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## CURRENT PREVALENCE OF COMMUNICABLE DISEASES IN THE UNITED STATES 1

September 13-October 10, 1931

The prevalence of certain important communicable diseases, as indicated by weekly telegraphic reports from State health departments to the Public Health Service, is summarized in this report. The underlying statistical data are published weekly in the Public Health Reports under the section entitled "Prevalence of Disease."

Poliomyelitis.—For the country as a whole, the total number of cases of poliomyelitis dropped from 4,896 for the four-week period ended September 12 to 4,122 cases for the current four-week period. The incidence was, however, still considerably in excess of that for recent years, the number of cases being 1.8 times the number reported for the same period last year and more than seven times the number in 1929. For the week ended October 10, 800 cases were reported, which is the lowest number reported since the beginning of the outbreak in August.

Since the beginning of January, 13,044 cases have been reported, as compared with 5,709 cases for the corresponding period last year and 1,969 in 1929. Table 1 shows the distribution of the cases by geographic areas.

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<sup>&</sup>lt;sup>1</sup> From the Office of Statistical Investigations, U. S. Public Health Service. The number of States included for the various diseases are as follows: Typhoid fever, 47; poliomyelitis, 48; meningococcus meningitis, 48; smallpox, 48; measles, 45; diphtheria, 47; scarlet fever, 47; influenza, 39 States and New York City. The District of Columbia is counted as a State in these reports.

Table 1.—Number of poliomyelitis cases reported in different geographic areas in 1931, with comparative data for 1930 and 1929

						•	Week	ended	<del></del>							
Geographic division and year	Total Jan. 1- Oct. 10	Oct	ober		Septe	mber			A	ugusi	;			July		
		10	3	26	19	12	5	29	22	15	8	1	25	18	11	4
All regions:																
1931	13, 044		955				1, 370	1, 321	1, 135	1, 040	1, 029	598	307	116	90	45
1930	5, 709	648		503			344							213		
1929	1, 969	143	143	127	153	145	124	103	114	109	65	64	76	51	34	25
New England and	1 1			- 1	1					ł	l					
Middle Atlantic:						=00				000	0.0					١.,
1931	9, 234	468		676	822	798	1, 031				919	525	253	82		
1930	1, 154	129	142	136	104	84	69		90	61					5 5	8
1929	694	59	56	58	74	55	47	45	51	40	19	19	20	14	5	7
East North Central:	0 000	107	007	00=	201	000	000	100	100	0.5	40		-	!	-	
1931	2, 223	197	227	287 103	301 132	263 96	228 61	196 32	135 44	95 28	48 21	40	28 13	17	5	13
1930 19 <b>29</b>	977 324	149 25	182 22	23	31	90 37	17	13	15	13	11		3	10 2	20	9
West North Central:	324	20	22	23	91	3/	17	13	10	13	11	0	3	4	ગ	
1931	737	81	78	76	93	63	69	53	45	21	94	12	7	3	4	,
1930	1, 212	224	136	143	156	128	108	67	55	31 52	24 25 3	13 26	10	18	11	3 2
1929	1, 212	9	130	8	1.00	120	5	2	5	2	2	4	41	1	2	î
South Atlantic:	112	9	9	9	•	7	٩	-	9	-	3	1 1	-1	-1	-	
1931	299	20	33	20	22	12	15	26	18	15	19	8	8	3	10	3
1930	224	11	15	20	10	19	8	6	6	ii	12 10 20	7	5	8	10 8 12	3 7
1929	454	38	33	19	25	31	38	19	19	37	20	25	30	19	13	6
South Central:	101	30	00		20	31	36	10	10	3,1	- 20	-	30	10		U
1931	205	5	6	13	13	12	10	6	9	3	9	6'	6	7	8	4
1930	686	38	34	24	26	24	40	33	45	47	61	54		50	8 37	4 16
1929	183	38 7	14	6	~~~	12	6	13	15	ii	61 7	4	13	6	5	6
Mountain and Pacific:	100	•]	**	។	٩		9	-0		**	.1	-1	- 1	٦	7	,
1931	346	29	15	23	21	12	17	12	12	6	17	- 6	7	4	7	6
1930	1. 458	97	86	88	62	60	58	69	62	57	75	95	7 104	110	92	78
1929	1, 456 202	29 97 5	<b>ଜ</b>	13	8	6	ii	11	9	6	- 5	6	6	9	92 5	3
		٦,	1	-0	3	٩	1		9	9	9	ĭ	7	7	7	•

<sup>&</sup>lt;sup>1</sup> Similar tables appeared in Public Health Reports, Vol. 46, No. 36, pp. 2094-95, and No. 40, pp. 2358-59.

In the New England and Middle Atlantic States the number of cases decreased about one-third during the current 4-week period. An increase of 190 cases was reported from the Great Lakes States, but the peak apparently was reached during the week ended September 19 and the disease is now declining. The number of reported cases fluctuates considerably from week to week in the West North Central States, and it can not be definitely said whether the peak has been passed. For the week ended October 10, 81 cases were reported in these States, as against 78, 76, and 93, respectively, in the three preceding weeks. Slight increases during the present 4-week period were reported in the South Atlantic States and in the Mountain and Pacific group; the South Atlantic group seems to have passed the peak, but in the Mountain and Pacific group more cases were reported during the last week for which data are available than during any preceding week.

Table 2 shows by weeks the number of cases of poliomyelitis reported in each State and in New York City. In New York City the number of cases reported during the week ended October 10, the latest data available, had declined to less than one-fifth of the number reported during the peak week in August (591 cases). The disease had also declined in the remainder of New York State and in all

other States in the New England group except Maine. In Maine the number of cases (8) for the week ended October 10 was not large, but it was the same as had occurred in the preceding week, which was the highest on record this year. All of the States in the East North Central group that had shown a considerable increase reached the peak about the middle of September, and have decreased gradually. Minnesota, in the West North Central group, dropped from 76 cases during the week ended September 19 to 58 cases for the week ended October 10. In Iowa and Missouri, in the same geographic group, the numbers of cases reported for the week ended October 10 (Iowa 13, Missouri 7) are small, but they appear to be still increasing. The same might be said of Montana (7 cases), New Mexico (4 cases), and the State of Washington (10 cases).

Table 2.—Number of poliomyelitis cases reported in recent weeks in each State and in New York City 1

					_	w	eek e	nded-	-						
State	Oct. 10	Oct. 3	Sept. 28	Sept. 19	Sept. 12	Sept. 5	Aug. 29	Aug. 22	Aug. 15	Aug. 8	Aug. 1	July 25	July 18	July 11	July 4
Northeast and Middle Atlan- tic:															
Maine New Hampshire Vermont Massachusetts Rhode Island Connecticut New York City New York State, except	8 3 6 72 5 45 102	8 22 9 112 4 64 140	7 2 4 105 8 81 177	5 5 7 139 12 101 226	2 6 12 127 21 92 254	5 2 6 184 14 162 347	6 4 5 135 20 134 432	7 7 7 115 22 115 422	2 8 90 18 67 512	7 0 67 16 97 591	4 1 0 25 8 37 404	1 0 0 16 0 11 195	0 1 1 16 0 5 53	0 0 6 1 7 31	2 0 1 5 0 2 5
New York City New Jersey Pennsylvania East North Central:	137 50 40	135 52 50	150 93 49	204 98 25	176 94 14	207 84 20	180 103 9	133 78 10	88 97 8	85 55 1	29 16 1	9 14 7	4 1 1	5 8 3	0 0 1
Ohio	8 5 61 74 49	11 6 51 112 47	14 3 62 138 70	5 1 51 170 74	23 4 39 114 83	6 4 42 107 69	18 3 38 76 61	2 3 36 68 26	9 3 26 33 24	5 1 15 17 10	15 15 13 11	1 0 12 9 6	1 0 3 7 6	0 0 2 0 3	5 0 4 2 2
West North Central:  Minnesota Iowa Missouri North Dakota South Dakota Nebraska Kansas	58 13 7 1 0 1	56 13 5 3 0 1	62 9 0 2 1 1	76 7 1 2 2 5 0	48 5 2 5 1 1	50 6 3 2 2 2 5	39 8 4 0 0 1	31 8 3 2 0 0	29 1 0 0 1 0	13 7 1 0 0	10 1 2 0 0 0	3 1 0 0 0 0 3	1 0 0 0 1 0	1 0 0 0 2 1	0 0 1 0 0 0
South Atlantic: Delaware: Maryland District of Columbia Virginia West Virginia North Carolina South Carolina Georgia Fiorida	1 5 3 1 3 7 0 0	1 6 4 2 11 4 2 0 3	0 5 2 0 3 5 0 4	0 4 0 4 7 0 8 0	0 1 0 2 5 3 0 1	0 5 0 1 8 5 1 0 0	0 1 0 2 10 4 2 7	0 2 2 0 5 8 1 0	0 1 1 0 2 10 0 1	1 1 1 0 1 5 0 3	0 0 1 0 1 1 3 1	0 1 0 0 1 2 2 0	0 0 0 0 0 1 2 0	0 0 0 0 0 4 4 1 1	0 0 0 0 0 2 0 1
East and West South Central: Kentucky Tennessee Alabama Mississippi Arkansas Louisiana Oklahoma Texas	1 3 0 0 0 1 0	1 2 0 0 1 0 1	2 7 1 2 1 0 0	0 6 1 2 0 3 1	1 5 4 1 0 0 0	1 0 4 1 1 2 0 1	1 0 2 1 0 0	4 1 4 0 0 0 0	0 0 0 1 0 0 1	2 2 0 0 0 0 1 4	0 1 0 1 0 1 1 1 2	0 1 1 0 0 1 2	0 1 1 2 0 0 1 2	0 0 4 4 0 0 0	0 0 0 1 1 0 2

<sup>1</sup> Similar tables appeared in Public Health Reports, vol. 46, No. 36, pp. 2094-95, and No. 40, pp. 2358-59.

Table 2.—Number of poliomyelitis cases reported in recent weeks in each State and in New York City—Continued

						W	esk e	nd <del>o</del> d-	-						
State	Oct. 10	Oct. 3	Sept. 26	Sept. 19	Sept. 12	Sept. 5	Aug. 29	Aug. 22	Aug. 15	Aug. 8	Aug. 1	July 25	July 18	July 11	July 4
Mountain and Pacific:  Montana Idaho Wyoming Colorado New Merico Arizona Utah Washington Oregon California	7 0 0 1 4 1 0 10 6	4 0 1 0 1 0 5 0	5 0 0 0 2 0 1 4 1	6 0 0 0 0 0 5 2 8	3 0 0 1 0 0 1 0 7	2 0 1 0 0 1 0 4 1 8	8 0 1 0 1 0 0 1 6	3 1 0 1 1 0 0 3 0 3	1 0 0 0 0 0 0 0 0 2	2 0 0 0 1 1 0 4 0 9	1 0 0 1 1 0 0 0 0 0	1 0 0 0 0 0 0 0 2 0 4	0 0 0 0 0 0 0 0 0 3	0 0 0 0 0 0 0 0 0 6	00100000000000000000000000000000000000

Diphtheria.—The number of cases of diphtheria (6,267) reported for the current 4-week period was twice the number reported for the preceding 4-week period. The number was also 58 per cent higher than was recorded for the corresponding period in 1930 and 8 per cent in excess of the number in 1929. All areas shared in the increase except the North Atlantic and the Great Lakes regions, where the disease was slightly less prevalent than in the two preceding years. In the South Central groups of States the number of cases reported was four times the number reported for the same period in 1930 and more than twice the number in 1929. In other regions the increases ranged from 36 per cent to 64 per cent.

Scarlet fever.—The reported cases of scarlet fever were 6,428, an increase of approximately 2,500 over the preceding 4-week period. All regions contributed to the increase. Compared with previous years, the incidence was 23 per cent in excess of the corresponding period in 1930 and about 5 per cent above that in 1929. In only one region, the South Atlantic, was the disease less prevalent than it was during the same period last year. The increases ranged from 1 per cent in the East North Central States to 80 per cent in the South Central groups.

Influenza.—The number of cases of influenza (1,365) reported for the current period represents an increase of about 65 per cent over the preceding 4-week period. In relation to the preceding years the current incidence was about 29 per cent in excess of the incidence for the corresponding period last year, but was 14 per cent below the figure for 1929. While the number of cases (556) reported from the East North Central States was not high, it was more than four times the number recorded for the same period last year and two and one-half times the number in 1929.

Measles.—The incidence of this disease continued at about the same level it had maintained during the preceding 4-week period.

The number of cases reported during the current period (2,050) compared very favorably with the number reported for the corresponding periods in 1930 and 1929, being only about 5 per cent higher than the 1930 figure and 12 per cent below the incidence in 1929. Practically all sections shared in this favorable situation.

Typhoid fever.—The total reported incidence of typhoid fever (4,167 cases) was 10 per cent in excess of last year's figure for the corresponding period and was 35 per cent above the incidence in 1929. The South Central groups of States seemed to be mostly responsible for the increase, showing approximately 45 per cent increase during the current period over the corresponding period in each of the two preceding years. Most other groups closely approximated last year's figure, and all others, except the Mountain and Pacific group, contributed to the increase over 1929.

Smallpox.—For smallpox the comparison with preceding years continued very satisfactory. For the current 4-week period the number of cases reported was 355, as compared with 576 for the corresponding period in 1930 and 856 cases in 1929. All regions participated in the favorable situation except the South Central group of States, where a slight increase (7 per cent) was reported.

Meningococcus meningitis.—For the combined geographic areas, meningococcus meningitis continued at a very satisfactory level. The total number of cases reported during the current 4-week period was 344, representing about 87 per cent of the incidence for the corresponding period in 1930 and approximately 62 per cent of the incidence in 1929. Practically all geographic areas participated in the decrease.

Mortality, all causes.—Deaths from all causes in large cities as reported by the Bureau of the Census for the current 4-week period averaged 10.2 per thousand population (annual basis). This rate was slightly higher than for the preceding period, but was the lowest recorded for the corresponding period in six years.

### THE HEALTH OF THE SCHOOL CHILD

A Study of Sickness, Physical Defects, and Mortality

Data collected by the Public Health Service during the past decade on sickness among school children in several localities and on physical defects found on examination of some 30,000 children by medical officers of the Public Health Service have recently been published.¹ Mortality figures for children of school ages in the registration area of the United States are also included. Original data on these subjects are tabulated to show variation with age, sex, and other factors. A few of the results are summarized here.

<sup>&</sup>lt;sup>1</sup> Public Health Bulletin No. 200.

#### SICKNESS CAUSING ABSENCE FROM SCHOOL

Absenteeism among about 4,000 school children in Hagerstown amounted to 13 days per child per school year. Fifty-seven per cent of the days lost were due to sickness and the other 43 per cent to causes other than sickness.

Time lost from school on account of sickness was greater for younger than for older children. Time lost on account of causes other than sickness was somewhat less for younger than for older children.

The six disorders that were most important in terms of cases of illness were, in order of importance, colds, headache, digestive disorders, tonsillitis and sore throat, toothache, and influenza and grippe. The six causes of sickness that were most important in terms of days lost per child per year were colds, influenza and grippe, tonsillitis and sore throat, measles, mumps, and digestive disorders.

The case rate of illness was 8 per cent higher for girls than for boys. Of 32 causes of illness common to both sexes, the case rates for 17 of the causes were higher for girls and for 15 were higher for boys.

### PHYSICAL DEFECTS AND DISEASES FOUND ON PHYSICAL EXAMINATION

The six conditions most frequently noted in physical examinations were decayed teeth, defective vision, defective tonsils, enlarged anterior cervical glands, excessive wax in ears, and enlarged thyroid gland.

The proportion of individuals with one or more physical defects was 3 per cent less for girls than for boys. Of 34 types of physical defects noted in these examinations, the rates for 14 were higher for girls and for 20 were higher for boys.

In examinations made by dentists, 40 per cent of the children were noted as having five or more decayed teeth, and 25 per cent one or more teeth that were so badly decayed as to be classed as remaining roots.

#### MORTALITY OF CHILDREN OF THE SCHOOL AGES

The age curve of mortality has a minimum at 10 to 14 years of age. The mortality in the group from 5 to 19 years of age is only a fraction of what it is under 5 years or among older people.

The six most important causes of death among children 5 to 19 years of age are accidents, tuberculosis, heart diseases, pneumonia, diphtheria, and appendicitis. Accidents are easily the leading cause of death, and automobile accidents constitute about one-third of the total accidental deaths. Of diseases causing deaths, respiratory tuberculosis is the most important for these ages.

The mortality of the group 5 to 19 years of age is 15 per cent less for girls than for boys. Of the 28 most important causes of death at these ages, girls have a higher rate for 10 causes and boys for 18 causes.

In the 27 years from 1900 to 1927 the death rate from all causes among children 5 to 19 years of age in the original registration States decreased 44 per cent.

Respiratory tuberculosis shows a more or less steady decline throughout the period. Nonrespiratory tuberculosis increased up to about 1910, but since that year has decreased a little more rapidly than respiratory tuberculosis.

With the exception of the high rates in 1918, 1919, and 1920, pneumonia has decreased somewhat; but when influenza is added to pneumonia, there is little or no decline.

Mortality from diseases of the heart has increased only slightly for persons 5 to 19 years of age. Nephritis of both the acute and chronic types has steadily decreased in this age group since 1900, the trend being in marked contrast to what has occurred among persons of all ages. Diabetes increased slightly from 1900 to about 1922, but from 1923 to 1927 the rate has been little more than half of what it was prior to that time. Among persons of all ages there is no such drop in the rate as in these persons 5 to 19 years of age.

Appendicitis has increased gradually. Typhoid fever and diarrhea and enteritis have decreased very much since 1900, the relative decrease in typhoid fever being greater for these ages than the decrease in diarrhea and enteritis.

Diphtheria decreased considerably up to about 1912, fluctuated around the same level for the next eight or nine years, and has decreased markedly since 1921. Scarlet fever has decreased considerably since 1900, and measles and whooping cough show some tendency to decrease. The recorded mortality from meningitis has decreased markedly since about 1905. The mortality from poliomyelitis has increased since the 1916 epidemic.

The death rate from accidents of all types among children 5 to 19 years of age has increased slightly since 1900. Deaths from automobile accidents have increased markedly since 1906, when they were first tabulated as a separate cause, but the relative increase in the rate has not been as great in the past few years as it was prior to 1920. Accidental deaths other than automobile fatalities in the age group under consideration have decreased slightly since 1900.

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# DENTAL DECAY AND CORRECTIONS AMONG SCHOOL CHILDREN OF DIFFERENT AGES <sup>1</sup>

Based on 12,435 Oral Examinations by Dental Personnel in Georgia, Illinois, Missouri, and Hagerstown, Md.

(STUDIES IN DENTAL CARIES NO. 1)

By Amanda L. Stoughton, Acting Assistant Surgeon, and Verna Thornhill Meaker, Dental Hygienist, United States Public Health Service

The teeth of a great many school children have been examined by medical officers of the United States Public Health Service in connection with the general physical examination. Although the examination of the mouth and teeth was a part of every general physical examination, it is obvious that the thoroughness and completeness of the examination would not be comparable to examinations made by dentists with special instruments, such as a mirror and an explorer, to aid in the detection of the cavities. Moreover, the general physical examinations that have been made have not provided for recording the specific tooth that is carious, and the susceptibility to decay varies a great deal between the temporary and permanent teeth and even among different teeth of each set.

Data published by the Metropolitan Life Insurance Co. indicate the condition of specific teeth in the mouths of adults, but we have been unable to locate any such detailed data on the conditions of the teeth of children. Even the simple problem of finding the real prevalence of carious teeth among children is rather complicated (a) because of the presence of both temporary and permanent teeth with markedly different tendencies to decay, and (b) because of the fact that a few years difference in the age of a child makes considerable difference not only in the extent to which the teeth decay, but even in the number of teeth that are found in the mouth.

With the idea of determining the real prevalence of decayed teeth among children, the United States Public Health Service provided for the examination of the mouths of a large number of school children in various localities in the United States, the examinations to be made by personnel trained in dentistry and with the aid of the necessary instruments to examine the teeth thoroughly and locate all caries. Because of the fact that many of the decayed places were

From the data collected in this detailed manner it is planned to publish a series of articles on the real prevalence of dental decay. The present paper considers separately decay in the temporary teeth, decay in the permanent teeth, and a summary of the total number of decayed teeth, both temporary and permanent. Subsequent papers will consider sex differences in regard to dental caries and the susceptibility to decay of each individual tooth.

During the three school years from the fall of 1922 to the summer of 1925, a dental unit, composed of a dentist and one of the authors, who is a dental hygienist, was sent into the field by the United States Public Health Service, and this dental unit examined over 12,000 white school children from 5 to 19 years of age. During the first school year, 2,749 such examinations were made in Missouri and Illinois; during the next year, 5,274 children were examined in Georgia; and during the school year 1924–25, 4,412 were examined in Hagerstown, Md.

Communities of different sizes were chosen for the survey. Columbus, Ga., Springfield, Mo., and Hagerstown, Md., were the only cities of more than 25,000 inhabitants in which many examinations were made.

The dental hygienist (V. T. M.), who was with the unit throughout the period, made most of the examinations. Associated with her in the dental unit were at first, a dentist, Dr. H. B. Butler, who made some of the earlier examinations, and later Miss Mary A. Knight, a dental hygienist, who examined some of the children in Georgia.

Before making examinations independently, these investigators built up a standardized technique by examining the same children and comparing the results of their examinations. It was thought that after such a period of work together, the later examinations made by the three investigators separately would be comparable. All the examinations in Hagerstown and most of those in the other localities considered in this study were made by one of us (V. T. M.). In Hagerstown, reexaminations were made in later years, but the present study includes only the original examinations.

Some explanation of the manner in which the various conditions have been classified is necessary to an understanding of the data. The term "Remaining roots" as tabulated signifies teeth having crowns which are entirely carious, those having the pulp involved, and those with fistulæ. "Decayed teeth" as tabulated include all carious teeth without regard to the extent of the caries, "Remaining roots" and teeth with fistulæ being also included in this category. The number of filled teeth rather than the number of individual fillings was recorded. The term "All teeth" means the teeth, both temporary and permanent, which were present in the child's mouth at the time of the examination. The term "Total past decay"

when applied to permanent teeth includes decayed, missing, and filled teeth. However, missing temporary teeth are not included in the "Total past decay" of all teeth.

To secure the maximum amount of data, the records from Hagerstown, Md., Georgia, Illinois, and Missouri were combined, which made a total of 12,435 children examined. Prevalence rates for several conditions were computed separately for these four localities and are shown in Table 7. Although the rates for the different localities show considerable variation in level, they have the same general age curve, and it was thought permissible to combine the records in this paper, which deals with the prevalence of certain dental defects and corrections at different ages.

#### TEMPORARY TEETH

Since the loss of temporary teeth begins at about the sixth year, the percentages of children having decayed or filled temporary teeth decrease rapidly after the eighth year. (Fig. 1, Table 1.) At

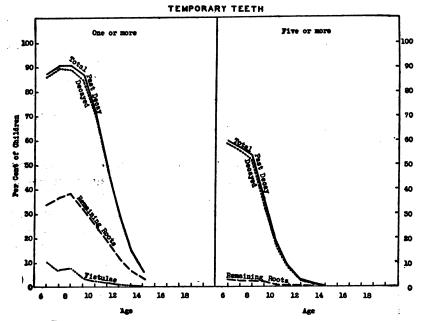


FIGURE 1.—Condition of temporary teeth of children at successive years of age

6 years of age, over 87 per cent of the children have temporary teeth decayed or filled. The percentage rises in the seventh and eighth years and drops rapidly thereafter, only 6 per cent of 14-year-old children having one or more temporary teeth decayed or filled. The percentage of children having 5 or more temporary teeth decayed or filled falls rapidly from about 60 per cent at 6 years to less than 1 per cent at 13 years.

So few temporary teeth are filled that the percentages of children having teeth which are carious but unfilled do not differ much from those having teeth decayed or filled.

Table 1.—Condition of temporary teeth of children of each age from 6 to 14 years

	Total	Decayed	l or filled	Dec	ayed	Remain	ing roots	Fistulæ
Age	children	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more	1 or more
			NUM	BER				
6	913 1, 122 1, 116 1, 335 1, 652 1, 702 1, 361 1, 183 767	798 1, 019 1, 016 1, 160 1, 187 821 400 172 45	545 643 604 484 294 127 34 8 0	787 1, 006 996 1, 131 1, 162 806 397 167 44	535 625 577 447 281 125 32 8 0	308 411 429 420 412 307 157 72 24	29 30 27 30 11 8 5 0	94 74 82 47 37 20 5
			PER C	ENT				
6	100. 0 100. 0 100. 0 100. 0 100. 0 100. 0 100. 0 100. 0	87. 4 90. 8 91. 0 86. 9 71. 9 48. 2 29. 4 14. 5 5. 9	59. 7 57. 3 54. 1 36. 3 17. 8 7. 5 2. 5	86. 2 89. 7 89. 2 84. 7 70. 3 47. 3 29. 2 14. 1 5. 7	58. 6 55. 7 51. 7 33. 5 17. 0 7. 3 2. 3 . 7	33. 7 36. 6 38. 4 31. 5 24. 9 18. 0 11. 5 6. 1 3. 1	3. 2 2. 7 2. 4 2. 2 . 7 . 5 . 4	10. 3 6. 6 7. 3 3. 5 2. 2 1. 2 . 4 . 1

Nearly 34 per cent of the 6-year-old children have at least one temporary tooth nearly destroyed by caries (remaining roots). The percentage rises in the 8-year group and then drops rapidly, reaching 3 per cent at 14 years. Only 3 per cent of the 6-year-old children and less than 1 per cent of children over 10 years of age have five or more temporary teeth with crowns entirely destroyed by caries.

Ten per cent of 6-year-old children have at least one temporary tooth with a fistula. The percentages decrease quite rapidly with age, none of the 14-year-old children having temporary teeth so affected. No child in this group has five teeth with fistulæ.

In the graph in Figure 1 are shown the percentages of children in each age group having one or more and five or more teeth showing various dental defects. In Figure 2 somewhat similar data are shown; but instead of age, the number of teeth affected forms the abscissa and each line represents a different age group. In Table 2, percentages for each age group from 6 to 14 are given. The first age group and every third group thereafter are shown in Figure 2. It will be noted that instead of the percentages of children having one tooth, three teeth, etc., affected, the percentages having one or more, three or more, etc., are given.

Nearly the same percentage of 6-year-old as of 9-year-old children (about 85 per cent) had one or more temporary teeth decayed or filled. Because at 9 years of age many children have already lost a number of temporary teeth, the percentages of children having three or more, five or more, etc., temporary teeth decayed or filled are lower among the 9-year-old than among the 6-year-old children. For the same

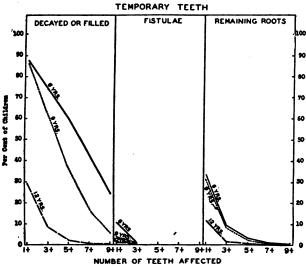


FIGURE 2.—Extent of decay and corrections in temporary teeth of children of three age groups

reason, all the percentages of the 12-year-old group are much lower than those of the younger age groups.

Table 2.—Condition of temporary teeth of children of each age from 6 to 14 years

						1	PER C	ENT					
Age	Num- ber of chil- dren		Decayed or filled					Rem		Fistulæ			
	uren .	1 or more	3 or more	5 or more	7 or more	9 or more	1 or more	3 or more	5 or more	7 or more	9 or more	1 or more	3 or more
3 3 0 0 1 1 2 3 3	913 1, 122 1, 116 1, 335 1, 652 1, 702 1, 361 1, 183 767	87. 4 90. 8 91. 0 86. 9 71. 9 48. 2 29. 4 14. 5 5. 9	73. 6 78. 0 75. 7 62. 0 40. 5 20. 1 8. 5 2. 4	59. 7 57. 3 54. 1 36. 3 17. 8 7. 5 2. 5	42. 5 36. 8 31. 3 16. 4 6. 2 1. 6 . 4 . 1	24. 4 17. 8 11. 8 5. 8 1. 4 . 4 . 1	33. 7 36. 6 38. 4 31. 5 24. 9 18. 0 11. 5 6. 1 3. 1	9. 1 9. 0 10. 3 8. 5 5. 0 2. 8 1. 5	3. 2 2. 7 2. 4 2. 2 . 7 . 5	0. 9 .7 .8 .4 .1 .1	0. 3 . 3 . 2 . 1	10.3 6.6 7.3 3.5 2.2 1.2 .4	0.

The proportion of 9-year-old children having temporary teeth nearly destroyed by caries (remaining roots) is very nearly as large as that of the 6-year-old children, indicating that, although the 9-year-old children have fewer temporary teeth than the 6-year-olds, a larger

proportion of their teeth had become carious. So many temporary teeth have been lost at 12 years of age that the percentages for this group are considerably below those for the younger children.

The percentages of children having temporary teeth with fistulæ decrease with age.

### PERMANENT TEETH

Twenty per cent of the 6-year-old children had one or more permanent teeth decayed, missing, or filled. (Fig. 3, Table 3.) The percentage increases rapidly in the 7- and 8-year-old groups, 63 per cent of the 8-year-old children having at least one permanent tooth which

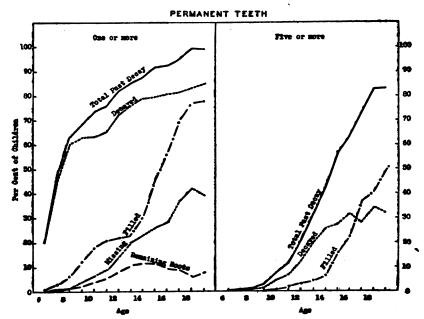


FIGURE 3.—Condition of permanent teeth of children at successive years of age

is or had been carious. After the 8-year-age group, the percentage increases less rapidly but is higher in successive groups, reaching 99 per cent at 18 years. The percentages of children having five or more permanent teeth which are or have been decayed remain very low in the early age groups, because few children in these groups have had any permanent teeth other than the four 6-year molars long enough to become carious.

Nearly 20 per cent of the 6-year-old children have one or more permanent teeth decayed but unfilled. The percentage rises rapidly to 60 per cent in the 8-year group. The increase is less rapid but steady at later ages, reaching nearly 85 per cent in the 19-year group. The percentages of children in the younger age groups having five or more carious permanent teeth unfilled are small, but the percentages increase gradually with age.

TABLE 3.—Condition of permanent teeth of children of each age from 6 to 19 years

Ago	Total chil-	missi	ayed, ng, or led	Dec	ayed	Mis	sing	Fi	lled	Rema	
	dren	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more
				NUMI	BER						
5	913 1, 122 1, 116 1, 335 1, 652 1, 702 1, 361 1, 183 767 556 325 199 120 84	187 528 704 915 1, 213 1, 292 1, 113 1, 004 672 508 299 188 119 83	3 6 16 44 127 196 286 376 328 317 206 146 100 70	182 507 669 840 1, 046 1, 111 978 896 607 442 262 160 71	1 4 10 23 77 118 167 234 198 151 102 56 41 27	0 9 13 51 102 148 192 235 174 144 91 72 50 33	000000321233811	9 36 69 164 297 354 291 270 229 251 180 138 92 65	2 1 4 6 14 30 42 48 86 71 73 48 42	1 14 29 61 90 109 123 87 62 30 17 7	0 0 0 0 0 0 0 1 0 0 0 0
			P	ER C	ENT						
6	100. 0 100. 0	20. 5 47. 1 63. 1 68. 5 73. 4 75. 9 81. 8 84. 9 87. 6 91. 4 92. 0 94. 5 99. 2 98. 8	0. 8 . 5 1. 4 3. 3 7. 7 11. 5 21. 0 31. 8 42. 8 57. 0 63. 4 73. 4 83. 3 83. 3	19. 9 45. 2 59. 9 62. 9 63. 3 65. 3 71. 9 75. 7 79. 5 80. 6 81. 4 83. 3 84. 5	0. 1 .3 .9 1. 7 4. 7 6. 9 12. 3 19. 8 25. 8 27. 2 31. 4 28. 1 34. 2 32. 1	0.8 1.2 3.8 6.2 8,7 14.1 19.9 22.7 25.9 28.0 36.2 41.7 39.3	0.2 .2 .1 .4 .9 1.5 .8 1.2	1. 0 3. 2 6. 2 12. 3 18. 0 20. 8 21. 4 22. 8 29. 9 45. 1 69. 3 76. 7 77. 4	0. 2 . 1 . 3 . 4 . 8 1. 8 3. 1 4. 1 6. 3 15. 5 21. 8 36. 7 40. 0 50. 0	0. 1 1. 3 2. 2 3. 7 5. 3 8. 0 10. 4 11. 3 11. 1 9. 2 8. 5 5. 8 7. 1	0.1

The percentage of children having one or more permanent teeth so nearly destroyed by caries as to be called "remaining roots" is low in the early age groups, rising gradually to 11 per cent at 14 years and then declining to 6 or 7 per cent among the 18- and 19-year-old children. Very few children have five permanent teeth so badly decayed.

One per cent of the 6-year-old children have one or more permanent teeth filled. The percentages increase rather rapidly, reaching 18 per cent at 10 years. Between 10 and 13 years the percentages rise much more slowly, but in the succeeding age groups they increase very rapidly. About 77 per cent of the 19-year-old children have at least one permanent tooth filled. The percentage of children having five or more permanent teeth filled rises slowly to 6 per cent in the 14-year group and more rapidly among older children, 50 per cent of the 19-year-old children having five or more permanent teeth filled.

The percentage of children who have lost one or more permanent teeth increases quite regularly in successive age groups, reaching about 40 per cent in the last two groups. The proportion of children who have lost five permanent teeth is very small.

In Figure 4 the number of teeth affected is given as the abscissa, five age groups being shown. The data for these and the other ages from 6 to 19 years are given in Table 4.

Among 18-year-old children, 99 per cent have at least one permanent tooth decayed, missing, or filled, and nearly 50 per cent have nine

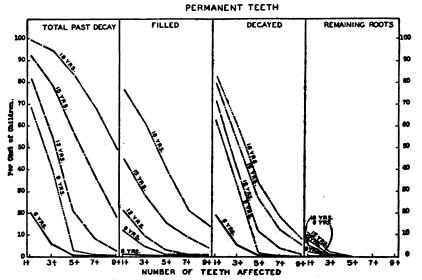


FIGURE 4.—Extent of decay and corrections in permanent teeth of children of five age groups

or more such teeth. Among the 15-year-old children the percentage of those having at least one such tooth is 92 per cent, and 18 per cent have nine or more such teeth. Twenty per cent of the 6-year-olds have one or more, while only 0.5 per cent have five or more.

Table 4.—Condition of permanent teeth of children of each age from 8 to 19 years

	ots	5 or more	0.1
	Remaining roots	3 or more	0
	Rem	1 or more	0 . 14% 20% 0 111 0 20 27 1 1 4 8 27 8 0 4 21 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		9 or more	2
		7 or more	0 1
	Filled	5 or more	0
		3 or more	0.1.147.89.01.05.00.00.00.00.00.00.00.00.00.00.00.00.
		1 or more	1.6.0.0122222222222222222222222222222222
cent		9 or more	
Per cent		7 or more	2. 2. 14.7. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
٠.	Decayed	5 or more	014.0.01 1014.0.01 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.007 10.00
		3 or more	4.6.02.02.03.03.03.03.03.03.03.03.03.03.03.03.03.
		1 or more	926.25.25.25.25.25.25.25.25.25.25.25.25.25.
		9 or more	2
	ecayed, missing, or filled	7 or more	0 4 . 4 . 6 . 6 . 4 . 6 . 6 .
	missing	5 or more	0.3 1. 5 7 2. 1. 2 2. 1. 2 2. 1. 2 2. 1. 2 2. 1. 3 2. 1. 4 2. 2 2. 3 3. 3 3. 3 3. 4 4. 3 5. 4 6. 3 6. 3
	Jecayed,	3 or more	8.3.8.2 8.3.6.4 8.6.5.3 8.6.6.6.3 8.6.6.6.3 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.4 8.6.
	Н	1 or more	24.024.024.024.024.024.024.024.024.024.0
	Num- ber of chil-	dren	1, 122 1, 122 1, 1335 1, 335 1, 552 1, 702 1, 183 1, 183 1
	Age		20 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2

In all the age groups excepting 6 years, the percentage of children having at least one permanent tooth decayed and unfilled is considerably less than the percentage having one or more permanent teeth decayed, missing, or filled. In the three older groups an even more striking difference appears when the percentages having three or more, five or more, etc., permanent teeth decayed and unfilled are compared with the corresponding percentages having permanent teeth decayed, missing, or filled. These differences are chiefly due to the better dental attention given older children, with the consequent increase in the percentage of children with several teeth filled in the older groups. Only about 1 per cent of the 6-year-old children have even one filled permanent tooth. The percentages increase rapidly, however, with age, over 75 per cent of the 18-year-old group

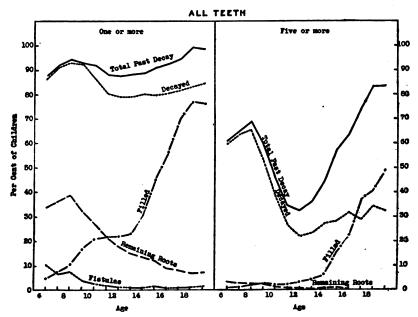


FIGURE 5.—Condition of teeth of children at successive years of age

having one or more and nearly 15 per cent having nine or more permanent teeth filled. Presumably because the teeth of older children are better cared for, the percentage of children having permanent teeth nearly destroyed by caries (remaining roots), although lowest in the 6-year group, is not highest among the 18-year-old children. A higher percentage of 12 and 15 than of 18-year-old children have one or more permanent teeth which are badly decayed.

### ALL TEETH

When all the teeth present in the children's mouths at the time of examination are studied without regard to their being temporary or permanent, a type of curve results which is very different from the curves based on either set of teeth considered separately. (Fig. 5, Table 5.) By comparison with Figures 1 and 3, the curves in Figure 5 are seen to resemble the curves based on temporary teeth in the early age groups and those based on permanent teeth in the later age groups.

Table 5.—Condition of teeth of children of each age from 6 to 19 years

	Total	Decaye ing, or	d, miss- filled	Dec	ayed	Rema ro	aining o <b>t</b> s	Fil	lled	Fistu-
Age	chil- dren	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more	1 or more	5 or more	1 or more
				NUMB	ER					
8	913 1, 122 1, 116 1, 335 1, 652 1, 702 1, 361 1, 183 767 556 325 199 120 84	801 1, 035 1, 052 1, 238 1, 515 1, 497 1, 190 1, 044 680 507 301 188 119 83	557 730 769 799 766 593 442 427 341 320 206 147 100 70	789 1, 022 1, 034 1, 232 1, 435 1, 365 1, 079 938 615 444 262 162 100 71	546 711 731 714 629 454 299 275 207 155 102 57 41 27	308 410 432 431 448 365 239 175 103 66 29 16 8	29 30 28 33 15 11 8 1 3 4 0 0	44 83 115 224 346 369 299 272 230 249 179 139 92 64	6 11 20 34 35 38 44 48 47 86 72 73 48 41	99 77 84 44 22 13 14 1
			I	PER CE	NT					
3	100. 0 100. 0	87. 7 92. 2 94. 3 92. 7 91. 7 87. 9 87. 4 88. 3 88. 7 91. 2 92. 6 94. 5 99. 2 98. 8	61. 0 65. 1 68. 9 59. 9 46. 4 34. 8 32. 1 44. 5 57. 6 63. 1 73. 9 83. 3 83. 3	86. 4 91. 1 92. 7 92. 3 86. 9 80. 2 79. 3 80. 2 79. 8 80. 6 81. 4 83. 3 84. 5	59. 8 63. 4 65. 5 53. 5 38. 1 26. 7 22. 2 27. 0 27. 9 31. 4 28. 6 34. 2 32. 1	33. 7 36. 5 38. 7 32. 3 27. 1 21. 4 17. 8 13. 4 11. 9 8. 9 8. 0 6. 7 7. 1	3. 2 2. 7 2. 5 2. 5 . 9 . 6 . 6 . 1 . 4 . 7	4. 8 7. 4 10. 8 20. 9 21. 7 22. 0 30. 0 44. 8 55. 1 69. 8 76. 7 76. 2	0. 7 1. 0 1. 8 2. 5 2. 1 2. 2 3. 2 4. 1 6. 1 15. 5 22. 1 36. 7 40. 0 48. 8	10. 3 6. 4 7. 6 3. 6 2. 5 1. 6 9 . 4 8 1. 3 3 . 3 5 . 8 1. 2

About 88 per cent of the 6-year-old children had one or more teeth which were or had been decayed. The percentage was somewhat higher among the 8-year-old children. In each succeeding age group the percentage was lower, coincident with the gradual loss of carious and filled temporary teeth and their replacement by sound permanent teeth, until at 12 years 87 per cent evidenced some past or present defect. After 12 years the percentage was higher in each age group, reaching 99 per cent at 18 years of age.

The age curve showing the percentages of children having five or more teeth decayed, missing, or filled follows the same general trend as that described above. Sixty-one per cent of the 6-year-old children had five or more teeth which were or had been carious. The decline from 8 to 12 years was more rapid, and at 12 years the per centage was about 32. At 19 years of age 83 per cent had five or more teeth decayed, missing, or filled.

The percentage of children having one or more unfilled carious teeth is higher from 6 to 10 years than in later age groups. The percentage increases from the sixth to the eighth year then falls in the twelfth and thirteenth. Thereafter, the percentages increase gradually, reaching 84 per cent in the nineteenth year. The percentage of children having five or more unfilled carious teeth is very much higher between 6 and 8 years than among older children. More than 65 per cent of the 8-year-old children had five or more unfilled, carious teeth, whereas among the 12-year-old children there were only 22 per cent. The percentages increase gradually in successive age groups after 12 years, reaching about 33 per cent in the last two groups.

The proportion of children having one or more teeth with the crowns entirely destroyed by caries (remaining roots) is much higher in the younger than in the older age groups. Among the 6-year-old children, 34 per cent have one tooth or more in this condition. The percentage among the 8-year-olds is slightly higher. In each succeeding age group the percentage is appreciably lower, reaching 7 per cent in the last two groups. Only 3 per cent of the 6-year-old children have five or more teeth nearly destroyed by caries. Among children 10 years of age or older, there are less than 1 per cent having this dental condition.

Among the 6-year-old children only about 5 per cent had one tooth or more which had been filled. The percentage of children with filled teeth increases rather rapidly in successive age groups, excepting among the children between 10 and 13 years of age, whose temporary teeth are being lost and permanent teeth are erupting. At 18 years over 75 per cent of the children had one or more filled teeth. Less than 1 per cent of the 6-year-old children had five or more filled teeth. The percentages are increasingly higher in successive age groups after the twelfth year. Nearly one-half of the 19-year-old children had five or more filled teeth.

Teeth with fistulæ are much more prevalent among the younger than among the older children. Ten per cent of the 6-year-old children had at least one tooth with a fistula. The percentages of children with such fistulæ decrease in each age group until at 12 years less than 1 per cent are so affected. The percentages vary about 1 per cent in the later age groups. There were no children who had five teeth with fistulæ.

In Figure 5 are shown the percentages of children in each age group having one or more and five or more teeth which showed various dental defects or corrections.

Figure 6 shows the data for all teeth in the same way in which those for temporary teeth are shown in Figure 2, i. e., with the number of teeth affected represented as abscissæ, and the different age groups

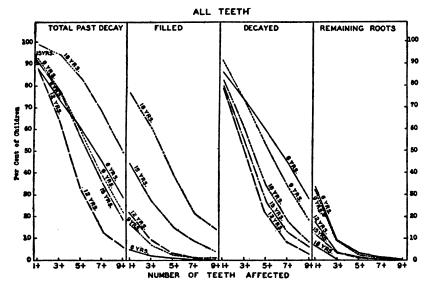


FIGURE 6.-Extent of decay and corrections in teeth of children of five age groups

shown by distinctive lines. Data for each age group from 6 to 19 years are given in Table 6.

The highest percentages of children having teeth decayed, missing, or filled occur in the 18-year-old group. The 12-year-old group, many of their temporary teeth having been replaced by permanent teeth, have the smallest proportion of children with teeth which are or have been carious. The 6 and 9 year old groups, having still a greater number of temporary teeth, and the 15-year-old group, having permanent teeth which have been exposed to decay over a longer period, have larger percentages of children with teeth showing past or present decay.

Table 6.—Condition of teeth of children of each age from 6 to 19 years

ı	ſ	ا . ده	8000-
	l	9 or more	
	oots	7 or more	0
	Remaining roots	5 or more	%444
	Rem	3 or more	90000000000000000000000000000000000000
		1 or more	28.88.88.88.88.88.88.88.88.88.88.88.88.8
		9 or more	0
		7 or more	0
	Filled	5 or more	0114444444444 0011444444444444444444444
		3 or more	26.47.38.001108.00000000000000000000000000000
ent		1 or more	4,7,0,00,00,00,00,00,00,00,00,00,00,00,00
Per cent		9 or more	ಜಿಜೆಪ್ಪ್ರಾಧಬಟ4454500 ಐಐಬ440⊤೦೦ಬರ೦೮೮
	Ę.	7 or more	4,6,4,6,000 4,6,4,000 8,1,6,1,000 8,1,6,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,1,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,0,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,000 1,00
	Decayed	5 or more	68888888888888888888888888888888888888
		3 or more	66666666666666666666666666666666666666
		1 or more	89988885588888 81.1.2.2.8.8.2.5.2.2.2.2.2.2.2.2.2.2.2.2.2.2
	eđ	9 or more	8388 800 11111 848 848 848 848 848 848 848 848 8
	g, or fill	7 or more	4466841114884666 68.134488484666 14846060178869
	ecayed, missing, or filled	5 or more	000004888478888 
	oca yed,	3 or more	4.88.85.54.42.85.55.89.99.90.1.80.44.42.95.55.89.99.90.1.80.44.44.90
	А	1 or more	2000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	Num- ber of chil-	dren	1, 122 1, 122 1, 122 1, 335 1, 335 1, 362 1, 361 1,
	Age		87.20 100 100 100 100 100 100 100 100 100 1

The percentages of children with filled teeth vary directly with age Although dental decay is more prevalent among the 6-and 9-year-old children than among the 12-year-old children, systematic dental care of the temporary teeth is usually neglected, and a larger proportion of carious temporary teeth than of permanent teeth remains unfilled.

This point is emphasized in the graphs which show the prevalence of untreated dental caries at 3-year intervals. The percentages are highest at 6 and 9 years of age. In the 18-year-old group the percentages are appreciably lower, because of the relatively high proportion of children having filled teeth. The percentages are somewhat lower in the 15-year group and lower still in the 12-year group, as children of this age have lost most of their temporary teeth and caries is spreading only gradually among the permanent teeth.

Badly neglected carious teeth (remaining roots) are much more prevalent at 6 and 9 years of age. These graphs reflect the gradual improvement in dental care as children grow older. The incidence of badly decayed teeth varies inversely with age. The percentage of children having such teeth is lower at 18 years than at 15, and lower at 15 than at 12. The percentages are very nearly the same in the first two groups.

Table 7.—Prevalence of dental conditions among children in Hagerstown, Md., Georgia, Illinois, and Missouri

<b>,                                    </b>			Perman	ent teeth		_		
Age and locality	Total children	1 or more missing,	decayed, or filled	1 or mo	re filled	Temporary teeth, 1 or more decayed		
		Number	Per cent	Number	Per cent	Number	Per cent	
AGES 6 TO 8								
Hagerstown Georgia Illinois Missouri	2, 082 938 14 117	994 391 5 29	47. 7 41. 7 35. 7 24. 8	75 25 2 12	3. 6 2. 7 14. 3 10. 3	1, 906 787 10 86	91. 5 83. 9 71. 4 73. 5	
AGES 9 TO 11								
Hagerstown Georgia Illinois Missouri	1, 665 1, 749 441 834	1,376 1,297 292 449	82. 6 74. 2 66. 2 53. 8	271 207 121 216	16. 3 11. 8 27. 4 25. 9	1, 223 1, 150 255 471	73. 5 65. 8 57. 8 56. 5	
AGES 12 TO 14								
Hagerstown	623 1, 540 339 809	574 1, 359 264 592	92. 1 88. 2 77. 9 73. 2	116 333 93 248	18. 6 21. 6 27. 4 30. 7	164 234 56 154	26. 3 15. 2 16. 5 19. 0	
AGES 15 TO 17					į			
Hagerstown Georgia Illinois Missouri	42 874 37 127	40 825 27 103	95. 2 94. 4 73. 0 81. 1	10 488 9 62	23. 8 55. 8 24. 3 48. 8	4 7 1 2	9. 5 . 8 2. 7 1. 6	

#### SUMMARY

#### TEMPORARY TEETH

The highest percentages of children having carious temporary teeth occur in the 7 and 8 year groups, while the highest incidence of "remaining roots" is among 8-year-old children. (Fig. 1.)

Six-year-old children have the highest percentage of temporary teeth with fistulæ. (Fig. 1.)

The number of children with filled temporary teeth is so small as to be negligible.

#### PERMANENT TEETH

The percentages of children having permanent teeth decayed, missing, or filled increase rapidly up to the eighth year and more slowly among older children. (Fig. 3.)

The incidence of unfilled caries of permanent teeth increases with age. (Fig. 3.)

There were more children at 14 and 15 years than at other ages who had permanent teeth nearly destroyed by caries. (Fig. 3.)

The percentages of children who had permanent teeth filled as well as those who had had permanent teeth extracted increase with age. (Fig. 3.)

#### ALL TEETH

When both temporary and permanent teeth are considered together, about 90 per cent of the children in each age group had one tooth or more decayed, missing, or filled. (Fig. 5.)

A much greater proportion of younger than of older children had unfilled, carious teeth. (Fig. 5.)

An even greater preponderance of younger children had at least one tooth nearly destroyed by caries. (Fig. 5.)

The number of children with filled teeth is much higher in the older than in the younger age groups. (Fig. 5.)

The percentages of children having teeth with fistulæ are relatively high among children under 10 years of age. (Fig. 5.)

### DEATH RATES IN A GROUP OF INSURED PERSONS

### Rates for Principal Causes of Death for August, 1931

The accompanying table, taken from the Statistical Bulletin for September, 1931, issued by the Metropolitan Life Insurance Co., presents the mortality record of the industrial insurance department of the company for August as compared with that for the preceding month and for the corresponding month of last year. It also gives the cumulative rates for the period January-August for the years 1930 and 1931. The rates are based on a strength of approximately

19,000,000 insured persons in the United States and Canada. In recent years the general death rate in this more or less selected group of persons has averaged about 72 per cent of the rate for the registration area of the United States.

In spite of the economic depression, health conditions continue to be excellent in this group of industrial policyholders, which is composed of persons most likely to be affected by such general economic disturbances.

### The Bulletin states:

Never before have general health conditions among the industrial policy-holders of the Metropolitan Life Insurance Co. been so favorable as in August of this year. The death rate was only 7.4 per 1,000. The previous low figure of 7.5 per 1,000 for this month was recorded in August, 1924. For five consecutive months in 1931, the mortality has shown improvement over the figure for the corresponding month of 1930. The effect of this favorable experience during the spring and summer has been almost enough to offset the increased mortality of the early months of the current year due to the influenza epidemic of last winter. For the eight elapsed months of 1931 a cumulative death rate of 9.1 per 1,000 has been recorded, which is only 1 per cent above the figure recorded for the same period last year.

Among policyholders living west of the Rocky Mountains, the year-to-date death rate at the end of August was 6.4 per 1,000, as compared with 6.7 in 1930. The excellent health conditions which have prevailed so far this year are indeed remarkable, in view of prevailing employment conditions. This factor would ordinarily have led us to expect an increase in the mortality rate.

The continued drop in the mortality from tuberculosis is the outstanding and most favorable item in the health record of 1931. With two-thirds of the year behind us, including the seasons when the tuberculosis death rate is highest, it is now safe to say that a new minimal death rate will be registered for this disease in 1931. It is also probable that the greatest year-to-year decline recorded in many years will be registered this year.

The cumulative death rate for diphtheria at the end of August was only 4.1 per 100,000, a decline of more than one-third, as compared with the 1930 figure for the like period of the year. Diphtheria, so far this year, has a lower death rate than measles, and the rate is only slightly in excess of the rates for scarlet fever and whooping cough.

Other diseases which bid fair to register new minimal death rates in 1931 are typhoid fever, diarrheal complaints, and conditions related to childbearing.

On the other hand, several diseases show more or less marked increases in mortality. Influenza, due to the widespread outbreak of last winter, is the most conspicuous among these. The influenza situation, however, has since adjusted itself and the rates have been running low since the beginning of the spring season. The most unfavorable item in the 1931 mortality record is cancer, whose cumulative death rate has increased 6.6 per cent since 1930—an unusually large rise in any single year. The upward trend in the diabetes death rate, observed since 1924, is still unchecked. The increase in diabetes mortality may be found to be concentrated largely in the later ages of life, and not in youth where insulin has so far shown such favorable results. The rise in 1931 bids fair, however, to exceed any year-to-year increase recorded for several years.

Small increases are shown in the 1931 death rate for both suicides and homicides. All forms of accidents, combined, show a slight drop this year; but the

death rate from automobile fatalities continues to rise and will probably attain a new high point by the time the record for 1931 is completed.

Death rates (annual basis) per 100,000 for principal causes of death [Industrial insurance department, Metropolitan Life Insurance Co.]

	An	nual rate p	per 100,000	lives expos	ed 1
Cause of death	August,	July, 1931	August,	Cumulat ary to	ive, Janu- August
	1931	1991	1930	1931	1930
Total, all causes	735, 5	831. 7	761. 1	909. 7	903. 6
Typhoid fever.  Measles Scarlet fever. Whooping cough Diphtheria Influenza Tuberculosis (all forms) Tuberculosis of respiratory system Cancer. Diabetes mellitus Cerebral hemorrhage Organic diseases of heart Pneumonia (all forms) Other respiratory diseases Diarrhea and enteritis Bright's disease (chronic nephritis) Puerperal state Suicides Homieides Other external causes (excluding suicides and homi-	1. 7 1. 9 4. 6 63. 5 55. 7 76. 1 118. 3 27. 4 27. 1 51. 9	1. 7 3. 2 2. 6 2. 7 3. 0 74. 4 64. 9 82. 9 15. 6 59. 6 134. 7 37. 0 9. 1 16. 8 10. 2 9. 6	3.3 .6 1.1 5.4 3.0 3.4 72.5 63.1 74.5 114.2 29.8 8.4 32.6 32.6 32.6 32.6 32.6 32.6 32.6 32.6 32.6 32.6 33.6 34.6 35.6 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 36.7 3	1. 6 4. 2 3. 6 4. 1 78. 5 69. 2 22. 2 21. 7 153. 5 86. 3 11. 3 167. 9 11. 4 9. 7 6. 8	1.7 3.9 2.9 4.8 6.3 17.0 84.8 73.1 19.0 61.6 149.9 11.9 12.6 9.6 6.5
cides)	70. 2 22. 6 185. 0	89. 7 25. 1 205. 5	76. 6 22. 7 179. 0	61. 3 20. 4 200. 3	63. 3 19. 5 198. 6

All figures in this table include insured infants under 1 year of age. The rates for 1931 are subject to slight correction, since they are based on provisional estimates of lives exposed to risk.

### COURT DECISIONS RELATING TO PUBLIC HEALTH

Piggeries held to be nuisances.—(Pennsylvania Supreme Court; Lutz v. Dept. of Health of Commonwealth et al., 156 A. 235; Commonwealth ex rel. Woods, Atty. Gen., v. Banholzer et ux., 156 A. 237; Commonwealth ex rel. Woods, Atty. Gen., v. Goodwin et al., and Commonwealth ex rel. Woods, Atty. Gen., v. Topel, 156 A. 238; decided June 27, 1931.) In these four cases, the court held that certain piggeries, where garbage was fed to swine, were operated and maintained in violation of the rules and regulations of the State department of health and were subject to abatement as public nuisances. The Lutz case was an action to restrain the State health authorities from abating the nuisance arising from the piggery, while the other cases were proceedings to abate nuisances caused by the offending piggeries.

### DEATHS DURING WEEK ENDED OCTOBER 10, 1931

Summary of information received by telegraph from industrial insurance companies for the week ended October 10, 1931, and corresponding week of 1930. (From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce).

Communication.	Week ended October 10, 1931	Corresponding week, 1930
Policies in force	<b>7</b> 4, 633, 545	75, 406, 109
Number of death claims	11, 479	11, 836
Death claims per 1,000 policies in force, annual rate.	8. 0	8. <b>2</b>
Death claims per 1,000 policies, first 41 weeks of year,		
annual rate	9. 8	9. 6

Deaths 1 from all causes in certain large cities of the United States during the week ended October 10, 1931, infant mortality, annual death rate, and comparison with corresponding week of 1930. (From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce)

[The rates published in this summary are based upon mid-year population estimates derived from the 1930 census]

			·					
	Wee	k ended	Oct. 10,	1931		ponding , 1930	the f	rate <sup>2</sup> for irst 41 eks
City	Total deaths	Death rate 2	Deaths under 1 year	Infant mor- tality rate 3	Death rate 2	Deaths under 1 year	1931	1930
Total (82 cities)	7, 026	10. 3	661	4 51	10. 9	760	12.0	12.0
Akron. Albany * Atlanta. White. Colored Baltimore * White. Colored Birmingham White. Colored Boston Bridgeport Buffalo. Cambridge. C	47 34 85 50 202 1153 49 54 54 28 28 28 29 33 31 114 23 22 22 23 50 50 20 20 20 20 20 20 20 20 20 20 20 20 20	9. 5 13. 7 16. 0 (e) 12. 9 (f) 10. 5 (g) 11. 7 10. 2 10. 5 9. 6 11. 2 8. 8 15. 1 9. 8 8. 8 10. 0 (e) 11. 6 11. 3 10. 5	9 1 6 2 2 4 31 24 7 7 3 1 1 2 7 7 4 4 3 3 2 5 8 15 12 5 12 12 12 12 12 12 12 12 12 12 12 12 12	89 20 61 32 115 104 109 30 30 17 49 66 29 980 52 46 51 90 35 49	8. 6 15. 1 16. 5 (°) 13. 0 (°) 10. 0 14. 6 10. 7 13. 1 13. 8 8. 8 9. 1 17. 7 6. 9 12. 6 17. 0 8. 8	5 3 16 9 9 7 25 18 7 7 25 14 32 2 2 14 4 2 3 68 17 13 13 4 4 3 1 10 10 10 11	7. 9 13. 8 15. 2 (e) 14. 5 (f) 13. 5 (f) 14. 3 11. 2 13. 1 14. 3 10. 7 16. 1 11. 3 13. 6 11. 2 (g) 11. 9 13. 1	8.0 14.9 15.7 (e) 13.7 (f) 13.5 15.6 15.6 11.2 15.7 11.4 9 11.7 14.9 11.7
Detroit Duluth El Paso Erie Fall River * 7 Flint Fort Worth White Colored Grand Rapids Houston White Colored Colored	197 16 24 15 25 13 30 22 8 23 45 31	6. 2 8. 2 11. 9 6. 6 11. 3 4. 1 9. 3 7. 0 7. 6	27 1 5 1 1 1 2 1 2 8 7	43 25 19 23 13	8. 2 11. 8 10. 6 11. 2 9. 0 6. 3 7. 6 (6) 8. 9 10. 2	42   2   5   2   2   6   2   1   3   7   5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5   - 5	8.3 11.3 15.7 10.5 11.2 6.9 10.8 (6) 9.1 11.2	9. 4 11. 3 17. 4 11. 3 11. 9 9. 2 11. 0

See footnotes at end of table.

Deaths 1 from all causes in certain large cities of the United States during the week ended October 10, 1931, infant mortality, annual death rate, and comparison with corresponding week of 1930—Continued

					,			
	Wee	k ended	Oct. 10,	1931		ponding , 1930	the f	rate <sup>3</sup> for irst 41 eks
City	Total deaths	Death rate ?	Deaths under 1 year	Infant mor- tality rate 3	Death rate <sup>3</sup>	Deaths under 1 year	1931	1930
Indianapolis	101	14. 2	9	74	15.7	7	13. 9	14.8
White Colored	91 10		8	75 67		5 2		
Jersey City	76	(6) 12.4		53	(°) 10. 2	9	(6) 11. 6	(6) 11. 2
Jersey City Kansas City, Kans	27	11.5	Ž	41	15.0	ĭ	12.7	11.8
White	20		6 2 2 0 9 3 2 1	49	l	1		
Colored Kansas City, Mo.	7 81	(6) 10.3	0	0	(6) 12. 9	0 9 2 2	(6) 13. 1	(6) 13. 3
Knoxville	18	8.6	2	68 64	10.3	2	13. 1 12. 5	13. 3
White	13	3.0	2	48		2		10.0
White. Colored. Long Beach. Los Angeles.	5	(6)	ī	204	(6)	0	(6) 9.8	(6)
Long Beach	26	8.9		0	10.1	1	9.8	`
Louisville	223 59	8. 8 10. 0	22 7	64 60	11.7 13.4	21	10.7	11.0
White	46	10.0	6	59	13. 4	8 7	14.3	13. 6
Colored	13	(6)	ĭ	66	(6) 12. 4	i	(6)	(6)
Lowell 7	23	ìi. 9	0 2	0	12. 4	8	12.7	13. 4
Lynn Memphis	13	6.6	2	52	11.7	1	9.6	10. 5
White	81 <b>3</b> 8	16. 3	6	63 50	11.3	7	16.7	17. 1
White Colored	43	(6)	3	87	(6)	3	(6)	(6)
Miami	22	ìó. 2	3 3 2 2	51	ìó. 3	2	ìí. 9	`í1.1
White	18		2	71		2		
Colored	93	(6) 8. 2	0 17	0 74	(°) 9. 0	0	(f) 9.4	(9)
Minneapolis	78	8.6	16	58	9.8	6 3	11. 2	9. 6 10. 7
Nachville	50	16.8		74	14.2	9 1	17.0	16.6
White. Colored. New Bedford '	27		5 2 3	40		7		
Colored	23 22	(6) 10. 2	3	177	(6)	2 2	(9)	(6)
New Heyen	48	15. 4	4 2	106 38	8.8	4	12. 1 12. 4	10.9
New Orleans	121	13. 5	7	38	15. 2	15	16. 9	12. 8 17. 4
White	69		4	33		7		<b>-</b>
Colored	52	(6)	3	49	(6)	8	(6)	(6)
New York Bronx Borough	1, 321 194	9.7 7.6	97 6	41 14	9. 4 6. 4	108 11	11. 2 8. 2	10.8
Brooklyn Borough	466	9.3	39	41	8. 2	40	10. 3	7. 9 9. 9
Brooklyn Borough	486	14.0	40	68	14.7	40	17.0	16. <b>1</b>
Queens Borough Richmond Borcugh	134	6. 1	9	25	5.9	11	7.3	7. 1
Normals N. J.	41 96	13. 1 11. 2	3	54 68	13. 7	6	13. 9	14. 4
Oakland	56	10.0	13	38	10. 9 9. 1	11 2	11. 7 10. 5	12. 1 11. 0
Newark, N. J. Oakland. Oklahoma City.	35	9.3	4	55	9. 5	6	10.8	10.8
Umana	51	12. 3	0	0	10.2	4	13. 9	13. <b>6</b>
Paterson.	34	12. 8 12. 0	2 4	34	10.9	2	13.4	12. <b>3</b> 12. <b>3</b>
Peoria Philadelphia	25 422	11. 2	44	105 64	5. 9 11. 2	49	12. 6 13. 1	12. 3 12. 6
Portland, Oreg Providence	137	10.6	16	55	12. 9	21	14.5	13. 8
Portland, Oreg	62	10. 5	8	97	12.4	2	11.6	12. 1
Providence	59	12. 1	5	46	8.4	2	12.8	13. 0
Richmond White	34 20	9. 6	2	29 22	10.8	5	15. 5	14.8
Colored	14	(6)	i	43	(6)	4 -	(6)	(6)
Rochester	63	10.7	5	46	14.3	12	12.0	11.6
Ct Louis	183	11.5	13	44	13. 3	21	15. 2	14. 2
St. Paul Salt Lake City San Antonio San Antonio	42	7. 9 10. 9	7	10 104	9. 4 11. 5	4	10. 7 12. 2	10. 1 12. 1
San Antonio	30 51	10.9	7	104	11. 0	2 5	14.5	12. 1 16. <b>6</b>
San Diego	33	11.0	3	61	11.9	5 1	13.6	14. 4
NAN KTANCISCO	139	11. 2	11	73	9.4	6 2	13. 1	13. <b>0</b>
Schenectady	20	10.8	0	0	7.1	2	10. 5	11.3
Seattle	74 11	10. 4 5. 5	3	28	10. 0 10. 5	2	11. 4 8. 9	10. 8 9. 8
SomervilleSouth Bend	14	6.8	1	25	7.0	2	8.1	8. <b>9</b>
Spekane	30	13.4	2	52	11.3	2	12.4	12. <b>3</b>

See footnotes at end of table.

Deaths 1 from all causes in certain large cities of the United States during the week ended October 10, 1931, infant mortality, annual death rate, and comparison with corresponding week of 1930—Continued

	Weel	k ended	Oct. 10, 1	1931		ponding , 1930	Death rate 2 for the first 41 weeks	
City	Total deaths	Death rate <sup>2</sup>	Deaths under 1 year	Infant mor- tality rate 3	Death rate <sup>2</sup>	Deaths under 1 year	19 1	1930
Springfield, Mass. Syracuse Tacoma Toledo. Trenton Utica Washington, D. C White Colored Waterbury Wilmington, Del. 7	41 32 58 43 23 133 80 53	7. 5 10. 0 15. 5 10. 2 18. 1 11. 7 14. 1	29 03 4 39 4 53 6	31 107 0 28 70 78 50 33 86 90 129	12. 5 12. 7 6. 8 11. 4 20. 7 12. 3 13. 8	57 29 88 177 34 13	11. 7 11. 6 12. 1 12. 0 16. 5 14. 0 15. 8	12. 2 11. 6 12. 3 12. 7 16. 7 14. 8 15. 1
Worcester Yonkers Youngstown	46	12. 2 4. 5 7. 2	4 0 3	55 0 42	11. 2 5. 8 10. 7	3 0 3	12. 1 8. 5 10. 2	12. 8 8. 0 10. 3

1 Deaths of nonresidents are included. Stillbirths are excluded.

Deaths under 1 year of age per 1,000 live births. Cities left blank are not in the registration area for births.

These rates represent annual rates per 1,000 population, as estimated for 1931 and 1930 by the arithmetical method.

births.

4 Data for 77 cities.

5 Deaths for week ended Friday.

6 For the cities for which deaths are shown by color, the percentage of colored population in 1920 was as follows: Atlanta, 31; Baltimore, 15; Birmingham, 39; Dallas, 15; Fort Worth, 14; Houston, 25; Indianapolis, 11; Kansas City, Kans, 14; Knoxville, 15; Louisville, 17; Memphis, 38; Miami, 31; Nashville, 30; New Orleans, 26; Richmond, 32; and Washington, D. C., 25.

7 Population Apr. 1, 1930; decreased 1920 to 1930, no estimate made.

## 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 October 17, 1931, and October 18, 1930

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended October 17, 1931, and October 18, 1930

	Diphtheria		Influ	Influenza		asles		gococcus ngitis
Division and State	Week ended Oct. 17, 1931	Week ended Oct 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930
New England States:  Maine	2 2 29 2 5	5 5 1 69 7 16	7	2 2 2	46 1 21 50 26 1	1 4 80 8	0 0 0 1 0	0 0 0 1 0
New York New Jersey Pennsylvania East North Central States:	72 31 79	66 69 108	1 11 4	1 6 8	58 14 109	74 32 76	3 2 4	11 2 2
Ohio Indiana Illinois Michigan Wisconsin West North Central States:	140 37 100 21 18	63 52 110 68 16	15 1 6 12	22 10 7 3 5	62 5 17 27 11	10 18 20 42 40	1 4 7 1 0	8 7 4 8 5
Minnesota Iowa Missouri North Dakota South Dakota Nebraska	22 13 86 2 5 9	21 9 46 7 11 14	4 1 1	1 6 13	8 2 2 1 11	12 2 70 	2 0 2 0 0	0 1 2 0 0 0
Kansas. South Atlantic States: Delaware Maryland 2 4 District of Columbia Virginia	8 50 11	2 29 7	7	6	1 5 1	1	0 1 0	0 0 0
West Virginia. North Carolina . South Carolina <sup>3</sup> Georgia <sup>3</sup> Florida	103 207 62 35 25	15 216 65 36 8	217 8	12 9 320 46 1	29 8 6 1 15	21 5 7 2	2 0 0 0 0	1 5 0 0

New York City only.
 Week ended Friday.
 Typhus fever, 1931, 9 cases: 1 case in Maryland; 1 case in South Carolina; 3 cases in Georgia; 2 cases in Alabama; 1 case in Mississippi; and 1 case in Louisiana.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended October 17, 1931, and October 18, 1930—Continued

	Diph	theria	Infl	uenza	Me	asles	Menin meni	gococcus ingitis
Division and State	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930
East South Central States: Kentucky	187 185 111 156	10 35 70 56	45 10 1	16 6	1	4 32	2 4 1 1	3 2 3 4
Arkansas Louisiana 3 Oklahoma 4 Texas Mountain States:	61 33 119 50	7 20 69 35	3 13 6	8 2 15 8	7 7 3 4	1 3 7 9	0 3 0 1	0 2 1 0
Montana Idaho Wyoming	6	2 1 6			23	1 2 31	1 0 0	0 0 0 1 0 0 5
Colorado	28 3 1	12 5 1	1 7 8	2 4	1 1	8 5	0	
WashingtonOregon	15 5 65	32 3 55	33 67	13 20	11 10 72	6 99 123	3 1 6	2 0 4
	Poliomyelitis		Scarlet fever		Smallpox		Typhoi	d fever
Division and State	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930
New England States:  Maine New Hampshire Vermont Massachusetts. Rhode Island Connecticut Middle Atlantic States:	12 2 6 43 2 26	15 1 0 42 0 10	8 2 4 123 17 14	23 3 8 82 9	0 0 0 0 0	0 0 2 0 0	11 0 0 4 0 2	2 0 1 11 0 7
New York New York New Jersey Pennsylvania East North Central States:	160 33 28	50 1 10	168 72 199	160 77 194	0	0	46 12 61	45 8 58
Ohio Indiana Illinois Michigan Wisconsin West North Central States:	8 4 35 46 53	96 16 19 15 15	348 37 174 116 49	277 91 187 142 89	0 3 1 1 2	17 22 23 22 11	47 222 46 21 3	63 12 40 22 8
Minnesota Iowa Missouri North Dakota South Dakota Nebraska Kansas South Atlantic States:	60 7 1 1 2 2 0	20 19 12 1 8 35 44	46 21 64 4 7 21 45	38 27 57 12 12 29 42	0 26 0 0 2 1 3	4 1 2 6 10 2 2	8 2 22 1 1 0 3	4 2 27 6 3 1 8
Delaware Maryland <sup>2 3</sup> . District of Columbia. Virginia.	1 2 0 3	0 4 1	3 63 11	2 44 8	0	0	3 53 0	20 38 0
West Virginia. North Carolina. South Carolina <sup>3</sup> Georgia <sup>3</sup> Florida.	5 1 1 0 1	6 0 0 1 1	52 126 19 25 2	34 156 42 24 4	1 2 0 0 0	0 1 0 0	58 22 28 37 5	32 26 9 42 1

Week ended Friday.
 Typhus fever, 1931, 9 cases; 1 case in Maryland; 1 case in South Carolina; 3 cases in Georgia; 2 cases in Alabama; 1 case in Mississippi; and 1 case in Louisiana.
 Figures for 1931 are exclusive of Oklahoma City and Tulsa.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended October 17, 1931, and October 18, 1930—Continued

	Poliomyelitis		Scarle	t fever	Smallpox		Typhoid fever	
Division and State	Week ended Oct. 17, 1931	Week ended Oct. 18, 1930						
East South Central States:								
Kentucky	1	5	68	34	0	0	35	10
Tennessee	2	4	88	25	1	5	57	26
Alabama 3		2	56	58	7	0	15	34
Mississippi 3	2	0	53	24	3	0	22	37
West South Central States:				i				
Arkansas	0	2	14	11	6	1	22	21
Louisiana 3		4	16	13	0	1	30	10
Oklahoma 4	0	7	40	40	4	18	49	41
Texas	1	4	46	21	4	2	22	23
Mountain States:						_	_	_
Montana	0	1	17	21	Ō	2	3	8
Idaho	1	1	8	1	0	0	0	3
Wyoming	0	2	3	3	0	1	0	0
Colorado	0	4	8	. 31	0	3	. 9	. 8
New Mexico	0	0	8	12	0	0	11	21
Arizona	1	0	6	4	0	0	5	1
_ Utah 2	0	0	4	12	0	1	2	5
Pacific States:			-	40				
Washington	4	3	7	48	4	24	3 2	6
Oregon	0	2	•	13	3	1		
California	. 7	87	98	58	3	4	6	14

### SUMMARY OF MONTHLY REPORTS FROM STATES

The following summary of cases reported monthly by States 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	Pel- lagra	Polio- mye- litis	Scarlet fever	Small- pox	Ty- phoid fever
August, 1931  Kansas Mississippi Montana  September, 1931	4 8 4	30 162 7	1 297 4	5, 269	17 25 37	830	4 7 11	52 58 44	6 30 4	39 217 11
California Maryland Massachusetts New Jersey Ohio Vermont West Virginia Wyoming	21 1 7 10 6	230 103 146 57 265 7 122	115 16 22 5 31	7 3 10	209 24 80 43 91 24 39 5	7 1 2	45 15 588 354 52 27 23 2	327 119 358 137 586 13 94 14	18 0 0 8 4 2 2	106 158 30 62 367 0 280

Week end Friday.
 Typhus fever, 1931, 9 cases; 1 case in Maryland; 1 case in South Carolina; 3 cases in Georgia; 2 cases in Alahama; 1 case in Mississippi; and 1 case in Louisiana.
 Figures for 1931 are exclusive of Oklahama City and Tulsa.

August, 1931		Diarrhea:	Cases
	ases	Maryland	53
Mississippi	2	Diarrhea and enteritis:	
Chicken pox:		Ohio (under 2 years)	- 76
Kansas		Dysentery: California (amebic)	
Montana		California (bacillary)	
Dengue:		Maryland	
Mississippi	2	Massachusetts	
Dysentery:		New Jersey	
Kansas	2	Ohio	_ 20
Mississippi (amebic)	52	Food poisoning: California	
Kansas.	5	Ohio.	
Montana	2	German measles:	- ~
Hookworm disease:		California	
Mississippi	256	Maryland	
Impetigo contagiosa:		Massachusetts	
Kansas Montana	5 3	New Jersey Ohio	
Mumps:	٥	Granuloma, coccidioidal:	. 0
	80	California	. 7
	67	Hookworm disease:	
	11	California	. 1
Ophthalmia neonatorum:		Impetigo contagiosa:	
Mississippi Paratyphoid fever:	8	Maryland Lead poisoning:	124
Kansas	1	Massachusetts	6
Puerperal fever:	-	New Jersey	
	25	Ohio	10
Scabies:		Lethargic encephalitis:	
Kansas	1	California	
Kansas	1	Maryland Massachusetts	
Montana	3	New Jersey	
Tetanus:		Ohio	i
Kansas	1	Milk sickness: Ohio	1
Trachoma:		Mumps:	
Kansas Mississippi	1 2	California	
	49	Maryland	
Tularaemia:	•	New Jersey	
	3	Ohio.	
Undulant fever:	ı	Vermont	22
KansasVincent's angina:	5	Wyoming	2
	6	Ophthalmia neonatorum: California	
	2	Maryland	4
Whooping cough:		Massachusetts	
Kansas 12		New Jersey	5
Mississippi 28	3	Ohio	72
Montana 4. September, 1931	5	Paratyphoid fever:	
Actinomycosis:		California New Jersey	11
36 3 44	1	Ohio	7
Anthrax:	1	West Virginia	i
	1	Puerperal septicemia: Ohio	3
Botulism:		Rabies in animals:	
California Thicken pox:	1	California Maryland	23
California212	2	Rocky Mountain spotted or tick fever:	2
Maryland		Maryland	2
Massachusotts63	- 1		10
New Jersey	3	Septic sore throat:	
Ohio 116	3	California	7
Vermont         10           West Virginia         20			10
West virginia 20 Wyoming 8	<u> </u>	Massachusetts	

Tetanus:	Cases	Undulant fever:	Cases
California	_ 12	California	10
Maryland	_ 4	Maryland	4
Massachusetts	_ 4	Massachusetts	1
Ohio	. 1	New Jersey	2
Trachoma:		Ohio	8
California	_ 21	Vermont	2
Massachusetts	_ 2	Vincent's angina: Maryland	14
Ohio	_ 5	Whooping cough:	
Trichinosis:		California	583
California	_ 2	Maryland	510
Massachusetts	_ 1	Massachusetts	546
Tularæmia:		New Jersey	880
California	. 2	Ohio	803
Ohio	_ 5	Vermont	69
Wyoming	. 1	West Virginia	96
Typhus fever: Maryland	. 2	Wyoming	18

## TYPHOID FEVER OUTBREAK AT STATE TEACHERS COLLEGE, WEST CHESTER, PA.

In a communication dated October 22, 1931, Dr. Theodore B. Appel, secretary of health of Pennsylvania, states that there has been an outbreak of typhoid fever among the students at the State Teachers College, West Chester, Pa., with approximately 40 cases occurring between the last week in September and about October 10, the peak coming between October 4 and 7.

A carrier among the kitchen or dining room employees is believed to have been the source of the epidemic, as water, milk, and other food supplies were eliminated, as possible sources and the cases were limited to those students who lived and boarded at the school.

### RECIPROCAL NOTIFICATIONS

Notifications regarding communicable diseases sent during the month of September, 1931, by departments of health of certain States to other State health departments

Disease	Cali- fornia	Con- necti- cut	Illinois	Maine	Massa- chu- setts	Minne- sota	New Jersey	New York	Oregon	Wash- ing- ton
Actinomycosis					1	3				
Malaria Poliomyelitis Scarlet fever	1 2	4			6	2	1	5 1		
Smallpox	1					1				
Tuberculosis Typhoid fever Undulent fever		2	4	1		23 2 1	2	8	6	1

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

The 95 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 33,270,000. The estimated population of the 88 cities reporting deaths is more than 31,725,000. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

### Weeks ended October 10, 1931, and October 11, 1930

	1981	1930	Esti- mated ex- pectancy
Cuses reported			
Diphtheria:			ł
46 States	1, 978	1, 455	
95 cities	414	440	684
Measles:			i
45 States.	679	617	l
95 cities	177	136	
Meningococcus meningitis:			
46 States	62	73	
95 cities	23	33	
Poliomvelitis:		•	
	799	553	1
46 States	100	300	
Scarlet fever:	0.100	4 000	ŀ
46 States	2, 182	1, 929	
95 cities	635	596	522
Smallpox:			
46 States	86	133	
95 cities	8	10	18
Typhoid fever:			l
46 States	900	934	
95 cities	126	126	132
Deaths reported			ŀ
Influenza and pneumonia:			l
88 cities	352	458	ł
Smallpox:	502	200	
88 cities	0	0	l
85 CILES	U		

### City reports for week ended October 10, 1931

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet 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 weeks 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 the reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1922 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviation 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.

		Diph	theria	Influ	ienza			D
Division, State, and city	Chicken pox, cases reported	Cases, estimated expect- ancy	Cases reported	Cases reported	Deaths reported	Measles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths reported
NEW ENGLAND								
Maine:			_					
Portland New Hampshire:	0	0	1		0	0	0	0
Concord Vermont:	0	0	0		0	0	0	0
Barre Burlington	0	0	0		0	0	0	2
Massachusetts:	_		-		-	_		•
Boston Fall River	5 0	17 3	14 11	4	0	4 1	3 0	14 1
Springfield Worcester	0 3	4 4	0 1		0	2 2	2 22	0
Rhode Island:	0	1	0		0	0	0	2
Pawtucket Providence	ŏ	4	3		1	48	ŏ	6
Connecticut: Bridgeport	1	3	0	1	0	0	0	1
liartford New Haven	0	3 1	0		0	0	1 0	1 2
MIDDLE ATLANTIC		1	Ů					2
New York:								
Buffalo	2 27	10 99	6 59	2	0	1 10	0 11	3
New York Rochester	2	2	5		0	0	0	78 0
Syracuse New Jersey:	1	1	0		0	0	4	0
Camden	3	4	3	<u>2</u>	0	1	0	0
Newark Trenton	ō	2	ŏ		ŏ	ō	ô	6 2
Pennsylvania: Philadelphia	5	36	8	4	3	9	7	26
Pittsburgh	4	14	9		1	12	17	9
ReadingEAST NORTH CENTRAL	١	1	0		ا	0	١	
Ohio:				ł			İ	
Cincinnati Cleveland	0 8	8 37	3	7	0	0   6	0 19	2 3 1
Columbus	1 7	4	13		ŏ	1	0	1
Toledo:ndiana:		5	5	1		1		
Fort Wayne Indianapolis	0	2	5 4		0	0	0 4	3 4
South Bend Terre Haute		1 1	2			·	0	ō
Ilinois:	- 1	- 1	42		Ī	5	7	20
Chicago Springfield	8 0	73 1	2	2	3 0	ő	ó	1
Michigan: Detroit	4	47	11		0	4	8	6
Flint Grand Rapids	2	3	1 0		0	1	1 2	1
Visconsin:	- 1	!			- 1	-	- 1	
Kenosha Madison	2 0	0			0	0	10	0
Milwaukee Racine	8	7	0		0	2	12	9
Superior.	ô	δĺ	ŏ į.		ŏl	٥l	20	8

### City reports for week ended October 10, 1931—Continued

Division, State, and city	Chicken pox, cases reported	Diphtheria		Influenza				Γ
		Cases, estimated expect- ancy	Cases reported	Cases reported	Deaths reported	Measles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths reported
WEST NORTH CENTRAL								
Minnesota: Duluth	1	1	0			0	1	
Minneapolis St. Paul	13 5	23 10	3 2		0	1 0	15 1	1
Iowa: Davenport	12	1	0			0	0	
Des Moines Sioux City	0	2	0			0	0	
Waterloo Missouri:	4	0	i			ŏ	ô	
Kansas City	2	4	8		o o	0	1	5
St. Joseph St. Louis	0 1	0 28	3 14		0	0	0	1 2
North Dakota: Fargo	o	o	0		0	o	1	0
Grand Forks South Dakota:	0	0	0			0	0	
Aberdeen Sioux Falls	15 0	0	0			29 0	1 0	
Nebraska: Omaha	0	10	12		0	0	1	5
Kansas: Topeka	o	2	3	2	0		0	
Wichita	ŏ	2	3		ŏ	ŏ	ĭ	1
SOUTH ATLANTIC								
Delaware: Wilmington	0	1	o		0	0	0	1
Maryland: Baltimore	1	18	8	3	0	1	6	17
Cumberland Frederick	1 0	0	0	1	0	0	0	2 1
District of Columbia: Washington		12	او			1	0	5
Virginia:		3	2			0	0	
Lynchburg Norfolk	Ó	2	4		Ó I	ōl	i	0 3 1
Richmond Roanoke	0	19 4	17 6		0	8	0	1 0
West Virginia: Charleston	0	1	2	1	0	0	0	0
Wheeling North Carolina:	0	0	0		0	1	0	1
Raleigh	0	4	3		0	8	8	1
Winston-Salem South Carolina:	ŏ	4	10		ŏ	ŏ	ĭ	Ž
Charleston	0	1	0	3	8	o l	0	Ō
Greenville	ŏ	i	i		ŏ	8	0	1 0
Georgia: Atlanta	0	7	2	4	o l	0	0	3
Brunswick Savannah	0	0 2	0 2	3	0	0	0	0 1
Florida: Tampa	0	1	5		0	0	o	3
BAST SOUTH CENTRAL			l	ł				
Kentucky: Covington		1		1	٥	ا		2
Tennessee:	1	- 1	19		- 1	- 1	1	_
Memphis	8	6	8		8	0	0	6 0
Birmingham	8	1	6 2		1	8	0	2 1
Montgomery	ŏ	3	3			ö	2	

		Diph	theria	Influ	lenza	1		_
Division, State, and city	Chicken pox, cases reported	Cases, estimated expect- ancy	Cases reported	Cases reported	Deaths reported	Measles, cases re- ported	Mumps, cases re- ported	Pneu- monia, deaths reported
WEST SOUTH CENTRAL								
Arkansas:								
Fort Smith	o l	2	3			1	0	
Little Rock Louisiana:	0	1	2		0	0	1	2
New Orleans	0	9	4	2	2	0	0	18
Shreveport		2						
Oklahoma:	0	3		1	اما	0	2	
Muskogee. Oklahoma City	2	3	8 8	6	0	ŏ	ő	0 /i <sup>2</sup>
Texas:	- 1	-	_	"	_		- 1	
Dallas	0	13	3		0	0	0	4 2 2 2 2 3
Galveston	0	3	6		0	1 C	0	2
Houston	ŏ	6	8		ŏl	ŏl	ŏl	. 52
San Antonio	ŏ	ž	ĭ		ŏ	ŏ	ŏ	3
MOUNTAIN								4.3
Montana:						i		
Billings Great Falls	1	0	0		0	1	0	0
Great Falls	2	0	0		0	9	0	0
Helena Missoula	8	0	ő	i	0	4 0	8	0
Idaho:	• 1	۱	۰	• 1	- 1	١	٠ı	U
Boise		0						
Colorado: Denver	17	8	3		.	. 1	,	2
Pueblo	3	î	ő		1 0	1 0	1 0	0
New Mexico:	_ [	- 1	٠,		٠,	١	•	•
Albuquerque	6	0	1		0	0	0	0
Arizona: Phoenix	اه	o	0	1	0	0	0	2
Utah:	"	١	١		"	١		· · · · · · · · · · · · · · · · · · ·
Salt Lake City	5	2	1		0	0	2	. 1
Nevada: Reno	اه	0	0	1	0	0	0	
	١	"	. "		٠	١	. "	
PACIFIC	1	1	ļ		- 1	- 1		
Washington:	- 1	1		1	İ		·	
Seattle	22	4	0	-		16	5 .	
Spokane Tacoma	2	3	0			Č.	0	517
Oregon:	U	0	6 .		1	0	1.	jironM <sup>®</sup> :
Portland	28	5	0	:	0	3	9	2
Salem	1	Ó	0	7	0	1	0	0
California: Los Angeles	14	23	18	35	1	99	4	. 10
Sacramento	2	23	10	00	اة	22	6 1	் ஒ
San Francisco	18	11	ŏl	5	ŏ	23	ŏ l'	,i., 7

	Scarle	t fever		Smallpo	X	Tuber-		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-	Cases,	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
NEW ENGLAND											
Maine: Portland	1	0	o	0	0	0	0	1	0	0	12
New Hampshire: Concord	0	2	0	0	0	0		0	0	. 0	7
Vermont:	-	_		1	-	-	1		- 1	_	_
BarreBurlington	0	0	0	0	0	1 0	0	0 2	0	0	4 13
Massachusetts: Boston	27	19	0	o	0	8	3	2	2	8	198
Fall River	2	10	ŏ	ŏ	0	Ŏ	Ŏ	0	Ō	0	25
Springfield Worcester	3 7	22	ŏ	ŏ	0	2	ŏ	1	0	13	21 46
Rhode Island: Pawtucket	اه	0	0	0	0	1	0	0	0	0	24
Providence	3	ĭ	ŏ	ŏ	ŏ	3	ŏ	ŏ	ŏ	4	59
Connecticut: Bridgeport	3	1	0	o l	0	1	10	0	0	2	33 <b>3</b> 7
Hartford New Haven	2	2 2	0	0	8	2 1	0 1	1 2	1 0	5 12	37 48
MIDDLE ATLANTIC											
New York:							1	ŀ	l		
Buffalo New York	43	23 61	0	0	0	5 91	28	0 16	0	17 147	113 1, 321
Rochester	3 3	8	1	ŏ	ŏ	0	1	2	1	3	66
Syracuse New Jersey:	- 1		0	- 1	1	- 1	- 1	1	0	18	38
Camden Newark	1 5	4 6	0	0	0	0 5	0	2 0	1 0	7 72	22 101
Trenton	ĭ	6	ŏ	ŏ	ŏ	2	ō	ĭ	ŏ	2	43
Pennsylvania: Philadelphia	31	45	0	o	o	24	10	11	1	113	422
Pittsburgh Reading	22 1	13	0	0	8	11	2 0	1 0	8	29	1 <b>37</b> 27
EAST NORTH CEN-	-			1		-			. 1	-	
TRAL		ļ		İ	1		1	}	- 1	ļ	
Ohio: Cincinnati	10	29	1	٥	o	6	2	o	0	8	132
Cleveland	17	27	0	0	0	8	2	1	3	98	171
Columbus Toledo	5 7	7 7	0	0	8	1 2	1 1	1	0	21	48 58
Indiana: Fort Wayne	اه	اه	1	o	o	اه	o	0	0		20
Indianapolis	7	ĭ	0	ŏ	ŏ¦	ž	2	ŏ	ŏ	14	
South Bend Terre Haute	2 -	0	0 -			2	0 -			0	23
Illinois: Chicago	52	74	o l	o l	o l	40	6	2	o	144	586
Springfield Michigan:	1	3	0	0	0	2	1	0	0	1	19
Detroit Flint	42 8	15	1 0	0	0	17	3	5	8	106	197 13
Grand Rapids.	6	8	ŏ	ŏ	ŏ	ī	i	ŏ	ŏ	6	23
Wisconsin: Kenosha	1	2	0	0	0	0	1	0	0	1	2
Madison Milwaukee	2 11	0 7	0	0 -			0	0 -	····o	0 57	93
Racine Superior	3	3 2	0	0	Ö	8	0	0	8	0	13 10

	Scarle	t fever		Smallpo	)X	Tuber-	Ту	phoid f	eyer	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-	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
WEST NORTH CENTRAL											
Minnesota: Duluth Minneapolis St. Paul Iowa:	4 22 13	3 6 4	0 0 1	0 0 0	0 0 0	0 1 2	0 1 1	1 0 0	0 0 0	0 7 4	16 78 46
Davenport Des Moines Sioux City Waterloo Missouri:	1 4 1 1	0 5 0 0	0 1 0 0	0 0 0			0 0 0	0 0 0		0 0 3 2	29
Kansas City St. Joseph St. Louis North Dakota:	7 1 20 2	4 2 12 2	0	0	0 0 0	11 1 13 0	1 0 5	2 0 2 0	0	5 0 32	81 28 183
Fargo	0	0	0	0			0	ŏ		0	. <b>.</b>
Sioux Falls Netraska: Omaha	0 3	ŏ 9	ŏ	ŏ 1	0	2	ŏ	ŏ	0	, 1	12 51
Kansas: Topeka Wichita	3 3	0	0	0	0	0	0	0	0	5 2	13 26
SOUTH ATLANTIC				I				I			
Delaware: Wilmington Maryland:	0	0	0.	0	0	1	0.	1	0	3	30
Baltimore Cumberland Frederick District of Colum-	9 0 1	7 2 0	0	0	0	11 1 0	7 0 0	3 1 0	0	98	202 14 3
bia: Washington Virginia:	10	15	0	0	0	11	3	9	1	30	133
Lynchburg Norfolk Richmond Roanoke	0 1 6 2	1 7 22 0	0	0	0 0 0	0 0 5 0	1 0 1 0	0 0	0 0 0	0 1 1 2	18 35 15
West Virginia: Charleston Wheeling North Carolina:	2	4 2	0	0	0	2 1	1	1.6	0	7	31 20
Raleigh Wilmington Winston-Salem South Carolina:	2 1 3	0 1 3	0	0	0	0 1 1	0 0 1	0 0 1	0	2, 3' 9	11 11 14
Charleston Columbia Greenville Georgia:	1 0 1	1 0 0	0	0	0	2 1 0	1 2 0	1 0 0	0	0	16 12
Atlanta Brunswick Savannah	7 0 0	10 0 4	0	2 0 0	0	8 0 3	2 0 1	2 0 0	1 0 0	0	85 3 30
Florida: Tampa	0	0	0	0	0	1.	0	1	0	0	24
EAST SOUTH CENTRAL										, ili	
Kentucky: Covington Tennessee:	1	7	0	o	0	1	1	1	0	o	26
Memphis Nashville Alabama:	3	10 1	0	0	0	7 5	3 2	6	0	18	81 50
Birmingham Mobile Montgomery	5 1 1	11 4 7	0	0	8	5 2	2 0 0	0 2 1	0	5 0 3	54 19

<sup>&</sup>lt;sup>1</sup> 4 cases nonresidents.

	Scarle	t fever		Smallp	OX	Tuber-		phoid i	lev <b>er</b>	Whoop	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re-	Cases, esti- mated expect- ancy	Cases re- ported	re-	culo- sis, deaths re-	Cases,	Cases re- ported	Deaths re- ported	ing cough,	Deaths, all causes
WEST SOUTH CEN-											
Arkansas: Fort Smith Little Rock Louisiana:	1	1 2	0	0	0	0	0	0	1	0	
New Orleans Shreveport	3	3	0		0	11	3	19	1	0	121
Oklahoma:     Muskogee Oklahoma City Texas:	0 3	1 4	0	0	0	0	0 2	0 4	0 1	0	35
Fort Worth Galveston Houston	4 1 0 1	10 10 0 0	0 0 0	0 0 0	0	0 0 0 1 5	2 1 1 0 1	2 1 0 0	1 0 0 0	10 0 0 0	52 30 8 45 51
MOUNTAIN	-	Ĭ				Ĭ	-	-	Ĭ		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Montana: Billings Great Falls Helens Missoula Idaho: Boise	0 1 0 0	0 0 0 1	0000	0 0 0	0 0 0	0 0 0	0 1 0 0	0 0 0	0 0 0 0	0 3 0 0	6 2 4
Colorado: Denver Pueblo	7 0	10 0	0	0	0	2 0	2 2	1 1	0	4	62 10
New Mexico: Albuquerque	1	. 0	0	o	0	5	2	2	2	0	11
Arizona: Phoenix Utah:	0	0	0	0	0	3	0	0	0	0	
Salt Lake City Nevada:	3	4	0	0	0	2	3	2	0	2	30
Reno	0	0	0	0	0	0	0	0	0	С	3
PACIFIC		•				l	1		l	-	
Washington: Seattle Spokane Tacoma	7 3 2	9 0 0	1 0 1	0	0	1	3 0 0	1 0 0	0	7 0 2	32
Oregon: Portland Salem	5	1 0	8	0	0	2	1 2	0	0	1 0	62
California: Los Angeles Sacramento San Francisco	14 2 9	18 0 7	0 1 2	0 0 5	0	10 2 8	3 1 1	2 2 0	0	14 0 12	223 13 131

,		rocoecus ngitis		rgic en- salitis	Pel	lagra	Polio til	myelitis le paraly:	(infan- sis)
Division, State, and city	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
NEW ENGLAND									
Maine: Portland	0	o	0	0	0	0	1	2	
Massachusetts: Boston	2	0	0	0	1	1	3	17	1
Springfield	0	0	0	0	0 1	0	1	5 4	0
Rhode Island: Providence	0	0	0	0	0	0	1	4	0
Connecticut: Bridgeport	0	o	0	0	Q	o	0	5	1
Hartford 1 New Haven	0	0	0	0	0	0	0	3	0
MIDDLE ATLANTIC									
New York: New York	3	2	ō.	Q	Q	0	14	102	14
Rochester New Jersey:	0	Ō	0	0	0	0	1	3	0
Camden Newark	2 0	0	0	0	0	0	0 1	1 7	0
Pennsylvania: Philadelphia	3	1	0	0	1	0	1	5	0
Pittsburgh Reading	1 1	0	0	0	0	0	0	0	0
EAST NORTH CENTRAL									
Ohio: Cincinnati	1	1	0	0	0	0	1	. 0	. 0
Cleveland Columbus	0	0	0	0	0	0	0	6	2
Indiana: Indianapolis	0	0	0	0	o	0	0	1	0
Illinois: Chicago	2	1	0	o	1	0	4	18	0
Springfield <sup>1</sup> Michigan:	0	0	0	0	0	0	0	1	0
Detroit	1	0	0	10	0	0	3   0	11 1	. 0
Flint Grand Rapids Wisconsin:	ŏ	Ŏ	Ŏ	0	0	0	0	1	0
Madison Milwaukee	0	0	0	0	0	0	0	1	. 0
Racine	õ	ŏ	ŏ	Ŏ	Ŏ	ŏļ	Ō	2	Ŏ
WEST NORTH CENTRAL							·	erd in	•
Minnesota: Duluth	0	0	0	0	0	0	0	1	0
Minneapolis St. Paul	0	0	0	0	0	0	0	16 27	· 1.
Iowa: Des Moines	0	0	0	0	o	0	8	2	0
Missouri: Kansas City	0	0	o	0	1	0	0	0	0
St. Louis Nebraska:	1	0	1	1	0	0	1	5	0
Omaha	0	0	0	0	0	0	1	1	0
SOUTH ATLANTIC <sup>1</sup>	l			1					
Maryland: Baltimore	0	0	0	o	0	0	1	0	1
District of Columbia: Washington	2	1	0	0	1	1	0	3	1
West Virginia: Charleston	اه	1	•	ol	o	o l	o l	0	•

<sup>&</sup>lt;sup>1</sup> Typhus fever, 5 cases: 1 case at Hartford, Conn.; 1 case at Springfield, III.; 1 case at Savannah, Ga.; and 2 cases and 1 death at Tampa, Fig.

## City reports for week ended October 10, 1931

	Mening meni	gococcus ngitis	Letha ceph	rgic en- alitis	Pel	lagra	Polior til	nyelitis e paraly:	(infan- sis)
Division, State, and city	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
SOUTH ATLANTIC 1—contd									
South Carolina: Charleston Columbia Georgia:		0	0	0	2 0 0	0 0	0	0	0
Brunswick Savannah	ő	ŏ	ő	ő	1	o	1	ŏ	0
EAST SOUTH CENTRAL									
Tennessee: Memphis Nashville Alabama:	0	0 1	0	0	1 0	0	0	0	0
Birmingham	. 0	0	0	0	1 0	1 1	0	0	0
WEST SOUTH CENTRAL									
Louisiana: New Orleans	0	0	0	0	3	1	0	. 0	0
Muskogee		0	0	0	1	0	0	0	0
Dallas	0	0	0	0	2	0	0	1	0
MOUNTAIN									
Montana: Great Falls Missoula Arizona:		0	0	0	0	0	0	1 1	. 0
Phoenix 2	1	0	0	0	. 0	0	0	0	0
PACIFIC									
Washington: Spokane California:		0	0	o	0	0	1	1	0
San Francisco	. 2	2	0	0	1	0	0	0.	, ,, 0

<sup>&</sup>lt;sup>1</sup> Typhus fever, 5 cases: 1 case at Hartford, Conn.; 1 case at Springfield, Ill.; 1 case at Savannah, Ga.; and 2 cases and 1 death at Tampa, Fla.

<sup>2</sup> Rabies (in man): 1 death at Phoenix, Ariz.

The following tables give the rates per 100,000 population for 98 cities for the 5-week period ended October 10, 1931, compared with those for a like period ended October 11, 1930. The population figures used in computing the rates are estimated mid-year populations for 1930 and 1931, respectively, derived from the 1930 census. The 98 cities reporting cases have an estimated aggregate population of more than 33,000,000. The 91 cities reporting deaths have more than 31,500,000 estimated population.

## Summary of weekly reports from cities, September 6 to October 10, 1931.—Annual rates per 100,000 population compared with rates for the corresponding period of 1930 i

## DIPHTHERIA CASE RATES

		D11 11 1	поми	CASI	- MAII	30 				
					Week	ended-	-			
	Sept. 12, 1931	Sept. 13, 1930	Sept. 19, 1931	Sept. 20, 1930	Sept. 26, 1931	Sept. 27, 1930	Oct. 3, 1931	Oct. 4, 1930	Oct. 10, 1931	Oct. 11, 1930
98 cities	35	44	34	46	45	56	2 56	60	3 65	70
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central Mountain Pacific	34	60 26 63 56 68 24 45 35	36 22 29 42 73 53 57 17 29	34 36 74 48 46 24 63 26 12	38 25 42 71 67 128 101 52 41	56 31 74 58 100 30 136 62 26	50 25 44 88 150 140 103 78 43	53 40 79 60 68 102 104 9 51	72 40 4 54 99 132 221 6 75 7 36 47	58 40 91 68 110 96 59 44 81
		MEA	SLES (	CASE I	RATES		_			
98 cities	14	16	22	16	15	18	3 18	19	1 28	22
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central West South Central Mountain Pacific 98 cities	29 8 13 11 6 6 10 35 45	41 19 9 15 6 6 3 35 16	31 18 17 13 14 0 17 122 53	19 16 14 19 22 0 0 44 18	31 9 16 4 8 0 3 44 51 SE RA	46 13 13 29 10 66 10 26 16	24 12 12 10 2 29 17 35 82	36 12 5 70 22 0 7 70 22	137 15 4 13 2 6 0 6 4 7 54 106	34 15 11 77 12 18 0 115 20
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central Mountain Pacific	106 30 64 36 55 64 41 61 39	56 26 84 35 56 36 24 79 63	87 43 62 59 71 81 47 87 55	77 45 10 45 44 36 52 70 67	53 45 62 65 67 93 34 122 71	87 32 117 77 62 114 52 97 76	132 51 62 95 59 70 37 96	80 46 106 72 76 66 35 115 73	144 76 4 113 86 142 233 4 57 7 135 67	116 51 135 93 126 161 35 291 75
		SMAL	LPOX	CASE	RATES					
98 cities	1	3	1	4	0	3	10	1	*1	2
New England Middle Atlantie East North Central West North Central South Atlantie East South Central West South Central Mountain Pacific	2 0 2 6 0 6 0	0 0 2 27 0 0 0 0 8	0 0 1 0 0 0 0 0	0 9 9 21 0 0 0 4	0 0 6 0 0 0	0 0 2 14 0 0 3 0 16	0 0 0 4 2 0 0 0 0 0	0 0 1 0 2 0 3 0	0 40 2 4 0 60 70	0 0 2 6 0 0 3 0

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, 1931 and 1930, respectively.

² Waterloo, Iowa, and Spokane, Wash., not included.

³ South Bend, Ind., Shreveport, La., and Boise, Idaho, not included.

⁵ South Bend, Ind., not included.

⁵ Waterloo, Iowa, not included.

⁵ Shreveport, La., not included.

⁵ Shreveport, La., not included.

⁵ Boise, Idahe, pet included.

⁵ Bookana, Wash., not included.

Summary of weekly reports from cities, September 6 to October 10, 1931.—Annual rates per 100,000 population compared with rates for the corresponding period of 1930—Continued

## TYPHOID FEVER CASE RATES

		11101	DFEV		SE KA					
					Week	ended—				
	Sept. 12, 1931	Sept. 13, 1930	Sept. 19, 1931	Sept. 20, 1930	Sept. 26, 1931	Sept. 27, 1930	Oct. 3, 1931	Oct. 4, 1930	Oct. 10, 1931	Oct. 11, 1930
98 cities	23	26	42	22	21	17	2 21	20	³ 20	20
New England Middle Atlantic Bast North Central West North Central South Atlantic Bast South Central West South Central Mountain Pacific	13 10 13 79	22 24 17 21 70 48 52 62 4	22 16 91 38 26 47 44 26 35	12 15 11 29 68 48 63 0	5 16 15 36 43 47 47 26 10	12 13 9 15 56 18 35 44 12	17 21 9 * 14 65 52 24 26 * 14	12 14 9 14 42 60 52 115 16	19 15 4 6 11 53 64. 6 82 7 36	22 14 9 10 70 42 49 44
	I	NFLUI	ENZA	DEATI	IRAT	ES				
91 cities	4	3	3	3	2	2	3	2	* 3	5
New England Middle Atlantic East North Central West North Central Bouth Atlantic East South Central West South Central Mountain Pacific	2 4 3 9 2 0 17 0 2	0 4 3 0 2 19 0 0	2 3 3 6 4 0 0 0	2 2 2 0 0 26 7 18	0 1 3 0 4 6 0	2 2 2 0 4 13 4 0 5	2 3 2 12 0 6 0 0	0 2 1 0 2 13 11 18 2	2 4 4 2 0 0 6 7 7 18 5	5 6 3 6 2 0 11 9
	<b>P</b>	NEUM	ONIA	DEAT	H RAT	ES				·
91 cities	55	54	60	57	52	57	53	58	3 55	71
New England Middle Atlantic East North Central South Atlantic East South Central West South Central West South Central Mountain.	58 65 36 44 63 82 73 70 46	68 63 43 45 58 26 57 123 25	50 66 45 44 57 57 57 93 78 84	56 65 42 75 56 71 46 115 40	67 55 38 44 51 32 52 70 86	39 72 47 36 56 65 71 53 40	58 60 35 59 61 63 66 61 53	44 59 53 69 52 104 71 132 40	77 56 4 36 56 79 69 4 77 7 36 55	70 74 55 87 86 123 110 97 40

Waterloo, Iowa, and Spokane, Wash., not included.
 South Bend, Ind., Shreveport, La., and Boise, Idaho, not included.
 South Bend, Ind., not included.
 Waterloo, Iowa, not included.
 Shreveport, La., not included.
 Poise, Idaho, not included.
 Spokane, Wash., not included.

## FOREIGN AND INSULAR

## CANADA

Provinces—Communicable diseases—Weeks ended September 26 and October 3, 1931.—The Department of Pensions and National Health of Canada reports cases of certain communicable diseases for the weeks ended September 26 and October 3, 1931, as follows:

Province	Cerebro- spinal fever	Dysen- tery	Influ- enza	Poliomy- elitis	Smallpox	Typhoid fever
Week ended Sept. 28						<b></b>
Prince Edward Island <sup>1</sup> Nova Scotia  New Brunswick						<u>i</u>
Quebec. Ontario. Manitoba.				105 14	5	23 36 5
Saskatchewan		22		1 1	1 12	14 1 4
Total	. 1	24	1	121	18	86
Prince Edward Island 1				<u>-</u>		
New BrunswickQuebecOntario	1			148 6 2	2	5 28 25
Mantoba Saskatchewan Alberta British Columbia	i	1		1 2	6	9 1 6
Total	2	1		161	8	76

<sup>1</sup> No case of any disease included in the table was reported during the week.

Quebec Province—Communicable diseases—Week ended October 3, 1931.—The Bureau of Health of the Province of Quebec, Canada, reports cases of certain communicable diseases for the week ended October 3, 1931, as follows:

Disease	Cases	Disease	Cases
Chicken pox	23 39 2 5 28 2	Poliomyelitis Puerperal fever Scarlet fever Tuberculosis Typhoid fever Whooping cough	148 3 53 46 26 30

## CHINA

Shansi Province—Bubonic plague epidemic—October 17, 1931.— Information received under date of October 17, 1931, stated that there was an epidemic of bubonic plague in the districts of Linhsien, Hsinghsien, and Paoteh, in western Shansi Province, and that it was gradually moving eastward and had already reached Kolan and Lanhsi. At Hsinghsien, where the outbreak was the severest, more than 2,000 deaths were reported.

## VIRGIN ISLANDS

Communicable diseases—September, 1931.—During the month of September, 1931, cases of certain communicable diseases were reported in the Virgin Islands as follows:

St.	Thomas and St. John:	
	Gonorrhea	1
	Tetanus	1
	Tuberculosis.	1
St.	Croix:	
	Gonorrhea	1

From medical officers of the Public Health Service, American consuls, International Office of Public Hygiene, Pan American Sanitary Bureau, health section of the League of Meticas, and other sources. The reports contained in the following tables must not be considered as complete or final as regards either the list of countries included or the figures for which reports are given.

CHOLERA

	•															1
•									Wee	Week ended-	Ť					
Place	Apr. 5- May 2, 1931	May 3-	May31- June 27, 1931	June 28-July 25, 1931		Augu	August, 1931			Seg	September, 1931	r, 1931		October, 1931	FF, 193	
					1	æ	15	22	क्ष		12	61	8		92	11
															$\vdash$	
		24	1 2	1 7			140			- <u>8</u> 6	84	88	80	80		
Tentain C Todia. D D Bombay. D	11, 462 5, 767	1 13, 604 7, 270	18,001 10,337	22, 074 12, 093 83	7, 357 4, 029	5, 848 5, 584 18	9,817 5,411	9, 492 5, 252 11	2	10	10	10	-	-		
	310 176 19	285 149 12	292	16 237 155	<b>4</b> 45	-130	-8	8 21 8	<del>0</del> 54-1	1000	6 E 6 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-86-	85 e	-82 -82	++++	1111
Madras	<b>48</b> 8	52 17	0.4	4 14	H		-69	က		-	-	-				
		1	4-61-	- 4-					7			+		+++	+++	1111
Indis (French): Chandernagor	<b>e</b> ∞44	4450	. თოოო	<b>∞</b> −∞∞		44-1	8877		69-			e-10				

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

CHOLERA—Continued

	2	C minimum cases, 17, cessure, 1, process	, cases	,		-										
									₩	Week ended-	Į,					
Place	Apr. 5- May 2, 1931	May 3- 30, 1931	May31- June 27, 1931	June 28-July 25, 1931		Aug	August, 1931	11		Se	ptemb	September, 1931		Octob	October, 1981	_
					-	<b>60</b>	15	8	8	9	13	19	8		92	11
India (Portuguese)			1	69							$\Box$			H	H	li
Indo-China (see also table below):				7	٩	-			İ	<del> </del>	$^{+}$	<del> </del>	+	╁	+	i
	2.	ľ	-	100	4			-	Ħ	Ħ	<del> </del>	<del>     </del>		<u>                                     </u>	H	
Saigon and Cholon	7 K S	75	75:	771		1			Ħ	T	-				<u> -</u>	ìi
Iraq: Abulkhasib	7	9	7	_					*	<del> </del>	<del> </del>	<del> </del>	-	Π	<u>-</u> -	1
A C								ſ	900	1	i	<del>   </del>			<u>                                     </u>	
Amara								7 -	35	88	70	<u>;</u>	1	Ī		n -
Amara Province								1	9	3=	.8	. E	32	2	12	<b>'</b> 53
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<sup>1</sup> From May 3 to 25, 1931, 152 eases of cholers with 75 deaths were reported in Rafsanjan and vicinity, Karman district, Persia.

<sup>1</sup> Figures for cholers in the Philippine Islands are subject to correction.

<sup>2</sup> Reports incomplete.

## PLAGUE

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Gharbieh	Girga  Kena  Minieh  Port Said  Tanta  Hawaii Territory:  Hawaii Territory:  Hawaii Island- Hallimalie Plague-infected rats  Kula District  Makawao—Plague-infected rats  Rail District	Bombay  Plague-infected rats  Burma  Calcutta  Madras Presidency  Moulmein  Rangoon  Plague-infected rats  Indo-China (see also table below): Fnompenh  Maudhan  Maudhan  Maudhan  Maugascar (see also table below): Tamatave  Morocco  Nigeria: Lagos  Fingue-irfected rats  On July 27, 1831, 1,230 cases of plague were ro  new cases in Kaitung and Fengulen. On October

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

PLAGUE-Continued

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<sup>1</sup>Reports incomplete.

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## TYPHUS FEVER-Continued

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

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## YELLOW FEVER

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