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WAR DEPARTMENT
Army Service Forces
~~SERVICES OF SUPPLY~~

OFFICE OF THE SURGEON GENERAL

WASHINGTON

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EO 11652
Authority NND 743082
By EAC NARS, Date 7/1/74

13 August 1943

MEMORANDUM for Mr. John J. McCloy, Assistant Secretary of War

Subject: Yellow fever in the Territory of Hawaii

1. Reference is made to General R. C. Richardson's letter of 20 July 1943 concerning the vaccination of the military population against yellow fever. For your information, steps have been taken to place 620,000 doses of yellow fever vaccine in the Hawaiian Department. It is believed that a portion of this material has already been received and is in safe storage. This office is satisfied that the storage facilities described in the attached letter are adequate for the purpose of maintaining yellow fever vaccine under proper refrigeration.

2. With respect to the necessity for immediate immunization with yellow fever vaccine of all military personnel in the Territory, it is noted that General Richardson is of the opinion that this is unnecessary. This opinion is apparently based upon the belief that all of the conditions necessary for rapid transmission of introduced yellow fever do not, at this time, exist in the Territory of Hawaii. It is agreed that this may be so. However, it is the considered opinion of The Surgeon General that every available means should be taken to eliminate completely all chances of the development of an outbreak of yellow fever in the military personnel who would, of necessity, have to meet any military emergency which might arise.

It is true that with proper preliminary organization and with the ready availability of yellow fever vaccine, mass vaccination, not only of the military population but also of the civilian population, could be effected on relatively short notice. It should be considered, however, that if yellow fever were used offensively, such tactics would probably coincide with, or precede, an actual attack by a period of time not greater than the incubation period of the disease. Not the least of the value afforded the enemy by such a procedure would be the distraction and confusion caused by emergency preventive measures. Such distraction could be obviated in large part by immediate vaccination of all military personnel.



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ALL COMMUNICATIONS SHOULD BE ADDRESSED TO "THE SURGEON GENERAL, U. S. ARMY, WASHINGTON, D. C."

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3. The Surgeon General does not concur in General Richardson's opinion that the present low Aedes index is a justification for failure to take all possible steps for the eradication of this vector. On the contrary, it is felt that control measures should be instituted at once and plans made for their continuation.

4. General Richardson wishes to be assured that the yellow fever vaccine in current use does not have icterogenic properties. This assurance can be given, as there is now a sufficient weight of evidence to indicate that the difficulty experienced by the Army during the forepart of 1942 has been completely overcome by certain changes in the method of vaccine production by eliminating human serum from the vaccine. All of the present evidence indicates that an unknown icterogenic factor was present in the human serum previously used in the manufacture of the "serum-base vaccine". Since the elimination of this serum and the adoption of "aqueous-base" vaccine in May, 1942, jaundice has not occurred as a complication of yellow fever vaccination.

In addition to the many thousands of doses administered to Army personnel, the Navy has vaccinated at least 500,000 individuals with aqueous-base vaccine in the last 15 months without untoward effects. In corroboration of the above, there is attached hereto a table showing the incidence of jaundice reported from 1931 to July 1943. It should be noted that the high rates experienced in the early spring and summer of 1942 corresponded with the administration of certain lots of serum-base vaccine, and that the admission rates for jaundice reached the normal level in November, 1942, and have continued at this level.

5. In view of the above, it is recommended that a letter be addressed to General Richardson, urging that the Hawaiian authorities reconsider the matter with a view to taking all possible steps for the prevention of the introduction of yellow fever into the Territory of Hawaii.


JAMES S. SIMMONS

Brig. General, A. U. S.

Incl.-2

#1 Jaundice rates 1931-43

#2 Jaundice rates by months 1941-43

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JAUNDICE, U. S. ARMY

Rates per 1000 per annum, 1931-1943

<u>Year</u>	<u>Rate/1000/annum</u>
1931	2.04
1932	2.28
1933	1.80
1934	1.80
1935	1.68
1936	1.56
1937	1.44
1938	1.68
1939	1.92
1940	1.56
1941	1.20
1942	15.96
1943 (Jan.-July U.S. only)	0.52

Note: Since the incidence of jaundice usually reaches its high point during the fall of the year, it may be expected that the annual rate for 1943 will increase during September, October, November and possibly December, and may closely approximate the annual rates of the years 1931-1941.

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JAUNDICE, U. S. ARMY

Annual rates by months, January 1941 to July 1943

<u>Month</u>	<u>Rate/1000/annum</u>		
	<u>1941</u>	<u>1942</u>	<u>1943</u>
Jan.	1.32	.60	.70
Feb.	1.08	.48	.70
Mar.	1.08	11.04	.55
Apr.	.72	27.12	.62
May	.96	41.28	.62
June	1.08	62.64	.51
July	1.20	40.92	.57
Aug.	1.08	15.36	
Sept.	1.44	4.56	
Oct.	1.68	2.90	
Nov.	1.32	1.32	
Dec.	1.32	1.08	

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E.O. 11552, Sec. 2(c) and 5(2) or (B)

Authority **NND 740062**By **ENC** NARS, Date **7/1/74**

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