N° 1793.

AFGHANISTAN, ALBANIE,
ALLEMAGNE,
ARGENTINE, AUTRICHE, etc.

Convention sanitaire internationale,
avec protocole de signature. Signés
à Paris, le 21 juin 1926.

AFGHANISTAN, ALBANIA,
GERMANY,
ARGENTINE, AUSTRIA, etc.

International Sanitary Convention,
with Protocol of Signature. Signed
at Paris, June 21, 1926.
1 TRADUCTION. — TRANSLATION.

No. 1793. — INTERNATIONAL SANITARY CONVENTION ². SIGNED AT PARIS, JUNE 21, 1926.

French official text communicated by the Minister for Foreign Affairs of the French Republic. The registration of this Convention took place July 18, 1928. This Convention was transmitted to the Secretariat by the Department of State of the Government of the United States of America, October 3, 1928.

His Majesty the King of Afghanistan, the President of the Republic of Albania, the President of the German Reich, the President of the Argentine Nation, the Federal President of the Republic of Austria, His Majesty the King of the Belgians, the President of the Republic of Brazil, His Majesty the King of the Bulgarians, the President of the Republic of Chili, the President of the Republic of China, the President of the Republic of Colombia, the President of the Republic of Cuba, His Majesty the King of Denmark, the President of the Dominican Republic, His Majesty the King of Egypt, the President of the Republic of Ecuador, His Majesty the King of Spain, the President of the United States of America, Her Majesty the Queen of the

1 Communique par le Ministère des Affaires étrangères de Sa Majesté britannique.
1 Communicated by His Britannic Majesty’s Foreign Office.

1 Deposit of Ratifications:

Belgium .................................................. Paris, March 10, 1928.
Spain .................................................... Paris, March 10, 1928.

The instrument of ratification of His Majesty the King of Spain contains the following reservations:

First reservation to Article 12 of the Convention:

“ The Government of His Catholic Majesty declares that the ratification of the International Sanitary Convention is not to be construed to mean that Spain recognises a régime or entity acting as Government of a signatory or adhering Power when that régime or entity is not recognised by Spain as the Government of that Power; it declares, moreover, that the participation of Spain in this International Sanitary Convention does not involve any contractual obligation on the part of Spain to a signatory or adhering Power represented by a régime or entity which Spain does not recognise as representing the Government of that Power, until it is represented by a Government recognised by Spain.”

Second reservation:

“ The Government of His Catholic Majesty reserves to itself the right to decide whether from the standpoint of the measures to be applied, a foreign district is to be considered as infected, and to decide what measures shall be applied to arrival in its own ports under special circumstances.”

Reservation to Article 49 of the Convention:

“ The Government of His Catholic Majesty, while approving in principle the recommendations of Article 49 of the Convention, and being desirous of arriving at the free issue of bills of health and the reduction of fees for consular visas on the said bills of health, subject to reciprocity, in order that they may not represent more than the cost of the service in question, is obliged to point out that for the moment
the legislation in force in Spain does not permit of such concessions, which in any case can only be granted in conformity with Spanish legislation."

"It is further declared that the instrument of ratification of His Catholic Majesty does not apply to the Spanish territories of the Gulf of Guinea, which will be the object of a special accession, in conformity with Articles 171 and 172 of the Convention, when the health measures stipulated have been decreed in respect of these territories."

France. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Paris, March 10, 1928.

In conformity with Article 172 of the Convention, the instrument of ratification of the President of the French Republic states that the latter applies:

"To France, Algeria, French West Africa, French East Africa, the French colonies and protectorates in Indo-China, all the other French colonies and possessions, the mandated States of Syria, the Grand Lebanon, the Alouites and the Jebel-Druze and the mandated territories of Togoland and the Cameroons."

Great Britain. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Paris, March 10, 1928.

In conformity with Article 172 of the Convention, the instrument of ratification of His Majesty the King of Great Britain and Ireland, and of the British Dominions beyond the Seas, Emperor of India, states that these ratifications apply:

(Texte officiel. — Official Text.)

"Only to Great Britain and Northern Ireland, Our Dominion of New Zealand (including the mandated territory of Western Samoa) and Our Union of South Africa (but not the mandated territory of South-West Africa); without prejudice, however, to Our right to ratify subsequently in respect of Our Dominion of Canada, Our Commonwealth of Australia and Our Empire of India, or to Our right of subsequent accession in respect of Our Dominions, Colonies, Possessions, or territories under mandate thus excluded from this Ratification.

Monaco . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Paris, March 10, 1928.

Sudan . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Paris, March 10, 1928.

United States of America . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Paris, May 22, 1928.

(Texte officiel. — Official Text.)

(1) The ratification of this International Sanitary Convention is not to be construed to mean that the United States of America recognizes a régime or entity acting as government of a signatory or adhering power when that régime or entity is not recognized by the United States as the government of that power.

(2) The participation of the United States of America in this International Sanitary Convention does not involve any contractual obligation on the part of the United States to a signatory or adhering power represented by a régime or entity which the United States does not recognize as representing the government of that power until it is represented by a government recognized by the United States.

(3) The Government of the United States reserves to itself the right to decide whether from the standpoint of the measures to be applied a foreign district is to be considered as infected and to decide what measures shall be applied to arrive in its own ports under special circumstances."

Czechoslovakia . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . March 28, 1928.

Morocco.

Tunis.

Roumania.

No. 1793
BLIC OF MEXICO, HIS SERENE HIGHNESS THE PRINCE OF MONACO, HIS MAJESTY THE KING OF
NORWAY, THE PRESIDENT OF THE REPUBLIC OF PARAGUAY, HER MAJESTY THE QUEEN OF THE
NETHERLANDS, THE PRESIDENT OF THE REPUBLIC OF PERU, HIS MAJESTY THE SHAH OF PERSIA,
THE PRESIDENT OF THE REPUBLIC OF POLAND, THE PRESIDENT OF THE PORTUGUESE REPUBLIC,
HIS MAJESTY THE KING OF ROUMANIA, THE CAPTAINS-REGENT OF SAN MARINO, HIS MAJESTY THE
KING OF THE SERBS, CROATS AND SLOVENES, THE PRESIDENT OF THE REPUBLIC OF SALVADOR,
FEDERAL COUNCIL, THE PRESIDENT OF THE REPUBLIC OF CZECHOSLOVAKIA, HIS HIGHNESS THE BEY
OF TUNIS, THE PRESIDENT OF THE TURKISH REPUBLIC, THE CENTRAL EXECUTIVE COMMITTEE
OF THE UNION OF SOVIET SOCIALIST REPUBLICS, THE PRESIDENT OF THE REPUBLIC OF URUGUAY,
AND THE PRESIDENT OF THE REPUBLIC OF VENEZUELA:

Having decided to modify the provisions of the Sanitary Convention\(^1\) signed at Paris on
January 17, 1912, in the light of the latest scientific results and medical experience, to establish
international regulations with regard to typhus and smallpox, and to extend as far as possible
the scope of the principles which have inspired international sanitary regulations, have decided
to conclude a convention for this purpose, and have named as their Plenipotentiaries:

**His Majesty the King of Afghanistan:**
Isambek Khoudoia Khan, Secretary of the Legation of Afghanistan in Paris.

**The President of the Republic of Albania:**
Dr. Osman, Director of the Hospital of Tirana.

**The President of the German Reich:**
M. Franoux, Privy Counsellor of Legation at the German Embassy in Paris;
Dr. Hamel, Counsellor in the Imperial Ministry of the Interior.

**The President of the Argentine Nation:**
M. Federico Alvarez de Toledo, Argentine Minister at Paris;
Dr. Araoz Alfaro, President of the Department of Health;
M. Manuel Carbonnel, Professor of Hygiene in the Faculty of Medicine of Buenos-Aires.

**The Federal President of the Republic of Austria:**
M. Alfred Grunberger, Austrian Minister at Paris.

**His Majesty the King of the Belgians:**
M. Velghe, Secretary-General of the Ministry of the Interior and of Health.

**The President of the Republic of the United States of Brazil:**
Professor Dr. Carlos Chagas, Director-General of the National Department of Public
Health, Director of the Oswaldo Cruz Institute;
Dr. Gilberto Moura Costa.

**His Majesty the King of the Bulgarians:**
M. Morfoff, Bulgarian Minister in Paris;
Dr. Tochko Petroff, Professor in the Faculty of Medicine of Sofia.

**The President of the Republic of Chili:**
M. Armando Quezada, Chilian Minister in Paris;
Dr. Emilio Aldunate, Professor in the Faculty of Medicine of Chili;
Dr. J. Rodriguez Barros, Professor in the Faculty of Medicine of Chili.

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\(^1\) Vol. IV, page 281; and Vol. XXIV, page 150, of this Series.
THE PRESIDENT OF THE REPUBLIC OF CHINA:
General Yao Si-Kiou, Military Attaché in Paris;
Dr. Scie Ton-Fa, Special Secretary in the Chinese Legation in Paris.

THE PRESIDENT OF THE REPUBLIC OF COLOMBIA:
Dr. Miguel Jiménez Lopez, Professor in the Faculty of Medicine of Bogota, Minister Plenipotentiary of Colombia at Berlin.

THE PRESIDENT OF THE REPUBLIC OF CUBA:
M. Ramiro Hernandez Portela, Counsellor of the Legation of Cuba at Paris;
Dr. Mario Lебredo, Director of "Las Animas" Hospital.

HIS MAJESTY THE KING OF DENMARK:
Dr. Th. Madsen, Director of the State Serums Institute;
M. I. A. Korbing, Director of the Society of United Shipowners.

THE PRESIDENT OF THE REPUBLIC OF POLAND, FOR THE FREE CITY OF DANTZIG:
Dr. Witold Chodzko, former Minister of Health;
Dr. Carl Stade, State Counsellor of the Senate of the Free City of Dantzig.

THE PRESIDENT OF THE DOMINICAN REPUBLIC:
Dr. Betances, Professor in the Faculty of Medicine of Santo Domingo.

HIS MAJESTY THE KING OF EGYPT:
Fakhry Pasha, Egyptian Minister in Paris;
Major Charles P. Thomson, D.S.O., President of the Sanitary, Maritime and Quarantine Board of Egypt;
Dr. Mohamed Abd El Salam El Guindy Bey, Second Secretary of the Egyptian Legation in Brussels, Delegate of the Egyptian Government to the Committee of the "Office International d'Hygiène publique".

THE PRESIDENT OF THE REPUBLIC OF ECUADOR:
Dr. J. Illingouth Ycaza.

HIS MAJESTY THE KING OF SPAIN:
The Marquis de Faura, Minister, Counsellor of the Spanish Embassy in Paris;
Dr. Francisco Murillo y Palacios, Director-General of Health in Spain.

THE PRESIDENT OF THE UNITED STATES OF AMERICA:
Dr. H. S. Cumming, Surgeon-General, Public Health Service;
Dr. Taliaferro Clark, Senior Surgeon, Public Health Service;
Dr. W. W. King, Surgeon, Public Health Service.

HER MAJESTY THE QUEEN OF THE KINGS OF ABYSSINIA AND HIS IMPERIAL AND ROYAL HIGHNESS THE HEIR APPARENT AND REGENT OF THE EMPIRE:
Count Lagarde, Duc d'Entotto, Minister Plenipotentiary.

THE PRESIDENT OF THE REPUBLIC OF FINLAND:
M. Charles Enckell, Finnish Minister in Paris;
Dr. Oswald Streng, Professor in the University of Helsingfors.
The President of the French Republic:

His Excellency M. Camille Barrère, Ambassador of France;
M. Harismendy, Minister Plenipotentiary, Assistant Director in the Ministry for Foreign Affairs;
M. de Navailles, Assistant Director in the Ministry for Foreign Affairs;
Dr. Calmette, Assistant Director of the Pasteur Institute;
Dr. Léon Bernard, Professor in the Faculty of Medicine of Paris.

For Algeria:

Dr. Lucien Raynaud, Inspector-General of Health Services in Algeria.

For French Western Africa:

Dr. Paul Gouzien, Medical Inspector-General of Colonial Troops.

For French Eastern Africa:

Dr. Thiroux, Medical Inspector of Colonial Troops.

For French Indo-China:

Dr. L'Herminier, Delegate of Indo-China on the Consultative Committee of the Eastern Bureau of the League of Nations;
Dr. Noël Bernard, Director of the Pasteur Institute of Indo-China.

For the States of Syria, of Great Lebanon, of the Alouites and of the Jebel-Druze:

M. Harismendy, Minister Plenipotentiary, Assistant Director in the Ministry for Foreign Affairs;
Dr. Delmas.

For all other Colonies, Protectorates, Possessions and Territories under French Mandate:

Dr. Audibert, Inspector-General of the Health Service of the Ministry of the Colonies.

His Majesty the King of the United Kingdom of Great Britain and Ireland and of the British Dominions beyond the Seas, Emperor of India:

Sir George Seaton Buchanan, Kt., C. B., M. D., Senior Medical Officer, Ministry of Health;
Mr. John Murray, C. M. G., Counsellor in the Foreign Office.

For the Dominion of Canada:

Dr. John Andrew Amyot, C. M. G., M. B., Deputy Minister of Health of the Dominion of Canada.

For the Commonwealth of Australia:

Dr. William Campbell Sawers, D. S. O., M. B., Medical Officer in the Ministry of Health.

For the Dominion of New Zealand:

Lieutenant-Colonel Sydney Price James, M. D.

For India:

Mr. David Thomas Chadwick, C. S. I., C. I. E., Secretary of the Government of India in the Ministry of Commerce.

For the Union of South Africa:

Dr. Philip Stock, C. B., C. B. E., Delegate to the Committee of the "Office International d'Hygiène publique".
THE PRESIDENT OF THE REPUBLIC OF GREECE:
M. Al. C. Carapanos, Minister in Paris;
Dr. Matarangas Gérassimos.

THE PRESIDENT OF THE REPUBLIC OF GUATEMALA:
Dr. Francisco A. Figueroa, Chargé d'Affaires at Paris.

THE PRESIDENT OF THE REPUBLIC OF HAITI:
Dr. Georges Audain.

HIS MAJESTY THE KING OF THE HEDJAZ:
Dr. Mahmoud Hamoudé, Director-General of Public Health.

THE PRESIDENT OF THE REPUBLIC OF HONDURAS:
Dr. Rubén Audino-Aguilar, Chargé d'Affaires in Paris.

HIS SERENE HIGHNESS THE REGENT OF THE KINGDOM OF HUNGARY:
Dr. Charles Grosch, Counsellor in the Ministry of Social Insurance.

HIS MAJESTY THE KING OF ITALY:
Dr. Albert Lutrario, Prefect, 1st Class;
Dr. Giovanni Vittorio Repetti, Surgeon-General of the Italian Royal Navy, Sanitary Director of the General Commissariat of Emigration;
Port-Colonel Odoardo Huetter, Commander of the Port of Venice;
M. Guido Rocco, First Secretary of the Italian Embassy in Paris;
Dr. Cancellière, Vice-Prefect, 1st Class;
Dr. Druetti, Sanitary Delegate Abroad.

HIS MAJESTY THE EMPEROR OF JAPAN:
M. Hajime Matsushima, Counsellor of Embassy;
Dr. Mitsuzo Tsurumi, Delegate of Japan to the Committee of the "Office International d'Hygiène publique".

THE PRESIDENT OF THE REPUBLIC OF LIBERIA:
Baron R. A. L. Lehmann, Liberian Minister in Paris;
M. N. Ooms, First Secretary of the Legation.

THE PRESIDENT OF THE REPUBLIC OF LITHUANIA:
Dr. Pranas Vaiciuška, Lieutenant-General (Medical Reserve), in charge of classes at the University of Kaunas, Chief Medical Officer of the City of Kaunas.

HER ROYAL HIGHNESS THE GRAND DUCHESS OF LUXEMBOURG:
Dr. Praum, Director of the Bacteriological Laboratory of Luxemburg.

HIS MAJESTY THE SULTAN OF MOROCCO:
M. Harismendy, Minister Plenipotentiary, Assistant Director in the Ministry for Foreign Affairs;
Dr. Lucien Raynaud, Inspector-General of the Health Services of Algeria.

THE PRESIDENT OF THE REPUBLIC OF MEXICO:
Dr. Raphaël Cabrera, Mexican Minister in Brussels.

HIS SERENE HIGHNESS THE PRINCE OF MONACO:
M. Roussel-Dessierres, Secretary of State of His Serene Highness the Prince of Monaco;
Dr. Marsan, Director of the Health Service of the Principality.
His Majesty the King of Norway:
M. Sigurd Bentzon, Counsellor of the Norwegian Legation in Paris;
Dr. H. Mathias Gram, Director-General of the Sanitary Administration.

The President of the Republic of Paraguay:
Dr. R. V. Caballero, Chargé d’Affaires of Paraguay in France.

Her Majesty the Queen of the Netherlands:
M. Doude van Troostwyk, Netherlands Minister in Berne;
Dr. N. M. Josephus Jitta, President of the Health Council;
Dr. De Vogel, Former Chief Inspector of the Sanitary Service in the Dutch East Indies;
M. van der Plas, Consul of the Netherlands in Jeddah.

The President of the Republic of Peru:
Dr. Pablo S. Mimbela, Minister Plenipotentiary of Peru in Berne.

His Majesty the Shah of Persia:
Dr. Ali-Khan Partow-Aazam, former Assistant Secretary of the Ministry of Public Instruction, Vice-President of the Sanitary Council, and Director of the Imperial Hospital;
Dr. Mansour-Charif, former Physician of the Royal Family.

The President of the Republic of Poland:
Dr. Witold Chodzko, Former Minister of Health;
M. Taylor, Assistant Chief of the Treaty Department.

The President of the Portuguese Republic:
Professor Ricardo Jorge, Director-General of Public Health.

His Majesty the King of Roumania:
Dr. Jean Cantacuzene, Professor in the Faculty of Medicine of Bucharest.

The Captains-Regent of San Marino:
Dr. Guelpa.

The President of the Republic of Salvador:
Professor Lardé-Arthès.

His Majesty the King of the Serbs, Croats and Slovenes:
M. Miroslav Spalaičovitch, Minister Plenipotentiary in Paris.

The Governor-General Representing the Sovereign Authority of the Soudan:
Dr. Oliver Francis Haynes Atkey, M.B., F.R.C.S., Director of the Medical Service of the Soudan.

The Swiss Federal Council:
M. Alphonse Dunant, Swiss Minister in Paris;
Dr. Carrière, Director of the Federal Service of Public Health.

The President of the Republic of Czechoslovakia:
Dr. Ladislav Prochazka, Chief of the Health Services of the City of Prague.

His Highness the Bey of Tunis:
M. de Navailles, Assistant Director in the Ministry for Foreign Affairs.
THE PRESIDENT OF THE TURKISH REPUBLIC:
His Excellency Aly Fethi Bey, Turkish Ambassador at Paris.

THE CENTRAL EXECUTIVE COMMITTEE OF THE UNION OF SOVIET SOCIALIST REPUBLICS:
Professor Nicolas Semachko, Member of the Central Executive Committee of the Union of Soviet Socialist Republics, People's Commissary for Public Health of the Russian Soviet Socialist Federal Republic;
M. Jacques Davtian, Counsellor of the Embassy of the Union of Soviet Socialist Republics in Paris;
M. Vladimir Egoriew, Assistant Director of the People's Commissariat for Foreign Affairs;
Dr. Ilia Mamoulia, Member of the Central Executive Committee of the Soviet Socialist Republic of Georgia;
Dr. Leon Bronstein, of the People's Commissariat for Public Health of the Soviet Socialist Republic of the Ukraine;
Dr. Oganes Mebournotoff, Member of the College of the People's Commissariat for Public Health of the Soviet Socialist Republic of Uzbekistan;
Dr. Nicolas Freyberg, Counsellor of the People's Commissariat for Public Health of the Russian Soviet Socialist Federal Republic;
Dr. Alexis Syssine, Chief of the Sanitary and Epidemiological Department of the People's Commissariat for Public Health of the Russian Soviet Socialist Federal Republic, Professor at the University.

THE PRESIDENT OF THE REPUBLIC OF URUGUAY:

THE PRESIDENT OF THE REPUBLIC OF VENEZUELA:
M. José Ignacio Cárdenas, Minister of Venezuela at Madrid and The Hague.

Who, having deposited their full powers, found in good and due form, have agreed on the following Articles:

PRELIMINARY PROVISION.

For the purpose of this Convention the High Contracting Parties adopt the following definitions:

1. The words local area denote a well-defined area, such as a province, a government, a district, a department, a canton, an island, a commune, a town, a quarter of a town, a village, a port, an agglomeration, etc., whatever may be the extent and population of such areas.

2. The word observation signifies the isolation of persons, whether on board ship or at a sanitary station before they obtain free pratique.
The word surveillance means that persons are not isolated, that they receive free pratique immediately, but the authorities of the several places whether they are bound are informed of their coming, and they are subjected to a medical examination with a view to ascertaining their state of health.

3. The word crew includes any person who is not on board for the sole purpose of travelling from one country to another, but who is employed in some way in the ship's service or by persons on board or in connection with the cargo.

4. The word day means an interval of twenty-four hours.
PART I.

GENERAL PROVISIONS.

CHAPTER I.

PROVISIONS TO BE OBSERVED BY THE GOVERNMENTS OF COUNTRIES PARTIES TO THIS CONVENTION ON THE APPEARANCE IN THEIR TERRITORY OF PLAGUE, CHOLERA, YELLOW FEVER OR CERTAIN OTHER COMMUNICABLE DISEASES.

SECTION I. — Notification and subsequent Communications to other Countries.

Article 1.

Every Government must immediately notify to the other Governments and, at the same time to the Office International d’Hygiène publique.

(1) The first recognised case of plague, cholera or yellow fever found in its territory.

(2) The first recognised case of plague, cholera or yellow fever which occurs outside the limits of local areas already affected.

(3) The existence of an epidemic of typhus or of smallpox.

Article 2.

Every notification prescribed in Article 1 shall be accompanied, or very promptly followed, by detailed information as to:

(1) The place where the disease has appeared;

(2) The date of its appearance, its source and its type;

(3) The number of known cases and deaths;

(4) The extent of the local area or areas affected;

(5) In the case of plague, the presence of that disease or of unusual mortality among rodents;

(6) In the case of cholera, the number of germ carriers when any have been discovered;

(7) In the case of yellow fever, the presence and relative prevalence (index) of Stegomyia calopus (Aedes Egypti);

(8) The measures taken.

Article 3.

The notifications prescribed in Articles 1 and 2 shall be supplied to the Diplomatic Missions, or, failing them, to the Consuls in the capital of the infected country, and shall be held at the disposal of consular representatives established in its territory.

These notifications shall also be addressed to the Office International d’Hygiène Publique, which shall communicate them immediately to all Diplomatic Missions, or, failing them, to the Consulates in Paris, as well as to the principal public health authorities of the participating countries. Those prescribed under Article 1 shall be addressed by telegram.

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The telegrams addressed by the Office International d'Hygiène Publique to the Governments of countries parties to this Convention or to the principal public health authorities of these countries, and the telegrams transmitted by these Governments and by these authorities under this Convention, are classed as Government telegrams, and are entitled to the priority accorded to such telegrams, by Article 5 of the International Telegraphic Convention \footnote{Vol. LVII, page 201, of this Series.} of the 10th to 22nd July, 1875.

\textit{Article 4.}

The notification and the information prescribed by Articles 1 and 2 shall be followed by subsequent communications furnished regularly to the Office International d'Hygiène Publique, so as to keep the Governments informed of the course of the epidemic.

These communications shall be as frequent and complete as possible, and as regards the number of cases and deaths shall be made at least once a week; they shall indicate, in particular, the precautions taken to prevent the spread of the disease, and shall set out with precision the measures adopted in the case of out-going vessels to prevent exportation of the disease, and especially the measures taken with regard to rodents or insects.

\textit{Article 5.}

Governments undertake to reply to any request for information which may be made to them by the Office International d'Hygiène Publique in regard to the epidemic diseases mentioned in the Convention, which occur in their territory, and in regard to circumstances likely to affect the transmission of these diseases from one country to another.

\textit{Article 6.}

Since rats \footnote{The provisions of this Convention regarding rats are applicable to the case of other rodents, and in general to other animals known to be the means of spreading plague.} are the principal agents by which bubonic plague is spread, Governments undertake to make use of all means in their power to diminish this danger and to keep themselves regularly informed of the condition of the rats in their ports, as regards plague infection, by frequent and systematic examinations: in particular, to carry out systematically the bacteriological examination of rats in every plague-infected area, during a period of six months at least from the finding of the last plague-infected rat. The methods and the results of these examinations shall be communicated in ordinary circumstances at regular intervals, and in the case of plague, every month, to the Office International d'Hygiène Publique in order that Governments may be kept regularly informed by that Office of the condition of ports in regard to plague amongst rats.

On the first discovery of rat plague on land, in a port free from infection during the previous six months, the communications shall be sent by the most rapid method.

\textit{Article 7.}

In order to facilitate the fulfilment of its duties under this Convention, and having regard to the benefits derived from the information furnished by the epidemiological intelligence service of the League of Nations, including its Eastern Bureau at Singapore and other analogous bureaux, as well as by the Pan-American Sanitary Bureau, the Office International d'Hygiène Publique is empowered to make necessary arrangements with the Health Committee of the League of Nations, as well as with the Pan-American Sanitary Bureau and other similar organisations.
It remains understood that the relations established under the above-mentioned arrangements will not involve any derogation from the provisions of the Convention of Rome\(^1\) of December 9, 1907, and will not have the result of substituting any other sanitary body for the Office International d'Hygiène Publique.

**Article 8.**

The prompt and scrupulous fulfilment of the foregoing provisions being of primary importance, Governments recognise the necessity of giving instructions in regard to their application to the appropriate authorities.

As notification is of no value unless every Government be itself informed, at the time, of cases of plague, cholera, yellow fever, typhus or smallpox, and also of suspected cases of these diseases, which occur in its territory, Governments undertake to make the notification of cases of these diseases compulsory.

**Article 9.**

It is recommended that neighbouring countries should make special arrangements with the object of organising direct exchange of information between their principal administrative officers, both as regards territories having a common frontier and as regards territories having close commercial relations. These arrangements shall be communicated to the Office International d'Hygiène Publique.

**SECTION II. — Conditions under which the measures prescribed by the Convention are applicable or cease to be applicable to arrivals from particular areas.**

**Article 10.**

The notification of imported cases of plague, cholera or yellow fever shall not lead to the adoption of the measures prescribed in Chapter II below in regard to arrivals from the local area in which the disease is present.

But these measures may be adopted when a first case of plague or yellow fever, recognised as a non-imported case, has occurred, when the cases of cholera form a foyer,\(^2\) or when typhus or small-pox exists in epidemic form.

**Article 11.**

In order that the measures prescribed in Chapter II may be limited to places which are actually infected, Governments shall restrict their application to arrivals from defined local areas in which the diseases mentioned in this Convention have appeared under the conditions indicated in the second paragraph of Article 10.

But this limitation of an infected local area shall be accepted only on the definite condition that the Government of the country in which this area is comprised take the measures necessary, (1) for checking the spread of the epidemic, and (2) for applying the measures prescribed by Article 13 below.

**Article 12.**

The Government of any country in which an infected area is situated shall inform other Governments and the Office International d'Hygiène Publique in the manner specified in Article 3, when the

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\(^1\) *British and Foreign State Papers, Vol. 100, page 466.*

\(^2\) A " foyer " exists when the occurrence of new cases outside the immediate surroundings of the first cases proves that the spread of the disease has not been limited to the place where it began.

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danger of infection from that area has ceased, and when all the preventive measures have been taken. On the receipt of this information, the measures prescribed in Chapter II shall no longer be applicable to arrivals from the area in question, except in exceptional circumstances which will require to be justified.

SECTION III. — Measures at ports and on the departure of vessels.

Article 13.

The competent authority shall take effectual measures:

1. To prevent the embarkation of persons showing symptoms of plague, cholera, yellow fever, typhus or smallpox, and of persons in such relations with the sick as to render them liable to transmit the infection of these diseases;

2. In the case of plague, to prevent rats gaining access to ships;

3. In the case of cholera, to see that drinking water and foodstuffs taken on board are wholesome, and that water taken in as ballast is disinfected if necessary;

4. In the case of yellow fever, to prevent mosquitoes gaining access to ships;

5. In the case of typhus, to secure the delousing of all suspects before their embarkation;

6. In the case of smallpox, to disinfect old clothes and rags before they are baled.

Article 14.

Governments undertake to maintain in their large ports and in their surroundings, and as far as possible in the other ports and their surroundings, sanitary services possessing an organisation and equipment capable of carrying out the application of the prophylactic measures in regard to the diseases mentioned in this Convention, and especially the measures laid down in Articles 6, 8 and 13.

The said Governments shall supply at least once a year to the Office International d’Hygiène Publique a statement showing in the case of each of their ports the condition of its sanitary organisation having regard to the provisions of the preceding paragraph. The Office shall forward such information by appropriate means to the principal health authorities of the participating countries, either directly or indirectly through another international sanitary organisation in accordance with the arrangements concluded under Article 7.

CHAPTER II.

Measures of Defence against the Diseases Mentioned in Chapter I.

Article 15.

Any ship, whatever its port of departure, may be subjected by the sanitary authority to a medical inspection, and if circumstances require it, to a thorough examination.

The sanitary measures or procedure to which a ship may be subjected on arrival shall be determined by the actual condition found to exist on board and the medical history of the voyage.
It rests with each Government, taking into account the information furnished under the provisions of Section I of Chapter I and of Article 14 of this Convention, as well as the obligations it has undertaken under Section II of Chapter I, to determine what procedure should be applicable in its own ports to arrivals from any foreign port, and in particular to decide whether, from the point of view of the procedure to be applied, a particular foreign port should be considered as infected.

The measures as laid down in this Chapter shall be regarded as constituting a maximum within the limits of which Governments may regulate the procedure which may be applied to ships on their arrival.

SECTION I. — Notification of Measures prescribed.

Article 16.

Every Government undertakes to communicate immediately to the Diplomatic Mission or, failing that, to the Consul of the infected country, residing in its capital, as well as to the Office International d’Hygiène Publique, which shall at once bring them to the notice of other Governments, the measures which they consider necessary to prescribe with regard to arrivals from that country. Such information shall be held at the disposition of other diplomatic or consular representatives established in its territory.

They also undertake to make known, through the same channels, the withdrawal of these measures or any modifications thereof.

In the absence of a Diplomatic Mission or a Consulate in the capital, the communications shall be made direct to the Government of the country concerned.

SECTION II. — Merchandise and Baggage. — Importation and Transit.

Article 17.

Subject to the provisions of the last paragraph of Article 50, the entry of merchandise and baggage arriving by land or by sea for import or for transit may not be prohibited nor may merchandise or baggage be detained at frontiers or in ports. The only measures which may be prescribed with regard to such merchandise and baggage are specified in the following paragraphs:

(a) In the case of plague, body linen and wearing apparel recently worn and bedding that has been in recent use may be subjected to disinsectisation, and, if necessary, to disinfection.

Merchandise coming from an infected local area and likely to harbour plague-infected rats may be unloaded only on condition that the precautions necessary to prevent the escape of rats and to ensure their destruction are taken as far as practicable.

(b) In the case of cholera, body linen and wearing apparel recently worn and bedding that has been in recent use may be subjected to disinfection.

Notwithstanding the provisions of this Article, the importation of fresh fish, shellfish and vegetables may be prohibited unless they have undergone a treatment calculated to destroy cholera vibrios.

(c) In the case of typhus, body linen and wearing apparel recently worn and bedding which has been in recent use, as well as rags not carried as merchandise in bulk, may be subjected to disinsectisation.

(d) In the case of smallpox, body linen and wearing apparel recently worn and bedding which has been in recent use, as well as rags not carried as merchandise in bulk, may be subjected to disinfection.
Article 18.

It rests with the authority of the country of destination to decide in what manner and at what place disinfection shall be carried out and what methods shall be adopted to secure the destruction of rats or insects (fleas, lice, mosquitoes, &c.). These operations shall be performed in such a manner as to injure articles as little as possible. Clothes and other articles of small value, including rags not carried as merchandise in bulk, may be destroyed by fire.

It is the duty of each State to settle questions relative to the payment of compensation for any damage caused by disinfection, deratisation or disinsectisation, or by the destruction of the articles referred to above.

If, on account of these measures, charges are levied by the sanitary authority, either directly, or indirectly through a company or an individual, the rates of these charges shall be in accordance with a tariff published in advance and so drawn up that the State or the sanitary authority may not, on the whole, derive any profit from its application.

Article 19.

Letters and correspondence, printed matter, books, newspapers, business documents, &c., shall not be subject to any sanitary measures. Parcels conveyed by post shall be subjected to restriction only if their contents include articles to which the measures set out in Article 17 of this Convention are applicable.

Article 20.

When merchandise or baggage has been subjected to the operations prescribed in Article 17, any interested party can require the sanitary authority to issue a free certificate showing the measures that have been taken.

Section III. — Provisions relating to Emigrants.

Article 21.

The sanitary authority in a country of emigration shall subject its emigrants to a medical examination before their departure.

It is recommended that special arrangements should be made between countries of emigration, of transit, and of immigration, with a view to laying down the conditions under which this examination shall be considered satisfactory by them, so that rejections on medical grounds at the frontiers of countries of transit and of destination may be reduced to the fewest possible.

It is also recommended that these arrangements should lay down the preventive measures against infectious diseases to which emigrants should be submitted in the country of departure.

Article 22.

It is recommended that towns or ports of embarkation for emigrants should be provided with an adequate health and sanitary administration, and, in particular: (1) a service for medical examination and treatment, as well as the necessary sanitary and prophylactic equipment; (2) an establishment supervised by the State, where emigrants may be subjected to health formalities, be housed temporarily, undergo all necessary medical examinations and have their food and drinking supplies examined; (3) premises situated at the port where medical examinations at the actual time of embarkation may be made.
**Article 23.**

It is recommended that emigrant ships should be provided with a sufficient quantity of vaccines (anti-smallpox, anti-cholera, &c.), in order to permit, if necessary, of vaccinations during the voyage.

**SECTION IV. — Measures at Ports and Marine Frontiers.**

**(A) Plague.**

**Article 24.**

**Infected Ship.** A ship shall be regarded as infected:

1. If it has a case of human plague on board;
2. Or if a case of human plague broke out more than six days after embarkation;
3. Or if plague-infected rats are found on board.

**Suspected Ship.** — A ship shall be regarded as suspected:

1. If a case of human plague broke out on board in the first six days after embarkation;
2. Or if investigations regarding rats have shown the existence of an unusual mortality without determining the cause thereof.

The ship shall continue to be regarded as suspected until it has been subjected to the measures prescribed by this Convention at a suitably equipped port.

**Healthy Ship.** — A ship shall be regarded as healthy, notwithstanding its having come from an infected port, if there has been no human or rat plague on board either at the time of departure, or during the voyage, or on arrival, and the investigations regarding rats have not shown the existence of an unusual mortality.

**Article 25.**

*Plague-infected ships* shall undergo the following measures:

1. Medical inspection;
2. The sick shall immediately be disembarked and isolated;
3. All persons who have been in contact with the sick and those whom the port sanitary authority have reason to consider suspect shall be disembarked, if possible. They may be subjected to observation or surveillance, or to observation followed by surveillance, provided that the total duration of these measures does not exceed six days from the time of arrival of the ship;

It rests with the sanitary authority of the port, after taking into consideration the date of the last case, the condition of the ship and the local possibilities, to apply that one of these measures which seems to them preferable. During the same period the crew may be prevented from leaving the ship except on duty notified to the sanitary authority;

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1 In all cases where this Convention provides for “surveillance” the sanitary authority may substitute “observation” as an exceptional measure in the case of persons who do not offer adequate sanitary guarantees.

Persons under observation or surveillance shall give facilities for all clinical or bacteriological investigations which are considered necessary by the sanitary authority.
(4) Bedding which has been used, soiled linen, wearing apparel and other articles which, in the opinion of the sanitary authority, are infected shall be disinfected, and, if necessary, disinfected;

(5) The parts of the ship which have been occupied by persons suffering from plague or which, in the opinion of the sanitary authority, are infected, shall be disinfected, and, if necessary, disinfected;

(6) The sanitary authority may require deratisation before the discharge of cargo, if they are of opinion, having regard to the nature of the cargo and the way in which it is loaded, that it is possible to effect a total destruction of rats before discharge. In this case, the ship may not be subjected to a new deratisation after discharge. In other cases, the complete destruction of the rodents shall be effected on board when the holds are empty. In the case of ships in ballast, this process shall be carried out as soon as possible before taking cargo.

Deratisation shall be carried out so as to avoid, as far as possible, damage to the ship and cargo (if any). The operation must not last longer than twenty-four hours. Any charges made in respect of these operations of deratisation and any question of compensation for damage shall be determined in accordance with the provisions of Article 18.

If a ship is to discharge a part of its cargo only, and if the port authorities consider that it is impossible to carry out complete deratisation, the said ship may remain in the port for the time required to discharge that part of its cargo, provided that all precautions, including isolation, are taken to the satisfaction of the sanitary authority to prevent rats from passing from the ship to the shore, either during unloading or otherwise.

The discharge of cargo shall be carried out under the control of the sanitary authority, who shall take all measures necessary to prevent the staff employed on this duty from becoming infected. This staff shall be subjected to observation or to surveillance for a period not exceeding six days from the time when they have ceased to work at the unloading of the ship.

*Article 26.*

*Plague-suspected ships* shall undergo the measures specified in (1), (4), (5) and (6) of Article 25.

In addition, the crew and passengers may be subjected to surveillance, which shall not exceed six days reckoned from the date of arrival of the ship. The crew may be prevented during the same period from leaving the ship except on duty notified to the Sanitary Authority.

*Article 27.*

*Healthy Ships.* — Ships free from plague shall be given free pratique immediately, with the reservation that the sanitary authority of the port of arrival may prescribe the following measures with regard to them:

1. Medical inspection to determine whether the ship comes within the definition of a healthy ship;

2. Destruction of rats on board, under the conditions specified in (6) of Article 25, in exceptional cases and for well-founded reasons, which shall be communicated in writing to the captain of the ship;

3. The crew and passengers may be subjected to surveillance during a period which shall not exceed six days reckoned from the date on which the ship left the infected port. The crew may be prevented during the same period from leaving the ship except on duty notified to the sanitary authority.
Article 28.

All ships, except those employed in national coastal service, shall be periodically deratised, or be permanently so maintained that any rat population is kept down to the minimum. In the first case, they shall receive Deratisation Certificates, and in the second, Deratisation Exemption Certificates.

Governments shall make known through the Office International d’Hygiène Publique those of their ports possessing the equipment and personnel necessary for the deratisation of ships.

A Deratisation Certificate or a Deratisation Exemption Certificate shall be issued only by the sanitary authorities of ports specified above. Every such certificate shall be valid for six months, but this period may be extended by one month in the case of a ship proceeding to its home port.

If no valid certificate is produced, the sanitary authority at the ports mentioned in the second paragraph of this Article may after inquiry and inspection —

(a) Themselves carry out deratisation of the vessel, or cause such operations to be carried out under their direction and control. On the completion of these operations to their satisfaction they shall issue a dated Deratisation Certificate. They shall decide in each case the technique which should be employed to secure the practical extermination of rats on board, but details of the deratising process applied and of the number of rats destroyed shall be entered on the certificate. Destruction of rats shall be carried out so as to avoid as far as possible damage to the ship and cargo (if any). The operation must not last longer than twenty-four hours. In the case of ships in ballast the process shall be carried out before taking cargo. Any charges made in respect of these operations of deratisation, and any question of compensation for damage, shall be determined in accordance with the provisions of Article 18.

(b) Issue a dated Deratisation Exemption Certificate, if they are satisfied that the ship is maintained in such a condition that the rat population is reduced to a minimum. The reasons justifying the issue of such a certificate shall be set out in the certificate.

Deratisation and deratisation exemption certificates shall be drawn up as far as possible in a uniform manner. Model certificates shall be prepared by the Office International d’Hygiène Publique.

The competent authority of each country undertakes each year to furnish to the Office International d’Hygiène Publique a statement of the measures taken under this Article, and of the number of ships which have been subjected to deratisation, or which have been granted deratisation exemption certificates, at the ports referred to in the second paragraph of this Article.

The Office International d’Hygiène Publique is requested to take, in accordance with the provisions of Article 14, all steps to secure the interchange of information regarding action taken under this Article and the results obtained.

The provisions of this Article do not affect the rights accorded to sanitary authorities by Articles 24-27 of this Convention.

Governments shall do all in their power to ensure that all requisite and practicable measures are taken by the competent authorities to secure the destruction of rats in ports and their surroundings as well as on lighters and coastal vessels.

(B) Cholera.

Article 29.

Infected Ship. — A ship shall be regarded as infected if there is a case of cholera on board, or if there has been a case of cholera during the five days previous to the arrival of the ship in port.
Suspected Ship. — A ship shall be regarded as suspected if there has been a case of cholera at the time of departure or during the voyage, but no fresh case in the five days previous to arrival. The ship shall continue to be regarded as suspected until it has been subjected to the measures prescribed by this Convention.

Healthy Ship. — A ship shall be considered healthy if, although arriving from an infected port or having on board persons proceeding from an infected local area, there has been no case of cholera either at the time of departure, during the voyage, or on arrival.

Cases presenting the clinical symptoms of cholera, in which no cholera vibrios have been found or in which vibrios not strictly conforming to the character of cholera vibrios have been found, shall be subject to all measures required in the case of cholera.

Germ carriers discovered on the arrival of a ship shall be submitted after disembarkation to all the obligations which may be imposed in such a case by the laws of the country of arrival on its own nationals.

Article 30.

Cholera Infected Ships. — In the case of cholera, infected ships shall undergo the following measures:

(1) Medical inspection;

(2) The sick shall be immediately disembarked and isolated;

(3) The crew and passengers may be disembarked and either be kept under observation or subjected to surveillance during a period not exceeding five days reckoned from the date of arrival of the ship;

However, persons who can show that they have been protected against cholera by vaccination effected within the period of the previous six months, excluding the last six days thereof, may be subjected to surveillance, but not to observation;

(4) Bedding which has been used, soiled linen, wearing apparel and other articles, including foodstuffs, which, in the opinion of the sanitary authority of the port, have been recently contaminated, shall be disinfected;

(5) The parts of the ship that have been occupied by persons infected with cholera or that the sanitary authority regard as infected, shall be disinfected;

(6) Unloading shall be carried out under the supervision of the sanitary authority, which shall take all measures necessary to prevent the infection of the staff engaged in unloading. This staff shall be subjected to observation or to surveillance which may not exceed five days from the time when they ceased unloading;

(7) When the drinking water stored on board is suspected, it shall be emptied out after disinfection and replaced, after disinfection of the tanks, by a supply of wholesome drinking water;

(8) The sanitary authority may prohibit the emptying of water ballast in port without previous disinfection if it has been taken in at an infected port;

(9) The emptying or discharge of human dejecta, as well as the waste waters of the ship, into the waters of the port may be forbidden, unless they have been previously disinfected.

Article 31.

Cholera Suspected Ships. — In the case of cholera, suspected ships shall undergo the measures prescribed in (1), (4), (5), (7), (8) and (9) of Article 30.

The crew and passengers may be subjected to surveillance during a period which shall not exceed five days reckoned from the date of arrival of the ship. It is recommended that the crew be prevented during the same period from leaving the ship except on duty notified to the sanitary authority.

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Article 32.

Clinical Cholera. — If the ship has been declared infected or suspected on account only of a case on board presenting the clinical features of cholera, and two bacteriological examinations, made with an interval of not less than 24 hours between them, have not revealed the presence of cholera or other suspicious vibrios, the ship shall be considered healthy.

Article 33.

Healthy Ships. — In the case of cholera, healthy ships shall be given free pratique immediately. The sanitary authority of the port of arrival may prescribe as regards these ships the measures specified in (1), (7), (8) and (9) of Article 30.

The crew and passengers may be subjected to surveillance during a period which shall not exceed five days reckoned from the date of arrival of the ship. The crew may be prevented during the same period from leaving the ship except on duty notified to the sanitary authority.

Article 34.

Since anti-cholera vaccination is a method of proved efficacy in staying cholera epidemics, and consequently in lessening the likelihood of the spread of the disease, sanitary administrations are recommended to employ, in the largest measure possible and as often as practicable, specific vaccination in cholera foyers and to grant certain advantages as regards restrictive measures to persons who have elected to be vaccinated.

(C) Yellow Fever.

Article 35.

Infected Ship. — A ship shall be regarded as infected if there is a case of yellow fever on board, or if there was one at the time of departure or during the voyage.

Suspected Ship. — A ship shall be regarded as suspected if, having had no case of yellow fever, it arrives after a voyage of less than six days from an infected port or from a port in close relation with an endemic centre of yellow fever, or it arrives after a voyage of more than six days and there is reason to believe that it may transport adult Stegomyia (Aedes Egypti) emanating from the said port.

Healthy Ship. — A ship shall be regarded as healthy, notwithstanding its having come from an infected port, if on arriving after a voyage of more than six days it has had no case of yellow fever on board and either there is no reason to believe that it transports adult stegomyia or it is proved to the satisfaction of the authority of the port of arrival:

(a) That the ship, during its stay in the port of departure, was moored at a distance of at least 200 metres from the inhabited shore and at such a distance from harbour vessels (pontons) as to make the access of stegomyia improbable;
(b) Or that the ship, at the time of departure, was effectively fumigated in order to destroy mosquitoes.

Article 36.

Yellow Fever Infected Ships. — Ships infected with yellow fever shall undergo the following measures:

(1) Medical inspection;
(2) The sick shall be disembarked, and those of them whose illness has not lasted more than five days shall be isolated in such a manner as to prevent infection of mosquitoes;
(3) The other persons who disembark shall be kept under observation or surveillance during a period which shall not exceed six days reckoned from the time of disembarkation;

(4) The ship shall be moored at least 200 metres from the inhabited shore and at such a distance from the harbour boats (pontons) as will render the access of Stegomyia improbable;

(5) The destruction of mosquitoes in all phases of growth shall be carried out on board, as far as possible before discharge of cargo. If discharge is carried out before the destruction of mosquitoes, the personnel employed shall be subjected to observation or to surveillance for a period not exceeding six days from the time when they ceased unloading.

Article 37.

Yellow Fever Suspected Ships. — Ships suspected of yellow fever may be subjected to the measures specified in (1), (3), (4) and (5) of Article 36.

Nevertheless, if the voyage has lasted less than six days and if the ship fulfils the conditions specified in paragraphs (a) or (b) of Article 35 relating to healthy ships, the ship shall be subjected only to the measures prescribed by Article 36 (1) and (3) and to fumigation.

When thirty days have been completed after the departure of the ship from the infected port, and no case has occurred during the voyage, the ship may be granted free pratique subject to preliminary fumigation should the sanitary authority consider this to be necessary.

Article 38.

Healthy Ships. — Healthy ships shall be granted free pratique after medical inspection.

Article 39.

The measures prescribed in Articles 36 and 37 concern only those regions in which Stegomyia exist, and they shall be applied with due regard to the climatic conditions prevailing in such regions and to the Stegomyia index.

In other regions they shall be applied to the extent considered necessary by the sanitary authority.

Article 40.

The masters of ships which have touched at ports infected with yellow fever are specially advised to cause a search to be made for mosquitoes and their larvæ during the voyage and to secure their systematic destruction in all accessible parts of the ship, particularly in the store rooms, galleys, boiler rooms, water tanks and other places specially likely to harbour Stegomyia.

(D) Typhus.

Article 41.

Ships which, during the voyage have had, or at the time of their arrival, have, a case of typhus on board, may be subjected to the following measures:

(1) Medical inspection.

(2) The sick shall immediately be disembarked, isolated and deloused.
(3) Other persons reasonably suspected to harbour lice, or to have been exposed to infection, shall also be deloused, and may be subjected to surveillance during a period which shall be specified, but which in any event should never exceed twelve days, reckoned from the date of delousing.

(4) Bedding which has been used, linen, wearing apparel and other articles which the sanitary authority consider to be infected shall be disinfected.

(5) The parts of the ship which have been occupied by persons ill with typhus and which the sanitary authority regard as infected shall be disinfected.

The ship shall immediately be given free pratique.
It rests with each Government to take, after disembarkation, the measures which they consider appropriate to ensure the surveillance of persons who arrive on a ship which has had no case of typhus on board, but who have left a local area where typhus is epidemic within the previous twelve days.

(E) Smallpox,

Article 42.

Ships which have had, or have a case of smallpox on board either during the voyage or at the time of arrival may be subjected to the following measures:

(1) Medical inspection.

(2) The sick shall immediately be disembarked and isolated.

(3) Other persons reasonably suspected to have been exposed to infection on board, and who, in the opinion of the sanitary authority, are not sufficiently protected by recent vaccination, or by a previous attack of smallpox, may be subjected to vaccination or to surveillance, or to vaccination followed by surveillance, the period of surveillance being specified according to the circumstances, but in any event not exceeding fourteen days, reckoned from the date of arrival of the ship.

(4) Bedding which has been used, soiled linen, wearing apparel and other articles which the sanitary authority consider to have been recently infected shall be disinfected.

(5) Only the parts of the ship which have been occupied by persons ill with smallpox and which the sanitary authority regard as infected shall be disinfected.

The ship shall immediately be given free pratique.
It rests with each Government to take, after disembarkation, the measures which they consider appropriate to ensure the surveillance of persons who are not protected by vaccination, and who arrive on a ship which has had no case of smallpox on board, but who left a local area, where smallpox is epidemic, within the previous fourteen days.

Article 43.

It is recommended that when ships call in countries where smallpox is epidemic, all precautions possible should be taken to secure the vaccination or revaccination of the crew.

It is also recommended that Governments should make vaccination and revaccination as general as possible, especially in ports and in areas near frontiers.
(F) Regulations common to the above Diseases.

Article 44.

The captain and the ship's doctor shall answer all questions that are put to them by the sanitary authority with regard to the health of the ship during the voyage.

When the captain and the doctor declare that there has not been any case of plague, cholera, yellow fever, typhus or smallpox, or an unusual mortality among rats on the ship since the time of its departure, the sanitary authority may require them to make a formal declaration or a declaration under oath.

Article 45.

In applying the measures specified in the preceding sub-sections (A), (B), (C), (D) and (E), the sanitary authority shall take into consideration the fact of a ship carrying a doctor and the actual preventive measures taken in the course of the voyage, especially for the destruction of rats. The sanitary authorities of countries that find it convenient to come to an agreement on the matter may dispense with medical inspection and other measures in cases of healthy ships carrying a doctor specially commissioned by their country.

Article 46.

It is recommended that Governments take account in determining the procedure to be applied to arrivals from another country of the steps taken in the latter country to combat infectious diseases and to prevent their transmission to other countries.

Ships arriving from ports which satisfy the conditions set out in Articles 14 and 51 are not entitled solely on account of this fact to any special advantages at the port of arrival, but Governments undertake to take into the fullest consideration the measures already taken in these ports, so that the measures to be taken at the port of arrival with regard to such ships shall be reduced to a minimum. With this object and in order to inconvenience shipping, commerce and traffic as little as possible, it is recommended that special agreements, in accordance with Article 57 of this Convention, be concluded in all cases where they may appear to be advantageous.

Article 47.

Ships arriving from an infected area which have been subjected to sufficient sanitary measures, to the satisfaction of the sanitary authority, shall not be subjected to these measures again on their arrival at a new port, whether belonging to the same country or not, unless since their departure some incident has occurred which requires the application of the sanitary measures set out above, and unless they have called at an infected port, otherwise than for taking in fuel.

A ship shall not be considered as having "called at a port" if, without having been in communication with the shore, it has landed only passengers and their luggage, and mails, or if it has taken on board only mails or passengers with or without their luggage, who have not been in communication with the port or with an infected local area. In the case of yellow fever the ship shall, in addition, have kept as far as possible and at least two hundred metres from inhabited land, and at such a distance from the harbour boats (pontons) as to make access of Stegomyia improbable.

Article 48.

The port authority applying sanitary measures shall, when requested, furnish the captain, or any other interested person with a free certificate specifying the nature of the measures and
the methods employed, the parts of the ship treated, and the reasons why the measures have been applied.

Similarly, they shall issue on demand to passengers who have arrived by an infected ship a free certificate setting out the date of their arrival, and the measures to which they and their luggage have been subjected.

**SECTION V. — General Provisions.**

**Article 49.**

It is recommended:

(1) That bills of health be issued free in all ports.
(2) That fees for consular visas be reduced by reciprocal agreement, so as not to represent more than the cost of the service in question;
(3) That the bill of health be set out in at least one of the languages recognised in maritime commerce, in addition to the language of the country where it is issued.
(4) That special agreements in the spirit of Article 57 of this Convention be made with a view to arriving at the gradual abolition of consular visas and bills of health.

**Article 50.**

It is desirable that the number of ports furnished with an organisation and equipment sufficient for the reception of a ship, whatever its health conditions may be, should in each country be in proportion to the importance of its trade and shipping. Nevertheless, without prejudice to the right of Governments to make agreements for the establishment of common sanitary stations, each country shall provide at least one port on each of its sea-boards with the above-mentioned organisation and equipment.

Moreover, it is recommended that all large seaports should be so equipped that healthy ships, at any rate, may be subjected upon their arrival to the prescribed sanitary measures, and may not be sent to another port for this purpose. Every infected or suspected ship which arrives in a port not equipped for its reception shall be sent, at its own risk and peril, to one of the ports which is open to ships of the category to which it belongs.

Governments shall make known to the Office International d’Hygiène Publique which of their ports are open to arrivals from ports infected with plague, cholera, or yellow fever, and, in particular, those open to infected or suspected ships.

**Article 51.**

It is recommended that there be provided in large seaports —

(a) An organised medical port service and permanent medical supervision of the health condition of crews and of the population of the port.
(b) Equipment for the transport of the sick, and suitable accommodation for their isolation and for keeping suspected persons under observation.
(c) Installations necessary for efficient disinfection and disinsectisation; a bacteriological laboratory, and arrangements to permit immediate vaccination against smallpox or other diseases.
(d) A supply of drinking water of quality above suspicion at the disposal of the port, and a system as effective as possible for the removal of excrement, refuse and sewage;
(e) A competent and adequate staff and necessary equipment for the deratisation of ships, shipyards, docks and warehouses;

(f) A permanent organisation for the trapping and examination of rats.

It is also recommended that warehouses and docks should as far as possible be rat-proof, and that the sewage system of the port be separate from that of the town.

Article 52.

Governments shall abstain from making any sanitary visit to ships passing through territorial waters¹ without calling at the ports or on the coasts of their respective countries. When the ship, for any reason whatever, calls in a port or on the coast, it shall be subjected, within the limits of international conventions, to the sanitary laws and regulations of the country to which the port or coast belongs.

Article 53.

Special measures may be prescribed regarding any ship in a sanitary condition so bad as likely to facilitate the spread of the diseases mentioned in this Convention, in particular a ship which is overcrowded.

Article 54.

Any ship refusing to submit to measures prescribed by a port authority in virtue of the provisions of this Convention, shall be at liberty to put out to sea.

Such a ship may, however, be permitted to land goods if the ship is isolated and if the goods are subjected to the measures laid down in Section II of Chapter II of this Convention.

Such a ship may also be authorised to disembark passengers at their request, on condition that such passengers submit to the measures prescribed by the sanitary authority. The ship, if it is isolated, may also take on fuel, foodstuffs and water.

Article 55.

Each Government undertake to have a single sanitary tariff only, which shall be published, and the charges of which shall be moderate. This tariff shall be applied in ports to all ships, without distinction being made between national and foreign flags, and to foreigners in the same conditions as to the country’s own nationals.

Article 56.

Ships engaged in international coasting traffic shall be dealt with by special regulations to be agreed upon by the countries concerned. Nevertheless, the provisions of Article 28 of this Convention shall be made applicable to them in all cases.

¹ The expression “territorial waters” shall be understood in its strictly juridical sense. It does not include the canals of Suez, Panama and Kiel.
Article 57.

Governments, taking into account their particular situation, may conclude special agreements amongst themselves, in order to make the sanitary measures prescribed by the Convention more efficacious and less burdensome. The texts of such agreements shall be communicated to the Office International d'Hygiène Publique.

Section VI. — Measures at Land Frontiers. — Travellers. — Railways.
Frontier Zones. — River-ways.

Article 58.

Observation shall not be enforced at land frontiers.
Only persons showing symptoms of the diseases mentioned in this Convention may be retained at frontiers.
This principle does not deprive a country of its right to close a portion of its frontiers in case of need. In such a case the places to which frontier traffic shall be confined shall be designated, and properly equipped sanitary stations shall be set up at such places. These measures shall be notified immediately to the interested neighbouring country.
Notwithstanding the provisions of this Article, persons who have been in contact with a person ill with pulmonary plague may be detained at land frontiers under observation during a period which shall not exceed seven days, reckoned from the date of arrival.
Persons who have been in contact with a person ill with typhus may be subjected to delousing.

Article 59.

In trains coming from infected areas it is important that the railway staff keep watch during the journey over the state of health of travellers.

Medical intervention shall be limited to inspection of travellers and to the care of the sick and, if necessary, of the persons around them. When this inspection is resorted to, it shall, as far as possible, be combined with the Customs' examination in order that travellers may suffer as little delay as possible.

Article 60.

Railway wagons traversing countries where yellow fever exists shall be constructed in such a manner as to lend themselves as little as possible to the transport of Stegomyia.

Article 61.

Travellers coming from a local area which falls within the conditions indicated in the second paragraph of Article 10 of this Convention may be subjected on arrival at their destination to surveillance for a period which shall not exceed six days, reckoned from the date of their arrival, in the case of plague, five days in the case of cholera, six days in the case of yellow fever, twelve days in the case of typhus or fourteen days in the case of smallpox.

Article 62.

In the case of diseases dealt with in this Convention, Governments, notwithstanding the provisions of the preceding Articles, reserve the right in exceptional circumstances to take special measures
in regard to certain classes of persons who do not present satisfactory sanitary guarantees, especially persons travelling or crossing the frontier in bands. The provisions of this paragraph are not applicable to emigrants, subject to the provisions of Article 21.

These measures may include the establishment at frontiers of sanitary stations, sufficiently equipped to ensure the surveillance and the observation, if necessary, of the persons concerned, as well as for their medical examination, disinfection, disinsectisation and vaccination.

Wherever possible, these exceptional measures shall be made the subject of special arrangements between adjoining States.

**Article 63.**

Railway carriages for passengers, mails or luggage and goods trucks may not be detained at the frontier.

However, if a carriage has been infected or has been occupied by a person suffering from plague, cholera, typhus or smallpox, it shall be detained for the time necessary to subject it to the prophylactic measures required in such a case.

**Article 64.**

Measures relative to the crossing of frontiers by railway and postal staff are matters for arrangement by the administrations concerned. They shall be arranged so as not to hamper the service.

**Article 65.**

Regulations concerning frontier traffic and questions arising out of such traffic are left for special arrangements between bordering countries, in accordance with the provisions of this Convention.

**Article 66.**

The sanitary control of lakes and of river-ways is a matter for special arrangement by the Governments of countries abutting thereon.

**PART II.**

**SPECIAL PROVISIONS FOR THE SUEZ CANAL AND NEIGHBOURING COUNTRIES.**

**Section I. — Measures regarding Ordinary Ships from infected Northern Ports on their arrival at the Entrance to the Suez Canal or at Egyptian Ports.**

**Article 67.**

Ordinary healthy ships from a port, infected with plague or with cholera, in Europe, in the Mediterranean basin or in the Black Sea, proposing to pass through the Suez Canal, shall be granted passage in quarantine.
Article 68.

Ordinary healthy ships wishing to touch at Egypt, may put in at Alexandria or Port Said.

If the port of departure is infected with plague, Article 27 shall apply.
If the port of departure is infected with cholera, Article 33 shall apply.
The sanitary authority of the port may substitute observation for surveillance either on board or in a quarantine station.

Article 69.

The measures to be taken as regards injected or suspected ships from a European, Mediterranean or Black Sea port infected with plague or with cholera, wishing to touch at an Egyptian port or to pass through the Suez Canal, shall be determined by the Sanitary, Maritime and Quarantine Board of Egypt, in accordance with the provisions of this Convention.

Article 70.

The regulations of the Sanitary, Maritime and Quarantine Board of Egypt shall be revised with the least possible delay to conform with the provisions of this Convention, but they shall not become effective until accepted by the several Powers represented on the Board. They shall establish the measures to which ships, passengers and merchandise are to be subjected, and shall set out the minimum number of medical officers to be attached to each station, the method of recruitment, the salaries and the duties of these medical officers and all officials appointed to carry out under the orders of the Board the supervision and the execution of preventive measures.

The Sanitary, Maritime and Quarantine Board of Egypt, acting through its President, shall nominate these medical officers and officials to the Egyptian Government for appointment.

Section II. — Measures in the Red Sea.

(A).— Measures regarding Ordinary Ships from the South touching at Red Sea Ports or bound for the Mediterranean.

Article 71.

In addition to the general provisions comprised in Part I concerning the classification of ships as infected, suspected or healthy, and the measures regarding them, the special provisions embodied in the following Articles shall apply to ordinary ships entering the Red Sea from the south.

Article 72.

Healthy Ships. — Healthy ships may pass through the Suez Canal in quarantine.
In the case of a healthy ship wishing to touch at an Egyptian port:

(a) If the port of departure is infected with plague, the ship shall have completed a voyage of six days from the infected port; if not, the passengers and crew who disembark shall undergo a period of surveillance up to the completion of the sixth day;
Loading and unloading of cargo shall be authorised subject to measures necessary to prevent the escape of rats to the shore;
(b) If the port of departure is infected with *cholera*, the ship may receive free pratique, but, if five full days have not elapsed since the date of departure from the infected port, every passenger or member of the crew who disembarks shall be subjected to surveillance until this period is completed.

If the sanitary authority of the port consider it necessary, observation on board or in a quarantine station may be substituted for surveillance. In all cases the sanitary authority may make the bacteriological examinations which they consider necessary.

**Article 73.**

*Suspected Ships.* — Suspected ships having a doctor on board and in the opinion of the sanitary authority presenting sufficient (sanitary) guarantees, may be allowed to pass through the Suez Canal in quarantine, subject to the regulations provided for in Article 70.

If the ship touches at an Egyptian port:

(a) In the case of *plague*, the provisions of Article 26 are applicable, but surveillance may be replaced by observation.

(b) In the case of *cholera*, the provisions of Article 31 are applicable, subject to the same reservation regarding the substitution of observation for surveillance.

**Article 74.**

*Infected Ships. (a) Plague.* — The measures set out in Article 25 are applicable. Where danger of infection exists, the ship may be required to moor at Moses' Wells or any other place indicated by the sanitary authority of the port.

Passage in quarantine may be accorded before the expiration of the six prescribed days, if the sanitary authority of the port consider it possible.

(b) *Cholera.* — The measures set out in Article 30 are applicable. The ship may be required to moor at Moses' Wells or any other place, and in the case of a serious outbreak on board, may be directed to Tor in order to allow vaccination and, if necessary, treatment of the sick.

The ship may be authorised to pass through the Suez Canal only when the sanitary authority are satisfied that the ship, passengers and crew no longer present any danger.

(B) Measures regarding Ordinary Ships from Infected Ports in the Hedjaz during the Pilgrimage Season.

**Article 75.**

If, during the Mecca pilgrimage, plague or cholera is prevalent in the Hedjaz, ships from the Hedjaz, or from any other part of the Arabian coast of the Red Sea, that have not there taken on board any pilgrims or like collections of persons, and on which there has been no suspicious incident during the voyage, shall be classed as ordinary suspected ships, and shall be subjected to the preventive measures and the treatment prescribed for such ships.

If they are bound for Egypt, they may be required to undergo, at a sanitary station fixed by the Sanitary, Maritime and Quarantine Board of Egypt, observation for a period of five days in the case of cholera, and six days in the case of plague, reckoned from the date of embarkation. They shall, moreover, be subjected to all the measures prescribed for suspected ships (disinfection, &c.), and shall not be granted free pratique until after a favourable medical inspection.

It is to be understood that, if there have been suspicious incidents on board during the voyage, observation may be imposed at Moses’ Wells, the period being five days in the case of cholera and six days in the case of plague.
SECTION III. — Organisation for securing Supervision.

Article 76.

If a ship is lighted by electricity, and if the port sanitary authority are satisfied that it is sufficiently well lighted, the medical inspection prescribed by the regulations for every ship arriving at Suez for passage through the Canal may take place at night.

A staff of sanitary guards shall supervise and ensure the performance of the preventive measures in the Suez Canal and at the quarantine establishments. These guards shall have the status of police officers with the right to invoke aid in cases where the sanitary regulations are infringed.

SECTION IV. — The Passage of the Suez Canal in Quarantine.

Article 77.

Permission to pass through the Suez Canal in quarantine shall be granted by the port sanitary authority at Suez. The Sanitary, Maritime and Quarantine Board of Egypt shall be informed immediately. In doubtful cases the decision shall rest with the Board.

Article 78.

When the permission provided for in the preceding Article has been given, telegrams shall at once be sent to the authorities of the port which the captain declares to be his next port of call, as well as to the authority of the port of final destination. These telegrams shall be sent at the expense of the ship.

Article 79.

Each country shall issue an edict subjecting to penalties those vessels which depart from the course declared by the captain and enter without authority one of the ports of that country. Exception shall be made in the case of circumstances beyond control and when a break in the voyage cannot be avoided.

Article 80.

When the health visit takes place, the captain shall be required to declare whether he has on board gangs of native stokers or hired servants of any description not included in the roll of the crew or in the register kept for the purpose.

The following questions in particular shall be put to the captains of all ships arriving at Suez from the south, and shall be answered by them on oath or by a formal declaration:

Have you any supernumeraries: stokers or other hands not included in the ship's roll or in the special register? What is their nationality? Where did you embark them?

The medical officers shall satisfy themselves as to the presence of these supernumeraries, and, if they find that any of their number are missing, they shall enquire carefully into the cause of their absence.

Article 81.

A sanitary officer and at least two sanitary guards shall go on board. They shall accompany the ship as far as Port Said in order to prevent communication with the shore and to supervise the execution of the prescribed measures during the passage of the Canal.
Article 82.

All embarkation or disembarkation and all transhipment of passengers or goods shall be forbidden during the passage of the Suez Canal:
Provided always that travellers may embark at Suez or Port Said in quarantine.

Article 83.

Ships passing through the Canal in quarantine shall make the voyage from Suez to Port Said or vice versa without lying up.
In the case of a ship running aground or being compelled to lie up, the necessary operations shall be carried out by the crew of the ship, all communication with the staff of the Suez Canal Company being avoided.

Article 84.

Infected or suspected troop ships passing through the Canal in quarantine shall do so only by day. If they are compelled to pass the night in the Canal, they shall anchor in Lake Timsah or in the Great Lake.

Article 85.

Ships that pass through the Canal in quarantine shall not stop at Port Said, except as provided for in Articles 82 and 86.
Revictualling shall be effected by the means at the disposal of the ship.
All stevedores and others who have gone on board shall be isolated on the quarantine barge and shall be subjected to the measures prescribed by the regulations.

Article 86.

When it is absolutely necessary for ships passing in quarantine to coal or take oil at Suez or at Port Said, they shall do so subject to the measures of isolation and supervision required by the Sanitary, Maritime and Quarantine Board of Egypt. Coaling may be done by the labourers of the port in cases where effective supervision of this operation is possible on board, and when all contact with the crew can be avoided. At night the coaling place shall be efficiently lighted by electricity.

Article 87.

Pilots, electricians, agents of the Company and sanitary guards shall be disembarked at Port Said outside the port, between the jetties, and shall be taken thence direct to the quarantine barge, where they shall be subjected to the measures considered necessary.

Article 88.

As regards the passage of the Suez Canal, the following advantages shall be accorded to ships of war as hereinafter specified:
The quarantine authority shall accept them as healthy on production of a certificate signed by the ship's surgeons and countersigned by the captain, stating on oath or by a formal declaration:—

(a) That there has not been, either at the time of departure or during the voyage, a case of plague or of cholera on board;
(b) That a careful examination of every person on board, without exception, has been made within twelve hours of arrival at the Egyptian port, and that no case of either of these diseases has been detected.

Such ships shall be exempt from medical inspection, and shall be given free pratique at once. Notwithstanding the foregoing provisions, the quarantine authority shall have the right of medically inspecting, by its officers, ships of war in all cases in which they consider this procedure necessary.

Infected or suspected ships of war shall be subjected to the regulations in force.

Only fighting units shall be regarded as ships of war. Transports and hospital ships shall be classed as ordinary ships.

**Article 89.**

The Sanitary, Maritime and Quarantine Board of Egypt may arrange the conveyance through Egyptian territory in quarantine trains of mails and ordinary passengers from infected countries.

**SECTION V. — Sanitary Control applicable to the Persian Gulf.**

**Article 90.**

In so far as navigation of the Persian Gulf is concerned, the sanitary control provided for in Part I of this Convention shall be applied by the sanitary authorities of ports of departure as well as of arrival.

**PART III.**

**SPECIAL PROVISIONS REGARDING PILGRIMAGES.**

**CHAPTER I.**

**GENERAL PROVISIONS.**

**Article 91.**

The provisions of Article 13 are applicable to persons and articles destined for the Hedjaz or the Kingdom of Iraq, that have to be taken on board a pilgrim-ship, even when the port of embarkation is healthy.

**Article 92.**

When there are cases of plague, cholera or other epidemic disease in the port, embarkation on pilgrim-ships shall not take place until the persons, collected in groups, shall have been subjected to observation sufficient to ensure that none of them are suffering from these diseases.
It is to be understood that, as regards the application of this measure, each Government may take local circumstances and possibilities into account.

In the case of cholera, persons who allow themselves to be vaccinated forthwith by the medical officer of the sanitary authority shall be subjected only to a medical inspection at the time of vaccination. They shall be exempt from the observation prescribed in the foregoing paragraph.

Article 93.

Pilgrims shall be in possession of a return ticket or shall have deposited a sum sufficient to pay the return journey, and, if circumstances permit, they shall be required to show that they possess the means necessary for the accomplishment of the pilgrimage.

Article 94.

Only mechanically propelled ships shall be permitted to carry pilgrims on long voyages.

Article 95.

Pilgrim ships that are coasters intended for short passages known as "coasting voyages" in the Red Sea shall be subject to the provisions of special regulations published by the Sanitary, Maritime and Quarantine Board of Egypt.

Article 96.

A ship, which, in addition to ordinary passengers, among whom pilgrims of the upper classes may be included, carries pilgrims in less proportion than one pilgrim per 100 tons gross shall not be considered a pilgrim-ship.

This exemption applies only to the ship. The pilgrims carried therein, irrespective of class, shall remain subject to all the measures relating to them set out in this Convention.

Article 97.

The captain or the agent of the shipping company, at the discretion of the sanitary authority, shall pay the total of the sanitary charges due in respect of each pilgrim. Such charges shall be included in the price of the ticket.

Article 98.

As far as practicable, pilgrims who embark or disembark at sanitary stations shall have no contact with one another at the landing-places.

Pilgrims who have been disembarked shall be distributed in camp in as small groups as possible.

It is necessary that they be supplied with wholesome drinking water, obtained either from local sources or by distillation.

Article 99.

Provisions brought by pilgrims shall be destroyed if the sanitary authority consider it necessary.
CHAPTER II.

PILGRIM-SHIPS. — SANITARY EQUIPMENT.

SECTION I. — General Conditions applying to Ships.

Article 100.

The ship shall be capable of accommodating the pilgrims in the between-decks. Over and above the space reserved for the crew, the ship shall provide for each person, irrespective of age, an area of 1.5 square metres, equivalent to 16 English square feet, and a height between-decks of at least 1.8 metres, equivalent to about 6 English feet.

Pilgrims shall not be lodged on any deck lower than the first between-deck below the water-line.

Satisfactory ventilation, by mechanical means in the case of decks below the first of the between-decks, shall be provided.

In addition to the space reserved for pilgrims, there shall be on the upper deck a free area of not less than 56 square metres, equivalent to about 6 English square feet, for each person, irrespective of age, over and above the area upon that deck which may be reserved for temporary hospitals, the crew, baths and latrines and for the working of the ship.

Article 101.

Places screened from view, including a sufficient number for the exclusive use of women, shall be provided on deck.

These places shall be provided with water under pressure in pipes fitted with taps or douches, so as to furnish sea water for the use of the pilgrims at all times even if the ship is lying at anchor. Taps or douches shall be in proportion of 1 per 100 pilgrims or fraction of 100.

Article 102.

The ship shall be provided, in addition to closets for the crew, with latrines fitted with a flushing apparatus or with a water tap.

Some of these latrines shall be reserved exclusively for women.

Latrines shall be in the proportion of 2 per 100 pilgrims or fraction of 100.

There shall be no closets in the hold.

Article 103.

Two places for cooking for the use of pilgrims shall be provided on the ship.

Article 104.

Hospital quarters, satisfactory from the point of view of safety and health, shall be reserved for the accommodation of the sick. They shall be situated on deck unless, in the opinion of the sanitary authority, an equally healthy situation can be provided in another place.

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They shall be constructed so as to allow persons suffering from infectious diseases, and persons who have been in contact with them, to be isolated according to the nature of their illness.

The hospitals, including temporary hospitals, shall be capable of accommodating not less than 4 per 100 or fraction of 100 of the pilgrims taken on board, allowing 3 square metres, equivalent to approximately 32 English square feet, per patient.

The hospitals shall be provided with special latrines.

Article 105.

Every ship shall carry medicaments, disinfectants and articles necessary for the treatment of the sick. The regulations framed for this class of ship by each Government shall specify the nature and the quantity of these medicaments. Each ship shall be provided, in addition, with the necessary immunising agents, especially anti-cholera and anti-smallpox vaccines. Medicine and attendance shall be provided for the pilgrims free of charge.

Article 106.

Every ship taking pilgrims shall carry a duly qualified medical officer who shall be recognised by the Government of the country of the first port at which the pilgrims are embarked upon their outward journey. A second medical officer fulfilling the same conditions shall be carried when the number of pilgrims on board exceeds 1,000.

Article 107.

The captain shall cause notices, printed in the principal languages of the countries to which the pilgrims to be embarked belong, to be posted up on the ship in a conspicuous place accessible to all concerned, showing:

1. The destination of the ship;
2. The price of tickets;
3. The daily ration of food and water allowed to each pilgrim in accordance with the regulations of the country of origin;
4. The price of foodstuffs not included in the daily ration, which may be procured on extra payment.

Article 108.

The heavy baggage of pilgrims shall be registered and numbered. Pilgrims may keep with them only such articles as are absolutely necessary. The nature, amount and dimensions of these articles shall be set out in regulations framed by each Government for its own ships.

Article 109.

Extracts from the provisions of Chapter I, of Sections I, II and III of Chapter II, and of Chapter III of this Part shall be posted up, in the form of regulations, in the language of the country to which the ship belongs, and also in the languages chiefly spoken in the countries inhabited by the pilgrims to be embarked, in a conspicuous and accessible place on each deck and between-deck of every ship carrying pilgrims.
SECTION II. — **Measures before Departure.**

**Article 110.**

The captain or, failing the captain, the owner or agent of every pilgrim-ship shall, not less than three days before departure, declare to the competent authority of the port of departure his intention to embark pilgrims. At ports of call, the captain or, failing the captain, the owner or agent of every pilgrim-ship shall make the same declaration twelve hours before the departure of the ship. This declaration shall indicate the proposed date of the departure and the destination of the ship.

**Article 111.**

On receipt of the declaration prescribed in the preceding Article, the competent authority shall proceed at the expense of the captain to inspect and measure the ship. Inspection alone shall take place if the captain already has a certificate of measurement furnished by the competent authority of his country, unless it be suspected that the certificate no longer represents correctly the real condition of the ship.

**Article 112.**

The competent authority shall not permit the departure of a pilgrim-ship until satisfied:

- (a) That the ship has been thoroughly cleaned and, if necessary, disinfected;
- (b) That the ship is in a condition to undertake the voyage without danger; that it is provided with the necessary gear and apparatus for use in case of shipwreck, accident or fire, particularly a wireless apparatus for sending and receiving messages, capable of being worked independently of the ship's engine, and that it carries a sufficient number of boats and life-saving apparatus; that it is properly manned, equipped and ventilated, and provided with awnings of sufficient size and thickness to shelter the decks, and that there is nothing on board that may be or may become injurious to the health or safety of the passengers;
- (c) That there is on board, properly stowed away, over and above the provision made for the ship and crew, sufficient fuel and food of good quality for all the pilgrims during the duration of the voyage;
- (d) That the drinking water on board is of good quality; that it is in sufficient quantity; that the tanks for drinking water are safe from all contamination and so closed that the water can be supplied only by means of taps or pumps; fittings for sucking water shall be absolutely prohibited;
- (e) That the ship carries a condenser capable of distilling a minimum quantity of 5 litres of water per diem for every person on board, including the crew;
- (f) That the ship possesses a disinfecting chamber, ascertained by the sanitary authority of the port where the pilgrims embarked to be safe and efficacious;
- (g) That the ship carries a duly qualified medical officer, if possible with up-to-date knowledge of maritime health conditions and of the pathology of tropical diseases, recognised by the Government of the country of the first port at which the pilgrims are embarked upon their outward journey, and that it carries medical stores as required by Article 105;
- (h) That the deck is free from merchandise and all encumbrances;
- (i) That the arrangements on board are such as to allow of the measures prescribed in the following Section III being carried out.
Article II.3.

The captain may not start without having in his possession:

(1) A list, countersigned by the competent authority, showing the name and sex of the pilgrims who have embarked, and the total number of pilgrims he is authorised to carry.

(2) A document giving the name, nationality, and tonnage of the ship, the names of the captain and of the doctor, the exact number of persons embarked (crew, pilgrims, and other passengers), the nature of the cargo, and the place of departure.

The competent authority shall note on this document whether the number of pilgrims permissible under the regulations has been embarked or not, and in the latter case, the additional number of passengers the ship is authorised to embark at subsequent ports of call.

Section III. — Measures during the Voyage.

Article II.4.

During the voyage the deck allotted to pilgrims shall be kept free from encumbrances; it shall be reserved night and day for the passengers and placed at their disposal without charge.

Article II.5.

The between-decks shall be carefully cleansed and rubbed with sand every day when the pilgrims are on deck.

Article II.6.

The latrines allotted to the passengers, as well as those of the crew, shall be kept clean. They shall be cleansed and disinfected at least three times daily, and more frequently if necessary.

Article II.7.

The excretions and dejecta of persons showing symptoms of plague or cholera, of dysentery or any other disease preventing them from using the hospital latrines shall be received in vessels containing a disinfecting solution. These vessels shall be emptied into the hospital latrines, which shall be thoroughly disinfected every time this is done.

Article II.8.

All bedding, carpets and clothing that have been in contact with the sick persons referred to in the preceding Article shall be immediately disinfected. The observance of this rule is specially recommended in regard to the clothes of persons who have been near the sick and which may have been contaminated.

Such of the above-mentioned articles as are of no value shall be thrown overboard, if the ship is not in harbour or in a canal, or burnt. Other articles shall be disinfected under the supervision of the doctor on board.

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Article 119.

The quarters occupied by the sick, referred to in Article 104, shall be thoroughly and regularly cleansed and disinfected.

Article 120.

Not less than 5 litres of drinking water shall be put each day at the disposal of every pilgrim, irrespective of age, free of charge.

Article 121.

If there be any doubt as to the quality of the drinking water, or any reason to suspect that it may possibly have become contaminated, either at its source or during the voyage, it shall be boiled or otherwise sterilised, and the captain shall cause it to be emptied overboard at the first port of call at which he can procure a purer supply. The tanks shall be disinfected before taking on a fresh supply.

Article 122.

The medical officer shall visit the pilgrims, tend the sick, and see that the rules relating to health are observed on board. He shall in particular:

1. Satisfy himself that the rations issued to the pilgrims are of good quality, that their quantity is in accordance with contract, and that they are properly prepared;
2. Satisfy himself that the provisions of Article 120, regarding the distribution of water, are observed;
3. If there be any doubt as to the quality of the drinking water, call the attention of the captain, in writing, to the provisions of Article 121;
4. Satisfy himself that the ship is always kept clean, and particularly that the latrines are cleansed in accordance with the provisions of Article 116;
5. Satisfy himself that the pilgrims' quarters are kept wholesome, and, in case of the occurrence of infectious disease, that disinfection is carried out in accordance with Article 119;
6. Keep a diary of all occurrences relating to health during the voyage, and submit this diary, on request, to the competent authority of the ports of call or the port of final destination.

Article 123.

Only the persons charged with the care of patients suffering from plague or cholera or other infectious diseases shall have access to them, and these persons shall not come in contact with the other persons that have been embarked.

Article 124.

In the event of a death occurring during the voyage, the captain shall enter the fact opposite the name of the deceased on the list countersigned by the authority of the port of departure, and shall also enter in the log the name of the deceased, his age, the place from which he came, the supposed cause of death, according to the medical certificate, and the date of death.

In the event of a death from infectious disease, the corpse, wrapped in a shroud impregnated with a disinfecting solution, shall be committed to the deep.
Article 125.

The captain shall see that all preventive measures taken during the voyage are entered in the log. The log shall be submitted by him, on request, to the competent authority of the port of call or the port of final destination.

At each port of call the captain shall cause the list drawn up in accordance with Article 113 to be countersigned by the competent authority.

In the event of a pilgrim disembarking during the voyage, the captain shall note the fact on the list opposite the pilgrim’s name.

In the event of persons embarking, their names shall be entered on the list in accordance with the provisions of Article 113. This shall be done before the list is countersigned by the competent authority.

Article 126.

The sanitary document given at the port of departure shall not be changed during the voyage. In case of failure to observe this regulation the ship may be treated as infected.

It shall be countersigned at each port of call by the sanitary authority, who shall enter:

1. The number of passengers disembarked or embarked at the port;
2. Anything that has happened at sea affecting the life or health of the persons embarked;
3. The health conditions of the port of call.

Section IV. — Measures on Arrival of Pilgrims in the Red Sea.

(A) Sanitary Control of Ships going from the South to the Hedjaz with Pilgrims.

Article 127.

Pilgrim ships from the south, bound for the Hedjaz, shall, in the first instance, put in at the Kamaran sanitary station, and shall be subjected to the procedure set out in the following Articles.

Article 128.

Ships found, on medical inspection, to be healthy shall be given free pratique on completion of the following procedure:

The pilgrims shall be disembarked; they shall take a shower bath or bathe in the sea; their soiled linen and any portion of their personal effects or their baggage open, in the opinion of the sanitary authority, to suspicion shall be disinfected. The duration of these operations, including disembarkation and embarkation, shall not exceed forty-eight hours. Provided this period is not exceeded, such bacteriological examination as may be considered necessary by the sanitary authority may be made.

If no recognised or suspected case of plague or of cholera be discovered during these operations, the pilgrims shall immediately be re-embarked and the ship shall proceed to Jeddah.

Ships found, on medical inspection, to be healthy shall not undergo the measures prescribed above if the following conditions are fulfilled:

1. That all pilgrims on board are protected against cholera and smallpox;
2. That the requirements of this Convention have been strictly followed.
(3) That there is no reason to doubt the declaration of the captain and doctor of the ship that no case of plague, cholera or smallpox has occurred on board, either at the time of departure or during the voyage.

In the case of plague, the procedure laid down in Article 27 shall be applied in so far as concerns rats found on board.

_article 129._

_Suspected_ ships which have had cases of plague during the first six days after embarkation, or on board which an unusual mortality among rats has been discovered, or which have had cases of cholera on board at the time of departure but no fresh case during the last five days, shall be subjected to the following procedure:

The pilgrims shall be disembarked; they shall take a shower bath or bathe in the sea; their soiled linen or any portion of their personal effects or their baggage open, in the opinion of the sanitary authority, to suspicion shall be disinfected.

The parts of the ship occupied by the sick shall be disinfected. The duration of these operations, including disembarkation and embarkation, shall not exceed forty-eight hours. Provided this period is not exceeded, such bacteriological examination as may be considered necessary by the sanitary authority may be made.

If no case or suspected case of plague or of cholera be discovered during these operations, the pilgrims shall immediately be re-embarked and the ship shall proceed to Jeddah.

In the case of plague, the procedure laid down in Article 26 shall be applied in so far as concerns rats found on board.

_article 130._

_Infected_ ships, that is to say, ships with cases of plague or of cholera on board, or that have had cases of plague on board more than six days after embarkation, or of cholera on board within the five days before arrival, or on board of which rats infected by plague have been discovered, shall be subjected to the following procedure:

Persons suffering from plague or from cholera shall be disembarked and isolated in hospital. The other passengers shall be disembarked and isolated in as small groups as possible, in order that, if plague or cholera break out in one group, the whole party may not be affected.

The soiled linen, clothing, and personal effects of the crew and the passengers shall be disinfected, as well as the ship.

Provided always that the local sanitary authority may decide that heavy baggage and merchandise need not be unloaded and that only part of the ship need be disinfected.

The passengers shall remain at the Kamaran station five days in the case of cholera and six days in the case of plague. If a new case occurs after disembarkation, the period of observation shall be extended to five days for cholera and six days for plague, to date from the isolation of the last case.

In the case of plague, the procedure laid down in Article 25 shall be applied in so far as concerns rats found on board.

On completion of these operations, the ship, having re-embarked its pilgrims, shall proceed to Jeddah.

_article 131._

Ships, to which Articles 128, 129 and 130 apply, shall be subject to medical inspection on board on arrival at Jeddah. If the result is favourable, the ship shall receive free pratique.

If, on the other hand, the occurrence of definite cases of plague or cholera on board during the voyage, or at the time of arrival at Jeddah, is established, the sanitary authority of the Hedjaz may take all necessary measures subject to the provisions of Article 54.
Article 132.

Every sanitary station intended for the reception of pilgrims shall be provided with a skilled and experienced staff, in sufficient number, together with all the structures and plant necessary for ensuring the complete application of the measures to which pilgrims are liable.

(B) Sanitary Control of Pilgrim Ships coming from the North of Port Said and going to the Hedjaz.

Article 133.

If it be not established that there is plague or cholera at the port of departure or in its neighbourhood, and if no case of plague or of cholera has occurred during the voyage, the ship shall be granted free pratique forthwith.

Article 134.

If it be established that there is plague or cholera at the port of departure or in its neighbourhood, or if a case of plague or of cholera has occurred during the voyage, the ship shall be dealt with at Tor in the manner prescribed for ships coming from the south and stopping at Kamaran. The ships shall thereafter be granted free pratique.

SECTION V. — Measures for Pilgrims Returning Home.

(A) Homeward-bound Pilgrim-ships going North.

Article 135.

Every ship from a port in the Hedjaz or from any other port on the Arabian coast of the Red Sea, carrying pilgrims or any like collection of persons and bound for Suez or a Mediterranean port, shall proceed to Tor, there to undergo the observation and the sanitary measures specified in Articles 140 to 142.

Article 136.

Pending the establishment at the port of Akaba of a quarantine station adequate for its requirements, pilgrims returning from the Hedjaz to Akaba by sea shall undergo the necessary quarantine measures at Tor before disembarkation at Akaba.

Article 137.

Ships bringing back pilgrims to the Mediterranean shall not pass through the Canal save in quarantine.

Article 138.

Agents of shipping lines and captains of ships shall be warned that, on completion of the period of observation at Tor sanitary station, only Egyptian pilgrims shall be permitted to leave the ship definitely in order to return to their homes.
Only pilgrims with certificates of residence, issued by an Egyptian authority and made out in the form prescribed, shall be recognised as Egyptians or inhabitants of Egypt.

Non-Egyptian pilgrims may not, after leaving Tor, be disembarked at an Egyptian port except by special permission given under specified conditions by the Public Health Authority in Egypt, in agreement with the Sanitary, Maritime and Quarantine Board of Egypt. Agents of shipping lines and ship captains shall therefore be warned that the transhipment of non-Egyptian pilgrims at Tor, Suez, Port Said or Alexandria is prohibited in the absence of special authorisation in each case.

Ships carrying pilgrims of non-Egyptian nationality shall be treated according to the rules for such pilgrims, and shall not be permitted to enter any Egyptian port in the Mediterranean.

**Article 139.**

Egyptian pilgrims shall undergo at Tor, or any other station fixed by the Sanitary, Maritime and Quarantine Board of Egypt, observation for a period of three days and medical inspection, and, if necessary, disinfection and disinsectisation.

**Article 140.**

If it be established that there is plague or cholera in the Hedjaz or at the port whence the ship has come, or that either of these diseases has occurred in the Hedjaz during the pilgrimage, the ship shall be subjected at Tor to the procedure prescribed for infected ships at Kamaran.

Persons suffering from plague or cholera shall be landed and isolated in hospital. The other passengers shall be landed and isolated in as small groups as possible, in order that, if plague or cholera break out in one group, the whole party may not be affected.

The soiled linen, clothing and personal effects of the crew and passengers and such baggage and merchandise as are suspected of being infected shall be landed for purposes of disinfection. These articles, and also the ship, shall be thoroughly disinfected:

Provided always that the sanitary authority of the port may decide that heavy baggage and merchandise need not be unloaded and that only part of the ship need be disinfected.

The procedure laid down in Article 25 shall be applied in so far as concerns rats found on board.

All the pilgrims shall be kept under observation for six clear days for plague and five days for cholera, reckoned from the day on which the measures of disinfection are completed. If a case of plague or of cholera occur in a section, the period of six or five days for that section shall be reckoned from the day on which the last case occurs.

**Article 141.**

In the circumstances provided for in the foregoing Article, Egyptian pilgrims may, in addition, be kept under observation for a further period of three days.

**Article 142.**

If it be not established that there is plague or cholera in the Hedjaz or at the port whence the ship has come, or that either of these diseases has occurred in the Hedjaz during the pilgrimage, the ship shall be subjected at Tor to the procedure prescribed for healthy ships at Kamaran.

The pilgrims shall be landed; they shall take a shower bath or bathe in the sea; their soiled linen and any portion of their personal effects or their baggage open, in the opinion of the sanitary
authority, to suspicion shall be disinfected. The duration of these operations shall not exceed seventy-two hours.

Provided always that a pilgrim-ship, if it has had no case of plague or of cholera during the voyage from Jeddah to Yambo and Tor, and if it be established by individual medical examination, conducted at Tor after disembarkation, that there is no such case, may be permitted by the Sanitary, Maritime and Quarantine Board of Egypt to pass through the Suez Canal in quarantine, even by night, subject to the fulfilment of the four following conditions:

1. That, in order to secure medical attendance of persons on board, the ship carries one or more medical officers duly qualified and recognised;
2. That the ship is provided with satisfactory disinfecting chambers in good working order;
3. That it is proved that the number of pilgrims is not in excess of that permitted by the pilgrimage regulations;
4. That the captain undertakes to sail direct to the port which he indicates as his next port of call.

The sanitary tax, payable to the Quarantine Administration, shall be the same as the pilgrims would have to pay if they remained in quarantine for three days.

Article 143.

In the event of a suspicious case occurring on board during the voyage from Tor to Suez, the ship may be sent back to Tor.

Article 144.

Transhipment of pilgrims at Egyptian ports is strictly prohibited, except by special permission of, and under special conditions imposed by, the Egyptian sanitary authority, in agreement with the Sanitary, Maritime and Quarantine Board of Egypt.

Article 145.

Ships from the Hedjaz, carrying pilgrims bound for a port on the African coast of the Red Sea, shall proceed direct to the quarantine station appointed by the territorial authority of that port, for the purpose of being subjected to the same quarantine measures as at Tor.

Article 146.

Ships from the Hedjaz or from a port on the Arabian coast of the Red Sea where neither cholera nor plague is prevalent, not carrying pilgrims or like collections of persons, and which have not had any suspicious incident during the voyage, shall, on favourable medical inspection, be given free pratique at Suez.

Article 147.

Passengers from the Hedjaz who have accompanied the pilgrimage shall be subject to the same measures as pilgrims. The fact that they call themselves merchants or otherwise shall not exempt them from these measures.
(B) Homeward-bound Pilgrims going North by Caravan.

Article 148.

Whatever the sanitary condition in the Hedjaz may be, pilgrims travelling by caravan shall proceed to one of the quarantine stations upon their route, where they shall be subjected, according to circumstances, to the measures prescribed in Articles 140 or 142 for disembarked pilgrims.

(C) Homeward-bound Pilgrims going South.

Article 149.

In the event of the pilgrimage being infected, pilgrim-ships returning to places south of the Straits of Bab-el-Mandeb may be required, on the instructions of the consular authority of the country to which the pilgrims are going, to call at Kamaran for the purpose of being medically inspected.

Section VI. — Measures for Pilgrims travelling by the Hedjaz Railway.

Article 150.

The Governments of countries through which the Hedjaz railway passes shall take all necessary steps, in accordance with the principles of this Convention, to organise the sanitary supervision of pilgrims during their journey to the Holy Places, and the application of prophylactic measures in order to prevent the dissemination of contagious diseases of epidemic character.

Section VII. — Sanitary Information concerning the Pilgrimage.

Article 151.

The Sanitary, Maritime and Quarantine Board of Egypt shall transmit periodically, and, if necessary, by the most rapid means, to the sanitary authorities of all the countries interested, and at the same time to the Office International d’Hygiène Publique, in the manner laid down in this Convention, all sanitary information and particulars collected by them during the Pilgrimage concerning the sanitary condition of the Hedjaz and the countries through which the pilgrims pass. They shall also compile an annual report which shall be communicated to the same authorities and to the Office International d’Hygiène Publique.

CHAPTER III.

Sanctions.

Article 152.

Any captain convicted of a breach of contract made by him or on his behalf for the supply of water, food, or fuel, shall be liable to a fine not exceeding 50 gold francs for each offence. This fine shall be paid to the pilgrim who has suffered from the breach of contract on proof that he demanded its fulfilment without effect.
Article 153.

Any infringement of Article 107 shall be punished by a fine not exceeding 750 gold francs.

Article 154.

Any captain who commits, or allows to be committed, any fraud with respect to the list of pilgrims or the sanitary document provided for by Article 113, shall be liable to a fine not exceeding 1,250 gold francs.

Article 155.

Any ship's captain arriving without a sanitary document from the port of departure, or without its having been countersigned at the ports of call, or unprovided with the prescribed list, duly kept in accordance with Articles 113, 125 and 126, shall be liable in each instance to a fine not exceeding 300 gold francs.

Article 156.

Any captain convicted of having, or of having had, on board more than 100 pilgrims without a qualified medical officer, in accordance with the provisions of Article 106, shall be liable to a fine not exceeding 7,500 gold francs.

Article 157.

Any captain convicted of having, or of having had, on board more pilgrims than he is permitted by the provisions of Article 113 (1) to carry, shall be liable to a fine not exceeding 125 gold francs for each pilgrim in excess of the proper number.

The pilgrims in excess of the proper number shall be disembarked at the first station where there is a competent authority, and the captain shall be required to provide the pilgrims so disembarked with sufficient money to enable them to reach their destination.

Article 158.

Any captain convicted of having disembarked pilgrims at a place other than their destination, unless with their consent or from unavoidable cause, shall be liable to a fine not exceeding 500 gold francs for each pilgrim wrongfully disembarked.

Article 159.

Any other infringement of the provisions relating to pilgrim-ships shall be punished by a fine of not less than 250 and not exceeding 2,500 gold francs.

Article 160.

Any infringement discovered during the voyage shall be entered in the ship's papers as well as in the list of pilgrims. The competent authority shall prepare a statement of the case and submit it to the proper quarter.
Article 161.

Infringements of Articles 152 to 159 shall be investigated by the sanitary authority of the port at which the ship calls. Penalties shall be imposed by the competent authority.

Article 162.

All agents required to assist in carrying out the provisions of this Convention regarding pilgrimships shall be liable to punishment, in accordance with the laws of their respective countries, for any failure on their part in carrying out the aforesaid provisions.

PART IV.

SUPERVISION AND EXECUTION.

I. — SANITARY, MARITIME AND QUARANTINE BOARD OF EGYPT.

Article 163.

The stipulations of Annex III of the Venice Sanitary Convention of the 30th January 1892, regarding the composition, the functions and the working of the Egyptian Sanitary, Maritime and Quarantine Board, are hereby confirmed, in so far as they are embodied in the Khedivial decrees of the 19th June 1893, and the 25th December 1894, and in the Ministerial Order of the 19th June 1893.

The said decrees and order are contained in the Annex to this Convention.

Notwithstanding the provisions of the said decrees and order the High Contracting Parties agree that:

1. The number of Egyptian delegates on the Sanitary, Maritime and Quarantine Board shall be increased to five members:
   (i) The President of the Board, nominated by the Egyptian Government, and who shall vote only in cases of equality;
   (ii) A European doctor of medicine, Inspector-General of the Sanitary, Maritime and Quarantine Administration;
   (iii) Three delegates nominated by the Egyptian Government.

2. The Veterinary Service of the Egyptian Sanitary, Maritime and Quarantine Board shall be transferred to the Egyptian Government. The following conditions shall be observed:

   (1) The Egyptian Government shall collect sanitary taxes on imported animals up to the maximum of those now levied by the Sanitary, Maritime and Quarantine Board;
   (2) The Egyptian Government undertakes in consequence to pay annually to the Sanitary, Maritime and Quarantine Board a sum representing the average of the excess of receipts over the expenditure of the above service during the three budgetary years preceding the date on which this Convention comes into force;
   (3) The necessary measures for the disinfection of ships carrying animals, and of skins and other animal waste, shall be carried out as in the past by the Sanitary, Maritime and Quarantine Board;
(4) The foreign personnel in the service of the Egyptian Sanitary, Maritime and Quarantine Board shall receive compensation in accordance with the provisions of Law No. 28 of 1923, regarding the conditions of service and the retirement or discharge of officials, employees or agents of foreign nationality. The scale of compensation shall be that laid down by the above-mentioned law. Other details shall be determined by agreement between the Egyptian Government and the Sanitary, Maritime and Quarantine Board.

(3) On account of the great distance between the Port of Suakim and the headquarters of the Egyptian Sanitary, Maritime and Quarantine Board at Alexandria, and the fact that the pilgrims and passengers who disembark in the port of Suakim concern, from the sanitary point of view, only the territory of the Soudan, the sanitary administration of the port of Suakim shall be withdrawn from the said Board.

Article 164.

The ordinary expenses arising out of the provisions of this Convention, and in particular those due to the increase of the staff employed by the Egyptian Sanitary, Maritime and Quarantine Board, shall be defrayed by an additional yearly contribution by the Egyptian Government of a sum of £E.4,000, which may be paid out of the surplus of the lighthouse dues remaining at the disposal of that Government:

Provided always that from this sum shall be deducted the amount produced by an additional quarantine charge of 10 P. T. (piastres tariff) on each pilgrim, to be levied at Tor.

In the event of the Egyptian Government finding difficulty in bearing this part of the expenses, the Powers represented on the Sanitary, Maritime and Quarantine Board shall come to an understanding with that Government with a view to its sharing the burden of the expenses.

Article 165.

The Egyptian Sanitary, Maritime and Quarantine Board shall bring into harmony with the provisions of this Convention the regulations it now applies relating to plague, cholera, and yellow fever, and also the regulations regarding arrivals from Arabian ports in the Red Sea during the pilgrimage season.

If necessary, it shall revise, to the same end, the general sanitary, maritime and quarantine police regulations now in force.

These regulations shall not become effective until accepted by the several Powers represented on the Board.

II. — VARIOUS PROVISIONS.

Article 166.

The sums realised by sanitary charges and fines levied by the Sanitary, Maritime and Quarantine Board may in no case be used for any purpose other than that of the said Board.

Article 167.

The High Contracting Parties undertake that their Public Health Departments shall frame a set of instructions intended to enable ship captains, particularly when there is no doctor on board, to carry out the provisions of this Convention regarding plague, cholera and yellow fever.
PART V.

FINAL PROVISIONS.

Article 168.

This Convention replaces, as between the High Contracting Parties, the provisions of the Convention signed at Paris on the 17th January 1912, and also those of the Convention signed at Paris on the 3rd December 1903, in so far as the latter may be still in force. These two Conventions shall remain in force as between the High Contracting Parties and any State which is a party thereto and is not a party to this Convention.

Article 169.

This Convention shall bear to-day’s date and may be signed at any time up to the 1st October of the present year.

Article 170.

This Convention shall be ratified, and the ratifications shall be deposited at Paris as soon as possible. It shall not come into force until it has been ratified by ten of the High Contracting Parties. Thereafter it shall take effect in the case of each High Contracting Party as from the date of the deposit of the ratification of such party.

Article 171.

States which have not signed this Convention shall be allowed to accede thereto at their request. Such accession shall be notified through diplomatic channels to the Government of the French Republic, and by that Government to the other Contracting Parties.

Article 172.

Any of the High Contracting Parties may declare, at the moment either of its signature, ratification or accession, that its acceptance of this Convention does not bind any or all of its protectorates, colonies, possessions or mandated territories, and may subsequently accede separately, in accordance with the preceding Article, on behalf of any such protectorate, colony, possession or mandated territory excluded by such declaration.

In faith whereof the respective Plenipotentiaries have signed the present Convention.

Done at Paris the twenty-first day of June, nineteen hundred and twenty-six, in a single copy, which shall remain deposited in the archives of the Government of the French Republic, and of which copies, certified as correct, shall be transmitted through diplomatic channels to the other Contracting Parties.

For Afghanistan:
Islambek Khoudoiar Khan.

For Albania:
Dr. Osman.

1 British and Foreign State Papers, Vol. 97, page 1085.

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For the German Reich:
FRANOUX.
HAMEL.

For the Argentine Nation:
F. A. DE TOLEDO.

For Austria:
Dr. Alfred GRUNBERGER.

For Belgium:
VELGHE.

For Brazil:
Carlos CHAGAS.
Gilberto Moura COSTA.

For Bulgaria:
B. MORFOFF.
Tochko PETROFF.

For Chili:
Armando QUEZADA.

For China:
S. K. YAO.
SCIE TON-FA.

For Colombia:
Miguel Jiménez LOPEZ.

For Cuba:
R. Hernandez PORTELA.

For Denmark:
Th. MADSEN.

For Danzig:
CHODZKO.
STADE.

For the Dominican Republic:
BETANCES.

For Egypt:
FAHKRY.
Dr. M. EL GUINDY.

For Ecuador:
J. ILLINGOURTH.
For Spain:
  Marquis de Faura.
  Dr. F. Murillo.

For the United States of America:
  H. S. Cumming.
  W. W. King.

For Abyssinia:
  Lagarde, Duc d’Entotto.

For Finland:
  Enckell.

For France:
  Camille Barrère.
  Harismendy.
  Navailles.
  Dr. A. Calmette.
  Léon Bernard.

For Algeria:
  Dr. Raynaud.

For Western Africa:
  Dr. Paul Gouzién.

For East Africa:
  Thioux.

For Indo-China:
  Dr. L’Herminier.
  Dr. N. Bernard.

For the States of Syria, of Great Lebanon, of the Alaouites and of the Jebel-Druze:
  Harismendy.

For all other Colonies, Protectorates, Possessions and Territories under French Mandate:
  Audibert.

For the British Empire:
  G. Buchanan.
  John Murray.

For Canada:
  J. A. Amyot.

For Australia:
  W. C. Sawers.
For New Zealand:  
Sydney Price James.

For India:  
D. T. Chadwick.

For the Union of South Africa:  
Philip Stock.

For Greece:  
Al. C. Carapanos.  
Dr. Matarangas.

For Guatemala:  
Francisco A. Figueroa.

For Haiti:  
Georges Audain.

For the Hedjaz:  
Dr. Mahmoud Hamoudé.

For Honduras:  
Rubén Audino Aguilar.

For Hungary:  
Dr. Ch. Grosch.

For Italy:  
Albert Lutrario.  
Giovanni Vittorio Repetti.  
Odoardo Huetter.  
G. Rocco.  
Giuseppe Druetti.

For Japan:  
H. Matsushima.  
Mitsuzo Tsurumi.

For the Republic of Liberia:  
R. Lehmann.  
N. Ooms.

For Lithuania:  
Dr. Pr. Vaiciuška.

For Luxembourg:  
Dr. Praum.

For Morocco:  
Harismendy.  
Dr. Raynaud.
For Mexico:
R. Cabrera.

For Monaco:
F. Roussel.
Dr. Marsan.

For Norway:
Sigurd Bentzon.

For Paraguay:
R. V. Caballero.

For the Netherlands:
Doude van Troostwyk.
N. M. Josephus Jitta.
De Vogel.
Van der Plas.

For Peru:
P. Mimbela.

For Persia:
ad referendum:
Dr. Ali-Khan Partow-Azam.
Mansour Charif.

For Poland:
Chodzko.

For Portugal:
Ricardo Jorge.

For Roumania:
Dr. J. Cantacuzène.

For San Marino:
Dr. Guelpa.

For Salvador:
Carlos R. Lardé-Arthès.

For the Kingdom of the Serbs, Croats and Slovenes:
M. Spalaïkovitch.

For the Soudan:
Oliver Francis Haynes Atkey.

For Switzerland:
Dunant.
Carrière.
For Czechoslovakia:
Dr. Ladislav Prochazka.

For Tunis:
Navailles.

For Turkey:
A. Féthy.

For the Union of Soviet Socialist Republics:
J. Davtian.
J. Mammouila.
L. Bronstein.
O. Mebournoutoff.
N. Freyberg.
Al. Syssine.
V. Egoriew.

For Uruguay:
A. Herosa.

For Venezuela:
ad referendum:
José Ig. Cardenas.

ANNEX.

Khedivial Decree 1 of the 19th June, 1893.

Khedivial Decree 2 of the 25th December, 1894.

Ministerial Order 3 of the 19th June, 1893, concerning the work of the Sanitary,
Maritime and Quarantine Medical Services.

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1 This Decree appeared in Vol. IV, page 372, of this Series.
2 This Decree appeared in Vol. IV, page 380, of this Series.
3 This Ministerial Order appeared in Vol. IV, page 384, of this Series.
PROTOCOL OF SIGNATURE

The undersigned Plenipotentiaries have assembled on this date for the purpose of signing the International Sanitary Convention.

The Plenipotentiaries of the German Empire, referring to Article 25, make express reservations regarding the power given by the Convention to the various Governments, allowing them to impose observation in the case of bubonic plague.

The Plenipotentiaries of Brazil declare that they are authorised to sign the Convention ad referendum under the reservations inserted in the procès-verbal of the last plenary sitting.

The Plenipotentiaries of Chili declare that they wish to make similar reservations to those formulated by the Plenipotentiaries of Brazil and of Portugal.

The Plenipotentiaries of China, in the name of their Government, make express reservations as to the undertaking, referred to in the second paragraph of Article 8, to make obligatory the notification of diseases mentioned in the Convention.

In the name of their Government, the Plenipotentiaries of Egypt renew the express reservations which they have formulated regarding the presence at the Conference of a Delegate representing the Soudan. They declare, moreover, that the presence of this Delegate cannot affect the sovereign rights of Egypt.

The Plenipotentiaries of Spain declare that they make in the name of their Government a similar reservation to that of the Plenipotentiaries of the United States of America relative to Article 12.

The Plenipotentiaries of the United States of America make a formal declaration that the signature by them of the International Sanitary Convention of this date cannot be interpreted in the sense that the United States recognise a régime or a body functioning as the Government of a signatory or acceding Power when the United States have not recognised such régime or body as the Government of that Power. They further declare that the participation of the United States of America in the International Sanitary Convention of this date does not entail any contractual obligation on the part of the United States towards any signatory or acceding Power represented by any régime or body that the United States do not recognise as corresponding to the Government of such a Power, until it is represented by a Government recognised by the United States.

The Plenipotentiaries of the United States of America declare, on the other hand, that their Government reserve the right to decide whether, from the point of view of measures to be applied, a foreign local area should be considered as infected and to determine the measures which should be applied in special circumstances to arrivals in its own ports.

The considerable work accomplished by the International Sanitary Conference and the numerous new provisions that it contains, not having been able to be telegraphed to Her Majesty the Queen of the Kings and to His Royal and Imperial Highness, Prince Tafari Makonnen, Heir and Regent of the Empire, the Delegate of the Empire of Abyssinia declares that he must abstain from signing the Convention until he receives the necessary instructions.

The British Plenipotentiaries declare that their signature does not bind any part of the British Empire which is an independent member of the League of Nations and which does not separately sign, or accede to, the Convention.

They declare, in addition, that they reserve the right not to apply the provisions of the second paragraph of Article 8 for all the Protectorates, Colonies, Possessions or Countries under British mandate which may be parties to the Convention and which, for reasons of a practical nature, cannot give full effect to the provisions relative to the obligatory notification of the diseases mentioned in the said Article.

The Delegate of Canada reserves for his Government the right to decide whether, from the point of view of measures to be applied, a foreign local area should be considered as infected and to determine the measures which should be applied in special circumstances to arrivals in Canadian ports. Subject to this reservation, the Delegate of Canada declares that his Government are ready
to take into consideration the obligations of Article 12 of the Convention and the official information which they may receive on the subject of the existence of diseases in foreign countries.

The Delegate of India declares that he is authorised to sign the International Sanitary Convention with the reservation that India, for reasons of a practical nature, is not at present in a position to accept the obligation arising out of Article 8 as far as the obligatory notification of diseases mentioned in that Article is concerned, except in large towns or in the case of an epidemic.

The British Plenipotentiaries declare and place on record that the reservation of the Plenipotentiaries of Persia on Article 90 cannot in any way modify the existing status quo, pending the conclusion of an agreement between the Persian and British Governments.

The Plenipotentiaries of the Republic of Finland declare that as protection against cholera is not a sufficient guarantee, their Government, notwithstanding the provisions of Article 30, reserve the right to subject persons thus protected to observation, if necessary. On the other hand, as traffic across the Finnish frontier can make use only of two railways to the East, very close to one another, and a single railway to the West, thus preventing the partial closing of the frontier, Finland, in order to avoid total closing in the case of an epidemic, reserves the right to establish observation, if necessary, notwithstanding the provisions of Article 58.

The Plenipotentiaries of Japan declare that their Government reserve the right:

1. To transmit the notifications and information which the Convention requires to be sent to the Office International d’Hygiène publique, through the intermediary of the Far Eastern Bureau at Singapore;
2. To take such measures concerning cholera germ carriers as the sanitary authorities consider necessary.

The Plenipotentiaries of Lithuania declare that in acceding to the Convention they make express reservations as to its being put into effect between Lithuania and Poland, so long as the normal relations between the two countries are not re-established.

These reservations are of particular importance in so far as concerns the provisions of Articles 9, 16, 57 and 66.

The Plenipotentiaries of the Netherlands declare in the name of their Government that the latter reserve the right, in so far as the Dutch East Indies are concerned, to apply the measures prescribed in the second paragraph of Article 10 in a similar manner to arrivals from local areas infected with rat plague.

They declare, in addition, that their Government reserve the right, in so far as the Dutch East Indies are concerned, to interpret Article 27 (2) in the sense that the destruction of rats prescribed in that Article may be applied to ships carrying a cargo from an area infected with rat plague, if the sanitary authority consider that such cargo is likely to harbour rats and that it is loaded in such a manner as to prevent the investigations referred to in the last paragraph of Article 24.

The Plenipotentiaries of Persia declare that nothing justifies the maintenance in the Convention of a special provision regarding the Persian Gulf. The fact that the Convention contains Article 90, constituting Section V of Part II, prevents them from signing without making the most express reservations. The Plenipotentiaries of Persia declare, in addition, that the status quo cannot in any way bind their Government.

On the other hand, they reserve on behalf of their Government the right not to apply the provisions of Article 8 relative to the obligatory notification of the diseases mentioned in that Article.

The Plenipotentiary of Portugal declares that he is authorised by his Government to sign the Convention ad referendum under the reservations inserted in the procès-verbal of the last plenary sitting.

The Plenipotentiary of Turkey declares that Turkey has not renounced by any Treaty its right to be represented on the Sanitary, Maritime and Quarantine Board of Egypt. On the other hand, having regard to the stipulations of the Straits Convention signed at Lausanne, and to the special

1 Vol. XXVIII, page 115, of this Series.

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conditions affecting the Straits of the Bosphorus and of the Dardanelles, he reserves the right of the Sanitary Administration of Turkey to place a sanitary guard on board any merchant ship passing through the Straits without a doctor and arriving from an infected port, in order to ensure that the ship does not call at a Turkish port. It remains understood, however, that the delay and expense necessitated by such a guard will be reduced to a minimum.

The Plenipotentiaries of the Union of Soviet Socialist Republics, recalling the declaration which they made on May 26, at the sitting of the First Commission, on the subject of Article 7 of the proposed text of the Convention, declare that they have no objections to make on the subject of the provision relative to the right of the Office International d'Hygiène publique to conclude arrangements with other sanitary organisations; but they are of the opinion that this right results from the Agreement of Rome of 1907, which determined the functions of the Office. They consider, therefore, that the provision referred to above, which is merely a confirmation of this right, should have appeared in the procès-verbal only, and should not have been made an Article of the Convention itself.

The Plenipotentiaries of the Union of Soviet Socialist Republics recall that on the occasion of the discussion of Article 12 of the Convention they voted against the provision giving Governments the right to prolong in exceptional cases the application of sanitary measures, notwithstanding the declaration of the interested State that the danger from the disease no longer exists. They consider that this provision may affect one of the fundamental principles of earlier Conventions and become the cause of misunderstandings which may arise from its application. They declare, therefore, that, having regard to the spirit of the Convention, this provision can be considered only in exceptional cases, when the Government of the infected local area do not fulfil the obligations prescribed by the Convention in the matter.

The Plenipotentiaries of the Union of Soviet Socialist Republics recall the reservations which they have already made in the Second Commission on the subject of the functions and duties of the Sanitary, Maritime and Quarantine Board of Egypt. They desire to emphasise that Articles 70 and 165, in particular, give the right to the Board to establish various sanitary, maritime and quarantine police regulations on condition that such regulations to become executory shall be accepted by the various Powers represented on the Board. As the Union of Soviet Socialist Republics have not yet any representative on the Sanitary, Maritime and Quarantine Board of Egypt, the Delegation of the Union reserve for their Government the right to accept, or not to accept, the measures instituted by that Board.

The undersigned take note of the reservations set out above and declare that their respective countries reserve the right to benefit by them in the case of arrivals from the countries in the name of which they have been formulated.

In faith of which, the Plenipotentiaries have signed the present Protocol.

Done at Paris, the twenty-first day of June, One thousand nine hundred and twenty-six.

For Afghanistan:
Isambek Khoudjoiar Khan.

For Albania:
Dr. Osman.

For the German Reich:
Franoix.
Hamel.

For the Argentine Nation:
F. A. de Toledo.

For Austria:
Dr. Alfred Grunberger.

No. 1793
For Belgium:
Veleghe.

For Brazil:
Carlos Chagas.
Gilberto Moura Costa.

For Bulgaria:
B. Morfoff.
Tochko Pétroff.

For Chili:
Armando Quezada.

For China:
S. K. Yao.
Scie Ton-Fa.

For Colombia:
Miguel Jiménez Lopez.

For Cuba:
R. Hernandez Portela.

For Denmark:
Th. Madsen.

For Danzig:
Chodzko.
Stade.

For the Dominican Republic:
Betances.

For Egypt:
Fakhry.
Dr. M. El Guindy.

For Ecuador:
J. Illingourth.

For Spain:
Marquis de Faura.
Dr. F. Murillo.

For the United States of America:
H. S. Cumming.
W. W. King.

For Abyssinia:
Lagarde, duc d’Entotto.
For Finland:
   Enckell.

For France:
   Camille Barrère.
   Harismendy.
   Navailles.
   Dr. A. Calmette.
   Léon Bernard.

For Algeria:
   Dr. Raynaud.

For Western Africa:
   Dr. Paul Gouzien.

For East Africa:
   Thiroux.

For Indo-China:
   Dr. L'Herminier.
   Dr. N. Bernard.

For the States of Syria, of Great Lebanon, of the Alouites and of the Jebel-Druze:
   Harismendy.

For all other Colonies, Protectorates, Possessions and Territories under French Mandate:
   Audibert.

For the British Empire:
   G. S. Buchanan.
   John Murray.

For Canada:
   J. A. Amyot.

For Australia:
   W. C. Sawers.

For New Zealand:
   Sydney Price James.

For India:
   D. T. Chadwick.

For the Union of South Africa:
   Philip Stock.

For Greece:
   Al. C. Carapanos.
   Dr. Matarangas.
For Guatemala:
Francisco A. Figueroa.

For Haiti:
Georges Audain.

For the Hedjaz:
Dr. Mahmoud Hamoudé.

For Honduras:
Rubén Audino Agüilar.

For Hungary:
Dr. Ch. Grosch.

For Italy:
Albert Lutrario.
Giovanni Vittorio Repetti.
Odoardo Huetter.
G. Rocco.
Giuseppe Druetti.

For Japan:
H. Matsushima.
Mitsuo Tsurumi.

For the Republic of Liberia:
R. Lehmann.
N. Ooms.

For Lithuania:
Dr. Pt. Vaiciuška.

For Luxembourg:
Dr. Praum.

For Morocco:
Harismendy.
Dr. Raynaud.

For Mexico:
R. Cabrera.

For Monaco:
F. Roussel.
Dr. Marsan.

For Norway:
Sigurd Bentzon.

For Paraguay:
R. V. Caballero.
For the Netherlands:
   Doude Van Troostwyk.
   N. M. Josephus Jitta.
   De Vogel.
   Van der Plas.

For Peru:
   P. Mimbela.

For Persia:
   ad referendum:
   Dr. Ali Khan-Partow-Aazam.
   Mansour Charif.

For Poland:
   Chodzko.

For Portugal:
   Ricardo Jorge.

For Roumania:
   Dr. J. Cantacuzène.

For San Marino:
   Dr. Guelpa.

For Salvador:
   Carlos R. Lardé-Arthés.

For the Kingdom of the Serbs, Croats and Slovenes:
   M. Spalaiikovitch.

For the Soudan:
   Oliver Francis Haynes Atkey.

For Switzerland:
   Dunant.
   Carrière.

For Czechoslovakia:
   Dr. Ladislav Prochazka.

For Tunis:
   Navailles.

For Turkey:
   A. Féthy.
For the Union of Soviet Socialist Republics:
  J. Davtian.
  J. Mammoulia.
  L. Bronstein.
  O. Mebournoutoff.
  N. Freyberg.
  Al. Syssine.
  V. Egoriew.

For Uruguay:
  A. Herosa.

For Venezuela:
  ad referendum:
    José Ig. Cardenas.