague infected.

Smallpox.—During the period under report one case of smallpox was reported at Guayaquil.

GREAT BRITAIN

Smallpox—Newcastle-on-Tyne District.—Information dated January 7, 1928, shows marked prevalence of smallpox in the Newcastleon-Tyne area, Great Britain, with many new cases reported daily. The type of the disease is stated to be mild.

HAWAII TERRITORY

Rodent report—Hilo laboratory—November, 1927.—The rodent report from the Hilo laboratory at Hilo, Hawaii, for the month of November, 1927, shows that 13,009 rodents were received and examined during the month. Of these, four were found plague infected. There were no cases of human plague reported, the last case being on August 12, 1927. The last case of rodent plague occurred on November 25, 1927, at Honokaa, Hawaii.

IRAQ

Cholera—November 27-December 3, 1927—Summary.—During the week ended December 3, 1927, 56 cases of cholera with 53 deaths were reported in Iraq. The occurrence was distributed as follows:

Province	Nov. 27	7-Dec. 3, 927	Summar 3, 1	y to Dec. 1927
	Cases	Deaths	Cases	Deaths
Amarah Baghdad Basra	· 1 38	1 38	184 70 417	146 48 337
Divala Divala Dulaim	1	1	91 1 1	50 1
Hillah Kerbala Kut	7	4	94 43 34	54 31 22
Muntafique Ramadi	8	8 1	215 85	139 64
Totai	56	53	1, 235	892

JAVA

Plague-Surabaya-November 10, 1927.-Under date of November 11, 1927. Surabaya, Island of Java, was reported plague infected.

MALTA

Communicable diseases—Nevember, 1927.—During the month of November, 1927, communicable diseases were reported in the island of Malta as follows:

Disease	Cases	Discase	Cases
Broneho-pneu monia. Diphtheria. Erysipeles. Malta (undulant) fever. Measles. Pneumonia.	5 5 66 1 4	Poliomyelitis	1 12 48 21 74 3

Population, civil, estimated, 227,440.

MAURITIUS

Plague—Port Louis—September, 1927.—During the month of September, 1927, a case of plague was reported at Port Louis, island of Mauritius.

MEXICO

Mortality, November and December, 1927—Malaria and typhoid fever prevalence—Progreso.—During the month of November, 1927, 64 deaths were reported at Progreso, Mexico, and during December, 1927, 73 deaths. The principal causes of death were stated to be malarial fevers. Severe typhoid fever prevalence was reported, and it was stated that an active campaign of inoculation against the disease was being carried out. Population, 8,877.

UNION OF SOUTH AFRICA

Plague—Orange Free State—Infection among wild rodents—November 13-19, 1927.—During the week ended November 19, 1927, a fatal case of plague was reported in the Orange Free State, Union of South Africa. The case occurred in a native laborer employed on Lang[•] Tlass farm, Heilbron District, situated 8 miles east of Dover Station, who, feeling sick, was proceeding to Johannesburg. He was admitted to hospital and died the following day. It was stated that active plague infection had been verified among veldt rodents on the Lang Tlass farm.

Smallpox.—During the week ended November 19, 1927, outbreaks of smallpox were reported in Bothaville District, Orange Free State.

Typhus faver.—During the four weeks ended November 26, 1927, typhus fever was reported present in the Cape Province, Natal, and Transvaal.

From medical officers of the Public H tables must not be considered as complete o	ealth Sei r final a	rvice, An s regards	ither the	nsuls, E list of co	fealth S untries i	ection of neluded	the Lea or the fig	gue cf N ures for 1	ations, s he parti	und other cular cou	r sources intries fo	The r	eports o reports a	ontained re given.	in the f	llowing
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CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER

January 20, 1928

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¹ From July 24 to Oct. 8, 1927, 831 cases and 617 deaths from cholera were reported in Irad, of these 181 cases and 108 deaths occurred in Amarah; 416 cases and 867 deaths in Basra; 68 cases and 80 deaths in Kurhangue.

FEVER-Continued
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[C indicates cases; D, deaths; P, present]

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January 20, 1928

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Indo-China (French), 13 cases, Sept. 1-20; Beirut, Syria, 1 case, Sept. 1-10; 1 case, Oct. 21-31; 1 case, Dec. 1-10.

January 20, 1928

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

SMALLPOX

[O indicates cases; D, deaths; P, present]

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January 20, 1928

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

SMALLPOX-Continued

[C indicates cases; D, deaths; P, present]

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January 20, 1928

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FEVER-Continued
YELLOW
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TYPHUS FEVER

[C indicates cases; D, deaths; P, present]

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January 20, 1928

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

YELLOW FEVER

[C, indicates cases; D, deaths; P, present]

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