# **1953 Summary of Disease Outbreaks**

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**D** ISEASE NOTIFICATION in the United States on a nationwide basis was proposed a half century ago. The Surgeon General of the Public Health Service made certain suggestions to the newly organized group of State health officers, which later began to study the problem and make recommendations. At that time only smallpox, diphtheria, scarlet fever, and typhoid fever were notifiable in most States, but little effort was expended to collect data from all States, since many of them had no personnel to assemble case reports from physicians and to tabulate the data. It was not until 1912 that data with some semblance of national morbidity statistics were made available.

Most of the statistical information on infectious diseases published weekly or monthly one-half century ago was derived from reports of deaths from a few diseases, which came from scattered areas, usually cities. Numbers of smallpox cases from certain areas were published weekly in *Public Health Reports*, and plague and yellow fever cases were also shown. (Plague was then occurring in San Francisco, and an occasional case of yellow fever was seen in southern port cities.)

Epidemics were common occurrences, especially of typhoid fever, diphtheria, scarlet fever, and smallpox. The role of water and milk in

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typhoid fever outbreaks was well understood, and oysters had been shown to be a vehicle of infection in at least one epidemic in the United States. While the existence of typhoid carriers was known, their significance was just beginning to be realized. (Typhoid Mary was discovered in the winter of 1906-1907.) Flies had just been demonstrated as carriers of infection. The few instances of milkborne diphtheria and streptococcal infections were overshadowed by a high incidence of these diseases each fall and winter in which there was person-to-person transmission of infection. The concept of food poisoning was limited to relatively rare instances of "ptomaine poisoning" and occasional cases of botulism, but the role of staphylococci in food poisoning apparently was not suspected. The possibility that foods, exclusive of milk and milk products, could be vehicles of infection was limited to trichinosis from ingestion of raw or insufficiently cooked pork products and to certain intestinal infections following the eating of raw vegetables grown on sewage-contaminated soil or of improperly handled vegetables and fruit.

In the period since 1903, notifiable or communicable disease reporting has developed gradually to include a relatively large list of diseases which are reported regularly on a weekly and annual basis by all States and Territories. As early as 1912, it was recommended that upon the occurrence of an unusual outbreak or sudden increase of certain diseases a report be made to the Surgeon General of the Public Health Service. However, it was not until 1923 that the Public Health Service began to collect annually reports on milkborne disease outbreaks from State and local health authorities. Prior to this time knowledge of these outbreaks was limited to those reported in medical and public health journals. Reports of outbreaks conveyed by other foods and those caused by faulty sanitation in general were not collected until 1938, and a systematic collection of all types of disease outbreaks was not made until 1951. The latter has included reports on epidemiological investigations of small groups or even single cases of diseases which are of public health importance.

In 1953, 11 States and 3 Territorial health departments reported no foodborne or waterborne disease outbreaks, but 4 of these States and 1 Territory reported on some other form of unusual disease occurrence. This indicates that the present reporting program is by no means complete or satisfactory. It also indicates that the importance or desirability of investigation and notification of disease outbreaks is not universally appreciated at either the State or local level. In some instances, lack of personnel may have been a deterrent to investigation and reporting.

Insofar as foodborne and waterborne disease outbreaks were concerned, there was little change in character of reports received in 1953 compared with the past few years. Milkborne and waterborne outbreaks were few in number, but those in which other foods were vehicles of infection were as numerous as ever. Of more importance was the large proportion of outbreaks in which inadequate refrigeration of food was discovered; the numerous instances of food preparation by persons with infections on their hands or other exposed parts of the body; and the number of instances of poor food-handling practices.

This apparent lack of improvement in the fundamentals of preventing food poisoning or infection outbreaks parallels the experience recently reported in England and Wales for 1951 and 1952 (1). A report on Food Poisoning in England and Wales closes with the observation that the "information obtained in 1951 and 1952 indicates that the campaign for improvements in hygiene of food handling has had no appreciable effect on the incidence of food poisoning."

It was also stated that caterers and manufacturers of processed foods probably did not know how to apply in their own establishments the theoretical knowledge which had been given them in lectures and demonstrations. Application of simple techniques which the food handler could understand and which were suited to individual establishments appeared to be more effective than theoretical advice in lectures and publications.

As in previous years the information contained in reports of investigations of disease outbreaks has limited value from the standpoint of statistics. For instance, the total number of cases of typhoid fever reported in outbreaks represents only a fraction of all cases reported weekly or in annual summaries. However, the figures are of value in giving information on the frequency and size or extent of outbreaks.

### Waterborne Disease Outbreaks

Eleven outbreaks were reported in which the epidemiological investigation or laboratory test indicated that water was the vehicle of infection, and in five others the possibility of water transmission was considered.

Three of the 11 outbreaks were typhoid fever; one was demonstrated or confirmed by laboratory tests and the others by epidemiological evidence. In Ohio a group of 9 persons with typhoid gave a history of having used water from wells which had been contaminated by excretions of a typhoid carrier. The typhoid bacillus was isolated from the water of one well by use of the membrane filter technique. In Kentucky 13 cases of typhoid fever followed eating in a restaurant where water from wells was shown to be polluted. In another State 2 members of a family who swam in a river subsequently developed typhoid fever.

Three waterborne outbreaks of bacillary dysentery were reported. In one, 450 cases occurred in a school where the well water supply became contaminated by seepage from a septic tank. Another occurred in a boys' camp where the chlorinator attached to the water system failed when lightning put the equipment out of order. The third outbreak occurred in a resort area where the well water supply was found polluted. Unspecified types of gastroenteritis occurred in five outbreaks in which cross connections, back siphonage, and polluted wells were associated with the occurrence of cases.

The 5 outbreaks in which water transmission was considered a possibility included 4 of infectious hepatitis, 1 in each of 4 States, and an outbreak of gastroenteritis which occurred aboard a train enroute from Chicago to Florida.

It is noteworthy that no outbreak was reported in which a city water distribution system was involved or at fault.

### **Milkborne Disease Outbreaks**

The number of outbreaks (4) in which milk and milk products were involved was smaller than for any previous year, and none involved a fluid milk supply.

Homemade ice cream was shown to be the vehicle of infection in two instances. In one, Salmonella typhimurium was isolated from a cream strainer and ice cream freezer following the outbreak-none of the ice cream was available for laboratory examination. In the other, ice cream eaten by 11 of 14 persons attending a church social caused an illness due to Salmonella montevideo. An outbreak of bacillary dysentery, Flexner type, followed the eating of a cream cheese in the dining hall of a college. It was postulated that the cheese was contaminated while it was being prepared for serving. The fourth outbreak was considered to be a staphylococcic contamination of a homemade cheese which resulted from improper handling of the food.

# Shellfish

One outbreak of gastroenteritis, consisting of 16 cases, followed the consumption of oysters taken from an oyster bed on the California coast. Laboratory examination of specimens taken from the beds showed evidence of contamination. Improper handling, including lack of refrigeration, was also considered to be a contributing factor in the outbreak.

Several outbreaks of gastroenteritis were reported in New York City and vicinity in which crab meat was regarded as the vehicle of infection. In one outbreak, which occurred in a large hospital, *Shigella flexnerii* was isolated from the stools of three patients. However, no specimen of the crab meat served was available for laboratory examination.

# Other Foodborne Disease Outbreaks

As shown in the accompanying table, disease outbreaks in which foods other than-milk and milk products were found to be the vehicle of infection now constitute the bulk of all outbreaks reported. It is remarkable that there has been no significant decrease in staphylococcal food poisoning and food infections, such as dysentery, salmonellosis, and unspecified types of gastroenteritis, considering the amount of attention given to restaurant sanitation. As previously pointed out, the personal element involved in food-handling practices, that is, lack of appreciation of the importance of personal cleanliness and protection of foods by refrigeration apparently has not been given the attention it deserves.

# **Typhoid Fever**

Fewer outbreaks of typhoid fever were reported in 1953 than for the previous year, and the number of cases was also considerably lower. The largest one reported consisted of 13 cases.

In five outbreaks carriers, not previously known, had prepared food. One outbreak was in a school; one carrier prepared food for a wedding reception; another was a family outbreak of 4 cases; and the fourth occurred among patrons of a restaurant. Another carrier was discovered who had contaminated the wells used in a small settlement. The carrier and several of the nine cases were found to have the same phage type of organism.

In one outbreak a group of 13 cases followed eating in a restaurant. No carrier was found among the food handlers, but a contaminated well water supply, demonstrated by laboratory tests, was thought to have been caused by seepage from a sewage disposal field. A carrier, possibly a traveler, may have been the original source of infection.

One group of cases was reported in which contact was regarded as the mode of spread. The investigation revealed that in two of the cases the persons with typhoid fever had recently arrived from a city outside the United States where a large outbreak of typhoid was in progress. Spread from these index cases was limited to a family group. Another outbreak occurred in a community in which contact between cases seemed to explain the mode of spread, but the original source of infection was not found.

An outbreak occurred among members of a family who had made a motor trip outside the country. During the 2-week trip several members of the family developed diarrhea, and except for one, later had typhoid fever. The source of infection could not be determined. Another occurred in a trailer camp in which environmental conditions were considered to be poor.

#### Salmonellosis

The outbreaks in which Salmonella organisms other than Salmonella typhosa were found to be the etiological agent were fewer in number in 1953 than in 1952. None was reported in which eggs were definitely proved to be the source of infection. In the large number reported in 1952, many cases of S. montevideo infection in infants were attributed to a dried egg yolk used in the diet.

The following species of Salmonella were isolated either from patients, food handlers, or specimens of food during the investigation of outbreaks of salmonellosis: S. typhimurium in 5 instances; S. newport in 3; S. javiana and S. paratyphoid B in 2 each; and 1 each of S. oranienburg, S. muenchen, S. derby, S. california enteritidis, S. schottmulleri, S. choleraesuis, S. montevideo, S. chester, and S. saint paul. In 2 outbreaks, 2 different types of organisms were found.

In one-third (6) of the outbreaks, chicken or turkey was found to be the vehicle of infection. Considering the frequency with which these fowl are found with *Salmonella* infections, this cannot be considered an unusual finding.

Two of the outbreaks occurred in hospitals, and one was in an institution housing patients with mental diseases. In one of the hospital outbreaks the source and vehicle of infection was not proved, but an improperly sterilized respirator was considered to be a possible means of transmitting infection from sick to well infants. In an outbreak involving a restaurant, cooked turkey was sliced on a dirty meat block used to eviscerate the fowl. In a school, rat and mice infestation were found where left-over cooked peas were stored before re-serving.

# Shigellosis

A total of 23 outbreaks of shigellosis was reported in 1953. Four of these occurred in mental or similar types of institutions, 4 in camps and resort areas, 3 in public schools, 2 in college groups, 2 on Indian reservations, and 1 each in a nursery and at a wedding reception. Person-to-person transmission of infection was regarded as the mode of spread in 10 of the outbreaks. Food was the vehicle of infection in 6 instances and water, in 3.

In one outbreak, flies, which had access to numerous privies, were considered as a possible means of transmission. The mode of transmission was not stated or was unknown in the remainder.

Sonne types of organisms were most commonly found in the investigations of the outbreaks. They were isolated in 10 instances. Seven outbreaks were due to Flexner types of organisms and to miscellaneous types in the remainder.

# Staphylococcal Food Poisoning

More outbreaks of staphylococcal food poisoning were reported in 1953 than in the previous year. The number of instances in which custard or cream-filled pastries, salads, ham and other meat products, and other foods commonly associated with such outbreaks were implicated did not change. The number of times that food susceptible of contamination was prepared by persons having infections on their hands or other exposed parts of the body was not materially different from previous years. The contributing factors, such as inadequate, or lack of, refrigeration and poor food-handling practices, were also as frequent as ever.

Many of the outbreaks listed as staphylococcal food poisoning occurred in public and private schools. Poor food-handling practices, infected fingers of food handlers, or lack of refrigeration was noted in the epidemiological investigation in several of these.

Some unusual findings discovered on investigation of outbreaks included: the eating of meat sandwiches dispensed in a vending machine which had no refrigeration; infected blisters on the hands of a person preparing potato salad on a military post; and an outbreak following ingestion of cracked boiled eggs used in an Easter egg hunt.

#### **Botulism**

Ten cases with 4 deaths of botulism were reported during 1953 from 5 different States. A variety of home-canned foods were found to be vehicles of infection, including head cheese, canned corn, beets, asparagus, string beans, huckleberry juice, and lobster tails. In only two instances was the type of organism given. One case each of types A and B were reported from California.

#### - Chemicals and Other Noxious Agents

Four outbreaks of food poisoning in which chemical contamination of food substances was demonstrated were reported in 1953. In one group of four cases, thallium was presumably introduced into chicken soup accidentally and eaten by employees of a restaurant. Botulism was first suspected, but when the affected persons began to lose their hair, the true etiological agent was shown. One of the 4 cases died and thallium was found in the viscera on autopsy.

A group of gastroenteritis cases, which followed the ingestion of imitation grape jelly, was caused by a fluoride, probably magnesium silicofluoride, accidentally introduced when the jelly was processed.

An orange drink and a meat dish, which had been allowed to stand in cadmium plated food containers, were found to contain large amounts of cadmium following an outbreak of gastroenteritis. The orange drink contained 650 p.p.m. and the meat 320 p.p.m. of cadmium. Grape punch stored overnight in a galvanized container caused illness in patrons of a school lunchroom.

#### Foodborne and waterborne disease outbreaks by vehicle of infection, reported in 1953

Area	Wa	ater	M and proc	ilk milk lucts	Other foods		
	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	
United States	11	719	4	97	194	9, 914	
New England: Maine					1	23	
New Hampshire Vermont Massachusetts Rhode Island	 <u>1</u> 	 4 	  1 	 18 	1 14 1	25 476 10	
Middle Atlantic: New York	1	19	 		4 29 2	223 2, 064 258 14	
East North Central: Ohio Indiana Illinois	1 1 3	9 2 140	  1	 -59	2 11 8	706 233 186	
Wisconsin West North Central: Minnesota Iowa Missouri North Dakota Kansas		 	 	 	 3 3 2 1 2	169 38 36 100 440	
South Atlantic: Maryland Virginia West Virginia North Carolina South Carolina Georgia Florida		   44			$     \begin{array}{c}       1 \\       1 \\       3 \\       1 \\       2 \\       2     \end{array} $	10 7 6 374 75 488 12	
East South Central: Kentucky Tennessee Alabama Misicaipai	1  1	13 450	 		7 3 3	510 379 915	
West South Central: Arkansas Louisiana Oklahoma Texas	 	 	  1	  11	2 3 2 2	32 115 33 55	
Mountain: Idaho Wyoming Colorado Utah	  	 	 		2 1 2 1	41 20 45 7	
Pacific: Washington Oregon California Hawaii	 1 	- <u>3</u> 8 	 ī- 	 9 	6 10 52 1	209 135 1, 439 4	

See note on facing page.

#### Foodborne, waterborne, and other disease outbreaks, by type of infection, reported in 1953

Area	Ty fe	phoid ever	l Salmonel- losis		Shigellosis			Trichi- nosis		Botulism		Staphylo- coccal food poisoning		Gastro- enteritis, miscella- neous and unknown type		Infectious hepatitis	
	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	Outbreaks	Cases	
United States.	12	75	21	533	23	2, 230	13	134	7	10	81	4, 045	92	4, 832	28	1, 578	
New England: Maine New Hampshire Vermont Massachusetts		10	1	11	4	49					- 1	23 25 225	7	263	1	23	
Rhode Island Connecticut		5	2	187							1	10	- 1	33			
New York New Jersey	1	4	1	37	2	157					52	251 258	29	2, 101	1	22	
Pennsylvania East North Central:		 0		<b>-</b>			. 1	10		.		700	-  1	4	8	895	
Indiana Illinois Wisconsin	4 	19	3 1	21 33 	 2 1	66 6	1	13	2	3		118 155	5 4 1	123 155 35	1	106	
Minnesota				30	1	12	1	10			. 1	100	12	59 8	4	127	
North Dakota Kansas			1 	0 	  1	190		·				30 100 250					
South Atlantic: Maryland Virginia					1	140					1	10 7			2	97	
West Virginia North Carolina South Carolina			 	 	1	300			1	1	1 1 1	6 73 75			1	47	
Florida East South Central:					1	44 	 						$\begin{vmatrix} 2\\ 2 \end{vmatrix}$	488 12			
Kentucky Tennessee Alabama Misicainainai	1	13 			 2	915			 		3 1 2	25 69 450	4 3 	485 312			
West South Central: Arkansas			1	11							2	32			2	25	
Louisiana Oklahoma Texas			$\begin{array}{c}1\\1\\2\end{array}$	4 8 50					 		2 1	111 25					
Mountain: Idaho Wyoming Colorado											1	6	1 1 1	35 20 42		49	
Utah Pacific: Washington	1	7			 3	134				 1	 3	 36		 168	1	60	
Oregon California Hawaii	1	4	2 3	30 91	2 2	63 154	2 6	77 14	2	2	6 22	49 826	$\begin{array}{c}2\\22\\1\end{array}$	26 443 4	<u>3</u> -	83	
		!				1			1								

Note: Michigan, South Dakota, Nebraska, Delaware, District of Columbia, Montana, New Mexico, Arizona, and Nevada reported no foodborne, waterborne, or other disease outbreaks.

Illness from poisonous substances natural to the foods was reported from two different areas. In one instance tree tobacco (*Nicotiana glanca*) was mistaken for swiss chard, and in the other poisonous fish caused illness.

# **Gastroenteritis With Unknown Etiology**

In 73 outbreaks either the etiological agent was not identified or the available information was of such nature that classifying the outbreaks as to type was impossible. In a large proportion of instances food was not available for laboratory examination or the laboratory tests gave inconclusive answers as to etiology.

In this group were 11 outbreaks of gastroenteritis in schools and institutions in which epidemiological investigation indicated that Government surplus stocks of frozen turkey were responsible for illness. A total of 1,883 persons was reported as having gastroenteritis following the ingestion of turkey from this source.

An additional 11 outbreaks occurred in which either turkey or chicken meat was the vehicle of infection of unknown etiology.

# Trichinosis

The marked increase in reports of investigations of trichinosis cases in 1953 compared with 1952 is probably due to more complete reporting, and the increase in numbers is partially due to one large outbreak of 73 cases. Only 5 outbreaks with 40 cases were reported in 1952, in contrast to 13 outbreaks with 134 cases in 1953. The 134 cases represent slightly more than a third of the total cases reported in weekly telegraphic reports by States. Reports of epidemiological investigations revealed that one form of meat-pork-was involved in all but one outbreak. In one, bologna was considered to be the vehicle of infection because this product had been ground in the same grinder that had been used to grind fresh pork. In the one large outbreak of 73 cases, which occurred in a large institution, the source of infection was considered to be the meat from garbage-fed hogs raised on the institution's grounds. In three instances the organism was recovered from specimens of meat submitted for laboratory examination.

#### **Streptococcal Sore Throat**

Only four outbreaks of streptococcal disease were reported, one of which was foodborne. The latter occurred in a hospital having a normal population of 750. An egg salad was incriminated as the vehicle of infection, but no specimens were available for laboratory examination. The outbreak was explosive in character and symptoms consisted of chills, fever, tonsillitis with exudate, and cervical adenitis.

In another outbreak of streptococcal disease, which was reported on an Indian reservation, acute glomerolanephritis was a frequent sequella. About 38 cases had signs of scarlet fever and a few had a pyoderma, the lesions of which contained streptococci. A total of 56 cases with 1 death of acute nephritis was observed on the reservation.

An epidemic, which occurred in a dormitory of a college, was explosive in type but was attributed to crowding in the living quarters. The remaining outbreak occurred in a school and was considered to be contact infection.

### Infectious Hepatitis

While the number of outbreaks of infectious hepatitis reported in 1953 scarcely exceeded the number in 1952, cases reported weekly by States increased nearly 100 percent. It is reasonable to assume that many outbreaks were not reported during the year, since sudden increases in reported cases were noted from time to time in weekly reports from many States.

In 11 of the 28 outbreaks reported, schools or institutions for children were the principal populations involved. Two occurred in housing developments. In one development unsanitary conditions and poor personal hygiene were considered to contribute to the spread of infection. In the other, cross connections in the water supply system were thought to be a contributing factor.

In the outbreaks reported among school populations, spread by contact in the school bus was considered likely in one instance, contamination of the water supply was found in another, and a possible cross connection of the water supply with a toilet in one. In all of these school outbreaks, the occurrence of secondary cases in the homes of the children was common.

Infectious hepatitis was first reported by States on a current weekly basis beginning in 1952. The marked increase in the number of cases reported in 1953 (more than 33,000) places this disease on the list of diseases of major public health importance. While the death rate has generally been low in past years, the disease is important because of a protracted convalescent period, especially in adults, and the possibility of damage to the liver for even longer periods of time. No specific type of treatment has been found, but prevention by use of gamma globulin has been effective. This control measure was reported as being used extensively for protection of family and school contacts.

Although the mode of spread of most outbreaks reported is considered to be person-toperson contact, the possibility of water as a vehicle of infection was seriously considered in at least four instances.

#### **Miscellaneous Types of Outbreaks**

Three outbreaks of diarrhea of the newborn in hospital nurseries were reported. In one, many cases of respiratory disease occurred in patients, physicians, and nurses immediately preceding the outbreak of diarrhea in the infants. In another hospital, one of the mothers had fever and loose stools on admission, which was about 8 days prior to illness in the infants. The third outbreak was explosive in type and followed cases of diarrhea in the obstetrical staff and nurses' aides. Inadequate washing facilities were also found in this hospital. In another outbreak of disease fatal to three infants, loose stools was a symptom but the diagnosis of interstitial pneumonia was made at autopsy. A fatal case in a mother with acute hemorrhagic interstitial pneumonia immediately preceded the four cases in premature infants.

An unusually high incidence of amebiasis was reported among employees of a manufacturing plant. Some food handlers in the plant cafeteria and nearby restaurant were found to be carriers, but conclusive evidence of the real source of infection was not reported. Two other small groups of cases of amebiasis were also reported in the same State.

While no unusual incidence of infectious

encephalitis was reported in 1953, a surveillance program of investigation in California indicated that of 349 cases 14 were shown on laboratory examination to be the western equine type of infection and 22 the St. Louis type; 153 were classified as mumps encephalitis; 31 as post measles encephalitis; 10 were miscellaneous types of post-infectious encephalitis; and in 119 the type was not determined. Late in 1952, the State of Oregon experienced a sharp increase in encephalitis; others proved to be lymphocytic choreomeningitis, and the etiology of others was undetermined.

A report of heavy infestation, 38 percent, with Strongyloides stercoralis was reported in inmates of three cottages of a private institution in Illinois. The first case recognized was a child admitted from another State, but investigation also revealed the fact that two children had been admitted earlier from an area where this disease is common.

#### **Diseases Transmitted From Animals**

#### Rabies

Epidemiological information on 8 cases of human rabies was received during the year. In 4, antirabies vaccine was given, and in some instances it was started on the day the persons were bitten. One fatal case of encephalitis after rabies vaccination was reported. In this instance, a child was playing with a dog that subsequently was killed. In spite of the fact that the child was not bitten and the dog's brain was not examined in a laboratory, a physician recommended antirabies vaccine for the child. Symptoms of encephalitis developed on the ninth day after vaccine was started, and the patient died 4 days later.

During the year, the existence of rabies infection in bats was demonstrated in the States of Florida and Pennsylvania. One person, bitten by a bat in which rabies virus was isolated, was given antirabies vaccine, but did not develop any symptoms of the disease.

#### Psittacosis

Psittacosis was not reported by States in their weekly telegraphic reports of notifiable diseases, but epidemiological information on a considerable number was received following investigation of cases. A total of 80 such reports was received. California reported 15 cases; Georgia 9; Texas and Iowa 8 each; New York 7; and 13 other States reported 1 to 6 cases each. Infection was traced to psittacine birds in 66 of the 80 cases. The 8 cases in Texas occurred in employees of a poultry processing plant where 61 cases had occurred in 1952. The only exposure in one case was to pigeons; in another to canaries. In 4 cases the source of infection was unknown.

Twenty-three of the cases were exposed to household pets, and 17 had exposure to parakeets in aviaries and pet shops. Only 2 cases occurred in persons under 20 years of age. One of these was a 5-month-old infant who died of the infection, the only fatality reported. The other was a 15-year-old boy.

#### Plague and Anthrax

While no cases of human plague were reported in 1953, specimens of rodents and fleas collected proved positive for plague infection. Four such positive specimens were obtained from the State of Washington; 6 from New Mexico; 2 from California; and 7 from Hawaii.

The incidence of anthrax in domestic animals was reported to be much lower in 1953. No cases in humans were reported in which infection was traced to contact with farm animals. The 33 cases reported in weekly telegraphic reports were of industrial origin.

#### REFERENCE

 (1) Cockburn, W. C., and Simpson, E.: Food poisoning in England and Wales, 1951 and 1952. Month. Bull. Min. Health Gt. Britain 13: 12-24 (January 1954).

# Oil of Wintergreen Not Harmless

Drug products containing more than 5 percent methyl salicylate (oil of wintergreen) will be considered misbranded unless their labels carry both a warning of danger if used contrary to directions and an admonition to keep the product out of reach of children, according to the Food and Drug Administration of the Department of Health, Education, and Welfare.

The Food and Drug Administration pointed out that as little as one teaspoonful of oil taken internally can cause death. Approximately 15 deaths a year, mostly of young children, occur from accidental poisoning by preparations containing oil of wintergreen.

To minimize accidental poisoning by preparations containing oil of wintergreen, parents are warned to keep children away from liniments and other medicaments labeled for external application for relief of minor muscular pain.