PUBLIC HEALTH REPORTS

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CURRENT PREVALENCE OF COMMUNICABLE DISEASES IN THE UNITED STATES 1

May 17-June 13, 1936

Influenza.—The number of cases of influenza dropped from 11,783 for the 4 weeks ended May 16 to 3,324 for the 4 weeks ended June 13. The incidence was about 65 percent above that for the corresponding period in each of the 3 preceding years. In each geographic area, except the Mountain and Pacific and South Central, the disease had dropped to about the normal seasonal level. The minor epidemic of the past winter started in the West and spread into the South Central regions. While the incidence has dropped considerably from the high peak attained in March, the number of cases reported from each region still remains the highest in recent years. The general death rate, which usually reflects the presence of influenza, fluctuated considerably, but the average rate (14.4) in a group of large cities for the 4-week period was approximately the same as for the corresponding period in 1935.

Poliomyelitis.—There were 89 cases of poliomyelitis reported for the 4 weeks ended June 13. The epidemic of 1935 began in North Carolina about this time, and during this period in that year 240 cases were reported for the country as a whole; in 1934 the epidemic that started in California was in progress and 911 cases were reported for this period. For the more normal years of 1933, 1932, and 1931 the numbers of cases for the corresponding period were 61, 108, and 124, respectively.

Meningococcus meningitis.—The number of cases of meningococcus meningitis dropped from 912 for the preceding 4-week period to 532 for the current period. For the first time since this disease began to increase in the winter of 1934 the incidence for a 4-week period fell below that for the corresponding period in the preceding year. In 1935 the number of cases reported for this period was 568, the highest incidence since 1929, when 919 cases were reported. In the current period the South Central regions reported about 75 percent increase

¹ From the Office of Statistical Investigations, U. S. Public Health Service. These summaries include only the 8 important communicable diseases for which the Public Health Service receives weekly telegraphic reports from the State health officers. The number of States included for the various diseases are as follows: Typhoid fever, 48; poliomyelitis, 48; meningococcus meningitis, 48; smallpox, 48; measles, 47; diphtheria, 48; scarlet fever, 48; influenza, 44 States and New York City. The District of Columbia is counted as a State in these reports.

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over last year's figure and the South Atlantic region about 20 percent increase. In the New England and Middle Atlantic regions the current incidence was about on a level with that of last year, while from other regions decreases ranging from 40 to 50 percent were reported. States in which the incidence is still considerably above the seasonal expectancy are Kentucky (57 cases), New York (46), Pennsylvania (39), Virginia (36), West Virginia (26), Massachusetts (24), and North Carolina (21).

Scarlet fever.—The incidence of scarlet fever followed the usual seasonal decline during the 4 weeks ended June 13. The total number of cases (18,493) was only about 80 percent of the number reported for the corresponding period in 1935, but it was considerably above the incidence in the 6 preceding years. In the West North Central and Mountain and Pacific regions the incidence remained the highest in recent years, but in all other sections it was at about the usual seasonal level:

Smallpox.—The number of cases of smallpox reported for the 4 weeks ended June 13 was 812. The disease still remained unusually prevalent in the North Central and Mountain and Pacific regions. The largest numbers of cases were reported from Iowa (109), Missouri (94), South Dakota (76), Kansas (75), Illinois (71), Nebraska (67), Wyoming (53), Montana (39), Oregon (36). No cases were reported from the New England and Middle Atlantic regions, 32 were reported from the South Central, and only 4 from the South Atlantic. For the country as a whole the current incidence was highest since 1932 when, owing to an outbreak in the South Central regions, 900 cases were reported for this period. The current incidence compares with 4,042 and 3,001 for the corresponding period in the years 1930 and 1931, respectively.

Typhoid fever.—For the country as a whole the typhoid situation was very satisfactory; 737 cases were reported for the 4 weeks ended June 13, the lowest incidence for the corresponding period in the 8 years for which these data are available. In each geographic section, except the West North Central, and Mountain and Pacific, the incidence fell below that of last year. In the West North Central region, Iowa with 16 cases and Kansas with 55 (51 of which occurred in Leavenworth) placed the incidence in that section on a level with that of last year. New Mexico with 24 cases and California with 46 cases seemed mostly responsible for a 60 percent increase over last year in the Mountain and Pacific regions.

Diphtheria.—The number of cases of diphtheria reported for the current 4-week period totaled 1,487. The incidence was about 15 percent below that of each of the 2 preceding years and 20 percent below that of 1933. Each geographic region has shared in the favorable diphtheria situation that has existed for some time. A gradual

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decline has been in progress, and for the country as a whole the current incidence compares favorably with approximately 5,200 cases for this period in 1929.

Measles.—For the 4 weeks ended June 13 the reported cases of measles totaled 44,745. The number was less than 50 percent of that for the corresponding period in each of the years 1935 and 1934 and about 15 percent below the average for the 5 preceding years for which these data are available. The incidence still remained rather high in the Mountain and Pacific regions. The New England and Middle Atlantic sections reported about the normal seasonal incidence, while in the North Central regions it was somewhat below the expectancy.

Mortality, all causes.—The average mortality rate from all causes as reported by the Bureau of the Census for the 4 weeks ended June 13 was 11.4 per 1,000 inhabitants (annual basis). The rates for the separate weeks were 11.7, 10.9, 11.6, and 11.3, respectively. The average rate for this period in the years 1930 to 1935, inclusive, was 11.3. In only one week (ended May 30) has the rate for 1936 been below the rate for the corresponding week of 1935. A minor influenza epidemic accounts for at least part of the excess.

MORTALITY FROM CERTAIN CAUSES DURING THE FIRST QUARTER OF 1936 1

This report presents mortality data for 25 States, the District of Columbia, and Hawaii for the first quarter of 1936, with comparative data for recent years. In addition to the death rate from all causes, rates are shown for 17 specific causes, 4 groups of causes, and for infant and maternal mortality.

The rates are computed from current and generally preliminary reports furnished by State departments of health. Because of some lack of uniformity in the method of classifying deaths according to cause, some delayed death certificates, and various other reasons, these preliminary rates cannot be expected to agree in all instances with final rates published by the Bureau of the Census. The final figures are based on a complete review and retabulation of the individual death certificates from each State. The preliminary rates given in the accompanying table are intended to serve as a current index of mortality until final figures are available.

The populations used for 1934 and 1935 are the official estimates as published by the United States Bureau of the Census on May 11, 1936. These estimates are corrected to agree with the population of the United States as computed from births, deaths, immigration,

¹ From the Office of Statistical Investigations, U. S. Public Health Service.

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and emigration since the 1930 census. Since no estimates have been prepared for States for 1936, the figures used are an extrapolation from the official 1935 estimates, with the same annual increment as that used by the Bureau of the Census for the year 1935 as compared with 1934. Populations for 1933 were estimated by making the increment for 1934 over 1933 the same as that used by the Census Bureau for 1935 as compared with 1934.

At the top of the table, rates are given for a group of 20 ² States with an estimated population of 70,000,000 that have data available for the first 3 months of each of the 4 years 1933-36. For individual States, data are shown for the first 3 months or for as many of those months as are now available, with rates for corresponding periods of 2 preceding years. Comparisons discussed in the following refer only to the 20 States with complete data.

The death rate from all causes for the first quarter of 1936 was 12.5 per 1,000 (annual basis), as compared with 11.9, 11.9, and 11.7 in the first quarters of 1935, 1934, and 1933, respectively. In 18 of the 20 States the rate was higher in the first quarter of 1936 than in the same quarter of 1935.

Infant mortality does not show this rise in 1936, being 58 per 1,000 live births, as compared with 64, 64, and 66 in the 3 preceding years. The decrease in infant mortality was just as general as the increase in the total mortality; 18 of the 20 States had lower infant mortality rates in the first quarter of 1936 than in the same quarter of 1935.

The death rates from measles and whooping cough were both much lower for the first quarter of 1936 than for the first quarter of 1935. In both 1934 and 1935 these two diseases were exceptionally prevalent. The scarlet-fever rate was slightly more in 1936 than in any of the 3 preceding years. Considering individual States, an increase from 1935 occurred in 10 States and a decrease in the other 10 States included in the data. Diphtheria showed a small decrease from 1935 in 14 of the 20 States, in 3 other States the rates for the 2 years were the same, and only 3 States showed an increase. Meningitis was definitely higher in 1936 than in immediately preceding years, 13 of the 20 States having higher rates in 1936 than in 1935.

When the general death rate shows a widespread increase, the most usual cause is an influenza epidemic. This year the death rate from all causes increased in 18 of the 20 States, but deaths credited to influenza decreased in 16 States. Pneumonia, however, does not confirm the absence of respiratory disease as the cause of the increased death rate, for the pneumonia rate increased from 126 to 142 per 100,000—an increase which was shown by 13 of the 20 States. In a former report 3 attention was called to an epidemic-like rise in the

² See footnote to table for States included.

³ Public Health Reports, June 5, 1938.

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general death rate in February and March of 1936 which was accompanied by a sufficient number of influenza case reports to identify it as due to influenza and pneumonia; however, there was little mention of the epidemic presence of influenza in the current press or medical journals.

Tuberculosis showed a continuation of its regular decline, but only 12 of the 20 States participated in the decrease from the 1935 level.

Diseases of the heart, nephritis, cerebral hemorrhage, cancer, and diabetes all showed a continuation of their usual upward trend, 13 to 19 States showing increases in these diseases in 1936 over 1935. The increases were particularly large for diseases of the heart (from 280 per 100,000 in 1935 to 311 in 1936, with 19 of the 20 States showing increased rates), cerebral hemorrhage (89 per 100,000 in 1935 to 97 in 1936, with 17 of the 20 States showing increased rates), and diabetes (27 per 100,000 in 1935 to 30 in 1936, with 16 of the 20 States showing increased rates).

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Pennsylvania, South Dakota, Tennessee, Virginia, West Virginia, and Wisconsin (estimated population as of July 1, 1836, 70,188,000). Includes all of the States with available data for the 4 years covered by this summary. For a few causes, 1 to 3 States were omitted because of missing data.

3 Data not available.

3 Data not available.

4 January and February.

	Nephritis (130-152)	2,2,2,3	55 5	25.05 25.05 25.05 25.05	¥9.	2.00 4.00 4.00	25.28 5.84	3 23 3	444 444
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(annual basis)	Cerebral hemorrhage, appoplexy (828, b)	35 85 75 80 96 90	€£ €	<u> </u>	117.1	88E	86.98 86.98	1111 1111	888 8
tion (a	Dissesses of the nerv- ous system (78-89)	116.4 106.7 81.3	66 6	123.0	87	58 9	186.8	882	24 K
Death rate per 100,000 population	Dispetes (59)	3.8 8.88 4.68.88	12 12 12 10 0 0 1	32.0 32.0	8.8	+440 1151	#25 #25	### ###	825
00,000	Cancer, all forms (52-58)	147.0 139.9 138.6	343 340	113. 1 106. 2 101. 9	132.6	≅8 8	<u> </u>	28.2 28.2	585
e per 10	emroi lis ,alcencinoster T (28–82)	62.1 60.8 64.1	3.3.8. 	55.5 52.6 52.6	2.88 8.60	4.44	386	***	<u> </u>
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8,8	Maternal mortality	கு கூற கூகர	44.4	200	44.	@ Q &	4.7.6	F. 80 F.	444
Rate per 1,000 live births	All except mailteney tions and early intency	ដ្ឋមន្ត	5 55	822	28	555	222	\$ 23	999
Rate	Total infant mortality	388	643	288	\$2	3383	322	282	283
-ndod (All causes, rate per 1,000 lation (annual basi	स् <u>वं</u> स्	444 444 444 444 444 444 444 444 444 44	add a	44	900	900		400
	State and period		North Carolina: 1985 1985	1990 1990 1990	1986 1986 1986	1986 1986 1984	South Jakota: 1926 1926	1986 1986 1984	1636 1636 1666

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No deaths.
Data not available.
Immery and February.

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Regulations of the Surgeon General Governing Allotments and Payments to States From Funds Appropriated Under the Provisions of Section 601, Social Security Act, for the Fiscal Year 1937

I. COMPLIANCE WITH LAW AND REGULATIONS

In order that funds allotted to the States may be of maximum use in assisting States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health service, payments made to a State under authority of Title VI of the Social Security Act will be certified by the Surgeon General only after such State has complied with the provisions of the act and the regulations authorized thereunder.

II. ALLOTMENTS

Funds appropriated by the Congress for the fiscal year 1937 and balances remaining unpaid to the States at the end of the fiscal year 1936 will be allotted to the States on the basis of (1) population, (2) special health problems, (3) financial needs, as provided in Title VI of the Social Security Act of August 14, 1935, in accordance with the following percentage distribution:

1. POPULATION

Allotments amounting to 57½ percent of the available appropriations will be made to the several States in the ratio which the population of each State bears to the population of the United States as shown by the last decennial Federal census.

2. SPECIAL HEALTH PROBLEMS

Allotments amounting to 22½ percent of available appropriations will be made to the several States on the basis of special health problems, including the training of personnel, as determined by the Surgeon General.

3. FINANCIAL NEEDS

Allotments amounting to 20 percent of available appropriations will be made to the States on the basis of the financial needs of such States.

III. BALANCES FOR THE FISCAL YEAR ENDING JUNE 30, 1937

Unpaid balances of allotments at the end of such fiscal year shall not be paid but shall remain in the appropriation for reallotment to the States in the succeeding fiscal year in accordance with the provisions of subsection (b), section 602, of the Social Security-Act.

Unexpended balances remaining from quarterly payments made to the States in accordance with the provisions of subsection (c) of section 602 of the Social Security Act may be retained by the States and utilized for carrying out the purposes specified in section 601 in any succeeding quarter or fiscal year subject to the following conditions:

- (1) Balances required under these regulations to be matched with State or local funds must be so matched before they are expended.
- (2) Budgets for the expenditure of such balances must be submitted and approved prior to such expenditure.

IV. SUBMISSION OF PLANS

To be eligible to receive payments from allotments, each State shall have presented (a) a comprehensive statement of the present State health organization, programs and budget; (b) a proposed plan for extending and improving the ad-

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ministrative functions of the State department of health, and (c) a proposed plan for extending and improving local (county, district, city) health services to to be carried out with the assistance of funds available under the provisions of Title VI of the Social Security Act.

V. SUBMISSION AND APPROVAL OF BUDGETS

Before payments shall be made to any State, the State health officer shall—

(a) Submit to the Surgeon General and secure approval of a proposed budget, for each project, on forms supplied by the Public Health Service. The budget shall show the sources, purposes, and amounts of all funds, the amounts requested from the Public Health Service for the fiscal year, together with such other information relating to such proposed project as the Surgeon General may require.

(b) Certify that State and local expenditures have not been replaced or curtailed through the use of Federal funds.

VI. SUPPLEMENTAL AND REVISED BUDGETS

Supplemental budgets for the purpose of utilizing unpaid balances of allotments, or unexpended balances from payments made on the basis of previously approved budgets, may be submitted for any subsequent quarter after the beginning of the fiscal year, for (a) new projects or (b) adding new items to existing budgets.

Revisions of existing budgets shall be submitted whenever the rate of expenditure for any budget item is to be increased; but not when, through lapses or otherwise, the expenditures are to be decreased. Such savings from approved budgets may be transferred to other budgets after such revised budget is submitted for approval.

Supplemental and revised budgets submitted in any quarter after the beginning of the fiscal year shall not be made effective prior to the beginning of the next succeeding quarter: *Provided*, That exceptions to this rule may be made, with the approval of the Surgeon General, when necessary to meet emergencies.

VII. EXISTING APPROPRIATIONS NOT TO BE REPLACED

Payments to aid existing State or local projects will be supplemental to funds now being expended, and in no case shall such payments replace existing State or local appropriations for the purpose of relieving State or local authorities from expenditures now being made.

VIII. MATCHING WITH EXISTING PUBLIC FUNDS

Except as provided in regulation XI, one half of the amount allotted to States on the basis of population and for special health problems shall be available for payment when matched by at least an equal amount of existing appropriations of public funds for public health work.

IX. MATCHING WITH NEW PUBLIC FUNDS

Except as provided in regulation XI, one-half of the amount allotted to States on the basis of population and for special health problems shall be available for payment when matched by at least an equal amount of new appropriations of public funds for public health work made since January 1, 1935, or made prior to that date for the specific purpose of matching funds available under the provisions of the Social Security Act: Provided, That the Surgeon General in his discretion may permit not to exceed 50 percent of the money available for matching with new public funds to be matched with existing State appropriations for

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local health service where the State is already making a substantial appropriation for this purpose.

X. PAYMENTS ON THE BASIS OF SPECIAL HEALTH PROBLEMS

In the allotment of funds for special health problems, this term shall be interpreted to mean necessity arising out of high morbidity or mortality on a Statewide basis from particular causes, such as malaria, hookworm, bubonic plague, trachoma, typhus fever, special industrial hazards, and similar geographically limited diseases or other conditions that result in inequality of exposure to public health hazards among the States.

XI. TRAINING OF PERSONNEL

In order to meet the needs for properly qualified professional and technical personnel with which to conduct effectively the State and local health services, the sum of \$1,001,186 shall be set aside for the fiscal year 1937 and allotted to the States for this purpose. Of this sum \$888,186 shall be allotted among the States in the same ratio which the sum of other allotments to any State bears to the whole. The sum of \$113,000 shall be allotted to States on the basis of the special need of such States for the training of personnel in approved training centers.

XII. PURPOSES FOR WHICH TRAINING FUNDS MAY BE USED

Funds allotted to a State for the training of personnel may be used to pay living stipends, tuition, and traveling expenses of personnel employed or to be employed in the State and local health services, such training period not to exceed 1 year for any individual.

The Surgeon General will recommend to the States the maximum allowances for stipends, traveling, and other permissible items of expense for the training of personnel.

XIII. PAYMENTS ON THE BASIS OF FINANCIAL NEED

The funds to be allotted to the several States for the fiscal year 1937 on the basis of financial needs (\$1,776,373) shall be distributed among the States as follows:

- (a) A sum of \$510,000 shall be allotted equally among the States.
- (b) The remainder (\$1,266,373) shall be allotted among the several States on the basis of financial need as determined by the financial ability of the State expressed indirectly in terms of per-capita income.

Payment from the allotments made on these two bases of financial need will not be required to be matched with State or local funds.

XIV. METHOD OF PAYMENT TO STATES

Payments to the States shall be made in quarterly installments, subject to approval of the Secretary of the Treasury, to the Treasurer of the State or other State official authorized by law to receive such funds.

XV. CUSTODY AND DISBURSEMENT OF FUND

All such payments shall be held by the State official to whom made in a separate fund distinct from other State funds and shall be disbursed by him solely for the purpose or purposes specified in budgets approved by the State health officer and the Surgeon General and filed with such official.

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XVI. FINANCIAL REPORTS

The State health officer shall submit to the Surgeon General on forms provided for that purpose quarterly financial reports as follows:

(a) A quarterly project financial report for each budget in force; and

(b) A consolidated quarterly report summarizing all budgets.

The consolidated quarterly financial report must be certified also by the Treasurer; or other State official charged with the responsibility for disbursing funds.

The reports shall show the amount of Public Health Service funds actually expended, the actual expenditure of State and local funds, and such other information as the Surgeon General may from time to time require.

XVII. PROGRESS REPORTS OF ACTIVITIES

Quarterly reports of activities will be required by the Public Health Service from each State health department as follows:

(a) Activities of central administration and service projects pursuant to approved budgets shall be reported quarterly in duplicate and may be submitted in narrative form.

(b) A copy of the progress report from each local health project pursuant to approved budgets shall be furnished to the regional office on forms of the State

health department.

(c) A consolidated summary report for all local projects pursuant to approved budgets shall be made to the Surgeon General on forms provided by the Public Health Service for that purpose.

The listing of certain items on the summary report form referred to above should not be interpreted as requiring that all such activities be carried out in every local health project. Also, other activities not listed on the report form should be reported in an appropriate manner.

Statistical reports may be submitted with narrative reports wherever considered desirable by the State health officer.

XVIII. REPORTS OF ACTIVITIES AND EXPENDITURES FROM "OTHER AGENCIES" NOT REQUIRED

No detailed accounting of expenditures and no detailed reports of activities will be required for personnel and other expenditures paid from funds supplied by other agencies unless such funds are used for purposes of meeting the matching requirements of the Public Health Service.

THOMAS PARRAN, Surgeon General. Allolments to States from funds appropriated under the provisions of Section 601, Social Security Act, for fiscal year 1937, together with unpaid balances of allotments from the appropriation for fiscal year 1936

[Allotments recommended by the Surgeon General and approved by the Secretary of the Treasury]

		Allocation		on basis of th problems	Allocation	
State or Territory	Total	on basis of population	Special diseases and conditions	Training personnel	on basis of financial') needs	
Total	\$8, 881, 859	1 5, 107, 068	1 997, 232	\$1,001,186	\$1, 776, 373	
Alabama	243, 752	109, 694	17, 000	24, 689	92, 369	
Alaska	35, 291 57, 498	2, 458 18, 056	17, 000 22, 000	3, 575 5, 824	12, 258	
ArizonaArkansas	180, 324	76, 874	15,000	18, 265	11, 618 70, 185	
California	330, 826	235, 336	88, 500	46, 990	10,000	
Colorado	92, 239	42, 936	22, 400	9, 343	17, 560	
Connecticut	98,040	66, 610	11, 500	9, 930	10,000	
Delaware District of Columbia	31, 024 51, 943	9, 882 20, 182	8,000 16,500	3, 142 5, 261	10, 000 10, 000	
Florida	129, 630	60, 862	21, 082	13, 130	34, 556	
Georgia	262, 913	120, 566	17, 500	26, 630	98, 217	
Hawaii	53, 688	15, 268	14, 500	5, 438	18, 482	
IdahoIllinois	62, 859 406, 873	18, 448 316, 310	22, 400 39, 352	6, 367 41, 211	15, 644 10, 000	
Indiana	217, 781	134, 244	11, 500	22, 059	49, 978	
Iowa	193, 479	102, 426	9,800	19, 597	61, 656	
Kansas	140, 877	77, 972	9, 800	14, 269	38, 836	
Kentucky Louisiana	229, 928 177, 039	108, 382 87, 116	18, 500 11, 500	23, 289 17, 932	79, 757 60, 491	
Maine	67, 941	33, 056	9, 800	6, 882	18, 203	
Maryland	125, 433	67, 632	26,000	21, 692	10, 109	
Massachusetts	247, 464	176, 158	29, 500	31, 806	10,000	
Michigan	280, 293	200, 726	25,000	44, 567	10,000	
Minnesota Mississippi	200, 054 192, 767	166, 282 83, 312	15, 000 11, 500	36, 440 19, 525	42, 332 78, 430	
Missouri	238, 616	150, 446	23, 892	24, 169	40, 100	
Montana	63, 676	22, 286	21, 300	6, 450	13, 640	
Nebraska	113, 981	57, 120	9, 800	11, 545	85, 516	
Nevada	38, 471 48, 580	3, 774 19. 288	20, 800 9, 800	3, 897 4, 921	10,000	
New Hampshire New Jersey	217, 861	167, 524	18, 270	22, 067	14, 571 10, 000	
New Mexico	69, 157	17, 548	25, 500	7, 005.	19, 104	
New York	659, 620	521, 808	61,000	66, 812	10,000	
North Carolina	314, 406	131, 416	17, 500	53, 864	111, 626	
North DakotaOhio	77, 836 351, 313	28, 222 275, 522	14, 650 28, 000	7, 884 35, 584	27, 080 12, 207	
Oklahoma	185, 101	99, 322	9,800	18, 749	57, 230	
Oregon	80, 041	39, 536	19, 676	8, 107	12, 722	
Pennsylvania	500, 988	399, 244	41,000	50, 744	10,000	
Rhode IslandSouth Carolina	55, 633 182, 902	28, 496 72, 076	11, 500 20, 100	5, 685 18, 526	10,000	
South Dakota	79, 080	28,720	14, 650	8,010	72, 200 27, 700	
Tennessee.	255, 296	108, 464	19,000	39, 339	88, 493	
Texas	433, 837	241, 450	34, 500	43, 943	113, 944	
Utah	58, 409	21, 052	14, 700	5, 916	16, 741	
VermontVirginia	46, 613 214, 972	14, 906 100, 392	13, 000 19, 000	4, 721 26, 268	13, 986 69, 312	
Washington	100, 439	64, 806	15, 460	10, 173	10, 000	
West Virginia	158, 929	71,680	25,000	16,098	46, 151	
Wisconsin	183, 203	121, 830	9, 800	18, 556	33, 017	
Wyoming	42, 943	9, 350	18, 900	4, 350	10, 343	
	•					

One-half of the amounts in this column is to be matched with existing funds and one-half with new funds.

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DENTAL ACTIVITIES IN STATE DEPARTMENTS AND INSTITUTIONS

A survey of dental activities of State departments (health, education, welfare) and institutions of the United States was made by the Public Health Service at the request of the American Dental Association, with the approval of a committee of the State and Provincial health authorities, and the report of this survey has recently been published.¹

This report is one of three parts of a dental study initiated by the American Dental Association. The other two problems have to do with the "Needs of the public from a dental standpoint" and "Means and methods of meeting the problem."

A survey of the incidence of dental defects in approximately 1,500,000 school children in 26 States was made by the members of the American Dental Association. The statistics of this survey were compiled and tabulated by the Public Health Service and have been published in Public Health Bulletin No. 226.²

The survey of dental activities in State departments and institutions is the first of its kind ever made in the United States. It covers a 5-year period (1928 to 1933), which includes both predepression and depression years.

In those departments having dental activities an attempt was made, with various degrees of success, to present detailed information on administration, methods, expenditures, and accomplishments. It is believed that this survey, together with the information obtained from the survey of dental defects among school children, will serve the purpose for which it was intended, viz, to assist the dental profession and departments of health and education and institutions to more efficient methods for coping with the most prevalent of diseases, dental caries.

DEATHS DURING WEEK ENDED JUNE 13, 1936

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

	Week ended June 13, 1936	Corresponding week, 1935
Data from 86 large cities of the United States: Total deaths. Deaths per 1,000 population, annual basis. Deaths under I year of age. Deaths under I year of age per 1,000 estimated live births. Deaths per 1,000 population, annual basis, first 24 weeks of year. Data from industrial insurance companies: Policies in force. Number of death claims. Death claims per 1,000 policies in force, annual rate Death claims per 1,000 policies, first 24 weeks of year, annual rate.	8, 094 11. 3 574 52 13. 1 68, 643, 260 12, 498 9. 5 10. 7	7, 621 10. 6 524 48 12. 3 67, 827, 973 13, 413 10. 3

¹ Public Health Bulletin No. 227.

² See Public Health Reports for June 26, 1936, for a brief review of the Bulletin.

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 20, 1936, and June 22, 1935

Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 20, 1936, and June 22, 1935

	Diph	theria	Influ	Influenza		Measles		Meningococcus meningitis	
Division and State	Week ended June 20, 1936	Week ended June 22, 1935							
New England States: Maine New Hampshire	2			1	534 6	188	0	0	
Vermont	2 2 2 3	9 1			301 834 13	39 324 362	0 0 3	0 1 0	
Connecticut Middle Atlantic States: New York New Jersey	39 8	28 · 7	1 4 9	1 11 1	107 1,985 647	361 2, 337 1, 825	0 9 1	28 5	
Pennsylvania. East North Central States: Ohio. Indiana.	40 17 6	37 20 7	11 5	4 9	587 217 12	1, 644 653 66	7 4 0	15 9 1	
Illinois Michigan Wisconsin West North Central States:	42 21 2	46 8 3	23 18	13 1 28	36 86 186	976 1, 977 1, 561	10 3 2	4 2 1	
Minnesota Iowa Missouri North Dakota	4 3 13	4 7 14 2	1 32	51 1	103 6 9 2	140 41 95 31	1 0 1 0	2 0 4 1	
South Dakota Nebraska Kansas South Atlantic States:	3 2 5	1 8 2	11	21	19 5	9 50 204	0	0 1 0	
Delaware Maryland ² District of Columbia Virginia ³ ⁴	12 14 10	1 4 6 11		2 1	17 265 107 112	15 119 12 222	0 4 1 9	1 8 11 4	
West Virginia North Carolina 3 4 South Carolina Georgia 4	4 8 1	7 10 7 8	18 1 52	15 52	40 28 19	145 13 21	5 9 1 0	3 3 0	
Florida Rast South Central States: Kentucky	2	5 7	10 8	3	7 29	131	8	1 5	
Tennessee Alabama ⁴ Mississippi ³	3 9 3	3 8	20 5	15 17	11 1	33 35	2 1	0 1 2	

See footnotes at end of table.

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Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 20, 1936, and June 22, 1935—Continued

	·-			•				
	Diph	theria	Infli	uenza	Me	asles	Mening men	gococcus ingitis
Division and State	Week ended June 20, 1936	Week ended June 22, 1935						
West South Central States: Arkansas Louisiana	1 16	1 16	4 8	10 11	8	15	0	0
Oklahoma Texas Mountain States:	5	5 22	14 84	26 30	158	13 22	3 2	1 2
Montana 3 Idaho 3 Wyoming 3 Colorado		1	2	3	3 18	112 5 54	1 0 0	0
New Mexico	1 3 4	10	1 18	2	21 16 52	132 13 6	0	0 0 0 0 0
Utah ¹ Pacific States: Washington	1				41 178	5 269	0	1
Oregon California	22	36	517	14 24	1, 107	109 928	4	8
TotalFirst 25 weeks of year	12, 789	386 15, 101	884 138, 966	371 101, 981	7, 968 246, \$88	14, 825 656, 208	101 5, 354	133 3, 536
	Poliomyelitis		Scarlet fever		Smållpox		Typhoid fever	
Division and State	Week ended June 20, 1936	Week ended June 22, 1935						
New England States: Maine	0	0	15	13	0	0	1	
New Hampshire Vermont Massachusetts Rhode Island	0 0 0 1	1 0 2 0	7 14 133 24	9 5 155 14	000	0	0 4 3 0	2 0 2 0 1
Connecticut	0 1	1 12	21 449	46 540	ŏ	Ŏ O	0 11	1 10
Pennsylvania East North Central States:	0	0	184 416	94 353	0	0	26 26	9
Ohio	0 0 4 1	2 1 0 1 1	92 49 301 283 296	213 54 661 143 311	0 1 12 0 4	0 1 1 0 6	6 1 9 2 4	11 1 12 8 0
West North Central States: Minnesota	0	0	120 76 80	92 56 18	17 17 0	4	0 4 14	11 0 9 1
North Dakota South Dakota Nebraska Kansas	0 0 0 1	0	29 14 31 90	31 5 33 25	17 9 4	2 0 15 34 24	2 0 0 4	1 0 4 1
South Atlantic States: Delaware Maryland ²	8	0	36	3 40	8	0	0 4	1 4 0
District of Columbia	0 0 1	0 16 0 60	5 19 13 17	7 12 26 13	0 0 0 1	0 0 0 3 0	6 4 9	10 12 18 82
North Carolina ^{3 4} South Carolina Georgia ⁴	0	2 0	ıı́ l.	10	5		12	

See footnotes at end of table.

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Cases of certain communicable diseases reported by telegraph by State health officers for weeks ended June 20, 1936, and June 22, 1935.—Continued

	Polion	yelitis	Scerie	ot fower	Smallpex		Typhoid fever	
Division and State	Week ended June 20, 1936	Week ended June 23, 1935	Week ended June29, 1936	Week ended June 22, 1935	Week ended June 20, 1936	Week ended June 22, 1935	Week ended June 20, 1936	Week ended June 22 1935
East South Central States:								
Kentucky	0	1	14	19	1	0	4	11
Tennessee	0	1	10.	12	0	9	17	11 22 18
Alabama 4	9	•	8	2	0	0	17	18
Mississinni 2	0	0	6	4	1.	0	8	16
West South Central States:						1	,	
Arkansas	0	1		6	Ð	3	2	16
Louisiana	1	3	5.	11	1	0	16	21
Oklahoma 5	0	0	10 27	. 14	8	. 1	10	14
Texas 4	1	5	27	31	2	1	10	14
Mountain States:								
Montana :	0·	1	22	1.5	21	3	1	3
Idaho 1	•	0	6		0	0	1	3 0 0
Wyeming	ė l	0	17	14	7	26	0	0
Colorado	Ó.	Ō	18	61	0	1	0	Ō
Colorado New Mexico	ā l	i	17 18 19	5	Ď.	2	1	Ă
Arizona	ŏl	ī	9	9	ő l	Ō	2	2
Utah 2	ì	ā	20	39	Ž l	Ō	õ	ī
Pacific States:	- 1	٠ ١		_			,	-
Washington	0	•	. 20	34	0	16	3 1	1
Oregon	ĭl	ă	47	17	ĭ	-4	7 1	i
California		32	219	149	7	7	19	Ř
~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~								
Total	26	146	3, 327	3, 426	144	171	271	371
First 25 weeks of year	476	865	172, 219	168, 735	5, 575	4,700	3, 307	4,084

SUMMARY OF MONTHLY REPORTS FROM STATES

The following reports of cases reported monthly by States is published weekly and covers early those States from which reports are received during the current week.

State	Menin- gococ- cus menin- gitis	Diph- theria	Influ- enza	Mala- ria	Mos- ales	Pel- lagra	Polio- mys- litis	Soarlet fever	Small- poz	Ty- phoid fever
March 1808										
Massachusetts	39	22			3,975	2	0	1, 307	0	5
April 1988					Ť					
Massachusetts	28:	23		1	5, 569		2	1, 217		1
May 19 36			3							
Georgia	12	21	127	355	33	46	. 0	51		33
Idaho	2	1	9		242			89	24 73	4
Illinois	45 3	144	184	16	133	5	2	2,318	73	20
Kansas	3	26	32	3	46	1	0	944	01	6
Maryland	35 27	17	23	2	1, 751	1	0	188	9	6
Massachusetts	12	26 21		1	6, 104		16	924		9
Minnesota	21	65	6 679	124	2, 139 143	i	1	1,308 1,004	25 58 48 29	4 8 5
Montana	5	19	60	2	25	1	U	318	48	
North Dakota	3	5	38	-	์กับ		0	214	20	ā
Rhode Island	6	3	36		272		ĭ	98	70	ã
Tennessee	32	32	635	228	185	56	3	83	š	0 20 44
Texas	28	155	1,688	2, 172	1, 855	101	5	295		44
Virginia	45	54	388	19	651	36	ž	248	1	27 28
West Virginia	37	39	146		337		ī	157	ŎΙ	28

New York City only.
 Week ended earlier than Saturday.
 Rocky Mountain spotted fever, week ended June 20, 1928, 20 cases, as follows: Virginia, 5; North Carolina, 1; Montana, 3; Idaho, 3; Wyoming, 8.
 Typhus fever, week ended June 20, 1936, 32 cases, as follows: Virginia, 1; North Carolina, 1; Georgia, 20; Alabama, 6; Texas, 4.
 Exclusive of Oklahoma City and Tulsa.

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March 1986		May 1936—Continued	i	Mey 1936—Continued	l
Massachusetts:	Cases	Epidemic encephalitis—		Septic sore throat—Con.	Case
Anthrax	2	Continued.	Cases	Illinois	1.
Chicken pox	1, 137	Rhode Island	. 2	Kansas	1
Chicken pox	2	Tennessee	. 1	Maryland	
Mumps	2, 477	Texas	. 5	Massachusetts	1
Paratyphoid fever	1	Virginia	. 1	Minnesota	
Rabies in animals	9	German measles:		Missouri	5
Septic sore throat	28	Illinois	. 58	Montana Rhode Island	1
Typhus fever	1	Kansas	10 445	Tennessee	1
Undulant fever Whooping cough	399	Maryland Montana	7	Virginia	•
Whooping cought	000	Tennessee	16	Tetanus:	•
April 1936		Hookworm disease:		Illinois	,
		Georgia	583	Kansas	- 3
Massachusetts:		Tennessee	. 2	Maryland	
Anthrax	1	Impetigo contagiosa:		Missouri	Ī
Chicken pox	895	Montana	. 6	Tennessee	1
Dysentery (amoebic)	1	Tennessee	4	Virginia	- 2
Epidemic encephalitis .	2 174	Lead poisoning:		Trachoma:	
Mumps	2, 174	Illinois	5	Illinois Missouri	262
Rabies in animals Septic sore throat	29	Mumps: Georgia	225	Missouri	33
Undulant fever	3	Idaho		Montana	,
Whooping cough	363	Illinois		North Dakota	34
Whooping coughing		Kansas	209	Tennessee	01
May 1936		Kansas Maryland	1, 135	VirginiaTularaemia:	
		Massachusetts	1, 889	Tularaemia:	
Actinomycosis:		Missouri	494	Georgia Maryland	•
Illinois	1	Montana	328	Minnesota	î
Tennessee	1	North Dakota	51	Missouri	î
Chicken pox:		Rhode Island	138 209	Texas	2
GeorgiaIdaho	81 27	Tennessee	1 610	Virginia	1
Illinois		Virginia		Typhus fever:	
Kansas	234	West Virginia	69	Georgia	29
Kansas Maryland	340	Ophthalmia neonatorum:	•••	Texas	30
Massachusetts	877	Maryland	1	Undulant fever:	_
Minesota	351	Missouri	3	Georgia	
Missouri	216	Tennessee	3	IdahoIllinois	10
Montana	180 30	Virginia	1	Kaneae	10
North Dakota Rhode Island	46	Patatyphoid fever: Georgia	3	Kansas Maryland	3
Tennessee	79	Illinois	i	Massachusetts	ă
Texas	430	Kansas	51	Minnesota	6
Virginia	244	Minnesota	ĩ	Missouri	3
West Virginia	85	Tennessee	2	Rhode Island	1
Conjunctivitis:	_	Texas	6	Tennessee	1
Georgia	1	Puerperal septicemia:	_	Texas Virginia	
Dengue: Georgia	12	Tennessee	3	Vincent's infection:	-
Texas	12	Rabies in animals:	36	Illinois	19
Dysentery:	_	Maryland	2	Kansas	25
Georgia (amoebic)	14	Massachusetts	22	Maryland	11
Georgia (bacillary)	17	Missouri	10	Montana	4
Illinois (amoebic)	11	Texas	19	North Dakota	7
Illinois (amoebic car-		Rabies in man:		Tennessee	13
riers)	42	West Virginia	1	Whooping cough:	
Illinois (bacillary)	4 2	Rocky Mountain spotted		Georgia	59
Maryland (bacillary) Massachusetts	3	fever:		Idaho	709
Missouri	5	Idaho	10	Illinois	118
Tennessee (amoebic)	2	Illinois	3	Kansas Maryland	267
Missouri	7	Montana	30	Massachusetts	331
Texas (amoebic) Texas (bacillary)	1	Virginia	ĩ	Minnesota	148
Texas (bacillary)	83	Scabies:	-	Missouri	128
Virginia (diarrhea in- cluded)	20	Montana	1	Montana	42
Epidemic encephalitis:	36	Tennessee	9	North Dakota	2
Georgia	2	Screw worm infection:	1	Rhode Island	6 110
Illinois	7	Georgia	1	Tennessee	315
Kansas	ż	Septic sore throat:		Texas	241
Kansas Maryland	1	Georgia	21	Virginia	
Missouri	3 1	Idaho	4 1	West Virginia	61

PLAGUE INFECTION IN MODOC COUNTY, CALIF.

The Director of Public Health of California has reported plague infection, proved by animal inoculation on June 3, 1936, in fleas taken from 178 squirrels shot on ranches in Modoc County, Calif., 4 to 6 miles south of Pine Creek.

CASES OF VENEREAL DISEASES REPORTED FOR APRIL 1936

These reports are published mosthly for the information of health officers in order to furnish current data as to the prevalance of the venereal diseases. The figures are taken from reports received from State and city health officers. They are preliminary and are therefore subject to correction. It is heped that the publication of these reports will stimulate more complete reporting of these diseases.

Reports from States

	Syphi lis		Generates		
	Cases reported during ments	Monthly case rates per 10,000 pepulation	Cases reported during month	Monthly case rates per 19,000 population	
	677	3, 24	201	1.07	
	55	1.29	117	2.56	
	287	ï2	184	.82	
	1, 261	2 06	1, 296	1.96	
	4, 400		2, 200		
	16 5	1.09	86	. 52	
	89	3.66	ű	1.82	
	181	3.64	148	2.98	
	100	1.26	92	. 58	
	1.636	5, 62	851	1.89	
	رم	0.00	ê	10	
	1, 228	1.79	966	1. 21	
	7 119	.36	94	. 28	
	111	.45	119	.48	
	63	.33	53	.10 .29	
	188		189	:71	
	188 200 :	. 71			
·····		1. 24	95	· <u>11</u>	
	\$ 3	.41	46	. 57 1. 25	
	880	4.97	204	1. 2	
	514	1. 19	496	1.1	
	973	1.91	455	. 8	
	321	1. 23	229	.8	
	1, 229	5. 97	1,963	9.4	
	614	1.67	359		
	27	.69	36	.6	
	25	. 18	44	3	
	س		778	04	
	15	.32	19	. 4(
	471	1.11	164	. 39	
	\$4 \$4	1. 24	39	. 89	
	7. 6t3	5.83			
			1, 547	1. 18	
	1, 224	3. 71	451	1. 37	
	17	. 25	.26	.41	
	568	. 83	197	. 24	
	192	.74	123	. 50	
	90	. 81	168	1.64	
	259	. 26	162	. 10	
	130	1.84	56	. 79	
	206	1. 18	284	1. 62	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10	. 14	14	. 20	
	888	3. 32	445	1. 66	
	801	. 59	114	. 19	
		.			
	21	. 58	21	. 58	
	1, 200	4. 91	219	. 90	
	134	. 83	187	1. 16	
	188	1. 05	107	. 60	
	34	. 11	102	. 34	
1-	24, 979	2.01	12,419	1.00	

See footnotes at end of table.

Reports from cities of 200,000 population or over

	Вур	hilis	Gonorrhea		
	Cases reported during month	Monthly case rates per 10,000 population	Cases reported during month	Monthly case rates per 10,000 population	
Akron, Ohio	20	. 74	7	. 26	
Atlanta, Ga	129	4, 49	143	4.98	
Baltimore, Md	498	6.03	121	1.47	
Birmingham, Ala	110	3.90	59	2.09	
Boston, Mass	218	2.76	219	2.77	
Buffalo, N. Y.					
Chicago, Ill.	792	2, 22	636	. 178	
Cincinnati. Ohio				l	
Cleveland, Ohio	214	2.30	74	. 80	
Columbus, Ohio			••		
Dallas, Tex.					
Dayton, Ohio 5					
Denver, Colo.					
Detroit, Mich.					
Houston, Tex.	205	6. 12	50	1. 49	
Houston, Tex.	38	1.01	41	1.09	
Indianapolis, Ind	30	1.01	-1 i	. 03	
Jersey City, N. J					
Kansas City, Mo	39	. 93	. 6	. 14	
Los Angeles, Calif	435	3.04	360	2. 52	
Louisville, Ky	328	10. 12	175	5. 40	
Memphis, Tenn	146	5. 47	60	2. 25	
Milwaukee, Wis	_1	. 02	.9	. 15	
Minneapolis, Minn	72	1.48	79	1. 62	
Newark, N. J.	212	4. 57	105	2. 27	
New Orleans, La.	72	1.50	53	1. 11	
New York, N. Y.	5,988	8. 20	1,020	1. 40	
Oakland, Calif	25	. 82	29	. 96	
Omaha, Nebr	7	. 32	10	. 45	
Philadelphia, Pa	260	1. 31	50	. 2 5	
Pittsburgh, Pa	62	. 91	15	. 22	
Portland, Oreg.					
Providence, R. I.	61	2, 35	21	. 81	
Rochester, N. Y.	25	. 74	27	. 80	
St. Louis. Mo.	198	2.37	102	1. 22	
St. Paul, Minn	43	1.52	29	1. 03	
San Antonio, Tex.1	~	02			
San Francisco, Calif	115	1.71	137	2.04	
Seattle, Wash	115	3. 03	149	3. 92	
Syracuse, N. Y.	96	4.40	36	1.65	
Dyracuse, N. I	40	1.31	28	. 92	
Toledo, Ohio	181	3.64	148	2.98	
Washington, D. C.	191	0.04	140	2. 70	

Not reporting.
 Incomplete.
 Includes only those cases that enter the clinics conducted by the State department of health.
 Only cases of syphilis in the infectious stage are reported.
 No report for current month.
 Reported by the Jefferson Davis Hospital; physicians are not required to report venereal diseases.
 Reported by the Social Hygiene Clinic.

WEEKLY REPORTS FROM CITIES

City reports for week ended June 13, 1936

This tables summarises the reports received weekly from a selected list of 440 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	Diph-	Inf	uensa	Mea-	Pneu-	Scar- let	Small	Tuber-	Ty- phoid	Whoop- ing cough	Deaths,
source and enty	C8.508	Cases	Deaths	cases	deaths	fever cases	CB363	deaths	fever cases	cough cases	causes
Maine:											
Portland New Hampshire:	9			293		4	0		9	3	27
Concord		1		0	2	0		ا ه	0		
Manchester	Ò		Ŏ	Ö	ō	3	Ŏ	ŏ	0		8
Nashua	0			3		0	0		٥	0	
Verment:				1	اه	2		0	0	1	1
Burlington	l ŏ		lŏ	33	6	ō	l ŏ	Ö	ŏ	á	14
Rutland	Ò		0		Ö	1	Ŏ	ŏ	Ŏ	ě	14
Massachusetts:	١.	ł						_	_		
Boston Fall River	4	*****	1	302	29	65	8	9	0	47	225 26 31 45
Springfield	ŏ		0	2	2	3	Ĭ	2	ŏ	8	34
Springfield Worcester	ĭ		Ŏ	113	3	7	ŏ	4	ŏ	13	i ii
Rhode Island:	_	l	١ .		.		_	_	_		
Pawtucket Providence	0	•••••		0	0 3	0 15	0	2	0	9	17
Connecticut:		*****		4	"			2	0	2	₩
Bridgeport	o		O	11	1	ø	0	1	0	8	32
Hartford	0		:	1	. 2	3	Ŏ	1	0	Ð	2
New Haven	0		•	2	3	0	9	0	0	28	38
New York:					1 1						
Buffalo	0	******	0	73	11	25 271	0	9	0	t.	165
New York	33		4	1, 307	76		0	92	6	80	1,369
Rochester	0		0	41	7	19	0	0	0	28	34 35
New Jersey:	•		•	. 27	1 1		•	- 1	1	-	63
Camden	0		0	10	1	3	8	1	0	3	25
Newark	0			30	3	52 10	0	3	0 1	24 16	75
Trenton Petmaylvania:	0		•	0	1	10	0	0	9	16	26
Philadelphia.	7	1	1	362	25	88	0	20	1	72	427
Pittsburgh	6	2	0	4	14	131	0	8	0	89 1	126
Reading	0		. •	17	2	0	0	0	0	7	96
Scranton	0			0		1	0		9	0	
Ohio:						1	1	1	1	1	
Cincinnati	7		0	9	8	15	0	8	0	[1]	118
Cleveland Columbus	2	3 2	0 2	148 0	10 5	69	0	17	0	96	20 6
Toledo	ě		í	11		î	ő	5	0	29	. 11
Indiana:			_			- 1	- 1	- 1			
Anderson	0		0	9	0	14	9	0	0	1 1	17
Indianapolis.	1		0	1 4	20	14		1	0	11	106 23
Muncie	ô		ô	6	1	70	ŏ	11	õÌ	701	100
South Bend.	0		0	0	2	3	Ŏ.	õ	0	ŏ	6
Terre Haute	0		0	0	0	0	0	0	0	0	20
Alton	0		0	0	1	4	o	0	0	2	7
Chicago	29		ĭ	12	27	191	ĭ	46	ŏ	90	688
Elgin	0		0	0	0	2	Ō	0	Ó	3	8
Moline	0		1	1	1	4	0	0	0	0	11
Springfield	0		0	0	2	1	0	0	0	0	29
Detroit	14		2	33	22	225	0	23	1	251	257
Flint.	0		0	0	6	2	Ō	2	0	2	30
Grand Rapids Visconsin:	0		0	6	1	2	0	0	0	4	35
Kenosha	0	ŀ	0	o	o	12	1	0	0	اه	8
Madison	ě		ŏ	2	ŏ	1	ō	ŏ	ŏ	10	
Milwaukee	0	1	1	38	3	91	0	3	0	92	82
Racine Superior	0		0	3	2	7	0	1	o l	1	19
	U .		0	0	0	1	0	0	0	0	8
linnesota:	_ [1	1	- 1	j	- 1	j	1	İ		
Duluth	0		0	10	2	12	0	1	0	4	22
Minneapolis St. Paul	0		8	60 91	1	47	0	3	0	7	113
ot. Faui	U .		U.	AT ,	0 '	19	U.	Ι.	0 '	7 '	55

City reports for week ended Jame 13, 1936-Continued

Di		Inf	uenza	Mos	Pneu-	Soar-	Small		Ty-	Whoop-	Deaths,
State and city	Diph- theris cases	Cases	Deaths	sies cases	monia deaths	fever cases	CRROS	culosis cleat bs	fover cases	cases	causes
Iowa:											
Codar Rapids.	0		ļ	1 0		1	0		0	5	
Davemport Des Moines	0			ő		•	ă		ŏ	ı	31
Sioux City	ĭ			1		15	12		ŏ	Ŏ	
Waterloo	0			2		3	0		0	0	
Missouri:	2	ŧ	0	3		-	١ .	3	~		
Kantas City St. Joseph	2	·		•	5	38	0	3	0	0	112
St. Louis	10		0	7	6	32	0	4	3	15	201
North Dakota: Fargo	0		0	0	0	1	0-	o	0	0	4
Grand Forks	9			0			g:		0	0	
Minet	0			2			- 0∈		0	0	5
South Dakota: Aberdeen		.	1	0	1	2	0		0	a	
Sioux Falls	ŏ			ŏ		6	ŏ		ő	ŏ	
Nebraska:	1			-		- 1	_		- 1		_
_ Omaha	1		0	14	2	18	5-	1	9	1	48
Kansas:	0	l		0	0	2	0		0	0	5
Lawfeace	. "				١	. 1	U		U		9
Wichts	0		1	1	1	7	0	0	0	0	26
Delaware:											
Wilmington	0		0	3	5	0	0	2	0	4	28
Maryland: Baltimore	4		1	247	13	10	0	8	0	73	20±
Cumberland	ē	*****	ō	Ö	ī	ē	ě	ŏ	ŏ	ŏ	. 6
Frederick	0		0	0	6	0	0	0	0	0	6
District of Col.: Washington	7		0	125	8	11	0	12	0	12	153
Washington Virginia:	1		١ ١	120	°	- 4	U	1.2		12	103
Lynchburg	ø		0	0	0	0	0	1	6	7	11
Norfolk	2		0	0	4	0	8	1	0	0	27
Richmond	9	•	0	1	0	12	g e	3	0	0	64
Rosnoke West Virginia:	0		0	0	6	1	0	0	0	0	15
Charleston	0		0	1	2		9	2	1	0	38
Huntington	0		0	0	0	1	0	0	0	0	
Wheeling	0		0	20	1	0	O.	. 1	0	0	10
North Carolina: Gastonia	0		0	2	6			0	0	6	
Raleigh	ŏ		ŏ	ō	2	ě	ě	2	ŏ	2	17
Wilmington	0		0	0	0	9	0	0	0	1	8
Winston - Sa-	0	1	0	3	1		•		0	0	10
South Carolina:	۰		•	3	- 1	•	١	•	•	١	10
Charleston	0	3	0	0	2	0		0	0	0	13
Columbia											
Florence Georgia:	0		0	0	2	0	9	0	σ	0	14
Atlanta	o		6	1	8	5	9	6	2	0	74
Brunswick	ŏ		0	ē	0	0	9	0	0	0	4
Savennah	0		0	σ	0	0	0	1	1	1	34
Florida: Miami	0	f	7	1	0			1	0	2	21
Tampa	ŏ		ó l	ŝ	ĭ	ě	ě	î	ŏ	ō	21
- 1	1	1		į	- 1	1	- 1	ı	ł	1	
Kentucky: Ashland	o l		0		0	0	e	ol	0	6	2
Covington	ŏ		ŏ	2 2	ž	ĭ	9	ŏ	ŏ	ŏ	17
Lexington	0	*****	0	2	2	2	8	5	0	0	21
_ Louisville	1		0	12	5	12	6	1	0	5	86
Fennessee: Knoxville	0		0	2	4	1	•	1	2	0	35
Memphis	ő		ŏ	î l	4	ź	ő	8	ő	11	77
Nashville	ŏ l		1	4	5	2	Ŏ	4	1	0	86
Alabama:		i	ا ا			!		اء			
Birmingham Mobile	0	•••••	0	0	2	1	9	2 3	0	0	65 21
Montgomery.	ŏ l			ě l		ôl	ŏ.		il	ěl.	
	. [- 1		- [- 1		- [
Arkansas:	ا ا	1			.	.1	اہ			.	
Fort Smith Little Rock	0	-	· · · · · · · · · · · ·	9	·i		0	2	8	0	
Louisiana:	٠,		ł	١	1	1		ŀ	- 1	- 1	
Lake Charles.	8 .		0	1	2	0	0	0	0	1 3	12
New Orleans	5	4	3	0	15	0	0	15	0	3	172 45
Shrevepost	0 1-	'	0 !	3 1	8 1	O,	0	3 1	1 '	Ψ,	40

City reports for week ended June 13, 1936-Continued

State and city theri	Diph-			Mea-	Pneu-	Scar- let			Ty- phoid	Whoop- ing	Deaths,
	Cases	Cases	Deaths	sles cases	monia deaths	fever cases	pox cases	culosis deaths	fever cases	cases	CSUSES
Oklahoma:				İ					•		
Oklahoma		l					l	1		ł	
City	2	6	1	8	5	4	0	1	0	18	54
Tulsa	0	ĺ		1	ll	0	1 0		Ó	0	
Texas:		· ·				_			_	_	
Dallas	4	l	0	33	2	1	0	0	0	0	61
Fort Worth	0		0	4	8	2	Ó	4	Ó	Ó	48
Galveston	Ó		l ó l	8	1	. 0	Ō	0	1	Ó	48 15
Houston	2	l	0	0	8 1 7	2	Ó	9	1	Ó	88
San Antonio	1		i	8	6	Ö	Ò	4	0	Ŏ	84
		1							- 1	-	i -
Montana:	İ										
Billings	0		0	1	. 0	4	. 0	1	0	0	7
Great Falls	0		0	0	0	0	0	0	0	Ó	7 9 5
Helena	0		0	0	lol	5	Ó	Ól	Ó	Ó	5
Missoula	Ó		Ó	Ó	l ó l	Ó	Ō	Ō	Ŏ	Ŏ	5
Idaho:								1		-	_
Boise	0		0	1	1	0	0	0	0	0	9
Colorado:	-		_	_	- 1			,	- 1		
Colorado					•			1			
Springs	0		0	2	1	4	0	1	0	0	15
Denver	1		1	15	2	9	Ó	5	Ŏ	31	68
Pueblo	0		0	0	2	4	Ō	Ō	Ō	ī	8
New Mexico:						_ [- 1	_	_
Albuquerque.	0		0	21	2	4	0	4	0	2	23
Utah:	-			77	_ 1	- 1	1	_	· 1	-	
Salt Lake City.	0		0	15	0	13	3	2	0 1	9	25
Nevada:	- 1		- 1					- 1	- 1	- 1	
Reno											
1					l			- 1			
Washington:	i				1	- 1		- 1			
Seattle	0		0	129	0	8	1	4	0	10	74
Spokane	0		0	15	4	27	0	0	1	4	41
Tacoma	0		0 1	14	0 1	0 1	0 1	3	0	5	35
Oregon:										. [
Portland	0		0 1	2	4	9	0	2	0	7	68
Salem	Ō	1		12		ÓΙ	Ō		ŌΙ	Ŏ	
California:				- 1					- 1	1	
Los Angeles	9	6	0	164	19	44	0	16	1	66	310
Sacramento	1		Ō	1	0	22	ŏ	2	3	26	27
San Francisco.	ī		ŎΙ	88	3	75	ŏl	1Ö	ŏl	25	182

State and city		gococcus ingitis	Polio- mye- litis	State and city	Menins men	Polio- mye-	
	Cases	Deaths	cases		Cases	Deaths	litis cases
Massachusetts: Boston Worcester Connecticut: Bridgeport New York: New York: Syracuse Pennsylvania: Philadelphia Pittsburgh	1 10 1 1	2 1 2 4 0	1 1 0 0 0	Nebraska: Omaha Maryland: Baltimore. District of Columbia: Washington Virginia: Richmond West Virginia: Huntington. Tennessee:	1 2 3 1	0 0 1 0	0 0
Ohio: Cincinnati	3	2	0	Mcmphis	0	1	0
ColumbusIllinois:	î	ő	ŏ	Birmingham Louisiana:	2	0	0
Chicago Michigan: Detroit	1 1	2	0	Now Orleans Shreveport Oklaboma:	8 0	0 2	0
Grand Rapids Minnesota: Minneapolis	1 2	0	0	Tulsa Texas: Houston	1 2	0	0
Missouri: Kansas City	1	0	0	California: Les Angeles	3	0	1

Epidemic encephalitis.—Cases: Cleveland, 1; Milwankee, 1; Baltimore, 1.
Pellegra.—Cases: Detroit, 1; Baltimore, 3; Winston-Salem, 2; Charleston, S. C., 4; Savannah, 9; Miami, Mamphis, 2; San Francisco, 2.
Typhus fever.—Cases: Charleston, S. C., 1; Fort Worth, 1.

FOREIGN AND INSULAR

JAMAICA

Communicable diseases—4 weeks ended June 13, 1936.—During the 4 weeks ended June 13, 1936, cases of certain communicable diseases were reported in Kingston, Jamaica, and in the island outside of Kingston, as follows:

Diseasa	Kingston	Other localities	Disease	Kingston	Other localities
Ohicken pox Diphtheria Dysentery Erysipelas Leprosy	7	4 1 9 1 3	Puerperal fever Scarlet fever Tuberculesis Typhoid fever	40	2 1 86 72

SPAIN

Vital statistics—1935.—The following table shows the number of births and deaths, together with death rates from certain causes, reported in Spain during 1935.

Population, estimated Dec. 31, 1934		Death rates per 100,000 population from—	
Number of deaths		Bronchitis	68 9
Death rate per 1,000 population		Diarrhea and enteritis	165. 0
Number of births		Diphtheria	5.0
Birth rate per 1,000 population		Measles	9. 5
Stillbirths	21, 734	Pneumonia	167. 0
Infant mortality per 1,000 live births	109	Scarlet fever	2.4
		Tubercalosis, pulmonary	85.7
		Tuberculosis, other forms	22. 3
		Typhoid and paratyphoid fever	11.3
		Whooping cough	4 2

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

NOTE.—A table giving current information of the world prevalence of quarantinable diseases appeared in the Public Health Reports for June 23, 1936, pages 858-870. A similar cumulative table will appear in the Public Health Reports to be issued July 31, 1936, and thereafter, at least for the time being, in the issue published on the last Friday of each month.

Cholera

India—Bombay.—During the week ended June 6, 1936, 1 imported case of cholera with 1 death was reported at Bombay, India.

Plague

Ecuador.—During the month of May 1936, 2 suspected cases of plague were reported in the mountain region along the railroad to Quito, Ecuador.

July 8, 1996 896

Egypt—Suez.—During the week ended June 6, 1936, 1 case of plague was reported at Suez, Egypt.

United States—California.—A report of plague-infected ground squirrels in California appears on page 890 of this issue of Public Health Reports.

Yellow Fever

Brazil—Sao Paulo State.—Yellow fever has been reported in Sao Paulo State, Brazil, as follows: May 17, 1936, 1 case and 1 death at Casa Branca; May 19, 1936, 1 case and 1 death at Tambahu; May 5, 1936, 1 case and 1 death at Pennapolis.

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