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10000/109/659
(VOL. III)

MO
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10000/109/659
(VOL. III)

MONTHLY REPORTS, PUBLIC HEALTH SUB/COMM
APR. 1945 – JULY 1946

A/C.C.

319.

Lt. Public Health S/C report for March is at 319.

G. McM. 17/4. N.S. 1714

321.

Lt. Public Health S/C report for April at 320.

G. McM. 17/5. N.S. 1815

Ex Comm.

322.

Lt. Public Health S/C monthly report for May is at 321.

G. McM 18/6 N.S. 2016

N.S. 1917

324.

Lt. 323 is Public Health S/C monthly report for June

G. McM. 19/7.

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~~Ex~~ ~~[illegible]~~ ~~[illegible]~~

~~Ex~~. Public Health Sec monthly report for May is at 321.

G. McM 18/6 N.S. 2016

N.S. 1917

~~Ex~~. 323 is 324 Public Health Sec. Monthly Report for June.

G. McM. 19/7.

2371

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C.S.O. Trans. 20/3.

313

Public Health report to February is at 112. Passages of interest have been marked.

314

15/3. TB.

C.S.O.

V.P. CAS.

This gives me no real picture of health in Italy. I expect the Italian Medical Service has by now produced their own kind of report – if so we should obtain it – because I cannot include their inadequate report in an A.C. monthly report.

MS/20/3.

316

Ex. Comm.

I am not clear about the monthly reports of S/C's and supposed to be on the activities of the S/C as in the past. The P.H. S/C has virtually ceased to exist vide your Mm 310 – moreover its responsibilities have in general passed to UNRRA. The P.H. S/C. has never received any monthly or quarterly reports from the Italian Public Health authorities as none are available. It is understood that a comprehensive report

Texfer the Italian Medical Service [illegible]

produced their own kind of report – if so we should obtain it – because I cannot include their inadequate report in an A.C. monthly report

MW/30/3.

316

Ex. Cmm.

I am not clear about this. Monthly reports of S/C's are supposed to be on the activities of the S/C as in the past. The P.H. S/C. has virtually ceased to exist vide your Mm. 310 – moreover its responsibilities have in general passed to UNRRA. The P.H. S/C. has never received any monthly or quarterly reports from the Italian Public Health authorities as none are available. It is understood that a comprehensive report covering the activities of Italian Public Health work from the Armistice to date is in course of preparation. It is not considered reports by P.H.S/C can be more adequate. I agree however that the Feb. report was in very cryptographic form on the info. available and I enclose a more concise edition at Pho. 315.

5/4/46

M Carr Bryden
r. P.C.A.S

J McW. 6/4
H.S. 6/4

317.

Thank you that is inadequate

MW 6/4

2370

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298.

~~Cdg~~ Exec 19/11

Please see Public Health report at 291-297.

B. 19/11.

~~Cdg~~ Exec 23/12

303.

Please see Public Health report at 299-303.
Passages of interest are marked.

AS 21/12.

~~Cdg~~ Ex C.

307.

Please see Public Health S/C report at 304-306 to December. Passages of interest are marked.

Seen by Ex Com

B. 18/1

~~Also~~ Ex Comm.

309.

Public Health S/C report for January is at 308.
Passages of interest are marked.

JHS. 20/2

AS 19/2

310.

V.P. CAS.

Is there anything we can do to employ the Officers of this Sub Com (in some official job e.g. Displaced Persons) while awaiting their demise?

JW 24/2.

311

Ex. Comm

Displ. Medical Branch has closed down on handing of responsibility to UNRRA.
Moreover there are no surplus P.H. officers in the field.
Of those on the strength of the [illegible]

Seen by Ex Com

RS 18/1

~~Also~~ Ex Comm.

309.

Public Health S/C report for January is at 308. Passages of interest are marked.

JHS 20/2

310.

RS 19/2

V.P. CAS.

Is there anything we can do to employ the Officers of this Sub Com (in some official job e.g. Displaced Persons) while awaiting their demise?

JHS 24/2.

311

Ex. Comm

Displ. Medical Branch has closed down on transfer of responsibility to UNRRA.

Moreover there are no surplus P.H. officers in the field. Of those on the strength of this HQ. Col Frizelle is on LIAP. He expects to transfer shortly to UNRRA as a Dep/Director. This leaves only Capt. Sampson (A) who is i/c the Sub Commission pending orders for its final dissolution.

26/2/46

M Cam Ferguson JHS. 26/2

V.P. C.A.S.

463.

MR/27/2.

2002

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Declassified E.O. 12356 Section 3.3/NND No. 785047

273

Note

Ref M 271 para 2, Capt Battaglia PHS/C was ordered to Sicily to investigate typhus outbreak for the Commission. His mission was not to carry out dusting although he carried small emergency supply of DDT with him. UNRRA carried out the dusting & disinfesting operation.

3/7/45

280.

C.S.O. Please see Public Health S.O.'s report for June at 279

RWK 26/7

27/7

286.

A/Executive Commissioner

P.H.S.C. report for July is at 285. This is a good report. Passages of interest have been marked & a useful summary can be found on page 282.

23/viii/45

UNRRA carried out the dusting & disinfecting operation.

3/7/45

280.

C.S.O. Please see Public Health S.C.'s report for June at 279

PWK 26/7

Sd. 27/7

286.

A/Executive Commissioner

P.H.S.C. report for July is at 285. This is a good report. Passages of interest have been marked & a useful summary can be found on page 282.

23/viii/45

23/8 Noted. 2

291.

Executive Commissioner

Public Health S/C for August is at folios 287-290. Passages of interest are marked. The summary is at 287.

4/10 BD 3/10.

293.

Ex. Commissioner

Please see Public Health S/C report for September at 294. The summary is at 292. BD 19/10. 20/10

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270

Exclusive.

Public Health report for June not 164. Very comprehensive in scope. The sentence underlined in para 2 (f) marked X is a welcome change to our normal experience!

E.F. 2/6

271.

CSO.

1. Should like X in Para 1 followed up.

2. Was it necessary to send 1120 pounds of DDT and two teams (AC & UNRRA) to deal with a sporadic outbreak of typhus in a small town in Sicily (2 A a.)? Small redundancy & lack of co-operation. Please ask P.H. Sub Com for comments.

3. Please make sure that 1 (B) & 2 A(f) are covered in A.C. report.

Declassified E.O. 12356 Section 3.3/NND No. 785017

a welcome change to an experience!

Ei 2/6

271.

CSO

1. Should the X in Para 1 followed up.
2. Was it necessary to send 1120 pounds of DDT and two teams (AC & INNRRA) to deal with a sporadic outbreak of typhus in a small town in Sicily (2 A a.) & small redundancy & lack of cooperation. Please ask P.H. S.O. Com for comments.
3. Please make sure that [redacted] (B) & 2 A(f) are covered in A.C. report.

MS 2/7

272

Maja Madden
Miss Llewellyn. → PH.

For action as above please

Ei 2/7

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Declassified E.O. 12356 Section 3.3/NND No. 785017

3403

323

HEADQUARTERS ALLIED COMMISSION
APO 794
Public Health Sub-Commission

AC/3016/PH

10 July 1946

JUL 18 1946

Subject : - Report for the month of June 1946

Thru : - V.P. CA Section

To : - Executive Commissioner, HQ A.C.

1. June has proved to be an excellent month as regards the incidence of communicable disease. The only disease considered worthy of mention by the office of the High Commissioner for Hygiene and Public Health has been Small-pox and the figures are the lowest to be reported for very many months. The total for the whole of Italy has been only 40, comprising 30 from Bari Province, 9 from Salerno and 1 from Reggio Calabria.

2. Vital Statistic for Rome Comune for the month of May are as follows :
Population 1.513.640. Total number of births 2.670.
Deaths 1.131. Deaths in children under one year of age 156. The infant mortality rate is therefore 58.7, as compared with 72.3 in April. Deaths from all form of Tuberculosis totalled 149 as compared with 208 in April. Of these 135 were due to Pulmonary Tuberculosis.

G.H. [illegible] 2066
Colonel,
Director,
Public Health Sub-Commission

EC. DIST - 18 July

1- EC
6- PA. Br.
1 Mil Att Am Emb.
1- French Rep.

See M-324

(1/cox Mc)

Declassified E.O. 12356 Section 3.3/NND No. 785017

3403

321

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

11 June, 1946

JUN 18 1946

Subject : - Report for the Month of May, 1946.

Thru : - VP, CA Section

To : - Executive Commissioner, HQ A.C.

1. The situation in Italy as regards communicable diseases remains satisfactory. Small-pox and poliomyelitis are again, as in the previous month, the only two infectious diseases requiring notification. There were 65 cases of small-pox in May, all of them occurring in Southern Italy. The highest incidence took place in the province of Bari, which registered 37 cases as against 39 in April.

2. Practically all cases of poliomyelitis have instead occurred in Northern Italy. On the whole 81 cases were reported in May, as against 49 in April, but there do not seem to be localised outbreaks worthy of note. The provinces of Milan, Venice and Bergamo registered the highest number of cases, the figures being 10, 10 and 9 respectively.

3. Vital statistics for the month of April are as follows. Population of Rome Commune 1.509.274. Total number of births 2.587. Deaths 1.267. Deaths in children under one year of age 188, which gives an infant mortality rate of 72.3 as against 66.9 in March and 84.8 in February. In the same Commune deaths from all forms of tuberculosis during April were 202 compared to 188 in March. Out of this figure, 159 deaths were due to pulmonary tuberculosis.

2303

G.M. FRIZELLE
Colonel,
Director,
Public Health Sub-Commission

See M322

Ex Dist - 18 JUNE
1-EC
6-Pr Br
1-Mil Affairs Br
1 FR Rep

(1/c DR M.)

Declassified E.O. 12356 Section 3.3/NND No. 785017

3403 320

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AG/3016/PH

11 May 1946

MAY 17 1946

Subject : - Report for the Month of April, 1946.

Thru : - VT. CA Section

To : - Executive Commissioner, HQ. A.C.

1. The position regarding communicable diseases in Italy for the month of April was extremely satisfactory. The only diseases requiring notification were small-pox and poliomyelitis. Small-pox showed a sporadic incidence, only isolated cases appearing throughout the Country, with the exception of the Province of Bari, where a small outbreak comprising 39 cases occurred. In the Province of Apulia the number fell from 10 in March to 10 in April.

2. As regards poliomyelitis, the greatest number of cases reported during the month was 5 from the Province of Florence, while the total for the whole of Italy was 40.

3. The infant mortality rate for some Communes for the month of March shows a considerable decrease compared with the February figure, being 66.9 as against 84.8. In the same Communes, deaths from all forms of tuberculosis declined from 322 in February to 100 in March.

G.M. Fazzeria
Colonel,
Director,
Public Health Sub-Commission.

EC. DIST - 17 MAY

1- EC.
6- PR BR
1- Mil. Adl Com Comb.
1- French Rep.
1- spare.

2004

see M321

(5/Clan Mc)

3403

318

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AG/3016/PH

6 April 1946

APR 16 1946

Subject : - Report for the Month of March 1946

Thru : - V.P., C.A. Section

To : - Executive Commissioner HQ., A.C.

1. Political.

The Sub-Commission continues to carry out minimal liaison functions with the Italian Government.

2. Moranno Repatriation Hospital Command.

This Command, which was originally activated by the Public Health Sub-Commission and which has contributed incalculable benefit to sick and wounded Italian repatriates, is gradually diminishing the scope of its operations. During March, five of the requisitioned hotels used as hospitals were closed and their equipment has been withdrawn by the Sanita' Militare. Six hospitals now remain with a bed capacity of 2770, of which 1329 beds are occupied. A Commission which visited Moranno during the month anticipated that two more hospitals can be closed in May and that the whole Command will be able to cease operations in the future.

The Sondalo Sanatorium scheme, originally begun as an offshoot of Moranno for the treatment of tubercular repatriates has been promised a grant of two milliard lire by the Italian Treasury and it is anticipated that it will in future play a large part in the general Italian antitubercular campaign. The Sanita' Militare has promised to give Sondalo 500 beds and a request has been made to DDS No.2 District for the release of some 800 beds and equipment of a German hospital when the latter ceases to operate.

3. PUBLIC HEALTH.

During March the position regarding communicable diseases remained satisfactory. No cases of plague or typhus were reported from the whole of Italy, Sicily or Sardinia. Smallpox is still to be found in certain provinces but the number of cases is small, the most important figures being 36 in Caserta, 24 in Avellino, 16 in Naples and 10 in Venezia. Nineteen cases of poliomyelitis were reported from the Bolzano province and 31 from the rest of Italy.

No specific antimalaria work was required or carried out in the Po Delta area. A survey was made, however, of the incidence of fly borne intestinal infections in this area and the findings suggest that the DDTing of the buildings has brought about some decrease in these diseases.

Agreement has been reached between the office of the D.P.S., C.M.G., C.M.F., and the office of the High Commissioner for Public Health regarding the employment of Allied military specialists as

Declassified E.O. 12356 Section 3.3/NND No. 785017

1. Political.

The Sub-Commission continues to carry out minimal liaison functions with the Italian Government.

2. Merano Repatriation Hospital Command.

This Command, which was originally activated by the Public Health Sub-Commission and which has contributed incalculable benefits to sick and wounded Italian repatriates, is gradually diminishing the scope of its operations. During March, five of the requisitioned hotels used as hospitals were closed and their equipment has been withdrawn by the Sanità Militare. Six hospitals now remain with a bed capacity of 2770, of which 1329 beds are occupied. A Commission which visited Merano during the month anticipated that two more hospitals can be closed in May and that the whole Command will be able to cease operations in the future.

The Sondalo Sanatorium scheme, originally begun as an offshoot of Merano for the treatment of tubercular repatriates has been promised a grant of two milliard lire by the Italian Treasury and it is anticipated that it will in future play a large part in the general Italian antitubercular campaign. The Sanità Militare has promised to give Sondalo 500 beds and a request has been made to DDMS No.2 District for the release of some 800 beds and equipment of a German hospital when the latter ceases to operate.

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No specific antimalaria work was required or carried out in the Tiber Delta area. A survey was made, however, of the incidence of fly borne intestinal infections in this area and the findings suggest that the DDTing of the buildings has brought about some decrease in those diseases.

Agreement has been reached between the office of the A.M.S., G.M.Q., C.M.F., and the office of the High Commissioner for Public Health regarding the employment of Allied military specialists as observers and advisers in civil V.D. clinics for the treatment of infected prostitutes. The agreed "modus operandi" is being put immediately into effect.

Vital statistics for Rome Commune for the month of February show no great fluctuation from the figures usually recorded. The infant mortality rate was 84.8 as compared with 70.9 in January, while the number of deaths from all forms of tuberculosis showed a slight decline, the January figure being 227 and that for February 213.

G.M. Frizelle

G.M. FRIZELLE
Colonel,
Director,
Public Health Sub-Commission

EC DIST. 16 Apr
1- EC
6- PRBr
1- Mil Att an Emb.
1- Fr Rep.

2063

see M319

(J/DR M.)

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3403

315

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

4 April 1946

4 APR 1946

APR 5 1946

Subject : - Amended Monthly Report for February 1946

To : - V.P., C.A. Section

1. Merano Repatriation Hospital Command.

The number of patients admitted to this hospital centre is diminishing as various zones in Germany are being cleared of sick and wounded prisoners of war. The Italian Red Cross, however, has information that areas of Czecho-Slovakia still require evacuation of sick Italian personnel. The decrease in the admission list has permitted the closure of three hospitals during February. It is not expected, however, that the Hospital Command will be in a position to close completely for a number of months to come. The scope of the activities of this Command can be realized from the fact that between 29 July 1945 and 31 January 1946, 12.137 patients were admitted and 10.484 patients discharged.

2. Public Health.

The month of February has been satisfactory in that no major outbreaks of communicable diseases have occurred. The Taranto epidemic of plague has completely subsided and not even sporadic cases of typhus have been reported. Reports of cases of plague in North Africa have led the High Commissioner for Public Health to adopt stringent control measures at all ports, to prevent the possibility of this disease gaining entry.

While small-pox can be considered endemic in Italy at the present time, the incidence is not in any way alarming. The Naples figures continue to show a highly satisfactory decrease, only one case occurring in Naples City and fourteen in Naples Province. Sporadic cases have occurred in other provinces, the only noteworthy figure being eighteen in Salerno.

The work of the Malaria Control Branch in the Tiber Delta was in abeyance during February.

An outbreak of measles in Piemonte area which reached a peak in January is steadily declining, while diphteria, also prevalent in Northern Italy, is decreasing.

It may be said with assurance that the present state of public health in Italy is satisfactory and with the approach of spring no outbreaks of grave communicable diseases are anticipated.

G. Frizelle

G.M. FRIZELLE
Colonel,
Director,
Public Health Sub Commission

see M 316-117

2067363

PA/4

(S/COR M.C.) 5 mem.

3403

312

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

12 March 1946

MAR 15 1946

SUBJECT : - Report for the Month of February 1946
Public Health Sub-Commission

FROM : - VP, CA Section

TO : - Executive Commissioner, HQ AC.

1. POLITICAL

Although the close-down of this Sub-Commission has not materialised as yet, preparations are being carried out in anticipation of that event. Minimum liaison functions are being carried on.

2. REPATRIATION HOSPITAL COMMAND.

(A) Between 29 July 1945 and 31 January 1946, 12.137 patients were admitted and 10.484 patients were discharged from this hospital centre.

(B) Three of the fourteen hospitals have been closed.

3. PUBLIC HEALTH.

(A) Typhus. No cases were reported during the month.

(B) Plague. No cases of bubonic plague were reported in Italy during the month of February. In view of the sporadic cases occurring in certain localities in North Africa, the High Commissioner for Public Health, Italian Government, has taken appropriate measures for the necessary control at Italian ports as regards incoming shipping from such localities.

(C) Small-Pox. Fourteen cases were reported from Naples province, while only one was reported from the City of Naples. From the rest of Italy were reported the following number of cases: Bari 5, Benevento 3, Caserta 2, Lecce 5, Salerno 18, Taranto 1, Venezia 8.

(D) Malaria. Nothing noteworthy to report.

(E) Tuberculosis. During January 1946, 227 deaths occurred from all forms of tuberculosis in Rome Commune, including 199 deaths due to pulmonary tuberculosis.

(F) Poliomelytis. Ten cases were reported during February.

(G) Measles. This disease has been prevalent in Piemonte region for some time. It reached a peak in January (1577 cases) and is slowly subsiding at thepresent time.

(H) Diphteria. The number of cases, which was especially high in Northern Italy, has been steadily declining.

(I) Vital statistics.

(1) As of Januart 31, 1946, the population of Rome Commune was 1.496.068. (2) Live births numbered 2930 in the city of Rome during January. (3) Deaths in children under one year of age were 210, giving an infant mortality rate of 70.9 as compared with 80.93 of December.

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Although the close-down of this Sub-Commission has not materialised as yet, preparations are being carried out in anticipation of that event. Minimum liaison functions are being carried on.

2. REPATRIATION HOSPITAL COMMAND.

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(B) Three of the fourteen hospitals have been closed.

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(B) Plague. No cases of bubonic plague were reported in Italy during the month of February. In view of the sporadic cases occurring in certain localities in North Africa, the High Commissioner for Public Health, Italian Government, has taken appropriate measures for the necessary control at Italian ports as regards incoming shipping from such localities.

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(D) Malaria. Nothing noteworthy to report.

(E) Tuberculosis. During January 1946, 227 deaths occurred from all forms of tuberculosis in Rome Commune, including 199 deaths due to pulmonary tuberculosis.

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(G) Measles. This disease has been prevalent in Piemonte region for some time. It reached a peak in January (1577 cases) and is slowly subsiding at thepresent time.

(H) Diphteria. The number of cases, which was especially high in Northern Italy, has been steadily declining.

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4. PERSONNEL.

The Director of this Sub-Commission, Col.G.M.Frizelle left for the U.K. on LIAP.

5. MISCELLANEOUS.

The health and welfare program of Udinaprovince is proceeding smoothly under the supervision of the Italian Red Cross representatives and Italian health authorities. Thirty thousand food and clothing parcels are to be received from E.R.D.S.I. and distributed to

DISTRIBUTION 15/3

EC. 1.
PRB. 6
NL. ATT
AM EMB. 1.
FRENCH REP. 1.

2061

See Minute 113 -114

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three classes of communes arranged according to the percentage of damage. Sixty dispensaries have been opened by O.M.I. but more are needed.

S U M M A R Y

1. POLITICAL.

The anticipated closing down of this Sub-Commission still has not occurred. Minimum liaison functions are being carried on.

2. MERANO HOSPITAL COMMAND.

Between 29 July 1945 and 31 January 1946, 12.137 patients were admitted and 10.484 discharged.

3. PUBLIC HEALTH.

(A) No cases of typhus were reported.
(B) No cases of plague were reported in Italy.
(C) There is a general decline in the number of small-pox cases throughout Italy.
(D) There was nothing of interest to report on malaria.
(E) There were 227 deaths from all forms of tuberculosis in Rome Commune during the month of January 1946.
(F) Ten cases of poliomelytis were reported.
(G) The epidemic of measles which had been raging in Piemonte region is abating.
(H) There is a steady decline in the number of cases of diphteria throughout Italy.
(I) A slight decrease is noted in the rate of infant mortality.

4. PERSONNEL.

One British Officer left for the U.K. on LLP.

5. MISCELLANEOUS.

The smooth working of the Udine province health and welfare program under Italian hands is noted.

FOR THE DIRECTOR :

W W Simpson
William W. Simpson
Captain Sn.C.
Executive Officer
Public Health Sub-Commission

Declassified E.O. 12356 Section 3.3/NND No. 785017

3403 308

HEAD QUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH 12th February 46

SUBJECT: - Report of the Month of January 1946
Public Health Sub-Commission

THRU : - VP, CA Section.

TO : - Executive Commissioner, H AC.

1. POLITICAL:

(A) During the last weeks of December the last field representatives was withdrawn from Naples. The hand-over to the High Commissioner was thus fully completed by the beginning of January.

(B) The anticipated closing of this Sub-Commission has, as yet, not occurred, so that liason functions are still being carried out.

2. NEWARO REPATRIATION HOSPITAL COMMAND:

There is nothing of interest to report.

3. PUBLIC HEALTH:

(A) TYPHUS: Only one case of typhus was reported. This was from the town of Arona in Novara province. As usual, the man was a repatriated person from the Balkan area.

(B) Plague: No cases of plague have been reported from Southern Italy during the month of January.

(C) Small-pox: Thirty-seven cases of small-pox were reported from Naples while thirty-five cases were reported from that province.

From the rest of Italy there were reported the following cases, 3 from Avellino, 33 from Bari, 5 from Beneventa, 2 from Campobasso, 1 from Caserta, 1 from Lecce, and 13 from Salerno.

(D) Malaria: There is nothing of interest to report.

(E) Infant Mortality: During December 2230 live births were registered in Rome, with 2605 deaths among infants under 1 year of age.

(F) Tuberculosis: In December 198 deaths occurred in Rome from all forms of tuberculosis.

4. PERSONNEL:

Capt W.T. Sampson, executive officer, was promoted to his present rank.

SUMMARY

Declassified E.O. 12356 Section 3.3/NND No. 785017

(A) During the last weeks of December the last field representatives was withdrawn from Naples. The hand-over to the High Commissioner was thus fully completed by the beginning of January.

(B) The anticipated closing of this Sub-Commission has, as yet, not occurred, so that liason functions are still being carried out.

2. MIRANO REPATRIATION HOSPITAL COMMAND:

There is nothing of interest to report.

3. PUBLIC HEALTH:

(A) TYPHUS: Only one case of typhus was reported. This was from the town of Arona in Novara province. As usual, the man was a repatriated person from the Balkan area.

(B) Plague: No cases of plague have been reported from Southern Italy during the month of January.

(C) Small-pox: Thirty-seven cases of small-pox were reported from Naples while thirty-five cases were reported from that province.

From the rest of Italy there were reported the following cases, 3 from Avellino, 33 from Bari, 5 from Beneveuto, 2 from Campobasso, 1 from Caserta, 1 from Lecce, and 13 from Salerno.

(D) Malaria: There is nothing of interest to report.

(E) Infant Mortality: During December 2230 live births were registered in Rome, with 1605 deaths among infants under 1 year of age.

(F) Tuberculosis: In December 198 deaths occurred in Rome from all forms of tuberculosis.

4. PERSONNEL:

Capt W.T. Sampson, executive officer, was promoted to his present rank.

SUMMARY

1. POLITICAL

The anticipated closing of this Sub-Commission has not occurred, so that liason functions are still being carried out.

2. MIRANO REPATRIATION HOSPITAL COMMAND

Nothing of interest to report.

3. PUBLIC HEALTH

(A) No cases of Subonic Plague have been reported from Southern Italy during the month.

(B) The incidence of Small-pox showed an increase.

(C) Only one case of Typhus was reported.

2050

See M 309 310. 311.

EC DIST - 19 Feb.
1- EC
6- PRG
1- Mil Attache Am Embassy
1- Fr Rep.
PA.

(MISS S)

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(D) There is nothing of interest to report on Malaria.
(E) Infant mortality rates show an increase.
(F) Deaths from all forms of tuberculosis in Rome numbered 198 in December as compared with 150 in November.

4. PERSONNEL

One American officer was promoted to the rank of Captain.

For the DIRECTOR:

W. A. GAUFSON, Captain Sn. C.
Exec. Officer,
Public Health Sub-Commission.

Declassified E.O. 12356 Section 3.3/NND No. 785011

Declassified E.O. 12356 Section 3.3/NND No. 785017

306

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

3403

10th January 1946

JAN 17 1946

SUBJECT : - Report for the Month of December 1946
Public Health Sub-Commission

THRU : - VP, CA Section

TO : - Executive Commissioner, HQ AC.

1. POLITICAL :

(A) During December the last Northern Public Health representative was withdrawn from Piemonte Region. The official hand-over of the Northern Regions, which is to take place at midnight on 31st December will therefore make no difference to the 'status quo' which already existed as far as the functions of this Sub-Commission are concerned.

(B) It is anticipated that by the end of January the Public Health Sub-Commission will be abolished and that the Health Division of U.N.R.R.A. will assume the liaison and advisory functions which are now being performed by the Sub-Commission.

2. MERANO REPATRIATION HOSPITAL COMMAND.

(A) On 15th December the Italian Red Cross, under the direction of the High Commissioner for Public Health, assumed responsibility for the operation of the Merano Hospital Command.

(B) Figures available as of 30th November are as follows: -

Total admissions..... 10130
Cases evacuated to the
South (including Sicily).... 7559
Cases remaining..... 2440

Cases remaining:.....52% Tubercular
36% Medical
6% Surgical
6% V.D.

(C) Owing to a considerable influx of patients from the Russian Zone, it was not possible to close more units in Merano and on 30th November 15 hospitals were in operation. From 11th until 30th November a total of 1115 patients arrived by freight trains from Russia and all these patients were in very poor condition, many having had no food for as much as four days at a time during a 37 days journey as well as being without medical attention en route.

(D) Work on the organisation of Sondalo Sanatorium continues. This Sanatorium is designed to receive tubercular patients from Merano and so relieve pressure on the bad accommodation in that Centre. Dr. Saroni, the Italian Commissioner for Sondalo has already received from Sanitate Park, Feltre, a very large stock of blankets, mattresses, sheets, pillow-cases and other articles of hospital equipment. In addition the American Red Cross has distributed to Merano thousands of [illegible]

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(D) Work on the organisation of Sondalo Sanatorium continues. This Sanatorium is designed to receive tubercular patients from Merano and so relieve pressure on the bed accommodation in that Centre. Dr.Baroni, the Italian Commissioner for Sondalo has already received from Sanitate Park, Feltre, a very large stock of blankets, mattresses, sheets, pillow-cases and other articles of hospital equipment. In addition the American Red Cross has distributed to Merano thousands of sweaters, shirts, shoes and trousers as well as comforts such as razor blades, tooth paste, shaving soap, games, etc.

(E) It is learned with regret that Mr.Sigerist is soon to be withdrawn from Merano. Ever since this project was initiated, Mr.Sigerist has worked with unflagging zeal and tireless enthusiasm both at Merano and Sondalo and the present success of the Merano Command owes much to his initiative and resource.

3. PUBLIC HEALTH :

2339

(A) PLAGUE :

No cases of plague were reported from Taranto during December. One case was reported from Reggio Calabria in a seaman who had been working in Taranto and who returned in November to his home where he fell ill. Owing however to his having previously been immunized with anti-plague vaccine in Taranto, his symptoms were slight and he made a good recovery.

See M. 307

EX. COM. DIST - 14 JAN. 1946.
1 - EX. COM.
6 - P.R.B.
1 - POLAD (A) for MIN. ATT.
1 - FRENCH REP.

(MISS S.)

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(B) TYPHUS.

During December three cases of typhus occurred in repatriates. The first two, which were discovered in Milan and Naples respectively, had returned from Russia, while the third, which occurred in Piacenza, had returned from Jugoslavia. Both the Naples and the Piacenza cases died.

(C) SMALLPOX.

(a) There has been a marked decrease in the incidence of smallpox during December. Naples figures have dropped to 11 for the City and 12 for the Province, while the Ischia outbreak is now finished. 10,700 vaccinations were carried out in Naples during the month.

(b) Figures from other provinces are as follows : - Avellino 10, Bari 4, Benevento 8, Caserta 10, Campobasso 3.

(D) MALARIA:

(a) Regular inspections of mosquito catching stations in the Delta area were halted as of December 1, 1945. However, an inspection service was maintained throughout the month on a modified scale. This service included inspections of premises where mosquitoes were frequently found during the season and where finding of mosquitoes during the off season seemed most probable. A special part of this inspection service included examination under bridges and in culverts which appeared as probable hibernating quarters. A total of nine mosquitoes were located under bridges.

(b) Results of the inspections for the month are as follows :-

Total Stations examined	Total mosquitoes located
256	36

All of the thirty-six mosquitoes were hibernating; none of them were found on surfaces which had been treated.

(E) INFANT MORTALITY :

During November 2119 live births were registered in Rome with 147 deaths in infants under one year of age. The resulting infant mortality figure is 69.04 as compared with the October figure of 66.5

(F) TUBERCULOSIS:

In November 180 deaths occurred in Rome from all forms of tuberculosis. The total figure was 190. The deaths from pulmonary tuberculosis numbered 150 as compared with the October figure of 164.

4. PERSONNEL :

(A) During December Lt.Colonel Raymond Kenny left for the U.S. on 45 days T/D and Lt. William V.Simpson was appointed Executive Officer.

(B) Captain Battaglia and Lt.Schirle returned to the U.S. on redeployment.

SUMMARY

1. POLITICAL:

The last Public Health representative was withdrawn from the North during December. It is anticipated that this Sub-Commission will soon be abolished and that its functions will be assumed by the Health Division of

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season and where finding of mosquitoes during the off season seemed most probable. A second part of this inspection service included examination under bridges and in culverts which appeared as probable hibernating quarters. A total of nine mosquitoes were located under bridges.

(D) Results of the inspections for the month were as follows :-

Total Stations examined	Total mosquitoes located
256	36

All of the thirty-six mosquitoes were hibernating; none of them were found on surfaces which had been treated.

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During November 2119 live births were registered in Rome with 147 deaths in infants under one year of age. The resulting infant mortality figure is 69.04 as compared with the October figure of 66.5

(F) TUBERCULOSIS:

In November 180 deaths occurred in Rome from all forms of tuberculosis. The October figure was 1[illegible]. The deaths from pulmonary tuberculosis numbered 150 as compared with the October figure of 16[illegible].

4. PERSONNEL :

(A) During December Lt.Colonel Raymond Kenny left for the U.S. on 45 days P/D and Lt.William T.Simpson was appointed Executive Officer.

(B) Captain Battaglia and Lt.Mohrle returned to the U.S. on redeployment.

SUMMARY

1. POLITICAL:

The last Public Health representative was withdrawn from the North during December. It is anticipated that this Sub-Commission will soon be abolished and that its functions will be assumed by the Health Division of U.N.R.R.A.

2. MERANO REPATRIATION HOSPITAL COMMAND:

The Italian Red Cross, under the direction of the High Commissioner for Public Health, assumed responsibility for the Merano Hospital Command on 15th December. During November 1116 patients arrived from Russia. They were all in poor condition and had received no medical attention en route. Work is proceeding in the organization of Sondalo Sanatorium for the reception of tubercular cases from Merano and much equipment has already been obtained.

2334

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307

3. PURPOSE: [illegible]

(a) [illegible] a series of [illegible] [illegible] [illegible]

1619

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Chief, Public Relations Div.

Colonel,
Director of
Public Relations, Sub-Command

2 Jul 7

Attachment

Copy to Chief, Public Relations Div.

Copy to Colonel, Director of Public Relations, Sub-Command

3403 91

302

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

11 December 1945

SUBJECT : - Report for the Month of November 1945
Public Health Sub-Commission

DEC 21 1945

THRU : - VP, CA Section

TO : - Executive Commissioner, HQ AC.

1. POLITICAL :

(A) The suggested cessation of the functions of this Sub-Commission on 1st December has not taken place and at present no accurate forecast can be given as to when this will occur.

(B) The Sub-Commission has now a representative only in Piemonte Region and he will shortly be recalled to this HQ. On his withdrawal, the High Commissioner for Public Health will resume direct control over the medical administration of all the northern regions with the exception of Venezia Giulia, even though the official hand over of these areas has not yet taken place.

2. MERANO REPATRIATION HOSPITAL COMMAND :

(A) This Command is continuing to function satisfactorily and as of 15th November the following figures are available :

Total admissions.....	7303
Total discharges.....	6231
Patients under care.....	1445
Personnel - Doctors.....	89
" - Nurses.....	205
Bed capacity.....	3161
Deaths.....	127

While the bed capacity is at present much in excess of the number of patients being cared for, it is not proposed to reduce the size of the centre to any great extent as it is still a matter of conjecture as to when a fresh influx of patients may suddenly arrive. Each week four hotels are being closed down and it may be possible soon to do the same with others. The two Italian field hospitals which were originally situated at Lana and which in the first days of the project rendered such outstanding service, have now been returned to the Italian Army.

(B) The problem of evacuating patients to central and southern Italy still presents some difficulties. A hospital train arranged by the Pontifical Commission left Merano during November, but unfortunately there was a lack of coordination with the other interested organisations and this resulted in some confusion. The High Commissioner for Public Health has now sent an Official to Merano, whose function it will be to coordinate all evacuation arrangements. It is essential that reception facilities should be properly organised before the departure of any hospital train is authorized.

(C) It is greatly to be regretted that during November Lt. Colonel L. Snedeker has had to leave for the United States. His enthusiasm and

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be given as to when this will occur.

(B) The Sub-Commission has now a representative only in Piemonte Region and he will shortly be recalled to this HQ. On his withdrawal, the High Commissioner for Public Health will resume direct control over the medical administration of all the northern regions with the exception of Venezia Giulia, even though the official hand over of these areas has not yet taken place.

2. MERANO REPATRIATION HOSPITAL COMMAND :

(A) This Command is continuing to function satisfactorily and as of 15th November the following figures are available :

Total admissions.....	7803
Total discharges.....	6231
Patients under care.....	1445
Personnel - Doctors.....	89
" - Nurses.....	205
Bed capacity.....	3161
Deaths.....	127

While the bed capacity is at present much in excess of the number of patients being cared for, it is not proposed to reduce the size of the centre to any great extent as it is still a matter of conjecture as to when a fresh influx of patients may suddenly arrive. Meanwhile four hotels are being closed down and it may be possible soon to do the same with others. The two Italian field hospitals which were originally situated at Lana and which in the first days of the project rendered such outstanding service, have now been returned to the Italian Army.

(B) The problem of evacuating patients to central and southern Italy still presents some difficulties. A hospital train arranged by the Pontifical Commission left Merano during November, but unfortunately there was a lack of coordination with the other interested organisations and this resulted in some confusion. The High Commissioner for Public Health has now sent an Official to Merano, whose function it will be to coordinate all evacuation arrangements. It is essential that reception facilities should be properly organised before the departure of any hospital train is authorized.

(C) It is greatly to be regretted that during November Lt.Colonel L.Snodeker has had to leave for the United States. His enthusiasm and organising ability have been among the most important factors in the successful establishment of the Merano project, and he has received the fullest possible support from Captain De Angelis and Mr.Sigerist of the American Red Cross. With the departure of Captain De Angelis only Mr.Sigerist is left at Merano. It is hoped that an Allied Liaison Officer will be appointed to work with the Command as the services of such an officer are very desirable.

(D) A meeting was held in Rome at the end of November at which it was proposed that the responsibility for administering the Command should now be assumed by the Italian Red Cross under the direction and supervision of the High Commissioner for Public Health. At the meeting the Italian Red Cross was not prepared to give a formal reply to this proposal but it is hoped that this will shortly be forthcoming.

Dist: 21 Dec
1- RC
6- PRSr
1 Rel attache an Rob.
1- Jr Rep

See M. 302

(M155 5)

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(E) The organisation of the Sanatorium at Sondalo for the reception of tubercular patients from Morano is proceeding. The Official appointed by the High Commissioner has visited Sondalo with Lt:-Colonel Snodeker, has made a preliminary survey and has returned to Rome for consultations. There remains much to be done in the way of organisation, the procurement of equipment, transport, fuel and rations. In these matters the appointment of a liaison officer to work at Sondalo as well as Morano would be of the greatest possible assistance. The Regional Commissioner of Lombardia Region is being asked that both he and the Provincial Commissioner for Sondrio Province should afford all possible assistance to enable the Sondalo Sanatorium to operate successfully and efficiently.

3. CASES OF TUBERCULAR IN ITALIAN WIVES OF AMERICAN SOLDIERS.

(A) During November the American Red Cross found itself faced with a problem of considerable interest. Out of the large number of marriages that have been contracted between American soldiers and Italian girls during the past two years, it has been found that a certain proportion of the Italian wives are suffering from tuberculosis. As this prevents their being allowed entry into the United States, provisions will have to be made for their care and treatment in Italy.

(B) A meeting was held at this HQ between representatives of the American Red Cross and the High Commissioner for Public Health at which the whole problem was fully discussed and it was agreed that beds should be made available in the "Principe di Piemonte" Sanatorium, Naples, for such cases; that primarily the Italian Government would assume financial responsibility for their treatment but that an agreement would have to be reached as to the sum to be contributed by the husbands for the care of their wives. The Government has also agreed that periodic progress reports will be furnished for transmission to the husbands whether here or in the United States.

(C) Already provision has been made for the transfer of four cases from the 300 American General Hospital to the "Principe di Piemonte" Sanatorium and as and when cases are discovered and near bed space becomes available it is anticipated that the Sanatorium will set aside a special ward for the treatment of these cases.

4. PUBLIC HEALTH.

(A) PLAGUE.

Only one case of plague is reported to have occurred in Taranto during November. This proved fatal. No subsequent cases have been reported. The total number of cases since the beginning of the outbreak until the end of November is 28 with 14 deaths.

(B) TYPHUS.

One case of typhus was reported from Palermo on 14th November. No particulars are available concerning the case. Another case was reported on 19 November from Belluno Province, occurring in a Polish refugee who was stated to be recovering in hospital when the report was received.

(C) SMALLPOX.

(a) Smallpox continues to be reported from Central and Southern Italy. The number of cases in Avellino Province has dropped to 17, while no cases have been reported from Sardinia during November.

(b) In Naples City there were 12 cases as compared with 6 in October, and in Naples Province 30 as compared with the October figure of 17. These figures include a small outbreak in the Island of Ischia, which is now subsiding.

(c) Figures are reported from other provinces as follows:- Bari 5, Brescia 29, Cosenza 8, Foggia 1, Livorno 1, Milano 30, Taranto 3,

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cases for their care and treatment in Italy.

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4. PUBLIC HEALTH.

(A) PLAGUE.

Only one case of plague is reported to have occurred in Taranto during November. This proved fatal. No subsequent cases have been reported. The total number of cases since the beginning of the outbreak until the end of November is 26 with 14 deaths.

(B) TYPHUS.

One case of typhus was reported from Palermo on 14th November. No particulars are available concerning the case. Another case was reported on 19 November from Belluno Province, occurring in a Polish refugee who was stated to be recovering in hospital when the report was received.

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(b) In Naples City there were 12 cases as compared with 6 in October, and in Naples Province 30 as compared with the October figure of 17. These figures include a small outbreak in the Island of Ischia, which is now subsiding.

(c) Figures are reported from other provinces as follows:- Bari 5, Benevento 29, Caserta 6, Foggia 1, Livorno 1, Salerno 30, Taranto 3, Padova 4.

(D) MALARIA.

(a) Eradication of mosquitoes in the district covered by the Tiber Delta River Project has progressed rapidly during the month of November. Reports for the last week of the month indicate that nearly all mosquitoes captured have prepared for the cold season.

(b) With the advent of cooler weather, the number of adult mosquitoes captured declined late in the month. During the first weeks of the month captures had been only slightly lower than for October.

(c) In the Maccarese area, mosquitoes were found in only one catching station between November 19 and 25; the last week of the month reported here.

(d) For the same period, no positive stations were found in the Fiumicino area. This area has shown a negative count for the past six weeks.

(e) Six positive stations were noted in the Acilia-Ostia area for the same period.

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(f) The following table indicates the adult A.maculipennis captured for the month of October :

Week commencing	Fixed Catching Stations			Total Stations		
	No. Exam.	Percent positive	Av. No. Adults per Station	No. Exam.	Percent Positive	Average No. Adults per Station
Adults						
11/29	176	5.7	0.11	409	3.4	0.09
11/5	193	9.8	0.20	432	5.1	0.12
11/12	196	5.6	0.15	448	3.1	0.10
11/19	181	4.0	0.09	404	2.0	0.04

(g) The Malaria Demonstration Unit, working in the closest possible collaboration with the Italian Government and U.N.R.R.A. is formulating plans for a malaria eradication programme in Sardinia. The methods to be used will be a combination of those employed so successfully by the Rockefeller Foundation in their "Gambian" eradication project in Upper Egypt together with those which have been used this year in the Tiber Delta experiment.

(h) As this project will take at least two seasons, it will be continued by the Rockefeller Foundation in conjunction with U.N.R.R.A. and the Italian Government after the eventual closure of this Sub-Commission.

(E) INFANT MORTALITY :

There were 7133 live births in the Commune of Rome during October with 142 deaths in infants under one year of age. The infant mortality figure is therefore 66.5. The September figure was 65.2.

(F) TUBERCULOSIS :

In October there were in Rome Commune 196 deaths from all forms of tuberculosis, compared with 223 in September. The deaths from pulmonary tuberculosis numbered 154, the September figure being 187.

5. PERSONNEL :

The strength of the Sub-Commission was further depleted during November by the departure for the United States of Lt.Col and Lorton Goodchild, Major Paul Savage and Major Ballou.

S U M M A R Y

1. POLICIES:

This Sub-Commission continues to function. Its remaining representative in the North will be shortly recalled to this HQ. On his withdrawal the High Commissioner for Public Health will resume control over the medical administration of all the Italian Regions.

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11/5	[illegible]	5.7	0.11	109	3.4	0.09
11/12	193	9.8	0.20	132	5.1	0.12
11/19	106	5.6	0.15	148	3.1	0.10
	101	4.0	0.09	104	2.0	0.04

(g) The Malaria Demonstration Unit, working in the closest possible collaboration with the Italian Government and U.N.R.R.A. is formulating plans for a malaria eradication programme in Sardinia. The methods to be used will be a combination of those employed so successfully by the Rockefeller Foundation in their "Gabbias" eradication project in Upper Egypt together with those which have been used this year in the Tiber Delta experiment.

(h) As this project will take at least two seasons, it will be continued by the Rockefeller Foundation in conjunction with U.N.R.R.A. and the Italian Government after the eventual closure of this Sub-Commission.

(3) INFANT MORTALITY :

There were 7133 live births in the Comune of Rome during October with 142 deaths in infants under one year of age. The infant mortality figure is therefore 60.5. The September figure was 55.2.

(4) TUBERCULOSIS :

In October there were in Rome Comune 196 deaths from all forms of tuberculosis, compared with 223 in September. The deaths from pulmonary tuberculosis numbered 164, the September figure being 187.

5. PERSONNEL :

The strength of the Sub-Commission was further depleted during November by the departure for the United States of Lt.Colonel London Snodgrass, Major Paul Savage and Major Bulley.

S U M M A R Y

1. POLITICAL:

This Sub-Commission continues to function. Its remaining representative in the North will be shortly recalled to this HQ. On his withdrawal the High Commissioner for Public Health will resume control over the medical administration of all the Northern Regions with the exception of Venezia Giulia.

2. MERANO EVACUATION HOSPITAL COMMAND :

2554 -

Up until 15th November this Command had admitted 7803 patients and discharged 6231. The bed capacity is 3161 and the number of patients being cared for is 1442. Some reduction in the bed capacity will be effected by the closure of four hotels and the return of the two Italian field hospitals to the Italian Army. It is not proposed, however, to make any large scale reductions in beds, as it is yet impossible to forecast the admissions which may still arrive. The evacuation of patients to the south by hospital trains still presents some difficulties, but every effort is being made to coordinate the activities of all the interested agencies. It is hoped that responsibility for the Merano Hospital Command will soon be assumed by the Italian Red Cross under the direction and supervision of the High Commissioner for Public Health. The organisation of Sondalo Sanatorium for the reception and care of tubercular patients from Merano is proceeding, but administrative problems still remain to be solved.

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Declassified E.O. 12356 Section 3.3/NND No. 916284

999

3. CASES OF TUBERCULOSIS AMONG WIVES OF AMERICAN SOLDIERS :

As a result of the large number of marriages contracted between American soldiers and Italian girls, it has been found that a certain proportion of the wives are suffering from tuberculosis. Provision has to be made for their care and treatment in Italy and the American Red Cross approached the Italian Government through this Sub-Commission with a view to establishing a routine method of dealing with such cases. It was agreed that the Government would make available beds in a Sanatorium in Naples for their care. In the first place, arrangements however would have to be made for the husbands to contribute their share towards defraying these expenses.

4. PUBLIC HEALTH :

(A) Only one fatal case of plague was reported from Taranto during November. This brought the total number since the beginning of the outbreak to 26, with 11 deaths.

(B) Two cases of typhus occurred during November - one in Palermo and one in Reggio Calabria.

(C) Smallpox continues to be reported from central and southern Italy though no large scale outbreaks have occurred.

(D) The Malaria Project reports a considerable decline in the number of adult mosquitoes captured. This is due to the advent of cold weather. An Malaria Demonstration Unit is planning, in conjunction with the Italian Government and U.N.R.R.A., a large scale malaria eradication programme in Sardinia, which will take at least two seasons to complete.

(E) The October infant mortality rate for Rome Commune was 66.5 as compared with 55.2 in September.

(F) Deaths from all forms of tuberculosis in Rome during October numbered 196. The September figure was 223.

5. PERSONNEL :

Three more American Officers returned home during the month.

Respectfully,
[illegible]
Colonel,
Medical,
Public Health Sub-Commission.

4. PUBLIC HEALTH :

(A) Only one fatal case of plague was reported from Toronto during November. This brings the total number since the beginning of the outbreak to 29, with 14 deaths.

(B) Two cases of typhus occurred during November - one in Palermo and one in Belluno province.

(C) Smallpox continues to be reported from central and southern Italy though no large scale outbreaks have occurred.

(D) The Tiber Delta Project reports a considerable decline in the number of adult mosquitoes captured. This is due to the advent of cold weather. The Malaria Demonstration Unit is planning, in conjunction with the Italian Government and U.N.R.R.A., a large scale malaria eradication programme in Sardinia, which will take at least two seasons to complete.

(E) The October infant mortality rate for Rome Commune was 66.5 as compared with 55.2 in September.

(F) Deaths from all forms of tuberculosis in Rome during October numbered 196. The September figure was 223.

5. PERSONNEL :

Three more American Officers returned home during November.

Compiled by the
G. A. LINKLATER
Colonel,
Director,
Public Health Sub-Commission.

Declassified E.O. 12356 Section 3.3/NND No. 785017

3403

297

[illegible] COMMISSION
APO 971
Public Health Sub-Commission

10/2016/Pl

PH/[illegible]/ne
10 November 1945

NOV 17 1945

SUBJECT : - Report for the Month of October 1945.
Public Health Sub-Commission.

FROM : - VP, US Zone

TO : - Executive Headquarters, SCAP.

1. POLITICAL :

(a) The effect of the Japanese [illegible] during the month of October and the Korean [illegible] has been deeply felt by Public Health officers. As a result of this, authority has been obtained for the High Commissioner for Public Health to assume direct control over his medical personnel in Korea, including civilians and [illegible]. Thus, while the official hand-over has not taken place, so far as Public Health administration is concerned, the High Commissioner is rapidly assuming his direct authority over his Korean Nationals without the intervention of the Officers.

(b) Full Public Health administration of Northern Korea by this Headquarters has now practically ceased, and we believe it still maintained with the office of the U.S. Commissioner for Public Health and that of the Italian and Greek. Problems of police and administration are the subject of frequent discussion.

(c) Arrangements still continue for the establishment of this Headquarters and during the month of October the question of its medical supplies for the [illegible] of the members of this office. In the period [illegible] with the closing of the 42nd Base Sub-Depot at [illegible], the personnel assigned to medical supply problems and it is hoped that [illegible] will shortly be assumed by the Pharmaceutical Division of the Military Government Section.

(d) [illegible] this Headquarters [illegible] by the Japanese. [illegible] would be [illegible] Headquarters [illegible] Korea.

2. PUBLIC HEALTH ADMINISTRATION :

(a) During October, no [illegible] additional information in this regard has been [illegible]. In this connection, the availability of separate [illegible] from the Japanese. The point was emphasized that the [illegible] and [illegible] conferred at Seoul, which would be [illegible] this year end. It was further pointed out that [illegible] to this information, pressure on the [illegible] Korea [illegible] Japanese [illegible] Korea [illegible] Japanese [illegible] Korea [illegible] Japanese

1. POLITICAL :

(A) The office of Malaghy [illegible] has been very [illegible] during the month of October and the northern [illegible] are now [illegible] of public health officers. [illegible] authority has been obtained for the U.S. Commissioner for Public Health to resume direct control over his medical [illegible] in Venezia, Bologna and Liguria [illegible]. Thus, while the official hand-over has not yet taken place, so far as public health administration is concerned, the High Commissioner is readily exercising his direct authority over the Northern Regions without the intervention of AMGOT officers.

(B) While public health [illegible] position of Northern Regions by this Headquarters has not officially ceased, close liaison is still maintained with the office of the U.S. Commissioner for Public Health and that of the Italian War Cabinet. Problems of policy and administration are the subject of frequent discussions.

(C) Venezia Giulia still comes under the jurisdiction of this Headquarters and during the month of October the question of its medical supplies for the first six months of 1946 was referred to this office. As was pointed out in last month's report, with the closure of the SCAF this Sub-Commission no longer has jurisdiction over medical supply problems and it is hoped that this function will shortly be assumed by the Pharmaceutical Division of the Industry Sub-Commission.

(D) It is [illegible] that the problems of this Sub-Commission would cease by 1st December. The [illegible] of this proposal would leave to Headquarters Allied Medical Supply Mission [illegible].

2. PRIVATE ORGANIZATIONS DEALING WITH HEALTH :

(A) During October, a meeting of all the organizations interested in this project was held in Rome. At this meeting, the advisability of repatriating the Germans from the Pontine and Tarquinia camps was discussed and it was pointed out that a large part of accommodation existed at Lucca, which would be admirably suited for this purpose. It was further pointed out that by sending Germans from camps to this Sanatorium, pressure on accommodation in Rome would be eased, [illegible] hospitals could be cleared and returned to their owners, and public anxiety at best, very U.S. patients in a hotel present would be allayed.

(B) The U.S. Commissioner for Public Health agreed to appoint a [illegible] official to take charge of the Lucca Sanatorium and organize the equipment of the building, and the reception of patients.

(C) In Germany there are some epidemic patients, chiefly tuberculous, from [illegible] who are returned, subject to return to the vicinity of their own homes. Medical reports of such patients are now being prepared, together with lists of vacancies in sanatoria in Southern Italy and when these are completed a request will be made to AMG to provide an ambulance train for the evacuation of these patients. Such a move would relieve still further the pressure on accommodation in Germany and would free beds for the reception of more urgent cases from Germany. The latest reports, however, indicate that few more arrivals are to be anticipated.

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1 - RC
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6 - PROs
1 mil attach Am Embassy
1 - French Rep a.c.

(MISS SAMPSON)

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(D) It is hoped that by 15 November, complete control of the hospital centers will be taken over by the Italian Red Cross and the High Commissioner for Public Health. Mr. Sigurdsson, of the American Red Cross, will remain in Naples in a supervisory capacity.

3. PUBLIC HEALTH :

(A) PLAGUE.

(1) During October no cases of plague occurred at Taranto until the 15th, when one case was reported. This case died on the 20th. Another case occurred on the 25th, and as nothing has been heard to the contrary, it has presumably recovered.

(2) At the request of UNRRA two experts on disinfestation were flown out from England during October, and under their direction an intensive rat catching campaign was instituted in Taranto. Later, a short course in modern methods of disinfestation was held at the Istituto Superiore di Sanita' in Rome, attended by officials nominated by the High Commissioner for Public Health.

(B) TYPHUS.

One case of typhus was reported from Taranto on the 2nd October, and no subsequent cases have occurred.

(C) SMALLPOX :

(1) An outbreak of smallpox in Avellino province, reported last month has ceased, there having been 43 cases in October as compared with 156 in September.

(2) For the first time this year, smallpox has been reported from Sardinia, 30 cases having occurred in the island during October.

(3) In Naples city there were 6 cases as compared with 10 in September, and in Naples province 17 cases as compared with 27 in September. Other provinces infected were Benevento with 21 cases, Caserta with 2, Salerno with 30, Reggio Calabria and Rome with 2 each and Foggia with 2. It will be seen therefore that smallpox still remains endemic in Central and Southern Italy.

(D) MALARIA.

During the first two weeks of October there was a marked decline in numbers of adult mosquitos catched in the Pontine Project. This was probably due to the cold weather prevailing at the time. The greater catch made during the last two weeks of the month probably accounted for another slight rise in captures. However, this late season rise is of no significance.

The first infecting mosquito was captured just outside the treated zone on October 12th. The first infecting mosquito was caught inside the zone on October 17th.

The following table illustrates the adult A. maculipennis mosquito captures for the month of October:

Week commencing	Fixed Catching Stations			Total Stations		
	No. Exam.	Percent positive	Av. no. Adults	No. Exam.	Percent positive	Av. no. Adults

Rome, attended by officials nominated by the High Commissioner for Public Health.

(B) TYPHUS.

Only one case of typhus was reported from Taranto on the 2nd October, and no subsequent cases have occurred.

(C) SMALLPOX :

(a) The outbreak of smallpox in Avellino province, reported last month has started anew, there having been 83 cases in October as compared with 156 in September.

(b) For the first time this year, smallpox has been reported from Sardinia, 30 cases having occurred in the island during October.

(c) In Naples city there were 6 cases as compared with 10 in September, and in Naples province 17 cases as compared with 22 in September. Other provinces affected were Benevento with 21 cases, Caserta with 2, Salerno with 30, Reggio Calabria and Rosa with 2 each and Padova with 2. It will be seen therefore that smallpox still remains endemic in Central and Southern Italy.

(D) MALARIA:

During the first two weeks of October there was a marked decline in numbers of adult mosquito catches in the Tiber Delta Project. This was probably due to the cold weather prevailing at the time. The warmer weather experienced during the last two weeks of the month probably accounted for another slight rise in captures. However, this late season rise is of no significance.

The first hibernating mosquito was captured just outside the treated area on October 12th. The first hibernator was caught inside the area on October 17th.

The following table indicates the adult A.maculipennis mosquito capture for the month of October:

Week commencing	Fixed Catching Stations			Total Stations		
	No. Exam.	Percent positive	Av. No. Adults per Station	No. Exam.	Percent positive	Av. No. Adults per Station
Adults						
10/1	195	5.1	0.09	160	3.7	0.06
10/8	196	3.0	0.07	160	2.4	0.05
10/15	192	8.3	0.20	157	5.2	0.11
10/22	190	7.0	0.25	146	4.2	0.13

(E) VENEREAL DISEASE :

In accordance with the outline given in the September report, the High Commissioner for Public Health prepared instructions for circulation to Directors of all V.D. Hospitals and these were forwarded to AMG. The AMG reply to this memorandum has not yet been received.

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(f) INFANT MORTALITY :

During September there were 2328 live births in the Commune of Rome with 122 deaths in infants under one year of age. The resulting infant mortality rate is 52.2 as compared with 76.2 in August.

(g) TUBERCULOSIS :

In September there were 223 deaths from all forms of tuberculosis in Rome Commune. In August figure was 228. Of these 223 deaths, 137 were due to pulmonary tuberculosis as compared with 184 in August.

4. WELFARE

(a) Owing to the fact that nearly all the welfare officers of the Sub-Commission formerly on duty in the various regions have been redeployed and have left this area, the functions of the Welfare Branch are now practically at an end.

(b) Lt.Colonel I Kenny, who succeeded Lt. Colonel McSweeney as Chief of the Welfare Branch, will assume the duties of Executive Officer on the departure of Major Paul S Sweet for the United States. He will also have to assist Welfare officers in some of the detachments of the Sub-Commission in addition to his duties as Executive Officer.

5. PERSONNEL

(a) During October, Colonel Thomas R.Page (A), the Director of the Sub-Commission was recalled to the United States and Colonel G.Gardiella (S) was appointed Director in his place. It is to be regretted that Colonel Page, whose work as a Regional Public Health Officer was outstanding, had only such a short term of office as Director.

(b) Colonel R.Barr (S) returned from leave in England and was appointed Chief Public Health Officer, Venezia Giulia Region.

(c) Lt.Colonel Spencer (A), Lt.Colonel Hirt (A), Major Farmer (A) and Captain Jones (A) all returned to the United States during October, while Captain Tusio (A) the APHO Lombardia Region was appointed Medical Officer to the 2675 Engineers.

(d) With the number of officers now leaving this Sub-Commission it is impossible to make special mention of the splendid work contributed by each individual in his own particular sphere. But for their tireless efforts, however, the Sub-Commission would never have been able to achieve the success it has had in Pavia, Biella and Gardiella.

S U M M A R Y

1. POLITICAL.

With the withdrawal of Chief and Public Health representatives from the north, the High Commissioner for Public Health has resumed direct control over his Medical Provincials in Venezia, Lombardia and Liguria Regions. It is proposed that the functions of this Sub-Commission will cease on 1st December.

2. [illegible] MILITARY GOVERNMENT :

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have left this theatre, the [illegible]
at an end.

(c) Lt. Colonel Kenny, who succeeded Lt. Colonel Instone as Chief of the Welfare Branch, will assume the duties of Executive Officer on the departure of Major Paul S Savage for the United States. He will also handle such welfare matters as come in the attention of the Sub-Commission in addition to his duties as Executive Officer.

5. PERSONNEL

(A) During October, Colonel Thomas N. Page (A), the Director of the Sub-Commission was recalled to the United States and Colonel [illegible] (B) was appointed Director in his place. It is to be regretted that Colonel Page, whose work as a Regional Public Health Officer was outstanding, had only such a short term of office as Director.

(B) Colonel T. Parr (B) returned from leave in England and was appointed Chief Public Health Officer, Venezia Giulia Region.

(C) Lt. Colonel Spencer (A), Lt. Colonel Hirt (A), Major Turner (A) and Captain Brown (A) all returned to the United States during October, while Captain Curzio (A) the AFHQ Lombardia Region was appointed Medical Officer to the 2675 Regiment.

(D) With the number of officers now leaving this Sub-Commission it is impossible to make special mention of the splendid work contributed by each individual in his own particular sphere. But for their tireless efforts, however the Sub-Commission would never have been able to achieve the success it has done in Italy, Sicily and Sardinia.

S U M M A R Y

1. POLITICAL.

With the withdrawal of almost all Public Health representatives from the North, the High Commissioner for Public Health has resumed direct control over his Medici Provinciali in Venezia, Lombardia and Liguria Regions. It is proposed that the functions of this Sub-Commission will cease on 1st December.

2. ALLIED CHARITABLES HOSPITAL COMMAND :

At a meeting held in Rome during October, the availability of segregating the convalescent from the medical and surgical cases at Merano was emphasized. For this purpose it was proposed to utilize a large sanatorium at Sondalo and the High Commissioner for Public Health agreed to appoint an official to organize the assignment of the building and the subpoena of patients. Arrangements are made for the transfer of chronic [illegible] patients whose domicile is in Central and Southern Italy to Sanremo in the vicinity of their homes. It is hoped to transfer control of the Hospital Command to the Italian authorities on 15th November.

3. PUBLIC HEALTH

(A) Two cases of plague with one death were reported from Taranto during October.

(B) One case of typhus occurred during the month, also in Taranto.

(C) The smallpox epidemic in Avellino province is subsiding, there having been only 83 cases in October as compared with 106 in September. Smallpox has been reported from Sardinia, while cases still continue to occur in Central and Southern Italy.

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3015/PH

PH/GMF/jn
19 October 1945

OCT 19 1945

SUBJECT: - Report for the Month of September 1945, Public Health Sub-Commission.

FROM : - VP, CA Section.

TO : - Executive Commissioner, HQ AC.

1. POLITICAL:

(A) The month of September has seen considerable activity on the part of the Northern Italian Public Health officials who are eager to form a separate regional organization, largely autonomous responsible only in matters of policy to the Central Authority. It was hoped by them that such an organization could be formed under the aegis of AFHQ before the Northern Regions were handed back to the Italian Government and direct appeals to this effect were made to the Headquarters of the Public Health Sub-Commission.

(B) It was known to this HQ, however, that the Italian Government had already sent a Commission to Sicily to study the operation of the Regional Medical organization inaugurated there in 1943. The findings of this Commission will in due course be reported to the Government and the Government will then come to a decision, based upon these findings, as to whether it is thought desirable or not to institute a Regional system of administration for the whole of Italy. It was natural, therefore, that at this particular juncture, the Central Authority should be most unwilling for the Northern Provinces to set up an organization of their own. This HQ in consequence fully supported the view taken by the High Commissioner for Public Health and nothing further has been heard of the Northern proposition.

(C) Such political moves, have, of course, in no way affected the efficient manner in which the Northern Medical Provincials have carried out their professional duties and this is especially fortunate in view of the fact that although no handover has taken place by the end of the month, redeployment has further reduced the AMG Regional staffs. Liguria, Piemonte and Lombardia are now left with only one Medical Officer each, while Venezia Regione is being run by one Captain (P), RAMC. Also, when the hand-over does take place it will be only a token hand-over, for, as far as Public Health activities are concerned, the Italian Authorities are already administering their own affairs with the absolute minimum supervision. Venezia Giulia is, of course, in a different category and has two Medical Officers.

2. ITALIAN RED CROSS:

(A) On 14th July 1944 there was instituted a General Inspectorate of the

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FROM : - VR, CA Section.

TO : - Executive Commissioner, AMGOT.

1. POLITICAL:

(A) The month of September has seen considerable activity on the part of the Northern Italian Public Health officials who are eager to form a separate regional organization, largely autonomous responsible only in matters of policy to the Central Authority. It was hoped by them that such an organization could be formed under the auspices of AMG before the Northern Regions were handed back to the Italian Government and direct appeals to this effect were made to the Headquarters of the Public Health Sub-Commission.

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2. ITALIAN RED CROSS:

(A) On 14th May 1945 there was instituted a General Inspectorate of the Italian Red Cross for Northern Italy with Headquarters in Milan. This was for a period of 3 months with a further extension on 14th August. The Inspectorate was set up for the special purpose of coordinating the activity of IRC Mobilization Centres in Northern Italy and extending aid to repatriated prisoners of war and internees, as at that time the Central Committee was not in a position to carry out its functions of directing, coordinating, and financing such activities.

(B) It became apparent, however, that the Northern Inspectorate rapidly adopted a schismatic attitude and, when the Central Committee was at last in a position to exert its full authority, was unwilling to submit to the Rome office, showing every sign of wishing to become an autonomous body. In view of this and in order to preserve the essential unity of the Italian Red Cross, the Northern Inspectorate was abolished on 15th September 1945.

(C) The Italian Red Cross has been hampered in many of its activities by a serious shortage of funds.

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1 - Mr. Mitchell

(Miss Sampson)

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This grave drawback has however been overcome by the prompt action of Professor Bergami, the High Commissioner for Public Health who, during September obtained from the Italian Government a grant of 100 million lire, as a result of which, the work of the Italian Red Cross has received a tremendous stimulus. In addition, the Director of this Sub-Commission has made a number of cogent suggestions regarding the raising of funds by public subscription. Hitherto, the Italian Red Cross has been entirely financed by the Government. The Director has felt that if public interest can be sufficiently aroused in the all-important work of the Italian Red Cross by a well organized publicity campaign, subscriptions would reach a high level and thus ease to a large extent the burden borne by the Government.

3. MEDICAL DEPARTMENT HOSPITAL COMMAND:

(A) September has been a month of intense activity in this Command. 5500 repatriated Italians have been received and of these, already 2200 have been evacuated to the South. Information has been received from AFHQ that no more hospital trains are scheduled for arrival at this time and it is therefore assumed that the repatriation from Germany has come to an end, though it is possible that there may be further arrivals from other countries. However, nothing definite is known about this and it can only be surmised that the number 5500 does not comprise all the sick Italians in Europe awaiting repatriation.

(B) Many of the difficulties mentioned in last month's report have been overcome. Authority has been received from AFHQ to draw medical stores and housekeeping equipment from captured enemy stocks and to maintain a pool of ambulances and vehicles for essential services. The American Red Cross had made a shipment of 17,591 hospital garments and the direct delivery of coal has been effected. The work of organization and co-ordination still continues and it is hoped that within the next few weeks the project will be operating even more smoothly than it is at present.

(C) One weakness is the scarcity of Italian Red Cross personnel. Wage scales have, however, been raised in the North so as to put them on the same basis as those obtaining in other branches of the labour market and the Italian Red Cross feels that as a result of this, recruiting will be stimulated. It is of the utmost import nce that the IRC and Italian Health Services should soon be in a position to take over the responsibility of this Command, for the time will come when the Allied staff will have to be withdrawn. The Italian authorities are, however, fully alive to this contingency and have sent representatives of the IRC, the High Commissioner for Public Health and the Italian Commissariat for Post War Relief to study conditions on the spot.

(D) In all this work, close liaison has been maintained with Hq No.2 District and as a result of the keen interest shown by the DDS, a Central Laboratory and disinfection service has been established. Grateful acknowledgment is made to the military authorities for all the assistance they have afforded, while the utmost praise is due to Lt Colonel Shoblier and his staff for what they have achieved.

4. PUBLIC HEALTH:

(A) Plague:

(a) On 6th September a signal was received from the AC Liaison Officer, Bari, notifying this HQ of 10 cases of Plague with 4 deaths amongst dockworkers in the past 24 hours. The High Commissioner for Public Health and the DDS, 52 Area had already been informed. Such necessary steps as isolation of contacts, closing of public meeting places and churches and disinfection of houses had already been undertaken. The High Commissioner for Public Health sent a medical inspector and a bacteriologist immediately to investigate the outbreak. This HQ in turn notified all AC/AU

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ted to the South. Information has been received from AMG that no more hospital trains are scheduled for arrival at this time and it is therefore assumed that the repatriation from Germany has come to an end, though it is possible that there may be further arrivals from other countries. However, nothing definite is known about this and it can only be surmised that the number 5500 does not comprise all the sick Italians in Europe awaiting repatriation.

(B) Many of the difficulties mentioned in last month's report have been overcome. Authority has been received from AMG to draw medical stores and housekeeping equipment from captured enemy stocks and to maintain a pool of ambulances and vehicles for essential services. The American Red Cross had made a shipment of 17,691 hospital garments and the first delivery of coal has been effected. The work of organization and co-ordination still continues and it is hoped that within the next few weeks the project will be operating even more smoothly than it is at present.

(C) One weakness is the scarcity of Italian Red Cross personnel. Wage scales have, however, been raised in the North so as to put them on the same basis as those obtaining in other branches of the Labour market and the Italian Red Cross feels that as a result of this, recruiting will be stimulated. It is of the utmost importance that the IRC and Italian Health Services should soon be in a position to take over the responsibility of this Command, for the time will come when the Allied staff will have to be withdrawn. The Italian authorities are, however, fully alive to this contingency and have sent representatives of the IRC, the Chief Commissioner for Public Health and the High Commissioner for Post War Relief to study conditions on the spot.

(D) In all this work, close liaison has been maintained with HQ No.2 District and as a result of the keen interest shown by the DDHS, a Central Laboratory and disinfection service has been maintained. Grateful acknowledgement is made to the military authorities for all the assistance they have afforded, while the utmost praise is due to Lt Colonel Shedeler and his staff for what they have achieved.

4. Public Health:

(A) Plague:

(a) On 9th September a signal was received from the AC Liaison Officer, Bari, notifying this HQ of 10 cases of Plague with 4 deaths amongst dockworkers in the past 24 hours. The High Commissioner for Public Health and the ADMS, 52 Area had already been informed. Such necessary steps as isolation of contacts, closing of public services and churches and disinfection of houses had already been undertaken. The High Commissioner for Public Health sent a medical inspector and a bacteriologist immediately to investigate the outbreak. This HQ in turn notified all AC/AG Regions and UNRRA, with the request that UNRRA, London should notify the International Health Office in Paris.

(b) On 12th September an urgent request was received by this office for special supplies and on the morning of the 13th, in response to this request, 1500 blankets, 200 pounds of sulphur, 150 pounds of DDT (supplied by UNRRA), 1 power sprayer and 6 hand sprayers were dispatched by road to Taranto, where the Army Medical Authorities, in conjunction with the civil authorities, were carrying out extensive DDT dusting of ships and warehouses. Large scale inoculations were also carried out with vaccine released by AFHQ and with some existing Italian stocks.

(c) In order to prevent reduplication of activities and demands for supplies, the High Commissioner for Public Health set up by Decree a local anti-Plague Committee composed of representatives of the Italian civil, military and naval authorities, requesting this committee to work in close collaboration with the Allied Naval and Military commands. A similar central committee was formed in Rome for the purpose of watching and supervising developments. The Director of the Sub-Commission is a member of this Committee.

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(d) The latest information up to and including 28th September is to the effect that there is a total of fifteen cases, 13 of which died, 2 cases in the Italian Navy and one case in a British Military Policeman. The majority of cases occurred in dock labourers working in a warehouse of the Royal Naval Shipyard and the infection is believed to have come from a ship plying between Brindisi, Taranto, Ancona and Venice which unloaded a cargo of coal on and near at this warehouse.

(c) Typhus:

(a) Two cases of Typhus were reported during September, one from Pisa and one from Taranto.

(b) The case in Taranto occurred coincidentally with the outbreak of Plague and strict supervision is being maintained in this area in order to prevent any possible spread.

( ) Smallpox:

(a) September, unfortunately, saw a recrudescence of Smallpox in Central and Southern Italy. The most outstanding occurrence was an outbreak in Avellino Province from which one hundred and eighty-six cases have been reported. The mobile team which was working in Naples was sent to Avellino to deal with this outbreak.

(b) Naples City had ten cases and Naples Province twenty-two. Other provinces affected were Benevento with seven cases, Foggia with two, Catanzaro with eight one, Caserta with seven, Reggio Calabria with two, Salerno with fifteen, Rome with one, Potenza with one and Pilar with two.

(e) Malaria:

The following A Gambiae (Pitchfork) mosquito catches were made by the Malaria Control Demonstration Unit in stations after Pilar Malaria Project during the month of September:

Week Commencing	Mixed Catching Stations			Rabal Stations		
	No. Exam.	Per cent Positive	Aver. No. Adults per Station.	No. Exam.	Per cent Positive	Aver No. Adults per Station
Adults						
9/2	195	11.4	0.25	453	10.8	0.33
9/9	195	15.8	0.46	421	9.0	0.45
9/16	193	9.3	0.25	450	8.4	0.33
9/23	195	6.7	0.16	472	5.7	0.16
Larvae						
9/2	196	9.7	1.13	273	9.1	1.02
9/9	196	10.2	0.84	276	10.8	1.15
9/16	193	10.9	0.78	262	12.2	0.97
9/23	190	10.0	0.90	253	12.0	1.08

Two food for larvae remained the same as for the month of August, namely [illegible] Brewing Trol and Maccaroni. An additional form was [illegible]

and Southern Italy. The [illegible] eighty-six cases [illegible] Province from which one hundred and eighty-six cases [illegible] mobile team which was working in Naples was sent to Avellino to deal with this outbreak.

(b) Naples City had [illegible] cases and Naples Province twenty-two. Other provinces affected were Benevento with seven cases, Reggio with two, Catanzaro with two, Caserta with seven, Reggio Calabria with two, Catania with fifteen, Rome with one, Potenza with one and Milan with two.

(d) Malaria:

The following Anopheline (Labranchiae) mosquito catches were made by the Malaria Control Demonstration Unit in stations of the Tiber Delta Project during the month of September:

Week Commencing	Mixed Catching Stations			Total Stations		
	No. Exam.	Per cent Positive	Aver. No. Adults per Station.	No. Exam.	Per cent Positive	Aver No. Adults per Station
Adults						
9/2	193	11.4	0.25	433	10.8	0.33
9/9	195	10.8	0.46	421	6.0	0.45
9/16	193	9.3	0.23	450	8.4	0.33
9/23	195	6.7	0.16	472	5.7	0.16
Larvae						
9/2	196	9.7	1.13	273	9.1	1.02
9/9	196	10.2	0.84	276	10.8	1.15
9/16	192	10.9	0.78	262	12.2	0.97
9/23	190	10.9	0.90	258	12.0	1.08

Two foci for larvae remained the same as for the month of August, namely the Lago Traiano area and Maccarese. An additional focus was accountable for some larvae and adult increase at one point, namely a section of the Tiber River just below Porto Isola di Torre Rosciana. In this vicinity numerous larvae were unexpectedly picked up in the main river stream.

It has definitely been concluded that nearly all the mosquitoes found in the Maccarese area come from larvae developing in the rice fields. The crop will be cut in the very near future, after which the area will be dry.

Considerable reconstruction has occurred in the Delta area recently. This affords untreated resting surfaces on which many mosquitoes are captured. An interesting occurrence of this kind is a location where a new roof has been placed over a piggery. Numerous mosquitoes have been noted resting on the new untreated roof, but none have been observed resting on the old treated walls.

There is every evidence that the first DDT applied about the beginning of March of this year is still effective against both mosquitoes and flies. This covers an elapsed time of seven months.

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(E) Venereal Disease:

During September a favourable reply was received from the Italian Government to the proposals made by AFHQ. A meeting was then held at this HQ with the High Commissioner for Public Health and the Allied Advisor in Venereology. At this meeting it was agreed that the High Commissioner would prepare instructions for circulation to all Directors of VD hospitals in Italy, outlining the AFHQ proposals on treatment and indicating the way in which Allied Medical Officers would afford assistance and supervision when these instructions were ready for circulation. AFHQ would then issue parallel instructions to all military formations and simultaneous bilateral action would thus be ensured.

(F) Infant Mortality:

During August, there were 2139 live-births in Rome Commune with 163 deaths in infants under one year of age. This gives an Infant Mortality rate of 76.2 as compared with 99.9 in July.

(G) Tuberculosis:

In August the deaths for all forms of Tuberculosis in Rome Commune were 226 as compared with 238 in July. Of these 184 were due to Pulmonary Tuberculosis, the July figure being 192.

4. VETERINARY:

(A) As was forecast in last month's report, the Veterinary Branch closed down during September and the Chief of the Branch, Lt Colonel Howland W. Bushnell has returned to the USA. All veterinary activities in Italy are therefore now in the hands of the Italian Veterinary Service and this Sub-Commission has no further responsibility in these matters.

5. WELFARE:

(A) The chief work of the month was trying to complete certain pending matters. The long months of effort to get aluminum and other materials for the manufacture of orthopedic equipment for mutilated Italian civilians and soldiers has not been completed. It is hoped that this effort will be carried forward. Also no completed agreement has been reached with Commerce Sub-Commission to have the 217 tons of blankets turned over to this Sub-Commission for storage and distribution by the ENAL. Lt Colonel Kenny assumes a continuation of this effort. Cooperation was given by Lt Colonel Ashburne, Education Sub-Commission, to get equipment for Boy Scouts.

(B) Regular meetings held each Friday with Doctor Valenti of the Ministry of Interior.

6. MEDICAL SUPPLY:

(A) With the handing over of the Florence Depot to the Italian Government during September and the closing down of 2665th SOTD, this Sub-Commission has finally ceased to have any dealings with medical supplies.

(B) 2665th SOTD was an organization instituted and directed by AFHQ and Captain Bushard was only attached to this Headquarters for the purpose of liaison with the Italian Government. As Captain Bushard has now relinquished his temporary attachment to this Headquarters, the slender thread that connected this Sub-Commission [illegible] medical supplies and distribution has now been broken.

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(B) 2665th CCND was an organization instituted and directed by AFHQ and Captain Bushard was only attached to this Headquarters for the purpose of liaison with the Italian Government. As Captain Bushard has now relinquished his temporary attachment to this Headquarters, the slender thread that connected this Sub-Commission with Medical Supply provision and distribution has now been broken.

(C) This point is emphasized, as many problems and requests concerning medical supplies are still referred to this office which has neither authority nor the personnel to deal with them.

7. PERSONNEL:

(A) Colonel G. P. Trizzino has been appointed Deputy Director of the Sub-Commission and will serve in this capacity in addition to his duties as Chief of Public Health Branch.

(B) Lt Colonel Raymond Kenny was appointed Chief of the Welfare Branch on the departure of Lt Colonel McSheehy.

(C) Further awards have been made to personnel of this Sub-Commission as follows:

LEGION OF MERIT	BRONZE STAR
Lt Colonel John McSheehy.	Major Paul S. Savero.
Lt Colonel Orphens J. Mizzozero.	T/5 Guy V. D'Albo.

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(D) The following American Officers have departed for the United States:

Lt Colonel Buchanan	Lt Colonel Adams
Lt Colonel McSweeney	Major Carrier
Major Harwell	Major Rubsi
Major Anderson	Captain Manzelli
Captain Hill	

In addition, Doctor Louis A. Riehl of the Rockefeller Foundation Malaria Unit departed for his home in the United States.

It is regretted that space will not permit individual mention of the splendid work and achievements of these officers and Doctor Riehl.

S U M M A R Y

1. POLITICAL:

An attempt by northern Medici Provinciali to set up a Regional Medical organization, largely autonomous and responsible only in matters of policy to the Central Authority, has been disapproved by the Italian Government and this HQ.

2. ITALIAN RED CROSS:

A similar tendency towards separation from the Central Office has been noted in the northern branches of the Red Cross. To combat this, the Inspectorate for Northern Italy which was set up in May for the purpose of supplementing the activities of the Rome Headquarters, has been abolished. The Red Cross has received a grant of a hundred million lire from the Italian Government.

3. REPATRIATION HOSPITAL AHEAD:

5500 Repatriated Italians have been received and 2200 have been evacuated to the South. AMG has advised that no further hospital trains are to be expected at this time but further information is being sought in this matter. Many of the difficulties mentioned in last month's report have been overcome and much assistance has been afforded by No.2 District. The question of handing over more control to the Italian authorities is now under consideration.

4. PUBLIC HEALTH:

(A) During September an outbreak of Plague occurred in Taranto with a total twenty-three cases and ten deaths. Energetic measures were taken by the local Allied Military Authorities in conjunction with the Civil Authorities to combat this outbreak. There sent to Taranto 180 pounds of DDT (supplied by UNRRA), 1500 blankets, 200 pounds of sulphur, 1 power sprayer and 6 hand sprayers.

(B) Only two cases of Typhus were reported during September, one from Taranto and one from Parma.

(C) Smallpox has, unfortunately, increased considerably in Central and Southern Italy during September. Most noteworthy was an epidemic in Avellino Province from which one hundred and eighty-six cases have been reported.

(D) Rodent searches at collecting stations in the Tiber Delta continued to show a marked decrease in rodent density.

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3. MARINE REPATRIATION HOSPITAL COMMAND:

5500 Repatriated Italians have been received and 2200 have been evacuated to the South. AMG has advised that no further hospital trains are to be expected at this time but further information is being sought in this matter. Many of the difficulties mentioned in last month's report have been overcome and much assistance has been afforded by No.2 District. The question of handing over more control to the Italian authorities is now under consideration.

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(C) Smallpox has, unfortunately, increased considerably in Central and South ern Italy during September. Most noteworthy was an epidemic in Avellino Province from which one hundred and eighty-six cases have been reported.

(D) Weekly searches at collecting stations in the Tiber Delta continued to show a very low mosquito density.

(E) The Italian Government has agreed to the WHO proposals concerning Allied advisors in Venereal Diseases and it is anticipated that the new scheme should shortly come into force.

(F) The August Infant Mortality rate for Rome Comune was 76.2 as compared with 99.9 in July.

(G) Deaths from all forms of Tuberculosis in Rome during August were 223 as compared with 238 in July.

5. VETERINARY:

The Veterinary Branch of this Sub-Commission was abolished during the month and all Veterinary matters are now being dealt with by the Italian Authoriti

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6. WELFARE:

Due to the departure of Lt Colonel John McSweeney during September there has been little to report in the Welfare field.

7. MEDICAL SUPPLY:

With the hand-over of the Florence warehouse to PHS, this Sub-Commission has now finished all dealings in medical supplies.

8. PERSONNEL:

Colonel G.V. Vrizzello was appointed Deputy Director in September. Two more officers of this Sub-Commission were awarded the Legion of Merit and one officer and one Enlisted man the Bronze Star. Nine more officers have returned to the United States while another number of the Malaria Control Unit has left Italy.

Thomas M. Page

THOMAS M. PAGE, Colonel, MC
Director,
Public Health Sub-Commission

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HEADQUARTERS ALLIED COMMISSION
APO 394

Public Health Sub-Commission

20 September 1945

AC/3012/PH

SEP 20 1945

SUBJECT: - Report for the Month of August 1945.

TO : - VE, CA Section.

TO : - Executive Commissioner, HQ AC.

1. POLITICAL

(A) The appointment of an Alto Commissario for Public Health, as stated in last months report to be imminent, has been formally announced in the "Gazette" and in addition, Legislative Decree No. 440 of 31st July 1945 sets forth the organisation and function of the High Commissioner's Office.

(B) In some ways this Decree has proved to be a disappointment, for, although the Division of Public Health in the Ministry of Interior has been abolished, and the function of that Division assumed by the High Commissioner, who is directly responsible to the Council of Ministers, no other important changes have been effected as regards the administration of Public Health matters in Italy. For example, it is specifically mentioned that the function of the Prefect in regards to the health matter remains unchanged and so we still have the anomalous position that a layman at the head of each province is responsible for the administration of that province's health problems, while the Medico Provinciale has access to the High Commissioner only through the Prefect.

(C) It had been hoped that with the formation of the High Commissioner's Office, a more drastic change in the whole of Italian Public Health Administration would have been effected, but such changes may still be envisaged by the Authorities.

2. PUBLIC HEALTH

(A) Verona Repatriation Hospital Command.

(a) The movement of patients into Verona has been considerably speeded up and up until the 27th of August 2402 sick Italians have been received, which was much more than the original schedule called for. Such rapid arrivals are stretching hospital accommodation to the utmost, as the departing Germans are releasing sufficient hospital space only just in time to make beds available for the incoming Italians. In addition, 62 patients arrived unheralded from the American Zone, having been 35 days on the way, with insufficient food and no medical attention. Army has been informed of this and will endeavour to prevent

1. POLITICAL

(A) The appointment of an Alto Commissario for Public Health, as stated in last months report to be imminent, has been formally announced in the "Gazette" and in addition, Legislative Decree No. 1146 of 31st July 1945 sets forth the organisation and function of the High Commissioner's Office.

(B) In some ways this Decree has proved to be a disappointment, for, although the Division of Public Health in the Ministry of Interior has been abolished, and the function of that division assumed by the High Commissioner, who is directly responsible to the Council of Ministers, no other important changes have been effected as regards the administration of Public Health matters in Italy. For example, it is specifically mentioned that the function of the Prefect as regards public health matters remains unchanged and so we still have the anomalous position that a layman at the head of each province is responsible for the administration of that province's health problems, while the Medico Provinciale has access to the High Commissioner only through the Prefect.

(C) It had been hoped that with the formation of the High Commissioner's Office, a more drastic change in the whole of Italian Public Health Administration would have been effected, but such changes may still be envisaged by the Authorities.

2. PUBLIC HEALTH

(A) Merano Repatriation Hospital Command.

(a) The movement of patients into Merano has been considerably speeded and up until the 27th of August 2402 sick Italians have been received, which was much more than the original schedule called for. Such rapid arrivals are straining hospital accommodation to the utmost, as the departing Germans are releasing sufficient hospital space only just in time to make beds available for the incoming Italians. In addition, 62 patients arrived unheralded from the Russian Zone, having been 35 days on the way, with insufficient food and no medical attention. AFHQ has been informed of this and will endeavour to prevent any repetition of such an occurrence.

(b) Difficulty has been experienced in obtaining sufficient Italian Red Cross personnel, but the Red Cross is making every effort to improve this situation. The problem is caused by the low wage scale which do not encourage recruiting and consequently there is a shortage of Doctors, Nursing and Technical Personnel. The Red Cross is sending a deputation to Merano to study the situation on the spot.

See ref 291

(c) On 22nd August, the OC Merano Hospital Command held a conference in Rome with representatives of the American Red Cross, the Italian Red Cross and the Ministry of Post War Assistance at which all the problems regarding present administrative difficulties and future hand over to the Italian Authorities were discussed. Minutes of this meeting have been forwarded to the High Commissioner for Public Health with the request that this Authority should work in close conjunction with the I.R.C. and the Ministry of Post War Assistance on the project.

(d) The use of ambulance transport P.O.L. and servicing facilities are essential for the smooth operation of the Command. At present the R.A.F. Sub-Command is giving invaluable assistance but when its vehicles are withdrawn the project will face disruption, unless alternative transport is provided.

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AMG has therefore been requested to allocate for the sole use of the Hospital Command, 20 Ambulances, 6 Autobuses, 2 Buses, 8 Medium trucks, and 2 Heavy trucks together with adequate facilities for servicing and maintenance.

(e) Similarly it is essential that authority be obtained for the use of medical equipment and hospital supplies already at Merano and this, despite several representations to Higher Authority, has unfortunately not yet been obtained.

(f) It will be seen that for the efficient and smooth operation of the Merano Command, much coordination is required, as the administrative problems are complex. Unless prompt action is obtained from all the organisations concerned, the whole project may face disaster, which, in view of the humanitarian importance of the issue, would be a major tragedy.

(B) TYPHUS

(a) Only one case of Typhus was reported during August. This occurred in a refugee aged 24 years, who arrived at Bolzano from Belgrade.

(b) One case was notified early in August as having occurred at Lentini, Syracuse Province on 25th July. No further notifications have been received either from Lentini, or any other part of Sicily.

(C) SMALLPOX

(a) The August figure for Naples City and Province indicate that the epidemic may now be considered at an end. 11 cases only were reported from the City as compared with 22 in July and 17 from the Province as compared with 51 in July. This improvement can be attributed to the work of the Smallpox Team together with the services of the 3 motor ambulances referred to in last month's report, which were lent by AMG.

(b) Smallpox has been reported from only three other Italian Provinces during August, as compared with eight during the July period. These Provinces are Avellino, with 17 cases as compared with 68 in July, Salerno, with 6 as compared with 31 in July, and Reggio Calabria, with 1. No cases were reported from Reggio Calabria last month. It would appear therefore that the widespread vaccination programme initiated by the Italian Government throughout the provinces is at last showing its effect.

(D) MALARIA

The Malaria Control Demonstration Unit reports that during August, weekly searches of catching stations of the Tiber Delta project areas showed the following results : -

Week	Fixed Catching Stations			Total Stations		AV. NO.
	No. Exam.	Percent Positive	Av. No. Adults per Station	No. Exam.	Percent Positive	Adults per Station

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(B) TYPHUS

(a) Only one case of typhus was reported during August. This occurred in a refugee aged 24 years, who arrived at Pollena from Belgrado.

(b) One case was notified early in August as having occurred at Lentini, Syracuse Province on 25th July. No further notifications have been received either from Lentini, or any other part of Sicily.

(C) SMALLPOX

(a) The August figures for Naples City and Province indicate that the epidemic may now be considered at an end. 11 cases only were reported from the City as compared with 22 in July and 47 from the Province as compared with 61 in July. This improvement can be attributed to the work of the Smallpox Team together with the services of the 3 motor ambulances referred to in last month's report, which were lent by AFHQ.

(b) Smallpox has been reported from only three other Italian Provinces during August, as compared with eight during the July period. These Provinces are Avellino, with 17 cases as compared with 18 in July, Salerno, with 6 as compared with 31 in July, and Reggio Calabria, with 1. No cases were reported from Reggio Calabria last month. It would appear therefore that the widespread vaccination programme initiated by the Italian Government throughout the provinces is at last showing its effect.

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Week	Fixed Catching Stations			Total Stations		AV. MO.
	No. exam.	Percent Positive	Av. No. Adults per Station	No. exam.	Percent Positive	Adults per Station
Adults						
8/6-12	165	7.2	0.23	176	6.3	0.20
8/27-9/2	196	13.2	0.46	461	11.3	0.70
Larvae						
8/6-12	199	10.0	1.10	291	9.0	0.91
8/27-9/2	200	12.5	0.91	275	12.0	1.12

During the month of August there have been two persistent mosquito foci, one in the immediate environs of Lago Traiano and the other in the vicinity of recently flooded rice fields near Maccarese.

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During the last week of August searches for adults in these regions showed the following : (1) Fiumicino Section (Lago Traiano) of 158 stations examined 12.0 were positive for adult Anopheles with an average of 0.82 adults per station (2) Maccarese Section, 141 stations examined 16.4% positive with 1.25 adults per station. This represents an increase of about four times in the anopheline density at the beginning of the month. In spite of this, there is no cause for concern with regard to malaria transmission.

An intensive investigation of the factors concerned in the increase of anophelines, particularly in Maccarese, is under way, but more data are needed for definite conclusions.

During the last two weeks of August a survey to determine the malaria indices of the DDT treated region of the Volturno Delta and the untreated region just south of the Garigliano River was conducted. Palpations of spleen and blood smears were taken on children between the ages of four and fifteen years; results are not yet available.

(E) VENEREAL DISEASES.

No reply has yet been received from the Italian Government to the proposals made by AFHQ were mentioned in the July report. It is believed, however, that an answer will be forthcoming within the next few days.

(F) INFANT MORTALITY.

During July there were in Rome Commune 2193 live births and 203 deaths in infants under one year of age. The resulting infant mortality rate is 92.9 as compared with 90.9 in June.

(G) TUBERCULOSIS.

The July death rate for all forms of tuberculosis in Rome Commune was 236 as compared with 233 in June. Of these, 192 were due to pulmonary tuberculosis.

2. VETERINARY.

(A) A chief veterinarian for the A.M.G., 13 Corps Area was appointed by the Headquarters following consultation with and action by this branch. There is now a provincial veterinarian active in Cuneo Province, one having been appointed during the month. The death of the Director, Veterinary Laboratory, Naples, has necessitated the temporary assignment of Dr. Sai, of Lecce, to that post.

(B) HOLDING PROTECTION AND COMMUNICABLE DISEASE CONTROL. The following is an account of communicable diseases and the control measures employed: -

(1) Bovine. The presence of this disease was first reported on about 1st August. Investigation has shown that at least 12 stalliones in Veneto Region and Ferrara Province are infected and that a minimum of 47 mares have been covered. These are all minimum figures and time will probably show that the disease is much more widely spread. An outline of the control program now being carried out by Professors Borbelli, Fudeva, and Grassi, Ministry of Interior is as follows:

(a) Veterinarians in all provinces where the infection exists and those adjacent to the infected provinces are being assembled so as to be able to deal with the symptoms, diagnosis and treatment of the disease. Photographs of

(E) [illegible] DISEASE.

No reply has yet been received from the Italian Government to the proposals made by AFHQ were mentioned in the July report. It is believed, however, that an answer will be forthcoming within the next few days.

(F) INFANT MORTALITY.

During July there were in Rome Commune 2123 live births and [illegible] deaths in infants under one year of age. The resulting infant mortality rate is 99.5 as compared with 90.9 in June.

(G) TUBERCULOSIS.

The July death rate for all forms of tuberculosis in Rome Commune was 238 as compared with 233 in June. Of these, 192 were due to Pulmonary Tuberculosis.

J. VETERINARY.

(A) A chief veterinarian for the A.M.G., 13 Corps Area was appointed by that Headquarters following consultation with and action by this Branch. There is now a provincial veterinarian active in Cuneo Province, one having taken the post during the month. The death of the Director, Veterinary Laboratory, Foggia, has necessitated the temporary assignment of Dr. Sai, of Lecce, to that post.

(B) BIOLOGICAL PRODUCTION AND COMMUNICABLE DISEASE CONTROL. The following is an account of communicable disease and the control measures employed: -

(1) Dourine. The presence of this disease was first reported on about 1st August. Investigation has shown that at least 12 stallions in Veneto Region and Ferrara Province are infected and that a minimum of 17 mares have been exposed. These are all minimum figures and time will probably show that the [illegible] is much more widely spread. An outline of the control program now being [illegible] by Professors Barbelli, Padova, and Grassi, Ministry of Interior is as follows:

(1) Veterinarians in all provinces where the infection exists and those adjacent to the infected provinces are being assembled so as to familiarize them with the symptoms, diagnosis and control measures. Photographs of infected animals have been made so as to demonstrate the diagnostic clinical lesions.

(2) All infected or exposed equines will be denounced. [illegible] has been ordered to cease immediately in all provinces where the disease exists.

(3) Stallions and/or mares exhibiting symptoms, or which have been exposed to the infection are being branded on the left forehoof with the letters "MCM" the abbreviation for Morbo Coitale Maligno. Animals bearing such a brand may not be moved from the owners premises until pronounced free of dourine by a licensed veterinarian.

(4) Treatment of stallions and mares exhibiting symptoms is to be started by the appropriate communal veterinarian at the earliest possible date.

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These control measures are not comparable to those employed by the United States Department of Agriculture. However the present circumstances here do not warrant or make possible the employment of comparable measures. In the near future it is planned that equine artificial insemination centers will be established in the infected zone following short courses of instruction conducted by a few Italian equine insemination specialists. The complementfixation test will be employed to the greatest extent possible in the near future. However, the use of this test will be extremely limited due to an almost complete lack of transport facilities and a shortage of laboratory animals, technicians and equipment. Slaughtering of infected animals is entirely impossible as the line is highly inflated, making sufficient indemnity payment impossible.

(b) Atypical Laryngo-tracheitis. During the month a diagnosis of pseudo-post or Ron Castle disease has been quite generally agreed upon. However, the results of tests now being made in Washington with the local virus are awaited for with interest. Vaccination of susceptible birds continues on a very large scale.

(c) Rabies. Though stray dogs are continually being impounded, the incidence of rabies in both territory under Italian Government control and that under A.M.G. has been considerably less than last month. This is probably due largely to the civilian administrations ordering leash and muzzle for all dogs.

(d) Foot and Mouth Disease. Reported incidence has been the lowest of any month this year. Vaccine production in the Rome laboratory continues on a small scale but production in northern laboratories is at a standstill due to the impracticability of introducing active virus where the disease is not now active. Headquarters, U.S. Forces, European Theater has sent notice of an outbreak of what appears to be the malignant form of Foot and Mouth Disease in Spain. If requested by that headquarters it may be possible to aid control from here through vaccine production.

(e) Other Diseases. Hog cholera has been prevalent in Lombardia Region but antiserum from the Brescia laboratory is available. No reports of additional diseases have reached this Branch during the month.

(G) ALLIED VETERINARY MEDICAL SUPPLIES. The supplies referred to in the July report have been made available to veterinarians. As a result of recent conferences it appears that the supplies now in the depots will be handled with facility in the near future. According to stock inventory reports all the Allied Veterinary medical supplies requisitioned by this Branch are now in Italy.

(H) MISCELLANEOUS ACTIVITIES. Funds were made available to the Institute for Artificial Insemination, Milan, so as to allow for its continued operation during the next 3 months. Transportation was made available to the provincial Veterinarian Milan.

In view of the fact that the Chief, Veterinary Branch has been declared non-essential to MTOUSA and that no replacement is anticipated, the Chief, Italian Veterinary Service has been notified of the fact that this Branch will probably cease to function in the very near future.

(I) SUMMARY. The appearance of Equine Dourine in Venezia Giulia and Ferrara Province has necessitated the institution of control measures there. Studies pertaining to the epizootic poultry disease now prevalent have continued with the objective of establishing a diagnosis and increasing preventive measures.

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(3) SUMMARY. The appearance of Equine Bourine in Venezia Region and Ferrara Province has necessitated the institution of control measures there. Studies pertaining to the epizootic poultry disease now prevalent have continued with the objective of establishing a diagnosis and increasing preventive measures. Other communicable disease problems have not been serious during the month. Allied veterinary medical supplies have been actually placed at the disposal of the veterinary service during the month with prospects of additional supplies for the very near future. Personnel problems have been minor during the month but two vacancies have been filled.

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4. MEDICAL SUPPLIES.

(A) The 2605th Central Civilian Medical Depot has made complete shipments of Allied Medical Supplies as requested by requisitions from Regional Public Health Officers of Emilia, Venezia, Lombardia, Piemonte and Liguria Regions. These supplies were sufficient to take care of all requirements on the basis of disease and unrest among the civilian population up to 1 September 1945. The Italian Government has been given instructions by the Medical Supply Branch, Public Health Sub-Commission, Headquarters, Allied Commission, and it is their responsibility to instruct their Agency to make distribution in their territory after 1st September 1945, except AMG, 13th Corps or Venezia Giulia Region.

(B) Medical Supplies have been shipped to AMG 13th Corps (Venezia Giulia Region) on CAB basis to take care of the civilian population up to the 1st December 1945. After that date, if future supplies are needed it is the responsibility of the Regional Public Health Officer to order his supplies from ETO.

(C) Displaced Persons and Repatriation Sub-Commission, HQ, Allied Commission submitted their requirements for medical supplies to include up to the 1st December 1945. These supplies have been shipped by OCMD on the 15th August 1945. Future supplies, if required, as of 1st December 1945 will be handled by UNRRA.

(D) There are sufficient supplies in OCMD warehouses that are being turned over to the Italian Government this two-thirds of the last six months period due in September 1945 to take care of all Italy on the basis of disease and unrest up to approximately 1st April 1946.

(E) Military Category "A" Supplies finished as of the August 1945 loadings and it is the responsibility of the Italian Government and U.N.R.R.A. to assume the responsibility of future supplies for Italy under Category "B" program.

(F) The turning over of Allied Medical Supplies earmarked for Italy to the Italian Government by the 2605th Central Civilian Medical Depots is progressing very smoothly. Approximately $1,300,000 of medical supplies were turned over by the Naples Depot. The Naples Depot closed 20 August 1945 and the Company was transferred to the Florence Depot.

(G) The Istituto Nazionale per il Commercio Estero (ICE) has assumed the responsibility of receiving at dockside of all future medical supplies earmarked for Italy as of 15 August 1945.

5. WELFARE.

(A) PERSONNEL. No changes except by Special Orders 199, Para 1, Lt.Col. Kenny, 0520679 was relieved of duty with Company M and assigned to Headquarters, 2675 Regiment, on 25th August.

their responsibility of instructing [illegible] territory after 1st September 1945, except AMG, 13th Corps or Venezia Giulia Region.

(B) Medical Supplies have been shipped to AMG 13th Corps (Venezia Giulia Region) on CAD basis to take care of the civilian population up to the 1st December 1945. After that date, if future supplies are needed it is the responsibility of the Regional Public Health Officer to order his supplies from ETO.

(C) Displaced Persons and Repatriation sub-Commission, HQ, Allied Commission submitted their requirements for medical supplies to include up to the 1st December 1945. These supplies have been shipped by CCAD on the 15th August 1945. Future supplies, if required, as of 1st December 1945 will be handled by UNRRA.

(D) There are sufficient supplies in CCAD warehouses that are being turned over to the Italian Government due two-thirds of the last six months period due in September 1946 to take care of all Italy on the basis of disease incurred up to approximately 1st April 1946.

(E) Military Category "A" Supplies finished as of the August 1945 loadings and it is the responsibility of the Italian Government and U.N.R.R.A. to assume the responsibility of future supplies for Italy under Category "B" program.

(F) The turning over of Allied Medical Supplies earmarked for Italy to the Italian Government by the 2685th Central Civilian Medical Depot is progressing very smoothly. Approximately $1,300,000 of medical supplies were turned over by the Naples Depot. The Naples Depot closed 20 August 1945 and the country was transferred to the Florence Depot.

(G) The Istituto Nazionale per il Commercio Estero (ICE) has assumed the responsibility of receiving at dockside of all future medical supplies earmarked for Italy as of 15 August 1945.

5. WELFARE.

(A) PERSONNEL. No changes except by Special Orders 199, Para 1, Lt.Col. Kenny, 0[illegible] was relieved of duty with Company M and assigned to Headquarters, 2675 Regiment, on 25th August.

(B) All clothing and food distributions are in the hands of ENEI and UNRRA. Plans are being put in operation whereby individual cases sent to ENEI can be investigated and cared for. This relieves the Welfare Branch of one of its rather serious problems.

The Commerce Sub-Commission has offered the Chief, Welfare Branch, 217 tons of blankets for distribution. Two investigational trips were made, one north and the other south, to learn what facilities were available for storage and for distribution of this large quantity of blankets into the rather isolated sections which may still have great need for such material this winter.

To date, [illegible] have been made to DPM. With the withdrawal of so many of our Regional Welfare Officers it will be necessary to cooperate much more closely with ENEI and UNRRA in such work.

The closing of northern regions and the returning of the welfare work to the Italian people marked the beginning of a period of watchful waiting.

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S.1 Good work has been done by the P.W.B. both in Army and A.C. territory and we hopefully expect the Italian officials and welfare minded civilians to carry on this good work for the benefit of the less fortunate of Italy.

The Chief, Welfare Branch has been lending every assistance to the Opera Nazionale Maternita ed Infanzia and other Italian Health and Welfare agencies to help them get possession again of their requisitioned properties. The Army and Air Corps have been asked to include this type of property among those first to be released. If the all and permanent locations can be re-established before winter sets in, the program will be greatly facilitated.

(c) The two trips referred to disclosed great quantities of salvage aluminum. The Ministry of Industry is being urged to buy all of this valuable metal which is offered for sale and then resell the required portion of it without profit to the officials of factories who can use it for the manufacture of orthopedic equipment.

Dr. Valente has also been requested to ask the Prefect of Catanzaro to sell an 180 tons of raw wool for the use of local manufacturers or to be sent to the blind school and hospitals for the patients there to use in connection with their occupational therapy. This wool was called to our attention by Capt. Salvadra of PRONA.

(d) The Chief, Welfare Branch is collaborating with the Director of Education in an effort to get sewing equipment and clothing for Boy Scouts and Girl Guides of Italy. Until all the needy children have been partially provided with the bare necessities in the way of clothing the Chief, Welfare Branch has asked a special contingent for the Scouts but now it appears that a semblance of a uniform can and should be provided soon to uplift the morale and provide inspiration for these young Italians.

No effort is being made to get salvage tents, mess equipment or other non-perishable for the use of these worthwhile organizations.

Meetings.

(a) Two of the regular weekly meetings with Dr. Valente were cancelled because of the two trips taken by the Chief, Welfare Branch. The chief question raised and discussed in each meeting has been the incorporation of Public Health Sub-Commission Memorandum No. 10 into the Italian Welfare Decree. So far a telegram of instructions to Prefects has been sent by the Ministry of Interior, authorizing the creation of a central head for the welfare committees of the provinces and thereby giving these committees the semblance of Department.

(b) Miss Bannister of UNRRA has been very cooperative. She keeps us informed of her work and implications. Its almost entirely avoided now. We trust that our former A.C. Welfare officers Captains Wilcox and Oliverio will continue their good work in UNRRA where they are most anxious. In the meeting held with her she was spoken favorably of our officers.

(c) Miss McCullock, the other institutional specialist of UNRRA has been met with several times during the month. The Chief, Welfare Branch has been asked to cooperate with Education Sub-Commission and the Welfare Branch of UNRRA in setting up certain programs. Complete reports will be submitted.

(d) The usual irregular but frequent meetings with representatives of ANSAI have been held. We have succeeded in getting the DDR Guisso [illegible] to work in Rome [illegible]

orthopedic equipment.

Dr. Valente has also been requested to ask the Prefect of Catanzaro to release 140 tons of raw wool for the use of local manufacturers or to be sent to the blind school and hospitals for the patients there to use in connection with their occupational therapy. This wool was called to our attention by Capt. Silveira of UNRRA.

(D) The Chief, Welfare Branch is collaborating with the Director of Education in an effort to get sewing equipment and clothing for Boy Scouts and Girl Guides of Italy. Until all the needy children have been partially provided with the bare necessities in the way of clothing the Chief, Welfare Branch has approved special equipment for the Scouts but now it appears that a semblance of a uniform can and should be provided so as to build the morale and provide inspiration for these young Italians.

An effort is being made to get salvage tents, mess equipment and other needed materials for the use of these worthwhile organizations.

Meetings.

(a) Two of the regular weekly meetings with Dr. Valenti were cancelled because of the two trips taken by the Chief, Welfare Branch. The chief question pressed and discussed in each meeting has been the incorporation of Public Health Sub-Commission Memorandum No. 38 into the Italian Welfare Decree. So far a telegram of instructions to Prefects has been sent by the Ministry of Interior, authorizing the creation of a central head for the welfare committees of the provinces and thereby giving to the Committees the assistance of Departments.

(b) Miss Bannister of UNRRA has been very cooperative. She keeps us informed of her work and duplication is almost entirely avoided now. We feel that our former A.C. Welfare Officers Captains Wilcox and Silveira will continue their good work in UNRRA where they are now assigned. In the meeting held with her she has spoken favourably of our officers.

(c) Miss McCulloch, the child institutional specialist of UNRRA has been met with several times during the month. The Chief, Welfare Branch has been asked to cooperate with Education Sub-Commission and the Welfare Branch of UNRRA in setting up certain programs. Completed reports will be submitted.

(d) The usual irregular but frequent meetings with representatives of AMSI have been held. We have cooperated in getting the NON Suisse permission to carry its welfare work in Italy which is similar to that of American Relief for Italy.

(E) We welcome Lt.Col. Kenny at HQ. His very successful experience in setting up welfare departments in the provinces of Venezia Giulia will be in our efforts to have the Italian Government legalize this program. His advice and counsel will be invaluable in these days when we return full re activities to the Italian Government, when many questions are being asked and advice is sought.

(F) We are encouraged by the powerful and apparently efficient way the Italians are assuming their welfare responsibility. We have reason to believe that the long and patient work of our P.W.O.s, together with that of their allied Red Cross Assistants will bear fruit in the improvement of the conditions of the less fortunate of Italy.

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(18)

C. PERSONNEL.

(A) The Directorship of the Sub-Commission has been assumed by Colonel Thomas M. Page who has relinquished the dual role of Deputy Regional Commissioner and RCMO Venezia Region. Lt.Col. Raymond Kenny has also been posted to this HQ from Venezia Region.

(B) The following new arrivals have been assigned by order as and PT of this Sub-Commission: -

Legion of Merit.	Colonel Page. Lt.Col. Bushmore.
Bronze Star.	Lt.Col. Kenny. Major [illegible]. S/Sgt. [illegible].

(C) The Sub-Commission's staff has been further depleted by the departure of Lt.Col. Bisogno and Lr. Floyd S. Markham. Lt.Col. Bisogno was one of the original members of the AMGOT team to enter Sicily and has been prominently associated with AMG ever since, while Mr Markham is well known for his work on the Typhus Control Unit during the Naples epidemic and subsequently.

(D) In addition to these departures a number of American Officers have been declared surplus to establishment. In consequence, the effective strength of the Sub-Commission has been considerably reduced during August.

SUMMARY

1. POLITICAL:

Both the appointment of an Alto Commissario for Public Health and a definition of the functions of the Alto Commissario have been effected by legislative decrees during the month of August.

2. PUBLIC HEALTH:

(a) Up until 27th August, 2,102 sick Italian repatriates have arrived in Naples. These have been such in excess of schedule and the bed capacity of the Hospital Command is being strained to its utmost limits. Many difficulties are being experienced in obtaining sufficient Italian Red Cross personnel and every effort is being made by this HQ in conjunction with the Italian Red Cross, the High Commissioner for Public Health and the Ministry of Post War Assistance to meet the necessary requirements of the Napoli Repatriation Hospital Command. Also authority for the use of captured hospital equipment, ambulance and motor transport for the use of the Hospital Command have been sought but not yet obtained. The project is one of such international importance that unless prompt and willing cooperation is given by all authorities concerned, serious reports are bound to occur.

Bruno Star. Lt.Col. Fanny.
Major Guisi.
S/Sgt. Spinosa.

(C) The Sub-Commission's staff has been further depleted by the departure of Lt.Col Gazzaero and Dr. Floyd S. Markham. Lt.Col. Gazzaero was one of the original members of the AMGOT team to enter Sicily and has been prominently associated with AMG ever since, while Dr Markham is well known for his work on the Typhus Control Unit during the Naples epidemic and subsequently.

(D) In addition to these departures a number of American Officers have been declared surplus to establishment. In consequence, the effective strength of the Sub-Commission has been considerably reduced during August.

SUMMARY

1. POLITICAL:

Both the appointment of an Alto Commissario for Public Health and a definition of the functions of the Alto Commissario have been amended by legislative decree during the month of August.

2. PUBLIC HEALTH:

(A) Up until 27th August, 2,402 Sick Italian repatriates have arrived in Naples. These have been much in excess of schedule and the bed capacity of the Hospital Command is being stretched to its utmost limits. Many difficulties are being experienced in obtaining sufficient Italian Red Cross personnel and every effort is being made by this HQ in conjunction with the Italian Red Cross, the High Commissioner for Public Health and the Ministry of Post War Assistance to meet the necessary requirements of the Terme Repatriation Hospital Command. Prior authority for the use of captured hospital equipment, ambulance and domestic transport for the needs of the Hospital Command have been sought but not yet obtained. The project is one of such international importance that unless immediate and willing cooperation is given by all authorities concerned, serious repercussions are bound to occur.

(B) Only one case of Typhus was notified during August in a refugee from Belgrade. One related notification referable to the end of July was received from Sicily.

(C) Smallpox figures both in Naples and elsewhere in Italy have shown a marked and very gratifying decrease.

(D) Weekly searches at collecting stations in the Tiber Delta continue to show a very low mosquito density. Although two particular areas have reported a large increase in figures this is purely relative and causes no concern with regard to Malaria Transmission.

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(E) No reply has yet been received from the Italian Government regarding the AMG proposals regarding the staffing of VD Hospitals by Allied Consultants.

(F) The infant mortality rates for Rome Communes for July was 99.9 as compared with 96.9 in June.

(G) Deaths from all forms of tuberculosis in Rome during July were 238 as compared with 232 in June.

3. VETERINARY:

It is anticipated that the activities of the Veterinary Branch will cease at the end of August. The Italian Government has been notified accordingly. Partial distribution of all veterinary supplies has been made and it is anticipated that distribution of the remainder will soon be effected. No further imports of veterinary supplies will take place. No serious outbreaks of communicable disease amongst animals have occurred during August.

4. WELFARE:

The Welfare Branch has now turned over to UNRRA and ENEMI all problems pertaining to the distribution of food and clothing. 217 tons of blankets have been made available by the Commerce Sub-Commission for distribution. Increasing responsibility for Welfare matters is being turned over to the Italian authorities.

5. MEDICAL SUPPLIES:

UNRRA has in August only completed the distribution of its Med supplies in Italian Government territory. The supplies in the Naples warehouse, valued at $1,[illegible],000 have been handed over to the Istituto Commercio Estero the organization designated by the Italian Government for accepting such supplies. The Florence warehouse is in the process of being handed over. With the dissolution of ASCS COMD no further requisitions for medical supplies for 1946 have been submitted. The future responsibility for Category "B" medical supplies will be accepted by UNRRA and FMA.

6. PERSONNEL:

Colonel Thomas N. Page has been appointed Director of the Sub-Commission. The Legion of Merit has been awarded to two officers of the Sub-Commission and the Bronze Star to two officers and one Enlisted Man. The staff of the Sub-Commission has been further depleted by the departure of Lt. Col. Minozzero and Dr Markham, while a number of American Officers have been declared surplus to establishment.

Thomas N Page
(THOMAS N PAGE), Colonel, C.A.C.
Director

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4. WELFARE:

The Welfare Branch has now turned over to UNRRA and AMGOT all problems pertaining to the distribution of food and clothing. 217 tons of blankets have been made available by the Commerce Sub-Commission for distribution. Increasing responsibility for Welfare matters is being turned over to the Italian authorities.

5. MEDICAL SUPPLIES:

ANPILSA has in August only completed the distribution of its May supplies in Italian Government territory. The supplies in the Naples warehouse, valued at $1,330,000 have been handed over to the Istituto Commercio Estero the organization designated by the Italian Government for accepting such supplies. The Florence warehouse is in the process of being handed over. With the dissolution of 2665 CCMD no further requisitions for medical supplies for 1946 have been submitted. The future responsibility for Category "B" medical supplies will be accepted by UNRRA and FSA.

6. PERSONNEL:

Colonel Thomas N. Page has been appointed Director of the Sub-Commission. The Legion of Merit has been awarded to two officers of the Sub-Commission and the Bronze Star to two officers and one Enlisted Man. The staff of the Sub-Commission has been further depleted by the departure of Lt.Col. Bizzozero and Dr Markham, while a number of American Officers have been declared surplus to establishment.

Thomas N Page

THOMAS N PAGE, Colonel, U.S.
Director,
Public Health Sub-Commission.

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH — 12 August 1945

AUG 1945

SUBJECT : - Report for the month of July 1945, Public Health Sub-Commission.

THRU : - VP, CA Section

TO : - Executive Commissioner, HQ AC.

1. PERSONNEL :

(a) The appointment of a Alto Commissario for Public Health, though not yet announced, in the "Gazette" has been notified by the Government and the Alto Commissario will be Professor Pergami, who was Professor of Physiology at the University of Naples, is no stranger to this Sub Commission, as he was Counsellor for Health in Naples Command at the time of the typhus epidemic and managed the Typhus Control Unit with valuable assistance, relative this present appointment Prof. Pergami was High Commissioner for Food, and he therefore brings to his new post both medical and governmental experience in no small measure. Discussions with him reveal that he has an acute and fundamental grasp of Allied Public Health requirements and it is believed that under his guidance important developments will take place.

2. PUBLIC HEALTH MATTERS :

(a) Hermes Hospital Project.

(a) During July it became known that a large number of sick Italian prisoners of war and refugees were to be repatriated and that they would all require immediate hospitalization. The number was first estimated to be 10,000 but this was later reduced to 5000. At the moment it is not known if the latter figure is correct or if we are nearer to the original estimate is to be anticipated.

(b) Owing to the shortage of hospital accommodation in Italy this problem was one of considerable complexity, and conferences were held at this HQ by the VP, CA Section to discuss the best way in which the task might be undertaken. Col. Fear, of AMG 5th Army, stated that there was at Marano, in Salerno province, a large German hospital which was and when the Germans were returned to Germany, the hospital accommodation, beds and equipment could be utilised for the hospitalization of the returning Italians. The proposal was accepted and Colonel Fear returned to the North in order to initiate the project, which, necessarily, involved a tremendous amount of organization, especially as the time interval before the arrival of the first train was very short.

(c) The Italian Red Cross was asked to provide the medical and nursing staff for these hospitals and though five doctors and fourteen nurses were made available at once, it was clearly [illegible]

(d) The appointment of an Alto Commissario for Public Health, though not yet announced in the "Gazetta" has been notified by the Government and the Alto Commissario will be Prof.Bergamo. Professor Bergamo, who was Professor of Physiology at the University of Naples, is no stranger to this Sub Commission, as he was Councillor for Health in Naples Commune at the time of the typhus epidemic and rendered the Typhus Control Unit much valuable assistance. Prior to this present appointment Prof.Bergamo was High Commissioner for Food, and he therefore brings to his new post both medical and governmental experience in no small measure. Discussions with him proved that he has an acute and fundamental grasp of present Italian Public Health requirements and it is believed that under his guidance important developments will take place.

2. PUBLIC HEALTH MEASURES :

(a) Moruno Hospital Project.

(a) During July it became known that a large number of sick Italian prisoners of war and refugees were to be repatriated and that they would all require immediate hospitalisation. The number was first estimated to be 10,000 but this was later reduced to 5000. At the moment it is not known if the latter figure is correct or if an intake nearer to the original estimate is to be anticipated.

(b) Owing to the shortage of hospital accomodation in Italy this problem was one of considerable complexity, and conferences were held at this HQ by the UP, Qa Section to discuss the best way in which the task might be undertaken. Col.Parr, of AMG 5th Army, stated that there was at Moruno, in Bolzano province, a large German hospital colony and that as and when the Germans were returned to Germany, the hospital accomodation, bedding and equipment could be utilised for the hospitalisation of the returning Italians. This proposal was accepted and Colonel Parr returned to the North in order to initiate the project, which, necessarily, involved a tremendous amount of organisation, especially as the time interval before the arrival of the first train was very short.

(c) The Italian Red Cross was asked to provide the medical and nursing staff for these hospitals and though five doctors and fourteen nurses were made available at once, it would obviously take time before a full staff could be recruited. AMG 5th Army, therefore, as an emergency measure set up two Italian field hospitals with an approximate capacity of 500 beds close to Moruno in order to receive any patients who might arrive before the Moruno hospitals were ready. The wisdom of this move was apparent when a hospital train arrived by mistake on the 27th July, arriving to Moruno instead of Milano.

(d) Meanwhile work went forward as regards the procurement of Allied personnel to assist Col.Parr, the provision of medical supplies and rations. Unfortunately Col.Parr at this juncture had to leave for England under PLOP leave scheme and the Regional Commissioner of Emilia Region kindly agreed to the release of Lt.Col.Sabbatier to replace Col.Parr.

(e) By August 1st a German hospital of approximately 1700 beds will be free and it is anticipated that by August 6th a further 1000 bedded hospital will be available.

(f) The problem of obtaining sufficient IRC personnel is of some magnitude, as it is a task on any organisation to produce sufficient staff at a moment's notice to look after 5000 sick persons. As already mentioned the IRC immediately sent to Bolzano five doctors, fourteen nurses and approximately 20 EM/ORs and is in the process of sending more from every town of importance in the north of Italy.

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Fortunately additional welcome assistance has been offered by the Swiss Red Cross, which was already operating in the north, and a team of fifteen doctors and forty nurses under Dr. Bloch of the Swiss Red Cross will be available early in August. This will supplement the efforts of the IRO until such time as a complete IRC staff is available.

(c) While the original organization of the project is being undertaken by AC/AMG, the time will eventually come when the IRO and the Italian Government will have to assume control. It is believed that all the sick will have been moved to Merano before this occurs and that the subsequent control will only consist of taking care of the hospital cases and the suffering such as are recovered or are well enough to be moved to their own homes.

2. (F) Typhus :

(a) Only three sporadic cases of typhus were reported during the month in repatriated persons from Croatia and Albania. One occurred in Milan, one in Alessandria and one in Parma. Only the case in Milan died.

(b) During July the Typhus Control Unit gave to the Displaced Persons and Repatriation Sub Commission 2634 lbs. of anti louse powder and 90 ...bical hand guns for use in their camps as it is now felt that the unit available can best be used by the Displaced Persons and Repatriation Sub Commission in its program of routine disinfestation of all refugees entering Italy.

(G) Smallpox :

(a) The regular smallpox figures show a further reduction in July, there being 26 cases reported from the city and 81 from the province as compared with 25 and 117 respectively in June.

(b) Avellino province had an increase in the number of cases, 40 being reported as compared with 25 last month, while Salerno similarly showed a rise, the July figure being 34 as against 9 in June.

(c) The remaining figures in Italy are low, there being reported only 6 from Potenza province, 3 from Frosinone and 1 each from Latinia, Modena, Verona and Siracusa.

(d) The British Military Authorities have kindly put three ambulances at the disposal of the Naples Public Health Department and this loan is most gratefully acknowledged.

(D) Malaria :

The Malaria Demonstration Unit reports that spraying in the Tiber delta project was completed in the month of June. In the whole 120 square miles of the test area about 5800 buildings ranging from large apartment houses in Ostia Lido and great dairy barns in Maccarese to rabbit hutches were sprayed. These structures included nearly 47000 rooms. Some 275 barrels of kerosene and 6800 pounds of DDT concentrate were applied at the approximate rate of 200 mg. per square foot.

As soon as the spraying was completed in each of the subdivisions of the project the adult and larval collecting program was initiated. Weekly searches at the 190 regular collecting stations of the area, in each of which at least one bedroom, one barn and a pigsty are searched, reveal the average number of anopheline captured as 0.22 per station in mid-July.

(E) Venereal Diseases :

The meeting referred to in last month's report between Italian Government and medical [illegible]

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one in Alessandria [illegible] Malaria Control Unit [illegible]

(c) During July the Malaria Control Unit [illegible] and 90 [illegible] and Repatriation Sub Commission 2034 lbs. of anti louse powder and 90 [illegible] dust guns for use in their camps as it is now felt that the DDT available will best be used by the Displaced Persons and Repatriation Sub Commission in its program of routine disinfestation of all refugees entering Italy.

(d) Smallpox :

(a) The regular smallpox figures show a further reduction in July, there being 25 cases reported from the city and 81 from the province as compared with 38 and 117 respectively in June.

(b) Avellino province had an increase in the number of cases, 46 being reported as compared with 25 last month, while Salerno similarly showed a rise, the July figure being 34 as against 9 in June.

(c) The remaining figures in Italy are low, there being reported only 6 from Potenza province, 3 from Frosinone and 1 each from Latania, Modena, Verona and Siracusa.

(d) The British Military Authorities have kindly put three ambulances at the disposal of the Naples Public Health Department and this loan is most gratefully acknowledged.

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(E) Venereal Diseases :

The meeting referred to in last month's report between Italian Government and medical representatives from AMG was held early in July. The Allied representatives were anxious that every hospital for the treatment of infected prostitutes which was to be sponsored by AMG would have in it an Allied medical officer to act as consultant and adviser. The Italian Government was not anxious to release the administration of V.D. treatment to Allied Authorities, while the Allied point of view was that the medical supplies and equipment volunteered by AMG could not be given unless under the supervision of an Allied medical officer. It was then agreed that AMG representatives would prepare a statement as to the technical administration of the hospitals and the relationship which should exist between the Allied and Italian medical staff. This has been submitted and passed to the Italian Government whose reply is now being awaited.

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(F) Infant mortality:

During June there were 1618 live births in Rome Commune with 165 deaths in infants under one year of age. This gives an infant mortality rate of 102.0 as compared with 76.5 in June.

(G) Tuberculosis:

The number of deaths from all forms of tuberculosis in Rome Commune in June was 232 as compared with 230 in May. Of these 194 were due to pulmonary tuberculosis.

3. VETERINARY HEALTH.

(A) Personnel.

The assignment of a provincial Veterinarian to Leghorn province and one to Genoa province has been arranged for during the month. A number of the veterinary staff, Ministry of the Interior, who had served north with the Republican Government in May 1944 has applied to AMG Leghorn Region for an assignment as provincial veterinary. His application has been sent forward to the High Commissioner for Public Health for action at the appropriate time.

(B) Biological production and communicable disease control.

The following is an account of the disease situation and the control measures employed:

(a) Foot-and-mouth disease. The provinces of Pisti, Terni and Perugia are heavily infected areas. Vaccinations have been made daily in these provinces and a sufficient quantity of vaccine is being produced at the home laboratory. Draught cattle arriving at the home abattoir from Sardinia are being used for virus production prior to slaughter, thereby facilitating vaccine production.

(b) Swine Erysipelas. A heavy incidence is to be found in Genoa province. Obligatory vaccination has been instituted there and supplies of all biologicals are sufficient for the control of this disease. Incidence in other areas has been only sporadic.

(c) Swine Cholera. Sectional reports of cholera have made necessary an increase in the production of vaccine. Sufficient crystal violet for the manufacture of two million doses of vaccine has been distributed as there is no available local supply. Generally, there is an ample supply of antiserum and vaccine for effective control of cholera during the next two months when incidence is expected to be comparatively high.

(d) Trichomonadiasis. There is less in North provinces than was the case in April. Artificial insemination centres are functioning there, which has and will continue to reduce the prevalence of this disease in that area.

(e) Abortion Leptospirosis. This condition in epidemic proportions through contact through vaccinations (3 million in all) continues. As there is some doubt as to exactly what this disease is, extensive experimental work is now being carried on in Perugia, Milan and Rome. Material to all these experiments has been received from the Army Veterinary Laboratory, Washington.

(f) Rabies. There has been a marked increase in the number of recorded cases since last month. Of 200 stray dogs impounded in the Rome municipal impound during the last 30 days, 19 were rabid. In Allied Military Government Territory [illegible] military and civil

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Veterinary staff, directly or [illegible] Republican Government in May 1946 has applied to the Lombardy Region for an assignment as provincial veterinary. His application has been sent forward to the High Commissioner for Public Health for action at the appropriate time.

(B) Biological production and communicable disease control.

The following is an account of the diseases present and the control measures employed:

(a) Foot-and-mouth disease. The provinces of Rieti, Terni and Perugia are newly infected zones. Vaccinations have been made obligatory in these provinces and a sufficient quantity of vaccine is being produced at the Rome Laboratory. Brought cattle arriving at the Rome abattoir from Sardinia are being used for virus production prior to slaughter, thereby facilitating vaccine production.

(b) Swine Erysipelas. A heavy incidence is to be found in Cuneo province. Obligatory vaccination has been instituted there and supplies of all biologicals are adequate for the control of this disease. Incidence in other areas has been only sporadic.

(c) Swine Cholera. Sectional reports of cholera have made necessary an increase in the production of vaccine. Sufficient crystal violet for the manufacture of two million doses of vaccine has been requisitioned as there is no available local supply. Generally, there is an ample supply of antiserum and vaccine for effective control of cholera during the next two months when incidence is expected to be comparatively high.

(d) Bronchopneumonia. There is less in Rieti province than was the case in April. Artificial inoculation centres are now functioning there, which has and will continue to reduce the prevalence of this disease in that area.

(e) Atypical Laryngotracheitis. This continues in epizootic proportions though control through vaccinations (5 million in all) continue. As there is some doubt as to exactly what this disease is, extensive experimental studies of it are being carried on in Perugia, Milan and Rome. Material to all these experiments has been received from the Army Veterinary Laboratory, Washington.

(f) Rabies. There has been a marked increase in the number of recorded cases since last month. Of 248 stray dogs impounded in the Rome municipal impound during the last 60 days, 19 were rabid. In Allied Military Government Territory leashing and muzzling of dogs is obligatory and every possible method of impounding stray dogs is being used. In this territory, with the exception of Naples Province there has been none reported during the month. In that territory under Italian Government control the disease has been quite prevalent as very merger control measures are being employed. The appropriate officials in the Public Health Division will be constantly encouraged to effect more rigid control measures.

(g) Other diseases. Piroplasmosis, brucellosis, equine infections, mange, nodular, equine infectious lymphangitis , anthrax and blackleg have been sporadic during the month.

(C) Allied Veterinary Medical Supplies:

Considerable time and effort has been devoted by this Branch to this urgent problem during the month. Supplies in the amount of about 2½ million lire have not only been in the Central Civilian Medical Depot Naples ready for shipment for more than six weeks but every possible arrangement to facilitate distribution has been made by this Branch with the full assistance and cooperation of the above mentioned Depot. Even though issue vouchers have been prepared, signed and distributed weeks ago and numerous conferences with Ministerial officials including one with the High Commissioner for Public Health have been held, the

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supplies have not been moved.

(D) Other activities.

Arrangements are under way for the sale of a sizeable quantity of Italian produced veterinary biologicals for use in Austria, where supplies are extremely scarce. It is expected that this transaction will be made effective before 15 August.

The Acting Regional Veterinary for Sicily has reported personally to this Branch that the veterinary service there is functioning very well. Novino sterilizing vat and artificial insemination has started in those provinces where short courses of instruction for vet students were conducted during the past five months.

An annual report on the activities of this Branch has been prepared during the month.

4. MEDICAL SUPPLY BRANCH.

(A) Requisitions for medical supplies from the Italian Government have been filled by our depots. UNRRA warehouses are full of medical supplies but they have still not made any distribution in the last three months. Complaints have been received by this Office; these have been referred to the High Commissioner of Public Health, Italian Government, stating that UNRRA has not been fulfilling their agreements and that action should be taken so that medical supplies in the future be properly distributed.

(B) As the early liquidation of the 2665th C.C.A.G. is contemplated, AFHQ, G-5 Section on the 3rd July 1945 gave authority to permit acceptance of future shipments earmarked for Italy at Rodalia by the Italian Government, and to take charge of those supplies in OSS warehouse. A meeting was held on the 12th July attended by the representatives of the Public Health S/C, Finance S/C, Public Health Division, Italian Government, Treasury Department Italian Government, ICE (Italian Government Commerce Agency). The Italian Government informed this Office on the 21st July that ICE had been appointed by them as their representative and that they would accept full responsibility for those supplies and for their distribution. This Office notified ICE that the supplies in the Naples depot had to be inventoried and turned over to them on or before the 15th August 1945 and accept stocks in the Florence depot by the 1st of September 1945.

(C) Displaced Persons and Repatriation S/C has submitted a 3 months requisition to this office. These supplies will be sufficient to meet their requirements up to the 1st of November 1945. It will then be the responsibility of the Italian Government and UNRRA to handle future requirements.

(D) Twelve tons of medical supplies have been shipped to Venezia Giulia for their August requirements. OSS, Florence is now preparing 15 CAD units to be shipped for September, October and November. As of the 1st December, 1945 ERO will furnish supplies if required at that time.

(E) One (1) Unit was shipped to Morocco for sick Italian Prisoners of War who are being returned from Germany. These supplies are sufficient to take care of about 10,000 PWs for a 3 month period. No future medical supplies [illegible] the hospitals.

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been received during the month.

4. MEDICAL SUPPLY BRANCH.

(a) Requisitions for medical supplies from the Italian Government have been filled by our depots. PMMU warehouses are full of medical supplies but they have still not made any distribution in the last three months. Complaints have been received by this Office; these have been referred to the High Commissioner of Public Health, Italian Government, stating that UNRRA has not been fulfilling their agreements and that action should be taken so that medical supplies in the future be properly distributed.

(b) At the early dissolution of the 266th C.C.A.O. in contemplation, AFHQ, G-5 Section on the 3rd July 1945 gave authority to permit acceptance of future shipments consigned for Italy at Leghorn by the Italian Government, and to take charge of those supplies in CMD warehouses. A meeting was held on the 12th July attended by the representatives of the Public Health S/C, Finance S/C, Public Health Division, Italian Government, Treasury Department Italian Government, ICE (Italian Government Commerce Agency). The Italian Government informed this Office on the 21st July that ICE had been appointed by them as their representative and that they would accept full responsibility for these supplies and for their distribution. This Office notified ICE that the supplies in the Naples depot had to be inventoried and turned over to them on or before the 15th August 1945 and accept stocks in the Florence depot by the 1st of September 1945.

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(e) One CMD Unit was shipped to Merano for sick Italian Prisoners of War who are being returned from Germany. These supplies are sufficient to take care of about 10,000 PW for a 3 month period. No future medical supplies will be required as stated by the officer in charge of the hospitals.

(f) Ten million multivitamin tablets have been returned from the U.S. Army stocks which have been declared excess. These vitamins were shipped to CMD, Naples where the Italian Government will take delivery for distribution to various institutions for children, hospitals and clinics.

5. WELFARE BRANCH.

(a) Personnel. No changes.

(b) Food clothing and blankets.

(c) No clothing and food have been distributed by this Branch this month.

(d) Pursuant to agreement reached at the meeting of Welfare Officers in Milan the 8th of June, the greater portion of the blankets allotted to the Welfare Section of the Public Health Sub Commission were assigned to the Regional Welfare Officer, Milan Region, because of the greater devastation there. So far sixty-five thousand have been distributed to eleemosinary institutions in this one Region.

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(c) Cooperation has been asked of the U.N.R.R. by ANSI in obtaining beds for civilian hospitals. If material could be obtained, the beds could be constructed by Italian blacksmiths. A short trip was made to Naples to try to obtain this material and also aluminum for the manufacture of orthopedic equipment. A separate report on this mission has been submitted.

(d) The Regional Welfare Officer, Venezia Region met with the Director, Public Health Sub-Commission and urged that a request be made to the Italian Ministry of Interior, that Memorandum No. 58 be substituted for or incorporated in the Italian legislation decree on Welfare. The Italian decree provides for Welfare committees in each province and No. 58 provides for a Welfare Department with separate institutions and Child Care divisions. Pursuant to VOGC to the Director, Public Health Sub-Commission, efforts were made to accomplish the proposal suggested by the Regional Welfare Officer, Venezia, or at least to effect a compromise. This will be referred to under Meetings.

(e) Requests have come in for canvas and other salvage material from the Regional Welfare Officers. The rather smoothly working program of having the Ministry of Industry buy all useful salvage and then distribute it to other Italian agencies is being disrupted by giving priorities to other agencies. The Chief, Welfare Branch still hopes that some plan will be established and followed, which will get this material flowing into useful Welfare channels.

(f) The reports of all Regional Welfare Officers indicate great unemployment and attendant relief problems unless coal and raw materials can be furnished to keep the factories running. The Regional Welfare Officers are to be highly commended for their untiring efforts to provide now for winter needs and for their cooperation with other Allied and Italian agencies in trying to prevent serious welfare conditions by urging now the making available of certain supplies for future needs.

(C) Meetings.

(a) At each of the regular meetings with Dr. Valenti of the Welfare Division of the Italian Ministry, the question of incorporating our Memorandum No. 58 as part of the Italian Welfare decree was discussed. The Doctor sent a message, which he assures us has legislative significance, to all Prefects urging that in those provinces where a Welfare Department has been set up by AMG and AC officers, the person acting as Welfare Commissioner really becomes the head of the Welfare Committees which will be established under the Italian decree. In the provinces where Welfare Committees are in operation the message authorizes the addition of one member as chairman, with power to act as Welfare head. Here complete clarification is being worked out. The Doctor is also requesting clarification on the exact duties of all the agencies of the Italian Government now doing Welfare or quasi Welfare work.

(b) Miss/Miss Palermo who worked with Captain Brown in Milano, was here and gave an account of her work. She in turn met with Italian Officials and corroborated our statement with regard to needs for funds for welfare purposes and the necessity of continuing the work set in operation by the AMG and AC officials.

(c) Mr. Vertian of the Joint Distribution Committee has come in for several meetings. His fine cooperation is being continued and through the use of his truck many welfare needs have been met.

(d) Meetings were held with Miss Phebe Bannister, head of the Welfare Division of UNRRA and Miss Martha McCulloch, an Institutional specialist of UNRRA. These were very profitable. A better picture of the exact activities of UNRRA were presented and we have started plans which will augment each others work. We are assigning blankets for them to distribute. They are cooperating in the [illegible]

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to other Italian agencies is being distributed by giving [illegible]
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(e) Meetings with officials of ENDSI occur when lists come in from the War Materials Disposal Sub-Commission enumerating the articles of salvage available. Request has been made to have additional lists of available salvage materials sent to the Public Health Sub-Commission which will be in turn sent to ENDSI. Italian Red Cross and other Welfare Groups see that the items desired by such may be checked.

6. PERSONNEL.

(A) The departure of Brigadier G.S. Parkinson for England has deprived the Sub-Commission of a Director who devoted himself untiringly to the innumerable problems of the past two years. His quick grasp of and deep interest in Italian Public Health matters was immediately appreciated by the Italian Officials who soon came to regard him with the same measure of affection and respect as did his Officers.

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Under the direction the Sub-Commission has made many important contributions to the health of the Italian nation and his reputation will last for a long time in Italian Health circles. The measure of his popularity can only be gauged by the universal regret which is felt at his departure. During July Col. Parr has gone home under the DILCO scheme while Major Mackenzie has returned to England on a permanent change of station. Each of these officers has contributed enormously to the success of AMG in the field.

(B) Lt. Colonel G.H. Frisella has been promoted to the rank of Colonel.

SUMMARY

1. POLITICAL.

The appointment of an 'Alto Commissario' for Public Health has been ratified by the Italian Government and the Alto Commissario will be Prof. Sergent who has been professor of Physiology at the University of Naples, Councillor for Health in Naples Comune and High Commissioner for Food in the Bonomi Government. Much is expected to result from this appointment.

2. PUBLIC HEALTH.

(A) The anticipated return in August of some 5,000 Sick Italian prisoners of war and refugees created a hospitalisation problem of some magnitude. There is, however, at Serano in Salerno province a very large German hospital colony and it was felt that as the Germans were returned to their country, the incoming Italian sick could use the same buildings and hospital facilities, provided the rate of flow was strictly controlled. An AC/AMG administrative organisation was rapidly set up, medical supplies and hospital rations were sent to Serano, while two Italian field hospitals were despatched to take care of any emergency cases of acute. The Italian Red Cross was asked to provide the medical and nursing staff and were able to do so, though at short notice this obviously taxed the organisation to the utmost. A small holding staff was, however, immediately detached to Serano while the remainder could be built up as quickly as possible. The Swiss Red Cross, which was already operating in the area, kindly volunteered the services of 15 doctors and 40 nurses to assist until such time as the IRC staff was at its full complement.

(B) Only three cases of typhus were reported during July among repatriated refugees. One of these cases died. The Displaced Persons and Repatriation Sub-Commission was given 2830 lbs. of anti-louse powder and 50 Admiral mist guns.

(C) Smallpox figures have shown a further decrease both in Naples city and province and the loan of three motor ambulances by the Military Authorities is much appreciated. There has been a rise in Smallpox in Avellino and Salerno provinces but elsewhere in Italy the figures are negligible.

(D) Weekly searches at 198 collecting stations in the Tiber delta project indicate a very low mosquito density, the average number captured in 24 hrs being only 0.22 per station.

(E) The RF.10 proposals concerning the use of Allied drugs and the [illegible] officers is a consultant committee [illegible]

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[illegible] trained [illegible] Prof. Baccani who has been Professor of Physiology at the University of Naples, Councillor for Health in Naples Commune and High Commissioner for Food in the Regional Government. Much is expected to result from this appointment.

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(B) Only three cases of typhus were reported during July among repatriated refugees. One of these cases died. The Displaced Persons and Repatriation Sub-Commission was given 2000 lbs. of anti-louse powder and 50 Admiral dust guns.

(C) Smallpox figures have shown a further decrease both in Naples city and province and the loan of three motor ambulances by the Military Authorities is much appreciated. There has been a rise in Smallpox in Avellino and Salerno provinces but elsewhere in Italy the figures are negligible.

(D) Weekly searches at 198 collecting stations in the Tiber delta project indicate a very low mosquito density, the average number captured in mid July being only 0.22 per station.

(E) The AFHQ proposals concerning the use of Allied drugs and the cooperation of Allied medical officers in a consultant capacity in hospitals for the treatment of infected prostitutes have been passed to the Italian Government and their reply is awaited.

(F) The infant mortality rate for Rome Commune in June was 96.9 as compared with 71.8 in May.

(G) Deaths from all forms of tuberculosis in Rome in June were 233 as compared with the May figure of 250.

3. VETERINARY.

Foot and mouth disease has spread to the provinces of Rieti, Terni and Perugia, where vaccination has been made obligatory. Swine erysipelas is sporadic except in the province of Cuneo where the incidence is high. Production of vaccine against swine cholera is to be increased as the result of reports of further scattered cases. There has been a marked increase in Rabies during July. The distribution of Allied Veterinary supplies, which should have been effected by UNRRA six weeks ago has yet been undertaken.

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Arrangements are being made for the export of Italian veterinary biologicals to Austria.

4. MEDICAL SUPPLY.

Despite repeated representations to the Italian Government, ANDIMA has not made any distribution of medical supplies for the month. 2,865 GRMS is arriving by [illegible] in August in AFHQ instructions and further [illegible] for Italy are to be accepted at dock side by an agency nominated by the Italian Government. ITA (Institute for External Commerce) is the agency which has been appointed. Displaced persons and repatriation Sub-Commission will be provided with a [illegible] stock of medical requirements, after which supplies will have to be met by UNRRA and the Italian Government. Hospitals in Italy are being supplied with stocks sufficient to last until the end of November after which ERI will furnish what is required. Ten million multivitamin tablets, declared excess by the U.S. Army Quartermaster have been bought by the Italian Government for distribution to hospitals and clinics.

5. [illegible].

Sixty five thousand blankets have been distributed in Sicilia Region and any surplus from other regions will be sent there on account of its greater need. Efforts have been made to obtain the incorporation of Executive Memorandum No. 38 into the latest Italian welfare agreement.

6. PERSONNEL.

The Director of the Sub-Commission, Brigadier G.S. [illegible] and Major Mackenzie have returned to England on permanent change of station. Colonel Parr has been [illegible] on 60 days leave. Two British promotions have been announced.

[illegible]
for DIRECTOR
Public Health Sub-Commission.

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Government. IOE (Institute for External Commerce) is the agency which has been appointed. Displaced persons and Repatriation Sub-Commission will be supplies with a three months stock of medical requirements, after which supplies will have to be met by UNRRA and the Italian Government. Venezia Giulia is also being supplied with stocks sufficient to last until the end of November after which EIS will furnish what is required. Ten million multivitamin tablets, declared excess by the U.S. Army quartermaster have been bought by the Italian Government for distribution to hospitals and clinics.

5. CLOTHING.

Sixty five thousand blankets have been distributed in Emilia Region and any surplus from other regions will be sent there on account of its greater need. Efforts have been made to obtain the incorporation of Executive Memorandum No. 56 into the latest Italian welfare decree.

6. PERSONNEL.

The Director of the Sub-Commission, Brigadier G.S. Parkinson and Major Mackenzie have returned to England on permanent change of station. Colonel Parr has gone home on 60 days leave. One British promotion has been announced.

G.M. Fridgette Colonel
for DIRECTOR
Public Health Sub-Commission.

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

PH/GMT/ja
12 July 1945

JUL 17 1945

SUBJECT: - Report for the Month of June 1945, Public Health Sub-Commission.

THRU : - VP, CA Section.

TO : - Executive Commissioner, HQ AC.

1. POLITICAL:

(A) The hand-over to the Italian Government of further provinces of Toscana Region during June has released two officers for duty in the more Northern Regions. This has been most welcome as the strength of the Sub-Commission is rapidly being depleted by the departure of various officers to their country of origin. Very fortunately, conditions in the North are so favourable from a Public Health point of view that the departure of these officers - for whom no replacements are available - has not proved to be the serious matter it might have been.

(B) That the Italian Government is taking an active interest in Public Health matters is proved by the proposed appointment of an Alto Commissario for Public Health. If this step is taken, the Sanita' Publica Division of the Ministry of Interior will lose its subordinate and invidious position as a division of the Ministry and a new service will be created, the head of which will be directly responsible to the Council of Ministers. It is much too early to make any further comment on this projected innovation but it is felt that it may well be a significant event, the development of which is fraught with considerable interest and will be followed with the closest attention.

(C) As stated in the Sub-Commission's report for May, Doctors Soper and Markham of the Typhus Control Unit made an extensive tour of the North and reported upon the desirability of accepting the Swiss Government's offer for the establishment of a Cordon Sanitaire extending from Lake Garda to the Adriatic. As a result of their investigations they decided that such a step would considerably hamper the smooth onward movement of refugees and divert many persons from the main roads where check posts would be situated, thus increasing the liability of importation of disease into the country. It was decided, therefore, to decline the kind offer of the Swiss Government and this decision was communicated to AFHQ. A copy of Doctors Soper and Markham's comprehensive and interesting report on conditions regarding refugees in the North and advice on dusting procedures is to be found at Appendix "A".

(D) As stated in last month's report, Doctor Stoppani of the Swiss Red Cross made a tour of the devastated areas in order to study local conditions and report his findings to the Swiss Red Cross. Unfortunately Doctor Stoppani had to return to Switzerland immediately after his tour so no meeting could be held and it is therefore impossible to record his recommendations.

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TO : - Executive Commissioner, AMG.

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2. PUBLIC HEALTH BRANCH:

(A) Typhus:

(a) During the month a certain number of sporadic cases of Typhus have been reported from the Mainland, chiefly among refugees. These reports have comprised one case at Udine, one at Darfo near Brescia, one (unconfirmed) at Reggio Emilia, one at Bolzano in a man returned from Dachau and two at Crispino near Pisa, these latter two not being refugee cases.

(b) In Sicily, no more cases have been reported from Capizzi and nothing more has been heard of the three unconfirmed cases at Maracco, while only three cases have occurred in Palermo during the month of June.

(c) AFHQ has agreed to release DDT and spray guns in whatever quantity is required for the purpose of dusting refugees and application for powder should be made to AMG 5th Army which will obtain the quantity desired from PBS through 5th Army Quartermaster, in accordance with AFHQ instructions.

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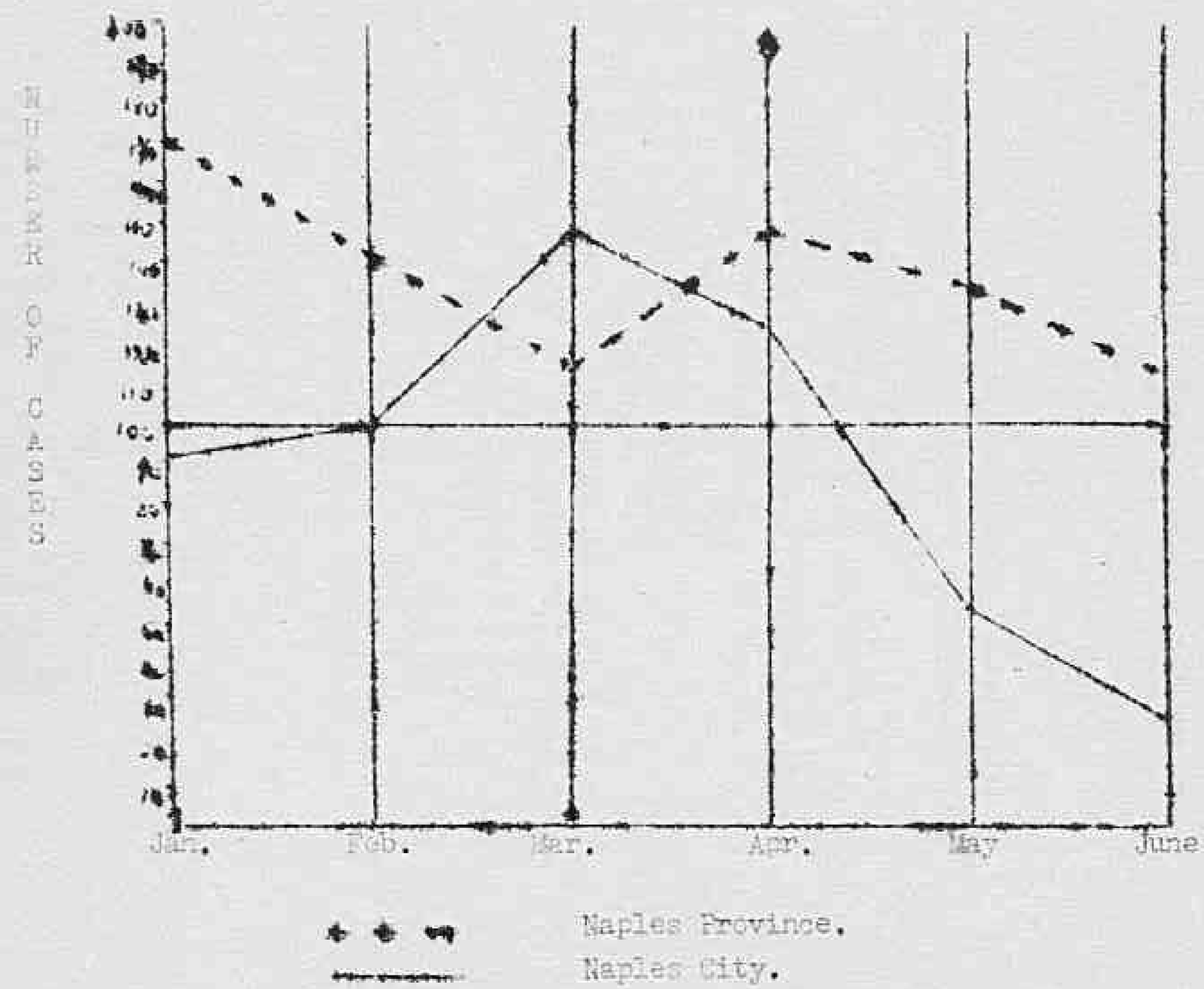
(3) Smallpox:

(a) The June figures from Naples show a further decrease as compared with those of last month, 28 cases being reported from Naples City and 117 from the Province as compared with 54 and 133 respectively in May. Avellino Province has reported 23 cases as against 28 in May; Salerno 9 as against 11 in May; Frosinone and Littoria have had 6 and 4 respectively; Benevento 2 and Cosenza, Palermo and Foggia 1 each.

(b) The following graph shows the position to date in 1945 as regards the Naples outbreak:

SMALLPOX CASES IN NAPLES CITY AND PROVINCE - 1945.



(c) At a conference held at Naples on 1st June, between representatives of 2 District, PBS, 56 Area, 8th Port, the Medico Provinciale and AMG Naples

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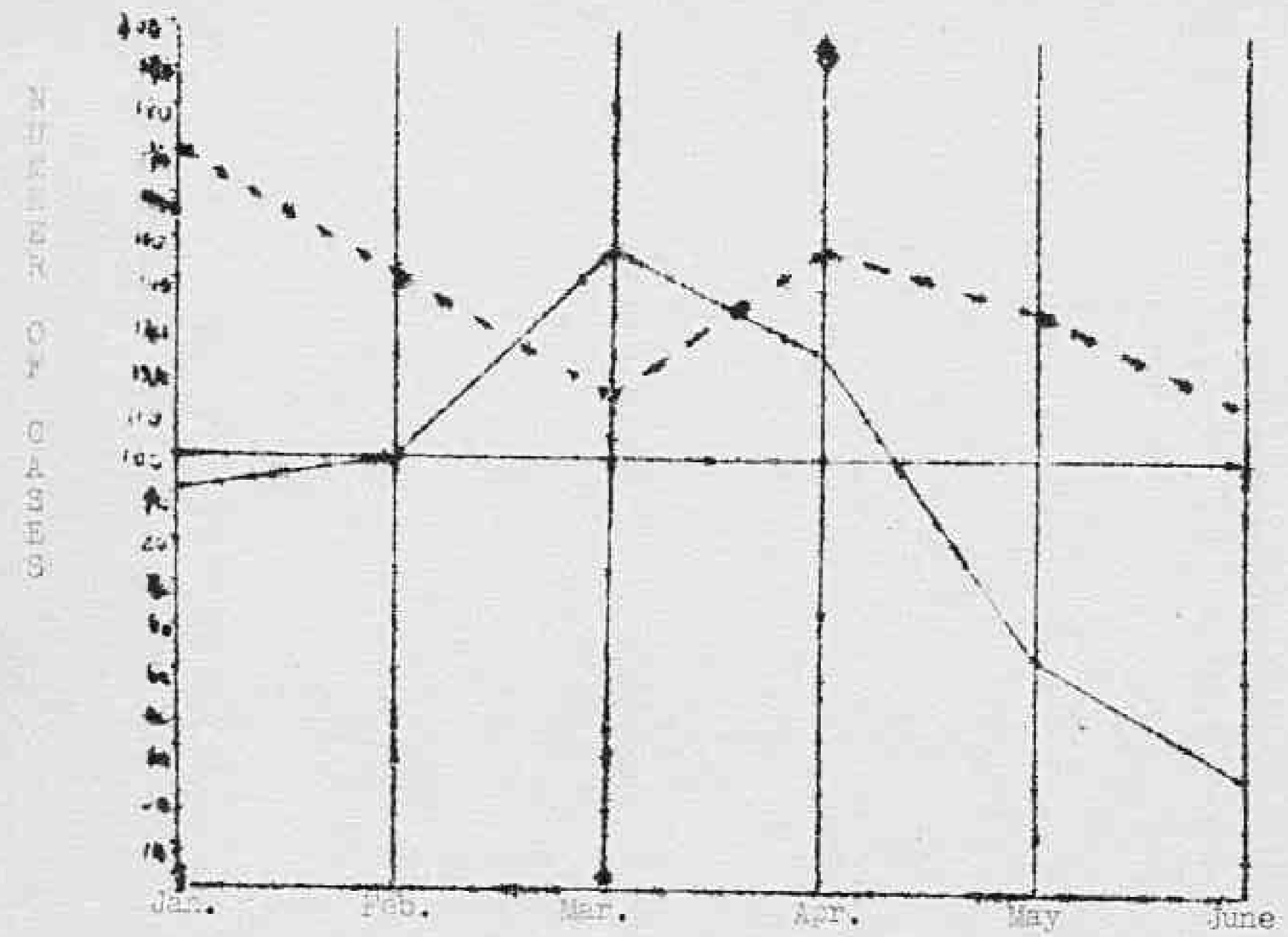

Naples Province.
Naples City.

(c) At a conference held at Naples on 1st June, between representatives of No.3 District, PBS, 56 Area, 8th Port, the Medico Provinciale and AMG Naples Commune, the slow progress in control measures outside the city was stressed and the outstanding difficulties were cited as being insufficient ambulances, lack of adequate supervision through scarcity of transport, and unreported cases. The conference recommended that AFHQ be requested to provide on loan three ambulances and five Medical Officers. This request was duly forwarded to higher authority and it is believed that favourable consideration is being given to this plea.

(d) Malaria:

(a) Spray guns and 20,000 liters of Pyrethrum Spray have been collected by Venezia Region while arrangements are being made for the delivery of a further 10,000 liters this month. When this is done, the existing stocks of Pyrethrum Spray will be exhausted.

(b) Supplies of Paris green are arriving satisfactorily. 30 tons have already been repaid to the Army and a further 10 tons are being delivered to the Italian government.

(c) Spraying in the Tiber Delta project was completed during the month of June and the adult and larval capture phase of the work was initiated. Early field reports, based on captures at a series of fixed inspection stations throughout the area, indicate that mosquito densities in the treated zone are exceedingly low. The capture program promptly revealed a few outbuildings that had either been built after the premises had been treated or missed at the time. These structures have now been sprayed. The chief trouble spot in the area was Lago Fraiano which produced large numbers of mosquitoes until the water level in the basin was raised. Collecting stations in the untreated periphery at the northern and southern extremities of the project show heavy breeding and an abundance of adults in the dwellings and animal shelters. A valuable by-product of the mosquito program in the Tiber Delta region is the corresponding marked reduction in flies in treated area. Houses, stables and pig-pens are practically free of these insects.

(D) Typhoid:

No outbreaks of any significance have been reported during June.

(E) Venereal Disease:

The incidence of Venereal Disease among the troops in Italy as well as amongst the civilian population has been viewed with concern by AFHQ. In consequence a proposal was made that a number of hospitals in Italy where prostitutes receive treatment should be supervised by Allied medical personnel and supplied with additional stocks of anti-biotic drugs. The Government is anxious to discuss the whole matter more fully and a meeting with representatives of AFHQ will be held early next month for the purpose of reviewing the whole situation.

(F) Infant Mortality:

The May figure for livebirths in Rome Commune was 2018 with 151 deaths in infants under one year of age. The resulting Infant Mortality rate is 74.5 as compared with 70.7 in April and 87.1 in March.

(G) Tuberculosis:

The number of deaths in Rome Commune in May from all forms of Tuberculosis was 250 as compared with 237 in April.

3. VETERINARY BRANCH:

(A) A survey of the Veterinary Service in Lombardia, Piemonte, Veneto and Emilia was conducted during the month. Generally, the service in those Regions is functioning well and is of a far superior quality to that in any region surveyed to date.

(B) Personnel: Due to Fascist political activities, five former provincial veterinarians of northern provinces have been removed from office and two others are deceased. All such vacancies have been filled temporarily with either the communal veterinarians of the provincial capital commune or an individual with a civil service rating comparable to that of Junior Provincial Veterinarian.

Continued on next page

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[illegible] results in the drainage and [illegible] mosquito program in the Tiber Delta region is the corresponding marked reduction in flies in treated area. Houses, stables and pig-pens are practically free of these insects.

(D) Typhoid:

No outbreaks of any significance have been reported during June.

(E) Venereal Disease:

The incidence of Venereal Disease among the troops in Italy as well as amongst the civilian population has been viewed with concern by AFHQ. In consequence a proposal was made that a number of hospitals in Italy where prostitutes receive treatment should be advised by Allied medical personnel and supplied with additional stocks of anti-biotic drugs. The Government is anxious to discuss the whole matter more fully and a meeting with representatives of AFHQ will be held early next month for the purpose of reviewing the whole situation.

(F) Infant Mortality:

The May figure for livebirths in Rome Commune was 2018 with 151 deaths in infants under one year of age. The resulting Infant Mortality rate is 74.5 as compared with 70.7 in April and 87.4 in March.

(G) Tuberculosis:

The number of deaths in Rome Commune in May from all forms of Tuberculosis was 250 as compared with 237 in April.

3. VETERINARY BRANCH:

(A) A survey of the Veterinary Service in Lombardia, Piemonte, Venezia and Emilia was conducted during the month. Generally, the service in those Regions is functioning well and is of a far superior quality to that in any region surveyed to date.

(B) Personnel: Due to Fascist political activities, five former provincial veterinarians of northern provinces have been removed from office and two others are deceased. All seven vacancies have been filled temporarily with either the communal veterinarians of the provincial capital commune or an individual with a civil service rating comparable to that of Junior Provincial Veterinarian.

Communal veterinarians are in some areas less in number than was the case prior to the war but the present number is most adequate.

Directors of the Stazioni Zooprofilattiche are serving as advisers to RPHOs in the various Regions as they are best informed on Regional veterinary problems.

(C) Biological Production: Two of the five veterinary laboratories in the North were damaged severely. Steps have been taken in an attempt to make funds available for the repair of these two institutions which are situated in Torino and Milano. The directors of the damaged laboratories have concentrated equipment so as to continue production on a limited scale. The three undamaged laboratories were found to be functioning very well and they have sizeable stocks of all essential products. The only Swine Cholera antiserum producing plant, located in Brescia, is producing on a small scale at present but stocks are sufficient for the whole of the Mainland, Sicily and Sardegna for a year. A circular letter to all RPHOs and Agriculture Officers stating the location of all available vaccines, antiserums and diagnostic agents is now in print. This was done to aid provincial veterinarians in locating necessary supplies.

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The laboratory in Torino has developed a satisfactory concentrated vaccine for Foot-and-Mouth disease which is believed to be of world-wide interest.

O.Waldmann did, in 1943, perfect a compliment-fixation test for differentiating three strains of Foot-and-Mouth Disease virus which has not been widely published due to the war. Information is being gathered so as to present this information for publication.

Rondo vaccine for Swine Erysipelas has been used most successfully in Piemonte Region during the past year.

100,000 doses of vaccine for Foot-and-Mouth Disease have been produced at the Rome Veterinary Laboratory since April 1, 1945.

At the present time local production of all necessary biologicals is most adequate thereby eliminating the necessity of requisitioning Allied supplies.

(D) Veterinary Schools: The school in Bologna was found to be in fine condition and without doubt a very good school. In Milano and Torino the schools have been damaged considerably. Repairs will be made in the near future. At present the undamaged portions are being utilized to best advantage.

Request has been made for derequisition of a part of the Perugia School and Veterinary Laboratory. AFHQ has ruled that 8 additional rooms be made available to the School and Laboratory. This was accomplished through the fine co-operation and able assistance of the Education Sub-Commission.

Short courses of instruction on bovine sterility and artificial insemination for veterinarians have been conducted in Teramo, Pescara, Naples and Salerno provinces during the month. These courses continue to attract much interest and are considered to be most valuable. Bovine, equine and swine sterility and artificial insemination centers in all Northern Regions are excellent.

(E) Meat Inspection: Some slaughtering is permitted in Lombardia Region and command veterinarians are making ante-mortem and post-mortem inspection at all abbatoirs. In other Northern Regions inspection is limited to disabled animals and no other legal slaughtering is authorized. Considerable slaughtering of livestock from Sardegna has been done at the Rome abbatoir during the month.

(F) Communicable Diseases: Though no detailed information regarding the incidence in AMG Territory is available, generally the incidence is as follows:

(a) Equine Infectious anemia is quite prevalent in Lombardia Region.
(b) Swine Cholera is sporadic in all Regions.
(c) Swine Erysipelas is sporadic in all Regions with a fairly high incidence in Piemonte.
(d) Laryngo-tracheitis is epizootic in all four Northern Regions.

Control measures are being employed efficiently in all Regions. At least 3 million birds have been vaccinated for Laryngo-Tracheitis and vaccinations continue.

(G) Photographs of some Veterinary Branch activities were taken for use by the MTOUSA Veterinarian in compiling a history of the American Veterinary Service in this theater.

4. MEDICAL SUPPLY BRANCH:

(A) A 14 day trip in connection with the distribution of Allied medical supplies was made by the Medical Supply Officer to all the Regions in AMG Territory of the North of Italy. This survey also included the possibilities of Italian manufactured drugs that are similar to GAP items which could be replaced to cut down the requirements of Allied supplies.

Regions of Emilia, Veneziа, Lombardia, Piemonte and Liguria Regions were contacted. All Health Officers requested that supplies received from requisitions filled and forwarded by GAP, distribute to the various Regions plus those drugs manufactured from Italian

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RPHOs of Emilia, Veneto, Lombardia, Piemonte and Liguria Regions were contacted. All Health Officers reported that supplies received from requisitions filled and forwarded by GAD, also those to the various Regions plus those drugs manufactured from Italian origin were sufficient to meet all civilian requirements to take care of disease and unrest.

There is a large number of pharmaceutical and biological firms in the North that are in production to take care of most of the civilian requirements. These supplies are being released for sale through normal Italian channels to all the Regions as well as to all parts of Liberated Italy.

These items include all biologicals, Italian specialities, drugs and also 20,000 dozens of X-Ray films manufactured in Genoa as well as a great many U.S.P. and N.F. items.

Insulin is the only outstanding item that has been critically short in the North. Supplies of this item are being taken care of by the 2665th COMD, Florence warehouse upon the request of the RPHOs.

The length of time and the amount of production of Italian drugs manufactured varies a great deal ranging from 3 to 6 months depending on raw materials. There are sufficient finished stocks in manufacturers' warehouses to last at least for 3 to 4 months.

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(B) Additional 20 tons of DDT have been released by Army to AMG Northern Regions to dust all refugees before boarding ship or being transferred to Liberated Italy. This is a routine measure to protect against the outbreak of Typhus.

(C) 56,000 confinement beds have been turned over to the Ministry of Interior of the Italian Government for distribution by the Opera Nazionale Maternita' ed Infanzia which is a state institution and is distributing this item at cost.

(D) Requisitions have been received by this office from the Ministry of Interior for medical supplies for all of Liberated Italy for the period June-July. These requisitions have been screened on a population basis and forwarded to the 2665th CCMD to be FILLED.

(E) ENDIMA still continues to operate very slowly in the distribution of medical supplies. They have shipped supplies to their various warehouses from their main depot in Naples but they still have not made any distribution to the wholesalers of the various provinces in the past month. This office has notified the Ministry of Interior on the slowness of ENDIMA in their distribution, no improvement has been notified yet.

(F) 2665th CCMD has received during the month of June, 2309 tons of GAD medical items shipped from the U.S.A.

5. WELFARE BRANCH:

(A) Personnel: - No changes.

(B) Food and Clothing:

(a) The Ente Nazionale Distribuzione Soccorsi per l'Italia continues its supplemental feeding program with milk and vitamins. UNRRA is preparing to take over and have part of this supplemental feeding program in hospitals. The Regional Welfare Officers' reports from the North disclose no serious feeding problems.

(b) One of our chief difficulties has been the supplying of clothing to the isolated individual. The ECAs in various communes had taken care of such distribution. In Rome there was no such outlet had been established. Now Monsignor Carroll-Abbing, cooperating with ENDSI, is making available to individuals clothing and other necessities at his residence in Campo Prato 45, Rome.

(c) Blankets. The 50,000 blankets assigned to the Chief, Welfare Branch for distribution above the Rome line are being efficiently handled by the Regional Welfare Officers. We realize that this imposes a great burden on the Welfare Officers because of their limited transportation. Among what was supposed to be civilian grey blankets were some Army OD blankets and sleeping bags. The distribution of the latter was confined to hospitals and other eleemosynary institutions. The Director, Commerce Sub-Commission sent us a letter assuming us the right to distribute these government items and the sleeping bags as part of our aid program to prevent disease and relief needed. Copies of this Commerce Sub-Commission letter were sent to the Regional Welfare Officers.

(C) Meetings:

(a) Doctor Galenti of the Welfare Division of the Italian Ministry of Interior was faithful in his attendance of our regular Friday meetings. He has been very cooperative in carrying to the Ministers any information that reaches this office and in cooperation in making all phases of our welfare program in the Non-Occupied Territory more and more an Italian Government problem. We feel that the Doctor

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sellers of the various provinces in the past month. [illegible] Ministry of Interior on the slowness of UNRRA in their distribution, no improvement has been notified yet.

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(c) Blankets. The 3,000 blankets assigned to the Chief, Welfare Branch for distribution above the Gothic Line are being efficiently handled by the Regional Welfare Officers. We realize that this imposes a great burden on the Welfare Officers because of their limited transportation. Among what was supposed to be civilian grey blankets were many of dark grey and sleeping bags. The distribution of the latter was confined to hospitals and other eleemosynary institutions. The Director, Commerce Sub-Commission sent us a letter assuring us the right to distribute these government issue comforters and sleeping bags as part of our aid program to prevent disease and relief unrest. Copies of this Commerce Sub-Commission letter were sent to the Regional Welfare Officers.

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(a) Doctor Valenti of the Welfare Division of the Italian Ministry of Interior was faithful in his attendance of our regular Friday meetings. He has been very cooperative in carrying to the Ministers any information that reaches this office and in cooperation in making all phases of our welfare program in the Non-A.G. Territory more and more an Italian Government problem. We feel that the Doctor will continue to help in the manufacture of equipment for crippled children and in our use of salvage program as well as in the other minor activities inaugurated in this Branch. We hope to have the probation and parole system which was set up in Naples carried more effectively into other provinces.

(b) Meeting with Baroness de Blaye, the assistant Director of the Soldiers and Sailors and Airmens Family Association, to discuss the distribution of American Red Cross layettes to Italian mothers who are wives of British subjects. Additional layettes are being shipped and Miss Dupee of the ARC is cooperating so that all Allied Soldiers' wives will have early consideration.

(c) Meeting with Dr. Forti and other officials of ONMI (Opera Nazionale Maternita' ed Infanzia) in which they reported on their trip to the North. An unfortunate condition exists in Milan where a separate group of officers, calling themselves national in scope, has been set up to administer the ONMI. It is hoped that after the new Cabinet is in operation that unity in the working of all nationally administered welfare organizations will be assured.

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6. PERSONNEL:

(A) Officers of this Sub-Commission are now being withdrawn at such frequent intervals that it becomes impossible to cite the excellent work which has been done by individuals. One can only say that any success achieved by this Sub-Commission has largely resulted from the untiring work of its representatives in the field, and their efforts are most sincerely appreciated.

(B) Those officers who have now left the Sub-Commission for good are Lt:-Col R.G. Macdonald (B), Lt:-Col G.A. Marshall (B), Lt:-Col Robert L. Cherry (A), Major John A. Davis (A) and Major S.W.H. Stewart (B).

SUMMARY.

1. POLITICAL:

(A) The Italian Government is proposing to appoint an Alto Commissario for Public Health, thus freeing the Health Service from its present subordinate position in the Ministry of Interior. The Alto Commissario will be directly responsible to the Council of Ministers.

(B) Doctors Soper and Markham, of the Rockefeller Foundation, have advised against the formation of a cordon Sanitaire in the North and AFHQ has been requested to decline the kind offer made by the Swiss Government of medical aid in the North.

2. PUBLIC HEALTH:

(A) Three cases of typhus have been reported from Palermo during the month. No further cases have occurred at Capizzi. Sporadic cases have been reported from the Mainland.

(B) A marked decrease has occurred in the incidence of Smallpox in Naples City but there is little diminution in the number of reports from Naples Province. AFHQ has been asked to provide assistance in ambulances and medical officers.

(C) Spray guns and 20,000 liters of Pyrethrum Spray have been delivered to Venezia Region and further shipments are being arranged. 30 tons of Paris Green have been repaid to the Army. Spraying in the Tiber Delta project has been completed and field reports indicate that mosquito densities in the treated areas are exceedingly low. In addition, a marked reduction in flies is noticeable.

(D) Proposals made by AFHQ concerning the supervision of VD hospitals by Allied medical personnel have been received by the Italian Government and a joint meeting is scheduled to take place early in July.

(E) The Infant mortality rate in Rome Commune in May was 74.0 as compared with 70.7 in April.

(F) Deaths from all forms of Tuberculosis in Rome were 250 in May as compared with the April figure of 237.

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(D) Proposals made by AFHQ concerning the supervision of VD hospitals by Allied medical personnel have been received by the Italian Government and a joint meeting is scheduled to take place early in July.

(E) The Infant Mortality rate in Rome Commune in May was 74.8 as compared with 70.7 in April.

(F) Deaths from all forms of Tuberculosis in Rome were 250 in May as compared with the April figure of 237.

3. VETERINARY:

A survey of veterinary activities in the Northern Regions indicates that these are being operated much more efficiently than those in any other area. Three veterinary laboratories were found to be undamaged and functioning satisfactorily, as well as having ample stocks on hand. The Turin laboratory has produced a satisfactory vaccine against Foot and Mouth disease. Courses of instruction in bovine sterility and artificial insemination have continued in the South. Swine Cholera and Swine Erysipelas are sporadic in all Northern Regions.

4. MEDICAL SUPPLY:

A tour of the Northern Regions revealed a satisfactory position as regards medical supplies, except for the scarcity of insulin, which is being delivered to the North by the Florence BCMD. 56,000 confinement bags have been handed over to the Italian Government for distribution by ONMI. ENDIMEA is still extremely slow in its delivery of medical supplies and the Ministry of Interior has been informed of this fact.

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5. WELFARE:

ANDSI is continuing its distribution of milk and vitamins. Machinery is now set up in Rome for the supply of clothing to isolated individuals. This is done in the communes by ECA.

6. PERSONNEL:

Two American and three British officers left the Sub-Commission for good during June.

G. S. Parkinson

G. S. PARKINSON, Brigadier,
Director,
Public Health Sub-Commission.

APPENDIX "A" - "Suggestions Regarding Disinfestation in the Refugee Camps of Northern Italy", Doctors Soper and Merkham.

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Public Health Sub-Committee.

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2.4.

APPENDIX "A"

HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission
Malaria Demonstration Unit

SUGGESTIONS [illegible] DISINFESTATION
IN THE [illegible] AND N. NORTHERN ITALY

At the request of the Allied Commission and the Surgeon's office MTOUSA the writers made a tour of the refugee camps in recently liberated Northern Italy. The purpose of the tour was twofold: to examine the need and practicability of establishing a cordon sanitaire from Lake Garda to the Adriatic and to inspect the facilities, supplies and practices employed in the disinfestation of refugees Italians and Allied nationals coming out of Central Europe. Between May 31st and June 12th observations were made at the camps in 15 different localities between Lake Garda and Udine.

In general it may be said that the nutritional and physical state of the great bulk of refugees seen was far better than anticipated. Many, though by no means all of the transients, were travel-stained, weary and fretful of bolgan and missing comforts, but the ragged starved and disease ridden labor slaves of the recent press were conspicuously absent. Possibly there are many such unfortunates in Central Europe awaiting the opportunity to return to their homes, but the present problems appear to be created largely by the mass movement of unemployed farm and factory workers who are anxious to return to their normal places of residence and occupation.

From the view point of public health these people present few medical problems aside from the possible introduction of typhus fever by having come into contact with prisoners who were recently released from concentration camps where typhus has been prevalent. At Orzinuovi, north-west of Brescia, we saw a typhus patient who became ill two or three days after arriving home from a Prison Camp at Munich. He claimed to have skipped past the frontier barrier and walked all the way, except for the last 40 kms., when he got a ride in a truck. It is contact with such casual cases as this patient that gives rise to the concern over the liklihood of returning refugees spreading typhus throughout Italy - where crowded [illegible] the disease has not been present for many many years. On the other hand, tuberculosis, small-pox, syphilis, diphtheria and comparable infectious diseases are not new to Italy and there is no suggestive evidence that the refugees now coming into the country have been more exposed to these diseases than those who stayed at home.

In the light of these considerations it is felt that no essential good is to be accomplished by establishing a sanitary barrier which would involve time consuming inspection and examination. The quarantine system is definitely contra-indicated because the necessary accommodations are not available at points where control posts would be most effective and because it would inevitably slow up movement and drive large numbers off of the main channels of traffic thus preventing the discovery of the obviously ill. Concurrence in this opinion was expressed by practically every administrative officer

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The thorough systematic dusting of incoming refugees is a practical procedure which requires only proper organization and supervision and adequate supplies and equipment. In most of the camps visited satisfactory plant facilities for dusting were present or under consideration. Practices in these camps however, varied widely from dusting everyone once or twice to no treatment at all. In order to unify and improve the procedures the following recommendations are made:

1. All persons arriving at frontier camps such as Udine, Bolzano and Como (and at San Candido, Malles or others when they commence operations) should be powdered immediately upon arrival and before entering the general camp compound or receiving rations.

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2. All persons who [illegible] camps or who are listed and certified as having been [illegible] may be admitted to frontier and other camps without dusting.

3. All persons, whether or not previously treated and certified, are to be [illegible] before embarking or entraining at rail and water-head camps such as Beaverlodge, Norman, Fenton and Dease.

4. Camps at intermediate, collecting or distributing points may dispense with routine dusting but should maintain on hand a limited supply (not to exceed 20 pounds) of powder to treat lousy persons discovered in these camps.

SUPERVISION AND PERSONNEL:

Two of the prime essentials of good dusting are adequate supervision and personnel. The technique does not require skilled labor, therefore, one can use group or volunteer workers for the actual dusting. But, such workers, up to 12 or 13 per supervisor, must be under the close native supervision of a competent and conscientious person. In a number of the camps Indian and Green nurses are being used to do the dusting. It is suggested that these nurses, who for the most part have given very excellent service, be utilized as supervisors and that they be given the necessary number of assistants to do the actual dusting. It is unnecessary to remove any of the clothing or fur but to drop their trousers in order that a satisfactory job of dusting may be done. Loosening the belt and pulling out the shirt so that the nozzle of the pump can be passed into the front and rear of the trousers is sufficient. In this way the dusting can be speeded up without sacrificing efficiency. For periods of 3 to 4 hours, the average worker can do an acceptable job of dusting at the rate of [illegible] per hour. The number of dusters required for any given camp would be governed by its normal rate of processing. If a camp is expected to register 40 persons per hour it should be staffed to dust at the same rate. Dusters should not be expected to maintain a rate of 40 to 50 persons per hour for more than 3 or 4 hours, because the quality of work falls rapidly at this speed. Dusting is brisk, hard work and staff calculation should be made accordingly.

SUPPLIES AND EQUIPMENT:

Exclusive of bedding and spare clothing, one pound of powder is sufficient to powder 15 adults. Camps should therefore be supplied with powder on the basis of the expected maximum per day and the rate at which stores of powder can be delivered at the points where it is to be used. Ample allowance must be made for the difficulties and uncertainties of transport and communications under existing conditions in the North. The entire stock of 10% DDT powder in the 14 camps visited (excluding Bologna which had just drawn about 1500 pounds from R.M. at Kodiak) was less than enough for one week's work. Ukiuc, one of the key frontiers points, had only 15 pounds of Al-60 and no DDT; the important rail-head camp at Norman has 40 pounds of DDT and one "Cadet" pump with which to dust the 5 or 6,000 refugees in the two crowded camps.

To be effective the DDT powder must be brought into contact with lice - which requires that it be well distributed in the clothing next to the skin where lice are obliged to [illegible]

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SUPPLIES AND EQUIPMENT:

Exclusive of bedding and extra clothing, one pound of powder is sufficient to powder 15 adults. Camps should therefore be supplied with powder on the basis of the expected maximum per day and the rate at which stores of powder can be delivered at the points where it is to be used. Ample allowance must be made for the difficulties and uncertainties of transport and communications under existing conditions in the North. The entire stock of 10% DDT powder in the 14 camps visited (excluding Bologna which had just drawn about 1500 pounds from A.M.G. at Modena) was less than enough for one week's work. Udine, one of the key frontiers points, had only 15 pounds of Ab-65 and no DDT; the important rail-head camps at Forli had 40 pounds of DDT and one "Cadet" pump with which to dust the 6 or 8,000 refugees in the two crowded camps.

To be effective the DDT powder must be brought into contact with lice - which requires that it be well distributed in the clothing next to the skin where lice are obliged to feed. Proper pumps are essential to good distribution of powder. The small "Hudson Cadet" duster is unsatisfactory for this work because it is wasteful of material and time and because it is incapable of developing sufficient pressure to carry the powder far enough from the points where the gun is inserted under the clothing. The Hudson "Admiral" and Bebbins "Superbuilt" hand pumps are most suitable for this work. These guns should be used with an extension (readily made by cutting off the long delivery tube with which they are equipped and packed) so that the powder is expelled beyond the constrictions for the clothing about the ankles, collar and waist. Adequate supplies of these pumps are present in the theatre and a determined effort should be made to secure and deliver them at the points where they are to be used. Only 13 of this type of pump were found in the 15 camps and 7 of these were in one camp where no dusting was being attempted.

In conclusion it may be noted that the effective handling of the delousing of refugees is dependent upon further co-ordination of transport and supply agencies. At present, numerous civilian organizations providing transport for incoming refugees appear to be without any over-all supervision and are at liberty to pick up and deal refugees according to their choice. This makes it impossible for refugees to arrive at the delousing without coming into any of the cross-currents resulting therefrom being done. At Brescia, for example, it was mentioned by a local worker that little more than 10% of the refugees passing through each day made contact with the camps operated by Official Allied agencies. At Bolzano, refugees simply disappeared by taking any available transport for whatever points they chose since there was no official route or means of transport laid out for them.

Regarding the supply of powder and soaps, AFHQ has authorized refugee officers to call on the 5th and 8th Armies for these materials, but it should be remembered that the medical supply officers of the Combat Forces have not laid in stores for civilian needs as that that is available in their depots is just sufficient over and above the normal needs for their own personnel and prisoners of war. In view of these circumstances, it is suggested that the U.N.R.R.A. supply officer through the regional PCR and the Army representatives take immediate steps to determine the amount of powder and the number of the proper type of soaps which the 5th and 8th Armies are prepared to release to the U.N.R.R.A. and to arrange for the available supplies by obtaining release for the additional requirements necessary from AFHQ through A.M.G.O. Definite distributions should be made to the refugees of Bari in the 5th and 8th Armies zones and arrangements for supply exchanges can be effected to the benefit of their rental and medical requirements.

: L. SOPER
: A. MARTIN

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ANNEX "A" (Sheet four)

SUMMARY OF INSPECTIONS OF DEPOTS

5th A/GH	Pounds Powder	No of Pumps	Plant Facilities	Organization and Supervision	Date of Visit
Verona	30	2 Cadet	Fair	Good	June 2
S. Candido	120	1 Admiral 1 Cadet	Fair	Not Operating	June 5
Bolzano	120	1 Admiral 1 Cadet	Good	?	June 5
Bressain	42	3 Cadet	Good	Good	June 7
Como	200	2 Mil	Good	Not Operating	June 8
Cremona	130	1 [illegible]	Good	Good	June 9
Mezzolo	120	1 Mil 2 Cadet	Good	Good	June 9
Modena	200	1 Cadet	Good	Fair	June 9
Bologna	2500	40 Cadet	Good	Good	June 10
8th A/GH Padua	0	0	Good	None	June 3
Treviso	520	10 Cadet	Good	Good	June 3
Belluno	200	7 Admiral 2 Cadet	Poor	None	June 3
Udine	15	4 Admiral	Good	?	June 4

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		1 Cadet		Operating	[illegible]
Bolzano	120	1 Admiral 1 Cadet	Good	?	June 5
Brescia	42	3 Cadet	Good	Good	June 7
Como	200	2 [illegible]	Good	Not Operating	June 8
Cremona	130	3 [illegible]	Good	Good	June 9
Meggio	120	3 [illegible]	Good	Good	June 9
Modena	200	4 Cadet	Good	Fair	June 9
Bologna	2700	40 Cadet	Good	Good	June 10
8th ARMY Padua	0	0	Good	None	June 3
Treviso	520	10 Cadet	Good	Good	June 3
Mestre	200	7 Admiral 2 Cadet	Poor	None	June 3
Udine	15	4 Admiral	Good	?	June 4
Forli	60	1 Cadet	Good	None	June 10
Riccione	40	2 Cadet	Good	Good	June 10

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

PH/GMF/ja
11 June 1945

SUBJECT: - Report for the Month of May 1945, Public Health Sub-Commission.

THRU : - VP, CA Section.

JUN 18 1945

TO : - Executive Commissioner, HQ AC.

1. POLITICAL:

(A) With the cessation of hostilities, the teams for the Northern areas have all moved simultaneously into their respective territories and although direct Regional control has not yet been instituted, the normal operative procedures are already in being and highly satisfactory reports are being received at this HQ. In no Region is there any undue incidence of infectious disease and a most gratifying feature is that water supplies have not been interfered with. The menace of water-borne infection is therefore obviated and an adequacy of water for personal hygiene is assured. Although in some areas there has been destruction of hospital accommodation, this not a general feature and even where damage has occurred no undue strain has been placed upon the remaining hospital facilities. An adequacy of medical supplies has been discovered and it is felt by the RPHO of Lombardia Region that Milan may soon be able to produce sufficient medicines to supply the whole of Italy. In fact, the Public Health picture in the North is, to date, the most satisfying one to be seen since the original Sicily landings.

(B) The refugee problem is one which is causing most anxiety from a Public Health point of view. The return to Italy of hundreds of thousands of refugees and displaced persons, many of them louse infested and coming from Typhus stricken areas, many suffering from Tuberculosis and malnutrition is a matter for concern, and all interested agencies are fully alive to the potential danger of this mass movement. The Swiss Government through the International Red Cross has offered the assistance of 80 doctors and 150 soldiers from Swiss Army medical units for the purpose of establishing a sanitary cordon between Lake Garda and the Adriatic to prevent the spread of illness. The acceptance of this very generous offer has been agreed to in principal by AFHQ and Doctors Soper and Gardner of the Typhus Control Unit have conferred with the Swiss representative in Rome concerning the offer. After the conference, Doctors Soper and Gardner of the Typhus Control Unit left to make a tour of the Northern Regions where they will effect liaison with all the agencies interested in dealing with refugees, placing special emphasis upon the importance of efficient disinfestation as near the points of entry into Italy as possible. It is thus hoped that a fully integrated policy for dealing with refugees from a medical standpoint will soon be achieved.

(C) A representative of the Swiss Red Cross has recently arrived in Italy with an offer of assistance in the form of mobile hospitals and laboratories. At a meeting held with representatives of the Italian Government and Italian Red Cross it was agreed that sufficient supplies were at present available in the North to meet the

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(C) A representative of the Swiss Red Cross has recently arrived in Italy with an offer of assistance in the form of mobile hospitals and laboratories. At a meeting held with representatives of the Italian Government and Italian Red Cross it was decided that sufficient agencies were at present operating in the North on the refugee problem and that this welcome and generous offer should be accepted and utilized for devastated areas in Central and Southern Italy. Dr. Stoppani, the Swiss representative, agreed to make a tour of these areas, at the conclusion of which he would be in a better position to suggest the most effective means of implementing the Swiss offer.

2. PUBLIC HEALTH BRANCH:

(A) Typhus:

(a) During May an outbreak of Typhus was reported from the small town of Caulonia in the Province of Messina, Sicily. Captain Battaglia was sent to Sicily with 12 spray guns and 120 pounds of DDT to investigate the outbreak and supervise dusting procedures. In addition, UNRRA sent a team of workers with 1000 pounds of DDT to participate in disinfestation measures.

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The outbreak first began in March, but the early isolated cases were not recognized as Typhus, the disease not being diagnosed as such until May. There have been 37 cases which have occurred from March until May with 9 deaths. The last reported case occurred on 11th May. Captain Battaglia found on arrival that the Medico Provinciale had taken effective action, having set up a temporary hospital and started disinfestation. The UNRRA team continued the work of disinfestation and is still engaged on similar measures in the surrounding villages.

(b) Captain Battaglia also investigated a reported outbreak of Typhus in Palermo. He was of the opinion that these cases were really Typhus though they could have been mistaken for Typhoid in the early stages. The entire area where the cases occurred has been deloused and no fresh case has been reported since 12th May. The total number of cases affected was 13, two of which died. There is now at Palermo a stock of 500 pounds of DDT sent over by UNRRA.

(c) Captain Battaglia's report on the Cardizzi and Palermo outbreaks is to be found at Appendix "A".

(d) One case of confirmed typhus has been reported from Aosta in Piemonte Region.

(e) A febrile illness of unknown aetiology has been reported from the town of Naraoco in the Province of Catania, Sicily. Ten cases have occurred and though they were at first thought to be Typhus, no confirmation of this diagnosis has been received. No further cases have been reported since the middle of the month.

(f) The mass disinfestation of returning refugees necessitates the use of large quantities of DDT in excess of stocks held by AC. ~~AMGG with ready appreciation of the situation~~, has agreed to make Army stocks available and has also indicated that the military will if asked, render every possible assistance in solving public health problems.

(3) Smallpox:

The Naples epidemic is at last showing signs of abating, either due to the mass vaccination campaign or to an acquired immunity. The figures for May are: Naples City, 54; Naples Province, 139, as compared with Naples City, 126 and Naples Province, 140 in April. Twenty-eight cases were reported from Avellino Province, 11 from Salerno, 2 from Littoria and 1 each from Palermo, Catanzaro, Cosenza and Siracusa.

(4) Malaria:

(a) Deliveries of pyrethrum spray and spray guns have been made to Emilia Region while the Italian Government is arranging for similar distribution in its own territory.

(b) 3,000 spray guns are ready for delivery to Venezia Region but have not yet been shipped owing to transport difficulties. The same transport problem applies to Pyrethrum Spray, 30,000 liters of which are being prepared at CIF Refinery, Bari for Venezia Region.

(c) Supplies of Paris green are still arriving slowly and it is not yet possible to repay the Army the 50 tons which they forwarded last month.

(5) Cholera (Bari [illegible]

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(c) Captain Bacchiarello's report on the Capraia and Palermo outbreaks is to be found at Appendix "A".

(d) One case of confirmed typhus has been reported from Aosta in Piemonte Region.

(e) A febrile illness of undetermined origin has been reported from the town of Waracco in the Province of Catania, Sicily. Ten cases have occurred and though they were at first thought to be typhus, no confirmation of this diagnosis has been received. No further cases have been reported since the middle of the month.

(f) The mass disinfestation of returning refugees necessitates the use of large quantities of DDT in excess of stocks held by AC. ~~AFHQ with ready appreciation of the situation~~, has agreed to make Army stocks available and has also indicated that the military will if asked, render every possible assistance in solving public health problems.

(B) Smallpox:

The Naples epidemic is at last showing signs of abating, either due to the mass vaccination campaign or to an acquired immunity. The figures for May are: Naples City, 54; Naples Province, 133, as compared with Naples City, 126 and Naples Province, 148 in April. Twenty-eight cases were reported from Avellino Province, 11 from Salerno, 2 from Littoria and 1 each from Palermo, Catanzaro, Cosenza and Foggia.

(C) Malaria:

(a) Deliveries of Pyrethrum spray and spray guns have been made to Emilia Region while the Italian Government is arranging for similar distribution in its own territory.

(b) 3,000 spray guns are ready for delivery to Venezia Region but have not yet been shipped owing to transport difficulties. The same transport problem applies to Pyrethrum spray, 30,000 liters of which are being prepared at GIP Refinery, Bari for Venezia Region.

(c) Supplies of Paris green are still arriving slowly and it is not yet possible to repay the Army the 50 tons which were borrowed last month.

(d) Doctor Riehl of the Malaria Control Demonstration Unit reports that the residual spray work in the Tiber Delta project during the month of May was confined to that part of the area north of the Tiber River and known as Maccarese Section. During the month 863 buildings including 4003 rooms were treated requiring 2031.26 gallons of kerosene and 1101.84 pounds of DDT concentrate. At the end of the month all of the experimental area had been treated with the exception of the northern tip in the region of Palidoro. Work is progressing rapidly, and it is expected that spraying will be completed within a few days.

Survey work for adult and larval mosquitoes has been in progress in the sections Acilia and Ostia since the 14th May and squads for this work were being organized in the sections Fiumicino and Maccarese at the end of the month. Reports have shown the capture of a very limited number of adults and the presence of larvae of both Anopheles and Culex mosquitoes.

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Field work of surveys to determine the incidence of malaria were completed for the Tiber Delta and the Castelvolturno projects. Palpation of spleens and collection of blood smears were used as a basis for the indices; determination of results is in progress.

Householders and inspectors have repeatedly mentioned the scarcity of flies in the Tiber Delta Region since treatment of the buildings with DDT.

(D) Typhoid:

No outbreaks of Typhoid of any significance have been reported during May.

(E) Venereal Disease:

The Ministry of Interior has reported that increasingly active measures have been instituted to control clandestine prostitution in Rome. Houses of clandestine prostitution have been visited and 257 persons have been put in jail. There has been increasing police vigilance and it is stated that an effective campaign is in progress. In addition, provision is made for the publication of articles on Venereal Disease and delinquency in the daily press.

(F) Infant Mortality:

During April there were 1865 live-births in Rome and 132 deaths in infants under one year of age. This gives an infant mortality rate of 70.7 as compared with 87.4 in March and 111.5 in February.

(G) Tuberculosis:

The number of deaths in Rome Comune from all forms of Tuberculosis - both pulmonary and non-pulmonary - was 237 in April as compared with 256 in March and 290 in February.

3. VETERINARY BRANCH:

(a) Courses of instruction on bovine sterility and bovine artificial insemination have been conducted for the benefit of all interested veterinarians in the provinces of Rieti, Aquila and Teramo during the month. A high incidence of Trichomoniasis was found in the cattle of Rieti Province at the time the course was conducted there. Efficient control measures including the immediate installation of these bovine artificial insemination centres are in effect now. As artificial insemination is one of the most essential measures to accomplish control of this protozoan infectious disease the course of instruction in Rieti proved very timely. Veterinarians, farmers and Prefetti are showing great interest and enthusiasm for artificial insemination. Several Prefetti have already allocated funds for the installation of insemination centers or clinics.

(b) Allocations of funds by the Ministry for the control of communicable animal diseases are now being made to provinces on the pre-war basis. This service aids materially in the successful control of such diseases.

(c) A survey of the work of the Veterinary Service during the past year is now in progress. The results of this survey will be available within about one month.

(d) The communicable diseases of note in Italy during the past month are reported.

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has been increasing police vigilance and it is intended that an effective campaign is in progress. In addition, provision is being made for the publication of articles on Venereal Disease and delinquency in the daily press.

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The number of deaths in Rome Commune from all forms of Tuberculosis - both pulmonary and non-pulmonary - was 237 in April as compared with 256 in March and 190 in February.

3. VETERINARY BRANCH:

(A) Courses of instruction on bovine sterility and bovine artificial insemination have been conducted for the benefit of all interested veterinarians in the provinces of Rieti, Aquila and Teramo during the month. A high incidence of Trichomoniasis was found in the cattle of Rieti province at the time the course was conducted there. Efficient control measures including the immediate installation of three bovine artificial insemination centres are in effect now. As artificial insemination is one of the most essential measures to accomplish control of this protozoan infectious disease the course of instruction in Rieti proved very timely. Veterinarians, farmers and prefetti are showing great interest and enthusiasm for artificial insemination. Several Prefetti have already allocated funds for the installation of insemination centers or clinics.

(B) Allocations of funds by the Ministry for the control of communicable animal diseases are now being made to provinces on the pre-war basis. This service aids materially in the successful control of such diseases.

(C) A survey of the work of the veterinary service during the past year is now in progress. The results of this survey will be available within about one month.

(D) The communicable diseases of animals during the past month as reported, include the following: Foot-and-Mouth Disease, Brucellosis, Swine Cholera, Swine Erysipelas, Rabies, Sheep Scabies, Laryngotracheitis and Epizootic Lymphangitis. The degree of, location of, and control measures effected for these diseases were as follows:

(a) Foot-and-Mouth Disease: Incidence has been sporadic in the same areas as were present last month. 32,000 doses of vaccine have been produced and distributed during the month. 17,000 doses of this vaccine were produced from virus tissue sent by plane from Sardinia as a result of the probability that a second virus strain is now active there.

(b) Brucellosis: There have been a few cases reported in sheep during the month from Grosseto province only. Brucellin is available and positive reactors have been disposed of.

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(c) Swine cholera: Only sporadic cases have occurred with no newly infected areas. 160,000 swine in the provinces South of Florence and including Sardinia have been vaccinated with locally produced crystal violet vaccine. Vaccine production in Siena, Rome and Naples continues. Though demands for antiserum have been greatly reduced as a result of vaccine production, serum from the plant in Brescia will be needed in Central and Southern provinces very soon.

(d) Swine erysipelas: Sporadic cases have been reported in Ascoli Piceno, Teramo and Perugia provinces. Immunization for this disease in Central and Southern provinces has surpassed pre-war standards due to the increased production of the avirulent vaccine in Perugia and Teramo and the increased value of swine.

(e) Rabies: One suspected case of canine rabies was reported in Bari Province. Routine Italian control measures were employed with compulsory muzzling and leashing ordered for all dogs there.

(f) Sheep scabies: The incidence as reported has been much less than last month but is most prevalent in Ascoli Piceno, Terni, Ancona, Rome and Viterbo Provinces. Dipping of sheep with lime-sulphur dip as well as nicotine sulphate is being carried out to the maximum degree that the supply of the chemicals will permit. The Ministry of Agriculture was supplied with several hundred copies of the previously referred to lime-sulphur dip circular at their request. The publication of this circular has helped to make a large quantity of nicotine sulphate previously hidden in the black market available at a high but fairly practicable price to the sheep-owners.

(g) Larynge tracheitis: There have been but a few cases reported in Ancona and Ascoli Piceno provinces during the month. Vaccinations are being carried out in these areas but sanitary control measures when they have been carried out efficiently have proved much more practical.

(h) Epizootic lymphangitis: One case in Rome Province was isolated for treatment and the usual sanitary measures employed on the premises.

(E) No further importations of sheep from the Sudan are being made thereby eliminating all possibility of introducing rinderpest from that area.

4. MEDICAL SUPPLY BRANCH:

(A) ENDIMEA has submitted plans for the North on distribution of Allied medical supplies to the Ministry of Interior, Direction of Public Health and to this office. At present Allied medical supplies are distributed in AMG territory by Regional Public Health Officers. There still arise disagreements between ENDIMEA, Ministry of Interior and Ministry of the Treasury over the proper operations and supervision of ENDIMEA in the accounting and distribution of supplies. Slowness and misunderstanding between ENDIMEA and the Ministry of Interior in proper coordination of requisition and break-down approval of supplies to the various provinces has caused a great deal of delay in the delivery of medical supplies to many sections of Italy.

(B) This office in cooperation with Finance Sub-Commission sent out a memorandum on accounting procedure to be used in distribution of medical supplies [illegible]

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rabies. Rigorous rabies control measures were employed with compulsory muzzling and leashing ordered for all dogs there.

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(g) Laryngo tracheitis: There have been but a few cases reported in Ancona and Ascoli Piceno Provinces during the month. Vaccinations are being carried out in these areas but sanitary control measures when they have been carried out efficiently have proved much more beneficial.

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(B) This office in cooperation with Finance Sub-Commission sent out a memorandum on accounting procedure to be used in distribution of medical supplies in forward areas by RPHOs. This procedure is very similar to that set up for AMG 5 and 6 Armies under instructions in Executive Memorandum #34, HQ, A.C. A copy of this memorandum is to be found at Appendix B.

(C) Medical supplies from the States for civilian needs for Italy for the period of Jan. 1st, 1945 to July 1, 1945 are now arriving at the various ports of Italy namely Naples, Bari and Leghorn.

The following is a list of various items taken from ship manifests of supplies that have arrived up to the 15 of Nov. 1945:

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Anti Hog-Cholera Serum	Tons	3
Ascorbic Acid	"	5
Paris Green	"	12
Dental Supplies	"	5
Absorbent Cotton	"	265
Acetil Salicylic Acid (Aspirin)	"	75
Confinement Supplies	"	210
D.D.T. Powder	"	5
Sulphathiazole	"	33
Various Medical Supplies	"	357
TOTAL.....Tons		970

(c) As of the first of the year, Central Civilian Medical Depots in Naples and Florence have been warehousing approximately 500 tons of UNRRA medical supplies. These supplies are inventoried and issued under instructions of the UNRRA Representative and regular consolidated monthly reports are given to the HQ, Rome.

(d) Warehouse space of both the Naples and Florence warehouses is becoming critically short at present, due to the lack of rail and water transportation, for transport of supplies. This situation will soon be relieved when the warehouse in Genova will open and transportation requirements for the Army will let up.

(e) Distribution of anti-malaria drugs and paris green for malaria control have been made throughout Italy this past month. [illegible] tons of paris green have been borrowed from Army stocks for immediate [illegible]. This supply will be returned to the Army when civilian [illegible] from the U.S.

(f) D.D.T. and dust guns have been distributed with medical supplies to all Northern Regions to take care of lousiness in typhus infected areas. An additional 10 tons of D.D.T. has been released by the Army to handle any emergency that might occur.

(g) This office has forwarded a questionnaire to all Regional Public Health Officers of the North requesting information on the medical supply problems in forward areas. The information requested pertained to C.I.D. items or items similar to those listed in the C.I.D. basic medical list that are of Italian manufactured origin. Also the amount of raw materials available to produce this quantity of each item and for what period of time. These reports will help in discontinuing certain medical items from the C.I.D. for the second period of 1945 that are produced in sufficient quantity to take care of all Italy to prevent disease and unrest among the civilian population.

V. [illegible]

(a) Personnel - the changes in office personnel were the loss of Mr. Paul Hoch, the former Regional Welfare Officer, Abruzzi-Marche Region, who departed for America some time ago, a very capable, energetic and efficient officer - and Mr. Charles B. Ramm, who also left for America. Mr. Ramm had been an Regional Welfare Officer in Toscana Region, and had done a splendid work in organizing welfare committees and in setting the zone in the

(c) As of the first of the year, Central Civilian Medical Depots in Naples and Florence have been warehousing approximately 600 tons of UNRRA medical supplies. These supplies are inventoried and issued under instructions of the UNRRA representative and regular consolidated monthly reports are given to UNRRA HQ, Rome.

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5. Personnel:

(a) Personnel - The changes in office personnel were the loss of Dr. Paul Hicks, the former Regional Welfare Officer, Abruzzi-Marche Region, whose departure for America took from our staff a very capable, energetic and efficient officer - and Dr. Charles H. Mann, who also left for America. Dr. Mann had acted as Regional Welfare Officer in Tuscany Region, and had done splendid work in organizing welfare committees and in solving the DPs in the various provinces.

(b) Food and Clothing -

(a) The Ente Nazionale Assistenza Soccorsi per l'Italia continues its supplemental feeding program with [illegible] rations.

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(b) Further efforts have been made to get materials for clothing. A special 10 days trip was made to Leghorn, Pisa, Florence, Bologna and Ancona to obtain salvage material in the hope that the material which could not be remade by hand labor could be supplied to factories thereby performing two welfare functions, that of giving employment and also supplying clothing and other materials. A complete report of this 10 day trip has been submitted.

(c) Blankets - Approximately 100,000 blankets were assigned to Welfare for distribution above the Gothic line. Of these 15,000 were assigned to each of the Regional Welfare Officers for immediate use and the remaining ones will be allotted after the Regional Welfare Officers have had a chance to make a survey of their Regions and learn more definitely of the needs. Reports came down from Florence of the influx of Italian prisoners of war who were returning from Germany. EMSI had been called into AMG territory to help relieve the situation and we authorized the use of some of the blankets assigned to us for the use of the prisoners of war.

(C) Meetings -

(a) Regular meetings were held with Dott. Valenti, routine welfare matters being discussed.

(b) The biweekly meetings were held with Mr. Myron Taylor. A letter which we had received from Australia asking for shipping space for materials, clothing, etc., to be sent by people of Italian extraction in Australia for the people of Italy was discussed. Efforts will be made to obtain this space. Special efforts will also be made to give proper credit to the Australians and not have their efforts confused with those of American Relief for Italy.

(c) Mr. Antonio DE Genova called relative to his presenting his home and properties in Campobasso Province for an orphanage. The Italian Government Has been asked to make proper arrangements for acceptance.

(D) The purchase of all useful salvage materials by EMDSI has proved to be satisfactory and acceptable to all other welfare organizations of Italy. However a ruling of the War Materials Disposal and Italian Prisoners of War Sub-Commission gives this material first to the Italian Ministry of Industry and Commerce. A request is being made to have this Ministry buy all salvage and then let EMDSI take that portion which is useful for its purposes.

(E) Conclusion: The recent trip North gave further substantiation to the statement in the April Report that conditions are much better than had been anticipated. However planning and coordination must go on. We hope to arrange a welfare conference in some conveniently located Northern city where Regional Welfare Officers can give their various experiences and where some unified plans can be more definitely made.

6. PERSONNEL.

(A) Two errors were made in the April report on personnel - Para 6 (B). Lt Colonel Charles L. Adams is still assigned to and on duty with the Sub-Commission, while the name of Major Samuel T. Hall should be substituted for that of Major Milton R. Hall.

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(B) The Director and Executive Officer made a tour of all the newly occupied Northern Regions during the month.

SUMMARY

1. POLITICAL:

(A) Public Health reports from the Northern Regions are most satisfactory. There have been no epidemics, water supplies are untouched, hospital accommodation is adequate and many medical supplies have been discovered.

(B) The medical care of refugees is a matter causing concern, especially from the point of view of careful disinfestation of persons coming from zones where Typhus has been reported. The Swiss Government through the International Red Cross has offered the assistance of 80 doctors and 150 soldiers from Swiss army medical units.

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Doctors Soper and Markham of the Typhus Control Unit have left for the North of Italy to confer with all the agencies interested in dealing with refugees and as a result of their tour it is hoped that a unified policy of dealing with this important medical problem will be achieved.

(C) A representative of the Swiss Red Cross is at present touring the devastated areas of Central Italy with a view to deciding the areas most in need of medical assistance which has generously been offered by the Swiss Red Cross.

2. PUBLIC HEALTH:

(A) Two outbreaks of Typhus occurred in Sicily; one in the Province of Messina, the other in Palermo. In Messina there were 37 cases with 9 deaths and in Palermo there were 13 cases with 2 deaths. Captain Battaglia of this Sub-Commission was sent to Sicily to investigate and supervise control measures and UNRRA sent a team of workers as well. No further cases have been reported since the middle of May and there are now at least 500 pounds of DDT under UNRRA control in Sicily. One case of Typhus was reported from Aosta in Piemonte.

(B) Smallpox is at last declining in Central Italy. 187 cases occurred in Naples (both City and Province) during May as compared with 274 in April. 28 cases were reported from Avellino Province, 11 from Salerno and 1 each from the Provinces of Palermo, Catanzaro, Cosenza and Foggia.

(C) Pyrethrum spray and spray guns have been delivered to Emilia Region but difficulties of transport have so far held up deliveries to Venezia Region. Spraying on the Tiber Delta, Malaria Control project is nearly at an end and survey work has already begun. Initial reports have shown the capture of only a very limited number of adult mosquitoes.

(D) Increasingly active measures are being taken by the Italian authorities against clandestine prostitution and a press campaign concerning Venereal Disease is to be inaugurated in the Rome newspapers.

(E) Infant Mortality in Rome is decreasing progressively. The April figure was 70.7 as compared with 87.4 in March and 111.5 in February.

(F) Deaths from all forms of tuberculosis in Rome were 237 in April as compared with 250 in March.

3. VETERINARY:

Further courses of instruction in bovine sterility and artificial insemination were held during the month, and these courses have provoked much interest amongst Italian veterinarians. The Ministry has re-established the pre-war allocation of funds for the control of communicable animal diseases. The incidence of animal diseases was not high during the month of May, Foot-and-Mouth Disease being only sporadic and a few cases only of Brucellosis being reported from Grosseto. 100,000 swine in Central and Southern Italy and Sardinia have been vaccinated against Swine Cholera. The incidence of Swine Erysipelas, Rabies (one case only), Sheep Scabies and Laryngo-Tracheitis has been very low.

4. [illegible] SUPPLY:

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4. MEDICAL SUPPLY:

Complete agreement has not yet been reached between ENDIMEA and the Ministries of Interior and Finance concerning the accounting for and distribution of supplies. Lack of proper coordination between ENDIMEA and the Ministry of Interior has led to delay in the delivery of supplies to many provinces. A memorandum of accounting procedure in forward areas has been issued. Medical supplies to cover the first six months of the current year are arriving at Naples, Bari and Leghorn and the warehouses at Naples and Florence are becoming overcrowded. It is hoped that the situation will be relieved by the opening of a warehouse at Genoa. Regional Public Health Officers in the Northern Regions have been circulated with a questionaire concerning the medical supply situation in their Regions.

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5. WELFARE:

The distribution of milk and vitamins by ENDSI continues. Further efforts have been made to obtain salvage materials for the purpose of turning it into clothing. 15,000 blankets have been allocated to the Welfare Officers of the Northern Regions while a reserve is held in case further demands should be forthcoming. An offer has been received from people of Italian extraction in Australia to send clothing to Italy.

6. PERSONNEL:

A tour of all the Northern Regions was made during the month by the Director and Executive Officer.

G. S. Parkinson

G. S. PARKINSON, Brigadier,
Director,
Public Health Sub-Commission.

APPENDICES:

Appendix "A" - Report of Investigation for Typhus at Capizzi, Sicily - Captain Russell L. Battaglia.

Appendix "B" - Memorandum on Accounting Procedure to be Used in Distribution of Medical Supplies in Forward Areas by RPHOs.

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

APPENDIX "A"

AC/3040/PH

28 May, 1945

SUBJECT: - Report of Investigation for Typhus at Capizzi, Sicily.

TO : - Commanding Officer, Public Health S/C.

1. According to orders issued by this Headquarters an investigation for typhus was made at Capizzi, Sicily. Capizzi is a small Sicilian town, population 5.000, in the Province of Messina. The town is perched high on a mountain and surrounded by beautiful country. However, Capizzi itself is a backward, neglected and forgotten town full of dirt and swarming with flies and all kinds of animals fill the streets and even occupy the homes. The people are all farmers poor and uneducated - a neglected people. Inspection revealed that almost all people were lousy and fleas were very much in evidence.

2. The town is under the jurisdiction of Dr. Gotta, Romusino Ferruccio, Medico-Provinciale Messina, who is a very capable man. He had sent a squad of sanitary workers to form a temporary hospital to carry on delousing work and to conduct other services that might be necessary. Much assistance was given by the town Mayor, a Signor La Via and the town doctor, Dr. Orlando.

3. Upon arrival a typhus suspect case was shown to me. This patient, Lagunga Antonio was a typical case of typhus and critically ill. Immediate disinfestation with DDT was carried out in the family and the surrounding area. A review of the previous convalescent cases gave a good history for typhus with positive Weil-Felix reactions and positive Castaneda's done at the time of my visit May 18-21-1945.

4. Investigation and review of the cases demonstrated a definite beginning and localization of the cases in the center of the town, mostly in the vicinity of Via Teatro and Via Roma. Many of the people were related and therefore contact established. If not related they lived close by and most likely did have contact.

5. Apparently the first case began with Calandra Checco Antonia fu Salvatore, female, age 40, in March 12, 1945. From conversation with the patient and the doctor the story is one of typhus. No Weil-Felix was done and the Castaneda on May 18, 1945 was doubtful. At any rate from Calandra Antonia subsequent cases followed thru the relationship afflicting the Calandras and the Amorosos.

6. It is difficult to obtain the origin of this outbreak. Interrogation of Signora Calandra revealed that she was a housewife and that she [illegible] for other people. The town doctor is certain no other cases of

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6. It is difficult to obtain the origin of this outbreak. Interrogation of Signora Calandra revealed that she was a housewife and that she did laundry for other people. The town doctor is certain no other cases of typhus have taken place. However he does recall that in September 1943 he had three suspicious cases of typhus in the family of Schazzo who were seen by an Allied Medical Officer who said that they may be light cases of typhus. The whereabouts of this family is unknown as they were strangers and people displaced from their homes.

7. The Medico Provinciale gave an interesting story of typhus breaking out in the prison of Nicosia among the Libian prisoners during the month of July 1943. Out of 130 prisoners, twenty of them developed typhus with positive Weil-Felix. It is known that these people broke out from the prison in August with the Allied invasion. A similar out break of typhus occurred at the prison of Milazzo amongst the Libian prisoners from the months of January 1943 to April 5, 1943 with a total of 37 cases and a mortality of 25%. The Medico Provinciale assured me there were no known cases among the civilians but that the disease was confined to Libian prisoners only. The prisons were thoroughly deloused, clothes autoclaved and strict isolation enforced. Since that interval of typhus outbreak in the prisons of Nicosia and Milazzo no other cases have been found or reported.

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8. Interrogation of the convalescent cases for occupation etc. revealed no clues as to the original source of the typhus outbreak. These people seldom travel out of the town and many had never ever been more than 10 kilometers away from home. However contact between cases is clearly demonstrated thru relationship, thru friendship or nearness of abode. Signor La Via took ill as he was taking the town census in a house to house campaign. Signor Laganga the most recent case (May 11, 1945) probably contacted the disease because of nearness of abode and because of a history disclosing the fact that he was collecting fertilizer for use on his farm.

9. Castanada tests were performed on the following and found to be positive.

La Via Pasquale, Amoroso Anotonio, Colabose Giovanni, Modica Salvatore fu Giacomo, Colabose Antonio, Calandra Checco Giuseppina, Calandra Checco Antonina, Cammarata Maria Amoroso Angela, Mairnane Baronello Lucia, Messina Antonia, Mali Giuseppe, Sarra Antonio, Sarra Antonia, Castaneda were negative on Pagano Concetta and Colabrose Antonina. Weil-Felix done at 15th General Laboratory were positive for:

Laganga Antonino 1/2560 P. Guinea pig injected on May 20th and is at 15th General Laboratory.

Messina Antonia	1/640 P.
Mairnane Baronello Lucia	1/280 P.
Mola Giuseppa	1/640 P.

Review of 22 hospital records indicated that probably all had typhus. Almost all had a positive Weil-Felix. The number of cases total thirty-seven. Two children with a fever for several days were hidden in the country by the fearing parents. It is understood these children were later found to be convalescent and Castaneda test was positive on both. Nine deaths are reported.

10. In a period of two months there were thirty-seven cases of typhus with nine deaths. I had the opportunity to see only one ill, Laganga, and he was a typical case and very ill. The question arises as to whether these are murine or classical typhus? The answer is difficult. Certainly the elements for both are present, rats, lice and fleas. If Laganga is an example of the rest of the cases one must seriously consider classical typhus because of the severity of the illness. However the question has never been clarified as to whether murine or classical typhus are not both the same disease, one reverting to the other depending on circumstances (seasons, nutrition, reservoir, etc.).

11. Immediate dusting with DDT was ordered especially in the center of the town. It was recommended that UNRRA leave ample powder and guns to the Medico Provinciale of Messina. The town is under the process of thorough dusting by UNRRA.

VISIT TO PALERMO.

1. While I was in Sicily cases with positive Weil-Felix and Widals were reported in Palermo. With Dr. Savoia the Regional Medical Officer these cases were all seen in the Palermo hospital. All were recovered and none appeared as if they had been thru an ordeal. The cadaver of Amoroso Girolamo was inspected. No typical rash was found but many petechial bites from lice were evident. It was [illegible]

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2. It is interesting to note that of the 13 cases it was localized to the family of Amoroso, Pistoia and Cutino. The first cases began on April 4, 1945 and the last case was on May 12, 1945. I saw this last case as he was coming into the hospital, Giuseppe Amoroso, age 7. He was not critically ill, ran a sl. fever and his body was peppered with petechial bites.

3. Blood specimens of Ferrante Maria and Giuseppe Amoroso were taken and analysis at 15th General Laboratory gave positive W.F.'s Ferrante 1/320 C. Amoroso 1/80 P.

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APPENDIX "A" - Sheet "3"

4. In discussion of the cases it may be said that clinically the patients were not too ill, although there were 2 deaths out of 13; that the rash was petechial and discrete resembling insect bites. It must be remembered that I saw only one case, Giuseppe Amoroso, who certainly was not very ill. However with the sequence of cases, the presence of lice and fleas, the positive Weil-Felix, the petechial, and the death of 2 people, typhus was the obvious diagnosis. I think the presence of a positive Widal caused a hesitancy in the diagnosis of typhus.

5. Dr. Savoia was asked to delouse the entire area immediately, and this procedure was duly carried out.

CONCLUSION:

1. Typhus exists in Capizzi - 39 cases - last case May, 11, 1945.

2. Typhus exists in Palermo - 13 cases - last case May 12, 1945.

3. There is no doubt that some of the localities in Sicily are ideal for the cultivation of typhus. Perhaps other sporadic and unknown cases exist. The plight of some of these people is pitiful - poor housing, poor sanitation, poor food, etc. I may venture to say that the nutritional standard is very low and perhaps is a factor in the occurrence of typhus.

4. One may say that there is no cause for alarm. Certainly the number of cases do not warrant calling the situation an epidemic.

5. It is doubted whether many more cases of typhus will be reported from Capizzi and Palermo following dusting with DDT.

RUSSELL L. BATTAGLIA,
Captain M.C.

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APPENDIX "B"

HEADQUARTERS ALLIED COMMISSION
APO 394
FINANCE SUB-COMMISSION

MEMORANDUM ON ACCOUNTING PROCEDURE TO BE USED IN DISTRIBUTION OF MEDICAL SUPPLIES IN FORWARD AREAS BY REGIONAL PUBLIC HEALTH OFFICERS.

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1. Normally Medical Supplies in Forward Areas will be distributed by Public Health Officers 5 and 8 Army. The procedure for such distribution is as laid down in "Instructions in relation to accounting for Medical Supplies" issued by Public Health Sub-Commission, Part IV, Sub-Section B.

2. Distribution of Medical Supplies in all other parts of Liberated Italy is the responsibility of ENDIMEA.

3. When Regions at present in enemy hands are liberated it is possible that AMG 5 and 8 Army may hand over to AC Regional Control very soon after the occupation of such Regions. Regional Public Health Officers would therefore have to take over responsibility for distribution of Medical Supplies from PHOs 5 and 8 Army i.e.

(a) Normally all Medical Supplies issued by RPHOs will be treated as "Free Issues in Forward Areas".

(b) Requisitions for Medical Supplies will be made out by RPHOs and sent to the nearest Branch Civilian Medical Depot who will issue such supplies to RPHOs on a Transfer Voucher.

(c) RPHOs will issue Medical Supplies on an Issue Voucher marking it as a "Free Issue in Forward Areas". Copies of Issue Vouchers will be sent to 2665 Central Civilian Medical Depot (CVHD) monthly.

(d) Should any Medical Supplies be sold for cash the money should be paid in to the nearest Sub-Accountant by the RPHO. Such payment in should be accompanied by a copy of the Issue Voucher to which the transaction relates.

(e) Stock Records should be kept by the RPHO showing receipts and issues of all Medical Supplies.

5. An ENDIMEA branch will be set up in each of these Regions at the earliest possible date. When such branch is organized the RPHO will hand over the responsibility for distribution of Medical Supplies in his Region. RPHO will also hand over to ENDIMEA on an Issue Voucher all stocks of Medical Supplies that he has remaining on hand.

(signed) H.G. Crawshaw
Chief Accountant,
For Joint Director,
Finance Sub-Commission.

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HEADQUARTERS ALLIED COMMISSION
APO 394
Public Health Sub-Commission

AC/3016/PH

PH/GMT/jo
12 May 1945

SUBJECT: - Public Health Sub-Commission,
Report for Month of April 1945.

THRU : - VP, CA Section.

TO : - Executive Commissioner, HQ AC.

MAY 1 7 REC'D

1. POLITICAL:

(A) According to the Consolidated Text of the Public Health Laws of 27 July 1934, there was established a Consiglio Superiore di Sanita' which was composed of the following members:

1 Biologist.
2 Engineers, specialized in sanitary engineering.
1 Chemist.
2 Veterinarians, particularly competent in Veterinary hygiene.
1 Pharmacist.
1 Member of the State Council.
1 Expert in Agriculture.
1 Public Health Official, head of a hygiene department.
1 Representative of the National Fascist Party.
1 Representative of the National Fascist Welfare Institute.
1 Representative of the Italian Red Cross.
1 Representative of the National Mother & Child Welfare Organization.
The Director General of Public Health.
The Director General for Civil Administration.
The Commissioner for Migrations and Colonization zone.
The Director General for Higher Education.
The Director General for Italians living abroad.
1 Director General of the Ministry for Colonies, appointed by the Minister for Colonies.
1 Director General of the Ministry of Corporations, appointed by the Minister of Corporations.
The It General (Medical), Head of the Military Health Corps.
The It General (Medical), General Director of Health for the Navy.
The Chief of the Central Health Office for the Royal Air Force.
The President of the Medical Committee of the National Council for Research.
The President of the Court of Appeal of the Capital.
The Director General for the Merchant Navy.
The Director General for Agriculture.
The President of the Institute for Statistics.
The Head of the Health Office for State Railways.

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The Head of the Health Office for State Railways.
The Director General for Water and Electrical Installations.
The Director General for Reclaiming of Land.
The Chief of the Military Veterinary Corps.
1 Representative of Surgeons }
1 Representative of Chemists } Chosen by their respective
1 Representative of Pharmacists } local Associations.
1 Representative of Engineers. }

The functions of this body were, in broad terms, to examine all matters concerning the public health of the Kingdom which were referred to it by the Director General of Public Health; to initiate scientific research in respect of all aspects of public health, to compile a list of dangerous trades and to take steps to safeguard the health of all workers, especially women and children. The Council was divided into different sections which studied and advised on a diversity of public health problems; while on matters of the greatest importance, the Council met and voted in full session.

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(B) During the war the Council continued to function satisfactorily up until the events of September 1943 when it automatically and of necessity ceased to have any further corporate existence. Since then, the General Direction of Public Health has continued to administer the health services of the country without having a Consiglio to which to refer any problems of a complicated nature.

(C) On 19th April 1945, there was published in the Official Gazette, Legislative Decree of the Lieut General No.136 of the 22nd March 1945 by which there was established a Central Advisory Commission for Public Health, or "Commissione Consultiva Centrale di Sanita". The composition of this Commission is very similar to that of the original Consiglio and its powers and functions are defined by the Decree to be identical with those conferred on the Superior Council for Public Health. The Commissione is to hold office for one year after the end of the war, the reason for this being that by then the time will have come for the formation of a fresh Consiglio which can be composed of members chosen from the whole of Italy.

(D) It is felt that the enactment of this Decree is an excellent measure, indicative of the active interest being taken by the Italian Government in all matters pertaining to the health of the Italian nation.

2. PUBLIC HEALTH BRANCH:

(A) Typhus:

(a) No cases of Typhus have been reported during the month.

(b) Supplies of DDT and Spray-guns have been allocated to all Regional stockpiles for the Northern Regions. On arrival, these supplies will be distributed to the Medici Provinciali of each province with instructions as to their use and as a result every province in Italy will have its emergency stock of DDT for use in case any outbreak of Typhus should occur. At the moment, however, it is thought that such a contingency is remote.

(B) Smallpox:

(a) Despite the fact that over a million persons have been vaccinated in Naples Province and more than two million in Naples Province, Smallpox continues to persist in that area. It is felt that the vaccination programme is not being carried out with the thoroughness and stringency which is necessary and representations to that effect have been made to the Government. As a result, a special directive has been issued to the Prefect of Naples and an inspector from the Ministry has been sent to Naples to report on the progress of the epidemic and enquire into the efficacy of the prophylactic measures. The Italian Public Health authorities report for the month of April, 274 cases from Naples Province of which 126 occurred in the City and 148 in the Province.

(b) The remaining cases of Smallpox reported in Italy are: 14 from Salerno, 62 from Avellino, 3 from Benevento, 1 from each of the Provinces of Rome, Palermo, Catanzaro and Campobasso, while 6 were reported from Frosinone.

(C) Malaria:

(a) Although small quantities of Paris green have reached this country, no bulk shipment has yet arrived and the lack of this commodity was causing the Sub-Commission some serious anxiety. However, once more the Military [illegible]

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(C) Malaria:

(a) Although small quantities of Paris green have reached this country, no bulk shipment has yet arrived and the lack of this commodity was causing the Sub-Commission considerable anxiety. However, once more the Military authorities have demonstrated their sympathetic outlook on the problems of AC and have released 50 tons to this Sub-Commission, to be repaid immediately AC shipments arrive. Of these 50 tons, 30 have been allocated to the Italian Government for malaria control work in Southern Italy, Sicily and Sardinia, while 10 tons each have been allocated to Venezia and Emilia Regions. Lombardia, Piemonte and Liguria Regions, where the malaria problem is small, have been allocated respectively 1 ton, 1 ton and ½ ton from small stocks in hand.

(b) Work on the Pontine Marshes under Professor Missiroli, Special Commissioner of the Antimalaria Committee of Littoria Province, continues but is hampered by lack of transport. Lt Colonel Spencer, Major Anderson, Major Hill and Captain Sannelli were able to afford Professor Missiroli transport facilities through the cooperation of the AG Transport Officer while they were still temporarily attached to this HQ, but recent developments have necessitated their departure to their proper stations in the North and therefore Professor Missiroli's scheme has suffered in consequence through shortage of transport. It is not properly appreciated by the Italian authorities that it is quite impossible to hand MD transport over to a civilian agency, even for use in malaria control projects, important as these are.

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Furthermore, with the opening up of the new Northern Regions, all transport is at a premium, as well as there being no Public Health Officers to accept responsibility for vehicles. It has been represented to Professor Ugaroli that the Pontine Marshes are in Italian Government Territory and that if transport is to be made for this service, direct appeal should be made to the Government for assistance. This solution to the problem, however, does not appear to have been fully realized or exploited. In the meantime, this Sub-Commission has for a long time past been making repeated efforts to obtain tyres for the Public Health authorities and the Italian Red Cross. If these could be made available, many cars belonging to Medici Provinciali and Anti-malarial Consorzios, now lying idle through lack of tyres, could be put into service and the present serious difficulty overcome. The latest information, however, is to the effect that there is absolutely no availability of tyres of suitable sizes and therefore it would appear that requisitioning of vehicles by the Italian Government is the only possible solution.

(c) Dr. Mr[illegible] of the Malaria Control Demonstration Unit reports that the residual spray work in the Tiber Delta project is nearing completion and the adult and larval capture phase of the program is about to begin. To date some 4350 buildings including over 30,000 rooms have been treated in an area embracing approximately 120 square miles. This has required the application of almost 13,000 gallons of kerosene and 5400 pounds of DDT concentrate of which over 1000 pounds went into the Lido di Roma. In that part of the rural districts comprised and there was an average of 0.53 persons per room, the amount of DDT used was approximately 100 grams per room or 170 grams per person. The treated area has been divided into six districts in each of which a stand for collecting adults and larvae will each great mosquito collections throughout the breeding season so that a constant check will be had on the vector density in all parts of the project.

(D) Typhoid:

(a) A small outbreak of Typhoid which occurred in 27th AMG Evacuation Hosp., Florence, may now be considered at an end.

(b) An explanative report on the San Marino-Rimini epidemic by Captain Dalton is to be found at Appendix "A".

(E) Undulant Fever:

(a) Cases of undulant fever are still being reported from Tuscany Region and the necessity of boiling milk and the avoidance of local cheeses is once more stressed.

(F) Venereal Disease:

(a) As regards the recommendations made to the Italian Government concerning the establishment of a 600 bedded hospital in Rome for the treatment of infected prostitutes, referred to in last month's report, a reply has been received in which it is stated that in the opinion of the Public Health authorities the number of infected women referred to the San Gallicano Hospital for treatment [illegible]

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(c) Dr. Mr[illegible] of the Malaria Control Demonstration Unit reports that the residual spray work in the Tiber Delta project is nearing completion and the adult and larval capture phase of the program is about to begin. To date some 4350 buildings including over 39,000 rooms have been treated in an area embracing approximately 120 square miles. This has required the application of almost 12,000 gallons of kerosene and 5400 pounds of DDT concentrate of which over 1400 pounds went into the Lido di Roma. In that part of the rural districts completed and where there was an average of 0.58 persons per room, the amount of DDT used was approximately 100 grams per room or 170 grams per person. The treated area has been divided into six districts in each of which a squad for collecting adults and larvae will make systematic collections throughout the breeding season so that a constant check will be had on the vector density in all parts of the project.

(D) Typhoid:

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(b) An exhaustive report on the San Marino-Rimini epidemic by Captain Dalton is to be found at Appendix "A".

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(b) This reply has been forwarded to the Surgeon, Rome Area Allied Commission who has promised to discuss it with the Advisor in Venereology from AFHQ as it is known that AFHQ is taking a deep interest in the matter.

(c) A further communication dated 28th April has been received from the Public Health authorities in which it is stated that the number of beds in San Gallicano Hospital has been increased to 325 and that a further increase to 350 is shortly to be expected. This letter lays down, in addition, more stringent desiderata regarding both the diagnosis and treatment of venereal infections.

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(G) Infant Mortality:

(a) During March there were 2012 live births in Rome and 176 deaths in children under one year of age. This gives an infant mortality figure of 87.4 as compared with 111.5 in February.

(H) Tuberculosis:

(a) The March number of deaths in Rome Commune from all forms of Tuberculosis was 250 as compared with 190 in February.

3. VETERINARY BRANCH:

The Chief of the Veterinary Branch reports as follows:

(A) Liberation of Northern Italy at a time of the year when preparation by the Veterinary Service for the control of animal diseases is essential, creates a real need for organization of an assistance to that Service in Northern Italy at the earliest possible date. Special emphasis needs to be placed on veterinary biological production because substantial stocks of these products must be at hand for distribution as soon as possible. The location of all Stazioni Zooprofilattiche in the North and additional information regarding seed is at the disposal of this Branch. The arrival of a Veterinary CMD Laboratory Medical Supply Unit will prove very timely as the probability that one of the Northern laboratories will need it is great.

(B) The Veterinary Service in Southern Italy, Sardegna and Sicilia is at present functioning well, particularly in a greater course of efficiency. Communal veterinarians are available in quantity for this area but qualified provincial veterinarians are scarce. Communication facilities are now restored to the point where aid can be made within 24 to 48 hours with any part of the area. The Chief, Veterinary Service in the Ministry has assumed complete responsibility for the service in this area. Barring unforeseen difficulties, little assistance will need to be afforded in the future and the only supplies required are veterinary seroids. The present plan of distribution for such supplies has proven to be unsatisfactory mainly due to their scarcity with medical supplies in general and the comparatively small tonnage involved. A plan for distributing future shipments of supplies by placing them under the complete control of veterinarians direct from the CMD depots has been agreed upon and will probably go into effect within one month.

(C) Infectious diseases most prevalent during the past month were: foot-and-mouth disease, hog-cholera, sheepscabies, brucellosis and laryngotracheitis. The degree of location of and control measures effected for these diseases may be as follows:

(a) Foot-and-Mouth Disease: present with fairly high incidence in the provinces of Sardegna, Rome, Siena, Lucca, Pistoia and Florence and sporadic cases have occurred in all Southern provinces on the mainland. 30,000 doses of vaccine have been produced and distributed. Cattle are reaching Rome at a rate of 150 a week to afford material for future vaccine production.

(b) Hog-Cholera: prevalent in practically every liberated province south of Florence with highest incidence in the Provinces of Siena, Rome, Viterbo and Naples. More than 120,000 doses of crystal violet vaccine have been produced and distributed with an equal amount supply in the process of production.

(c) Sheepscabies: present in approximately two-thirds of the mainland provinces with highest incidence in those of Rome, Viterbo, Teramo and Foggia. Circulars describing the manufacture and use of lime-sulphur dip have been distributed.

(d) Brucellosis: most prevalent in Pistoia, Florence and Ravenna Provinces. Brucellin has been supplied to each prefecture of the above

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(b) The Veterinary Service in Southern Italy, Sardinia and Sicily is at present functioning with practically a pre-war degree of efficiency. Several veterinarians are available in quantity for this area but qualified provincial veterinarians are scarce. Demarcation facilities are now restored to the point where contact can be made within 24 to 48 hours with any part of the area. The Chief, Veterinary Service in the ministry has assumed complete responsibility for the service in this area. Barring unforeseen difficulties, little assistance will need to be afforded in the future and the only supplies required are veterinary medical. The present plan of distribution for such supplies has proven to be unsatisfactory mainly due to their similarity with medical supplies in general and the comparatively small tonnage involved. A plan for distributing future shipments of supplies by placing them under the complete control of veterinarians direct from the CCMD Depots has been agreed upon and will probably go into effect within one month.

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(e) Laryngotracheitis: High incidence has been reported in Ascoli, Macerata and Forli' Provinces and sporadic cases have occurred throughout the provinces of the mainland, Sicily and Sardegna. One case of Glanders in a mule in Rome Province was reported. The mule had been transported to the Rome abbatoir from Naples Province. The animal was destroyed and all police measures possible to employ in existing circumstances were taken. One rabies suspect was reported in Bari Province with assurance that all necessary precautions and control measures have been taken. There has been no reported incidence of Anthrax, Sheep-Pox or suspected Equine Encephalomyelitis during the month.

(f) Short courses of instruction on bovine sterility work and bovine artificial insemination have been conducted for veterinarians in the provinces of Rome, Viterbo and Frosinone during the month. Much interest and enthusiasm has been shown in these courses and similar courses in several other provinces will be offered during the next two months. The close relationship between the sterility work and artificial insemination has made a lasting impression upon those in attendance.

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(E) An information circular pertaining to availability and method of procuring veterinary biologics was circulated to all Regional Public Health Officers, SPHOs, AMG 5th and 8th Armies for Provincial Veterinarians. The Public Relations Branch prepared and arranged for release of a story about the production and use of strain No. 19 Brucella Abortus vaccine in Italy.

4. MEDICAL SUPPLY BRANCH:

The Medical Supply Officer reports that:

(A) ENDIMA has increased the number of their warehouses and representatives, which has helped a great deal in their distribution problems. Transportation is still one of their great difficulties. Though many of their problems have been worked out, they are still far from operating smoothly. Discussion still arises between ENDIMA and Sanita' pubblica of the Italian Government over proper management and operation of the organization.

(B) This office made a new directive, AC/3077/2/FH, this was published by Civil Affairs Section on April 12th, 1945 and was forwarded to all Regional Public Health Officers and to Provincial Commissioners, to the Public Health Division Italian Government and to ENDIMA. The above-mentioned directive consolidates all the requisitioning and distributing system and states regulations on prices of Allied medical supplies. Products manufactured in Liberated Italy at the present time, in sufficient quantity to prevent disease and unrest among the civil population, are cancelled from requisitions from US and UK.

(C) Plans have been made and approved for the distribution of medical supplies for North East Italy. Requisitions have been made out and forwarded to CCMD Depots to be filled. These supplies are now ready for shipment to all Regions in AMG Territory where ENDIMA is not operating.

(D) Paris green and anti-malarial drugs have been released from the CCMD Depots to the Italian Government for distribution in malarious areas. Similar supplies have been set aside for AMG Territory.

(E) Medical supplies for the 6 months period January 1, 1945 to July 1945 are now arriving from the States. Requisitions will again be filled on a two month's basis for ENDIMA and 5th and 8th Armies.

5. WELFARE BRANCH:

The Chief of the Welfare Branch reports as follows:

(A) Personnel: No change in officer personnel since last month. Regional Welfare Officers continued to lose Red Cross personnel who are being assigned further North. The return of the Southern and Lazio-Umbria Regions to Italian administration throws additional work on this Headquarters.

(B) Food and Clothing: The regular feeding programs are being continued. Pro Nazionale Distribuzione Soccorsi per l'Italia has been supplementing children's diets with milk and vitamins which has been very helpful. Our institutional surveys have been used as a basis for these various distributions and have proved to be reliable and helpful. The age limit has been raised so that now, adolescents are having the benefits of these additional rations.

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The clothing distribution has been entirely from supplies furnished by American Relief for Italy and given out through ENDSI.

This Branch, through close cooperation with the Industry and the Commerce Sub-Commissions has made available to the Italian Red Cross and to the Order of Malta certain salvage materials such as canvas, mattress covers, shoe findings, mosquito nettings, cot covers, etc., from which much needed clothing is made both for children and adults. We hope to continue and enlarge this program so that no Quartermaster salvage will have to be sold on the market, but will get into the hands of reputable and reliable Italian Welfare Organizations where it will be converted into needed products. It is hoped that salvage material can be made into clothing by factories of the North at least until these factories are supplied with raw materials. ENDSI and representatives of the Vatican are also anxious to have salvage made available to them. We are working on a plan to have one agency, for instance ENDSI, buy all released salvage materials. 2021 will then make distribution to the other Italian agencies of the materials they need. With this wide and diversified distribution it is hoped that some clothing, at least will get to the most needy of the people of Italy.

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(C) Again blankets can be mentioned in the clothing category. The 182,700 blankets given to the Public Health Sub-Commission for distribution have been distributed to hospitals and other eleemosynary institutions. Plans are being worked out to make personal distributions to needy people through the P.O.A. or other recognized Italian relief agencies. The Italian Red Cross has given invaluable help in this program. We must mention again the splendid cooperation of the American Relief for Italy and the A.M.G.S.I. whose trucks and services were made available. More than ten public spirited women of Rome made a very complete survey of all institutions in the Rome area. The distribution of blankets was made upon the findings of this survey. Several of the women who had made the survey offered to go on the trucks which were making the distribution of blankets, with prepared lists of the number each institution needed and also duplicate receipt for our records. The fine contribution of service by these women not only made a more equitable distribution possible but lessened the usual time necessary by half.

These blankets have greatly lessened suffering and the recipients have expressed sincere gratitude for them. One of the most grateful groups were the people of Sardinia.

The liaison officer at Bari and proper officials in the various distribution centres are kept informed. The following allocations were made and most of the blankets have been distributed.

Rome	20,000	blankets	Ancona	10,000	blankets
Sicily	20,000	"	Leghorn	20,000	"
Naples	10,000	"	Florence	20,000	"
Sardinia	5,000	"	Arezzo	15,000	"
Abruzzi	10,000	"	Bari	7,000	"
			Total 137,000		

The blankets not allocated on this list are being distributed rapidly in areas where emergencies arise such as to clinics where they are gathering children injured by bombing for treatment and training. The additional 180,000 blankets for the section above the Gothic Line are all planned for. Immediate release will be granted.

(D) Conclusions: The reports gathered from the North concerning the condition of the cities are encouraging. It is hoped that our present available supply of clothing and blankets will take care of the route needs if the demands for the returned PW from Germany do not become too great.

C. PERSONNEL:

(A) During April the Sub-Commission has lost the services of no less than seven American Officers and four British Officers. Five American Officers have been withdrawn for other commitments, one has gone home on R/R and one has been posted to Detached Patients. One British Officer has been posted to Home Establishments on compassionate grounds, one has gone to England under the "Python" Scheme and will not return while two have gone to England on leave and the question of their return is perhaps problematical.

(B) The American Officers who have left the Sub-Commission are:

Colonel Charles J. Ferguson, M.C.)
Lt. Colonel Charles L. Adams, Sn. Corps)
Major Milton T. Hill, Sn. Corps) For other commitments.
Captain Theodore M. Willcox, Spec Ser.)
Major John W. Bullen, Spec Ser)
Captain Bernard D. Deets, Sn. Corps — On temporary duty.
Lt. Porter Wright, AUS — To Detached Patients.

The British Officers who will not return are:

Major L. G. Norman, RAMC - Posted to Home Establishment.
Major K. M. Smith, RAMC - On "Python" Scheme.

The British Officers who have gone on leave are:

Lt. Colonel M. T. Sewell

Sicily	20,000	blankets	Ancona	10,000	blankets
Naples	10,000	"	Leghorn	20,000	"
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Lt. Colonel Charles L. Adams, Sn. Corps
Major Milton E. Hill, Sn. Corps
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Major L. G. Norman, RAMC - Posted to Home Establishment.
Major A. M. Wood, RAMC - On "Python" Scheme.

The British Officers who have gone on leave are:

Lt. Colonel J. L. Swanston, RAMC
Captain E. V. Parker, RAMC.

(C) In consequence of these changes, AMG Naples Commune has now only one Medical Officer and one Sanitary Officer, Umbria-Marche Region has only one Medical Officer and one Welfare Officer, while Tuscany Regional Staff has been reduced to two Medical Officers and one Sanitary Corps Officer, and it is anticipated that in the near future the staffs of these Regions will suffer further reduction.

(D) Because of the considerable reduction in the total personnel of the Sub-Commission, the teams for the Northern Regions have, perforce, to be cut to an almost dangerously low level and some apprehension was felt as a result at this HQ. Fortunately events have taken such a favourable turn in the North that all recent reports indicate the preservation of hospitals, water supplies and essential services with the consequent diminution of danger to the health of the civil population. It is felt therefore that in view of the excellent prevailing conditions, the attenuated Northern Public Health teams will be sufficient for the tasks which lie before them.

(E) The departure of these officers is a matter for sincere regret, as all, in their various spheres, have carried out their duties in an exemplary manner.

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SUMMARY:

1. POLITICAL:

The Italian Government has appointed a Central Advisory Commission for Public Health. This is a temporary body taking the place of the Superior Council for Public Health which in the past had advised the Public Health Division of the Ministry of Interior on all matters pertaining to the health of the nation. It is anticipated that with the liberation of the North, the original Superior Council for Public Health which fell into abeyance in September, 1943 will be re-constituted in the future. The term of office of the Central Advisory Commission is for one year after the cessation of hostilities.

2. PUBLIC HEALTH:

(a) No cases of Typhus were reported during April. Steps have been taken to provide the provinces of the north with stocks of DDT and spray-guns in the same manner as has already been done for the provinces of Italian Government Territory.

(b) Many cases of smallpox continue to be notified from Naples City and Naples Province despite the fact that over three million vaccinations have been performed. It has been felt that the whole vaccination program in Naples should be overhauled and representations to this effect have been made to the Italian Government as a result of which a public Health Inspector has been sent to Naples to investigate and report on the situation there. 274 cases have been reported from Naples Province during April; 62 from Avellino; 14 from Salerno; 6 from Frosinone and 1 from each of the provinces of Rome, Palermo, Catanzaro and Campobasso.

(c) Malaria. During the month the military authorities kindly agreed to level take Sub-Commission fifty tons of Paris green to be issued when AC stocks eventually arrive. Of these 50 tons, 30 have been allocated to the Italian Government and 10 tons each have been given to Emilia and Venezia Regions. The anti-malaria project on the Pontine Marshes continues under the direction of Professor Mansiroli, Special Commissioner of the Anti-Malaria Committee of Littoria Province, but is hampered by the lack of transport. The Public Health Sub-Commission has had to withdraw its assistance during the month due to the departure of four officers for their duties in the North. Every effort is being made to obtain tyres for vehicles required for anti-malarial work but these efforts have so far been unsuccessful. It is felt that the only solution for this problem is for the Italian Government to requisition the transport required to keep the project in full operation.

The Tiber Delta demonstration project is nearing completion and the adult and larval culture phase of the program is about to begin. So far some 4350 buildings including over 32,000 rooms have been treated in an area of approximately 120 square miles.

(d) A small outbreak of Typhoid which occurred in an AMG refugee concentration camp in Florence is now at an end.

(e) A certain number of cases of endemic fever are still reported from

(b) No cases of typhus were reported during April. Steps have been taken to provide the Provinces of the north with stocks of DDT and sprayers in the same manner as has already been done for the Provinces of Italian Government Territory.

(c) Many cases of smallpox continue to be notified from Naples City and Naples Province despite the fact that over three million vaccinations have been performed. It has been felt that the whole vaccination program in Naples should be overhauled and representations to this effect have been made to the Italian Government as a result of which a medical inspector has been sent to Naples to investigate and report on the situation there. 274 cases have been reported from Naples Province during April; 62 from Avellino; 14 from Salerno; 6 from Frosinone and 1 from each of the Provinces of Bari, Palermo, Catanzaro and Campobasso.

(c) Malaria. During the month the military authorities kindly agreed to lend this Sub-Commission fifty tons of Paris green to be repaid when US stocks eventually arrive. Of these 50 tons, 30 have been allocated to the Italian Government and 10 tons each have been given to Bari and Venezia Giulia. The anti-malaria project on the Pontine Marshes continues under the direction of Professor Aschirelli, Special Commissioner of the Anti-Malaria Committee of Littoria Province, but is hampered by the lack of transport. The Public Health Sub-Commission has had to withdraw its assistance during the month due to the departure of four officers for their duties in the north. Every effort is being made to obtain tyres for vehicles required for anti-malarial work but these efforts have so far been unsuccessful. It is felt that the only solution for this problem is for the Italian Government to requisition the transport required to keep the project in full operation.

The Tiber Delta demonstration project is nearing completion and the audit and lateral expense phase of the program is about to begin. So far some 1,350 buildings including over 33,000 rooms have been treated in an area of approximately 120 square miles.

(d) A small outbreak of Typhoid which occurred in an AMG refugee concentration camp in Florence is now at an end.

(e) A certain number of cases of malignant fever are still reported from Tuscany Region.

(f) The Italian Government has replied to this Sub-Commission's recommendations concerning the establishment of a 600 bedded hospital for infected prostitutes in Rome. The reply has been submitted to the military authorities and it is understood that the whole problem is at present under consideration by AFHQ.

(g) The infant mortality rate for Rome was 67.4 in March as compared with 111.5 in February.

(h) The number of deaths in Rome through from all forms of Tuberculosis in March was 256 as compared with 190 in February.

3. VETERINARY.

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It is considered that the veterinary services in Italian Government Territory are now functioning with the same efficiency as was to be found in the pre-war days and that as far as this Sub-Commission is concerned, nothing further remains to be done in that area.

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Foot and Mouth disease, hog cholera, sheep scabies, brucellosis and laryngotracheitis have all been reported from different provinces during the past month. Courses of instruction on bovine sterility and artificial insemination have been conducted for veterinarians in the Provinces of Rome, Viterbo and Frosinone during the month. Information concerning the availability and procurement of veterinary supplies has been circulated to all Regional Public Health Officers during the month.

4. MEDICAL SUPPLY:

UNRRA has increased the number of its warehouses and representatives but is still hampered by lack of transport. A directive dealing with the requisitioning and distribution of medical supplies and the fixing of prices of Allied medicines has been sent to all Army, Provincial Commissioners, Italian Government and UNRRA. Arrangements have been completed for the shipment of supplies to all the Regions in Northern Italy. Supplies to cover the first six months of the current year are now beginning to arrive.

5. WELFARE:

The regular feeding programmes are continued and children's diets are being supplemented by milk and vitamins distributed by the Ente Regionale Distribuzione Soccorsi per l'Italia. Quantities of salvage materials such as canvas, mattress covers and cot covers have been obtained through the Commerce Sub-Commission and handed over to the Italian Red Cross and the Order of Malta. This salvage material is then passed to Italian welfare organizations which convert it into much needed and serviceable garments. A widespread distribution of blankets has been made during the month and the following quantities have been sent to the Regions indicated:

Rome	20,000
Sicily	20,000
Naples	10,000
Sardinia	5,000
Abruzzi	10,000
Ancona	10,000
Leghorn	20,000
Florence	20,000
Arezzo	15,000
Bari	7,000
Total	137,000

6. PERSONNEL:

Many changes in personnel have occurred during the month, the Sub-Commission having lost the services of seven American and four British Officers. This drastic reduction in strength has caused grave apprehension at this HQ. The strength of teams for the Northern Regions has in consequence been reduced to an extremely low level. Fortunately, however, affairs in the North have taken such a favorable turn that it would appear that the existing teams,

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G. S. PARKINSON, Brigadier
Director,
Public Health Sub-Commission.

Appendix "A" - "The San Marino-Rimini Enteric Outbreak". - Capt. Bernard Daiz.

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AMG
HQ, EIGHTH ARMY, REAR
PUBLIC HEALTH AND WELFARE

APPENDIX "A"
Sheet 1.

RIA/PH/3.5

EDD/JGS
16 April 1945

SUBJECT: - The San Marino-Rimini Enteric Outbreak.

TO : - S.O.A.O., AMG, EIGHTH ARMY
ATTENTION: S.P.H.O. (1)
THRU CHANNELS.

THE SAN MARINO-RIMINI ENTERIC OUTBREAK

1. GENERAL:

The episode described here as the San Marino-Rimini Enteric Outbreak may be said to have had its beginning early in the Summer of 1944, smouldering until about the middle of September when a massive infection of the exposed population occurred. Before the outbreak was resolved some five months later in February 1945, slightly more than 1100 cases of enteric disease had been recorded in the civilian populace of the sector. Apart from any interest which the magnitude of this episode might evoke, there is the story of how it was dealt with as an epidemic within what was then a forward area crowded with combat and service troops. For here again was an instance of the direct correlation between pestilence and war with disorganized civilian health services unable to cope with the many problems.

2. TOPOGRAPHY OF THE AREA:

The sector in which the outbreak occurred involves an area of approximately 200 square miles, extending for 10 miles along the Adriatic coast of Italy and inland some twenty-five miles. The region is chiefly agricultural, much of it consisting of fertile rolling hills. The lower coastal area has a high water table, in many places water lies within five feet of the surface. There are numerous small hamlets, and for the most part shallow wells supply the major water requirements. The City of Rimini and the Republic of San Marino are the principal landmarks. The Republic lies inland about fifteen miles from the coast and is part of a chain of elevations which runs parallel to the coast and which may be considered to be the foothills of the Apennines.

Before the present war, the area was a popular summer resort and the Republic, connected with the City of Rimini by a highway and an electric railway, was a favorite sight seeing spot. Militarily, the sector became important because it controlled ingress to the Po Valley from the Adriatic side. The Germans consequently constructed in it innumerable strongpoints, which constituted part of the Gothic Line.

3. PREDISPOSING FACTORS:

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THE SAN MARINO-RIMINI ENTERIC OUTBREAK

1. GENERAL:

The episode described here as the San Marino-Rimini Enteric Outbreak may be said to have had its beginning early in the Summer of 1944, smouldering until about the middle of September when a massive infection of the exposed population occurred. Before the outbreak was resolved some five months later in February 1945, slightly more than 1100 cases of enteric disease had been recorded in the civilian populace of the sector. Apart from any interest which the magnitude of this episode might evoke, there is the story of how it was dealt with as an epidemic within what was then a forward area crowded with combat and service troops. For here again was an instance of the direct correlation between pestilence and war with disorganized civilian health services unable to cope with the many problems.

2. TOPOGRAPHY OF THE AREA:

The sector in which the outbreak occurred involves an area of approximately 250 square miles, extending for 10 miles along the Adriatic coast of Italy and inland some twenty-five miles. The region is chiefly agricultural, much of it consisting of fertile rolling hills. The lower coastal area has a high water table, in many places water lies within five feet of the surface. There are numerous small hamlets, and for the most part shallow wells supply the major water requirements. The City of Rimini and the Republic of San Marino are the principal landmarks. The Republic lies inland about fifteen miles from the coast and is part of a chain of elevations which run parallel to the coast and which may be considered to be the foothills of the Apennines.

Before the present war, the area was a popular summer resort and the Republic, connected with the City of Rimini by a highway and an electric railway, was a favorite sightseeing spot. Militarily, the sector became important because it controlled ingress to the Po Valley from the Adriatic side. The Germans consequently constructed in it innumerable strongpoints, which constituted part of the Gothic Line.

3. PREDISPOSING FACTORS:

The region was normally known to be one in which Typhoid and Para-typhoid fevers were endemic. Reported cases in the Commune of Rimini generally averaged some thirty to eighty per year and those in the Republic, about thirty. The greatest prevalence occurred during the Summer and early Fall months. During the Summer of 1943 there was a sharp outbreak of enteric disease in the Republic of San Marino which was traced to a fault in the aqueduct and which resulted in 239 cases. Thirteen (13) carriers were discovered following this episode, of which ten (10) were still known to be eliminating organisms in August 1944.

In normal times water supply and waste disposal facilities were generally

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FIGURE I.

Distribution of Cases by Date of Onset
San Marino - Rimini Outbreak
1944 - 1945.

APPENDIX "A"
Sheet 2

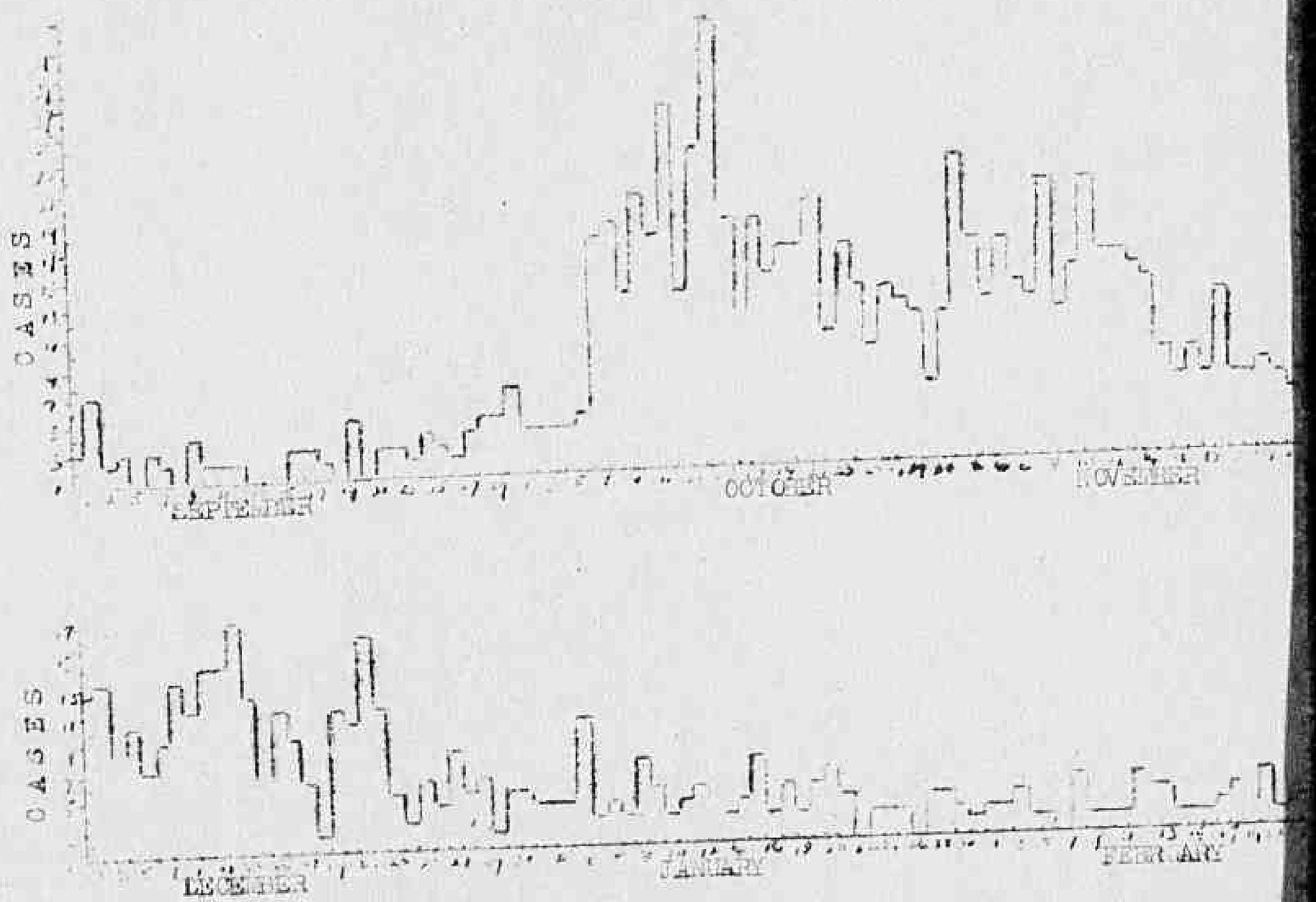

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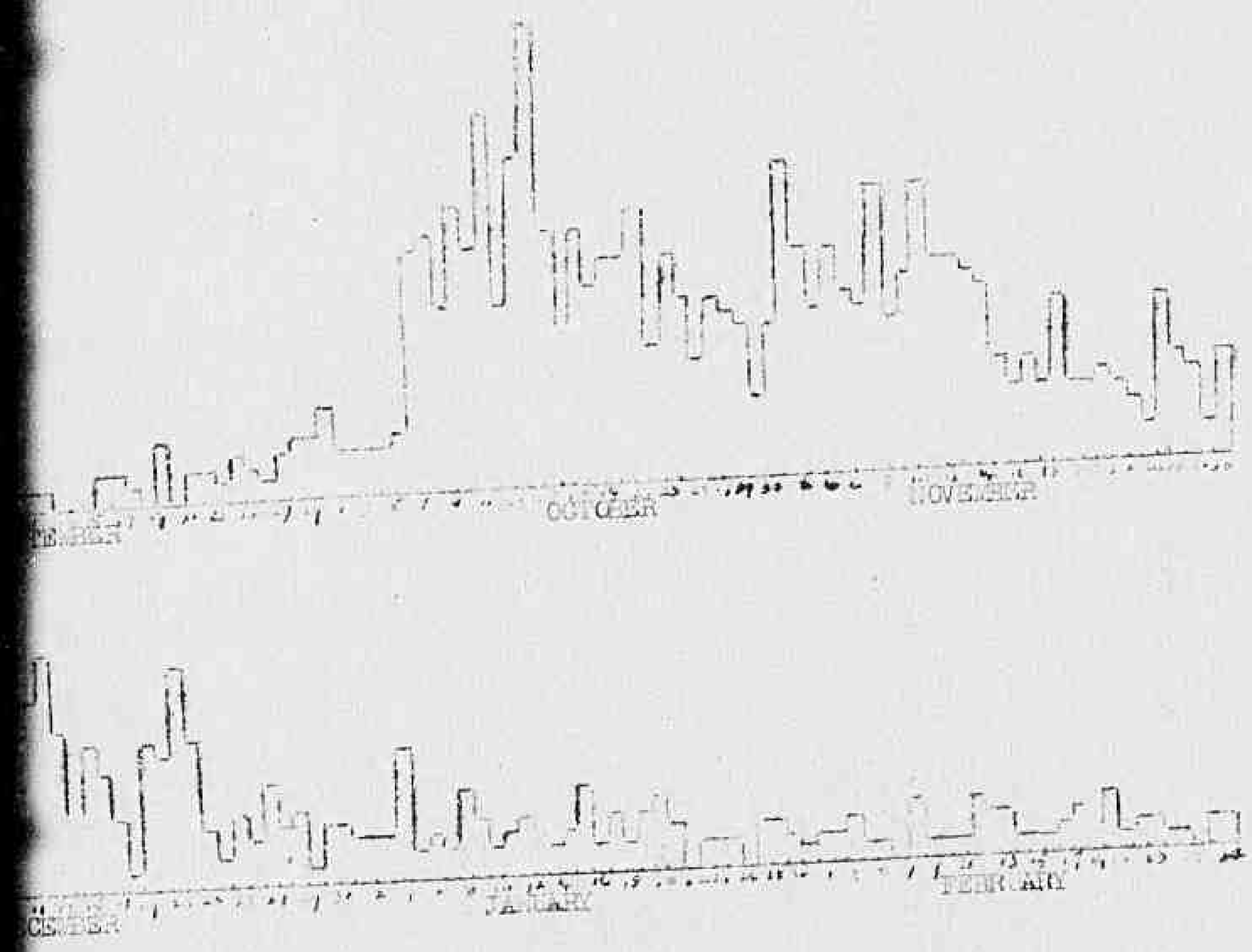
FIGURE 1.

Distribution of Cases by Date of Onset
San Marino - Rimini Outbreak
1964 - 1965.



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unsatisfactory. The City of Rimini had piped artesian well water which supplied most of its requirements, and an aqueduct system in the Republic of San Marino provided chlorinated water to the larger towns within the Republic. In the Republic chlorination of the water was reported to after the 1943 outbreak because of the occasional breaks in the lines. Waste disposal facilities were generally unsatisfactory, with cesspools and open sewers representing the lesser of the evils.

The Republic of San Marino being a neutral State was assumed to be a logical place of refuge by the Italian subjects who began arriving there in the Summer of 1942. These refugees came principally from the cities of Genoa, Turin, Milan and Bologna, many seeking shelter with relatives who were citizens of the Republic. When the bombing of the City of Rimini began in November 1943, there was a further immigration into the Republic so that by August 1944 there was an estimated total of 36,000 refugees inside the Republic which prior to the war had a normal population of approximately 16,000.

The crossing of the Foglia River and Pesaro by Allied troops started the Gothic Line break through and was the cause for a further influx of refugees into the Republic which brought the total, estimated on the basis of ration issues, to approximately 8,000 persons, more than five times the population of the Republic, between the 11th to 22nd of September. Such shelter as existed was already crowded to capacity and with the new arrivals, the houses, churches, convents, schools, caves and the railway tunnels were jammed with humanity, its animals and transportable property.

Eye-witness accounts describe conditions which indicate that it was practically impossible to sleep in a shelter lying down. The City of Rimini which at one time had a population of 35,000 was reported as having been completely depopulated. Water supply and waste disposal during this period were matters of individual initiative and such water as was consumed came from shallow wells or springs located near the shelters. There were flies in profusion. Finally, there is clear evidence that many of the refugees were ill and under distress. Typhoid and Paratyphoid Fever cases are listed in reports of communicable diseases of both Rimini Commune and the Republic of San Marino for the months of July and August.

4. EPIDEMIOLOGICAL CHARACTERISTICS OF THE OUTBREAK:

With the liberation of the City of Rimini on the 21st September reconnaissance of the area was made by Public Health officers of the Allied Military Government. However, as may be seen in Figure 1 which shows the distribution of cases by date of onset, the outbreak was in the incubation phase and the cases of Salmonella which were actually reported during the last week in September and the first two weeks of October gave no hint as to what was yet to come.

First indications of a serious enteric outbreak appeared during the third and fourth weeks of October when many cases began to appear both in the Republic of San Marino and Rimini. [illegible]

there was a further immigration into the Republic so that by [illegible] was an estimated total of 36,000 refugees inside the Republic which prior to the war had a normal population of approximately 14,000.

The crossing of the Foglia River and a Rosero by Allied troops started the Gothic Line break through and was the cause for a further influx of refugees into the Republic which brought the total, estimated on the basis of rations issued, to approximately [illegible] persons, more than five times the population of the Republic, between the 15th to 22nd of September. Such shelter as existed was already crowded to capacity and with the new arrivals, the houses, churches, convents, schools, caves and the railway tunnels were jammed with humanity, its animals and transportable property.

Eye-witness accounts describe conditions which indicate that it was practically impossible to sleep in a shelter lying down. The City of Rimini which at one time has a population of 30,000 was reported as having been completely depopulated. Water supply and waste disposal during this period were matters of individual initiative and such water as was consumed came from shallow wells or springs located near the shelters. There were flies in profusion. Finally, there is clear evidence that many of the refugees were all with enteric disease. Typhoid and paratyphoid fever cases are listed in reports of communicable diseases of both Rimini Comune and the Republic of San Marino for the months of July and August.

4. EPIDEMIOLOGICAL CHARACTERISTICS OF THE OUTBREAK:

With the liberation of the City of Rimini on the 21st September reconnaissance of the area was made by public health officers of the Allied Military Government. However, as may be seen in Figure 1 which shows the distribution of cases by date of onset, the outbreak was in the incubation phase and the cases of illness which were actually reported during the last week in September and the first two weeks of October gave no hint as to what was yet to come.

First indications of a serious enteric outbreak appeared during the third and fourth weeks of October when many cases began to appear both in the Republic of San Marino and Rimini Comune. Hospital facilities which had been set up in the City of Rimini to deal with civilian casualties were made available for hospitalising the enteric cases. Hospital facilities were also available within the Republic for those who became sick there.

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When it became apparent that the situation was suggestive of an epidemic, control measures were initiated following a program organized by Lt. Colonel A.W.S. Thompson, RAMC, Assistant Director of Hygiene, Eighth Army, and Colonel C.J. Fernandez, M.C., AUS, Senior Public Health Officer of the Allied Military Government Section, Eighth Army. The program will be referred to further in this report. The undersigned officer was assigned the task of studying the epidemiological characteristics of this episode.

4. Origin of Cases:

Study of case records began on 1 November with data furnished by the Civilian Health Officers of the Republic of San Marino and the Commune of Rimini. It was soon apparent that a significant proportion of the cases reported in Rimini Commune had a common denominator residence in the Republic within a period of 30 days preceding the onset of their illness. Of the 342 Rimini Commune cases, 28[illegible] reported residence in the Republic prior to illness. Of this number 149 or 3[illegible].6 percent became ill within a month following their departure from the Republic. The mean interval as calculated for this group was 1[illegible] days with a standard deviation of ± [illegible].4 days.

Similar mean intervals were computed after separating the cases on the basis of diagnosis. It is of interest to note the variations. For the Typhoid cases, the mean interval was 1[illegible].2 days with a standard deviation of ± 6.5 days. For the Paratyphoid group, 10 ± 9.2 days, and the "enteric" group, 13.0 ± 8.4 days.

TABLE 1
REPORTED PLACE OF ORIGIN IN SAN MARINO
Cases with Onset of Illness
Within 30 Days After Departure From the Republic

San Marino-Rimini Enteric Outbreak
1944-1945

Reported Place of Origin	Number
1. TOTAL	149
2. Serravalle Zone	46
Serravalle	(16)
Tunnel 1	(10)
Tunnel 2	(14)
Fiorina	(3)
Missing Tunnel	(2)
3. City of San Marino Zone	42
City	(39)
Railway Tunnel	(2)
Suburbs	(1)

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Reported in Rimini Commune had a common denominator residence in the Republic within a period of 30 days preceding the onset of their illness. Of the 542 Rimini Commune cases, 285 reported residence in the Republic prior to illness. Of this number 149 or 52.3 percent became ill within a month following their departure from the Republic. The mean interval as calculated for this group was 14.9 days with a standard deviation of ± 8.4 days.

Similar mean intervals were computed after separating the cases on the basis of diagnosis. It is of interest to note the variations. For the Typhoid cases, the mean interval was 14.3 days with a standard deviation of ± 8.5 days. For the Paratyphoid group, 13 ± 9.2 days, and the "enteric" group, 15.0 ± 8.4 days.

TABLE 1

REPORTED PLACE OF RESIDENCE IN SAN MARINO

Cases with onset of Illness

Within 30 Days After Departure from the Republic

San Marino-Rimini Enteric Outbreak

1944-1945

Reported Place of Residence	Number
1. TOTAL	149
2. Serravalle Zone	54
Serravalle	(15)
Tunnel 1	(19)
Tunnel 2	(14)
Fiorina	(5)
Fiorina Tunnel	(2)
3. City of San Marino Zone	5
City	(3)
Railway Tunnel	(1)
Suburbs	(1)
4. Borgo Maggiore Zone	12
Borgo Maggiore	(4)
Railway Tunnel	(3)
Valdragone	(5)
5. Cerreto Zone	12
Cerreto	(2)
S. Mustiola	(3)
Railway Tunnel	(7)
6. Domagnano Zone	6
Domagnano	(2)
Faetano	(3)
Gorrino	(1)
7. Acquaviva	4

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Cases which developed within thirty days following departure from the Republic were also grouped by the place of reported residence while in the Republic, and the distribution shown in Table 1 indicates the correlation which exists between morbidity and the areas where greatest crowding was reported near the cities of San Marino and Serravalle. It should be pointed out that the figure given as the total for the city of San Marino may be somewhat inaccurate because of the possibility of confusing the city with an unspecified area in the Republic.

b. Etiology:

A total of 1,[illegible] suspected cases was recorded, 810 by the Republic for the period 1 July 194[illegible] to 28 February, and [illegible] by the Commune of Rimini for the period 1 September to 28 February. Study of the cases reported by the Commune of Rimini resulted in the elimination of 43 cases which came from other communes and which could not be connected in any way with the San Marino-Rimini outbreak.

Of the corrected total of 1461 suspected cases, 1152 or 91.4 percent had a positive enteric infection. Inasmuch as culture studies could not be undertaken for the cases from the Republic because of limited laboratory facilities, diagnosis of most of these cases was made on the basis of clinical and serological findings. This has significantly distorted the proportion of Typhoid and Paratyphoid cases actually diagnosed.

Table 2 shows the distribution of reported cases by diagnosis.

TABLE 2
CLASSIFICATION OF REPORTED CASES BY DIAGNOSIS
AND SOURCE OF REPORT

San Marino-Rimini Enteric Outbreak
1944-1945

	CASES			PERCENT		
	TOTAL	Reported Commune	Rep of S. Marino	TOTAL	Rimini Commune	Rep of S. Marino
1. TOTAL, All Cases Reported	1261	451	810	100.04	99.99	100.00
2. Positive Cases	1152	342	810	91.40	75.83	100.00
a. Typhoid	(192)	(185)	(7)	(15.24)	(40.90)	(0.86)
b. Paraty "B"	(73)	(66)	(7)	(5.80)	(19.30)	(0.86)
c. "Enteric"	(927)	(127)	(800)	(73.50)	(57.14)	(98.88)
3. Not Diagnosed	61	61	-	4.85	15.52	-
4. Not Enteric	48	48	-	3.81	10.44	-

A total of 1,306 suspected cases was reported, 810 by the Republic for the period 1 July 1944 to 28 February, and 496 by the Commune of Rimini for the period 1 September to 28 February. Study of the cases reported by the Commune of Rimini resulted in the elimination of 45 cases which came from other communes and which could not be connected in any way with the San Marino-Rimini outbreak.

Of the corrected total of 1261 suspected cases, 1152 or 91.4 percent had a positive enteric infection. Inasmuch as culture studies could not be undertaken for the cases from the Republic because of limited laboratory facilities, diagnosis of most of these cases was made on the basis of clinical and serological findings. This has significantly distorted the proportion of Typhoid and Paratyphoid cases actually diagnosed.

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1944-1945

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	TOTAL	Rimini Commune	Rep of S.Marino	TOTAL	Rimini Commune	Rep of S.Marino
1. TOTAL, All Cases Reported	1261	451	810	100.04	99.99	100.00
2. Positive Cases	1152	342	810	91.48	75.83	100.00
a. Typhoid	(152)	(149)	(3)	(13.20)	(43.57)	(0.43)
b. Party "B"	(73)	(66)	(7)	(6.34)	(19.30)	(0.00)
c. "Enteric"	(927)	(127)	(800)	(80.50)	(37.16)	(98.88)
3. Not Diagnosed	61	61	-	4.83	13.52	-
4. Not Enteric	48	48	-	3.81	10.64	-

Note: The San Marino totals are for the period
1 July 1944 - 28 February 1945

The Rimini totals are for the period
1 September 1944 - 28 February 1945

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On the basis of wider reactions and clinical findings the San Carlos cases appeared to be approximately sixty percent Typhoid and forty percent Paratyphoid "B". On the basis of more complete laboratory studies, forty-four percent of the Rimini Commune cases were found to be Typhoid, nineteen percent Paratyphoid "B" and 37 percent "enteric".

A total of 288 isolations were made by the 2nd Middle Bacteriology Laboratory (British), including cultures of previously known carriers in the Republic. The material was sent to London and Rome for bacteriophage studies. To date results have been received on seven (7) of the isolations, two (2) being reported as Type "A", four (4) as Type "D1", and one (1) type "C1".

c. Onset of Illness:

The distribution of cases by reported date of onset of illness shown in Figure 1 reveals a significant rise on the 7th October when 16 cases were reported to having become ill. Prior to this date the greatest number in any one day was six. From the 7th October a progressive increase apparently occurred until on the 16th October when 31 cases are reported to have become ill.

The trend after 16 October shows a consistent decline with a minor peak early in November and reaching a minimum of two cases on the 29th November. A second major peak apparently developed early in December with the highest number of cases, 16 occurring on 11th December following which a steady drop developed, continuing to the end of February 1947.

Assuming an incubation period of 15 to 20 days, it is possible to arrive at an estimate of the probable date of infection and it is apparent that on the basis of this hypothesis, the massive infection took place during the period between the second and the fourth week in September. This correlates with the previously cited information that it was precisely at this time that the population within the Republic was at its highest level and environmental hygiene at its worst.

The decline which took place following the peak suggests the probability that, inasmuch as organized and intensive control measures did not get under way until the last week in October, the decline could not have been related to such measures. However, immediately following the liberation of Rimini a large number of the refugees left for their homes outside the Republic. Quite naturally the chances for spreading infection were significantly reduced with the consequent effect upon the further development of cases.

The peak which occurred in December was for the most part composed of secondary cases. In a number of these the original contact case had previously been known, but infection had apparently been passed on before the source case was isolated.

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The distribution of cases by reported date of onset of illness shown in Figure 1 reveals a significant rise on the 7th October when 16 cases were reported as having become ill. Prior to this date the greatest number in any one day was six. From the 7th October a progressive increase apparently occurred until on the 13th October when 31 cases are reported to have become ill.

The trend after 13 October shows a consistent decline with a minor peak early in November and reaching a minimum of two cases on the 29th November. A second major peak apparently developed early in December with the highest number of cases, 16 occurring on 11th December following which a steady drop developed, continuing to the end of February 1945.

Assuming an incubation period of 14 to 20 days, it is possible to arrive at an estimate of the probable date of infection and it is apparent that on the basis of this hypothesis, the massive infection took place during the period between the second and the fourth week in September. This correlates with the previously cited information that it was precisely at this time that the population within the Republic was at its highest level and environmental hygiene at its worst.

The decline which took place following the peak suggests the probability that, inasmuch as organized and intensive control measures did not get under way until the last week in October, the decline could not have been related to such measures. However, immediately following the liberation of Rimini a large number of the refugees left for their homes outside the Republic. Quite naturally the chances for spreading infection were significantly reduced with the consequent effect upon the further development of cases.

The peak which occurred in December was for the most part composed of secondary cases. In a number of these the original contact case had previously been known, but infection had apparently been passed on before the source case was isolated.

d. Case Relationships and Carriers:

It has been impossible to work out in detail the manner in which the outbreak developed. Even under normal circumstances this would have been a tedious task. However, analysis of the Rimini Commune data reveals that multiple cases in a household or family occurred in 56 instances and involved 165 individuals of a total of the 382 positive cases recorded in Rimini Commune.

Females predominated in this group, aggregating almost 60 percent, suggesting the probability that risk of infection is greater among females because of their contact with ill members of their family.

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APPENDIX VIII
Chart 7

TABLE 3

DISTRIBUTION OF POSITIVE CASES BY AGE AND SEX

San Marino-Rimini Enteric Outbreak
1944-1945

Age Groups	CASES							I E		
	MALES		FEMALES		Males	Females	Both Sexes	MALES		FEMALES
	S.Marino	Rimini	S.Marino	Rimini				S.Marino	Rimini	S.Marino
Total, all age Groups	367	152	441	204	519	645	1152	100.00	100.00	100.00
Under 10	67	22	37	25	89	62	171	18.27	15.90	12.92
Under 1	--	--	--	--	--	--	--	--	--	--
1-4	14	3	16	7	21	23	44	4.9	2.1	3.6
5-9	49	19	41	16	68	59	127	18.9	13.8	9.3
10 - 19	122	58	121	74	180	195	375	33.05	42.76	27.40
10-14	59	24	56	32	83	88	171	16.00	17.4	12.7
15-19	63	34	65	42	97	107	204	17.1	24.6	14.7
20 - 29	133	21	111	56	102	161	263	21.94	15.24	25.17
20-24	46	16	69	37	65	106	171	15.9	11.7	15.6
25-29	32	5	42	19	37	55	92	10.0	3.7	9.5
30 - 39	60	17	77	24	69	101	170	12.45	12.13	17.45
30-34	39	6	42	19	21	61	82	5.9	4.4	9.5
35-39	21	11	35	11	32	46	78	5.7	7.9	7.9
40 - 49	24	11	30	26	35	56	91	4.90	7.95	6.97
40-44	11	8	17	9	19	26	45	2.9	5.6	3.9
45-49	13	3	13	11	16	24	40	3.5	2.2	2.9
50 - 59	16	4	27	6	22	33	57	4.08	2.96	5.12
50-54	6	2	16	5	10	21	31	2.1	1.5	3.6
55-59	10	2	11	3	12	14	26	2.4	1.5	2.5
60 and over	7	4	12	2	11	16	27	2.44	2.5	2.40
Not Recorded	2	1	5	1	3	4	7	0.4	0.72	.4

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TABLE 3

DISTRIBUTION OF POSITIVE CASES BY AGE AND SEX

San Marino-Rimini Enteric Outbreak
1944-1945

	CASES					PERCENT						
	FEMALES		Males	Females	Both Sexes	MALES		FEMALES		Males	Females	Both Sexes
Age	S.Marino	Rimini				S.Marino	Rimini	S.Marino	Rimini			
[illegible]	441	204	[illegible]	34	1132	100.00	100.00	100.00	100.00	[illegible]	100.00	[illegible]
[illegible]	57	25	69	82	171	18.17	15.96	12.92	12.45	17.52	12.72	14.02
[illegible]	--	--	--	--	--	--	--	--	--	--	--	--
[illegible]	16	7	21	23	44	4.9	2.1	3.6	3.4	4.1	3.6	[illegible]
[illegible]	41	16	68	59	127	13.9	13.6	9.3	8.6	13.4	9.1	11.0
[illegible]	121	74	180	195	375	33.65	42.06	27.40	36.16	30.47	30.24	32.46
[illegible]	56	32	69	85	171	16.00	17.4	12.7	1[illegible].7	16.4	13.6	14.[illegible]
[illegible]	65	42	97	107	204	17.1	24.6	14.7	20.6	19.1	16.6	17.7
[illegible]	111	50	102	161	263	21.94	15.24	25.17	24.52	20.12	24.96	22.[illegible]1
[illegible]	69	37	65	106	171	15.3	11.[illegible]	15.6	16.1	12.6	16.4	14.[illegible]
[illegible]	42	13	27	55	92	9.6	3.[illegible]	9.5	6.4	7.3	8.5	8.0
[illegible]	77	24	[illegible]	101	1[illegible]4	12.46	12.[illegible]3	17.45	11.76	1[illegible].42	15.[illegible]5	14.22
[illegible]	42	15	31	38	6[illegible]	[illegible]	4.4	9.5	6.1	6.1	6.5	7.5
[illegible]	35	11	32	4[illegible]	7[illegible]	3.7	7.3	7.9	5.4	5.3	7.1	6.8
[illegible]	30	20	35	50	85	7.50	7.99	6.09	9.79	6.90	7.75	7.36
[illegible]	17	9	19	26	45	2.9	3.8	3.9	4.4	3.7	4.0	3.9
[illegible]	13	11	16	24	4[illegible]	3.5	2.8	2.9	5.4	3.2	3.7	3.5
[illegible]	27	[illegible]	26	35	57	4.88	2.98	6.12	3.92	4.34	5.[illegible]	4.94
[illegible]	16	5	10	21	31	2.1	1.5	3.6	2.4	1.9	3.[illegible]	2.7
[illegible]	11	3	12	1[illegible]	2[illegible]	2.7	1.5	2.5	1.5	2.[illegible]	[illegible].2	2.3
[illegible]	15	2	1[illegible]	17	30	2.44	2.[illegible]	3.40	0.96	2.56	2.64	2.60
[illegible]	3	1	3	4	7	0.4[illegible]	0.72	0.6[illegible]	0.49	0.59	[illegible]. 2	0.65

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TABLE 4

DISTRIBUTION OF SAN MARINO CASES
BY NATIONALITY AND BY AGE AND SEX

San Marino-Rimini Metropolitan Area
1948-1965

Age Group	CASES						
	Total	San Marino		Italian		Total	San Marino Rate
		Males	Females	Males	Females		
Total, All Age Groups	610	265	265	104	155	100.0	100.0
Under 10	124	46	38	21	19	15.3	17.4
10 - 19	243	89	79	33	42	39.8	32.6
20 - 29	192	66	77	13	34	23.7	24.9
30 - 39	123	28	44	18	33	15.2	16.6
40 - 49	54	16	23	7	7	6.7	6.0
50 - 59	45	15	16	3	11	5.6	5.7
60 - 69	20	5	7	4	4	2.5	1.9
70 +	4	-	1	-	3	0.5	-
Not Determined	5	-	1	2	2	0.6	-

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TABLE 1

DISTRIBUTION OF SAN MARINO CASES
BY NATIONALITY AND BY AGE AND SEX

San Marino-Miami Enteric Outbreak
1944-1945

	CASES					PERCENT				
	TOTAL	San Marino		Italian		TOTAL	San Marino		Italian	
		Males	Females	Males	Females		Males	Females	Males	Females
Groups	810	255	286	104	155	100.1	100.3	100.2	100.3	100.1
	124	46	58	21	19	15.3	17.4	15.5	20.5	12.3
	243	89	79	33	42	30.0	35.6	27.6	31.8	27.1
	192	56	77	15	34	23.7	24.9	26.9	14.4	21.9
	123	28	44	18	33	15.2	10.6	15.4	17.3	21.3
	54	16	23	7	7	6.7	6.0	8.1	7.7	4.5
	45	15	16	3	11	5.6	5.7	5.6	2.9	7.1
	20	5	7	2	4	2.5	1.9	2.5	5.8	2.6
	4	-	1	-	3	0.5	-	0.4	-	1.9
Unknown	5	-	1	2	2	0.6	-	0.4	1.9	1.4

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Case studies of this group were made to determine whether the multiple household cases were contemporaneous or secondary in origin. Of the 50 household contemporaneous infection was indicated in 20 and secondary infection in 27. In the remaining one instance the household had a mixed infection of Typhoid and Paratyphoid.

Then for 31 or 9.1 percent of the Rieti Outbreak cases have been found to be eliminating organisms in repeated examinations of feces or urine. Of this number 19 were Typhoid Carrier and the remaining 12, Paratyphoid.

In five known instances carriers were involved in spreading infection to at least the other members of their family. In one case the carrier became ill in August, was hospitalized in San Marino and finally discharged as well. Other cases began to appear in this man's family in November involving 3 individuals. The carrier was admitted to hospital where a diagnosis was made of Typhoid Cystitis. Cultures of material removed from an abscess of the right testicle were positive for S. typhosa. Organisms were also isolated in the urine.

c. Age and Sex:

Young people were characteristically most often affected, approximately 75 percent of all cases having involved individuals over 10 and under 30 years of age. Slightly more than 35 percent of all positive cases reported were in the 10-19 age group.

Females were in excess in all age groups over 19 and as Table 3 shows also outnumbered males for the total experience.

Because reliable population data are not available a precise evaluation of age and sex differences is not possible. Such disproportion as is noted in the late may be due to factors such as:

(1) Fewer males in the Italian population at risk because of service in the Italian Army, being prisoners of war or having been taken by the Germans for forced labor.

(2) Possible immunity resulting from immunization received during service in the Italian Army.

(3) Greater exposure risk of females because they generally are the ones who nurse ill members of the family.

The factor of there being fewer Italian males at risk was evaluated on the basis of an analysis of the cases which developed in the Republic of San Marino and were reported there. These were classified as to whether they were Italian or San Marino citizens and by age and sex.

In five known instances carriers were involved in spreading infection to at least the other members of their family. In one case the carrier became ill in August, was hospitalized in San Marino and finally discharged as well. Other cases began to appear in this man's family in November involving 3 individuals. The carrier was admitted to hospital when a diagnosis was made of Typhoid Orchitis. Cultures of material removed from an abscess of the left testicle were positive for S. typhosa. Organisms were also isolated in the urine.

4. Age and Sex:

Young people were characteristically most often affected, approximately 50 percent of all cases having involved individuals over 10 and under 30 years of age. Slightly more than 50 percent of all positive cases reported were in the 10-19 age group.

Females were in excess in all age groups over 19 and as Table 3 shows also outnumbered males for the total experience.

Because reliable population data are not available a precise evaluation of age and sex differences is not possible. Such disproportion as is noted in the data may be due to factors such as:

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(3) Greater exposure risk of females because they generally are the ones who nurse ill members of the family.

The factor of there being fewer Italian males at risk was evaluated on the basis of an analysis of the cases which developed in the Republic of San Marino and were reported there. These were classified as to whether they were Italian or San Marino citizens and by age and sex.

Table 4 shows the distribution of these cases. 24.9 percent of the San Marino male cases were between the ages of 25 to 29 years. For Italy the figure was 14.4 percent. This would appear to be a significant difference. It therefore is not unlikely that part of the excess of females in the 20-29 group may be attributed to the hypothesis that there were fewer males at risk in this population fraction.

In general the data support the premise that females are exposed to greater risk of infection because they nurse other sick members of the family.

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TABLE 5

AGE SPECIFIC CASE FATALITY RATES *
SHOWING DISTRIBUTION OF DEATHS BY AGE AND SEX

San Bernardino-Riverside Inter
1946-1945

Age Group	Deaths					Age Sp	
	TOTAL	Death Rate		Recent		TOTAL	
		Males	Females	Males	Females		Ma
TOTAL, All Age Groups	93	29	32	15	17	6.1	
Under 10	7	4	1	-	2	4.1	
10-19	27	[illegible]	9	[illegible]	7	7.2	[illegible]
20-29	22	[illegible]	11	3	2	6.4	
30-39	14	[illegible]	5	2	2	8.5	1
40-49	12	[illegible]	3	2	2	14.1	2
50-59	7	[illegible]	3	*	1	12.3	1
60-69	4	1	-	2	1	13.9	1
70 and older	-	-	-	-	-	-	
Not Determined	-	-	-	-	-	-	

* Calculated on the basis of the number of deaths occurri
given age group of the total reported cases in that age

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TABLE 5

AGE SPECIFIC CASE FATALITY RATES *
SHOWING DISTRIBUTION OF DEATHS BY AGE AND SEX

San Marino-Rimini Enteric Outbreak
1944-1945

	Deaths					Age Specific Fatality Rate per 100				
	TOTAL	San Marino		Rimini		TOTAL	San Marino		Rimini	
		Males	Females	Males	Females		Males	Females	Males	Females
Age Groups	93	29	32	15	17	6.1	7.9	7.5	10.9	6.3
	7	4	1	-	2	4.1	5.9	1.[illegible]	-	6.5
	27	5	9	6	7	7.2	4.1	7.4	10.5	7.5
	22	6	11	3	2	6.4	7.4	9.9	14.6	4.0
	14	5	5	2	2	8.5	10.9	6.5	11.6	6.3
	12	5	3	2	2	14.1	20.8	10.0	18.2	10.0
	7	3	3	-	1	12.5	16.7	11.1	-	12.5
	4	1	-	2	1	19.3	11.2	-	50.0	50.0
	-	-	-	-	-	-	-	-	-	-
Number Unknown	-	-	-	-	-	-	-	-	-	-

* Calculated on the basis of the number of deaths occurring in a given age group of the total reported cases in that age group.

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3. Morbidity:

As of 20 February, ninety-three (93) deaths were reported, due to all causes, 8.1 percent of the positive cases. This fatality rate is within normal expectancy for typhoid fever outbreaks and the fact that the figure has been somewhat lowered by the mild character of the epidemic.

Approximately half of the deaths occurred in the two age groups 10-19 and 20-29. However age specific rates give a better perspective of case fatality as can be seen in Table 2 which shows a direct correlation of the morbidity rate with age. It should be pointed out that the rates are based upon a relatively small number of cases so that a discussion of produce misrepresentative rates.

4. CONTROL MEASURES:

When the presence of a serious outbreak endemic was recognized early in October 1944, control measures were undertaken by personnel from 2 Army and AMGOT. Still other Government organizations in the area, British and American Red Cross personnel that were particularly to assist with the reorganization of civilian hospitals.

An education was conducted by the Prefect that the Republic of San Marino is a neutral State, and all relations should be on an advisory character. It can be said that in all this work the Prefect of the Republic, Dr. Pasi Gualti-Willi, was very cooperative.

5. Case Finding and Reporting:

Case finding, epidemiological and epidemiological data were procured through case reports. Information was collected from the Prefect of Rimini, hospital and laboratory reports.

The data obtained from the study cases showed indicated that a number infected had returned within the Republic of San Marino and had first which were then appearing. Some those which had been infected in September. It was also quite clear that the cases had an immediate correlation to the poor sanitary conditions in the City of Rimini.

6. Hospital and Laboratory Facilities:

Army medical personnel took over the administration of the Civil Hospital in the City of Rimini, which was converted to an isolation hospital for contagious diseases. Italian physicians and nursing personnel

A proximately half of the deaths occurred in the two age groups 10-19 and 20-29. However age specific rates give a truer perspective of case fatality as may be seen in Table 1 which shows a direct correlation of the mortality rate with age. It should be pointed out that these rates are based upon a relatively small number of cases so that variations may produce disproportionate rates.

3. CONTROL MEASURES:

When the prospect of a second and epidemic outbreak was recognized early in October 1944, control measures were undertaken by personnel loaned by Army and Allied Military Government organizations in the area. Italian and American Red Cross personnel were used particularly to assist with the reestablishment of civilian hospitals.

The situation was somewhat complicated by the fact that the Republic of San Marino is a neutral State, and all relations with it had to be of an advisory character. It can be said that in all instances the Health Officer of the Republic, Dr. Enea Gozzi-Valli, was most cooperative.

a. Case Finding and Reporting:

Case cards containing essential epidemiological data were prepared for each case reported. Information was elicited from the patient or relatives, hospital and laboratory reports.

The data obtained from the early cases clearly indicated that a massive infection had occurred within the Republic of San Marino and the cases which were then appearing were those which had been infected in September. It was also quite clear that the cases had no immediate correlation to the prevailing sanitary conditions in the City of Rimini.

b. Hospital and Laboratory Facilities:

Army medical personnel took over the administration of the Civil Hospital in the City of Rimini, which was converted to an isolation facility for contagious diseases. Italian physicians and nursing personnel were used under the direction of the military staff.

Hospitalization of all known enteric cases was considered to be one of the more important features of the control program. In view of the fact that the initial cause of the outbreak no longer existed at the time control measures were undertaken, the primary essential was that of limiting the development of secondary cases.

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Of all the suspected enteric cases reported in Rimini Commune, all but ten were admitted to hospital. In the early days of the outbreak some of the cases were sent to Ancona for hospitalization. The mean time interval which elapsed between reported onset of illness and admission to hospital was 9.7 days with a standard deviation of 4.4 days. This is an interesting fact inasmuch as it indicates that a rather significant portion of the cases were removed to hospital before they had an opportunity to transmit the infection.

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It may also be of interest to note that the mean time interval between reported date of onset of illness and date of report of the case was 7.0 days ± 1.5, a fact which is indicative of the promptness with which reported cases were taken to hospital.

Civilian laboratory service was not established both in Rimini Commune and in San Marino. Formerly a branch laboratory of the Health Province Laboratory served the part of the Province in which the Commune of Rimini is located. The laboratory in the Republic though well equipped could not operate because of the lack of electricity.

The 2nd Mobile Bacteriology Laboratory (British) was set up in the area and performed the necessary laboratory examinations. Routine examinations of blood, feces and urine were made, resulting in 200 isolations; widals were used as a diagnostic criterion by the San Marino laboratory.

Three negative stool and urine cultures were required before a patient was discharged from hospital.

c. Immunization:

Immunization with TAB Vaccine was not undertaken on a large scale during the period of the outbreak. The evidence indicated that a large number of individuals had been collectively exposed several weeks before any control measures were undertaken. It was felt that mass immunization would be impractical because of the dispersal of contacts over an extensive area. This would require considerable extra personnel and in any case would not materially alter the course of the outbreak as much as prompt discovery and isolation of cases.

Furthermore there was discovered a feeling on the part of most of the Italian physicians in the area that immunization during an outbreak of typhoid fever was dangerous because of the so called "negative phase" phenomenon. Inasmuch as it was probable that a number of individuals already infected would become sick despite any inoculation received, it was felt that this might further prejudice public opinion against mass immunization at a later date.

However it was recommended that the physicians and other personnel working in the isolation hospital be immunized. Inoculations were also made available for case contacts and others who wished them. Early in January 1945 the Italian physician who was acting as Director of the Hospital, and two other members of the staff, a nurse and a clerk, developed Typhoid Fever. Only then was it discovered that despite the recommendation made, less than half of the hospital staff submitted to inoculation.

[illegible] were not to be declared in the case in

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examinations of blood, feces and urine were made, resulting in 287 isolations; widals were used as a diagnostic criterion by the San Marino laboratory.

Three negative stool and urine cultures were required before a patient was discharged from hospital.

c. Inoculation:

Inoculation with TAB Vaccine was not undertaken on a large scale during the period of the outbreak. The evidence indicated that a large number of individuals had been collectively exposed several weeks before any control measures were undertaken. It was felt that mass inoculation would be impractical because of the dispersal of contacts over an extensive area. This would require considerable extra personnel and in any case would not materially alter the course of the outbreak as much as prompt discovery and isolation of cases.

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A Spring inoculation program has been planned in the area to include 60,000 persons in Forlì and Ravenna Provinces. The program will be on a voluntary basis, except for food-handlers and others required by Italian law to be inoculated. The program has already started and judging from the numbers already done, should be successful.

The vaccine being used is Italian vaccine produced by SCLAVO and paid for by the two Provinces.

d. Environmental Sanitation:

Reference has already been made to the precarious state of sanitation in the area. The most serious situation was that in the City of

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Rimini which had been severely battered.

The Germans wrecked most water pumps had not been hidden previously by the civil water engineer. Bombing and shelling produced numerous breaks in the water mains and some 60 interruptions were found in the sewerage system.

What habitable buildings remained were soon crowded by civilians who returned after Rimini City was liberated. Allied troops were also billeted in the City, further contributing to crowding.

Orders were issued to prevent further ingress of civilians into the City unless it could be shown that adequate housing was available. Furthermore, on 26 October, the Republic of San Marino was placed "Out of Bounds" to everyone, military as well as civilians; no one could enter or leave without authority from the area commander. However, despite the precautions taken some movement did occur because of the practical difficulty of policing.

By December, Royal Army Engineers had succeeded in restoring a chlorinated water supply to the inhabited part of the City. Public latrines were built in strategic parts of the City under the direction of Deputy Assistant Director of Hygiene of the Area and the 19 Field Hygiene Unit. Street cleaning service was reactivated and refuse containers were distributed.

An extensive reconstruction project is now under way in Rimini City under AMG & Military Government direction, and the sewerage system is being repaired.

Water supply in the Republic of San Marino is still a problem because it has not yet been possible to restore electricity required to operate the water pumping machinery. Meanwhile water is supplied to those areas which are without, by water carts and containers. A limited quantity is being pumped to the City of San Marino by means of a hand operated pump.

It may be of interest to comment on the slightly exaggerated importance which was attached to disinfection by the civil health authorities, the apparent idea being to practically disinfect the town with creosol and lime. Limited supplies of creosol were made available to deal with the requirements of domiciliary disinfection.

Cesspools constituted another problem because the pumping apparatus customarily resorted to empty them had been put out of commission. Buckets were resorted to in the meantime when cesspools became full. The temptation to apply disinfectants such as creosol to disinfect cesspools was frequently encountered. This practice defeats the purpose of the cesspool because bacterial decomposition of wastes is desirable. Typhoid and Paratyphoid organisms are killed and are eliminated by the other more stable organisms normally present.

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the City unless it could be shown that alternate housing was available. Furthermore, on 26 October, the Republic of San Marino was placed "Out of Bounds" to everyone, military as well as civilians; no one could enter or leave without authority from the area commander. However, despite the precautions taken some movement did occur because of the practical difficulty of policing.

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Cesspools constituted another problem because the pumping apparatus customarily required to empty them had been put out of commission. Buckets were resorted to in the interim and more cesspools became full. The temptation to employ disinfectant such as creosol to disinfect cesspools was frequently encountered. This practice defeats the purpose of the cesspool because heat still the composition of waste is desirable. Typhoid and Para-typhoid organisms are suppressed and eliminated by the other more viable organisms generally present.

Environmental sanitation remains a serious problem. However, considerable progress is being made and the situation is now much more improved than was previously believed possible.

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6. SUMMARY AND CONCLUSIONS:

a. An outbreak of Typhoid and Paratyphoid Fever which developed in the San Marino - Rimini Commune area on the Adriatic coast of Italy during August and September 1944, resulted in 1152 known positive cases.

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b. The predisposing causes were extreme overcrowding of refugees and contact of many persons under incredibly bad sanitary conditions with individuals already ill.

c. On the basis of laboratory findings, typhoid infections were found to predominate.

d. Multiple household cases occurred in 36 instances involving 165 individuals, or 44 percent of all the positive cases reported in Rimini Commune. Females predominated in these household groups, aggregating almost 60 percent.

e. Carrier studies thus far made of the Rimini Commune cases have identified 31 individuals who are eliminating organisms, 19 Typhoid and 12 Paratyphoid.

f. The data appears to support the hypothesis that females were in excess over males for the reason that they are exposed to a greater risk of infection because they nurse the sick to a greater extent than do males.

g. The outbreak resulted in 33 known deaths giving a case fatality rate of 8.1 percent. There was a positive correlation with age.

h. Control measures were essentially those of case finding and hospitalization, the fundamental cause of the outbreak having resolved itself. It is believed that prompt isolation of suspected cases effectively limited the number of secondary cases which might otherwise have resulted.

i. The characteristic difficulties of lack of civilian hospital, laboratory and transport facilities were encountered. Eighth Army Medical Services rendered inestimable assistance.

BERNARD D. DAITZ,
Captain, Sanitary Corps, A.U.S.
Epidemiologist.

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