

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE WHEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION DATE OF RELEASE: DECEMBER 12, 1969 - ATLANTA, GEORGIA 30333

EPIDEMIOLOGIC NOTES AND REPORTS FATAL MALARIA – Mississippi and Virginia

Two fatal cases of malaria due to *Plasmodium falciparum* were recently reported to the NCDC.

Case No. 1: On Sept. 4, 1969, a 22-year-old Vietnam veteran returned to the United States and stopped taking malarial suppressives. On September 14, he had a temperature to 105°F. and a chill. When symptoms recurred on the following day, he was admitted to a local hospital in Mississippi where the presence of rales suggested pneumonia. He was treated with antibiotics for 3 days, but his condition gradually deteriorated. On September 18, he was flown to a military hospital.

At the time of transfer he was semicomatose, responsive only to deep pain, dehydrated, and oliguric. A diagnosis of malaria was confirmed by peripheral blood smears

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which demonstrated a high percentage of red blood cells parasitized by *P. falciparum* trophozoites. Intravenous quinine and supportive measures which included hemodialysis and assisted ventilation were instituted, but the patient's condition continued to deteriorate, and he expired on September 22. The autopsy revealed petechial hemorrhages of the brain, consistent with cerebral malaria, as (Continued on page 426)

(Cumulative totals include revised and delayed reports through previous weeks)							
	49th WEEK	ENDED	MEDIAN	CUMULATIVE, FIRST 49 WEEKS			
DISEASE	December 6, 1969	December 7, 1968	1964 - 1968	1969	1968	MEDIAN 1964 - 1968	
Aseptic meningitis	79	74	52	3,360	4,194	2,834	
Brucellosis	5	3	5	218	220	235	
Diphtheria	10	3	3	187	230	197	
Encephalitis, primary:					1.000	- I I I I I I I I I I I I I I I I I I I	
Arthropod-borne & unspecified	23	33	30	1.251	1 363	1 800	
Encephalitis, post-infectious	6	8	9	287	448	686	
Hepatitis, serum	114	149	1	5 021	4 431	1	
Hepatitis, infectious	1.049	966	1 770	45.245	43 142	\$ 35,647	
Malaria	150	31	14	3 010	2 232	472	
Measles (rubeola)	376	272	1 358	23 108	21 804	100 343	
Meningococcal infections, total	39	45	47	2 738	2 401	2 610	
Civilian	39	43		2 5 2 4	2 202	2,010	
Military		2		214	199		
Mumps	1,696	2.258		82 235	142 360		
Poliomyelitis, total	1		1 1 1	17	57	5.8	
Paralytic		-		15	57	57	
Rubella (German measles)	547	380		53 562	47 371		
Streptococcal sore throat & scarlet fever	9,886	10.986	9 732	398 794	403 716	306 822	
Tetanus	7	1	7	155	154	216	
Tularemia	21 B. GIL 22 - PO 4	_	3	135	166	172	
Typhoid fever	9	9	ğ	318	382	388	
Typhus, tick-borne (Rky, Mt, spotted fever) .	2	1	-	449	277	260	
Rabies in animals	60	59	72	3.136	3.197	4.019	

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

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.	the second se	Cum.
Anthrax: Botulism: Leptospirosis: Fla2 Plague: Psittacosis: Calif1	4 12 83 5 47	Rabies in man: Rubella congenital syndrome: Trichinosis: Pa4 Typhus, murine: Ore1	1 15 177 48

MALARIA - (Continued from front page)

well as extensive bilateral pulmonary hemorrhage and evidence of acute renal insufficiency.

Case No. 2: A 50-year-old man, who had traveled frequently in Africa and Southeast Asia, returned to the United States on Oct. 28, 1969, after a 14-day government sponsored trip to West Africa. On arrival in Africa, he had received 2.5 cc of intramuscular gamma globulin. It is not known whether the patient took malarial chemosuppressives while in Africa. He complained of feeling ill on his return, and on the following day consulted his physician, who prescribed antibiotics. On November 4, he was admitted to a civilian hospital in Virginia with spiking nonperiodic temperature elevations to 105°F. and jaundice. Liver function tests were abnormal, and the tentative diagnosis of infectious hepatitis was made; he was given supportive intravenous fluids. No improvement was noted, and the patient died suddenly on November 10. Pulmonary edema,

bilateral hydrothorax, early hepatic necrosis, and extensive malarial pigmentation were present at autopsy. A review of peripheral blood smears obtained 3 days before death showed P. falciparum trophozoites.

(Reported by Durwood L. Blakey, M.D., Director, Division of Preventable Disease Control, Mississippi State Board of Health; Capt. William F. Hallahan, MC USAF, Columbus Air Force Base, Mississippi; Maj. James H. Knepshield, MC USA, Chief, Renal Dialysis Service, Walter Reed Army Hospital; H. E. Gillespie, M.D., Acting Epidemiologist, Virginia State Department of Health; Malaria Surveillance Unit, the Parasitic Diseases Branch, Epidemiology Program, NCDC; and an EIS Officer.)

Editorial Note:

These cases are the sixth and seventh malaria fatalities reported in 1969.

BOTULISM - California

On Nov. 29, 1969, an elderly couple was admitted to the Los Angeles County-University of Southern California Medical Center hospital with clinical diagnoses of botulism. On November 26, 24 hours after drinking a small amount of syrup from a jar of home-preserved figs, the wife had noted the onset of generalized weakness, dysphagia, and intermittent diplopia. These symptoms persisted for about 48 hours after which she became asymptomatic.

Her husband had eaten 8-10 figs from the jar on November 26. On November 27, he experienced nausea and vomiting followed by weakness, diplopia, and difficulty in swallowing and speaking. On admission on November 29, he had a respiratory rate of 30. Other findings included a markedly dry mouth, complete dysarthria, deviation of the uvula to to the left, and paresis of the fourth and sixth cranial nerves bilaterally. On admission, arterial blood gases showed evidence of mild hypoventilation. Progressive signs of hypoxia developed, and he required a tracheotomy and assisted respiration. Four hours after admission, bivalent AB antitoxin was given in a dose of 30,000 units after a negative reaction to a skin test and a 100-unit test dose. One hour after antitoxin administration, the patient became hypotensive and expired despite resuscitative efforts. His wife, though asymptomatic at the time, was given 20,000 units of bivalent AB antitoxin. Neither he nor his wife had been febrile at any time.

Pretreatment sera obtained from both patients were negative for Clostridium botulinum toxin by mouse bioassay. A total of five unopened jars of home-preserved figs were found at the home, in addition to one opened jar. All were found negative for toxin. It is not known whether the opened jar was the one implicated in this outbreak.

(Reported by Jan Wilkens, M.D., Attending Physician, Los Angeles County-University of Southern California Medical Center; Ralph Tetreault, Chief, Food and Drug Section, G. A. Heidbreder, M.D., Health Officer, and Ichiro Kamei, M.D., Chief, Acute Communicable Disease Control Division, and Carl Lawrence, Ph.D., Director, Bureau of Laboratories, Los Angeles County Health Department; and James Chin, M.D., Head, General Epidemiology Section, Bureau of Communicable Diseases, California State Department of Health.)

Editorial Comment:

Although toxin could not be demonstrated in the vehicles tested in this outbreak, the epidemiology and clinical descriptions were compatible with the diagnosis of botulism.

This is the eighth outbreak of botulism reported to NCDC in 1969; to date, 14 cases (five fatal) have been reported.

Since 1899, (1,2) California, which ranks first in the United States in the incidence of botulism, has reported 223 outbreaks with a total of 455 cases (275 fatal). Type A botulinum toxin was the causative organism in 61 outbreaks, type B in five, and type E in one.

Since 1899, (1,2) in addition to this recent outbreak, there have been 12 others associated with figs; nine of these were in California. In these 12 outbreaks, 24 individuals were affected with 13 deaths. In only four outbreaks was the toxin type identified; two were type A and two were type B. The two type A outbreaks were in California.

References:

- (1) Meyer, K. F. and Eddie, 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.
- (2) National Communicable Disease Center: Botulism in the United States: Review of Cases, 1899-1967 and Handbook for Epidemiologists, Clinicians, and Laboratory Workers.

FOLLOW-UP TULAREMIA - Indiana

Two cases of pneumonia previously reported as probable pulmonary tularemia in two young men in Indianapolis who had handled a squirrel (MMWR, Vol. 18, No. 43) have been confirmed as histoplasmosis. The first patient was hospitalized on Oct. 5, 1969, with fever, shortness of breath, and pulmonary consolidation documented by X-ray. He died 4 days later of fulminant pneumonia resistant to antibiotic treatment. The second patient, a friend of the first, was hospitalized on October 8 with chills, fever, profuse diaphoresis, cough, and severe dyspnea; multinodular infiltrates were seen in both lungs on chest X-ray. Despite initial improvement on tetracycline and streptomycin for the diagnosis of tularemia, the second patient continued to have daily spiking fever and dyspnea and developed erythematous papular skin rash. He died with a tension pneumothorax after 1 month of hospitalization.

Lung tissue from the first patient at autopsy showed histoplasma organisms by methenamine silver stain. Complement fixation (CF) and antibody precipitin tests performed on serum after 5 days of illness were negative. The second patient at autopsy also had histoplasma organisms present in pathologic sections of lung as well as in liver, spleen, and kidney. The organisms fluoresced with fluorescein-tagged antibody against Histoplasma capsulatum. In addition, the second patient had a positive CF test, in high titer, to histoplasmosis, which rose slightly during his illness. Between the second and third weeks of illness his serum developed an M-band precipitin (one of five precipitins which may develop from histoplasma antigenic exposure) consistent with an immunologic response to active H. capsulatum infection. Yeast organisms (not yet identified) are at present growing from a bone marrow culture taken 1 day prior to the second patient's death.

The tularemia skin test initially read as positive was later re-evaluated and interpreted as negative because a

skin biopsy showed no lymphocytic infiltration characteristic of a positive delayed hypersensitivity reaction.

Review of the two patients' activities in the 3 weeks preceeding their illnesses revealed that they were together only at a common place of work and during the visit to a Vermillion County farm on September 28 where they had shot and handled a squirrel. The farm is located in an area where histoplasmosis is endemic. Absence of clinical illness in 47 of the patients' fellow employees and a negative CF titer for histoplasmosis in the one employee who was ill during the time the patients were hospitalized made airborne infection at work unlikely. Histoplasma skin tests and/or CF titers on sera from three other persons who accompained the patients on their visit to the farm were positive. One of these persons had lived on this farm and raised chickens until she vacated it 9 months prior to the September 28 visit; she had a high CF titer against histoplasmosis and an M-band precipitin. It is not known whether the patients had entered a chicken coop on the farm during the visit.

Soil samples taken from the chicken coop on the farm and from a probable bird roost near the farm have been cultured for histoplasma organisms. Also soil samples from two other areas where the patients might have been independently exposed to histoplasmosis are being cultured. Until these results are available, the chicken coop is barred to further visits.

(Reported by John Batchelder, M.D., Marvin Melton, M.D., and other members of the medical staff, St. Vincent's Hospital; Robert Costen, M.D., Earl Brown, M.D., and other members of the medical staff, University Heights Hospital, Indianapolis; J. W. Sommerville, M.D., Health Officer, Vermillion County; Hermann Rinne, D.O., Director, Division of Communicable Disease Control, Indiana State Board of Health; and four EIS Officers.)

INTERNATIONAL NOTES

Influenza A activity was recently reported to the World Health Organization from several European countries. An outbreak in Spain began in late October 1969 and continued into November when a high incidence of respiratory disease was noted in Madrid and in northern Spain in Lugo and Navarra. All age groups were affected and absentee rates of 10 percent were noted in some schools, administrations, and military units. Outbreaks also occurred during this same time period in Barcelona and its Province. By November 25 over 30 percent of all age groups in this city had been affected. Generally, the disease was clinically mild, but some cases of bronchopneumonia were reported especially in patients already hospitalized with other diseases. Five isolated virus strains from Madrid and seven from Barcelona were identified as influenza A2/Hong Kong/68.

In France, a large outbreak of influenza-like disease was reported in Toulouse and another in Périgueux in mid-November. In Lyons, a strain of A2/Hong Kong/68 was isolated from a sporadic case in a 9-year-old child, and serologic evidence of infection with virus A was obtained from another sporadic case, an adult who had contact with relatives coming from Spain.

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FOR WEEKS ENDED

DECEMBER 6, 1969 AND DECEMBER 7, 1968 (49th WEEK)

	ASEPTIC	ASEPTIC	Sec. 6. 1		ENCEPHALIT	IS	HEPATITIS					
AREA	MENIN- GITIS	BRUCEL- LOSIS	DIPHTHERIA	Primary unsp.	including cases	Post- Infectious	Serum	Infec	tious	MALA	RIA	
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Florida	3	1 1 1 1 1 1	5	2	1	2	A DEPARTURE	27	50	mount of the	51	
FAST SOUTH CENTRAL	7		100	1				75	75		158	
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Oklahoma				1	3		2	12	14	-	77	
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Hawaii			-		1			5	5	10	131	
Puerto Rico	1.1				방 방		1	15	38	-	4	

*Delayed reports: Aseptic meningitis: Okla. 2, Ariz. 1 Diphtheria: La. delete 1 Encephalitis, primary: Okla. 1 Hepatitis, serum: Iowa 1 Hepatitis, infectious: Ala. 17 Malaria: Iowa 2

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TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

DECEMBER 6, 1969 AND DECEMBER 7, 1968 (49th WEEK) · CONTINUED

800.0	MEA	MEASLES (Rubeola)			COCCAL IN TOTAL	FECTIONS,	MUMPS	P	OLIOMYELII	RUBELLA	
AREA	tang x	Cumu	ative		Cumu	lative		Total Paralytic			
	1969	1969	1968	1969	1969	1968	1969	1969	1969	Cum.	1060
UNITED STATES	376	23,108	21,804	39	2,738	2,401	1,696	1909	-	1909	547
Allow a						o o di sai		1.15	E 16		
NEW ENGLAND	16	1,187	1,256		107	139	246		1 - I	2	30
New Hampshire		244	142		4	8	19	1.2.3	1 2 4		4
Vermont		3	3	SC - 1	No. 11 - 11	1	5		- 1		
Massachusetts	6	249	380		41	74	66				16
Khode Island	10	655	654		40	41	24		-	7	2
connecticut			0.54		40		00				0
MIDDLE ATLANTIC	61	7,862	4,590	5	455	421	115	19		2	32
New York City	12	5,011	2,362	1	87	86	70		-		13
New York, Up-State.	26	620	1,356	1	89	72	NN (5			1	2
Pennsylvania	19	1,170	175	1	103	143	45 NN	12.5	1 2 1	1	15
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EAST NORTH CENTRAL	54	2,738	4,124	4	373	301	508	. 5 - 78	R) - 31	1.1	128
Ohio	19	511	325	-	136	82	43		- 1		7
Indiana	22	478	1 419	- 2	50	43	60			1 1	34
Michigan	5	365	322	2	108	88	116	1 -	1 2 1		50
Wisconsin	8	654	1,339	1	27	21	193	_	1 1	1	27
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WEST NORTH CENTRAL	12	972	447	2	137	128	30		11 - 15	1 1	21
Minnesota	E. 1	229	144		29	29	-	- 33		A STREET	4
Missouri		31	81		56	41	19		-	1	10
North Dakota	7	51	138	_	2	41	6		1 - 2		1
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Nebraska	3	530	51	1	11	9	3		1 - JI	1	6
Kansas	=== 1	9	10	1	17	29		1-10	1 - 19	1	-
SOUTH ATLANTIC	112	2 850	1 7/ 9	6	477	400	2/5				(7
Delaware	29	471	18	•	17	482	245			Sec. 198	6/
Maryland	5	93	103		41	41	10	_	1 2 3		3
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Virginia	22	950	408	1	57	47	82	1 i = 100	0 - 0		3
West Virginia	3	224	315	1 - 1 - 1	24	13	102	- 33		-	8
North Carolina	4	346	320	1	88	96	NN		- 16		10.417.4
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Florida	46	604	549	1	101	102	30			-	51
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EAST SOUTH CENTRAL	5	126	503	6	178	215	106		- II	1.1500	35
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WEST SOUTH CENTRAL	60	5,058	5,223	6	362	348	115		- 14	6	82
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Louisiana	1	125	25		98	97	-		-		-
Texas	60	4.775	5.067	5	195	175	34 81				15
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MOUNTAIN	40	1,116	1,074	1	59	45	68	1			15
Montana	16	108	58		8	6	10	1			1
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PACIFIC	16	1,190	2.839	9	590	322	263	1.1		1	137
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California	14	863	1,612	8	491	228	162	1 1-1 2	-	. 1	28
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Puerto Rico	48	1,985	489		19	20	21	- 3	1 - 1	53 - 1 ko	1

*Delayed reports: Measles: Ky. delete 1, Iowa 1

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TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

FOR WEEKS ENDED

DECEMBER 6, 1969 AND DECEMBER 7, 1968 (49th WEEK) - CONTINUED

AREA	STREPTOCOCCAL SORE THROAT & SCARLET FEVER	TETANUS		TULA	TULAREMIA		TYPHOID Fever		TYPHUS FEVER TICK-BORNE (Rky. Mt. Spotted)		IES IN IMALS
			Cum.	T-1	Cum.		Cum.		Cum.		Cum.
	1969	1969	1969	1969	1969	1969	1969	1969	1969	1969	1969
UNITED STATES	9,880	,	155		221	9	310	2	449	80	3,130
NELL ENGLAND	1,437	1 - 10	1	P	16	5	16		1 1	- 10	54
Maine	13	- 191	_	- 1	_		1		-	-	6
Neu Hampehira		- 11			-		18.4	1.5	-	-	5
Vermont	- 4 -	-	-	-	16	-	-	-	-	-	32
Massachusetts	257		1	< -0 1	-	-	8	- 121	1		3
Rhode Island	138			-	-	-	1	0.0-0.00	- 1	-	-
Connecticut	1,025		-	-	-	-	6	- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1	-	-	8
MIDDLE ATLANTIC	246	3	22		5	- 1 - 1	31	-	47	7	234
New York City	15	<u>د</u>	14	-	1	-	17	-		_	
New York, Up-State.	145	-			4	-	0			/	220
New Jersey	96		3	-			2		15	-	14
Pennsylvania	00	-	2	-	-	-	5	-	25	_	14
	955		19		17	1	36	44-51 (2017)		3	228
EAST NORTH CENTRAL	188		4		<u>''</u>		13				74
Uhio	161	_			5					2	56
101ana	165	1 - 1	10		5		16		3	1	40
Michigan	313	-	5	- in 1	J 1	20-01	6		111	_	9
Wisconsin	128	- 643		P - 10	7	-	1	14.6.2 <u>1</u>	A 11	-	- 49
wisconsin											
WEST NORTH CENTRAL	515	1	13	N CH	14	11 - J. P.	10		8	19	597
Minnesota	10	1	5				4	101 - III I		7	161
Towa	180	_	<u> </u>				1 1	PO_ 1	7	7	98
Missouri	14	-	4		10		3	_	_	5	142
North Dakota	- 89	-	_		-	_		100 - L	-	- 10	71
South Dakota	30	-	- 1		-	_	-		1		43
Nebraska	163		-		1		1			-	14
Kansas	- 29	-	4		3	-	1	-	-		68
SOUTH ATLANTIC	- 1,016	1.1	28	-	23		50	1	253	15	743
Delaware	166	-	-		1	-	2	-	3		-
Maryland			1	-		_	4	-	48	-	د
Dist. of Columbia	270	1.7	2	_	7	-	3	-		-	-
Virginia	177		1	- 1	4		2	-	61 E	9	300
West Virginia	NN		2		4		11	1		- 101	100
North Carolina	104	-	1	- T.	0				22	_	3
South Carolina	7	-	7	- IV-	2		11		16	~	03
Georgia	186	12.2	12		4		15		1	4	168
Florida	100		12		-					2	100
DAGE COURT CENTERAL	1.783	1	23	-	14	1	47		65	2	388
EAST SOUTH CENTRAL	262		7			i i	ġ.		13	1	199
Toppossoo	1,195		4		13		20		43		130
Alabama	152	1	7			- 1	4	11-	6	1	53
Mississinni	174	-	5	-	1		14		3		6
maaraarpprovee											
WEST SOUTH CENTRAL	1,036	2	30	N - 1 1	23	1	34	1	50	8	455
Arkansas	- 41		2	S - 1 -	5	1	14		7	3	33
Louisiana	6	1.00	7	i - i	4		4				39
Oklahoma	70	1.5	1		8			1	31		68
Texas	919	2	20		6		16		12	5	315
MOUNTAIN	2,128		7		18	2	32	-	17	4	122
Montana	42	- 1	1		-		3	-		- 00	100000
Idaho	197	-	-	- 1	-		4		6		
Wyoming	1 1 2 5	1.00	-		4		5	-	-		55
Colorado	1.1.2	-	2			-	1 10	-	9	-	21
New Mexico	202	_	-			2	10		-	4	21
Arizona	70		4	_	13	_	0	_	-		5
Utah	13	12.5			د،		1		4	20200	16
Nevada			-	-	_	_				-	10
DIGITITO	770		12	-	5	4	62		e i	2	315
PAUIFIC	525		1		2	1	2		2	4	4
wasnington	163	-			1		6				4
California		- 11	11		2	4	48		2	2	307
Alacka	40	-	_	I		611	_		1 1		
Hawaii	42	-			-19	1	6				-
			_			_					
Puerto Rico	4	1	13		-	L.	7	MILE I.		-	29

*Delayed reports: Tetanus: Ariz. 1

Week No.

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED DECEMBER 6, 1969

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

			1						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A11 Ca	uses	Pneumonía	Under	7	All Ca	uses	Pneumonia	Under
Area	A11	65 years	and	l year	Area	A11	65 years	and	l year
	Ages	and over	Influenza	A11	The second second second	Ages	and over	and over Influenza	
			All Ages	Causes		8		All Ages	Causes
NELL ENGLAND.	896	542	62	36		1 447	745	60	05
NEW ENGLAND:	271	148	20	6	SOUTH ATLANTIC:	137	65	6	93
Boston, Mass	42	28	20	2	Atlanta, Ga	321	175	0	16
Bridgeport, Conn	36	26		1	Baltimore, Md	321	173	9	10
Cambridge, Mass	32	20	,		Charlotte, N. C	/3	30	3	5
Fall River, Mass	01	1.6	-	c	Jacksonville, Fla	20	24		2
Hartford, Conn	21	17	2	5	Miami, Fla	121	59	0	8
Lowell, Mass	29	22	- 11 - 1	1	Norfolk, Va	02	32	6	2
Lynn, Mass	20	10	-	2	Richmond, Va	95	49	6	5
New Bedford, Mass	20	19		5	Savannah, Ga	40	23		2
New Haven, Conn	76	41	4	2	St. Petersburg, Fla	103	11	0.003	
Providence, R. I	/0	47	3	1 3	Tampa, Fla	91	54	11	9
Somerville, Mass	19	13	5		Washington, D. C	303	136	15	34
Springfield, Mass	57	32	2		Wilmington, Del	46	21	2	5
Waterbury, Conn	43	31	-	7	A DECEMBER OF THE OWNER	11,242	10.1 m	1 000	
Worcester, Mass	/3	50	8	4	EAST SOUTH CENTRAL:	781	427	35	33
					Birmingham, Ala	111	49	2	5
MIDDLE ATLANTIC:	3,760	2,203	159	173	Chattanooga, Tenn	73	44	4	1
Albany, N. Y	67	41	1	4	Knoxville, Tenn	48	35	4	1
Allentown, Pa	52	29	7	2	Louisville, Ky	149	87	14	5
Buffalo, N. Y	177	123	10	5	Memphis, Tenn	140	69	3	8
Camden, N. J	46	24	3	1	Mobile, Ala	90	48	3	5
Elizabeth, N. J	54	37	4	2	Montgomery, Ala	64	36	5	4
Erie, Pa	47	34	2	1	Nashville, Tenn	106	59	-	4
Jersey City, N. J	70	47	8	2					
Newark, N. J	112	47	6	21	WEST SOUTH CENTRAL:	1,458	733	50	109
New York City, N. Y	1,872	1,094	73	91	Austin, Tex	45	21	6	2
Paterson, N. J	53	32	1	4	Baton Rouge, La	69	36	1	1
Philadelphia, Pa	498	273	3	21	Cornus Christi, Tex	26	16	2	2
Pittsburgh, Pa	256	143	19	5	Dallas, Tex	201	87	5	11
Reading, Pa,	58	39	5	2	El Paso, Tex.	57	34	5	8
Rochester, N. Y	125	74	5	7	Fort Worth Tex	93	51	4	5
Schenectady N. Y	21	13	1	1	Houston Tex	298	142	3	32
Scranton Pa	39	24	1 1 1 - 1	1	Little Rock Ark ana	68	34	3	5
Syracuse N. Y.	88	61	2	· · -	New Orleans In analysis	181	77	3	11
Treptop N 1	56	27	1	2	Oklahoma City Oklassa	118	62	2	9
litica N V	33	19	3	-	Can Antonio Teu	175	93	2	19
Vonkore N. V	36	22	4	1	San Antonio, lex	48	28	ŝ	1
tonkers, N. 1.			10000		Tules Ohle	79	52	9	3
FAST NORTH CENTRAL	2,955	1,700	91	160	Tuisa, Okia		32		
Akron Objer	75	50	-	5	MOUNTATN	572	3/9	20	30
Carban Obje	46	29	2	2	MOUNTAIN:	62	27	10	1 10
Chicago Th	836	447	21	56	Albuquerque, N. Mex	25	21	10	6
Cincigo, 111,	192	118	6	7	Colorado Springs, Colo.	144	21		2
Cincinnari, Unio	222	118	5	16	Denver, Colo	20	15		
Cleveland, Unio	153	73	2	10	Ogden, Utah	20	13	1 3	-
Dout of Cold	107	55	i i	6	Phoenix, Ariz	143	07		0
Dayton, Unio	399	226	0	25	Pueblo, Colo	72	14	-	
Detroit, Mich	23	15	1	25	Salt Lake City, Utah	70	36	3	
Evansville, ind	63	35	2	-	Tucson, Ariz	75	49	1 3	2
Flint, Mich.	51	- 30	5			4 . 44.5	1		1.
Fort Wayne, Ind	16	30	2	2	PACIFIC:	1,815	1,085	35	72
Gary, Ind	64	51	-	-	Berkeley, Calif	13	9	1	1
Grand Rapids, Mich	100	100	e e	ź	Fresno, Calif	50	24	1	5
Indianapolis, Ind	109	122	2		Glendale, Calif	41	28	-	1
Madison, Wis	170	29		2	Honolulu, Hawaii	55	31	2	4
Milwaukee, Wis	1/0	112	د	4	Long Beach, Calif	114	63	1	4
Peoria, Ill	42	2/	-		Los Angeles, Calif	640	371	12	31
Rockford, Ill	55	30	6	6	Oakland, Calif	83	52	3	3
South Bend, Ind	19	10	3	1	Pasadena, Calif	33	24	1	1
Toledo, Ohio	111	68	4	3	Portland, Oreg	113	70	2	4
Youngstown, Ohio	71	46		1	Sacramento, Calif	69	37	1 1 -	2
1132110					San Diego, Calif	93	57	2	5
WEST NORTH CENTRAL:	995	631	35	50	San Francisco, Calif,	203	116	4	3
Des Moines, Iowa	53	29	-	2	San Jose, Calif	57	39	-	2
Duluth, Minn	42	29	6	2	Seattle, Wash	154	92	1	5
Kansas City, Kans,	44	28	5	6	Spokane, Wash	43	31	2	-
Kansas City, Mo	159	100	2	4	Tacoma, Wash	54	41	2	1
Lincoln, Nebr	27	18	1	1					+
Minneanolis Minn	130	91	1	5	Total	14.679	8.415	565	758
Omaha, Nehr	101	65	5	8	10cai				
St. Louis Mo	267	163	4	13	Expected Number	13.012	7.572	470	541
St. Paul Minn	102	63	4	6		,			
Wichita Kana	70	45	7	3	Cumulative Total	1.11.1.5	1.0		1.1
and the second s	1000		The second	1 mile	(includes reported corrections	634.507	362.784	28, 192	30.178
		+	~~~		I tor previous weeks)	,50,	1	1	1-29.70
las Veren N. d.	23	13	3	1	*Mortality data are being collected	from Las Vega	s, Nev., for p	ossible inclusi	on in this
vegas, Nev.*				- C	table, however, for statistical reaso	ons, these data	will be listed	only and not in	ncluded in
				1.	the total, expected number, or cumu	lative total, unt	11 5 years of d	ata are collecte	eu.

INFLUENZA - (Continued from page 427)

In Denmark, two cases due to influenza A were diagnosed serologically; one was in a family contact of a patient with influenza-like illness who had recently been in Spain.

In Yugoslavia in September 1969, four cases of influenza A2/Hong Kong/68 were diagnosed in Zagreb in an airport worker and his family. By early November an outbreak of influenza-like illness was occurring in this city. Two strains of influenza virus A2/Hong Kong/68 were isolated.

In the United Kingdom, three cases of influenza A2 were confirmed in adults; two were in Cambridge where many cases of influenza-like illness were occurring and one was isolated from a nurse in London.

In addition to the European outbreaks, an outbreak of influenza-like illness was reported in a prison in Uganda; about 100 cases occurred. Influenza virus A was isolated from two patients and serologic evidence of infection was obtained from others.

(Compiled from the World Health Organization Weekly Epidemiological Record. 44(46, 48, and 49):628, 650, and 653. Nov. 14 and 28 and Dec. 5, 1969.) THE MORBIDITY AND MORTALITY WEEKLY REPORT, WITH A CIRCULA-TION OF 20,000 IS PUBLISHED AT THE NATIONAL COMMUNICABLE DISEASE CENTER, ATLANTA, GEORGIA.

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NOTE: THE DATA IN THIS REPORT ARE PROVISIONAL AND ARE BASED ON WEEKLY TELEGRAMS TO THE NCDC BY THE INDIVIDUAL STATE HEALTH DEPARTMENTS. THE REPORTING WEEK CONCLUDES AT CLOSE OF BUSINESS ON FRIDAY; COMPILED DATA ON A NATIONAL BASIS ARE OFFICIALLY RELEASED TO THE PUBLIC ON THE SUCCEED-ING FRIDAY.



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