

[Report 1924] / Medical Officer of Health, Dunbarton County Council.

Contributors

Dunbartonshire (Scotland). County Council.

Publication/Creation

1924

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County Council of Dunbarton.

THIRTY-FOURTH
ANNUAL REPORT

(YEAR 1924)

TO THE

COUNTY COUNCIL AND DISTRICT COMMITTEES.

BY

THOMAS LAUDER THOMSON, M.D., D.P.H.,
MEDICAL OFFICER OF HEALTH.

GLASGOW :

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1925.



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*To the Scottish Board of Health and the
County Council and District Committees of
Dunbartonshire.*

GENTLEMEN,

I beg to submit the Annual Report on the Health and Sanitary Condition of the County for the year 1924.

The figures in the Report show that the birth-rate in both Districts is still declining, while the death-rate in the County generally is rather higher than in previous years. This is due to a distinct increase in the Eastern District.

During the year an outbreak of Scarlet Fever occurred in the Western District, and a very considerable amount of dislocation of the Fever service followed, owing to the inadequacy of Dumbarton Joint Hospital to cope with an outbreak of the dimensions encountered. This outbreak was kept going by very mild unrecognised cases, and at the end of the year the epidemic had shown very little abatement.

In outlining the subjects to be reported on by Medical Officers of Health, the Board of Health included this year for the first time a very comprehensive statement relating to Maternity Service and Child Welfare. This has necessitated the introduction of four new tables and the reconstruction of two other tables. The information under this heading is divided up according to Districts, and most of it is subdivided according to Clinics.

There have also been included reports on the Extension of the Maternity Service and Child Welfare and Tuberculosis Schemes, with notes as to the approval of the Board of Health of the measures proposed.

I am,

GENTLEMEN,

Your obedient servant,

THOMAS LAUDER THOMSON.

HEALTH OFFICE,
88 COLLEGE STREET, DUMBARTON.

STATISTICAL SUMMARY FOR THE COUNTY AND DISTRICTS.

1924.

Acreage,	-	-	-	-	-	-	-	151,539
Western District,	-	-	-	-	-	-	111,525	
Eastern District,	-	-	-	-	-	-	40,014	
Population as estimated at the middle of 1924,								53,114
Western District,	-	-	-	-	-	-	29,872	
Eastern District,	-	-	-	-	-	-	23,242	
Density of the population per acre,	-	-	-	-	-	-	-	·35
Western District,	-	-	-	-	-	-	·25	
Eastern District,	-	-	-	-	-	-	·56	
Death-rate,	-	-	-	-	-	-	-	13·0
Western District,	-	-	-	-	-	-	12·8	
Eastern District,	-	-	-	-	-	-	13·2	
Birth-rate,	-	-	-	-	-	-	-	19·0
Western District,	-	-	-	-	-	-	19·4	
Eastern District,	-	-	-	-	-	-	18·8	
Infantile Mortality,	-	-	-	-	-	-	-	89
Western District,	-	-	-	-	-	-	74	
Eastern District,	-	-	-	-	-	-	108	

MEDICAL OFFICER'S REPORT

FOR YEAR 1924.

PART I.—THE COUNTY.

VITAL STATISTICS.

POPULATION.—The Registrar-General has estimated that the population of the Landward Areas at the middle of 1924 was 53,114, which is a decrease of 791 when compared with the corresponding figure for 1923. It is difficult to reconcile this decrease with the fact that there were nearly 200 more occupied houses at the middle of 1924 when compared with 1923.

The estimation of occupied houses is set out on Table II., and shows a population of 55,346, which is 880 more than the corresponding estimate last year. Considering the increased number of occupied houses, the estimate does not appear to be on the side of excess.

BIRTH-RATES.—Table III. shows the number of births and the birth-rate for the last five years in each District. It will be noted that the number of births in each District is the lowest on record, and that the birth-rate similarly has fallen below the lowest record. It will, however, be seen from the table that the actual fall in 1924 was not so marked as in previous years.

DEATH-RATES.—Table IV. shows the deaths and death-rates in the County for the last five years. The rate is rather in excess of the preceding five years, due to an increase in the number of deaths in the Eastern District.

INFANTILE MORTALITY.—The number of deaths of children under one year in the County was 90, which gives an Infantile Mortality Rate of 89. This rate is rather larger than that of last year, the increase being due to the number of deaths in the Eastern District. The chief causes of infantile deaths in the County were—Malformations, Debility and Marasmus, 40; Pneumonia, 13; Whooping-cough, 6.

TABLE I.
SHOWING POPULATION AT CENSAL AND INTERCENSAL PERIODS SINCE 1891. CENSUS FIGURES IN DARK TYPE.

YEAR.	WESTERN DISTRICT.	EASTERN DISTRICT.	REMARKS.
1891	28,730*	20,314	* 949 navvies working on West Highland Railway.
1892	28,959	20,383	
1893	29,559	20,356	
1894	28,017*	22,477†	* Only 70 navvies working.
1895	28,556	23,204	
1896	29,005	23,186	† 500 navvies working in District.
1897	29,232	23,398	
1898	29,472	23,888	
1899	28,887*	24,085	* Extension of Dumbar-ton Burgh.
1900	28,748	24,102	
1901	26,952	23,784	
1902	27,331	24,395	
1903	27,607	25,965	
1904	27,487	26,695	
1905	27,860	29,645	
1906	28,380	33,370	
1907	29,140	25,700†	† Extension of Clyde-bank Burgh.
1908	29,550	26,170	
1909	29,085	26,705	
1910	28,830	27,000	
1911	28,092	26,350	
1912	28,514	26,703	
1913	27,347‡	22,560†‡	† Extension of Glasgow Boundaries.
1914	27,111‡	22,543‡	‡ Estimation by Registrar-General.
1915	27,238‡	22,830‡	
1916	27,195‡	22,970‡	
1917	27,302‡	23,239‡	
1918	27,452‡	23,542‡	
1919	27,364‡	23,641‡	
1920	27,318‡	23,773‡	
1921	30,340	23,808	
1922	31,049‡	24,294†‡	† Extension of Milngavie Boundaries.
1923	30,281‡	23,624‡	
1924	29,872‡	23,242‡	

TABLE II.

COUNTY OF DUNBARTON (LANDWARD)—ESTIMATED
POPULATIONS, 1924.

WESTERN DISTRICT.

PARISH.	Census Population, 1921.	Persons per Occupied House, 1921.	Occupied Houses as per Valuation Roll, 1924-25.	Estimated Population to middle of 1924.
Dunbarton, - -	176	4.757	37	176
Cardross, - -	6,719	4.688	1,440	6,750
Bonhill, - - -	16,622	4.246	3,936	16,713
Kilmaronock, - -	873	4.365	206	899
Row, - - -	3,062	5.252	600	3,151
Rosneath, - -	1,323	4.725	289	1,365
Luss, - - -	670	4.653	149	693
Arrochar, - -	896	5.003	184	921
Total of Western District,	30,341	4.482	6,841	30,668

EASTERN DISTRICT.

Cumbernauld, - -	5,261	4.603	1,142	5,257
Kirkintilloch, - -	4,562	6.407	723	4,632
East Kilpatrick, - -	5,623	4.263	1,449	6,177
West Kilpatrick, - -	8,362	4.913	1,753	8,612
Total of Eastern District,	23,808	4.883	5,067	24,678
Total of County (Landward),	54,149	4.650	11,908	55,346

DEATHS FROM INFECTIOUS DISEASES.—The number of deaths from Infectious Diseases were as follows:—Measles, 12; Scarlet Fever, 12; Whooping Cough, 15; Diphtheria, 3; Encephalitis Lethargica, 2. There was a very marked increase in the number of deaths from Scarlet Fever, mainly in the Eastern District. There is no doubt that the type of the disease in that District during the year was more severe than in previous years.

DEATHS FROM INFLUENZA.—30 deaths were attributed to Influenza, which is a very decided increase; 20 of the persons who died from the disease were over fifty-five years of age.

DEATHS FROM PNEUMONIA.—59 deaths were reported as being due to Pneumonia. This number is rather more than in the previous year. Of the 59 deaths 38 were under five years of age and 12 were over fifty-five years of age.

DEATHS FROM CANCER.—76 deaths were reported as due to malignant tumours; 47 of these persons resided in the Western District. The number of deaths from this disease has been steadily rising. In 1914 the number was 43, in 1920 it was 58. The Western District has invariably the greater number of deaths from this disease.

DEATHS FROM TUBERCULOSIS.—During the year 1924 the number of deaths from Pulmonary Tuberculosis was 27, and the corresponding death-rate was .51. These are the lowest figures on record for the County, the next lowest being in 1920, viz., 32 deaths, with a death-rate of .62. The average rate for the last five years was .7.

The deaths registered as being due to Non-Pulmonary Tuberculosis numbered 15, and the resultant death-rate was .28. These figures are very satisfactory, the only lower ones being those of 1920, when there were 13 deaths with a death-rate of .25. The average rate for the preceding quinquennium was .37.

The total death-rate from Tuberculosis, therefore, is .79, which is substantially the lowest rate ever recorded. The corresponding figures for all years since 1891 will be found on Table VI.

The following tables show the distribution according to age periods of the deaths from Pulmonary and Non-Pulmonary Tuberculosis during 1924:—

PULMONARY TUBERCULOSIS.

Area.	Age Periods.						
	0—5	5—15	15—25	25—45	45—65	65+	Total.
Western District, -	—	—	6	5	3	1	15
Eastern District, -	—	—	3	6	3	—	12
County, - - -	—	—	9	11	6	1	27

NON-PULMONARY TUBERCULOSIS.

Area.	Age Periods.						
	0—5	5—15	15—25	25—45	45—65	65+	Total.
Western District, -	3	1	1	—	—	—	5
Eastern District, -	5	2	1	1	1	—	10
County, - - -	8	3	2	1	1	—	15

TUBERCULOSIS.

PULMONARY TUBERCULOSIS.—73 cases (36 males and 37 females) were notified during 1924, as against 82 cases in 1923 and 78 in 1922. Of this number 17 had died before the end of the year; 6 had left the district; in 3 cases the diagnosis was not verified, and 8 cases are still under observation as doubtful; 27 of the notified cases were sent for Institutional Treatment and 19 received Domiciliary Treatment. Of those who died within the year, the average period of survival after notification was three months.

The age distribution of the cases was as follows:—

Age Periods.							
Under 1	1—5	5—15	15—25	25—45	45—65	65 and over	Total.
Nil.	3	8	23	28	11	—	73

NON-PULMONARY TUBERCULOSIS.—During the year under review 79 cases (35 males and 44 females) were notified, as against 105, 57, and 73 in 1923, 1922, and 1921 respectively. By the end of the year 7 had died, 2 had left the district, and 7 cases were still under observation as doubtful; 8 of the cases were sent for Institutional Treatment, and 11 received Domiciliary Treatment. These cases may be conveniently classified according to age and situation of the disease as follows:—

Situation of the disease.	Age Periods.							
	Under 1	1—5	5—15	15—25	25—45	45—65	Over 65	Total.
Glands, - -	2	13	7	3	1	—	—	26
Bones and Joints, -	2	11	7	2	1	—	—	23
Abdomen, - -	—	5	7	2	—	—	—	14
Spine, - - -	—	—	1	1	1	—	—	3
Meninges, - -	1	4	—	—	—	—	—	5
Other, - - -	—	2	2	2	1	1	—	8
Total, - - -	5	35	24	10	4	1	—	79

DOMICILIARY TREATMENT.

This term is, strictly speaking, a misnomer, for no actual treatment is carried out at the expense of the Local Authority in the homes of the patients.

Cases remaining at home are attended by their own doctors, but any drugs for the treatment of the tuberculous condition prescribed on special forms supplied by the Local Authority are paid for, after scrutiny by the Tuberculosis Officer and pricing by the National Health Insurance Central Checking Bureau. In addition to that, extra articles of food (consisting of milk, eggs, and butter) are supplied in some cases. The number of these articles and the quantity given in any particular case depends on the requirements, and the supply is continued as long as is considered necessary. The granting of these extras, however, is entirely in the hands of the Tuberculosis Officer, and cannot be done by the patient's own doctor. The total amount spent on drugs and extras for any one patient must not exceed 10s. per week, as this is the maximum fixed by the Scottish Board of Health. It is also laid down by the Board that, before any Domiciliary Treatment can be given, the patient must be reasonably well housed, so that he may derive full benefit from such extras, and this condition is respected as far as it is possible to do so.

When it is decided by the Tuberculosis Officer that a patient requires extras, an order for one or three months is given, according to the case, and the circumstances are again reviewed at the expiry of that period. Under the present arrangement the recipient is allowed to choose the dealer from whom the articles are obtained. All those cases who are in receipt of Domiciliary Treatment are under the strict supervision of the Tuberculosis Officer. The following are the actual figures for the year 1924:—

WESTERN DISTRICT.

PULMONARY CASES.

Total number in receipt of extras, -	-	-	45
Average period of grant, -	-	-	3·7 months.
Total cost incurred, -	-	-	£150 2 2
Average cost per patient for the year,	3	6	8

NON-PULMONARY CASES.

Total number in receipt of extras, -	-	-	38
Average period of grant, -	-	-	4·9 months.
Total cost incurred, -	-	-	£133 0 3
Average cost per patient for the year,	3	10	0

EASTERN DISTRICT.

PULMONARY CASES

Total number in receipt of extras, -	-	-	36
Average period of grant, -	-	-	4·7 months.
Total cost incurred, -	-	-	£149 8 7
Average cost per patient for the year,	4	3	0

NON-PULMONARY CASES.

Total number in receipt of extras, -	-	-	24
Average period of grant, -	-	-	3·9 months.
Total cost incurred, -	-	-	£52 2 0½
Average cost per patient for the year,	2	3	4

The object of this provision of extra articles of diet is to raise the patient's resistance against the inroads of the disease, and they are intended in the main to be in addition to ordinary diet, although in some acute cases of pulmonary or abdominal Tuberculosis they may form the main sustenance of the patient for the time being.

A grant is given, of course, only to patients who are unable to provide such extra diet for themselves without some other member of the family suffering in consequence.

TABLE III.—BIRTHS AND BIRTH-RATES PER 1000 OF POPULATION, WITHIN THE COUNTY OF
DUNBARTON, EXCLUSIVE OF BURGHS, 1920-1924.

DISTRICT.	1920.		1921.		1922.		1923.		1924.	
	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.
Eastern,	...	...	...	...	...	...	...	...	...	...
	615	25·9	551	23·1	557	22·9	458	19·4	436	18·8
Western,	...	...	...	...	...	...	...	...	...	...
	772	28·3	704	23·2	675	21·7	592	19·6	580	19·4
County,	...	...	...	...	...	...	...	...	...	...
	1387	27·1	1255	23·1	1232	22·3	1050	19·5	1016	19·0

TABLE IV.—DEATHS AND DEATH-RATES PER 1000 OF POPULATION FROM ALL CAUSES IN THE
COUNTY OF DUNBARTON, EXCLUSIVE OF BURGHS, 1920-1924.

DISTRICT.	1920.		1921.		1922.		1923.		1924.	
	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.
Eastern, 	250	10·5	276	12·0	287	11·8	271	11·5	307	13·2
Western, 	343	12·7	364	12·6	415	13·4	393	13·0	383	12·8
County, 	593	11·6	640	12·3	702	12·7	664	12·3	690	13·0

This additional nourishment is useful at different periods of the consumptive's illness. First of all, when it appears that a notified case will have some time to wait for a bed in a suitable institution, it is given with the idea of maintaining, and, if possible, improving his general condition until accommodation is available. Again, after a spell of Institutional Treatment, it is given to tide over the period of change from the sanatorium, with its good living conditions and ample food supply, to the old home conditions with an often somewhat meagre diet. It is at this usually somewhat critical time in the consumptive's struggle for restored health that so-called Domiciliary Treatment fills probably its most useful function. There are, too, some cases who, when notified, are too ill to undergo a course of Sanatorium Treatment at once, and to some of those cases extra diet is given if it is considered that with its help they may pick up strength sufficiently to allow them to be sent to a sanatorium for treatment later.

Among non-pulmonary cases there are a number for whom institutional accommodation is not readily available, and these are given Domiciliary Treatment in an attempt to set them on their feet again. There are others, however, who have a good chance of recovering health and strength without special treatment, and it is these cases who are particularly benefited by a grant of extra nourishment, and it is in this class that most gratifying results are usually obtained.

SMALLPOX.

VACCINATION.—No case of Smallpox occurred during the year. The examination of school children carried out by the Medical Officers showed that out of 7699 children examined 2452 were unprotected by vaccination. This is an increase of 6 per cent. over the figures for 1923. The detailed figures show that the main increase in the number of unvaccinated children is in the early age periods. 42.9 per cent. of the children of five years of age were totally unprotected, an increase of 13 per cent. over last year's figures. In the Vale of Leven 64 per cent. of the children entering school for the first time were unvaccinated, while, taking the children of all ages, 49.7 per cent. of those examined were unvaccinated, which is 4.7 per cent. higher than last year.

These figures require little comment, but they point to the necessity for adequate hospital accommodation to meet the possibility of a sudden outbreak of Smallpox.

SMALLPOX HOSPITAL ACCOMMODATION.—Conferences were held during the year between the various Local Authorities, and in October it was agreed to meet representatives of the Corporation of Glasgow with the view to a joint scheme between the County and Burghal Authorities and the Glasgow Port Sanitary Authority. The matter had not been fully discussed by the end of the year.

METEOROLOGY.

Table VII. gives the rainfall at various stations in the County. Unfortunately, owing to an accident to the rain gauge at the Renton Filters, the return for that area is not complete.

As far as the figures go, in spite of all that was said about the wet weather in 1924, they prove that 1924 was much drier than 1923. This is shown in every area for which there is a complete record.

RIVERS POLLUTION.

The forms and plans referred to in last report were completed and submitted to the Board of Health.

Very few complaints were received during 1924 regarding the pollution of rivers in the County.

River Leven.—A conference regarding the pollution of the river was held in Alexandria in June. This conference was convened by the Fisheries Board for Scotland and various Local Authorities, Industrial Companies, and other bodies, including the Loch Lomond Angling Improvement Association, were represented. The discussion which took place was a very general one, and no further light was thrown on the industrial pollution of the river. The only point which was at all new was the suggestion that the Local Authority was allowing bleaching powder to gain access to the river. This bleaching powder is used for putting into the ashpits after they are emptied, and for other sanitary purposes. A report on the question was submitted, and the Board of Fisheries agreed that there was little likelihood of fish being poisoned from that source, as the amount used during any year was so small (about 28 cwts.) and as the material could only be washed into the stream during exceptionally heavy rain, the chances of any pollution of the stream occurring were very remote.

On the 25th June a complaint was received that there were

dead fish in the river Leven, and a sample was immediately taken from the lade which leaves Cordale Works. The analyses of this sample showed that there was a certain amount of chromium salts present. These salts are very fatal to fish life. Whether this material came from Cordale or from higher up the river could not be ascertained.

River Kelvin.—Complaints were received at intervals during the year regarding the presence of froth on the surface of the river. This froth undoubtedly came from the Allander, which is a tributary of the Kelvin. The Allander, as mentioned in previous reports, receives the effluent from the Ellangowan Paper Works, which are within the Burgh of Milngavie. This effluent is liable to froth, and there can be no doubt that the froth on the Kelvin came from that source. The question of the pollution of the Allander within the burgh was referred to the Town Council.

Apart from the pollution through the medium of the Allander, the general condition of the Kelvin was under discussion during the year, and the County Clerk was instructed to communicate again with the County Clerk of Stirlingshire, from which County certain pollution enters the Kelvin. In December a report from the County Medical Officer for Stirlingshire was submitted to the Committee on Rivers Pollution Prevention, and no further action was taken in the matter.

River Allander.—The question of the pollution of the Allander from the Ellangowan Paper Works, in the Burgh of Milngavie, has been referred to under the River Kelvin. As the matter is still under the consideration of the Town Council, it is merely necessary to state that, owing to the pressure put on the company by that body, a consulting chemist reported on the condition of the works and suggested certain means of improving the effluent. The report was accepted by the Ellangowan Paper Company, who promised to do their best to improve the effluents referred to. Since this further pollutions have occurred, and the matter is still in the hands of the Town Council.

Apart from the Ellangowan Paper Works, there was a complaint on the 7th June that dead trout had been taken out of the Allander above the burgh boundary. The only source of pollution above the burgh is the Craigton Bleach Works. These works were at once visited, but nothing was found which could account for the destruction of fish, no signs of recent pollution being discovered.

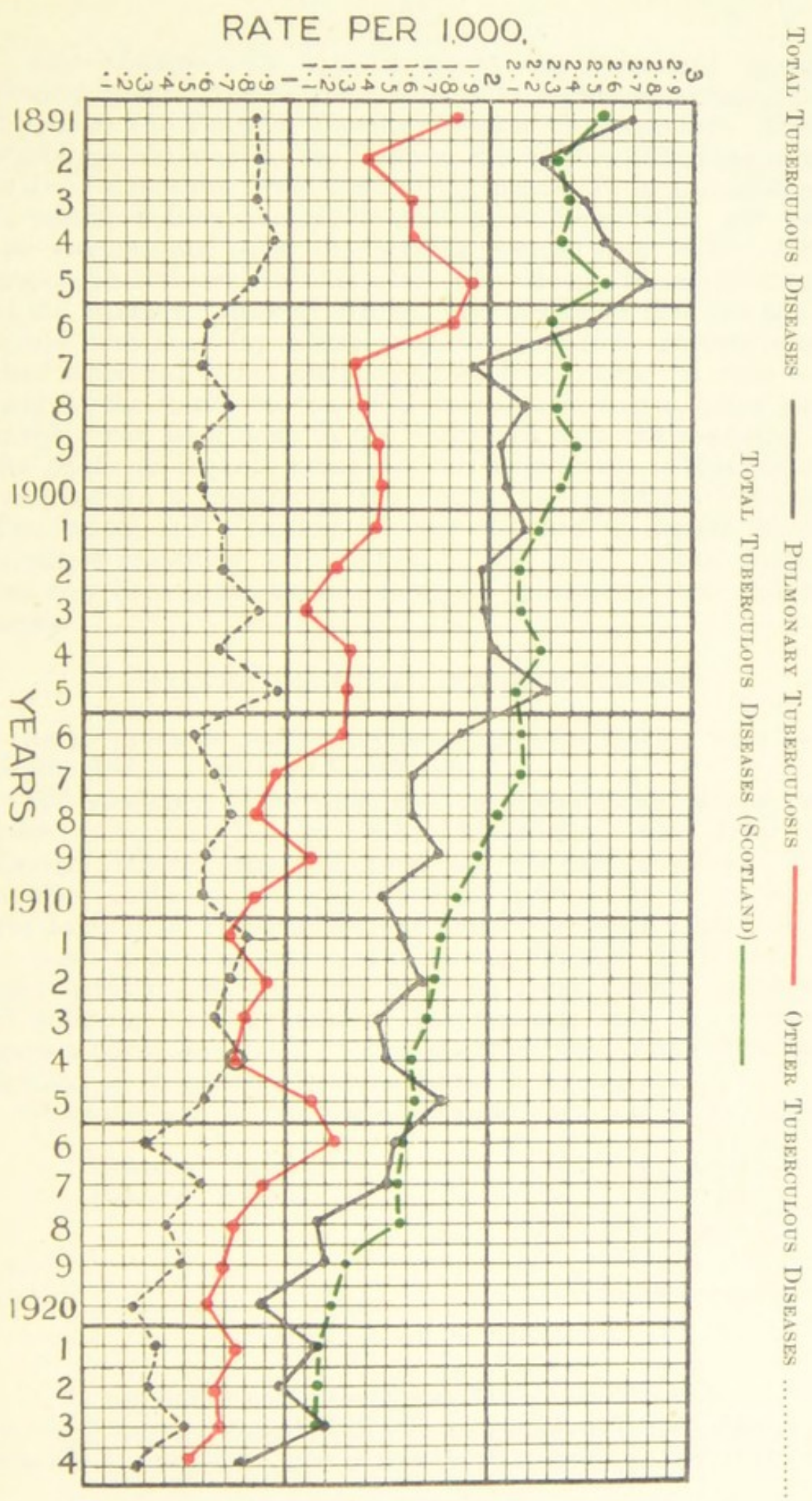
TABLE V.—BIRTHS AND BIRTH-RATES AND DEATHS
UNDER 1 YEAR PER 1000 BIRTHS, 1891-1924.

Year.	WESTERN DISTRICT.			EASTERN DISTRICT.		
	No. of Births.	Birth-Rate.	Deaths under One Year per 1000 Births.	No. of Births.	Birth-Rate.	Deaths under One Year per 1000 Births.
1891	815	28·257	110	693	35·017	153
2	809	27·16	95	710	33·94	85
3	779	26·35	121	764	37·53	112
4	704	25·127	96	763	35·145	129
5	728	25·494	119	783	35·063	117
6	754	25·995	98	801	35·829	104
7	787	26·923	144	787	34·882	101
8	753	25·550	115	749	32·509	126
9	738	25·548	112	758	32·643	104
1900	828	28·803	77	706	30·473	112
1	737	27·208	118	788	33·389	119
2	647	23·672	100	793	32·505	111
3	673	24·377	104	843	32·466	92
4	667	24·265	91	781	29·256	96
5	645	23·151	125	907	31·844	106
6	706	24·876	124	1013	31·424	107
7	709	24·365	89	694	28·343	90
8	692	23·417	95	761	29·079	93
9	653	22·454	75	732	27·410	80
1910	608	21·089	95	710	26·296	94
11	642	22·830	101	692	26·084	104
12	651	22·831	73	698	26·139	100
13	653	23·9	92	580	25·7	102
14	730	26·9	95	607	26·9	107
15	673	24·7	128	554	24·3	119
16	617	22·7	97	595	25·9	106
17	635	23·3	93	502	21·6	96
18	599	21·8	92	469	19·9	98
19	597	21·8	87	518	21·9	91
1920	772	28·3	85	615	25·9	54
21	704	23·2	48	551	23·1	74
22	675	21·7	76	557	22·9	86
23	592	19·6	83	458	19·4	68
24	580	19·4	74	436	18·8	108

TABLE VI.—MORTALITY IN THE COUNTY (LANDWARD)
FROM TUBERCULOUS DISEASES, 1891-1924.

Year.	Pulmonary Tuberculosis.	Other Tuberculous Diseases.	Total.	Death-Rates per 1000.		
				Pulmonary Tuberculosis.	Other Tuberculous Diseases.	Total.
1891, - -	90	41	131	1·850	0·843	2·693
1892, - -	72	44	116	1·419	0·867	2·286
1893, - -	81	42	123	1·622	0·841	2·463
1894, - -	82	45	127	1·649	0·912	2·561
1895, - -	99	42	141	1·945	0·825	2·770
1896, - -	96	31	127	1·869	0·603	2·472
1897, - -	69	30	99	1·329	0·578	1·907
1898, - -	72	43	115	1·371	0·818	2·189
1899, - -	77	30	107	1·477	0·575	2·052
1900, - -	78	31	109	1·502	0·595	2·097
1901, - -	75	35	110	1·477	0·690	2·167
1902, - -	67	36	103	1·293	0·695	1·988
1903, - -	60	46	106	1·123	0·872	1·995
1904, - -	71	37	108	1·336	0·696	2·032
1905, - -	74	53	127	1·313	0·942	2·255
1906, - -	80	35	115	1·319	0·580	1·899
1907, - -	52	36	88	0·969	0·640	1·640
1908, - -	50	41	91	0·879	0·735	1·614
1909, - -	63	34	97	1·129	0·609	1·738
1910, - -	50	33	83	0·895	0·591	1·486
1911, - -	41	44	85	0·753	0·808	1·561
1912, - -	50	40	90	0·905	0·724	1·629
1913, - -	39	33	72	0·800	0·650	1·450
1914, - -	40	32	72	0·75	0·75	1·50
1915, - -	57	29	86	1·15	0·60	1·75
1916, - -	64	15	79	1·25	0·30	1·55
1917, - -	46	32	78	0·90	0·60	1·50
1918, - -	40	18	58	0·75	0·40	1·15
1919, - -	35	25	60	0·70	0·49	1·19
1920, - -	32	13	45	0·62	0·25	0·88
1921, - -	43	19	62	0·79	0·35	1·14
1922, - -	37	17	54	0·67	0·30	0·97
1923, - -	38	29	67	0·70	0·50	1·20
1924, - -	27	15	42	0·51	0·28	0·79

CHART SHOWING DEATH RATES PER 1000 OF POPULATION FROM TUBERCULOUS DISEASES IN THE COUNTY (LANDWARD), 1891-1924.



River Luggie.—In April a report was submitted by the County Medical Officer for Lanarkshire regarding certain conditions at the Tannoch Chemical Works, Cumbernauld. These works are situated on the Luggie, the works themselves being in Dunbartonshire while the settling ponds are in Lanarkshire. It appeared from the report that ashes were being put into the stream, and that the settling ponds were full. Correspondence thereafter took place with Messrs Shand Brothers, of the Tannoch Chemical Works, who intimated that the ponds would have their immediate attention, and that they regretted that ashes had found their way into the stream. A visit was paid to the works on the 16th July, when it was found that nothing had been done to the ponds and that the condition of the banks as regards ashes was not satisfactory. This matter came before a meeting of the Committee on Rivers Pollution Prevention, and a further warning was sent to Messrs. Shand Brothers regarding the condition of the river. Some attempt has now been made by this company to improve their settling tanks.

BACTERIOLOGICAL EXAMINATIONS.

As in previous years, specimens for examination were sent to the Usher Institute, Edinburgh.

223 specimens were submitted for examination during the year as against 268 in 1923; 112 of these were from the Eastern District and 111 from the Western District. This number included 133 specimens of sputum in 34 of which the bacillus of Tuberculosis was found; 88 swabs from throats or noses of persons suspected of having Diphtheria, of these 17 were positive; 9 specimens of blood from persons suspected of suffering from Typhoid or Paratyphoid, only one of these gave a positive reaction. One specimen was examined for the amœba of Dysentery, but was found to be negative.

The total cost of this bacteriological work was as follows:—

Western District,	-	-	-	£14	12	0
Eastern District,	-	-	-	15	9	10
				£30	1	10

CLOSURE OF SCHOOLS.

Although infectious disease was fairly prevalent during the year, it was not found desirable to resort to school closure in connection with it. An outbreak of Measles at Arrochar and

Tarbet, however, seemed to call for special action of some kind, and, after careful consideration, it was arranged to exclude 13 susceptible children who travelled daily to school from Ardlui by motor. This action was taken in the hope that thereby Measles would be prevented from spreading to Ardlui. As a matter of fact, certain of the Ardlui children had already been infected, and eventually developed the disease, so that the procedure did not have the desired effect.

BLIND PERSONS ACT.

At the end of 1924 the Blind Persons Register contained the names of 82 persons, including 10 new names which were added during the year. The following shows the distribution of these throughout the County:—

Burgh of Clydebank, - - - -	29
Burgh of Kirkintilloch, - - - -	9
Burgh of Helensburgh, - - - -	1
Burgh of Milngavie, - - - -	2
Western District, Landward, - - - -	22
Eastern District, Landward, - - - -	19

Of the Western District cases, 8 resided in Bonhill Parish, 11 in Cardross Parish, 2 in Row Parish, and 1 in Arrochar Parish, while of the Eastern District cases 7 resided in Cumbernauld Parish, 1 in Kirkintilloch Parish, 4 in East Kilpatrick Parish, and 7 in West Kilpatrick Parish.

As regards the 10 new cases, 4 were males and 6 females. The ages were as follows:—

Between 15 and 20 years, - - - -	2
„ 20 „ 30 „ - - - -	1
„ 30 „ 40 „ - - - -	1
„ 40 „ 50 „ - - - -	1
„ 50 „ 60 „ - - - -	2
„ 60 „ 70 „ - - - -	3

Regarding the causes of blindness in these cases, the history showed that Cataract was responsible in 3 cases, disease of the optic nerve in 2 cases, Ophthalmia Neonatorum in 2 cases, accident in 1 case, Glaucoma in 1 case, and in 1 case the cause of blindness was not definitely ascertained.

Three applications for admission to the Royal Glasgow Asylum for the Blind were dealt with during 1924. Two of these applications were from Clydebank patients and one from a Renton patient.

SEASONAL WORKERS.

The bye-laws for Seasonal Workers have now been in force for three summers, and steps were taken during 1924 to enforce their provisions more strictly.

The routine work of visiting and examining the farms was carried out by the Sanitary Inspector's department, and throughout the season a certain number of contraventions of the bye-laws were reported. The worst instance was a case in the Bonhill Parish, where a farmer actually housed the female workers of a squad, to the number of 15, in a barn which was without windows, and with no ventilation except the door. There were contraventions of eight other bye-laws in his case, and the Sheriff convicted and imposed a fine of £5, with the option of fourteen days' imprisonment.

The same sentence was passed on two farmers in Luss Parish, who had ten and eight contraventions of the bye-laws respectively. In the latter case the male members of the squad were housed in a motor shed, with no ventilation apart from the door.

A number of other farmers and potato merchants were warned, chiefly on account of their omission to notify the arrival of squads of workers at their farms.

I, personally, visited nearly all the farms in the district, and am satisfied that a great improvement has been effected in the housing of these workers, but continued vigilance will be necessary if the standard of housing and cleanliness is to be maintained.

TENTS, VANS, AND SHEDS.

After the experience of previous summers, nearly all the proprietors of land fronting the shores of the Clyde exhibited notices prohibiting camping on their lands, and, in consequence, the number of tents and other structures erected was considerably smaller. The portion of the shore extending from Ardmore to Craigendoran was, however, used somewhat extensively.

Periodic inspections were made, and in July a case of serious overcrowding was reported for prosecution. In this case no fewer than 17 persons were found in a small tent, 14 of them being children varying from thirteen years to six months. The owner of the tent was fined 10s. or seven days' imprisonment.

At the same time a built shed inhabited by 5 men was discovered near Portkil. The owner, a Russian, was prosecuted for overcrowding and failing to provide suitable sanitary arrangements. He was admonished.

TABLE VII.—RAINFALL DURING 1924.

STATION.	OBSERVER.	Rain Gauge.			January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Totals.
		Diameter.	Height above Ground.	Height above Sea-level.													
		in.	ft. in.	ft.													
Valve House, Luss Rd., Helensburgh,	Jas. N. Stirling, Burgh Surveyor, ..	8	1 0	293	{ Rain in inches, 7·02 28 { Days on which rain fell,	1·74 20	1·70 7	3·35 20	5·18 27	3·46 20	5·63 25	4·71 25	6·66 21	4·59 19	5·26 19	8·38 27	57·68 258
School House, Rosneath, ..	Matthew Cross, Headmaster, ..	..	..	..	{ Rain in inches, 6·43 28 { Days on which rain fell,	1·4 20	1·41 7	2·9 23	5·23 27	3·8 22	5·08 24	4·41 25	6·1 22	4·5 17	4·21 16	8·39 27	53·86 258
Glen Finlas, ..	George Beaton, Water Superintendent, ..	..	..	..	{ Rain in inches, 8·13 26 { Days on which rain fell,	3·01 20	1·01 7	4·29 21	6·96 27	6·12 22	8·27 25	7·02 26	9·01 22	6·68 19	7·25 18	9·83 29	77·58 262
Renton Filters, ..	Charles Brown, Water Superintendent, ..	8	4 0	292	{ Rain in inches, .. { Days on which rain fell,	..	0·83 6	2·10 15	4·85 28	2·24 18	4·39 25	3·68 22	4·03 18	3·61 16	3·23 20	9·38 28	88·34* 196*
Cochno Filters, ..	Thomas L. Rae, Water Superintendent, ..	5	1 0	400	{ Rain in inches, 5·34 23 { Days on which rain fell,	1·05 10	0·79 6	2·43 14	4·83 24	2·34 17	3·94 19	4·47 20	4·80 22	2·93 15	3·66 16	6·21 22	42·79 208
Cochno Loch, ..	Do.	5	1 0	909	Rain in inches, 6·26	1·38	1·29	2·79	5·15	3·11	5·33	6·82	5·82	4·32	4·37	7·58	54·22
Jaw Reservoir, ..	Do.	5	1 0	912	Rain in inches, 6·64	1·26	1·31	2·79	5·70	3·18	4·82	7·05	5·15	4·12	3·99	5·64	51·65
Greenside Reservoir, ..	Do.	5	1 0	875	Rain in inches, 6·73	1·09	1·27	3·01	5·48	3·22	5·08	6·70	5·74	4·14	4·01	9·14	55·61

* Figures incomplete owing to accident to rain gauge.

In August my attention was directed to a tent which was pitched on the Gareloch side, on swampy ground, and was used by a contractor to house his workers. It was found that a number of the bye-laws were contravened, but eventually the tent was removed and arrangements made to house the men in Clynder or Garelochhead. Later, towards the end of August, a prosecution was instituted against the same contractor in respect of certain vans and tents occupied by workmen at Jamestown. The contractor was fined £10.

In September, on the shore at Camiseskan, a small tent was found to be occupied by 3 adults, and 5 children ranging from twelve years to two and a half years. Several other bye-laws were contravened, and the owner was prosecuted in the Sheriff Court and fined £2.

In October a complaint was received from the Clerk to the Special District of the Parish of Renfrew regarding a man who was living on the edge of their refuse coup at Drumchapel. A visit of inspection was made, and the man in question was found living in a shed some way off from the coup itself, and there did not appear to be any actual contravention of the bye-laws. At the same time, however, a number of men were discovered living in sort of dug-out places at another refuse coup on the site of the old brickworks. This appeared to be a more serious matter, but difficulty was experienced in removing these persons, and the matter was still under consideration at the end of the year.

Later in October the question of another tent at Camiseskan was considered, and reports were submitted to the Health Committee, who directed that the owner should be warned. Following that certain alterations were made in the structure, which more or less was made to conform to the bye-laws, but eventually the tent was removed and the people went to stay in Helensburgh.

Towards the end of the year structures commenced to appear on the Camiseskan shore which could not be classified as temporary, and in two instances a prosecution followed under the District Building Bye-laws. In one instance a conviction was obtained, and an admonition administered; in the other case the conviction was accompanied by a penalty. At the end of the year the further procedure to be taken regarding these cases was under consideration.

I am indebted to the Sanitary Inspector for the following particulars regarding the number of structures occupied during the summer months:—

In the Western District there were 220 tents, &c., inspected.

These comprised 101 bell tents, 71 canvas bivouacs, 27 cottage tents, and 9 wooden erections, the remaining 12 being erections which were somewhat difficult to classify.

The occupants of these structures consisted of 657 adults and 262 children.

As regards the Eastern District there was practically no camping. The only persons on the register were 6 adults, who have been referred to in connection with certain dug-outs near Blairdardie.

DEPOSITION OF CLYDE DREDGINGS.

Following on the inquiry into the deposition of Clyde dredgings, when the area allotted for such purpose was confined to a patch between Gourock Pier and the mouth of Loch Long, in place of the Rosneath patch previously mentioned, a detailed survey of the coast was made by officials of the Board of Health, the Clyde Navigation Trustees, and either Dr. Johnstone or myself, and a report was submitted to the Board by Mr. Hamilton. The following is a report which was submitted by me to the County Council, and which is now appended on account of its general interest:—

“ 88 College Street,
“ Dumbarton, 19th January, 1924.

“ REPORT ON INSPECTION OF CLYDE FORESHORE, FROM 10TH
TO 18TH JANUARY, 1924.

“ *Cardross Station to Helensburgh Boundary.*—In this section deposits of black silt were found under the sand at varying depths; in some places one inch of sand and several inches of black silt; in other places the deposit of silt was less in quantity and sometimes just under the surface.

“ The bays at Ardmore Point were badly polluted.

“ A small amount of oily, black material was found on the Gareloch side of Craigendoran pier.

“ *Helensburgh Boundary to Garelochhead.*—In this area deposits of the same nature as above were found under the sand in Ardencaple Bay, Row Bay, and opposite Ballikinrain,

while the bay immediately inside the narrows was clean. Faslane Bay was clean, but the head of the loch has a heavy deposit of black material under the sand at intervals, especially in the portions on which mussels are growing.

“ *Garelochhead to Rosneath.*—A very heavy and foul-smelling deposit was found under the sand opposite a house called Dunchattan. This is probably the worst deposit found. The shore from there down to Rahane was remarkably clean, and showed no deposits of this material. At a point slightly north of Rahane, and almost exactly opposite Shandon Hydropathic, the beach had a substratum of black, oily material which smelt of oil. The ferryman here states that during the war this portion of the beach was heavily polluted with oil from the Admiralty Submarine Station opposite.

“ From Rahane Ferry right down to Stroul Bay the shore was comparatively clean, and showed practically no deposit of any description underneath the sand. There was a certain amount of deposit in Stroul Bay, but not very pronounced.

“ From Stroul Bay round the point to Rosneath Pier the shore was quite clean.

“ *Rosneath to Kilcreggan.*—From Rosneath Pier to the point where the trees commence on the bank the shore was clean, but at this point the black deposit was again discovered in varying thicknesses. From the point mentioned right round to the Castle gates this deposit was discovered, and it was very thick in Camsail Bay.

“ From the Castle along the policies the small bays were also polluted, but from Crane Rock round Castle Point to Castle Bay, opposite Low Barracks, the shore was quite unpolluted.

“ At this point, as the shore becomes rocky thereafter, it was considered better to approach from the Kilcreggan end, and the shore was visited and examined from Kilcreggan boundary to a point beyond Portkil Fort. This was found all to be perfectly clean, and the Clyde Trustees' representative agreed that the portion from there round to Rosneath Point would also be held as being clean.

“ *Cove and Kilcreggan to Coulport.*—An inspection was also made from the boundary of Cove and Kilcreggan on the north side to Coulport.

“ Commencing at Coulport Pier, it was found that the shore was in good condition, with no deposit underneath the sand or shingle. The shore was again examined at a point below Coulport House. This shore was also found to be clean.

“ The next point visited was the shore opposite Peaton House. This shore shelves very gradually, and over a large area was found to be heavily polluted with black, foul-smelling silt.

“ The shore was once more examined before the Kilcreggan boundary, at a point between Ardpeaton and the gasworks, just outside the burgh boundary. This portion of the shore was found to be clean.

“ SUMMARY.

“ It is somewhat difficult to draw conclusions from this inspection. The conditions existing were to some extent different from what was expected, but I think this is due, to a great degree, to the slope and nature of the shore in the various places visited. Where the shore is shingly, with a good slope, there is no deposit; but where the shore is sandy, and especially if it is flat, there is every probability of there being some black, decaying material underneath.

“ The question raised by the representative of the Clyde Trust regarding the deposit at Peaton was whether this material was really sewage. If it was sewage or of the nature of sewage, then there is no doubt that it must have come ashore from the deposits put into Loch Long during the war. On the other hand, as there is a great deal of seaweed and decaying vegetable material on this shore, the suggestion was made that this was in point of fact decaying vegetable material and not animal matter. Perhaps it might be of interest to obtain a sample of this silt with a view to having it analysed chemically. Certainly the smell suggests sewage more than decaying vegetable matter.

“ After this extremely careful examination of the shore it will be interesting to see whether any alteration takes place by the deposit of dredged material from the lower reaches of the river opposite the mouth of Loch Long.

(Sgd.) “ THOMAS LAUDER THOMSON.”

Following on the discussion on the above report, samples of mud were submitted to the Analyst, and were reported on as follows:—

City Analysts' and Gas Examiners' Laboratory,
156 Bath Street,
Glasgow, 15th March, 1924.

Analyses of five samples of mud received on the 29th ult. from Dr. T. Lauder Thomson, Medical Officer for the County of Dunbarton.

Label No. 1. "Sample of mud. From shore at Gareloch-head, 28th February, 1924."

Label No. 2. "Sample of mud. From shore in Ardmore Bay, 28th February, 1924."

Label No. 3. "Sample of mud. From shore at Peaton, Loch Long, 28th February, 1924."

Label No. 4. "Sample of mud. From shore opposite Cardross Railway Station, 28th February, 1924."

Label No. 5. "Sample of mud. From Row Bay, 28th February, 1924."

The samples were analysed, and the following are the results after drying at 212° Fahr., as this will give a better comparison than in the wet condition:—

		Per Cent.				
		No. 1.	No. 2.	No. 3.	No. 4.	No. 5.
Organic Matter,	-	2·31	3·25	·64	1·41	2·61
Mineral Matter,	-	97·69	96·75	99·36	98·59	97·39
		100·00	100·00	100·00	100·00	100·00
Alginic Acid,	- -	·15	·18	none	·08	·10
Nitrogen,	- -	·08	·12	trace	·05	·09
Water originally present,	- -	23·25	26·64	15·08	21·86	26·31

No. 1.—This sample consisted mainly of sand and pebbles, and was of a grey colour, which was due to decayed organic matter or carbonaceous matter. The alginic acid is an ingredient of seaweed, and shows that part of the organic matter at least is derived from that source. In fresh dried seaweed

there is from 6 to 15 per cent. of alginic acid, according to the species to which the weed belongs. When seaweed decays it will undoubtedly be the nitrogenous compounds (alginic acid and albuminoids) that decompose first and produce the offensive odour, but there is no record of the proportion of alginic acid or nitrogen in the decayed weed. Taking the alginic acid at 10 per cent., there would be 1.5 per cent. of dry seaweed in the dried sample, which leaves 0.81 per cent. of other organic matters. Whether this is due to any other source of pollution it is impossible to say, but there can be no doubt that the organic matter is mainly, if not entirely, dry seaweed. The percentage of nitrogen is not more than would probably be present in decayed seaweed containing the above percentage of alginic acid, and does not indicate whether or not a little sludge is also present. Examined under the microscope, some black particles were observed, which looked like partially burnt coal, but the particles were so small that they could not be identified.

No. 2.—This sample was of a greyish colour, and was composed mainly of sand, but there were no pebbles present. The alginic acid accounts for about 1.8 per cent. of the organic matter, leaving 1.45 per cent. the origin of which cannot be determined. Probably some of it was partially burnt coal, as black particles were observed under the microscope, but these were too small to identify them. All that can be said is that the bulk of the organic matter is derived from seaweed.

No. 3.—This sample consisted of a fairly clean mixture of sand and pebbles, but a few black particles were also observed. No seaweed was detected in this sample, but two or three larger black particles undoubtedly consisted of partially burnt coal or cinders, which would account for most of the organic matter.

No. 4.—This sample was of a greyish colour, and consisted chiefly of sand and pebbles with a few pieces of rock, and some black particles like partially burnt coal. The alginic acid accounts for most of the organic matter, the unaccounted for being only 0.61 per cent.

No. 5.—This sample was of a greyish colour, and consisted chiefly of sand, with a few small pieces of rock, and some black particles, one somewhat large piece of which proved to be partially burnt coal or cinder. The alginic acid accounts

for about 1 per cent. of the organic matter, and a considerable part at least of the remaining 1.61 per cent. is due to partially burnt coal.

Taking all the results into consideration, the conclusions appear to be that (1) the organic matter (which is the only substance present that decomposes and produces an offensive odour) in sample 1, 2, and 4 is chiefly accounted for by decayed seaweed, (2) and No. 3 by partially burnt coal, and there is no indication of decayed seaweed or sewage sludge being present, and (3) by decayed seaweed and partially burnt coal. Of course, there may be a little sewage sludge in Nos. 1, 2, 4, and 5, but there is no means of identifying it, and it must be much smaller in proportion than the other polluting agents.

(Sgd.) R. R. TATLOCK & THOMSON.

A further general inspection of the shore will be made in 1925.

OIL IN NAVIGABLE WATERS ACT, 1922.

The question of infringement of this Act appeared to be so nearly a question of Public Health that when a specific pollution occurred in August, 1924, I was asked to make a report on the circumstances. The pollution in question occurred in the Gareloch, the shores of which were coated with black oil from the most southerly point of Ballinkinrain grounds to 165 yards beyond the most northerly part of the grounds of Croy House. The shore, especially opposite Ballinkinrain, was heavily coated, and the smell was very heavy and sickening. At the time there were three ships in the loch, the "Pretorian" and two City liners (the "City of Simla" and another). The "City of Simla" was the only oil fuel ship, and it was lying directly north-west of Croy House and was preparing to leave the loch.

After some trouble, it was ascertained that a water ballast tank which had previously contained oil had been pumped out on or about the date referred to. Prosecutions under this Act are initiated by the Procurator-fiscal, and in this instance, for the sake of convenience, the case was heard in Glasgow, the ship having gone up the Clyde. The captain pleaded guilty, and was fined £20.

TREATMENT OF VENEREAL DISEASES.

In May, 1924, the following scheme was issued to all general practitioners in the area of the Joint Committee:—

DUNBARTONSHIRE JOINT COMMITTEE ON VENEREAL DISEASES.

County Council Offices, 88 College Street, Dumbarton.

The County Council, the Town Councils of Dumbarton, Helensburgh, Milngavie, and Kilcreggan have now adopted a scheme for the diagnosis and control of Venereal Diseases, and it is my duty, as Medical Officer of Health, to intimate the arrangements to you and also to enclose for your information a number of leaflets on the subject.

The scheme, as far as it relates to the general practitioners, is as follows:—

DIAGNOSIS.

Taking of Specimens.—Arrangements can be made for assistance in taking specimens if desired.

Wassermann Tests.—Applications for outfits for the collection of blood for the Wassermann test should be made to me.

Practitioners should note that the test is done on Tuesdays and Fridays, and specimens, therefore, must be transmitted to Dr. R. M. Buchanan, City Bacteriologist, Sanitary Chambers, 23 Montrose Street, Glasgow, so as to arrive by 4 p.m. on Mondays and Thursdays.

Exudate: (1) *Spirochaetes*, (2) *Gonococci*.—Outfits may be obtained from me, and should also be forwarded to Dr. Buchanan. Particulars as to the best methods of taking these specimens will be sent with the outfit.

Reports.—The results of the diagnoses will be sent through this Department. This is necessary in order to check the number of specimens dealt with during the year.

TREATMENT.

Clinics.—The Joint Committee for the County Area has arranged for the treatment of patients under conditions of secrecy, and free of all charge, at certain Clinics in Glasgow. The following are the days and hours at present arranged:—

CENTRES FOR TREATMENT OF VENEREAL DISEASE.

Centre.	Disease Treated.	Monday.	Tuesday.	Wednesday.	Thursday.	Friday.	Saturday.
MALES—							
Royal Infirmary, -	All V.D.	1.30 p.m.	—	1.30 p.m.	—	1.30 p.m.	—
Western Infirmary, -	Syphilis only	—	5.30 p.m.	11 a.m.	—	—	—
Victoria Infirmary, -	Syphilis only	—	—	—	—	—	9.30 a.m.
Bellahouston Dispensary, 87 Paisley Road, -	All V.D.	—	6 p.m.	—	—	6 p.m.	—
Corporation Dispensary, 186 Broomielaw, -	All V.D.	6 p.m.	—	6 p.m.	6 p.m.	2 p.m.	—
FEMALES—							
Central Dispensary, 15 North Portland St., -	All V.D.	{ 9 a.m. & 12.30 p.m.	9 a.m. & 12.30 p.m.	9 a.m. & 12.30 p.m.	12.30 p.m. & 6 p.m.	12.30 p.m. & 6 p.m.	—
Western Infirmary, -	All V.D.	—	—	—	5.30 p.m.	11 a.m.	—
Victoria Infirmary, -	Syphilis	—	9.30 a.m.	—	—	—	—
Bellahouston Dispensary, 40 Morrison Street, -	All V.D.	—	—	6 p.m.	—	—	—
Baird Street Reception House, -	All V.D.	—	—	10 a.m.	—	10 a.m.	—
CHILDREN—							
Central Dispensary, 15 North Portland St., -	All V.D.	9 a.m.	—	9 a.m.	—	—	9 a.m.
Sick Children's Hospital Dispensary, -	Chiefly Syphilis	2 p.m.	—	—	2 p.m.	—	—
Baird Street Reception House, -	All V.D.	—	—	10 a.m.	—	10 a.m.	—
EYE CASES ONLY (BOTH SEXES)—							
Eye Infirmary Dispensary, Charlotte Street, -	All V.D. of Eyes	—	5.30 p.m.	5.30 p.m.	5.30 p.m.	—	—

Home Treatment.—For patients treated by you at home, arrangements have been made for the supply of the following drugs free of charge:—

- | | |
|-------------------|-----------------------|
| 1. Arsenobenzol. | 9. Novarsenobenzol. |
| 2. Arsenobillon. | 10. Novarsenobillon. |
| 3. Diarsenol. | 11. Salvarsan. |
| 4. Galyl. | 12. Silver Salvarsan. |
| 5. Kharsivan. | 13. Sodium Salvarsan. |
| 6. Neodiarsenol. | 14. Stabilarsan. |
| 7. Neokharsivan. | 15. Sulfarsenol. |
| 8. Neo-Salvarsan. | |

In this connection I am directed by the Board of Health to keep a register of Practitioners who are entitled to receive a supply of drugs for *intravenous* injection. The following is the regulation of the Board of Health:—"Salvarsan and its substitutes, which are administered by intravenous injection, should be supplied only to such medical practitioners as can show satisfactory evidence of training or experience in the administration of these drugs." Please let me know as soon as possible whether you hold any of the following qualifications:—

- (1) A certificate of having satisfactorily fulfilled the duties of clinical assistant in a Hospital Department recognised by the Board of Health in connection with a Local Authority's scheme for the diagnosis and treatment of venereal diseases in their communicable stages.
- (2) A certificate of satisfactory attendance at a course of instruction in the diagnosis and treatment of venereal diseases (including intravenous medication) in such a Hospital Department or in a recognised Medical School or Post-Graduate College.
- (3) Are or have been within the last five years a member of the permanent staff of a Hospital containing not less than fifty beds.
- (4) Can produce satisfactory evidence, other than that indicated in the foregoing paragraphs, that you have had adequate experience in the administration of these drugs by intravenous injection.

No drugs other than those approved by the Board can be supplied. You will note, however, that Galyl for Intra-muscular injection and Sulfarsenol for subcutaneous injection are among the drugs recognised by the Board.

POSTAGE ON SPECIMENS.

The Board of Health has sanctioned a payment to General

Practitioners of sixpence (6d.) per specimen sent to the laboratory. This fee is on account of postage and is to cover all charges.

MEDICAL OFFICER OF HEALTH.

29th May, 1924.

During the year very little advantage was taken of the scheme apart from the sending of patients to the Glasgow Clinics. As far as the County Health Department was concerned, only four doctors sent in a notice stating that they were qualified to give intravenous injections, and no applications for outfits for the diagnosis of the disease were asked for by medical practitioners. One general practitioner, however, availed himself of the opportunity of obtaining supplies of drugs on two occasions.

During the year propaganda work was carried out by the Joint Committee, in Alexandria in the Western District and Duntocher in the Eastern District, when a cinematograph film was displayed and a lecture given by a lecturer from the Scottish Committee of the National Council for Combating Venereal Diseases. A similar lecture was given in Dumbarton Burgh. All these lectures were well attended.

The following table shows the numbers of in-patients and out-patients dealt with during 1924:—

TREATMENT OF VENEREAL DISEASES DURING THE
TWELVE MONTHS ENDING 30TH NOVEMBER, 1924.

TREATMENT CENTRE.	IN-PATIENTS.		OUT-PATIENTS.	
	Number.	Days Residence.	New Patients, 1924.	Total attendances of all Patients during 1924.
Royal Infirmary, - -	—	—	11	141
Western Infirmary, - -	5	269	15	196
Victoria Infirmary, - -	—	—	—	—
Lock Hospital, - - -	—	—	4	38
Royal Hospital for Sick Children, - - -	—	—	1	2
Eye Infirmary, - - -	—	—	9	173
Broomielaw Dispensary, -	—	—	8	40
Totals, - - - - -	5	269	48	590

It should be noted that in the columns referring to out-patients the total number of patients only includes new patients in 1924, while the last column includes attendances of patients who commenced attending before 30th November, 1923. Of the 48 new patients, 31 were from the Western District and 17 from the Eastern District.

PART II.—THE DISTRICTS.

WESTERN DISTRICT.

VITAL STATISTICS.

BIRTHS.—The number of births allocated to the Western District in 1924, after correction for transfers, was 580, as against 592 in 1923. This is the lowest recorded number for the District. Similarly, the rate per 1000 of the population, namely, 19.4, was the lowest on record. Figures for the last five years will be found in Table III.

DEATHS.—The number of deaths of persons resident in or belonging to the Western District during the year 1924 was 383, as against 393 in 1923. The death-rate per 1000 of the population was 12.8, as against 13.0 in 1923. The chief causes of death were—Cancer 47, Heart Disease 47, Pneumonia 36, Apoplexy 34, Bronchitis 24, Tuberculous Diseases 20. No fewer than twenty-three persons died at the age of 85 or over; four were 94 years of age, two were 92, and three were 90 years old.

The number of deaths from Pulmonary Tuberculosis during the year was 15. This number is equivalent to a death-rate of .50 per 1000 of the population, as against .59 in 1923. This is the lowest recorded rate in the Western District.

The deaths from Non-pulmonary Tuberculosis numbered 5. This number produces a death-rate of .17 of the population, as against .63 in 1923. This is also the lowest recorded death-rate for the disease in the Western District.

INFECTIOUS DISEASE.

The number of cases of infectious disease notified during the year was 515, as against 251 in 1923. The cause of this increase was the prevalence of Scarlet Fever in the Bonhill and Cardross Parishes, 300 cases occurring there during the year. This outbreak was, for the most part, a mild one, and was kept smouldering by unrecognised cases. There were, however, several very severe cases, as was to be expected, and 9 deaths occurred during the year. Seven of these deaths were con-

nected with the outbreak in the Vale of Leven area, four being patients from the Bonhill Parish, two from the Cardross Parish (Renton), and one from the Kilmaronock Parish. The two other deaths were associated with a small outbreak at Row.

It will be noted that ten cases of Scarlet Fever were notified from the Rosneath Parish. The circumstances were somewhat peculiar, and may be of interest. I was asked in May to visit a dairy farm in the Parish, and found two inmates ill. One of them, a small boy, was undoubtedly suffering from septic Scarlet Fever; the other, an elder sister, had been ill, and was recovering from a supposed attack of Influenza. Both cases were removed to hospital, along with another member of the family who had a slight sore throat. A visit paid to the District about ten days after revealed nothing. The disease had not been carried by the milk to the village, and it was confidently anticipated that no further cases would occur. About a week later, however, a case was reported from an isolated cottage about a quarter of a mile from the farm. This case was removed to hospital, and, although every inquiry was made, no missed case nor actual source of infection could be found. On 25th June a party of Girl Guides came to the farm, and were accommodated in a disused barn. On 5th July three of these girls, aged 18, 16, and 13 years respectively, were notified as suffering from Scarlet Fever, and were removed to hospital. The eldest girl had an undoubted attack of Scarlet Fever; the other two did not have very typical symptoms. On the same day two maids in a house about a mile away were reported as having Scarlet Fever. This house was supplied with milk from the farm. They also were removed to hospital, and did not show any very convincing sign of Scarlet Fever. Neither of these maids took milk except in their tea, while a child in the house, who might have been presumed to be susceptible, ran a double risk, sleeping in the same room as one of the maids and drinking a large quantity of the milk in question. Still no cases occurred in the village, in which about 20 gallons of this milk were consumed daily.

In hospital the diagnosis of Scarlet Fever in the case of two of the Girl Guides and both the maids was not confirmed. The eldest Girl Guide, however, had a very sharp attack.

When everything appeared to have quietened down again, a lad in the cottage previously referred to, which was about a quarter of a mile from the farm, developed the disease. This proved to be the last case.

The peculiarity of this outbreak was the length of time over which the cases, which only numbered five in which the diagnosis was confirmed, extended, viz., from 9th May to 31st July, and the fact that, in spite of the amount of milk con-

sumed in the village, no persons there developed the disease. These circumstances make it certain that there was an unrecognised or carrier case going about who could not be detected.

The epidemic of Scarlet Fever in the Bonhill and Cardross Parishes was a somewhat extensive one, and, owing to the number of cases occurring, the whole of the Dumbarton Joint Hospital had to be given over entirely for the treatment of the disease. Unfortunately, through school attendance, the infection was carried to a dairy farm in the Kilmaronock Parish. Although the outbreak was, for the most part, a mild one, there were a number of septic cases, and the number of cases of Otorrhœa was perhaps above the average, about 10 per cent. of the patients suffering in this way. As previously mentioned, 7 deaths occurred.

As regards other infectious diseases, there was less Diphtheria, 11 cases as against 14 in 1923. There were rather more cases of Pneumonia reported, 72 as against 54 in 1923. Two cases of Dysentery were reported. These cases were on a ship (the s.s. "Simla") anchored in the Gareloch, which had a large Lascar crew on board. One case had to be treated in hospital. On the same ship there were about 100 cases of Chickenpox, and visits were paid owing to the suggestion that the disease might be Smallpox.

Thirty-six cases of Pulmonary Tuberculosis were notified during the year, and before the end of the year five of these had died, three had left the district, and in three cases the diagnosis had not been verified. Fifteen of the cases were sent to sanatoria for treatment, and eleven received domiciliary treatment. Fifty cases of Non-pulmonary Tuberculosis were notified during the year, and by 31st December four had died. Five cases were sent to institutions for treatment, and five received domiciliary treatment, while four cases were under observation, the diagnosis being doubtful.

TREATMENT OF TUBERCULOSIS.

A memorandum relating to this subject will be found on page 61. This memorandum, although inserted in the Eastern District portion of the report, is equally applicable to the Western District.

HOSPITAL ACCOMMODATION.

Owing to the year being an epidemic one as far as Scarlet Fever was concerned, the hospital at Havock was quite inadequate, and all cases of Diphtheria and Enteric had to be

dealt with in Duntocher Hospital, and all Tuberculosis cases had to be sent home. The same occurred in 1923, but on that occasion the epidemic was in the Burgh of Dumbarton.

Although the accommodation at the hospital might be considered fairly adequate in normal years, the position becomes quite impossible as soon as an epidemic commences. It must be remembered, also, that there are a great many more diseases to be dealt with nowadays. When the hospital was built, Scarlet Fever, Enteric Fever, and Diphtheria were the three diseases provided for. Now, in addition, there are cases of Pneumonia, Influenzal Pneumonia, Cerebrospinal Meningitis, Measles, Whooping Cough, and such like diseases, as well as Dysentery, Malaria, and other diseases which are now notifiable.

The provision of an isolation pavilion of four or five small wards is urgently needed at all small fever hospitals nowadays, and for this purpose the type of pavilion proposed for the Lennox Joint Hospital is eminently satisfactory.

The ambulance was kept in good order during the year, and the disinfection of clothes was satisfactorily carried out.

WATER SUPPLY.

Only one sample of water was taken for analysis during the year. The sample was from the supply to a house called Ivy Cottage, Clynder. The sample was taken on account of the proximity of a privy to the storage tank. The following is the analysis, which shows that no pollution had occurred:—

	Grains per Gallon.
Mineral Matter, - - - - -	4.76
Organic Matter, - - - - -	.40
Total Solid Matter, - - - - -	5.16
Nitrates—as Nitrate of Soda, - - - - -	.04
Free Ammonia, - - - - -	.001
Albuminoid Ammonia, - - - - -	.005
Total Ammonia, - - - - -	.006
Temporary Hardness, - - - - -	2.08
Permanent Hardness, - - - - -	1.37
Total Hardness, - - - - -	3.45

The sample, as received, was free from suspended matter,

and had a faint brown tint, due to the presence of a little mossy matter.

The analysis shows that this water is free from animal matter or sewage, and is suitable for drinking and other dietetic purposes, and it is also a soft water and well adapted for washing.

DRAINAGE AND SCAVENGING.

The question of a coup to take the place of the one at Gallangad, which is now nearly finished, was before the Committee during the year, but no decision had been arrived at by the end of the year.

The Renton Coup continues to give satisfaction.

MATERNITY SERVICE AND CHILD WELFARE.

In February, 1924, the Board of Health intimated that they would be prepared to consider developments of the Grant-Aided Public Services, and in April the following Report was submitted to the Public Health Committee:—

REPORT ON EXTENSION OF CHILD WELFARE SCHEME IN THE WESTERN DISTRICT OF THE COUNTY.

CLINIC ACCOMMODATION.—At the present time there is only one Clinic in the Western District, situated in Alexandria. The time has now come for the provision of a Clinic in Renton, which should be fitted up in the same way as the Alexandria Clinic, and would be open one day in the week for a period of one or two hours. The reason for suggesting this Clinic extension is that mothers and babies have to travel from Renton to the Alexandria Clinic in all weathers, and there is no doubt that this constitutes a hardship, especially as there are quite a number of regular attenders from Renton.

As the Western District Committee have now appointed an additional whole-time nurse, there will be no difficulty in carrying out the work of such a Clinic. The only extra expense, apart from fittings and rent, would be the salary of a medical man for about one hour in the week. I estimate that the cost of providing a Clinic would be—

<i>Capital Expenditure</i> —Fittings,	-	£10	0	0
<i>Annual Charges</i> —Rent of Premises,		12	10	0
Salary of Doctor,		26	0	0
Upkeep,	-	2	10	0

As against this expenditure there will be a very considerable

relief to the Alexandria Clinic, and, as the doctor there has often to remain for part of a second or third hour, there would probably be a saving in his salary to the extent of, say, £10. Further, I have under consideration the reduction of the number of Clinics at Alexandria to one day per week, but for a longer number of hours. The nurse in charge thinks that this arrangement would perhaps be more satisfactory. By this arrangement there would be a saving in rent at the Alexandria Clinic of about £6.

If these arrangements were carried into effect, the additional annual expenditure would be under £25.

PROVISION OF FOOD AND MILK UNDER THE SCHEME—CHILDREN.—Under the present arrangement, no milk can be supplied to children over 12 months of age unless on a doctor's certificate, and the amount supplied is one pint per child per day. I have gone carefully into the question of feeding, and would make the following suggestions:—

(1) That the period should be extended to 18 months instead of one year.

(2) That the amounts supplied should be as follows:—

Under 6 months, - - - 1 pint per day.

From 6 months to 18 months, $1\frac{1}{2}$ pints per day.

Children between 18 months and five years would, as before, require a doctor's certificate.

EXPECTANT AND NURSING MOTHERS.—From time to time cases occur in which there appear to be great hardship owing to the supply of milk to expectant and nursing mothers having been stopped when the scheme was last revised, and I would suggest that the previous arrangement should be reverted to, viz., that milk to the extent of one pint per day could be granted for expectant or nursing mothers. It is very desirable that this provision should be made at a time such as this, when in districts such as the Vale of Leven certain families are suffering very considerable hardship owing to the lack of employment.

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS.—My attention has been directed to numerous cases where expectant and nursing mothers urgently required dental attendance, but, owing to the present conditions of unemployment, have been totally unable to obtain it. I would suggest that power should be given under our scheme to provide such treatment where considered urgently necessary by the Medical Attendant at the Clinic.

PROVISION OF INSULIN.—The Board of Health have suggested in their circular that this drug should be provided through the

Child Welfare Administration. I would suggest that arrangements for the provision of this drug should be added to our scheme.

INSTITUTIONAL TREATMENT FOR AILING MOTHERS.—Cases have recently arisen where it appeared very desirable that the Medical Officer under the scheme should have power to arrange for Institutional Treatment for mothers who are ailing; by this I mean the sending of mothers to seaside homes for a short period, and in connection with this it would be necessary to be able to make arrangements for “domestic helps.” There might not be very many cases of this kind, but such a provision in our scheme would be of great advantage.

CLINIC PREMISES: LECTURES, &c.—It is to be hoped that at some early date the various Clinics in the County will be carried on in premises which are used entirely for that purpose. When such an arrangement is come to, it would be valuable to have power to provide for lectures on suitable subjects and to be able to provide materials for sewing classes and other means of instruction.

This list of suggested additions to our scheme may look large, but, in point of fact, I do not think the extra expenditure in any given year would be very great. I would suggest that the District Committee should approach the Board of Health asking that these additions to our scheme should be sanctioned in accordance with the circular recently received from them in connection with the subject.

MATERNITY HOSPITAL ACCOMMODATION.—In common with other Local Authorities, in Dunbartonshire there is a continual and pressing need for some provision for expectant mothers whose home conditions are unsatisfactory. Only those who have done maternity work in the worst slum areas can realise the terrible conditions prevailing in certain houses when confinement occurs. At this time, when, owing to lack of housing accommodation, the very worst types of houses are overcrowded, it appears to be right to again draw the attention of the Committee to this matter in order that the question of the provision of a local Maternity Hospital may be considered. Such an institution would be a very great benefit to the community generally, and would give children born in slums the best possible opportunity to survive.

T. LAUDER THOMSON.

88 COLLEGE STREET,
DUMBARTON, 28TH APRIL, 1924.

SUPPLEMENTARY REPORT ON THE EXTENSION OF THE CHILD WELFARE SCHEME IN THE WESTERN DISTRICT OF THE COUNTY.

At the time the original Report was written I was not aware that the Board of Health intended to press the Committee to carry out their regulation regarding the medical examination of all children receiving milk.

The arrangement in force at the present time, and approved by the Board of Health, is that, where a family is on the "dole," an allowance of milk is given to the extent of one pint per day for every child under one year of age without any medical examination being required. Where a child is certified to be suffering from an illness, one and a half pints are given, but no milk is given where the income of the family exceeds £2 per week.

At the present time there are, roughly speaking, 92 families receiving milk in the Western District; of these, 80 are in Alexandria, 8 are in Renton, and 4 are in other parts of the Western District. The great difficulty arising in medically examining these children is with reference to the time taken by the Medical Practitioner at the Clinic in passing such a number of children through his hands. With ordinary cases it is not possible for the Clinic doctor to examine more than about eight cases per hour. The Clinic in Alexandria lasts, approximately, about two hours, and, over and above applications for milk, there are always a certain number of mothers and children who come up for medical advice.

If each applicant for milk required to be examined monthly, it would mean over 20 cases to be examined for this purpose alone per Clinic, and this, with, say, 6 other cases, would result in the Clinic lasting over three hours. As the General Practitioners are already complaining of the amount of time occupied, I am afraid there would be strong objection taken to an extension of Clinic time in this way, more especially as at the present time the Medical Practitioners hold that 10s. an hour is not a sufficient fee.

I must, therefore, alter the suggested scheme to retain the second day in Alexandria, and, if necessary, to ask the doctor to attend on that day as well as on his usual visiting day. This would, of course, entail further expenditure to the extent of about £30 a year.

With this extra provision I am satisfied I would have ample arrangements for the medical examination of children in the Bonhill Parish, more especially if a one-day Clinic were started in Renton, which would mean possibly ten less cases altogether

for milk and one or two new cases per week. The extra expenditure, therefore, for Child Welfare Work would be—

Rent of rooms in Renton.

Doctor's fee in Renton of 10s. per hour for, say, one hour per week.

Doctor's fee in Alexandria of about £30 per year.

The total additional annual expenditure would be about £65 in place of £25 mentioned in my previous Report.

T. LAUDER THOMSON.

88 COLLEGE STREET,
DUMBARTON, 28TH MAY, 1924.

This Report was approved by the Public Health Committee, as far as Clinic Accommodation, Provision of Food and Milk, Dental Treatment for Expectant and Nursing Mothers, and Provision of Insulin were concerned, while the questions of Institutional Treatment for Ailing Mothers and the provision of Educational Facilities, including lectures, were continued for further consideration. The question of Maternity Hospital Accommodation was remitted to a Conference of Local Authorities. In August the Board of Health approved of the scheme, but stated that, before approving of the Clinic arrangements, they would require further particulars. They further stated that they considered the provision of Maternity Hospital Accommodation should be considered, if it were considered at all, jointly with other authorities.

ANNUAL RETURNS FOR BOARD OF HEALTH.

The Board of Health have issued a statement of particulars to be given which is a very exhaustive one. A great number of these particulars are already to be found in various portions of the Report, but it is necessary to add the following particulars and tables in order to comply with the requirements:—

SPECIAL TREATMENT CENTRES.—There are no Special Treatment Centres owned by the Local Authority, but arrangements have been made with the Education Authority for the treatment of children under five years of age at all their special centres. During 1924 four children requiring attention to their teeth were sent to the Education Authority Clinic at Dumbarton, as well as two requiring eye treatment, while as many as 17 were attended to by Dr. Kerr Love in connection with tonsils, adenoids, or ear conditions.

FOOD AND MILK.—As regards the supply of Food and Milk, 206 applications were received, 14 in respect of mothers and 192 in respect of children. All the applications in the case of mothers were granted, while 139 affecting children were granted. In no case after the beginning of June was milk supplied unless on a medical certificate, and in all the cases granted the parents were certified as necessitous. The cost of this service during the year amounted to £245 7s. 8d. As all the cases were necessitous, no money was recovered. No milk substitutes were supplied during the year.

MEASLES.—There is no notification of Measles in the District. During the year 3 children died of this disease, in each case the fatal issue was caused by Broncho-Pneumonia. There was one case of Measles admitted to hospital suffering from Broncho-Pneumonia.

WHOOPIING COUGH.—Four deaths from Whooping Cough occurred during the year; two were from Whooping Cough without any apparent complication, while in two instances the disease was complicated with Pneumonia. There were no cases removed to hospital.

MATERNITY HOSPITALS OR HOMES.—There is no Maternity Hospital in the County of Dunbarton, and all cases are sent to the Glasgow Royal Maternity and Women's Hospital, Rottenrow, Glasgow. During the year two women from the Western District were treated in the Ante-Natal Wards. It is known that patients in labour are admitted, but, apart from the notification of births, which numbered 3, no information is received by us.

HOMES AND HOSPITALS.—There are no homes for unmarried mothers, hospitals for sick children, or convalescent homes in the District to which patients may be sent, but one child was sent under the Child Welfare Scheme to Prestwick by arrangement with the Glasgow Poor Children's Fresh-Air Fortnight and Cripple Children's League.

ASSISTANCE AT CONFINEMENTS.—The following provision is not specially referred to in the circular from the Board of Health, *i.e.*, assistance at confinements other than is provided under the Midwives (Scotland) Act, 1915. During the year 56 applications for the provision of a midwife were received; 22 of these were granted, 32 were refused, and 2 were withdrawn.

TABLES.—The new tables necessary to comply with the Board's circular are numbered VIII., IX., and X.

In April Nurse Jean T. Ewing was appointed to take the place of Nurse Cameron, who had resigned. The areas of the District were altered, Nurse Ewing being given the area worked by Nurse Cameron, and, in addition, the Renton portion of the Cardross Parish. This appointment is a whole-time one, in place of a part-time appointment with Helensburgh.

MIDWIVES (SCOTLAND) ACT, 1915.

During 1924 it was considered necessary to report one midwife to the Local Supervising Authority for breach of the rules of the Central Midwives' Board. This midwife was thereafter reported to the Central Midwives' Board. As far as the charges related to the neglect of the patient, the Central Midwives' Board found that these had not been proved, but reprimanded the midwife in connection with the taking and recording of the pulse and temperature and the keeping of her register of cases.

Twenty-two midwives notified their intention to practise. Of these 16 have no qualification other than that they were in practice before the passing of the Midwives (Scotland) Act, 1915. Of the 6 others, 1 was in practice in 1914 but has since qualified by examination, and the 5 others are qualified by examination either in Scotland or England.

The following gives the details of the Annual Report on the working of the Act during the year 1924 as required by the Central Midwives' Board. The list of Certified Midwives has been omitted :—

REPORT.

BIRTHS IN DISTRICT :—

Total number of births registered during 1924,	-	-	569
Actual number of births attended by midwives during 1924,	-	-	266
Total number of deaths of new-born children (within ten days) during 1924,	-	-	19
Actual number of deaths of new-born children (within ten days) occurring in the practice of midwives during 1924,	-	-	1
Actual number of cases not attended by a doctor	} Births,		3
or midwife during 1924,		} Deaths,	Nil.

In addition to the above figures six notifications were received of births which occurred in institutions outside the District, and of these one was a still-birth.

CASES OF OPHTHALMIA NEONATORUM:—

Total number of cases during 1924,	- - - -	4
Actual number of cases occurring in the practice of midwives during 1924,	- - - -	Nil.
Actual number of cases occurring where confinement not attended by a doctor or midwife during 1924,	-	Nil.

CASES OF PUERPERAL SEPSIS:—

Total number of cases during 1924,	- - - -	Nil.
Total number of deaths during 1924,	- - - -	Nil.
Actual number of cases occurring in the practice of midwives during 1924,	- - - -	Nil.
Actual number of deaths occurring in the practice of midwives during 1924,	- - - -	Nil.
Actual number of cases occurring where confinement not attended by a doctor or midwife in 1924,	- - - -	} Cases, Nil. Deaths, Nil.

CASES OF STILL-BIRTH (DEAD-BORN):—

Total number of cases during 1924,	- - - -	23
Actual number of cases occurring in the practice of midwives during 1924,	- - - -	3

CASES OF EMERGENCY:—

In 54 instances midwives requiring the assistance of a medical practitioner sent in the statutory forms:—

The emergencies were as follows:—

Convulsions,	- - - -	1
Ante-partum hæmorrhage,	- - - -	1
Rigid cervix,	- - - -	1
Delayed labour,	- - - -	19
Nephritis,	- - - -	1
Cross-birth—twins,	- - - -	1
Persistent occipito-posterior,	- - - -	6
Prolapsed cord,	- - - -	1
Impaction of breech,	- - - -	2
Premature births,	- - - -	3
Retained placenta,	- - - -	2
Post-partum hæmorrhage,	- - - -	1
Still-births,	- - - -	1
Rise in temperature,	- - - -	1
Stitches required,	- - - -	3
Weakness of mother,	- - - -	2
Death of baby,	- - - -	1
Feebleness of baby,	- - - -	4
Baby unable to pass urine,	- - - -	2
Inflammation of baby's eyes,	- - - -	1

ADMINISTRATION :—

There has been no change in the administration of the Act since last Report.

NOTIFICATIONS :—

Statutory forms of notification were received during the year as under :—

Notification of artificial feeding,	-	-	2
Notification of still-birth,	-	-	1
Notification of having laid out a dead body,			3
Notification of death,	-	-	1

The following supplementary figures are of interest :—

The number of births notified in the District was 564, and, consequently, the percentage of registered births notified was 99.

The percentage of total births attended by midwives only was 47.

The percentage of total births attended by doctors only was 34.

The percentage of total births attended by both was 19.

The percentage of still-births was 4.

TABLE VIII.—WESTERN DISTRICT.
HOME VISITATION.

PARTICULARS.	VALE OF LEVEN AREA.		REST OF DISTRICT.	
Number of Births intimated to Health Visitor during year, - - - - -	416		148	
Number of First Visits— - - - -		417		183
To Children under 1 year, -	394		136	
To Children from 1 to 5 years,	—		19	
To Expectant Mothers, - -	23		28	
Number of Re-visits— - - - -		3009		2014
To Children under 1 year, -	1136		528	
To Children from 1 to 5 years,	1859		1460	
To Expectant Mothers, - -	14		26	
Number of Visits to Midwives, - - -		76		28
Number of Visits of Special Inquiry, - -		68		22
Number of Visits to Tuberculous Cases, - -		79		66
TOTAL VISITS, - - - - -		3649		2313
Feeding of Children of 6 months—				
Breast Fed, - - -	155		101	
Partially Breast Fed,	52		9	
Artificially Fed, -	121		43	
Number of Infants born prematurely, - -	24		14	
Number of Infants born at full time, - -	369		122	
Expectant Mothers who consulted doctors or ante-natal clinics, - - - - -	15		8	

TABLE IX.—WESTERN DISTRICT.
MATERNITY SERVICE AND CHILD WELFARE SCHEME.
CLINICS.

PARTICULARS.	ALEXANDRIA.
Number of Clinics held—	
With Health Visitors only in attendance, - - -	50
With Doctor and Health Visitors in attendance, -	49
Ante-natal Consultations—	
Total Attendances, - - -	57
First Attendances, - - -	32
Referred to Ante-natal Wards, Maternity Hospital, -	—
Referred to family doctor, - - - - -	—
Treated at Clinic, - - - - -	25
Post-natal or other Consultations, - - - - -	41
Child Welfare Consultations—	
Total Attendances—Under 1 year, - - - - -	527
Over 1 year, - - - - -	451
First Attendances—Under 1 year, - - - - -	182
Over 1 year, - - - - -	119
Attendances in connection with Milk Applications, - - -	676
DISEASES RECORDED ON CHILD WELFARE CLINIC CARDS—	
<i>General Conditions—</i>	<i>Alimentary Diseases—</i>
General Debility, - - - - 5	Diarrhoea, - - - - 13
Anæmia, - - - - 4	Other Intestinal Conditions, - 17
Rickets, - - - - 3	Hernia, - - - - 8
Prematurity, - - - - 1	Stomatitis, - - - - 8
Syphilis, - - - - 1	Conditions relating to feeding, 12
Eye Conditions, - - - - 11	Malnutrition, - - - - 2
<i>Throat, Nose, and Ear Conditions—</i>	Prolapse of bowel, - - - - 2
Sore Throat, - - - - 6	Thread worms, - - - - 2
Tonsils and Adenoids, - - 18	Conditions affecting Umbilical
Snuffles, - - - - 4	Cord, - - - - 5
Other Nasal Conditions, - 4	Phimosis, - - - - 13
Ear Diseases, - - - - 7	Bladder Conditions, - - - - 1
Tongue-tie, - - - - 5	
Dental Conditions, - - - - 7	<i>Skin Diseases—</i>
Mental Conditions, - - - - 1	Septic Sores, - - - - 4
Tuberculous Conditions, - - 3	Eczema, - - - - 8
Enlarged Glands, - - - - 3	Hæmatoma, - - - - 1
Respiratory Diseases, - - - 24	Other skin diseases, - - - 24
Congenital Malformations, - - 3	
Paralysis, - - - - 1	No special cause, - - - - 12
Chorea, - - - - 1	Attendances for weighing only, 56
The above are the diseases, &c., noted at first attendances, and the total agrees with the figure shown in the table above.	

TABLE X.—WESTERN DISTRICT.
MATERNITY SERVICE AND CHILD WELFARE.
CAUSES OF DEATH—CHILDREN UNDER ONE YEAR.
YEAR 1924.

CAUSE OF DEATH.	Under 1 Week.	1, and under 2 Weeks.	2, and under 3 Weeks.	3, and under 4 Weeks.	Total under 4 Weeks.	4 Weeks, and under 3 Months.	3, and under 6 Months.	6, and under 9 Months.	9, and under 12 Months.	Total Deaths under 1 Year.
Smallpox, - - -	...	...	...	...	...	...	...	...	...	...
Chickenpox, - - -	...	...	...	...	...	...	...	...	...	...
Measles, - - -	...	...	...	...	...	...	...	...	1	1
Scarlet Fever, - - -	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	...	...	...	...	...	1	...	...	...	1
Diphtheria and Croup, -	...	...	...	...	...	...	...	...	...	...
Erysipelas, - - -	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis, -	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis, -	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Dis- eases, - - - -	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuber- culous), - - -	...	...	...	...	...	...	...	...	...	...
Hydrocephalus, - - -	...	...	...	...	...	...	...	...	...	...
Convulsions, - - -	1	...	...	...	1	...	1	2	...	4
Pneumonia (all forms), -	1	1	1	...	3	2	2	2	1	10
Bronchitis, - - -	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis, -	...	...	...	...	...	1	...	...	1	2
Other Digestive Diseases, -	1	...	...	...	1	...	...	...	...	1
Congenital Malforma- tions, - - - -	...	...	...	...	...	1	...	...	...	1
Congenital Heart, - - -	1	...	...	...	1	...	...	...	...	1
Premature Birth, - - -	7	...	...	1	8	1	...	...	...	9
Atrophy, Debility, and Marasmus, - - -	3	1	1	2	7	1	1	...	...	9
Atelectasis, - - -	...	...	...	...	...	...	...	...	...	...
Injury at Birth, - - -	1	...	...	...	1	...	...	...	...	1
Suffocation, overlaying, -	1	...	1	...	2	...	...	...	...	2
Syphilis, - - -	...	...	...	...	...	...	...	...	...	...
Rickets, - - -	...	...	...	...	...	...	...	...	...	...
All other causes, - - -	1	...	...	...	1	...	...	...	...	1
Total, - - -	17	2	3	3	25	7	4	4	3	43

HEALTH AND BABY WEEK.

In connection with the Scheme of Maternity Service and Child Welfare, a Health and Baby Week was held in the Vale of Leven at the beginning of October.

By arrangement with the Education Authority, short talks on health were given in each of the schools in this area every day during the week, while the clergymen in the area co-operated by referring to the question of health from their pulpits. On Tuesday, 7th, and Wednesday, 8th October, cinematograph films were shown in Renton and Alexandria. The display in Renton took place in the Public Hall in the evening, while in Alexandria the Palace Theatre was kindly lent for the purpose by the management. Excellent attendances resulted. On Thursday, 9th October, Dr. Johnstone, Assistant County Medical Officer, gave a lecture on "Health and Disease" in the Public Hall, Renton; while on the following day Dr. Scott, of Alexandria, gave an address on "Tuberculosis: Its Cause, Treatment, and Prevention," in the Co-operative Hall, Alexandria. At both of these lectures there was a good attendance.

It is hoped that this propaganda work will impress upon the public the necessity for co-operation with the Authorities in all matters relating to Public Health. A great improvement could be effected, for instance, in the cleanliness of the District if the residents exercised a little care in keeping back courts, common stairs, and passages in a more sanitary condition. What is every one's duty often becomes nobody's duty, and I am often surprised to find the small amount of interest taken in conditions in close proximity to dwelling-houses by the inhabitants themselves. A question usually elicits the fact that some one else, often the Sanitary Inspector, is expected to arrive on the scene and have the place cleaned up.

HOUSING.

After the first development of the Housing Scheme under the Western District was completed, as detailed on page 34 of last year's Annual Report, the second development was commenced.

In Alexandria the second development consisted of 26 houses, 16 of which were of the three-apartment type and 10 of four apartments. These houses were all completed and occupied by November, 1924.

Under the Committee's scheme for the improvement of insanitary areas in Alexandria, a start was made on the 112 houses at the Union Street site, Bonhill.

As regards the second development of the Housing Scheme in Renton, which followed on the completion of the houses referred to in last year's Annual Report, 24 houses are in the course of erection. These consist of 12 houses of three apartments and 12 of two apartments.

In addition to the foregoing, there are being built in Renton 8 houses of two apartments under the Western District Committee's Scheme for the Improvement of Slum Areas. These houses, however, were not ready for occupancy by the end of the year. It was further arranged to commence the remaining 50 houses for the Renton Scheme as soon after 15th May, 1925, as possible.

TABLE XI.—WESTERN DISTRICT.
 CASES OF INFECTIOUS DISEASE COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER
 DURING THE YEAR 1924.

PARISH.	Enteric Fever.	Scarlet Fever.	Diphtheria and Mem. Croup.	Erysipelas.	Dysentery.	Primary Pneumonia.	Influenza. Pneumonia.	Ophthalmia Neonatorum.	Pulmonary Tuberculosis.	Other Tuberculosis.	Totals.
Arrochar, -	...	...	...	...	...	...	...	...	1	1	2
Bonhill, -	...	240	5	12	...	8	36	3	26	34	364
Cardross, -	...	60	5	5	...	8	19	...	5	12	114
Dunbarton, -	...	...	...	...	...	...	1	...	...	...	1
Kilmarnock, -	...	7	...	...	...	...	...	...	...	2	9
Luss, -	...	...	...	1	...	...	...	...	1	1	3
Rosneath, -	...	10	...	...	...	...	...	...	...	...	10
Row, -	...	4	1	1	2	...	...	1	3	...	12
Totals, -	...	321	11	19	2	16	56	4	36	50	515
Removed to Hospital, -	...	288	9	1	1	...	...	...	15	5	319
Percentage removed to Hospital, -	...	89.7	81.8	5.2	50.0	...	...	...	41.6	10.0	61.9

TABLE XII.—WESTERN DISTRICT.
VACCINATION.—CONSCIENTIOUS OBJECTIONS, 1924.

PARISH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Dunbarton,	...	...	...	...	...	...	...	...	...	...	...	...	...
Cardross, -	...	...	...	...	...	...	...	1	...	...	...	...	1
Bonhill, -	15	16	12	16	14	17	7	19	17	14	16	14	177
Kilmarnock,	...	...	...	...	...	...	1	...	...	...	...	...	1
Row, -	2	...	1	1	1	...	...	...	...	...	...	...	5
Rosneath, -	1	...	1	...	...	1	...	1	...	...	...	...	4
Luss, -	...	...	...	...	...	...	...	...	1	...	...	2	3
Arrochar, -	1	...	...	...	...	...	...	...	...	1	2	...	4
Renton, -	6	9	4	10	7	...	5	4	5	4	4	11	69
Total, -	25	25	18	27	22	18	13	25	23	19	22	27	264

TABLE XIV.—COUNTY OF DUNBARTON—WESTERN DISTRICT—STATEMENT SUPPLIED BY THE REGISTRAR-GENERAL GIVING VITAL STATISTICS FOR 1924.

NUMBERS.		RATE PER 1000 OF ESTIMATED POPULATION.	
Births	(Corrected for Transfers), -	Birth Rate (Corrected for Transfers), -	19.4
Do. Illegitimate (do.), -	-	Marriage Rate (Uncorrected), -	5.4
Marriages (Uncorrected), -	-	Death Rate—All Causes (do.), -	11.1
Deaths (do.), -	-	Do. do. (Corrected for Transfers), -	12.8
Do. (Transferred Out), -	-	Do. do. (Corrected for Transfers and adjusted for Age and Sex Distribution), -	12.8
Do. (Transferred In), -	-	Do. — Tuberculosis, Respiratory System (Corrected for Transfers), -	0.50
Do. (Corrected), both Sexes, -	-	Do. — All Tuberculosis (Corrected for Transfers), -	0.67
		Do. — Principal Epidemic Diseases (Corrected for Transfers), -	0.57

Population — Census 1921, 30,340 ; estimated to middle of 1924, 29,872.

Infantile Mortality Rate (Deaths of Children of under One Year per 1000 Births), corrected—74.

Illegitimate Rate (Illegitimate Births per 100 Total Births), corrected for Transcripts—6.6

TABLE XV.—COUNTY OF DUNBARTON.—WESTERN DISTRICT.—STATEMENT OF CAUSES OF DEATH
(Corrected for Transfers) FOR 1924, SUPPLIED BY THE REGISTRAR-GENERAL.

CAUSES OF DEATH.	ALL AGES.			AGE.											
	Total.	M.	F.	—1	1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85 and over.
Enteric Fever,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles,	3	1	2	1	2	...	...	...	...	...	...	...	...	...	...
Scarlet Fever,	9	8	1	...	7	2	...	...	...	...	...	...	...	...	...
Whooping-cough,	4	1	3	1	3	...	...	...	...	...	...	...	...	...	...
Diphtheria,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza,	12	9	3	...	2	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica,	2	2	...	...	1	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases,	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Respiratory System),	15	8	7	...	...	...	...	6	4	1	3	...	1	...	...
Tuberculous Meningitis,	3	1	2	...	3	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Abdominal),	1	...	1	...	...	1	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases,	1	1	...	...	...	...	...	1	...	...	...	...	...	...	...
Malignant Tumours,	47	19	28	...	...	...	...	1	...	...	7	11	16	7	1
Rheumatic Fever,	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis,	2	1	1	...	1	...	...	...	...	...	...	...	...	...	...
Apoplexy,	34	15	19	...	...	...	...	...	...	...	...	...	...	...	...
Heart Disease,	47	17	30	...	...	2	...	2	1	3	5	10	11	8	3
Disease of Arteries,	4	2	2	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis,	24	8	16	1	1	...	...	...	...	...	...	...	...	...	...
Pneumonia,	36	17	19	7	16	...	...	...	...	...	...	...	...	...	...
Other Diseases of Respiratory System,	8	3	5	2	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis (under 2 years),	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...
Appendicitis,	3	2	1	...	1	...	...	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant),	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis (Acute and Chronic),	11	4	7	...	...	...	...	...	...	2	1	...	...	2	...
Puerperal Sepsis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Diseases and Accidents of Pregnancy and Parturition,	3	...	3	...	...	...	...	1	1	1	...	...	...	...	...
Diseases of Early Infancy and Malformation,	22	15	7	22	...	...	...	...	...	...	...	...	...	...	...
Suicide,	3	2	1	...	...	...	...	...	...	...	...	...	...	...	...
Other Violent Deaths,	10	5	5	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases,	63	31	32	6	4	1	...	...	...	...	...	...	...	...	...
Ill-defined or Unknown,	9	5	4	1	1	2	...	...	...	...	...	...	...	...	...
All Causes,	383	180	203	43	46	10	3	13	9	22	33	54	72	55	23

FACTORIES AND WORKSHOPS.

Western District.—The total number of inspections made during the year was 206. Six defects were found, all of which were remedied. No lists of outworkers were received, and there was nothing which required to be reported to H.M. Inspector of Factories. The total number of workshops at the end of the year was 98.

TABLE XVI.—WORKSHOPS (WESTERN DISTRICT).

	Total Number.	Number of Workrooms.	Workshops employing both sexes.	Workshops employing Males only.	Workshops employing Females only.	Total Employees.	Women Employees.	Young Persons and Children.
Bakers (retail), - -	7	7	1	6	...	20	1	4
Dressmakers, } - -	17	17	...	...	17	39	37	2
Milliners, } - -								
Tailors, - - -	9	10	1	8	...	13	1	...
Joiners, Cartwrights, &c., - - -	20	20	...	20	...	35	...	2
Plumbers, Tinsmiths, -	12	12	...	12	...	23	...	4
Blacksmiths, - -	11	11	...	11	...	22	...	2
Shoemakers, - -	10	10	...	10	..	11	...	...
Saddlers, - - -	1	1	...	1	...	1	...	...
Laundrykeepers, - -	2	2	...	...	2	5	5	...
Cyclemakers, - -	2	2	...	2	...	2	...	...
Other Trades, - -	7	7	1	6	...	7	1	2
Totals, - - -	98	99	3	76	19	178	45	16

EASTERN DISTRICT.

VITAL STATISTICS.

BIRTHS.—The number of births allocated to the Eastern District in 1924, after correction for transfers, was 436, as against 458 in 1923. The birth-rate for the District was 18.8 per 1000 of the population, as against 19.4 in 1923. This is the lowest recorded birth-rate.

DEATHS.—The number of deaths of persons resident in or belonging to the Eastern District in the year 1924 was 307, as against 271 in 1923. This produces a death-rate of 13.2 per 1000 of the population, as against 11.5 last year.

The principal causes of death were—Apoplexy 33, Cancer 29, Heart Disease 26, Pneumonia 23, Tuberculosis 22, and Influenza 18. There were 11 deaths from Whooping Cough during the year. Deaths from Pulmonary Tuberculosis numbered 12; this produces a death-rate of .52 per 1000 of the population, as against .85 last year. The number of deaths from Non-Pulmonary Tuberculosis was 10, which is equivalent to a death-rate of .43 per 1000 of the population, and is practically the same as last year.

POPULATION.—The Registrar-General's estimate of the population as at the middle of 1924 was 23,242, a decrease of 382 when compared with last year's estimate. The figure prepared in this office shows a considerable increase, due to the increase in the number of occupied houses. The estimate is 24,678, and the details are set forth in Table II.

INFECTIOUS DISEASE.

The number of cases of infectious disease notified during 1924 was 267, as against 326 in 1923.

Scarlet Fever was more prevalent than in previous years, especially in Cumbernauld, where 40 cases occurred. The cases were for the most part mild. There were fewer diphtheria cases, 28 as against 34 in 1923.

Four patients were notified as suffering from Enteric Fever, two in West Kilpatrick Parish and two in Kirkintilloch Parish. The West Kilpatrick cases had no connection with each other, one occurring in June and the other in November. No definite infecting source could be detected in either case, although the wife of one of the patients was stated to have had Enteric Fever a number of years previously. The Kirkintilloch cases were a brother and sister residing in a mining row. The sister, aged 14, took ill in September; the brother, aged 19, developed the disease in November while the sister was still in hospital. No source of infection could be found, and no further cases occurred.

Thirty-seven patients (19 males and 18 females) were notified as suffering from Pulmonary Tuberculosis during the year, and by the end of the year thirteen of them had died, three had left the District, and five were still under observation as doubtful. Thirteen cases were sent to sanatoria for treatment, and eight were given domiciliary treatment.

Twenty-nine cases of Non-Pulmonary Tuberculosis were notified during 1924, and by 31st December three had died, two had left the District, and three were still under observation. Three cases were sent to institutions for treatment, and six received domiciliary treatment.

TUBERCULOSIS.

The following memorandum was prepared on the diagnosis and treatment of Tuberculosis, and was considered by the Eastern and Western District Committees. My reason for including it in its present place is to indicate the more recent suggestions in connection with the County Schemes.

MEMORANDUM ON ADDITIONAL FACILITIES FOR DIAGNOSIS AND TREATMENT OF PULMONARY AND NON-PULMONARY TUBERCULOSIS IN THE EASTERN AND WESTERN DISTRICTS OF THE COUNTY.

SANATORIUM ACCOMMODATION—PRESENT ARRANGEMENTS.—The present would appear to be an appropriate time to review the existing arrangements for Sanatorium Treatment, particularly in view of the very heavy cost to the community of having their

patients treated at existing institutions outwith their control. These institutions are—

Within the County—Dumbarton Joint Hospital.
Helensburgh Fever Hospital.
Lanfine Home, Kirkintilloch.

Outwith the County—Bridge of Weir Sanatorium.
Manor Valley Sanatorium, Peebles.
Hairmyres Farm Colony.
Biggart Memorial Home, Prestwick.
Strathblane Home.
Dumbarton Combination Hospital.

COST.—The cost of such treatment is, roughly, £4800 per year (Western District, £3000; Eastern District, £1800), and, as several of the institutions cannot but be considered unsatisfactory for the type of case which—for lack of any alternative—it is necessary to send to them, the full value for the large amount expended cannot be obtained. Furthermore, the delay of one, or even two, months, which is quite commonly experienced before a suitable bed is obtained, often makes all the difference between a good and a bad result from institutional treatment. Again, it is at present almost impossible to find accommodation for certain of the more severe cases of Non-Pulmonary Tuberculosis, and, as such cases are often very amenable to proper treatment, this is a very serious shortcoming of the present arrangement.

PROPOSED TUBERCULOSIS INSTITUTION.—It will be seen that large sums of money are being spent on institutional treatment; that full value is not always obtained therefor; that in some cases delay means unnecessary invalidism, with consequent further expenditure; and that certain favourable cases cannot be dealt with at all. The only real and lasting solution of this difficult and complex problem is the provision of a Tuberculosis Institution controlled in whole or in part by the Local Authority. This institution would require to be of sufficient size to deal with all cases requiring treatment, both Pulmonary and Non-Pulmonary (this would mean for the County area roughly 30 beds for Pulmonary cases and 15 beds for Non-Pulmonary cases), or, if it were to be provided in combination with other authorities, a sufficient number of beds would have to be set apart exclusively for the Local Authority's patients.

The cost of such an institution depends on too many factors to allow of its detailed discussion here, but there seems no doubt that considerable economy would result, and that a much greater degree of efficiency could be obtained.

Taking all these things into consideration, I would ask the Committees to consider the desirability of arranging for the provision of a Tuberculosis Institution at South Hutcheson or elsewhere within the County, either by themselves or jointly with other authorities.

DISPENSARIES.—In a report presented to the County Council and District Committees in 1912 it was suggested that in certain places arrangements should be made for the equipping of "Dispensaries," and it was then pointed out that "dispensary" did not necessarily mean a place where medicines would be kept and distributed, but rather "consulting rooms" for the Tuberculosis Officer in order to facilitate his work in any populous area.

In 1912 the County, including Burghs, was considered as a whole, but now the Landward Areas alone need to be considered. I would therefore suggest that rooms of the nature indicated should be provided in Alexandria and Duntocher. The accommodation necessary would merely be a waiting room and a consulting room. There does not appear to be any valid objection to the rooms used for the Infant Welfare Clinic being utilised for this purpose, providing these rooms were suitable and proper equipment installed. I could not recommend that the existing rooms in Alexandria and Duntocher should be used.

The extra equipment required would be a weighing machine, a couch, chairs, a cupboard, screens, card index boxes, and other office material.

These "Dispensaries" would be open one or two days a week for a stated time. The Tuberculosis Officer would attend along with the Health Visitor, and Tuberculosis patients who had already been seen in their homes would there be examined, given advice, and, where necessary, treatment.

Apart from equipment, the only extra cost would be that of rent of the premises.

NON-PULMONARY TUBERCULOSIS.—Very little has been done for these patients, who are mostly children. The general practitioner, naturally, does not care to deal with them, as their course is long and tedious, and the cost of dressings is great. Where possible they are sent to an infirmary, but very often they are treated at home for a time, and then, as little improvement follows, the treatment is discontinued. In reality they are often very hopeful cases if dealt with energetically and systematically.

If a consulting room were provided it might be part of the Tuberculosis Officer's duties to carry on the treatment com-

menced by the general practitioner, or, where no doctor is in attendance, to commence treatment, and power should be given to provide such drugs, dressings, remedial appliances, and such material as may be required for the up-to-date treatment of cases presenting themselves.

(It should here be pointed out that dressings are already supplied when requisitioned by a general practitioner.)

DENTAL TREATMENT.—Shortly after the appointment of the Assistant Tuberculosis Officer, in 1922, it was arranged that Dental Treatment should be given to patients before their admission to a sanatorium, where such treatment was considered necessary. It has not been possible to take very much advantage of this arrangement, chiefly owing to the fact that, as sanatorium accommodation is provided by outside authorities, there is an element of uncertainty as to how long a patient will have to wait before a bed is secured for him. Very short notice is given when a vacant bed occurs, and, if it is not filled on the day mentioned, the opportunity is gone, and consequently in many cases Dental Treatment would have to be abandoned before completion.

It is now suggested that Dental Treatment should be given in all cases where the Tuberculosis Officer considers that the condition of the teeth and gums is prejudicial to the patient's chance of recovery, always subject to the annual expenditure not exceeding £50 for each District.

PROVISION OF SHELTERS, BEDS, AND BEDDING.—From time to time applications are received from patients for the loan of a shelter with bed and bedding, because this provision is made in other areas, and it is now suggested that power should be given to provide such.

The only difficulty here is the storage of such material when not in use, and arrangements for this would also have to be made.

BACTERIOLOGICAL EXAMINATIONS.—When the office of the Medical Officer was removed to Dumbarton it was kept in mind that a considerable sum annually is spent on the examination of specimens of sputum, &c., and room was left for the provision of a small laboratory. There is no doubt whatever that in the long run such a provision would cheapen the annual cost of bacteriological examinations. If the Committees would consider this, an estimate could be obtained for the installation of the necessary appliances. The most expensive item would be a microscope, which would cost about £50.

X-RAY PHOTOGRAPHS.—In all up-to-date arrangements for the diagnosis of Tuberculosis X-Ray photography plays an important part. Had there been a sanatorium in the County, an equipment for this work would have been provided. I would suggest that power should be given to the Tuberculosis Officer to arrange with a private individual or a Local Authority owning such an equipment for an X-Ray photograph and report, where such appears to be necessary.

BOARDING OUT OF CHILDREN, &c.—From time to time cases occur where the mother is unable to accept sanatorium treatment because there is no one to look after her children. In such a case it would be of great benefit if power could be given to the Tuberculosis Officer to arrange for the boarding out of such children or for the provision of a "home help" to look after the house during her absence.

T. LAUDER THOMSON.

88 COLLEGE STREET,
DUMBARTON, 28TH APRIL, 1924.

As a result of the deliberations of the Committee, the question of Sanatorium Accommodation was referred to the Joint Sanatorium Board; the sections relating to the treatment of Non-Pulmonary Tuberculosis, Dental Treatment, the Provision of Shelters, and the arrangements for taking X-Ray Photographs were approved of; while the question of the Provision of Dispensaries and the Bacteriological Laboratory were provisionally agreed to, but further reports are to be submitted. The question of the Boarding Out of Children, although approved by the Committee, was not approved by the Board of Health, and I would merely say here that it is a pity that the Board have no power to approve of a suggestion of this kind.

HOSPITAL ACCOMMODATION.

DUNTOCHER JOINT HOSPITAL.—Nothing occurred during the year to impair the efficiency of this hospital, and at no time was the hospital accommodation over-taxed. Difficulties arise more frequently nowadays regarding admission of patients on account of the diversity of cases dealt with, but, by adjusting the internal arrangements, it was found always to be possible to meet the needs of the District.

LENNOX JOINT HOSPITAL.—This hospital requires no special comment. The arrangements for the admission, treatment, and

discharge of patients are satisfactory, and the disinfectors and ambulance call for no remarks. The question of accommodation for such diseases as Measles, Whooping Cough, Pneumonia, &c., is one which is receiving attention.

WATER SUPPLY.

No complaints regarding the public water supplies were received during the year. A complaint was, however, received regarding the supply to the houses on the Stirling Road, Dumbarton. These houses have a private supply, and this, for some reason, gave out during the summer. When the alternative supply, which comes from the Burgh of Dumbarton mains, was turned on, the alteration in the direction of flow stirred up some sediment in the pipes, and as a result the houses near the end of the pipe suffered until this material was all dislodged.

The negotiations for the purchase of the Old Kilpatrick Water Supply were not brought to a conclusion, but it is hoped that before long a satisfactory arrangement may be made.

The Water Supply to the village of Garscadden had the serious attention of the Committee during the year. This supply, which is mainly from old workings, is now inadequate in summer weather, nor is it chemically satisfactory. The difficulty is that there is no further supply available. The analyses are set out in Table XXIV.

DRAINAGE AND SCAVENGING.

The question of Bearsden Drainage was constantly before the Committee during the year, and a comprehensive scheme was considered for the adjoining Districts, including Knightswood and Westerton.

The Scavenging in the Eastern District Special Districts was efficiently carried out.

MATERNITY SERVICE AND CHILD WELFARE.

The details asked for by the Board of Health are to a large extent embodied in existing Tables in this Report, in the additional Tables Nos. XVI., XVII., and XVIII., or in the Midwives' Report. The following information, however, is additional:—

SPECIAL TREATMENT CENTRES.—Owing to the fact that there are no Special Treatment Centres owned by the Local Author-

ity, arrangements were made for the treatment of children under five years of age at all the Education Authority's centres. During 1924 one child was sent to a Dental Clinic, while two other cases were dealt with; one of these was a case of enlarged tonsils and adenoids, and the other of middle ear disease.

FOOD AND MILK.—As regards the supply of Food and Milk, 72 applications were received. These all related to children, and 50 of them were granted. All the cases granted were medically examined and certified as being financially necessitous. The total cost of this service was £46 2s. 6½d., and, as all the cases were in necessitous circumstances, no portion of this sum was recovered. No milk substitutes were supplied during the year.

MEASLES.—There is no notification of Measles in the District. During the year nine children died of Measles. In one case the disease was complicated with Whooping Cough; six of the cases developed Broncho-Pneumonia, which was the fatal complication; one other case had Bronchitis; while in the last case no complication was noted. Eleven cases of Measles, all suffering from Broncho-Pneumonia, were admitted to hospital.

WHOOPING COUGH.—Eleven children died from this disease during the year. In two instances no complications appear to have arisen, while one fatal case was associated with Measles. One child suffered from Convulsions, one from Gastric Catarrh, four from Broncho-Pneumonia, and two from Bronchitis. There were no cases removed to hospital.

MATERNITY HOSPITALS OR HOMES.—All persons requiring treatment are sent to the Glasgow Royal Maternity and Women's Hospital. During 1924 four women were treated in the Ante-Natal Wards of this Hospital. No information is supplied to us regarding the results of this treatment. A further number of women are admitted to the hospital in labour, and from the notifications received there appear to have been eight cases dealt with.

HOMES AND HOSPITALS.—There are no homes for unmarried mothers, hospitals for sick children, or convalescent homes in the District to which patients may be sent, but two children were sent to Prestwick, one of them remaining for three months and the other, who was admitted in August, being still in residence at the end of the year.

ASSISTANCE AT CONFINEMENTS.—The following provision is not specially referred to in the circular from the Board of Health, *i.e.*, assistance at confinements other than is provided under

the Midwives (Scotland) Act, 1915. During the year eight applications were received; four of these were granted and four were refused.

The scheme of Maternity Service and Child Welfare, which is referred to on page 40, relating to the Western District, is also applicable to the Eastern District. The only place in which special Clinic accommodation will probably have to be considered is Duntocher, as no enlargement in the scope of the scheme can be effected without special accommodation. In Old Kilpatrick the numbers attending the Clinic are so small that at present expenditure on the provision of more suitable accommodation is hardly warranted.

MIDWIVES (SCOTLAND) ACT, 1915.

There are 14 midwives practising in the District; only 2 of these are qualified by examination. The others were in practice when the Midwives (Scotland) Act passed, and thus were automatically added to the Midwives' Roll. The following gives the details of the Annual Report on the working of the Act during 1924 as required by the Central Midwives' Board:—

REPORT.

BIRTHS IN DISTRICT:—

Total number of births registered in 1924,	- - -	414
Actual number of births attended by midwives during 1924,	- - - - -	143
Total number of deaths of newly-born children (within ten days) during 1924,	- - - - -	11
Actual number of deaths of new-born children (within ten days) occurring in the practice of midwives during 1924,	- - - - -	Nil.
Actual number of cases not attended by a doctor or midwife during 1924,	- - - - -	Births, 3 Deaths, Nil.

In addition to the above, 14 notifications were received of births in institutions outside the area. Two of these were dead-born.

CASES OF OPHTHALMIA NEONATORUM:—

Total number of cases during 1924,	- - -	2
Actual number of cases occurring in the practice of midwives during 1924,	- - - - -	1
Actual number of cases occurring where confinement not attended by a doctor or midwife during 1924,	- - -	Nil.

CASES OF PUERPERAL SEPSIS :—

Two cases were notified in the District during 1924. One death occurred from this cause.

CASES OF STILL-BIRTH (DEAD-BORN) :—

Total number of cases during 1924,	-	-	-	-	19
Actual number of cases occurring in the practice of midwives during 1924,	-	-	-	-	5

CASES OF EMERGENCY :—

In 20 instances midwives requiring the assistance of a medical practitioner sent in the statutory forms.

The emergencies were as follows:—

Weakness of mother,	-	-	-	-	1
Flat pelvis,	-	-	-	-	1
Delayed labour,	-	-	-	-	5
Breech presentation,	-	-	-	-	1
Occipito-posterior,	-	-	-	-	2
Face presentation,	-	-	-	-	1
Prolapse of cord,	-	-	-	-	1
Retained placenta,	-	-	-	-	4
Stitching of perineum,	-	-	-	-	2
Rise in temperature,	-	-	-	-	1
Discharge from baby's eyes,	-	-	-	-	1

ADMINISTRATION :—

There has been no change in the administration of the Act since the last report.

NOTIFICATIONS :—

Two statutory forms were received. These referred to still-births occurring in the practice of midwives.

The following supplementary figures are of interest:—

The number of births notified in the District was 429,* and, consequently, the percentage of registered births notified was 100

The percentage of total births attended by midwives only was 35.

The percentage of total births attended by doctors only was 56.

The percentage of total births attended by both was 9.

The percentage of still-births was 3.6.

* This figure includes 14 births which occurred in Institutions outside the District.

HOUSING.

The first development of the County Housing Scheme, as set forth on page 48 of last year's Report, was completed, and the houses were occupied during the year. The second development was commenced, consisting of 26 houses in Old Kilpatrick—16 of three apartments and 10 of four apartments; while in Duntocher the scheme consisted of 16 houses of three apartments and 6 of four apartments. Although these houses were started, they were not finished by the end of the year.

As regards the Clearance of Insanitary Areas Scheme referred to in last year's Report, no further progress had been made by the end of 1924. It is to be hoped that the provision of these houses will be hurried on as fast as possible.

I am indebted to the County Architect for the figures mentioned above, and also for the paragraph dealing with Housing in the Western District.

TABLE XVII.—EASTERN DISTRICT.
MATERNITY SERVICE AND CHILD WELFARE SCHEME.
HOME VISITATION.

PARTICULARS.	EAST AND WEST KILPATRICK PARISHES.		CUMBERNAULD AND KIRKIN- TILLOCH PARISHES.	
Number of Births intimated to the Health Visitor during year, - - - - -	204		225	
Number of First Visits— - - - -		220		256
To Children under 1 year, -	178		216	
To Children from 1 to 5 years,	22		20	
To Expectant Mothers, - -	20		20	
Number of Re-visits— - - - -		2722		3224
To Children under 1 year, -	1391		2188	
To Children from 1 to 5 years,	1300		916	
To Expectant Mothers, - -	31		120	
Number of Visits to Midwives, - - - -		75		83
Number of Visits of Special Inquiry, - -		14		12
Number of Visits to Tuberculous Cases, - -		—		310
TOTAL VISITS, - - - - -	3031		3885	
Feeding of Children of 6 months—				
Breast Fed, - - -	85		124	
Partially Breast Fed,	40		39	
Artificially Fed, -	50		23	
Number of Infants born prematurely, - -	8		7	
Number of Infants born at full time, - - -	170		205	
Expectant Mothers who consulted doctors or ante-natal clinics, - - - - -	4		4	

TABLE XVIII.—EASTERN DISTRICT.
MATERNITY SERVICE AND CHILD WELFARE SCHEME.
CLINICS.

PARTICULARS.	DUNTOCHER.	KILPATRICK.	TWECHAR.
Number of Clinics held—			
With Health Visitor only in attendance, -	48	52	—
With Doctor and Health Visitor in attendance, -	52	52	46
Ante-natal Consultations—Total attendances, -	24	3	—
First attendances, -	13	1	—
Referred to Ante-natal Ward, Maternity Hospital, -	2	1	—
Referred to family doctor, - - - - -	1	—	—
Treated at Clinic, - - - - -	10	—	—
Post-natal or other Consultations, - - - -	134	21	2
Child Welfare Consultations—			
Total attendances—Under 1 year, - - -	125	24	215
Over 1 year, - - -	627	119	26
First attendances—Under 1 year, - - -	62	14	36
Over 1 year, - - -	27	8	6
Attendances in connection with Milk Applications, -	87	18	18
DISEASES RECORDED ON CHILD WELFARE CLINIC CARDS—			
DUNTOCHER CLINIC.	DUNTOCHER CLINIC—contd.	OLD KILPATRICK CLINIC.	
<i>General Conditions—</i>	Hydrocele, - - - 1	General Debility, - - 1	
General Debility, - - 1	Phimosis, - - - 1	Discharging Ear, - - 1	
Rickets, - - - 2	<i>Skin Diseases—</i>	Glands in Neck, - - 2	
Syphilis, - - - 4	Impetigo, - - - 2	Bronchial Catarrh, - 3	
Marasmus, - - - 8	Chickenpox, - - - 1	<i>Alimentary Diseases—</i>	
<i>Eye Conditions—</i>	Whooping Cough - - 3	Constipation, - - 1	
Conjunctivitis, - - 5	No disease specified, - 28	Dyspepsia, - - 1	
Corneal Ulcers, - - 1		Vomiting, - - 1	
<i>Throat, Nose, and Ear Con-</i>		<i>Skin Diseases—</i>	
ditions—		Erythema, - - 1	
Adenoids, - - - 1		Eczema, - - 1	
Tonsillitis, - - - 1		Phimosis, - - 1	
Coryza, - - - 2		Incontinence of Urine, - 1	
Otorrhœa, - - - 2		Other diseases, - - 2	
Tongue Tie, - - - 1		No disease specified, - 6	
Tuberculous Conditions, - 1	TWECHAR CLINIC.		
Respiratory Diseases, - 14	General Debility, - - 6		
<i>Alimentary Diseases—</i>	Rickets, - - - 2		
Diarrhœa, - - - 2	Eczema, - - - 1		
Enteritis, - - - 1	Septic Spots, - - - 1		
Hernia, - - - 1	Gastritis, - - - 2		
Improper Feeding, - 4	Stomatitis, - - - 1		
Thread Worms, - - 2	Hydrocele, - - - 1		
	Abcess on Neck, - - 1		
	No disease specified, - 27		
The above are the diseases, &c., noted at first attendances, and the totals agree with the figures shown in the table above.			

TABLE XIX.—EASTERN DISTRICT.
MATERNITY SERVICE AND CHILD WELFARE.
CAUSES OF DEATH—CHILDREN UNDER ONE YEAR.
YEAR 1924.

CAUSE OF DEATH.	Under 1 Week.	1, and under 2 Weeks.	2, and under 3 Weeks.	3, and under 4 Weeks.	Total under 4 Weeks.	4 Weeks, and under 3 Months.	3 and under 6 Months.	6, and under 9 Months.	9, and under 12 Months.	Total Deaths under 1 Year.
Smallpox, - - -	...	...	...	...	...	...	...	...	...	...
Chickenpox, - - -	...	...	...	...	...	...	...	...	...	...
Measles, - - -	...	...	...	...	...	...	...	1	1	2
Scarlet Fever, - - -	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	...	...	...	1	1	1	...	2	2	6
Diphtheria and Croup, -	...	...	...	...	...	...	...	...	...	...
Erysipelas, - - -	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis,	...	...	...	...	...	1	...	...	...	1
Abdominal Tuberculosis,	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Dis- eases, - - -	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuber- culous), - - -	...	...	...	...	...	1	...	...	...	1
Hydrocephalus, - - -	...	...	...	...	...	...	...	...	...	...
Convulsions, - - -	...	...	1	...	1	...	1	...	...	2
Pneumonia (all forms), -	...	...	...	...	...	...	2	2	2	6
Bronchitis, - - -	...	...	1	...	1	1	...	1	...	3
Diarrhœa and Enteritis,	...	1	...	...	1	1	1	...	...	3
Other Digestive Diseases,	...	1	...	...	1	...	1	1	...	3
Congenital Heart, -	1	1	...	...	2	1	1	...	...	4
Congenital Malforma- tions, - - -	...	...	...	...	...	...	...	...	...	...
Premature Births, -	6	...	...	...	6	1	...	...	...	7
Atrophy, Debility, and Marasmus, - - -	1	1	...	1	3	1	2	...	...	6
Atelectasis, - - -	...	...	...	...	...	...	...	...	...	...
Injury at Birth, - -	...	...	...	...	...	...	...	...	...	...
Suffocation, overlaying,	...	...	...	...	...	...	...	...	...	...
Syphilis, - - -	...	...	...	...	...	...	...	...	...	...
Rickets, - - -	...	...	...	...	...	...	...	...	...	...
All other causes, - -	...	1	...	...	1	...	2	...	...	3
Total, - - -	8	5	2	2	17	8	10	7	5	47

TABLE XX.—EASTERN DISTRICT.

CASES OF INFECTIOUS DISEASE COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER DURING
THE YEAR 1924.

PARISH.	Enteric Fever.	Scarlet Fever.	Diphtheria and Mem. Croup.	Erysipelas.	Puerperal Fever.	Primary Pneumonia.	Influenza.	Ophthalmia Neonatorum.	Pulmonary Tuberculosis.	Other Tuberculosis.	Totals.
Cumbernauld, - - - - -	...	40	8	3	1	23	11	...	2	4	92
Kirkintilloch, - - - - -	2	8	7	7	...	8	1	1	15†	4†	53
East Kilpatrick, - - - - -	...	22	8	3	1	4	1	...	5	3	47
West Kilpatrick, - - - - -	2	13	5	9	...	7	5	1	15	18	75
Totals, - - - - -	4	83	28	22	2	42	18	2	37	29	267
Removed to Hospital, - - - - -	4	81*	26†	3	...	4	1	1	13	3	136
Percentage removed to Hospital, - - - - -	100	97·5	92·8	13·6	...	9·5	5·5	50	35·1	10·3	50·9

* Two of the cases of Scarlet Fever were taken to Ruchill Hospital, Glasgow.

† One of the cases of Diphtheria was a nurse in Duntochter Joint Hospital.

‡ Of the cases of Tuberculosis 11 pulmonary and 1 non-pulmonary were notified from Woodilee Mental Hospital (10 patients; 2 staff).

TABLE XXI.—EASTERN DISTRICT.

VACCINATION.—CONSCIENTIOUS OBJECTIONS, 1924.

PARISH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Cumbernauld, -	4	10	7	5	7	5	2	6	6	4	1	9	66
Kirkintilloch, -	1	2	1	4	3	2	1	1	4	2	5	...	26
East Kilpatrick, -	...	1	1	1	1	...	1	2	2	1	1	...	11
Milngavie (Landward), -	...	...	...	...	...	...	...	...	...	...	...	...	...
West Kilpatrick, -	9	4	6	4	6	3	2	2	4	2	...	2	44
Totals, -	14	17	15	14	17	10	6	11	16	9	7	11	147

TABLE XXII.—ADMISSIONS TO DUNTOCHER HOSPITAL, 1924.

AGE IN YEARS.	0-5		5-10		10-20		20-30		30-40		40-50		Over 50.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
<i>Scarlet Fever.</i>																
Recovered,	-	12*	5	11	9	7	1	2	...	...	...	1	...	1	27	27
Remaining,	-	...	2	2	1	1	...	2	...	...	...	...	...	...	4	7
<i>Enteric Fever.</i>																
Recovered,	-	1	...	...	1	...	2	...	...	...	1	...	...	...	5	...
<i>Diphtheria.</i>																
Recovered,	-	2	2	2	4	2	...	1	...	1	...	...	...	...	8	12
Remaining,	-	2	1	...	1	1	...	...	...	...	...	...	...	...	3	2
Died,	-	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...
<i>Erysipelas.</i>																
Recovered,	-	...	...	...	...	...	1	1	...	...	...	1	...	...	2	2
Remaining,	-	...	...	...	1	...	...	...	...	...	...	...	1	...	2	...
<i>Pneumonia.</i>																
Recovered,	-	1	...	...	1	...	2	...	...	...	...	...	...	...	4	4
Remaining,	-	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...
<i>Measles.</i>																
Recovered,	-	6	2	2	...	...	2	...	...	...	...	...	...	...	9	4
Remaining,	-	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...
<i>German Measles.</i>																
Recovered,	-	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
<i>Chickenpox.</i>																
Recovered,	-	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1
Totals,	-	26	17	11	18	18	8	6	...	1	2	2	2	1	67	56
																123

* One case observation Scarlet Fever did not develop the disease.

TABLE XXIV.—EASTERN DISTRICT.—WATER ANALYSES (IN GRAINS PER GALLON), 1924.

Date of Report.	WHERE TAKEN.	Mineral Matter.	Organic Matter.	Total Solids.	Nitrates.	Free Ammonia.	Albuminoid Ammonia.	Total Ammonia.	Temporary Hardness.	Permanent Hardness.	Total Hardness.	Colour (Loch Katrine Water = 10).	* Degree of Sewage Contamination.
1924.													
Mar. 21	Milton (stand pipe), -	6.60	.48	7.08	.05	.013	.009	.022	3.05	1.98	5.03	10	...
July 28	Garscadden Village— 4th Row, -	20.43	.65	21.08	.54	.018	.011	.029	10.94	6.16	17.10	...	1 to 42
" 28	Garscadden Village— 2nd Row, -	13.90	.28	14.18	.03	.003	.009	.012	8.89	3.15	12.04	...	...
Sept. 30	Garscadden Village— 4th Row, -	25.54	.60	26.14	.72	.004	.013	.017	10.63	8.80	19.43	...	1 to 35
" 30	Garscadden Village— 5th Row, dip well, -	19.70	.36	20.06	.38	.008	.007	.015	8.57	5.51	14.08	...	1 to 65
" 30	Garscadden Village— 2nd Row, -	15.82	.30	16.12	trace	.001	.007	.008	8.05	3.71	11.76	...	...
Oct. 10	Garscadden Village Tank (inlet on west side), -	24.81	.40	25.21	.35	.003	.008	.011	11.74	7.12	18.86	...	1 to 78
Nov. 5	West Forrest Farm (pro- posed supply), -	16.62	.50	17.12	.25	.005	.008	.013	5.24	7.82	13.06	...	1 to 110

* NOTE.—Messrs. Tatlock & Thomson's regular method of stating their opinion of a water as to sewage contamination is as follows:—"It may be regarded as being equal to a mixture of one part of average sewage with.....parts of pure water which had been filtered through earth till clear." The figures in the column marked * give the result according to this method.

TABLE XXV.—COUNTY OF DUNBARTON.—EASTERN DISTRICT.—STATEMENT SUPPLIED BY THE REGISTRAR-GENERAL GIVING VITAL STATISTICS FOR 1924.

NUMBERS.		RATES PER 1000 OF ESTIMATED POPULATION.	
Births	(Corrected for Transfers), -	Birth Rate (Corrected for Transfers), -	18.8
Do. Illegitimate (do.), -	-	Marriage Rate (Uncorrected), -	5.4
Marriages (Uncorrected), -	-	Death Rate—All Causes (do.), -	16.7
Deaths (do.), -	-	Do. do. (Corrected for Transfers), -	13.2
Do. (Transferred Out), -	-	Do. do. (Corrected for Transfers and adjusted for Age and Sex Distribution), -	13.7
Do. (do. In), -	-	Do. —Tuberculosis, Respiratory System (Corrected for Transfers), -	0.52
Do. (Corrected), both Sexes, -	-	Do. —All Tuberculosis (Corrected for Transfers), -	0.95
		Do. —Principal Epidemic Diseases (Corrected for Transfers), -	1.29

Population—Census 1921, 23,808; Estimated to middle of 1924, 23,242.

Infantile Mortality Rate (Deaths of Children under One Year per 1000 Births), corrected, 108.

Illegitimate Rate (Illegitimate Births per 100 Total Births), corrected for Transfers, 5.5.

TABLE XXVI.—COUNTY OF DUNBARTON.—EASTERN DISTRICT.—STATEMENT OF CAUSES OF DEATH
(Corrected for Transfers) FOR 1924, SUPPLIED BY THE REGISTRAR-GENERAL.

CAUSES OF DEATH.	ALL AGES.			AGE.											
	Total.	M.	F.	—1	1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85 and over.
Enteric Fever, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles, - - - - -	9	3	6	2	7	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, - - - - -	3	1	2	...	1	2	...	...	...	...	...	...	...	...	...
Whooping-cough, - - - - -	11	5	6	...	5	...	...	...	...	...	...	...	...	...	...
Diphtheria, - - - - -	3	3	...	...	3	...	...	...	...	...	...	...	...	...	...
Influenza, - - - - -	18	8	10	...	1	...	1	1	2	1	...	4	4	4	...
Encephalitis Lethargica, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Respiratory System), - - - - -	12	5	7	...	...	...	...	3	4	2	3	...	...	...	...
Tuberculous Meningitis, - - - - -	2	1	1	...	1	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Abdominal), - - - - -	4	2	2	...	3	...	...	...	...	...	...	1	...	...	...
Other Tuberculous Diseases, - - - - -	4	1	3	...	...	1	1	1	...	1	...	...	...	...	...
Malignant Tumours, - - - - -	29	11	18	...	1	...	...	...	3	3	3	7	6	3	3
Meningitis, - - - - -	2	...	2	1	1	...	...	...	...	...	...	...	...	...	...
Apoplexy, - - - - -	33	12	21	...	...	...	...	...	...	...	2	...	12	8	2
Heart Disease, - - - - -	26	12	14	...	...	...	...	...	1	2	2	5	11	4	1
Disease of Arteries, - - - - -	3	1	2	...	...	...	...	...	...	...	...	1	...	...	...
Bronchitis, - - - - -	16	8	8	...	1	...	...	1	...	1	...	3	5	3	2
Pneumonia, - - - - -	23	13	10	...	9	...	...	...	...	2	...	...	...	1	1
Other Diseases of Respiratory System, - - - - -	5	2	3	...	1	...	...	...	1	2	...	...	...	...	...
Diarrhoea and Enteritis (under 2 years), - - - - -	4	4	...	...	2	...	...	...	...	...	...	...	...	...	...
Appendicitis, - - - - -	4	2	2	...	...	1	...	1	...	...	...	1	1	...	...
All Diseases of Liver (not Malignant), - - - - -	4	1	3	...	...	...	...	...	...	...	...	1	2	...	...
Nephritis (Acute and Chronic), - - - - -	8	5	3	...	...	...	...	1	...	2	1	2	2	...	...
Puerperal Sepsis, - - - - -	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...
Diseases and Accidents of Pregnancy and Parturition, - - - - -	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...
Diseases of Early Infancy and Malformation, - - - - -	19	17	2	18	1	...	...	...	...	...	...	...	...	...	...
Suicide, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Violent Deaths, - - - - -	9	6	3	...	...	...	...	2	2	1	...	...	2	1	...
Other Defined Diseases, - - - - -	51	29	22	1	3	2	1	1	...	5	9	4	8	5	8
Ill-defined or Unknown, - - - - -	3	3	...	2	...	...	...	...	...	...	...	1	...	...	...
All Causes, - - - - -	307	160	147	47	40	6	3	11	15	21	22	40	53	31	18

FACTORIES AND WORKSHOPS.

Eastern District.—The total number of inspections made during the year was 148. Four defects were found, all of which were remedied. One list of outworkers was received. There was nothing which required to be reported to H.M. Inspector of Factories. The total number of workshops at the end of the year was 74.

TABLE XXVII.—WORKSHOPS (EASTERN DISTRICT).

	Total Number.	Number of Workrooms.	Workshops employing both sexes.	Workshops employing Males only.	Workshops employing Females only.	Total Employees.	Women Employed.	Young Persons and Children Employed.
Bakers, - - -	11	11	4	7	...	49	10	10
Dressmakers, - - -	6	7	...	...	6	8	6	1
Tailors, - - -	5	6	2	3	...	11	2	1
Joiners, Cabinetmakers, Cartwrights, &c., -	12	13	...	11	...	27	...	5
Plumbers, Tinsmiths, -	4	4	...	4	...	22	...	6
Blacksmiths, - - -	10	10	...	10	...	21	...	1
Shoemakers, - - -	8	8	...	8	...	12	...	1
Saddlers, - - -	1	1	...	1	...	1	...	...
Hosiery Knitters, - -	3	3	...	...	3	11	11	...
Distillers, - - -	2	5	...	2	...	10	...	...
Butchers, - - -	5	5	2	3	...	12	2	2
Other trades, - - -	7	6	1	7	...	18	1	2
Totals, - - -	74	79	9	56	9	202	32	29

