# Morbidity and Mortality 

## Weekls Report

## PUBLIC HEALTH SERVICE

## U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Prepored by the NATIONAL OFFICE OF VITAL STATISTICS Executive 3-6300, Ext. 4744

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## Provisional Information on Selected Notifiable Diseases in the United States and on

## Deaths in Selected Cities for Week Ended August 10, 1957

During the past 4 weeks 1,170 cases of poliomyelitis were reported. Of these, 243 or 21 percent were paralytic. This shows an even greater reduction in the proportion of cases with paralysis as compared with earlier reports. The report for the week ended July 13 showed 37 percent paralytic cases.

## EPIDEMIOLOGICAL REPORTS

Lnfluenza
In a summary of the influenza situation in California as of August 8, the State Department of Public Health stated that since early June 49 outbreaks of influenza-like disease have been reported in Callfornia. Six of these have been identified $305 / 57$ isolition of influenza A viruses similar to the A/Japan/ $305 / 57$ strain. Identification of influenza type A by the complement fixation test was obtained in 5 outbreaks. In 1 of these, it appears that 2 influenza viruses were causing illness
in an institution. On the girls' ward where the outbreak began, the symptoms were similar to those seen in other epidemics. Illness began several days later on the boys' ward and was milder. Two blood specimens from the girls were positive for Influenza type A and 1 from the boys was positive for influenza type $B$. The number of cases reported in the outbreaks listed above involving civilians was 900 and among military personnel the total was 14,750 . The probability that the total number of cases might be considerably higher was suggested. Of outbreaks currently under study, 600 cases in civilians and 800 in military personnel have been reported. There has been evidence of an increased incidence of in-fluenza-like illness in the general population of 3 cities and 3 counties to date. Secondary cases in famlly groups in which 1 member has been ill, in connection with an outbreak, have been relatively few in number. In addition to the above re-

Continued on page 2

Table I. Cases of Specified Notifiable Diseases: Continental United States
(Numbers after diseases are category numbers of the Sixth Revision of the International Lists, 1948)

| DISEASE | 32a hEEEK |  |  | CUMULATIVE NMBER |  |  |  |  |  | ```Approxi- mate seasonal low point``` |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\begin{gathered} \text { Ended } \\ \text { Aug. } \\ 10, \\ 1957 \end{gathered}$ | EndedAug.11,1956 | $\begin{array}{\|r} \text { Median } \\ 1952-56 \end{array}$ | First 32 weeks |  |  | Since seasonal low week |  |  |  |
|  |  |  |  | 1957 | 1956 | $\begin{array}{r} \text { Median } \\ 1952-56 \end{array}$ | 1956-57 | 1955-56 | $\begin{gathered} \text { Median } \\ 1951-52 \\ \text { to } \\ 1955-56 \end{gathered}$ |  |
| Abthrax--. |  |  |  |  |  |  | (2) |  |  |  |
|  | $1_{4}{ }^{-}$ |  | - | 14 5 | 29 5 | 20 6 | (2) | (2) | (2) | (2) |
| Brucellosis (undulant fever)--------049.1 | 23 | 26 | 38 | 620 | 645 | 1,017 | (2) | (2) | (2) | (2) |
|  | 12 | 8 | 27 | 555 | 918 | 1,071 | 91 | 92 | 163 | July 1 |
| Hepephalitis, Infectious---------082 | 62 | 54 | 44 | 982 | 1,031 | 953 | 422 | 402 | 382 | June 1 |
| Mad serum----c-----092, 1 998. 5 pt. | 245 | 276 | 409 | 10,320 | 13,297 | 20,585 | 15,519 | 20,800 | --- | Sept. 1 |
| Malaria---------------------110-117 | 245 7 | 276 8 | 409 36 | $\begin{array}{r}10,320 \\ \hline\end{array}$ | -138 | 20, 393 | (2) | (2) | (2) | (2) |
| Meningococ----------------------085 | 2,350 | 1,932 | 1,932 | 445,940 | 572,771 | 572,771 | 483,144 | 601,869 | 601,869 | Sept. 1 |
| Meningococcal infections---------057 | 38 | 31 | 43 | 1,590 | 1,888 | 2,951 | 2,321 | 2,817 | 4,180 | Sept. 1 |
| Poliomyels, other---------------340 | 73 | 27 | --- | 1,320 | 900 | --- | , | -7- | - | --- |
| Paralyelitis--------------------080 | 356 | 876 | 1,785 | 2,897 | 6,179 | 10,989 | 2,371 | 5,112 | 9,316 | Apr. 1 |
| Nomparaly | 70 | 360 | --- | 973 | 2,993 | --- | 699 | 2,410 | --- | Apr. 1 |
| Unepecificic----------------080.2 | 205 | 373 | --- | 1,472 | 2,171 | -.- | 1,309 | 1,886 |  | Apr. 1 |
| Paittacosifle----------------080.3 | 81 | 143 | --- | 452 | 1,015 | --- | ${ }^{363}$ | ${ }^{816}$ | $\cdots$ | Apr. 1 |
| Rables in | 4 | 12 | 4 | 181 | 354 | 188 | (2) | ${ }^{2}$ ) | (2) | (2) |
| Bphoid in man-------------------094 | - | 12 | - | 3 | 6 | 4 | (2) | (2) | (2) | (2) |
| Pyphus fever-----.-.-----------040 | 29 | 43 | 73 | 759 | 1,092 | 1,212 | 502 | 780 | 810 | Apr. 1 |
| Whes fever, endemic-----------101 | 3 | 2 | 6 | 75 | 69 | 112 | 50 | 50 | 82 | Apr. 1 |
| ${ }^{\text {Raties }}$ in animal | 78 | 64 | 80 | 2,976 | 3,234 | 4,777 | 3,940 | 4,261 | 6,298 | Oct. 1 |

[^0]${ }^{2}$ Data show no pronounced seasonal change in incidence.

Symbla. -1 dash $[-]:$ no cases reported; 3 dashes $[---]$ : data not available.

## EPIDEMIOLOGICAL REPORTS-Continued

ports, there have been numerous indications of a greater than usual incidence of respiratory infections of noninfluenza nature in California. Reports from 8 selected cities for the period July 1 to August 3 showed 3 deaths from influenza and 30 from pneumonia as compared with 0 and 40 , respectively, for the same period of 1956. Dr. M. H. Merrill, California Director of Public Health, has reported that as of August 10 the number of outbreaks had increased to 50 and that a total of 2,350 civilians and 15,550 military cases were involved in the outbreaks identified as "Asian influenza."

Outbreaks of influenza-like illness have been reporte: among migrant laborers in 2 States. Dr. A. E. Heustis, Michigan Commissioner of Health, states that 12 cases occurred in a group of 66 persons who arrived in the State by bus from Mexico. The point of entry was Hidalgo, Texas. Similar illnesses were said to have occurred in 2 preceding groups that passed through the same point of entry. Onset of illness occurred 2 or 3 days after reaching Michigan. Two strains oi influenza A virus resembling Far East strains were isolated from the 12 cases at the University of Michigan. On August 13. Dr. F. M. Davenport reported the isolation of 3 more strains of virus from groups working in 3 different areas. Dr. J. L. Freitag, New York State Department of Health, reported outbreaks of influe iz-like illness in 2 migrant labor camps. Both groups came from Florida about 1 month prior to onset. The attack rate was 70 percent in one camp having a population of 110 and about 7.5 percent in the other having a population of 900 . The peak of the epidemic was reached about August 1 . Illness was characterized by fever, headache, generalized muscle pains, persistent cough, and weakness. No cases were hospitalized. Specimens for laboratory study have been obtained.

Dr. N. J. Rose, Illinois Department of Public Health, has reported the occurrence of influenza in a man who had contact with his brother whose illness was diagnosed clinically as "Asiatic influenza." Suspect cases in children seen by a pediatrician were also reported as influenza, but the cases have not fitted the clinical picture of influenza since they have glandular involvement, headache, and temperature elevations up to $105^{\circ} \mathrm{F}$. Of 3 cases clinically diagnosed as influenza in one county and 1 case in another, 1 has been confirmed by isolation of virus. Two out-of-State cases were also confirmed by isolation of virus. Only 1 suspect case of influenza has been reported among Boy Scouts after returning from Valley Forge.

Dr. J. D. Martin, Louisiana State Department of Health, reports that Far East strains of influenza A virus have been isolated: 2 from residents of the State and 3 from Boy Scouts who were enroute home from Valley Forge to California and Hawail. The 2 residents attended a church camp where 30 of the 60 children attending were ill. A mild influenza-like illness in the general population of 2 parishes is also under investigation. About 70 percent of the cases have been in the nonwhite population. Attack rates have been as high as 50 percent in nonwhite schools.

The following reports have been received relative to outbreaks in military personnel. A total of 322 cases have been reported at Fort Lewis, Washington. At Fort Dix, New Jersey, there were 20 cases over a 5 -day period in one company. An influenza virus resembling the Far East strain was isolated from 1 of the cases. Two outbreaks consisting of 20 and about 80 cases respectively have been reported on installations in

Nevada. Two cases clinically diagnosed as bronchitis early in July at an Air Force base in Kansas have been confirmed by laboratory tests as Far East type of influenza. An outbreak at Harmon, Newfoundland, is under investigation. About 150 cases have been reported in connection with the outbreak at Mannheim, Germany.

## Encephalitis

Dr. J. E. Peavy. Texas Department of Health, has given preliminary information on an outbreak of encephalitis reported from a county on the southern border of the State. During a 3 -week period 32 cases were diagnosed clinically, and 8 other cases are suspected of being encephalitis. One death has been attributed to the disease. The State Department of Health laboratory has made 1 positive confirmation of St . Louis encephalitis and specimens on the other cases are currently under study.

The Washington State Department of Health has reported suspected cases of arthropod-borne encephalitis, both in humans and horses in the Columbia and Yakima river valleys.

## Leptospirosis

Dr. Ralph H. Herren, Iowa State Department of Health, has reported a case of leptospirosis in a 38 -year-old woman who works in a packinghouse. She became ill suddenly with fever, chills, severe headache, and nuchal rigidity. On the day of onset a spinal fluid cell count demonstrated 400 lymphocytes. Chloromycetin was administered intramuscularly; and with bed rest the symptoms subsided within 10 days. She remained well for about 5 weeks and then developed a low-grade fever, severe headache, and a spinal fluid cell count of 103 lymphocytes. Blood specimens were negative for complement fixing antibodies for leptospirosis. The microscopic agglutination test was applied to these specimens, and they were found positive in a dilution of $1: 256$ for Leptospira pomona and $1: 64$ for L. sejroe. At the time the woman became ill, she was removing kidneys from freshly killed hogs in the packinghouse.

## Psittacosis

The California Department of Public Health has reporteda case of psittacosis in a 55 -year-old man. The diagnosis was confirmed by laboratory tests. The patient was exposed to pigeons and had casual contact with a flock of parakeets. The psittacosis virus was isolated from various pigeons.

Dr. Mason Romaine, Virginia Department of Health, has reported a case of psittacosis in a 28 -year-old woman. A parakeet was found on a tree in her yard. This bird died several weeks before onset of the patient's illness. Chest X-ray showed pneumonitis compatible with psittacosis. Diagnosis was confirmed by complement fixation tests.

## Shigellosis

Dr. George Erickson, Epidemiologist, Dade County (Florida) Health Department, has reported an outbreak of shigellosis among employees of a hospital. Fifty cases were diagnosed clinically and bacteriologic confirmation was obtained for most of these. The organism was Shigella sonnei. However, in the course of a survey of all employees, 6 stool specimens were found to be positive for Salmonellaoranienburg. Orily 5 patients in the hospital are known to have been infected during the outbreak. Turkey salad prepared by one of the asymptomatic food handlers was presumed to be the source of the outbreak.

[^1]Table 2. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES, EACH DIVISION AND STATE, ALASKA, HAWAI, AND PUERTO RICO, FOR WEEKS ENDED AUGUST 11, 1956 AND AUGUST 10, 1957
(By place of occurrence. Numbera under diseases are category numbers of the Sixth Revision of the International Lista, 1948)


Table 2. CASES OF SPECIFIED NOTIFLABLE DISEASES: UNITED STATES, EACH DIVISION AND STATE, ALASKA, hawail, and puerto rico, for weeks ended august 11, 1956 AND AUGUST 10, 1957-Continued
(By place of occurrence. Numbera under diseases are category numbers of the Sixth Reviaion of the International Lista, 1948)


[^2]Table 2. CASES OF SPECIFIED NOTIFLABLE DISEASES: UNITED STATES, EACH DIVISION AND STATE, ALASKA, HAWAII, AND FUERTO RICO, FOR WEEKS ENDED AUGUST 11, 1956 AND AUGUST 10, 1957—Continued
(By place of occurrence. Numbera under diseases are category numbers of the Sixth Revision of the International Lists, 1948)


[^3]

The chart shows the number of deaths reported for 114 major cities of the United States by week for the current year, and, for comparison, the median of the number of deaths reported for the corresponding weeks of the 3 previous calendar years. (The median is the central one of the three values arranged in order of magnitude.) If a report is not received from a city in time to be included in the total for the current week, an estimate is made to maintain comparability for graphic presentation.

The figures reported represent the number of death certificates received in the vital statistics offices during the week indicated for deaths occurring in that city. Figures compiled In this way, by week of recetpt, usually approximate closely the number of deaths occurring during the week. However, differences are to be expected because of variations in the
interval between death and receipt of the certificate.
While week-to-week changes in the total number of deaths reported for all major cittes generally represent a change in mortality conditions, this may not be true for variations in weekly figures for each city. For example, in a city with ${ }^{2}$ weekly average of 50 deaths, the number of deaths occuring in a week may be expected to vary by chance alone from 36 to 64 ( $\alpha \pm 2 \sqrt{\alpha}$, where $\alpha$ represents the average number of deaths per week).

The number of deaths in cities of the same size may aiso differ because of variations in the age, race, and sex composition of their populations, and because some cities are nospital centers serving the surrounding areas. Changes from year to year in the number of deaths may be due in part to population increases or decreases.

Table 3. DEATHS IN SELECTED CITIES BY GEOGRAPHIC DIVISIONS
(By place of occurrence, and week of filing certificate. Excludes fetal deaths)

| AREA | 32d <br> week ended Aug. 10, 1957 | 31st <br> week ended Aug. 3, 1957 | $\begin{gathered} \text { 32d } \\ \text { week } \\ \text { med1an } \\ 1954-56 \end{gathered}$ | Percent change, median to current week | CUMULATIVE NUMBER <br> FIRST 32 WEEKS |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | 1957 | 1956 | Percent change |
| TOTAL: 113 REPORTING CITIES | 9,673 | 10,170 | 9,763 | -0.9 | 347,529 | 337,787 | +2.9 |
| New England----------------------------------(14 cities) | 578 | 626 | 648 | -10.8 | 22,543 | 21,914 | +2.9 |
| Mddle Atlantic--------------------------------(20 cities) | 2,719 | 2,790 | 2,850 | -4.6 | 101,192 | 99,480 | +1.6 |
| East North Central-----------------------------(19 cities) | 2,087 | 2,247 | 2,105 | -0.9 | 74,913 | 73,704 | +1.9 |
| West North Central-------------------------------(8 cities) | 701 | 2, 722 | 2, 700 | +0.1 | 23,811 | 22,925 | +3.4 |
| South Atlantic------------------------------(11 cities) | 794 | 829 | 882 | -10.0 | 29,335 | 28,379 | +1.6 |
| East South Central------------------------------(8 cities) | 471 | 511 | 469 | +0.4 | 15,519 | 15,279 | +8.7 |
| West South Central---------------------------(13 cities) | 821 | 947 | 834 | -1.6 | 29,274 | 26,923 | +9.5 |
| Mountain-------------------------------------(8 cities) | 251 | 282 | 226 | +11.1 | 8,649 | 7,900 | +2.4 +2 |
| Pacific-------------------------------------12 cities) | 1,251 | 1,216 | 1,233 | +1.5 | 42,293 | 41,283 |  |

Table 4. DEATHS IN SELECTED CITIES
(By place of occurrence, and week of flling certificate. Excludes fetal deaths)


[^4]EPIDEMIOLOGICAL REPORTS－Continued

## Salmonellosis

The California State Department of Public Health has given preliminary information on outbreaks of salmonellosis in 3 groups of persons．Two groups attended wedding re－ ceptions where approximately 500 persons were served by the same caterer．The third group，also served by the same caterer，involved 5 persons with 3 illnesses．Nausea，vomiting， abdominal discomfort，diarrhea，and fever developed from 10 to 72 hours after eating turkey．Of 291 cases reported， Salmonella typhimurium was isolated from 103．The same organism was isolated from samples of the turkey．The turkeys were from 2 different sources，but it is known that there was some interchange of meat for the 2 receptions It appears most probable that meat of one or more of the turkeys was contaminated with salmonellae that either sur－ vived the cooking process or were reintroduced after cooking． Available information suggests it is unlikely that one of the food handlers was a carrier of the organism．

## Gastro－enterids

The California State Department of Public Health has also reported an outbreak of gastro－enteritis among approximately 2,000 persons following a picnic．Of these，about 200 became ill from 4 to 12 hours later．Several food items were served， but barbecued beef appeared to be the most likely vehicle of infection．Bacteriologic examination of a specimen of barbe－ cued beef revealed the presence of a coagulase－negative staphy－ lococcus and a streptococcus．This food item was prepared by a caterer，and staphylococci were found in a stool specimen from one food handler．

Another Callfornia report told of an outbreak of gastro－ enteritis involving 8 persons who ate in a lodge．They became ill with abdominal cramps，diarrhea，and vomiting from 8 to $10 \%$ hours later．Epidemiological investigation revealed that chicken a la king，in addition to several other food items，was eaten by nearly all persons．None of this food was available for laboratory tests．

The Los Angeles City Health Department has reported an outbreak of gastro－enteritis among 40 persons who ate in an eating establishment．Of these， 9 became 111 from $7 \%$ to $17 / / 2$ hours later．Fried chicken was suspected to be the vehicle of infection，but none was available for laboratory tests．

The California State Department of Public Health has also told of 2 other outbreaks of gastro－enteritis among 154 persons in a labor camp；one followed the other by 5 days．Twenty－four persons were affected in the first and 30 became ill in the second．Diarrhea and abdominal cramps， but no vomiting，occurred approximately 7 hours after the eve－ ning meal．No food was available for bacteriologic examination． The source was not determined，but dietary change from food these people are accustomed to eating may have been a contributing factor．

## QUARANTINE MEASURES

Immunization Information for International Travel
No changes reported．

SOURCE AND NATURE OF MORBIDITY DATA
These provisional data are based on reports to the Public Health Service from health departments of each State and of Alaska，Hawaii，and Puerto Rico．They give the total number of cases of certain communicable diseases reported during the week usually ended the preceding Saturday．Cases of an－ thrax，botulism，and rabies in man are not shown in table 2， but a footnote to table 1 shows the States reporting on these diseases．In addition，when diseases of rare occurrence（chol－ era，dengue，plague，louse－borne relapsing fever，smallpox， louse－borne epidemic typhus，and yellow fever）are reported， this will be noted at the end of table 1.


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[^0]:    ${ }^{2}$ Reports show 1 case in Maryland and 3 cases in Washington State.

[^1]:    Continued on paqe 8

[^2]:    ${ }^{1}$ Includea ceasea not apecified by type, category number 080. 3 .

[^3]:    Symbol. - -1 dash $[-]$ : no cases reported.

[^4]:    Symbola.-parentheses $[()]:$ data not included in table $3 ; 3$ daskea $[--]$ : data not avallable.

