

PUBLIC HEALTH

Influenza Cases Increase

➤ INFLUENZA cases nearly doubled throughout the nation during the week ending Dec. 4, reports from state health officers to the U. S. Public Health Service show. The total number of cases reported was 4,484 as compared with 2,465 for the week ending Nov. 27.

The total number of cases reported probably does not nearly represent the actual number of cases. Reports on influenza are never as accurate as reports on other communicable diseases such as measles, diphtheria, scarlet fever and the like. The reason is that diagnosing influenza and distinguishing it from a bad cold is difficult.

During an epidemic many persons become influenza-conscious and more cases may be reported as influenza than otherwise would be. More persons are likely to call a doctor, fearing influenza. Doctors are so busy, during epidemics, that they may not get around to reporting cases promptly to the health department, when the epidemic is not of a quaran-

tinable disease such as scarlet fever or diphtheria.

In Washington, for example, the official report for the District of Columbia gives four cases of influenza. Unofficial estimates place the number as high as 8,000 for the same week, Dec. 4.

High figures on the official reports came from Texas, with 1,298; Virginia, 651; South Carolina, 453; Arizona, 313; and Colorado, 238.

New England and Middle Atlantic states apparently have not yet felt the epidemic. Highest number reported from these regions was 52 from Connecticut. The disease is not reportable in Massachusetts, New Hampshire, New York State exclusive of New York City, and Pennsylvania, but when it becomes epidemic these states start reporting cases. Of these states, Massachusetts reported one case, New York 14 and Pennsylvania five, during the week ending Dec. 4.

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caused the epidemics in 1936-1937 and 1938-1939. Another influenza virus, named B, caused an epidemic early in 1936 and another in 1940. At least one other influenza virus, and possibly more than one other, is believed to exist.

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ORDNANCE

New Model Jap Rifle Found Inferior to Garand

➤ JAPAN'S new infantry rifle, captured specimens of which have been received at the War Department, may be an advance over the nearly 40-year-old .25-caliber model it supersedes, but tests at the Aberdeen Proving Ground indicate that it is still far behind the Garand with which American forces are armed.

The new Japanese weapon is of the same caliber as the British Enfield, .303 inches; thus it is larger by a split hair's-breadth than the American .30 caliber small-arms. This gives the bullet better ballistic properties at medium and long ranges than the too-light .25-caliber projectile. However, the tests indicate that the Jap rifle's accuracy is not dependable at ranges of more than 350 yards. Also, the action is still of the hand-operated bolt type, making its fire much slower than that of the lightning-quick self-loading Garand.

Another Jap infantry weapon tested at Aberdeen is the light machine gun. Its rate of fire is very fast: it can empty its 30-shot magazine in three seconds. However, its lack of means for keeping up sustained fire for more than a three-second burst handicaps it in comparison with the belt-fed light machine gun used by American troops. Again, the Japanese light machine gun is accurate only at short ranges; at 500 yards and up its American "opposite number" beats it.

Ordnance Department officers and specialist troops at the proving ground have thus far tested out about 600,000 captured enemy weapons, representing approximately 1,100 separate types. Weapons are checked not only for such qualities as accuracy and rate of fire, but also for their effectiveness against American tanks and armored vehicles. After being tested, the weapons are sent to American training centers, so that our troops may get acquainted with enemy materiel before they have to oppose it in action.

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Caused by Type A Virus?

➤ THE PRESENT influenza epidemic may be due to the influenza A virus, it appears from studies reported by Miss Minnie Thigpen and James Crowley, of the influenza laboratory at the Minnesota Department of Health. (*Science*, Dec. 10)

They have been able to isolate and identify this virus, they report, from untreated, unfiltered throat washings, 20 of them collected in the current epidemic, by inoculation within the allantoic membrane of developing chick embryos. This is a new quick method of obtaining the virus from human patients.

Previously it was necessary to inject nose and throat secretions from humans into ferrets, and then inject their secretions into mice before the influenza virus itself could be isolated. Use of this new, quick method which seems likely to help speed diagnosis of the disease has also been reported by an Australian scientist, Dr. F. M. Burnet.

Identification of the virus as influenza A was made by the red cell agglutination-inhibition test devised by an American scientist, Dr. G. K. Hirst, at the Rockefeller Institute.

Influenza A virus is said to have

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