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ACUTE RESPIRATORY DISEASE IN UNIVERSITY OF MICHIGAN STUDENTS, 1917-1931

Incidence of Cases Attended by University Physicians among Students at the University Health Service

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Student health services often have an unusual opportunity to determine facts relative to the phenomena of health and disease. Studies on acute respiratory conditions are typical of such opportunities, and the need for accurate data on the problem of colds is widely appreciated. The Hagerstown studies (1) show respiratory conditions to be responsible for more than half of all illness reported in a typical community, and in the University of Michigan student clinic they are responsible for over 25 per cent of all illnesses treated.

This study concerns the incidence of respiratory conditions as recorded in the student clinic at the University of Michigan. This clinic, which is free to all students, offers a high quality of medical service readily available for ambulatory, room, and hospital patients. Clinical diagnoses are an uncertain index of disease incidence, but these data would at least indicate the frequency with which intelligent young people seek easily obtainable medical service for respiratory illness.

The cases of minor respiratory illness treated at the health service clinic or by the university physicians in the students' quarters varied during the 14-year period 1917–1931 from 710 per 1,000 students enrolled in 1923–24 to 1,198 in 1930–31, with an average of 926 cases per 1,000 for the whole period. These rates are on the basis of a whole 12-month year, the computation being made from both the regular and the summer session rates. They represent the frequency with which service was obtained from the university physicians for any of the following diagnoses: Rhinitis, pharyngitis, naso-pharyngitis, tracheitis, tonsillitis, bronchitis, influenza, sinusitis, la grippe, laryngitis, pleurisy, and pneumonia.

The average annual rate of 926 respiratory conditions treated per 1,000 students entitled to the service may be compared with an annual rate of 657 cases per 1,000 persons of all ages as reported in bimonthly canvasses of families in the Hagerstown study (2) and of 493 per 1,000

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persons 15-24 years of age in the same study. However, only 34 per cent of the respiratory cases in the Hagerstown study were attended by a physician, whereas all of the 926 cases per 1,000 in this study are attended cases, since no data are available on the cases that did not ask for treatment. The medical service was free, which was not true in Hagerstown. The rate of 926 clinic cases per 1,000 represents nearly twice the rate as reported for approximately the same age group (15-24 years) in bimonthly canvasses of families in Hagerstown (1).

Studies by the Public Health Service (3)(4) among students in 10 universities and colleges reporting at semimonthly intervals upon their own respiratory attacks, whether or not they were attended by a physician, indicated an average incidence for the 12-month period ending May 30, 1925, of 2,947 cases per 1,000 students, with a variation in the rates of 2,365 to 3,336 in the different schools. Only 13 per cent of such cases were attended by a physician.

A very intensive study conducted by the department of epidemiology of the Johns Hopkins School of Hygiene indicated an even higher case incidence for the minor respiratory conditions. (See also reference 5.)

The average annual rate of 926 minor respiratory cases attended by the university physicians for each 1,000 students enrolled can, therefore, be considered as including a considerably larger proportion of colds than would ordinarily come to the attention of a physician. Apart from the question of completeness, the data presented in this article should give a reasonably accurate picture of the chronology of respiratory diseases among the students of the university.

For the three school years 1928–1931, 13,155 student years were studied with relation to the number of students who were treated for respiratory illness during each school year. This involved counting many of the same persons for more than one year. The frequency with which a student was treated for one or more cases during a year was also determined by groups. The count for the same person in successive years has not been determined. The average number treated annually in the population studied was 45 per cent.

Table 1 shows the distribution of those treated according to the number of cases for which they were treated. Twenty-five per cent of those treated had two cases and 18 per cent had three or more cases, the other 57 per cent being treated at the clinic for only one respiratory case.

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Table 1.—Distribution of 5,955 students treated by the university physicians for minor respiratory conditions according to the number of cases for which treated during the school year, University of Michigan student health service

Number of minor respiratory cases	Number of stu- dents treated	Per cent
Total	1 5, 955	100
OneTwo	3, 406 1, 461	57 25
Three Four	677 257	11
Five or more	154	3

^{1 45} per cent of average population studied for school year.

CHRONOLOGY

Table 2 shows rates by months for the 14-year period from 1917 to 1931. Rates are shown for both the regular and summer session months and are computed on an annual basis. Adjustments have also been made for holiday periods, such as Christmas and Easter, to make the rates for the months in which holidays fall comparable with other months. Figure 1 shows graphically these monthly rates.

This figure indicates the usual large seasonal variation in the incidence of the respiratory diseases. Apart from this seasonal variation, certain months in which respiratory diseases were epidemic stand out with much higher rates than the expected seasonal incidence. These months correspond in general with those that have been found in mortality data to be the peaks of influenza epidemics (6), except that there is little or no peak corresponding to the great epidemic of the fall of 1918. There is a very large peak corresponding to the epidemic of the spring of 1918 and there are peaks for 1922, 1923, 1926, and 1928 corresponding to the definite epidemics that occurred in those years.

Table 3 summarizes the rates in yearly intervals, with an adjustment not only for vacation periods falling within the regular session but also for the summer vacation, to put the rates on a 12-month basis instead of a school-year basis. Table 4 shows the number of students enrolled during each of the school years (regular session) from 1917 to 1931, the number of cases of respiratory illness attended by university physicians in the group, and the rates per 1,000 students entitled to the service. Rates for each sex are given without any adjustment for vacation periods and on the basis of the regular session only. For both sexes combined, rates are given without any adjustment and also with adjustment for vacation periods within the regular session but without adjustment to the full 12-month year such as was done for Table 3.

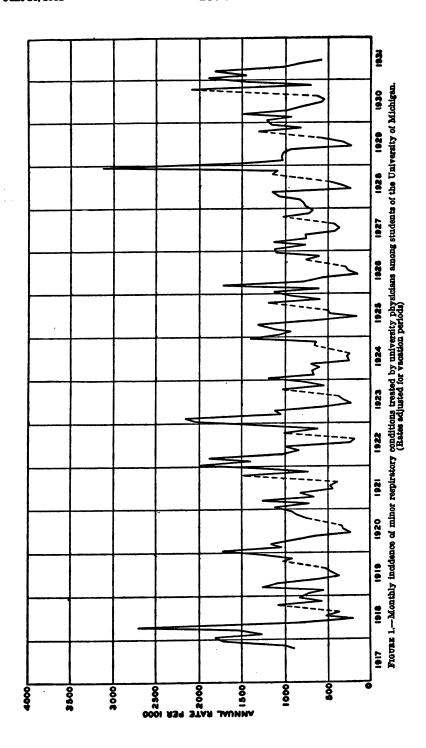


TABLE 2.—Minor respiratory cases treated by the university physicians per 1,000 student population by months, 1917–1931, University of Michigan student health service

[Rates adjusted for vacation periods]

	Monthly rate (annual basis)													
Month	1917- 18	1918- 19	1919- 20	1920- 21	1921- 22	1922- 23	1923- 24	1924- 25	1925- 26	1926- 27	1927- 28	1928- 29	1929- 30	1930- 31
JulyAugust		533 370	451 539	329 332	480 395		323 395	269 251	487 523	275 295	385 441		325 581	54 64
October November December	890 1,006 1,718	1, 091 580 835	1, 250	876 934	739 1, 167	629 1, 196	551 783		956	007 1, 111	1, 032 728 679	1, 097 3, 640	840 1, 175	70 1, 44
January February March	1, 805 1, 274 1, 535	728 561 1, 276	1, 728 1, 043 1, 178	719 1, 273	1, 871	2, 178 1, 048	688		1,777	1, 146	782 797 838 1, 086	1,034 1,054	1, 492	1, 89 1, 46 1, 81 1, 03
April May June	2, 699 830 206	1, 095 634 378	875 664 238	677 834 439	1, 026 848 394		605 695 263	1, 314 709 157		766 778 423	1, 168	948 220	991 805 595	1, 03 84 59

Table 3.—Annual case rates from minor respiratory diseases treated by university physicians among students of Michigan University (estimates for whole 12 months) 1

Year July 1 to June 30	Rate per 1,000 whole- year basis	Year July 1 to June 30	Rate per 1,000 whole- year basis
1917-18. 1918-19. 1919-20. 1920-21.	1, 105 757 900 752	1925-26 1926-27 1927-28 1928-29	871 772 838 1, 147
1921-21 1921-22 1922-23 1922-24	1, 120 995 710 798	1923-79 1929-30 1930-31 A verage annual rate.	1, 000 1, 198

¹ July and August estimates are at summer session rates, and September at the average of August and October rates. Regular session populations used in calculations.

Table 4.—Minor respiratory cases treated by the university physicians per 1,000 student population, by 10-month school years, 1917–1931, University of Michigan student health service

			Number	r of cases	Case rates per 1,000					
	Population		tre		Both	sexes	Male	Female Unadjusted		
School year	Male Female	, Male	Female	Adjusted for vaca- tion periods within the regular session	Unad- justed	Unad- justed				
917-18	3, 434 3, 506 5, 474 6, 051 6, 085 6, 247 5, 939 5, 802 6, 631 6, 502 6, 351 6, 625 6, 388	1, 145 1, 169 1, 824 2, 017 2, 028 2, 083 2, 309 2, 487 2, 148 2, 210 2, 285 2, 115 2, 208 2, 245	3, 220 1, 708 3, 828 3, 732 5, 390 4, 786 3, 172 4, 155 4, 308 3, 756 4, 019 5, 648 4, 895 6, 042	795 745 979 939 1, 281 1, 359 972 1, 104 1, 226 1, 337 1, 623 1, 457 1, 782	976 619 753 650 972 909 591 716 725 678 714 1, 010 852 1, 074	876 524 658 578 822 737 497 618 629 564 609 858 719	937 487 699 616 885 763 534 716 668 566 618 889 738	699 633 536 466 633 655 400 399 514 556 581 767		

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Figure 2 shows graphically the rates given in Table 4 for the regular session and in addition several years prior to 1917 that are not shown in the table. The rates for these years prior to 1917 are rather low, which may be due in part to the newness of the medical service and may indicate less use of the service rather than lower respiratory rates among the students. With the exception of higher rates in years when influenza occurred, there is little evidence of trend in these rates since the school year 1917–18. However, the last three

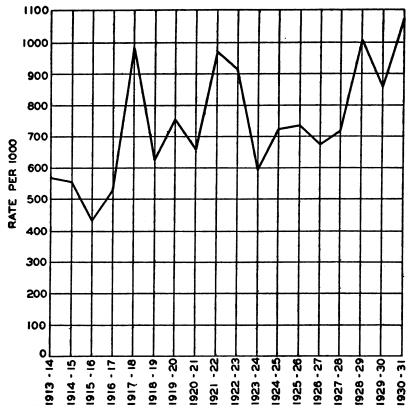


FIGURE 2.—Minor respiratory cases treated each year by the university physicians during regular sessions, per 1,000 student population, University of Michigan, 1913–1931. (Rates adjusted for vacation periods within the session)

years have shown rates considerably above the average, but two of these three years have been years of considerable influenza prevalence. As already noted, the school year 1918-19 does not show up as a year with high respiratory rates in these data.

Figure 3 shows similar rates for each year for the summer sessions only. There is little similarity between the variations in the summer session and the winter session rates. Indeed, there is no particular reason to expect similarity, since the summer-session student body

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is made up of a very different group from that of the regular session; and, moreover, the occurrence of an influenza epidemic during the winter would have little or no bearing upon what might be expected during the summer session. Since these rates are for minor respiratory diseases, influenza and grippe must be an important factor in the size of the rate and its variation from year to year.

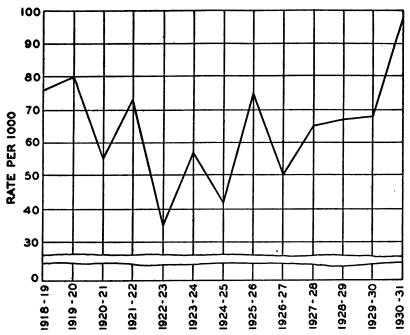


Figure 3.—Minor respiratory cases treated each year by the university physicians during summer sessions, per 1,000 student population, University of Michigan, 1918-1931. (Rates adjusted for vacation periods within the session)

Table 5 shows for each month of the year the average of the rates for the 14-year period 1917-1931. The rates for both sexes combined have been adjusted for vacation periods, but the rates for males and females are without any such adjustment. Figure 4 shows these rates graphically. According to these data there is a peak in October, followed by a lower rate in November. This fall peak has been noted by other investigators also. The drop in February may be accounted for in part by the intersemester disturbance in student attendance

and might result in fewer cases coming to the attention of the university physicians.

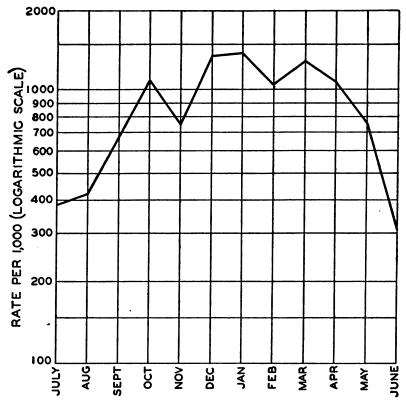


FIGURE 4.—Seasonal variation in minor respiratory conditions treated by university physicians, average rates (annual basis) for each month, based on the 14-year period, 1917-1931, University of Michigan. (Rates adjusted for vacation periods within the month. August and October are connected by a straight line; no data for September)

TABLE 5.—Average rates (annual basis) for each month during the 14-year period 1917-1931 for minor respiratory cases treated by the university physicians, University of Michigan student health service

Month	Both sexes (adjusted for vacation periods within the regular session)	Male (un- adjusted)	Female (unadjusted)	Per cent male rate is in ex- cess of female
July	385	399	362	10
August	418	814	202	55
October	1, 110	1, 151	990	16
	752	786	711	10
	1, 327	851	750	12
January February March	1, 385 1, 029 1, 294	1, 316 1, 017 1, 357	1, 033 764 1, 117	18 27 88 22
April May	1, 079	835	601	40
	779	821	668	23
	300	207	191	8

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SEX DIFFERENCES IN INCIDENCE RATES

Figure 5 shows the average rates for each month for the two sexes separately, the averages being based on the 14-year period 1917-1931. It will be noted that for every month the averages are slightly less for females than for males. Figure 6 shows regular session rates for males and females by years. It will be noted that here also the rates for females are consistently lower than the rates for males, the only exception being the rate for the school year 1918-19.

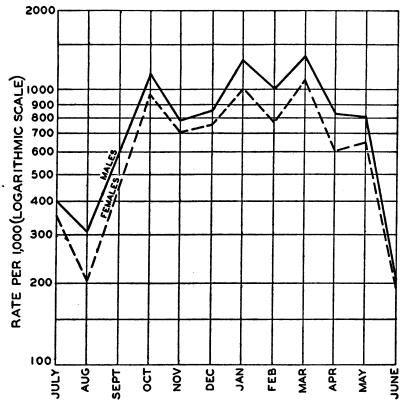


FIGURE 5.—Sex differences in case rates for minor respiratory conditions treated by university physicians, average rates (annual basis) for males and females for each month, based on the 14-year period, 1917-1931, University of Michigan. (August and October are connected by straight lines; no data for September)

Rates were computed for males and females for each school month, including the summer session, for each of the 14 years from 1917 to 1931. These rates are not shown in any table, but it may be stated that the male rates were rather consistently higher for the different months of these years. Out of 152 months throughout the period (no July and August data for 1917–18 were available), there were only 28 months in which the rate for cases treated by the university physicians among females was greater than the rate among males.

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The consistently lower rates for women students can be explained by us upon no other basis than that acute respiratory conditions are somewhat less frequent or less troublesome in females. On the history blanks filled out by 10,229 entering students, in six groups, since 1919, frequent colds were listed by a slightly greater percentage

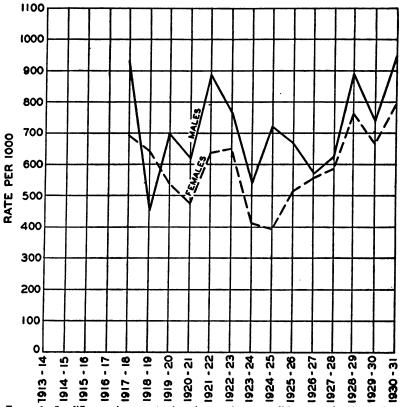


FIGURE 6.—Sex differences in case rates for minor respiratory conditions treated each year by the university physicians during regular sessions, University of Michigan, 1917-1931

of males than females in each group. The averages are, females 18 per cent and males 22 per cent.

Table 6.—Dispensary calls for respiratory infections and all causes, by sex, in selected groups for three years, University of Michigan student medical service

		Student school			Call rates per 100					
School year Classes	years		A	ll cause	18	Respiratory infections				
	Women	Men	Women	Men	Male excess	Women	Men	Male		
1928-29 1929-30 1930-31	Freshman Freshmen and sopho- mores. Freshmen, sophomores, and juniors.	329 667 875	998 2, 012 2, 358	530 508 700	535 595 785	Per cent 1 17	70 62 85	81 76 104	Per cent 15 22 23	
Combined	Combined	1, 871	5, 368	600	666	10	72	90	24	

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Table 6 shows comparative rates of clinic attendance for respiratory infections and all causes of sickness. While the male rate for all causes exceeds the female rate, the amount of excess is less than one-half the excess for respiratory infections. This sex difference in these infections here is contrary to that reported in survey studies (1), (7), (8), (9), (10). In a study of absences from work of one day or longer among employees of an electric company in Boston during a 10-year period, the respiratory rate for females was 70 per cent greater than for males (11).

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- (6) Mortality from influenza and pneumonia, 1910–1929. Pub. Health Rep., vol. 45, No. 39, Sept. 26, 1930, pp. 2277–2328.
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- (9) Collins: Influenza incidence by age and sex. Pub. Health Rep., vol. 46, Aug. 14, 1931, pp. 1909–1937.
- (10) Sex differences in the incidence of certain diseases at different ages. Pub. Health Rep., vol. 43, No. 21, May 25, 1928, pp. 1259-76.
- (11) A 10-year record of absences from work on account of sickness and accidents. Pub. Health Rep., vol. 42, No. 8, Feb. 25, 1927, pp. 529-550.

DEATH RATES IN A GROUP OF INSURED PERSONS RATES FOR PRINCIPAL CAUSES OF DEATH FOR APRIL, 1932

The accompanying table is taken from the Statistical Bulletin for May, 1932, issued by the Metropolitan Life Insurance Co., and presents the mortality record of many million insured persons of the industrial insurance department of the company for April, 1932, as compared with that for the preceding month and for April, 1931. It also presents a comparison of the cumulative death rates for January-April for the two years. The annual general death rate for this group in the past few years has averaged about 72 per cent of the death rate for the registration area of the United States.

The Bulletin states:

The lowest mortality rate ever recorded for the month of April among the industrial policyholders of the company in the United States and Canada was

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that registered this year. The figure is 9.6 deaths per 1,000 living, which may be compared with 9.8 in April of last year, and with 10.4 in March of this year. Health conditions during the latter part of April were particularly favorable.

The year-to-date death rate for the January-April period (9.4 per 1,000) is lower than ever previously registered for the like part of any year. Furthermore, the mortality is below that of any other year in all sections of the United States and in Canada.

The more detailed aspects of the health record of the winter and early spring of 1932 are as follows: There have been sharp declines in the mortality from such important diseases as influenza, tuberculosis, and pneumonia. From these three diseases alone there have been 2,938 fewer deaths in this insured group in the first four months of 1932 than would have occurred if the much higher death rates of the like part of 1931 had prevailed. There have been, also, slight reductions this year in deaths from cerebral hemorrhage, organic heart disease, chronic nephritis, accidents, and automobile fatalities, as well as from several diseases of lesser numerical importance. The prevailing low cumulative rate of 97.1 per cent per 100,000 for pneumonia has never before been even closely approached during the like period of any year. In 1931, for example, it was 126.5; in 1930, 117.2; and in 1929, 154.6. The influenza death rate is down 31 per cent and that for tuberculosis 10 per cent in a single year. The reductions for heart disease and automobile fatalities, although small, are of unusual interest. For, if they are still in evidence at the end of 1932, they will mark breaks in an almost continuously rising death rate for these causes of death over a long series of years.

The cancer situation, as in 1931, is the black spot in the year's health record. For many years, it is true, there has been a rising tendency in the cancer mortality rate. Up to 1931, however, the increase from year to year had been relatively small—even though persistent; but last year the rise amounted to 7.4 per cent; and this year, to date, there has been a further rise of 6.8 per cent.

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

	Annual rate per 100,000 lives exposed ¹								
Cause of death	April,	March,	April,	Cumulative January-April					
	1932	1932	1931	1932	1931				
Total, all causes	957.8	1, 043. 5	977.3	943. 3	1, 009. 2				
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 entertits Bright's disease (chronic nephritis) Puerperal state Stuicides Homieides. Other external causes (excluding suicides and homicides) Traumatism by automobiles. All other causes	2. 4 4. 7 4. 5 37. 1 78. 7 68. 9 90. 1 25. 2 66. 3 97. 6 10. 3 8. 5 73. 5	.9 3.6 4.9 4.6 4.1 43.6 76.9 69.0 93.2 27.6 188.7 123.7 13.3 7.5 78.9 11.3 9.4 6.3	.9 5.9 4.2 2.8 3.0 33.1 80.6 70.2 82.9 23.0 68.9 168.8 111.2 13.4 9.4 9.4 13.3 11.3 6.0	1. 2 2. 7 4. 0 5. 3 30. 6 74. 4 66. 1 90. 0 24. 7 68. 2 169. 9 97. 1 11. 4 8. 2 74. 3 11. 1 10. 3 6. 3	1.1 4.3 4.1 1.3.8 5.2 82.7 73.5 84.3 24.2 68.4 172.4 13.9 10.2 74.9 9.6 6.5				

¹ All figures in this table include insured infants under one year of age. The rates for 1932 are subject to slight correction, since they are based on provisional estimates of lives exposed to risk.

COURT DECISION RELATING TO PUBLIC HEALTH

Powers of board of health held not subordinated to zoning resolutions.—
(New York Supreme Court, Appellate Division; People v. Department of Health of City of New York, 256 N. Y. S. 856; decided Apr. 29, 1932.) The following per curiam opinion of the appellate division of the New York Supreme Court deals with the validity of certain regulations of the New York City Health Department when considered in conjunction with zoning resolutions:

Order denying motion for a peremptory or alternative mandamus order unanimously affirmed, with costs.

The powers of the board of health under section 1172 of the Greater New York Charter (Laws 1901, c. 466), as amended by Laws 1904, c. 628, sec. 3, and under sections 19 and 325 of the Sanitary Code, are not subordinated to the zoning resolutions so as to forbid the adoption by the board of health of the regulation here attacked. The establishment of the zones by the board of estimate and apportionment does not mean that any part of an unrestricted district may be used for a poultry slaughterhouse, and it is not an unreasonable regulation to fix a suitable area of unrestricted property for the location of a site for such a business. We are of opinion that the regulation in question was validly enacted. People ex rel. Lieberman v. Vandecarr, 175 N. Y. 440, 67 N. E. 913, 108 Am. St. Rep. 781.

DEATHS DURING WEEK ENDED JUNE 4, 1932

Summary of information received by telegraph from industrial insurance companies for the week ended June 4, 1932, and corresponding week of 1931. (From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce)

·	Week ended June 4, 1932	Corresponding week, 1931
Policies in force	72, 901, 860	75, 158, 847
Number of death claims	11, 261	13, 200
Death claims per 1,000 policies in force, annual rate.	8. 1	9. 2
Death claims per 1,000 policies, first 22 weeks of		
year, annual rate	10. 3	10. 7

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Deaths 1 from all causes in certain large cities of the United States during the week ended June 4, 1932, infant mortality, annual death rate, and comparison with corresponding week of 1931. (From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce)

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

		1930 cen	sus]					
	We	ek ended	l June 4,	1932	Corres week	ponding , 1931	Death the first	rate ³ for 22 weeks
City	Total deaths	Death rate ¹	Deaths under 1 year	Infant mor- tality rate 3	Death rate ²	Deaths under 1 year	1932	1931
Total (85 cities)	7, 493	10.7	612	4 50	11.6	680	12.8	13. 2
Akron. Albany s. Atlanta c. White. Colored. Baltimore s s. White. Colored. Birmingham s. White. Colored. Birmingham s. White. Colored. Boston. Bridgeport. Buffalo. Cambridge. Coamden. Canton. Chicago s. Cincinnati. Cleveland. Columbus. Dallas s. White. Colored. Dayton. Denver. Des Meines Detreit. Duluth. El Paso. Erfe. Evansville. Fall River s s. Fint. Fort Wayne. Fort Worth s. White. Colored. Grand Rapids. Hartferd. Houston s. White. Colored. Hartferd. Houston s. White. Colored. Hartferd. Houston s. White. Colored. Lored. Kansas City, Kans. s. White. Colored. Kansas City, Kans. s. White. Colored. Lored.	46 26 68 32 23 36 194 46 48 48 48 200 23 36 120 30 136 159 169 159 67 7 49 35 14 41 99 24 266 20	9.1 10.7 10.4 12.5 8.9 12.4 11.5 8.1 11.4 11.4 11.4 11.4 11.5 10.6 11.1 11.4 11.5 11.5 11.5 11.5 11.5 11.5	12 4 2 2 2 2 4 4 10 8 2 2 1 1 2 2 9 0 5 0 4 5 4 10 6 8 3 3 0 1 7 3 8 6 1 5 3 2 0 6 1 3 3 0 2 2 9 7 2 7 7 0 7 2 2 2 0 10 3 3 0 2 2 2 1 1 2 1 6 3 8 2 1 1 2 1 1 2 1 6 3 8 2 1 1 2 1 1 2 1 6 3 8 2 1 1 2 1 1 2 1 6 3 8 2 1 1 1 2 1 1 1 2 1 1 1 2 1	12 41 41 41 41 41 41 41 41 41 41 41 41 41	11.6 7.7 18.2 14.3 10.7 14.3 12.9 12.0 13.3 12.8 13.3 12.8 13.5 13.0 1	1 2 2 3 4 4 4 2 2 2 1 1 0 4 2 2 2 3 3 1 5 3 3 4 1 1 7 1 3 3 9 6 6 8 6 2 6 6 6 2 1 1 4 3 2 1 1 3 1 1 0 0 0 0 0 3 1 1 1 1 4 2 2 3 6 6 6 3 3 1 0 1 0 1 1 1 1 4 2 2 3 6 6 6 3 3 1 0 1 0 1 1 1 1 4 2 2 3 6 6 6 3 3 1 0 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7.7 14.7 10.9 14.3 13.8 8 11.9 5 15.8 4 11.0 8 15.0 11.1 8 16.0 0 1 14.3 16.0 0 11.1 8 16.0 11.1 8 16.0 11.1 8 16.0 11.1 11.1 11.1 11.1 11.1 11.1 11.1	13.2 8.5 16.08 12.24 16.08 12.24 16.08 12.24 16.08 16.18 17.22 16.18
Miami * White Colored	23 11 12	10.6 6.5 24.8	2 1 1	56 39 101	7. 9 6. 6 12. 4	0	12 1 11 0 16 0	13. 2 12. 3 16. 6

See footnotes at end of table.

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Deaths 1 from all causes in certain large cities of the United States during the week ended June 4, 1932, infant mortality, annual death rate, and comparison with corresponding week of 1931. (From the Weekly Health Index, issued by the Bureau of the Census, Department of Commerce)—Continued.

	We	ek ended	i June 4,	1932		ponding , 1931	Death 1 the first	ate ¹ for 22 weeks
City	Total deaths	Death rate	Deaths under 1 year	Infant mor- tality rate 3	Death rate ?	Deaths under 1 year	1932	1931
Milwaukee	108	8.9	12	57	9. 2	8	9. 5	10.8
Minneapolis	90	9.8	9	59	12.8	13	11.0	11. 9
Nashville •	57	19.0	4	60	14.4	7	15.4	17. 8
White	33	15. 1	3	59	14.8	5	13.9	15. 3
Colored	24	29. 3	1	62	13. 4	2	19. 2	23. 4
New Bedford	24	11.1	3	86	14.8	3	12.7	13. 6
New Haven	35	11.2	2	40	6.7	0	13. 2	13. 0
New Orleans	124	13.7	13	74	17. 2 13. 0	21 12	15. 5 13. 2	18. 0 14. 7
White	79	12.3	9	78	27. 5		21. 1	26.3
Colored New York	45	17. 1 10. 4	121	65	10.5	112	21. 1 11. 7	20. 3 12. 7
Bronx Borough	1, 43 6 179	6.8	121	54 46	7.1	16	8.6	9. 2
Brooklyn Borough	511	10.0	47	52	9.2	48	10.9	11.7
Manhattan Borough	545	16.0	43	61	16. 4	37	17.9	19. 4
Oneans Borough	158	6.8	13	54	7.4	9	7.5	8.1
Queens Borough	43	13.4	2	39	17. 6	2	14.7	14.4
Newark, N. J.	79	9. 2	8	44	12.8	5	11.6	13. 0
Oakland	41	7. 2	ž	25	9.8	i	11.0	11. 1
Oklahoma City	34	8.6	6	82	9. 0	4	10.6	12. 2
Omaha	52	12.4	4	45	12.3	8	14. 1	14. 5
Paterson	32	12.0	8	54	14.3	1	13. 5	15. 2
Peoria	23	10.8	2	55	4.8	3	11.9	13. 1
Philadelphia	464	12. 3	28	43	12.3	41	13. 6	15. 2
Pittsburgh	146	11. 2	20	92	13. 5	20	14.1	16. 7
Portland, Oreg	64	10.8	4	51	11. 5	5	11.9	12.5
Providence	53	10.8	4	39	9.8	8	14.7	14. 5
Richmond	52	14.7	3	45	17.0	5	14.5	17. 2
White	20	7. 9	2	45	15. 5	3	12.0	14.7
_ Colored	32	31. 7	1	46	20.7	2	21. 1	23. 4 13. 3
Rochester	67	10.5	. 6	57	11.3	5	12.9	13. 3 16. 8
St. Louis	180	11. 3	15	54	14.6	6	14.5	11. 5
St. Paul	59	11.0	5	53	10.0	Q.	11. 1 11. 3	12.7
Salt Lake City	31	11. 2	6	94	6. 2 17. 6	1 18	14.4	16. 2
San Antonio San Diego	58 38	12.3 12.2	12 1	22	14.0	3	15.3	14.8
San Francisco	151	11.9	2	14	13.6	12	13. 2	13.8
Schenectady	111	6.0	ő	17	6.0	i l	11. 5	11. 4
Seattle	74	10.3	4	40	10. 9	5	12.3	12.5
Somerville	16	7.9	ō	ŏ	5. 9	3	9.9	10. 7
South Bend	19	8.9	Ŏi	ŏ	7. 2	1	8.0	8.9
Snokene	27	12.1	2	53	11. 2	2 3	12.4	12.8
Springfield, Mass	31	10.5	3	51	9.9	3	11.9	13. 5
Svracuse	46	11. 1	4	52	11.3	4 1	12.6	12.6
Tacoma	25	12.0	0	0	8.7	2	12.9	13. 5
Tampa (22	10.7	3	86	11.4	1	12.4	12.8
White	15	9. 2	1	35	10.1	0	11.8	11.7
Colored	7	16. 1	2	317	16.4	1	14.6	16.8
Toledo	72	12.5	4	43	16.0	4	12.4	13.0
Trenton	17	7. 2	0	0	15.6	2	16.9	18. 8 15. 8
Utica Washington, D. C.4	22	11. 2	.4	114	14.3 12.5	11	16. 7 17. 5	10. 8 17. 3
wasnington, D. U.	178	18.8	18	101 74	10.8	11	15.6	14.8
White	112	16. 4 25. 2	9	160	17.0	5	22.5	24.1
Colored	66 20	20. 2 10. 3	ŏ	100	6.2	2	9.9	10. 5
WaterburyWilmington, Del.	26	12.8	3	68	12.7	2	16.7	15.8
Worcester	34	8.9	ől	00	9.5	รื่	13. 8	14.2
Yonkers	13	4.8	ĭ	26	9.4	4	8.4	9. 6
Youngstown	26	7.8	î	16	7. 5	il	10.7	11.0

¹ Deaths of nonresidents are included. Stillbirths are excluded.

These rates represent annual rates per 1,000 population, as estimated for 1932 and 1931 by the arithmetical method.

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

Data for 81 cities.

<sup>Dash 107 Si Ciues.
Deaths for week ended Friday.
For the cities for which deaths are shown by color, the percentages of colored population in 1930 were as follows: Atlanta, 33; Baltimore, 18; Birmingham, 38; Dallas, 17; Fort Worth, 16; Houston, 27; Indianapolis, 12; Kansas City, Kans., 19; Knoxville, 16; Louisville, 15; Memphis, 38; Miami, 23; Nashville, 28; New Orleans, 29; Richmond, 29; Tampa, 21; and Washington, D. C., 27.
Population Apr. 1, 1930; decreased 1920 to 1930, no estimate made.</sup>

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 June 11, 1932, and June 13, 1931

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 11, 1932, and June 13, 1931

	Diph	theria	Influ	lenza	Ме	asles	Menin men	ococcus ngitis
Division and State	Week ended June 11, 1932	Week ended June 13, 1931						
New England States:								
Maine	4	7	1	1	91	24	0	1
New Hampshire	2	l		_	51	14	ŏ	
Vermont	_				185	54	ŏ	8
Massachusetts 1	37	36	3		1, 044	586	3	,
Rhode Island	8	l 👸	"		83	127	ŏ	1 1
Connecticut	4	ľ	1	2	255	241	ŏ	
Middle Atlantic States:	•			-		241	•	
New York	69	105	3.0	37	2,469	2 441	7	_
New Jersey	32	42	2	7	972	860	í	9
Pennsylvania	52	67	•	•	1, 015	2, 405	8	
East North Central States:	32	67			1, 010	2, 100	0	- 6
Ohio.	23	45	14		2, 327	1. 474		
Indiana	15	18	13	28 2	181	380	5	1
Illinois							2	
Michigan	75 14	105 28	9	11	861	1,556		14
Wisconsin				-4	8, 101	298	3	•
West North Central States:	16	4	5	13	1, 484	1, 062	ī	3
Minnesota			ا م				_	
T	11	12	1	1	114	127	1	,6
Iowa	5	. 3				26	0	0
Missouri	. 22	17	2		57	162	8	1
North Dakota	3	1			27	15	1	1
South Dakota	13	8		1	6	12	0	0
Nebraska	5	5		2	4	8	Ŷ	1
Kansas	5	14		1	251	116	1	Ó
South Atlantic States:				- 1	ı	ı	ı	
Delaware	1	2			2	65	0	0
Maryland 3	11	11	5	7	35	477	1	Ò
District of Columbia	8	13	1		18	83 i	11	Ŏ
West Virginia	2	11	16	7	335	164	1 1 2 2 2	i
North Carolina	11	14	5	1	614	542	2	4
South Carolina 1	6	10	243	176	173	164	0	Ĭ
Georgia ¹	10	3	33	13	68	70	2	õ
Florida 1	5	6 1	1		11	50	ōl	ŏ
last South Central States:	- 1		- 1			1	1	•
Kentucky	4	7	18		27	90	0	1
Tennessee	11	5	27	9	- 5	60	il	ŏ
Alahama i	12	Š	45	12	16	40	õ	ŏ
Mississippi West South Central States:	3	ĭ				~	ŏ	ĭ
West South Central States:	١,	- 1					٠,	
AFKADS8S	1	1	j	4	į	25	اه	0
Louisiana	23	11	4	2	8	8	ő	Ÿ
Oklahoma 4	10	12	7	17	118	22	ŏ	3

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 11, 1938, and June 13, 1931—Continued

	Diph	theria	Infl	16 1128	Me	asles	Meningococcus meningitis	
Division and State	Week ended June 11, 1932	Week ended June 18, 1931	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931
Mountain States: Montana. Idaho. Wyoming. Colerado. New Mexico. Arixona. Utah ' Pacific States:	1 1 14 4 8	5 4	1	1	110 8 70 60 25 7	12 1 13 96 47 23	0 0 0 1 0 1	0 1 0 0 0
Washington OregonCalifornia	16 2 61	5 2 60	9 42	12 32	254 151 452	74 47 730	1 1 2	0 0 1
Total	648	729	537	378	17, 156	14, 989	52	74
	Polion	yelitis	Scarle	t fever	Sma	llpox	Typho	ld fever
Division and State	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931
New England States: Maine. New Hamphsire. Vermont. Massachusetts ¹ . Rhode Island. Connecticut. Middle Atlantic States: New York. New Jersey. Pennsylvania. East North Central States: Ohio. Indiana. Illinois. Michigan. Wisconstin.	0 0 0 0 0 0 0 1 2 0 3 3 8	0 0 0 2 0 0 1 1 0 1 1 8	35 7 8 352 53 77 922 209 472 331 62 255 356 76	22 1 4 195 31 26 610 219 430 352 99 401 384 99	0 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 8 0 0 0 0 20 101 60 80	1 0 0 4 0 0 0 16 2 10 11 10 16 8	7 0 0 0 2 2 0 2 1 1 7 0 0 6 5 5 3
West North Central States: Minnesota	0 0 0 0 1	2 0 1 2 1 0 0	53 33 21 6 3 9	67 42 68 12 4 32 25	5 22 1 3 0 8 6	5 61 37 7 2 20 64	1 1 1 0 0 0 0 5	0 2 5 0 1 0 4
Maryland District of Columbia West Virginia. North Carolina South Carolina Georgia Florida East South Central States: Kentucky	0 1 0 2 0 0 0	0 0 0 3 1 0	59 12 11 29 0 6 1	28 10 26 25 1 28 1	0 0 1 5 0 0	0 0 3 1 2 0 0	18 2 5 17 30 21 5	0 6 0 8 18 24 23 1
Tennessee	0	1 1 0	16 9 3	12 13 7	5	4 3 17	40 18 36	5 12 20 13
Arkansas	1 0 0 6	1 1 0	1 6 15 17	3 24 12 45	2 4 15 22	40 17 60 135	7 21 8 10	17 10 11

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 11, 1932, and June 13, 1931—Continued

	Poliomyelitis		Scarlet fever		Smallpox		Typhoid fever	
Division and State	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 13, 1931	Week ended June 11, 1932	Week ended June 18, 1931	Week ended June 11, 1932	Week ended June 13, 1931
Mountain States: Montana Idaho. Wyoming Colorado. New Mexico. Arizona Utah': Pacific States: Washington Oregon. California	0 0 0 0 0 0 0	1 0 0 2 0 0 0 1 0 5	8 0 4 25 2 5 7 11 3 141	13 1 11 14 7 2 3 20 13 96	7 0 0 3 0 0 0 14 2 12	7 1 0 0 0 0 1 26 12 17	3 0 0 2 1 3 2 13 3 10	2 0 0 1 1 7 1 6 2 18
Total	28	38	3, 800	3,575	192	794	389	285

Typhus fever, 11 cases: 1 case in Massachusetts, 2 cases in South Carolina, 4 cases in Georgia, 1 case in Florida, and 3 cases in Alabama.
 New York City only.
 Week ended Friday.
 Figures for 1932 are exclusive of Oklahoma City and Tulsa, and for 1931 are exclusive of Tulsa only.

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- myelitis	Scarlet fever	Small- pox	Ty- phoid fever
April, 1932 Delaware		16			4			82	0	1
Connecticut Delaware Florida Wyoming	2 1	15 2 24 8	35 15 1	8	1, 125 5 33 139	2	0	461 50 6 23	0 0 21 2	4 2 83 1

April, 1932	Cases	Mumps:	Cases
Delaware:		Connecticut	_ 285
Chicken pox	. 20	Delaware	. 32
Mumps	. 48	Florida	. 32
Rabies in animals	. 4	Wyoming	. 57
Whooping cough	. 60	Ophthalmia neonatorum:	
		Connecticut	. 1
May, 1932		Paratyphoid fever:	
Chicken pox:		Connecticut	. 4
Connecticut	. 441	Rabies in animals:	
Delaware	. 6	Connecticut	. 13
Florida	. 63	Delaware	. 1
W yoming	. 7	Rocky Mountain spotted or tick fever:	
Conjunctivitis:		Wyoming	. 35
Connecticut	. 30	Septic sore throat:	
Wyoming	. 1	Connecticut	. 12
Dysentery:		Wyoming	. 1
Florida	. 3	Tetanus:	
German measles:		Connecticut	. 1
Connecticut	. 21		

Trachoma:	~	I were a second a second a	_
	Cases	Whooping cough:	Cases
Connecticut	. 1	Connecticut	. 409
Tularaemia:		Delaware	
Wyeming	. 1	Florida	. 46
Typhus fever:		Wyoming	. 1
Florida	. 8		
Undulant fever:			
Connecticut	1		

Cases of Certain Communicable Diseases Reported for the Month of April, 1932, by State Health Officers

State	Chicken pox	Diph- theria	Measles	Mumps	Scarlet fever	Small- pox	Tuber- cu- losis	Typhoid and para- typhoid fever	Whoop- ing cough
Maine	122	4	1, 130	76	167	0	65	2	128
New Hampshire Vermont	25	4	l		149	! 0		5	
Massachusetts	1,002	131	400 3, 106	427 1,390	55 2, 249	14	1 14 512	1 10	82 899
Rhode Island Connecticut	31 396	23 26	602 636	221 325	272 431	0	68 135	8	63 517
New York	2, 459	461	9, 335	1, 753	6, 845	32	1,576	32	2, 559
New Jersey	1,088	118	2, 731	1, 132	1, 341	j o	475	6	1,266
Pennsylvania	2,758	338	8, 418	3, 121	3, 523	0	803	42	3, 136
OhioIndiana	1, 198 378	182 131	8, 911 414	879 694	1,674 719	94 48	716 246	35	2,771
Illinois	1, 150	305	3, 942	357	1,692	31	1, 208	6 27	545 1, 538
Michigan Wisconsin	955 1, 230	76 42	7, 363 7, 910	1, 483 1, 020	1, 821 390	27 9	488 100	23 14	1,541 1,505
Minnesota	190	47	171	2,020	611	6	247	5	186
Iowa Missouri	143	31	13	114	234	176	63	8	105
North Dakota	317 37	:42 14	367 181	280 25	1 229 73	23	1 255 10	*6 4	604
South Dakota	20	19	36	26	13	7	17	8	22 138
Nebraska Kansas	165 570	22 36	11 1, 979	216 537	126 233	48 22	21 120	1	102
				1	- 1			7	433
Delaware Maryland	20 577	16 52	165	48 646	82 543	0	17 228	1 22	60 832
Dist. of Columbia	145	33	42		113	Ō	118	1	111
Virginia West Virginia	553 104	86 51	434 1, 758	14	240 119	3 8	119 126	28 24	1,610
North Carolina	505	69	2, 505		256	11	120	18	457 1, 601
South Carolina	167	108	695	314	35	2	182	36	181
GeorgiaFlorida	219 112	47 37	173 38	191 18	46 19	1	196 63	72 36	145 43
Kentucky					İ				_
Tennessee	159	47	819	166	182	94	201	35	554
Alabama Mississippi	221 594	77 29	111 79	199 248	71 36	81 104	438 110	39 18	304 763
Arkansas	70	12	10	54	19	46		17	53
Louisiana	22	101	253	6 !	45	17	1 125	60	56
Oklahoma 4 Texas	78	59 158	157	53	81 166	55	79	25 24	122
1									
MontanaIdaho	116 154	7 5	486	34 68	55 26	20	43 11	8	37
Wyoming	5		59	59	26	4	1	6	4
Colorado New Mexico	463 67	29 55	664 262	602 69	152 50	5	102 41	5 9	212
Arizona	128	12	9	11	40	2	95	5	87 64
Utah 1 Nevada	23		50		3	i	13		
1					- 1	- 1	- 1	!	40
Washington	269 181	21	1, 608 1, 434	76 157	143 81	106 72	143	6	155
California	3, 722	322	2, 449	883	688	50	71 1, 035	13 40	181 1, 637
		<u>_</u>					,		_,

Pulmonary.
 Exclusive of Kansas City, St. Joseph, and St. Louis.
 Reports received weekly.
 Exclusive of Okiahoma City and Tulsa.

1390 June 24, 1932

Case Rates per 100,000 Population (Annual Basis) for the Month of April, 1932

State	Chicken pox	Diph- theria	Measles	Mumps	Scarlet fever	Small- pox	Tuber- cu- losis	Typhoid and para- typhoid fever	Whoop- ing cough
Maine New Hampshire	186	6 10	1, 719	116	254 388	0	99	3	195
Vermont	85	14	1,856	1.447	186	47	1 47	13	278
Massachusetts	284	37	881	394	638	0	145	3	255
Rhode Island Connecticut	54 295	40 19	1, 052 474	386 242	475 321	0 1	119 101	3 6	110 386
New York	233	44	885	166	649	3	149	3	243
New Jersey Pennsylvania	319 345	35 42	802 1, 054	332 391	394 441	0	1 3 9 1 0 1	2 5	372 393
Ohio	216	33	1,608	159	302	17	129	6	500
Indiana	141	49	154	258	268	18	92	2	203
Illinois	180 233	48 19	618 1,800	56 363	265 445	5 7	190 119	4	241 877
Wisconsin	504	17	3, 240	418	160	4	41	6 6	617
MinnesotaIowa	90 70	22 15	81 6	56	288 115	3 87	117 31	2	88 52
Missouri	106	2 14	122	93	2 76	01	185	22	201
North Dakota	66	25	323	45	130	41	18	7	39
Bouth Dakota	35	33	63	45	23	12	30	14	241
Nebraska Kansas	145 367	19 23	10 1, 2 75	190 346	111 150	42 14	18 77	5	90 279
Delaware	101	81	20	243	415	0	86	.5	304
Maryland Dist. of Columbia	426 358	38 81	122 104	476	401 279	0	168 291	16	614 274
Virginia	277	43	217		120	2	60	14	807
West Virginia	72	35	1, 217	10	82	6	87	17	316
North Carolina	190	26	941		96	4		7	601
South Carolina Georgia	117 92	75 20	486 73	219 80	24 19	1	127	25 30	126 61
Florida	89	29	30	14	15	ī	82 50	29	84 84
Kentucky 1				-					
TennesseeAlabama	73 160	22 35	377 50	76 90	84 32	43 37	92 199	16 18	255 138
Mississippi	356	17	47	149	22	62	66	ii	45 7
Arkansas	46	8	7	35	12	30		11	35
Louisiana	13	58	144	3	26	10	1 71	34	32
Oklahoma 4 Texas	46	34 32	92	31	47 34	32	46	15 5	71
Montana	263	16	1, 103	77	125	45	98	18	84
Idaho	420	14	8	186	71	14	30	3 -	
Wyoming Colorado	27 539	34	313 773	313 701	138 177	21	119	32	21 247
New Mexico	190	156	742	195	142	3	116	25	246
A rizona	349	33	25	30	109	5	259	14	174
Utah I Nevada	302		656		39	13	1 39	13	525
Washington	206	16	1, 234	58	110	81	110	5	119
Oregon	226	11	1, 793	196	101	90	89	16	226
California	761	66	501	181	141	10	212	8	335

ADMISSIONS TO HOSPITALS FOR THE INSANE, DECEMBER, 1930

Reports for the month of December, 1930, showing new admissions to hospitals for the care and treatment of the insane, were received by the Public Health Service from 117 hospitals, located in 37 States. the District of Columbia, and the Territory of Hawaii. These hospitals had 179,276 patients on December 31, 1930, 95,341 males and 83,935 females, the ratio being 114 males per 100 females.

Pulmonary.

Exclusive of Kansas City, St. Joseph, and St. Louis.

Reports received weekly.

Exclusive of Oklahoma City and Tulsa.

The following table gives the number of new admissions for the month of December, 1930, by psychoses:

Psychoses	Male	Female	Total
Psychoses 1. Traumatic psychoses. 2. Senile psychoses. 3. Psychoses with cerebral arteriosclerosis. 4. General paralysis. 5. Psychoses with cerebral syphilis. 6. Psychoses with Huntington's chorea. 7. Psychoses with brain tumor. 8. Psychoses with brain tumor. 9. Alcoholic psychoses. 10. Psychoses due to drugs and other exogenous toxins. 11. Psychoses with pellagra. 12. Psychoses with other somatic diseases. 13. Manic-depressive psychoses. 14. Involution melancholia.	20 164 192 222 25 3 1 22 153 4 4 32 197	Female 4 91 110 159 15 3 0 15 12 5 4 25 221 49	Total 24 255 302 281 40 6 1 37 165 9 8 57 418
15. Dementia præcox (schizophrenia) 16. Paranola and paranold conditions. 17. Epileptic psychoses. 18. Psychoneuroses and neuroses. 19. Psychoses with psychopathic personality. 20. Psychoses with mental deficiency. 21. Undiagnosed psychoses. 22. Without psychosis. Total.	324 33 40 23 18 61	280 32 34 44 9 36 101 47	604 65 74 67 27 97 204 202

During the month of December, 1930, there were 3,003 new admissions to the hospitals, 60.2 per cent of these new admissions being males and 39.8 per cent females, the ratio being 151 males per 100 females. Four hundred and six of the new admissions were reported as being undiagnosed or "without psychosis." There were 2,597 new admissions for whom provisional diagnoses were made. Of these 2,597 patients, cases of dementia præcox constituted 23.3 per cent.; manic-depressive psychoses, 16.1 per cent; psychoses with cerebral arteriosclerosis, 11.6 per cent; general paralysis, 10.8 per cent; and senile psychoses, 9.8 per cent. These five classes accounted for 1,860 patients, or 71.6 per cent of the new admissions for whom diagnoses were made.

The following table shows the number of patients in the hospitals and on parole on December 30, 1930:

	Male	Female	Total
Patients on books last day of month: In hospitals	86, 702 8, 639	76, 253 7, 682	162, 955 16, 321
Total	95, 341	83, 935	179, 276

Of the 179,276 patients, 8,639 males and 7,682 females were on parole or otherwise absent but still on the books at the end of the month, 9.06 per cent of the males, 9.15 per cent of the females, and 9.10 per cent of the total number of patients.

June 24, 1982 1392

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

The 97 cities reporting cases used in the following table are situated in all parts of the country and have an estimated aggregate population of more than 33,980,000. The estimated population of the 90 cities reporting deaths is more than 32,420,000. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Weeks ended June 4, 1932, and June 6, 1931

	1932	1931	Estimated expectancy
Cases reported			
Diphtheria:		007	
46 States	619 295	837 426	006
97 cities	240	920	000
45 States	16,946	18, 588	1
97 cities	6. 871	7, 027	
Meningococcus meningitis:	7,512	.,	
46 States	72	92	l
97 cities	30	40	
Poliomyelitis: 46 States	22	26	
Scarlet fever:			
46 States	4, 425	4, 207	
97 cities	1,965	1, 983	1, 179
Smallpox:			İ
46 States	279	878	
97 cities.	35	93	52
Typhoid fever:		040	
46 States	215	242	
97 cities	44	40	48
Deaths reported	I		
Influence and programments, 00 cities	505	204	
Influenza and pneumonia: 90 cities	505	564	
DITTERT FOR CIPIES	ויי	0	

1393 June 24, 1982

City reports for week ended June 4, 1932

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 non-epidemic 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 1923 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			
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:	2	0	0		0	2	4	1
Concord Manchester	0	0	0		0	2 0	8	9
Nashua	ŏ	ŏ	ŏ		Ŏ	Ŏ	2	Õ
Vermont: Barre	0	0	0		0	0	1	
Burlington	ŏ	ŏ	ŏ		ŏ	ŏ	5	Ĭ
Massachusetts: Boston	45	25	13		1	153	81	16
Fall River	Ö	2 2	8		Ō	42	0	ő
Springfield	17	2 3	1		0	198 30	13	0 1 5
Worcester Rhode Island:	11	3			۰	30		1
Pawtucket	.0	1	0		0	0	0	0 5
Providence Connecticut:	19	4	1			-	,	1
Bridgeport	2	4	0		0	28	0	3
Hartford New Haven	2 22	3	0		0	6 2	24	4 3
MIDDLE ATLANTIC	-	Ĭ				_		
New York:								
Buffalo	23	7	3		0 5	50 547	0 193	20 109
New York Rochester	276 6	216 3	80 3	10	ő	9	12	109
Syracuse	5	Ŏ	Ō		0	147	1	•
New Jersey: Camden	3	5	2		0	0	4	2 4
Newark	47	12	4	2	Ŏ	80	201	4
Trenton Pennsylvania:	11	2	0		1	0	0	2
Philadelphia	75	52	7	6	1	11	95	32
Pittsburgh	81 9	15	4 2		0	73 17	20	17 1
Reading	3		î			2	ŏ	
EAST NORTH CENTRAL								
Ohio:	1	1		1				
Cincinnati Cleveland	98	21	0 5	3	1 1	0 436	0 65	4 17
Columbus	3	3	1		0	28	1	2 8
Toledo	46	3	0		. 0	73	0	8
Indiana: Fort Wayne	2	1	3		0	0	0	1
Indianapolis	72	2	0		0	15	134	8
South Bend Terre Haute	4 2	1 0	0		0	37	0	• 1
Illinois:	- 1	- 1	j		- 1	- 1	1	_
Chicago	132	80	29	·i	1 0	449	14	41 2
Springfield Michigan:	*	1		- 1	- 1	- 1	1	_
Detroit	79	39	15		2	1, 263 57	34 14	20 0
Flint Grand Rapids	37	1 1	1 0	8	81	36	8	ŏ
OTHER PROPERTY.	٠,		- 1				- •	-

		Diph	theria	Influ	36015A			
Division, State, and city	Chicken pox, cases reported	Cases, estimated expect- ancy	Cases reported	Cases reported	Deaths reported	Measies, cases re- ported	Mumps, cases re- ported	Preu- monia, deaths reported
EAST NORTH CEN- TRAL—continued								
Wisconsin:								
Kenosha Madison	0 8	0 1	0		0	230 0	0	0
Milwaukee Racine	43 15	11	4		0	637 85	12 16	4
Superior	3	ō	ŏ		ŏ	ĩ	3	0
West north central								
Minnesota: Duluth			0		0	o	1	
Minneapolis	6 25	9	4		0	13	32	1
St. PaulIowa:	27	6	0		0	. 11	24	•
Des Moines Sioux City	0 14	1 0	2 1			9	0	
Waterloo	6	ŏ	Ō			ŏ	Ŏ	
Kansas City	22	2	Ō		1	25	19	3
St. Joseph St. Louis	0 27	30	1 16		0	8	8	1 8
North Dakota: Fargo	16	0	0		0	11	0	1
Grand Forks South Dakota:	ĩ	ŏ	Ŏ			15	ŏ	
Aberdeen	2	0	0			5	0	
Nebraska: Omaha	7	2	7		o	7	2	8
Kansas: Topeka	43		o		اه	9	٥	2
Wichita	Õ	i	ĭ		ĭ	7	2	Ž
SOUTH ATLANTIC		ł				1		-
Delaware, Wilming-	_ [_				_	_	_
ton	0	1	0		0	0	1	0
Baltimore Cumberland	109	16 0	1 1	2	8	4 6	113	15
Frederick	õ	ŏ	ō		ŏ	7	ŏ	0
District of Columbia, Washington	38	9	6		0	20		6
Virginia: Lynchburg	6	0	o		o	2	اه	1
Norfolk Richmond	4	0	1		8	11 0	8	8
Rosnoke	š	Ö	3		ŏ	ŏ	ŏ	ő
West Virginia: Charleston	1	0	0		0	1	0	3
Huntington	8 -		1 0		0	15 41	0	0
Wheeling North Carolina: Raleigh	3	0	0			1	0	_
Wilmington	4	0	0 [.	2	1	Ō	0	Ĭ
Winston-Salem South Carolina:	1	0	0	1	0	34	2	_
Charleston Columbia	0 5	0	8	17	1 2	28	8	7
GreenvilleGeorgia:	0	0	0 }-		0	19	1	b
Atlanta	4	1	2	5	8	0	0	11
Brunswick Savannah	ő	8	8	20	8	24	8	0
Florida: Miami	1	1	3		o	2	0	1
Tampa	1	0	0		0	0	Ō	1
BAST SOUTH CENTRAL		- 1			-			
Kentucky:		ا]	1	1		l	
Covington Lexington	0				0	0	i	i
Tennessee: Memphis	2	0	2		0	20	0	4
Nash ville	Ōl	٥١	ō L		2	29	ŏl	5

		Diph	theria	Infi	uenza			
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
EAST SOUTH CENTRAL—continued								
Alabama: Birmingham Mobile Montgomery	4 1 0	1 0 0	1 0 2	8	0	0	0 0 1	8 2
WEST SOUTH CENTRAL				İ	1			
Arkansas: Fort Smith Little Rock Louisiana:	0	0	0		0	0	0	0
New Orleans Shreveport Oklahoma:	0	7 0	12 0	8	2 0	6	0 10	6 7
Muskogee Oklahoma City Texas:	6	1	0 1	10	0	1 0	0	0
Dallas	7 5 0 0	2 1 0 3	3 2 0 3		0 0 1	1 0 9	1 0 0 1 0	3 0 0 4 5
MOUNTAIN		•			Ĭ	Ĭ	J	
Montana: Billings Great Falls Helena Missoula Idabo:	0 0 5 2	0 0 0	0 0 0		0 0 0	0 3 1 0	0 0 0 0	0 2 0 0
Boise	0	0	0		0	9	0	1
Denver Pueblo New Mexico:	51 5	6	3 0		0	94 1	67 0	9
Albuquerque	2	0	0		0	11	0	0
Phoenix	1		0		0	0	0	0
Salt Lake City Nevada:	71	2	0		0	2	3	2
Reno	0	0	0		0	1	0	1
PACIFIC Washington: Seattle	21	2	8			43	6	
Spokane Tacoma	15 5	i	0		0	16 68	0	Ö
Oregon: Portland California:	5	4	3	` 1	0	94	8	2
Los Angeles Sacramento San Francisco	141 32 51	26 8 11	35 2 1	25 2	1 0 0	21 3 123	17 1 17	9 5 9

	Scarle	t fever		Smallp)X	Tuber-	Т	phoid f	ever	W hoop	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
NEW ENGLAND											
Maine:			l		1						
Portland New Hampshire:	2	5	0	0	0	1	0	0	0	7	18
Concord	0	2	o	o	o	3	Q	Ō	0	0	21
Manchester Nashau Vermont:	0	0	0	0	8	0	0	0	G	0	27
Barre	i 1	0	0	0	0	0	0	0	0	3	8 7
Burlington Massachusetts:		0	0	0	0	0	0	0	0	1	7
Boston Fall River	65	130 6	0	0	0	8 2	1 0	2	0	81 0	200 22
Springfield	8	10	Ö	Ō	0	1	Ō	0	O I	8	30
Worcester Rhode Island:	10	27	0	0	0	0	0	0	0	10	34
Pawtucket	2	0	0	0	0	o o	0	0	0	0	15
Providence Connecticut	10	24	0	0	0	4	0	0	0	3	53
Bridgeport	7	2	o l	0	o l	1	o l	o l	0	4	30
Hartford New Haven	3 3	7 15	0	0	0	0	0	0	0	0	33 35
MIDDLE ATLANTIC								l			
New York:			_		_ [l	_			İ	
Buffalo New York	22 222	53 574	0	0	0	88	10	1 3	8	27 157	133 1, 436
Rochester	11	39	Ō	Ó	0	2	O I	Ŏ	O I	2	64
Syracuse New Jersey:	9	8	0	0	0	0	0	0	0	28	46
Camden	.5	25	0	0	0	1	0	0	o l	0	35
Newark Trenton	23	27 13	0	0	0	5	0	8	8	31 0	82 17
Pennsylvania: Philadelphia	86	139	0	0	اه	21	2	1	0		
Pittshurgh	30	62	Ō	0	Ŏ j	4	1	1	1	84 27	464 146
Reading Scranton	4	6	0	0	0	2	0	0	0	10	27
BAST NORTH CENTRAL											
Ohio:		- 1	- 1	1	1	- 1	- 1		i	- 1	
Cincinnati	18	28	2	0	0	9	1	1	0	6	109
Cleveland Columbus	38	89 5	0	Ŏ	0	8	0	2	0	80	159
Toledo	12	8	ĭ	ŏ	ŏ	5	ŏ	ő	ŏ	37	67 72
ndiana: Fort Wayne	4	o	2	4	0	0	0	0	0	0	19
Indianapolis	13	4	8	0	0	2	0	0	0	41 -	
South Bend Terre Haute	3 2	2 0	0	8	0	1 0	0	0	8	8	19 9
llinois:	110	190	1	- 1		- 1	2	0	1	- 1	
Chicago	110	190	2	0	0	46	1	3	ō	92	619 18
dichigan: Detroit	110	218	1	0	اه	27	1	2	٥	143	266
Flint	11	4	2	0	0	1	0	0	0	21	22 23
Grand Rapids.	10	3	0	0	0	0	0	0	0	9	23
Kenosha	2 8	1	ç	o l	0	1	o l	o l	0	.5	13
Madison Milwaukee	28	1 24	0	0 -		12	0	ŏ		30 85	103
Racine	28 3 3	24 0	0	0	0	0	Ŏ	0	ŏ	0	11
Superior	3	١	0	0	0	0	0	0	ا	4	4
WEST NORTH CENTRAL											
Iinnesota: Duluth		.					ا			ا	~
Minneapolis	27	30	0 1 0	3 0	8	0 4 3	0	0 0	0	28	20 90 - 59
St. Paul	16	16	0 [ÓΙ	٥١	3	ŏ	ÓΙ	٥l	45	- 59

	Scarle	t fever		Smallp	ox	Tuber	T3	phoid i	lever	W hoop-	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
WEST NORTH CEN- TRAL—contd.											
Iowa:	_	_	_	_							
Des Moines Sioux City	5 2	4 2	2 0	1 8			0	0		9	24
Waterloo	2	2	Ŏ	Ŏ			1	Ŏ		2	
Missouri: Kansas City	10	7	o	0	0	4	0	0	o	10	95
St. Joseph	2	0	Ó	Ó	0	1	0	0	0	1	19
St. Louis North Dakota:	55	12	2	0	0	5	1	0	0	22	180
Fargo	0	0	0	0	0	0	0	0	0	1	13
Grand Forks South Dakota:	0	0	0	0			0	0		0	
Aberdeen	1	0	0	0			0	0		3	
Nebraska: Omaha	4	1	5	9	0	1	0	0	0	0	52
Kansas:	1		l i								
Topeka Wichita	2 2	0	0 2	0	0	0 1	0	0	0	0 5	15 28
SOUTH ATLANTIC											
Delaware:	3			0	0	2	0	0	0	1	
Wilmington Maryland:	3	6	0			2					26
Baltimore	83	33	0	0	0	18	2	3	0	80	194
Cumberland Frederick	0	0	0	0	0	0	ŏ	0	0	0	8 2
District of Colum-		-		1	-	-					_
bia: Washington	18	14	0	o	0	22	1	0	0	17	178
Virginia:	0		l	اہ	0	o	o	0	0	22	
Lynchburg Norfolk	ĭ	0	0	8	Ò	2	Ŏ	Ō	Ŏ	3	4 33
Richmond	8	2	0	8	0	1	0	0	0	28 2	40
Roanoke West Virginia:	١	1	1							_	14
West Virginia: Charleston	0	1	0	8	0	0	0	0	0	1 0	11
Huntingten	i	ō	0	ŏ	ŏ	ĭ	0	ŏ	ŏ	š	13
North Carolina: Raleigh	0	o	0	0	0	2	o	0	0	3	11
Wilmington	ŏ	ŏ	ŏ	0	Ó	0	0	ŌΙ	0	2	11 11
Winston-Salem	0	11	0	0	0	1	1	0	0	16	16
South Carolina: Charleston	0	1	0	0	0	7	0	2	1	o l	32
Columbia Greenville	8	0	0	0	0	1 0	1 0	0	0	0 2	41
Georgia:	- 1	- 1	- 1	1	- 1	- 1		- 1	- 1	_ [
Atlanta Brunswick	4	3	8	0	0	6	1 1	1	0	3 0	86 2
Savannah	ŏ	ŏ	ŏ	ŏ	ď	ĭ	î	i	ĭ	4	31
Florida: Miami	0	اه	o	o	0	4	1	اه	o	3	92
Tampa	ŏ	ŏ	ŏ	ŏ	ŏ	3	ő	ŏ	ŏ	ŏ	23 20
BAST SOUTH CENTRAL											
Kentucky: Covington	1		0				0			. <u></u>	
Lexington		0		0	0	1		0	0	0	11
Tennessee: Memphis	5	1	0	2	0	10	3	4	1	24	96
Nashville	2	ô	ĭ	õ	ŏ	2	ž	ő	ō	6	57
Alabama: Birmingham	اه	o	2	اه	اه	2	1	اه	0	1	43
Mobile Montgomery	ŏ	0	ő	3	ŏ	ō	1 0	1	ĭ	ô l	18

	Scarle	t fever		Smallpo)X	Tuber-	T	phoid i	ever	W hoop	
Division, State, and city	Cases, esti- mated expect- ancy	Cases re- ported	Cases, esti- mated expect- ancy	Cases re- ported	Deaths re- ported	culo- sis, deaths re- ported	Cases, esti- mated expect- ancy		Deaths re- ported	ing cough, cases re- ported	Deaths, all causes
WEST SOUTH CENTRAL											
Arkansas:											ļ
Fort Smith	0	0	0	0			1	0		2	
Little Rock Louisiana:	0	0	0	0	0	2	1	0	0	0	1 2
New Orleans	6	6	Q.	0	0	4	3	. 0	Q	12	124
Shreveport Oklahoma:	0	1	0	0	0	1	0	0	0	9	38
Muskogee	o	0	ol	1	0	o	0	0	0	0	
Oklahoma									1		
City Texas:	2	4	0	1	0	2	0	0	0	16	34
Dallas	8	2	2	2	0	o	1	2	1	5	49
Fort Worth	2	4 2 2	2 2 0	1	0	1	Õ	Ō	0	Ŏ	28
Galveston Houston	0	2	2	0	0	0	0	0	0 1	0	49 28 6 59 58
San Antonio	i	ő	ő	ŏ	ŏ	7	ĭ	ô	ō	ŏ	58
MOUNTAIN											
Montana:	1	1	ł	- 1		ı					
Billings	1	01	0	0	0	0	0	0	0	0	8
Great Falls	1	1	0	Ŏ.	0	0	Ŏ.	o l	0	Ó	11
Helena Missoula	0	8	0	0	0	8	0	8	0	0	6
ldaho:	- 1	1	1	1	- 1	- 1					ł
Boise	0	1	0	0	0	0	0	0	0	0	7
Colorado: Denver	10	9	ol	o	0	7	0	1	0	32	97
Pueblo	ĭ	ŏ	ŏ	ŏ	ŏ	ó l	ŏ	õ	ŏ	8	1 4
New Mexico:	ام	o	o	0	0	2	0	0	o	0	
Albuquerque Arizona:	0	١	١	١	١	- 4	١	٠	•	U	6
Phoenix	1	1	0	0	0	0	0	0	0	0	
Utah: Salt Lake City	2	1	0	0	o	2	0	0	o	6	31
Nevada:	- 1	- 1	٩١	١	١	- 1	١	١	١	•	31
Reno	0	0	0	9	0	0	0	0	0	0	3
PACIFIC			1	l		- 1		l			
Washington: Seattle	8	7	1	0	- 1	l	0	3	1	0	
Spokane	3	2	5	i i			ŏ	2		5	
Tacoma	3	õ	5	3	0	0	ŏ	ŏ	0	ĭ	25
Oregon: Portland	3	o	8	4	o	2	o	0	o	2	64
California:	"		٩١	-	1	-	- 1	١	ı	- 1	
Los Angeles	26	42	5	5	8	26	2	1 2	0	56 9	264
Sacramento San Francisco.	18	8	0	8	ŏ	9	ĭ	i	ö	15	16 151
			- 1				- -1		<u> </u>		
			C	ningo- occus ningitis	Leths cep	rgic en- halit is	Pe	llagra	Polion tile	nyelitis paraly:	(infan- sis)
Division, Stat	e. and c	itv	ļ	<u> </u>	-		 			П	
2112102, 0020	o, a	,	Cases	Death	s Cases	Deaths	Cases	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
Kam bro	T A N P		-		1						
NEW ENG	LAND		1	İ					ı		
fassachusetts:			1 -	. ا	ا ا	_	ا ما	_	1 .	ا ا	
Boston			- 1	1	0	0	0	0	0	0	0
Providence			1 0		1 1	0	ا ه	0	0	اما	

	60	ningo- ceus ingitis	Lethe	argic en- halitis	Pe	llagra	Polion tile	yelitis paraly	(infan - rsis)
Division, State, and city	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, esti- mated expect- ancy	Cases	Deaths
MIDDLE ATLANTIC							1		
								l	
New York: Buffalo	1	0	0	0	0	0	o	0	0
New York Pennsylvania:	5	6	1	0	0	0	1	1	· ·
Philadelphia	3	2	0	0	0	0	0	0	0
EAST NORTH CENTRAL									
Ohio:	١.	١.		_					
ClevelandIndiana:	2	1	0	0	1	l	ł		•
IndianapolisIllinois:	4	0	0	0	0	0	0	0	0
Chicago	4	1	0	0	0	0	0	0	0
Michigan: Detroit	1	2	3	0	0	θ	0	1	0
WEST NORTH CENTRAL									
Minnesota:									_
Minneapolis	0	1	0	0	0	0	0	0	U
St. Louis	4	3	1	0	0	0	0	0	0
SOUTH ATLANTIC 1									
Maryland:	0	0	0	0	0	0	0	1	
Baltimore Virginia:		l					ŀ	1	
Roanoke North Carolina:	0	0	0	0	0	1	0	0	0
Ralaigh	0	1 0	0	0	0	0 1	0	0	0
Wilmington Winston-Salem	ŏ	ŏ	ŏ	ŏ	ĭ	Ŏ	Ō	0	0
South Carolina: Charleston	.0	o	0	0	4	0	0	1	0
Columbia Georiga:	0	0	0	0	0	1	0	0	
Atlanta	2	0	0	0	0	0	0	0	0
Savannah	ľ	ľ	ľ			•	ľ		
EAST SOUTH CENTRAL		ĺ							
Kentucky: Lexington	١٥		0	0	1	0	0	0	0
Tennessee:	0	0	0	0	. 5	4	0	0	0
Memphis	ľ		ľ		•	-			_
WEST SOUTH CENTRAL	l		,						
Louisiana: New Orleans	1	1	0	0	2	2	0	0	0
Texas:	١٠	0	o	0	2	2	0	0	0
Houston	. 0	Ó	. 0	0	Ō	1	0	0	0
San Antonio	0	0	0	0	۰	U	·	1	•
MOUNTAIN Montana:									_
Great Falls	0	θ	0	0	0	0	0	0	1
Colorado: Denver	1	0	0	0	0	0	0	0	0
PACIFIC									
Washington: Seattle	1	0	0	0	0	0	0	0	0
California:	0	1	0	0	0	0	1	1	0
Los Angeles.	"		"						

¹ Typhus fever, 1 case and 1 death at Tampa, Fla.

June 24, 1932 1400

The following table gives the rates per 100,000 population for 98 cities for the 5-week period ended June 4, 1932, compared with those for a like period ended June 6, 1931. The population figures used in computing the rates are estimated mid-year populations for 1931 and 1932, respectively, derived from the 1930 census. The 98 cities reporting cases have an estimated aggregate population of more than 34,000,000. The 91 cities reporting deaths have more than 32,400,000 estimated population.

Summary of weekly reports from cities, May 1 to June 4, 1932—Annual rates per 100,000 population, compared with rates for the corresponding period of 1931 1

DIPHTHERIA CASE RATES

		D11 11 2	HERL	a CAB	o mai	E0				
					Week	ended .	•			
	May 7, 1932	May 9, 1931	May 14, 1932	May 16, 1931	May 21, 1932	May 23, 1931	May 28, 1932	May 30, 1931	June 4, 1932	June 6, 1931
98 cities	49	2 67	44	68	39	62	1 48	59	• 45	67
New England. Middle Atlantic. East North Central West North Central. South Atlantic. East South Central. West South Central. Mountain Pacific.	1 53	38 61 82 71 63 41 108 27 61	48 42 82 55 29 40 92 26 69	38 58 72 71 55 18 81 61 74	41 14 36 83 33 12 96 52 86	48 63 67 75 38 12 81 61 73	55 43 86 66 25 6 135 436 67	50 58 81 54 42 18 54 52 87	46 46 85 57 27 4 31 59 26 80	46 74 75 55 40 12 68 191 49
		MEA	sles (CASE	RATES	}				
98 cities	1, 226	1, 305	1, 157	1, 403	1, 137	1, 373	³1, 0 2 2	1, 115	* 826	1,096
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central West South Central West South Central Mountain Pacific 98 cities New England Middle Atlantic East North Central West North Central South Atlantic East South Central East South Central West South Central	1,002 478 3,317 243 429 0 40 810 883 8C 444 678 706 397 182 285 52	1,063 1,434 1,101 1,016 3,559 1,275 502 2,555 502 3,48 438 449 448 438 449 277 253 105	1, 196 487 2, 962 264 569 1, 069 763 1 FEV 437 647 709 385 195 243 17	1, 166 1, 486 1, 311 1, 397 3, 371 1, 245 531 555 ER CA 389 666 439 453 243 341 108	951 534 2,908 188 498 6 6 46 844 664 8E RA 384 663 570 354 188 208 17	1, 190 1, 479 1, 457 1, 098 2, 845 1, 245 271 618 467 TES 368 442 412 241 241 394 85	1, 376 557 2, 379 176 490 4 662 748 1 397 645 566 428 174 194 556	935 1, 188 1, 302 641 2, 093 1, 057 294 461 492 306 351 305 437 291 291 293 300 51	1, 134 413 1, 962 172 333 419 967 522 302 418 338 135 147 46 43	983 1, 102 1, 445 417 1, 476 1, 151 254 870 512 310 414 4355 422 258 108 103
Mountain Pacific	155 145	² 170 106	147 135	157 123	148 162	270 88	4 187 145	165 110	103 97	41 104 86
		SMAL	LPOX	CASE	RATES	3 ,				
98 cities	8	3 15	5	17	7	16	* 5	15	* 5	14
New England. Middle Atlantic. East North Central. West North Central. South Atlantic. East South Central West South Central Mountain. Pacific	0 0 13 0 64 7 138 25	0 3 6 78 8 41 64 19	0 0 4 21 0 17 7 17	0 1 23 75 6 12 41 17 25	0 3 23 0 85 20 61 17	0 4 15 67 6 41 47 9	0 0 23 2 37 0 40 21	0 1 11 88 24 6 37 26	0 0 2 28 0 481 7 0 17	0 0 16 42 18 18 41 26 33

Summary of weekly reports from cities, May 1 to June 4, 1932—Annual rates per 100,000 pooulation, compared with rates for the corresponding period of 1931 —Continued.

TYPHOID FEVER CASE RATES

		PHOL	<i>D</i>		LOE ILA	LIES				
					Week	ended-				
	May 7, 1932	May 9, 1931	May 14, 1932	May 16, 1931	May 21, 1932	May 23, 1931	May 28, 1932	May 80, 1931	May 4, 1932	June 6, 1931
96 cities	5	25	6	5	8	6	18	7	87	6
New England. Middle Atlantic. East North Central. West North Central. South Atlantic. East South Central. West South Central. West South Central. Mountain. Pacific.	6 3	5 5 2 2 8 6 7 1 8	12 4 2 9 8 0 16 9	5 2 6 12 18 7 0	10 5 4 9 25 6 10 9	2 5 5 10 12 18 7 0 8	0 4 8 2 18 431 3 49	2 8 2 4 22 12 7 17	5 3 5 2 16 431 10 9	25 5 1 10 20 18 10 17 4
	I	NFLUI	ENZA I	DEATI	RAT	ES				
91 cities	10	³ 12	9	8	7	7	3 5	7	* 5	6
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central Mountain Pacific	2 8 5 12 24 50 10 34 5	5 11 11 6 22 51 14 27 7	7 9 8 6 8 44 7 9 7	2 7 5 9 16 51 7 9	0 7 8 20 6 6 24 0	5 5 5 8 4 19 28 26 0	0 4 6 3 14 4 14 3 4 0 5	10 3 5 9 18 19 14 17 5	5 3 3 6 14 5 14 10 0 2	2 5 2 6 14 38 10 0 7
	P	NEUM	ONIA I	DEATI	H RAT	E8				
91 cities	108	* 117	103	102	98	95	1 86	101	• 77	86
New England Middle Atlantic East North Central West North Central South Atlantic East South Central West South Central West South Central Mountain Pacific	129 120 91 70 131 75 128 86 67	130 144 87 121 131 121 114 196 70	98 130 91 102 120 63 67 69 53	113 121 73 109 127 127 114 78 55	125 109 86 105 102 75 77 131 46	72 121 68 97 111 121 97 70 55	101 97 68 105 116 61 71 4 107 51	111 109 75 133 133 185 128 70 43	91 83 60 67 98 96 84 129 53	120 102 59 138 77 76 86 87 48

¹ The figures given in this table are rates per 100,000 population, annual basis, and not the number of eases reported. Populations used are estimated as of July 1, 1932, and 1931, respectively.

2 Billings, Mont., not included.

3 Covington, Ky., and Reno, not included.

4 Reno, Nev., not included.

5 Covington, Ky., not included.

FOREIGN AND INSULAR

CANADA

Provinces—Communicable diseases—Week ended May 28, 1932.— The Department of Pensions and National Health of Canada reports cases of certain communicable diseases for the week ended May 28, 1932, as follows:

	Cerebro- spinal fever	Influ- enza	Small- pox	Typhoid fever
Prince Edward Island 1				
New Brunswick Quebec	8		23	i 85
Ontario Manitobs Saskatchewan	1	*	6	·····i
Alberta British Columbia				8
Total	4	4	29	94

¹ No case of any disease included in the table was reported during the week.

Quebec Province—Communicable diseases—Week ended May 28, 1932.—The Bureau of Health of the Province of Quebec, Canada, reports cases of certain communicable diseases for the week ended May 28, 1932, as follows:

Disease	Cases	Disease	Cases
Cerebrospinal meningitis	3 77 26 11 1 115	Ophthalmia neonatorum Scarlet fever Tuberculosis Typhoid fever Whooping cough	1 81 48 85 28

CHINA 1

Meningitis.—According to recent information, cerebrospinal meningitis was reported in Hong Kong, Canton, and Macao, China, during the four weeks ended April 30, 1932, as follows:

	Cases	Deaths		Cases	Deaths
Hong Kong: Week ended Apr. 9, 1932 Week ended Apr. 16 Week ended Apr. 23 Week ended Apr. 30 Canton: Week ended Apr. 9, 1932 Week ended Apr. 16	19 32 27 20 9 30	10 12 15 12 3 7	Canton—Continued. Week ended Apr. 23, 1932 Week ended Apr. 30 Meca: Week ended Apr. 9, 1932 Week ended Apr. 16 Week ended Apr. 23 Week ended Apr. 30	18 12 44 14 16 10	3 3 94 26 12 15

¹ See also P. H. R., vol. 47, No. 17, Apr. 22, 1932, p. 970.

GREAT BRITAIN

Scotland—Vital statistics—Quarter ended March 31, 1932.—The Registrar General of Scotland has published the following statistics for the first quarter of the year 1932:

Population (provisional)	4, 880, 000	Deaths from-Continued.	
Births	23, 068	Heart disease	2, 653
Birth rate per 1,000 population	19.0	Influence	808
Deaths	19, 634	Lethargic encephalitis	22
Death rate per 1,000 population	16. 3	Measles	565
Marriages	7, 69L	Nephritis, acute	58
Deaths under 1 year	2, 573	Nephritis, chronic	384
Deaths under I year per 1,000 births	112	Pneumonia	366
Deaths from-		Pneumenia, lobar	513
Bronchitis	1, 299	Puerperal sepsis	63
Broncho-pneumonia	1, 224	Scarlet fever	85
Cerebrospinal fever	74	Syphilis	36
Diabetes	176	Tetanus	1
Diphtheria	128	Tuberculosis	1, 194
Dysentery	9	Typhoid fever	5
Erysipelas	56	Whooping cough	121

PANAMA CANAL ZONE

Communicable diseases—April, 1932.—During the month of April, 1932, certain communicable diseases, including imported cases, were reported in the Panama Canal Zone and terminal cities as follows:

Disease	Cases	Deaths	Disease	Cases	Deaths
Chicken pox. Diphtheris. Dysentery (amebic). Dysentery (bacillary) Leprosy Malaria. Meagles.	18 6 1 3 1 49 27	1 1 2	Meningitis, meningococcus. Munaps Pneumonia. Scarlet fever. Tuberculosis. Typhoid fever. Whooping cough.	1 1 1 8	19 19 28 1

119412*-32---3

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

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 Nations, and other surves. The propris confained in the following tables must not be considered as complete or final as regards either the list of countries included or the figures for the particular contrives for which profits are given included or the figure.

CHOLERA

[Cindicates cases; D, deaths; P, present]

	100	:							Week	Week ended-						1 1
Place	1 6- 1 6- Dec. 12,	Jan. 9,	Jan. 10- Feb. 6, 1932	Feb. 7- Mar. 5, 1932		March, 1932	2		Apr	April, 1932				May, 1932	832	
	•	ì			13	19	8	8	6	16	8	8	7	11	12	8
Ceylon: Colombo	800															
China: Canton Hankow		8	1	1	1			1						Tİ	-	-
		-									-		=	=-	œ~	3 -
Swatow C India. D Bombay C	14, 314	14, 889 7, 684	10,001	5, 826 2, 788	1,210	1, 164	1,148	1, 430	1, 519							
	e 4 4	-188	188 5.	1812	22	\$87	31	182	88	114 56	28.8	82	¥28	88	Ę₽.	<u>8</u> 8
Madras			-	0000		•	1	1								
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Pondicherry Territory Pondicherry Dadia (Portuguese)	600	-	######################################	8			111	HHHH								
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Saigon and Cholon.	64	-	7				7						es es
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On vessel: S. B. Angora at Rangoon from Calcutta		7			-		-	-					
											-	-	
1. A suspected case.		Fig.	Figures for cholera in the Philippine Islands are subject to correction.	nolera in t	be Philir	poine Is	ands are	subject t	o correct	ion.			
i	Ö				Fe	February, 1932	1932	×	March, 1932	22	7	April, 1932	8
Place	Der, 1931	l ber,	ber, 1931	ary. 1932	1-10	11-20	21-29	1-10	11-20	21-31	1-10	11-20	21-30
Indo-China (French) (see al.o table above): Annam 1.	ပ				4								
Cambodia 2		6.0	4		400	64.5		60 60	-	~ -	4 6	1	ଞ୍ଚ
Cochin-China 1.	2 0Д(13	94	104	11-10		a,	986	. 61 —	40	39 CG E	0 m	, 3 5 25
LAos 3.) 										~ 69		

8 Reports incomplete.

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

PLAGUE:

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

							.										١
	Nov.	Dec.	Jan	Feb.						Week ended	nded –						
Place	75 Q 21	1931 Jan.	9 9	Mar.	ğ	March, 1932	22		Apri	April, 1932				May, 1982	1982		g .
	1931	1932	1932	1982	12	19	8	8	6	91	8	S	~	71	E	88	283
Argentina: Cordoba Province 1	10,	-	-							6							
Terceira Island	- 50															6	
Tanganyika C C C C C C C C C C C C C C C C C C C	146	88	22580	80 ND		6	(0) (0)	111		P.0	133			-			
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Tegal Tegal Taya and Madura West Jaya.	28	288	20.5	1459	82	23:	8.2	88	38.83	52	22	18					
	90 60 60	8	8 *	139	e i	\$	ē <u> </u>	,	2	20	3	\$	-	88	-	-	

Including plague in the United States and its possessions.
1 no cases of bubonic plague were reported in Cordoba Province, Argentina, in January, 1932. They were distant from railroad and 500 kilometers from ports.
An imported case.

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

PLAGUE-Continued

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

	Nov	Dec.	Jan.	Feb.						Week ended	- pepu						
Place	75. 12.	Jan.	Feb.	Mar. 5.	Σ	March, 1932	332		Apri	April, 1982				May, 1982	1982		Jan 4
	1881	1982	1882	1982	21	61	8	64	۵	91	×	8	4	14	12	8	1983
Madagaccar (see also table below): Tamatave	=	-										1					
Peru (see table below). Senegal (see table below). Slam	100		1		*	1	-										
	69	-	7		~				1			1 -		11		\Box	
Union of South Africa: Orange Free State	P.	щ	щ	Д		9		4									
United States: California—Los Angeles—Plague-infected rats.									-								
												1	-		1	1	١

+80 cases of plague with 15 deaths have been reported in Ovamboland, South-West Africa, up to Apr. 30, 1932. All antiplague measures have been taken.

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Octo- ber, 1831
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8 Reports incomplete.

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

SMALLPOX

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	Nov.	Dec.	Jan.	Feb.					Week	Week ended-	1					
Place	주 5 2	13, 1931– Jan. 9,	Feb. 6, 1932	7- Mar. 5, 1932	Σ	March, 1932	22		Αpr	April, 1932				May, 1932	833	
	1931	1932			21	10	8	69	6	2	8	ຂ		7	12	88
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British South Africa: Northern Rhodesia.		·	. 10					•	-	•	Ì					
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China: Amoy	34 84 44	218 55 81	22.22	<u>2</u> 44.	25.52	12 7 12	, మాలు మాగ్లామం	221	r+2		408-	1-1	<u> </u>	۵	100	•
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Hong Kong Manchurla—Dairen Nanking Shanking Foreigners only Including natives Foreigner Foreigner		9		India. Bassein. Bombay. Calcutta. Chittagong.

123 cases of smallpox with 8 deaths were reported at Vaneouver, British Columbia, from Jan. 1 to Feb. 18, 1923. 2600 cases of smallpox with 15 deaths were reported in Honduras from July, 1931, to Feb. 16, 1932.

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

SMALLPOX-Continued

																1
	Nov.	Dec.	Jen.	₹.					Week	Week ended-	,					
Place	쿠 ^Q 교	1981 1981 - 0, da	10- Feb. 4, 1932	Mar. 6, 1932	M	March, 1932			Apri	April, 1933			1	May, 1982	296	
	3	1932			13	19	8	2	6	91	8	2	7	14	12	*
India—Continued. Madras	7	~	•	15	51	3	15	21	31	8	81	9	17	91	01	2
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Indo-China (see also table below):	3 8	\$ 8	1 7	3 67	- 1	3	r t	• •	•		2 8	•	• 9	• •	1	:
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200 cases of small pox were reported in Osaka Prefecture, Japan, from Mar. 1 to May 24, 1932.
From Mar. 6 to Apr. 39, 1932, 651 cases of small pox with 6 deaths, were reported in Sierra Leone.

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

SMALLPOX—Centinued

				\vdash	F					A SE	Week anded					
	Nov.	Q			<u> </u>											
Place	쿠 <mark>칯</mark> 교	1801 d.	주를		Mar. K 1982	Ma	March, 1923			April, 1922	1983			4	May, 1932	8
	1881	282				21	10	8	8	•	. P	a	2	7	14 21	8
On vessels—Continued. S. S. Hong Kheng at Singapore from Amoy, via Swatter and Hong Kone					<u> </u>											
pue l				P 60 E												
S. S. Parlung at Shanghai S. S. Rajula at Penang from Negapatam C. S. S. MacCillivary at Sues from Rangoon				14.~.B4		 -										
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* A suspected case.											•					
	Z		ėģ	Jag	January, 1933	223		February, 1922	1933		March, 1932	, 1932		,	April, 1933	22
Finos	15 E		1881,	1-10	11-20	21-31	1-10	11-20	21-29	1-10	11-20		21-31	1-10	07-11	21-30
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March, 1982	808
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Jan- uary, 1932	488 311 1
98 P. 198	252
N N N N N N N N N N N N N N N N N N N	427 419 423 91 162 279
Octo- ber, 1931	427
Flace	Mexico (see also table above) D Morocco
Febru- March, ary, 1932	30 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
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Place	Chosen C 7 2 1 France C 6 1 Guatemala D 1 1 6 1

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

TYPEUS PEVER

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Greece (see table below). Irish Free State: Donegal County—Stranorlar.	64	787	200	រូន រូន	15	17	12	₹ .	28	30	22	8.4	Ѱ				
Limerick County—Linerick Rescommon County—Rescommon O Waterford County—Lismore Lithmank (see table below). Marion:	-	1															1
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	April, 1983	
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Mexico City, included San Luis Potosi Morocco Palestine Paraguay: Asuncion Portugal: Oporto. Portugal: Oporto. Turkey (see table below) Union of South Africa: Cape Province. Netal. Orange Free State. Transval. Orange Free State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Transval. Orange State. Orange State. Transval. Orange State. Orange State. Transval. Orange State. O	Place	
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CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER-Continued

YELLOW PRVER

	Nov.	Ą		Feb.					Week	Week ended-					
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1 During the 3 weeks ended Apr. 30, 1933, a number of sease of suspected yellow favor ware reported in the interior of the State.