

[Report of the Medical Officer of Health for Brentford and Chiswick].

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Borough of Brentford and Chiswick



REPORT

ON THE

Health of the District

AND

School Medical Service

during 1946

Including a REPORT by Dr. R. A. LEADER, *Medical Superintendent of the Isolation and Maternity Hospitals.*

O. C. DOBSON, M.D., D.P.H., D.P.A.
Barrister-at-Law

Medical Officer of Health.

School Medical Officer.



BOROUGH OF BRENTFORD AND CHISWICK

PUBLIC HEALTH COMMITTEE

Councillor GRIFFIN, *Chairman*.

Alderman	EDWARDS, M.B.E.	Councillor	COPP.
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"	LEAHY.	"	Miss NAYLOR.
Councillor	BULWER.	"	Mrs. SAINT.
"	Mrs. BURDEN.	"	SINCLAIR.
"	CLELAND, J.P.		

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"	HOWARD.	"	CRACKNELL.
"	PETT, J.P.	"	Mrs. DANIELS.
"	STROUD, J.P.	"	HICKS.
Councillor	BRAITHWAITE.	"	JOHNSON.
"	BRIERLEY.	"	KITCHINGMAN.
"	BULWER.	"	MUNDAY.
"	Mrs. BURDEN.	"	Miss NAYLOR.
"	COPP.	"	SINCLAIR.

Appointed by the Middlesex County Council :

County Alderman	Mrs. BARNES, J.P.		
"	"	HUGHES, J.P.	
"	"	JOHNSON, J.P.	
County Councillor	CHARLTON, J.P.		
"	"	CLELAND, J.P.	
Mrs. M. C. BOSWOOD, J.P.		Major JENKS, M.B.E., J.P.	
Mrs. D. JUPP, J.P.		Mrs. M. A. J. LANGFORD.	

MATERNITY AND CHILD WELFARE COMMITTEE

Councillor Mrs. BURDEN, *Chairman*.

Alderman EDWARDS.	Councillor JOHNSON.
„ LEAHY.	„ MAYNARD.
Councillor BRAITHWAITE.	„ MURRAY.
„ BRIERLEY.	„ Miss NAYLOR.
„ CORY.	„ RIEDERER.
„ CRACKNELL.	„ SINCLAIR.
„ Mrs. DANIELS.	

Co-opted Members :

Mrs. A. JONES, Mrs. L. MOUNTFORD, Mrs. K. RAINBIRD,
Mrs. C. GORDON-BROWN, Mrs. A. D. CORY, Mrs. J. LOUSADA,
Dr. M. E. F. PALMER.

BOROUGH OF BRENTFORD AND CHISWICK

INTERIM REPORT

ON THE

HEALTH OF THE DISTRICT

AND

SCHOOL MEDICAL SERVICE

DURING THE YEAR

1946

O. C. DOBSON, M.D., D.P.H., D.P.A., Barrister-at-Law.

Medical Officer of Health.

School Medical Officer.

SETTING UP EARLY CHILD WELFARE COMMITTEE
BOROUGH OF BRIGHTON AND HOVE

REPORT
ON THE
SCHOOL MEDICAL SERVICE
DURING THE YEAR
1946

HEALTH OF THE DISTRICT

By
O. C. DORSON, M.D., D.P.H., F.R.C.S., F.R.C.P.
Medical Officer of Health

SCHOOL MEDICAL SERVICE DURING THE YEAR

1946

O. C. DORSON, M.D., D.P.H., F.R.C.S., F.R.C.P.
Medical Officer of Health

BOROUGH OF BRENTFORD AND CHISWICK

PUBLIC HEALTH DEPARTMENT,

TOWN HALL, CHISWICK, W.4.

To the Mayor, Aldermen and Councillors and
Members of the Education Committee of the
Borough of Brentford and Chiswick.

LADIES AND GENTLEMEN,

I have the honour to submit an Annual Report on the Health Services, School Medical Services and Sanitary Circumstances of the District for the year 1946.

1946 was an eventful year in the development of the Health Services of the Borough. It was the first year of peace, in which the Health Services had to be resettled on a normal peace-time basis. It marked the passing of the National Health Service Act, which, when it takes effect, will transfer the control of the personal health services to a new Local Health Authority, which in your case will be the Middlesex County Council. Finally, it was a year in which shortage of, and many changes, in staff caused considerable difficulties in the smooth working of the Health Services as a whole. Dr. Leaning, Medical Officer of Health for 25 years, retired in March, 1946, and the Council put on record this appreciation of his services—"The Mayor . . . together with other members of the Council, paid tribute to the conscientious and untiring and unselfish manner in which Dr. Leaning had at all times carried out his duties during his 25 years' service with the Council. The Council, whilst appreciating the loss which has been sustained by the Borough in the retirement of Dr. Leaning, extended to him their sincere good wishes for his future health and happiness." Until my appointment in September, 1946, the duties of Medical Officer of Health were carried out in a part-time capacity by Dr. Maddison, Medical Officer of Health for Twickenham. He was assisted very ably by Mr. Micklewright, Chief Sanitary Inspector, who continued his good work with me in his last year of office, and I would be failing in my duty if I omitted to pay tribute to his valuable service. The Health Visitors and Office Staff were under establishment for most of the year, but Miss A. M. Edwards returned to the former, and Mr. R. A. James and Mr. P. G. Smith to the latter, after their demobilisation.

The vital statistics may be regarded as satisfactory, the birth rate of 23.6 being above the national figure of 19.1, and the death rate of 11.1 being below the national figure of 11.5. The large

number of births resulted in the pressure on the clinics—particularly at Chiswick—becoming acute, and towards the end of the year a scheme was put in hand aimed at increasing the Chiswick clinic facilities for child welfare, as this clinic was being used to the maximum capacity of the building.

The infantile mortality figure of 26.6 can be compared very favourably with the national one of 43.0. It shows a considerable reduction on the previous year's figure of 36.1, and it is to be hoped that such a satisfactory state of affairs will continue.

The only infectious disease showing any marked prevalence during the year was Measles, of which 188 cases were notified, and there was no death from this disease. Only seven cases of Diphtheria occurred, and this disease also caused no death. The incidence of Scarlet Fever—65 cases—was light and the cases were mostly of a mild nature. A report by Dr. R. A. Leader, Medical Officer of Health, Ealing, and Medical Superintendent, on the work of the Ealing and Brentford and Chiswick Hospitals Committee, covering the work of the Perivale Maternity Hospital and the Clayponds Isolation Hospital, is included.

In November, 1946, a Domestic Help Organiser (Mrs. J. Robbins) was appointed, at first on a temporary basis, to develop and organise an important and growing service. The service rapidly gained in popularity and bids fair to become an important part of the personal health services; 20 workers were being employed at the end of the year.

The School Medical Services during 1946 were in a transitional stage following the Divisional Scheme of Administration subsequent to the introduction of the Education Act, 1944. The School Medical work was integrated with the Maternity and Child Welfare work to a very large degree, the Health Visitors acting in addition as School Nurses. Figures are given showing the work carried out in the various sections. A report by Miss A. S. Stewart, Senior Dental Officer, on the Dental Services, is included.

I would like to take this opportunity of registering my sincere thanks, first, to the ladies who have worked so well in a voluntary capacity in the various clinics, second, to the staff in the Public Health Department who have co-operated so loyally, third to my colleagues in the other Departments in the Town Hall, and last, but not least, to you, Mr. Mayor and Ladies and Gentlemen, who have been so helpful and friendly in a difficult period of transition.

I am, Ladies and Gentlemen,

Your obedient Servant,

O. C. DOBSON,
Medical Officer of Health.

1.—GENERAL STATISTICS, 1946.

Area in acres (including 116 acres of foreshore of River Thames and 24 acres of inland water) ...	2,449.5
Population—Census, 1931	62,617
Population—Registrar-General's Estimate for area (mid 1946)	57,220

2.—VITAL STATISTICS.

LIVE BIRTHS.

	Total	Male	Female	
Legitimate ...	1104	582	522	Birth Rate per 1,000 of the estimated resident population = 23.6
Illegitimate ...	61	32	29	
TOTAL ...	1165	614	551	

STILLBIRTHS.

	Total	Male	Female	
Legitimate ...	38	18	20	Rate per 1,000 total (live and still) Births = 33.2
Illegitimate ...	2	1	1	
TOTAL ...	40	19	21	

DEATHS.

	Total	Male	Female	
	686	350	336	Death Rate per 1,000 of the estimated resident population = 11.1

DEATHS FROM PUERPERAL CAUSES.

Puerperal Sepsis			—	Rate per 1,000 total (live and still) Births = 2.5
Other Puerperal Causes			3	

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

	<i>Total</i>	<i>Male</i>	<i>Female</i>
Legitimate ...	27	16	11
Illegitimate ...	4	2	2
TOTAL ...	<u>31</u>	<u>18</u>	<u>13</u>

Death Rate of all infants per 1,000 live births ...	26.6
Death Rate of all legitimate infants per 1,000 legitimate live births ...	24.4
Death Rate of all illegitimate infants per 1,000 illegitimate live Births ...	65.5
Deaths from Measles (all ages) ...	—
Deaths from Whooping Cough (all ages) ...	1
Deaths from Diarrhoea (under 2 years of age) ...	5
Deaths from Cancer (all ages) ...	109
Deaths from the seven principal Zymotic Diseases	6

TABLE I.

PARTICULARS OF BIRTHS AND DEATHS AS SUPPLIED
BY THE REGISTRAR-GENERAL FOR THE YEAR 1946

Cause of Death							Males	Females
All Causes	...	...	...	...	...	...	350	336
1.	Typhoid Fever, etc.	...	...	...	...	...	—	—
2.	Cerebro-Spinal Fever	...	...	...	...	...	—	—
3.	Scarlet Fever	...	...	...	...	...	—	—
4.	Whooping Cough	...	...	...	...	...	1	—
5.	Diphtheria	...	...	...	...	...	—	—
6.	Tuberculosis of the Respiratory System	...	...	...	...	...	23	6
7.	Other Forms of Tuberculosis	...	...	...	...	...	2	5
8.	Syphilitic Diseases	...	...	...	...	...	5	3
9.	Influenza	...	...	...	...	...	5	1
10.	Measles	...	...	...	...	...	—	—
11.	Acute Poliomyelitis and Polio-Encephalitis	...	...	...	...	...	—	—
12.	Acute Inf. Encephalitis	...	...	...	...	...	1	—
13.	Cancer b. Cav. & Oesophagus (M), Uterus (F)	...	...	...	...	...	6	7
14.	Cancer of Stomach and Duodenum	...	...	...	...	...	10	10
15.	Cancer of Breast	...	...	...	...	...	—	13
16.	Cancer of all other sites	...	...	...	...	...	37	26
17.	Diabetes	...	...	...	...	...	—	2
18.	Intra-Cranial Vascular Lesions	...	...	...	...	...	23	50
19.	Heart Disease	...	...	...	...	...	97	100
20.	Other Disorders of the Circulatory System	...	...	...	...	...	18	18
21.	Bronchitis	...	...	...	...	...	24	20
22.	Pneumonia (all forms)	...	...	...	...	...	18	20
23.	Other Respiratory Diseases	...	...	...	...	...	4	5
24.	Ulcer of Stomach or Duodenum	...	...	...	...	...	12	1
25.	Diarrhoea under 2 years	...	...	...	...	...	4	1
26.	Appendicitis	...	...	...	...	...	1	—
27.	Other Digestive Diseases	...	...	...	...	...	9	3
28.	Nephritis	...	...	...	...	...	7	3
29.	Puerperal and Post Abortive Sepsis	...	...	...	...	...	—	—
30.	Other Maternal Causes	...	...	...	...	...	—	3
31.	Premature Births	...	...	...	...	...	—	3
32.	Congenital Malformation, Birth Injury, Infantile Disorders	...	...	...	...	...	2	2
		...	...	...	...	...	9	7
33.	Suicide	...	...	...	...	...	5	1
34.	Road Traffic Accidents	...	...	...	...	...	5	3
35.	Other Violent Causes	...	...	...	...	...	7	9
36.	All other causes	...	...	...	...	...	15	17
ALL CAUSES							350	336

TABLE II.

INFANTILE MORTALITY DURING THE YEAR 1946

Net deaths from stated causes at various ages under one year.

CAUSE OF DEATH	Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks	1—3 months	3—6 months	6—9 months	9—12 months	Total under 1 year
1. Small-pox	—	—	—	—	—	—	—	—	—	—
2. Chicken-pox	—	—	—	—	—	—	—	—	—	—
3. Measles	—	—	—	—	—	—	—	—	—	—
4. Scarlet Fever	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	—	—	—	—	—	—	—	—	—
6. Diphtheria or Croup	—	—	—	—	—	—	—	—	—	—
7. Erysipelas	—	—	—	—	—	—	—	—	—	—
8. Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—
9. Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
10. Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
11. Meningitis (Non-T.B.)	—	—	—	—	—	—	—	—	—	—
12. Convulsions	—	—	—	—	—	—	—	—	—	—
13. Laryngitis	—	—	—	—	—	—	—	—	—	—
14. Bronchitis	—	—	—	—	—	—	—	—	—	—
15. Pneumonia (all forms)	1	—	—	—	1	2	2	1	—	6
16. Diarrhoea	—	—	—	—	—	—	—	—	—	—
17. Enteritis	—	—	—	—	—	—	1	3	1	5
18. Gastritis	—	—	—	—	—	—	—	—	—	—
19. Rickets	—	—	—	—	—	—	—	—	—	—
20. Suffocation, overlying	—	—	—	—	—	—	—	—	—	—
21. Injury at Birth	1	—	—	—	1	—	—	—	—	1
22. Atelectasis	2	—	—	—	2	—	—	—	—	2
23. Congenital Malformation	4	—	—	—	4	—	—	—	—	4
24. Premature Birth	6	2	—	—	8	—	—	—	—	8
25. Atrophy, Debility and Marasmus	—	—	—	—	—	—	—	—	—	—
26. Pemphigus Neonatorum	—	—	—	—	—	—	—	—	—	—
27. Other Causes	4	—	—	—	4	—	—	—	1	5
TOTALS	18	2	—	—	20	2	3	4	2	31

BIRTHS.

Legitimate ... 1104

Illegitimate ... 61

DEATHS.

Legitimate ... 27

Illegitimate ... 4

INFANTILE MORTALITY RATE PER 1,000 BIRTHS = 26.6.

GENERAL PROVISION OF HEALTH SERVICES IN THE BOROUGH.

CIVIL AMBULANCE SERVICE.

The Council provide and maintain two ambulances.

The staff consists of four drivers and four driver-attendants working in 24-hour shifts.

Both vehicles are available for call night and day throughout the year.

Work of the Ambulances during the year 1946.

Accident Cases	...	...	...	...	249
Maternity Cases	...	...	...	...	463
Private Cases	...	...	...	...	648
Public Cases	...	...	...	...	429
Cases dealt with for other Boroughs	...	...	...	...	108
TOTAL					1897

MATERNAL MORTALITY.

Deaths from Puerperal Causes :—

Puerperal Sepsis	...	...	...	...	Nil
Other Causes	...	...	...	...	3

The following table shows the number of maternal deaths connected with pregnancy during the last 10 years :—

Year	Died from Sepsis	Died from other causes connected with pregnancy
1937	—	—
1938	2	2
1939	—	2
1940	—	—
1941	—	—
1942	1	2
1943	3	2
1944	—	2
1945	—	—
1946	—	3

SUMMARY OF WORK AT THE MATERNITY AND CHILD
WELFARE CLINICS—1946.

	BRENTFORD AREA			CHISWICK AREA					Grand Total 1946	Grand Total 1945
	Monday Clinics	Wed. Clinics	TOTAL	Tuesday Clinics	Wed. Clinics	Thurs. Clinics	Fri. Clinics	TOTAL		
Number attending for the first time during the year :				†	*					
Under 1 year of age ...	147	138	285	198	21	229	184	632	917	794
Over 1 year of age ...	22	15	37	42	4	68	72	186	223	176
TOTALS ...	169	153	322	240	25	297	256	818	1140	970
Number of children attended and weighed :—										
Under 1 year of age ...	2101	2260	4361	3075	266	3640	2974	9955	14316	12733
Over 1 year of age ...	781	1230	2011	563	52	1117	1376	3108	5119	5053
TOTALS ...	2882	3490	6372	3638	318	4757	4350	13063	19435	17786
Number of children seen by Doctor :—										
Under 1 year of age ...	514	584	1098	725	84	707	664	2180	3278	2441
Over 1 year of age ...	268	329	597	268	34	425	432	1159	1756	1507
TOTALS ...	782	913	1695	993	118	1132	1096	3339	5034	3948

†Commenced 19th February, 1946,

*Commenced 23rd October, 1946,

ANTE-NATAL CLINICS.

District	Number of Clinics held during year	Number of expectant mothers attending for the first time	Total number of expectant mothers attending	Number of post-natal mothers attending	Total number of attendances made	Average attendances per session
BRENTFORD	51	270	347	5	1259	24.7
CHISWICK	163	635	884	28	3730	22.9
TOTALS ...	214	905	1231	33	4989	23.3

SUPPLY OF MILK AND FOOD.

(Other than under the National Milk and Vitamins Scheme)

Terms of Supply	Milk			Meals supplied at Dining Centres			Other Food*		
	Expectant Mothers	Nursing Mothers	Children under 5 years of age	Expectant Mothers	Nursing Mothers	Children under 5 years of age	Expectant Mothers	Nursing Mothers	Children under 5 years of age
Free, or at less than cost price in necessitous cases .	YES	YES	YES	NO	NO	NO	YES	YES	YES
At cost price in other cases (e.g., sale of dried milk at Centres)	YES	YES	YES	NO	NO	NO	YES	YES	YES

*Cod Liver Oil and Malt, Virol, Bemax, etc.

HEALTH VISITORS.

Seven Nurses were on the staff for this and the School Medical Service.

The following is a summary of the work of the Health Visitors during the year :—

(a) To expectant mothers :—		
First visits	...	504
Total visits	...	642
(b) To children under 1 year of age :		
First visits	...	1071
Total visits	...	1998
(c) To children between the ages of 1 and 5 years :		
Total visits	...	2282
(d) Ophthalmic visits		19
(e) Other Visits :		
Pemphigus Neonatorum	...	1
Child Life Protection	...	94
Post-Natal	...	131
Infantile Mortality	...	2
Epidemic Diarrhoea	...	3
Premature Birth	...	2
Miscellaneous (Special Visits, etc.)	...	166
TOTAL		5340

CHILD LIFE PROTECTION (under Sections 206-220 of the Public Health Act, 1936).

The following table gives particulars of registration during the year :—

(1) Number of foster-parents on the Register :—		
(a) at the beginning of the year	...	14
(b) at the end of the year	...	13
(2) Number of children on the Register :—		
(a) at the beginning of the year	...	20
(b) at the end of the year	...	19
(c) who died during the year	...	—
(d) on whom inquests were held during the year	...	—

BENNETT STREET DAY NURSERY (equipped for 45 children)

Total attendances during the year 1946 10073

EALING ROAD DAY NURSERY (equipped for 28 children)		
Total attendances during the year 1946	... ..	5935

NURSERY CLASSES.

Total attendances during the year 1946 :—		
Beverley Road (equipped for 25 children)	....	7688
Strand-on-the-Green (equipped for 50 children)	... ..	8445
Lionel Road (equipped for 50 children)	... ..	8495
St. George's (equipped for 60 children)	... ..	8676

CARE OF PREMATURE INFANTS.

This work has been carried out on the lines set out in Ministry of Health Circular 20/44, dated March, 1944, as described in the Report for 1945.

CARE OF ILLEGITIMATE CHILDREN.

The Borough continues to participate in the County Scheme and use has been made of the Hostels at 16, The Park, Golders Green, and "Marylands," Hendon.

CONTROL OF LICE INFESTATION.

No change was made in the policy adopted in previous years.

SANITARY INSPECTION OF THE AREA

Tabular Statement of the Work of the Sanitary Department, 1946

INSPECTIONS.

Number of premises inspected on complaint	... ..	1689
Number of premises inspected in connection with infectious disease	... ..	90
Number of primary inspections	... ..	3743
Number of re-inspections	... ..	1579
Total number of inspections and re-inspections	... ..	5322

ACTION TAKEN (other than Housing Act, 1936).

Cautionary or intimation notices served	... ..	1197
Statutory Notices issued (under Public Health Acts)		2
Summonses served	... ..	—
Number of Certificates under Rent, &c. (Restrictions) Acts issued to tenants	... ..	4
Number of Clearance Certificates issued to owners	... ..	2

Particulars of Sanitary Defects referred to in Notices served and other matters.

(a) DRAINAGE OF EXISTING BUILDINGS.

New W.C.s provided, repaired, supplied with water or otherwise improved	195
Percentage of houses provided with water-closets ...	100%
Drains :—	
Tested (Smoke)	52
Unstopped, repaired, trapped, etc.	107
Waste pipes, rainwater pipes, disconnected, repaired, etc.	140
New soil pipes and ventilating shafts fixed ...	14
New sinks provided	25
Disconnecting traps and chambers inserted ...	25
Reconstructed (whole system)	7
Reconstructed (connections)	48
Percentage of houses draining into sewers ...	99.9%
Surface water drains reconstructed	4
Surface water drains repaired	2

(b) WATER SUPPLY AND WATER SERVICES.

Draw taps on main	14
Percentage of houses supplied from Public Water Service	100%

The whole of the district is supplied by Metropolitan Water Board Mains. There are five wells in the Borough and the following is the position with regard to these wells :

- (i) No 50, Strand-on-the-Green—well now dismantled.
- (ii) Ailsa Craig Works, Strand-on-the-Green—well now dismantled.
- (iii) Ailsa Craig Works, Strand-on-the-Green—well now dismantled.
- (iv) Mr. A. Knapp, 21, Grove Park Gardens—well working, but used for washing purposes only. Drinking water obtained direct from mains.
- (v) Green's Boat House, Riverside Lands—well working, but used for washing purposes only. Drinking water obtained direct from mains.

(c) REFUSE.

New bins provided	122
Frequency of refuse removed from each house ...	weekly
Number of Complaints received—dealt with by Engineer's Department.	
Method of disposal—barging away to controlled tip.	

(d) SUNDRY NUISANCES.

Overcrowding (urgent cases reported to Housing Committee)	
Smoke Minor complaints only	
Accumulation of refuse	4
Foul ditches, ponds, etc., and stagnant water	—
Dampness	466
Yards repaired or repaved	17
Leaky roofs and eaves gutterings	698
Defective floorings, joists and skirtings	209
Defective plasterwork to walls and ceilings	650
Premises cleansed and redecorated	376
Other defects	740

(e) DISINFECTION.

Premises Disinfected :—

Ordinary notifiable diseases	70
Phthisis	12
Cancer	13
Other diseases	4
Rooms stripped and cleansed (Section 167, Public Health Act, 1936)	—
Premises treated for vermin	31
Premises treated for other pests (wasps, moths, ants, beetles)	22

(f) SLAUGHTERHOUSES.

Number on Register (including one Knacker's Yard)	5
Contravention of Byelaws	—

Slaughter of Animals Act, 1933.

(*vide* Livestock (Restrictions on Slaughter) Order, 1940)

Number of licences to slaughter animals issued during the year :—

New Licences	—
Renewed Licences	2

FOOD AND DRUGS ACT, 1938.

MILK (SPECIAL DESIGNATIONS) REGULATIONS,
1936-1946.

MILK AND DAIRIES ORDER, 1926.

Number of premises on Register	20
Number of Dealer's Licences issued to sell :—	
(a) Tuberculin Tested Milk	5
(b) Accredited Milk	—
(c) Pasteurised Milk	14
Number of Supplementary Licences issued to sell :—	
(a) Pasteurised Milk	2
(b) Tuberculin Tested Milk	2

BAKEHOUSES.

Number in district in use	17
Contraventions of Factory Acts	—

UNSOOUND FOOD.

List of Food Condemned during the year 1946.

FRUIT AND VEGETABLES :

Carrots	160 bags
Cauliflower	49 cwts.
Chestnuts	85 lbs.
Parsnips	80 bags
Walnuts	24 lbs.

MEAT :

Beef	836 $\frac{3}{4}$ lbs.
Chicken	3 $\frac{1}{2}$ lbs.
Lamb	85 lbs.
Mutton	2 $\frac{1}{2}$ lbs.
Ox Tails	1252 $\frac{3}{4}$ lbs.
Pigs' Heads	66 $\frac{1}{2}$ lbs.
Pork	1 $\frac{1}{2}$ lbs.
Pork Offal	26 lbs.
Rabbits	25 lbs.
Sausages (Beef)	17 lbs.
Sausages (Pork)	17 $\frac{1}{2}$ lbs.
Sausage Meat	3 $\frac{3}{4}$ lbs.
Veal	6 $\frac{1}{4}$ lbs.

FISH :

Cod	12 $\frac{1}{2}$ stones
Eels	56 lbs.
Fillet, Smoked	7 stones
Hake	10 stones
Whiting, Smoked	10 stones

GENERAL PROVISIONS :

Bacon	208 $\frac{3}{4}$ lbs.
Barley	29 $\frac{1}{2}$ lbs.
Beans, Butter	2 lbs.
Biscuits	1026 $\frac{3}{4}$ lbs.
Black Pudding	2 $\frac{1}{4}$ lbs.
Bread	1 $\frac{3}{4}$ lbs.
Butter	54 lbs.
Cereal Sweepings	13 cwts.
Cheese	325 $\frac{1}{4}$ lbs.
Chocolate	2 oz. bars—130

GENERAL PROVISIONS (Continued)

Chocolates	...	...	...	...	...	3½ lbs.
Cocoa	...	...	...	...	...	¼ lb.
Cooking Fat	...	...	...	...	...	29½ lbs.
Crumpets	...	...	...	...	...	1613
Egg, Dried	...	...	...	...	...	1 lb.
Egg Substitute	...	...	...	...	...	144 pkts.
Eggs	...	...	...	...	...	505
Flour	...	...	...	...	...	666 lbs.
Ham	...	...	...	...	...	88 lbs.
Jam and Marmalade	...	...	...	...	...	56½ lbs.
Lemon Cheese	...	...	...	...	...	24 lbs.
Macaroni	...	...	...	...	...	128 lbs.
Margarine	...	...	...	...	...	156½ lbs.
Mustard	...	...	...	...	...	13 tins
Oatmeal	...	...	...	...	...	106 lbs.
Oats, Rolled	...	...	...	...	...	4 lbs.
Paste	...	...	...	...	...	11 jars
Peppers, Italian	...	...	...	...	...	457 boxes
Pickles	...	...	...	...	...	16 jars
Prunes	...	...	...	...	...	309¼ lbs.
Pudding Mixture	...	...	...	...	...	20 pkts.
Quaker Oats	...	...	...	...	...	80 lbs.
Rissoles, Meat	...	...	...	...	...	82 lbs.
Salad Cream	...	...	...	...	...	1 bottle
Soyetti	...	...	...	...	...	29 lbs.
Sugar	...	...	...	...	...	314¾ lbs.
Sultanas	...	...	...	...	...	178½ lbs.
Syrup	...	...	...	...	...	8 lbs.
Sweets (Boiled)	...	...	...	...	...	45 lbs.
Swiss Rolls	...	...	...	...	...	12
Tea	...	...	...	...	...	30½ lbs.
Vinegar	...	...	...	...	...	2 pints

TINNED FOODS (Miscellaneous):

Apricots	...	...	...	...	...	17 tins
Beans, Baked	...	...	...	...	...	135 tins
Beef, Corned	...	...	...	...	...	349¼ lbs
Beetroot	...	...	...	...	...	16 tins
Brisket	...	...	...	...	...	20 lbs.
Brislings	...	...	...	...	...	3 tins
Carrots	...	...	...	...	...	20 tins
Crayfish	...	...	...	...	...	7 tins
Damsons	...	...	...	...	...	2 tins
Fruit Cocktail	...	...	...	...	...	6 tins
Luncheon Meat	...	...	...	...	...	31 lbs.
Luncheon Sausage	...	...	...	...	...	27¾ lbs.
Meat and Vegetable Ration	...	...	...	...	...	137 tins

TINNED FOODS (Continued).

Milk, Condensed	...	...	...	...	...	34 tins
Milk, Evaporated	...	...	...	...	...	1904 tins
Milk, Household	...	...	...	...	...	161 tins
Milk, Skimmed	...	...	...	...	...	51 tins
Parsnips	...	...	...	...	...	1 tin
Pate de Foie	...	...	...	...	...	2 tins
Peaches	...	...	...	...	...	5 tins
Pears	...	...	...	...	...	9 tins
Peas	...	...	...	...	...	218 tins
Pease Pudding	...	...	...	...	...	12 tins
Pilchards	...	...	...	...	...	119 tins
Pineapple	...	...	...	...	...	2 tins
Plums	...	...	...	...	...	72 tins
Salmon	...	...	...	...	...	150 tins
Sardines	...	...	...	...	...	38 tins
Soups	...	...	...	...	...	35 tins
Spaghetti	...	...	...	...	...	7 tins
Steak, Stewed	...	...	...	...	...	119 tins
Steak and Kidney	...	...	...	...	...	7 tins
Stew, Irish	...	...	...	...	...	6 tins
Tomatoes	...	...	...	...	...	8 tins
Tongue, Lambs'	...	...	...	...	...	4 $\frac{3}{4}$ lbs.
Tongue, Ox	...	...	...	...	...	12 lbs.
Vegetable Salad	...	...	...	...	...	7 tins

OFFENSIVE TRADES :

Number of premises in district	...	...	...	...	...	3
Nature of Trades :						
One Soap Boiler, 2 Rag and Bone Dealers.						

CANAL BOATS :

Number of Boats on Register :						
Motor Propelled Boats	...	...	...	...	...	97
Other Boats	...	...	...	...	...	418

PETROLEUM ACTS :

Number of applications received for licences to store and sell petroleum spirit	...	...	...	...	...	89
Number of applications received for licences to store and sell petroleum mixture	...	...	...	...	...	16
Number of applications received for licences to store and sell carbide of calcium	...	...	...	...	...	9
Number of gallons of petroleum spirit covered by licences	...	...	...	...	...	17800
Number of gallons of petroleum mixture covered by licences	...	...	...	...	...	7480
Quantity of carbide of calcium covered by licences	...	...	...	...	...	42524 lbs.

HOUSING.

HOUSING ACT, 1936.

Owing to the difficulty experienced by builders in obtaining labour and necessary materials, the usual routine house-to-house inspection in the Borough was again suspended during the year.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

A.—NOTIFIABLE DISEASES DURING THE YEAR 1946.

Disease	Total Cases notified	Cases admitted to hospital	Total Deaths
Scarlet Fever	65*	47	—
Whooping Cough	34	1	1
Diphtheria	7§	7	—
Measles	188	10	—
Pneumonia	20	2	38
Cerebro-Spinal Fever	2	2	—
Acute Poliomyelitis	1	1	—
Dysentery	16†	10	—
Ophthalmia Neonatorum	1	—	—
Puerperal Pyrexia	18	18	—
Small-pox	—	—	—
Erysipelas	8	3	—
Malaria (contracted abroad)	3	—	—
Encephalitis	—	—	1

*In addition, two cases originally notified and admitted to Hospital were subsequently diagnosed not Scarlet Fever.

§In addition, eight cases originally notified and admitted to Hospital were subsequently diagnosed not Diphtheria.

†In addition, one case originally notified and admitted to Hospital was subsequently diagnosed not Dysentery.

B.—OPHTHALMIA NEONATORUM.

Cases Notified	Cases treated at home	Cases treated in hospital	Vision unim- paired	Vision im- paired	Total Blind- ness	Deaths
1	1	Nil	1	Nil	Nil	Nil

C.—AGES OF CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1946.

DISEASE	NUMBER OF CASES NOTIFIED												
	At all ages	At Ages—Years											
		Under 1	1	2	3	4	5 and under 10	10 and under 15	15 and under 20	20 and under 35	35 and under 45	45 and under 65	65 and over
Scarlet Fever	65*	1	—	4	2	3	39	7	4	3	2	—	—
Whooping Cough	34	4	3	8	6	3	9	1	—	—	—	—	—
Diphtheria	7†	—	1	1	—	—	1	—	2	2	—	—	—
Measles	188	5	10	28	21	31	84	4	1	2	1	1	—
Pneumonia	20	—	3	—	—	—	4	2	1	—	1	6	3
Cerebro-Spinal Fever	2	1	—	—	—	—	—	1	—	—	—	—	—
Acute Poliomyelitis	1	—	—	—	—	—	—	—	—	1	—	—	—
Dysentery	16§	1	3	2	—	—	—	—	1	3	2	4	—
Ophthalmia Neonatorum	1	1	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	18	—	—	—	—	—	—	—	—	14	4	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	8	1	—	—	—	—	—	—	—	1	—	3	3
Malaria (Contracted Abroad)	3	—	—	—	—	—	—	—	—	1	2	—	—
Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—

*In addition, two cases originally notified were subsequently diagnosed not Scarlet Fever.

†In addition, eight cases originally notified were subsequently diagnosed not Diphtheria.

§In addition, one case originally notified was subsequently diagnosed not Dysentery.

D.—CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR, 1946.

CLASSIFIED IN WARDS.

DISEASE	NUMBER OF CASES NOTIFIED									Total Cases
	Brentford West	Brentford Central	Brentford East	Bedford Park	Chiswick Park	Grove Park	Gunners-bury	Old Chiswick	Turnham Green	
Scarlet Fever	8	4	3	4	6	9	9	11	11	65
Whooping Cough	10	6	—	2	—	10	2	1	3	34
Diphtheria	2	1	1	—	—	2	1	—	—	7
Measles	27	6	3	15	25	18	16	49	29	188
Pneumonia	8	3	1	1	1	2	1	—	3	20
Cerebro-Spinal Fever	—	—	1	—	—	—	1	—	—	2
Acute Poliomyelitis	—	—	—	—	—	—	1	—	—	1
Dysentery	12	—	—	—	—	1	2	1	—	16
Ophthalmia Neonatorum	—	—	1	—	—	—	—	—	—	1
Puerperal Pyrexia	—	—	—	—	—	—	—	18	—	18
Erysipelas	3	—	1	—	—	1	—	2	1	8
Malaria (Contracted Abroad)	3	—	—	—	—	—	—	—	—	3
Encephalitis	—	—	—	—	—	—	—	—	—	—
Tuberculosis—										
Respiratory	15	9	10	12	15	9	19	17	11	117
Non-Respiratory	1	—	4	1	1	1	2	1	1	12

E—TUBERCULOSIS—1946.

AGE GROUPS	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 1 year ...	—	—	—	—	—	—	—	—
1—5 years ...	1	2	—	1	—	—	—	—
5—15 years ...	8	1	2	1	—	—	—	—
15—25 years ...	17	20	1	2	3	1	1	1
25—35 years ...	18	17	2	—	2	—	—	2
35—45 years ...	11	6	—	1	2	2	1	—
45—55 years ...	7	1	—	—	8	1	—	—
55—65 years ...	3	1	—	1	5	1	—	—
65 years and over	3	1	—	1	3	1	—	2
TOTALS ...	68	49	5	7	23	6	2	5

During the year 11 non-notified tuberculous deaths were recorded.

LABORATORY WORK.

The following table sets out a record of the bacteriological work during the year 1946, all of which was carried out in the Council's Laboratory.

SUSPECTED DISEASE	Result		
	Positive	Negative	Total
Diphtheria	—	192	192
Tuberculosis	1	19	20
Other Diseases	—	—	—
TOTALS ...	1	211	212

SCHOOL HEALTH SERVICES.

MEDICAL INSPECTION AND TREATMENT RETURNS FOR THE YEAR ENDED 31st DECEMBER, 1946

TABLE I.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

A.—ROUTINE MEDICAL INSPECTIONS :

(1) No. of Inspections :—

Entrants—500. Second Age Group—97. Third Age Group—713.

TOTAL 1310

(2) No. of other Routine Inspections—913.

GRAND TOTAL 2223

B.—OTHER INSPECTIONS :

No. of Special Inspections and Re-Inspections—1278.

TABLE II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Sub-normal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
	No.	%	No.	%	No.	%	No.	%
Entrants 500	196	39.2	252	50.4	51	10.2	1	.2
Second 97	36	37.1	53	54.0	8	8.0	—	—
Third 713	349	48.8	333	46.7	29	4.0	2	.2
Other 913	437	47.8	440	48.2	36	3.9	—	—
TOTALS 2223	1018	45.8	1078	48.4	124	5.5	3	0.13

TABLE III.

GROUP I.—Treatment of Minor Ailments (excluding uncleanliness).

Total Number of Defects treated or under treatment during the year under the Authority's scheme ... 1903

GROUP II.—Treatment of Defective Vision and Squint.

	<i>Under the Authority's Scheme</i>
Errors of Refraction (including squint)	276
Other defect or disease of the eyes (excluding those recorded in Group I)	13
Number of children for whom spectacles were :	
(a) Prescribed	286
(b) Obtained	236

GROUP III.—Treatment of Defects of Nose and Throat :

	<i>Under the Authority's Scheme</i>
Received Operative Treatment	2
Received other forms of Treatment	7
Total Number Treated	9

DENTAL INSPECTION AND TREATMENT.

By setting out the statistical results of the School Dental Service and the Maternity and Child Welfare Dental Service side by side, an accurate assessment of the total work carried out can be made without reference to two separate tables.

During 1946, Miss I. C. Miller, L.D.S., R.C.S., Glasgow, was appointed whole-time Dental Officer and the staff now consists of three whole-time Dental Officers, three whole-time and one part-time Surgery Assistants and one clerk. The part-time Surgery Assistant is engaged in work connected with the Orthodontic Clinic and in clerical work.

The most important event during the year was the inauguration of an Orthodontic Clinic, and in June Mr. C. F. Ballard, M.R.C.S., L.R.C.P., L.D.S., was appointed Orthodontist to attend on two sessions a week. It is very obvious that this

extension of the service is much appreciated both by children and parents. Long and difficult visits to a London Hospital extending sometimes over a period of years are no longer necessary and no child is denied regulation treatment because of its parents' inability to make long journeys. The proposed Orthodontic Surgery was not available during 1946 and the Orthodontic Clinic was carried on in one of the existing surgeries at Chiswick. This arrangement interfered with routine work and it is hoped to complete the new surgery in 1947. Mr. Ballard has submitted a report on the first six months' work of this most welcome extension of the service. It must be stressed that there is already a long waiting list for treatment and that more sessions will be required in the near future.

2,422 children were inspected during 24 routine inspection sessions and 1,751 referred for treatment. 973 children attended the clinic as casual or emergencies. The vast majority were children whose parents were anxious to obtain regular treatment, and not purely relief from pain. 919 of these cases were referred for treatment.

The over-all acceptance rate was 85% and a total of 2,422 children actually received treatment during the year (2 Secondary Grammar Schools inspected during 1945 were treated in 1946). 5,235 permanent fillings and 1,656 temporary fillings were inserted. 295 permanent teeth were extracted for caries and 81 for overcrowding. 1,851 temporary teeth were extracted. 2,335 other operations were carried out.

The ratio of permanent teeth filled to permanent teeth extracted remains high at 18 : 1 and the ratio of temporary teeth filled to temporary teeth extracted improved to 1 : 1.1.

Appreciation of conservative dentistry continues to grow and the service in this area has reached a stage in its development when it is, in the large majority of cases, no longer a question of persuading parents to accept treatment. The problem is to cope with a very definite demand for regular attention. This can be provided only by a service which is well equipped and well staffed. An output of 2,865 fillings per Dental Officer is a very satisfactory one and it is obvious that if the present high standard of treatment, reflected in the ratio of fillings to extractions, is to be maintained and the time elapsing between routine inspection decreased, the service will have to expand. The raising of the school leaving age will place an additional responsibility on the service.

Tribute must be paid again to the help afforded by the teachers of the district; they contribute very largely to the smooth running of the service.

MATERNITY AND CHILD WELFARE.

Complete treatment, that is fillings, scalings, extractions, dentures, etc., is provided for ante and post-natal patients and for pre-school children referred from the Maternity and Child Welfare Clinics. Parents of pre-school children are advised to bring them at three-monthly intervals until school age is reached. Children under five years of age make excellent patients and the early and regular treatment provided largely eliminates the necessity for carrying out extensive treatment, often involving extractions, at school entry age. The number of children taking advantage of the service, however, is small compared with the total number of school entrants.

As far as possible all treatment is carried out early in pregnancy, but the fact that the majority are not in the habit of seeking regular inspection and treatment means that, to render each patient dentally fit, much work of a lengthy and time-consuming nature is required.

That this branch of the service is an expanding one is shown by the increase of 963 in attendances over those for 1945, and 936 more fillings were inserted. The ratio of permanent fillings to permanent extractions is now 2.7 : 1 and that for temporary fillings to temporary extractions 2.5 : 1. This is a satisfactory indication of the high standard of treatment being given but gives no grounds for complacency.

Expectant and nursing mothers and pre-school children are afforded a high priority for treatment but it is unfortunate that any increase in the number of sessions devoted to this work can only be made at the expense of the school service. Only an increase in the staff and in the number of surgeries available will effect an improvement in the service as a whole.

	Schools	M. & C.W.	Total
1. INSPECTED.			
(a) Routine	2422	542	2964
(b) Special	973	205	1178
TOTAL ...	3395	747	4142
2. REFERRED.			
(a) Routine	1751		
(b) Special	919		
TOTAL ...	2670	722	3392
3. SESSIONS.			
(a) Inspection	24		
(b) Treatment	1115		
(c) Administration, etc. ...	61		
TOTAL ...	1200	319	1519
4. TREATED	2422	656	3078
5. ATTENDANCES	6484	3019	9503
6. FILLINGS.			
(a) Permanent Teeth	5235	1332	6567
(b) Temporary Teeth	1656	374	2030
TOTAL ...	6891	1706	8597
7. EXTRACTIONS.			
(a) Permanent Teeth	295	558	853
(b) Overcrowding	81	—	81
(c) Temporary Teeth	1851	137	1988
TOTAL ...	2227	695	2922
8. Administration of Gas (N ₂ O) ...	971	266	1237
9. Ratio of Permanent Fillings to Permanent Extractions ...	18 : 1	2.7 : 1	7.7 : 1
10. Ratio of Temporary Fillings to Temporary Extractions ...	.9 : 1	2.5 : 1	1 : 1
11. OTHER OPERATIONS.			
(a) Permanent Teeth	1596	863	2459
(b) Temporary Teeth	739	217	956
TOTAL ...	2335	1080	3415
12. Number of Dentures	—	76	76
13. Patients fitted with Dentures ...	—	49	49
14. Fillings per session (average) ...	5.7	5.3	5.6
15. Extractions per session	1.8	2.1	1.9
16. Other Operations per session ...	1.9	3.3	2.2
17. Attendances per session	5.4	9.4	6.2
		(Incl. Inspections)	

ORTHODONTIC REPORT 1946 (JUNE—DEC.).

The Orthodontic Scheme for the children of Brentford and Chiswick commenced in June, 1946. Orthodontics is that branch of Dental Surgery which treats irregularities of the teeth and the underlying causes of such irregularities. There are many reasons for the correction of dental abnormalities but three are of major importance. First, with the teeth set in regular arches and the jaws meeting one another in the correct anatomical manner, the entire dentition is in the best possible position to withstand disease. The treatment of decay or pyorrhoea in a mouth with irregular teeth may be a waste of time. Second, many irregularities are such that the child, even at a comparatively early age, begins to worry about his or her appearance and this reacts unfavourably on the mental outlook. Third, the muscles of the face and throat must function correctly for breathing, voice production and mastication. Irregularities of the teeth may prevent the proper action of these muscles. Frequently, however, the position is reversed, that is, abnormal action of muscles is the cause of irregularities of the teeth. In such cases, re-education of muscle function must run concurrently with orthodontic treatment. In many such cases, the work is done in close co-operation with the E.N.T. specialist and speech therapist.

The Orthodontic Surgeon attends on two sessions each week, when cases referred by the other Dental Officers are seen. A child may be referred at any age but frequently a case under twelve years old will not have treatment commenced immediately. Such cases are kept under frequent observation so that treatment may be commenced at the appropriate time. This is usually between 12 and 13 years of age, and partly explains the figures of 107 cases seen and only 39 cases treated by December, 1946.

Much of the treatment is carried out by fixed appliances. These are of such a specialised nature that much valuable surgery time has to be spent doing work that should be done by a dental mechanic. Few mechanics, however, are capable of doing this work and these are generally attached to hospitals.

It is to be hoped that in the near future the Middlesex School Dental Service will start its own dental laboratory when a good deal of this work can be passed on and so more time can be devoted to the patients.

As to the reaction of parents to this new service, our experience during the last few years has been that many parents have been seeking treatment without being able to obtain it. Now that it is available they are very pleased and co-operate wholeheartedly. This is very important because the co-operation of both parents and children is essential to success. In the few cases where there has been lack of co-operation, treatment has either been simplified or as in one case, discontinued altogether.

An essential aid to diagnosis and treatment are radiographs showing the position of unerupted teeth. These X-Rays are obtained from the West Middlesex County Hospital, the children being sent there by appointment.

It is important to remember that many irregularities are produced by early loss of deciduous (baby) teeth and many irregularities already present are made more difficult to treat by this early loss. It is a pleasure to record, therefore, that the efficient work of the Dental Officers of Brentford and Chiswick has kept this type of irregularity to a minimum.

There is a waiting list of 150 of nearly all age groups. These are not necessarily taken in rotation as priority is given so that treatment can be completed before school leaving age is reached. Most of the young children on the list are inspected to ensure that no urgent treatment is required and then they are kept under observation.

PARTICULARS OF WORK CARRIED OUT AT CHISWICK ORTHODONTIC CLINIC FOR THE PERIOD JUNE TO DECEMBER, 1946:

First inspections	...	...	...	...	107
Treated with appliance removable	...	...	...	...	15
Treated with appliance fixed	...	...	...	...	24
Impressions for reference	...	...	...	...	236
Impressions for appliances	...	...	...	...	33
Adjustments	...	...	...	...	22
Molar bands made	...	...	...	...	46
Separating wires fitted	...	...	...	...	2
Advised no treatment	...	...	...	...	1
Cases dismissed	...	...	...	...	1
Sessions devoted to treatment	...	...	...	...	45

TABLE V.

(1). Average number of visits per school made during the year by School Nurses	...	...	9.3
(2). Total number of examinations of children in the schools by School Nurses	...	...	20,456
(3). Number of individual children found unclean	...	...	537
(4). Number of individual children cleansed under Section 54 of the Education Act, 1944	...	...	—
(5). Number of cases in which legal proceedings were taken :			
(a) Under the Education Act, 1944	...	...	—
(b) Under School Attendance Byelaws	...	...	—

TABLE VI.

Number of totally or almost totally blind and deaf children who are not at the present time receiving education suitable for their special needs. The return relates to all such children, including evacuees, resident in the Authority's area.

	1 At a Public Elementary School	2 At an Institution other than a Special School	3 At no School or Institution
Blind Children ...	Nil	Nil	Nil
Deaf Children ...	Nil	Nil	Nil

MEDICAL INSPECTION AND TREATMENT OF SECONDARY GRAMMAR AND TECHNICAL SCHOOL CHILDREN

A.—ROUTINE MEDICAL INSPECTIONS.

(1) No. of Inspections :—

<i>Age Group</i>	<i>No. of Inspections</i>
10	—
11	67
12	86
13	46
14	130
15	185
16	67
17	13
TOTAL ...	594

(2) No. of other routine inspections—Nil.

B.—OTHER INSPECTIONS.

Number of Special Inspections and Re-inspections—Nil.

CLASSIFICATION OF THE NUTRITION OF CHILDREN
INSPECTED DURING THE YEAR IN THE ROUTINE AGE
GROUPS

Age Group and Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Sub-normal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
10 —	—	—	—	—	—	—	—	—
11 67	33	49.2	30	44.8	4	5.9	—	—
12 86	49	56.9	34	39.3	3	3.5	—	—
13 46	24	52.2	18	39.1	4	8.7	—	—
14 130	63	48.5	65	50.0	2	1.5	—	—
15 185	106	57.3	72	38.9	7	3.8	—	—
16 67	50	74.6	16	23.9	1	1.5	—	—
17 13	9	69.2	4	30.8	—	—	—	—
TOTALS 594	334	56.2	239	40.2	21	3.5	—	—

GROUP I.—TREATMENT OF MINOR AILMENTS (excluding uncleanliness) :

Total Number of Defects treated or under treatment
during the year under the Authority's scheme ... 78

GROUP II.—TREATMENT OF DEFECTIVE VISION AND SQUINT :

	<i>Under the Authority's Scheme</i>
Errors of Refraction (including squint)	122
Other defect or disease of the eyes (excluding those recorded in Group I)	—
No. of children for whom spectacles were :—	
(a) Prescribed	102
(b) Obtained	85

The following information is additional to the Statutory Tables issued to the Ministry of Education :—

ORTHOPAEDIC CLINIC.	<i>School</i>	<i>Welfare</i>	<i>Total</i>
Total number of attendances ...	1261	404	1665
Number of individual children ...	129	73	202
<i>Surgeon :—</i>			
Total number of attendances .	227	170	397
Number of individual children	147	102	249

SUN-RAY CLINIC.	<i>School</i>	<i>Welfare</i>	<i>Total</i>
Total number of attendances ...	427	174	601
Number of individual children ...	35	21	56

RHEUMATISM CLINIC.

Total number of attendances ...	...	...	458
Number of individual children ...	...	...	94
Number of children admitted to Hospital as In-Patients			17
Number of children attending Hospital as Out-Patients			6
Number of children admitted to Convalescent Homes ...			6

MINOR AILMENT CLINIC.

Total number of attendances ...	...	...	9073
Number of individual children ...	...	...	1815
Total number of exclusions ...	...	...	735
Total number of re-admissions ...	...	...	567
Number of Special Cases ...	...	...	1338
Number of Special Cases re-inspected ...	...	...	223

OPHTHALMIC CLINIC.

	<i>School</i>	<i>Welfare</i>	<i>Total</i>
Number of attendances ...	899	114	1013
New Cases ...	109	28	137
Retinoscopy ...	132	25	157
Glasses prescribed ...	172	12	184
Glasses issued ...	142	7	149
Other cases ...	60	26	86
Individual children ...	324	48	372

IMMUNISATION CLINIC.

Number of attendances ...	2540	3343	5883
---------------------------	------	------	------

PERSONAL HYGIENE.

Number of visits to schools ...	...	...	186
Average number of visits per school ...	...	...	9.0
Number of examinations ...	...	...	19571
Number of individual children defective	...	...	1396
Number of re-examinations ...	...	...	885

VISITS.

Total number of visits by School Nurses 480

The following table shows the incidence of Infectious Disease in schools during the year 1946.

	Jan.	Feb.	Mar.	Apl.	May	Jun.	Jly.	Aug.	Sep.	Oct.	Nov.	Dec.	Tot.
Scarlet Fever	7	5	6	6	5	6	3	—	4	6	2	1	51
Diphtheria	1	1	1	1	—	—	—	—	—	1	—	—	5
Chicken-pox	59	38	61	30	36	20	4	—	—	4	4	2	258
Measles	—	4	2	6	12	15	13	—	7	39	5	6	109
Whooping Cough	9	3	1	—	7	1	—	—	5	2	—	—	28
Mumps	1	5	18	17	46	45	21	—	5	4	2	2	166
Ringworm	—	1	—	2	1	3	—	—	—	4	3	3	17
Impetigo	3	8	2	2	2	6	1	—	6	8	5	2	45
Eczema	—	—	—	19	—	—	—	—	—	1	1	—	21
Verminous	3	11	11	—	20	11	2	—	13	—	5	3	79
Scabies	11	7	6	18	4	6	2	—	2	8	3	—	67
Other Skin Diseases	3	—	—	—	1	1	2	—	—	1	—	4	12
German Measles	—	—	—	4	2	3	—	—	—	—	—	—	9
TOTALS	97	83	108	105	136	117	48	—	42	78	30	23	867

The following table shows the incidence of infectious diseases in schools during the year 1916.

Disease	1916	1915	1914	1913	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1901	1900
Measles	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90
Scarlet fever	5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85
Diphtheria	3	5	7	9	11	13	15	17	19	21	23	25	27	29	31	33	35
Whooping cough	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Other diseases	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
TOTALS	19	25	32	39	46	53	60	67	74	81	88	95	102	109	116	123	130

Disease	1916	1915	1914	1913	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1901	1900
Measles	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90
Scarlet fever	5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85
Diphtheria	3	5	7	9	11	13	15	17	19	21	23	25	27	29	31	33	35
Whooping cough	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Other diseases	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
TOTALS	19	25	32	39	46	53	60	67	74	81	88	95	102	109	116	123	130

Measles was the most common disease in schools during the year 1916, with 10 cases reported. Scarlet fever followed with 5 cases, diphtheria with 3 cases, whooping cough with 2 cases, and other diseases with 1 case. The total number of cases reported during the year 1916 was 19.

EALING AND BRENTFORD AND CHISWICK HOSPITALS
COMMITTEE

ANNUAL REPORT

OF THE

MEDICAL SUPERINTENDENT

FOR

1946-1947

READING AND BRANTFORD AND CHISWICK HOSPITALS
COMMITTEE

ANNUAL REPORT

of the

MEDICAL SUPERINTENDENT

FOR

1946-1947

TOWN HALL,

EALING, W.5.

15th June, 1947.

Madam Chairman, Ladies and Gentlemen,

I have the honour to submit to you the Annual Report on the two hospitals for the year 1946-47.

The national birth rate continues to rise and the number of births in your district therefore continues to increase, and this is well reflected in the statistics of the Maternity Hospital. Furthermore the Ministry of Health, in May of this year, in order to ensure the maximum usage of beds advised that consequent on a recent resolution of the Central Midwives' Board, all patients could now be discharged from maternity units on the tenth day instead of on the fourteenth day.

This has naturally resulted in an increased number of patients being admitted, and during the period under review a total of 1191 patients have secured admission to Perivale Hospital, an increase of 25% as compared with the previous twelve months and an all time record figure. Such a list of cases is, of course, exceptional and could never have been contemplated for a hospital of 40 beds, but it does emphasise the demand for institutional care of maternity cases in the district.

The number of emergency cases admitted has also increased and the fact that in 21 cases both the mother and baby were well on discharge from hospital, and in the remaining instance the pregnancy proceeded normally after treatment in the hospital, reflects great credit on the care and skill of the medical and nursing staff.

A perusal of the case histories illustrates that most of the known complications of labour and the puerperium have been encountered during the year, with a nil maternal mortality, and it is pleasing to note that it has also been possible to admit more ante-natal cases for treatment, 130 patients as compared with 87 patients during 1945-46. This last is preventive work of the highest order and enables many conditions to resolve before the labour commences.

The number of patients treated at the Clayponds Hospital while well within the available accommodation, has actually increased this year by 30%.

Of the 381 patients admitted, Scarlet Fever again claims the highest incidence with 128 cases, together with a further 3 cases of Streptococcal Sore Throat.

This year it was found possible to admit some 76 cases of Measles during the epidemic period, no less than 43 of whom had medical complications. There were two fatal cases, one from septicaemia and the second from bronchial pneumonia and gastro-enteritis.

Fifteen children suffering severely from Whooping Cough were also admitted, and one child aged 14 months and a second aged 4½ months both died from broncho pneumonia. These cases illustrated the dangerous nature of these last two diseases in young children, and there is no doubt that more cases must receive hospitalisation in the future.

Only 13 patients suffering from diphtheria were treated, all making good recoveries, eloquent testimony to the present schemes for immunisation against diphtheria in the boroughs.

Generally speaking, a wider variety of cases has been admitted during the last year, and in my opinion this is a policy to be encouraged and developed. In this direction may lie the future of the infectious disease hospital, and a very useful contribution to the social problems of the district can thereby be made under the new régime.

I wish to take this opportunity of recording my thanks to the members of the Committee and to the staffs of the institutions for the very willing support they have given me in my onerous task of assuming control of the administration following the retirement in November, 1946, of Dr. Thomas Orr.

I am, Ladies and Gentlemen,

Your obedient Servant,

REGINALD LEADER,

Medical Superintendent.

CLAYPONDS ISOLATION HOSPITAL

The total number of patients admitted to the Hospital in the year 1946-47 was 381. The highest number of patients in hospital on any day was 40 on 1st June, 1946, and the lowest was 8 on 10th September, 1946. The average daily number was 23.1.

The following table indicates the number of cases of each disease admitted during the year:—

Disease	Remaining in Hospital 31st March, 1946	Admitted during the year	Discharged during the year	Died during the year	Remaining in Hospital 31st March, 1947
Diphtheria	6	13	19	—	—
Diphtheria Carriers	—	3	3	—	—
Scarlet Fever	8	126	128	1	5
Measles	1	86	75	2	10
Whooping Cough	—	15	11	2	2
Tonsillitis	—	24	24	—	—
Streptococcal Sore Throat	—	3	3	—	—
Vincent's Angina	—	4	3	—	1
Erysipelas	—	6	6	—	—
Gastro-enteritis	—	13	12	—	1
Dysentery (Sonne)	—	3	3	—	—
Meningitis and Meningococcal Infections	—	6	2	2	2
Chicken-pox	—	5	5	—	—
Mumps	—	4	3	—	1
Pemphigus Neonatorum	—	12	12	—	—
Ophthalmia Neonatorum	—	1	1	—	—
Nursing Mothers	—	14	13	—	1
Complications of the Puerperium	—	5	4	—	1
Pneumonia	—	4	4	—	—
Acute Bronchitis	—	4	4	—	—
Acute Poliomyelitis	1	2	3	—	—
Rubella	—	2	2	—	—
Toxic Erythema	—	2	2	—	—
Impetigo	—	2	2	—	—
Influenza	—	2	2	—	—
Intussusception	—	2	2	—	—
Enteritis	—	1	1	—	—
Infectious Mononucleosis	—	1	1	—	—
Peritonsillar Abscess	—	1	1	—	—
Pharyngitis	—	1	1	—	—
Laryngitis	—	1	1	—	—
Ulcerative Stomatitis	—	1	1	—	—
Coryza	—	1	1	—	—
Pleurisy	—	1	1	—	—
Rheumatic Fever	—	1	1	—	—
Cervical Adenitis	—	1	1	—	—
Incomplete Abortion	—	1	1	—	—
Dermatitis	—	1	1	—	—
Eczema	—	1	1	—	—
Pelvic Tumour	—	1	1	—	—
Purpura Simplex	—	1	1	—	—
Papular-Urticaria	—	1	1	—	—
Sunstroke	—	1	1	—	—
Pyrexia of Unknown Origin	—	1	1	—	—

DIPHTHERIA.—There were 13 cases of diphtheria admitted—11 from Ealing and 2 from Brentford and Chiswick. The age distribution of these were as follows:—

Under 5	5—10	11—15	16—20	21—25	26—30	31—40	Over 41
0	4	3	2	1	0	2	0

This low incidence of diphtheria shows a well marked decline on that of previous years which is part of the continuous reduction in the incidence of the disease since the introduction of diphtheria immunization. All cases were mild, but two patients who persistently remained carriers had to have their tonsils removed. The average period in hospital for all cases was 46 days.

In addition to the above cases, three admissions were diagnosed as diphtheria carriers. The following cases were admitted as suffering from diphtheria and the diagnosis altered as shown.

Tonsillitis	18
Vincents Angina	3
Cervical Adenitis	1
Bronchitis	1
Laryngitis	1
Peritonsillar Abscess	1
Infectious Mononucleosis	1
Nasopharyngitis	1
Streptococcal Sore Throat	3
Ulcerative Stomatitis	1

SCARLET FEVER.—Scarlet Fever admissions numbered 126 (87 from Ealing and 39 from Brentford and Chiswick).

The age distribution of the cases was as follows:—

Under 1	1—2	3—5	6—10	11—15	16—25	26—45	Over 45
1	7	33	57	20	4	4	0

The following complications were encountered either on admission or during the course of treatment:—

	Cases		Case
Otitis Media	9	Myocarditis	1
Cervical Adenitis	10	Appendicitis	1
Rheumatism	3	Rhinitis	1
Paronychia	3	Herpes Zoster	1
Sinusitis	2	Glandular Abscess	1
Secondary Tonsillitis	2	Impetigo	1
Bronchitis	2	Conjunctivitis	1
Farunculosis	2	Streptococcal Fissure	1

The majority of the complications were of a mild type. Thus 4 out of the 9 cases of otitis media subsided without otorrhoea and only one case of cervical adenitis developed a glandular abscess.

There was, however, one fatal case of scarletinal myocarditis in a 5 year old child in which death from acute heart failure occurred within 12 hours of the onset of the symptoms on the 5th day after admission. This must have been an instance of the now rare hypertoxic variety of the disease, though previous signs and symptoms had not suggested that such was the case.

The average period in hospital of scarlet fever cases was 28 days. Two cases of scarlet fever were cross-infected with chicken-pox, while a third case was admitted while incubating chicken-pox developing the disease 11 days after admission. One of the scarlet fever cases was due to an infected burn. In the following cases admitted as suffering from scarlet fever, the diagnosis had to be altered as shown :—

Tonsillitis	3	Measles	1
Rubella	2	Eczema	1
Toxic Erythema	1	Dermatitis	1
Purpura Simplex	1	Pharyngitis	1
Papular Urticaria	1	Lobar Pneumonia	1

MEASLES.—There was a total of 86 cases of measles admitted during the year. The high proportion of measles admissions was due to the occurrence of an epidemic of this disease during the last four months of the year which necessitated reserving a special ward for measles patients. 54 of these admissions were from Ealing and 32 from Brentford and Chiswick. The age distribution of measles cases was as follows :—

Under 3	3—5	Over 5
46	21	19

The complications encountered, most of which were present on admission, were as follows :—

Broncho Pneumonia ...	21	Tonsillitis	1
Otitis Media	5	Blepharitis	1
Bronchitis	4	Subcutaneous Abscess .	1
Acute Mastoiditis ...	2	Pharyngitis	1
Gastro-enteritis	2	Stomatitis	1
Scarlet Fever and		Conjunctivitis	1
Septicaemia	1	Coryza	1
Cellulitis	1		

A high incidence of haemorrhagic rashes was also noted. It will be seen that the majority of cases admitted were young children in many of whom chest complications had already occurred. The high incidence and severity of complications—a

common feature of widespread epidemics—was probably accentuated this year due to the exceptionally cold weather experienced during the height of the epidemic. There were two fatal cases. One child, aged 4 years, died seven days after admission, death being considered due to streptococcal septicaemia. The other fatal case was that of a case of a child of 15 months suffering on admission from broncho-pneumonia and gastro-enteritis.

Mastoidectomy had to be performed on the two children who developed acute mastoiditis. In one of these children there was a co-existing chicken-pox infection.

The average period in hospital for all measles admissions was 18 days. In all cases except one admitted as measles, the diagnosis was confirmed.

WHOOPIING COUGH.—Of the 15 patients admitted suffering from whooping cough, 12 were from Ealing and 3 from Brentford and Chiswick. Their age distribution was as follows:

Under 1 yr.	1—2	2—5	Over 5
7	3	4	1

The following complications were encountered:

Broncho-pneumonia ...	6 cases	One case became cross infected with chicken-pox.
Convulsions ...	2 cases	
Bronchitis ...	4 cases	

Due to the high ratio of infants admitted, this small total of whooping cough patients included a high proportion of seriously ill cases. There were two fatal cases. One child aged 14 months died from broncho-pneumonia 15 days after admission. The other fatality concerned a baby aged 4½ months admitted in a moribund condition suffering from broncho-pneumonia and convulsions. Death occurred 6 hours after admission.

In addition to the above confirmed cases, admissions for whooping cough included two cases of bronchitis and one of measles.

DIARRHOEAL DISEASES.—Gastro-enteritis in infants constituted the most important disease of this group. Of the 13 cases of gastro-enteritis admitted, 9 were under 12 months of age. No fatalities occurred in cases of primary gastro-enteritis although one baby was so ill that recovery seemed scarcely to be expected. All cases except one were admitted during the last five months of the year, a period during which diarrhoeal disorders appeared to be more prevalent.

The other diseases of this group treated consisted of three patients suffering from Sonne Dysentery and one adult suffering from enteritis. No case of typhoid or paratyphoid occurred.

In addition to the cases noted above two patients admitted as suffering from typhoid fever were diagnosed as measles and chicken-pox respectively, while in the case of three patients admitted for dysentery, two were found to be suffering from intussusception and one from pelvic tumour.

MENINGITIS AND MENINGOCOCCAL INFECTIONS.—

There were 6 admissions in this group. Of these, four were clinical cases of meningitis. In two cases meningococci were isolated from the cerebro-spinal fluid, in the third a coliform organism, while in the remaining case, though probably meningococcal, no organism was isolated. In one case there was a co-existing haemorrhagic nephritis. All four cases recovered without sequelae.

There was one fatal case of meningococcal septicaemia. This was a boy 9 years of age admitted on the eighth day of disease when suffering from advanced heart failure. Complications present included pericarditis, pneumonia, pleurisy and focal lesions of the brain and meninges. Treatment resulted in a temporary improvement, but heart failure recurred and proved fatal. The remaining patient of this group, a child of 4 years, was admitted in a moribund condition and died within an hour of admission. The presence of meningitis was confirmed by post-mortem examination.

One case of each of the following diseases was also admitted as suffering from cerebro-spinal meningitis: Lobar pneumonia, Broncho-pneumonia, Acute Bronchitis, Pleurisy, Tonsillitis, Influenza, Toxic Erythema and Sunstroke.

ERYSIPELAS.—The six cases of erysipelas, mostly facial, all responded rapidly to treatment and do not merit special comment.

CHICKEN-POX.—The five cases of chicken-pox listed are in addition to those already mentioned as associated with other infections. They were admitted either because other conditions requiring hospital treatment were present or suspected, or because of lack of facilities for home nursing.

MUMPS.—Two admissions for mumps were uncomplicated. The remaining two patients were suffering on admission from threatened abortion and acute appendicitis respectively.

ACUTE POLIOMYELITIS.—Despite the fact that this disease was epidemic in other parts of the County, only two cases were admitted. One of these was a mild case with minimum

paralysis. In the other patient, paralysis was extensive, including partial respiratory paralysis. Unusual features were a normal cerebro-spinal fluid and complete recovery from extensive muscular involvement. Two other patients admitted as suffering from poliomyelitis were diagnosed as rheumatic fever and influenza, while in a third case no ascertainable cause for pyrexia could be discovered.

COMPLICATIONS OF THE PUERPERIUM.—No severe infection was encountered in this group of cases. Two cases of puerperal pyrexia had a mild degree of sapraemia, while post partum haemorrhage, femoral thrombosis and anaemia and tonsillitis accounted respectively for the remaining three admissions.

INFECTIONS OF THE NEW-BORN.—All twelve cases of pemphigus admitted were mild infections which completely recovered in periods of from 1—2 weeks. The ophthalmia case treated recovered without damage to the eyes.

CONSULTANT STAFF.—The following Consultants were called in during the year :

Mr. Miller, the Ear, Nose and Throat Specialist, performed mastoid operations in two cases of acute mastoiditis. He also removed tonsils in two convalescent diphtheria carriers.

Mr. Gordon Bryan, Surgeon, visited to see a case of intussusception, later successfully reduced at King Edward Memorial Hospital.

Miss F. Barry, Surgeon, performed appendicectomy in a case of acute appendicitis occurring in a tonsillitis patient.

Mr. Murray, Surgeon, performed appendicectomy in a case of acute appendicitis occurring in a scarlet fever patient. He also successfully treated expectantly a case of acute appendicitis in a patient suffering from mumps and saw a case of intussusception later successfully operated on at the Middlesex Hospital.

Mr. Rait Bell, Gynaecologist, visited two patients and performed curettage in a patient suffering from post-partum haemorrhage due to retained placental products.

Mr. Cholmeley, Orthopaedic Surgeon, visited to advise on the after treatment of a case of poliomyelitis.

Dr. Lewis, Anaesthetist, gave anaesthetics for the two mastoid operations, two appendicectomies, two tonsillectomies, and curettage already mentioned.

TONSILLECTOMY IN SCHOOL CHILDREN.—Twenty-two sessions were held between April and July. 164 children had tonsils and adenoids removed. The Surgeon was Mr. Miller and the Anaesthetist Dr. Lewis.

ILLNESS OF STAFF.—Only seven members of the staff have been ill during the year suffering from :

Tonsillitis	...	...	...	...	1 case
Furunculosis	...	...	...	...	1 „
Chicken-pox	...	...	...	...	1 „
Cervical Polypus	...	...	...	...	1 „
Appendicitis	...	...	...	...	1 „
Vincent's Angina	...	...	...	...	1 „
Trichomonas Infection	...	...	...	...	1 „

PERIVALE MATERNITY HOSPITAL

During the year 1st April, 1946, to 31st March, 1947, 1191 patients were admitted to the hospital. These included 22 emergency cases.

Month	Brentford and Chiswick			Other Districts	Total
	Ealing				
April ...	60	24			84
May ...	66	27			93
June ...	70	18			88
July ...	65	31			96
August ...	73	32			105
September ...	74	34			108
October ...	85	24			109
November ...	62	23			85
December ...	77	28			105
January ...	82	27			109
February ...	77	35			112
March ...	69	28			97
	860	331			1191

The greatest number of patients in hospital on any day was 62 on 1st March, 1947. The average period of stay was 11.764 days.

EMERGENCY CASES

The 22 emergency cases admitted were as follows :—

1. Gravida 5, aged 37 years, admitted as a prolonged labour with uterine inertia. On admission she had fairly strong pains and a normal delivery followed. She had a retained placenta which was removed manually and the mother's condition was good. Puerperium was uneventful and both mother and baby were satisfactory on discharge.
2. Gravida 4, aged 30 years, admitted for an extended breech with prolonged labour and a history of obstetric shock with her other babies. Normal breech delivery followed but patient had a post-partum haemorrhage with a retained placenta. Manual removal was performed and patient's general condition was fairly good. Both mother and baby were satisfactory on discharge.
3. A primipara aged 32 years, a Midwife's case, was admitted as a toxæmia of pregnancy. She had marked oedema of legs and ankles, no albuminuria but blood pressure was 160/90. She was 38 weeks pregnant. After one week of conservative treatment she complained of nausea and her oedema increased, so a surgical induction was done. A normal delivery followed and both mother and baby were satisfactory on discharge.
4. Primipara, aged 28 years, admitted as an albuminuria, 36 weeks pregnant. Patient's general condition was good, blood pressure 120/80, no oedema. She was treated conservatively at first and a surgical induction was done 10 days later. Normal delivery followed and the puerperium was uneventful. Both mother and baby were well on discharge.
5. Gravida 3, aged 33 years, admitted as a pre-eclamptic toxæmia. She was 36 weeks pregnant, blood pressure 160/120, albuminuria with oedema of ankles and feet. Her two previous babies were alive and well but the last one was jaundiced at birth. She was given a simple medical induction and a normal delivery followed the next day. On the second day the baby was deeply jaundiced and was vomiting. The baby was transferred to Great Ormond Street Hospital as an Icterus Gravis, where she was given a blood transfusion and progressed satisfactorily. The mother's puerperium was uneventful.
6. Gravida 5, sent in by a Doctor as an ante-partum haemorrhage. Patient was 38 weeks pregnant and had had one sudden free red loss at home. On admission general condition was good, blood pressure 150/85, no albuminuria, head engaged in pelvis and the patient was in labour having good contractions. Normal delivery followed with little further red loss, and on

examination of the placenta it showed a lateral insertion. Patient had an attack of asthma whilst in hospital but both she and the baby were satisfactory on discharge.

7. Primipara, aged 24 years, booked by a District Midwife, was found to be a footling presentation when in labour and was sent into hospital. She was in the second stage of labour for two hours with no advance and very poor pains, so a general anaesthetic was given and the breech extracted. Forceps were applied to the after-coming head. The mother's puerperium was uneventful and both she and the baby were satisfactory on discharge.

8. Primipara sent in by a doctor as Uterine inertia, said to have been in labour for four days. On admission she was very tired and was having poor contractions. Sedatives were given and a normal delivery of a 9lbs. 5ozs. baby followed. The mother had a mild urinary infection during the puerperium but both she and the baby were satisfactory on discharge.

9. Gravida 2, a midwife's case, sent in by a doctor as a persistent Occipito-posterior position with foetal distress. On admission the head was on the perineum and a 9lbs. baby was delivered normally. The puerperium was uneventful and both mother and baby were satisfactory on discharge.

10. Gravida 3, admitted with mild toxæmic signs. Normal delivery followed after a medical induction at term, and both mother and baby were well on discharge.

11. Gravida 2, aged 32 years, booked with a midwife, was sent in with Hydramnios. Normal delivery followed a simple medical induction. The baby weighed 10lbs. 2ozs. Both mother and baby were well on discharge.

12. Gravida 2 was admitted as a shoulder presentation at a Doctor's request. It was a footling presentation on admission and a normal breech delivery followed. Puerperium was uneventful and both mother and baby were well on discharge.

13. Primipara, aged 22 years, sent in as a uterine inertia. She had been in labour 36 hours with ruptured membranes, and on admission the os was $1/3$ dilated with poor contractions. Forceps were applied two hours after full dilation and the third stage followed normally. The mother had a urinary infection during the puerperium but both she and the baby were discharged as satisfactory on the 14th day.

14. Gravida 3, aged 23 years, admitted at request of a Doctor as a face presentation in labour. On admission patient was having very strong pains and on vaginal examination the

vertex was low in the pelvis. The internal os and cervical canal was dilated but the external os was cut and forceps applied. The cervix was sutured with catgut. The puerperium was uneventful and both mother and baby were well on discharge.

15. Primipara, 36 years old, was admitted as a breech presentation for external version. However, patient started in labour the same day and a normal extended breech delivery followed. Both baby and mother were well on discharge.

16. Primipara was admitted at a Doctor's request as a delayed second stage. The baby was in a persistent occipito-posterior position and was rotated under a general anaesthetic and forceps applied. Third stage was apparently normal but on the 8th day patient had a secondary post-partum haemorrhage. A digital evacuation of the uterus was carried out and no further haemorrhage occurred. Both mother and baby were well on discharge.

17. Gravida 3, admitted with acute retention of urine with overflow. She was three months pregnant with a retroverted uterus. She was catheterised and the uterus replaced and micturition was normal on discharge from hospital.

18. Primipara, a midwife's case, admitted at request of a Doctor as a foetal distress. On admission the patient was fully dilated with meconium stained liquor and the foetal heart was slowing. A low forceps delivery was carried out and both mother and baby were satisfactory on discharge.

19. Gravida 3, was booked for delivery at home, but was unable to find a midwife when labour commenced. She was admitted to Hospital and had a normal delivery.

20. Gravida 4, aged 33 years, was admitted in a poor general condition with mild toxæmic signs. She had a normal delivery and puerperium was uneventful.

21. Gravida 2, aged 34 years, admitted as a toxæmia of pregnancy. She was 37 weeks pregnant, blood pressure 140/95 and with albuminuria. Esbach $1\frac{1}{2}$ parts. Normal delivery followed a simple induction and both mother and baby were well on discharge.

22. Primigravida admitted as disproportion at request of her Doctor. The baby was delivered naturally but became rapidly jaundiced. It was transferred to the Westminster Hospital as an Erythroblastosis. It was treated and returned. Both mother and child were discharged well.

BOOKED CASES.

ANTE-NATAL CASES ADMITTED FOR TREATMENT.

130 patients were admitted during the pregnancy for treatment. The conditions for which they were admitted are as follows :—

Toxaemia	...	...	...	...	...	61
Pyelitis	...	...	...	...	...	3
Hypertension	...	...	...	...	...	6
Mitral stenosis	...	...	...	...	...	3
General debility and anaemia	...	...	...	...	...	4
Tuberculosis	...	...	...	...	...	1
Post Maturity	...	...	...	...	...	2
Oedema	...	...	...	...	...	2
Hydramnios	...	...	...	...	...	2
Abnormal presentation for version	...	...	...	...	...	18
Phlebitis	...	...	...	...	...	3
Acute retention of urine	...	...	...	...	...	1
Trial labour	...	...	...	...	...	9
Ante-partum haemorrhage	...	...	...	...	...	9
Threatened miscarriage	...	...	...	...	...	1
Vaginal thrush	...	...	...	...	...	1
Dead Foetus	...	...	...	...	...	2
Herpes Zoster	...	...	...	...	...	1
Haematuria	...	...	...	...	...	1

ABNORMAL PRESENTATIONS.

Persistent occipito-posterior	...	...	...	...	...	20
Twin pregnancy—						
(a) Vertices	...	...	...	...	...	6
(b) Vertex and breech	...	...	...	...	...	5
(c) Breeches	...	...	...	...	...	3
Breech—						
(a) Flexed Breech (1) Primipara	...	...	...	...	...	8
(a) Flexed Breech (2) Multipara	...	...	...	...	...	5
(b) Extended Breech (1) Primipara	...	...	...	...	...	18
(b) Extended Breech (2) Multipara	...	...	...	...	...	2
(c) Breech extraction	...	...	...	...	...	4
Face	...	...	...	...	...	1
Vertex with prolapsed hand	...	...	...	...	...	1

OBSTETRICAL MANIPULATIONS AND OPERATIONS.

Episiotomy	...	...	...	...	...	68
External Version	...	...	...	...	...	12
Internal Version	...	...	...	...	...	1
Rupture of membranes—						
for Toxaemia	...	...	...	...	...	26
Hypertension	...	...	...	...	...	3
Accidental Haemorrhage	...	...	...	...	...	1
Post Maturity	...	...	...	...	...	4

FORCEPS DELIVERY.

(a) Foetal distress	...	...	...	...	...	5
(b) Maternal distress	...	...	...	...	...	5
(c) Uterine inertia	...	...	...	...	...	21
(d) Minor pelvic disproportion	...	...	...	...	...	7
(e) Prolapsed cord	...	...	...	...	...	1

CAESAREAN SECTION.

(a) Upper Segment—						
(1) Primiparous Breech with Bilateral thrombosis						1
(b) Lower Segment—						
(1) Disproportion	...	...	...	...	...	3
(2) Rhesus factor	...	...	...	...	...	1

RUPTURED UTERUS.

(a) Spontaneous	...	...	...	...	...	1
(b) Rupture of old myomectomy scar	...	...	...	...	...	1

HIGH HEAD—primipara without disproportion 14

UNSUCCESSFUL TRIAL LABOUR—for disproportion 1

ECLAMPSIA 4

HAEMORRHAGES.

Ante Partum.

Central Placenta Praevia	...	...	...	...	...	0
Lateral Placenta Praevia	...	...	...	...	...	2
Accidental	...	...	...	...	...	1

Post Partum.

Moderate	...	...	...	...	...	54
Severe	...	...	...	...	...	4
Manual removal of placenta	...	...	...	...	...	10
Secondary post partum haemorrhage	...	...	...	...	...	2

NOTIFIABLE PYREXIA	26
Acute Mastitis	1
Flushed Breast	1
Urinary Infection	10
Uterine Infection—	
(a) Retained products	3
(b) Non-streptococcal infection	1
(c) Haemolytic streptococcal infection Group C	2
Influenza	7
Post operative distension	1

NON-NOTIFIABLE PYREXIA DURING PUERPERIUM	31
General debility	5
Urinary infection	11
Cracked nipples and mastitis	4
Breast abscess	2
Uterine infection	2
Phlebitis	1
Retained products	6

PATIENTS TRANSFERRED TO OTHER HOSPITALS.

To Clayponds Isolation Hospital—	
(a) for Haemolytic Streptococcal infection	2
(b) Dental abscess	1

MATERNAL DEATHS 0

INFANTS.

Number of infants born	1183
Males (alive)	612
Females (alive)	571
Stillborn	20
Abortion	1
Neo-natal deaths	11

STILLBIRTHS.

Fresh.

(a) Full term	6
(b) Premature	2
(c) Anencephalic	1

<i>Macerated</i>	11
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ABNORMAL INFANTS.

Congenital Heart Disease	2
Mongol	3
Talipes	4
Hare lip	1
Hypospadias	...	...	...	...	3
Spina Bifida	...	...	...	...	1
Abnormal genitalia	...	...	...	...	1

INFANTS' ILLNESSES.

Cerebral Haemorrhage	...	...	...	...	2
Erythroblastosis	...	...	...	...	3
Congenital ichthyosis	...	...	...	...	1

PREMATURE BABIES BORN ALIVE.

28—32 weeks' gestation	...	...	...	...	7
				(2 sets twins)	
32—36 weeks' gestation	...	...	...	...	17
36—38 weeks' gestation	...	...	...	...	21

INFANTS WEANED.

Owing to mother's breast condition	...	...	...	...	10
Owing to tuberculosis of mother	...	...	...	...	3
Owing to baby's condition	...	...	...	...	1

INFANTS TRANSFERRED TO OTHER HOSPITALS.

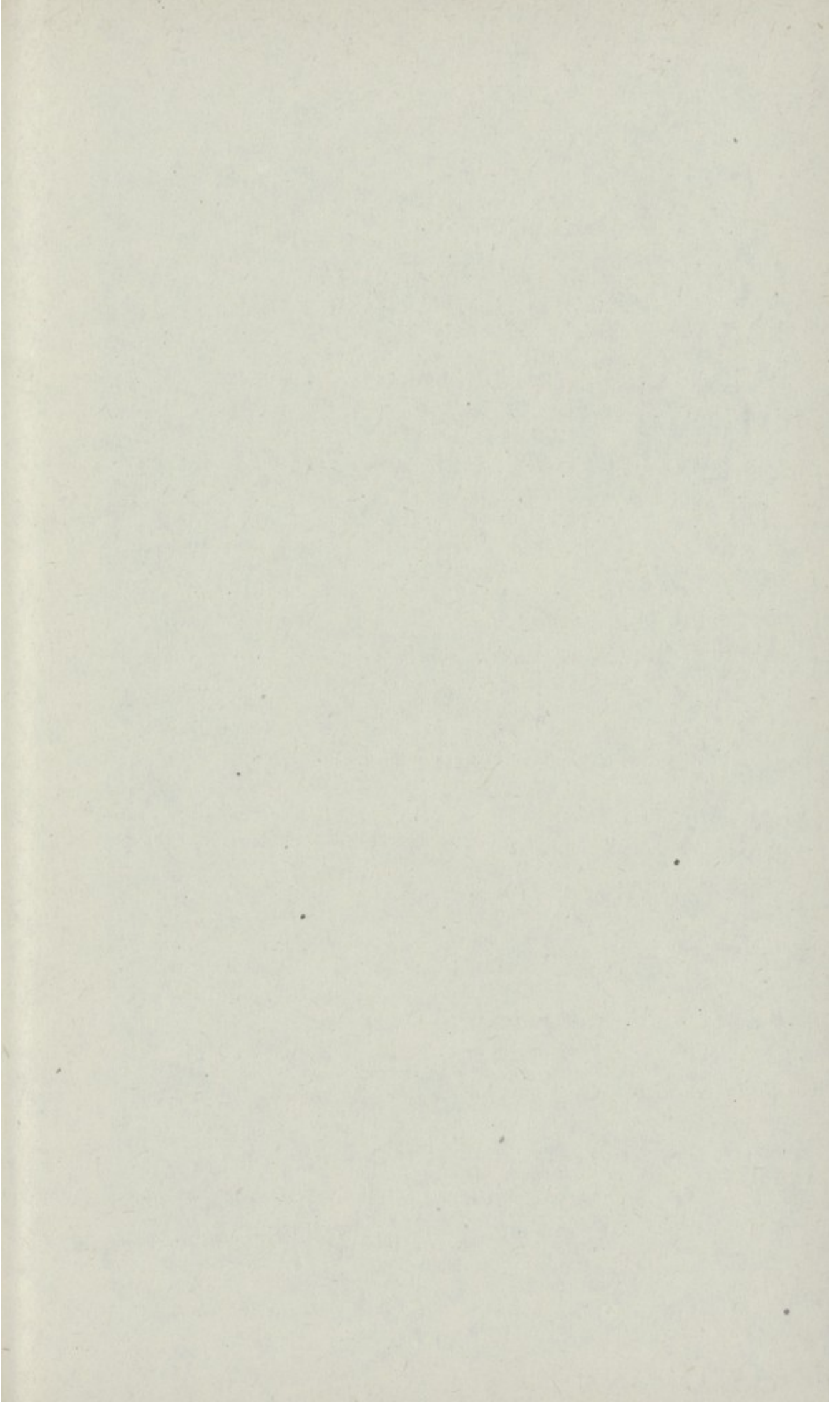
To Clayponds Isolation Hospital with Staphylococcal Blisters	...	...	...	...	9
To West Middlesex Hospital—Spina Bifida	...	...	...	...	1
To Great Ormond Street—Erythroblastosis	...	...	...	...	2
To Queen Elizabeth Children's Hospital—Erythroblastosis	...	...	...	...	1
To Westminster Hospital—Jaundice	...	...	...	...	1

CONSULTANTS CALLED IN.

- Dr. J. W. Bell on 20 occasions.
- Mr. Arnold Walker on 6 occasions.
- Dr. Rees on one occasion.
- Dr. Potter on one occasion.
- Dr. Maurice Shaw on one occasion.

TRAINING OF PUPILS.

During the year ended 31st March, 1947, 44 pupils completed their course of training and entered for the examination of the Central Midwives' Board. All 44 pupils were successful.



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TRAINING OF NURSES

During the year ended July 31, 1917, 44 people were
trained in the various branches of the profession of
nursing. A total of 44 people were trained.