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County Council of Dunbarton.

THIRTY-FIFTH  
ANNUAL REPORT

(YEAR 1925)

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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1926.

# COUNTY OF DUNBARTON.

## LIST OF STAFF.

### *Medical Officer.*

THOMAS LAUDER THOMSON, M.D., D.P.H.

### *Assistant Medical Officer.*

ALEXANDER JOHNSTONE, M.C., M.A., M.B., D.P.H.

### *Nurses.*

#### *Western District.*

ANNIE G. M. MILLER.  
JEAN T. EWING.

#### *Eastern District.*

JANET L. TURNBULL.  
J. CLARA MACBETH.

### *Clerks.*

GEORGE S. BROWNE.\*  
AGNES M'M. KENNEDY.\*  
JESSIE G. S. SMALL.

\*Part time with Education Authority.

The Medical Officer and Assistant Medical Officer are also Tuberculosis Officer and Assistant Tuberculosis Officer respectively.

The Medical Officers of the Education Authority (Dr. M. M. L. Cathels and Dr. A. D. Cowan) have been appointed Assistant Medical Officers of Health for purposes of administration.

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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 1925.

It will be noticed that the Report is rather larger than usual, due partly to the incorporation in it of certain information collected for City Boundary Inquiries and partly to the requirements of the Board of Health as set forth in their circular relating to Medical Officers' Annual Reports.

It will be noted that the Dumbarton Joint Hospital was utilised entirely for Scarlet Fever cases until the month of May. This was necessitated by the continued abnormal number of cases of Scarlet Fever in the Western District. The displacement of the patients suffering from Tuberculosis under such circumstances requires the consideration of the Health Committees.

During the year an addition was made to the clerical staff by the appointment of Miss Small. This was necessitated by the large increase in the volume of records requiring to be kept under the various schemes. It will be noticed that for the first time a list of the Health Staff has been inserted in the Report.

I am,

GENTLEMEN,

Your obedient servant,

THOMAS LAUDER THOMSON.

HEALTH OFFICE,  
88 COLLEGE STREET, DUMBARTON.



# MEDICAL OFFICER'S REPORT

FOR YEAR 1925.

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## PART I.—THE COUNTY.

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### VITAL STATISTICS.

POPULATION.—The estimation of the population in the Landward Areas by the Registrar-General at the middle of 1925 shows an increase of 1335 when compared with the corresponding estimate for last year. The population, as estimated from the number of inhabited houses, shows a total increase of 731 over the corresponding estimate for last year. These figures are all set forth in Tables I. and II. The only real point of interest is that the Registrar-General's estimate for the Western District is now over the figure ascertained at the census in 1921; in the Eastern District, on the other hand, the Registrar-General's figure is still under the census figure, while the estimation made from the number of inhabited houses exceeds the Registrar-General's by 1628 in the County as a whole.

BIRTH-RATES.—Table III. shows the number of births and the birth-rate for the last five years in each District. It will be seen that there were 32 more births in the Landward Districts during 1925 than in the previous year, the increase being entirely in the Eastern District. Owing, however, to the increase in the population, the birth-rate is practically the same as last year.

DEATH-RATES.—The death-rate for the County as a whole is slightly less than last year, being 12.3 as against 13.0 in 1924. The reduction in this rate is due entirely to the smaller number of deaths in the Eastern District. The number of deaths and death-rates in the County for the last five years are shown in Table IV. Table IV.(A) shows population, general death-rate, and zymotic diseases rate for every year from 1892 to 1924; it was prepared in connection with the extension of burgh boundaries.



TABLE I.

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

YEAR.	WESTERN DISTRICT.	EASTERN DISTRICT.	REMARKS.
1891	<b>28,730*</b>	<b>20,314</b>	* 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	<b>26,952</b>	<b>23,784</b>	
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	<b>28,092</b>	<b>26,350</b>	
1912	28,514	26,703	
1913	27,347‡	22,560†‡	† Extension of Glasgow Boundaries.
1914	27,111‡	22,543‡	‡ Estimation by Regis- trar-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	<b>30,340</b>	<b>23,808</b>	
1922	31,049‡	24,294†‡	† Extension of Milngavie Boundaries.
1923	30,281‡	23,624‡	
1924	29,872‡	23,242‡	
1925	30,660‡	23,789†‡	† Extension of Clyde- bank Boundaries.

TABLE II.

COUNTY OF DUNBARTON (LANDWARD)—ESTIMATED  
POPULATIONS, 1925.

WESTERN DISTRICT.

PARISH.	Census Population, 1921.	Persons per Occupied House, 1921.	Occupied Houses as per Valuation Roll, 1925-26.	Estimated Population to middle of 1925.
Dunbarton, - -	176	4·757	37	176
Cardross, - -	6,719	4·688	1,475	6,915
Bonhill, - - -	16,622	4·246	3,955	16,793
Kilmarnock, - -	873	4·365	208	908
Row, - - - -	3,062	5·252	601	3,156
Rosneath, - - -	1,323	4·725	275	1,299
Luss, - - - -	670	4·653	147	684
Arrochar, - - -	896	5·003	176	881
Total of Western District,	30,341	4·482	6,874	30,812

EASTERN DISTRICT.

Cumbernauld, - -	5,261	4·603	1,150	5,294
Kirkintilloch, - -	4,562	6·407	794	5,087
East Kilpatrick, - -	5,623	4·263	1,469	6,262
West Kilpatrick, - -	8,362	4·913	1,755	8,622
Total of Eastern District,	23,808	4·883	5,168	25,265
Total of County (Landward),	54,149	4·650	12,042	56,077

INFANTILE MORTALITY.—This rate is calculated from the number of deaths under one year per 1000 births. The total number of deaths under one year was 76, which gives an Infantile Mortality rate of 72. This rate may be taken as satisfactory, and it will be noticed from Table V. that, by grouping the rates since 1891 into periods of five years, there is a steady reduction. In the Western District for the quinquennial period 1891-95 the rate was 108, whereas for the corresponding number of years 1921-25 the rate was 71. In the Eastern District the quinquennial rate for the period 1891-95 was 119, and for the years 1921-25 it was 82. The chief causes of infant deaths were—Premature Births, 14; Malformations, Debility and Marasmus, 12; Pneumonia, 11; Bronchitis, 6. It is interesting to note that very few deaths occurred in 1925 from Diarrhœa or other digestive diseases, there being only three in each District.

DEATHS FROM INFECTIOUS DISEASES.—The numbers of deaths from Infectious Diseases were as follows:—Whooping-cough, 15; Measles, 8; Scarlet Fever, 7; Diphtheria, 5. There were no deaths from Enteric Fever, Encephalitis Lethargica, or Cerebro-Spinal Meningitis. Taken all over, these figures are very much the same as those of last year. The type of Diphtheria and Scarlet Fever was probably rather more severe than in an average year. The actual number of cases notified will be found in Tables X. and XX.

DEATHS FROM INFLUENZA.—Seven deaths occurred where Influenza was given as the only cause. The number of deaths from this cause fluctuates considerably, the figures for the last three years being 30 in 1924, 5 in 1923, and 28 in 1922.

DEATHS FROM PNEUMONIA.—In 39 instances death was certified as due to one or other form of Pneumonia. This number does not, however, include Pneumonias secondary to an infectious disease, such deaths being recorded as due to the infectious disease.

DEATHS FROM CANCER.—As considerable attention now centres round the death-rates from Cancer, it is interesting to note that during 1925 81 deaths were certified as due to malignant tumours or other forms of Cancer. Of these deaths, 58 occurred in the Western District and 23 in the Eastern District; 33 were males and 48 were females. In the year 1895 the deaths from Cancer numbered 35; of these, 24 were in the Western District and 11 in the Eastern District. In 1905 the corresponding figures were, Western

TABLE III.—BIRTHS AND BIRTH-RATES PER 1000 OF POPULATION WITHIN THE COUNTY OF  
DUNBARTON, EXCLUSIVE OF BURGHS, 1921-1925.

DISTRICT.	1921.		1922.		1923.		1924.		1925.	
	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.	Births.	Birth-Rates.
Eastern, ... ..	551	23·1	557	22·9	458	19·4	436	18·8	496	20·8
Western, ... ..	704	23·2	675	21·7	592	19·6	580	19·4	557	18·2
County, ... ..	1255	23·1	1232	22·3	1050	19·5	1016	19·0	1053	19·3

TABLE IV.—DEATHS AND DEATH-RATES PER 1000 OF POPULATION FROM ALL CAUSES IN THE COUNTY OF DUNBARTON, EXCLUSIVE OF BURGHS, 1921-1925.

DISTRICT.	1921.		1922.		1923.		1924.		1925.	
	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.	Deaths.	Death-Rates.
Eastern, ... ..	276	12·0	287	11·8	271	11·5	307	13·2	265	11·1
Western, ... ..	364	12·6	415	13·4	393	13·0	383	12·8	404	13·2
County, ... ..	640	12·3	702	12·7	664	12·3	690	13·0	669	12·3

TABLE IV.(A).—DEATH-RATES PER 1000 OF POPULATION.

Year.	Population.	All Causes.	Zymotic Diseases.*
1892	50,706	15.0	1.22
1893	49,916	17.2	2.70
1894	48,727	15.1	1.85
1895	50,887	17.3	1.92
1896	51,361	14.9	1.71
1897	51,981	16.4	1.60
1898	52,512	15.5	2.79
1899	52,108	14.4	1.54
1900	51,915	15.6	1.34
1901	50,687	16.7	2.40
1902	51,727	13.9	1.16
1903	52,500	14.5	.85
1904	53,104	14.8	1.69
1905	56,340	14.5	1.40
1906	60,616	13.4	1.59
1907	53,625	15.1	1.27
1908	55,720	11.7	1.02
1909	55,790	12.90	.86
1910	55,830	13.2	1.44
1911	54,520	12.2	1.57
1912	55,217	12.5	1.26
1913	52,393	13.7	1.16
1914	53,134	14.5	.99
1915	52,827	16.4	1.45
1916	52,948	14.2	.96
1917	53,715	13.2	1.00
1918	54,396	13.5	1.21
1919	54,454	14.6	1.19
1920	54,740	11.6	.51
1921	54,148	12.3	.56
1922	54,264	12.7	.60
1923	54,466	12.3	.77
1924	55,346	13.0	.88
Mean for 33 years,		14.2	1.05

\* The Zymotic Death-rate includes Diarrhœa.

TABLE V.—BIRTHS AND BIRTH-RATES AND DEATHS  
UNDER 1 YEAR PER 1000 BIRTHS, 1891-1925.

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
25	557	18·2	72	496	20·8	73

District 13 and Eastern District 16, totalling 29, and in 1915 the numbers had risen to 30 deaths in the Western District and 25 in the Eastern District, a total of 55 deaths. Compared with these figures, the corresponding figures for the year 1925 show a very considerable increase in the number of deaths from this cause. Even taking into consideration that the population increased from 51,760 in 1895 to 54,449 in 1925, there can be no doubt that the deaths from this cause are rapidly increasing, and that the disease calls for very special attention. It is to be hoped that those engaged in research work will soon be able to indicate steps which might be taken for the prevention of the disease. It is very interesting to note that the number of deaths from Cancer now considerably exceeds those from all forms of Tuberculosis.

DEATHS FROM TUBERCULOSIS.—During the year 1925 the number of deaths from Pulmonary Tuberculosis was 29, and the corresponding death-rate was .53. This rate shows that the drop in the death-rate, recorded last year as the lowest on record, has been well maintained. The average rate for the last five years is .66.

The deaths registered as being due to Non-Pulmonary Tuberculosis were 19, and the death-rate .35. This shows a small increase on last year's figures. The average rate for the preceding quinquennium was .34.

The total death-rate from Tuberculosis, therefore, was .88, and, although this is somewhat higher than last year, it is a fairly satisfactory figure.

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 1925:—

#### PULMONARY TUBERCULOSIS.

Area.	Age Periods.						Total.
	0—5	5—15	15—25	25—45	45—65	65+	
Western District, -	—	—	4	8	4	—	16
Eastern District, -	—	1	7	3	1	1	13
County, - - -	—	1	11	11	5	1	29



## NON-PULMONARY TUBERCULOSIS.

Area.	Age Periods.						Total.
	0-5	5-15	15-25	25-45	45-65	65+	
Western District, -	2	1	1	—	2	—	6
Eastern District, -	11	—	—	1	1	—	13
County, - - - -	13	1	1	1	3	—	19

## TUBERCULOSIS.

PULMONARY TUBERCULOSIS.—66 cases (31 males and 35 females) were notified during 1925, as against 73 cases in 1924 and 82 in 1923. Of this number 19 had died before the end of the year, 2 had left the district, in 8 cases the diagnosis was not verified, and 10 cases are still under observation as doubtful; 21 of the notified cases were sent for Institutional Treatment, and 5 received Domiciliary Treatment. Of those who died within the year, the average period of survival after notification was five weeks.

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.
1	1	8	12	24	20	—	66

NON-PULMONARY TUBERCULOSIS.—During the year under review 65 cases (32 males and 33 females) were notified, as against 79, 105, and 57 in 1924, 1923, and 1922 respectively. By the end of the year 9 had died, 2 had left the district, in 3 the diagnosis was not verified, and 7 cases were still under observation as doubtful; 12 of the cases were sent for Institutional Treatment, and 2 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.							Total.
	Under 1	1-5	5-15	15-25	25-45	45-65	Over 65	
Glands, - -	3	8	5	7	5	—	—	28
Bones and Joints, - -	—	2	8	1	—	1	—	12
Abdomen, - -	—	7	7	2	—	1	—	17
Spine, - -	—	—	1	—	—	—	—	1
Meninges, - -	1	2	1	—	1	—	—	5
Other, - -	—	—	1	—	1	—	—	2
Total, - -	4	19	23	10	7	2	—	65

### X-RAY EXAMINATIONS.

In March, 1925, an arrangement was made with the Corporation of Glasgow whereby suspected cases of Pulmonary and Non-Pulmonary Tuberculosis could be examined by X-rays at Ruchill Hospital.

Under this arrangement 22 examinations were carried out during the year as follows:—

	Positive.	Doubtful.	Negative.
Cases notified to Health Department,	4	1	10
Cases referred to Tuberculosis Officer but not notified,	Nil	Nil	4
Second examinations,	Nil	Nil	3

It will be seen from the above figures that most of the examinations gave a negative result, and this is explained by the fact that only cases where ordinary examination left the diagnosis in doubt were dealt with.

Owing to the insidious nature of the disease and its widespread distribution, the suspicion that a puzzling illness may be due to Tuberculosis comes readily to the mind, but to verify that suspicion or to disprove it is often a very difficult matter; indeed, at times, it is one of the most difficult problems that confront the medical man in his work.

The Tuberculosis Officer is faced with the same difficulty, but the problem is, in his case, often further complicated by the fact that the medical practitioner has already expressed the opinion that the condition is Tuberculosis. The result

TABLE VI.--MORTALITY IN THE COUNTY (LANDWARD)  
FROM TUBERCULOUS DISEASES, 1891-1925.

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
1925, . . .	29	19	48	0.53	<del>0.58</del> 0.35	0.88

RATE PER 1,000.

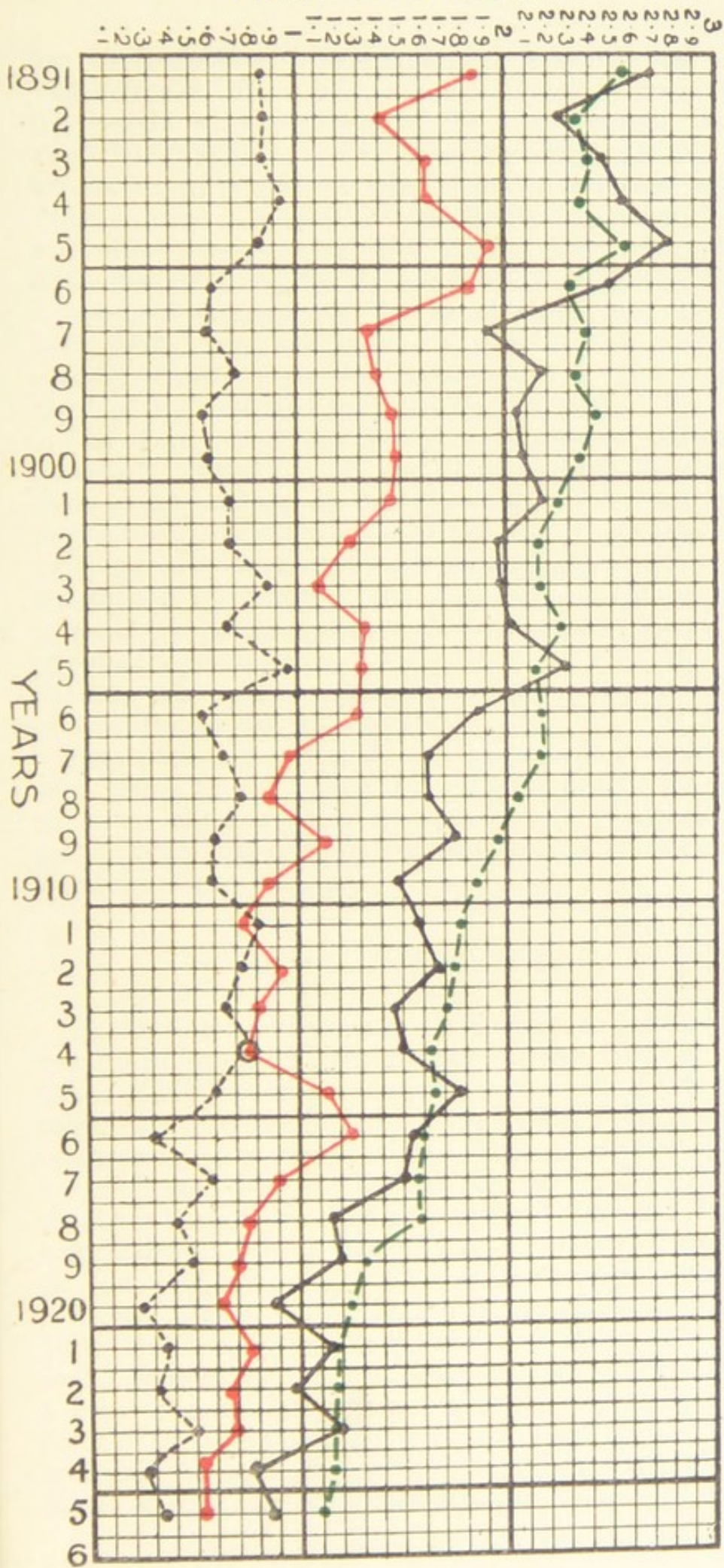


CHART SHOWING DEATH-RATES PER 1000 OF POPULATION FROM TUBERCULOUS DISEASES IN THE COUNTY (LANDWARD), 1891-1925.

Total Tuberculous Diseases ——— Pulmonary Tuberculosis ——— Other Tuberculous Diseases .....  
 Total Tuberculous Diseases (Scotland) ———



has been that an occasional case has cropped up where the Tuberculosis Officer has found it necessary to give the patient the benefit of the doubt where a reasonable doubt existed; and thus possibly money was expended on the institutional treatment of a person who was not actually suffering from Tuberculosis. Chronic Bronchitis, for example, often gives a clinical picture very like that of Pulmonary Tuberculosis. Both diseases may be almost equally crippling for the person affected, treatment on the same lines may be beneficial to both, but, from the point of view of the prevention of the spread of infection, the expenditure of money on the treatment of Bronchitis could not be justified.

The facilities of the X-ray examinations, therefore, form a necessary extension to the Tuberculosis scheme. Although these examinations do not give conclusive results in all cases, they often, when positive, clinch the diagnosis where clinical findings are indefinite and equivocal, and, when negative, strengthen the hand of the Tuberculosis Officer in his refusal to accept a positive diagnosis where nothing can be found on physical examination, or indicate to him the necessity for further observation when the signs point to the possibility of the disease being present.

The total cost of these examinations is comparatively small, and there is no doubt that the expenditure incurred will prove in the long run a very sound investment, apart altogether from the present increase in the efficiency of the anti-Tuberculosis machinery.

## SMALLPOX.

VACCINATION.—No case of Smallpox occurred during the year. Reference to the report on the Medical Inspection of School Children shows that out of 7447 children of all ages examined during the year ended 31st July, 1925, 2731 were unprotected by vaccination. This is an actual increase of 4.8 per cent. over the figures for last year. The lack of vaccination is most marked amongst entrants, 49.3 of whom were unprotected; this is actually an increase of over 6 per cent. on last year's figures. Of the Landward Districts, the Vale of Leven area gives the highest figure of unvaccinated children, 1088 children being examined, of whom 484, or 44.5 per cent., showed no signs of vaccination. The introduction of a case of smallpox into a community containing large numbers of unvaccinated persons is almost certain to produce an epidemic of some magnitude, and, in view of the fact that there is still no accommodation for cases of the disease in

the County, the circumstances must be looked upon as being eminently unsatisfactory.

**SMALLPOX HOSPITAL ACCOMMODATION.**—A number of meetings were held during the year regarding the provision of a Smallpox Hospital for the County jointly with the Corporation of Glasgow. No definite scheme had, however, been agreed upon by the end of the year, although, generally speaking, the representatives of Authorities appeared to be quite alive to the necessity for providing a hospital for such cases.

### TREATMENT OF VENEREAL DISEASES.

During the year no alteration was made in the scheme for the treatment of Venereal Diseases, but there were several changes in the hospitals in Glasgow where the treatment was actually carried out.

On the whole, fuller advantage was taken by medical practitioners of the facilities provided for the diagnosis and treatment at home of these diseases.

Propaganda work by the Joint Committee was further extended during the year, well-attended lectures being given at Alexandria, Renton, Duntocher, Dumbarton, and Helensburgh.

The following table shows the number of in-patients and out-patients from the County area dealt with during 1925:—

#### TREATMENT OF VENEREAL DISEASES DURING THE TWELVE MONTHS ENDING 30TH NOVEMBER, 1925.

TREATMENT CENTRE.	IN-PATIENTS.		OUT-PATIENTS.	
	Number.	Days Residence.	New Patients, 1925.	Total attendances of all Patients during 1925.
Royal Infirmary, . . .	1	81	8	80
Victoria Infirmary, . . .	—	163	5	260
Lock Hospital, . . .	1	23	1	18
Eye Infirmary, . . .	—	—	2	128
Broomielaw Dispensary, . . .	1	29	8	114
Baird Street, . . .	1	64	1	1
Totals, . . . . .	4	360	25	601

## CENTRES FOR TREATMENT OF VENEREAL DISEASE.

Centre.	Disease Treated.	Monday.	Tuesday.	Wednesday.	Thursday.	Friday.	Saturday.
<b>MALES—</b>							
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.	2 p.m.	6 p.m.	—	2 p.m.	6 p.m.	—
Corporation Dispensary, 186 Broomielaw, . . . . .	All V.D.	6 p.m.	6 p.m.	{ 2 p.m. } { 6 p.m. }	6 p.m.	{ 2 p.m. } { 6 p.m. }	9.30 a.m.
<b>FEMALES—</b>							
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.	9 a.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.	—	6 p.m.	—	—	—
Baird Street Reception House, . . . . .	All V.D.	—	—	10 a.m.	—	10 a.m.	—
<b>CHILDREN—</b>							
Central Dispensary, 15 North Portland St., . . . . .	All V.D.	9 a.m.	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.	—
<b>EYE CASES ONLY (BOTH SEXES)—</b>							
Eye Infirmary Dispensary, Charlotte Street, . . . . .	All V.D. of Eyes	—	5.30 p.m.	5.30 p.m.	5.30 p.m.	—	—



It should be noted that in the columns referring to out-patients the total number of patients only includes new patients in 1925, while the last column includes attendances of patients who commenced attending before 30th November, 1924. Of the 25 new patients, 14 were from the Western District and 11 from the Eastern District.

Eleven patients were given their railway fares to attend the Glasgow centres for treatment, and the total amount thus expended was £32 12s. 6d. All these patients were from the Western District. In this connection it should be noted that some of these patients were under the necessity of travelling to Glasgow daily for treatment, in some cases for considerable periods.

The table on page 21 shows the centres in Glasgow at which treatment is carried out.

### METEOROLOGY.

Table VII. gives the rainfall at various stations in the County, and I would here refer to my indebtedness to the various Water Superintendents and others for particulars of the rainfall in their respective districts. Taking the figures as a whole, 1925 appears to have been somewhat drier than the preceding year. It is interesting to note that, while in 1924 March was the month in which there were fewest wet days, in 1925 June had this honour. In both years, however, May appears to have had almost the largest number of wet days, although in 1924 December had almost equally as many. Taking the records as a whole, the largest rainfall in 1924 appears to have been in December, while in 1925 May would appear to have been the wettest month.

### RIVERS POLLUTION.

There were few complaints received during the year regarding the pollution of rivers in the County.

*River Leven.*—No serious poisoning occurred during the year, and the only matter engaging the attention was the pollution of the river by houseboats anchored in a portion of the river at Balloch. The question of adopting bye-laws was before the Public Health Committee on several occasions, but had not been finally disposed of at the end of the year. There were also considered schemes for removing the domestic drainage from the river. One of these proposals was a joint scheme with the Royal Burgh of Dumbarton, and the other a scheme purely for the Landward portion of the District

TABLE VII.—RAINFALL DURING 1925.

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.													
Valve House, Luss Rd., Helensburgh,	Jas. N. Stirling, Burgh Surveyor, ..	8	1 0	293	6.10 22	4.72 25	3.26 16	6.83 19	7.88 26	1.31 9	2.41 18	4.60 18	4.72 21	5.16 23	1.17 14	4.86 21	53.02 232
Croft Cottage, Rosneath, ..	John Smith, ..	..	..	..	6.28 23	4.67 24	3.54 17	6.74 19	7.93 25	1.36 11	2.61 17	4.37 17	4.61 21	5.26 19	1.58 15	4.32 18	53.27 226
Glen Finlas, ..	George Beaton, Water Superintendent, ..	..	..	..	8.13 24	5.51 23	2.63 17	8.66 19	11.50 26	1.82 9	3.28 15	7.05 17	6.47 21	7.54 20	1.79 12	5.07 16	69.45 219
Renton Filters, ..	Charles Brown, Water Superintendent, ..	8	4 0	292	5.82 23	4.25 24	1.37 14	5.74 20	8.20 24	0.88 9	1.41 15	3.23 14	2.98 14	4.25 21	0.64 11	4.00 14	42.77 203
Cochno Filters, ..	E. T. Collins, Water Superintendent, ..	5	1 0	400	5.02 19	4.33 21	1.89 12	5.23 17	6.85 20	0.92 7	1.98 10	4.27 18	4.42 19	3.74 15	0.91 8	3.28 16	42.84 182
Cochno Loch, ..	Do.	5	1 0	909	5.21	4.95	1.90	5.93	6.91	1.72	2.13	4.36	5.29	4.43	1.12	4.40	48.35
Jaw Reservoir, ..	Do.	5	1 0	912	4.49	5.25	1.65	5.66	6.02	1.11	2.02	4.48	5.43	4.11	1.03	3.47	44.72
Greenside Reservoir, ..	Do.	5	1 0	875	5.06	5.12	1.50	6.10	7.61	1.51	2.09	4.46	4.88	4.53	1.22	3.66	47.74

At a meeting held towards the end of the year, the Committee agreed to defer further consideration of the scheme until certain points in connection with it had been more fully explored. The matter was still under consideration at the end of the year.

*River Allander.*—A number of complaints were received during the year regarding froth on the surface of the river. The froth, which is sometimes of considerable amount, is undoubtedly due to a discharge from works within the Burgh of Milngavie. The management of these works have now carried out a very considerable amount of alteration, and latterly there was very much less cause for complaint.

Towards the end of February a complaint was received regarding the supposed pollution of the Craigton Burn, which is a tributary of the Allander. The only effluent flowing into this stream is from the Craigton Bleach Works. The following is a report submitted on the subject:—

#### REPORT ON POLLUTION OF CRAIGTON BURN.

I beg to report that on 19th February I received a letter informing me that there had been a pollution of the Craigton Burn on the afternoon of Tuesday, 17th February.

I visited the Craigton Bleach Works on the afternoon of Thursday, 19th February, and examined the stream there and the settling ponds in connection with the works. As far as I could see, there was no evidence there that pollution had taken place. The banks of the stream appeared to be quite clean, and the settling ponds appeared to have been undisturbed for some considerable time.

I interviewed a forester on the stream between Craigton and Milngavie, who stated that, although working there, he had not noticed anything special about the burn.

I made further inquiries in the Burgh of Milngavie, and eventually elicited the fact that several people who had been playing golf on the links had noticed the condition of the stream, and stated that it smelled of chlorine and was milky in appearance.

There is no polluting source, other than the Craigton Bleach Works, above the point at which this pollution was noticed. I have, therefore, written to the manager of the works pointing this out, and a copy of my letter is attached.

No further complaints were received regarding this stream.

*River Kelvin.*—The pollution of the River Allander with froth from the Ellangowan Paper Works in the Burgh of

Milngavie was noticeable in the River Kelvin, and caused various complaints to be made regarding the appearance of the stream. As the Town Council of the Burgh were dealing with the matter, these complaints were referred to them.

*River Luggie.*—Towards the end of March my attention was directed by Dr. Patterson, Medical Officer of Health for the County of Lanark, to the condition of this stream. He enclosed an excerpt from a report by his Rivers Pollution Officer, which was in the following terms:—

“ In the course of the inquiries one of the villagers complained of the condition of the Luggie due to colouring material alleged to come from Tannoch Chemical Works. She stated that at times the stream was very badly polluted, but no specific dates could be obtained. Proceeded to the Chemical Works and found that at present the work is on short time, and at the time of visit no pollution was occurring. The settling pond on the opposite side of the Luggie from the works was found to be almost full. The old practice of depositing the ashes into the stream has been stopped, and a tip has been used just at the dam. Met Mr. Shand and pointed out to him that this tip was not satisfactory, as the ashes were still liable to be washed away. He stated that at present he was negotiating for new ground in the wood, and when this was obtained all the ashes would be tipped there. Directed his attention to the settling pond, and he promised to have other two ponds dug out and backed up with ashes. Mr. Shand stated that he was anxious to do everything possible to obviate cause for complaint.

(Initialed) “ W. J. I.”

The position of these works is somewhat difficult, because, although the works themselves are in Dunbartonshire the disposal works are in Lanarkshire. An arrangement was come to in my predecessor's time to treat the whole of these works, including the settling ponds, as a Dunbartonshire problem. As will be realised, however, the joint legal liability does not make the question any simpler. On receipt of the report from Dr. Patterson, a letter was directed to Messrs. Shand Brothers reminding them of their statement that they were on the point of constructing an extra settling pond for the effluent from the colour house. In answer to this Messrs. Shand informed me that they had, in point of fact, finished one new filter pond, and that two others were in course of construction.

## BACTERIOLOGICAL EXAMINATIONS.

The arrangement made with the Usher Institute was still continued in force during 1925.

358 specimens were submitted for examination during the year as against 223 in 1924; 112 of these were from the Eastern District and 246 from the Western District. This number included 165 specimens of sputum, in 28 of which the bacillus of Tuberculosis was found; 165 swabs from throats or noses of persons suspected of having Diphtheria, of these 17 were positive; 27 specimens of blood from persons suspected or suffering from Typhoid or Paratyphoid Fever, 5 of which 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, - - -	£32	8	6
Eastern District, - - -	14	15	6
	<hr/>		
	£47	4	0
	<hr/>		

During the year a report was submitted to the District Committees with reference to the establishment of a small Bacteriological Laboratory in connection with the Public Health Department. The proposal was generally approved, subject to satisfactory estimates for the work being obtained and to the approval of the Board of Health. It might be pointed out that the need for a small laboratory has always been before me, because of the inevitable delay in obtaining results of specimens submitted to the Usher Institute at the end of a week. The fact that delay did occur was appreciated by the Committees when I was instructed some years ago to arrange with the Corporation of Glasgow for the examination of material from dairy farms where it was essential that an early diagnosis should be made. It is to be hoped that this laboratory will be gone on with during 1926.

## CLOSURE OF SCHOOLS.

No occasion arose during the year for advising the closure of any school for an outbreak of infectious disease.

## BLIND PERSONS ACT.

At the end of 1925 the Blind Persons Register contained the names of 100 persons, including 33 new names which were added during the year. A thorough revision of the

Register was made with the help of the officials of the Mission to the Outdoor Blind. The following shows the distribution of the cases throughout the County:—

Burgh of Clydebank, - - - -	41
Burgh of Kirkintilloch, - - - -	9
Burgh of Helensburgh, - - - -	3
Burgh of Milngavie, - - - -	3
Eastern District, Landward, - - - -	24
Western District, Landward, - - - -	20

Of the Western District cases, 6 resided in Bonhill Parish, 13 in Cardross Parish, 3 in Row Parish, 1 in Rosneath Parish, and 1 in Arrochar Parish, while of the Eastern District cases 5 resided in Cumbernauld Parish, 3 in Kirkintilloch Parish, 3 in East Kilpatrick Parish, and 9 in West Kilpatrick Parish.

As regards the 33 new cases, 15 were males and 18 females. The ages were as follows:—

Between 10 and 20 years, - - - -	2
„ 20 „ 30 „ - - - -	1
„ 30 „ 40 „ - - - -	4
„ 40 „ 50 „ - - - -	1
„ 50 „ 60 „ - - - -	5
„ 60 „ 70 „ - - - -	12
„ 70 „ 80 „ - - - -	7
„ 80 „ 90 „ - - - -	1

Regarding the causes of blindness in these cases, the history showed that in 16 instances the cause had not been definitely ascertained. Disease of the Optic Nerve was responsible in 5 cases; Cataract in 3 cases; Shock in 2 cases, and Syphilis, Glaucoma, Abscess, Trachoma, Ophthalmia Neonatorum, and Choroiditis were each responsible in one case, while the remaining case was due to an accident.

Six applications for admission to the Royal Glasgow Asylum for the Blind were dealt with during 1925. Two of these applications were from Helensburgh patients, two from Clydebank patients, and two from Renton patients.

During the year the Joint Committee for the South-West of Scotland on the administration of the Blind Persons Act, 1920, opened a house on the Gareloch named Annachmohr as a home for aged blind and for blind persons recovering from illness. One application was made for admission of a patient from the County Districts, but the patient became ill and died before the arrangements could be carried out.

## SEASONAL WORKERS.

Continued inspections of the accommodation for Seasonal Workers in the County were made during the summer. In August my attention was specially directed to a farm which had been under my observation in the previous year, when a number of contraventions were discovered and the farmer was fined. On this occasion seven contraventions of the bye-laws were discovered, and the farmer was fined £20 or six weeks' imprisonment. A number of the contraventions in this case were similar to the contraventions in the previous year, and there could be no possible excuse for the farmer not complying with the regulations for the housing of Seasonal Workers. In November my attention was further directed to a farm in Cardross Parish, and in this case six contraventions were discovered. The farmer in this instance had previously been warned that the bye-laws must be adhered to. On the case going before the Sheriff, the farmer pled guilty, and was fined £4 or thirty days' imprisonment. In connection with this prosecution the potato merchant also appeared before the Sheriff for failing to give notice that a squad of workers was to be at this farm. He pled guilty, and was fined £2 or fourteen days' imprisonment.

The inspections made showed that in the majority of instances the farmers were really doing their best to carry out the bye-laws, and there is now certainly a higher standard of accommodation than in the past.

## TENTS, VANS, AND SHEDS.

During the summer months a considerable amount of time had to be devoted by the Medical Officers and Sanitary Staff to the inspection of tents and other structures occupied by campers in various parts of the County.

Taken as a whole, there was, perhaps, not so much camping as in the immediately preceding years, but there were several parts of the Western District which required fairly constant supervision by the Sanitary Staff during the season.

The main areas referred to were (1) the shore between Ardmore Point and Craigendoran, (2) the fields near Luss adjoining the main road and sloping down to the shores of Loch Lomond.

In the early part of the year a visit to the Craigendoran shore revealed the fact that there were several structures which had been occupied all winter, and were more of the nature of houses than sheds. The Health Committee decided to prosecute the owners of two of the most permanent structures under the Building Bye-laws.

In February these persons appeared before the Sheriff charged with erecting buildings before submitting plans. One of the defenders lodged plans, and was admonished; the other was fined £1 or seven days' imprisonment.

At a later date it was noted that both at the Craigendoran and Luss areas numbers of sectional huts were being erected. It was considered, however, that as these were temporary structures, in that they could be removed readily and without damage to their fabric, they did not come under the Building Bye-laws.

At the end of June a visit revealed the fact that there were 59 structures of all descriptions between Ardmore and Craigendoran, while at the end of July the number had risen to 108.

As the campers generally appeared to conform to the bye-laws for tents, vans, and sheds, no prosecutions were instituted under these bye-laws during the year, although a number of persons were warned mainly about slight overcrowding and the lack of satisfactory ground sheets.

#### DEPOSITION OF CLYDE DREDGINGS.

At the beginning of the year an intimation was made that the Clyde Navigation Trustees had applied to the Board of Trade for permission to continue to deposit 1,350,000 barge tons of dredgings during 1925, and 2,700,000 barge tons in each of the three subsequent years.

The Western District Committee, after considering this matter, decided that, although they would not be represented at the inquiry, they still objected to this material being put down on the area referred to in the Admiralty chart. In May intimation was received that the Marine Department of the Board of Trade had granted the permission asked for.

Although no systematic examination of the foreshores was made during the year, opportunity was taken from time to time to examine these, and, as far as could be ascertained, there did not appear to be any change in the condition of the shores below high-water mark. Although this is undoubtedly satisfactory, it must be remembered that the area of the shores in question is very extensive, and it would probably be only after a number of years that any change would be noticeable.

#### MILK AND DAIRIES (SCOTLAND) ACT, 1914.

Under sections 15 and 17 of the above Act, it is the duty of the farmer to intimate to the Medical Officer of Health the



occurrence of any illness in a dairy farm which might be infectious.

In order to conform to the requirements of the Act and to enable the farmers to recognise the presence of infectious disease, a schedule, printed on stiff card, showing the symptoms of the more common infectious diseases, was supplied to all farmers, dairymen, and others dealing with milk.

During the year in the Western District infectious disease was notified from six farms supplying milk, but, as far as could be ascertained, there was no extension of the disease to the consumers in any instance. In the Eastern District Scarlet Fever was reported from dairy farms on four occasions; prompt action was taken, and the consumers of the milk did not appear to suffer, although a secondary case occurred at one of the farms involved.

Experience indicates that, if the disease is recognised at once, the removal of the patient and disinfection of the premises nearly always prevents the spread of Scarlet Fever when it occurs in a milk-producing farm, provided that all the persons dealing with the milk supply are carefully examined, and any person with signs of recent illness is prohibited from working in the dairy premises. On the other hand, the occurrence of Diphtheria or Enteric Fever in a dairy farm nearly always requires the stoppage of the milk supply to allow of bacteriological and other examinations to be made and reports on specimens taken to be received from the bacteriologist.

In this connection the advantage of a County Laboratory is evident, as all specimens taken could be reported on without delay. At the present time the transit of the material for examination to Edinburgh or Glasgow often causes very considerable delay, which is, of course, unavoidable.

#### MILK AND DAIRIES (AMENDMENT) ACT, 1922.

In January my attention was directed to the sale of milk from a barrow in one of the populous areas in the County. This barrow had certain inscriptions on it, including the picture of a churn with "Grade A" printed on it. Lower down the words "Milk free from Tuberculous" occurred, and below that, in large letters, "Smith's Pasteurised Milk."

As the purveyor of this milk had no licence for any grade of milk, but stated that he bought the milk as pasteurised, I reported the matter to the Health Committee, who instructed the Clerk to write, pointing out the offence, and warning the man against its continuance. The practice was not stopped, however, and the man was finally convicted and fined.

## EXTENSION OF BURGH BOUNDARIES.

GLASGOW.—A Bill for the extension of the City Boundaries came before a Select Committee of the House of Commons in the month of May.

The area proposed to be included in the City was very extensive, originally embracing Bearsden, Westerton, and Drumchapel, as well as the area of their new housing scheme at Knightswood. A slight alteration in the proposed boundary line was intimated before the hearing, by which Drumchapel and surrounding districts were excluded. This was arranged so as to prevent any overlapping with the Clydebank Burgh Extension Scheme.

Fortunately the Select Committee allowed Dunbartonshire to retain Bearsden and Westerton. Had they decided otherwise, there would have been great difficulty in carrying on effectively the various health services in the Eastern District of the County.

The area added to the City included all the land south of the railway line to a point near Drumchapel, whence the boundary line extended southwards, including Blairdardie, to the Renfrewshire boundary.

The area taken from the County administration and added to the City of Glasgow extended to 633 acres, with a population at the date of the hearing of the evidence of 346. The transference does not become effective until May, 1926, when, owing to the approaching completion of the housing scheme, the population will be very much greater.

A certain further modification of the boundary was made at a later period, when it was agreed that the area between the railway and canal, in which is situated the Westerton Sewage Works, should remain in Dunbartonshire; this area extended to 38 acres.

I have included in this report for the sake of reference a number of memoranda which were prepared for the boundaries inquiry. These are—

- (1) Infectious Disease administrative procedure.
- (2) Hospital accommodation in the County.
- (3) Maternity Service and Child Welfare Scheme with scale of charges for dental treatment.
- (4) Co-ordination of Medical Services in the County.
- (5) Summaries of Death and Disease Rates in the County for thirty-four years—Table IV.(A).

Those relating to the Tuberculosis and Venereal Diseases Schemes were printed in last year's report.

CLYDEBANK.—Following on the inquiry regarding the City of Glasgow extension referred to above, the Burgh of Clydebank Extension Bill came before the same Select Committee.

In neither case was it deemed necessary to call upon the Health Officials to give evidence, as no definite exception was taken to the methods of administration of the County Health Departments.

The area asked by the Town Council of Clydebank was somewhat sweeping, and included Old Kilpatrick, Duntocher, Faifley, Hardgate, Garscadden, and Drumchapel, with the portion of Mill Road, Yoker, which lies in the County, and all the lands between these places. The acreage involved was 3110, with a population of 8144.

Had Clydebank obtained this large area, the County Health Services would have been seriously affected. As a matter of fact, the territory granted to the Burgh by the Select Committee did not include any populous place. The new boundary includes, however, several farms, Auchentoshan House, Auchentoshan Distillery, and a few scattered houses, including Mount Blow House, which is now used as a Convalescent Home by the City of Glasgow, but, as far as the Public Health Services are concerned, the severance of this area has little or no effect.

It is pleasing to record here the fact that the most cordial relationship exists between the County Health Department and the Health Departments of the various Burghs in the County, as well as that of the City of Glasgow.

### INFECTIOUS DISEASES—ADMINISTRATIVE PROCEDURE.

ACTS AND REGULATIONS.—(1) Infectious Diseases (Notification) Act, 1889.

(2) Special Order regarding Cerebro-spinal Meningitis.

(3) Public Health (Pulmonary Tuberculosis) Regulations (Scotland), 1912.

(4) Public Health (Tuberculosis) Regulations (Scotland), 1914.

(5) Public Health (Ophthalmia Neonatorum) Regulations (Scotland), 1918.

(6) Public Health (Pneumonia, Malaria, Dysentery, &c.) Regulations (Scotland), 1919.

(7) Public Health (Infective Jaundice) Regulations (Scotland), 1924.

NOTIFICATION.—Medical Practitioners or School Medical

Officers make the requisite notifications under 1, 2, 3, 4, 6, and 7.

Further reference to notifications under 3 and 4 need not be made, as they have been dealt with in the report on Tuberculosis.

As regards notifications under Nos. 1, 2, and 6, the procedure is as follows:—The notifications are sent to the Medical Officer, care of the Sanitary Inspector, who at once makes the necessary preliminary inquiries, the results of which are entered on a schedule (coloured, Western District blue, Eastern District white). The Sanitary Inspector further arranges for the disinfection of the house, and the removal of the patient to hospital if necessary.

The completed schedules are at once transmitted to the Medical Officer of Health, who considers whether any special steps are necessary.

Should the Sanitary Inspector find that any special case presents difficulties, he consults the Medical Officer of Health by telephone.

**REMOVAL TO HOSPITAL.**—In cases of the more infectious diseases, such as Smallpox, Scarlet Fever, and Diphtheria, the patients are, as far as possible, removed to hospital. This also applies to such diseases as Enteric Fever, Puerperal Fever, and Dysentery. In cases of such diseases as Pneumonia, Erysipelas, and Malaria, removal to hospital is not insisted on.

Between 90 per cent. and 100 per cent. of the Enteric cases, and between 80 per cent. and 90 per cent. of the Scarlet Fever and Diphtheria cases are removed annually.

**DISINFECTION.**—On removal to hospital, or at the termination of a home case, either by recovery or death, thorough disinfection of the house is carried out, including the removal of infected articles for steam sterilisation, which is done at the Fever Hospital.

The occupiers of the house are encouraged to make a thorough cleaning of the premises, &c., for which soap and disinfectants are supplied free.

**METHOD OF REMOVAL.**—In every case removal is carried out by means of a motor ambulance from the Infectious Diseases Hospital, with a trained nurse in attendance.

**HOME CASES.**—In diseases where infection may be carried by the patient, such as Scarlet Fever, the household is visited from time to time during the illness in order to impress on

the patient or the guardians of the patient the necessity for complete isolation. If it is found that any laxness has taken place, the Medical Officer of Health makes a personal visit, and, if necessary, demands the removal of the patient to hospital.

Disinfectants and soap are supplied free for the use of home cases.

**ACTION BY THE MEDICAL OFFICER OF HEALTH.**—On receipt of the schedule from the Sanitary Inspector, the Medical Officer of Health considers the possible sources of infection, and, if necessary, makes further inquiries regarding this.

It is in this connection that the close co-ordination between the School Services and the Public Health Services is of special use, and, should there be any suspicion that the infectious disease in question is being carried through school attendance, the Medical Officer of Health instructs the School Medical Officers to make an examination of the school children and report to him. He may even take further action, such as the closure of a school or a department, or the exclusion of individual pupils. Should it appear necessary, disinfection of a school or classroom is undertaken by the Sanitary Department.

In order to carry out a complete scheme of co-operation between the Education Authority and the County Health Department, the following procedure has been adopted:—

On receipt of the schedule previously referred to by the Medical Officer of Health in cases necessitating the exclusion of contacts from school, a notice is at once sent to the Headmaster of the schools concerned and to the Clerk to the appropriate School Management Committee, intimating that infectious disease exists in the house in question. On the expiry of the agreed-upon period of quarantine, a certificate of freedom from infection is sent to the householder for production to the Headmaster of the school when his children return, and at the same time, in order to obviate unnecessarily prolonged absence, a similar notice is issued to the Clerk to the School Management Committee.

This procedure does not stop at schools within the area of the County of Dunbarton, but, should children attending schools outwith Dunbartonshire be affected, the Education Authority interested is notified in the same manner.

*Dairy Farms.*—Special precautions have to be taken in regard to infectious disease in dairy farms. There are 294 dairy farms in the County, and, as a large proportion of them are occupied by families with small children, infectious

disease is apt to occur frequently amongst the dairying community.

Where infectious disease occurs at a dairy farm, removal to hospital is insisted on, unless the dairykeeper agrees to an entire suspension of his milk trade.

The milk supply is stopped until the removal of the patient and the complete disinfection of the premises is carried out, and periodic visits are paid and examination of the inmates made until all danger is passed. In the case of diphtheria, all persons on the affected farm are inspected and throat swabs taken for bacteriological examination.

Should there be any suspicion that infection is coming from the cows themselves, the Veterinary Inspector appointed under the Public Health Act accompanies the Medical Officer and reports to him regarding the condition of the dairy stock.

The full powers of inspection and of prohibiting a supply of milk are contained in sections 60 and 61 of the Public Health (Scotland) Act, 1897.

Special precautions are taken before a patient from a dairy farm is discharged from hospital, and the Medical Officer advises that, if possible, the patient should not return to the farm direct from the hospital. This is nearly always arranged for.

**BACTERIOLOGICAL EXAMINATIONS.**—For the purposes of diagnosis or certification of freedom from infection, specimens are sent to the Usher Institute, Edinburgh. In order, however, to avoid delay which might occur were a specimen taken at the end of a week, it has been arranged that any specimens from dairy farms are to be examined by the Bacteriologist for the City of Glasgow.

It is hoped, however, that the County may soon have a small laboratory of its own where such specimens can be examined, and thus a great saving of time will be effected.

**NOTIFICATION UNDER No. 5.**—The notification of cases of Ophthalmia Neonatorum is made—

- (1) By Medical Practitioners.
- (2) By Certified Midwives.
- (3) By Uncertified Midwives.

This notification is made direct to the Medical Officer of Health, who at once instructs the Health Visitor of the District to visit and furnish a report.

Should the Health Visitor's report be unfavourable, the case may be removed to hospital for treatment. Hospital

accommodation is provided by the County of Lanark by arrangement.

NOTIFICATION UNDER No. 7.—As regards the regulations concerning Epidemic Jaundice, the notifications are inquired into by the Medical Officer's Department. Only a few cases have as yet been intimated, but details of procedure are as follows:—Specimens from the suspected patients are sent to Dr. Buchanan, Edinburgh, and rat traps are provided, and any live rats are despatched to the same bacteriologist for examination.

HOSPITAL FACILITIES.—As referred to in the report on Hospital Accommodation, there are three hospitals used constantly by the District Committees.

In providing these hospitals, the Committees had to consider the fact that the County of Dunbarton, and more especially the Western District, is visited by thousands of persons for summer and easter holidays.

The number of visitors from the City of Glasgow is always large. This contingent has recently been much increased by campers, and, although last year the number of campers was somewhat smaller, the coast line from Cardross to Craighendran had, in 1923, a camping population of over 2000 persons.

There are also a large number of convalescent homes or hospitals, mainly for the benefit of Glasgow citizens. These are—

(1) *The Children's Convalescent Home, Cumbernauld.*—This home is for children from the whole of Scotland, but, being so near Glasgow, the majority of the inmates are from that city. It was opened in 1904, and can accommodate 50 to 60 children.

(2) *Country Branch of the Royal Hospital for Sick Children, Yorkhill, Glasgow, at Drumchapel.*—This institution, which was opened in 1903, contains about 30 beds, and is for convalescent patients from the main hospital at Yorkhill.

(3) *The Schaw Home, Bearsden.*—This institution is used as a convalescent home for patients from the Royal Infirmary, Glasgow. It was opened in 1895, and about 75 beds are in more or less constant occupation. It is, however, capable of containing many more.

(4) *Mount Blow Children's Home, Duntocher.*—This is a

recent institution, having been opened in 1922. It is capable of accommodating about 40 children, and is the Child Welfare Home for the City of Glasgow.

(5) *The Ballikinrain Home, Row.*—This institution belongs to the Glasgow Poor Children's Fresh-Air Fortnight and Cripple Children's League, and is at present occupied in the summer by a Boy Scouts' organisation. It was opened in 1892, and has accommodation for 60 children.

(6) *Broomfield Maternity Home, Row.*—This home was opened in 1914, and is mainly for the wives and babies of employees in Yarrow's Shipbuilding Yard. It has accommodation for twelve mothers with their babies.

(7) *The Agnes Miller Wilson Home, Shandon.*—This is another institution belonging to the Glasgow Poor Children's Fresh-Air Fortnight and Cripple Children's League. It was opened in 1895, and has accommodation for 76 children.

(8) *Hillside Home, Clynder.*—This belongs to the Laurelbank School Co., Ltd., Glasgow, and contains 14 beds. It was opened in 1919.

(9) *The Annachmohr Home.*—This is a home connected with the Glasgow Blind Asylum, and is occupied by only a few blind patients at a time.

There are also such institutions as the Buchanan Retreat, Bearsden; the Chapelton Girls' Reformatory, Bearsden; the Woodilee Mental Hospital for Glasgow patients; and the Palacerigg Labour Colony, which is conducted by the Glasgow Distress Committee.

Outbreaks of infectious disease have occurred in nearly all of these institutions at one time or another, although, owing to the extreme care taken by the Glasgow Poor Children's Fresh-Air Fortnight and Cripple Children's League, infectious disease rarely occurs in their institutions.

The following is a summary of the infectious diseases in these institutions, as reported to the Medical Officer's Department for the last five years:—

1920.—*Labour Colony, Cumbernauld.*—Scarlet Fever in May, 1 case; Diphtheria in May, 1 case; both cases removed to Lennox Joint Hospital.

*Woodilee.*—Enteric Fever in December, 1 case, a Mental Nurse, removed to Lennox Joint Hospital.



*Hillside Holiday Home, Clynder.*—Scarlet Fever in October, 4 cases; Pneumonia in December, 1 case.

1921.—*Drumchapel Branch of the Royal Hospital for Sick Children.*—Diphtheria and Scarlet Fever in April and June, 3 cases.

*Palacerigg Labour Colony, Cumbernauld.*—Pneumonia in August, 1 case; patient removed by Glasgow Authorities, without consulting County Health Department, on 25th August.

*Chapelton Reformatory, Bearsden.*—Erysipelas in June, 1 case.

1922.—*Drumchapel Branch of the Royal Hospital for Sick Children.*—Diphtheria in March and June, 3 cases, all removed to Duntocher Hospital. Nurse removed on 24th March, patient removed on 27th March, and another patient removed on 3rd June.

1923.—*Chapelton Reformatory, Bearsden.*—Chickenpox, 1 case, to Duntocher Hospital.

*Hillside Home, Clynder.*—Scarlet Fever, 18th to 25th June, 6 cases, to Dumbarton Joint Hospital.

1924.—*Children's Convalescent Home, Cumbernauld.*—Scarlet Fever, 24th April, 1 case, to Lennox Joint Hospital.

*Drumchapel Branch of the Royal Hospital for Sick Children.*—Scarlet Fever, 4th February, 1 case, to Duntocher Joint Hospital.

*Schaw Home, Bearsden.*—Scarlet Fever, 8th August, 1 case, to Duntocher Joint Hospital.

*Hillside Home, Clynder.*—Measles, September, 5 cases, to Duntocher Joint Hospital.

OUTBREAKS OF INFECTIOUS DISEASE ASSOCIATED WITH GLASGOW.—Apart from the question of infectious disease at institutions, there are almost every summer instances of infection brought from the City of Glasgow, or affecting persons who are on holiday in the County from Glasgow or elsewhere.

As regards those from the city, there are one or two instances in recent years which are of interest—

In 1920 Scarlet Fever broke out at Garelochhead. The first patient affected was a young woman, aged twenty-five years, who was employed and living in Glasgow, at the time

her illness commenced. She had not been at home for some considerable period, and when she felt ill she immediately returned to Garelochhead to her father's house, and developed Scarlet Fever there.

In 1921 two children who had been attending Ibrox Public School came for a holiday to a dairy farm in Dunbartonshire, and after ten days both developed Diphtheria. In spite of all inquiries, no cases of Diphtheria could be discovered in the neighbourhood, and it could only be presumed that the children had been infected before arriving at the farm.

In the same year, two children, who had also been attending Ibrox Public School, were sent to reside in Drumchapel on account of Scarlet Fever being in their house at 3 Church Road, Ibrox, and developed Scarlet Fever at Drumchapel.

All of these children had to be removed and treated in Dumbarton Joint Hospital.

In 1923 a family on holiday in Cumbernauld had to be dealt with on account of pneumonia.

In 1924 a caravan arrived in Alexandria, with the occupants of 8 Bellfield Street, Glasgow. One of the occupants of this caravan developed Erysipelas, and was removed to hospital.

In the same year an outbreak of Scarlet Fever occurred in a Girl Guides' Camp on the Gareloch. Three of the girls were removed to Dumbarton Joint Hospital.

Following on the outbreak at the Girl Guides' Camp, several cases were notified in the district amongst Glasgow visitors, and two maids were removed to hospital for observation.

## EASTERN DISTRICT COMMITTEE.

### HOSPITAL ACCOMMODATION.

GENERAL ARRANGEMENT.—For the purposes of Hospital Accommodation, the Eastern District is divided into two areas.

DUNTOCHER JOINT HOSPITAL.—The first area consists of the Parishes of East and West Kilpatrick Landward, with the Burgh of Milngavie.

Patients from this area are sent to the hospital situated at Hardgate, in the Parish of West Kilpatrick, known as the Duntocher Joint Hospital.

This hospital consists of Administrative Block, Laundry and Ambulance Block, Gate Lodge, and two Pavilions divided

into male and female wards, each with a side room off the ward kitchen. There is also a smaller isolation pavilion.

*Accommodation.*—This hospital was erected in 1903, and is nominally for 24 adult patients, but, as about 80 per cent. of the patients treated are children, a larger number can easily be accommodated. It is of ample size for the population served, as is shown by the fact that during 1923 the largest number in hospital at one time was 17 (Scarlet Fever 15, Diphtheria 1, and Measles 1), while during most of the year the greatest number of patients at any one time did not exceed 10.

During 1924 the highest number of patients under treatment at one time was 27 (Diphtheria 12, Scarlet Fever 9, Enteric Fever 2, Measles 3, Erysipelas 1), while during most of the year the greatest number of patients under treatment at one time did not exceed 16.

The increased number in 1924 was due to the fact that cases were admitted from the Western District and the Burgh of Dumbarton, by arrangement.

*Numbers and Diseases Treated.*—During 1923 the following cases were treated:—Scarlet Fever 27, Enteric Fever 1, Pneumonia 6, Diphtheria 18, Chickenpox 1, Erysipelas 4, Encephalitis Lethargica 2, Tuberculosis 1, Measles 1. Total 61.

During 1924 the following cases were treated:—Scarlet Fever 65, Enteric Fever 5, Pneumonia 5, Diphtheria 26, Chickenpox 1, Erysipelas 6, German Measles 1, Measles 14. Total 123.

The increase in numbers was due to the admission of cases of Diphtheria and Enteric Fever from Dumbarton Burgh and the Western District of the County.

For numbers treated in 1925 see Table XXII.

*Population Served.*—The population (Census) served by the hospital is as follows:—

Parish of West Kilpatrick,	-	-	8,362
Parish of East Kilpatrick,	-	-	5,623
Burgh of Milngavie,	-	-	4,434
Total,	-	-	<hr/> 18,419 <hr/>

Taking the hospital as containing 24 beds, this figure gives one bed to every 770 of the population, which is really in excess of the normal requirements.

**LENNOX JOINT HOSPITAL.**—The second area in the Eastern District consists of the Parishes of Kirkintilloch and Cumbernauld, with the Burgh of Kirkintilloch and the Western District of the County of Stirling.

The hospital for this combination is situated at Milton of Campsie, in Stirlingshire, and is known as the Lennox Joint Hospital.

This hospital consists of Administrative Block, Laundry Block, Ambulance Block, Gate Lodge, and two Pavilions divided for male and female patients, with side rooms off each. There are also two observation wards attached to the ends of, but not communicating with, the Administrative Block.

*Accommodation.*—This hospital was opened in 1900 and contains 24 adult beds, but is capable, as in the case of Duntocher Hospital, of accommodating a larger number of children.

During 1923 the largest number of patients treated at any one time was 38 (Scarlet Fever 18, Diphtheria 19, Tuberculosis 1), while during most of the year the greatest number of patients at any one time did not exceed 15.

During 1924 the largest number of patients treated at any one time was 42 (Scarlet Fever 20, Diphtheria 17, Enteric Fever 1, Tuberculosis 4), while during most of the year the greatest number of patients under treatment at any one time did not exceed 20.

*Numbers and Diseases Treated.*—During 1923 the following cases were treated:—Scarlet Fever 77, Diphtheria 83, Enteric Fever 6, Pneumonia 2, Tuberculosis 10, Measles 1, Chicken-pox 1, Encephalitis Lethargica 1, Puerperal Fever 1. Total 182.

During 1924 the following cases were treated:—Scarlet Fever 110, Diphtheria 123, Enteric Fever 3, Tuberculosis 8, Pneumonia 6, Measles 4, Erysipelas 2. Total 256.

For figures for 1925 see Table XXIII.

*Population Served.*—The population (Census) served by this hospital is as follows:—

Parish of Kirkintilloch, - - -	4,562
Parish of Cumbernauld, - - -	5,261
Burgh of Kirkintilloch, - - -	11,689
Western District of Stirlingshire, -	11,797
	<hr/>
Total, - - - - -	33,309
	<hr/>

Taking this hospital as containing 24 beds, this allows one bed to every 1387 of the population.

The number of beds in this case looks small, but, apart from Kirkintilloch Burgh, the areas of the combining authorities are largely agricultural.

**DUMBARTON JOINT HOSPITAL.**—Although the Dumbarton Joint Hospital is located in the Parish of Cardross in the Western District of the County, and is primarily for the use of the Royal Burgh of Dumbarton and the Western District of the County, patients from the Eastern District may be sent there in times of stress, and *vice versa*. Recently all cases of Diphtheria and Enteric Fever occurring in the Burgh of Dumbarton and the Western District of the County were treated in Duntocher Joint Hospital so as to free more accommodation for Scarlet Fever, which was prevalent at the time in the Western District.

The Dumbarton Joint Hospital consists of Administrative Block, Laundry and Ambulance Block, Gate Lodge, and three Pavilions each divided into two for male and female patients, together with three side wards (one for each pavilion) and two smaller wards attached to, but not communicating with, the Administrative Block.

The hospital contains nominally 44 beds, and was completed in 1901.

For admissions during 1925 see Table XII.

**HELENSBURGH FEVER HOSPITAL.**—This hospital is situated at Helensburgh and belongs to the Town Council of that Burgh, but from time to time cases of infectious disease from the County are treated there by arrangement.

**BLAWARTHILL HOSPITAL.**—This hospital is situated at Yoker, and is a joint hospital between Clydebank Burgh, Renfrew Burgh, and Renfrewshire, but from time to time cases of infectious disease from the County of Dumbarton are treated there by arrangement.

Accommodation outwith the County is provided for County patients by the Local Authorities under the various schemes.

**MOTHERWELL INFECTIOUS DISEASE HOSPITAL.**—An arrangement has been made with the Lanarkshire County Council for the admission of patients suffering from Ophthalmia Neonatorum to their hospital at Motherwell.

OTHER HOSPITAL ACCOMMODATION UNDER MATERNITY SERVICE AND CHILD WELFARE SCHEME.—Under the Maternity Service and Child Welfare Scheme mothers may be accommodated at the Glasgow Royal Maternity and Women's Hospital, either in the Labour Wards, or in the Ante-Natal Wards, at the expense of the Local Authority.

Where a child under five years of age is found to be in need of a change in order to gain health after illness, such child may be sent to any of the Fresh-Air Fortnight Homes at the expense of the Local Authority.

HOSPITAL ACCOMMODATION UNDER V.D. SCHEME.—Under the joint scheme for the treatment of Venereal Diseases, cases may be admitted to various Glasgow institutions, and a charge made to the combining Authorities in accordance with the joint scheme.

## SCHEME FOR MATERNITY SERVICE AND CHILD WELFARE.

### ACTS.

- Notification of Births Act.
- Notifications of Births (Extension) Act.
- Midwives (Scotland) Act, 1915.

### STAFF.

1. Medical Officer of Health.
2. Assistant Medical Officer of Health.
3. Health Visitors (4), who also act as Assistant Supervisors of Midwives.
4. General Practitioners of District for Clinic Work.

### CLINICS.

#### *Eastern District.*

1. Duntocher—Two days a week.
  2. Kilpatrick—Two days a week.
  3. Twechar—One day a week.
- A medical man is in attendance on one day of the week.

#### *Western District.*

1. Alexandria—Two days a week.

## CHILDREN.

NOTIFICATION OF BIRTHS.—The percentage of births notified has been very high. In 1923 it was 97 per cent. of the total number of births occurring in the area.

VISITATION.—The names and addresses at which births occur are transmitted to the Health Visitors daily.

Where a doctor has been in attendance at the birth, the visit is made ten days after the date of birth; where a midwife only has attended, the visit is made at once, advice is given, and periodic visits made thereafter according to the necessities of the case.

Children are visited as required up to school age (five years).

Suitable literature is supplied to parents as appears necessary.

CLINIC WORK.—The Health Visitor advises the mother to bring the child to the clinic when there appears to be any necessity.

Babies are weighed at the clinic, and advice given by the Medical Attendant.

If the child requires medicine, this is supplied at the expense of the Local Authority should the parents be unable to pay.

SPECIAL CLINICS.—Where a child appears to need special treatment for—

- (a) Ear, Nose, or Throat conditions,
- (b) Ocular disease or defect,
- (c) Dental defects,
- (d) Ringworm,

it may be referred to the appropriate Education Authority Clinic, where it is treated under arrangement.

As the Chief Medical Officer for the Education Authority Clinics is the County Medical Officer, the co-ordination is complete.

MILK SUPPLY.—Under special circumstances milk is supplied to children under five years of age, but only when the child is certified by the medical attendant at the clinic as ill and requiring extra nourishment. Where a child resides in the Districts far removed from clinics, the Medical Officer of Health or Assistant Medical Officer of Health certifies the necessity.

The amount allowed is as follows:—

Children under 6 months, not exceeding 1 pint.

Children from 6 months to 5 years, not exceeding 1½ pints.

The scale of financial necessity has been fixed as follows:—

Husband, wife, and one child,	-	£1	6	0
„ „ and 2 children,	-	1	9	6
„ „ „ 3 „	-	1	13	0
„ „ „ 4 „	-	1	16	6
„ „ „ 5 „	-	2	0	0

No allowance of milk is made where the income exceeds £2 unless under very exceptional and peculiar circumstances. Such a case is always decided by the Health Committee.

INSTITUTIONAL TREATMENT.—Where a child is recommended to a hospital in Glasgow or elsewhere for treatment, the parent's railway fare is paid if the case is considered financially necessitous.

Where a child appears to require a residence in a home to promote recovery after illness, arrangements are made with the managers of a suitable home for its admission.

#### MOTHERS.

CLINICS.—Expectant or nursing mothers are invited to come to the clinics to receive advice.

SPECIAL CLINICS.—Should the case appear to warrant it, mothers are sent on to the Ante-Natal Wards of the Glasgow Maternity Hospital, while expectant mothers requiring special treatment are sent to the Ante-Natal Clinic at that Institution.

MILK SUPPLY.—Where the medical attendant at a clinic certifies that an expectant (the last three months of pregnancy) or nursing mother requires extra nourishment owing to ill-health, one to one and a half pints of sweet milk per day are allowed if the financial circumstances of the family warrant it (see scale of necessity).

DENTAL TREATMENT.—Arrangements have been made for the treatment of expectant and nursing mothers by dentists at their own consulting rooms. The scale of charges has been approved, and is set out in full later.

HOME HELPS.—Where a mother requires to go to hospital for treatment, and where there are no relatives or friends who will look after her children in her absence, arrangements may be made by the Medical Officer to supply a home help for a limited period.



**SUPPLY OF MIDWIVES.**—Quite apart from any provision made for treatment under the Midwives (Scotland) Act, 1915, arrangements have been made for supplying a certified midwife at a normal confinement where the parents are out of benefit under the provisions of the National Health Insurance Acts.

**SUPPLY OF INSULIN.**—Insulin may be supplied free or at a modified charge to those suffering from Diabetes on application being made by a registered general practitioner.

#### INFECTIOUS DISEASES.

**MEASLES, PNEUMONIA, WHOOPING COUGH.**—Children suffering from any of these diseases are removed to the infectious disease hospitals when the case requires such treatment, owing to severe illness or unsuitability of home surroundings.

**OPHTHALMIA NEONATORUM.**—Babies suffering from this disease are treated in the hospital at Motherwell by arrangement with the Lanarkshire Authorities. The cost is as follows:—

8s. per day per child, and  
14s. per day where mother is admitted along with  
child.

#### CLOTHING FOR NEWLY BORN BABIES.

From time to time a small sum of money has been available by private subscription, which has been devoted to the supply of necessaries for newly born babies. The scheme is carried out by the nurses, the clothing being supplied at purely nominal prices. Unfortunately no money can be granted from the rates for this purpose. The Nursing Associations from time to time make arrangements for a supply of clothing when it is available. This clothing is allocated from the Needlework Guild.

#### EDUCATIONAL.

The Committee have from time to time arranged for propaganda work to create interest in the subject of Child Welfare. A travelling exhibition was well patronised on one occasion.

Baby and Health Weeks have been held in the Western District.

## SCALE OF DENTAL CHARGES.

	£	s.	D.
SCALING AND GUM TREATMENT (per individual), -	0	4	0
FILLINGS :			
(a) Simple (per filling), - - - - -	0	5	0
(b) Contour (per filling), - - - - -	0	6	0
(c) With root treatment (per tooth), - -	0	12	6
(d) Crown, including all necessary preliminary work, - - - - -	1	1	0
EXTRACTIONS :			
(1) Without anæsthetic (per tooth), - -	0	1	0
With local anæsthetic (per tooth), - -	0	2	6
Maximum for multiple extractions, - -	1	2	6
(2) Under Nitrous Oxide Gas :			
Administrative Fee (only one such fee to be charged for each patient), - -	0	5	0
Fee for each tooth extracted, - - -	0	2	6
Maximum Fee (Including Administration) :			
For Upper <i>or</i> Lower, - - - - -	1	0	0
For Upper and Lower, - - - - -	1	10	0

## NOTES.

1. Where special gum treatment is necessary, a detailed estimate is to be submitted to the Medical Officer of Health for the approval of the District Committee before any work is undertaken.

2. Where a patient desires an anæsthetist to attend and administer the anæsthetic, the patient must make the necessary arrangements and pay the fee to the anæsthetist.

3. Dentures will be supplied where necessary, an estimate of the cost to be first submitted and approved.

4. Patients sent by the Medical Officer will hand to the dentist two forms authorising treatment. These forms have charts on them. Both forms are to be filled up and returned to the Medical Officer of Health, and one of them will be used as an account form.

CO-ORDINATION OF MEDICAL SERVICES IN  
DUNBARTONSHIRE.

THE COUNTY MEDICAL OFFICER.—The County Medical Officer of the County of Dunbarton carries out duties in connection with the pollution of rivers under the Rivers Pollution Acts; the pollution of navigable waters with oil, under the Oil in Navigable Waters Act, 1922; and the pollution of the Coast

Line with dredging deposits. Further, in conjunction with the Burghs in the County (except the Royal Burgh of Dumbarton), he acts as Medical Officer to the Blind Persons Committee for the purpose of the administration of the Blind Persons Act, 1920. For the purpose of this Act, each District and Burgh has appointed a Health Visitor to furnish reports to the Medical Officer regarding blind persons intimated to him.

**DISTRICT MEDICAL OFFICER OF HEALTH.**—The County Medical Officer is also the District Medical Officer of Health, and controls all work done in connection with the General Public Health, Tuberculosis, Child Welfare, and the Treatment of Venereal Disease in his own areas. An assistant carries out the executive work in connection with the Tuberculosis Scheme, and assists generally in the administration of the Child Welfare Work and General Public Health. For the purposes of administration in connection with Child Welfare, Tuberculosis, and other Health matters, the District Committees have appointed four Health Visitors to work under the direction of the Medical Officer of Health. The Medical Officer of Health is also Supervisor of Midwives under the Midwives (Scotland) Act, 1915, and the four Health Visitors have been appointed Assistant Supervisors.

**SUPERVISING SCHOOL MEDICAL OFFICER.**—When the Medical Inspection of School Children was commenced in 1911, the County Medical Officer was appointed Supervising School Medical Officer, with two medical assistants to carry out the executive part of the work. After a few years' experience it was found that it would be a great advantage to appoint these Medical Assistants as Assistant Medical Officers of Health, in order that they might have a status in relation to the following up of infectious disease in the homes of the children. The District Committee have carried this proposal into effect, which further links up the medical services. At the present time the Supervising School Medical Officer's Staff consists of—

Medical Assistants (whole time),	-	-	-	-	2
Dentists (whole time),	-	-	-	-	3
Dentist (part time),	-	-	-	-	1
Oculist (part time),	-	-	-	-	1
Ear, Nose and Throat Specialist (part time),	-	-	-	-	1
Dermatologist for X-ray work (part time),	-	-	-	-	1
School Nurses (whole time),	-	-	-	-	6
Dental Attendants (whole time),	-	-	-	-	2
Nurse Attendants for Physically and Mentally Defective Children (whole time),	-	-	-	-	2

It has been found possible to open the School Clinics to all children, irrespective of age, and this arrangement has been made not only with the District Committees, but with the Public Health Committees of all the Burghs (of which there are six) in the County. By this arrangement it is possible to send children attending Child Welfare Clinics—there are Child Welfare Clinics in both Districts and in five of the Burghs (the other Burgh being a residential place of only about 820 inhabitants)—for treatment to the School Clinics which deal with diseases of the ear, nose, and throat, dental defects, and eye defects and diseases, as well as treating ringworm by either the ethyl chloride method or by X-rays.

CO-OPERATION WITH THE GENERAL PRACTITIONERS.—In all areas in proximity to clinics, both for pre-school children and children of school age, the general practitioners are appointed in turn to assist as anæsthetists in the School Clinics, and in the actual work of the examination of the children in the case of the Child Welfare Clinics.

SANITARY INSPECTOR'S DEPARTMENT.—In the foregoing the Medical Officer's Department only has been mentioned. In the County of Dunbarton the Sanitary Inspector's Department is distinct and separate, but there is the very closest co-operation between the services. This close co-operation also exists between the Sanitary Inspector and the Medical Officer and the County Housing Department.

HOSPITAL SERVICE.—There is only one further service which must be referred to, and that is the Fever Hospital Service. The Fever Hospitals, three in number, to which patients are sent from the County Districts, are open to inspection at any time by the Medical Officers of Health of the combining Authorities, and it is of importance to note that these three hospitals, although governed by different bodies, co-operate in dealing with the patients in the whole County area, landward, and the combining Burghs; that is to say, if one hospital becomes overcrowded, an arrangement is immediately made to transfer patients to another hospital. This simplifies the Fever Services' work enormously, and makes the whole service very much more elastic than it would be otherwise. One might even go further, because the hospitals controlled by the Burgh of Helensburgh and in part by the Burgh of Clydebank will, when required and if accommodation is available, co-operate with the Landward Districts of the County or other Burghs outwith their combination in dealing with patients suffering from infectious disease where the hos-

pital for the District is unable to afford the necessary accommodation; *vice versa*, the hospitals of the Landward Districts from time to time deal with Burgh cases where their hospitals are unable to cope with the number of cases notified.

CO-ORDINATION WITH SMALL BURGH.—The County Medical Officer further acts as Medical Officer of Health for one of the smaller Burghs in the County, and there is no doubt that an arrangement of this kind is of advantage not only to the Burgh concerned, but also to the County administration.

## PART II.—THE DISTRICTS.

### WESTERN DISTRICT.

#### VITAL STATISTICS.

POPULATION.—The Registrar-General's estimate of the population as at the middle of 1925 was 30,660, an increase of 788 when compared with last year's estimate. The figure prepared in this office shows an increase of 144 over the corresponding figure for last year; the estimate is 30,812, and the details are set forth in Table II.

BIRTHS.—The number of births allocated to the Western District in 1925, after correction for transfers, was 557, as against 580 in 1924. This is the lowest recorded number for the district. The rate per 1000 of the population, namely, 18.2, was also 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 1925 was 404, as against 383 in 1924. The death-rate per 1000 of the population was 13.2, as against 12.8 in 1924. The chief causes of death were—Cancer, 58; Heart Disease, 57; Apoplexy, 36; Bronchitis, 34; Pneumonia, 23; Tuberculous Diseases, 22. Twenty-one persons over the age of 85 died during the year.

The number of deaths from Pulmonary Tuberculosis during the year was 16. This number is equivalent to a death-rate of .52 per 1000 of the population, as against .50 in 1924 and .59 in 1923. The deaths from Non-Pulmonary Tuberculosis numbered 6. This number produces a death-rate of .19, as against .17 in 1924 and .63 in 1923. These rates show that the improvement noted during 1924 is being fairly well maintained.

#### INFECTIOUS DISEASE.

There were 331 cases of infectious disease notified during 1925, as against 515 in the previous year.

Scarlet Fever was still prevalent in the Vale of Leven

TABLE VIII.—COUNTY OF DUNBARTON—WESTERN DISTRICT—STATEMENT SUPPLIED BY THE REGISTRAR.—GENERAL GIVING VITAL STATISTICS FOR 1925.

NUMBERS.		RATE PER 1000 OF ESTIMATED POPULATION.	
Births	(Corrected for Transfers), -	557	Birth Rate (Corrected for Transfers), -
Do. Illegitimate ( do. ), -	-	28	Marriage Rate (Uncorrected), -
Marriages (Uncorrected), -	-	178	Death Rate—All Causes ( do. ), -
Deaths ( do. ), -	-	359	Do. do. (Corrected for Transfers),
Do. (Transferred Out), -	-	12	Do. do. (Corrected for Transfers and adjusted for Age and Sex Distribution), -
Do. (Transferred In), -	-	57	Do. —Tuberculosis, Respiratory System (Corrected for Transfers), -
Do. (Corrected), both Sexes, -	-	404	Do. —All Tuberculosis (Corrected for Transfers), -
			Do. —Principal Epidemic Diseases (Corrected for Transfers), -
			18.2
			5.8
			11.7
			13.2
			13.2
			0.52
			0.72
			0.88

Population—Census 1921, 30,340; estimated to middle of 1925, 30,660.

Infantile Mortality Rate (Deaths of Children of under One Year per 1000 Births), corrected—72.

Illegitimate Rate (Illegitimate Births per 100 Total Births), corrected for Transcripts—5.0.

TABLE IX.—COUNTY OF DUNBARTON.—WESTERN DISTRICT.—STATEMENT OF CAUSES OF DEATH  
(Corrected for Transfers) FOR 1925, 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	4	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, . . . . .	7	4	3	...	...	...	...	...	...	...	...	...	...	...	...
Whooping-cough, . . . . .	9	5	4	1	...	...	...	...	...	...	...	...	...	...	...
Diphtheria, . . . . .	4	3	1	1	...	...	...	...	...	...	...	...	...	...	...
Influenza, . . . . .	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica, . . . . .	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis, . . . . .	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases, . . . . .	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Respiratory System), . . . . .	16	6	10	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis, . . . . .	2	1	1	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Abdominal), . . . . .	3	2	1	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases, . . . . .	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Malignant Tumours, . . . . .	58	22	36	...	...	...	...	...	...	...	...	...	...	...	...
Rheumatic Fever, . . . . .	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis, . . . . .	3	2	1	1	...	...	...	...	...	...	...	...	...	...	...
Apoplexy, . . . . .	36	20	16	...	...	...	...	...	...	...	...	...	...	...	...
Heart Disease, . . . . .	57	26	31	...	...	...	...	...	...	...	...	...	...	...	...
Disease of Arteries, . . . . .	5	4	1	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis, . . . . .	34	15	19	2	5	1	...	...	...	...	...	...	...	...	...
Pneumonia, . . . . .	23	14	9	6	10	...	...	...	...	...	...	...	...	...	...
Other Diseases of Respiratory System, . . . . .	10	5	5	1	1	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis (under 2 years), . . . . .	4	2	2	3	1	...	...	...	...	...	...	...	...	...	...
Appendicitis, . . . . .	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant), . . . . .	7	5	2	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis (Acute and Chronic), . . . . .	6	4	2	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Sepsis, . . . . .	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Other Diseases and Accidents of Pregnancy and Parturition, . . . . .	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Early Infancy and Malformation, . . . . .	18	12	6	17	1	...	...	...	...	...	...	...	...	...	...
Suicide, . . . . .	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Violent Deaths, . . . . .	15	13	2	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, . . . . .	69	30	39	6	3	2	...	...	...	...	...	...	...	...	...
Ill-defined or Unknown, . . . . .	6	1	5	...	...	...	...	...	...	...	...	...	...	...	...
All Causes, . . . . .	404	201	203	40	42	11	4	16	9	24	46	61	64	66	21



area at the beginning of the year, but gradually the notifications diminished in number. For the most part the cases were of a mild nature, seven deaths occurred, but only two of these deaths were due to Scarlet Fever alone; of the other five, two were complicated with Measles and Bronchitis and two with Meningitis, while in one case tuberculous abscesses appeared to be a contributory cause of death.

There were 35 cases of Diphtheria notified in 1925, as against 11 in the preceding year, all but 6 of these cases occurred in the Vale of Leven area. During the first eight months of the year only 9 cases had been notified, these were apparently sporadic cases, as no connection between them could be traced. At the beginning of September the Glasgow Public Health Department intimated that, on inquiry into a case of Diphtheria in the city, it was ascertained that the patient, a child, had recently returned home from the Agnes Miller Wilson Home, Shandon. A visit was at once paid to the home, and throat swabs were taken from all the inmates, 44 of whom were children, and it was discovered that no fewer than four of the children had diphtheria bacilli in their throats. These children were removed to hospital and the home put in quarantine. It was afterwards discovered that one of these children had been admitted to the home suffering from Otorrhoea; the ear discharge, on examination, was found to contain diphtheria bacilli, and on inquiry in Glasgow it was ascertained that a brother of the patient had died of Diphtheria. Although it could not be definitely proved, it would appear as if this child had been the source of the outbreak.

On 9th September a case of Diphtheria was notified, which once more directed my attention to the danger of the sale of sweets and other eatables from premises which are in reality dwelling-houses, one apartment of which is used as a shop. In this instance the patient, a child of ten years, resided with her mother, grandmother, and four other children in two small back rooms, the front room being fitted up as a shop for the sale of sweetmeats, &c. There was, as is usual in such premises, direct communication between the shop and house. I deemed it necessary to take charge of all food actually exposed to the risk of infection; this consisted for the most part of chocolate, the value of which was about twenty shillings. The shop was closed until the results of throat swabs from the family were obtained, and, as they proved negative, no further action was required. Unfortunately there is no power in the Public Health Act to prohibit the sale of confections and other articles of food from such premises.

For nearly a month after this case no Diphtheria occurred, but at the beginning of October a new source of infection presented itself by the notification of a case from a dairy farm, the patient being the milkmaid. Everything was at once done to minimise the chance of an outbreak from this source, and none of the following cases could be definitely traced to milk from this farm. Between 12th October and 31st December 19 further cases were notified, 17 from various parts of Alexandria, Bonhill, and Jamestown, one from Renton, and one from an isolated house on Loch Long. In only one or two instances could any connection between patients be traced, and no definite source of infection could be detected.

Four cases of Typhoid or Paratyphoid Fevers were reported. These cases had no association one with the other. Of the three cases, notified as Enteric Fever, two were genuine and gave a positive Widal reaction. One of these patients was associated with the sale of shellfish in Glasgow, but, after careful inquiry, the actual source of infection could not be ascertained. The other patient appeared to have become infected outwith the district. The non-genuine case was removed to hospital from a farm as a suspected case, but the diagnosis was there reviewed and the patient sent to the Samaritan Hospital for treatment. The fourth case was found to be suffering from Paratyphoid (A) Fever; the source appeared to be outwith the district, as the patient had been nursing a relative in a neighbouring burgh. This relative had had very similar symptoms, but was diagnosed as Influenza.

As regards other infectious diseases, one case of Cerebro-spinal Meningitis was notified from the Kilmarnock Parish. The patient was a baby of one year, who had come with his mother and other members of the family to reside in the District only six weeks previously. The family had come from Canada, but three years ago were residing in Stirling Burgh, where the father worked as a coal miner; at that time a brother of the patient was notified as suffering from the same disease and recovered. The patient notified to us showed typical symptoms of the disease, but eventually recovered. It was arranged for a swab to be taken from the child who had had the disease in Stirling, but the result was entirely negative. There was a large increase in the number of primary Pneumonia cases notified, but there was an almost corresponding decrease in the number of Influenzal Pneumonias. Nearly half of all the cases were notified by one Medical Practitioner, so it would appear possible that a great many cases are still unnotified.

Thirty-six cases of Pulmonary Tuberculosis (19 males and 17 females) were notified during the year; before the end of the year 11 of these had died, and one had left the district; in five cases the diagnosis was not verified, and four were still under observation as doubtful. Fifteen of the cases were sent to sanatoria for treatment, and four received domiciliary treatment.

Thirty-four cases of Non-Pulmonary Tuberculosis (15 males and 19 females) were notified during the year, and by 31st December 5 had died; in two cases the diagnosis was not verified, and four were still under observation as doubtful. Five cases were sent to institutions for treatment, and two received domiciliary treatment.

### HOSPITAL ACCOMMODATION.

Owing to the continuance of the outbreak of Scarlet Fever in the Western District, the Diphtheria and Enteric Fever wards were not made available for these diseases until the end of the first week of May. This also applied to the ward used for Tuberculosis, which is in reality the overflow Scarlet Fever Pavilion.

Although the cases of Diphtheria and Enteric Fever which occurred between September, 1924, and May, 1925, from both the Burgh of Dumbarton and the Western District, were accommodated in other hospitals in the county, it was not possible to find vacancies for all the tuberculous patients who, in consequence, had to be sent home. One of the reasons for this was, of course, the fact that many of the patients were unsuitable for institutions (such as the Bridge of Weir Sanatorium) which admit only fairly early cases. It is at times such as these that the need for a sanatorium in the county becomes obvious.

The hospital was visited from time to time during the year. The arrangements for the conveyance of patients remain satisfactory. The disinfecter is in a satisfactory condition.

Dr. J. Kerr Love, Glasgow, has been appointed to advise as to the treatment of throat and ear diseases complicating the ordinary infectious fevers.

### WATER SUPPLY.

The only public water supply regarding which complaints were received during the year was that at Cardross. In June a number of the consumers at the east end of the supply area complained of the undue amount of suspended material present, especially when the water was drawn off in the morn-

TABLE X.—WESTERN DISTRICT.  
 CASES OF INFECTIOUS DISEASE COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER  
 DURING THE YEAR 1925.

PARISH.	Cerebro-Spinal Fever.	Typhoid and Paratyphoid Fever.	Scarlet Fever.	Diphtheria and Mem. Croup.	Erysipelas.	Puerperal Fever.	Primary Pneumonia.	Influenzal Pneumonia.	Ophthalmia Neonatorum.	Pulmonary Tuberculosis.	Other Tuberculosis.	Totals.
Arrochar, -	...	1	...	1	...	...	...	...	...	2	...	4
Bonhill, -	...	...	89	27	19	2	30	10	2	18	23	220
Cardross, -	...	2	22	2	8	...	10	9	...	7	8	68
Dunbarton, -	...	...	...	...	...	...	...	...	...	...	...	...
Kilmarnock, -	1	...	3	...	1	...	...	1	...	2	...	8
Luss, -	...	...	2	...	...	...	...	...	...	2	1	5
Rosneath, -	...	...	3	...	...	...	...	...	...	...	1	4
Row, -	...	1	7	5	3	...	...	...	...	5	1	22
Totals, -	1	4	126	35	31	2	40	20	2	36	34	331
Removed to Hospital, -	...	4	109	28	3	1	2	...	...	15	5	167
Percentage removed to Hospital, -	...	100	86.5	80.0	9.7	50.0	5.0	...	...	41.6	14.7	50.4

TABLE XI.—WESTERN DISTRICT.  
VACCINATION.—CONSCIENTIOUS OBJECTIONS, 1925.

PARISH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Dunbarton,	...	...	...	...	...	...	...	...	...	...	...	...	...
Cardross,	...	...	...	1	...	...	...	1	...	1	...	1	4
Bonhill,	17	9	9	14	14	18	19	16	13	8	14	12	163
Kilmarnock,	...	...	...	...	...	...	...	...	...	...	...	...	...
Row,	...	...	...	...	1	...	...	...	...	1	...	...	2
Rosneath,	...	...	...	...	...	...	...	...	...	...	...	...	...
Luss,	...	...	...	...	...	...	...	...	...	...	...	...	...
Arrochar,	...	...	...	...	1	...	...	...	...	...	...	...	1
Renton,	9	6	8	7	5	4	9	5	5	7	8	7	80
Total,	26	15	17	22	21	22	28	22	18	17	22	20	250

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.	BOTH
<i>Scarlet Fever.</i>																	
Recovered, -																	
Remaining, -	34	24	24	34	9	24	3	12	2	1	...	...	...	...	72	95	167
Died, -	3	3	3	4	...	3	...	2	...	1	...	...	...	...	6	13	19
<i>Enteric Fever.</i>																	
Recovered, -	...	...	...	1	...	1	1	1	...	...	...	...	...	...	1	4	5
Remaining, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Died, -	...	...	...	...	...	...	1	1	...	...	...	...	...	1	1	...	2
<i>Diphtheria.</i>																	
Recovered, -	5	7	3	6	3	6	...	...	...	...	...	...	...	...	11	19	30
Remaining, -	3	1	...	1	...	1	...	...	...	...	...	...	...	...	3	3	6
Died, -	3	...	...	1	...	...	...	...	...	...	...	...	...	...	3	1	4
<i>Pulmonary Tuberculosis.</i>																	
Discharged, -	...	...	3	1	2	2	...	4	2	1	...	...	...	2	9	8	17
Remaining, -	1	...	2	...	1	2	1	2	1	...	...	...	...	1	7	4	11
Died, -	...	...	...	...	1	4	2	...	1	1	...	...	...	2	6	5	11
<i>Erysipelas.</i>																	
Recovered, -	...	...	...	...	3	...	1	...	2	1	...	...	...	1	7	2	9
<i>Measles.</i>																	
Recovered, -	1	1	...	...	...	1	1	...	...	...	...	...	...	2	2	2	4
Remaining, -	2	1	1	2	...	5	...	...	...	...	...	...	...	3	8	11	11
<i>Puerperal Fever.</i>																	
Recovered, -	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	1
Died, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
<i>Pneumonia.</i>																	
Died, -	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	1
Totals, -	55	39	37	51	19	49	9	23	9	7	...	...	7	1	136	170	306

ing. It appeared on inquiry that, owing to a desire to conserve the supply, the water was being shut off at stated intervals, and this action undoubtedly stirred up deposits in an old section of pipe supplying the houses referred to. The analysis set out in Table XIII. does not show the amount of suspended matter, which was as follows:—Screened water at source, none; new Police Station (west end of supply), .83; Ardenvohr, 1.56; Kilmahew, 2.93. The amounts are in grains per gallon. The suspended matter was almost entirely mineral matter of a clayey nature.

Four samples were taken from sources used by campers. Three of these were on the foreshore between Ardmore and Craigendoran; two of these appeared to be unpolluted, while one contained a small amount of nitrates, indicating some distant pollution. The fourth sample was from a camping ground near Balloch.

My attention was recently directed to a public drinking place in a field between Dumbarton and Renton. The appearance of this place was most unsavoury, and there could be no doubt that the water was liable to serious pollution. The analysis, as will be seen from Table XIII., showed actual evidence of pollution. After some correspondence with the owner, this supply was discontinued and the access closed up. The actual report submitted to the Western District Committee was as follows:—

#### REPORT ON PUBLIC WATER SUPPLY ON THE ROADSIDE BETWEEN DUMBARTON AND RENTON.

My attention having been directed to a place where the public can obtain water for drinking purposes, I thought it my duty to take a sample for analysis, a copy of which is attached.

This drinking place is situated a few yards on the Renton side of the road which crosses the railway near Dalreoch Quarry. It is at a lower level than the main road, from underneath which the water comes. I am not sure of the exact source, but it is quite possible that it comes from the quarry on the other side of the road. An access for the public has been left at this spot, and recently a post has been put in by Mr. Andrew in order to keep cattle from getting out of the field. This means, of course, that the cattle have access to the drinking place, and, as it is flush with the ground, it is liable to be polluted by them.

The surroundings of this source of supply are extremely filthy, and at the time of my visit there were several pieces of dirty paper in the water.

TABLE XIII.—WESTERN DISTRICT—WATER ANALYSES (IN GRAINS PER GALLON), 1925.

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.	Iron.
1925.														
Mar. 30	Mansfield, Gartocharn (New Well),	11.36	.40	11.76	.26	.001	.004	.005	6.45	3.16	9.61	...	1 to 115	...
Mar. 30	Mansfield, Gartocharn (Old Well),	7.50	.35	7.85	.20	.002	.005	.007	3.72	2.04	5.76	...	1 to 155	...
May 25	Burn on north side of Gamekeeper's House, Stonemollan Road, -	4.48	.64	5.12	...	.001	.008	.009	1.75	1.64	3.39	...	...	...
May 25	Ditch on foreshore, Camiseskan, -	19.01	.30	19.31	.30	.002	.009	.011	8.40	5.86	14.26	...	1.95	...
May 25	Fireclay pipe, foreshore, North Lodge, Camiseskan, -	14.82	.35	15.17	trace	.001	.006	.007	8.75	3.52	12.27	...	...	...
July 6	Cardross, Screening House, Public Supply, -	7.93	.48	8.41	...	.002	.008	.010	5.42	.71	6.21	...	...	...
July 6	Cardross, Police Station, -	7.95	.50	8.45	...	.002	.007	.009	5.42	.73	6.15	...	...	...
July 6	Cardross, Ardenvoehr, -	7.98	.49	8.47	...	.002	.007	.009	5.46	.74	6.20	...	...	...
July 6	Cardross, Kilmahew Castle, -	7.98	.50	8.48	...	.002	.008	.010	5.46	.72	6.18	...	...	...
July 8	Open Conduit, foreshore, near Keppoch Lodge, -	8.73	.30	9.03	...	.001	.005	.006	6.29	.83	7.12	5	...	...
Sept. 3	Bromley Hospital, Alexandria, -	6.54	.60	7.14	...	.001	.007	.008	3.50	1.38	4.88	15	...	...
Sept. 3	Public Drinking Place, near Dalreoch Quarry, -	9.92	.30	10.27	.61	trace	.008	.008	4.48	3.21	7.69	...	1 to 43	...

\* 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.



The analysis shows that the water is really a mixture of 43 parts pure water to one part sewage, and I am of opinion that this water should no longer be used for drinking purposes, and that the source should be closed up. I am further of opinion that this supply can be dealt with under Section 16, Sub-section (3), of the Public Health (Scotland) Act.

### DRAINAGE AND SCAVENGING.

The drainage of the Vale of Leven area was under consideration during the year, but no definite finding was come to. There can be no doubt that a comprehensive drainage scheme would be of great benefit to the community, as it would permit of the abolition of the dry closets which are in use at the present time.

There was no change during the year in the arrangements for drainage in the Western District.

As regards scavenging, the question of a suitable place for the disposal of the refuse from the Vale of Leven Special Scavenging District was repeatedly discussed, but up to the end of the year no solution of the problem had been found. The disposal works at Pillanflat were inspected on several occasions and were considered satisfactory.

### MATERNITY SERVICE AND CHILD WELFARE.

The general arrangements for the carrying out of the scheme have not been materially altered during the year.

The provision of an additional clinic at Renton and of new Clinic premises at Alexandria having been approved, search for suitable sites was made, but, owing to numerous difficulties, definite sites had not been fixed on at the end of the year. It is probable, however, that suitable and available sites will soon be found.

### ANNUAL RETURNS FOR BOARD OF HEALTH.

A great number of the particulars required by the Board of Health to be given in connection with Maternity Service and Child Welfare Scheme are already to be found in various portions of the Report. It is, however, necessary to add the following particulars and tables in order to comply fully with the requirements:—

*Special Treatment Centres.*—There are no Special Treat-

ment Centres owned by the Local Authority, but during 1925, by arrangement with the Education Authority, four children were sent to the Education Authority Dental Clinic at Dumbarton for treatment, two were treated at the Eye Clinic, while 12 were attended to by Dr. Kerr Love in connection with tonsils, adenoids, or ear conditions.

*Food and Milk.*—During the year 101 applications for milk were received, 51 in respect of mothers and 50 in respect of children. Forty-one applications in the case of mothers and a similar number in respect of children were granted. In no case 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 £101 2s. 4d. 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 three children died of this disease, in each case the fatal issue was caused by Broncho-Pneumonia. No cases were admitted to hospital.

*Whooping Cough.*—Nine children died from Whooping Cough during the year; two were from Whooping Cough without any apparent complication. In four instances the disease was complicated with Broncho-Pneumonia, and in one case each with Convulsions, Tuberculous Meningitis, and Acute Dilatation of the Heart. One case was removed to Duntocher Hospital.

*Maternity Hospitals or Homes.*—During the year seven women from the Western District were treated in the Ante-Natal Wards of the Royal Maternity Hospital, Glasgow, and twelve notifications of births were received from that institution.

*Homes and Hospitals.*—One child was sent under the Child Welfare Scheme to the Biggart Memorial Home, Prestwick, by arrangement with the Glasgow Poor Children's Fresh-Air Fortnight and Cripple Children's League.

*Assistance at Confinements.*—Under the scheme for the provision of skilled assistance at confinements, 61 applications for the provision of a midwife were received during the

year; 29 of these were granted, 30 were refused, and in two cases part payment was made.

*Tables.*—The tables necessary to comply with the Board's circular are numbered XIV., XV., and XVI.

#### HEALTH AND BABY WEEK.

It had been hoped that the scope of Health Week might have been increased in 1925; unfortunately, however, owing to circumstances which were not associated with the Medical Officer's Department, the programme had to be confined to Alexandria.

The Education Authority co-operated as in former years, and Health Talks were given in all schools in the area.

On 28th September, in the Empire Theatre, the County Medical Officer gave an address, entitled "What Happens to Our Food." The subject was dealt with in a popular way, the object being to impress on the audience the necessity for pure food, water, air, and sunlight for the building up of a healthy body.

On 30th September, in the same theatre, Mr. A. C. S. Martin, L.D.S., dentist to the Education Authority, gave a lecture on "Teeth and How to Take Care of Them." This was followed by a film on the same subject.

On Thursday, 1st October, Miss J. B. N. Paterson, S.R.N., A.R.S.I., gave an illustrated lantern lecture on "How to Obtain the Best Results with Plants, Animals, and Human Beings." There was a fairly good audience. The lecture was a most interesting one, and was very much appreciated by those present. Miss Paterson gave an address to mothers on Friday, 2nd October, entitled "Your Home and Family." There was a satisfactory audience.

Taken as a whole, the interest shown in Health Week in 1925 was very disappointing, and it is very doubtful whether the expenditure of time and energy is compensated for by the results obtained.

#### MIDWIVES (SCOTLAND) ACT, 1915.

There are 18 midwives practising in the District. Of these, 12 have no qualification other than that they were in practice before the passing of the Midwives (Scotland) Act, 1915. Of the others, one was in practice in 1914, but has since qualified by examination and the five others are qualified by examination either in Scotland or England.

TABLE XIV.—WESTERN DISTRICT.  
HOME VISITATION.

PARTICULARS.	VALE OF LEVEN AREA.	REST OF DISTRICT.
Number of Births intimated to Health Visitor during year, - - - - -	285	201
Number of First Visits— - - - -	392	267
To Children under 1 year, -	339	190
To Children from 1 to 5 years,	—	22
To Expectant Mothers, - -	53	55
Number of Re-visits— - - - -	2946	2493
To Children under 1 year, -	1198	544
To Children from 1 to 5 years,	1717	1911
To Expectant Mothers, - -	31	38
Number of Visits to Midwives, - - -	46	50
Number of Visits of Special Inquiry, - -	40	32
Number of Visits to Tuberculous Cases, - -	63	121
TOTAL VISITS, - - - - -	3487	2963
Feeding of Children of 6 months—		
Breast Fed, - -	141	100
Partially Breast Fed,	40	12
Artificially Fed, -	136	73
Number of Infants born prematurely, - -	15	4
Number of Infants born at full time, - -	324	186
Expectant Mothers who consulted doctors or ante-natal clinics, - - - - -	14	18

TABLE XV.—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, -		50
Ante-natal Consultations—		
Total Attendances, - - -		41
First Attendances, - - -		21
Referred to Ante-natal Wards, Maternity Hospital, -		1
Referred to family doctor, - - - - -		—
Treated at Clinic, - - - - -		20
Post-natal or other Consultations, - - - - -		150
Child Welfare Consultations—		
Total Attendances—Under 1 year, - - - - -		599
Over 1 year, - - - - -		411
First Attendances—Under 1 year, - - - - -		177
Over 1 year, - - - - -		83
Attendances in connection with Milk Applications, - - -		225
DISEASES RECORDED ON CHILD WELFARE CLINIC CARDS—		
<i>General Conditions—</i>		<i>Alimentary Diseases—continued.</i>
General Debility, - - - - -	9	Other Intestinal Conditions, -
Anæmia, - - - - -	2	Hernia, - - - - -
Rickets, - - - - -	3	Stomatitis, - - - - -
Eye Conditions, - - - - -	13	Conditions relating to feeding, -
Throat, Nose, and Ear Conditions—		Malnutrition, - - - - -
Sore Throat, - - - - -	5	Prolapse of bowel, - - - - -
Tonsils and Adenoids, - - - - -	6	Thread worms, - - - - -
Other Nasal Conditions, - - - - -	3	Conditions affecting Umbilical
Ear Diseases, - - - - -	6	Cord, - - - - -
Tongue-tie, - - - - -	8	Phimosis, - - - - -
Dental Conditions, - - - - -	2	Bladder Conditions, - - - - -
Teething, - - - - -	6	
Tuberculous Conditions, - - - - -	1	<i>Skin Diseases—</i>
Enlarged Glands, - - - - -	3	Ringworm, - - - - -
Respiratory Diseases, - - - - -	16	Septic Sores, - - - - -
Congenital Malformations, - - - - -	2	Eczema, - - - - -
Paralysis, - - - - -	1	Nævus, - - - - -
Alimentary Diseases—		Other skin diseases, - - - - -
Diarrhoea, - - - - -	5	No special cause, - - - - -
		Attendances for weighing only, -
		64
The above are the diseases, &c., noted at first attendances, and the total agrees with the figure shown in the table above.		

TABLE XVI.—WESTERN DISTRICT.  
MATERNITY SERVICE AND CHILD WELFARE.  
CAUSES OF DEATH—CHILDREN UNDER ONE YEAR.  
YEAR 1925.

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	...	...	...	...	1
Diphtheria and Croup, - - -	...	...	...	...	...	1	...	...	...	1
Erysipelas, - - -	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis, - - -	...	...	...	...	...	...	...	1	...	1
Abdominal Tuberculosis, - - -	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases, - - -	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous), - - -	...	...	...	...	...	...	...	1	...	1
Hydrocephalus, - - -	...	...	...	...	...	...	...	...	...	...
Convulsions, - - -	2	...	...	...	2	1	...	...	1	4
Pneumonia (all forms), - - -	...	...	...	...	...	2	...	1	3	6
Bronchitis, - - -	...	1	...	...	1	...	1	...	...	2
Diarrhoea and Enteritis, - - -	...	...	...	...	...	1	...	2	...	3
Other Digestive Diseases, - - -	...	...	...	...	...	...	...	...	...	...
Congenital Malformations, - - -	1	...	...	1	2	...	...	...	...	2
Congenital Heart, - - -	...	...	...	...	...	1	...	...	...	1
Premature Birth, - - -	10	...	...	...	10	...	...	...	...	10
Atrophy, Debility, and Marasmus, - - -	2	...	...	...	2	2	...	...	...	4
Atelectasis, - - -	...	...	...	...	...	...	...	...	...	...
Injury at Birth, - - -	...	...	...	...	...	...	...	...	...	...
Suffocation, overlaying, - - -	...	...	...	...	...	...	...	...	...	...
Syphilis, - - -	...	...	...	...	...	...	...	...	...	...
Rickets, - - -	...	...	...	...	...	...	...	...	...	...
All other causes, - - -	...	...	...	...	...	1	...	2	...	3
Total, - - -	15	1	1	1	18	9	1	7	5	40

The following gives the details of the Annual Report on the working of the Act during the year 1925 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 1925, - -	540
Actual number of births attended by midwives during 1925, - - - - -	358
Total number of deaths of new-born children (within ten days) during 1925, - - - - -	16
Actual number of deaths of new-born children (within ten days) occurring in the practice of midwives during 1925, - - - - -	5
Actual number of cases not attended by a doctor or midwife during 1925, - - - - -	Births, 1 Deaths, Nil.

In addition to the above figures twelve notifications were received of births which occurred in institutions outside the District, and of these five were still-births.

##### CASES OF OPHTHALMIA NEONATORUM:—

Total number of cases during 1925, - - - - -	2
Actual number of cases occurring in the practice of midwives during 1925, - - - - -	1
Actual number of cases occurring where confinement not attended by a doctor or midwife during 1925, -	Nil.

##### CASES OF PUERPERAL SEPSIS:—

Total number of cases during 1925, - - - - -	2
Total number of deaths during 1925, - - - - -	2
Actual number of cases occurring in the practice of midwives during 1925, - - - - -	1
Actual number of deaths occurring in the practice of midwives during 1925, - - - - -	1
Actual number of cases occurring where confinement not attended by a doctor or midwife in 1925, - - - - -	Cases, Nil. Deaths, Nil.

##### CASES OF STILL-BIRTH (DEAD-BORN):—

Total number of cases during 1925, - - - - -	28
Actual number of cases occurring in the practice of midwives during 1925, - - - - -	11

## CASES OF EMERGENCY :—

In 52 instances midwives requiring the assistance of a medical practitioner sent in the statutory forms.

The emergencies were as follows:—

Dropsy during pregnancy, - - - -	1
Convulsions during pregnancy, - - - -	1
Abdominal pain, - - - -	1
Ante-partum hæmorrhage, - - - -	1
Placenta prævia, - - - -	1
Delay in labour, - - - -	27
Persistent occipito-posterior presentation, - - - -	3
Prolapse of cord, - - - -	1
Retained placenta, - - - -	2
Post-partum hæmorrhage, - - - -	1
Rise in temperature, - - - -	2
Suppuration of breasts, - - - -	1
Weakness of mother, - - - -	2
Still-birth, - - - -	1
Still-birth (macerated fœtus), - - - -	1
Feebleness of baby, - - - -	2
Convulsions of baby, - - - -	1
Baby unable to pass urine, - - - -	1
Inflammation of baby's eyes, - - - -	1
Rupture of muscle in baby's neck, - - - -	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, - - - -	3
Notification of having laid out a dead body, - - - -	2
Notification of liability to be a source of infection, - - - -	1

The following supplementary figures are of interest :—

The number of births notified in the District was 556,\* and, consequently, the percentage of registered births notified was 100.

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\* This figure includes 12 births which occurred in Institutions outside the District.



The percentage of total births attended by midwives only was 49.5.

The percentage of total births attended by doctors only was 31.0.

The percentage of total births attended by both was 19.5.

The percentage of still-births was 5.

### HOUSEBOATS ON THE RIVER LEVEN.

During the last two or three years there has been a marked increase in the number of houseboats on the river, and at the various anchorages in Loch Lomond.

My attention was directed to this state of affairs by the obviously congested condition of the river at Balloch, and on inquiry I ascertained that certain families were residing in boats all the year round. There appeared, therefore, to be some necessity for the adoption of bye-laws regulating health matters amongst a floating population of this description.

Several conferences were held with members and officers of the Scottish Board of Health, and eventually it was suggested that the bye-laws for tents, vans, and sheds might be recast so as to include premises such as houseboats.

The whole question was still under consideration at the end of the year.

### PLAGUE OF CATERPILLARS.

The following report is of sufficient interest to be included in this Annual Report:—

#### BONHILL—PLAGUE OF CATERPILLARS.

On 29th October my attention was directed by the District Sanitary Inspector, Mr. Allan, to the fact that large numbers of caterpillars were invading some dwelling-houses in Union Street, Bonhill.

These houses form the northern end of the tenements in Union Street. Adjoining the tenement, and divided from its northern gable by a narrow footway, is a stackyard which, at the date of my visit, had three or four stacks in it.

I found on examination that the circumstances were not in any way exaggerated. All the crevices in wash-houses, outhouses, and elsewhere were full of caterpillars; the wash-house boiler of the end property (which had had its cover left off) had a layer of drowned caterpillars at the foot of it.

Although I was not absolutely satisfied that the matter was

really a public health one, I thought it advisable to give instructions to the Sanitary Inspector to spread sawdust steeped in disinfectant around the foot of the tenement, and carry it down the street for several houses and along the back of the first house. The effect of this was evident next morning, when hundreds of dead caterpillars were seen lying on the sawdust.

The caterpillar in question is obviously a night-feeder, as it is not seen crawling during the day, but hides in crevices. It is about  $\frac{1}{2}$  in. to  $\frac{3}{4}$  in. long, and brownish in colour. Specimens have been sent away for the purpose of exact identification.

Two or three days after my first visit I again visited the premises and met the farmer. We examined the stacks carefully at the sides, and it appeared obvious that the caterpillars were still coming from them. I suggested to him that he might remove the stack nearest the gable, but he demurred at this, and it did not appear to me that I had any power to compel him to do so.

My object in asking the farmer to remove the stack to another part of the stackyard was that I felt sure that in the process of moving most of the caterpillars would be left on the old site, and would be demolished by the hens which were feeding about there. As the farmer did not agree to this suggestion, I next suggested that he might dig a trench across the end of the stackyard between the stack and the gable, and put a thick layer of sawdust soaked in disinfectant into it. This, I understand, was carried out, and since then, I believe, he has put some sticky, tarry material round the base of the stack in question.

Although this invasion of caterpillars is no doubt very alarming to the inhabitants and, in any case, extremely disagreeable, there does not appear to be any evidence that actual illness was caused, or indeed could be caused, by their agency.

Although the invasion is stopped in the meantime, there must be a large number of caterpillars secreted under the floors of the houses, and these may cause considerable discomfort in the spring when they start to become active after hibernation during the winter months.

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The caterpillars in question must have been brought into the stackyard in the hay. Specimens were sent to Mr. R. Stewart MacDougall, University, Edinburgh, who identified them as the caterpillar of the moth *Caradrina Quadripunctata*.

As there appeared to be some difference of opinion regarding the responsibility of the Public Health Department in a case of this sort, the Scottish Board of Health was appealed to. The Board, while agreeing that the matter was not really a public health one, approved of the action taken, and suggested that advice should be given to the occupiers of the houses regarding measures which might mitigate the nuisance in the spring months.

## HOUSING.

ALEXANDRIA.—There are now occupied on the Burnbrae Housing site 76 houses built under the 1919 Act.

It is proposed to build 24 additional houses on the Cricket Ground site in Alexandria under the Slum Clearance Scheme.

BONHILL.—The original scheme for the construction of 112 Slum Clearance houses at Union Street, Bonhill, has been modified, and there were under construction during the year 104 houses, but none were completed before the end of that period.

It is proposed to build in addition 24 Slum Clearance houses at George Street, Bonhill.

RENTON.—The second development of house construction under the 1919 Act was completed at Hillfoot, and all the houses were occupied by the end of the year. There are now 44 houses in occupation on that site, all built under the 1919 Act.

On the same site eight houses, under the Slum Clearance Scheme, were completed and ready for occupation at the end of the year.

On the Tontine Park site a commencement was made with the scheme for the erection of 50 Slum Clearance houses. It is proposed to erect 26 more Slum Clearance houses on this site.

SUBSIDISED HOUSES.—Six houses, for which a subsidy of £100 per house was paid by the Local Authority under the 1923 Act, were completed during the year.

## HOUSING (SCOTLAND) ACT, 1925.

A report was submitted in October regarding a house which was considered so injurious to health as to be unfit for human habitation, and recommending that steps should be taken under Section 8 to deal with it. The owners of this house agreed to closure, and the inhabitants were housed elsewhere.

## FACTORIES AND WORKSHOPS.

**BAKEHOUSES.**—Inspections of the premises used as bakehouses showed that there were no actual contraventions of the sections of the Factory and Workshops Act relating to sanitation and other health matters.

Generally speaking, however, the conditions under which baking is done often leave much to be desired. This is more noticeable in the small bakehouses where storage accommodation is, as a rule, very inadequate, and, as a consequence, raw materials are kept in the bakehouse itself, which leaves a very small amount of free floor space, and makes the cleansing of the floors and walls a difficult matter.

During the year the Inspector of Factories directed attention on Form 144a to several defects in a factory bakehouse. Printed on this form is the following:—

“ I shall be obliged if you will acknowledge receipt of this notice, and in due course inform me what action has been taken by the District Council.”

This naturally raised the question of the power of entry by the Medical Officer of Health into factory bakehouses, and the power of the District Committee in connection with such premises. Correspondence followed between this Department, the Factory Inspector, and Board of Health. At the end of the year the Board had not given a decision. A letter was received, however, in January, 1926, which I will now refer to in order to complete the subject.

In this letter no reference is made to any powers of entry under the Factory and Workshops Act, but a suggestion is made that entry can be obtained to all factories dealing with foodstuffs under a section of the Public Health (Scotland) Act, 1897.

This letter further refers to the memorandum issued by the Home Office in 1912, which refers, *inter alia*, to the subject of the duties of District Councils.

In this memorandum it is stated definitely that the District Council (District Committee) is responsible for the sanitation of workshops and workplaces, while the Factory Inspector is responsible for the sanitary condition of factories.

It will thus be seen that the position of the Medical Officer of Health as regards factories, including factory bakehouses, is eminently unsatisfactory and requires serious consideration when a new Factory Bill is being drafted.

**OTHER WORKSHOPS.**—The total number of inspections made

during the year was 162. Nine 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 96.

TABLE XVII.—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), - -	8	8	1	7	...	23	1	3
Dressmakers, } - -	12	13	...	...	12	29	28	1
Milliners, }								
Tailors, - - -	8	8	2	6	...	14	2	...
Joiners, Cartwrights, &c., - - -	21	21	...	21	...	41	...	3
Plumbers, Tinsmiths, -	13	13	...	13	...	35	...	...
Blacksmiths, - - -	11	11	...	11	...	18	..	...
Shoemakers, - - -	10	10	...	10	...	11	...	...
Saddlers, - - -	1	1	...	1	..	1	...	...
Laundrykeepers, - - -	2	2	...	...	2	6	4	2
Cyclemakers, - - -	2	2	...	2	...	3	...	...
Other Trades, - - -	8	8	1	7	...	18	1	2
Totals, - - -	96	97	4	78	14	199	36	11

## EASTERN DISTRICT.

## VITAL STATISTICS.

POPULATION.—The Registrar-General's estimate of the population as at the middle of 1925 was 23,789, an increase of 547 when compared with last year's estimate. The figure prepared in this Office shows an increase of 587 over the corresponding figure for last year. The estimate is 25,265, and the details are set forth in Table II.

BIRTHS.—The number of births allocated to the Eastern District in 1925, after correction for transfers, was 496, as against 436 in 1924. The birth-rate for the District was 20.8 per 1000 of the population, as against 18.8 in 1924.

DEATHS.—The number of deaths of persons resident in or belonging to the Eastern District in the year 1925 was 265, as against 307 in 1924. This produces a death-rate of 11.1 per 1000 of the population, as against 13.2 last year.

The principal causes of death were—Heart Disease 38, Apoplexy 27, Tuberculous Diseases 26, Cancer 23, Bronchitis 17.

Deaths from Pulmonary Tuberculosis numbered 13; this produces a death-rate of .55 per 1000 of the population, as against .52 last year and .85 in 1923. The number of deaths from Non-Pulmonary Tuberculosis was 13, which is equivalent to a death-rate of .55. This is somewhat higher than that of 1924.

## INFECTIOUS DISEASE.

151 cases of infectious disease were notified during 1925, as against 267 in 1924.

Scarlet Fever was not prevalent during the year, only 57 cases being notified. The type of the disease was for the most part mild, and all the patients eventually recovered. Cases occurred during the year in the Schaw Home, Bearsden, and the country branch of the Sick Children's Hospital at Drumchapel.

Eleven cases of Diphtheria were notified, as against 28 in 1924. One death occurred. One of the cases notified was an inmate of the Sick Children's Hospital at Drumchapel.

TABLE XVIII.—COUNTY OF DUNBARTON.—EASTERN DISTRICT.—STATEMENT SUPPLIED BY THE REGISTRAR-GENERAL GIVING VITAL STATISTICS FOR 1925.

NUMBERS.		RATES PER 1000 OF ESTIMATED POPULATION.	
Births	(Corrected for Transfers), -	496	Birth Rate (Corrected for Transfers), -
Do. Illegitimate ( do. ), -	-	27	Marriage Rate (Uncorrected), -
Marriages (Uncorrected), -	-	121	Death Rate—All Causes ( do. ), -
Deaths ( do. ), -	-	323	Do. do. (Corrected for Transfers),
Do. (Transferred Out), -	-	116	Do. do. (Corrected for Transfers and adjusted for Age and Sex Distribution), -
Do. ( do. In), -	-	58	Do. — Tuberculosis, Respiratory System (Corrected for Transfers), -
Do. (Corrected), both Sexes, -	-	265	Do. — All Tuberculosis (Corrected for Transfers), -
			Do. — Principal Epidemic Diseases (Corrected for Transfers), -

Population—Census 1921, 23,808; Estimated to middle of 1925, 23,789.

Infantile Mortality Rate (Deaths of Children under One Year per 1000 Births), corrected, 73.

Illegitimate Rate (Illegitimate Births per 100 Total Births), corrected for Transfers, 5.4.

TABLE XIX.—COUNTY OF DUNBARTON.—EASTERN DISTRICT.—STATEMENT OF CAUSES OF DEATH  
(Corrected for Transfers) FOR 1925, 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, - - - - -	5	4	1	4	1	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, - - - - -	6	3	3	4	...	...	...	...	...	...	...	...	...	...	...
Whooping-cough, - - - - -	1	...	1	1	...	...	...	...	...	...	...	...	...	...	...
Diphtheria, - - - - -	5	2	3	1	...	...	...	...	1	...	...	...	...	...	...
Influenza, - - - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica, - - - - -	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases, - - - - -	13	6	7	...	7	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Respiratory System), - - - - -	4	1	3	1	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis, - - - - -	5	3	2	1	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis (Abdominal), - - - - -	4	2	2	1	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases, - - - - -	23	11	12	1	...	...	...	...	1	4	5	...	9	3	1
Malignant Tumours, - - - - -	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Rheumatic Fever, - - - - -	2	1	1	1	...	...	...	...	...	...	...	...	...	...	...
Meningitis, - - - - -	27	11	16	...	...	...	...	...	...	1	2	...	...	...	...
Apoplexy, - - - - -	38	21	17	...	...	...	...	...	...	1	2	...	...	...	...
Heart Disease, - - - - -	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Disease of Arteries, - - - - -	17	9	8	4	1	...	...	...	...	...	...	...	...	...	...
Bronchitis, - - - - -	16	7	9	5	1	1	...	...	...	...	...	...	...	...	...
Pneumonia, - - - - -	2	1	1	1	...	...	...	...	...	...	...	...	...	...	...
Other Diseases of Respiratory System, - - - - -	2	2	...	1	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis (under 2 years), - - - - -	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Appendicitis, - - - - -	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant), - - - - -	3	1	2	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis (Acute and Chronic), - - - - -	8	5	3	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Sepsis, - - - - -	1	...	1	1	...	...	...	...	...	...	...	...	...	...	...
Diseases and Accidents of Pregnancy and Parturition, - - - - -	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Early Infancy and Malformation, - - - - -	15	9	6	15	...	...	...	...	...	...	...	...	...	...	...
Suicide, - - - - -	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Other Violent Deaths, - - - - -	10	5	5	1	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, - - - - -	45	17	28	3	2	2	...	...	...	...	...	...	...	...	...
Ill-defined or Unknown, - - - - -	4	4	...	1	...	...	...	...	...	...	...	...	...	...	...
All Causes, - - - - -	265	128	137	36	24	7	1	16	6	18	19	39	44	45	10



Four cases of Enteric Fever were notified during the year. All the cases resided in the Kirkintilloch Parish. The illness of one of the patients was finally diagnosed as tuberculosis of the lungs and abdomen. This patient died; the others made good recoveries. No sources of infection could be traced.

One case of Cerebro-spinal Meningitis occurred in the West Kilpatrick Parish. The patient, an adult, died before the notification was received.

One case of Encephalitis Lethargica was notified under the new regulations which came into force on 21st December, 1925.

Thirty patients (12 males and 18 females) were notified as suffering from Pulmonary Tuberculosis during the year, and by the end of the year 8 of them had died, 2 had left the district, in 3 cases the diagnosis was not verified, and 6 were still under observation as doubtful. Six cases were sent to sanatoria for treatment, and one was given domiciliary treatment.

Thirty-one cases (16 males and 15 females) of Non-Pulmonary Tuberculosis were notified during 1925, and by 31st December four had died, one had left the district, in one case the diagnosis was not verified, and three were still under observation. Seven of these cases were sent to institutions for treatment.

### HOSPITAL ACCOMMODATION.

DUNTOCHER JOINT HOSPITAL.—On the several visits paid to this hospital everything was found in a satisfactory condition, including the disinfector and ambulance.

The extension of the City of Glasgow will have very little effect on the arrangements at the hospital: on the other hand, the impending increase in the size of the country branch of the Royal Hospital for Sick Children at Drumchapel may at times cause some difficulty. It must, however, be remembered that the extension of the Burgh of Clydebank has removed from the jurisdiction of the Eastern District Committee the Mount Blow Children's Home between Dalmuir and Kilpatrick.

Dr. Gavin Young has been appointed to advise in the treatment of ear and throat complications arising during the course of the ordinary infectious diseases.

LENNOX JOINT HOSPITAL.—During the year the only matter requiring attention was the suggestion that an extra pavilion should be provided. Owing to the large number of different diseases now notifiable, it is extremely difficult to find accom-

TABLE XX.—EASTERN DISTRICT.

CASES OF INFECTIOUS DISEASE COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER DURING THE YEAR 1925.

PARISH.	Cerebro-Spinal Fever.	Encephalitis Lethargica.	Enteric Fever.	Scarlet Fever.	Diphtheria and Mem. Croup.	Erysipelas.	Puerperal Fever.	Primary Pneumonia.	Influenzal Pneumonia.	Ophthalmia Neonatorum.	Pulmonary Tuberculosis.	Other Tuberculosis.	Totals.
Cumbernauld, - - -	...	...	...	15	2	6	2	24	5	1	5	12	72
Kirkintilloch, - - -	...	...	4	8	5	2	...	6	...	...	8*	3*	36
East Kilpatrick, - - -	...	...	...	12	3	7	1	5	1	...	3	2	34
West Kilpatrick, - - -	1	1	...	22	1	8	1	9	...	1	14	14	72
Totals, - - -	1	1	4	57	11	23	4	44	6	2	30	31	214
Removed to Hospital, - - -	...	...	4	53	8	5	4	...	1	...	6	7	88
Percentage removed to Hospital, - - -	..	...	100	92.9	72.7	21.3	100	...	16.6	...	20	22.6	39.2

\* Of the cases of Tuberculosis, 3 pulmonary cases were notified from Woodilee Mental Hospital.

TABLE XXI.—EASTERN DISTRICT.  
 VACCINATION.—CONSCIENTIOUS OBJECTIONS, 1925.

PARISH.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
Cumbernauld, -	7	4	6	5	4	7	4	5	4	6	4	6	62
Kirkintilloch, -	3	3	2	6	3	5	...	3	2	3	5	3	38
East Kilpatrick, -	2	...	...	1	...	...	1	1	1	1	2	1	10
Milngavie (Landward), -	..	..	..	1	..	..	..	1	..	..	..	..	2
West Kilpatrick, -	4	1	4	2	4	3	4	2	6	8	6	4	48
Totals, -	16	8	12	15	11	15	9	12	13	18	17	14	160

modation in a hospital of this size for all the cases requiring isolation, and on certain occasions patients have had to be sent to other hospitals either in the County or in the City of Glasgow.

The proposed pavilion would be composed of small wards for two or three patients, the partitions being of glass. Each room could be used for a different disease, and from the nurse's room a view of all the rooms would be obtained. This type of building has been used with great success in many parts of the country.

The Eastern District Committee agreed to the proposal, which will, undoubtedly, make for improved efficiency in the administration of the hospital.

In connection with the question of ear and throat complications, no specialist was appointed to do the work, but the Medical Officer of the hospital was authorised to call in a consultant when he considered that course necessary.

#### WATER SUPPLY.

Negotiations regarding the purchase of Old Kilpatrick Water Supply were continued during the year. As will be seen from Table XXIV., a sample of this water gave a satisfactory analysis.

Samples from Garscadden village showed that there was no improvement in the chemical content of the water. There was, however, no disease prevalent in the village which could be attributed to the water supply.

The sample taken from a burn near Bonnaughton Farm was found to be contaminated. This was not surprising, as the water was undoubtedly polluted by sewage near the source. This burn was not the supply to the farm, but was used by the people living in a small cottage; its use was discontinued.

It was found from analysis that the supply to Mains House, Craigton, was very unsatisfactory. Various possible new sources were investigated, but by the end of the year a definite decision had not been reached.

In July a complaint was received regarding the supply to Woodbank, Stirling Road. This house and sixteen others receive a supply from the slopes of Dumbuck Hill. The supply is a private one, and the supply works consist of a collecting chamber, a storage tank, and a sand pressure-filter. In addition, there is an arrangement whereby the Dumbarton Burgh water can be turned on should the private supply fail from any cause. The complainant stated that the water was thick and muddy and contained worms. Apart from the fact that the house in question was at the dead end of the

TABLE XXII.—ADMISSIONS TO DUNTOCHER HOSPITAL, 1925.

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.	BOTH	
<i>Scarlet Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	9*	2	4	4	5	1	2	3	...	...	...	...	...	...	20	11	31	
Remaining,	1	1	...	1	...	1	...	...	...	...	...	...	...	...	1	3	4	
<i>Enteric Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	...	...	1†	...	...	...	...	...	...	...	1	1	
<i>Diphtheria.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	1	...	...	...	...	1	...	1	...	...	...	...	...	...	1	2	3	
Died,	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
<i>Erysipelas.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	2	3	
Remaining,	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1	2	
<i>Whooping Cough.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3	
Died,	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	
<i>Measles.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	3	7	...	1	1	...	...	1	...	...	...	...	...	...	4	9	13	
Remaining,	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1	
Died,	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2	
<i>Puerperal Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	...	...	1§	...	...	...	...	...	...	...	1	1	
<i>Chickenpox.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	2	3	...	...	...	...	...	...	...	...	...	...	...	...	2	3	5	
<i>Encephalitis Lethargica.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	1†	...	...	...	...	...	...	...	...	...	1	1	
Totals,	16	20	5	7	6	4	2	8	3	...	2	...	31	42	73			

Two observation cases did not develop the disease.

† Diagnosis changed to Pulmonary Tuberculosis.

‡ Diagnosis changed to Scarlet Fever.

§ Baby was admitted along with the mother.

	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.	M.	F.		BOTH
<i>Scarlet Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	7	12	13	12	7	10	2	5	7	10	2	5	2	2	1	1	1	1	29	39
Remaining,	1	2	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4	5
Died,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Enteric Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	2	...	1	...	...	1	...	...	...	1	...	...	3	...	...	...	3	1
Remaining,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Died,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Diphtheria.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	8	7	9	10	5	5	...	...	5	5	...	2	...	...	23	...	...	...	26	49
Remaining,	1	1	2	...	...	...	...	...	...	...	...	2	...	...	3	...	...	...	3	6
Died,	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	2
<i>Tuberculosis.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	1	...	1	...	...	...	1	...	...	1	...	...	2	...	...	...	1	3
Remaining,	...	...	1	...	2	...	...	...	1	...	...	1	...	...	3	...	...	...	4	7
Died,	...	...	1	...	...	2	...	...	2	...	1	...	...	...	2	...	...	...	2	4
<i>Pneumonia.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	1	1	...	...	1	1	...	...	...	...	1	...	...	...	1	2
Remaining,	1	...	...	...	...	1	...	...	1	...	...	...	...	...	1	...	...	...	1	2
Died,	1	...	...	...	1	...	...	...	...	...	...	...	...	...	2	...	...	...	...	2
<i>Erysipelas.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
<i>Measles.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Remaining,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
<i>Puerperal Fever.</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Recovered,	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	3	3
Died,	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	2	2
Totals,	21	23	30	24	19	21	4	17	3	3	...	...	1	3	75	91	166			

supply pipe, there did not seem to be any cause for this. Arrangements were made for a thorough scouring of the pipe, but, in spite of repeated scourings, repeated complaints were received. An analysis of the water (shown in Table XXIV.) indicated that the water was pure and free from suspicion. Towards the end of the year it was arranged that the pipe should be altered in such a way as to do away with the dead end referred to, and it is hoped that this improvement will obviate any further complaint. Specimens of the "worms" were examined and found to be the larvæ of midges. It is not easy to understand how they obtained access to the supply.

### DRAINAGE AND SCAVENGING.

The question of the improvement of Bearsden Drainage, and the relationship of this Special District to the Westerton Drainage District, received very careful consideration during the year, as also did the drainage of the adjoining area of Knightswood which is being built upon by the Glasgow Authorities. By the finding of the Select Committee in London, the Knightswood area becomes part of Glasgow in May, 1926.

In September, at a meeting of the Eastern District Committee, it was agreed that Cumbernauld and surrounding area should be formed into a Special Drainage District. This is a reform which should be very much appreciated by the inhabitants, and should prove immensely beneficial to the health of the community.

During the year improvements were carried out in connection with Condorrat Drainage. The disposal works were urgently in need of repair, and will now be in a more satisfactory condition.

As regards scavenging, no alterations in the methods of disposal were made during the year. The question of a refuse destructor for the Bearsden area was considered, but no definite finding was come to.

In November, at a meeting of the Eastern District Committee, it was arranged to extend the Kilpatrick and Bowling Special Scavenging District and the Duntocher Special Scavenging District, so as to include certain areas which have been built upon or which will be built upon in the near future.

### NUISANCES.

On a number of occasions during the year visits were paid to various parts of the District in connection with the

TABLE XXIV.—EASTERN DISTRICT.—WATER ANALYSES (IN GRAINS PER GALLON), 1925.

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
1925.													
Jan. 14	South Hutcheson Farm, supply, -	8.54	.48	9.02	.32	.002	.008	.010	4.85	1.60	6.45	..	1 to 90
Feb. 6	South Hutcheson Farm, proposed supply, -	10.94	.50	11.44	..	.002	.008	.010	3.82	4.84	8.66	10	..
" 6	South Hutcheson Farm, proposed supply, -	152.55	.30	152.85	trace	.001	.006	.007	2.14	118.67	120.81	..	..
May 11	Old Kilpatrick, public supply, -	5.72	.40	6.12	..	.001	.005	.006	2.27	1.95	4.22	..	..
" 11	Duntocher, public supply, -	3.78	.30	4.08	..	.001	.003	.004	.37	1.86	2.23	..	..
June 29	Garscadden Village (2nd Row), -	19.90	.40	20.30	.25	.003	.007	.010	13.65	2.58	16.23	..	1 to 100
" 29	Garscadden Village (4th Row), -	18.81	.42	19.23	.51	.003	.008	.011	11.46	3.90	15.36	..	1 to 50
" 29	Garscadden Village (inlet to tank), -	21.64	.40	22.04	.37	.004	.007	.011	13.98	4.35	18.33	..	1 to 75
" 29	Bonnaughton Farm, Burn, -	8.27	.83	9.10	.24	.005	.010	.015	5.01	1.38	6.39	..	1 to 100
Sept. 23	Mains House, Pump-well, -	13.62	.40	14.02	.39	.007	.016	.023	7.63	3.42	11.05	..	1 to 65
Oct. 13	Mains House, Hill Spring, Balvie Farm, -	5.83	.20	6.03	.31	.001	.005	.006	2.38	1.66	4.04	..	1 to 100
" 22	Mains House, Hill Spring, Fountainhead, Balvie Farm, -	6.50	.20	6.70	.36	.001	.004	.005	2.49	1.83	4.32	..	1 to 80
Nov. 10	Mains House, Hill Stream, Douglas Muir, -	2.53	.50	3.03	..	..	.004	.004	..	1.28	1.28	6	..
Dec. 31	Woodbank, Stirling Road, -	5.31	.75	6.06	..	.002	.010	.012	2.28	1.87	4.15	15	..

\* 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.



certification of nuisances. Amongst others were the following:—

**HOLMFIELD ROAD, NEAR KIRKINTILLOCH.**—This is a steep road just outside the Burgh, running at right angles to the main road, and, although in wet weather the water must run down from the main road in considerable volume, it did not appear to warrant a certificate under Section 16 of the Public Health (Scotland) Act.

**WATERSIDE.**—A visit was paid in February to a property where the ashpit was overflowing and in a filthy condition. It was arranged to issue a certificate if necessary; the nuisance was, however, abated.

**BOGHEAD QUARRY.**—In this instance the complaint referred to a coup used by a neighbouring authority. After careful consideration it was felt that the condition was not one which could be certified, although the way in which the refuse was dealt with left much to be desired. At a later date the whole question came before the Board of Health, and eventually the methods used were considerably improved.

**GARSCADDEN BURN.**—Several complaints were received during the year about this burn, which flows through a golf course. The effluent from a large piggery containing over 200 pigs joins the burn at a higher level. A year or two ago the owner of the piggery installed a large septic tank, but, of course, even the overflow from this is apt to be offensive. I visited the burn, and, apart from some growth on the stones in the burn indicating pollution, there did not appear to be much cause for complaint. Arrangements were made to have the tank emptied, as it appeared to be considerably silted up with solid matter.

**GARSCADDEN ROAD.**—This road is the access to the village. The portion between the main road and the houses was effectively repaired by the estate, but the other part of the road was most undoubtedly in a condition which would bring it under Section 16 of the Public Health (Scotland) Act, as in wet weather it was well-nigh impassable. The road was eventually considerably improved, at any rate, temporarily.

#### MATERNITY SERVICE AND CHILD WELFARE.

During the year very little change was made in the administration of the scheme.

In November the question of building new Clinic accommo-

dation on the Auchtentoshan Housing site was brought up and considered, and at the end of the year a full report on the subject was in course of preparation for submission to the Public Health Committee.

#### ANNUAL RETURNS FOR BOARD OF HEALTH.

The details required by the Board of Health are to a large extent embodied in the Tables in this Report, but the following additional information also falls to be given:—

*Special Treatment Centres.*—Under arrangement with the Education Authority of the County of Dunbarton, there were treated at the Authority's Clinics during the year six children under five years of age; of these, 5 cases were dealt with for conditions of the ear, nose, or throat, while one child was sent to the Oculist for treatment.

*Food and Milk.*—Fifty-four applications were received for supplies of milk. Four were refused, and grants were made in the cases of 32 children, 4 expectant mothers, and 14 nursing mothers. All the cases granted were medically examined and certified as being financially necessitous. The total cost of this service was £31 17s. 1d., 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 5 children died of Measles. In three cases Broncho-Pneumonia was the fatal complication, in one case the death was certified as being due to Laryngismus stridulus following Measles, and another case was complicated by acute Laryngitis and Congestion of the Lungs. Nine cases of measles, three of which were suffering from Broncho-Pneumonia, were admitted to hospital.

*Whooping Cough.*—Six children died from this disease during the year. In two instances the children suffered from Broncho-Pneumonia, two had Convulsions and Broncho-Pneumonia, one had Bronchitis, and one Nephritis and Broncho-Pneumonia. Four cases were removed to hospital.

*Maternity Hospitals or Homes.*—During the year seven women were treated in the Ante-Natal Wards of the Glasgow Royal Maternity and Women's Hospital, while the total number of notifications of birth received from that institution was 13.

TABLE XXV.—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, - - - - -	262	211
Number of First Visits— - - - -	292	265
To Children under 1 year, -	234	207
To Children from 1 to 5 years,	17	58
To Expectant Mothers, - -	41	—
Number of Re-visits— - - - -	3271	2927
To Children under 1 year, -	2044	1991
To Children from 1 to 5 years,	1095	931
To Expectant Mothers, - -	132	5
Number of Visits to Midwives, - - - -	46	47
Number of Visits of Special Inquiry, - -	4	5
Number of Visits to Tuberculous Cases, - -	2	256
TOTAL VISITS, - - - - -	3615	3500
Feeding of Children of 6 months—		
Breast Fed, - - -	92	92
Partially Breast Fed,	22	68
Artificially Fed, -	55	27
Number of Infants born prematurely, - - -	5	11
Number of Infants born at full time, - - -	217	196
Expectant Mothers who consulted doctors or ante-natal clinics, - - - - -	13	—

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

PARTICULARS.	DUNTOCHER.	KILPATRICK.	TWECHAR.
Number of Clinics held—			
With Health Visitor only in attendance, -	50	51	—
With Doctor and Health Visitor in attendance,	51	52	45
Ante-natal Consultations—Total attendances, -	41	11	2
First attendances, -	11	2	1
Referred to Ante-natal Ward, Maternity Hospital,	1	1	—
Referred to family doctor, - - - - -	—	—	—
Treated at Clinic, - - - - -	10	1	1
Post-natal or other Consultations, - - - - -	133	23	2
Child Welfare Consultations—			
Total attendances—Under 1 year, - - - - -	326	106	232
Over 1 year, - - - - -	391	73	55
First attendances—Under 1 year, - - - - -	97	22	36
Over 1 year, - - - - -	12	10	15
Attendances in connection with Milk Applications,	31	7	13

DISEASES RECORDED ON CHILD WELFARE CLINIC CARDS—

DUNTOCHER CLINIC.	DUNTOCHER CLINIC—contd.	OLD KILPATRICK CLINIC.
<i>General Conditions—</i>	Hernia, - - - - - 2	General Debility, - - - 3
General Debility, - - - 4	Improper Feeding, - 12	Malnutrition, - - - - 1
Rickets, - - - - - 1	<i>Skin Diseases—</i>	<i>Eye Conditions—</i>
Malnutrition, - - - 12	Impetigo, - - - - - 3	Conjunctivitis, - - - 2
<i>Eye Conditions—</i>	Rash, - - - - - 4	<i>Throat, Nose, and Ear Con-</i>
Conjunctivitis, - - - 2	Eczema, - - - - - 3	ditions—
<i>Throat, Nose, and Ear Con-</i>	Chickenpox, - - - - - —	Enlarged Tonsils, - - 1
ditions—	Whooping Cough - - - —	Foreign body in Nose, - 1
Coryza, - - - - - 1	No disease specified, - 38	Tongue Tie, - - - - - 2
Otorrhoea, - - - - - 1	—	Dental Caries, - - - - 1
Tongue Tie, - - - - - 3	TWECHAR CLINIC.	Respiratory Diseases, - 2
Rheumatism, - - - - - 1	General Debility, - - 3	<i>Alimentary Diseases—</i>
Respiratory Diseases, - 6	Rickets, - - - - - 1	Diarrhoea, - - - - - 1
Paralysis, - - - - - 1	Eczema, - - - - - 1	Hernia, - - - - - 1
<i>Alimentary Diseases—</i>	Vomiting, - - - - - 2	Improper Feeding, - 3
Diarrhoea, - - - - - 7	Gastritis, - - - - - 1	<i>Skin Diseases—</i>
Indigestion, - - - - - 8	Discharging Ear, - - 2	Impetigo, - - - - - 3
	Constipation, - - - 3	Eczema, - - - - - 1
	Bronchial Catarrh, - 2	Septic Sores, - - - 1
	No disease specified, - 36	No disease specified, - 9

The above are the diseases, &c., noted at first attendances, and the totals agree with the figures shown in the table above.

TABLE XXVII.—EASTERN DISTRICT.  
MATERNITY SERVICE AND CHILD WELFARE.  
CAUSES OF DEATH—CHILDREN UNDER ONE YEAR.  
YEAR 1925.

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, - - -	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, - - -	...	...	...	...	...	...	...	...	...	...
Whooping Cough, - - -	...	...	...	...	..	1	...	...	1	2
Diphtheria and Croup, - - -	..	...	...	...	...	...	..	...	...	...
Erysipelas, - - -	..	...	...	...	...	...	...	...	..	...
Tuberculous Meningitis, - - -	...	...	...	...	...	...	...	...	1	1
Abdominal Tuberculosis, - - -	...	...	...	...	...	...	1	...	...	1
Other Tuberculous Diseases, - - -	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous), - - -	...	...	...	...	...	..	...	1	...	1
Hydrocephalus, - - -	...	...	...	...	...	...	...	...	...	...
Convulsions, - - -	...	...	...	...	...	...	...	...	...	...
Pneumonia (all forms), - - -	..	...	...	...	...	...	2	1	2	5
Bronchitis, - - -	...	...	...	...	...	2	1	...	1	4
Diarrhœa and Enteritis, - - -	...	...	...	...	...	1	...	...	...	1
Other Digestive Diseases, - - -	...	...	...	...	...	...	1	1	...	2
Congenital Heart, - - -	...	...	...	1	1	...	...	1	...	2
Congenital Malformations, - - -	2	...	...	...	2	...	...	...	...	2
Premature Births, - - -	4	1	...	...	5	1	...	...	...	6
Atrophy, Debility, and Marasmus, - - -	2	...	2	...	4	...	1	...	...	5
Atelectasis, - - -	...	...	...	...	...	..	...	...	...	...
Injury at Birth, - - -	...	...	...	...	...	...	...	...	...	...
Suffocation, overlaying, - - -	...	...	...	...	...	...	...	...	...	...
Syphilis, - - -	...	...	...	...	...	...	...	...	...	...
Rickets, - - -	...	...	...	...	...	...	...	...	...	...
All other causes, - - -	1	...	...	...	1	1	1	2	...	5
Total, - - -	9	1	2	1	13	6	7	6	5	37*

\* The Registrar-General's total is 36.

*Homes and Hospitals.*—During the year five children were sent to the Biggart Memorial Home, Prestwick, for varying periods of residence.

*Assistance at Confinements.*—Sixteen applications for the provision of skilled assistance at confinement were received during 1925; of these, 3 were granted, 12 were refused, and 1 was withdrawn.

#### MIDWIVES (SCOTLAND) ACT, 1915.

There are 12 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 1925 as required by the Central Midwives' Board:—

#### REPORT.

##### BIRTHS IN DISTRICT:—

Total number of births registered in 1925,	- - -	476
Actual number of births attended by midwives during 1925,	- - - - -	188
Total number of deaths of new-born children (within ten days) during 1925,	- - - - -	9
Actual number of deaths of new-born children (within ten days) occurring in the practice of midwives during 1925,	- - - - -	1
Actual number of cases not attended by a doctor or midwife during 1925,	- - -	{ Births, 5 { Deaths, Nil.

In addition to the above, 13 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 1925,	- - -	2
Actual number of cases occurring in the practice of midwives during 1925,	- - - - -	1
Actual number of cases occurring where confinement not attended by a doctor or midwife during 1925,	-	Nil.

##### CASES OF PUERPERAL SEPSIS:—

Total number of cases during 1925,	- - -	4
Total number of deaths during 1925,	- - -	1

Actual number of cases occurring in the practice of midwives during 1925, - - - - -	1
Actual number of deaths occurring in the practice of midwives during 1925, - - - - -	Nil.
Actual number of cases occurring where confinement not attended by a doctor or midwife in 1925, - - - - -	} Cases, Nil. Deaths, Nil.

CASES OF STILL-BIRTH (DEAD-BORN) :—

Total number of cases during 1925, - - - - -	14
Actual number of cases occurring in the practice of midwives during 1925, - - - - -	1

CASES OF EMERGENCY :—

In 12 instances midwives requiring the assistance of a medical practitioner sent in the statutory forms.

The emergencies were as follows:—

Abortion, - - - - -	1
Ante-partum hæmorrhage, - - - - -	2
Placenta prævia, - - - - -	1
Impacted breech, - - - - -	1
Delay in labour, - - - - -	4
Hydrocephalus, - - - - -	1
Adherent placenta, - - - - -	1
Ophthalmia neonatorum, - - - - -	1

ADMINISTRATION :—

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

NOTIFICATIONS :—

One statutory form was received. This referred to a midwife's liability to be a source of infection.

The following supplementary figures are of interest:—

The number of births notified in the District was 470,\* and, consequently, the percentage of registered births notified was 96.

The percentage of total births attended by midwives only was 39.

The percentage of total births attended by doctors only was 49.

The percentage of total births attended by both was 12.

The percentage of still-births was 3.

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\* This figure includes 13 births which occurred in the Institutions outside the District.

## HOUSING.

OLD KILPATRICK AND HARDGATE.—The second development of the Housing Scheme under the 1919 Act was completed, and all the houses were occupied during the year. There are now, therefore, 50 houses occupied at Gavinburn and Colbreggan.

It is further proposed to erect 48 houses under the Slum Clearance Scheme in Old Kilpatrick.

DUNTOCHER.—A commencement was made on the scheme for the erection of 48 Slum Clearance houses on the Auchentoshan site during the year, and on the same site a start was made with the erection of 200 houses under the 1924 Act.

OTHER HOUSES.—It is proposed to erect 24 Slum Clearance houses at Cumbernauld, 8 at Waterside, and 8 at Condorrat.

SUBSIDISED HOUSES.—Twelve houses, on each of which a subsidy of £100 was paid by the Local Authority, were completed during the year, and the 200 houses which were begun by Messrs. William Baird & Co. at Twechar during 1924 were completed and occupied during the year.

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

## FACTORIES AND WORKSHOPS.

BAKEHOUSES.—During the year inspections were made of all the bakehouses in the District. For the most part the premises were found to be satisfactory as far as structure was concerned, and several of them are excellent in every way.

A bakehouse in Duntocher was, however, found to be structurally defective, and the owners were called upon to put the premises into a better state of repair. After very considerable delay, a new roof with opening skylights was constructed, and other improvements were made, but at the end of the year the repairs were not quite completed.

In December, certain premises in Kilpatrick used as a bakehouse were reported to the Committee as unsatisfactory, and the question of their continued utilisation for this purpose had not been finally disposed of at the end of the year.

OTHER WORKSHOPS.—The total number of inspections made during the year was 144. No defects were found. 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 72.

TABLE XXVIII.—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, - - -	6	7	1	4	2	21	5	4
Dressmakers, - - -	7	7	...	...	6	8	7	...
Tailors, - - -	6	5	2	2	...	6	2	...
Joiners, Cabinetmakers, Cartwrights, &c., -	11	10	...	10	...	17	...	2
Plumbers, Tinsmiths,	6	7	...	7	...	24	...	4
Blacksmiths, - - -	10	13	...	11	...	19	...	2
Shoemakers, - - -	11	11	...	11	...	13	...	1
Saddlers, - - -	1	1	...	1	...	1	...	...
Hosiery Knitters, - - -	1	1	...	...	1	5	5	...
Distillers, - - -	1	1	...	1	...	2	...	...
Butchers, - - -	2	4	2	...	...	11	2	6
Other trades, - - -	10	11	1	9	...	16	1	1
Totals, - - -	72	78	6	56	9	143	22	20