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# Public Health Reports

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## UNITED STATES.

[Reports to the Supervising Surgeon-General, United States Marine-Hospital Service.]

*Circular letter—Close quarantine season to begin April 1.*

OFFICE OF SUPERVISING SURGEON-GENERAL,  
MARINE-HOSPITAL SERVICE,  
Washington, D. C., February 28, 1899.

*To medical officers of the United States Marine-Hospital Service in charge of United States quarantine stations, State and local quarantine officers, collectors of customs, and others:*

Your attention is hereby called to the amendment of the quarantine regulations embodied in Circular No. 27 of 1898, issued February 3, 1898. By the terms of this circular the active or "close" quarantine season begins on April 1. While quarantine is maintained throughout the year at all stations, the regulations as amended require that between April 1 and November 15 the special restrictions relating to vessels from yellow-fever infected ports, as set forth in the regulations, are in effect.

Respectfully, yours,  
WALTER WYMAN,  
*Supervising Surgeon-General, U. S. M. H. S.*

### SMALLPOX IN THE UNITED STATES.

*Measures to prevent the spread of smallpox in Georgia.*

[Report of Passed Assistant Surgeon C. P. Wertenbaker, U. S. M. H. S.]

*Wilmington, N. C., February 26, 1899.*

SIR: In obedience to your instructions, I reported to the Hon. A. D. Candler, governor of Georgia, at Atlanta, on February 6, 1899. I was

detailed by the governor as a special aide on his staff, and assigned to the supervision of all health matters in the State. There is no State board of health in Georgia, and all health matters are in the hands of the county authorities, with the exception of the larger cities and towns where there are local boards of health.

The administration of county affairs varies in the different counties; in a majority of them the probate judge, under the title of "ordinary," has entire charge; in some counties a board of county commissioners, and in others a commissioner of roads and revenue is responsible for all county matters. In a few of the counties a physician is regularly employed to treat the sick in the jail or almshouse, but they do not attend contagious diseases outside of those institutions, except by special agreement. From the above it will be seen that there exists no general health organization in the State or counties, therefore, the governor requested the detail of an officer of the United States Marine-Hospital Service to serve on his staff, and under his direction to act as the health officer for the State, with special reference to the outbreak of smallpox in several localities. I was furnished the following communication for presentation to the local authorities as my commission:

EXECUTIVE OFFICE,  
*Atlanta, Ga., February 8, 1899.*

*To the ordinaries and county commissioners of Georgia:*

Owing to the prevalence of smallpox in a number of counties in the State, and there being in Georgia no State board of health, and being anxious to aid the local authorities in stamping out the disease as quickly as possible, I called on the Surgeon-General of the United States Marine-Hospital Service to detail a medical officer skilled in the treatment of the disease, and have him report to me for duty on my staff. In response to my request the Surgeon-General has sent the bearer hereof, Dr. C. P. Wertenbaker, who goes to your county, not to take control, but to cooperate with the local authorities and advise them how best to treat, and most effectually to arrest, the spread of the disease. I commend Dr. C. P. Wertenbaker to county and city authorities who are contending with smallpox, and urge them to avail themselves of the valuable aid he can, from his professional skill and experience in handling this disease, render them and their local physicians. He bears the commission of the United States, but he comes to you as the representative of the State government, not to supplant but to aid you.

ALLEN D. CANDLER,  
*Governor.*

Armed with this letter, I visited a number of localities in the State where smallpox was prevailing, and rendered such aid and advice as was possible to the local authorities. In order to ascertain as quickly as possible the location and extent of the disease, and other data, the

following circular was issued, and sent to each county and larger city in the State :

EXECUTIVE OFFICE,  
Atlanta, Ga., February 9, 1899.

*To the ordinaries, county commissioners, and local health authorities :*

In view of the prevalence of smallpox in a number of counties in the State, it is desired, in order to suppress the disease and prevent its spread, to have accurate information as to the condition in each county and city in the State. You are requested to furnish the following information at the earliest possible moment, and thereafter make a weekly report as to the condition in your county or city :

- (1) Does smallpox exist in your county or city?
- (2) If so, how long has it existed?
- (3) How many cases have there been, and how many now?
- (4) Give the localities, with numbers of cases in each.
- (5) Is the disease chiefly among the whites or blacks?
- (6) What is being done to suppress it? State in detail the methods that are being used.
- (7) Is the disease spreading?
- (8) Does chicken pox or any other contagious or infectious disease exist? If so, give localities, number of cases, and other details.

Address your communications to Dr. C. P. WERTENBAKER, *Passed Assistant Surgeon, U. S. M. H. S., Special Aide, Adjutant-General's Office, Atlanta, Ga.*

In case of doubt as to the nature of any eruptive disease, you are requested to isolate the case until the diagnosis can be determined. If desired, an expert in the diagnosis of smallpox will be sent to render you such aid as may be necessary.

Very truly, yours,

A. D. CANDLER,  
*Governor.*

There are 137 counties in the State, and most of them sent prompt replies. It was learned that smallpox either then existed, or had existed a short time previously, in the following counties: Baldwin, Bibb, Coweta, Decatur, DeKalb, Jasper, Jones, Putnam, Richmond, Terrell, and Washington. The reports showed that the disease was chiefly confined to the negroes, that it was a mild type, and but few deaths had occurred; that the disease was not spreading; that chicken pox and measles were prevalent in a number of localities, but chiefly among children. The newspapers reported several cases of epidemic cerebro-spinal meningitis at Albany, Ga., but no report to this effect was received from the authorities. In all the counties except Jones, Jasper, Putnam, and DeKalb, the smallpox was confined to a few persons, and they had been promptly isolated and other precautions taken to prevent the spread of the disease. In the excepted counties the disease was at first confined to the negroes living out in the country, and as the disease was so mild, no physician was called, or the disease was not recognized as smallpox, and consequently no efforts were made to prevent its spread until it had infected a large area. This was particularly true in Jones County, where the disease had existed, unrecognized, for some thirteen

months before my visit on January 16, 1899. After that visit the county authorities adopted the suggestions made to them at that time, and within thirty days thereafter the disease was reported to be under control. It had been the purpose of the governor to have me visit each of the infected localities in the State and inspect the methods in use for the suppression of the disease, but owing to the extremely inclement weather, and the fact that the country roads that had been recently repaired were practically impassable, this purpose was abandoned.

By direction of the governor I visited Lithonia, in DeKalb County; Grantville, in Coweta County; Vienna, in Dooly County, and Sandersville and Tennille, in Washington County, diagnosed the disease at or near those places, and advised with the authorities as to its suppression, and the protection of localities where the disease had not made its appearance. The measures suggested were usually promptly adopted. A copy of the précis on smallpox issued by the Service, was sent to each county, and proved of great assistance to the authorities, and requests for additional copies were frequently received. As the supply was exhausted, and the additional copies requested not having been received from the Bureau, the following circular was prepared and sent to the authorities in each infected locality in lieu of the précis:

NOTE.—The précis requested were sent, but not received.

EXECUTIVE OFFICE,  
Atlanta, Ga., February 15, 1899.

To the ordinaries, county commissioners, and local health authorities:

Your attention is called to the necessity for careful disinfection of houses and articles that have been exposed to infection from smallpox.

The recurrence of the disease, after it has been apparently suppressed, is frequently due to a lack of thoroughness in the disinfection of the patient, the house, and infected articles.

The following methods are recommended:

(1) *Disinfection of the patient.*—No patient should be discharged until after all scaling of the skin has ceased. Bathe the patient daily for several days previous to discharge. On the day before the patient is to be discharged, take the suit of clothes that he has been wearing, if he has no other suit, and dip it in a 1-1,000 solution of bichloride of mercury and dry in the sun, the patient wearing in the meantime a suit of "overalls." On the day of discharge require the patient to go some distance from the infected house and there take a bath, followed by a bath of bichloride of mercury (1-1,000), after which he can put on his disinfected clothes and be discharged. Especial care should be taken that the hair is thoroughly washed, especially in the case of negroes.

(2) *Disinfection of articles.*—(a) Mattresses, pillows, quilts, and other articles that can not be readily disinfected should be burned.

(b) All articles that will stand boiling should be boiled for at least one hour. A handful of washing soda should be put in the water in which the clothes are boiled. After boiling, the clothes should be rinsed in clean water and dried in the sun.

(c) Articles that can not be boiled should be dipped in a solution of bichloride of mercury (1-1,000) and dried in the sun.

(d) The furniture should be thoroughly washed down with the bichloride solution.

*Disinfection of the house.*—If the house is of but small value, it should be burned; otherwise it should be disinfected by one of the following methods:

If the house is close and will retain the gas, it can be disinfected by either formaldehyd or sulphur dioxide. If it is too open to admit of disinfection by this means, it must be washed down with a solution of bichloride of mercury 1-1,000.

(a) *Disinfection by formaldehyd.*—All openings, and especially those around windows and doors and the fireplace, should be closed by stuffing with cotton or some similar material, or by pasting paper over the cracks. The formaldehyd is usually introduced through the keyhole of the door in amount equal to 4 per cent of the volume of the air in the room, and the room left closed for not less than six hours. As formaldehyd requires the use of a generator, it will probably be more convenient, generally, to use sulphur.

(b) *Disinfection by sulphur.*—Close house as above, with the exception of one door, for each room to be disinfected, and in each put a tub of water; in each tub put an iron pot capable of containing double the amount of sulphur required. Put in each pot sulphur enough to give 5 pounds for each 1,000 cubic feet of air space. Pour on a small amount of alcohol; see that the sulphur is thoroughly ignited, then leave the room; close the door and stop all the cracks. Leave the room closed for twenty-four hours.

(c) *Disinfection by bichloride of mercury solution.*—If the house is too open to admit of disinfection by the above-mentioned gases, it must be thoroughly washed down with a solution of bichloride of mercury (1-1,000). Every portion of the room should be thoroughly wetted with the solution, and the room should not be occupied for twenty-four hours. The doors and windows should be kept open to facilitate drying.

For further information in regard to disinfection, and also the diagnosis, care, and treatment of the disease, you are referred to the précis on smallpox, issued by the United States Marine-Hospital Service, copies of which will be sent on application.

By order of the governor.

C. P. WERTENBAKER,  
Passed Assistant Surgeon, U. S. M. H. S.,  
Special Aide to the Governor.

By February 20 the reports from the infected localities were so favorable that it was thought that my services would be no longer needed, so I was relieved, and rejoined my station. The following extracts from one of the reports received will give a fair idea of the tenor of the reports: "At the last meeting of the county commissioners, there were 16 cases still in quarantine; all in fair condition, and all expected to recover; since that time (February 6) all of said cases have been discharged, though a final report of the physician in charge has not been rendered. Disease has existed since December 1, 1898, and has been chiefly among the negroes. There is no spread. No knowledge of any other contagious or infectious disease in the county. The fight against smallpox in this county has been prompt, efficient, and successful, and unless it is again brought into the county there is no danger of another outbreak. Houses have been fumigated, and, where necessary, burned."

It must not be supposed however that the disease has been eradicated

from the State. There will be new cases appearing from time to time in different localities, and the situation will require careful watching on the part of the local authorities. Their attention having been called to the situation, many of the counties are now keeping a careful lookout for the disease, and have made preparations for taking care of it, in case it makes its appearance. With this attitude on the part of the county authorities, it would appear that the spread of the disease should be very soon stopped. I am gratified to be able to report that the use of glycerinized lymph for vaccinating has been most satisfactory. From all reports that I have received, and according to my own experience, the lymph is "taking" well, and there is almost a total absence of the greatly inflamed arms following vaccination that proved such an obstacle in the path of the health authorities during the past two years.

Respectfully, yours,

C. P. WERTENBAKER,  
*Passed Assistant Surgeon, U. S. M. H. S.*

ALABAMA.

MOBILE, ALA., *February 24, 1899.*

SIR: I have the honor to report that a colored man (A. H.) was sent to the pesthouse on February 19 from Pritchard, about 3 miles from this city, and that on the 20th 2 others were apprehended and cared for. These cases appear to have their origin from E. W., who was reported on January 20. Also, that J. D., colored male, was found in the city on the 21st suffering with smallpox. He was lately from Portland, Dallas County. These cases make 13 for Mobile and county since January 1.

Since my report of February 3, I have received reliable information of the existence of the disease in Antauga and Montgomery counties, Ala.

Five physicians of Macon, Miss., unite in denying the existence of smallpox in Noxubee County.

Respectfully, yours,

R. D. MURRAY,  
*Surgeon, U. S. M. H. S.*

CALIFORNIA.

*Los Angeles.*—Dr. W. P. Mathews, secretary of the State board of health, reports, February 17, 35 cases since the outbreak, 7 deaths, 3 discharges, and 25 in hospital under strict quarantine. Origin probably through tramps or trainmen from Arizona.

*Sacramento City.*—The secretary reports, on the same date, the occurrence of 1 case at this city.

DISTRICT OF COLUMBIA.

*Washington.*—The health officer, Dr. Wm. C. Woodward, reports as follows: February 23. One new case, 1 suspicious case. Total cases under treatment, 21. Premises quarantined, 13, 1 house having been released to-day. February 24. No change, except there are 5 suspects under observation. February 25. Three new cases, 2 suspects, 15 premises in quarantine. February 27. Six new cases, 2 suspects. February 28. One new case, 1 suspect, 10 houses in quarantine.

## FLORIDA.

*Key West.*—February 25. Three cases smallpox reported.

## GEORGIA.

*Savannah.*—Assistant Surgeon Hugh Foster reports, February 22, a case of smallpox in a soldier of the Sixth United States Volunteer Infantry, who had just arrived from Aricebo, Porto Rico, on the steamship *Chester*.

## ILLINOIS.

*Cairo.*—February 23. Dr. J. A. Egan, secretary of the Illinois State board of health, reports 9 cases of smallpox in Cairo, all nonresidents. Origin of the disease, a negro boarding house in the city patronized by "river men." The patients are isolated in the city smallpox hospital and exposed persons have been vaccinated.

*Monmouth, Warren County.*—Dr. Egan reports, February 23, 3 new cases; 1 previously reported, 2 in same house as first case, 1 in adjoining premises.

## INDIANA.

*Evansville.*—February 25. Passed Assistant Surgeon Oakley reports a case of smallpox.

*Jackson City.*—Dr. Hurty, secretary of the State board of health, reports, February 24, 3 additional cases of smallpox.

## KANSAS.

*Peabody.*—Dr. H. Z. Gill, secretary of the State board of health, reports, February 16, 56 cases in 15 families, with 7 deaths.

## KENTUCKY.

*Louisville.*—Assistant Surgeon Russell reports, February 22, that 143 cases of smallpox have been admitted to the municipal pesthouse since the disease began. No deaths, and 77 remain under treatment.

## MARYLAND.

*Baltimore.*—February 27. Dr. Fulton, secretary of the State board reports 2 cases of smallpox in quarantine.

*Cumberland.*—By the same authority there were 3 cases at Cumberland.

*Pocomoke.*—Three cases at Pocomoke.

## OHIO.

Dr. Probst, secretary of the State board of health, reports, February 27, the smallpox situation as follows:

*Brooklyn.*—February 7-27, 1 case.

*Cincinnati.*—February 7-27, 95 cases.

*Cleveland.*—February 7-27, 5 cases.

*Columbus.*—February 7-27, 71 cases.

*Dialton.*—February 7-27, 1 case.

*Franklin.*—February 7-27, 2 cases.

*Sandusky.*—February 7-27, 2 cases.

*Shenandoah*.—February 7-27, 1 case.

*South Charleston*.—February 7-27, 1 case.

*Sunbury*.—February 7-27, 3 cases.

*Toledo*.—February 7-27, 1 case.

*Wellington*.—February 7-27, 1 case.

*Willoughby*.—February 7-27, 1 case.

*Gallipolis*.—Acting Assistant Surgeon Beam reports February 26, 2 cases of smallpox, 1 of which comes from the steamer *H. M. Stanley*, just from Cincinnati.

TENNESSEE.

NASHVILLE, TENN., *February 21, 1899.*

SIR: Your communication of recent date concerning the smallpox situation in the State of Arkansas is received and contents noted.

Please accept the thanks of this board for the prompt steps taken for the protection of Tennessee.

The situation in Tennessee practically remains the same, with the exception of one additional point of infection, namely, Pinson, Madison County.

Very respectfully, J. A. ALBRIGHT, M. D.,  
*Secretary and Executive Officer, Tennessee State Board of Health.*

TEXAS.

EAGLE PASS, TEX., *February 18, 1899.*

SIR: Since my last report I have the honor to inform you that I have made a scout up the river, on this and the Mexican side, for a distance of 65 miles. All of this scouting was done on horseback, and every village and town on the frontier between here and Del Rio, Tex., have been visited for the purpose of ascertaining the existence of smallpox and other contagious diseases. In all I covered some 250 miles, but found no contagious disease, though I suspected smallpox at Mokal, Mexico (20 miles from here on the Rio Grande River), and for that reason established a guard on the American side of the river at that place.

Smallpox is existing at present in C. P. Diaz, Mexico (across the river from Eagle Pass), there being 1 case of variola and 2 cases of varioloid which are known. It is very likely that there are numerous other cases of smallpox in C. P. Diaz which are not known, these cases being among the lower class of Mexicans, who invariably conceal smallpox because of the fear they have of being taken to a camp of detention.

The 3 cases above are confined to Americans residing in C. P. Diaz and were evidently caused from contact with smallpox among Mexicans. For this reason, and because of the close proximity of Mokal to C. P. Diaz, I have kept on one of the guards on the American side of the river at that place.

The 3 cases of smallpox in C. P. Diaz are thoroughly isolated and under guard and every precaution for preventing the spread of the disease has been taken, though I fear an epidemic from the lower class of Mexicans.

A strict watch is continually kept up on C. P. Diaz and all people coming from Mexico are thoroughly examined. Will keep the Bureau advised of any new developments.

Respectfully, yours, LEA HUME,  
*Acting Assistant Surgeon, U. S. M. H. S.*

LAREDO, TEX., *February 20, 1899.*

SIR: I inclose reports of United States Marine-Hospital Service International Bridge and Ferry inspection and smallpox report at Laredo, Tex., for week ended February 18, 1899.

I have found that the only places here where persons are compelled to be vaccinated are when they come across the bridge or ferry, and when they come in on passenger trains from Mexico; otherwise, it is optional, which accounts for the continuance of smallpox here. There have been some 3,600 vaccinated by city and county within the city—that is, there have been that many points used.

I believe at present that there are more being vaccinated at the bridge and the trains than in any other parts of city. I vaccinate from 1 to 6 daily on trains, and there are about the same number vaccinated at the foot bridge.

I find 20 cases of smallpox reported at Alice, Tex., to-day. It is a small village about 40 miles west of Corpus Christi, Tex. I have sent physicians there and at Corpus Christi the SUPPLEMENT, PUBLIC HEALTH REPORT, "Précis on Smallpox."

The persons who have smallpox at Laredo are not the class that write letters, but a few letters may get smuggled into the United States mails from infected houses occasionally. I have had several conversations with the postmaster on the subject. \* \* \*

I told the postmaster that the best way to disinfect the mails was according to United States Marine-Hospital Service regulations, of which he has copies which were sent him during the yellow fever epidemic last fall, and that I would show his clerks the *modus operandi*. He has never called on me, and I do not know whether he disinfects at all. I will make it my business to find out at once.

If possible will have quarantine guards collect mail at houses infected and afterwards collect from guards and disinfect only mail from infected houses, but if that is impracticable on account of guards being of little use as guards, I suppose all the letters mailed in Laredo will have to be disinfected on account of, say, one or two letters a week being smuggled from infected houses. I would like to hear your opinion on the subject.

Week ended February 18. Vaccinated by inspectors, 23; sent back to Mexico, 3; examined and passed as immunes or recently vaccinated, 2,501; total examined, 2,527. Total new cases, 46; total deaths, 15.

Yours, respectfully,

H. J. HAMILTON,

*Acting Assistant Surgeon, U. S. M. H. S.*

## VIRGINIA.

*Alexandria.*—Sanitary Inspector Snowden reports: February 23, 12 new cases, 1 suspect; February 24, 2 new cases; February 25, 2 new cases, 2 suspects; February 26, 2 new cases, 1 suspect; February 27, 1 case.

*Norfolk.*—Passed Assistant Surgeon Smith reports: February 21, 14 new cases, 12 discharges; February 22, 9 new cases, 13 discharges; February 23, 4 new cases, 13 discharges; February 24, 7 new cases, 13 discharges; February 25, 6 new cases, 6 discharges; February 26, 7 new cases, 9 discharges; February 27, 7 new cases, 3 discharges; February 28, 7 new cases, 7 discharges.

*Portsmouth.*—Dr. Hope, city health officer, reports, for the week ended February 25, 15 new cases, 14 colored and 1 white.