typhoid fever occurring in epidemic proportions. Nearly all the cases have been traced to either chronic carriers or to the close association with acute cases of this disease.

Diphtheria—Diphtheria, which so many years ago was the dread of mothers, has now declined to an almost insignificant position among the morbidity rates of the State. There were 98 cases reported and 5 deaths. The investigation of many of the deaths has revealed that these cases were not brought to the attention of the attending physician early enough for antitoxin to be effective. The program of immunizations against this disease has resulted in approximately 90 per cent of the school children in the counties of Maryland being protected. This activity, with the careful isolation of acute cases, is responsible for the low morbidity rate.

Tuberculosis—Tuberculosis continues to occupy an important place in the organized public health program. Clinics are conducted in all the counties of Maryland and X-ray facilities are now provided in the clinics. In the 284 clinics held during the year, there was an attendance of 5,000 patients. There were 629 patients hospitalized in the several State Tuberculosis Sanatoria from the counties of Maryland.

Venereal Diseases—The venereal disease program has been developed to a marked degree of efficiency and the public clinics conducted by the State Department of Health have resulted in more than 70,000 treatments for cases of syphilis during the year. Six hundred and seventeen clinics were held during the year, with an attendance of 85,230. The attendance at the venereal disease clinics has materially increased due to the fact that in several localities transportation to and from the clinics has been furnished by the Health Department.

Pneumonia—Your body in 1939 appropriated \$10,000.00 for the control of pneumonia and the State Board of Health appointed a Committee to formulate a program for this activity. During the winter of 1939-40 the pneumonia control program was received most favorably by the practitioners throughout the counties and in cooperation with the County Health Officer and public health nurses, it was possible to distribute sulfapyridine to between seven and eight hundred patients who were unable to purchase this drug. The program included not only the free distribution of drugs and serum, but also systematic laboratory tests as a means of checking any untoward effects of the drug.

During the first year of the use of sulfapyridine in the treatment of pneumonia, the data covering last winter shows that fewer persons died of pneumonia in the counties of Maryland than in any of the five previous winters. The death rate per 100,000 population dropped from a five-year average of 108.5 to 80.7, while the case fatality rate (deaths per 100 cases) fell from a five-year average of 30.7 to 17.9 per cent. These results are encouraging and because of them the State Department of Health will continue to distribute sulfapyridine and sulfathiazole (a newer preparation) in the counties of Maryland for the treatment of pneumonia in patients who are unable to pay for the drug.

Service for Crippled Children—Sixty-five clinics were conducted in the counties of Maryland during the past year and at the present time there are 2,700 crippled children on the official State register, all of whom have received some aid. During the year 28,132 hospital days were provided and the ortho-