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SICKNESS AMONG MALE INDUSTRIAL EMPLOYEES DURING THE FINAL QUARTER OF 1933¹

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During the fourth quarter of 1933 the incidence rate of cases of illness causing disability for 8 consecutive days or longer among 154,000 male industrial employees was lower than in the corresponding period of any one of the 4 preceding years. It is considerably below that for the fourth quarter of 1932, in which period an outbreak of influenza began in November. The influenza rate during the recent quarter-year was less than half that recorded for the last quarter of 1932. As might have been expected, the pneumonia rate was also lower than in the same period of the preceding year; but it was higher than in the fourth quarter of 1931. A favorable rate is indicated for new cases of tuberculosis of the respiratory system during the closing months of 1933. Diseases of the upper respiratory tract caused fewer 8-day or longer absences from work than in the corresponding period of 1929, 1930, and 1931.

For nonindustrial injuries the rates remain remarkably constant—13.5 cases per year per 1,000 men for the quarter under report.

The relatively low sickness rate for the recent quarter was due principally to a decrease in the nonrespiratory diseases. This is the first time that nonrespiratory cases have decreased in frequency enough to lower appreciably the total rate for sickness. The fourth-quarter rate for nonrespiratory diseases was 37.5 cases per 1,000 men per year, as compared with an average or expected rate of about 46.0 for the period. Within this very broad disease group no single disease or group of related diseases accounted for the lower incidence rate for the group as a whole; the favorable showing resulted from somewhat lower rates for a number of different pathological conditions, among which may be mentioned diseases of the stomach, hernia, the rheumatic group, neurasthenia, and even the circulatory-genito-urinary diseases. Little change, however, took place in the

¹ The report for the third quarter of 1933 was published in the Public Health Reports of Jan. 12, 1934.

occurrence of appendicitis, "other" digestive diseases, the more serious diseases of the nervous system embraced in the category "other diseases of the nervous system", and the epidemic and endemic disease groups. On the whole, however, morbidity as gaged by the frequency of claims for sickness benefits in a sample of the industrial population of the country presents a favorable picture in comparison with the fourth-quarter results for each of the 4 preceding years.

As explained in earlier communications, these sickness data apply in the main to employed men, although many may work only on a part-time basis. The reporting companies or sick-benefit associations cover all parts of the country, but most of them are located in the North Central and North Atlantic States.

TABLE 1.—*Frequency of disability lasting 8 calendar days or longer in the fourth quarter of 1933 compared with the same quarter of each of the four preceding years (male morbidity experience of 35 industrial companies which reported their cases to the United States Public Health Service)*¹

Diseases and disease groups which caused disability. (Numbers in parentheses are disease title numbers from the International List of the Causes of Death, fourth revision, Paris, 1929)	Annual number of disabilities per 1,000 men in the fourth quarter of—				
	1933	1932	1931	1930	1929
Sickness and nonindustrial injuries ²	78.0	104.3	84.3	87.2	96.6
Nonindustrial injuries.....	13.5	13.9	13.5	13.0	13.1
Sickness ²	64.5	90.4	70.8	74.2	83.5
Respiratory diseases.....	27.0	44.9	25.2	27.6	37.1
Influenza and grippe (11).....	12.3	29.8	10.7	11.6	15.1
Bronchitis, acute and chronic (106).....	3.4	3.1	3.5	4.2	6.2
Pneumonia, all forms (107-109).....	2.2	2.6	1.7	2.5	3.1
Diseases of the pharynx and tonsils (115a).....	3.6	4.0	4.5	4.3	6.8
Tuberculosis of the respiratory system (23).....	.6	.8	.8	.8	1.1
Other respiratory diseases (104, 105, 110-114).....	4.9	4.6	4.0	4.2	4.8
Nonrespiratory diseases.....	37.5	45.5	45.6	46.6	46.4
Diseases of the stomach, cancer excepted (117, 118).....	2.9	3.5	3.8	3.9	3.7
Diarrhea and enteritis (120).....	1.0	1.1	1.2	1.5	1.4
Appendicitis (121).....	3.4	3.6	3.6	3.4	3.8
Hernia (122a).....	1.0	1.7	1.5	2.1	1.3
Other digestive diseases (115b, 116, 122b-129).....	2.9	3.1	2.9	2.9	2.5
Rheumatic group, total.....	8.3	10.6	9.9	10.4	12.1
Rheumatism, acute and chronic (56, 57).....	3.5	4.8	4.4	4.9	5.0
Diseases of the organs of locomotion (156b).....	2.8	3.3	3.4	3.3	4.0
Neuralgia, neuritis, sciatica (87a).....	2.0	2.5	2.1	2.2	3.1
Neurasthenia and the like (part of 87b).....	.8	1.0	1.4	1.2	1.1
Other diseases of the nervous system (78-85, part of 87b).....	1.3	.9	1.2	1.0	1.1
Diseases of the heart and arteries and nephritis (90-99, 102, 130-132).....	2.9	3.9	3.5	3.5	3.7
Other genito-urinary diseases (133-138).....	2.1	2.5	2.4	2.3	2.1
Diseases of the skin (151-153).....	2.6	2.6	3.1	3.7	3.5
Epidemic and endemic diseases except influenza (1-10, 12-18, 33, 37, 38, part of 39 and 44).....	1.7	1.8	1.7	1.6	1.8
Ill-defined and unknown causes (200).....	1.5	2.2	2.0	1.6	1.7
All other diseases (19-22, 24-32, 36, part of 39 and 44, 40-43, 45-55, 58-77, 83, 89, 100, 101, 103, 154-156a, 157, 162).....	5.1	7.0	7.4	7.5	6.6
Average number of males covered in the record.....	154,385	135,470	158,090	154,165	100,023
Number of companies included.....	36	35	32	27	23

¹ In 1932 and 1933 the same companies are included. The rates for 1931, 1930, and 1929 cover 32, 27, and 23 companies, respectively, instead of 35 in 1932 and 1933.

² Exclusive of disability from venereal diseases.

MALARIA AMONG DRUG ADDICTS IN NEW YORK CITY

An Epidemic of Aestivo-Autumnal and Quartan Malaria Among Drug Addicts in New York City Transmitted by the Use of Contaminated Hypodermic Syringes

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Sixteen fatal cases of aestivo-autumnal malaria of the cerebral type and one fatal case of quartan malaria complicated by bronchopneumonia were autopsied by the office of the chief medical examiner during a recent 4-month period. The first case was autopsied September 29, 1933, and the most recent case was autopsied January 30, 1934. An additional fatal case of aestivo-autumnal malaria occurred and was autopsied at the United States Marine Hospital at Ellis Island and was called to our attention by Dr. E. A. Sweet, medical director, United States Public Health Service, thus bringing the total fatalities to 18. In every instance the deceased was a drug addict who injected heroin intravenously—the so-called “main-line shooter.”

Cases of malaria in drug addicts in New York City, Sept. 25, 1933, to Feb. 8, 1934

Type and locality	Fatal cases	Cases in living patients	Total
Aestivo-autumnal:			
Bellevue Hospital.....	12	7	19
U. S. Marine Hospital, Ellis Island.....	1	1	2
Correction Hospital, Welfare Island.....	2	6	8
Gouverneur Hospital.....	1	1	2
Lodging house.....	1	.....	1
Private physician.....	.....	2	2
Total.....	17	17	34
Tertian: Correction Hospital, Welfare Island.....	.....	1	1
Quartan:			
Bellevue Hospital.....	1	3	4
Correction Hospital, Welfare Island.....	.....	2	2
Total.....	1	5	6
Total number.....	18	23	41

An investigation carried on with the assistance of Detective Jocker of the narcotic squad and Detective Oswald of the homicide squad of the police department revealed that almost all of the deceased addicts had frequented the same lodging houses, that many had never been out of New York City, and that a few had been to the Tropics. These findings indicated a direct transmission of the disease from individual to individual, and a knowledge of the technique of intravenous drug injection employed by the addicts readily explained how it occurred. The syringe, which is usually improvised from a medicine or “eye” dropper inserted into a hypodermic needle, designated

as a "spike", is frequently used in rapid succession, without preliminary washing or sterilization, by two or more addicts for intravenous injection of heroin. This method of taking the drug is comparatively new in New York, but has been practiced for many years in other localities. Since a quantity of blood always flows back into the syringe when the needle enters the vein, a malarious addict will in this way introduce malarial parasites into the syringe. The addict who next uses the apparatus cannot help but inject some of this blood into his vein, and in this very simple manner inoculates himself with whatever type of malaria his associates may have. He, in turn, after a period of incubation, becomes a carrier capable of transmitting the disease in the same manner in which he acquired it. This method of malarial transmission among intravenous drug addicts was first described in 1929 by Biggam (1) in Egypt, and more recently in 1933 by Nickum (2) in Omaha, by Faget (3) in New Orleans, by Eaton and Feinberg (4) in Chicago, by Himmelsbach (5) at Fort Leavenworth Penitentiary, Kans., and by others.

With the permission of former Deputy Commissioner of Correction Tudor, and with the assistance of Dr. Barland of Correction Hospital, a malarial survey of a group of addicts at the Tombs Prison and at Correction Hospital was carried out on November 28, 1933. Out of a routine examination of the blood smears from 150 addicts not suspected of having malaria, 9 individuals were found who harbored malarial parasites in their blood; 8 of these 9 were aestivo-autumnal, 1 was a tertian. On being questioned, these carriers readily admitted sharing their syringes with each other and also with many of the addicts who had died of malaria. Many of these individuals stated that they had never been out of New York City. One admitted recent malarial infection in the Tropics. In addition to the cases revealed by survey, 9 other nonfatal cases of aestivo-autumnal malaria have been discovered and also 5 additional cases of quartan malaria, a type very unusual in this part of the world. The quartan cases are the most recent. All the cases were in drug addicts.

In spite of a warning which has been issued to addicts concerning the danger of malarial transmission by the common use of an unsterilized syringe, new cases continue to occur. Our survey was only complete enough to establish definitely the mode of direct transmission of the disease in intravenous drug addicts. A general and complete malarial survey of all the prisons and lodging houses in various parts of the city where drug addicts congregate is indicated as a public-health measure. Carriers should be effectively isolated and treated in order to prevent further direct transmission and also to prevent possible indirect transmission to the general population by *Anopheles* mosquitoes when warm weather arrives. There is also the obvious danger of malarial carriers acting as donors for blood

transfusions. Additional considerations are the possible spreading of other parasitic blood diseases such as trypanosomiasis and syphilis.

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COMPARATIVE EXPERIMENTS ON SPOTTED FEVER AND BOUTONNEUSE FEVER (I) ¹

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Recent tests have been made to determine the protective value of Rocky Mountain spotted fever vaccine against the virus of bouton-neuse fever. These experiments were suggested by the observations of Badger (1933), who found reciprocal cross-immunity between these two typhus-like diseases, and our own subsequent experience which has confirmed and extended these findings.

Ticks (*Rhipicephalus sanguineus*) infected with bouton-neuse fever virus were received, through the courtesy of Dr. Jean Caminopetros, of the Pasteur Institute of Greece, to whom our request for virus had been referred by the kindness of Dr. E. Brumpt, of the Faculty of Medicine of Paris. Guinea pigs injected with saline emulsions of these ticks showed typical febrile and scrotal reactions. The latter consist of reddening and swelling similar to the scrotal reaction in spotted fever, but less marked. Transfers by heart blood taken at the height of fever failed to continue the strain. Consequently, passage by testicular washings was attempted in a manner similar to that sometimes used in the transfer of the virus of endemic typhus. The testes and adnexa were removed aseptically, placed in about 12 cc of physiologic saline, and thoroughly shaken. The resultant washings constitute the virus. From 1 to 3 cc were injected intraperitoneally. Nutrient broth inoculated with this material has

¹ Contribution from Rocky Mountain Spotted Fever Laboratory of the United States Public Health Service at Hamilton, Mont.

remained uniformly without visible growth. By this method we have been able to continue this strain without difficulty over a period of 3 months.

TEST 1

On October 13, 1933, 12 guinea pigs received 1 cc each of spotted fever vaccine no. 1731. Twelve days later, 2 of the vaccinated pigs

CHART 1

PROTOCOLS OF THE USE OF ROCKY MOUNTAIN SPOTTED FEVER VACCINE AGAINST THE VIRUS OF BOUTONNEUSE FEVER. (GREECE)

OCT 13-12 GUINEA PIGS EACH RECEIVED 1st SPOTTED FEVER VACCINE NO. 1731.
 25 2 OF THEM RECEIVED 3rd BOUTONNEUSE FEVER VIRUS NO. 332.
 2 2^{cc}
 2 1^{cc}
 6 1st SPOTTED FEVER VIRUS NO. 334.

VACCINATED GUINEA PIGS RECEIVING BOUTONNEUSE FEVER VIRUS NO. 332					CONTROL GUINEA PIGS RECEIVING BOUTONNEUSE FEVER VIRUS NO. 332				
NO.		PROTOCOLS			NO.		PROTOCOLS		
NO.	DAYS	SCROTUM TYPICAL		RELEASED	NO.	DAYS	SCROTUM TYPICAL		RELEASED
54498	41 40 39			RELEASED	54611	41 40 39			KILLED FOR VIRUS
54500	41 40 39			RELEASED	54612	41 40 39			KILLED FOR VIRUS
54501	41 40 39			RELEASED	54613	41 40 39			IMMUNE TO SPOTTED FEVER VIRUS
54502	41 40 39			RELEASED	54614	41 40 39			IMMUNE TO SPOTTED FEVER VIRUS
54503	41 40 39			RELEASED	54615	41 40 39			DEATH-PROBABLE INTERCURRENT INFECTION.
54504	41 40 39			RELEASED	54616	41 40 39			DEATH PROBABLE INTERCURRENT INFECTION
VACCINATED GUINEA PIGS RECEIVING SPOTTED FEVER VIRUS NO. 334					CONTROL GUINEA PIGS RECEIVING SPOTTED FEVER VIRUS NO. 334.				
NO.		PROTOCOLS			NO.		PROTOCOLS		
NO.	DAYS			RELEASED	NO.	DAYS			RELEASED
54505	41 40 39			RELEASED	54662	41 40 39			DEATH-TYPICAL LESIONS
54506	41 40 39			RELEASED	54663	41 40 39			DEATH-TYPICAL LESIONS
54507	41 40 39			RELEASED					
54508	41 40 39			RELEASED					
54509	41 40 39			RELEASED					
54510	41 40 39			RELEASED					

received 3 cc each; 2, 2 cc; and 2, 1 cc of the testicular washings from a guinea pig showing a characteristic boutonneuse fever reaction. Six control animals were injected in the same manner. As controls on the protective value of the vaccine against spotted fever, the remaining 6 guinea pigs received 1 cc each of spotted fever (blood) virus no 334. Two normal animals also received 1 cc each of the virus.

Results.—As seen in chart 1, all experimental and control guinea pigs receiving the virus of boutonneuse fever developed typical febrile and scrotal reactions.

All the vaccinated animals survived and were released on the twenty-first day. The two control guinea pigs which received 3 cc each of virus were sacrificed at the height of fever for continuation of the strain; the two controls which received 2 cc of the virus survived and were later completely immune to a dose of spotted fever virus which produced typical spotted fever in control guinea pigs; the two controls which received 1 cc of the virus died 13 and 14 days, respectively, following injection of the virus. Although the spleens and the testes and adnexa were typical of boutonneuse fever, it is possible that the deaths of the last two controls were due to a secondary infection, especially that of guinea pig no. 54616, as suggested by a terminal rise in temperature. In our limited experience, guinea pigs seldom die from uncomplicated boutonneuse fever.

None of the vaccinated guinea pigs receiving spotted fever virus showed any evidence of infection while the two controls died typically.

It was thought that the difference in the protective value of the spotted fever vaccine against the two viruses might depend upon the material containing the virus, inasmuch as it has been shown that testicular extracts markedly influence the action of certain viruses. Consequently, a second test was made as follows:

TEST 2

Six vaccinated and six unvaccinated control guinea pigs each received the pooled testicular washings from two spotted fever guinea pigs in exactly the same manner as in the test with boutonneuse fever virus. Five additional vaccinated guinea pigs (one had died of intercurrent infection) each received 1 cc of blood virus from the guinea pigs which supplied the testicular washings.

Results (chart 2).—None of the vaccinated guinea pigs which received the testicular washings or blood virus showed any evidence of illness. Five of the control guinea pigs which received only testicular washings died of typical spotted fever; one survived. Of the two control guinea pigs which received only blood virus, one died of typical spotted fever, while the other recovered following a frank clinical course.

DISCUSSION

The thermic and scrotal reactions to boutonneuse fever virus in the guinea pigs that had been injected with spotted fever vaccine were similar, in all respects, to these reactions as observed in several hundred nonvaccinated guinea pigs injected with this virus. In

It is of interest to compare the above results with those of studies which have had to do with the relationship between Rocky Mountain spotted fever and Sao Paulo "typhus." The latter have shown a reciprocal cross immunity; and vaccine prepared against spotted fever from spotted fever infected *D. andersoni* protects against both diseases, as does also vaccine prepared against Sao Paulo "typhus" from "typhus"-infected *Amblyomma cajennense*. On the other hand, though there is a reciprocal cross immunity between spotted fever and boutonneuse fever, spotted fever vaccine has no protective value against boutonneuse fever. This leads to the point that though we have found no difference in the gross lesions of Sao Paulo "typhus" and spotted fever in guinea pigs, there are two marked differences in the case of boutonneuse fever. In the two former the spleen is smooth and the tunica is not adherent to the testis, which frequently snaps off when withdrawn from the scrotal sac. In boutonneuse fever, on the other hand, the spleen surface is rough, owing to the prominence of the malpighian corpuscles, and the tunica is, as a rule, adherent to the entire surface of the testis, the adhesion extending nearly or quite to the polar fat. These lesions in boutonneuse fever closely resemble those of endemic typhus.

SUMMARY AND CONCLUSIONS

With the methods employed, spotted fever vaccine which afforded complete protection against the virus of spotted fever in guinea pigs showed no protection against the virus of boutonneuse fever.

From the above observations it seems probable that boutonneuse fever is less closely related to spotted fever than is Sao Paulo "typhus."

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COURT DECISION ON PUBLIC HEALTH

Requirement of city ordinance that pasteurized milk sold in city be pasteurized in city held invalid.—(Minnesota Supreme Court; *State ex rel. Larson v. City of Minneapolis et al.*, 251 N.W. 121; decided Nov. 17, 1933.) An ordinance of the city of Minneapolis, among other things, made it unlawful to sell within the city any pasteurized milk or its products unless the same had been pasteurized in a pasteurization plant located within the city and by the process described in the ordinance. A license, known as a pasteurized milk license, was also required. The owner of a pasteurization plant, located about 30 miles from Minneapolis, brought a mandamus proceeding to compel the issuance of a license to sell pasteurized milk and its products within the city. The lower court upheld the ordinance and denied the relief prayed for, and the relator appealed to the supreme court.

In speaking of the need for milk inspection, the trial court had stated, in part, as follows:

* * * It is obvious that adequate inspection is a reasonable precaution. It is obvious that consideration of convenience, efficiency and cost of inspection are proper to be taken into account in determining the question of reasonableness. It is also obvious that there is somewhere a limit of distance beyond which inspection by the city's agents would be too inconvenient, too costly, and too likely to be ineffective to be practicable. It seems to me there can be no doubt of the right of the city council to fix a reasonable limit beyond which it will not provide for inspection, and beyond which, for that reason, pasteurization plants will not be licensed. In this ordinance the limit is the boundary line of the municipality.

The supreme court said that the issue, then, was limited to the question of whether or not provision by the city for adequate inspection of relator's pasteurization plant, transportation facilities, etc., was so expensive and inconvenient to the city as to justify prohibition by it of relator's established business unless he moved his pasteurization plant into the city. The court then reviewed the inspection work done by the city and reached the conclusion that the provision of the ordinance attacked was invalid, concluding its opinion as follows:

If the inspection fee is deemed insufficient, there appears to be no good reason why such insufficiency cannot be remedied in a manner that would impose no unjust hardship on anyone concerned. There is nothing in the record to show what, if any, inconvenience the city may be put to that would justify such a harsh requirement as provided by the ordinance. We are obliged to hold that

the ordinance, insofar as it prohibits the sale of pasteurized milk or its products in the city of Minneapolis, unless the same shall have been pasteurized in a pasteurization plant located within the city limits, violated relator's constitutional rights of property and contract. The restriction contained therein goes "beyond the reasonable demands of the occasion" and is not adaptable to the end sought.

DEATHS DURING WEEK ENDED MAR. 10, 1934

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

	Week ended Mar. 10, 1934	Correspond- ing week, 1933
Data from 86 large cities of the United States:		
Total deaths.....	9,454	8,547
Deaths per 1,000 population, annual basis.....	13.2	11.9
Deaths under 1 year of age.....	683	602
Deaths under 1 year of age per 1,000 estimated live births.....	64	151
Deaths per 1,000 population, annual basis, first 10 weeks of year.....	12.7	12.4
Data from industrial insurance companies:		
Policies in force.....	67,571,251	68,890,681
Number of death claims.....	16,707	14,326
Death claims per 1,000 policies in force, annual rate.....	12.1	10.8
Death claims per 1,000 policies, first 10 weeks of year, annual rate.....	11.0	11.3

¹ Data for 81 cities.

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 Mar. 17, 1934, and Mar. 18, 1933

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Mar. 17, 1934, and Mar. 18, 1933

Division and State	Diphtheria		Influenza		Measles		Meningococcus meningitis	
	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933
New England States:								
Maine.....			1	1	30	3	0	1
New Hampshire.....				4	223		0	0
Vermont.....	1	1			54	4	0	0
Massachusetts.....	13	16		6	2,003	341	0	0
Rhode Island.....		3		2	5	3	0	0
Connecticut.....	6	4	15	12	38	159	1	1
Middle Atlantic States:								
New York.....	35	49	129	121	1,223	4,041	2	1
New Jersey.....	13	40	13	22	514	1,536	3	1
Pennsylvania.....	59	70			3,697	1,056	2	5
East North Central States:								
Ohio.....	38	30	144	216	1,384	597	2	1
Indiana.....	22	26	57	65	435	152	1	8
Illinois.....	28	28	37	104	1,419	399	4	23
Michigan.....	10	33	5	6	86	1,353	1	2
Wisconsin.....	7	3	55	90	139	494	2	2
West North Central States:								
Minnesota.....	5	3	2	3	224	1,322	0	0
Iowa.....	6	9	7		160	9	1	5
Missouri.....	48	23	153	18	1,010	275	1	15
North Dakota.....	10	2	29		173	70	1	1
South Dakota.....	2	12	6		478	4	0	0
Nebraska.....	3	12	9	15	257	6	0	0
Kansas.....	15	7	1		255	334	0	2
South Atlantic States:								
Delaware.....	3	11			181	5	0	0
Maryland.....	10	7	25	36	776	3	0	1
District of Columbia.....	8	4		3	606	3	0	0
Virginia.....	21	13			1,697	473	7	3
West Virginia.....	14	10	55	31	45	143	1	0
North Carolina.....	16	15	61	69	3,369	506	1	0
South Carolina.....	17	4	757	708	572	217	0	0
Georgia.....	11	9		184	1,490	40	1	1
Florida.....	2	7	7	13	235	40	0	2

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Mar. 17, 1934, and Mar. 18, 1933—Continued

Division and State	Diphtheria		Influenza		Measles		Meningococcus meningitis	
	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933
East South Central States:								
Kentucky.....	25	11	69	51	481	80	1	0
Tennessee.....	12	3	161	100	1,425	30	5	3
Alabama.....	9	15	125	120	832	25	1	1
Mississippi ¹	3	7					0	0
West South Central States:								
Arkansas.....	8	6	35	61	374	112	0	2
Louisiana.....	26	12	8	7	293	56	1	5
Oklahoma ⁴	10	15	78	104	1,025	34	1	1
Texas ²	113	63	652	117	3,106	750	6	3
Mountain States:								
Montana.....	1	3		10	18	31	0	1
Idaho.....	5	1		1	74	24	0	0
Wyoming.....	1	1			54	8	0	0
Colorado.....	5	7		43	214	9	0	2
New Mexico.....	5	7	2		124	16	0	1
Arizona.....	5	1	31	2	65	15	0	0
Utah ³	1	2			608	2	0	1
Pacific States:								
Washington.....	2	1			155	51	0	0
Oregon ⁵	3	1	87	30	70	81	0	0
California.....	26	53	48	61	1,363	1,146	3	1
Total	676	660	2,764	2,336	33,049	16,058	49	96

Division and State	Poliomyelitis		Scarlet fever		Smallpox		Typhoid fever	
	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933
New England States:								
Maine.....	0	0	25	13	0	0	1	1
New Hampshire.....	0	0	12	26	0	0	0	0
Vermont.....	0	0	18	13	0	0	0	0
Massachusetts.....	0	0	275	417	0	0	1	3
Rhode Island.....	0	0	14	46	0	0	0	0
Connecticut.....	0	0	92	176	0	3	0	0
Middle Atlantic States:								
New York.....	1	1	902	1,120	0	0	10	8
New Jersey.....	0	0	206	364	0	0	5	1
Pennsylvania.....	0	0	834	1,071	0	0	9	6
East North Central States:								
Ohio.....	1	1	978	1,095	0	16	2	4
Indiana.....	1	0	229	128	2	1	0	2
Illinois.....	1	1	663	546	3	15	0	0
Michigan.....	0	1	876	608	11	1	5	2
Wisconsin.....	1	0	277	119	35	4	0	1
West North Central States:								
Minnesota.....	0	0	69	76	3	0	0	1
Iowa ¹	0	0	86	35	11	36	0	0
Missouri.....	0	0	125	86	15	6	1	1
North Dakota.....	2	0	41	10	4	2	0	0
South Dakota.....	0	1	13	9	4	0	0	2
Nebraska.....	0	0	28	39	4	1	5	0
Kansas.....	0	0	111	57	3	0	1	3
South Atlantic States:								
Delaware.....	0	0	19	10	0	0	0	0
Maryland ²	0	0	79	111	0	0	3	2
District of Columbia.....	0	0	14	28	0	0	0	1
Virginia.....	1	0	45	40	0	0	2	10
West Virginia.....	0	1	58	27	0	0	1	6
North Carolina.....	1	1	42	49	0	5	3	6
South Carolina.....	0	2	5	4	0	0	3	4
Georgia ³	1	0	6	12	0	10	5	1
Florida.....	1	1	5	5	0	0	4	5

See footnotes at end of table.

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended Mar. 17, 1934, and Mar. 18, 1933—Continued

Division and State	Poliomyelitis		Scarlet fever		Smallpox		Typhoid fever	
	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933	Week ended Mar. 17, 1934	Week ended Mar. 18, 1933
East South Central States:								
Kentucky.....	1	0	108	54	0	1	3	3
Tennessee.....	0	0	29	38	2	2	4	5
Alabama.....	1	0	12	15	0	1	3	5
Mississippi ¹	0	0	25	6	0	0	8	3
West South Central States:								
Arkansas.....	0	0	8	7	2	8	1	0
Louisiana.....	0	0	24	19	5	2	10	17
Oklahoma ⁴	0	0	10	33	3	8	5	2
Texas ²	0	2	133	39	35	36	10	7
Mountain States:								
Montana.....	0	0	18	7	0	0	2	5
Idaho.....	0	0	2	6	3	10	0	2
Wyoming.....	0	0	7	11	0	0	0	4
Colorado.....	0	0	26	34	15	0	0	2
New Mexico.....	0	0	20	16	2	0	3	1
Arizona.....	0	0	20	16	0	1	0	0
Utah ³	0	0	6	10	0	0	0	1
Pacific States:								
Washington.....	1	0	60	37	11	3	1	1
Oregon ⁴	0	0	31	16	10	2	2	0
California.....	6	1	207	178	17	24	5	7
Total.....	20	13	6,893	6,882	200	198	118	135

¹ New York City only.

² Week ended earlier than Saturday.

³ Typhus fever, week ended Mar. 17, 1934, 10 cases, as follows: Georgia, 7; Texas, 3.

⁴ Exclusive of Oklahoma City and Tulsa.

⁵ Rocky Mountain spotted fever, week ended Mar. 17, 1934, Oregon, 3 cases.

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	Men- gococ- cus menin- gitis	Diph- theria	Influ- enza	Ma- laria	Mea- sles	Pel- lagra	Polio- mye- litis	Scarlet fever	Small- pox	Ty- phoid fever
<i>February 1934</i>										
Indiana.....	7	131	303	0	2,191	-----	1	1,040	7	10
Maryland.....	1	39	123	0	1,406	-----	0	322	0	9
Michigan.....	5	45	21	5	243	-----	4	2,351	15	17
Missouri.....	15	230	690	7	5,991	-----	3	707	35	20
New Jersey.....	3	65	94	0	1,480	-----	2	784	0	11
New Mexico.....	4	26	29	21	438	-----	1	118	1	10
New York.....	17	168	-----	9	3,740	-----	4	2,910	0	22
North Dakota.....	1	28	89	0	604	-----	0	130	1	0
Ohio.....	9	144	306	4	2,853	-----	1	2,805	2	24
South Carolina.....	-----	91	3,136	220	1,877	85	3	35	5	19

<i>February 1934</i>										
Anthrax:	Cases	Chicken pox—Contd.	Cases	Dysentery:	Cases					
New Jersey.....	1	Ohio.....	2,368	Indiana (amoebic).....	1					
New York.....	1	South Carolina.....	148	Maryland.....	7					
Chicken pox:		Conjunctivitis:		Michigan.....	13					
Indiana.....	475	New Mexico.....	3	Missouri.....	12					
Maryland.....	653	Dengue:		New Jersey.....	3					
Michigan.....	1,309	South Carolina.....	4	New Mexico.....	1					
Missouri.....	790	Diarrhea:		New York (amoebic).....	13					
New Jersey.....	1,720	Maryland.....	1	New York (bacillary).....	14					
New Mexico.....	135	South Carolina.....	308	Ohio.....	5					
New York.....	2,863	Diarrhea and enteritis:		Food poisoning:						
North Dakota.....	93	Ohio (under 2 years).....	23	Ohio.....	14					

German measles:	Cases	Ophthalmia neonatorum—	Cases	Tularaemia:	Cases
Maryland.....	46	Continued.....	69	Missouri.....	1
Michigan.....	172	Ohio.....	11	New Mexico.....	1
New Jersey.....	26	South Carolina.....	5	Ohio.....	1
New Mexico.....	16	Paratyphoid fever:		South Carolina.....	5
New York.....	104	New York.....	2	Typhus fever:	
Ohio.....	1,848	South Carolina.....	2	Maryland.....	1
Hookworm disease:		Puerperal septicemia:		New York.....	1
South Carolina.....	71	New Mexico.....	7	South Carolina.....	2
Impetigo contagiosa:		Ohio.....	2	Undulant fever:	
Maryland.....	13	Rabies in animals:		Maryland.....	2
Lead poisoning:		Indiana.....	33	Michigan.....	12
Ohio.....	13	Maryland.....	1	New Jersey.....	2
Lethargic encephalitis:		Missouri.....	24	New York.....	28
Michigan.....	4	New Jersey.....	14	Ohio.....	4
Missouri.....	7	New York.....	1	South Carolina.....	2
New Jersey.....	6	South Carolina.....	24	Vincent's infection:	
New Mexico.....	1	Scabies:		Maryland.....	12
New York.....	3	Maryland.....	2	Michigan.....	20
Ohio.....	4	Septic sore throat:		New York.....	82
South Carolina.....	1	Maryland.....	9	North Dakota.....	13
Mumps:		Michigan.....	64	Whooping cough:	
Indiana.....	96	Missouri.....	91	Indiana.....	244
Maryland.....	219	New Mexico.....	6	Maryland.....	771
Michigan.....	638	New York.....	79	Michigan.....	1,008
Missouri.....	482	Ohio.....	373	Missouri.....	607
New Jersey.....	296	Tetanus:		New Jersey.....	567
New Mexico.....	68	Maryland.....	1	New Mexico.....	148
North Dakota.....	5	New York.....	3	New York.....	1,346
Ohio.....	378	Ohio.....	2	North Dakota.....	80
South Carolina.....	255	Trachoma:		Ohio.....	1,753
Ophthalmia neonatorum:		Maryland.....	1	South Carolina.....	446
Maryland.....	2	Trichinosis:			
New Jersey.....	1	New Jersey.....	14		
New Mexico.....	1	New York.....	20		
		Ohio.....	1		

AN OUTBREAK OF PSITTACOSIS IN PITTSBURGH, PA.

From February 14 to March 16, 1934, 25 cases of psittacosis or suspected psittacosis, with 10 deaths, occurred in Pittsburgh, Pa. The outbreak originated in a store where birds are sold. The city health department has requested all dealers to isolate parrots, parakeets, and other birds of the psittacine family and to refrain from selling these birds at this time.

WEEKLY REPORTS FROM CITIES

City reports for week ended Mar. 10, 1934

[This table summarizes the reports received regularly from a selected list of 121 cities for the purpose of showing a cross section of the current urban incidence of the communicable diseases listed in the table. Weekly reports are received from about 700 cities, from which the data are tabulated and filed for reference.]

State and city	Diphtheria cases	Influenza		Measles cases	Pneumonia deaths	Scarlet fever cases	Small-pox cases	Tuberculosis deaths	Typhoid fever cases	Whooping cough cases	Deaths, all causes
		Cases	Deaths								
Maine:											
Portland.....	0	0	0	1	7	2	0	0	0	17	33
New Hampshire:											
Concord.....	0	0	0	75	1	1	0	1	0	0	8
Manchester.....	0	1	10	1	3	0	0	0	0	0	12
Nashua.....	0	0	4	0	2	0	0	0	0	0	
Vermont:											
Barre.....	0	0	0	0	0	0	0	0	0	0	1
Burlington.....	0	0	0	0	0	0	0	0	0	12	8
Massachusetts:											
Boston.....	2	1	404	36	67	0	17	0	122		273
Fall River.....	2	1	0	3	3	0	0	0	4		34
Springfield.....	0	0	3	3	3	0	4	0	10		36
Worcester.....	1	0	17	6	19	0	1	0	13		71
Rhode Island:											
Pawtucket.....	1	0	0	0	0	0	0	0	0	0	14
Providence.....	3	0	7	9	17	0	3	0	6		83
Connecticut:											
Bridgeport.....	0	1	0	4	1	12	0	1	0	0	40
Hartford.....	0	0	1	0	3	8	0	3	0	0	45
New Haven.....	0	1	1	1	4	2	0	1	1	2	43

City reports for week ended Mar. 10, 1934—Continued

State and city	Diphtheria cases	Influenza		Measles cases	Pneumonia deaths	Scarlet fever cases	Small-pox cases	Tuberculosis deaths	Typhoid fever cases	Whooping cough cases	Deaths, all causes
		Cases	Deaths								
New York:											
Buffalo.....	0		1	215	16	29	0	10	0	34	133
New York.....	43	22	16	86	241	338	0	112	9	117	1,861
Rochester.....	1		0	1	3	3	0	0	0	10	64
Syracuse.....	0		0	0	12	4	0	0	0	48	69
New Jersey:											
Camden.....	2	4	1	123	2	3	0	0	0	1	86
Newark.....	1	7	1	3	14	30	0	8	0	49	125
Trenton.....	0	2	0	53	5	13	0	3	0	0	37
Pennsylvania:											
Philadelphia.....	7	5	4	1,418	70	116	0	37	0	42	619
Pittsburgh.....	3	19	6	175	38	30	0	4	0	28	210
Reading.....	0		0	3	2	10	0	1	0	7	19
Scranton.....	0		0	1	0	6	0	0		4	
Ohio:											
Cincinnati.....	1		3	69	19	25	0	11	0	20	187
Cleveland.....	5	43	1	59	34	147	0	14	0	168	214
Columbus.....	3	3	3	0	7	83	0	4	0	30	81
Toledo.....	1	2	1	168	4	44	0	9	0	88	77
Indiana:											
Fort Wayne.....	1		0	11	2	19	0	2	0	1	30
Indianapolis.....	2		0	302	12	22	0	6	1	59	
South Bend.....	0		0	1	1	8	0	0	0	0	16
Terre Haute.....	0		0	4	4	1	0	0	0	0	16
Illinois:											
Chicago.....	0	4	3	135	55	278	0	43	1	228	745
Springfield.....											
Michigan:											
Detroit.....	6	5	5	33	52	218	0	17	1	130	314
Flint.....	2		0	18	9	87	0	0	0	9	27
Grand Rapids.....	0		0	2	2	47	0	0	0	5	36
Wisconsin:											
Kenosha.....	0		0	1	0	42	0	0	0	5	7
Madison.....	1			5		10	0		0	42	13
Milwaukee.....	1	1	1	7	6	157	0	5	0	95	108
Racine.....	1		0	2	0	8	1	0	0	3	12
Superior.....	0		0	1	1	1	0	0	0	0	10
Minnesota:											
Duluth.....	0		0	0	4	1	0	1	0	1	31
Minneapolis.....	4		1	5	10	24	0	3	0	35	110
St. Paul.....	0		0	2	8	9	3	6	0	16	80
Iowa:											
Des Moines.....	0			1		10	0		0	0	33
Sioux City.....	1			21		1	0		0	0	
Waterloo.....	0			0		0	0		0	14	
Missouri:											
Kansas City.....	0		1	6	16	24	0	9	0	24	101
St. Joseph.....	1		0	12	2	1	0	0	0	0	9
St. Louis.....	16	3		345	18	23	0	15	0	68	250
North Dakota:											
Fargo.....	0		0	102	2	2	0	0	0	3	9
Grand Forks.....	0		0	0	0	1	0	0	0	0	
South Dakota:											
Aberdeen.....	0		0	8	0	0	0	0	0	9	
Sioux Falls.....	0		0	17	0	0	0	0	0	0	7
Nebraska:											
Omaha.....	1		0	146	11	8	3	2	0	7	72
Kansas:											
Topeka.....	0		0	1	6	6	0	1	0	30	21
Wichita.....	0	1	1	5	5	15	0	0	0	6	31
Delaware:											
Wilmington.....	0		0	126	5	4	0	0	0	4	30
Maryland:											
Baltimore.....	4	6	2	488	35	34	0	10	0	192	234
Cumberland.....	1	1	0	0	2	1	0	1	0	1	12
Frederick.....	0		0	17	0	4	0	0	0	0	5
District of Columbia:											
Washington.....	10	1	0	555	19	17	0	17	0	29	152
Virginia:											
Lynchburg.....	3		0	1	1	1	0	0	0	6	10
Norfolk.....	0		0	110	5	0	0	1	0	2	49
Richmond.....	1	1	0	110	10	4	0	3	0	2	52
Roanoke.....	0		0	0	0	0	0	0	0	0	23
West Virginia:											
Charleston.....	1	3	0	0	3	0	0	1	0	0	12
Huntington.....	0		0	0	0	5	0	0	0	0	
Wheeling.....	0		1	3	2	11	0	0	1	15	20

City reports for week ended Mar. 10, 1934—Continued

State and city	Diphtheria cases	Influenza		Measles cases	Pneumonia deaths	Scarlet fever cases	Small-pox cases	Tuberculosis deaths	Typhoid fever cases	Whooping cough cases	Deaths, all causes
		Cases	Deaths								
North Carolina:											
Raleigh.....	0		0	21	0	0	0	0	0	15	11
Wilmington.....	1		0	3	1	0	0	1	0	3	17
Winston-Salem.....	2		0	79	3	4	0	2	0	0	25
South Carolina:											
Charleston.....	0	43	1	34	5	1	0	2	2	7	33
Columbia.....	0		0	0	6	0	0	1	0	0	7
Greenville.....	0		0	2	2	0	0	1	0	12	12
Georgia:											
Atlanta.....	5	30	3	351	11	2	0	7	0	2	97
Brunswick.....	0		0	100	1	0	0	0	0	1	5
Savannah.....	0	69	3	153	3	2	0	2	1	0	34
Florida:											
Miami.....	0		0	24	4	0	0	6	0	6	36
Tampa.....	3		0	20	1	1	0	0	0	0	20
Kentucky:											
Ashland.....	0			1		0	0		0	3	
Lexington.....	2	14	0	3	2	0	0	2	0	2	17
Louisville.....	2	2	0	5	17	23	0	0	1	26	78
Tennessee:											
Memphis.....	0		1	309	23	6	1	4	2	4	118
Nashville.....	3		2	121	7	3	0	1	0	31	65
Alabama:											
Birmingham.....	1	2	3	71	12	2	0	3	0	1	66
Mobile.....	1	2	1	20	0	0	0	1	0	0	31
Montgomery.....	2	1		68		0	0		0	6	
Arkansas:											
Fort Smith.....	0			27		2	0		0	0	
Little Rock.....	1		0	78	2	0	0	1	0	6	4
Louisiana:											
New Orleans.....	24	5	3	25	8	12	0	9	7	2	132
Shreveport.....	1		0	4	3	3	0	0	1	0	22
Oklahoma:											
Tulsa.....	0			215		1	0		0	0	
Texas:											
Dallas.....	7		1	11	7	13	0	3	0	3	47
Fort Worth.....	2		1	0	8	5	0	3	0	7	42
Galveston.....	0		0	0	2	3	0	1	0	0	11
Houston.....	6		2	3	13	14	3	6	0	0	77
San Antonio.....	4		4	7	8	9	0	4	0	0	67
Montana:											
Billings.....	0		0	0	0	1	0	0	0	0	10
Great Falls.....	0		0	0	4	0	0	0	0	0	7
Helena.....	0		0	0	0	0	0	0	0	0	3
Missoula.....	0		0	0	2	0	0	0	0	0	5
Idaho:											
Boise.....	1		0	2	3	0	0	0	0	0	7
Colorado:											
Denver.....	4	39	2	131	13	14	0	3	0	109	71
Pueblo.....	0		0	1	2	2	0	1	0	11	16
New Mexico:											
Albuquerque.....	1		0	2	3	3	0	2	0	4	13
Utah:											
Salt Lake City.....	1		0	320	5	6	0	0	0	21	31
Nevada:											
Reno.....	0		0	1	0	0	0	0	0	0	3
Washington:											
Seattle.....	0		4	2	7	25	1	10	1	75	110
Spokane.....	0	1	1	44	2	3	0	0	0	7	22
Tacoma.....	0		0	28	0	0	0	0	0	15	23
Oregon:											
Portland.....	1	2	0	11	1	11	0	4	0	4	71
Salem.....	0	5	0	0	0	0	0	0	0	0	
California:											
Los Angeles.....	17	12	0	51	15	62	0	23	0	57	321
Sacramento.....	0		0	2	4	0	0	2	0	4	24
San Francisco.....	6	2	1	112	8	16	0	12	0	14	153

City reports for week ended Mar. 10, 1934—Continued

State and city	Meningococcus meningitis		Poliomyelitis cases	State and city	Meningococcus meningitis		Poliomyelitis cases
	Cases	Deaths			Cases	Deaths	
Connecticut:				Nebraska:			
Bridgeport.....	1	1	0	Omaha.....	0	1	0
New York:				Maryland:			
New York.....	4	1	1	Baltimore.....	0	1	0
Pennsylvania:				Alabama:			
Philadelphia.....	0	0	1	Birmingham.....	1	0	0
Indiana:				Mobile.....	1	1	0
Indianapolis.....	2	1	0	Texas:			
Illinois:				Galveston.....	0	1	0
Chicago.....	1	0	0	California:			
Michigan:				Los Angeles.....	2	0	0
Detroit.....	1	1	0				
Missouri:							
St. Louis.....	2	0	0				

Lethargic encephalitis.—Cases: Portland, Maine, 1; Cleveland, 2; St. Paul, 1.

Pellagra.—Cases: Charleston, S.C., 2; Savannah, 1; Miami, 1; Mobile, 1; Los Angeles, 1; Sacramento, 1; San Francisco, 1.

Typhus fever.—Cases: Atlanta, 2; Mobile, 2. Deaths: Atlanta, 1.

FOREIGN AND INSULAR

CANADA

Ontario Province—Communicable diseases—4 weeks ended February 24, 1934.—The Department of Health of the Province of Ontario, Canada, reports certain communicable diseases for the 4 weeks ended February 24, 1934, as follows:

Disease	Cases	Deaths	Disease	Cases	Deaths
Cerebrospinal meningitis.....	3	—	Paratyphoid fever.....	1	—
Chicken pox.....	932	—	Pneumonia.....	—	128
Diphtheria.....	35	1	Poliomyelitis.....	1	—
Erysipelas.....	13	1	Scarlet fever.....	539	3
German measles.....	17	—	Syphilis.....	164	—
Gonorrhoea.....	155	—	Trench mouth.....	1	—
Influenza.....	48	2	Tuberculosis.....	151	38
Lethargic encephalitis.....	1	1	Typhoid fever.....	15	—
Measles.....	77	—	Undulant fever.....	9	—
Mumps.....	474	—	Whooping cough.....	393	4

CUBA

Provinces—Notifiable diseases—4 weeks ended October 28, 1933.—During the 4 weeks ended October 28, 1933, cases of certain notifiable diseases were reported in the provinces of Cuba, as follows:

Disease	Pinar del Rio	Habana	Matanzas	Santa Clara	Camaguey	Oriente	Total
Cancer.....	—	1	1	4	—	1	7
Diphtheria.....	—	4	1	1	—	1	7
Hookworm disease.....	1	—	—	—	—	—	1
Malaria.....	442	30	272	391	95	494	1,724
Measles.....	—	—	1	—	—	—	1
Poliomyelitis.....	—	—	—	—	—	—	1
Tuberculosis.....	9	23	15	58	59	45	209
Typhoid fever.....	32	11	13	57	23	21	157

YUGOSLAVIA

Communicable diseases—January 1934.—During the month of January 1934, certain communicable diseases were reported in Yugoslavia, as follows:

Disease	Cases	Deaths	Disease	Cases	Deaths
Anthrax.....	31	4	Poliomyelitis.....	5	—
Cerebrospinal meningitis.....	6	2	Scarlet fever.....	285	13
Diphtheria and croup.....	842	106	Sepsis.....	11	4
Dysentery.....	18	2	Tetanus.....	5	5
Erysipelas.....	187	13	Typhoid fever.....	202	39
Measles.....	530	14	Typhus fever.....	298	11
Paratyphoid fever.....	20	—			

Place	July 1933			August 1933			September 1933			October 1933			November 1933			December 1933			
	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-30	1-10	11-20	1-10	
																			11
Iloilo.....	D																		
Leyte Province.....	D																		
Occidental Misamis Province.....	D	2	1																
Occidental Negros Province.....	D	2	1																
Oriental Negros Province.....	D	1	1																
Samar Province.....	D	31	22	20															
Siam.....	D	20	20	14															
Bangkok.....	C																		

Place	July 1933			August 1933			September 1933			October 1933			November 1933			December 1933			
	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-31	1-10	11-20	21-30	1-10	11-20	1-10	
																			11
Indo-China (French) (see also table above):	C	1																	
Cambodia *	D	3	1																
Cochin-China *	D	6	2	12	3	2	1	2	2	2	2	5	5	5					

* During the week ended Mar. 17, 1934, cholera was reported in the Philippine Islands as follows: Bohol Province: Inabanga, 4 cases, 2 deaths; Jetafe, 2 cases; Loon, 1 case; Tubigon, 6 cases, 5 deaths. Occidental Negros Province: Slay, 2 cases, 1 death. Oriental Negros Province: Bals, 1 case, 1 death; Tanjay, 4 cases, 4 deaths. Samar Province: Calbayog, 18 cases, 18 deaths.
 † For 2 weeks.
 ‡ For the month of October.
 § Reports incomplete.

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

PLAGUE—Continued

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

Place	At- t- gust 1933	Sep- tem- ber 1933	Octo- ber 1933	No- vem- ber 1933	De- cem- ber 1933	Jan- uary 1934	Place	At- t- gust 1933	Sep- tem- ber 1933	Octo- ber 1933	No- vem- ber 1933	De- cem- ber 1933	Jan- uary 1934
Argentina (see also table above).....			6	4			Madagascar.....	C	77				
Bolivia.....	D		2	1			Peru.....	D	72	18	19	12	7
British East Africa (see also table above):	C			5			Senegal:	C	7	7			
Kenya.....	C		20	36	14	19	Dakar ¹	C		5	4	15	3
Uganda.....	C	13	97	83	63	49	Medina ¹	D	3	6	10	2	1
Ecuador.....	C		3				Tivaouane ¹	D	2	1	1	1	
Indo-China (see also table above):													
Cambodia.....	D	6	8	2	1	2							
Cochin-China.....	C	5	1		1	1							

¹ Incomplete reports.

SMALLPOX

Place	Week ended—												
	December 1933				January 1934				February 1934				
	2	9	16	23	30	6	13	20	27	3	10	17	24
Algeria:													
Algiers Department.....													
Constantine Department.....									2				
Angola. (See table below.)									1				
Arabia. (See table below.)													
Belgian Congo.....					4								
Bolivia. (See table below.)													
Bravai:													
Porto Alegre (alastirim).....	C	1	12	5	1	1	2						
Santos.....	C												
British East Africa:													
Kenya.....	C	21	30	52	202	6	14	16	13	20	13	1	66
Tanganyika.....	C												6

Mar. 2, 1934

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

SMALLPOX—Continued

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

Place	August 1933		September 1933			October 1933			November 1933			December 1933			January 1934
	Au- gust 1933	Sep- tem- ber 1933	September 1933		October 1933		November 1933		December 1933		Jan- uary 1934	December 1933			Jan- uary 1934
			1-10	11-20	21-30	1-10	11-20	21-30	1-10	11-20		21-30	1-10	11-20		21-30
Dahomey.....	C	8	6	1	2	8	15	9	5						
D.....	D	2	1					6							
Indo-China (see also table above).....	C	79	44	37	39	20	78	24	11	54	65	63	92		
D.....	D	23	19	13	15	5	18	10		10	12	7	14		
Place	Au- gust 1933	Sep- tem- ber 1933	No- vem- ber 1933	De- cem- ber 1933	Jan- uary 1934	Place	Au- gust 1933	Se- p- tem- ber 1933	De- cem- ber 1933	Jan- uary 1934	Se- p- tem- ber 1933	Octo- ber 1933	No- vem- ber 1933	De- cem- ber 1933	Jan- uary 1934
Angola.....	C	4				Mexico (see also table above).....	C	31	18			3	16	7	
Arabia.....	C			20		Morocco.....	C	1	2			289	391	132	1
Bolivia.....	D			4		Nyasaland.....	C	347	318			90	23	21	180
Costa Rica.....	C	15	34	21		Peru.....	C	56	90			103	214	323	128
Ecuador.....	C	2	3			Portugal (see also table above).....	C	89	103			27	31	21	
Greece (see also table above).....	C	10	4			Turkey.....	C	16	27			16	12	17	
	C	1	2				D	8	8						

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

TYPHUS FEVER—Continued

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

Place	July 30-31, Aug. 26, 1933	Aug. 27-28, Sept. 30, 1933	Oct. 1-28, 1933	Week ended—																		
				November 1933			December 1933			January 1934			February 1934									
				4	11	18	25	2	9	16	23	30	6	13	20	27	3	10	17			
Iraq:																						
Amara.....		1	4																			
Baghdad.....																						
Ireland, Northern: Londonderry.....	1											1										
Irish Free State:																						
Kerry County—Dingle.....			4	4								3										
Roscommon County—Castlerea.....																						
Waterford County—Lismore.....	1																					
Japan:																						
Aomori Prefecture.....															3	10						
Kobe.....			1																			
Osaka.....						1																
Latvia. (See table below.).....																						
Lithuania.....	11							12	3	9				9	3	9	12	20	21	14	15	
Mexico. (See also table below):																						
Mexico, D. F.....	1	16	14	15	10	7	6	8	13	19												
San Luis Potosi.....	1	1	1																			
Torreón.....	1	2																				
Morocco (see also table below).....	12	2	2																			
Palestine.....	2	4	4																			
Peru.....	15	24	20	5	5	1																
Teheran.....																						
Peru. (See table below.).....																						
Poland.....	66	51	66	34	41	21	24	51	47	64	93	79	97	99	150	169	161	161	161	155	155	
Rumania. (See table below.).....	D	6	1	5	3	2	5	4	4	4	4	3	6	6	13	9	4	4	4	15	11	
Spain: Madrid.....																						
Syria.....	2	2	1																			
Trans-Jordan.....	2																					
Tunisia:																						
Tunis.....																						
Tunisia: Provinces.....			1	2																		
Turkey. (See table below.).....																						
Union of South Africa. (See table below.).....																						
Yugoslavia. (See table below.).....																						

1 Incomplete reports from San Pedro, Chile, for the month of November 1933 show 113 cases of typhus fever.

Place	Aug- 1933	Sep- 1933	Octo- 1933	Nov- 1933	Dec- 1933	Jan- 1934	Aug- 1933	Sep- 1933	Octo- 1933	Nov- 1933	Dec- 1933	Jan- 1934
	279	259	129	8	365	365	60	64	55	341	137	269
Basutoland.....	C						C					
Bolivia.....	C	34	99	3	8		C	13	28	35	180	269
Chosen.....	C	1	4	1	12	4	C	9	20	23	27	52
Czechoslovakia.....	C	4	4	3	5	3	C	141	166			
Greece.....	C	4	5	3	6	5	C	43	42			
Guatemala.....	C	1	42				C	140	183			
Latvia.....	C	19				76	C	103	24			8
Mexico (see also table above).....	C	14	2	2	1	8	C	33	38	13	66	208
Morocco (see also table above).....	C						C					

YELLOW FEVER

Place	Week ended—																		
	June 25- July 2, 1933			October 1933			November 1933			December 1933			January 1934						
	July 29, 1933	Aug. 26, 1933	Aug. 27- Sept. 30, 1933	7	14	21	28	4	11	18	25	2	9	16	23	30	6	13	20
Brazil:																			
Ceara State: St. Mathew.....			1																
D.....			1																
Pernambuco State:																			
Granito.....	2																		
D.....	2																		
Novo Exu I.....	1																		
D.....	1																		
French West Africa:																			
Guinea.....			1																
D.....			3																
Niger Territory.....			2											2					
D.....			2																
Gold Coast:																			
Dunkwa.....																			
C.....																			
D.....																			
Keta.....																			
N'Kaw Kaw.....																			
C.....																			
D.....																			
Togoland.....																			
C.....																			
D.....																			

See footnotes at end of table.

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

YELLOW FEVER—Continued

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

Place	June 25- July 30, 1933	July 30- Aug. 26, 1933	Aug. 27- Sept. 30, 1933	Week ended—													
				October 1933				November 1933				December 1933				January 1934	
				7	14	21	28	4	11	18	25	2	9	16	23	30	6	13	20
Ivory Coast: Abengourou.....																	
Nigeria: Kano.....					1												
Senegal:					1												
Bakel.....		2	2														
Birkelane.....																	
Dakar.....																	
Kafrine.....																	
Kaolak.....																	
St. Louis.....	1																
Sehikotane.....																	

1 2 cases of yellow fever with 2 deaths were reported in Novo Exu, Pernambuco State, Brazil, during the month of June 1933.

- 2 Suspected
- 3 Includes 1 suspected death.
- 4 Imported.