NATIONAL COMMUNICABLE DISEASE CENTER

Morbidity and Mortality

Vol. 18, No. 20

WEEKLY REPORT

For Week Ending May 17, 1969

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE / HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

DATE OF RELEASE: MAY 23, 1969 – ATLANTA, GEORGIA 30333

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EPIDEMIOLOGIC NOTES AND REPORTS

FATAL CASE OF MALARIA – Hartford, Connecticut

A fatal case of *Plasmodium falciparum* malaria was reported from Hartford, Connecticut, in a 60-year-old woman. On March 7, 1969, the woman had developed weakness, nausea, vomiting, and diarrhea which were controlled with paragoric. However, on March 9, her temperature reached 103° F. On March 10, she felt weak but was afebrile and able to go shopping. On March 12, she again developed fever, diarrhea, and malaise, and her husband noted some disorientation. She was seen by her physician, who found no neurologic abnormalities and obtained no history of headache but did note a temperature of 102° F. and mild dehydration; he prescribed a tetracycline. The woman had a history of good health except for a colostomy and abdominal-perineal colonic resection for carcinoma of the rectum 9 years previously. On March 12 the physician first learned that the patient and her husband had toured in Kenya and Tanzania from Feb. 4 through 24, 1969, and had returned to the United States on February 25. They had not used malaria chemoprophylaxis.

On March 13, the patient became dyspneic and extremely weak; she continued vomiting. At her physician's insistence, she agreed to hospitalization. When she arrived

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TABLE I. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES
(Cumulative totals include revised and delayed reports through previous weeks)

DISEASE	20th WEEK ENDED		MEDIAN	CUMULATIVE, FIRST 20 WEEKS		
	May 17, 1969	May 18, 1968	1964 - 1968	1969	1968	MEDIAN 1964 - 1968
Aseptic meningitis	15	30	30	553	574	551
Brucellosis	6	2	6	46	57	85
Diphtheria	8	–	1	56	66	66
Encephalitis, primary:						
Arthropod-borne & unspecified	17	16	30	390	320	493
Encephalitis, post-infectious	6	11	25	110	212	336
Hepatitis, serum	87	112	755	2,006	1,539	16,596
Hepatitis, infectious	967	946		18,462	16,913	
Malaria	65	52	5	1,004	839	107
Measles (rubeola)	990	943	7,348	13,442	13,797	149,761
Meningococcal infections, total	73	48	62	1,703	1,398	1,398
Civilian	62	39	- - -	1,545	1,258	- - -
Military	11	9	- - -	158	140	- - -
Mumps	2,555	4,384	- - -	49,408	98,131	- - -
Poliomyelitis, total	1	–	1	2	18	9
Paralytic	1	–	1	2	18	8
Rubella (German measles)	2,801	2,556	- - -	32,274	30,714	- - -
Streptococcal sore throat & scarlet fever	8,751	8,874	8,366	220,063	216,898	216,898
Tetanus	1	5	5	41	44	57
Tularemia	5	2	2	38	61	61
Typhoid fever	7	5	9	105	97	124
Typhus, tick-borne (Rky. Mt. spotted fever)	12	8	5	33	24	18
Rabies in animals	59	80	80	1,547	1,544	1,791

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax:	1	Rabies in man: Calif.-1	1
Botulism:	9	Rubella congenital syndrome:	5
Leptospirosis: Pa.-1, Va.-1	18	Trichinosis: N.Y. Ups.-1	31
Plague:	–	Typhus, murine:	5
Psittacosis:	12		

MALARIA – *(Continued from front page)*

at the hospital that evening, she was comatose and cyanotic. Malaria was suspected, and a 10-20 percent parasitemia with young trophozoites of *P. falciparum* was detected on her blood smear. She expired before therapy could be instituted.

On postmortem examination, malaria parasites were found in red cells throughout the body. The liver and spleen were severely congested and the spleen extremely friable. The heart and kidneys were normal. The lungs showed only mild congestion.

(Reported by Hugh B. Friend, M.D., and Eduardo Tolosa, M.D., Private Physicians, Hartford; and James C. Hart, M.D., Director, Division of Preventable Diseases, Connecticut State Department of Health.)

SCHISTOSOMIASIS – Decatur, Georgia

Recently, schistosomiasis due to *Schistosoma mansoni* was diagnosed in five members of a family in Decatur, Georgia. The family's only possible exposure was in Uganda where they had lived for several years and had swum in fresh water lakes and streams. They returned to Georgia in 1967. In January 1969, the father developed intermittent rectal bleeding. A rectal biopsy performed during signoidoscopy revealed numerous viable *S. mansoni* eggs. The mother and the three children were asymptomatic. Because of the possibility of a common exposure to schistosome cercariae while in Africa, skin and serologic tests and stool examinations were performed on all family members. All five members had *S. mansoni* eggs in their stools, a positive skin test, and at least one positive serologic test. Therapy with sodium antimony dimercaptosuccinate (Astiban*) or other schistosomicidal agents is planned for the family.

(Reported by Z. V. Morgan, M.D., Decatur; John E. McCroan, Ph.D., Director, Epidemiologic Investigations Branch, Georgia State Department of Health; and the Parasitology Section, Laboratory Division, and the Parasitic Disease Drug Service, Parasitic Diseases Branch, Epidemiology Program, NCDC.)

Editorial Comment:

This report illustrates the fact that *S. mansoni* infection is often asymptomatic and that individuals with possible exposure should be screened for schistosomiasis. Because the vector snail is not found in the mainland United States, transmission by symptomatic or asymptomatic persons could not occur here.

*Available through the Parasitic Disease Drug Service, NCDC.

SPOROTRICHOSIS – Oregon

Recently seven cases of sporotrichosis, five cases in students in high school botany classes and two cases in workers on a holly farm, were reported from Oregon. In early December, the students and one worker had handle both holly and sphagnum moss; one worker reported handling only holly. During January all seven persons visited physicians because of lesions on the fingers and wrists and in early February sporotrichosis was confirmed by culture of the lesions. Of four sera from students tested by the complement fixation technique, one had a titer of 1:8; the other three had no detectable antibody. All patients were successfully treated with potassium iodide.

Sporotrichum schenkii was cultured from the sphagnum moss and water on the school laboratory floor, but cultures of holly from the laboratory were negative. The moss had been purchased from a local nursery that had obtained it 2 years ago from a distributor in Philadelphia.

(Reported by Frances Storrs, M.D., Chief Resident, Dermatology, University of Oregon Medical School; Gaylord Weeks, M.D., H. L. Armentrout, M.D., Joseph Emmerich, M.D., and Merle Pennington, M.D., Private Physicians; William Miller, Mycologist, Oregon State Public Health Laboratory; and an EIS Officer.)

Editorial Comment:

Although Oregon and Washington produce approximately 96 percent of the holly used in the United States, no previous cases of sporotrichosis associated with trauma from holly have been reported from these two states.

Only one serum showed detectable antibody by the complement fixation technique, consistent with the fact that cutaneous infections usually do not produce circulating antibody.

SURVEILLANCE SUMMARY
PSITTACOSIS – United States 1968*

In the United States during 1968, 45 cases of human psittacosis were reported compared with 41 cases in 1967. Case histories were submitted to the NCDC on 37 of the cases in 1968. Only 17 states reported cases and California, Michigan, New York, and Texas reported 60 percent of the total. An increase in cases in 1968 over 1967 was noted in 12 states, a decrease in 13 states, and the same number in 1968 as in 1967 in one state. Cases were

reported from seven states that had no cases the previous year while no cases were reported from nine states that had reported cases in 1967. Of the 37 cases, 27 occurred in the winter and spring months.

There were no significant differences in age and sex distributions of cases in 1968 (Table 1). There were 20 cases in males and 17 in females. Parakeets were the source of infection in 17 of the 37 cases (46 percent) and most human cases were related to exposure to pet parakeets in the home (Table 2).

(Reported by the Veterinary Public Health Section, Epidemiology Program, NCDC.)

*Provisional data

Table 1
Human Psittacosis Cases by Age and Sex – 1968

Age (Years)	Sex		Total
	Male	Female	
0-9	3	2	5
10-19	1	1	2
20-29	3	3	6
30-39	2	3	5
40-49	5	3	8
50-59	2	2	4
60-69	4	2	6
70+	0	1	1
Total	20	17	37

Table 2
Human Psittacosis Cases by Exposure Categories and Most Probable Source of Infection – 1968

Exposure Category	Most Probable Source of Infection									Total
	Parakeet	Pigeon	Canary	Birds, Unspecified	Chicken or Duck	Parrot	Bird Cage	Wall Dust	Unknown	
Pet Bird Owner	14		1	1		2				18
Pet Bird Dealer	1			1		3				5
Pet Bird Breeder	1	2								3
Other	1	4			1		1	1		8
Unknown									3	3
Total	17	6	1	2	1	5	1	1	3	37

A copy of the original report from which these data were derived is available on request from:

National Communicable Disease Center
Atlanta, Georgia 30333

Attn: Chief, Veterinary Public Health Section
Epidemiology Program

EPIDEMIOLOGIC NOTES AND REPORTS
PSITTACOSIS – United States

Because of the recent report of four human psittacosis cases from Maryland, three of which were associated with birds from the same wholesaler (MMWR, Vol. 18, No. 19), a survey of states reporting cases in 1969 was conducted. As a result, a total of 13 cases were noted. These included four cases in Maryland, three cases in Connecticut, two cases in California, and one case each in Georgia, New Mexico, North Carolina, and Wisconsin. Six of the 13 cases occurred in the fall of 1968. Ten of the 13 cases occurred in women. The youngest case was age 9 and three cases were under age 20. There were also two cases between ages 20 and 39 and seven cases between ages 40 and 59; age was not recorded for one case. The four Maryland cases and five other cases had definite association with psittacine birds that had become ill. Two persons had probable association with pigeons or other wild domestic birds, one person had no known contact with birds, and no history was available for the two remaining cases. In all instances, the diagnosis was made on the basis of serology alone and there were no isolates available for study. Although the psittacine birds associated with three of the four human cases in Maryland came from the same wholesaler and were imported through New York City, only in one of the five other cases associated with psittacine birds has it been possible to trace the bird to the same wholesaler. Another bird which was also imported through New York City came from a different wholesaler, and one bird was imported through a wholesaler in California.

(Reported by George L. Humphrey, D.V.M., State Public Health Veterinarian, California State Department of Public Health; James C. Hart, M.D., M.P.H., Director, Division of Preventable Diseases, Connecticut State Department of Health; John McCroan, Ph.D., Director, Epidemiologic Investigations Branch, Georgia Department of Public Health; Kenneth L. Crawford, D.V.M., M.P.H., Chief, Division of Veterinary Medicine, Maryland State Department of Health; Bruce Storrs, M.D., Director, Medical Services Division, New Mexico Department of Health and Social Services; Martin P. Hines, D.V.M., M.P.H., Director, Division of Epidemiology, North Carolina State Board of Health; and H. Grant Skinner, M.D., Chief, Communicable Diseases Section, Wisconsin State Department of Health and Social Services.)

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED
MAY 17, 1969 AND MAY 18, 1968 (20th WEEK)

AREA	ASEPTIC MENINGITIS	BRUCELLOSIS	DIPHTHERIA	ENCEPHALITIS			HEPATITIS			MALARIA	
				Primary including unsp. cases		Post-Infectious	Serum	Infectious			
	1969	1969	1969	1969	1968	1969	1969	1969	1968	1969	Cum. 1969
UNITED STATES...	15	6	8	17	16	6	87	967	946	65	1,004
NEW ENGLAND.....	–	–	–	5	–	–	9	73	31	5	39
Maine.....	–	–	–	–	–	–	–	1	2	–	2
New Hampshire.....	–	–	–	–	–	–	–	1	1	–	2
Vermont.....	–	–	–	–	–	–	–	3	1	–	–
Massachusetts.....	–	–	–	4	–	–	6	36	16	4	30
Rhode Island.....	–	–	–	–	–	–	1	18	7	1	1
Connecticut.....	–	–	–	1	–	–	2	14	4	–	4
MIDDLE ATLANTIC.....	2	2	–	1	2	–	29	174	121	2	108
New York City.....	–	–	–	–	–	–	14	60	53	–	8
New York, up-State.	–	1	–	–	–	–	2	31	17	2	21
New Jersey.....	–	–	–	–	1	–	10	37	30	–	36
Pennsylvania.....	2	1	–	1	1	–	3	46	21	–	43
EAST NORTH CENTRAL...	–	–	–	4	2	–	5	168	160	2	80
Ohio.....	–	–	–	–	–	–	2	34	31	–	10
Indiana.....	–	–	–	–	1	–	–	13	14	–	7
Illinois.....	–	–	–	–	–	–	1	42	49	2	36
Michigan.....	–	–	–	4	1	–	2	68	50	–	26
Wisconsin.....	–	–	–	–	–	–	–	11	16	–	1
WEST NORTH CENTRAL...	–	1	–	1	–	1	1	48	73	7	69
Minnesota.....	–	–	–	–	–	1	–	10	11	–	7
Iowa.....	–	1	–	–	–	–	–	8	20	–	5
Missouri.....	–	–	–	–	–	–	1	21	28	6	21
North Dakota.....	–	–	–	–	–	–	–	1	–	–	2
South Dakota.....	–	–	–	–	–	–	–	2	–	–	–
Nebraska.....	–	–	–	–	–	–	–	–	1	–	3
Kansas.....	–	–	–	1	–	–	–	6	13	1	31
SOUTH ATLANTIC.....	4	3	–	2	4	1	7	110	68	21	332
Delaware.....	–	–	–	–	–	–	–	1	–	1	2
Maryland.....	1	–	–	–	1	–	2	20	18	1	10
Dist. of Columbia..	–	–	–	–	–	–	–	3	–	–	1
Virginia.....	1	1	–	1	3	–	–	9	12	1	13
West Virginia.....	–	–	–	–	–	–	–	10	1	–	–
North Carolina.....	–	–	–	1	–	–	–	10	16	8	145
South Carolina.....	–	–	–	–	–	–	–	3	1	–	26
Georgia.....	–	2	–	–	–	–	–	19	3	10	119
Florida.....	2	–	–	–	–	1	5	35	17	–	16
EAST SOUTH CENTRAL...	2	–	7	1	–	1	–	62	50	7	32
Kentucky.....	1	–	–	1	–	–	–	40	21	6	26
Tennessee.....	1	–	–	–	–	1	–	18	16	–	–
Alabama.....	–	–	7	–	–	–	–	4	1	1	6
Mississippi.....	–	–	–	–	–	–	–	–	12	–	–
WEST SOUTH CENTRAL...	1	–	1	1	1	–	–	64	97	4	30
Arkansas.....	–	–	–	–	–	–	–	2	6	–	5
Louisiana*.....	1	–	–	1	1	–	–	14	14	3	22
Oklahoma.....	–	–	–	–	–	–	–	6	21	1	3
Texas.....	–	–	1	–	–	–	–	42	56	–	–
MOUNTAIN.....	–	–	–	1	–	–	5	30	72	3	72
Montana.....	–	–	–	–	–	–	–	2	11	–	–
Idaho.....	–	–	–	–	–	–	5	5	3	1	2
Wyoming.....	–	–	–	–	–	–	–	2	–	–	–
Colorado.....	–	–	–	1	–	–	–	1	28	1	64
New Mexico.....	–	–	–	–	–	–	–	2	6	1	4
Arizona.....	–	–	–	–	–	–	–	14	22	–	1
Utah.....	–	–	–	–	–	–	–	4	1	–	1
Nevada.....	–	–	–	–	–	–	–	–	1	–	–
PACIFIC.....	6	–	–	1	7	3	31	238	274	14	242
Washington.....	–	–	–	–	–	–	–	25	35	–	5
Oregon.....	2	–	–	–	–	–	1	19	17	1	6
California.....	4	–	–	1	7	3	30	189	222	10	194
Alaska.....	–	–	–	–	–	–	–	1	–	–	–
Hawaii.....	–	–	–	–	–	–	–	4	–	3	37
Puerto Rico.....	–	–	–	–	–	–	–	29	30	–	1

*Delayed reports: Aseptic meningitis: La. 1
Hepatitis, infectious: La. delete 1, P.R. delete 19

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

MAY 17, 1969 AND MAY 18, 1968 (20th WEEK) - CONTINUED

AREA	MEASLES (Rubeola)			MENINGOCOCCAL INFECTIONS, TOTAL			MUMPS	POLIOMYELITIS			RUBELLA
		Cumulative			Cumulative			Total	Paralytic		
	1969	1969	1968	1969	1969	1968	1969	1969	1969	Cum. 1969	1969
UNITED STATES...	990	13,442	13,797	73	1,703	1,398	2,555	1	1	2	2,801
NEW ENGLAND.....	36	699	632	7	56	72	372	–	–	–	179
Maine.*.....	–	4	13	1	5	5	14	–	–	–	3
New Hampshire.....	8	208	112	–	1	7	1	–	–	–	–
Vermont.....	–	2	1	–	–	1	53	–	–	–	22
Massachusetts.....	12	134	187	4	26	32	158	–	–	–	59
Rhode Island.....	–	9	1	–	4	6	36	–	–	–	5
Connecticut.....	16	342	318	2	20	21	110	–	–	–	90
MIDDLE ATLANTIC.....	353	4,712	2,127	12	257	232	191	–	–	–	189
New York City.....	269	3,364	776	2	46	46	141	–	–	–	51
New York, Up-State.	30	427	906	4	45	38	NN	–	–	–	29
New Jersey.*.....	18	417	370	4	108	84	50	–	–	–	18
Pennsylvania.....	36	504	75	2	58	64	NN	–	–	–	91
EAST NORTH CENTRAL...	85	1,357	2,952	9	219	154	476	–	–	–	634
Ohio.....	10	217	240	3	76	40	38	–	–	–	59
Indiana.....	34	399	516	–	28	19	80	–	–	–	104
Illinois.....	14	224	1,165	2	37	37	73	–	–	–	50
Michigan.....	4	128	186	4	64	45	120	–	–	–	243
Wisconsin.....	23	389	845	–	14	13	165	–	–	–	178
WEST NORTH CENTRAL...	19	397	299	3	80	65	320	–	–	–	313
Minnesota.....	1	2	13	–	16	16	45	–	–	–	21
Iowa.....	16	257	73	–	10	4	226	–	–	–	230
Missouri.....	1	15	67	3	31	18	27	–	–	–	49
North Dakota.....	–	6	105	–	–	3	7	–	–	–	11
South Dakota.....	–	–	4	–	–	4	NN	–	–	–	–
Nebraska.....	–	113	29	–	9	6	5	–	–	–	2
Kansas.....	1	4	8	–	14	14	10	–	–	–	–
SOUTH ATLANTIC.....	167	1,918	1,071	8	304	303	187	–	–	–	345
Delaware.....	29	227	8	–	4	4	4	–	–	–	8
Maryland.....	–	30	66	–	29	18	12	–	–	–	24
Dist. of Columbia..	–	3	6	–	8	11	–	–	–	–	6
Virginia.....	113	805	218	–	35	21	24	–	–	–	110
West Virginia.....	6	150	175	–	13	7	77	–	–	–	100
North Carolina.....	6	154	257	4	49	60	NN	–	–	–	–
South Carolina.....	2	93	10	1	44	53	5	–	–	–	2
Georgia.....	–	1	3	1	52	57	1	–	–	–	–
Florida.....	11	455	328	2	70	72	64	–	–	–	95
EAST SOUTH CENTRAL...	7	69	362	14	102	121	119	–	–	–	171
Kentucky.....	7	36	82	11	36	46	52	–	–	–	120
Tennessee.....	–	15	50	–	39	40	66	–	–	–	47
Alabama.....	–	1	61	3	17	17	–	–	–	–	1
Mississippi.....	–	17	169	–	10	18	1	–	–	–	3
WEST SOUTH CENTRAL...	221	3,097	3,722	8	244	247	303	1	1	2	231
Arkansas.....	–	3	2	2	27	15	–	–	–	–	–
Louisiana.*.....	–	74	2	3	69	64	–	–	–	–	–
Oklahoma.....	2	111	103	–	23	46	52	–	–	–	109
Texas.....	219	2,909	3,615	3	125	122	251	1	1	2	122
MOUNTAIN.....	69	458	705	1	34	22	163	–	–	–	160
Montana.....	4	8	57	–	4	2	30	–	–	–	–
Idaho.....	4	42	11	–	6	9	5	–	–	–	12
Wyoming.....	–	8	44	–	–	–	–	–	–	–	1
Colorado.....	29	99	346	–	6	7	14	–	–	–	104
New Mexico.....	9	161	70	–	6	–	9	–	–	–	11
Arizona.....	22	136	153	–	8	1	76	–	–	–	25
Utah.....	1	3	19	1	2	–	29	–	–	–	7
Nevada.....	–	1	5	–	2	3	–	–	–	–	–
PACIFIC.....	33	735	1,927	11	407	182	424	–	–	–	579
Washington.....	3	49	463	–	50	29	132	–	–	–	80
Oregon.....	6	153	375	–	9	16	9	–	–	–	39
California.....	18	511	1,056	10	329	127	248	–	–	–	393
Alaska.....	–	10	–	1	11	–	4	–	–	–	–
Hawaii.....	6	12	33	–	8	10	31	–	–	–	67
Puerto Rico.....	162	600	289	–	12	16	14	–	–	–	1

*Delayed reports: Measles: Me. 2, N.J. delete 2, P.R. delete 25
Meningococcal infections: La. delete 1
Mumps: Me. 1, P.R. delete 9
Rubella: Me. 8, P.R. delete 9

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

MAY 17, 1969 AND MAY 18, 1968 (20th WEEK) - CONTINUED

AREA	STREPTOCOCCAL SORE THROAT & SCARLET FEVER	TETANUS		TULAREMIA		TYPHOID FEVER		TYPHUS FEVER TICK-BORNE (Rky. Mt. Spotted)		RABIES IN ANIMALS	
	1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969	1969	Cum. 1969
UNITED STATES...	8,751	1	41	5	38	7	105	12	33	59	1,547
NEW ENGLAND.....	1,298	–	–	1	1	–	2	–	–	–	5
Maine*.....	14	–	–	–	–	–	1	–	–	–	4
New Hampshire.....	–	–	–	–	–	–	–	–	–	–	–
Vermont.....	43	–	–	1	1	–	–	–	–	–	1
Massachusetts.....	263	–	–	–	–	–	1	–	–	–	–
Rhode Island.....	102	–	–	–	–	–	–	–	–	–	–
Connecticut.....	876	–	–	–	–	–	–	–	–	–	–
MIDDLE ATLANTIC.....	286	–	6	–	2	–	10	–	–	4	47
New York City.....	55	–	4	–	1	–	6	–	–	–	–
New York, Up-State.	153	–	2	–	1	–	2	–	–	3	44
New Jersey.....	NN	–	–	–	–	–	–	–	–	–	–
Pennsylvania.....	78	–	–	–	–	–	2	–	–	1	3
EAST NORTH CENTRAL...	747	1	4	–	2	–	10	–	–	7	92
Ohio.....	141	–	–	–	–	–	6	–	–	2	28
Indiana.....	132	–	–	–	1	–	–	–	–	3	23
Illinois.....	162	1	2	–	1	–	1	–	–	1	17
Michigan.....	184	–	2	–	–	–	3	–	–	–	2
Wisconsin.....	128	–	–	–	–	–	–	–	–	1	22
WEST NORTH CENTRAL...	377	–	1	–	4	3	4	–	–	10	289
Minnesota.....	10	–	–	–	–	1	1	–	–	4	71
Iowa.....	89	–	–	–	–	–	–	–	–	3	39
Missouri.....	38	–	–	–	3	2	2	–	–	3	89
North Dakota.....	112	–	–	–	–	–	–	–	–	–	34
South Dakota.....	29	–	–	–	–	–	–	–	–	–	13
Nebraska.....	47	–	–	–	–	–	1	–	–	–	8
Kansas.....	52	–	1	–	1	–	–	–	–	–	35
SOUTH ATLANTIC.....	954	–	9	–	13	–	14	5	11	14	439
Delaware.....	7	–	–	–	–	–	–	–	–	–	–
Maryland.....	104	–	–	–	–	–	2	–	–	–	–
Dist. of Columbia..	1	–	2	–	–	–	–	–	–	–	–
Virginia.....	306	–	–	–	–	–	–	–	1	2	238
West Virginia.....	193	–	1	–	2	–	1	2	3	–	67
North Carolina.....	23	–	1	–	5	–	3	3	7	–	4
South Carolina.....	42	–	1	–	1	–	1	–	–	–	–
Georgia.....	14	–	–	–	1	–	5	–	–	3	37
Florida.....	264	–	4	–	4	–	2	–	–	9	93
EAST SOUTH CENTRAL...	1,449	–	4	–	7	–	11	3	12	8	259
Kentucky.....	173	–	2	–	–	–	2	–	1	5	147
Tennessee.....	1,044	–	2	–	6	–	8	2	10	2	86
Alabama.....	94	–	–	–	–	–	–	1	1	1	26
Mississippi.....	138	–	–	–	1	–	1	–	–	–	–
WEST SOUTH CENTRAL...	726	–	12	2	4	3	15	3	5	8	205
Arkansas.....	7	–	–	1	1	–	6	2	2	–	16
Louisiana.....	2	–	5	–	–	–	–	–	–	–	13
Oklahoma.....	133	–	1	1	3	–	–	–	2	3	34
Texas.....	584	–	6	–	–	3	9	1	1	5	142
MOUNTAIN.....	1,742	–	–	2	5	–	14	1	4	5	62
Montana.....	22	–	–	–	–	–	–	–	–	–	–
Idaho.....	92	–	–	–	–	–	–	–	–	–	–
Wyoming.....	167	–	–	1	1	–	5	–	–	2	37
Colorado.....	1,016	–	–	–	–	–	2	1	4	–	2
New Mexico.....	171	–	–	–	1	–	5	–	–	–	7
Arizona.....	129	–	–	–	–	–	1	–	–	3	12
Utah.....	145	–	–	1	3	–	–	–	–	–	1
Nevada.....	–	–	–	–	–	–	1	–	–	–	3
PACIFIC.....	1,172	–	5	–	–	1	25	–	1	3	149
Washington.....	324	–	1	–	–	–	1	–	–	–	–
Oregon.....	94	–	–	–	–	–	6	–	–	–	–
California.....	644	–	4	–	–	1	18	–	1	3	149
Alaska.....	19	–	–	–	–	–	–	–	–	–	–
Hawaii.....	91	–	–	–	–	–	–	–	–	–	–
Puerto Rico.....	–	–	2	–	–	–	3	–	–	–	11

*Delayed reports: SST: Me. 14, Ohio delete 1, P.R. delete 9
Typhoid fever: Me. 1
Rabies in animals: Ariz. 1

Week No. 20

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED MAY 17, 1969

(By place of occurrence and week of filing certificate. Excludes fetal deaths)

Area	All Causes		Pneumonia and Influenza All Ages	Under 1 year All Causes
	All Ages	65 years and over		
NEW ENGLAND:	702	420	28	36
Boston, Mass.	211	120	2	15
Bridgeport, Conn.	42	32	4	1
Cambridge, Mass.	30	16	3	–
Fall River, Mass.	19	10	–	1
Hartford, Conn.	64	35	–	4
Lowell, Mass.	27	14	3	1
Lynn, Mass.	20	12	1	–
New Bedford, Mass.	33	24	1	1
New Haven, Conn.	49	26	1	5
Providence, R. I.	72	42	4	6
Somerville, Mass.	9	7	1	–
Springfield, Mass.	41	29	2	–
Waterbury, Conn.	26	17	–	1
Worcester, Mass.	59	36	6	1
MIDDLE ATLANTIC:	3,233	1,924	122	130
Albany, N. Y.	62	37	4	2
Allentown, Pa.	44	27	7	1
Buffalo, N. Y.	169	103	6	8
Camden, N. J.	38	30	4	1
Elizabeth, N. J.	25	14	–	1
Erie, Pa.	59	36	6	4
Jersey City, N. J.	56	31	7	2
Newark, N. J.	82	43	1	3
New York City, N. Y.	1,692	1,003	57	65
Paterson, N. J.	32	18	1	–
Philadelphia, Pa.	397	227	6	13
Pittsburgh, Pa.	204	113	15	11
Reading, Pa.	37	29	2	–
Rochester, N. Y.	95	64	2	8
Schenectady, N. Y.	22	15	–	1
Scranton, Pa.	45	31	1	2
Syracuse, N. Y.	74	38	1	4
Trenton, N. J.	41	21	–	–
Utica, N. Y.	25	22	–	–
Yonkers, N. Y.	34	22	2	4
EAST NORTH CENTRAL:	2,605	1,474	79	119
Akron, Ohio	80	51	–	6
Canton, Ohio	56	37	2	2
Chicago, Ill.	674	356	24	20
Cincinnati, Ohio	180	115	5	7
Cleveland, Ohio	220	114	8	14
Columbus, Ohio	164	81	2	10
Dayton, Ohio	63	38	1	4
Detroit, Mich.	328	181	7	12
Evansville, Ind.	35	24	1	3
Flint, Mich.	59	30	2	2
Fort Wayne, Ind.	46	25	4	5
Gary, Ind.	43	17	3	3
Grand Rapids, Mich.	53	39	5	2
Indianapolis, Ind.	133	74	–	6
Madison, Wis.	32	18	2	1
Milwaukee, Wis.	157	95	3	11
Peoria, Ill.	34	21	–	3
Rockford, Ill.	27	16	3	3
South Bend, Ind.	44	29	1	2
Toledo, Ohio	93	56	4	3
Youngstown, Ohio	84	57	2	–
WEST NORTH CENTRAL:	809	474	30	46
Des Moines, Iowa	51	32	4	6
Duluth, Minn.	29	17	1	–
Kansas City, Kans.	41	26	2	8
Kansas City, Mo.	119	67	2	6
Lincoln, Nebr.	23	18	–	–
Minneapolis, Minn.	119	72	1	9
Omaha, Nebr.	79	44	1	3
St. Louis, Mo.	213	116	7	9
St. Paul, Minn.	79	51	3	3
Wichita, Kans.	56	31	9	2
SOUTH ATLANTIC:	1,195	635	42	86
Atlanta, Ga.	134	67	3	1
Baltimore, Md.	235	131	4	10
Charlotte, N. C.	55	25	2	3
Jacksonville, Fla.	76	40	–	5
Miami, Fla.	90	50	–	4
Norfolk, Va.	55	32	6	1
Richmond, Va.	90	48	5	9
Savannah, Ga.	42	21	4	2
St. Petersburg, Fla.	78	63	5	4
Tampa, Fla.	69	42	3	–
Washington, D. C.	235	98	9	45
Wilmington, Del.	36	18	1	2
EAST SOUTH CENTRAL:	615	340	33	28
Birmingham, Ala.	83	43	3	5
Chattanooga, Tenn.	55	29	2	2
Knoxville, Tenn.	40	21	4	1
Louisville, Ky.	130	77	15	7
Memphis, Tenn.	152	84	3	5
Mobile, Ala.	42	25	2	3
Montgomery, Ala.	32	18	2	1
Nashville, Tenn.	81	43	2	4
WEST SOUTH CENTRAL:	1,210	626	45	71
Austin, Tex.	35	20	5	2
Baton Rouge, La.	40	24	1	5
Corpus Christi, Tex.	41	17	–	4
Dallas, Tex.	157	78	3	9
El Paso, Tex.	63	29	8	15
Fort Worth, Tex.	77	43	1	4
Houston, Tex.	232	127	7	7
Little Rock, Ark.	72	32	2	3
New Orleans, La.	141	72	5	3
Oklahoma City, Okla.	92	40	1	4
San Antonio, Tex.	112	58	1	8
Shreveport, La.	70	40	3	4
Tulsa, Okla.	78	46	8	3
MOUNTAIN:	423	260	14	19
Albuquerque, N. Mex.	36	17	1	2
Colorado Springs, Colo.	21	17	3	–
Denver, Colo.	128	86	6	5
Ogden, Utah	11	7	2	–
Phoenix, Ariz.	104	66	–	8
Pueblo, Colo.	25	14	–	1
Salt Lake City, Utah	44	25	1	2
Tucson, Ariz.	54	28	1	1
PACIFIC:	1,681	1,034	45	63
Berkeley, Calif.	20	15	1	–
Fresno, Calif.	58	30	1	1
Glendale, Calif.	31	24	2	–
Honolulu, Hawaii	49	28	2	3
Long Beach, Calif.	97	59	1	4
Los Angeles, Calif.	547	345	18	19
Oakland, Calif.	87	47	3	2
Pasadena, Calif.	27	20	–	1
Portland, Oreg.	141	93	2	8
Sacramento, Calif.	51	27	2	3
San Diego, Calif.	97	62	1	8
San Francisco, Calif.	186	109	2	2
San Jose, Calif.	44	32	3	–
Seattle, Wash.	139	72	3	7
Spokane, Wash.	65	44	3	4
Tacoma, Wash.	42	27	1	1
Total	12,473	7,187	438	598

Cumulative Totals
including reported corrections for previous weeks

All Causes, All Ages	275,934
All Causes, Age 65 and over	159,743
Pneumonia and Influenza, All Ages	15,601
All Causes, Under 1 Year of Age	12,425

PROBABLE BOTULISM – Chapel Hill, North Carolina

A previously healthy 6-year-old girl developed nausea and vomiting on May 1, 1969. Later that evening, she complained of diplopia and was noted to have "crossed eyes" by her mother. She was taken to the hospital and was found to have bilateral ptosis of the eyelids, strabismus, and restricted range of ocular motion. No dysarthria, dysphagia, dryness of the mouth, or sensory deficits were noted and the child was afebrile. On the following day, she was hospitalized. Gastrointestinal symptoms were absent, but bilateral facial muscular weakness was noted. A lumbar puncture as well as skull X-rays, brain scan, and pneumoencephalogram were normal. Several challenges with edrophonium chloride were negative. During succeeding days, the child developed dysarthria and dysphagia. On May 6, respiratory difficulties ensued requiring a tracheostomy. Symmetric skeletal muscle weakness and an irregular pulse were noted on May 8. A repeat lumbar puncture was again negative. At this point, the previously considered diagnoses of polyneuritis and brain stem lesion were felt to be untenable and the diagnosis of botulism was made. The patient was immediately treated with trivalent A, B, and E botulinum antiserum. The following day, improvement in respiration and deglutition was apparent. The patient has continued to improve and is now ambulatory.

An epidemiologic investigation failed to elucidate a contaminated vehicle. Likewise, no illnesses had occurred in the patient's family, schoolmates, or in her neighborhood.

Sera obtained on the day of admission and on May 8 were tested for mouse toxicity and were negative. A stool specimen obtained on May 8 was also negative for *Clostridium botulinum*.

(Reported by W. Paul Glezen, M.D., Assistant Professor of Pediatrics, and Orene Vaughan, M.D., Intern, Pediatric Service, University of North Carolina School of Medicine; O. D. Garvin, M.D., Orange County Health Department; and Martin V. Hines, D.V.M., M.P.H., Director, Division of Epidemiology, North Carolina State Board of Health; and a team of EIS Officers.)

Editorial Comment:

The clinical course is quite typical of botulism. The slow progression of symptoms would suggest type B botulism rather than type A. In the latter, a rapidly progressive, fulminant course leading to severe cranio-bulbar paralysis and respiratory arrest usually occurs. Soil surveys have shown that spores of type B, *C. botulinum* are isolated more frequently east of the Mississippi excluding the Great Lakes area than are types A and E[1]; thus, the geographic location of this case also favors type B botulism. The absence of demonstrable toxin in the patient's admission blood might be explained by a small dose of ingested toxin and its complete binding to myoneural tissue by the time of admission.

Reference:

[1]Meyer, K. E., and Eddje, B.: Sixty-Five Years of Human Botulism in the United States and Canada: Epidemiology and Tabulations of Reported Cases 1899 through 1964. George Williams Hooper Foundation, University of California, San Francisco Medical Center, June 1965.

THE MORBIDITY AND MORTALITY WEEKLY REPORT, WITH A CIRCULATION OF 18,500 IS PUBLISHED AT THE NATIONAL COMMUNICABLE DISEASE CENTER, ATLANTA, GEORGIA.

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