[Report 1925] / Medical Officer of Health, Edinburgh City.

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PUBLIC HEALTH DEPARTMENT,
PUBLIC HEALTH CHAMBERS,
JOHNSTON TERRACE,
EDINBURGH, *June* 1926.

MY LORD PROVOST AND GENTLEMEN,

In submitting my Annual Report for the year 1925 I have, in addition to the Statistical tables and notes thereon, submitted a commentary on some of the outstanding preventive activities of the year. The narrative form adds interest to the subjects under discussion. It is being increasingly appreciated that the greatest assistance will be given to a Public Health Department when the citizens are more or less taken into the confidence of those who are in control of the preventive machinery. Co-operation is secured and with it progress can be expected. This co-operation has manifested itself between the citizens and the Public Health Department of the City.

Scarlet Fever.

During the year no fewer than 2351 cases of Scarlet Fever were notified. This was 590 more than came to our knowledge in 1924. The widespread prevalence of the disease in the city was not a local feature, because the wave of epidemicity overran the whole country. In some centres of population the hospitals were unduly taxed for the admission and treatment of cases. It is never very easy to account for such an eruption of infection, though it is usually found that there is, after what might be aptly termed a series of "lean years," a large accumulation of susceptible persons who provide fertile material for the spread of the disease. If experience is to be founded on, it is anticipated that we should now revert to a succession of normal years of Scarlet Fever incidence.

The modern type of Scarlet Fever is much milder than it formerly was. This may lessen the fatality rate, but it does not render the task of detection easy. Consequently, many unrecognised cases among school children escape notice and thereby encourage the spread of the disease among their fellows. It is surprising that infectious diseases are not more frequently spread among children. This remark is suggested by the increasing production of cheap forms of sweets. Such may be perfectly wholesome, but they suffer from the hygienic disadvantage of being readily sampled by various lips. The notifications were distributed as follows among the various months of the year :—

January . .	209	July . . .	122
February . .	180	August . . .	150
March . . .	207	September . .	193
April . . .	169	October . . .	277
May . . .	161	November . .	298
June . . .	123	December . .	262

That the usual cycle of events was followed will be noted from the foregoing table. From April till August there was a decline due to meteorological conditions and the intervention of school holidays. With the reopening of the schools and the advent of autumnal humidity the numbers began to show the expected upward tendency. Much information may yet be expected from research workers in the direction of tracing the relationship between meteorological conditions and diseases of an infectious type. It is sometimes remarkable to observe a sudden decline of notifications of Scarlet Fever when a cold spell succeeds humid weather. It was fortunate that the widespread existence of Scarlet Fever left the milk supply untouched. Had the infecting agent reached that more or less universal food, the condition of affairs would have become seriously complicated. Many of those engaged in the dairy industry are at ages susceptible to attack. That nothing occurred was cause for thankfulness by the Public Health Department. The following table demonstrates the feature of age incidence, with greatest susceptibility to attack :—

Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and over.
9	537	1327	338	122	17	1

Scarlet Fever in relation to Housing.

Bad Housing conditions do not foster Scarlet Fever as they do Tuberculosis; but large families in small houses increase the opportunities for close contact and consequent spread of infection. Recognising as we now do that Scarlet Fever is mainly spread from person to person by intimate contact, by the use of infected articles of clothing, feeding dishes, and bedding, it is easily understood why several susceptibles in an overcrowded house may become involved. On the other hand, it can be appreciated why cases of Scarlet Fever may be nursed at home with little risk of spreading infection, especially when care is taken to keep aside dishes, bedding, spoons, etc., for the sole use of the patient.

The following table indicates how the cases were apportioned among houses of different sizes:—

114	cases or	4·8	per cent. occurred in	houses of	1	apartment.
993	,,	42·3	,,	,,	2	,,
496	,,	21·1	,,	,,	3	,,
289	,,	12·3	,,	,,	4	,,
89	,,	3·8	,,	,,	5	,,
217	,,	9·2	,,	,,	6 and more.	
153	,,	6·5	,,	in institutions.		

Sixty-three per cent. of the total cases occurred in dwellings of two and three rooms. Houses of two and three rooms are much in demand, but the question of accommodating large families within limited spaces calls for special remark when such questions as the spread of infection fall to be considered. Our citizens have yet to learn the simple rules that promote good health. Among these is one that requires movement of air in occupied rooms. This can be best secured by lowering windows to admit fresh air and to allow vitiated atmosphere to escape. Vitiated air lowers the powers of resistance; good ventilation does much to defeat disease.

Treatment of cases of Scarlet Fever in their own homes.

During the month of September, when notifications began to reach us in increasing numbers, the medical practitioners were invited to encourage the treatment of cases at home. This was done by means of a circular letter. The medical men readily responded. Their assistance immediately relieved the strain being imposed on available hospital accommodation and on the nursing staff. As a precautionary measure, as well as a *placebo* to timid parents and others, the painting of the throat with Carbolized Glycerine together with the inunction of the body surfaces with Eucalyptus Oil was advised in those instances where domiciliary treatment was undertaken. It is probable that Oil of Verbena, a much cheaper preparation than Eucalyptus, would have served the same purpose of allaying fear. The use of Carbolized Glycerine cannot, however, be so lightly turned aside, because the early and systematic painting of the fauces is of value.

The cases removed to hospital numbered 1944, or 82 per cent. of the total. Those treated in their own homes numbered 407. If the decision to treat cases domiciliarly had been arrived at sooner, the numbers removed would have been considerably reduced. For the past 18 years it had been customary to isolate over 90 per cent. of the notified cases. The fact that the figure was suddenly reduced to 82 per cent. effected a material saving in expenditure at the hospital. For the year 1925 a sum of nearly £3000 was saved in the hospital treatment of Scarlet Fever cases alone. Bad results from the standpoint of spread of infection from home-treated cases need not be expected. There was never at any time a suggestion that home-treated cases led to a spread of infection to neighbouring houses. When domiciliary treatment was resorted to in the smaller types of dwellings, effort was always made to remove susceptibles to separate quarters. This was effected by transferring the younger members to the houses of relatives. This procedure avoided interference with school, or, it might be, business attendance. Second cases occurred among 8 out of the 407 patients treated at home. This yielded a figure of 1·9 per cent. The return rate for cases treated in hospital was 3·2 per cent.

The conditions, however, were not comparable, so that no dogmatic pronouncement can be arrived at. But my experience in Leith, with 200 consecutive cases of Scarlet Fever treated in their own homes without the spread of infection to other members of the households, fortified me in advocating domiciliary treatment in Edinburgh.

Reduction of Duration of Stay in Hospital.

The cases of Scarlet Fever sent to hospital and running normal courses without complications are no longer kept in isolation for six weeks. It was found in Leith that the duration of residence in hospital could, in many instances, be reduced to 28 days and 35 days. This principle has now been adopted in the City. As may be understood, this plan enables us to reduce the cost of treating each patient. When hundreds of cases are taken into account, the total saving becomes considerable.

A Peculiar Outbreak.

During the latter part of the year a somewhat disconcerting outbreak of Scarlet Fever occurred in connection with a large boarding-school for boys in the City. It was obvious, from the explosive character of the outbreak, that milk had been the common source of infection. The puzzle was to discover how the liquid was invaded. No cases of Scarlet Fever could be traced to the milk supplied outside the school itself. This made it certain that the infection spreader was in the institution. Just as the outbreak was tailing off, a pure culture of the *Streptococcus Hæmolyticus*, the micro-organism now believed to be the causal germ of Scarlet Fever, was recovered from the fauces of a member of the staff. She was isolated, and after radical measures had been adopted in other directions in and about the school premises, work at the institution was resumed without further interruption from Scarlet Fever.

It is unfortunate that such long periods must elapse before "carriers" of Scarlet Fever can be accurately verified by bacteriological methods. In the case of Diphtheria a more or less decided opinion can be offered within 48 hours, whereas in Scarlet Fever nearly a fortnight must transpire before the bacteriologist is able to pronounce his opinion. During that period, as can be realised, much mischief may be wrought.

The Dick Test.

My assistant, Dr Alexander Joe, has been conducting a systematic course of Dick testing among children in outside institutions. This test is valuable because it enables the Department, in case of need, to separate susceptible from insusceptible children. We are not yet fully armed with a weapon that will protect children against Scarlet Fever, though evidence goes to indicate that we are not far from the ultimate end in view.

Diphtheria.

In furtherance of the scheme begun last year when over 3000 school children were immunised against Diphtheria, Dr Joe has gone a stage further by including children of pre-school age in his work. The results of his methodical work will be made known in next year's Annual Report. It is sufficient to state that the parents have shown a ready desire to take advantage of the protective influence. Appreciable numbers of school and pre-school children have presented themselves at each of the centres visited, where the headmasters and members of their staffs have given valuable help in assisting Dr Joe and those who accompanied him. The whole work has been most systematically conducted. A carefully compiled card-index system has been maintained, so that notifications of Diphtheria can always be referred to and followed up among those who had been either tested or immunised. Not a single untoward result has accompanied the testing or immunisation of the large numbers who have been dealt with at the various schools and institutions.

Supply of Insulin.

In accordance with the Circular from the Scottish Board of Health, dated 10th March 1924, the supply of Insulin was begun on 6th May 1924. At the outset the demand was for a supply of 50 phials, each containing 100 units. By degrees the demand increased until now about 100 phials are given out every month at an approximate cost of £10. In the majority of cases applications come through the Almoner at the Royal Infirmary, who secures a medical certificate in support of each claim. In two cases payment is made in full, in others half or a third of the cost of the Insulin is repaid. So far the total cost of Insulin as supplied by the Department has been £135. Against that, a sum of £29 has been repaid by applicants for relief.

Artificial Sunlight.

This has now been established at the City Fever Hospital in connection with theMeasles and Whooping Cough Wards in the form of Mercury Vapour Lamps. Dr Benson alludes in his report to the therapeutic value of the Lamps. Knowing what artificially-created Ultra-Violet Rays have been able to achieve, it is not surprising that children recovering from Measles and Whooping Cough should be improved in health by the health-giving rays.

In connection with the Surgical Tuberculosis Annexes at City Fever Hospital, one Mercury Vapour Lamp and four Open Arc Lamps have been installed. All are functioning well, and those in charge of the patients subjected to Artificial Sunlight speak highly in favour of the treatment, which possesses the important attribute that the Rays are uniformly strong and, unlike natural sunshine, are available all the year round.

The value of Artificial Sunlight from the administrative standpoint has been more intimately appreciated on the Continent than it has been in this country. There, the curative power of artificial sunlight has been utilised to enable patients to reach a certain stage of improvement or recovery. Having arrived at that point the Continental sufferer is treated as an out-patient. This releases beds for those who are requiring hospital treatment. It may be possible to instal Arc or other types of Lamps at a centrally situated point in the City—preferably the Tuberculosis Dispensary—so that continuity of treatment and oversight may be maintained, and with it expansion of facilities for the reception of a greater number of indoor patients.

Mercury Vapour Lamps have also been installed at the Child Welfare Department, Johnston Terrace. In addition to these Lamps—two in number—trial is being given to an Open Arc light that was formerly used for street lighting. Provided with tungsten-cored carbons, these lamps are capable of providing Ultra-Violet Rays. After the lapse of some months it should be possible to offer an opinion as to the efficacy of these lamps. The same type was used with considerable success in the treatment of Lupus at the Skin Department of the Royal Infirmary by Sir Norman Walker. Dr Finlay, the Child Welfare Medical Officer, has reported considerable success with the application of Artificial Sunlight at the Victoria Park Convalescent Home, where cases of Marasmus and Rickets have shown favourable responses to the systematic exposures of light that have been prescribed. Mercury Vapour Lamps are also used at South Fort Street Children's Day Nursery and at the Pleasance Child Welfare Clinic.

It is unfair to dogmatise about the virtues of Open Arc Lamps as opposed to Mercury Vapour installations. Both have been giving excellent results in Edinburgh. The warm glow of the Open Arc is more agreeable to the senses than the cold light of the Mercury Vapour Quartz Lamp. Longer exposures can be given with the Open Arc, and ocular demonstration of tanning of the skin can be best shown by it. In the case of the Mercury Vapour Quartz Lamp, shorter exposures appear to be advisable, and quick tanning does not occur. The cost of running the Open Arc Lamp is much greater than that of maintaining the Mercury Vapour Lamp. It is essential that the Quartz Tube should be carefully cleaned and filled with pure Mercury at intervals of 1000 hours' working. A new or freshly cleaned Quartz Tube sheds much more powerful and penetrating Ultra-Violet Rays than one that has been in operation for some time. In respect of uniformity and consistency of power, the Open Arc Lamp has the advantage. Wire cages placed round Open Arc Lamps have been tried, but the sum total of the shadows cast by the wire or other material used as a cage considerably impedes the light. It is on all fours with sunshine trying to penetrate the branches of a tree.

In the apartments used for treating the surgical tuberculosis cases, Ozonising plant has been installed. This has been found most valuable in securing a freshness of atmosphere that could not be otherwise maintained. When the Ozonisers are not in operation, the condition of the internal atmosphere becomes objectionable to the senses. Patients stripped naked cannot, during the colder months, be exposed in apartments having windows wide open. The rationale of Ozonisers is perfectly clear,

and experience confirms the conviction. This fact is emphasised because a recent official report issued by the Scottish Board of Health appeared to cast doubt on the employment of Ozonisers, which have proved of value in the London Hospital where they are freely used in Dr Sequira's Skin Department. In confined spaces with moderate air movements, Ozonisers can be confidently used. The principal objection to them is their initial cost.

The Milk Supply.

By continually stressing the vital importance of pure and wholesome milk as a valuable food, much progress has been made in the direction of supplying the citizens with a reliable article. For many years the milk purveyors appeared to look upon the health official as an arch-enemy. That feeling is now fast disappearing. It still exists when the producer clings to old-fashioned notions, and either neglects or refuses to adopt the most elementary and, at the same time, simple principles of cleanliness.

The Milk Competitions introduced two years ago have proved that milk of high standards of quality and cleanliness can be produced by the city dairymen when they make up their minds to employ reasonable care at every stage of collection, storage, and distribution. The design and construction of premises only exert a minor influence in the production of clean milk. Most important is the personal attention to detail with the systematic and sustained supervision over every stage of operations. Much credit is due to those in the dairy trade for the interest they have displayed in furthering the milk competitions and thereby increasing the volume of clean milk supplied in the City.

The average amount of milk consumed by each individual in this country is too low. Milk is relatively an inexpensive food. As time goes on, the value of milk as an easily assimilated food will be more greatly appreciated.

If the producer takes time and trouble, he can turn out clean milk that will keep. If he and his workers are indifferent, dirty, or too old to learn, the product will never be satisfactory.

The diagram reproduced overleaf is illuminating because it shows at a glance how much dirt may be contained in milk as it comes from some farms. In each case only a pint of milk from each consignment was passed through the ordinary cloth used in connection with a well-known Milk Filter. If a pint can reveal so much extraneous matter, the result of filtering several gallons must be obvious. This dirt should not be found in milk.

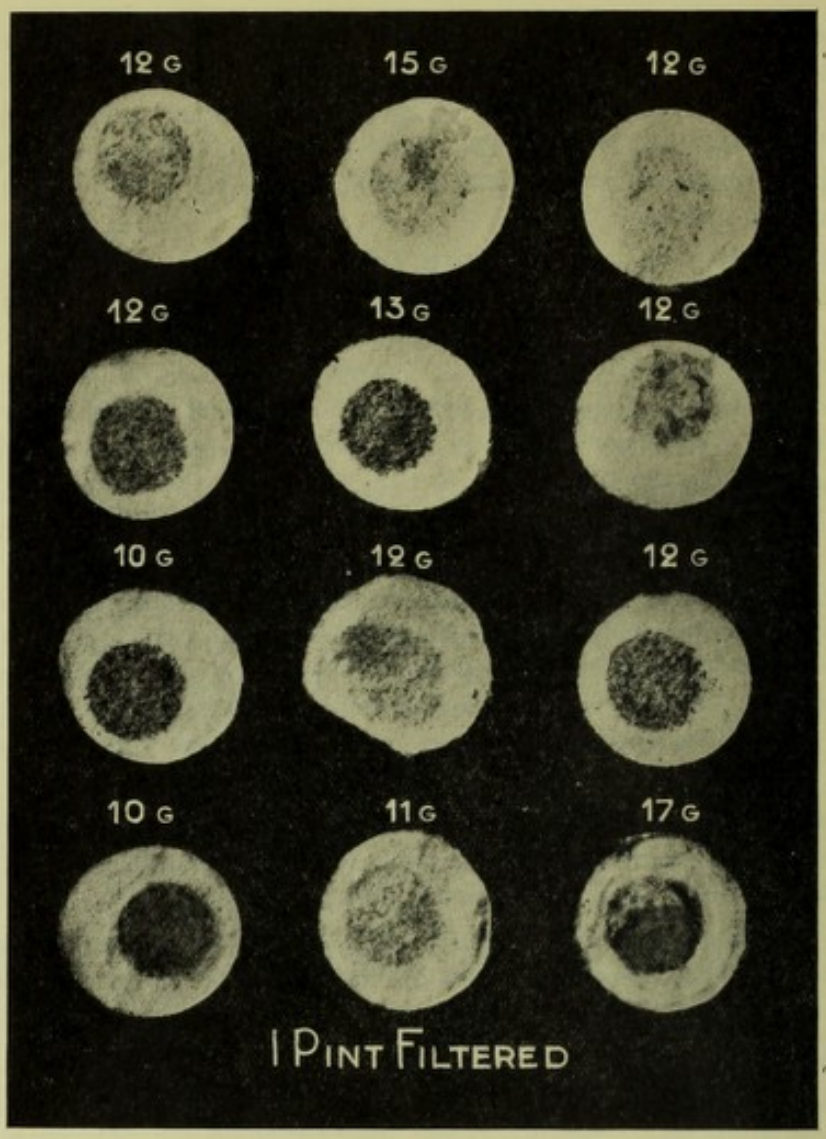
Tubercle-free Milk for Public Health Institutions.

It says much for the prescience of the Local Authority that it decided without a dissentient voice to embark on the establishment of a herd of tubercle-free cows at Colinton Mains Farm. The farm is owned by the Municipality and will be managed by them. A responsibility rested on our shoulders to give a lead in the matter of producing Clean Milk. Elaborate premises are not necessary. It will devolve on those responsible to prove that system can do a great deal to ensure the production of satisfactory supplies.

Graded Milk.

From small beginnings the supply of high-grade milk has grown to comparatively large proportions in the City. It is more expensive than ordinary commercial milk, but when the time, trouble, and expense entailed in collecting and maintaining a herd of tubercle-free cows are taken into consideration, the additional cost of production need not cause surprise. Milk drawn from cows that have been found to be free from tuberculosis is a valuable factor in preventive work. If the consumption of tubercle-free milk will avert the spread of tuberculosis, especially among young children, good results may be confidently expected.

The present gap between high-grade milk and some of the commercial liquid being sold is far too wide. There is much to be said for the producer who says he cannot afford to collect a herd of cows that have been subjected to the Tuberculin test and found free from tuberculosis. It calls for patience and capital to secure such a herd. But there is no excuse whatever for any dairyman to say he cannot produce clean milk.



It does not need elaborate byres to turn out milk free from contamination. Constant attention to cleanliness with unremitting concentration on details, such as keeping everything clean, are the prime factors necessary.

Food Poisoning.

From time to time notifications of cases of suspected food poisoning reached the Department. In the majority of instances personal and bacteriological investigations failed to substantiate the suspicion that specific bacillary action was at work. In one case, however, with the assistance of Professor Mackie, the Professor of Bacteriology, Edinburgh University, a critical examination proved that the *Bacillus Aertrycke* was the exciting cause of the small outbreak that had occurred. It was further ascertained that the agglutination test was yielded by some of those who had recovered from the outbreak. Consequent on that outbreak the Local Authority was advised to adopt the principle of paying a fee of 2s. 6d. to every medical man who reported a case or cases of suspected food poisoning. This suggestion was accepted by the Local Authority and the scheme put in operation. The following circular was issued to the medical men practising in this administrative area :—

PUBLIC HEALTH DEPARTMENT,
JOHNSTON TERRACE,
EDINBURGH, *25th November* 1925.

DEAR SIR,

Notification of Cases of Suspected Food Poisoning.

During the past year or two, extensive outbreaks of food poisoning have taken place in Aberdeen, Dundee, and elsewhere throughout the country. To enable this Department to locate the sources of mischief of possible outbreaks in this City it is necessary that early notification of suspected cases of food poisoning should be made to the Medical Officer of Health.

Recent experiences have shown that delayed notification of suspected cases of food poisoning created difficulties not only in tracing the actual source of infection, but also in satisfactorily dealing with

"carriers." It has to be kept in mind that "carriers" constitute important, and, it may be, dangerous factors, since they are capable of causing further spread and even recrudescence of infection.

Food poisoning is no longer considered from the standpoint of Ptomaines. Our present-day knowledge forces us to look upon food-poisoning outbreaks as being provoked by specific micro-organisms. While a particular form of food, such as milk, cream, cheese, or flesh, may show evidences of decomposition, infection cannot be spread unless a specific germ is associated with the decomposing food. That this is the case may be demonstrated by agglutination in the blood drawn from those who have been infected by the particular micro-organism.

The Public Health Committee has agreed to pay a fee of 2s. 6d. for the immediate notification of cases of suspected food poisoning occurring in your practice. As soon as notification is made to the Medical Officer of Health, Johnston Terrace, and if so desired, every effort will be exerted to render assistance in collecting suspected material which will be submitted for bacteriological investigation. It is scarcely necessary for me to add that your co-operation in this procedure will be greatly valued.

Yours faithfully,

WM. ROBERTSON,
Medical Officer of Health.

Tuberculosis.

The wave of gradual decline that has been manifesting itself during the past fifty years has been remarkable, and must be ascribed to the educational work that has been going on among the citizens of this country. Preventive work has been provided with a most illuminating example of its true value when it is realised that the housing conditions of many of our large centres of population are only now assuming definite shape towards improvement. The lasting regret of every medical officer of health will be that the slum problem was not taken in hand before any other housing scheme. With statistics literally written in red ink before them, our parliamentarians passed the tuberculosis plague-spots by, and proceeded to spend millions of pounds on the erection of types of houses that the slum-dwellers could not possibly afford to occupy. Now that the true position has been grasped, it is devoutly hoped that the elimination of the breeding-places of tuberculosis will be systematic and sustained When the new housing schemes begin to give proof of their preventive values, we shall expect to find a further reduction in the incidence of Pulmonary Tuberculosis.

Other Forms of Tuberculosis.

It can hardly be doubted that the improvement now taking place in the quality of the milk supply will reduce the risk of infecting children with those forms of Tuberculosis that attack bones, joints, glands, and serous membranes. The institutions set aside for the treatment of Tuberculosis are invariably taxed to their utmost limits. This entails very heavy oncost charges. Every penny spent to prevent the incidence and spread of Tuberculosis in all its forms will be well invested. But the citizen must not forget to play his part in the struggle against this, as well as every other form of infectious disease. Attendance at the Tuberculosis Dispensaries and residence in Sanatoria will only act as make-shifts if the advice given and the treatment prescribed are not closely followed.

Housing Schemes.

Within the past three years two very extensive Improvement and Slum Clearance Schemes have been undertaken by the Municipality. The Cowgate-Grassmarket Scheme, which was the earlier of the two, is still in process. The slow rates at which alternative houses were being erected allowed too many of the condemned houses to remain in occupation. The work of providing for the dispossessed was further complicated by the fact that many of the habitues of the improvement area displayed reluctance to leave their haunts on account of the distance they would be compelled to travel to and from work. They also complained of the rents charged for the new houses, and feared that their costs of living in the new area would be much higher.

Persuasion ultimately converted many of the objectors to the view that the occupation of a new house situated in good surroundings, and provided with modern conveniences, was after all something worth possessing. Many of the dispossessed tenants have yet to discover the advantages of the cooking range, the hot water boiler, the washing tub, and the bath, to realise how much they had been hampered in health, comfort, and convenience in their condemned hovels.

In the second scheme, in which Leith prominently figured, a different spirit appeared to manifest itself. As soon as alternative houses were provided the people gladly transferred themselves and their belongings to the Lochend Area. When the condemned areas in Leith are cleared away, the value of the improvement scheme will prove itself.

It is fortunate that alternative housing is being meditated in anticipation of the third improvement scheme now in course of preparation in connection with the St Leonard's Area. This will be the largest and most comprehensive of the three. The need for it is great, but as has been suggested, if it is to prove of immediate value it should be anticipated by the provision of alternative accommodation. The areas chosen for the new houses at Lochend and at Prestonfield are in many respects ideal. Both are well exposed to the sun, and all round them is abundance of free space with convenience of access and transport.

The Demand for Houses.

Quite apart from the requirements of those who will be dispossessed by Improvement Schemes, there will be a continual demand from those who are living in houses that come within the category of being either unfit for human habitation, or by reason of their size are overcrowded by increasing families. Within the past year 500 certificates were issued by myself and sent to the City Chamberlain's Housing Department in support of alternative accommodation for such persons. In each of these cases, careful investigations were made regarding sanitary conditions and overcrowding, and only where good grounds existed were certificates granted. In the Lochend Area a percentage allocation is granted to those whose houses have been certified to be overcrowded or prejudicial to the health of the inmates.

During the course of their routine work, the district officers attached to the Sanitary Inspector's Department discover houses that demand serious consideration from the point of view of fitness for human habitation. Experience has shown that in Edinburgh, as well as in every other city, such instances, dotted over different districts, will provide a more or less sustained demand for alternative housing developments, though these do not require to be on the far-reaching scales now under consideration. The economic situation places a damper on housing ideals. We may have played our part, but some years will elapse before we can say that we have conquered the housing situation. It cannot be said that the Housing Committee has shirked its task. Big schemes have been undertaken; some are nearing completion, and still more are being meditated. But the expense has been enormous, and that puts a bridle on hustle. It is a great pity that the erection of steel and other allied types of houses has been beset by so many difficulties and hindered by prejudiced objections. Their rapidity of erection is in itself, apart from other good features, a strong argument in their favour as a means for a quick and ready way out of many of our present difficulties. Those of us who have lived in composite buildings can best testify in their favour. It will be interesting to ascertain how the experimental houses succeed in Edinburgh, and how soon their alleged imperfections will be disproved.

House Ownership.

Evidence is not awanting to prove that well-considered schemes of house ownership make a strong appeal. Under the Small Dwellings Acquisition Act, much more could be done to relieve the housing situation. This scheme should be popularised, because many among the middle classes would gladly welcome the opportunity to own their houses. But, as I have indicated, few understand how to proceed. Local Authorities should therefore make the scheme well known by embarking upon publicity campaigns.

The Hostel Principle.

Over a year has elapsed since I reported in favour of the erection of a hostel for working men in the City. Different types of hostels were visited by a deputation, and in each case satisfaction was expressed by those who had seen them. Only in one instance was the hostel controlled by a Local Authority. The others inspected were run by private enterprise. A definite offer was made to this Corporation to take over a hostel should such be built by the Local Authority. No financial loss need therefore be anticipated. The value of such an institution cannot be doubted. It provides

accommodation far superior to that generally offered by ordinary lodgings. The food is varied, well prepared, and attractively served ; the facilities for rest and recreation good, and the lodger has no responsibility beyond the payment of a sum which averages 24/- to 25/- a week and includes sleeping quarters, washing facilities, and all meals. A separate canteen is provided, and from this the lodger can purchase any luxuries he may fancy. It has puzzled me to understand why the hostel principle has not been more enthusiastically advocated. It is not a fad, it is not luxury, it is an accomplished fact, and has met what might be truly termed a clamant call from working men who are single, homeless, and in steady employment. The hostel fills a most important gap in the housing needs of every industrial centre.

Tenements and Infectious Disease.

The passing of the lofty tenement in the various improvement schemes is a feature that calls for comment. It is well-nigh impossible to secure decency or comfort in a tenement with long entrance passages, tortuous, narrow, ill-lit stairs, gloomy, ill-ventilated lobbies, with the aggregation of dwellings branching off from these lobbies and devoid of adequate sanitary or other conveniences. People who live in such dismal places must in the nature of things be prompted to abandon all hope. In some cases 16, 18, or as many as 24 separate houses occur in some of the tenements it is now desired to clear away. Baths are unknown, clothes washing has to be performed in a tub in the general living-room invariably used as the kitchen. There may be a sink common to several houses and situated in a passage as dark as a dungeon. A sanitary convenience may be used by several families. It is seldom in working order. The younger members must play together in the passages because there is no other place for them apart from the small house or the public thoroughfare. The description in no way exaggerates the facts, and when one compares the new houses at Lochend with those condemned in the Cowgate-Grassmarket Area, the difference is sufficiently striking to convert the most obstinate opponent of housing schemes and to wring pity from the more fortunate citizens.

Succeeding years must assuredly testify in favour of the more airy, two-flatted houses with their provision of conveniences and surrounding space. The younger generation will certainly benefit by the change. Where the out-of-date tenement system prevails, with its aggregation of houses and congestion of population, an outbreak of Measles or Whooping Cough is always anticipated with dread. During the epidemic that occurred last year the spread of infection was most noticeable in lofty tenements because the opportunities for intimate contact were many and constant. In one tenement no less than 8 separate families were attacked. In another instance, 7 different houses were invaded. In three cases 6 families were infected. In four there were 5 attacked. In nine tenements we found infection had spread to 4 houses. In thirty-seven "lands" 3 families suffered, and in eighty-seven instances 2 separate households were affected. Such outstanding examples could not be found among the newer types of houses because the opportunities for contact would not exist. The houses have separate entrances. The opportunities for recreation are at hand, and home nursing offers the infected children a reasonable chance of recovery because the sick rooms can be searched by fresh air.

I cannot conclude without conveying my appreciation and thanks to the various Heads of Departments who have materially helped to maintain the high standards aimed at by the Local Authority. To the Chairman and members of the Public Health Committee, I am grateful for consistent encouragement and whole-hearted support.

The Matrons and the Staffs of the various hospitals and institutions under our care deserve unstinted praise for their tact and unremitting work during a strenuous year.

I am, My Lord Provost and Gentlemen,

Your obedient Servant,

WILLIAM ROBERTSON, M.D., D.P.H., F.R.C.P. (Ed).

SUMMARY OF STATISTICS

For the Years 1921, 1922, 1923, 1924, and 1925.

	1921	1922	1923	1924	1925
Population Estimated to middle of year	*420,264	422,547	422,169	419,291	421,968
Area of City—Acres	32,526	32,526	32,526	32,526	32,526
Density of Population—Persons per acre	12·9	13·0	13·0	12·9	13·0
Houses Inhabited	100,185	100,870	101,385	101,625	102,431
Marriages Registered	4,610	4,057	4,164	3,963	4,065
Birth-rate	22·4	21·5	21·3	20·9	19·6
Do. (Corrected for Country Births)	21·5	20·8	20·5	20·0	18·6
Death-rate (Corrected for Country Deaths)	14·4	15·3	13·9	15·0	14·5
Infantile Mortality	96	91	82	89	96
Cancer Death-rate	1·5	1·5	1·5	1·6	1·6
Phthisis Death-rate	·9	·9	·9	1·0	1·0
†Epidemic Diseases Death-rate	·9	·9	·9	1·0	1·1

* Census Population.

† Includes Enteric Fever, Measles, Scarlet Fever, Whooping Cough, Diphtheria, and Diarrhœa and Enteritis under 2 years.

Note.—Further detailed statistics for a series of years are shown in the Tables throughout this Report.

VITAL STATISTICS

AND

REPORTS RELATING TO CHILD WELFARE, TUBERCULOSIS, CITY HOSPITAL, PORT MEDICAL INSPECTION, VENEREAL DISEASES, SANITARY DEPARTMENT, VETERINARY DEPARTMENT, ETC.

POPULATION.

In estimating the population for the year 1925 the Registrar-General has considered it necessary to make a departure from the procedure followed for a number of years. In a memorandum recently issued it is pointed out that the estimates of population for the larger burghs have hitherto been based solely on the housing figures, and have not been adjusted for the general gain or loss of population by immigration or emigration. It is further explained that another matter which supports the change is the unsatisfactory nature of the housing figures, these indicating the building of new houses to meet the pre-existing requirements rather than any influx or increase of population. The Registrar-General has accordingly based his calculations on the number of occupied houses in the City, and has also made allowance for the effects of emigration from Scotland as a whole.

The population of the City as adjusted by this new method of estimating is 421,968. The figures relating to the years 1922, 1923, and 1924 have been revised, and the various comparative rates throughout this report corrected accordingly.

The distribution of the population in the different areas of the City, together with the extent of the area and the density of persons per acre, is as follows :—

Area.	Males.	Females.	Total.	Acres.	Persons per Acre.
Edinburgh .	139,886	173,416	313,302	10,877	28·8
Leith .	39,729	41,853	81,582	1,641	49·7
Suburban .	13,168	13,916	27,084	20,008	1·3
	192,783	229,185	421,968	32,526	13·0

The Ward populations will be found in the Table on page 7. These estimates have been calculated on the same principle as the general population of the City, and are further adjusted to exclude the residents in institutions and Military Quarters.

Inhabited Houses.—The particulars in the following Table, which relate to the housing accommodation in the City, have been kindly supplied by the Burgh Assessor. The number of occupied houses at Whitsunday showed an increase of 806 when compared with 1924. The principal increases have taken place in houses rented over £20, and chiefly in Wards where Corporation Housing Schemes were in progress.

NUMBER OF DWELLING-HOUSES OCCUPIED AT WHITSUNDAY 1925.

Ward.		Under £5.	£5 and under £10.	£10 and under £15.	£15 and under £20.	£20 and under £30.	£30 and under £40.	£40 and under £50.	£50 and upwards.	Total in each Ward.
1.	Calton	6	315	1,365	1,471	1,558	488	141	180	5,524
2.	Canongate	78	1,167	1,560	1,089	1,232	274	95	34	5,529
3.	Newington	4	164	336	469	1,047	587	382	1,719	4,708
4.	Morningside	1	36	57	178	985	1,846	1,337	1,858	6,298
5.	Merchiston	...	36	281	568	2,050	1,443	405	940	5,723
6.	Gorgie	14	96	1,674	1,517	1,286	323	110	63	5,083
7.	Haymarket	4	166	428	333	637	297	183	1,460	3,508
8.	St Bernard's	29	362	522	397	1,044	788	153	831	4,126
9.	Broughton	9	179	584	865	1,101	685	269	275	3,967
10.	St Stephen's	17	568	795	860	951	560	282	578	4,611
11.	St Andrew's	26	875	654	320	238	111	73	669	2,966
12.	St Giles	48	1,605	1,633	658	768	143	70	100	5,025
13.	Dalry	3	257	2,057	1,863	1,013	48	8	*4	5,253
14.	George Square	23	812	1,148	845	1,248	527	232	263	5,098
15.	St Leonard's	67	1,828	2,099	840	633	240	108	42	5,857
16.	Portobello	10	279	531	751	1,062	811	519	572	4,535
17.	South Leith	4	464	1,532	1,880	2,073	318	158	121	6,550
18.	North Leith	12	985	1,922	976	539	92	36	41	4,603
19.	West Leith	8	609	1,092	617	643	469	278	723	4,439
20.	Central Leith	...	302	1,600	660	500	88	31	18	3,199
21.	Liberton	69	445	777	151	140	94	107	177	1,960
22.	Colinton	31	276	381	139	135	102	72	341	1,477
23.	Corstorphine and Cramond	42	354	265	237	338	346	295	515	2,392
	Total	505	12,180	23,293	17,684	21,221	10,680	5,344	11,524	102431
Edinburgh Area		339	8,745	15,724	13,024	16,853	9,171	4,367	9,588	77,811
Leith Area		24	2,360	6,146	4,133	3,755	967	503	903	18,791
Suburban Area		142	1,075	1,423	527	613	542	474	1,033	5,829

The following Table gives a general survey of the increase which has taken place in the population since 1861, and at the same time shows the number of births and deaths each year since 1881, together with the rate per 1000 of the population.

The figures throughout the Table have been adjusted to remove errors in estimating for intercensual years.

Years.	Population.	Deaths.	Rate per 1000.	Births Registered.	Rate per 1000.
†1861	170,444	3946	23·1	5694	33·4
†1871	196,979	5484	27·8	6874	34·8
†1881	228,346	4308	18·8	7360	32·2
1882	232,602	4292	18·4	7351	31·6
*1883	239,910	4275	17·8	6844	28·5
1884	242,802	4556	18·7	7481	30·8
*1885	245,447	4241	17·2	7372	29·9
1886	248,121	4555	18·3	7451	30·0
1887	250,824	4824	19·2	7641	30·4
1888	253,264	4374	17·2	7500	29·6
1889	256,318	4415	17·2	7414	28·9
*1890	259,110	4999	19·2	7177	27·6
†1891	261,225	5257	20·1	7382	28·2
1892	265,573	4746	17·8	7169	26·9
1893	269,105	4830	17·9	7434	27·6
1894	272,683	4350	15·9	7207	26·4
1895	276,309	5246	18·9	7402	26·6
1896	279,983	4275	15·2	7610	27·1
*1897	297,198	5782	19·4	7990	26·8
1898	301,305	5320	17·6	8097	26·8
1899	305,468	5396	17·6	8218	26·9
*1900	309,688	5396	17·4	8129	26·2
†1901	316,921	5633	17·7	7920	24·9
*1902	317,880	5113	16·0	7909	24·8
1903	318,219	4963	15·5	8112	25·4
1904	318,560	4995	15·6	7777	24·4
1905	318,777	4799	15·0	7741	24·2
1906	319,120	4868	15·2	7649	23·9
1907	319,464	4978	15·5	7504	23·4
1908	319,809	4690	14·6	7506	23·4
1909	320,282	5106	15·9	7410	23·1
1910	320,504	4651	14·5	7063	22·0
†1911	320,829	4652	14·4	§6507	20·8
1912	321,119	4701	14·6	6346	19·7
1913	321,645	4630	14·3	6243	19·4
1914	325,780	5025	15·4	6466	19·8
1915	323,388	5419	16·7	5851	18·1
1916	321,993	4812	14·9	5748	17·8
1917	320,116	4924	15·3	4913	15·3
1918	318,250	5090	16·0	4830	15·1
1919	316,390	5583	17·6	5612	17·7
1920	314,193	4442	14·2	7774	24·7
*†1921	420,264	6048	14·4	9028	21·5
1922	422,547	6447	15·3	8772	20·8
1923	422,169	5875	13·9	8662	20·5
1924	419,291	6312	15·0	8404	20·0
1925	421,968	6138	14·5	7843	18·6

* City boundaries extended. † Census year.

§ The Births from this year onward are corrected for transfer births, *i.e.*, births to parents domiciled outwith the City are excluded, while births occurring to Edinburgh parents beyond the City are included.

MARRIAGES.

The number of marriages registered during the year was 4065 as compared with 3963 in 1924. The marriage of 8130 persons is equivalent to 19·2 per 1000 of the population.

During the year 1106 "irregular" marriages, *i.e.*, by declaration before the Sheriff, were registered in the City. As many of the contracting parties to this form of marriage are resident in other parts of the country, it is not possible to arrive at any accurate conclusion which might otherwise be deduced from the marriage statistics.

The number of marriages registered in each quarter of the year was as follows:—

1st Quarter . . .	875
2nd ,, . . .	982
3rd ,, . . .	1266
4th ,, . . .	942
	4065

DEATHS AND DEATH-RATES.

The total number of deaths registered in the City during the year was 6793. Of these 859 were non-residents whose deaths have been transferred to the district in which the deceased person's permanent domicile was situated. There were 204 citizens who died in other parts of the country and whose deaths require to be included in the City records. After making these adjustments the net number of deaths allocated to the City for statistical purposes was 6138.

The mortality-rate based on the corrected number of deaths is equivalent to 14·5 per 1000 of the estimated population.

The death-rate for the year compares very favourably with the rates recorded since the extension of the City boundaries in 1920. While the death-rates which have prevailed during the last five years can be considered as satisfactory, they are capable of improvement. This, however, will only take place when the housing conditions obtaining in overcrowded districts, both in the Edinburgh and Leith areas, are raised to a better standard.

The following Table shows the number of deaths occurring in the City and the transfers made in each quarter of the year. The equivalent annual death-rates are also given, these being calculated on the corrected number of deaths :—

Quarter.	Total Deaths Registered.	Transferred to other Districts.	Transferred from other Districts.	Net City Deaths.	Death-rates per 1000.
1st .	1877	166	46	1757	16·7
2nd .	1649	238	42	1453	13·5
3rd .	1418	238	71	1251	11·9
4th .	1849	217	45	1677	15·9
Total .	6793	859	204	6138	14·5

The accompanying figures are submitted so that comparisons may be made between the different districts of the City :—

Area.	Number of Deaths.	Death-rate per 1000.
Edinburgh . . .	4463	14·5
Leith	1161	14·4
Suburban . . .	281	11·1
Institutions . . .	222	...
Military Quarters . .	11	...
Whole City . . .	6138	14·5

The following death-rates, taken from the Registrar-General's preliminary statement for the year 1925, will enable deductions to be made as to the relative healthiness of the City when compared with other Scottish towns. The highest death-rate among the large towns was that recorded for Dundee, viz., 16·7 ; the rate for Glasgow was 14·8 ; and for Aberdeen 13·8. The death-rate for the whole of Scotland was 13·4 per 1000 of the population. For the sixteen larger burghs, collectively, which may be taken as representing the urban population of the country, the rate was 14·4.

	Rate per 1000 of Population.		Rate per 1000 of Population.
Glasgow	14·8	Paisley	13·2
Edinburgh	**14·5**	Greenock	14·3
Dundee	16·7	Motherwell and Wishaw	12·1
Aberdeen	13·8	Clydebank	11·4
	Scotland ... 13·4		

The next Table gives a summary of the principal mortality-rates recorded for the various Wards. The density of persons per acre in each Ward is also shown, together with the number of one- and two-roomed houses.

In connection with the housing conditions in the respective Wards, it is of interest to note that 1278 or 16·8 per cent. of the total occupied one-roomed houses in the City are situated in St Giles Ward. In St Leonard's Ward there are 1205 such houses, the percentage being 15·9.

It will thus be seen that practically one-third of all the one-roomed houses in the extended City are to be found in these two overcrowded and restricted areas.

The conditions associated with this class of house are usually far from satisfactory, and generally have an adverse effect upon the health and well-being of the inmates. It is, therefore, not surprising that high death-rates, with excessive Infantile Mortalities, are, as a rule, returned from the districts where unsatisfactory and inadequate housing, conditions exist.

Ward.	Density of Population per Acre.	Housing.		Death-rate per 1000.			Infantile Mortality.
		1 Room.	2 Rooms.	All Causes.	Phthisis.	Epidemic Diseases.	
Calton	97·9	232	1,868	13·7	1·0	1·0	78
Canongate	*23·3	577	2,331	13·9	·8	1·6	113
Newington	19·9	115	461	14·9	·9	·5	72
Morningside	15·4	7	156	14·9	·4	·4	86
Merchiston	30·9	32	747	13·9	·7	·4	58
Gorgie	31·8	49	2,356	11·5	9	1·0	64
Haymarket	14·4	154	467	11·1	·7	·5	50
St Bernard's	13·1	161	820	12·0	·5	·8	79
Broughton	32·4	158	1,106	12·9	·9	·5	45
St Stephen's	90·4	418	917	16·6	1·1	1·3	81
St Andrew's	54·1	722	749	15·5	1·2	1·2	144
St Giles	78·9	1,278	1,793	19·7	1·4	2·0	146
Dalry	116·1	224	3,194	13·7	·8	1·0	80
George Square	85·8	610	1,587	16·8	1·1	1·3	95
St Leonard's	216·0	1,205	2,461	17·2	1·7	2·4	119
Portobello	9·0	117	1,084	12·8	·9	·6	86
South Leith	34·1	203	2,764	13·2	·8	1·2	95
North Leith	94·3	579	2,202	15·7	1·1	2·5	128
West Leith	38·3	270	1,522	12·8	1·0	·8	91
Central Leith	99·8	182	1,752	16·9	1·4	2·8	107
Liberton	1·5	149	992	10·2	·4	·4	84
Colinton	1·1	76	574	12·5	·6	·5	75
Corstorphine and Cramond	1·1	57	500	11·1	·4	·2	26
Total—Extended Area	13·0	7,575	32,403	14·5	1·0	1·1	96
Edinburgh Area	28·8	6,059	22,097	14·5	·9	1·1	94
Leith Area	49·7	1,234	8,240	14·4	1·0	1·7	106
Suburban Area	1·3	282	2,066	11·1	·5	·3	64

* Includes Holyrood Park.

In reviewing the health statistics relative to the various wards, attention has again to be directed to the high mortality rates prevailing in the central districts of the City.

In the Edinburgh Area the highest death-rate—19·7 per 1000 of the population—was recorded for St Giles Ward. The death-rate from Pulmonary Tuberculosis was equivalent to 1·4 per 1000, while Epidemic Diseases accounted for 2·0. The Infantile Mortality in this Ward was also excessive, being at the rate of 146 per 1000 births, and this rate is not exceeded by any other Ward in the City.

In St Leonard's Ward the general death-rate was 17·2 per 1000, while for Pulmonary Tuberculosis and Epidemic Diseases, rates of 1·7 and 2·4 respectively were recorded.

The Mortality from Epidemic Diseases in these two Wards is largely accounted for by the prevalence of Measles and Whooping Cough in the early months of the year. Fully 23 per cent. of all the deaths, from these diseases, which occurred in the City were children resident in St Giles and St Leonard's Wards.

The high death-rates in these Wards from Tuberculosis and Infectious Diseases point unquestionably to congestion of population and overcrowding of houses. The huddling together of large sections of the residents in tenements, which practically form the only housing accommodation in the Wards, makes the spread of infection difficult to control. High tenements crowded with houses encourage the spread of infection.

In regard to the other central Wards, George Square shows a death-rate of 16·8, while the Canongate Ward returns the remarkably low general death-rate of 13·9 per 1000. In regard to this Ward, however, it has to be pointed out that there is a large population resident in better-class houses on the northern boundary of the Ward, and this, so far as statistics are concerned, counteracts the effect produced by the more central and overcrowded parts.

In the Leith Area similar facts emerge, regarding the overcrowded districts, as those to which attention has already been directed in the City Wards. The highest death-rate in the Area was found in Central Leith Ward, viz., 16·9 per 1000 of the population. The Pulmonary Tuberculosis death-rate was 1·4, and the diseases comprising the Epidemic group were responsible for 2·8 per 1000. The latter rate represents the highest Ward mortality from these causes in the City.

The North Leith Ward returns the comparatively low death-rate, for this Ward, of 15·7, but the Epidemic Diseases rate, 2·5 per 1000, is only exceeded by the rate recorded for the Central Ward.

These high rates are primarily due to Measles and Whooping Cough, which, as already stated, were prevalent in the City in the early part of the year.

The deaths of infants under 1 year were equal to 128 deaths per 1000 births. Only two Wards in the City—St Giles, 146, and St Andrew's, 144—show higher rates.

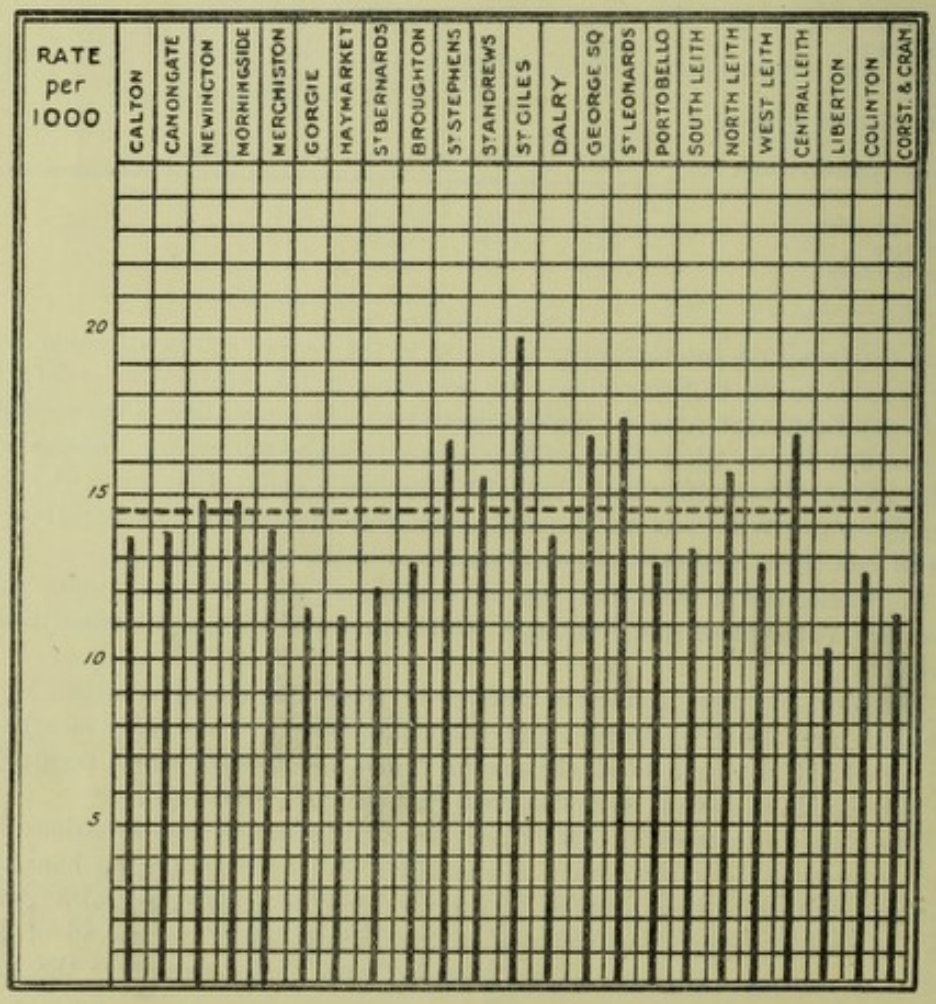
The West and South Wards show death-rates of 12·8 and 13·2 respectively. These rates are much below the average for the City, and are in keeping with the rates experienced since the extension of the City boundaries in 1920.

The statistics relating to the three Suburban Wards can be considered as extremely satisfactory. In every instance the death-rates are much below the rates for the City as a whole.

The following Diagram shows the rate of mortality experienced in the various Wards. On page 7 a Table will be found giving more detailed statistics for each Ward.

DEATH-RATE—ALL CAUSES.

Per 1000 of Population.



----- *Death Rate for City.*

Table showing the Population, etc., also the Births and Deaths in each Ward during the year.

Ward.	Estimated Population.	Area in Acres.	Density of Population per Acre.	Births.		Infantile Mortality.		Deaths.							
								Pulmonary Phthisis.		* Epidemic Diseases.		Other Causes.		All Causes.	
				Number.	Rate per 1000.	Deaths.	Rate per 1000 Births.	Number.	Rate per 1000.	Number.	Rate per 1000.	Number.	Rate per 1000.	Number.	Rate per 1000.
Calton	22,331	228	97·9	425	19·0	33	78	22	1·0	23	1·0	263	11·7	308	13·7
Canongate	22,462	965	23·3	549	24·4	62	113	18	·8	36	1·6	259	11·5	313	13·9
Newington	17,778	891	19·9	208	11·7	15	72	16	·9	10	·5	239	13·5	265	14·9
Morningside	20,940	1,358	15·4	174	8·3	15	86	9	·4	9	·4	296	14·1	314	14·9
Merchiston	20,924	677	30·9	207	9·9	12	58	16	·7	8	·4	267	12·8	291	13·9
Gorgie	21,496	676	31·8	469	21·8	30	64	19	·9	22	1·0	207	9·6	248	11·5
Haymarket	13,791	959	14·4	141	10·2	7	50	9	·7	8	·5	137	9·9	154	11·1
St Bernard's	16,439	1,250	13·1	229	13·9	18	79	8	·5	14	·8	176	10·7	198	12·0
Broughton	15,319	472	32·4	246	16·0	11	45	14	·9	8	·5	177	11·5	199	12·9
St Stephen's	17,188	190	90·4	273	15·9	22	81	19	1·1	23	1·3	244	14·2	286	16·6
St Andrew's	11,149	206	54·1	216	19·4	31	144	14	1·2	13	1·2	146	13·1	173	15·5
St Giles	20,988	266	78·9	569	27·1	83	146	30	1·4	43	2·0	342	16·3	415	19·7
Dalry	21,708	187	116·1	413	19·0	33	80	17	·8	21	1·0	260	11·9	298	13·7
George Square	21,292	248	85·8	421	19·8	40	95	23	1·1	29	1·3	307	14·4	359	16·8
St Leonard's	22,470	104	216·0	605	26·9	72	119	38	1·7	55	2·4	295	13·1	388	17·2
Portobello	19,837	2,200	9·0	362	18·2	31	86	18	·9	11	·6	225	11·3	254	12·8
South Leith	27,917	819	34·1	547	19·6	52	95	24	·8	33	1·2	312	11·2	369	13·2
North Leith	20,561	218	94·3	524	25·5	67	128	24	1·1	52	2·5	248	12·1	324	15·7
West Leith	17,703	462	38·3	375	21·2	34	91	18	1·0	14	·8	196	11·0	228	12·8
Central Leith	14,168	142	99·8	337	23·8	36	107	20	1·4	39	2·8	181	12·7	240	16·9
Liberton	9,575	6,339	1·5	167	17·4	14	84	4	·4	3	·3	91	9·5	98	10·2
Colinton	6,217	5,602	1·1	80	12·9	6	75	4	·6	3	·5	71	11·4	78	12·5
Corstorphine and Cramond	9,385	8,067	1·1	114	12·1	3	26	4	·4	2	·2	99	10·5	105	11·1
Institutions	8,020	...	...	142	...	21	...	13	...	16	...	193	...	222	...
Military Quarters	2,310	...	...	50	...	3	...	...	...	1	...	10	...	11	...
Totals	421,968	32,526	13·0	7843	18·6	751	96	401	1·0	496	1·1	5241	12·4	6138	14·5

* Includes Enteric Fever, Measles, Scarlet Fever, Whooping Cough, Diphtheria, and Diarrhœa and Enteritis under 2 years.

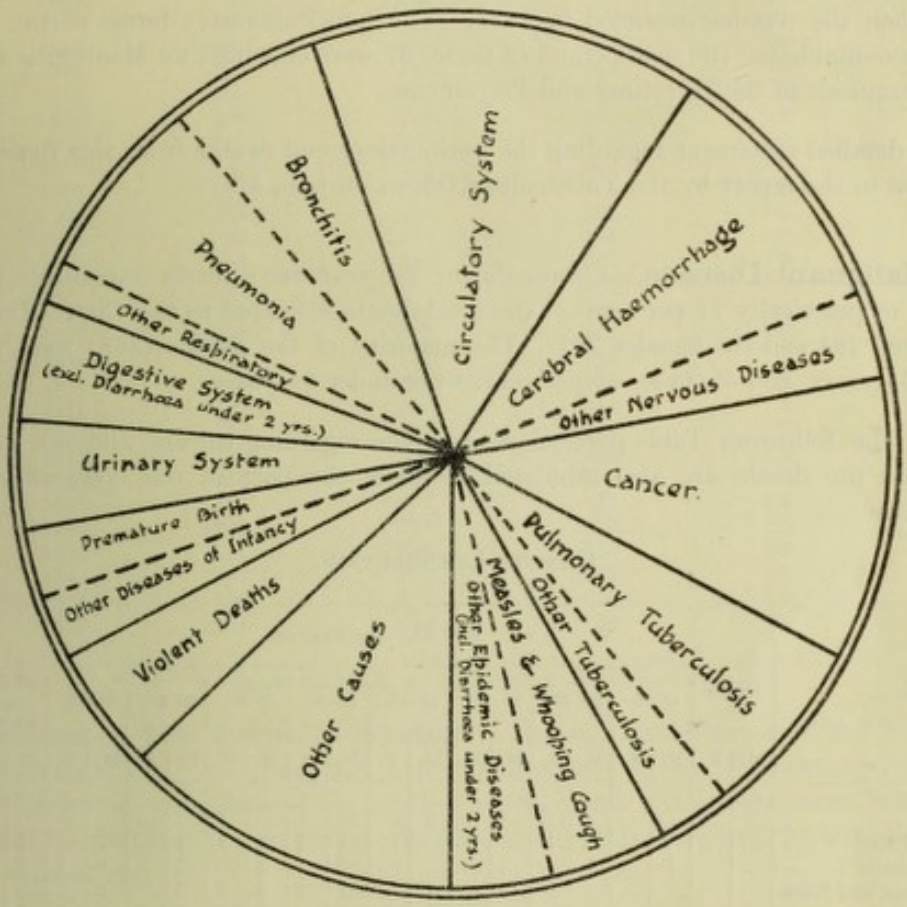
NOTE.—The ward populations have been adjusted by deducting the population resident in the principal institutions and military quarters. Births and deaths occurring in institutions are allocated to wards, except in cases where a permanent domicile cannot be established.

TABLE showing the number of Deaths (including Deaths transferred from other districts) and the Death-rates per 1000 of the Population during 1925 from all causes and from certain specified causes; also the Population, the number of Deaths and the Death-rates per 1000, at all ages and certain age-periods.

	Annual Death-rate per 1000	All Ages	Under 1 Year	1 and under 5 Years	Total under 5 Years	5 and under 10 Years	10 and under 15 Years	15 and under 25 Years	25 and under 35 Years	35 and under 45 Years	45 and under 55 Years	55 and under 65 Years	65 and under 75 Years	75 Years and upwards	Total above 5 Years
Age Distribution of Population	—	421968	7371	25,257	32,628	35,492	39,097	79,484	64,301	59,196	51,442	34,127	18,933	7268	389340
Deaths from all Causes	—	6138	751	483	1234	112	61	221	268	348	594	935	1189	1176	4904
Annual Death-rate per 1000	—	14·5	101·9	19·1	37·8	3·2	1·6	2·8	4·2	5·9	11·5	27·4	62·8	161·8	12·6
Enteric Fever	·00	1	—	—	—	—	—	1	—	—	—	—	—	—	1
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	·20	85	36	44	80	5	—	—	—	—	—	—	—	—	5
Scarlet Fever	·15	62	2	29	31	17	3	4	5	2	—	—	—	—	31
Whooping Cough	·45	188	71	110	181	7	—	1	—	—	—	—	—	—	7
Diphtheria and Croup	·19	84	9	52	61	16	3	1	—	—	—	2	—	1	23
Influenza (Sole Cause)	·06	25	4	—	4	—	—	3	—	—	—	5	8	5	21
Erysipelas	·03	13	2	—	2	—	1	—	—	—	1	3	3	3	11
Encephalitis Lethargica	·04	18	2	—	2	3	—	1	—	1	4	6	1	—	16
Cerebro-Spinal Meningitis	·02	10	3	2	5	1	1	—	1	1	1	—	—	—	5
Tuberculosis of Respiratory System ...	·95	401	2	10	12	3	6	86	82	83	66	45	14	4	389
Tuberculous Meningitis	·13	57	10	28	38	8	3	7	1	—	—	—	—	—	19
Tuberculosis of Intestines and Peritoneum ...	·09	37	6	14	20	3	2	2	2	4	2	1	1	—	17
Other Tuberculous Disease	·17	71	10	12	22	6	1	10	9	10	3	5	2	3	49
Malignant Disease	1·59	675	—	—	—	—	—	5	11	39	104	209	202	105	675
Rheumatic Fever	·03	14	—	—	—	2	2	4	3	3	—	—	—	—	14
Meningitis	·08	32	16	9	25	1	—	1	2	2	1	—	—	—	7
Cerebral Hæmorrhage, Apoplexy, Hemiplegia ...	1·45	610	—	1	1	—	—	2	2	7	49	116	227	206	609
Other Nervous Diseases	·40	169	25	5	30	1	1	9	16	13	25	36	26	12	139
Heart Disease	1·81	764	1	2	3	2	8	15	17	37	77	169	222	214	761
Other Diseases of Circulatory System ...	·25	108	—	—	—	—	—	—	1	—	15	18	29	45	108
Bronchitis	·79	334	21	9	30	—	—	1	8	11	25	46	88	125	304
Pneumonia (all forms)	1·02	429	115	72	187	9	3	9	8	17	30	51	53	62	242
Other Diseases of Respiratory System ...	·24	100	14	10	24	1	1	3	4	8	12	12	15	20	76
Diarrhœa and Enteritis	·21	89	61	17	78	1	1	—	—	—	—	—	4	5	11
Appendicitis	·09	37	—	1	1	2	3	3	3	5	8	9	3	—	36
Diseases of Liver (non-Malignant) ...	·15	62	—	1	1	—	—	1	—	1	16	13	22	8	61
Other Diseases of Digestive System ...	·37	156	10	4	14	3	3	5	9	15	31	24	35	17	142
Nephritis—Acute and Chronic	·43	180	1	2	3	1	1	6	6	15	31	41	47	29	177
Other Urinary Diseases	·20	86	7	2	9	—	—	—	6	9	11	8	17	26	77
Puerperal Sepsis	·02	10	—	—	—	—	—	6	4	—	—	—	—	—	10
Other Diseases and Accidents of Childbirth ...	·07	30	—	—	—	—	—	—	21	9	—	—	—	—	30
Diseases of Early Infancy and Malformations ...	·70	296	289	5	294	—	—	1	1	—	—	—	—	—	2
Violent Deaths	·66	280	9	26	35	14	9	21	30	27	37	42	34	31	245
All Other Causes	1·48	625	25	16	41	6	9	14	16	29	45	74	136	255	584

CAUSES OF DEATH.

In the Table on the preceding page the deaths are classified according to the principal disease groups, and particulars are also given regarding the ages at death. The proportion of the total deaths assigned to some of these disease groups is shown in the following diagram :—



Epidemic Diseases.—This group comprises Enteric Fever, Measles, Scarlet Fever, Whooping Cough, Diphtheria, and Diarrhœa and Enteritis under 2 years.

The total number of deaths registered under these headings was 496, as compared with 402 in 1924.

The outbreak of Measles and Whooping Cough which began towards the end of 1924 continued during the early months of the year under report. The type of Whooping Cough was a particularly severe one, and accounted for no fewer than 188 deaths. Of these, 181 occurred among children under the age of 5 years, 71 being infants in their first year.

The following statement shows the relative fatality of the diseases in the Epidemic group :—

Whooping Cough	188	deaths or	37·9 per cent.
Measles	85	„ „	17·2 „ „
Diphtheria	84	„ „	16·9 „ „
Diarrhœa and Enteritis	76	„ „	15·3 „ „
Scarlet Fever	62	„ „	12·5 „ „
Enteric Fever	1	„ „	·2 „ „
	496		100·0

Further detailed information regarding these diseases will be found under the heading of "Infectious Diseases" on page 25.

Tuberculosis.—The total number of deaths from all forms of Tuberculous Disease was 566, the mortality being at the rate of 1·3 per 1000 of the population.

Respiratory Tuberculosis was certified as the cause of death in 401 cases, or 23 fewer than the number reported in 1924. The non-Pulmonary forms of the disease were accountable for 165 deaths, and of these, 57 were classified as Meningitis and 37 as Tuberculosis of the Intestines and Peritoneum.

A detailed statement regarding the notifications and deaths from this disease will be found in the report by the Tuberculosis Officer on page 33.

Malignant Disease.—Cancer during the year was directly responsible for 675 deaths, or practically 11 per cent. of the total deaths allocated to the City. The males numbered 284 and the females 391. The majority of the deaths (368) were persons under 65 years, and of these, 43 per cent. were under 55 years.

In the following Table particulars are given regarding the age and sex distribution, and the deaths are also tabulated to show the part of the body affected by the disease:—

CANCER DISTRIBUTION.

Site.	Sex and Age-Periods.																		Totals.
	Under 15.		15–20.		20–25.		25–35.		35–45.		45–55.		55–60.		60–65.		65–75.		75 and upwards.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Brain	...	...	...	...	...	...	...	...	1	...	...	1	...	1	...	...	...	...	...	...	3
Jaw, Face, and Ear	...	...	...	...	...	1	...	1	...	...	1	1	...	1	1	...	2	...	1	2	11
Tongue and Mouth	...	...	1	...	...	...	...	...	...	...	3	1	3	...	3	...	6	1	2	2	22
Larynx, Pharynx, and Neck	...	...	...	...	...	...	...	...	1	...	1	2	3	1	3	...	2	...	2	...	15
Thorax and Lungs	...	...	...	...	...	...	...	...	1	3	2	3	2	2	5	5	1	3	1	1	29
Breast	...	...	...	...	...	...	...	...	...	4	...	14	...	8	...	6	...	12	...	12	56
Stomach and Oesophagus	...	...	...	...	...	1	1	1	3	3	14	8	16	12	20	13	25	26	10	19	172
Liver and Gall Bladder	...	...	...	...	...	...	...	...	1	2	1	2	2	3	2	5	5	10	...	2	35
Intestines and Rectum	...	...	...	...	...	1	1	2	3	4	11	3	10	9	17	5	31	28	8	20	153
Pancreas	...	...	...	...	...	...	1	...	...	...	3	3	2	4	...	2	3	3	1	2	24
Pylorus	...	...	...	...	...	...	...	...	...	1	...	...	1	...	1	1	1	1	1	...	7
Uterus	...	...	...	...	...	...	...	2	...	3	...	12	...	11	...	3	...	13	...	2	46
Ovaries and Vagina	...	...	...	...	...	1	...	...	...	5	...	3	...	1	...	3	...	4	...	...	17
Penis and Scrotum	...	...	...	...	...	...	2	...	...	...	1	...	...	...	1	...	1	...	...	...	5
Abdomen and Pelvis	...	...	...	...	...	...	...	...	2	...	1	5	...	2	...	3	3	9	2	4	31
Kidney	...	...	...	...	...	...	...	...	...	...	3	...	1	1	...	1	1	...	...	...	7
Prostate	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	4	...	4	...	10
Bladder	...	...	...	...	...	...	...	...	...	...	1	1	1	...	...	1	1	...	...	2	7
Bones	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...	1	1	3	...	3	11
Ductless Glands	...	...	...	...	...	...	...	...	2	...	1	1	...	...	2	...	1	...	2	...	9
Otherwise specified	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	3	1	...	...	...	5
Totals. M.	...	...	1	...	...	...	5	...	14	...	43	...	43	...	55	...	89	...	34	...	284 } 675
Totals. F.	...	...	...	...	...	4	...	6	...	25	...	61	...	59	...	52	...	113	...	71	391 }

The accompanying Table shows the deaths and death-rates from Cancer in Edinburgh during the last 28 years. It should be noted, however, that the figures for 1921 and subsequent years refer to the enlarged City.

Year.	Male.	Female.	Total.	Rate per 1000 Living.
1898	104	163	267	·8
1899	112	164	276	·9
1900	116	181	297	·9
1901	110	183	293	·9
1902	127	185	312	·9
1903	130	186	316	·9
1904	125	206	331	1·0
1905	124	220	344	1·0
1906	132	198	330	1·0
1907	120	224	344	1·0
1908	123	230	353	1·1
1909	130	243	373	1·1
1910	167	220	387	1·2
1911	154	251	405	1·2
1912	139	261	400	1·2
1913	146	255	401	1·2
1914	172	277	449	1·4
1915	187	248	435	1·3
1916	190	256	446	1·4
1917	162	257	419	1·3
1918	189	265	454	1·4
1919	158	274	432	1·3
1920	194	277	471	1·4
*1921	246	379	625	1·5
1922	273	384	657	1·5
1923	267	377	644	1·5
1924	290	393	683	1·6
1925	284	391	675	1·6

* City Boundaries extended to include Leith and Suburban area.

Diseases of the Nervous System.—Deaths from Diseases of the Nervous System numbered 779. Of these, 429 were certified as Cerebral Hæmorrhage, 100 as Cerebral Embolism and Thrombosis, while Apoplexy and Hemiplegia were stated to have caused 81 deaths. Of the deaths classified under this heading, 471 were persons over 65 years of age.

Diseases of the Circulatory System.—The deaths from diseases assigned to this group numbered collectively 872. Diseases of the Heart accounted for 764 deaths, including 281 certified as Valvular Disease, 40 as Angina Pectoris, and 38 as Fatty Degeneration of the Heart. The deaths classified as due to diseases of the Blood Vessels numbered 108, and of these, 78 were attributed to Arterio-Sclerosis.

Diseases of the Respiratory System.—The deaths recorded under this heading, excluding those associated with Influenza, numbered 863, as compared with 1041 in 1924. Fully 40 per cent. of the deaths caused by Respiratory Diseases occurred during the last quarter of the year, the severe wintry conditions experienced during November and December being responsible for a greatly increased mortality from Pneumonia and Bronchitis.

Deaths from all forms of Pneumonia numbered 429, while Bronchitis was returned as the fatal cause in 334 instances. In addition to these, 42 Pneumonia and 7 Bronchitis deaths were complicated with Influenza.

As regards the age incidence in the Respiratory Group, 241 were children under 5 years, and of these, 150 were infants in their first year.

Diseases of the Digestive System.—The number of deaths registered as due to Diseases of the Digestive Organs was 268. This does not include 76 deaths from Diarrhœa and Enteritis under 2 years, which are classified under the Epidemic Diseases group. Non-Malignant diseases of the Liver accounted for 62 deaths, Appendicitis for 37, while 26 were ascribed to Ulceration of the Stomach.

Childbirth.—Diseases and Accidents connected with Pregnancy and Childbirth accounted for 40 deaths, 10 of which were classified as Puerperal Sepsis. The death-rate from these causes was equal to 5·1 per 1000 live births. In addition to the deaths classified under this heading, there were 3 fatal cases of Scarlet Fever complicated with Childbirth and one patient suffering from Pulmonary Tuberculosis died shortly after confinement.

Deaths by Violence.—Deaths attributed to Violent Causes numbered 280, as compared with 234 in the previous year and 251 in 1923.

MATERNITY AND CHILD WELFARE.

The following Report in connection with Child Welfare has been prepared by Dr T. Y. Finlay, who is in charge of this branch of the Department's activities :—

I have the honour to submit the Annual Report of the Maternity and Child Welfare Department for the year 1925.

A new departure during the year, details of which are given on page 22, has been the arrangement made with the Ministry of Labour to train girls as domestic nurses, giving them both a practical and theoretical knowledge of how to manage infants.

In the month of October, Mercury Vapour Lamps were installed at Victoria Park Home, Leith Infant Welfare Centre, and at the Central Offices of the Department, where Ultra-Violet Therapy is being systematically carried on and developed.

There can be no doubt that the use of the Ultra-Violet Ray is a very excellent therapeutic measure for the prevention of the onset of rickets and in the treatment of the condition during its active stage. In cases of malnutrition and in general debility following acute illness, the treatment appears to have a definite tonic effect which soon becomes evident by the improved appetite, more restful sleep, lessened irritability, and greater activity of the children. Increase in weight has not been a striking feature in the majority of the cases so far dealt with.

A Carbon Arc Lamp has also been installed at the Central Offices. The lamp has only been in use for a short time but the beneficial effects of the treatment have been most encouraging.

In November, thanks to the grant of an annual subsidy from the Corporation, five new Maternal and Infant Welfare Clinics were begun at the Elsie Inglis Memorial Hospital, and it is hoped that these new clinics will, to some extent, relieve the congestion at the Windsor Street and High Street Centres.

Unfortunately, it was found impossible this year to increase the present accommodation of 20 beds for cases of malnutrition at Victoria Park Home, for which there is such a crying need. It has also been necessary, for financial reasons, to delay the projected scheme—referred to in the Annual Report for last year—to build in the Pleasance Area the first of a few comprehensive Maternity and Child Welfare Centres, on the model of the Leith Centre, to cover the whole needs of the City.

It has always been a very definite policy of the Department to become closely linked up with all other agencies dealing with mothers and children, and each year sees this process more and more fully developed. As a result, the Department now receives daily information from the various local hospitals regarding most children under five years of age, who have attended either as in-patients or as out-patients, thus enabling the Staff to follow up and continue supervision of the children in their own homes. The Department likewise keeps in close touch with the work of many voluntary agencies, too numerous to mention in detail, but included in which are such institutions as The

Deaf and Dumb Nursery School, The Cripple Home, The Cripple Aid Society, The Children's Shelter, The Vigilance Society, &c., to all of which the Department is frequently indebted for valuable help in dealing with particular cases.

The Mothers' and Infants' Care Committee, which acts as the Scottish Branch of the National Children Adoption Association, calls for special mention from the fact that it originated within the Department.

This Committee was formed to provide a channel through which the unmarried or deserted mother and her child could receive prompt and practical help in the time of need. It treats each case individually, advising applicants where to go for help, and in many cases giving the actual help itself, either in the form of temporary financial assistance to enable the mother to make a new start or, in suitable cases, by arranging for the adoption of the baby.

During the past year over 160 applicants applied for help and advice. Since its inception—three years ago—the Committee has actually carried through 50 adoptions of children, homes being found for the babies in almost every part of Scotland, and in every case the Committee is still in touch with the adopters who have, without exception, proved themselves to be satisfactory foster-parents.

Very close touch is kept with all illegitimate babies, who are so apt to be frequently passed on from one home to another. Such babies are very seldom lost sight of by the Department, and in the few cases where they do "disappear," experience shows that it is seldom very long before they are again traced.

BIRTHS.

The number of births registered in the City during the year was 8249. Of these, 4279 were males and 3970 were females, being in the proportion of 107·8 boys to every 100 girls. The number of illegitimate births was 670, or 8·1 per cent., as compared with 682 or 7·8 per cent. for the previous year.

Quarter.	Number of Births Registered.	Sex.		Legitimate.	Illegitimate.	Percentage of Illegitimate to Total Births.
		Males.	Females.			
1st .	1932	980	952	1792	140	7·2
2nd .	2157	1145	1012	1966	191	8·9
3rd .	2086	1092	994	1896	190	9·1
4th .	2074	1062	1012	1925	149	7·2
Total .	8249	4279	3970	7579	670	8·1

An analysis of the 8249 births occurring in the City shows that :—

3916	were attended	at home	by Doctors.
529	,,	,,	by registered Midwives.
1917	,,	,,	by Students and Pupil Midwives.
1887	,,	,,	in Maternity Hospitals or Lying-in Institutions.
8249			

The following Table gives particulars regarding the births after the necessary corrections have been made for transfers :—

Quarter.	Total Births.	Legitimate.	Illegitimate.	Percentage of Illegitimate to Total Births.
1st .	1846	1740	106	5·8
2nd .	2046	1902	144	7·0
3rd .	1978	1836	142	7·2
4th .	1973	1866	107	5·4
Total .	7843	7344	499	6·4

The percentage of illegitimate births to the total corrected births since 1917 is shown below. It will be noted that while there has been a substantial reduction in illegitimacy as compared with former years, the rate has remained almost stationary since 1921.

1917	10·1	1922	6·9
1918	11·7	1923	6·9
1919	10·2	1924	6·3
1920	8·3	1925	6·4
1921	7·2		

The birth-rate, based on the corrected number of births, is equivalent to 18·6 per 1000 of the estimated population. The birth-rate is 1·4 per 1000 less than that recorded for the previous year, and is the lowest rate experienced since the extension of the City boundaries in 1920.

In the following Table the births are allocated according to the three areas of the extended City. The births belonging to military quarters, and those occurring in institutions, for which no permanent domicile could be ascertained, are shown under separate headings. Fuller details regarding the distribution of the births in the various Wards of the City will be found in the Table on page 7.

Area.	Births.	Rate per 1000 of Population.
Edinburgh	5507	18·0
Leith	1783	22·2
Suburban	361	14·3
Institutions	142	...
Military Quarters	50	...
Whole City	7843	18·6

Below are given the corrected birth-rates for the eight large towns in Scotland, and for the whole of Scotland for 1925.

Town.	Per 1000 of Population.	Town.	Per 1000 of Population.
Glasgow	24·6	Paisley	22·5
Edinburgh	**18·6**	Greenock	24·5
Dundee	21·8	Motherwell and Wishaw	24·3
Aberdeen	21·6	Clydebank	23·7

SCOTLAND . . 21·3

Still-Births.—During the year, 391 Still-Births were intimated to the Department as compared with 394 in the previous year.

Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
24	30	33	32	27	38	28	32	50	30	34	33	391

INFANTILE MORTALITY.

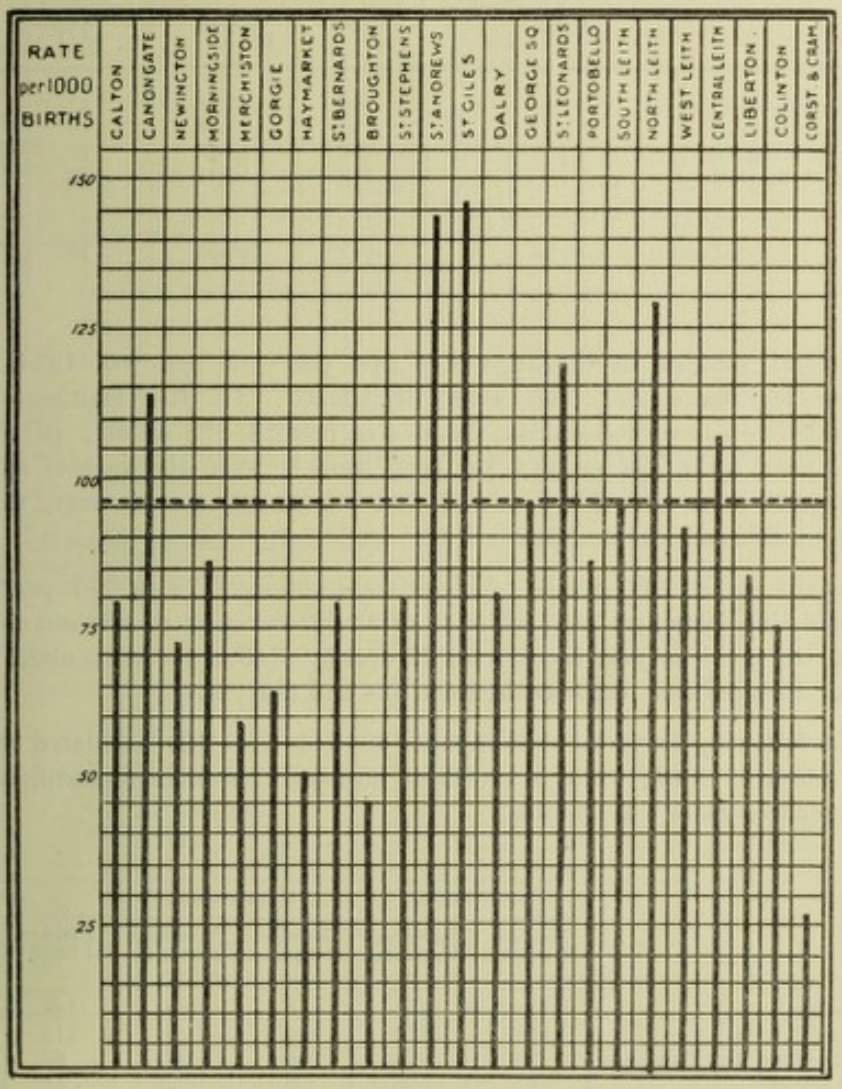
The deaths of infants under one year which were registered during 1925 numbered 751, and the mortality rate was equivalent to 96 deaths per 1000 births. The corresponding rates for 1924 and 1923 were 89 and 82 respectively.

The following figures show the distribution of the deaths under one year in the different districts of the City, together with the mortality rate for the respective areas :—

Area.	Deaths under 1 year.	Deaths per 1000 Births.
Edinburgh . . .	515	94
Leith	189	106
Suburban . . .	23	64
Institutions . . .	21	...
Military Quarters . .	3	...
Whole City .	751	96

In the Table on page 7, the infantile mortality is tabulated according to Wards, while the following diagram shows in a graphic way the mortality experienced in each Ward as compared with the rate for the whole City.

INFANTILE MORTALITY.—DEATHS PER 1000 BIRTHS.



.....Infantile Mortality Rate for City

Of the 751 deaths which occurred during the year, 673 infants were legitimate and 78 were illegitimate. This represents in the former a mortality rate of 91 deaths per 1000 legitimate births, and in the latter a rate of 156 deaths per 1000 illegimate births.

The corresponding figures for 1924 were 752 deaths, of which 680 were legitimate and 72 illegitimate, the mortality rates being 86 and 136 respectively.

The following Table shows the number and percentage of legitimate and illegitimate children's deaths tabulated according to age-periods under one year. As in former

years, there is a greater percentage of deaths among legitimate children in the first four weeks of life than among illegitimate children of that age. In the later age-periods, however, the percentage is higher in the case of illegitimate children.

As compared with 1924, there was an increase in the deaths of children over the age of six months, due in large measure to the prevalence of Measles and Whooping Cough in the early part of the year.

Age-periods.	Legitimate.		Illegitimate.	
	Number.	Per Cent.	Number.	Per Cent.
Under 1 week	166	24·67	14	17·95
1 and under 2 weeks	30	4·46	1	1·28
2 and under 3 weeks	30	4·46	2	2·56
3 and under 4 weeks	16	2·37	0	0·00
Total under 4 weeks	242	35·96	17	21·79
4 weeks and under 3 months	86	12·78	13	16·67
3 and under 6 months	130	19·32	16	20·51
6 and under 9 months	103	15·30	22	28·21
9 and under 12 months	112	16·64	10	12·82
Total under 12 months	673	100·00	78	100·00

The total number of deaths under five years of age was 1234, of which 1117 were legitimate and 117 were illegitimate. Of the legitimate children whose deaths were recorded during the twelve months, 673 or 60·2 per cent. were under one year, while 444 or 39·8 per cent. were between the ages of one and five years. In 1924 there were 680 deaths or 60·9 per cent. under one year, and 437 or 39·1 per cent. between one and five.

In regard to the 117 deaths of illegitimate children, 78 or 66·7 per cent. died before completing their first year, while 39 or 33·3 per cent. were between one and five years. In the previous year there were 72 deaths or 59·0 per cent. under one year, while 50 or 41·0 per cent. occurred between one and five years.

In the following Table the deaths under one year have been tabulated to show the principal causes of death, while in the Table on page 17 a detailed classification of the deaths under five years will be found.

	Legitimate.		Illegitimate.		Total.	
	Number of Deaths.	Percentage Mortality.	Number of Deaths.	Percentage Mortality.	Number of Deaths.	Percentage Mortality.
Premature Birth	134	19·91	8	10·25	142	18·90
Pneumonia (all forms)	106	15·75	9	11·53	115	15·31
Atrophy, Debility, and Marasmus	59	8·76	9	11·53	68	9·05
Whooping Cough	63	9·36	8	10·25	71	9·45
Measles	29	4·30	7	8·97	36	4·79

The number of deaths certified as due to premature birth is the same as that recorded in 1924, viz. :—142. The deaths from Pneumonia are 31 fewer than in the previous year, while Atrophy, Debility, and Marasmus show a decrease of 21. In regard to these latter causes, it is interesting to note that 45 per cent. of the deaths were of infants under the age of four weeks. This undoubtedly points to factors operating before the birth of the child.

Causes of Death among Children under Five Years during 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 under 12 Months.	12 Months and under 2 Years.	2, and under 3 Years.	3, and under 4 Years.	4, and under 5 Years.	Total 1-5 Years.	Total under 5 Years.
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	2	3	16	15	36	35	7	1	1	44	80
Scarlet Fever	...	...	...	...	...	...	...	...	2	2	9	10	6	4	29	31
Whooping Cough	...	...	...	1	1	2	18	22	28	71	78	19	8	5	110	181
Diphtheria and Croup	...	...	...	...	...	...	...	3	6	9	22	8	12	10	52	61
Erysipelas	...	...	...	...	...	1	...	...	1	2	...	...	...	...	...	2
Tuberculous Meningitis	...	...	...	...	...	...	5	2	3	10	15	4	5	4	28	38
Abdominal Tuberculosis	...	...	...	...	...	...	2	3	1	6	7	3	2	2	14	20
Other Tuberculous Disease	...	...	...	...	...	..	...	7	5	12	10	5	4	3	22	34
Meningitis (not Tuberculous)	...	...	1	...	1	2	6	5	2	16	3	3	2	1	9	25
Hydrocephalus	1	...	...	...	1	...	1	1	1	4	1	1	...	...	2	6
Convulsions	3	...	2	1	6	2	5	3	3	19	4	1	1	...	6	25
Pneumonia (all forms)	7	1	2	3	13	17	34	24	27	115	52	15	5	.	72	187
Bronchitis	...	...	2	...	2	6	4	5	4	21	5	3	1	..	9	30
Laryngitis	...	...	...	...	...	...	1	...	...	1	...	1	1	...	2	3
Diarrhœa and Enteritis	...	...	1	...	1	10	24	17	9	61	15	1	...	1	17	78
Other Digestive Diseases	...	...	1	...	1	3	4	1	1	10	3	3	...	...	6	16
Congenital Malformations	6	4	2	...	12	6	2	3	1	24	1	...	...	...	1	25
Congenital Heart	12	3	...	...	15	2	1	...	1	19	1	1	...	...	2	21
Premature Birth	91	13	12	6	122	16	4	...	...	142	...	...	...	...	...	142
Atrophy, Debility, and Marasmus	20	5	4	2	31	18	17	2	...	68	...	...	...	...	...	68
Atelectasis	10	2	1	...	13	...	...	...	...	13	...	...	...	...	...	13
Injury at Birth	9	...	1	1	11	...	...	...	...	11	...	...	...	...	...	11
Suffocation, overlaying	1	...	...	...	1	1	2	...	...	4	...	...	...	...	...	4
Syphilis	1	1	...	...	2	2	1	1	...	6	...	...	...	...	...	6
Rickets	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1
All other Causes	19	2	3	2	26	9	12	10	12	69	22	13	14	8	57	126
Total	180	31	32	16	259	99	146	125	122	751	284	98	62	39	483	1234

Causes of Death among Illegitimate Children under Five Years during 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 under 12 Months.	12 Months and under 2 Years.	2, and under 3 Years.	3, and under 4 Years.	4, and under 5 Years.	Total 1-5 Years.	Total under 5 Years.
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	5	2	7	3	1	...	...	4	11
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	1	1	...	...	2	2
Whooping Cough	...	...	...	...	...	...	4	2	2	8	6	2	...	...	8	16
Diphtheria and Croup	...	...	...	...	...	...	...	...	2	2	1	...	...	...	1	3
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	1	...	1	1	...	...	...	1	2
Other Tuberculous Disease	...	...	...	...	...	...	...	2	..	2	1	1	...	1	3	5
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	1	1	...	...	2	2
Hydrocephalus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	1	...	...	...	1	...	...	2	...	3	...	...	...	...	...	3
Pneumonia (all forms)	...	..	...	...	...	2	3	2	2	9	3	2	...	...	5	14
Bronchitis	...	...	...	...	...	...	...	2	...	2	1	...	...	...	1	3
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa and Enteritis	...	...	...	...	...	1	3	5	...	9	2	1	...	...	3	12
Other Digestive Diseases	...	...	...	...	...	...	2	...	...	2	...	...	...	...	...	2
Congenital Malformations	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1
Congenital Heart	1	...	...	..	1	1	...	...	...	2	...	...	...	...	...	2
Premature Birth	5	...	2	...	7	1	...	...	...	8	...	...	...	...	...	8
Atrophy, Debility, and Marasmus	...	1	...	...	1	4	4	...	...	9	...	...	...	...	..	9
Atelectasis	1	...	...	...	1	...	...	...	...	1	...	...	...	...	...	1
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Suffocation, overlaying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	1	...	...	...	1	1	...	...	...	2	...	.	...	...	...	2
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
All other Causes	5	...	...	...	5	2	...	1	2	10	5	1	2	1	9	19
Total	14	1	2	...	17	13	16	22	10	78	25	10	2	2	39	117

It has already been pointed out that Measles and Whooping Cough were prevalent in the City during the early months of the year. As a result, the deaths from these causes show an increase of 41 when compared with 1924.

In the accompanying Table the deaths of illegitimate children are arranged to show the Ward in which their domicile was situated.

Calton	5	George Square	8
Canongate	10	St Leonard's	8
Newington	4	Portobello	1
Morningside	3	South Leith	10
Merchiston	...	North Leith	9
Gorgie	5	West Leith	2
Haymarket	3	Central Leith	5
St Bernard's	1	Liberton	...
Broughton	2	Colinton	...
St Stephen's	8	Corstorphine and Cramond	...
St Andrew's	5	Institutions (not allocated in Wards)	12
St Giles	14		
Dalry	2	Total	117

The number of illegitimate children, up to five years, who died in Institutions is shown in the following Table.

City Hospital	14
Sick Children's Hospital	21
Deaconess Hospital	1
Royal Maternity Hospital	5
The Hospice	1
Edinburgh Women's Hospital	...
Infant Homes	4
Craiglockhart Poorhouse	15
Royal Infirmary	1
Total	62

Ante-Natal Clinics.—In the following Table particulars are given regarding the number of Ante-Natal Clinics held during the year, together with the attendances at the respective centres.

Centre.	Number of Clinics held.	Attendances.		
		New Cases.	Old Cases.	Total.
Cowgate	96	485	702	1187
Gorgie	12	1	3	4
Torphichen Street	48	28	71	99
High Street	41	439	726	1165
Marshall Street	42	58	117	175
Royal Maternity Hospital	416	1297	4121	5418
Windsor Street	41	38	64	102
Leith	52	233	167	400
Elsie Inglis Memorial Hospital (Nov. and Dec.)	17	85	163	248
Total	765	2664	6134	8798
Figures for 1924	547	2476	5293	7769

During the year, the mothers of 32 per cent. of the total infants born received some ante-natal supervision, as compared with 29 per cent. in 1924.

Preventive Clinics.—The undernoted figures relative to the Preventive Clinics give an indication of the work performed at the various centres.

Centre.	Number of Clinics held.	New Cases.			Total Attendances.		
		Under 1 year.	Over 1 year.	Total.	Under 1 year.	Over 1 year.	Total.
Canongate	81	119	8	127	1,705	1,487	3,192
Gorgie	86	127	38	165	1,084	1,086	2,170
Torphichen Street	86	255	134	389	1,568	1,432	3,000
High Street	57	107	48	155	1,477	928	2,405
Pleasance	97	239	85	324	2,138	1,495	3,633
Windsor Street	86	226	20	246	1,718	952	2,670
Stockbridge	89	165	67	232	1,705	1,298	3,003
Marshall Street	48	135	58	193	1,101	394	1,495
Elsie Inglis Memorial Hosp. (Nov. and Dec.)	26	231	79	310	296	132	428
Total	656	1,604	537	2,141	12,792	9,204	21,996
Figures for 1924	533	1,078	267	1,345	10,392	6,998	17,390

Curative Clinics.—The following Table shows the number of Curative Clinics held at the various Centres and Dispensaries, with the total attendances at each :—

Centre.	Number of Clinics held.	Attendances.		
		Old Cases.	New Cases.	Total.
*Cowgate	95	2,689	543	3,232
Gorgie	49	343	191	534
*Torphichen Street	51	216	160	376
High Street	49	187	311	498
*Marshall Street	48	331	151	482
Portobello	91	2,470	261	2,731
*Richmond Street	48	1,370	280	1,650
*Riego Street	52	1,401	200	1,601
Leith	170	2,696	1,364	4,060
Total	653	11,703	3,461	15,164
Figures for 1924	604	10,729	4,227	14,956

* These Dispensaries are subsidised by the Corporation, the clinics being conducted by doctors on the regular staffs of the Dispensaries.

Health Visitors.—The official staff consists of a Lady Superintendent, 18 qualified Health Visitors, and 3 Probationer Visitors undergoing training. The visits paid by the staff during the year include 6690 first visits, 64,128 revisits, and 1312 special calls to expectant mothers. In addition to this, 349 attendances were made by the Health Visitors at ante-natal clinics, and 1309 at post-natal clinics. In course of the year, 416 ante-natal clinics were held at the Royal Maternity Hospital, but these are not attended by members of the Department's staff.

Voluntary Workers.—A large number of ladies voluntarily devote some of their spare time to work in connection with the Child Welfare Scheme. Regular fortnightly visits are paid to children in the first year of life in cases referred to the Organisation by the Department. The total number of cases intimated to the Voluntary Workers during the twelve months under review was 1411.

Another very useful branch of Voluntary Work is the making of garments, which are always most welcome and needed for many a poor infant. The making of Cradles from disused banana crates is another extremely practical and useful form of activity which is much appreciated.

The ladies who assist with the clerical and other work at the Infant Welfare Centres are invaluable. Their services are most helpful in relieving the official worker, who can thus devote all her time to that intimate association with the mothers and infants attending, which is a factor of such extreme importance in regard to the success or otherwise of any child welfare clinic.

Day Nurseries.—The work in connection with this branch of Child Welfare activity has continued uninterruptedly during the year. The nurseries have been fully taken advantage of, and are greatly appreciated by mothers who, for various reasons, are compelled to earn their own livelihood. The children are fed and otherwise cared for, the charges being as follows:—infants under 18 months, 7d. per full day, or 5d. for a half-day, while children over that age pay 5d. and 4d. respectively.

The accompanying Table shows the number of attendances at each of the nurseries:—

Day Nursery.	Attendances—Infants.	Attendances—Children.	Total Attendances.
Danube Street	1,195	2,412	3,607
Dumbiedykes Road	2,081	4,064	6,145
Grove Street	981	3,406	4,387
South Fort Street, Leith	1,575	4,125	5,700
TOTAL	5,832	14,007	19,839
Figures for 1924	5,488	13,586	19,074

Victoria Park Home.—The accommodation at this Home, which consists of 20 beds for the reception of children under the age of two years, is much too limited for the requirements of the City. The admissions during the year numbered 139, and with 14 cases remaining from the previous year, 153 children enjoyed the benefit of residence. There was a daily average of 20 patients throughout the year, which is equivalent to the full bed accommodation at the Home. The average length of residence of the children was 48·9 days, as compared with 46·6 for the previous year.

The Home has, fortunately, been free from any serious outbreak of infectious disease, only 1 case of Diphtheria, 3 of Scarlet Fever, and 6 of Whooping Cough having occurred during the year.

Milk and Dinner Distribution.—Where it is found that, for health reasons, a child requires extra milk nourishment, which the parent is financially unable to provide, the Department arranges for a daily supply either free or at a reduced rate. The quantity distributed during the year amounted to 223,855 pints, of which 522 were granted entirely free of charge. In the previous year, 238,012 pints were provided, 1830 being supplied free.

Dinners are also provided for expectant and nursing mothers, in financial difficulties, who appear to be in need of extra nourishment. In the course of the year, 17,401 dinners were supplied to such cases, as compared with 14,735 in 1924.

SUBSIDISED INSTITUTIONS.

Child Gardens.—There are five Child Gardens which receive a grant in aid from the Corporation, viz.:—

St Saviour's, Chessel's Court.
Free Child Garden, Reid's Court.
Child Garden, Vennel.
Hope Cottage, Cowan's Close.
Child Garden, East Adam Street.

The last-mentioned Garden has only been recently opened and the Corporation, in addition to granting a small annual subsidy, advanced part of the capital necessary for the erection of the building. The health of the children attending the various Gardens during the year has been in every way satisfactory.

Toddlers' Play Centres.—There are nine of these Centres situated in different parts of the City. They are open from 10 to 12 during five days of the week, and are only closed during the school holiday periods. The children are under the careful supervision of the ladies in charge of the Centres, and the mothers are thus able to devote their undivided attention to their various household duties.

A new Play Centre has been opened at Barony Street and, judging by the attendances, it appears to be meeting with success in this populous locality.

The following figures represent the attendances at the various Centres :—

Centre.	Number on Roll.	Daily Attendance	Centre.	Number on Roll.	Daily Attendance.
Fountainbridge .	43	36	Fishmarket Close .	51	26
High Street .	40	30	Central Halls .	36	30
Pleasance . .	55	38	Leith . .	78	60
Stockbridge .	40	30	Barony Street .	35	25
Cowgate . .	30	24	Totals .	408	299

Humbie Children's Village.—During the year, 179 children between the ages of 3 and 5 years were sent to "Humbie" for a fortnight's residence. The children who are recommended periodically are accommodated together in one of the attractive cottages which make up the village. No fixed grant is made by the Corporation, but a sum of £300 is set aside in the estimates to meet the cost of the children's maintenance.

Edinburgh Home for Mothers and Infants.—This Home, which was opened in 1924, provides excellent accommodation for young unmarried women, both before and after the birth of their babies. During the year, 20 women were admitted to the Home, while 19 infants were also dealt with.

Bonnington Bank Home for Mothers and Infants.—During the year, 39 mothers and 38 infants were admitted to this Home. The Institution is under the direct supervision of the Salvation Army, and only mothers with their first illegitimate baby are admitted. The girls are encouraged to remain in residence for a period of not less than six months, and occasionally suitable cases are allowed to go out and do daily work, returning in the evening to attend to their infants. At the end of the period of residence, homes are found for the infants and situations are secured for the young mothers.

Special efforts are made to keep in touch with the girls after they leave the Home. The fact that only one girl was lost trace of during 1925 shows that the work is being efficiently carried out, and that it is of real advantage to those concerned.

Hawthorn Brae Home.—This Institution is under the supervision of the Livingstone Memorial Medical Mission, and is situated in the village of Duddingston within easy reach of the centre of the City. In the course of the year, 26 mothers, accompanied by 23 infants, were admitted on the recommendation of the Department, and enjoyed a fortnight's rest and change.

Home for Babies, Polwarth Terrace.—There is accommodation at this Home for 14 infants under the age of two years. During the year, 21 infants were admitted. A few of the children were motherless, while others were sent in pending arrangements being made for their adoption. In one or two instances the children of

young couples in straitened circumstances were taken care of. The Home is well managed, and occupies a useful place in the Child Welfare Scheme.

Mothercraft Classes.—These classes, which are held at nine of the Infant Welfare Centres, have been the means of creating a healthy interest in all matters pertaining to mothercraft. The classes are very popular, and of the 150 mothers attending, 53 entered the written competition for the "Hutchison" Shield. The Shield was won by the Gorgie Centre, the Leith Centre having been successful in 1924.

In the month of July the mothers were entertained to tea in the Gorgie War Memorial Hall. The Lord Provost and Lady Sleigh were present and handed over the Shield and other prizes to the successful competitors.

Educational.—For the first time the Child Welfare Department was called upon, under an arrangement with the Ministry of Labour (Women's Unemployed Branch), to undertake the training of girls as domestic nurses.

The course covered a period of six months, and practical instruction was given at Victoria Park Children's Home and the Leith Day Nursery. The girls received a thorough training in the handling of babies, and also attended a series of lectures on Infant Hygiene.

Examinations were held at the end of the first three months and at the close of the training period. Where an approved standard of efficiency was attained, certificates were granted by the Department.

This new departure was a decided success, and the majority of the girls subsequently secured positions as children's nurses.

Ophthalmia Neonatorum. — During the year, 25 cases of this disease were notified, being 18 fewer than in the previous year. The interval in days between the birth of the child and the onset of the disease was as follows :—

Days	1	2	3	4	5	6	7	8	9	10	11	12	7 Weeks	No Particulars	Total.
Cases	7	1	3	2	0	0	0	3	1	2	0	2	1	3	25

The Confinement was attended by :—

A Doctor and Nurse	14 cases.
Nurses from Institutions	2 cases.
By Midwives	2 cases.
In Institutions	7 cases.—Total, 25 cases.

Treatment was given :—

At Home	10 cases.
At Home and Welfare Centres	5 cases.
In Hospital	10 cases.—Total, 25 cases.

Hospital treatment was given :—

In Pilton Hospital	5 cases.
In Hospital for Women and Children	5 cases.—Total, 10 cases.

A Queen's Jubilee Nurse or a Nurse from the Royal Maternity Hospital attended to those children who were treated in their homes, and the official Health Visitors paid 77 special visits.

In every instance the eyes were cleared.

MATERNAL DEATHS.

The total number of Maternal Deaths which occurred in the City during the year was 72. Of these, 29 were women who had come to the City for their confinement, and their deaths have been transferred to the district of permanent residence.

The following details refer to the remaining 43 deaths of Edinburgh citizens :—

Cases attended by Private Doctors and died in their own homes	9
Cases attended by Private Doctors and removed to Institutions	7
Cases attended by Midwives and removed to Institutions	2
Cases attended by Dispensaries and Pupil Nurses and removed to Institutions	4
Case attended by Dispensaries and Pupil Nurses at home	1
Cases attended in Institutions	20
	43

Of these 43 cases 13 were primipara and 30 multipara.

Only 10 out of the 43 cases are noted as having been examined ante-natally, and in most of these the supervision merely amounted to one consultation not long before the onset of the confinement.

Ages at Death—

Under 20 years	1	or 2·3	per cent. of the total.
20 years and under 25 years	6	„ 14·0	„ „ „
25 years and under 30 years	14	„ 32·6	„ „ „
30 years and under 35 years	13	„ 30·2	„ „ „
35 years and under 40 years	8	„ 18·6	„ „ „
40 years and under 45 years	1	„ 2·3	„ „ „
	43	100·0	

Causes of Death—

Septicæmia.		
Puerperal Sepsis	10	
Scarlet Fever with Sepsis	2	
Abortion with Sepsis	1	
		13
Hæmorrhage.		
Antepartum Hæmorrhage	1	
Postpartum Hæmorrhage	3	
Placenta Prævia	3	
		7
Abortion		2
Illnesses complicating Labour.		
Acute Nephritis	1	
Pulmonary Tuberculosis	1	
Pneumonia	3	
Status Epilepticus	1	
Scarlet Fever	1	
		7

Unclassified Various Causes.		
Shock	1	
Puerperal Phlebitis	1	
Uterine Rupture	2	
Post Operative Intestinal Paralysis (Cæsarean Section)	1	
Cardiac Failure	2	
		7
Toxæmia.		
Uræmia	1	
Albuminuria	1	
Eclampsia	1	
		3
Embolism		4
Total		43

Midwives Act.—Report for the year under the Midwives (Scotland) Act, 1915 :—

1.	The number of certified Midwives who intimated to the Local Authority their intention to practise in the district was	14
2. (*a*)	Total number of Births	8249
(*b*)	Total number of Deaths of New-born Children (within 10 days)	214
(*c*)	Actual number of Births attended by Midwives	529
(*d*)	Deaths of New-born Children occurring in the practice of Midwives	4
(*e*)	Number of Births not attended by a Doctor or Midwife	0
3. (*a*)	Total number of cases of Ophthalmia Neonatorum occurring	25
(*b*)	Actual number of cases of Ophthalmia Neonatorum occurring in the practice of Midwives	2
(*c*)	Actual number of cases occurring where confinement not attended by a Doctor or Midwife	0
4. (*a*)	Total number of cases of Puerperal Sepsis	30
(*b*)	Total number of Deaths from Puerperal Sepsis	* 15
(*c*)	Actual number of cases of Sepsis in practice of Midwives	2
(*d*)	Actual number of Deaths from Puerperal Sepsis in practice of Midwives	0
(*e*)	Actual number of cases occurring where confinement not attended by a Doctor or Midwife	0
5. (*a*)	Total number of Still-births	391
(*b*)	Actual number of cases of Still-births occurring in the practice of Midwives	20
6.	Cases of Emergency	48

* Includes 2 deaths transferred to other districts.

Different Emergencies.

Prolonged Labour requiring forceps delivery	21 cases.
Delay, followed by normal delivery	2 cases.
Rupture of Perineum	3 cases.
Placenta Prævia (sent to Hospital)	1 case.
Breech Presentation	4 cases.
Malpresentation	1 case.
Illness of Mother during Puerperium	2 cases.
Abortion	1 case.
Prolapse of Cord	1 case.
Illness of Child	1 case.
For Still-births	11 cases.
	48 cases.

In the foregoing pages will have been found, under various appropriate headings, the chief activities of the Maternity and Child Welfare Department. From a perusal of these it will have been seen that all workers—both official and voluntary—have, as in former years, continued to give of their best on behalf of the mothers and children with whom they have come in contact. It is, therefore, with pleasure that I avail myself of the opportunity afforded to me through the medium of this Annual Report to express to Miss Turnbull and all workers my grateful thanks for the help which they have so ungrudgingly given to me throughout the past year.

I have the honour to remain,

Your obedient Servant,

T. Y. FINLAY, M.D., M.R.C.P.Ed.

INFECTIOUS DISEASES.

The various diseases falling to be dealt with under this heading are :—

(1) Diseases which are notified in terms of section 6 of the Infectious Disease (Notification) Act, 1889.

(2) Diseases which have been added to the list by Orders made by the Scottish Board of Health under section 78 of the Public Health (Scotland) Act, 1897.

(3) Measles, Whooping Cough, and Chickenpox, which have been made temporarily notifiable by the Local Authority.

The following Table shows the number of notifications for each month of the year :—

Disease.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Membranous Croup	104	93	114	67	56	63	67	53	51	61	77	64	870
Erysipelas	18	18	26	25	14	18	13	8	24	29	39	38	270
Scarlet Fever	209	180	207	169	161	123	122	150	193	277	298	262	2351
Typhus	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhoid Fever	..	10	1	1	2	1	2	1	3	6	1	2	30
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Continued Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever	2	4	3	...	1	3	2	3	3	2	4	...	27
Cerebro-spinal Fever	...	1	4	2	1	...	2	...	1	...	...	1	12
Infective Jaundice	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis, Pulmonary	51	60	56	65	54	64	54	46	46	47	59	68	670
Tuberculosis, other forms	36	44	63	59	49	47	42	30	37	30	27	34	498
Ophthalmia Neonatorum	2	4	1	4	1	1	2	4	2	1	...	3	25
Malaria	1	1	2	1	1	...	...	1	...	1	...	2	10
Dysentery	1	...	3	...	1	...	...	...	...	...	...	...	5
Trench Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Primary Pneumonia	23	24	25	32	27	23	23	11	23	24	56	57	348
Acute Influenzal Pneumonia	15	15	9	11	1	...	2	2	3	7	16	17	98
Chickenpox	...	...	88	166	148	100	...	...	...	...	...	...	502
Measles	619	753	433	229	109	27	32	14	10	10	12	4	2252
Whooping Cough	347	408	456	320	194	106	77	41	30	27	26	11	2043
Total	1428	1615	1491	1151	820	576	440	364	426	522	615	563	10,011

Enteric Fever.—Thirty cases of Enteric Fever were intimated to the Department during the year under report, as compared with 27 in 1924 and 29 in 1923. Of the cases notified, 3 were Edinburgh citizens who had been infected while resident in other districts, and 18 cases were the result of recurring outbreaks in a Medical Institution.

Only one death was registered in course of the year.

Diphtheria.—The notifications of Diphtheria numbered 870, as compared with 720 in 1924. There was no special outbreak of the disease during the year such as might be attributable to any particular cause. The cases were distributed throughout the City, and no Ward showed any marked preponderance. While an increase in the number of cases has to be recorded, it is gratifying to be able to report that the infection was of a less severe type than in the previous year. The mortality was equal to 9·4 per cent. of the cases notified, as compared with 10·1 in 1924.

The practice adopted in 1912 of obtaining swabs from the apparently unaffected members of households where a case of Diphtheria is notified has been continued. During the year, 1587 such swabs were taken, and after bacteriological examination no fewer than 83 or 5·2 per cent. gave "positive" results and the contacts concerned were at once isolated.

Scarlet Fever.—The incidence of this disease was greater than in any year since the extension of the City boundaries. The total number of cases notified during the year was 2351, as compared with an average of 1881 for the preceding four years.

The disease was of a comparatively mild nature, and only 62 deaths occurred, the mortality being at the rate of 2·6 per cent. of the cases notified.

The following Table shows the number of notifications and deaths each year since the amalgamation of the City with Leith and the Suburban area :—

Year.	Notifications.	Deaths.	Death-rate per cent.
1921.	2163	42	1·9
1922.	1702	32	1·8
1923.	1897	93	4·9
1924.	1761	68	3·8
1925.	2351	62	2·6
	9874	297	3·0

The disease was most prevalent during the last quarter of the year, when 837 cases or 35 per cent. of the total were reported.

Immediately following the reopening of the schools in the month of September, after the customary summer vacation, an increase in the number of cases was noticed. In consequence of the involvement of one particular school, close on 70 patients were removed to Hospital within a fortnight. This school was closed, and with the co-operation of the School Authorities the spread of the disease was checked.

As has been already stated, the type of Scarlet Fever was comparatively mild. This led to many cases going about for a time undetected, and these "carriers" of the disease added to the difficulties of controlling the spread of the infection in different areas.

Erysipelas.—Notifications were received of 270 cases of Erysipelas, and of these 14 proved fatal. The death-rate was equivalent to 5·2 per cent. of the cases.

Puerperal Fever.—During the year, 27 cases of Puerperal Fever were reported, as compared with 40 cases in 1924 and 33 in 1923. The notifications were at the rate of 1 to every 320 births, including still-born infants, which took place in the City. The notifications and deaths are fully dealt with in the Maternity and Child Welfare section of this Report.

Cerebro-spinal Meningitis.—There were 12 cases of this disease notified during the year, and 10 deaths were recorded. Seven of the patients were removed to Hospital for treatment, and 5 of these died. Of the remaining 5 deaths, 3 occurred in a Medical Institution and 2 at the patients' own homes.

Measles and Whooping Cough.—The epidemics of these diseases which broke out in the autumn of 1924 continued well into the second quarter of 1925. Only the first case of either disease occurring in a household requires to be notified, and in course of the year intimations were received as follows :—

Measles	2252
Whooping Cough	2043
	4295

One of the chief difficulties encountered in any attempt to control the spread of Measles and Whooping Cough is the indifference which is displayed by many parents to the very serious nature of both diseases. Another factor which cannot be overlooked, when considering this matter, is the congestion of population caused by the tenement system, where many families are compelled to live in close contact with one another. Under these circumstances it is not difficult to understand how such highly infectious diseases as Measles and Whooping Cough may be transmitted throughout a whole district.

The type of both diseases was particularly severe, and during the year, 188 Whooping Cough and 85 Measles deaths were registered. Of the total deaths, 261 were children under 5 years of age, 107 of these being infants under one year.

In the following Table the deaths occurring in each of the last five years are classified according to ages at death :—

	Age-Periods.						Total.
	-1	1-2	2-3	3-4	4-5	5 and over.	
Measles—							
1921	25	38	6	4	3	1	77
1922	34	46	16	5	5	7	113
1923	16	46	12	2	...	3	79
1924	28	60	21	2	2	7	120
1925	36	35	7	1	1	5	85
Total .	139	225	62	14	11	23	474
Whooping Cough—							
1921	40	23	8	2	4	3	80
1922	39	38	23	6	3	...	109
1923	40	36	9	1	1	2	89
1924	38	28	11	...	5	3	85
1925	71	78	19	8	5	7	188
Total .	228	203	70	17	18	15	551
Totals .	367	428	132	31	29	38	1025

Chickenpox.—In the month of March, Chickenpox was again placed on the list of notifiable diseases, the period of temporary notification expiring at the 30th June. During the three and a half months, 502 intimations were received by the Department. In course of the year, 87 patients were removed to Hospital, only one being kept under observation as a case of suspected Smallpox. Fortunately, the patient was proved to be affected by Chickenpox.

Tuberculosis.—The number of first notifications for the year was 1168—670 being Pulmonary Tuberculosis, and 498 of the Non-Pulmonary form of the disease. These cases are fully considered by the Tuberculosis Officer in his report on page 33.

Pneumonia.—The number of cases of Acute Primary Pneumonia reported during the year was 348. The incidence of Pneumonia was greatly increased in the last two months of the year, when 113 notifications were received. The cases intimated in the month of October numbered 24, and for November and December 56 and 57 respectively. This sudden increase in the number of notifications was greatly influenced by the severe climatic conditions experienced in the City during these months.

The notifications received during the last five years were as follows :—

	1921.	1922.	1923.	1924.	1925.
Acute Primary Pneumonia . .	284	316	280	424	348
Influenzal Pneumonia . . .	116	420	38	174	98

Ophthalmia Neonatorum.—The number of notifications received during the twelve-months was 25, as compared with 43 in 1924. A review of the cases will be found in the Maternity and Child Welfare Report on page 22.

The following statement shows the number of patients admitted during the year to the various Hospitals under the control of the Department. The figures include cases admitted by arrangement with other Local Authorities.

	Pulmonary Tuberculosis.	Other Tuberculosis.	Other Diseases.	Totals.
Colinton Mains Hospital . . .	69	89	4281	4439
East Pilton Hospital . . .	357	...	118	475
Royal Victoria Hospital . . .	258	...	...	258
Portobello Hospital	...	...	54	54
Polton Farm Colony . . .	19	...	...	19
Totals .	703	89	4453	5245

In the Table on page 29 the notifications and deaths of certain specified diseases are tabulated according to Wards, and on page 30 the incidence of Infectious Disease during the last 44 years is shown. On page 31 a statement will be found showing the percentage of the more important Diseases treated in Hospital since 1890.

A considerable decrease in the percentage of Scarlet Fever and Erysipelas cases removed to Hospital will be noted. This is due to the fact that greater encouragement is now being given for the treatment of patients at home where the facilities for isolation are considered satisfactory.

In a Table on page 32 particulars are given regarding the incidence of Infectious Disease in relation to the housing accommodation. The figures offer a striking object-lesson as to the marked influence which the smaller, and very often overcrowded, house has on the spread of infection.

Table showing the Infectious Disease Notifications and Deaths (except Phthisis) in each Ward during the Year.

No.	Wards.	Smallpox.		Typhus.		Enteric.		Puerperal.		Diphtheria.		Scarlet.		Erysipelas.		Cerebro-Spinal Fever.		Measles.		Whooping Cough.		Total.	
		Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.	Notifications.	Deaths.
1	Calton	...	...	...	...	...	...	1	...	49	4	142	6	14	...	1	1		2		9	207	22
2	Canongate	...	...	...	...	...	...	1	...	55	5	149	3	15	1	...	...		9		12	220	30
3	Newington	...	...	...	...	2	...	...	...	32	5	60	1	12	1	1	1		...		3	107	11
4	Morningside	...	...	...	...	...	...	1	1	32	1	102	1	6	...	1	1		1		6	142	11
5	Merchiston	...	...	...	...	...	...	...	...	40	2	76	3	8	3	...	...		1		1	124	10
6	Gorgie	...	...	...	...	...	...	2	...	50	4	135	3	7	1	...	...		4		7	194	19
7	Haymarket	...	...	...	...	3	...	1	1	15	1	52	2	2	...	...	...		2		3	73	9
8	St Bernard's	...	...	...	...	...	...	3	...	18	3	95	5	13	...	...	...		1		5	129	14
9	Broughton	...	...	...	...	...	...	...	...	32	4	73	1	8	...	...	...		...		2	113	7
10	St Stephen's	...	...	...	...	...	...	...	...	31	2	101	4	9	...	...	...		2		14	141	22
11	St Andrew's	...	...	...	...	...	...	2	1	23	3	54	...	7	1	...	...		3		2	86	10
12	St Giles	...	...	...	...	1	...	3	2	43	11	51	1	15	1	...	...		14		10	113	39
13	Dalry	...	...	...	...	...	...	...	...	49	4	107	2	12	...	...	...		5		9	168	20
14	George Square	...	...	...	...	...	...	3	1	41	5	78	3	7	...	1	1		5		11	130	26
15	St Leonard's	...	...	...	...	2	...	2	1	60	8	123	4	8	...	4	4		7		24	199	48
16	Portobello	...	...	...	...	...	...	1	...	26	...	110	2	12	...	...	...		...		6	149	8
17	South Leith	...	...	...	...	...	...	...	...	60	8	203	2	21	2	2	1		6		14	286	33
18	North Leith	...	...	...	...	...	...	1	...	32	3	117	4	19	...	...	...		12		22	169	41
19	West Leith	...	...	...	...	...	...	1	1	29	1	127	3	14	...	1	1		2		7	172	15
20	Central Leith	...	...	...	...	2	...	...	...	28	2	147	9	17	1	...	...		6		12	194	30
21	Liberton	...	...	...	...	...	...	1	1	49	1	24	...	4	1	...	...		...		...	78	3
22	Colinton	...	...	...	...	...	...	...	...	5	1	19	...	1	...	...	...		1		1	25	3
23	Corstorphine and Cramond	...	...	...	...	1	...	...	...	3	...	53	...	5	...	...	...		...		2	62	2
	Military Quarters	...	...	...	...	...	...	...	...	1	1	3	...	...	...	...	...		...		...	4	1
	Institutions	...	...	...	...	19	1	4	2	67	3	150	3	34	2	1	...		2		6	275	19
	Total	...	...	...	...	30	1	27	*11	870	82	2351	62	270	14	12	10	...	85	...	188	3560	453
	Case- and Death-rates (per 1000 population) for year	...	...	...	...	·07	·00	·06	·03	2·06	·19	5·57	·15	·64	·03	·03	·02	...	·20	...	·45	8·44	1·07
	Case- and Death-rates (per 1000 population) for year 1924	...	...	...	...	·06	·00	·09	·04	1·72	·18	4·19	·16	·48	·02	·04	·03	...	·29	...	·20	6·59	·92

The deaths in this Table represent those actually occurring among the cases notified although taking place after 31st December.

* Includes 2 Country Deaths transferred out.

Table showing the number of Notifications and Deaths, together with Death-Rate per cent. of Cases of each Disease, during forty-four years, 1882-1925.

Year.	Smallpox.			Typhus Fever.			Enteric Fever.			Puerperal Fever.			Diphtheria, Membranous Croup.			Scarlet Fever.			Erysipelas.			Cerebro-Spinal Fever.		
	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.	Cases.	Deaths.	Percentage of Deaths to Cases.
1882	1	1	100·0	45	10	22·2	639	70	10·9	...	...	...	217	33	15·2	2,161	88	4·0	...	...	...	...	...	...
1883	...	...	...	50	16	32·0	346	42	12·1	...	...	...	214	34	15·8	1,817	85	4·6	...	...	...	...	...	...
1884	1	...	...	42	16	38·0	591	70	11·8	...	...	...	183	44	24·0	1,423	72	5·1	...	...	...	...	...	...
1885	12	...	...	58	10	17·2	589	62	10·5	...		...	149	43	28·8	1,087	28	2·5	...		...	...	...	...
1886	26	3	11·5	12	4	33·3	224	31	13·8	...		...	212	51	24·0	1,306	42	3·2	...		...	...		...
1887	...	...	...	38	11	28·9	332	38	11·4	...		...	256	57	22·2	2,587	145	5·5	...		...	...		...
1888	1	...	...	23	5	21·7	245	27	11·0	...		...	245	65	26·5	618	20	3·2	...		...	...		...
1889	...	...	...	46	9	19·5	320	32	10·0	...		...	354	98	27·1	1,255	29	2·3	..		...	...		...
1890	...	...	...	7	1	14·3	500	44	8·8	...		...	361	85	23·5	1,197	46	4·0	...		...	...		...
1891	...	...	...	1	...	...	445	42	9·4	...		...	207	48	23·1	979	49	5·0	...		...	..		...
1892	8	...	..	18	3	16·6	238	28	11·7	...		...	203	42	20·6	1,856	69	3·7	...		...	...		...
1893	51	1	1·9	6	1	16·6	274	36	13·1	...		...	251	62	24·7	1,629	49	3·0	...		...	...		...
1894	537	56	10·4	3	1	33·3	310	38	12·2	...		...	362	86	23·7	1,821	65	3·5	...		...	...		...
1895	109	16	14·6	...	...	...	417	54	12·9	...		...	314	65	20·7	2,832	65	2·2	...		...	...		...
1896	...	...	...	10	3	30·0	328	36	10·9	...		...	251	52	20·7	2,185	48	2·1	...		...	...		...
1897	...	...	...	3	1	33·3	254	24	9·4	...		...	214	44	20·5	2,597	93	3·5	...		...	...		...
1898	7	...	...	79	9	11·4	241	27	11·2	...		...	269	38	14·1	2,387	72	3·0	...		...	...		...
1899	...	..	...	12	3	25·0	289	39	13·4	...		...	279	28	10·0	1,185	50	4·2	...		...	...		...
1900	5	...	...	35	3	8·5	249	25	10·0	...		...	483	52	10·0	991	27	2·7	...		...	...		...
1901	6	1	16·6	14	2	14·3	215	30	13·9	...		...	542	58	10·7	892	26	2·9	...		...	...		...
1902	7	...	...	10	1	10·0	192	27	14·0	26	18	69·2	408	32	7·8	812	30	3·6	513	25	4·8	..		...
1903	5	1	20·0	1	...	...	237	22	9·2	7	3	42·8	575	59	10·2	1,415	53	3·7	434	15	3·4	...		...
1904	168	15	8·9	6	...	...	196	22	11·2	14	11	78·5	752	63	8·3	1,070	31	2·8	353	15	4·2	...		...
1905	2	...	...	1	1	100·0	210	20	9·5	11	9	81·8	674	61	9·0	832	15	1·8	291	25	8·6	...		...
1906	...	...	...	...	...	...	144	11	7·6	11	9	81·8	667	48	7·1	987	34	3·4	337	25	7·4	...		...
1907	...	...	...	1	...	...	103	11	10·6	19	10	52·6	635	32	5·0	1,110	24	2·1	300	10	3·3	206	135	65·5
1908	20	...	...	...	...	...	68	6	8·8	13	3	23·0	389	16	4·1	1,993	32	1·6	260	11	4·2	53	23	43·4
*1909	2	...	...	...	...	...	39	5	12·8	23	12	52·1	423	38	8·9	1,522	50	3·2	207	10	4·8	28	16	57·1
1910	...	...	...	...	...	...	43	6	13·9	19	7	36·8	511	60	11·7	1,512	42	2·7	209	13	6·2	7	4	57·0
1911	...	...	...	...	...	...	31	3	9·7	15	7	46·6	605	49	8·0	1,075	24	2·2	241	12	4·9	3	3	100·0
1912	...	...	...	...	...	...	29	4	13·7	8	5	62·5	426	29	6·8	893	10	1·1	239	10	4·1	4	4	100·0
1913	...	...	...	...	...	...	45	10	22·2	18	11	61·1	448	35	7·8	1,675	43	2·5	223	6	2·6	3	2	66·6
1914	...	...	...	...	..	...	63	12	19·0	17	10	58·8	902	96	10·6	2,270	36	1·5	278	11	3·9	6	2	33·3
1915	...	...	...	...	...	...	21	3	14·3	16	8	50·0	900	107	11·8	1,748	58	3·3	280	10	3·5	72	44	61·1
1916	...	...	...	...	..	...	30	2	6·6	19	4	21·0	823	82	9·9	1,411	31	2·1	171	4	2·3	42	23	54·7
1917	...	...	...	...	...	...	6	2	33·3	22	12	54·5	584	65	11·1	748	16	2·1	160	12	7·5	45	18	40·0
1918	...	...	...	...	...	...	14	1	7·1	10	5	50·0	627	60	9·5	852	26	3·0	126	5	3·9	30	11	36·6
1919	...	...	...	...	...	...	6	...	...	19	9	47·3	734	79	10·7	1,459	39	2·6	177	10	5·6	15	7	46·6
1920	9	...	...	...	...	...	12	2	16·6	30	15	50·0	1014	63	6·2	1,420	14	0·9	275	20	7·2	14	10	71·4
†1921	...	...	...	...		...	9	...	...	36	15	41·7	991	75	7·5	2,163	42	1·9	363	22	6·0	7	4	57·1
1922	...	...*	...	...	...	...	16	4	25·0	17	7	41·1	800	57	7·1	1,702	32	1·8	263	14	5·3	4	3	75·0
1923	...	...	...	...	...	...	29	2	6·9	33	17	54·5	770	69	8·9	1,897	93	4·9	257	17	6·6	12	8	66·6
1924	...	...	...	...	...	...	27	1	3·7	40	17	42·5	720	73	10·1	1,761	68	3·8	201	9	4·4	15	11	73·3
1925	...	...	...	...	...	...	30	1	3·3	27	11	40·7	870	82	9·4	2,351	62	2·6	270	14	5·2	12	10	83·3

Became notifiable in 1902.

Became notifiable in 1902.

Became notifiable in 1907.

Table showing the number of Cases of the undermentioned diseases admitted to Hospital since the year 1890 and the percentage of admissions to total notifications in each year.

Years.	Smallpox.		Typhus Fever.		Enteric Fever.		Puerperal Fever.		Diphtheria, Membranous Croup.		Scarlet Fever.		Erysipelas.	
	Admissions	Rate per cent. to TotalCases Notified.	Admissions	Rate per cent. to TotalCases Notified.	Admissions	Rate per cent. to TotalCases Notified	Admissions	Rate per cent. to TotalCases Notified.	Admissions	Rate per cent. to TotalCases Notified.	Admissions	Rate per cent. to TotalCases Notified.	Admissions	Rate per cent. to TotalCases Notified.
1890	...	...	7	100·00	241	48·02			122	29·59	480	40·10		
1891	...	...	1	100·00	227	51·01			82	39·61	433	44·12		
1892	8	100·00	16	88·88	115	48·31			66	32·51	862	46·44		
1893	51	100·00	5	83·33	144	52·55			85	33·86	780	47·88		
1894	533	99·25	3	100·00	176	56·77			122	33·70	958	52·60		
1895	109	100·00	...	...	288	69·06			146	46·49	1519	53·63		
1896	...	...	10	100·00	233	71·03	Not N	otified	108	43·02	1381	63·20	Not N	otified
1897	...	...	3	100·00	175	68·89	until	1902.	109	50·93	1658	63·84	until	1902.
1898	7	100·00	78	98·73	143	51·03			111	41·26	1350	56·55		
1899	...	...	11	91·66	207	71·62			136	48·74	816	68·86		
1900	5	100·00	35	100·00	181	72·69			309	63·97	676	68·21		
1901	6	100·00	14	100·00	166	76·85			364	67·15	601	67·37		
1902	7	100·00	10	100·00	153	79·68	5	19·23	297	72·79	605	74·50	207	40·35
1903	5	100·00	...	...	214	90·29	...	...	429	74·60	1187	83·88	154	35·48
1904	168	100·00	6	100·00	174	88·77	1	7·14	579	76·99	942	88·03	136	38·52
1905	2	100·00	1	100·00	179	85·23	4	36·36	581	86·20	740	88·82	126	43·29
1906	...	...	...	...	132	91·66	7	63·63	589	88·30	880	89·15	146	43·32
1907	...	...	1	100·00	91	88·34	12	63·15	546	85·98	1026	92·43	152	50·66
1908	17	85·00	...	...	61	89·70	9	69·23	338	86·88	1882	94·43	133	51·15
1909	2	100·00	...	...	35	90·00	14	60·86	371	87·70	1442	94·74	108	52·17
1910	...	...	...	...	39	90·69	11	57·89	476	93·15	1423	94·11	91	43·54
1911	...	...	...	...	29	93·55	8	53·33	556	91·90	1007	93·67	131	54·35
1912	...	...	...	..	27	93·10	4	50·00	396	92·95	848	94·96	132	55·23
1913	...	...	...	...	41	91·11	8	44·44	416	92·85	1612	96·23	108	48·43
1914	...	...	...	...	56	88·88	12	70·59	856	94·90	2206	97·18	146	52·50
1915	...	...	...	...	19	90·47	8	50·00	883	98·11	1659	94·90	144	51·42
1916	...	...	...	...	28	93·33	10	52·63	797	96·84	1383	98·01	57	33·33
1917	...	...	...	...	5	83·33	11	50·00	567	97·08	727	97·19	74	46·25
1918	...	...	...	...	11	78·57	6	60·00	606	96·65	841	98·70	69	54·76
1919	...	...	...	...	6	100·00	7	36·84	716	97·54	1435	98·35	75	42·37
1920	9	100·00	...	...	10	83·33	13	50·00	981	96·74	1382	97·32	152	55·27
†1921	...	...	...	...	6	66·66	17	47·22	953	96·16	2103	97·22	163	44·90
1922	...	...	...	...	15	93·75	9	52·94	767	95·87	1611	94·65	117	44·48
1923	..	...	...	...	27	93·10	19	57·57	741	96·23	1786	94·15	138	53·69
1924	...	...	...	...	22	81·48	25	62·50	699	97·08	1644	93·35	84	41·79
1925	...	...	...	...	27	90·00	16	59·26	845	97·12	1944	82·68	87	32·22

† City Boundaries extended to include Leith and Suburban area.

Table showing the Notifications of Infectious Diseases, classified according to size of house in which the infected persons resided.

Disease.	1 Apartment.		2 Apartments.		3 Apartments.		4 Apartments.		5 Apartments.		Over 5 Apartments		Institutions and Military Quarters.		Total Cases.
	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	Number of Cases.	Percentage to Total Cases.	
Diphtheria	59	6·8	382	44·0	179	20·5	77	8·8	35	4·0	70	8·0	68	7·8	870
Erysipelas	4	1·5	95	35·2	74	27·4	31	11·5	11	4·1	21	7·7	34	12·6	270
Scarlet Fever	114	4·8	993	42·3	496	21·1	289	12·3	89	3·8	217	9·2	153	6·5	2351
Typhoid Fever	...	...	3	10·0	1	3·3	4	13·3	...	...	3	10·0	19	63·3	30
Puerperal Fever	...	...	7	26·0	9	33·3	5	18·5	...	...	2	7·4	4	14·8	27
Cerebro-spinal Meningitis	1	8·3	5	41·7	1	8·3	1	8·3	...	...	3	25·0	1	8·3	12
Totals	178	5·0	1485	41·7	760	21·3	407	11·4	135	3·8	316	8·9	279	7·9	3560

TUBERCULOSIS.

The following Report has been prepared by Dr John Guy, Tuberculosis Officer :—

I beg to submit herewith the Report on the work of the Tuberculosis Department for the year 1925.

PULMONARY TUBERCULOSIS.

Notifications.—In tabulating the notifications of Pulmonary Tuberculosis all duplicate intimations are carefully excluded. The notifications relating to non-residents are referred to the district of their permanent domicile, while those of citizens temporarily resident elsewhere and whose illness had been reported to other Local Authorities are included. After these corrections have been made, the actual number of first notifications to be allocated to the City was 670.

The distribution of the cases according to the district of the City in which the residence of the notified persons is situated is as follows :—

Area.	Houses.	Institutions.	Totals.	Rate per 1000 of Population
Edinburgh	490	19	509	1·6
Leith	132	7	139	1·7
Suburban	17	5	22	·8
Totals .	639	31	670	1·6

Pulmonary Tuberculosis was made compulsorily notifiable in 1907, and the following Table shows the number of cases reported annually, together with the incidence-rate for each of the succeeding years. It should be noted, however, that from the year 1921 onwards, the figures refer to the extended City and are not, therefore, comparable with those of the preceding years. It is, however, interesting to find that the notifications allocated to the Edinburgh Area show a reduction of 120 when compared with the average for the 5 years previous to the extension of the City Boundaries.

This substantial decrease in the number of cases would appear to indicate that our efforts to control the disease are meeting with success. The progress, however, will necessarily be slow, and our work must be continued with unabated energy.

1907 . .	651 or 2·0 per 1000.	1917 . .	655 or 2·0 per 1000.
1908 . .	713 „ 2·2 „	1918 . .	643 „ 2·0 „
1909 . .	744 „ 2·3 „	1919 . .	602 „ 1·9 „
1910 . .	763 „ 2·3 „	1920 . .	616 „ 1·9 „
1911 . .	1052 „ 3·3 „	*1921 . .	817 „ 1·9 „
1912 . .	1255 „ 3·9 „	1922 . .	762 „ 1·8 „
1913 . .	1010 „ 3·1 „	1923 . .	692 „ 1·6 „
1914 . .	808 „ 2·4 „	1924 . .	799 „ 1·9 „
1915 . .	690 „ 2·1 „	1925 . .	670 „ 1·6 „
1916 . .	628 „ 1·9 „		

* City Boundaries extended to include Leith and Suburban Area.

The age incidence of the corrected notifications is set out in the following Table. As in previous years, the greatest percentage of the cases notified were between the ages of 20 and 30 years. The proportion of Males was greatest in the age-period 25-30 years, while in the case of Females the predominance occurred between the ages of 20-25 years.

Sex.	Under 5.	5-10.	10-15.	15-20.	20-25.	25-30.	30-35.	35-40.	40-45.	45-50.	50-55.	55-60.	60-65.	65-70.	70 and over.	Total.
Male . .	8	20	18	28	37	46	25	38	34	27	27	22	14	9	8	361
Female .	8	10	13	37	53	47	38	20	23	19	14	8	8	6	5	309
Total .	16	30	31	65	90	93	63	58	57	46	41	30	22	15	13	670

In the next Table the notifications have been tabulated to show the incidence of the disease in the various Wards of the City. The incidence-rate for the Edinburgh Area was 1·6 per 1000 of the estimated population. The highest rates in this area

were again recorded in St Leonard's Ward (2·9) and St Giles' Ward (2·3). As has been pointed out in previous reports, there is a considerable amount of overcrowding in these Wards, and until this is remedied and the sunless closes and courts with which they abound are opened up, we cannot expect much improvement.

These relics of the past are to be found in all centres of population, and they constitute positive dangers to the health of the citizens.

In the Leith Area the incidence-rate of the disease was equal to 1·7 per 1000 of the population. Again the highest rates are recorded for the Wards in which the congestion of population is greatest, viz. :—Central Leith Ward (2·2) and North Leith Ward (1·9).

In the Suburban District of the City the incidence-rate for Pulmonary Tuberculosis was only ·8 per 1000 of the population, while the three Wards which comprise the district all show rates much below the rate for the City as a whole.

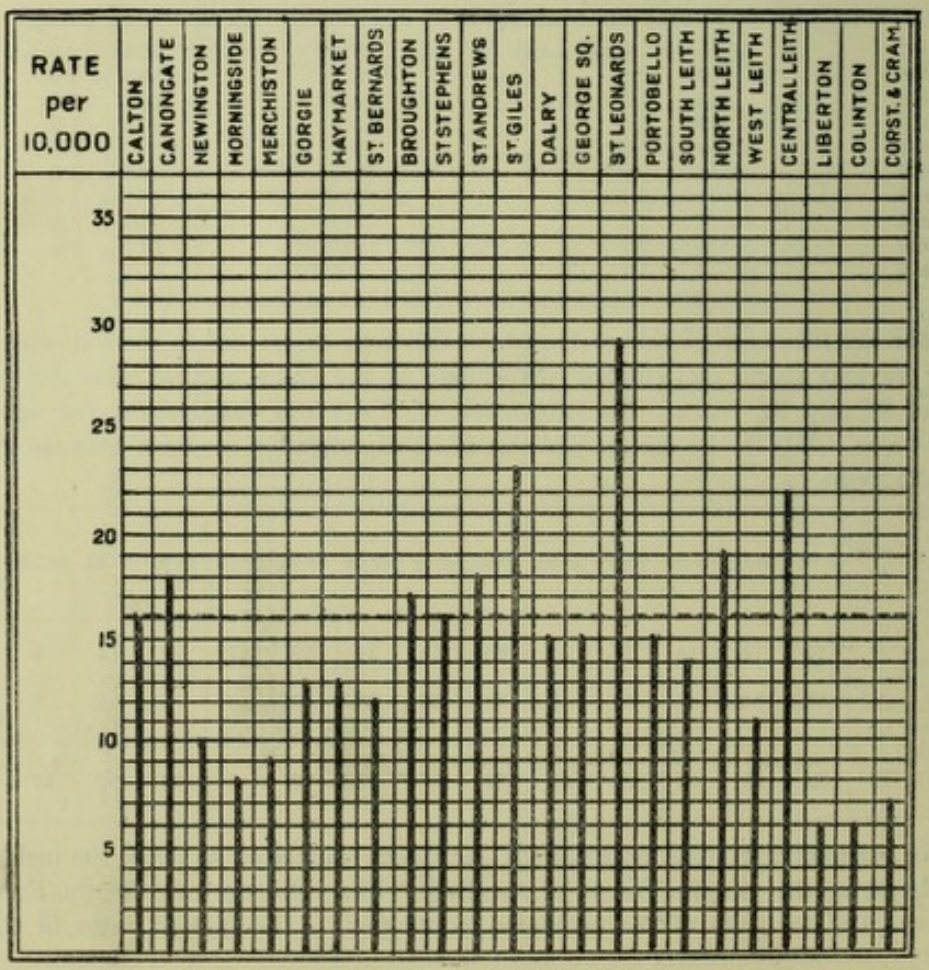
	Notifications.	Rate per 1000.		Notifications.	Rate per 1000.
Calton	37	1·6	George Square	33	1·5
Canongate	41	1·8	St Leonard's	66	2·9
Newington	19	1·0	Portobello	31	1·5
Morningside	17	0·8	South Leith	39	1·4
Merchiston	20	0·9	North Leith	40	1·9
Gorgie	28	1·3	West Leith	21	1·1
Haymarket	18	1·3	Central Leith	32	2·2
St Bernard's	21	1·2	Liberton	6	0·6
Broughton	26	1·7	Colinton	4	0·6
St Stephen's	29	1·6	Corstorphine and Cramond	7	0·7
St Andrew's	21	1·8	Institutions (other than Sanatoria)	28	...
St Giles	50	2·3	Military Quarters	3	...
Dalry	33	1·5			

Edinburgh, 509 = 1·6 ; Leith, 139 = 1·7 ; Suburban, 22 = 0·8.

From the following line diagram the incidence of the disease in the various Wards can be readily compared with the rate for the City.

PULMONARY TUBERCULOSIS.

NOTIFICATIONS PER 10,000 OF POPULATION.



----- *Notification Rate for City.*

In the following Table the notifications are arranged to show the class of house in which the infected persons reside.

1-roomed house.	2-roomed house.	3-roomed house.	4 rooms and over.	Lodging-Houses.	Institutions.	Total.
58	262	155	142	22	31	670

Deaths.—The number of Edinburgh residents who died from Pulmonary Tuberculosis during the year and whose deaths were registered in the City was 376. There were, however, 25 citizens who died in other parts of the country (19 of them in Institutions), and these deaths have to be included in the City records. After making this adjustment, the net number of deaths allocated to the City is 401, and the mortality-rate calculated on this figure is 1·0 per 1000 of the population.

The death-rate from Pulmonary Tuberculosis has remained practically stationary during the last five years. In view of the progressive decline reported for previous quinquennial periods this is to be regretted. The cause of this check in our movement towards betterment can only be of a temporary nature, and may to some extent be explained by the prevailing unsatisfactory state of industry.

This has materially affected the purchasing power of the poorer classes of the community, and has rendered them less able to resist the disease.

With the return of more prosperous trade conditions and the clearing away of congested slum areas, which has already been begun, there is good reason to anticipate a further reduction in the death-rate from this disease.

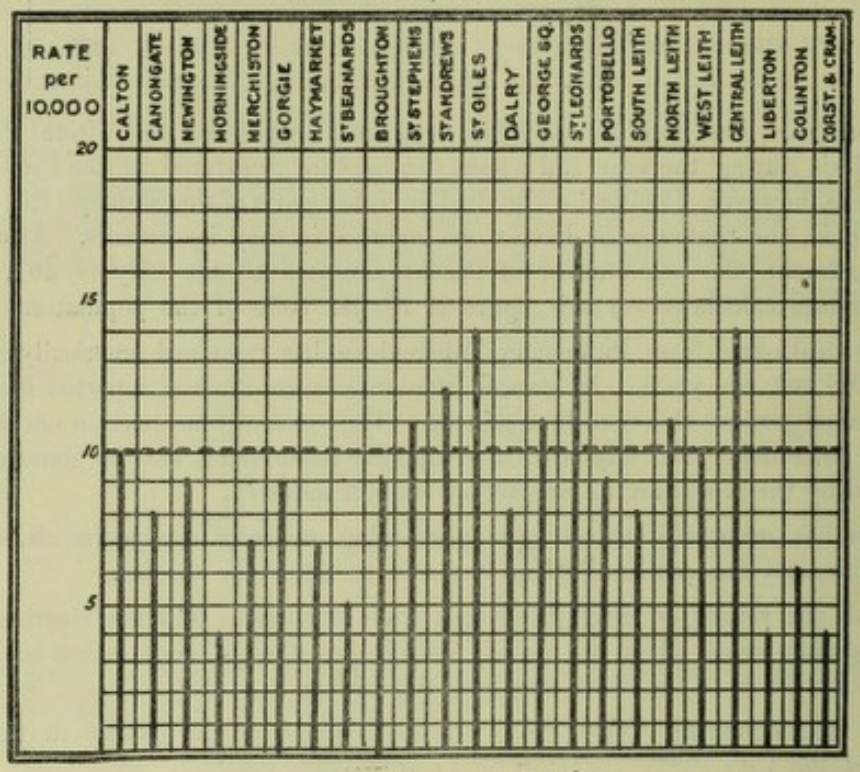
The accompanying Table shows the distribution of the deaths in the various Wards of the City.

WARDS.	Number of Deaths.	Rate per 1000.	Sex.		Age-periods.							
			Male.	Female.	Under 15 years.	15 and under 20 years.	20 and under 25 years.	25 and under 35 years.	35 and under 45 years.	45 and under 55 years.	55 and under 65 years.	65 years and upwards.
Calton	22	1·0	14	8	1	1	5	8	3	1	2	1
Canongate	18	·8	8	10	1	1	2	4	5	3	1	1
Newington	16	·9	9	7	...	3	1	...	7	4	1	...
Morningside	9	·4	5	4	...	...	2	...	2	1	4	...
Merchiston	16	·7	8	8	1	...	...	4	3	3	3	2
Gorgie	19	·9	13	6	...	1	2	5	4	4	2	1
Haymarket	9	·7	4	5	1	...	1	1	3	2	1	...
St Bernard's	8	·5	6	2	...	...	...	2	2	2	1	1
Broughton	14	·9	6	8	1	1	1	1	4	3	2	1
St Stephen's	19	1·1	9	10	1	1	1	6	6	1	2	1
St Andrew's	14	1·2	8	6	2	1	3	3	3	..	2	...
St Giles	30	1·4	15	15	...	1	7	6	5	7	3	1
Dalry	17	·8	10	7	1	2	3	4	2	3	2	...
George Square	23	1·1	12	11	1	1	5	...	5	8	3	...
St Leonard's	38	1·7	18	20	1	4	5	10	4	7	7	...
Portobello	18	·9	10	8	1	3	3	3	5	2	...	1
South Leith	24	·8	12	12	1	4	3	4	2	6	2	2
North Leith	24	1·1	15	9	3	2	2	7	5	2	2	1
West Leith	18	1·0	9	9	...	...	1	6	5	3	...	3
Central Leith	20	1·4	9	11	2	1	5	7	4	...	1	...
Liberton	4	·4	3	1	...	...	3	...	1	...	...	...
Colinton	4	·6	1	3	...	...	1	...	...	2	...	1
Corstorphine and Cramond	4	·4	2	2	...	1	...	...	...	1	1	1
Institutions (other than Sanatoria)	13	...	9	4	3	1	1	1	3	1	3	...
Military Quarters	...	...	...	...	...	...	...	...	...	...	...	...
Total	401	1·0	215	186	21	29	57	82	83	66	45	18
Edinburgh Area	290	·9	155	135	12	20	41	57	63	51	36	10
Leith Area	86	1·0	45	41	6	7	11	24	16	11	5	6
Suburban Area	12	·5	6	6	...	1	4	...	1	3	1	2
Institutions	13	...	9	4	3	1	1	1	3	1	3	...

The accompanying diagram shows at a glance the death-rates recorded for the various Wards.

PULMONARY TUBERCULOSIS.

DEATH-RATE PER 10,000 OF POPULATION.



-----*Death Rate for City.*

Deaths in relation to Notification.—Of the total deaths during the year, no fewer than 87 had not been previously notified to the Department as cases of Tuberculosis. I have on various occasions directed attention to this unsatisfactory state of affairs. The successful treatment and control of Pulmonary Tuberculosis depends to a large extent on early notification. I would, therefore, again appeal to the medical profession in the City for a closer co-operation with the Department in the carrying out of the Regulations.

The following Table is interesting as showing the time that has elapsed between notification and death :—

Year.	Within 1 month.	From 1 to 3 months.	From 3 to 6 months.	From 6 months to 1 year.	From 1 to 2 years.	Over 2 years and under 3.	Over 3 years and under 4.	From 4 years upwards.	Notified after Death.	Total.
1921	45	47	29	60	43	21	7	19	110	381
1922	38	37	43	56	53	23	13	25	79	367
1923	51	49	30	45	49	35	13	38	87	397
1924	49	48	49	51	67	34	21	49	56	424
1925	57	47	35	38	48	28	14	47	87	401

NON-PULMONARY TUBERCULOSIS.

Notifications.—During the year under review, 498 new cases of the Non-Pulmonary forms of Tuberculosis were reported to the Department, as compared with 455 in 1924 and 482 in 1923.

The following is a summary of the notifications of Non-Pulmonary Tuberculosis received each year since the City boundaries were extended to include Leith and the Suburban Area.

	Notifications.	Rate per 1000 of Population.
1921 . . .	537	1·3
1922 . . .	485	1·1
1923 . . .	482	1·1
1924 . . .	455	1·1
1925 . . .	498	1·2

An analysis of the notifications in age groups is given in the following Table. An outstanding feature in connection with this Table is the fact that 57 per cent. of the cases were under the age of 10 years, fully 41 per cent. being children under 5 years.

Sex.	Under 5.	5-10.	10-15.	15-20.	20-25.	25-30.	30-35.	35-40.	40-45.	45-50.	50-55.	55-60.	60-65.	65-70.	70 and over.	Total.
Male . .	116	33	27	21	7	12	7	3	6	5	7	3	2	1	1	251
Female .	92	41	16	21	15	13	13	8	9	2	6	5	3	...	3	247
Total .	208	74	43	42	22	25	20	11	15	7	13	8	5	1	4	498

In the following Table the notifications are distributed throughout the various Wards of the City. The incidence-rates are also given in order to show the relative prevalence of the disease in the different districts.

	Notifications.	Rate per 1000.		Notifications.	Rate per 1000.
Calton . .	31	1·4	St Leonard's . .	47	2·1
Canongate . .	42	1·8	Portobello . .	23	1·1
Newington .	19	1·1	South Leith . .	33	1·2
Morningside . .	14	0·6	North Leith . .	26	1·2
Merchiston . .	11	0·5	West Leith . .	10	0·5
Gorgie . .	28	1·3	Central Leith .	16	1·1
Haymarket . .	12	0·8	Liberton . .	11	1·1
St Bernard's . .	16	0·9	Colinton . .	6	1·0
Broughton . .	12	0·8	Corstorphine and Cramond . .	6	0·6
St Stephen's . .	10	0·6	Institutions (other than Sanatoria) .	17	...
St Andrew's . .	19	1·7	Military Quarters .	...	
St Giles . .	26	1·2			
Dalry . . .	31	1·4			
George Square .	32	1·5			

Edinburgh 381 = 1·2; Leith 90 = 1·1; Suburban 27 = 1·0.

The next Table gives particulars indicating the type of houses occupied by the 498 persons notified.

1 Room.	2 Rooms.	3 Rooms.	4 Rooms and over.	Institutions.	Total.
54	222	115	90	17	498

In the undernoted list the notifications have been classified to show the various regions affected by the disease.

Glands . . .	194	Bones (except Spine)—*contd.*	
Abdominal . . .	93	Leg . . .	2
Meninges and Brain . .	58	Hand . . .	14
Spine . . .	17	Rib . . .	5
Lupus . . .	6	Not classified . .	1
Kidneys . . .	13	Joints—	
Testes . . .	10	Hip . . .	11
General . . .	30	Elbow . . .	4
Bones (except Spine)—		Knee . . .	11
Thigh . . .	7	Ankle . . .	5
Foot . . .	7	Shoulder . . .	2
Arm . . .	2	Others . . .	6
		Total . .	498

Deaths.—The Non-Pulmonary forms of Tuberculosis caused 165 deaths during the year, the death-rate being equivalent to ·39 per 1000 of the population.

In the following Table the deaths are tabulated according to age and the organ or region affected. As regards the age incidence, 80 or 48·4 per cent. were children under 5 years of age, and 17 or 10·3 per cent. were between 5 and 10 years.

Meningitis was certified as the cause of death in 57 instances, and in 37 cases the Intestines or Peritoneum were the parts affected.

	All Ages.			Age.											
	Both Sexes.	Males.	Females.	-1	1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85 and over.
Tuberculous Meningitis	57	29	28	10	28	8	3	7	1	...	...	...	...	...	...
Tuberculosis of Intestines and Peritoneum	37	19	18	6	14	3	2	2	2	4	2	1	1	...	...
,, ,, Spine	8	4	4	...	...	...	...	3	1	1	1	2	...	...	...
,, ,, Joints	3	2	1	...	...	...	...	...	...	2	...	...	1	...	...
,, ,, Skin	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
,, ,, Bones (except spine)	4	2	2	...	...	1	...	...	...	1	...	...	...	2	...
,, ,, Lymphatic System	10	4	6	3	3	1	1	...	...	1	...	1	...	...	...
,, ,, Genito-urinary System	3	2	1	1	...	...	...	...	...	1	...	...	1	...	...
Disseminated Tuberculosis	11	8	3	2	3	2	...	1	2	...	...	1	...	...	...
Other Non-Pulmonary Tuberculosis	32	19	13	4	6	2	...	6	6	4	2	1	...	1	...
Totals	165	89	76	26	54	17	6	19	12	14	5	6	3	3	...

The following death-rates, which are extracted from the Registrar-General's Report, are submitted in order that the death-rate from Tuberculosis in the City may be compared with the mortality in other large centres.

Town.	Death-rate per 1000.		Town.	Death-rate per 1000.	
	Pulmonary Tuberculosis.	All forms of Tuberculosis.		Pulmonary Tuberculosis.	All forms of Tuberculosis.
Glasgow	·97	1·37	Paisley	1·02	1·34
Edinburgh	**·95**	**1·34**	Greenock	·85	1·37
Dundee	·87	1·22	Motherwell & Wishaw	·54	·84
Aberdeen	·97	1·24	Clydebank	·80	1·12

The following Table shows the number of deaths occurring annually from Tuberculosis since 1900 :—

DEATHS FROM TUBERCULOSIS, 1900-1925.

YEAR.	Pulmonary Tuberculosis.			Other Tuberculous Disease.			All Tuberculosis.
	Male.	Female.	Total.	Male.	Female.	Total.	
1900	302	246	548	141	129	270	818
1901	284	241	525	148	129	277	802
1902	262	215	477	120	95	215	692
1903	244	223	467	114	117	231	698
1904	223	185	408	121	125	246	654
1905	232	206	438	109	93	202	640
1906	193	180	373	108	110	218	591
1907	203	192	395	123	100	223	618
1908	197	198	395	123	92	215	610
1909	251	177	428	90	103	193	621
1910	223	166	389	82	83	165	554
1911	211	181	392	101	92	193	585
1912	226	180	406	93	87	180	586
1913	186	178	364	84	91	175	539
1914	213	166	379	89	101	190	569
1915	193	179	372	92	69	161	533
1916	198	158	356	81	82	163	519
1917	201	190	391	100	84	184	575
1918	141	180	321	74	89	163	484
1919	161	159	320	70	82	152	472
1920	161	125	286	69	62	131	417
*1921	187	194	381	96	87	183	564
1922	187	180	367	72	93	165	532
1923	214	183	397	70	68	138	535
1924	225	199	424	73	70	143	567
1925	215	186	401	89	76	165	566

* City Boundaries extended to include Leith and Suburban Area.

INSTITUTIONAL TREATMENT.

The accommodation available for the residential treatment of Tuberculosis at the various Institutions under the control of the Department is as follows :—

Royal Victoria Hospital,	Pulmonary Tuberculosis . .	130 beds
Pilton Hospital,	,, ,, . .	100 ,,
Polton Farm Colony,	,, ,, . .	21 ,,
Colinton Mains Hospital,	,, ,, . .	48 ,,
,, ,, ,,	Non-Pulmonary Tuberculosis .	63 ,,
	Total .	362 beds

Pilton Hospital.—The beds at this Hospital are reserved for the treatment of the advanced cases of Pulmonary Tuberculosis. The accommodation has been fully taken advantage of during the year and there was always a waiting list. Open-air conditions and plenty of nourishing food have a wonderful effect on many of the patients, and 165 were discharged showing marked improvement. The majority of the cases, however, are classified under Stage III., and the disease is generally too far advanced to warrant hopes of any permanent benefit.

In the following Table particulars are given regarding the number of patients passing through the Hospital in course of the twelve months :—

	Remained at 31st December 1924.	Admitted.	Discharged.	Died.	Remaining at 31st December 1925.
Men . .	49	157	105	64	37
Women .	43	175	121	57	40
Children .	6	25	15	7	9
Total .	98	357	241	128	86

Throughout the year, 241 patients were discharged and 128 died. Of these 369 patients, 35 were finally diagnosed as suffering from diseases other than Tuberculosis The age and sex distribution of the remaining 334 definite cases of Tuberculosis was as follows :—

	Under 5.	5-10.	10-15.	15-20.	20-30.	30-40.	40-50.	50-60.	Over 60.	Total.
Males . .	2	4	3	14	43	42	26	19	10	163
Females. .	1	2	11	21	64	33	21	11	7	171
Total . .	3	6	14	35	107	75	47	30	17	334

In the next Table the discharged patients have been classified according to the stage of the disease on admission to Hospital, together with their condition on discharge :—

	Stage of Disease on Admission.			Condition on Discharge.		Died.
	A	B	C	Improved.	Not Improved.	
Stage I.—						
Male . .	3	8	...	11	...	...
Female .	8	6	2	15	1	...
Total . .	11	14	2	26	1	...
Stage II.—						
Male . .	4	37	5	39	5	2
Female .	6	38	7	40	8	3
Total . .	10	75	12	79	13	5
Stage III.—						
Male . .	1	42	63	26	16	64
Female .	1	39	64	34	18	52
Total . .	2	81	127	60	34	116
Totals .	23	170	141	165	48	121

Particulars regarding the presence or absence of Tubercle Bacilli in Sputa of the discharged patients is here given :—

	ON ADMISSION.		ON DISCHARGE.	
	T.B. Present.	T.B. Absent.	T.B. Present.	T.B. Absent.
Stage I. .	13	14	9	18
,, II. .	79	18	68	29
,, III. .	186	24	178	32
Totals .	278	56	255	79

The length of residence in Hospital of the discharged patients was as under :—

Average stay in Hospital . . . . 81 days.
Longest ,, ,, ... 615 ,,
Shortest ,, ,, ... 1 day.

Royal Victoria Hospital.—As far as possible, only patients in the early stages of the disease are selected for admission to this Institution.

During the year, 258 patients were admitted to the Hospital for a course of treatment, and the following Table gives particulars regarding the number dealt with.

	Remained at 31st December 1924.	Admitted.	Discharged.	Died.	Remaining at 31st December 1925.
Men . .	30	106	107	...	29
Women .	33	100	100	1	32
Children .	12	52	45	1	18
Total .	75	258	252	2	79

Among the 252 patients treated and discharged from Hospital, 29 were suffering from diseases other than Pulmonary Tuberculosis, and these are not, therefore, included in the subsequent statistics. An analysis of the sex and age of the discharged patients, who were ultimately classified as Tuberculous, is shown in the following Table :—

	Under 5.	5-10.	10-15.	15-20.	20-30.	30-40.	40-50.	50-60.	Over 60.	Total.
Males . .	...	9	12	18	40	19	13	6	2	119
Females . .	...	10	6	13	39	25	12	1	...	106
Total . .	...	19	18	31	79	44	25	7	2	225

In the next Table the discharged cases have been arranged to show the stage of the disease on admission to Hospital and the condition of the patient on completion of treatment.

	Stage of Disease on Admission.			Condition on Discharge.			Died
	A	B	C	Disease Arrested.	Improved.	Not Improved.	
Stage I.—							
Male . .	37	13	1	8	35	8	...
Female .	24	20	3	7	34	6	...
Total . .	61	33	4	15	69	14	...
Stage II.—							
Male . .	11	36	6	3	46	4	...
Female .	10	25	7	1	32	8	1
Total . .	21	61	13	4	78	12	1
Stage III.—							
Male . .	2	5	9	1	9	6	...
Female .	3	9	4	1	5	9	1
Total . .	5	14	13	2	14	15	1
Totals . .	87	108	30	21	161	41	2

Presence or Absence of Tubercle Bacilli.

	ON ADMISSION.		ON DISCHARGE.	
	T.B. Present.	T.B. Absent.	T.B. Present.	T.B. Absent.
Stage I. .	27	71	19	79
,, II. .	55	40	52	43
,, III. .	19	13	22	10
Totals .	101	124	93	132

The more important complications noted during the year were as follows :—

Hæmoptysis	9 cases.	Pyothorax	1 case.
Pleurisy	3 ,,	Cellulitis of Arm . . .	1 ,,
Acute Appendicitis . . .	2 ,,	Tuberculosis of Bowel . .	1 ,,
Pregnancy	1 case.	,, Knee . .	1 ,,
Chorea	1 ,,	,, Larynx . .	1 ,,
Diphtheria	1 ,,	Emphysema	1 ,,
Acute Enteritis	1 ,,	Total . . .	24

Duration of Residence.

Average stay in Hospital . . 103 days.
Longest ,, ,, . . 586 ,,
Shortest ,, ,, . . 4 ,,

Colinton Mains Hospital.—There are 63 beds at this Institution reserved solely for the treatment of the Non-Pulmonary forms of Tuberculosis.

In addition, there is an annexe to the Hospital where 48 beds are available for the treatment of male patients who are suffering from the Pulmonary form of the disease. The majority of the cases admitted to this ward are those who in other circumstances would have come under the care of the Parish Council Authorities.

During the year, 158 patients were admitted to the Hospital. Of these, 89 were Non-Pulmonary cases, while 69 were under treatment for Pulmonary Tuberculosis.

The following statistical information refers only to the patients suffering from the Non-Pulmonary forms of the disease :—

Patients Admitted and Discharged.

Sex.	Number of Patients at 31st December 1924.	From 1st Jan. to 31st Dec. 1925.			Number of Patients remaining at 31st Dec. 1925.
		Admitted.	Discharged.	Died.	
Males .	27	42	29	4	36
Females .	33	47	44	5	31

Age Distribution of Patients admitted.

Sex.	Under 5.	5-10.	10-15.	15-20.	20-30.	30-40.	40-50.	50-60.	Total.
Males . . .	10	8	6	6	4	4	3	1	42
Females . .	16	8	4	3	8	2	2	4	47

Condition of Patients on Discharge.

	Males.	Females.	Total.
Apparently Cured	12	13	25
Improved . .	15	27	42
Not Improved .	2	4	6
Total . .	29	44	73

Parts affected by Disease in Patients who died, with ultimate Cause of Death.

	Parts Affected.	Ultimate Cause of Death.
Males	1 Abdomen.	Tubercular Peritonitis.
	1 Testes.	Acute Miliary Tuberculosis.
	1 Spine.	T. B. Spine, Bronchitis, Cardiac Failure.
	1 Knee.	T. B. Meningitis.
Females	4 Abdomen.	3 of T. B. Meningitis and 1 of T. B. Abdomen, Diphtheria.
	1 T. B.	T. B. Peritonitis, Acute Pulmonary Tuberculosis.

Parts affected by Disease in Patients Admitted.

Part Affected.	Males.	Females.	Part Affected.	Males.	Females.
Abdomen . . .	10	18	Ankle . . .	...	1
Spine . . .	6	5	Leg, Foot . .	...	4
Glands . . .	2	4	Dactylitis . .	1	...
Multiple . . .	1	...	Shoulder . . .	1	...
Urinary, Testes . .	2	...	Cervical Vertebrae .	1	...
Kidney . . .	1	...	Abscess . . .	1	2
Hip	5	5	Lupus . . .	2	1
Knee . . .	8	3	Other Forms . .	1	3
Elbow and Ankle .	...	1	Totals .	42	47

Results with regard to patients Discharged or Dying during the year 1925.

Parts affected on Admission.	Males.	Apparently Cured.	Improved.	Not Improved.	Died.	Females.	Apparently Cured.	Improved.	Not Improved.	Died.	Average duration of stay in hospital in days.	Total number of patients with parts affected.
Abdomen ...	7	2	4	...	1	16	2	10	...	4	126	23
Spine	6	2	3	...	1	9	3	4	2	...	360	15
Glands... ...	2	1	1	...	...	4	2	2	...	...	136	6
Peritonitis ...	2	...	2	...	...	...	...	...	...	...	118	2
Lupus	1	...	1	...	...	1	...	1	...	...	94	2
Multiple ...	1	...	...	1	...	..	...	...	...	...	108	1
Hip	2	2	...	...	...	4	2	2	...	...	180	6
Knee	3	1	1	...	1	3	2	1	...	...	332	6
Ankle	...	...	...	...	...	1	...	1	...	...	730	1
Toe	...	...	...	...	...	1	...	1	...	...	90	1
Shoulder ...	1	...	1	...	...	...	...	...	...	...	89	1
Thumb ...	...	...	...	...	...	1	...	1	...	...	574	1
Urinary ...	1	1	...	...	...	...	...	...	...	...	84	1
Testes	1	...	...	...	1	...	...	...	...	...	1	1
Sinuses ...	...	...	...	...	...	1	...	1	...	...	90	1
Ascites... ...	...	...	...	...	...	1	...	1	...	...	86	1
Dactylitis ...	1	...	1	...	...	...	...	...	...	...	14	1
Kidney ...	1	...	1	...	...	1	1	...	...	...	90	2
Abscess ...	1	1	...	...	...	2	1	1	...	...	86	3
Sores	1	1	...	...	...	1	1	...	...	...	95	2
Other Forms ...	2	1	...	1	...	3	1	1	...	1	102	5
Totals	33	12	15	2	4	49	15	27	2	5	170 Average.	82

Polton Farm Colony.—During the year, 19 patients were admitted to the Colony.

The patients undergo a course of training in light garden work, poultry farming, pig rearing, etc. The majority of the colonists benefit very materially during their residence in the Institution, and permanent results have been noted in many cases.

New Treatment.

The search for a specific for Tuberculosis continues unabated. During the year considerable interest was aroused by the introduction of the drug "Sanocrysin." This was the product of Professor Moolgaard, Copenhagen, and it was claimed that it would destroy the Bacilli of Tuberculosis in the body in course of a few weeks.

The drug was not issued for sale, but was provided by the Medical Research Society to approved medical men for trial and report, just as Insulin was in the first instance.

This Department was one selected in order that the remedy might be tested. The results, however, were somewhat disappointing, and did not conform to the original claim made for the drug.

DISPENSARIES.

The dispensaries established in connection with the Tuberculosis Scheme form valuable auxiliaries, both in the treatment and control of the disease. The Royal Victoria Dispensary, Spittal Street, is open for consultation purposes every afternoon from Monday to Friday, and also on Thursday evenings, while attendance is given at the Leith Centre, South Fort Street, on two afternoons per week. At both dispensaries the energies of the staff are always fully taxed, and the following figures will give some indication of the work accomplished.

	New Cases.		Old Cases.	
	Edinburgh.	Leith.	Edinburgh.	Leith.
Men . . .	461	78	2,957	880
Women . . .	573	101	3,044	609
Children . . .	822	231	4,632	726
Total .	1,856	410	10,633	2 215

Home Visitation.—During the year, the doctors and nurses attached to the dispensaries have made 14,578 home visits to patients. The following Table shows the number of visits made monthly to insured and non-insured persons.

	Insured.	Not Insured.	Total.		Insured.	Not Insured.	Total.
January	572	826	1,398	August	368	474	842
February	567	680	1,247	September	360	523	883
March	674	870	1,544	October	577	802	1,379
April	400	729	1,129	November	533	723	1,256
May	502	891	1,393	December	497	596	1,093
June	624	839	1,463		6,097	8,481	14,578
July	423	528	951				

AFTER-CARE COMMITTEE.

I have pleasure in again commending the work of the After-Care Committee. One of the chief difficulties in dealing with a certain class of Tuberculosis patients is their inability to make adequate provision for the family during the time necessary for a course of treatment in the Sanatorium. The Committee have done much useful work in this connection by bringing the position of deserving cases before the Tuberculosis Trust and the Council of Social Service. In many instances grants were obtained to assist in the payment of rent, while in other cases arrangements have been made for the admission of children to Homes during the mother's temporary absence in the Sanatorium.

The Committee have also rendered assistance in the securing of better housing accommodation for patients who have been discharged after treatment, while clothing and bedding are provided in necessitous cases.

The work carried on by the Committee is of a varied nature, and it has been most helpful in overcoming many of the difficulties to be found in the home of the Tuberculosis patient.

I remain,

Yours faithfully,

JOHN GUY,

M.D., D.P.H. (Camb.), F.R.F.P. & S., Glas.,
F.R.C.P., Edin.

COLINTON MAINS HOSPITAL.

REPORT BY THE RESIDENT PHYSICIAN.

I have the honour to present the Annual Report of the City Hospital for the year 1925. It is with deep regret that I have to record the death of Dr Claude B. Ker, the late Medical Superintendent, which terminated an attack of influenza and pneumonia contracted in March. The efficiency and good name of the Edinburgh City Hospital is a tribute to the devotion to duty, enthusiasm, and endearing personality of the late Dr Ker. In the retiral of Miss Thomas, for many years Matron of the Hospital, another familiar and well-loved figure left us. I should like to express my appreciation of her very kind and willing co-operation, which was of such material assistance in enabling me to pick up the administrative reins.

During the year, there were admitted 4281 patients, excluding 158 admissions to the Tuberculosis Wards. In the above total are included cases from districts outside the City boundaries. The greatest number treated in hospital on any one day was 667, and the average daily number under treatment was 498. It is interesting to note the growth of hospital activities within the past twenty years. The late Dr Ker, in his report for the year 1905, the second complete year after the opening of the Hospital, stated that the total number of patients admitted to hospital was 2629, the greatest number treated in hospital on any one day was 364, and the average daily number under treatment was 282.

The general health of the staff was satisfactory. As regards infectious diseases, 5 nurses contracted Diphtheria and 15 Scarlet Fever. The systematic immunisation of the Nursing Staff against Diphtheria, initiated in the year 1922, is being continued, with very satisfactory results. Of the five nurses who contracted the disease last year, one had been proved susceptible, but had not yet been immunised, three developed Diphtheria within six weeks of completion of the immunising course, whilst only one case developed the disease, in a very mild form, one year after immunisation. I am pleased to record that all five recovered.

The following Table gives the incidence of Diphtheria and Scarlet Fever among the Nursing Staff during the past six years :—

Year.	Total Nursing Staff.	Number of Cases in Nursing Staff of	
		Diphtheria.	Scarlet Fever.
1920	148	10 = 6·75 per cent.	14 = 9·46 per cent.
1921	146	14 = 9·58 ,,	15 = 10·27 ,,
1922	147	13 = 8·84 ,,	9 = 6·12 ,,
1923	137	5 = 3·65 ,,	6 = 4·38 ,,
1924	128	4 = 3·12 ,,	11 = 8·59 ,,
1925	161	5 = 3·10 ,,	15 = 9·31 ,,

Active immunisation against Diphtheria was commenced in September 1922. There is little doubt that the very satisfactory diminution in the incidence of Diphtheria is due to the systematic application of the Schick Test, and the subsequent active immunisation of the susceptibles. Owing to the fact that immunity may take several months to develop, the complete eradication of the disease is almost impossible, unless steps are taken to immunise the nurses some six months before taking up hospital duties.

That 15 nurses contracted Scarlet Fever is a matter of concern, even though all made a satisfactory recovery. During the latter half of the year, a serious endeavour was made to diminish the incidence of this disease. By the application of the Dick Test, those of the staff susceptible to Scarlet Fever were ascertained. Active immunisation of the susceptibles was then attempted. It is yet too early to estimate the results.

During the year, 33 nurses completed their three years' training, and 23 of these left to take general training in various hospitals. Of the remaining ten, seven have taken up staff nurses' posts in this or other Fever Hospitals, and one has followed out Child Welfare Work. All passed the final examination of the Scottish Board of Health or the State Examination.

There were 243 students attended clinics at the Hospital. These were divided into seven sections, entailing 84 teaching hours. In addition, one class was held for candidates for the Diploma of Public Health, and was attended by 14 graduates. The 72 hours' instruction required for this course entail two hours on each of three mornings weekly. Including lectures to the Nursing Staff, 174 hours were devoted to teaching during the course of the year. The new regulations for the Diploma of Public Health have apparently caused a marked diminution in the number of candidates. There were only 14 graduates attended the course last year, as against 60 in 1924 and 40 in 1923.

It is reassuring to note that the relatively high mortality from Scarlet Fever experienced in 1923, which caused the late Dr Ker to sound a note of alarm, showed a downward trend in 1924, and a still further diminution last year. We still had a sprinkling of genuine toxic cases admitted during the year, amounting to 12 in all.

I have to thank Dr Robertson, the Medical Officer of Health, for the installation of two Mercury Vapour Lamps. There will be a useful field for the Ultra-Violet Rays in the treatment of many of our Measles and Whooping Cough cases, where one has to combat not only the acute infection, but such concurrent conditions as Rickets, Glandular Tuberculosis, Marasmus, and Debility due to various causes. I have already had some encouraging therapeutic results.

Dr W. T. Gardiner, our Otologist, has rendered invaluable service. Apart from the shortening of detention in hospital of many Scarlet and Diphtheria patients, for which he is responsible, his early skilled treatment has been of great advantage to the patients themselves. During the year he has performed 157 operations, of which 28 were Mastoids and 125 for the removal of tonsils and adenoids.

I have to express our indebtedness to the Consulting Physician, Dr Alexander James, for much helpful advice. A word of praise is due to Dr Alexander Joe, who, as Senior Medical Officer, carried the burden of the Hospital on his shoulders during the stress of Dr Ker's illness, and for the succeeding two months acted as Medical Superintendent. It is with pleasure that I record my appreciation of the good work done by the Senior Medical Officer, Dr G. W. Simpson. In addition to his duties as Bacteriologist, Dr Simpson has been of great assistance in carrying out the measures necessary for the active immunisation of the Nursing Staff against Diphtheria and Scarlet Fever. The other assistant medical officers carried out their duties in an efficient manner.

The Matron, Sisters, and Nursing Staff have, as usual, carried out their onerous duties quietly and thoroughly. To the Matron, Miss Poole, who took over the reins of office from Miss Thomas in September, and to the whole Nursing Staff, I should like to express my deep appreciation of their loyal support.

The excellent work of the Steward is reflected in the hospital accounts. I must also thank the respective officials responsible for the kitchen, laundry, and dispensary for their careful administration.

I append the usual reports relating to the various infectious diseases treated in the Hospital.

I have the honour to be,

Sir,

Your obedient Servant,

W. T. BENSON,
B.Sc., M.D., D.P.H., D.T.M. & H.

ENTERIC FEVER.

Of 40 notified cases of Enteric Fever admitted to the Wards, 27 were found to be suffering from the disease. Of these, 12 were due to infection with the bacillus Typhosus, whilst 15 cases were harbouring the bacillus Paratyphosus B.

One patient, suffering from Paratyphosus B. infection, died as a result of intestinal hæmorrhage. This patient had apparently developed the disease whilst convalescing, from an operation for a perforated appendix. The fatality-rate for all Enteric cases was 3·7 per cent. Four patients, three of them cases of Typhosus infection, suffered from hæmorrhage; the fourth was the fatal case of Paratyphoid, noted above.

Table showing age and sex of Enteric Fever patients :—

Age-period in years		0-5 yrs.	5-10 yrs.	10-15 yrs.	15-20 yrs.	20-30 yrs.	30-40 yrs.	40-50 yrs.	50-60 yrs.	Totals.
Recovered	Males	...	1	3	1	1	1	...	...	7
	Females	...	2	1	1	6	3	3	3	19
Died	Males	...	...	...	...	...	...	...	...	...
	Females	...	...	...	...	1	...	...	...	1
Totals		...	3	4	2	8	4	3	3	27

Hospital death-rate, 3·7 per cent.

DIPHTHERIA.

Of 1145 patients admitted to the Wards, 845 were finally diagnosed as true Diphtheria. Of the remainder, 150 were "carriers," 135 suffered from one or other of the following diseases, Tonsillitis, Laryngitis, Broncho-pneumonia, or Bronchitis, and the rest from various other conditions. There were 67 deaths ascribed to Diphtheria. The percentage mortality was 7·93, as against 9·11 for the year 1924 and 8·3 for 1923. The mortality of the 81 Laryngeal cases was 23·5 per cent. Twenty-eight Laryngeal cases were intubated, of whom 7, or 25 per cent., died. Tracheotomy was performed in 13 cases, of whom 8 died.

The paralysis rate was 8·2 per cent. Whilst much lower than the rate for the previous year, namely 13·2 per cent., the above figure still exceeds the rates of 6·2 per cent., 4·8 per cent., and 5·2 per cent. for the years 1921, 1922, and 1923 respectively. Rashes, the result of serum injections, were noted in 93 cases, or 11·0 per cent. of the cases treated.

Table showing age and sex of Diphtheria patients :—

Age-period in years		0-1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	15-20 yrs.	20-30 yrs.	30-40 yrs.	40-50 yrs.	50-60 yrs.	60-70 yrs.	Totals.
Recovered	Males	2	17	28	30	29	117	40	18	14	8	6	1	...	310
	Females	2	19	36	27	26	151	68	44	62	21	9	3	...	468
Died	Males	5	6	5	5	5	9	1	1	...	...	...	...	1	38
	Females	3	7	2	2	5	7	2	...	...	...	...	...	1	29
Totals		12	49	71	64	65	284	111	63	76	29	15	4	2	845

Hospital death-rate, 7·93 per cent.

Whilst the case mortality of Diphtheria has responded in a very satisfactory manner to antitoxin therapy, we are still faced with death-rates varying from 6 to 9 per cent. from year to year. Could we but get our patients earlier under treatment,

the mortality-rate might still be materially lowered. The difficulties in the way seem to be insuperable, and we must look for other lines of attack. In the application of the Schick Test, and subsequent active immunisation of the susceptibles with toxin antitoxin mixture, we have a powerful weapon to hand. The late Dr Ker, in his Annual Report for the year 1923, wrote very favourably of the above methods, and recommended the adoption of an extensive scheme of immunisation. After more than two years' experience of the application of the Schick Test, and immunisation with toxin antitoxin mixture, among the school children of Edinburgh, I am greatly impressed with the value of these protective measures. Following out the subsequent Diphtheria history of many thousands of Schick-tested children has proved the test to be a reliable index of susceptibility or immunity to Diphtheria. The injection of several thousand susceptible children with toxin antitoxin mixture has not been attended by any untoward results, and there is little reason to doubt that in a very high percentage of treated children an effective immunity is developed within six to nine months of completed treatment.

SCARLET FEVER.

During the year, 2082 cases were admitted to the Wards. This total has been exceeded on only one occasion in the past ten years, namely, in the year 1921, when there were 2162 admissions. Of the 2082 cases, 1906 were ultimately diagnosed as Scarlet Fever, whilst of the remaining 176, various forms of Tonsillitis or Erythema accounted for the majority. The number of deaths totalled 60, giving a case mortality-rate of 3·14 per cent. This figure compares favourably with the fatality-rates of the years 1923 and 1924, which were 5·2 and 4·18 per cent. respectively. It is reassuring to note the downward trend, which seems to indicate a gradual return to the very mild type of the disease which was prevalent previous to the year 1923. The occurrence of 12 toxic cases and 53 septic cases accounted for 44 deaths, 10 in the former group and 34 in the latter.

The principal complications are noted below :—

Late Adenitis . .	397	cases, or	20·8 per cent.
Rhinitis . . .	260	,,	13·6 ,,
Ottorrhœa . . .	203	,,	10·6 ,,
Arthritis . . .	95	,,	5·0 ,,
Nephritis . . .	86	,,	4·5 ,,

Table showing age and sex of Scarlet Fever patients :—

Age-period in years		0-1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	15-20 yrs.	20-30 yrs.	30-40 yrs.	40-50 yrs.	50-60 yrs.	60-70 yrs.	Totals.
Recovered	Males	2	20	46	61	74	273	149	78	56	15	5	1	...	780
	Females	3	15	37	71	80	369	253	113	91	21	10	2	1	1066
Died	Males	1	5	7	6	5	9	...	1	1	...	...	...	...	35
	Females	1	5	3	1	1	4	3	1	3	3	...	...	...	25
Totals		7	45	93	139	160	655	405	193	151	39	15	3	1	1906

Hospital death-rate, 3·14 per cent.

In the Annual Report for the year 1923, the late Dr Ker suggested that a prolonged trial be given to the short detention of Scarlet Fever convalescents in hospital. During the past year, clean cases have been discharged any time after the 28th day of disease. It is interesting to note that there were 52 alleged infecting cases, or 2·81 per cent. of the total number of Scarlet Fever patients discharged. The 52 alleged infecting cases were apparently responsible for 60 return cases, which gives a return case rate of 3·14 per cent. The percentage of infecting cases, namely 2·81, compares very favourably not only with the corresponding figures of 4·24 and 4·0 per cent. for the years 1924 and 1923 respectively, but also with the figure of 3·7 per cent.

obtained during the War period, when patients were detained in hospital for a minimum of six weeks. This result seems to indicate that, as far as infectivity is concerned, there is no necessity for clean cases to be detained in hospital beyond the 28th day of disease.

During the year, a considerable amount of work has been carried out in an endeavour to estimate the value of the Dick Test. The results so far obtained are promising.

RESULTS OF DICK TEST.

Age-period in years.	Total Cases other than Scarlet.	Positive.	Negative.	Percentage of Positive Reactions.
0-½	17	2	15	...
½-1	45	17	28	37·7
1-2	130	71	59	54·6
2-3	164	99	65	60·3
3-4	152	92	60	60·5
4-5	137	89	48	65·0
5-10	511	283	228	55·4
10-15	226	96	130	42·5
15-20	183	55	128	30·0
20-30	237	76	161	32·1
30-40	50	15	35	30·0
40-50	19	4	15	21·0
50-60	8	...	8	...
Totals .	1879	899	980	47·8

I have had the opportunity of treating a moderate number of selected cases with Scarlet Fever Antitoxin, and have been very favourably impressed with its therapeutic value.

As already indicated, active immunisation against Scarlet Fever has been attempted. It is yet too soon to speak of its efficacy.

ERYSIPELAS.

Of 122 patients admitted to the Wards notified as Erysipelas, 87 were actually suffering from the disease. Of the remaining 35 cases, Cellulitis accounted for 13, and various inflammatory conditions of the skin for the rest. The case mortality was 9·19 per cent. In 81 out of the 87 cases the inflammation primarily affected the face. Of the patients treated, 14 had suffered from previous attacks, whilst in 4 cases one relapse or more occurred.

Table showing age and sex of Erysipelas patients :—

Age-period in years . .	0-5 years.	5-10 years.	10-20 years.	20-30 years.	30-40 years.	40-50 years.	50-60 years.	60-70 years.	Over 70 years.	Totals.
Recovered { Males . .	2	...	1	1	3	7	10	6	2	32
Recovered { Females .	1	...	6	5	10	12	9	1	3	47
Died { Males . .	...	...	...	...	...	...	1	...	1	2
Died { Females .	1	...	1	...	...	1	...	3	...	6
Totals . .	4	...	8	6	13	20	20	10	6	87

Hospital death-rate, 9·19 per cent.

MEASLES.

In all, 317 patients were admitted to the Wards. Of these, 292 were suffering from Measles, 13 were cases of Rubella, 9 of Erythema, 2 of Scarlet Fever, and 1 of Whooping Cough.

The fatality-rate, 16·1 per cent., is once again what might be called a hospital rate, and is accounted for by the selection of particularly severe or complicated cases

for hospital treatment. Out of the 47 deaths which occurred, 39 were due to Broncho-pneumonia.

The more important complications which occurred are as under:—

Broncho-pneumonia	.	107 cases, or 36·6 per cent.	
Otitis	.	34 ,,	11·9 ,,
Enteritis	.	13 ,,	4·4 ,,
Adenitis	.	12 ,,	4·1 ,,
Laryngitis	.	5 ,,	1·7 ,,

Table showing age and sex of Measles patients :—

Age-period in years	0–1 yr.	1–2 yrs.	2–3 yrs.	3–4 yrs.	4–5 yrs.	5–10 yrs.	10–15 yrs.	15–20 yrs.	20–30 yrs.	30–40 yrs.	Over 40yrs	Totals.
Recovered Males	13	15	18	11	22	16	5	1	17	1	1	120
Recovered Females	8	14	21	8	13	16	11	4	22	4	4	125
Died Males	8	9	2	...	...	1	...	...	...	...	...	20
Died Females	8	11	5	2	...	1	...	...	...	...	...	27
Totals	37	49	46	21	35	34	16	5	39	5	5	292

Hospital death-rate, 16·1 per cent.

RUBELLA.

Table showing age and sex of Rubella patients :—

Age-period in years	0–5 years.	5–10 years.	10–15 years.	15–20 years.	20–30 years.	Totals.
Recovered Males	...	...	1	1	6	8
Recovered Females	1	...	...	2	2	5
Totals	1	...	1	3	8	13

WHOOPING COUGH.

The number of Whooping Cough patients admitted to hospital for treatment has fluctuated considerably from year to year, but shows a definite increase in the past two years. The number of cases treated in the Wards in each successive year from 1921 has been 141, 206, 117, 227, and last year 296. The case mortality was once again very high, 27·16 per cent. This is not to be wondered at when we consider the class of case that comes under our care

The principal complications were as follows :—

Broncho-pneumonia	.	166 cases, or 56·1 per cent.	
Convulsions	.	42 ,,	14·2 ,,
Enteritis	.	22 ,,	7·4 ,,
Otitis	.	15 ,,	5·1 ,,
Prolapse of Rectum	.	2 ,,	0·7 ,,

Table showing age and sex of Whooping Cough patients :—

Age-period in years	0–1 year.	1–2 years.	2–3 years.	3–4 years.	4–5 years.	5–10 years.	10–15 years.	Over 15 years.	Totals.
Recovered Males	19	17	26	15	9	10	2	2	100
Recovered Females	13	26	22	24	6	19	2	3	115
Died Males	15	20	4	5	2	2	...	...	48
Died Females	11	13	4	3	1	1	...	...	33
Totals	58	76	56	47	18	32	4	5	296

Hospital death-rate, 27·16 per cent.

CEREBRO-SPINAL MENINGITIS.

Eighteen suspected cases were admitted, and of these, 7 proved to be Cerebro-spinal Meningitis. Three patients were suffering from Pneumococcal Meningitis, and 1 from Tubercular Meningitis. Of the remainder, 3 were diagnosed as Influenza, 3 as Pneumonia, and 1 as Encephalitis Lethargica.

Of the 7 Meningococcal cases, 5 died. On analysing the very high mortality-rate, we find that 2 patients entered hospital in a moribund condition, and a fatal termination ensued within 24 hours of admission. Two other cases in whom the attack terminated fatally had been ill 8 and 11 days respectively before admission to hospital. Just as in Diphtheria, early serum treatment is of the utmost importance, and with each day of delay the patient's chance of recovery diminishes.

Table showing age and sex of Cerebro-spinal Meningitis patients :—

Age-period in years	0-1 year.	1-5 years.	5-10 years.	10-15 years.	15-20 years.	20-30 years.	Totals.
Recovered { Males	...	...	...	...	...	1	1
Recovered { Females	...	1	...	...	...	...	1
Died { Males	...	1	1	...	...	...	2
Died { Females	2	...	...	...	...	1	3
Totals	2	2	1	...	...	2	7

Hospital death-rate, 71·43 per cent.

CHICKENPOX.

During the year, 87 patients were admitted suffering from Chickenpox. There were 6 deaths, but in no instance could death be reasonably ascribed to the Chickenpox infection, some pre-existing disease proving fatal in every case.

One case, admitted to hospital as suspected Smallpox, was in reality suffering from Chickenpox.

Table showing age and sex of Chickenpox patients :—

Age-period in years	0-1 year.	1-2 years.	2-3 years.	3-4 years.	4-5 years.	5-10 years.	10-15 years.	15-20 years.	20-30 years.	30-40 years.	Totals.
Males	3	8	10	2	5	12	1	...	1	1	43
Females	6	7	7	1	7	14	1	1	...	...	44
Totals	9	15	17	3	12	26	2	1	1	1	87

OTHER DISEASES.

There were 40 cases admitted to hospital as Influenza and Pneumonia. The diagnosis was confirmed in 36 cases, of whom 11 died, giving a case mortality-rate of 30·5 per cent. One case notified as Influenza and Pneumonia was found to be suffering from Acute Lymphatic Leukæmia.

Out of 20 cases admitted to the Wards as Puerperal Fever, 16 were actually suffering from the disease. There were 6 deaths.

Mumps accounted for 18 admissions to hospital. The diagnosis was confirmed in 16 cases. The average detention in hospital of cases of Mumps was 15 days.

Seven cases of Encephalitis Lethargica were treated in the Wards, of whom 3 died. Two cases notified as Encephalitis Lethargica were found not to be suffering from the disease.

One interesting case of Vaccinia was admitted on the suspicion that it might be the more serious infection.

The following Table contains a summary of the Laboratory Examinations at the City Hospital by the Medical Staff during the year 1925 :—

	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Examinations for Diphtheria :—													
Total Examinations . .	684	730	705	638	572	635	414	361	356	436	587	506	6624
Positive . . .	*223*	*361*	*251*	*226*	*221*	*235*	*115*	*81*	*62*	*107*	*103*	*99*	*2084*
Negative . . .	*461*	*369*	*454*	*412*	*351*	*400*	*299*	*280*	*294*	*329*	*484*	*407*	*4540*
Examinations of Blood for Widal Reaction :—													
Total Examinations . .	...	5	6	...	...	7	2	1	5	6	3	4	39
Positive . . .	...	*5*	*6*	...	...	*7*	*1*	*1*	*2*	*4*	*1*	*1*	*28*
Negative . . .	...	...	...	...	...	...	*1*	...	*3*	*2*	*2*	*3*	*11*
Examinations of C.S. Fluid for Meningococci :—													
Total Examinations . .	2	...	13	...	6	...	2	2	4	...	...	2	31
Positive . . .	...	...	*12*	...	...	...	*2*	...	...	...	...	...	*14*
Negative . . .	*2*	...	*1*	...	*6*	...	...	*2*	*4*	...	...	*2*	*17*
Examinations of Sputum for Bacillus Tuberculosis :—													
Total Examinations . .	29	16	30	27	32	26	43	40	54	44	38	56	435
Positive . . .	*23*	*12*	*25*	*19*	*19*	*16*	*31*	*36*	*36*	*34*	*25*	*41*	*317*
Negative . . .	*6*	*4*	*5*	*8*	*13*	*10*	*12*	*4*	*18*	*10*	*13*	*15*	*118*
Miscellaneous	18	11	6	4	27	20	10	12	21	21	35	9	194
Totals . . .	733	762	760	669	637	688	471	416	440	507	663	577	7323

VENEREAL DISEASES.

The following Report in regard to the Venereal Diseases Scheme has been prepared by the Clinical Medical Officer :—

I have the honour to submit to you a report of the work carried out under the Venereal Diseases Scheme during the year 1925.

Under the scheme, provision is made for the examination and treatment of adult males and adult females and children of both sexes in the Royal Infirmary, Edinburgh ; for adult females and children in the Edinburgh Hospital for Women and Children ; for pregnant women in the Ante-natal Department of the Royal Maternity Hospital ; and for women and children in the Subsidiary Clinic attached to the Royal Infirmary, and in several of the Dispensaries throughout the town.

In the course of the year, 4428 new patients were examined, the numbers reporting at the various centres being as follows :— New Patients.

	Men.	Women and Children.	Total.
Royal Infirmary	2346	656	3002
Subsidiary Clinic	...	140	140
Bruntsfield Hospital and Dispensaries .	...	464	464
Royal Maternity Hospital . . .	...	822	822
Total .	2346	2082	4428

These figures represent new cases only. During the year, treatment of those who had not previously completed their course was continued. The estimated number of such patients is about 4000, making the total cases under treatment during the year over 8000.

A very considerable number of these patients, on account of the severity of their illness, required bed accommodation. The following figures give an indication of the numbers admitted to each of the hospitals where beds are available :— In-Patients.

	Men.	Women and Children.	Total.
Royal Infirmary	254	101	355
Subsidiary Hospital	...	118	118
Bruntsfield Hospital	...	140	140
Royal Maternity Hospital . . .	...	333	333
Total .	254	692	946

If we exclude the cases in the Royal Maternity Hospital, some 16 per cent. of all the cases are found to require in-patient treatment.

Attention has been drawn in previous reports to the need for further in-patient accommodation, and to the assistance which it would undoubtedly give in treating many cases. Some further provision should therefore be made to extend the bed accommodation available for male and female patients, and especially that for married women and children. In the treatment of females, particularly those suffering from gonococcal infection, three or four weeks' in-patient treatment is of much more value than three or four months' attendance as out-patients, and gives better results in the end.

Out-Patient Attendances.

The system of treating the larger number of cases as out-patients has been continued; the number of attendances at the various hospitals during the year having been as follows:—

Royal Infirmary, Males	88,404
,, ,, Females	17,987
Subsidiary Clinic	1,821
Bruntsfield Hospital and Dispensaries	4,925
Royal Maternity Hospital	1,736

The aggregate total of attendances is thus 114,873; 88,404 being by males and 26,469 by women and children. In this latter figure it should be noted that male children under 12 years of age are included as well as female children.

Comparative Figures.

The progressive increase in the amount of work carried out under the scheme can be appreciated by a study of the following figures which represent the yearly attendances since the Edinburgh scheme was inaugurated:—

Year.	New Patients.	Attendances.
1919 . . .	2117	13,200
1920 . . .	3383	73,032
1921 . . .	3409	93,503
1922 . . .	3250	95,383
1923 . . .	3579	92,912
1924 . . .	3861	106,456
1925 . . .	4428	114,873

The attainment of these satisfactory figures is very encouraging and reflects the confidence which the patients have in the nursing and medical staff. The 88,404 visits paid by male patients at the Royal Infirmary meant an average of 275 treatments per day, while in the female department of the Royal Infirmary the 17,987 attendances entailed an average of 68 treatments per day. The number of visits paid by each individual patient varies, and an effort is always made by the medical staff to see each individual patient at least once weekly, and in many of the acute cases much more frequently. It is undoubtedly the close personal touch with the patient and the interest in his or her case which stimulates the sufferer to continue treatment over long periods.

Stages of Disease at which Patients reported.

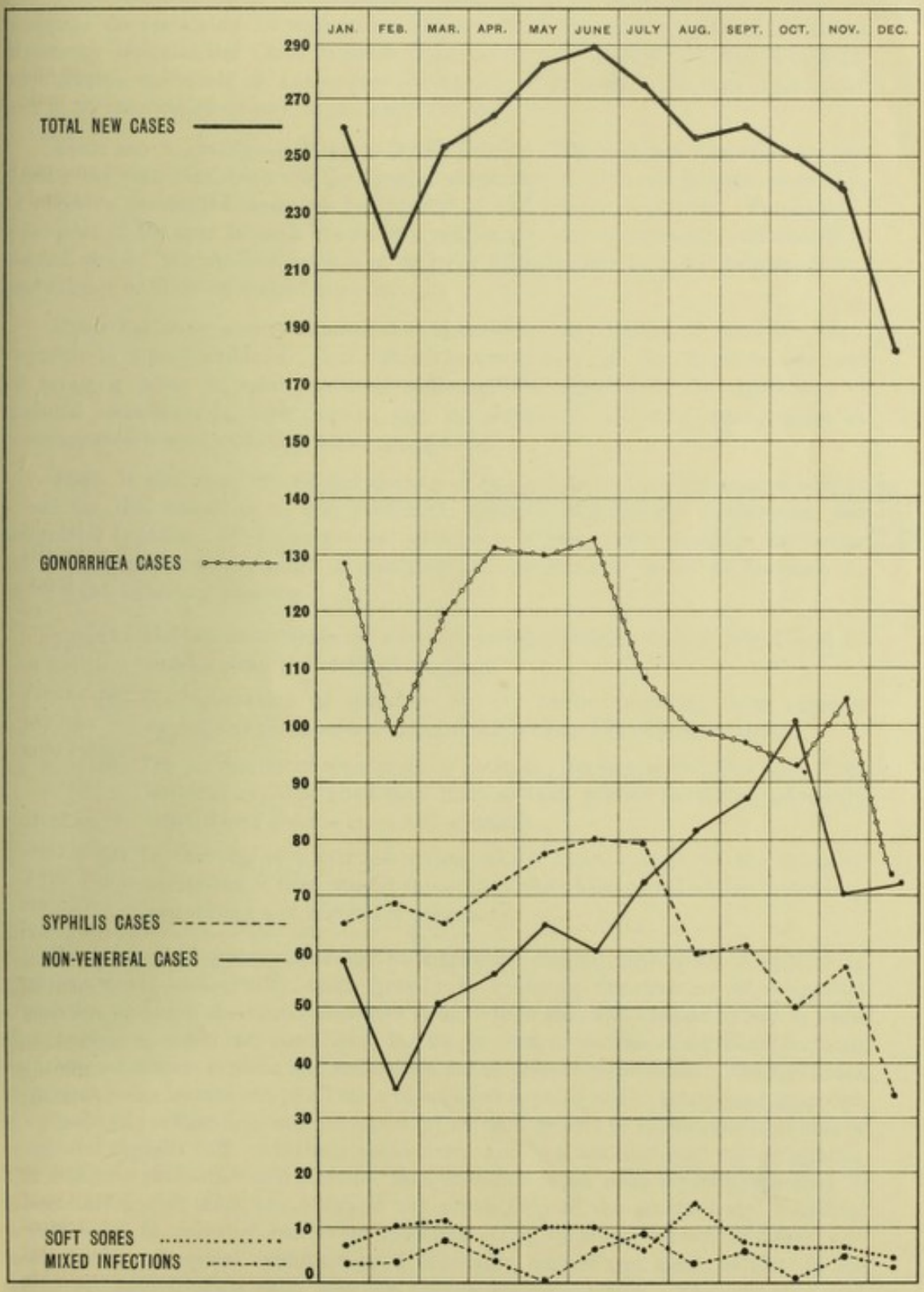
There continues to be a marked improvement in the willingness of patients to report for treatment at an earlier stage of their disease than was formerly the case. Of all patients suffering from syphilis seen in the Royal Infirmary, 21 per cent. reported and were put under treatment before the Wassermann test had become positive; 26 per cent. had a primary sore and positive Wassermann; 9 per cent. had generalised syphilis such as rash and sore throat; 30 per cent. showed late syphilitic lesions such as gummata and visceral syphilis; while 10 per cent. had involvement of the central nervous system when first seen. In the case of patients suffering from gonorrhœa, about 20 per cent. were seen before the condition had given rise to complications. We are still, however, far from the ideal when every patient suffering from either syphilis or gonorrhœa will come to hospital and be under active treatment within a few days of the condition manifesting itself.

Decrease in the number of cases of Syphilis.

Of the new patients attending during the past year there is some slight diminution in the number of cases of syphilis, and undoubtedly more efficient results are being obtained from the point of view of preventive medicine in syphilis than in gonorrhœa. There are two reasons for this:—(1) the patient thinks more seriously of syphilis and consults a doctor more readily regarding it; and (2) the therapeutic measures available for the treatment and cure of syphilis are much more reliable and efficient than any at present available for gonorrhœa.

COMPARATIVE INCIDENCE OF TYPES OF VENEREAL DISEASE

(ROYAL INFIRMARY VENEREAL DISEASES CLINIC)



Congenital Syphilis.

Of all patients suffering from syphilis, 372 were the result of the inherited or congenital form, the larger number of these having been sent from the ophthalmological departments of the Royal Infirmary. It is impossible to over-emphasise the value of co-operation between the two departments, together with the very valuable assistance obtained from those in charge of the Eye Department in diagnosing specific cases and in observing the effect of treatment.

Ophthalmia Neonatorum.

There were 25 cases of ophthalmia neonatorum, of which 10 were treated in hospital; the remaining 15 were under observation by the nursing staffs of the Royal Maternity Hospital and Child Welfare Department. In addition to this, 5 patients were treated on behalf of Authorities outwith the City Area. All cases were cured and in no case was there any impairment of vision.

There was a gratifying decrease in the number of ophthalmia neonatorum cases during the past year, but even the figures quoted should, with our present knowledge of effective preventive measures, be capable of still further reduction. Prophylactic treatment of the eyes at birth should be a routine at every confinement, and should be carried out by the medical attendant or by a skilled nurse, and not delegated to a probationer or other untrained attendant.

Vulvo-Vaginitis.

There has been a very considerable increase in the number of cases of vulvo-vaginitis in young children. It is difficult to account for this, but it proves the need of bringing home to adult patients suffering from gonorrhœa the importance of personal cleanliness in their homes, and the danger of infecting young girls by contaminated towels, clothing, baths, sponges, &c.

Need for Education of the Public on these conditions.

There is also need for the information of the public on these matters, as well as a call for the education of the profession regarding ophthalmia neonatorum and congenital syphilis. With our present knowledge of preventive medicine the former can be stamped out; to assist in stamping out the latter it would be necessary to enforce the following measures:—

(1) The intensive treatment of every patient suffering from acquired syphilis until a clean bill of health is given.

(2) The prevention of marriage by any patient suffering from acquired syphilis until effectively treated and a clean bill of health granted.

(3) The prevention of conception in patients already married who suffer from acquired syphilis, until such time as both parties have been efficiently treated and given a clean bill of health.

(4) In the case of a married woman who is already pregnant, the intensive treatment of that patient throughout the whole period of her pregnancy and during any successive pregnancy.

While these suggestions savour of eugenism, eugenic principles, if applied to syphilis, would undoubtedly assist greatly in reducing the number of congenital syphilitics, and such preventive measures as have been stated, if applied to both syphilis and gonorrhœa, would very soon lessen the 50 per cent. of inmates of our Blind Asylums for whose admission syphilis and gonorrhœa are at present responsible. The treatment at present being carried out in all cases of acquired syphilis and in gonococcal infections is undoubtedly influencing, and will in the future tend greatly to reduce, the incidence of congenital syphilis and ophthalmia neonatorum, and to a less degree of vulvo-vaginitis. The measures outlined would exercise that influence much more rapidly, especially if, in association with them, one obtained the active help of the general body of medical practitioners in carrying out these measures. The apparently healthy father and mother of a congenital syphilitic child invariably require treatment, as also do the father and mother of the child who has ophthalmia neonatorum. The control of such cases would not bear hardly on the individual adult, and would enable preventive medicine to exercise its full effect in averting many cases of severe and disabling illness.

Bacteriological and Serological Work.

In any department dealing with venereal disease efficient methods of diagnosis are essential, and the Edinburgh clinic is fortunate in having associated with it in its work the laboratory of the Royal Infirmary, where, under the charge of Dr Logan, a very large amount of valuable bacteriological investigation is carried out. Not only is laboratory work of value in diagnosis, but it enables one to control the effect of treatment and is of great value in testing for cure.

Dr Logan and his staff of three assistants have carried out during the year 34,713 investigations in connection with patients attending the Infirmary clinic. In addition, the services of the department have been available to practitioners and other hospitals in the areas served by the scheme, and during the year 5457 specimens have been submitted for reports from these sources, bringing the total number of specimens examined for venereal diseases up to 40,170. It is impossible to over-estimate the value of the very reliable laboratory work carried out by this staff, and the very great asset which it is to the Edinburgh scheme for the treatment of veneral diseases. If one takes the single instance of the examination of the cerebro-spinal fluid in syphilis, close on 700 specimens have been examined by Dr Logan and his staff during the year, and reports not only on the serology of it, but also on the cytology and various pathological conditions present in it, have been made, enabling the clinical worker to make an accurate diagnosis in obscure cases, and to give as far as possible a certain diagnosis of cure at the end of treatment.

Methods of Treatment.

There have been few changes in the methods of treatment of gonococcal infection during the past year, and local antiseptic therapy is still employed in practically all cases. In addition, protein and vaccine therapy have been utilised, and some new intravenous remedies have given promising results in the complications of gonococcal infection. A large amount of instrumental and electro-therapy has also been employed in treating the more chronic cases.

In syphilis, Salvarsan, Bismuth, and Mercury are still the main drugs in use. Of these drugs some 37,656 injections have been given by either the intramuscular or intravenous method. Salvarsan is still the most potent drug which we have in the treatment of syphilis; Bismuth is probably next to it in potency, and is more effective than Mercury. In all recent infections Arsenic and Bismuth are given in combination, and the latter drug is found to be well tolerated and proves an efficient substitute for the more potent arsenical drugs in those cases in which the latter are not well tolerated. During the year a new arsenical drug, Tryparsamide, has been tried in cases of syphilitic infection of the central nervous system. This drug, more than any other, exercises a special influence on such cases, and as far as one can judge at present in the 80 cases in which it has been exhibited, the remedy is well tolerated and exercises a very beneficial influence not only on the clinical condition, but on the pathological nature of the cerebro-spinal fluid. If the initial results obtained by this drug prove lasting, it certainly will mark a very big advance in the treatment of early cases of meningo-vascular syphilis and early cases of general paralysis of the insane. In the Infirmary clinic an attempt is being made by routine examination of the cerebro-spinal fluid in every case of syphilis, to diagnose such cases at an early stage and before the infection has given rise to gross symptoms and signs of disease. In cases diagnosed at this early stage, Tryparsamide is proving a most valuable addition to the therapy of syphilis.

Effects of Treatment.

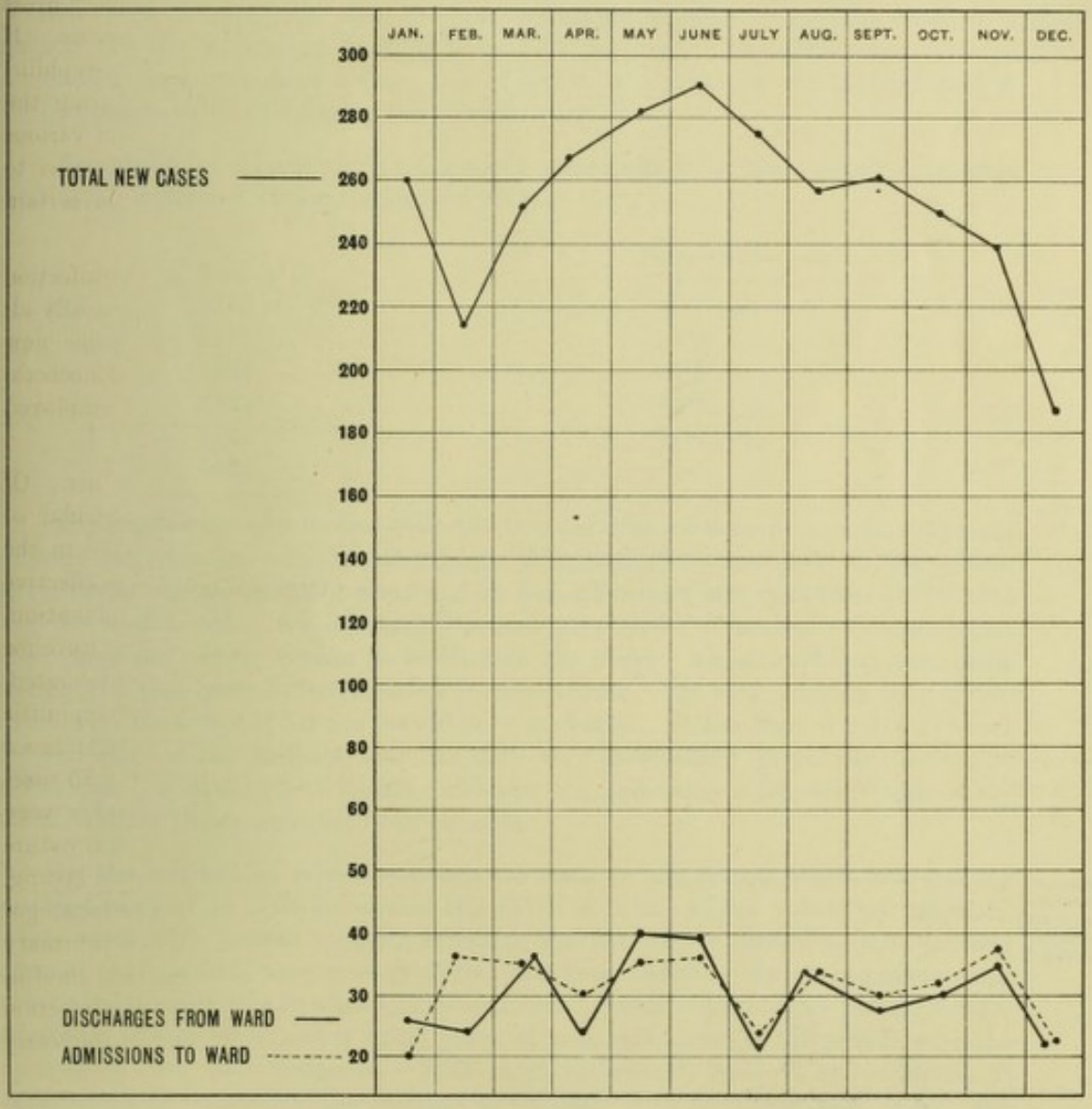
As a result of the treatment administered in the clinic during the year, 1858 patients were discharged from hospital after undergoing stringent tests of cure; 947 patients were transferred to other clinics, while there are still under active treatment over 5000 cases.

Standard of Cure.

In all cases discharged from hospital the rigid standards mentioned in my last report have been adhered to, and little difficulty has been experienced in getting the large percentage of patients to continue treatment until they were considered cured by the medical staff. The attainment of such results is largely due to the confidence which the patient has in those who are treating him, and in practically all cases this is

NUMBER OF NEW PATIENTS AND PROPORTION REQUIRING IN-PATIENT TREATMENT

(ROYAL INFIRMARY VENEREAL DISEASES CLINIC)



attained by impressing on the patient at successive visits that the condition is curable if he or she will persevere with the treatment. It is found, in addition, that it is better to leave as little treatment as possible to the patient himself or herself. Intramuscular medication, for example, of Bismuth or Mercury is much to be preferred to oral medication in that the patient is kept in constant touch with his or her attendant, while it also ensures certainty of dosage and the early observation of any signs of intolerance. Undoubtedly the satisfactory percentage figure of attendances in the Edinburgh clinic is partly due to this method; at the same time, the system adopted in the clinic of dealing with the patients on the same lines as ordinary medical or surgical cases, and not as social outcasts, appeals to the patient, produces the proper atmosphere in the department, and prompts continuity of treatment.

Percentage continuing at treatment until considered cured.

During the year under review the number of patients who ceased treatment before they were considered cured was 1062; this shows a slight increase in the number from the previous year, but considering the number of patients handled, a decrease in the percentage from 11·9 to 11·3 per cent. The percentage of those continuing treatment until a clean bill of health was given by the medical staff is 88·7 as compared to 88·1 during the previous year.

The appended figures show the gradual improvement in the number of patients continuing treatment during the last six years.

Year.	Percentage continuing at treatment.
1920	60·0 per cent.
1921	74·0 ,,
1922	81·5 ,,
1923	84·4 ,,
1924	88·1 ,,
1925	88·7 ,,

The problem of how to deal with the 11·3 per cent. of defaulters is an extremely difficult one, when one considers that in the Edinburgh clinic quite half of that number are patients who are partially cured and do not suffer from any symptoms or feel that they are in ill-health. An appreciable number also consist of seamen who must rejoin their ships and cannot remain in touch with the clinic. An attempt has been made during the past year by confidential correspondence with such patients to get into touch with them, but it has not proved very successful. It has been of value in about 30 per cent. of the patients, and has only very occasionally given rise to familial difficulties. In dealing with female defaulters the assistance in follow-up work by the Child Welfare Department has been valuable.

Treatment of Innocent Infections in Women and Children.

In the last annual report reference was made to the success which followed the establishment of 24 beds for women and children in one of the subsidiary hospitals, where cases were treated without labelling the patients as sufferers from venereal disease; 141 patients were treated during the year under review as in-patients and subsequently continued to attend as out-patients. There is a continual waiting list for admission of such cases, and it would prove of great advantage to the scheme were the number of such beds increased. With cases so treated, little if any difficulty is experienced in persuading the patients to continue with treatment until cured, and very little difficulty is experienced in cases of ophthalmia neonatorum and neonatal syphilis in getting the mother to come into hospital and to submit to treatment while the child is being dealt with. In view of the large increase in the number of patients who attended the clinic at the Ante-natal Department of the Royal Maternity Hospital, 822 as compared with 275 in the previous year, and the follow-up treatment which is essential in all such cases after delivery and after they leave the Maternity Hospital, there is all the more need for considering in the immediate future an extension of the number of beds for dealing with innocently infected mothers and children.

After two years' experience in handling infected married women and children along these lines, one can unhesitatingly say that the experiment has been more than successful and has more than justified the expenditure entailed.

I have attached to my report tables giving a statement of the work carried out in the various centres, as well as charts which show the seasonal incidence, the attendance rate, the incidence of the various types of infection, and the pecentage figure of the cases which required in-patient hospital treatment. As will be seen from these charts, the amount of work has shown a slight increase in all departments, and is a tribute to the whole-hearted co-operation which one has received from a keen and willing staff. Throughout the year I have had from my medical, nursing, and clerical staff every assistance in dealing with this very large number of infected patients.

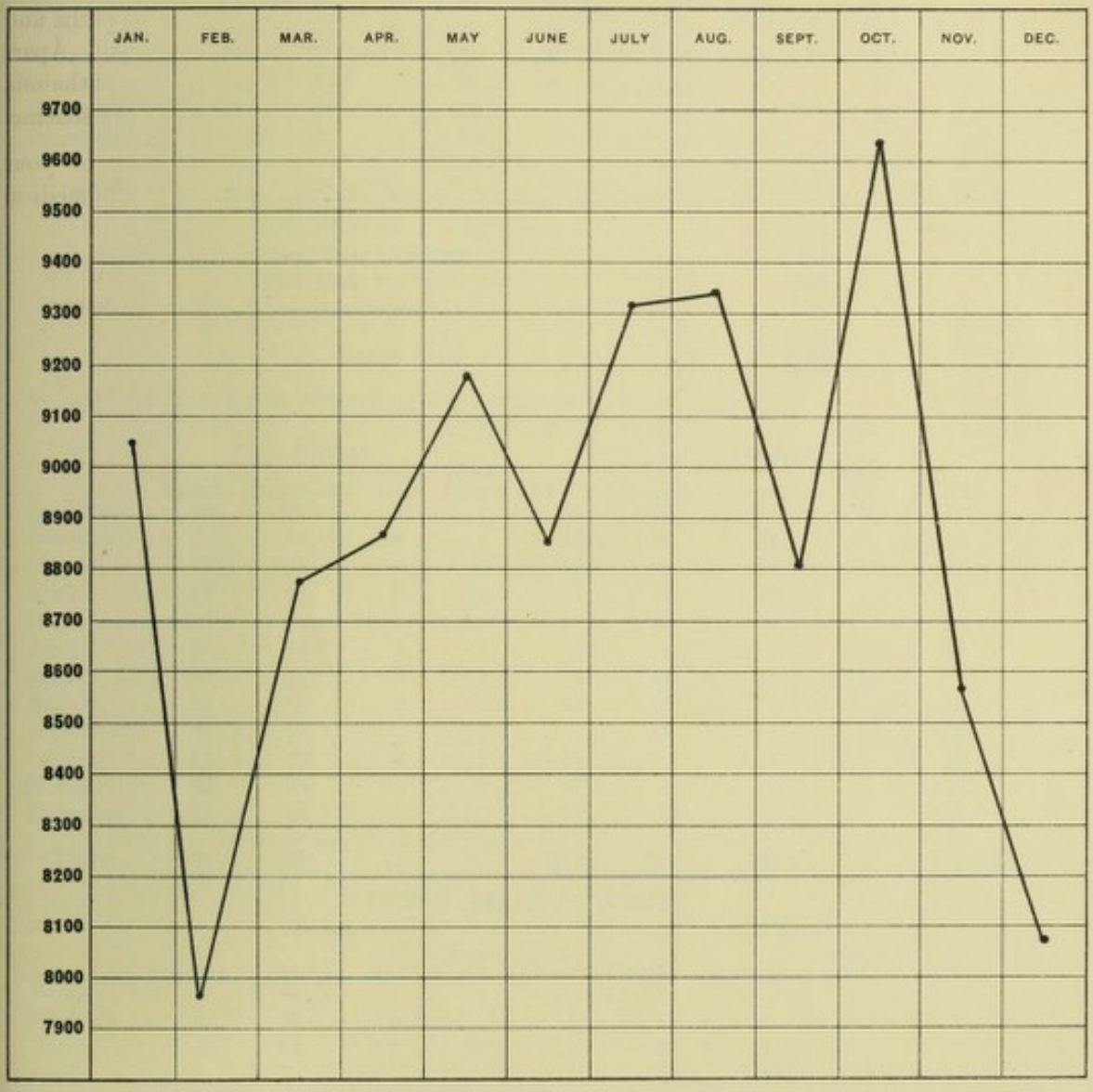
The amount of money spent on the work is undoubtedly large, but the end results obtained from the efficient treatment of venereal diseases repay, and will continue to repay, the Public Health Authority in the lessening of the after-effects of syphilis and gonorrhœa and in the attainment of a much more healthy race of children. Apart from acquired disease, the end results obtained in the eye conditions due to ophthalmia neonatorum and congenital syphilis alone would justify the expenditure on the scheme.

In presenting this report I should like you to bring to the notice of your Committee the loyal and able support which I have had in my work from the medical and lay staffs in the various departments under my charge.

DAVID LEES, D.S.O., M.A., M.B., F.R.C.S.(E.),
Clinical Medical Officer, Edinburgh Corporation Venereal Diseases Scheme.

CHART SHOWING MONTHLY ATTENDANCES

(ROYAL INFIRMARY VENEREAL DISEASES CLINIC)



EDINBURGH CORPORATION VENEREAL DISEASES SCHEME.

ROYAL INFIRMARY CLINIC.

REPORT FOR THE YEAR ENDING 31ST DECEMBER 1925.

Number of New Cases Attending :—

	EDINBURGH.		OTHER AREAS IN SCHEME.		OTHER AREAS OUTSIDE SCHEME.		AREAS OUTSIDE SCOTLAND.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
January . . .	154	44	32	3	15	8	4	..
February . .	111	39	27	6	16	2	11	2
March . . .	148	42	26	8	19	6	4	..
April . . .	142	58	28	10	19	5	5	..
May	166	50	25	7	26	6	2	..
June	149	42	23	9	26	7	2	1
July	162	47	23	9	24	6	4	..
August . . .	143	36	33	10	23	9	3	
September . .	158	41	26	5	25	2	4	..
October . . .	154	39	21	13	16	2	5	..
November . .	135	36	28	5	23	7	5	..
December . .	119	27	20	4	11	3	1	..
Totals . .	1741	501=2242	312	89=401	243	63=306	50	3=53

EDINBURGH	2242
Other Areas in Scheme	401
Other Areas outside Scheme	306
Areas outside Scotland	53
Grand Total	3002

Of the New Cases Attending there were :—

EDINBURGH.

	MALES.					FEMALES.			
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.
January . .	29	75	4	1	45	16	27	1	..
February .	25	52	6	1	27	23	14	1	1
March . .	18	76	10	5	39	21	20	1	..
April. . .	17	80	5	4	36	32	22	..	4
May . . .	38	84	7	..	37	22	14	..	14
June . . .	29	74	3	1	42	15	9	..	18
July . . .	30	71	5	3	53	24	16	3	4
August . .	21	69	9	1	43	16	5	..	15
September .	28	67	7	2	54	19	6	1	15
October . .	25	63	6	1	59	15	8	..	16
November .	26	65	5	2	37	9	9	..	18
December .	21	51	4	2	41	8	6	..	13
Totals .	307	827	71	23	513	220	156	7	118=2242

OTHER AREAS IN SCHEME.

	MALES.					FEMALES.			
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.
January . .	7	14	1	..	10	3	..	..	..
February .	1	22	3	..	1	5	1	..	..
March . .	5	11	1	..	9	5	3	..	..
April. . .	7	13	..	..	8	7	3	..	..
May . . .	2	14	3	..	6	3	4	..	..
June . . .	3	13	1	..	6	2	1	..	6
July . . .	6	11	..	1	5	7	1	1	..
August . .	5	12	2	..	14	4	5	..	1
September .	5	9	1	1	10	3	1	..	1
October . .	3	8	..	..	10	3	3	..	7
November .	8	15	..	..	5	1	3	..	1
December .	2	12	..	..	6	1	2	..	1
Totals .	54	154	12	2	90	44	27	1	17=401

OTHER AREAS OUTSIDE SCHEME.

	Males.					Females.				
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.	
January	4	7	1	..	3	5	3	..	..	
February	8	3	1	..	4	1	1	..	..	
March	10	7	..	2	..	5	1	..	..	
April	3	8	..	..	8	4	1	..	..	
May	10	9	..	1	6	2	3	..	1	
June	9	9	4	..	4	2	..	..	5	
July	6	8	1	..	9	5	..	1	..	
August	8	6	2	2	5	4	1	..	4	
September	4	12	1	2	6	1	..	..	1	
October	3	7	..	..	6	..	1	..	1	
November	9	7	..	1	6	3	2	..	2	
December	1	1	..	..	9	1	1	..	1	
Totals	75	84	10	8	66	33	14	1	15	=306

AREAS OUTSIDE SCOTLAND.

	Males.					Females.				
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.	
January	1	3	..	..	..	..	..	..	..	
February	3	5	..	1	2	2	..	..	..	
March	1	1	..	..	2	..	..	..	..	
April	1	4	..	..	..	..	..	..	..	
May	..	2	..	..	..	..	..	..	..	
June	..	..	1	.	1	1	..	..	..	
July	1	1	..	..	.	..	..	..	..	
August	1	1	1	..	..	..	..	..	..	
September	1	2	..	1	..	..	..	..	..	
October	..	3	..	..	2	..	..	..	..	
November	..	3	1	..	1	..	..	..	..	
December	..	..	..	..	1	..	..	..	..	
Totals	9	25	3	2	11	3	..	..	..	=53
Grand Total	445	1090	96	35	680	300	197	9	150	
			2346					656		
					3002					

AGE PERIODS.

	Males.					Females.			
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.
Under 1 yr.	..	..	..	..	..	26	..	..	10
1-5 yrs.	1	..	..	..	..	26	1	..	22
5-15 yrs.	21	2	..	..	11	42	6	..	23
15-25 yrs.	67	327	39	5	181	59	90	3	34
25 yrs. up	356	761	57	30	488	147	100	6	61
Totals	445	1090	96	35	680	300	197	9	150

Admissions to Hospital :—

	Males.					Females.			
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.
Edinburgh	47	56	5	8	5	24	29	3	1
Other Areas in Scheme	18	30	3	1	3	7	9	..	..
Areas outside Scheme	32	31	..	4	5	16	9	..	..
Areas outside Scotland	1	4	1	..	..	3	..	..	..
Totals	98	121	9	13	13	50	47	3	1

Grand Total—Males 254
Females 101
Total 355

Discharges from Hospital :—

	Males.					Females.			
	Syphilis.	Gonorrhœa.	Soft Sore.	Mixed Inf.	No V.D.	Syphilis.	Gonorrhœa.	Mixed Inf.	No V.D.
Edinburgh	43	54	3	6	2	21	28	3	3
Other Areas in Scheme	19	34	3	3	7	7	7	..	..
Areas outside Scheme	36	27	1	1	4	17	5	..	1
Areas outside Scotland	1	5	1	..	..	2	..	..	..
	99	120	8	10	13	47	40	3	4

Totals—Males 250
Females 94
Total 344

SPECIAL TREATMENT ADMINISTERED.

Number of Intravenous and Intramuscular Injections given :—

	Neokharsivan.			
	·15	·3	·45	·6
January	10	212	136	90
February	37	348	134	56
March	46	423	162	63
April	40	367	153	24
May	35	372	210	31
June	52	315	159	52
July	31	285	194	84
August	30	342	188	48
September	37	302	208	54
October	51	359	235	29
November	41	309	200	28
December	34	379	192	33
	444	4013	2171	592=7220

	Sulfarsenol.								
	6	12	18	24	30	36	42	48	54
January	7	46	31	53	19	22	7	11	6
February	14	47	30	65	20	30	14	10	5
March	10	55	60	70	15	28	9	22	7
April	24	51	52	68	22	28	14	3	..
May	9	60	60	65	20	48	9	25	..
June	14	53	82	87	36	52	3	7	..
July	13	39	80	96	34	54	2	5	..
August	23	43	63	82	36	49	3	10	..
September	10	44	72	60	33	61	16	36	..
October	5	64	85	74	25	54	1	19	..
November	6	45	68	68	15	34	8	12	..
December	7	35	71	93	22	29	10	2	..
	142	582	754	881	297	489	96	162	18=3421

	Bismuth.						Other Drugs.	
	·1	·15	·2	·3	·4	·45	·5	·6	
January	..	106	35	807	..	527	..	..	521
February	..	134	36	770	..	415	..	..	345
March	..	131	87	899	..	454	..	..	329
April	..	106	69	846	..	464	..	..	254
May	..	100	49	849	..	557	..	..	305
June	3	94	52	793	..	507	..	..	359
July	2	69	74	693	..	676	10	..	371
August	..	54	65	812	..	606	..	..	423
September	..	61	67	706	..	638	..	..	449
October	..	63	61	946	..	621	..	..	483
November	..	49	57	786	..	626	..	..	347
December	14	35	62	638	686	..	45	25	260
	19	1002	714	9545	686	6091	55	25=18,137	4446

Totals—Neokharsivan	7,220
Sulfarsenol	3,421
Bismuth	18,137
Other Drugs	4,446
Grand Total	33,224

PATHOLOGICAL WORK.

Number of Specimens examined:—

	Wass.	Sigma.	C.S.F.	G.C.F.T.	D.Gs.	Smears.	Others.	Total.
January	940	128	49	226	80	1,286	11	2,720
February	748	105	49	151	69	1,257	12	2,391
March	774	135	46	168	85	1,228	21	2,457
April	708	120	61	195	68	1,176	13	2,341
May	820	143	50	179	150	1,316	18	2,676
June	969	153	67	164	85	1,249	18	2,705
July	953	231	60	161	91	1,569	12	3,077
August	742	2	77	164	95	1,316	9	2,405
September	856	91	59	176	100	1,236	10	2,528
October	792	168	43	139	82	1,128	12	2,364
November	749	223	46	140	93	1,008	15	2,274
December	709	181	39	120	69	1,153	13	2,284
	9,760	1,680	646	1,983	1,067	14,922	164	30,222

Total Attendances at the Clinic for Routine Dressings, etc.:—

			Daily Average.	
	Males.	Females.	Total.	Males.	Females
January	7,734	1,318	9,052	270	70
February	6,664	1,313	7,977	250	72
March	7,178	1,589	8,767	267	72
April	7,258	1,608	8,866	268	73
May	7,678	1,506	9,184	273	70
June	7,316	1,529	8,845	260	70
July	7,856	1,460	9,316	280	67
August	7,641	1,680	9,321	272	73
September	7,282	1,526	8,808	268	69
October	7,798	1,838	9,636	272	75
November	7,153	1,418	8,571	256	60
December	6,846	1,202	8,048	225	55
	88,404	17,987	106,391	265	68

DAVID LEES, D.S.O., M.A., M.B., F.R.C.S.(E.),
Clinical Medical Officer, Edinburgh Corporation V.D. Scheme.

OTHER TREATMENT CENTRES IN EDINBURGH.

1. Subsidiary Centre for Royal Infirmary.

Number of New Cases	140
Syphilis. 90 — Gonorrhœa. 36 — Mixed Infection. .. — No. V.D. 14 =140	
Number of Patients treated in Hospital	118
Total Attendances of Out-patients	1821
Pathological work—Number of specimens examined	1515
Special Treatment administered—Number of Injections given	2980

2. Hospital for Women and Children and Subsidiary Centres.

Number of New Cases					464
Syphilis.	Gonorrhœa.	Mixed Infection.	No. V.D.		
103	184	9	168	=464	
Number of Patients treated in Hospital					140
Total Attendances of Out-patients					4925
Pathological Work—Number of specimens examined					1203
Special Treatment administered—Number of Injections given					852

3. Royal Maternity Hospital.

Number of New Cases					822
Syphilis.	Gonorrhœa.	Mixed Infection.	No. V.D.		
212	448	27	135	=822	
Number of Patients treated in Hospital					333
Total Attendances of Out-patients					1736
Pathological Work—Number of Specimens examined					1773
Special Treatment administered—Number of Injections given					600

PORT MEDICAL INSPECTION.

The following report in connection with the Port Medical Inspection has been prepared by Dr Joe, Assistant Medical Officer of Health, who is in charge of this branch of the Department's work :—

I have the honour to present the Report of the work in connection with the Port Medical Inspection for the year.

The Port of Leith is one of the principal shipping centres on the East Coast with a constant trade between the Baltic and other Continental ports. In addition, there is a certain amount of incoming shipping from North America, India, and the Mediterranean, the latter consisting chiefly of grain vessels from North Africa. The following Table shows at a glance the chief trading ports coming under these headings :—

North America.	India.	Mediterranean.
New York.	Rangoon.	Alexandria.
Philadelphia.	Calcutta.	Tunis.
Portland.	Bombay.	Oran.
Baltimore.	Karachi.	Cyprus.
Montreal.		

The following Table shows the number and tonnage of vessels entering the Port Sanitary District during the year :—

	Number.	Tonnage.	Number Inspected by Assistant Medical Officer of Health.
Foreign :—			
Steamers	1,557	1,456,937	90
Sailing	9	2,896	1
Motor	8	16,681	...
Total—Foreign	1,574	1,476,514	91
Coastwise :—			
Steamers	4,358	1,171,296	1
Sailing	39	5,001	...
Motor	20	10,488	...
Fishing	3,921	278,099	...
Total—Coastwise	8,338	1,464,884	1

The chief import during the year was grain, of which 293,767 tons were unloaded at the Docks. From a hygienic standpoint the discharging of grain cargoes, especially those coming from the African ports, presents a difficult problem, as the labourers engaged in the holds, and in the vicinity of the hatches, work in an atmosphere of dust which must have a decidedly harmful effect on the respiratory apparatus, and certainly renders work for long periods in these places impossible. The dust consists partly of fine desert sand and is partly derived from the grain itself, so that it would appear impossible to eliminate it from the cargoes. The only solution of the problem would therefore be to discharge these cargoes by mechanical methods; but I understand that even with the best plants human labour cannot entirely be dispensed with, and furthermore there are certain disadvantages from the economic aspect.

The principal export was coal, of which nearly 1½ million tons were shipped during the period under review.

In the following statement particulars are given regarding cases of illness reported from vessels arriving at the Port and the subsequent precautions taken :—

Date	Name of Vessel.	Where from.	Nature of Sickness.	Disposal of Case.	Remarks.
Feb. 20	"Matharan"	Calcutta	Smallpox	Landed at Aden	Disinfection and Vaccination carried out at Aden
,, 24	"Stakesby"	Bombay	Venereal Disease (1 case)	Admitted to Royal Infirmary	...
March 2	"Quaker City"	Norfolk, U.S.A.	Acute Appendix	Landed at London	...
,, 3	"Corsica"	Hamburg	Diphtheria	Removed to City Hospital	Disinfection carried out
,, 14	"Mandasor"	Calcutta	Malaria	Landed at London	...
,, 23	"Carl Beath"	Bo'ness	Mumps	Removed to City Hospital	...
April 27	"Anitra"	Antofagasta	Venereal Disease (1 case)	Directed to Treatment Centre	...
May 5	"Lady Charlotte"	Karachi	No Disease	...	Two Stowaways examined
,, 9	"Corsica"	Hamburg	Measles	Removed to City Hospital	Disinfection carried out
,, 18	"Romeo"	Bombay	Enteric Fever	,,	,,
Aug. 1	"Arcadia"	London	Chickenpox	,,	,,

It will be noted that the number of cases of imported infection is small and presented no administrative difficulties.

During the year, 1187 alien passengers arrived at the Port and of these 53 were medically examined at the request of H.M. Alien Immigration Officer.

Resident Returning (R.R.)	In Transit (I.T.)	Visitor on Holiday, Tourists, &c. (V.)	Business Visitor (B.V.)	Diplomats and persons on Foreign Government Mission (D.P.)	Seamen (S.)	Seamen under contract to join ship in British waters (C.S.)	Ministry of Labour Permit (M.L.)	Aliens coming to settle not holding M.L. permit	Transmigrant West Bound
83	389	395	172	1	2	72	25	34	14

The above classification of the alien arrivals has been kindly supplied by the Immigration Officer who has co-operated most helpfully in all matters pertaining to his branch.

I have the honour to be,

Sir,

Your obedient Servant,

ALEX. JOE, D.S.C., M.D.

DISINFECTION.

During the year, disinfection was carried out in 6361 Dwelling-houses, in which 7523 separate apartments were sprayed with formaldehyde.

In this Table, particulars as to the number of Dwelling-houses disinfected during the last three years are given :—

	1923.		1924.		1925.	
	Number.	Apartments.	Number.	Apartments.	Number.	Apartments.
Dwelling-houses, etc. :—						
After Tuberculous Disease	819	963	1,065	1,186	1,189	1,424
„ other „	4,767	5,306	4,863	5,868	5,172	6,099

In course of the year the undernoted articles were removed from houses where infectious disease had occurred. These articles were treated at the Disinfection Station under high pressure steam or by formaldehyde gas.

Description.	No. of Articles.		Description.	No. of Articles.	
	After Tuberculous Disease.	After Other Diseases.		After Tuberculous Disease.	After Other Diseases.
Mattresses and Palliasses ...	1,347	2,224	Body Clothes	1,322	15,153
Blankets, Sheets, Quilts, etc.	4,484	11,848	Carpets and Rugs ...	5	602
Beds, Pillows, Bolsters, etc.	2,918	3,189	Miscellaneous	350	1,041
Curtains, Table Covers, Wraps, etc.	56	152	Destroyed by request	414	233
Table Napery, Toilet Covers, Towels, etc.	176	882	Totals ...	11,072	35,324

RECEPTION HOUSE.

The Reception House was not required for quarantine purposes during the year.

DISINFECTION STATION.

During the year, 868 persons attended at the Disinfection Station for the purpose of receiving cleansing baths and having their clothing disinfected. Of these, 253 adults and 337 children were suffering from Scabies, while 242 adults and 36 children were in a verminous condition.

INTERMENTS.

(In terms of Section 69, Public Health (Scotland) Act, 1897.)

Application for assistance to meet the expenses of burial was made in 72 instances. These were carefully inquired into in order to ascertain the circumstances of the applicants.

As a result of the inquiries, 22 applications were withdrawn, and 5 of the deceased persons were found to have been in receipt of an allowance from the Parish Council Authorities who were therefore responsible for the carrying out of the burial.

The funerals of the remaining 45 persons were provided for at the expense of the Local Authority.

The following Table shows the expenditure incurred in connection with the removal of bodies to the Mortuary and subsequent interments since 1914 :—

Year.	Number.	Total Cost of Interments and Removals.	Sums Recovered from Relatives.	Net Expenditure.
1914	101	£126 0 0	£5 1 3	£120 18 9
1915	71	128 13 0	10 5 11	118 7 1
1916	61	132 6 0	23 8 6	108 17 6
1917	61	141 6 0	16 6 8	124 19 4
1918	72	201 6 6	14 1 0	187 5 6
1919	63	177 12 0	33 8 9	144 3 3
1920	39	124 7 0	7 18 0	116 9 0
1921	54	190 2 6	26 19 2	163 3 4
1922	52	164 7 6	6 7 6	158 0 0
1923	51	168 18 6	9 10 0	159 8 6
1924	57	188 5 0	9 13 9	178 11 3
1925	45	151 0 0	11 8 0	139 12 0

CITY MORTUARY.

Particulars are given in the accompanying Table regarding the number of bodies removed to the Mortuary :—

Year.	Number.		
	Males.	Females.	Total.
1914	98	52	150
1915	96	51	147
1916	112	41	153
1917	90	55	145
1918	74	40	114
1919	82	44	126
1920	68	46	114
1921	104	42	146
1922	103	37	140
1923	113	64	177
1924	76	46	122
1925	120	51	171

BACTERIOLOGICAL EXAMINATIONS AT USHER INSTITUTE.

The following Table shows the number of specimens submitted for Bacteriological examination, and reported on by the Usher Institute of Public Health under agreement with the University Authorities :—

	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
For Tubercle :—													
Number of Examinations .	85	84	79	87	101	66	60	62	62	65	77	64	892
Positive . . .	*13*	*14*	*12*	*14*	*9*	*14*	*15*	*7*	*14*	*9*	*12*	*7*	*140*
Negative . . .	*72*	*70*	*67*	*73*	*92*	*52*	*45*	*55*	*48*	*56*	*65*	*57*	*752*
For Enteric :—													
Number of Examinations .	3	9	8	5	3	11	3	8	5	7	1	1	64
Positive . . .	...	*1*	...	*1*	...	...	...	...	...	*1*	...	...	*3*
Negative . . .	*5*	*6*	*5*	*4*	*3*	*10*	*3*	*8*	*4*	*5*	*1*	*1*	*53*
Suspicious . . .	...	*2*	*3*	...	...	*1*	...	...	*1*	*1*	...	...	*8*
For Diphtheria :—													
Number of Examinations .	500	532	720	408	406	413	456	391	352	555	569	510	5812
Positive . . .	*61*	*59*	*70*	*52*	*35*	*40*	*57*	*38*	*33*	*42*	*65*	*49*	*601*
Negative . . .	*439*	*473*	*650*	*356*	*371*	*373*	*399*	*353*	*319*	*513*	*504*	*461*	*5211*
Other Specimens :—													
Negative . . .	*6*	*8*	...	...	...	*3*	*2*	...	...	*1*	*1*	*2*	*23*
											Total	-	6791

HOSPITAL EXPENDITURE.

The following Table shows the cost per occupied bed per annum in Colinton Mains Hospital during the last twelve years. The particulars apply in each case to the financial year to 15th May, and are based on the gross ordinary expenditure.

Year to 15th May.	Daily Average Number of Occupied Beds.	* Cost of Food.	† Cost of Maintenance.	Total Cost of Occupied Bed per annum.
1914	469	£21 12 6	£44 0 8	£65 13 2
1915	596	21 0 0	34 9 9	55 9 9
1916	557	24 8 11	36 15 9	61 4 8
1917	497	31 16 0	43 1 10	74 17 10
1918	471	37 14 8	47 10 9	85 5 5
1919	521	40 1 0	55 2 2	95 3 2
1920	585	39 10 4	59 0 0	98 10 4
1921	543	44 5 10	79 4 10	123 10 8
1922	538	32 11 5	74 3 6	106 14 11
1923	472	26 19 4	72 15 10	99 15 2
1924	397	30 17 5	86 3 2	117 0 7
1925	519	25 10 1	70 0 2	95 10 3

* Includes food for Staff.
† Includes salaries, heating, lighting, upkeep of buildings and grounds, taxes, etc.

The expenditure for provisions is detailed below :—

Butcher Meat	£2,387 2 1
Fish, Fowls, etc.	1,338 4 2
Butter, Cheese, and Bacon	1,265 3 7
Eggs	920 10 1
Groceries	1,762 6 4
* Milk	3,456 1 3
Bread	1,309 4 3
Oatmeal and Flour	169 9 11
Potatoes and Vegetables	444 5 9
Aerated Waters, etc.	84 7 0
	£13,136 14 5

* The total quantity was 42,285 gallons, an average of 116 gallons per day, equal to 1¾ pints per head per day.

The total cost of stimulants for the year amounted to £178, 7s. 4d., as against £127, 0s. 6d. in 1924, and was expended as follows :—

Diphtheria Patients	£65 10 2
Scarlet Fever Patients	33 17 6
Whooping Cough „	27 13 10
Measles Patients	33 14 0
Enteric „	3 18 0
Phthisis „	6 12 0
Erysipelas „	3 16 4
Other Diseases	3 5 6
	£178 7 4

The cost of serum during the year amounted to £887, 17s. 5d.

PILTON HOSPITAL AND ROYAL VICTORIA HOSPITAL.

Cost per Occupied Bed—Year to 15th May 1925.

	Daily Average Number of Occupied Beds.	* Cost of Food.	†Cost of Maintenance.	Total Cost of Occupied Bed per annum.
Pilton Hospital	116	£33 16 2	£73 3 10	£107 0 0
Royal Victoria Hospital	77	31 9 11	73 8 8	104 18 7

* Includes food for Staff.
† Includes salaries, heating, lighting, upkeep of buildings and grounds, taxes, etc.

PUBLIC HEALTH EXPENDITURE.

1908-1925.

Year.		Gross Expenditure.	Revenue.	Net Expenditure.
1907-8		£34,295	£601	£33,694
1908-9		34,218	690	33,528
1909-10		35,159	699	34,459
1910-11		34,869	718	34,150
1911-12		35,072	780	34,291
1912-13	T.B. Scheme begun.	37,618	2,690	34,927
1913-14		46,094	14,548	31,546
1914-15		56,768	18,716	38,051
1915-16		56,827	12,997	43,829
1916-17	C.W. Scheme begun.	58,323	23,216	35,107
1917-18		75,198	30,552	44,645
1918-19	V.D. Scheme begun.	99,563	43,029	56,533
1919-20		130,877	49,138	81,738
1920-21	Amalgamation with Leith.	210,875	89,098	121,777
1921-22		184,315	68,450	115,865
1922-23		146,395	67,477	78,917
1923-24		149,873	47,554	102,319
1924-25		156,155	48,949	107,206

WORKSHOPS AND BAKEHOUSES.

The year 1925 so far as industries are concerned may be described as a period of dullness, although not of acute depression. None the less, amidst all the turmoil and instability of the industrial situation at the moment, it is to be hoped that better times will emerge for both workers and employers. It is satisfactory to be able to state that steady and continued improvement in the sanitary conditions of factories and workshops has been accomplished during the year under review, and reference to the Tables appended will convey some idea of the direction in which working conditions are safeguarded. One of the greatest industrial advances of recent years has been the improvement in actual working conditions. The observant visitor to many factories and workshops, large and small, cannot fail to be struck with the efforts that are being made to attain hygienic perfection. It is as well to state, however, that there is still room for further improvement, and the following notes are offered as practical suggestions for the maintenance of health in the workshop :—

CLEANLINESS.

The principal consideration in workshop hygiene is cleanliness. It is a paying proposition, because a worker can do better work, and more of it, in a thoroughly clean, well-ordered workshop than in one that is dirty and disorderly. Due attention should be given at all times to keeping not only the walls of the building, but workbenches, floors, windows, &c., in a perfectly clean condition.

VENTILATION and TEMPERATURE.

Adequate ventilation should be regarded as an absolute necessity. Transom lights, hopper windows, casements, and sashes should never be allowed to fall into disrepair or go out of action, as is often found on inspection being made. Stoves should be provided with efficient hoods and flues to carry off the products of combustion. The provision of a thermometer is desirable. It is a simple instrument and easy to read. Where heavy physical work is carried on, an average temperature of about 55 F. is good, and for light and sedentary work, one of about 64 F.

LIGHTING.

Good lighting makes for good work, and often can be greatly improved. Sometimes the angle at which the light falls on the work is important. The beneficial effects to be obtained from natural light are often overlooked. It is remarkable that much money is frequently spent on artificial illumination and no consideration given to daylight. Employers spend large sums of money on artificial lighting and grudge a few pounds expenditure on putting in a window or skylight which would give better conditions and improve the output throughout the whole day.

SPACING OF THE WORKERS.

Few workrooms are arranged so as to minimise the possibility of infection passing from one worker to another. The minimum floor space needed for the work is the standard adopted, without regard to spacing out the workers. A scheme which places them in rows, elbow to elbow, and facing each other on opposite sides of narrow tables or benches, lends itself to the transmission of infection. This can only be avoided by giving workers plenty of elbow-room and by not placing them face to face. Parsimony in floor space often means parsimony in health. While nothing can quite make up for insufficiency of floor space, something can always be done to minimise infection by spacing and by efficient ventilation.

SANITARY ACCOMMODATION.

Good sanitary equipment should be provided. The individual water-closet of first-class type and quality proves the most economical. There should be 6 to 10 inches of open space at the bottom of the partitions to permit of thorough cleansing or hosing of the floors. Urinals are fittings to be used with caution, and where used, should be of good construction and flushed at regular intervals.

WASHING FACILITIES.

The provision of washing accommodation for workers has greatly increased in recent years, but much still remains to be done in this direction Such appliances should be placed in a convenient place, so that the employees may be encouraged to wash before their meals and before leaving work.

DRINKING WATER.

In all factories and workshops in which 25 or more persons are employed, a supply of wholesome drinking water must be provided. The supply must be clearly marked "Drinking Water." The common drinking cup should in such cases be avoided. In large places, sanitary bubbling fountains should be installed.

DEVELOPMENTS IN THE BAKING TRADE.

Early in 1925, a small underground bakehouse was discovered to have become occupied and the premises had not been sanctioned as suitable by the Local Authority. This, of course, was a case of illegal occupation of an Underground Bakehouse. The premises were found to be unsatisfactory, and great deterioration of the building had taken place. The occupier was immediately requested to vacate the bakehouse, and this was done without recourse to further action.

A feature in regard to Underground Bakehouses which warrants mention is the tendency of the baking trade to be controlled by the larger firms. These firms supply their branch shops throughout the City from large central factories. This has resulted in the closing of a number of underground bakehouses. The branch shop in many cases has an underground bakehouse below the sales shop, but with the requirements of the firm being met from their central factory, there is no necessity to use the small bakehouse at each branch. Seven Underground Bakehouses were closed on account of this and similar conditions during the year under review.

A notable development in the baking trade during the year was the erection of a large factory bakehouse on modern lines in the centre of the City. This bakery is built in the form of a square, the buildings on three sides being four storeys high. The main structure measures 244 feet long by 225 feet deep. The framework is of steel and the external walls of terra-cotta pressed brick. The bakery is of simple design externally, but dignified and imposing. It is designed and equipped for the purpose of baking bread under ideal conditions, to the entire exclusion of smalls, pastries, and cakes. Highly specialised plant has been installed, and the whole of the machinery is electrically driven. All the ovens are heated by steam pipes, the fuel used being oil, which is stored in underground tanks situated outside the building, from which it is pumped to control tanks adjacent to the various ovens. The whole of the interior walls are of glazed brick or tile, and all window frames are of steel. Bathrooms, as well as ample lavatory accommodation, have been provided for the operatives, and there are also dining-rooms and dressing-rooms. The output of the new bakery is stated to be approximately half a million 2-lb. loaves per week. The premises form one of the largest and most up-to-date factories of the kind in the United Kingdom.

Total Number of Inspections to Factories and Workshops	1766
Number of Notices served	126
Complaints received from H.M. Inspector, as remediable under the Public Health Act, but not under the Factory Act	32
Matters referred to H.M. Inspector for his attention	2
Complaints *re* Sanitary Accommodation (Factories and Workshops), Intimations received by Local Authority in order that Council may have opportunity of enforcing any additional conditions under Public Health Acts. Work carried out, inspected, and reported upon	16
Number of infringements of special regulations, applicable to Bakehouses under Scottish Board of Health—(Factories and Workshops Transfer of Powers) Order, 1921	36
Miscellaneous complaints—anonymous, &c.	12
Number of Notices of Occupation of Workshops received from District Inspector of Factories	43

HOME WORK—LIST OF OUTWORKERS.

	Feb. 1925.	Aug. 1925.
Number of Lists received	33	36
Number of addresses of Outworkers in Edinburgh	94	97
Number of addresses transmitted to other Authorities	8	7
Number of addresses received from other Authorities	2	4
Actual number of Outworkers on Register	71	76

CLASSES OF WORK ENGAGED IN BY OUTWORKERS IN EDINBURGH.

(1) Making, altering, repairing, &c., of Wearing Apparel.
(2) Making up, finishing, and repairing of Table Linen, &c.
(3) Making of Cardboard or similar Boxes.
(4) Cabinet and Furniture Making and Upholstery Work.
(5) Making of Baskets.

Table showing the Inspection of Workshops and the Improvements effected.

	I. Calton.	II. Canongate.	III. Newington.	IV. Morningside.	V. Merchiston.	VI. Gorgie.	VII. Haymarket.	VIII. St Bernard's.	IX. Broughton.	X. St Stephen's.	XI. St Andrew's.	XII. St Giles.	XIII. Dalry.	XIV. George Square.	XV. St Leonard's.	XVI. Portobello.	XVII. South Leith.	XVIII. North Leith.	XIX. West Leith.	XX. Central Leith.	XXI. Liberton.	XXII. Colinton.	XXIII. Corstorphine and Cramond.	Total.
Number of Workshops on Register, 31st December 1925	59	40	49	60	58	33	115	33	66	81	231	144	33	112	48	23	48	36	15	29	13	10	20	1356
Number of Inspections made	76	4	2	4	3	...	37	34	70	24	339	192	56	159	71	34	16	7	17	13	21	6	26	1211
Workshops, or parts, found dirty—painting, limewashing, etc., effected	4	1	...	...	...	...	3	2	4	4	37	21	5	7	4	2	2	1	1	3	3	...	3	107
Water-closet apartments cleansed and limewashed	2	...	...	...	...	...	...	1	...	...	4	4	1	4	2	...	...	...	...	...	...	...	...	18
Water-closets cleansed	1	...	...	...	...	...	...	...	...	...	2	1	...	1	1	1	...	...	1	...	1	...	1	10
Adequate ventilation not maintained	...	...	...	...	...	...	...	...	2	...	...	...	...	2	...	...	...	...	...	...	...	...	...	4
Ventilation improved	...	1	...	...	...	...	...	...	...	1	2	1	1	...	...	...	...	1	...	1	...	..	...	8
Gas Stoves for heating irons and Laundry Collar Ironing Machines—ventilation provided	1	...	...	1	...	...	...	...	...	...	1	1	...	...	1	...	...	...	..	...	...	...	...	5
Overcrowding	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	2
Roofs, Walls, Ceilings, Floors and Windows—general repairs executed	2	...	...	...	...	...	...	1	3	1	3	3	1	2	2	...	...	...	...	...	...	...	...	18
Drainage and Sanitary arrangements:—																								
Sanitary Accommodation introduced	2	...	...	...	...	...	...	...	...	...	2	1	...	1	...	...	...	...	...	...	...	...	...	6
Separate Sanitary Accommodation for Sexes provided or access arranged—and Screening partitions erected for approaches	...	...	...	...	...	...	...	...	...	1	3	...	...	...	...	...	1	1	...	...	...	...	...	6
Intervening Ventilated Space provided for Water-Closets	1	...	...	...	...	...	2	2	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	6
W.C.'s, Drains, Soil Pipes, Rhones, R.W. Conductors, Flushing Cisterns, Urinals, &c.—reconstruction, repairs, and renewals effected	...	...	...	...	...	...	2	1	3	...	1	5	...	1	1	1	1	...	2	...	1	...	...	19
W.C.'s insufficiently lighted and ventilated—improvements effected	...	...	...	...	...	..	1	1	...	...	2	2	1	1	...	...	...	...	...	...	...	...	...	8
W.C. apparatus substituted, basins renewed, and insanitary water-closets removed	...	...	...	...	...	...	1	...	1	...	...	1	1	1	...	1	...	...	...	...	...	...	...	6
Defective Sinks—Earthenware Sinks substituted	...	...	...	...	...	..	...	...	...	...	...	2	1	...	...	...	...	...	...	...	...	...	...	3
Choked, Repaired, and Insanitary Sinks removed	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	2
Sinks removed to more sanitary situation	...	..	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	2
W.H. Basins introduced	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Accumulation of Refuse removed	2	...	...	...	...	...	...	...	1	...	1	1	1	...	...	...	...	...	...	...	...	...	...	6
Unsatisfactory Premises vacated	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Failure to affix Abstract of Act (Sec. 133) reported to H.M.I.	1	1	...	...	...	...	...	3	2	...	4	6	...	1	2	...	...	...	...	...	...	...	...	20
Number of Apartments measured for Cubic Capacity	...	...	2	...	...	...	7	...	...	1	14	4	...	2	..	...	...	...	...	...	...	...	...	30

Table showing the Inspection of Bakehouses and the Improvements effected.

	I. Calton.	II. Canongate.	III. Newington.	IV. Morningside.	V. Merchiston.	VI. Gorgie.	VII. Haymarket.	VIII. St Bernard's.	IX. Broughton.	X. St Stephen's.	XI. St Andrew's.	XII. St Giles.	XIII. Dalry.	XIV. George Square.	XV. St Leonard's.	XVI. Portobello.	XVII. South Leith.	XVIII. North Leith.	XIX. West Leith.	XX. Central Leith.	XXI. Liberton.	XXII. Colinton.	XXIII. Corstorphine and Cramond.	Total.
Bakehouses:—																								
On Register at beginning of year . . { Underground	4	2	3	7	6	2	3	1	3	6	8	7	6	9	7	7	4	3	...	1	...	...	...	89
{ Level	2	6	5	1	3	5	2	5	5	4	5	8	4	9	8	4	4	7	5	4	2	2	2	102
Premises occupied during the year . . { Underground	...	...	...	...	...	...	...	...	1	...	...	..	...	...	...	...	...	...	...	...	...	...	...	1
{ Level	...	...	1	...	...	...	...	...	...	...	...	1	...	...	1	1	...	...	...	...	...	...	...	4
Premises closed during the year . . { Underground	...	...	...	1	...	...	...	...	1	...	2	1	1	...	...	1	...	...	...	...	...	...	...	7
{ Level	...	...	...	...	...	...	...	...	1	...	...	3	...	1	...	...	...	...	...	...	...	...	...	5
Bakehouses on Register at 31st Dec. 1925 . { Underground	4	2	3	6	6	2	3	1	3	6	6	7	5	8	7	6	4	3	...	1	...	...	...	83
{ Level	2	6	6	1	3	5	2	5	4	4	5	5	4	9	9	5	4	7	5	4	2	2	2	101
Factories	3	2	7	6	7	6	5	5	6	4	5	7	7	8	4	6	5	6	2	5	...	2	...	108
Workshops	3	6	2	1	2	1	...	1	1	6	6	5	2	9	12	5	3	4	3	...	2	...	2	76
Premises converted into Factories during the year by the introduction of Electrical Machinery . . .	...	...	1	...	...	...	...	1	...	...	...	1	1	...	...	...	1	...	...	1	...	...	...	6
Number of Inspections made	15	19	22	20	18	15	12	18	23	23	37	33	22	48	41	31	18	23	10	15	4	4	5	476
Limewashing overdue, or not satisfactory . . .	1	2	1	2	...	3	1	2	3	2	2	2	2	4	3	1	...	2	1	...	...	1	1	36
Failure to keep Floors, Tables, Shelving, and Windows in a cleanly condition	4	2	1	1	1	2	...	1	4	2	7	4	4	4	5	5	4	5	1	2	..	...	...	59
Repairs made to Roofs, Walls, Ceilings, Floors, Windows, and Ventilators	2	1	...	2	1	1	1	2	3	1	1	...	1	4	3	...	...	...	...	3	...	1	...	27
Drains, Water Pipes, Waste Pipes, Surface Traps, etc.—choked, defective, and repaired	...	...	1	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	1	...	...	...	5
Sanitary accommodation:—																								
Dirty W.C.'s cleansed and limewashed . . .	...	...	1	...	...	...	...	...	1	1	1	1	1	...	...	...	...	...	...	...	...	...	...	6
Flushing Apparatus and Urinals repaired . . .	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	1	...	...	...	...	...	4
W.C. removed to more sanitary situation . . .	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Sinks—choked, repaired, and improved . . .	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2
Bakehouses cleared of Insects	...	...	...	...	...	...	1	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	3
Other Nuisances—Dampness remedied and Refuse accumulations, etc.	...	1	2	1	...	...	...	1	...	1	1	1	1	...	1	...	...	...	...	..	...	...	...	10
Unsatisfactory Storage of Material—liable to contamination .	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	1	...	...	...	...	...	...	...	3
Unsatisfactory Premises vacated	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	2
Extensions and Improvements to Premises . . .	...	...	2	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	1	...	...	...	5
Abstract of Factory Act not affixed (Sec. 133)—reported to H.M. Inspector	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	..	...	...	...	2

SANITARY DEPARTMENT,
PUBLIC HEALTH CHAMBERS,
JOHNSTON TERRACE,
EDINBURGH, *June* 1926.

To

The Scottish Board of Health and
The Right Honourable the Lord Provost,
Magistrates and Council of the City of Edinburgh.

MY LORD PROVOST AND GENTLEMEN,

I have the honour to present the Annual Report of the Sanitary Department of the City of Edinburgh for the year 1925.

HOUSING.

By the erection of further numbers of houses at Lochend, Gorgie, and other Corporation Housing Schemes relief has been brought to many families who were living in overcrowded, insanitary, or otherwise unsatisfactory conditions.

Although gratifying progress has been made year by year in meeting the acute shortage of housing accommodation, the end of the problem does not yet appear to be in sight. Besides those who are still in overcrowded and insanitary houses, there are hundreds of families living very uncomfortably in furnished apartments or sublet rooms who would gladly take a house for their own occupation if such were available, while others who are in houses too small for their increased requirements would willingly move to larger ones.

Amongst those accommodated at Lochend and elsewhere were a considerable number of occupiers residing in the Cowgate-Grassmarket and Leith Improvement Scheme Areas. In connection with the first mentioned scheme, which included 468 occupied houses, accommodation was found during the year for 153 tenants which, with those removed in the previous year, reduces the number of houses still in occupation to 219.

A commencement was made with the demolition of vacated tenements in this area, and at the end of the year 5 tenements had been demolished and other 11 tenements and an old common lodging-house were ready for demolition or reconstruction.

In connection with the Leith Improvement Scheme a Confirmation Order was granted by the Scottish Board of Health in July last, and no time was lost in getting a number of the tenants transferred. At the end of the year, 117 houses or about 20 per cent. of the number of those occupied had been accommodated in the new houses at Sheriff Brae and Lochend.

The occupiers transferred from these Improvement Scheme Areas greatly appreciate the vastly improved accommodation they now occupy. They speak freely of the open, bright surroundings, and of the great benefit in health to themselves and their families. It is also gratifying to note that the transferred families, with very few exceptions, have adapted themselves wonderfully to their new habitations, the majority having risen to a higher level of domestic life. Such happy indications hold out encouragement for the carrying through of the schemes that have yet to be faced in other parts of the City.

It affords pleasure to observe that these internal City improvements, together with

the provision of an increasing number of new houses under the various Corporation Housing Schemes, are being accompanied by a rapid expansion in the outlying parts of the City. The spreading of the population over a larger area and the occupation of privately owned houses with gardens is bound before long to show its good results on the people's health.

The following Table, kindly furnished by Mr A. Horsburgh Campbell, Director of Housing, shows the number of houses completed, under erection, and contracted for under the various Corporation Housing Schemes as at 15th May this year, and also the number erected by Private Enterprise.

(1)	No. of Houses contracted for	4164
(2)	„ completed	2417
(3)	„ under erection	1747
(4)	„ erected under Private Enterprise with or without subsidy	583

NUISANCES AND SANITARY IMPROVEMENTS.

Considerable advance was made during the year in providing houses still without proper sanitary conveniences with these appliances, and in having improvements effected where the existing apparatus had become antiquated or defective. Since the inclusion of the Suburban areas within the City in the year 1921, persistent efforts have been made to bring the sanitary arrangements in the various villages and populous places up to the City requirements. This has meant, in large numbers of cases, the introduction of water supply, modern sanitary equipment, drainage, etc., which have proved a great boon to the occupiers and their families. Very few premises in those areas now remain unprovided with these sanitary requirements.

In the City itself continued progress was made in improving the sanitary condition of houses and their surroundings. This included the introduction of 90 new water-closets, the substitution of new water-closet apparatus for antiquated ones, improvements and repairs upon 359 water-closet fittings, the introduction of 100 new sinks, the substitution of 193 foul and corroded iron sinks by modern earthenware sinks, and repairs to woodwork, etc., of 278 sinks. Many drains were repaired or renewed and a considerable number of chokages of sanitary fittings, drains, etc., were cleared.

Complaints of flooding in houses and shops were found in 60 instances to be due to defects on flats above, and in 22 instances smells in dwellings were found to be arising from shops and other premises below. Other complaints of bad smells were on 76 occasions due to escapes of gas, dead vermin, etc. The keeping of animals in dwellings or in close proximity thereto was complained of on 51 occasions. Back smoke occurred in 109 houses due to foul or obstructed vents. In many houses structural repairs were effected upon floors, hearths, doors, windows, plasterwork, roofs, etc.

Unfortunately, in certain parts of the City, the habit of many people in casting garbage over windows continues, and this entails considerable trouble and expense in having back courts and greens kept clean. During the year, no less than 1277 accumulations had to be removed.

Stair painting was undertaken by the owners of 1410 properties. The cleaning of walls and ceilings of houses was frequently found to be necessary, and in 69 instances this was done by the tenants, and in 418 instances by the owners. The floors, bedding, etc., of 284 houses were found to be in a dirty condition and the tenants were requested to have them cleansed.

Complaints are of frequent occurrence in connection with the default of occupiers in sweeping and washing common stairs and passages. This failure gives rise to much irritation to the other tenants, and the inspectors have often to exercise discretion as well as firmness in dealing with the matter. Previously, the cleaning of stairs and passages was regulated by a section of the Edinburgh Municipal and Police Acts, but

in order to deal more effectively with the difficulties that arise, a set of Bye-laws, which amongst other things prescribe the rotation of cleaning, have been prepared and approved.

As required by the Scottish Board of Health in their circular of 1st September 1925, the following Table shows the number of sanitary conveniences used in common at the end of the year :—

	2 Houses.	3 Houses.	4 Houses.	5 Houses.	6 Houses.	7 Houses.	8 Houses.	9 Houses.	10 Houses.	11 and more Houses.	Total Number of Conveniences.	Total Number of Houses.
Number of common W.C.'s—serving ...	4561	1572	951	148	67	27	30	7	...	...	7363	19,276
Number of common Sinks—serving ...	391	366	228	61	21	5	6	...	...	...	1078	3,306
Number of Houses without Sink or Water Supply within the house and without the use of a common Sink ...	...	...	...	...	...	...	...	...	...	...	...	936
Number of dry Closets —serving	131	18	9	2	...	...	...	...	...	...	160	362
Number of privy Middens—serving ...	...	...	...	...	...	...	1	...	...	9	10	152
Number of Ashpits—serving	18	12	11	6	5	1	2	1	2	...	58	228

Since the year 1921, 152 closets on the conservancy system have been displaced by water-closets. At the end of last year there remained 417 dry closets and 10 privy middens. These are mostly associated with isolated agricultural cottages in the outer parts of the City where there is no provision of sewers.

OVERCROWDING.

The total number of overcrowded houses coming to the notice of the Department was 1202. This exceeds last year's total by 140. The number includes only the very small houses which are the subject of regular inspection. The total amount of overcrowding, it is to be feared, is of much larger dimensions.

Of the 1202 overcrowded houses found, 779 were of one apartment, 401 of two apartments, and 22 of three apartments. In the one-apartment houses the overcrowding in 227 instances was by one person, in 315 by two persons, in 145 by three persons, and in 92 instances by four or more persons in excess of the number that could legally occupy the house.

Of the two-apartment houses overcrowded, 105 were by one person, 130 by two persons, 84 by three persons, and 82 by four or more persons over the number allowed.

The three-apartment houses were in 2 instances occupied by one person in excess, 8 by two persons, 7 by three persons, and 5 by four or more persons.

In a number of the one-apartment overcrowded houses as many as 9, 10, 11, and 12 persons were found in residence ; in several two-apartment houses 10, 11, 12, and in one case 14 persons were found ; and in a number of the three-apartment overcrowded houses 11, 12, and 13 persons were found. In 61 cases the overcrowding was aggravated by the keeping of lodgers or by other families living with the tenants.

In 114 instances the air space per person had been reduced to below 200 cubic feet, being less than half of what has been recognised as a very low standard, namely, 400 cubic feet. In individual cases the air space had been reduced to the extremely low figure of 100, 103, 104, 118, and 124 cubic feet per person respectively.

The following are a few examples of the conditions that were found :—

(*a*) A one-apartment house in the centre of the City with accommodation for 2 persons was occupied by the tenant, his wife, 4 children over 10 years of age, and 3 children under 10 years of age, making a total of 9 persons.

(*b*) A one-apartment house in Leith with accommodation for 2 persons was occupied by the tenant, his wife, 2 children over 10 years of age, and 4 children under 10 years of age, making a total of 8 persons.

(*c*) A one-apartment house with a dark, unventilated bedcloset was occupied by 11 persons, comprising the tenant, her 4 sons aged 18, 15, 13, and 10 years, and by a lodger, his wife, and 4 children under 10 years of age. The lodger, his wife, and family all slept in the bedcloset.

Unfortunately, on account of the difficulty of obtaining other accommodation, in only 82 of the cases of overcrowding was it possible to have the overcrowding abated by removal to a larger house or by the making of other arrangements.

On account of the continued housing shortage, the occupation of sublet rooms has become much more prevalent. Although the houses of the tenants who sublet their rooms are often small enough for their own requirements, the accommodation of an additional family makes matters much worse. Frequently the apartment occupied by the subtenant is very badly overcrowded. The tenants subletting often excuse themselves by stating that out of charity they could not see the people going homeless ; but the charges made, which are frequently more than the total rent of the house, discount any such suggestion of sympathy.

The following are examples of the conditions that were found in sublet rooms, viz. :—

(*a*) A room and bedcloset in Leith with accommodation for 3 persons was occupied by 12 persons, comprising the subtenant, his wife, and family, viz. :—5 sons aged 18 years, 17 years, 16 years, 7 years, and 5 weeks, and 5 daughters aged 15 years, 14 years, 10 years, 4 years, and 2½ years.

(*b*) A room in Portobello with accommodation for 4 persons was occupied by the subtenant, his wife, 3 children over 10 years of age, and 4 children under 10 years of age, making a total of 9 persons.

TICKETED HOUSES.

These houses are visited periodically by the Women Sanitary Inspectors in order to see that the general cleanliness of the interiors, including the bedding and clothing as well as the stairs and passages, are kept properly clean. Visits are also paid to the other houses that are unticketed in the same vicinity. It is surprising to find how exceptionally clean many of these houses are kept. When the conditions in the houses are found to be not what they should be, a word to the householder is usually all that is necessary, and in a few instances only is any real difficulty experienced in having the cleanliness attended to. Although the chief object in visiting these houses is to see that they are maintained in a cleanly state, opportunities are often afforded of giving help, advice, and encouragement which is always deeply appreciated. Altogether 19,239 visits were made ; 229 houses were found dirty, and the bedding, etc., of 191 houses was found in a dirty condition.

VERMINOUS CONDITIONS.

By arrangement with the Education Authority, an Inspector attached to the Sanitary Department visits the homes of verminous and dirty children attending the schools in the City. During the year, 192 cases involving 262 children came under the supervision of this Inspector. The results effected included the disinfection of 22 sets of bedding and the bathing of 59 children at the City Disinfecting Station.

In course of their visits, the inspectors frequently come across houses that are so seriously infested by bugs, etc., that the occupiers have difficulty in getting rid of the vermin. In these circumstances advice and help is given to owners and tenants in the

extermination of the pests. During the year, 94 such cases were dealt with. It was found necessary to spray the walls with an insecticide before they were repainted, and thirty sets of bedding which had become infested were removed for disinfestation. In one case a box mattress had become so infested by the vermin that it was found necessary to destroy it.

A complaint of a peculiar nature was made to the Department early in September by the occupiers of a two-flatted tenement in a residential district on the east side of the City. Caterpillars were invading the shops and the houses above. One of the houses was so badly infested that the average number destroyed daily was about one hundred. Specimens were submitted to experts who stated that they were the larvæ of some species of moth difficult to determine, and that hatching out would not probably occur until midsummer. It was suggested that liberal applications of tar and paraffin oil should be made to the ground and lower walls, but as there were two large hay-stacks on the ground adjoining in connection with a byre and piggery there were grave risks in carrying this out. An effort was made to trap the larvæ in a trench cut round the building and filled with Irish lime, but although a number of the insects were trapped, the infestation continued and beds, wardrobes, cupboards, and boxes became invaded. Ultimately a resinous mixture resembling bird lime was tried by painting a band six inches broad along the lower walls, care being taken to encircle completely all ventilating gratings. A day or two later a large number of the larvæ were found to be adhering to the sticky substance. Fortunately, a sharp spell of frost supervened and the larvæ were no more seen.

INCREASE OF RENT, ETC., ACTS.

During the year, 43 applications were received from occupiers of houses for certificates in terms of the Increase of Rent and Mortgage Interest (Restrictions) Acts, 1920-23, that their houses were not in all respects in a reasonable state of repair.

The disrepair in 25 of the houses was such that certificates could be granted, but in 18 instances the extent of the disrepair did not warrant the granting of certificates.

Intimation of the various items of disrepair was given to the respective owners, and as a result considerable repairs were undertaken.

PLACES OF PUBLIC ENTERTAINMENT.

The various picture houses, theatres, dance halls, and other places of public entertainment were frequently visited by the inspectors to see that they were kept in good hygienic condition. As a rule, the cleanliness and sanitation of the premises were found to be well looked after and there was little that required to be brought to the notice of the management.

The inspectors, accompanied by Mr A. Scott Dodd, B.Sc., City Analyst, also visited those places in the evenings whilst the entertainments were in progress and observations and analysis of the air were made. In the majority of cases the purity of the air was found to be satisfactory, and only occasionally was the impurity found to be rather high. This was usually due to some fault in the ventilation, and on the attention of the proprietors being called to the matter improvements were effected. The conditions in a number of places showed an improvement on the previous year.

The following Table indicates the results of the tests at the various picture houses, theatres, and dance halls, and by comparing the columns relative to CO_2 per 10,000 volumes, the improvement or otherwise on the tests of the previous year will be noted :—

Picture Houses.

No.	Seating Accommodation.	Number of Tests.	CO_2 per 10,000.		Temperature Degrees Fahr.	Relative Humidity Per Cent.	Grains of Water Vapour per Cubic Foot.	Remarks.
			Year 1925.	Year 1924.				
1	890	3	9·0—10·0	10·0—12·0	51—55	87·1—90·1	3·82—4·24	Satisfactory.
2	820	3	8·0—8·3	8·7—11·5	54—60	84·4—87·1	4·10—4·87	,,
3	700	3	9·0—13·5	8·0—9·0	51—58	75·6—84·4	3·44—4·55	Fair.
4	825	4	6·2—10·0	8·0—8·7	55—58	73·5—78·7	3·69—4·24	Satisfactory.
5	960	3	5·2—8·7	7·4—8·0	58—67	59·3—84·4	4·24—5·04	,,
6	1330	2	8·7—9·0	9·0	57—62	78·9—87·3	4·55—4·87	,,
7	700	3	8·3—9·0	5·0—5·6	59—64	76·5—81·5	4·55—5·04	,,
8	522	3	8·9—9·5	10·0—12·0	59—62	81·7—87·3	4·71—5·04	,,
9	1555	2	10·0	8·7—9·0	48—49	80·8—83·8	3·20	,,
10	906	2	8·7—11·0	11·0—12·0	58	81·4—84·4	4·39—4·55	,,
11	500	2	9·0—10·0	8·3—8·7	48—50	83·9—86·9	3·32—3·44	,,
12	628	2	9·5—11·0	8·0	63—65	79·2—87·5	5·39—5·58	,,
13	1100	3	7·4—10·0	7·7—9·0	58—64	79·0—84·4	4·55—5·21	,,
14	348	2	8·7—11·5	10·0—15·0	62—66	78·9—82·0	4·87—5·77	,,
15	500	2	7·4—10·0	7·1—7·7	57—58	84·3—84·4	4·39—4·55	,,
16	1800	2	4·8—7·4	9·0—11·5	62—65	81·7—81·9	5·04—5·58	,,
17	500	2	8·9—9·0	10·0—15·5	58	84·4	4·55	,,
18	450	2	11·5—13·5	15·5—21·0	61—62	87·4—90·3	5·39	Fair.
19	1800	2	8·3—10·0	8·3—9·0	58	76·1—78·7	4·10—4·24	Satisfactory.
20	823	3	13·5—19·5	8·7—11·0	58—61	76·1—81·6	4·10—4·87	Unsatisfactory.
21	750	2	8·0—9·0	8·7—8·9	49—53	81·1—86·9	3·44—3·69	Satisfactory.
22	600	2	9·0—11·5	10·0	53—58	78·7—81·1	3·69—4·24	,,
23	600	2	10·0—11·5	9·0—10·0	57—60	84·4—87·3	4·55—4·87	,,
24	450	2	10·0—13·5	8·9—10·0	54—59	84·1—87·3	3·96—4·87	Fair.
25	800	3	9·0—10·0	10·0—13·5	54—59	81·5—84·4	3·96—4·71	Satisfactory.
26	550	2	11·5—15·5	9·0—11·5	61—64	81·8—84·4	5·04—5·39	Unsatisfactory.
27	350	2	8·0—10·0	9·0—11·5	58—60	76·1—78·8	4·10—4·55	Satisfactory.
28	611	2	8·8—9·5	10·0—11·5	59—61	78·7—78·9	4·39—4·71	,,
29	400	3	11·2—15·5	9·0—13·5	55—62	71·1—84·2	3·96—4·39	Unsatisfactory.
30	1000	2	8·0—8·3	8·0	57—58	81·4—84·3	4·39	Satisfactory.
31	600	3	11·5—18·0	9·0—10·0	59—62	81·6—84·4	4·71—5·21	Unsatisfactory.
32	820	3	13·5—15·5	8·9—9·0	63—65	81·7—87·5	5·21—5·58	,,
33	1450	3	8·3—9·0	...	65—66	79·2—79·3	5·39—5·58	Satisfactory.
34	853	3	7·1—8·3	...	58—59	81·4—81·5	4·39—4·55	,,

Theatres.

1	1500	4	7·7—13·5	15·0—21·0	63—65	81·8—84·5	5·39—5·58	Fair.
2	1500	4	8·1—13·5	11·0—15·5	60—70	79·7—84·4	4·87—6·38	,,
3	1947	5	9·0—17·0	8·7—13·5	64—72	74·4—82·0	5·21—6·38	Unsatisfactory.
4	1467	5	7·7—13·5	4·8—15·5	59—60	81·6—84·4	4·71—4·87	Fair.
5	1430	5	8·3—10·0	7·1—10·0	56—62	81·4—84·4	4·24—5·04	Satisfactory.

Dance Halls.

No.	Number of Tests.	CO_2 per 10,000.	Temperature Degrees Fahr.	Relative Humidity Per Cent.	Grains of Water Vapour per Cubic Foot.	Remarks.
1	3	5·4—8·4	55—61	87·3—90·4	4·39—5·21	Satisfactory.
2	4	6·4—8·4	64—70	76·6—82·1	5·39—6·38	,,

POLLUTION OF THE AIR.

The problem of the pollution of the air by smoke has been receiving more and more attention in recent years, and as a result there has been an increasing desire to have the menace minimised by all possible means. The fogs of the past winter demonstrated, once again, how dangerous and costly the evil can be in these short periods; but it must be remembered that the problem is not limited to such occasions. Day in, day out, throughout the whole year, great volumes of smoke are being continually poured out into the atmosphere from innumerable chimneys, industrial and domestic, and the citizens have no choice but to breathe this grossly polluted air.

The injurious effects of a smoke-laden atmosphere are probably too little realised. Every housewife, of course, is aware of its smudging effect upon curtains, furnishings, and clothing; builders and architects know its destructive effects upon stone and metals; and gardeners are fully convinced of its clogging and retarding influence upon trees, plants, vegetables, and flowers. Although the harm done in these directions is undoubtedly vast and costly, yet the hurtful effects upon human life are even more important. Those who have studied the matter closely have shown that smoke reacts on human health in a variety of ways, and there is little doubt that the smoky atmosphere which people are compelled to breathe, combined with the loss of sunshine and daylight, is one of the causes of the inferiority of the physique of city dwellers as compared with those of the country. In plant life, the effect of town air upon growth as compared with country air, and even of the air of different parts of the town, have been contrasted and the baneful effects of smoke demonstrated. The City Superintendent of Parks informs me that daffodils planted in Princes Street Gardens had a life, this spring, of only seven days, whereas those planted in Bruntsfield Links had a life of three weeks, due solely, he believes, to atmospherical conditions.

Progress in effecting improvement probably cannot be very speedy, there being so many difficulties of a practical nature to overcome, but the difficulties are often greatly magnified. Here, as in most other reforms, prejudice and custom prove to be retarding forces. While much has been done in recent years by progressive factory owners by the introduction of modern boilers, mechanical stokers, and smoke-consuming apparatus, many places remain from which the volume of smoke emitted is considerable. If progress in the Smoke Abatement campaign is to be speedier, Local Authorities will require to be armed with more effective legislation, and persistent effort will have to be directed upon the provision of practical remedies.

In the centre of the City the pollution is greatly aggravated by the discharge of smoke from trains. Before long it will become the duty of the Local Authority in the interests of health and amenity to press for effective remedies in this direction.

Probably the greatest difficulty is presented in directing any large scale effort towards diminishing the smoke from domestic chimneys. But science has lately been brought to play on the subject, and already considerable advance has been made by manufacturers in producing smokeless appliances for domestic cooking and heating. It is gratifying to learn that the Gas and Electricity Departments are having an ever-increasing demand year by year for the introduction of these appliances.

Last year three standard gauges were procured for measuring the solid impurities in the air. One was placed at Leith Links, one at the National Gallery, the Mound, and the remaining one at the Usher Institute, Warrender Park Road. A commencement was made with these in the month of June. After a few months' trial it was found that the deposit at the National Gallery was unusually high as compared with the other two places. This, doubtless, was due to the close proximity of the railway. It was accordingly decided to remove the gauge to the middle of West Princes Street Gardens, and since then the results, while still unduly high, show a reduction from those of the former position.

The amount of soluble and insoluble matter in the atmosphere, as shown by the standard gauge records at Princes Street Gardens and Warrender Park Road, is unnecessarily large, and shows the need for more determined effort to have the pollution diminished. Compared with the somewhat high figures for these places, the results for the Leith Links gauge show a relatively low amount of pollution.

The following Table shows the results at the various places from month to month :—

Month.	Station.	Millimeters of Rainfall.	Total Insoluble Matter.	Total Soluble Matter.	Total Solids.	Total Solids.
			Metric Tons per Sq. Kilometre.	Metric Tons per Sq. Kilometre.	Metric Tons per Sq. Kilometre	English Tons per Sq. Mile.
June	Leith Links	8·20	3·87	0·62	4·49	11·49
	Usher Institute	8·77	2·23	1·16	3·39	8·68
July	Leith Links	41·70	3·74	1·48	5·22	13·36
	Usher Institute	40·93	1·14	1·38	2·52	6·45
	National Gallery	26·53	11·74	3·50	15·24	38·99
August	Leith Links	80·06	2·32	2·41	4·73	12·11
	Usher Institute	76·43	2·71	2·44	5·15	13·18
	National Gallery	87·91	12·98	3·16	16·16	38·76
September	Leith Links	87·15	1·89	4·17	6·06	15·52
	Usher Institute	109·21	3·45	4·15	7·60	19·45
	National Gallery	86·86	7·84	2·79	10·63	27·21
October	Leith Links	39·62	23·1	1·35	3·66	9·37
	Usher Institute	40·46	2·20	1·21	3·41	8·73
	National Gallery	41·78	10·01	1·89	11·90	30·47
November	Leith Links	19·81	2·99	2·46	5·45	13·95
	Usher Institute	21·39	2·33	2·14	4·47	11·44
	National Gallery	18·26	6·02	2·53	8·55	21·89
December	Leith Links	57·13	2·50	3·08	5·58	14·31
	Usher Institute	87·99	2·88	7·92	10·80	27·65
	W. Princes St. Gds.	66·26	4·07	3·71	7·77	19·89

WATER SUPPLY.

Examination was made of 6542 domestic water cisterns during the year and of that number 1206 were found to require cleansing and 38 required to be covered.

Messrs J. & A. Leslie & Reid, Engineers of the Edinburgh Corporation Water Works, have kindly intimated that the total consumption per head of the population during the year 1924-25 was 48·49 gallons, of which 35·65 was for domestic purposes and 12·84 for trade and shipping. The average daily consumption of water was 22,445,000 gallons per day for all purposes.

During the year 1925 the three new open sand filters at Fairmilehead were brought into operation. Each of these filters is capable of passing 1½ million gallons per day. The new aqueduct for the supply of Rosewell, Bonnyrigg, Dalkeith, Smeaton, Carberry, and Wallyford was completed and brought into operation. The pipe is at present delivering about 500,000 gallons per day, but at its full capacity the pipe is capable of delivering one million gallons per day. The water passing through this pipe is unfiltered, but new filters are being constructed on the line of the pipe at Gourlaw, about a mile west of Rosewell village. Two of the three connections from the North Pentland Aqueduct for the supply of the Calder Water District have been brought into use, and water is being supplied to East Calder, Mid-Calder, West Calder, Pumpherston, Addiewell, and places adjacent. Another connection for this district will be brought into use shortly, and will supply Balerno and Currie district.

CLEANSING.

The cleansing of the City streets continues to be efficiently done by the Cleansing Department.

The effect that the condition of the streets has upon the appearance of the City does not seem to be sufficiently realised by all the citizens, otherwise there would be

greater effort made to preserve their cleanliness. Papers, fruit skins, and other litter are heedlessly thrown on to the streets and cause them to become unsightly. It is a common practice also for occupiers of houses and shops to sweep the dust from stairs and shops over the footpaths into the street channels. If those citizens had a greater regard for the City's appearance and good name, such practices would never occur. As it is, they add considerably to the cost of scavenging.

Mr R. Beveridge, Inspector of Cleansing and Lighting, to whom I am much indebted for valued co-operation in many matters, had the system of night washing of back courts and closes considerably extended last year and a new squad of men was established in the Leith area. The results have been very noticeable and one wishes that the system could be even further extended. Experience has shown that cleanly surroundings have a wonderfully beneficial effect upon the condition of the houses and the health of the inhabitants.

SEWERAGE.

Mr A. Horsburgh Campbell, Burgh Engineer, has kindly informed me that the 24-inch diameter outlet Sewer from Cramond Bridge to the foreshore at Cramond has been completed, and that the construction of the 4-feet × 6-feet Outfall Sewer Pipe to Seafield for the improvement of Portobello foreshore will shortly be completed. A number of old rubble-built sewers have been abolished and 9-inch to 24-inch diameter fireclay pipes substituted. New fireclay pipe sewers of 6-inch to 24-inch diameter to the extent of 8086 yards have been constructed.

RAT DESTRUCTION.

As in previous years the repressive measures adopted in dealing with the rat problem were continued with much success.

Complaints and investigations showed that 297 premises, including farms, had become infested by rats during the year. Advice as to the use of exterminants and as to rat-proofing measures were readily given by the Department to those concerned. At 208 places the vermin were entirely destroyed, and persistent efforts were being continued at most of the others. As a rule, those whose premises become infested show an eagerness to have the vermin destroyed, but occasionally a degree of unconcern is observed on the part of others, particularly in the more outlying areas of the City. It seems to be thought that so long as the vermin are not actually in buildings there is no need to bother. But rats soon multiply and spread, and the repressive efforts of other people may be nullified by such inaction.

Owners of tenemental property are also sometimes slow in taking action and expect the occupiers to exterminate the rats. In most cases structural repairs are necessary and occupiers cannot be expected to do that work. The best results are achieved where co-operation is secured. The requirements of the Rats and Mice (Destruction) Act, 1919, are hardly sufficient for City requirements, and the position cannot be regarded as satisfactory until the Act is properly amended.

The Local Authority again co-operated with the Scottish Board of Agriculture in an intensive campaign for rat destruction during the week commencing 30th March, and very good results were obtained. Keen interest has been aroused by these campaigns, and one encouraging outcome is that early intimation is made to the Department when premises become infested.

COMMON LODGING-HOUSES.

There are 20 Common Lodging-Houses in the City with accommodation for 2393 lodgers. Of that number 17 are used for male lodgers and 3 are reserved for women lodgers. All the lodging-houses are privately owned with the exception of one in Leith owned by the Corporation.

At the Salvation Army Hostel for men at No. 1 Pleasance, additional accommodation was provided during the year for 16 lodgers, together with additional water-closet accommodation.

Cleaning and painting were carried out at the various premises as required, and the Corporation Lodging-House at Leith was thoroughly cleaned and oil-painted throughout.

FARMED-OUT HOUSES AND HOUSES LET-IN-LODGINGS.

The Farmed-out Houses in the City number 165 with accommodation for 607 persons. They were frequently visited to see that the Bye-laws were being observed.

In one tenement three sinks were removed from the common lobbies, and earthenware sinks with the necessary fittings, waste-pipes, etc., were introduced into the six individual houses.

Notices were served in June and December on the keepers of all houses requiring cleansing of the premises in terms of the Bye-laws and this was satisfactorily carried out.

There were 49 houses removed from the Register during the year, and 22 of these houses were closed under the Cowgate-Grassmarket Improvement Scheme.

The Houses Let-in-lodgings in the City number 32, with accommodation for 901 persons. This is an increase of one house with accommodation for 34 persons.

ACCOMMODATION FOR SEASONAL WORKERS.

Bye-laws as to the provision of proper accommodation for potato workers, harvesters, fruit pickers, and other seasonal workers employed on farms or fruit farms were passed by the Local Authority, and were confirmed by the Scottish Board of Health in June 1925. These Bye-laws refer to the intimation to be given to the Local Authority where it is intended to employ seasonal workers, the nature and extent of the accommodation to be provided, water supply, cleansing, etc., and should be the means of raising the standard of accommodation for such workers.

A number of the farmers had already provided satisfactory accommodation by the erection of huts or the setting aside of parts of the farm buildings, and it is hoped that before next season arrives various improvements at the other places will be made.

The number of farmers employing seasonal workers last summer was 16, and the number of workers was approximately 450.

OFFENSIVE TRADES.

The following is a list of the Offensive Trades carried on in the City :—3 tanners, 4 skin and hide factors, 1 gut scraper, 1 glue and size maker, 2 skinners, 1 soap boiler, 1 bone boiler, 3 tripe cleaners, 6 manure manufacturers, and 2 tallow melters, making a total of 24.

The works were all visited at frequent intervals to see that the requirements of the Bye-laws were duly observed.

DAIRIES.

The number of Dairies on the Register at the end of the year was 704, of which 447 were within the City and 257 outside the City.

The total approximate daily sale of all classes of milk was 21,435 gallons, equivalent to an average consumption of about half a pint per person.

It is very gratifying to report that the sale of the different grades of milk sanctioned under the Milk (Special Designations) (Scotland) Order, 1923, has increased very materially during the year, and there is every indication that this will be more fully developed in the future. The Local Authority has granted licences to 131 dealers for the sale of the various graded milks, being 28 for Certified, 9 for Grade A (Tuberculin Tested), 2 for Grade A, and 92 for Pasteurised Milk. The amounts of those specially designated milks now sold daily within the City are 248 gallons of Certified, 72 gallons of Grade A (Tuberculin Tested), 2 gallons of Grade A, and 5815 gallons of Pasteurised, a total of 6137 gallons.

The daily consumpt of non-graded and non-treated milk amounts to 15,298 gallons, of which 3089 gallons are sold in bottles.

The amount of milk sold in bottles has been gradually increasing in recent years, and at present no less than 9227 gallons or 43 per cent. of all the milk sold in the City is passed on to the consumer by that means.

Considerable attention has been given to the supervision of the sale of graded milk, and 74 samples were procured and analysed during the year. Of that number 42 consisted of Certified, 17 of Grade A (Tuberculin Tested), 2 of Grade A, and 13 of Pasteurised Milk. The following Table shows, in each designation, the average amount of butter fat found present :—

Date.	"Certified."		"Grade A (T. T.)."		"Grade A."		"Pasteurised."	
	No. of Samples.	Butter Fat.	No. of Samples.	Butter Fat.	No. of Samples.	Butter Fat.	No. of Samples.	Butter Fat.
January ...	7	3·96 %	2	3·74 %	...	...	1	3·51 %
February ...	3	4·59 %	2	3·67 %	...	...	2	3·66 %
March ...	7	4·15 %	1	3·97 %	...	...	1	3·88 %
April ...	2	4·12 %	2	4·72 %	...	...	...	...
May ...	2	3·58 %	1	3·22 %	...	...	1	3·96 %
June ...	4	3·91 %	...	...	...	...	1	3·42 %
July ...	1	5·05 %	3	3·97 %	...	...	2	4·01 %
August ...	4	4·11 %	2	4·12 %	...	...	...	...
September ...	1	4·91 %	1	4·19 %	...	...	...	...
October ...	6	3·93 %	2	4·44 %	1	4·33 %	2	3·95 %
November ...	3	3·77 %	...	...	1	4·77 %	2	3·57 %
December ...	2	4·00 %	1	3·02 %	...	...	1	3·51 %
Total	42	4·17 %	17	3·91 %	2	4·55 %	13	3·72 %

As will be seen, the average amount of butter fat present in the samples of Graded Milk in all the months of the year was high. The prescribed standard for Certified, Grade A (Tuberculin Tested), and Grade A Milk is 3·5 per cent. ; and for Pasteurised and ungraded milk it is 3 per cent.

ICE-CREAM SHOPS.

At the end of the year, 187 premises were on the register of places within the City where ice cream is prepared or sold.

This is an increase of 43 as compared with last year's total. The shops were frequently visited, and the premises and the methods employed were generally found to be satisfactory.

Seven new applications were received for certificates issued by the Medical Officer of Health for ice cream containing a specific standard of milk fat, and four of these were granted. Forty-five samples were procured, and analysis showed that the average amount of milk fat present was 3·22 per cent. This percentage of milk fat is considerably higher than that usually present in the ordinary grades of ice cream. The experience of the last two years shows that a number of the ice-cream producers are prepared to make ice cream of a reasonably high quality, and it becomes a question for consideration whether a minimum standard of milk fat should not now be adopted for all ice cream.

SALE OF FOOD AND DRUGS ACTS.

During the period under review, the total number of samples procured and analysed under the above Acts amounted to 1500. This works out at a rate of 3·55 per 1000 of the population. Of the total number, 445 were Statutory and 1055 Informal or Test samples. Of the 445 Statutory samples taken, 72 were certified by the City Analyst as not in conformity with the standard. Proceedings were instituted in 6 cases and fines inflicted amounting in all to £26.

Milk.—Of the total number of Statutory samples, 276 were of sweet milk. In addition, 161 samples of sweet milk were obtained at shops and railway stations for bacteriological examination by the Veterinary Department, the particulars of which will be found in that Department's Report.

The improvement in the quality of the milk sold in the City, which was commented upon in previous reports, has been fully maintained during the past year; and the serious adulteration which at one time was all too prevalent has to a very great extent disappeared, while the average amount of milk fat present in the samples has reached a higher figure than ever before, viz., 3·66 per cent., being a marked increase over the Government standard of 3 per cent. This figure is calculated from all the Statutory samples taken, including those returned as adulterated, representing a total of 276.

These results are very gratifying and go to disprove any suggestion that the standard for milk laid down in the Sale of Milk Regulations is too high. They demonstrate, once again, the necessity, as was recommended by the Inter-Departmental Committee, for prescribing a definite standard of 3 per cent. of butter fat.

Sausages.—As the sale of sausages is very extensive, purchases of these were made at various shops with the special view of ascertaining the amount of butcher meat in their composition.

Altogether 12 samples were procured at prices ranging from 6d. to 1s. 2d. per lb., and the following Table, showing the result of the analysis in each case, discloses a very interesting variation :—

No. of Samples.	Price charged.	Percentage of Meat.
3	6d. per lb.	73·74 % 60·77 % 54·34 %
6	8d. per lb.	56·02 % 53·03 % 46·52 % / 43·97 % 40·34 % 29·64 %
1	10d. per lb.	64·78 %
2	1s. 2d. per lb.	64·00 % 46·00 %

Examination was also made in order to detect the presence of preservatives, and in only one instance was such found to be present, the sample containing 2·73 grains per lb. Sulphur Dioxide.

The wide variation in the percentage of meat present in sausages points to the need for a prescribed standard. Edinburgh is not the only place where such variation occurs. The City Analyst, Mr A. Scott Dodd, B.Sc., informs me that the results of analysis of fifty different makes of sausages in various parts of the country, including the Edinburgh samples, show a very extensive variation in composition. The moisture varied from 31·20 per cent. to 58·20 per cent; fat varied from 7·00 per cent. to 42·91 per cent.; starch, flavouring, etc., varied from 5·30 per cent. to 33·68 per cent.; proteids varied from 5·63 per cent. to 12·94 per cent.; and meat varied from 29·64 per cent. to 80 per cent.

Mr Scott Dodd continues :—"When, therefore, one considers the enormous quantity of sausages which are manufactured and sold, and the important part they

play in the dietary of the poorer classes, there is a great and urgent need for Local Authorities to be able to prohibit the sale of sausages which are deficient in nourishing properties. By suitable legislation the sausage would then cease to be, as at present, a 'bag of mystery,' and would become a wholesome and nourishing article of diet. During the 'meatless' days of 1918, sausages were included in the Public Meals Order as 'meat,' and the Ministry of Food, after consultation with the Society of Public Analysts, in the Meat Rationing Order, 1918 (No. 494), fixed the minimum quantity of meat in first quality and second quality uncooked sausages at 67 per cent. and 50 per cent. respectively. This Order has now been revoked, but during the period in which it was in operation, infringements were found to be numerous and many prosecutions and convictions resulted.

"In the Ministry of Food Meat Orders no distinction was made between fat and lean meat, but both were regarded as 'meat.' In view of the possibility of sausages being made mainly of fat and starch filler, I think it would be advisable to limit the proportion of fat which may be present in a sausage. It would be impossible to determine with anything approaching accuracy the proportion of liver, gristle, or similar substances which may be substituted for meat, but I think the proportion of nutritious fat-free 'meat' may be satisfactorily deduced from the percentage of proteid nitrogen present. The addition of an excessive quantity of gristle would, therefore, tend to lower the percentage of 'meat,' as gristle does not contain much nitrogen.

"As a result of my experience in the analysis of sausages I would suggest the following standards :—

(1) That Sausages be made in two grades—First and Second.

(2) That First Grade Sausages contain not less than 67 per cent. of Meat, and Second Grade Sausages not less than 50 per cent. of Meat.

(3) That no Sausages shall contain less than 50 per cent. of Meat.

(4) That fat shall be included as 'meat' but shall not amount to more than half the total meat present ; and

(5) That the First Grade Sausages be enclosed with a band indicating that they are of this grade, or conspicuously labelled in the shop."

The following Table gives a detailed statement of the Statutory samples procured and the condition of these as subsequently determined by analysis :—

SALE OF FOOD AND DRUGS ACTS.

Article.	Number of Samples taken.	Genuine.	Adulterated.	Extent and Form of Adulteration.	Reported to Prosecutor.	Acquitted.	Convicted.	Fines Inflicted. £	s.	d.	Remarks.
Arrowroot	3	3	...	.....	...	...	...				
Baking Powder	2	2	...	.....	...	...	...				
Baking Soda	1	1	...	.....	...	...	...				
Barley	4	4	...	.....	...	...	...				
Beer	4	4	...	.....	...	...	...				
Borax	1	1	...	.....	...	...	...				
Boric Acid	1	1	...	.....	...	...	...				
Butter (Fresh)	9	9	...	.....	...	...	...				
Butter (Salt)	12	12	...	.....	...	...	...				
Camphorated Oil	3	2	...	.....	...	...	...				
Do.	...	...	1	0·85% deficient in Camphor ...	..	...	...				Warned
Castor Oil	2	2	...	.....	...	...	...				
Cheese	4	4	...	.....	...	...	...				
Cinnamon	2	2	...	.....	...	...	...				
Citric Acid	1	1	...	.....	...	...	...				
Cocoa	4	4	...	.....	...	...	...				
Cocoanut (Desiccated)	1	1	...	.....	...	...	...				
Cod Liver Oil	1	1	...	.....	...	...	...				
Coffee	2	2	...	.....	...	...	...				
Cream	3	1	...	.....	...	...	...				
Do.	...	...	1	Contained 0·54 % Boric Acid ...	...	..	...				Warned
Do.	...	...	1	Contained 0·21 % Boric Acid ...	...	...	...				Warned
Cream of Tartar	1	1	...	.....	...	...	...				
Custard Powder	1	1	...	.....	...	...	...				
Dripping	1	1	...	.....	...	...	...				
Epsom Salts	1	1	...	.....	...	...	...				
Flour (Corn)	2	2	...	.....	...	...	...				
Flour (Oat)	1	1	...	.....	...	...	...				
Flour (Rice)	2	2	...	.....	...	...	...				
Ginger (Ground)	3	3	...	.....	...	...	...				
Glycerine	1	1	...	.....	...	...	...				
Honey	5	5	...	.....	...	...	...				
Jam	9	6	...	.....	...	...	...				
Do.	...	...	1	Contained 10 % Apple Pulp ...	...	...	...				Warned
Do.	...	...	2	Contained small quantity of Apple Pulp	...	...	...				
Jelly	5	5	...	.....	...	...	...				
Lard	4	4	...	.....	...	...	...				
Lemon Squash	3	3	...	.....	...	...	...				
Margarine	7	5	...	.....	...	...	...				
Do.	...	...	1	Contained 0·62 % Boric Acid ...	...	...	...				Warned
Do.	...	...	1	Contained 0·12 % Boric Acid and was Unticketed	...	...	...				Warned
Milk (Condensed)	15	14	...	.....	...	...	...				
Do.	...	...	1	Deficient in Fat and Milk Solids ...	...	...	...				Warned
Milk (Dried)	1	1	...	...	...	...	...				
Milk (Skim)	3	3	...	...	...	...	...				
Milk (Sweet)	276	215	...	...	...	...	...				
Do.*	...	...	1	Deficient in fat 10 % and mixed with 2 % water	...	...	...				Warned
Do.*	...	...	1	Mixed with 4 % water	...	...	...				Warned
Do.	...	...	1	Deficient in fat 15 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 17 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 12 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 5 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 32 % and mixed with 29 % water	1	...	1	3	0	0	
Do.	...	...	1	Mixed with 3 % water	...	...	...				Warned
Do.*	...	...	1	Mixed with 5 % water	...	...	...				
Carry forward	401	331	18	Carry forward ...	1	...	1	3	0	0	

* Cases withdrawn, in order that samples be taken from the Wholesale Dealer.

SALE OF FOOD AND DRUGS ACTS—*continued.*

Article.	Number of Samples taken.	Genuine.	Adulterated.	Extent and Form of Adulteration.	Reported to Prosecutor.	Acquitted.	Convicted.	Fines Inflicted. £	s.	d.	Remarks.
Brought forward	401	331	18	Brought forward ...	1	...	1	3	0	0	
Milk (Sweet)	...	...	1	Deficient in fat 12 % and mixed with 8 % water	1	...	1	5	0	0	
Do.	...	...	1	Mixed with 2 % water	...	...	...				Warned
Do.	...	...	1	Deficient in fat 8 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 28 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 12 %	...	...	...				Warned
Do.*	...	...	1	Mixed with 3 % water	...	...	...				
Do.	...	...	1	Deficient in fat 11 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 12 %	...	...	...				Warned
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.*	...	...	1	Deficient in fat 29 % and mixed with 14 % water	...	...	...				
Do.	...	...	1	Mixed with 19 % water ...)	1	...	1	4	0	0	
Do.	...	...	1	Mixed with 7 % water ...)							
Do.	...	...	1	Deficient in fat 5 %	...	...	...				
Do.*	...	...	1	Deficient in fat 16 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 8 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 12 %	...	...	...				Warned
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.*	...	...	1	Deficient in fat 6 %	...	...	...				
Do.*	...	...	1	Deficient in fat 19 %	...	...	...				
Do *	...	...	1	Deficient in fat 30 %	...	...	...				Warned
Do.*	...	...	1	Deficient in fat 12 %	...	...	...				Warned
Do.	...	...	1	Mixed with 2 % water	...	...	...				Warned
Do.*	...	...	1	Mixed with 6 % water	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.*	...	...	1	Mixed with 5 % water	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				Warned
Do.	...	...	1	Mixed with 9 % water	1	...	1	5	0	0	
Do.*	...	...	1	Deficient in fat 3 % and mixed with 2 % water	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.*	...	...	1	Mixed with 6 % water	...	...	...				Warned
Do.	...	...	1	Mixed with 2 % water	...	...	...				Warned
Do.*	...	...	1	Mixed with 6 % water	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.	...	...	1	Deficient in fat 10 %	...	...	...				Warned
Do.	...	...	1	Mixed with 11 % water ...)	1	...	1	5	0	0	
Do.	...	...	1	Mixed with 4 % water ...)							
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Do.*	...	...	1	Mixed with 2 % water	...	...	...				
Do.	...	...	1	Deficient in fat 15 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 5 %	...	...	...				
Do.	...	...	1	Deficient in fat 15 %	...	...	...				Warned
Do.*	...	...	1	Mixed with 7 % water	...	...	...				
Do.	...	...	1	Mixed with 3 % water	...	...	...				Warned
Do.	...	...	1	Mixed with 6 % water	...	...	...				Warned
Do.*	...	...	1	Deficient in fat 12 %	...	...	...				
Do.*	...	...	1	Deficient in fat 13 % and mixed with 11 % water	...	..	...				
Do.	...	...	1	Mixed with 5 % water	1	...	1	4	0	0	
Do.*	...	...	1	Deficient in fat 16 %	...	...	...				Warned
Do.	...	...	1	Deficient in fat 6 %	...	...	...				
Do.	...	...	1	Deficient in fat 6 %	...	...	...				
Do.	...	...	1	Mixed with 2 % water	...	...	...				
Olive Oil	2	2	...	.....	...	...	...				
Peas (Preserved)	6	4	...	.....	...	...	...				
Do.	...	...	1	Contained 8 grains Copper Sulphate per lb.	...	...	...				Warned
Do.	...	...	1	Contained 1·08 grains Copper Sulphate per lb.	...	...	...				
Carry forward	409	337	72	Carry forward ...	6	...	6	26	0	0	

* Cases withdrawn, in order that Samples be taken from the Wholesale Dealer.

SALE OF FOOD AND DRUGS ACTS—*continued.*

Article.	Number of Samples taken.	Genuine.	Adulterated.	Extent and Form of Adulteration.	Reported to Prosecutor.	Acquitted.	Convicted.	Fines Inflicted. £	s.	d.	Remarks.
Brought forward	409	337	72	Brought forward ...	6	...	6	26	0	0	
Pepper (Black	1	1	...	.....	...	...	...				
Pepper (White)	7	7	...	.....	...	...	...				
Pickles	8	8	...	.....	...	...	...				
Rice	3	3	...	.....	...	...	...				
Sugar	2	2	...	.....	...	...	...				
Sweet Spirit of Nitre	1	1	...	.....	...	...	...				
Syrup (Golden)	1	1	...	.....	...	...	...				
Tapioca	1	1	...	.....	...	...	...				
Tartaric Acid	1	1	...	.....	..	...	...				
Tea	3	3	...	.....	...	...	...				
Vinegar	8	8	...	.....	...	...	...				
Number of Samples taken	**445**			Cases reported to Prosecutor	**6**						
Number found Genuine		**373**		Number acquitted		...					
				Number convicted			**6**				
Number found Adulterated			72	Total Amount of Fines ...				**£26**	**0**	**0**	

THE SALE OF FOOD ORDER, 1921.

This Order, which had been temporary in its duration, was continued in force for another year under the Expiring Laws Continuance Act, 1924.

As in former years, regular visitation of shop premises throughout the City was made with a view to the enforcement of its terms, and the results disclosed an exceedingly satisfactory state of affairs. Previously, contraventions of the Order had been rather frequent, and while it was generally found that a severe warning met the circumstances of the case, yet it had been necessary each year, in certain serious cases, to institute legal proceedings, when substantial fines were inflicted. This year, however, the need for any such action did not once arise, and the terms of the Order were observed in a manner which reflects great credit on the various shopkeepers throughout the City.

THE POISONS AND PHARMACY ACT, 1908.

During this term the number of applications received for licences under the above Act shows a slight increase over any former year, there being at present 26 names on the register as compared with 24 in the preceding year. This total is comprised of 24 renewals to persons who had held certificates previously and 2 licences granted to new applicants.

From inspection of the various premises it was apparent that licence-holders were paying careful attention to the terms of the Act and in no case was any contravention observed.

THE RAG FLOCK ACT, 1911.

Altogether, 10 samples of Rag Flock were procured from various bedding manufacturers throughout the City, and in 9 cases it was found that the standard of cleanliness laid down in the Regulations had been conformed with. In the other case, the result was rather startling, as the analysis showed it to contain at least 200 parts of Chlorine per 100,000 parts of Flock as compared with the prescribed maximum of 30 parts. On investigation, it was found to be "Cotton Flock," and therefore did not come within the scope of the Act. The material had been purchased from a firm in Glasgow and invoiced merely as "Flock."

It has also to be mentioned that a sample of material, used rather extensively in the manufacture of bedding and composed of the waste material made during the process of manufacturing flannelette, was taken for analysis at a large factory and found to contain 166 parts of Chlorine per 100,000.

These results naturally emphasise the suggestions submitted in last year's report, that it is quite evident that the Rag Flock Act is too limited in its scope and that other materials used by bedding manufacturers and upholsterers should be brought under regulation.

FOOD HANDLING.

Although the need for exercising the greatest degree of cleanliness in the handling of foodstuffs may appear to be an accepted requirement, yet it is one that is more often disregarded than complied with. It is a remarkable fact that while considerable progress has been made in the enforcement of sanitary principles in so many directions, this important aspect has been almost entirely neglected.

True, efforts have been directed for many years upon the improvement of the milk supply, and these now appear to be resulting in the adoption of cleaner methods; and more recently the improper handling of meat has demanded the passing of a stringent set of regulations. But with these exceptions, and perhaps also the super-

vision of bakehouses and the general oversight of food shops, no real effort has been made to enforce the adoption of hygienic principles throughout the whole process of food handling.

A certain amount of control of foodstuffs is, of course, exercised by Local Authorities under the provisions of the Sale of Food and Drugs Acts, but those provisions apply mainly to matters of quality, such as adulteration and the use of colouring and preservatives. It is quite possible for articles of food to comply with these requirements and yet have undergone considerable exposure to contamination. Goods may pass the test as regards their nature, substance, and quality and yet have been produced and handled in transport or sale in the most disgusting manner. It is such conditions that still require to be regulated.

Full credit, of course, must be given to those enterprising firms that have realised the need for proper care in production and handling and have adopted the best methods. A number have set a very high standard and have gone minutely into what may be regarded by others as trifling details. Such examples, however, go to show the need for raising the whole level of conditions.

Although some articles of food are less likely to be affected by contamination than others—for example, those that are cooked before being eaten—yet even in those cases, if only for æsthetic reasons, exposure and handling ought to be reduced to the lowest minimum. This is necessary throughout all stages, including the processes of manufacture, preparation, storage, transport, sale, and distribution.

BREAD.

Naturally bread, which is one of the staple articles of diet, takes precedence in a subject of this kind. Unfortunately, there is great room for improvement in its production and sale. While in Edinburgh there are several bakeries that are amongst the most modern and hygienic in the country, there are, at the same time, others that lag far behind.

Taken generally, except for the good examples referred to, it may be said that the standard of cleanliness in the production and distribution of bread depends in great measure on the extent of the powers capable of being enforced. At present the powers of the Local Authority in regard to bakehouses are contained in the Factory and Workshops Act, 1901. They have remained without material change for a considerable period, and this circumstance is indicative of the need for progressing with the developments that have taken place in the industry.

Amongst the sanitary provisions of the Act, those relating to the periodical cleansing of walls are so antiquated as to require such amendment as will include the use of such materials as enamelled brick or tiles as alternatives to the ordinary white-washed surfaces, and generally to deal with conditions as they are found in present-day practice. Moreover, many underground bakehouses are still in existence which, although complying with the provisions of the Act as regards lighting, ventilation, and construction, yet require more supervision than those above ground. These places have existed for many years, ranging from a century downwards, and general deterioration has taken place.

Outside the special sanitary regulations (drains, water-closets, etc.) applicable to bakeries, and apart from a general clause in regard to a bakehouse being unsuitable on sanitary grounds, there are no specific clauses dealing with such matters as undernoted:—

1. **Definition of "Bakehouse."**—Although "Baking Room" is defined in the Act as a room used for baking or for any purpose incidental thereto, there exists a diversity of opinion as to whether the whole premises used in conjunction with the bakehouse are subject to the special regulations of a bakehouse. This requires alteration.

2. **Cleanliness of Floors.**—Conditions in this respect leave much to be desired. One can only draw a comparison between the high standard usually met with in the sales shop of a baker and the low standard found within the bakehouse. In some instances floors have been found to be neglected and in a dirty state, with flour tramped on their surfaces and left to decompose gradually. Bakers seem to be averse to cleaning by water. There is no reason, however, why floors (if properly constructed) should not be regularly scraped, cleansed, and washed. It may also be mentioned that workers are becoming disinclined to undertake this cleaning in addition to their regular work, and it is often done by young apprentices who scamp such duty. Another point in relation to the cleaning of floors is that dough-troughs and all similar fittings should be mounted on strong castors or wheels so as to be readily moved for cleaning purposes.

3. **Cleanliness of Shelving, Cupboards, etc.**—No shelving or cupboards, other than those absolutely necessary, should be within a bakehouse, and these should be so constructed as to be easily moved for cleaning purposes. It is a common complaint to find shelving which has not been washed for a considerable time, and here again one has to rely on that arresting section of the Factory Act which states that every factory must be kept in a cleanly condition. This, of course, may be intended to include windows, table-tops, shelving, boards, trays, utensils, etc., but more detailed regulation is required.

4. **Disposal of Refuse.**—Properly covered receptacles of suitable size and material for the storage of all refuse matter, including floor sweepings, are necessary. Occasion has arisen where it was found necessary to warn a baker against the disagreeable effects of damping ashes within his premises, and it is no uncommon thing to find small heaps of floor sweepings lying in odd corners prior to being put into a sack and sold to pig-feeders.

5. **Exclusion of Domestic Animals.**—Occasionally animals (cats or dogs) are found within a bakehouse and, of course, this leads to these animals fouling the premises, not to mention the liability of fouling any material. No animals should be kept in or allowed access to a bakehouse.

6. **Storage Accommodation.**—In most bakeries there are separate rooms for the purpose of storing flour and other material, but in a few instances it is found that no proper provision for the storage of flour is made, and it is found lying in quantities within the bakehouse itself or in passages leading thereto. This applies more particularly to underground premises and presents a formidable difficulty to the smaller bakers. The sacks of flour are laid on a platform, and dust and dirt accumulate, forming a breeding-ground for vermin, and generally it is only when a fresh consignment of flour is received that an opportunity is obtained for cleansing. Greater care is also required in the storage of empty sacks, and it becomes a matter of some importance whether sacks should be used more than once.

7. **Care of Machinery.**—One cannot but be impressed with the far-reaching effects that machinery has had on bakehouse work. Machines are now used in almost all the operations formerly carried out by hand. The keeping of all parts of these machines in thoroughly clean order, together with all utensils, is a matter which calls for attention.

8. **Personal Ablution Facilities.**—The question of ablution facilities is one of vital importance in the bakehouse. With the exception of the larger factories, no provision is made of wash-hand basins with a suitable supply of hot and cold water. Arrangements for washing are necessary to the health and self-respect of workers engaged in food production, but all reforms along this line in the past have been purely voluntary.

9. **Cloakroom Accommodation.**—First-class cloakroom accommodation is provided in some of the more modern bakehouses, each operative being allotted a metal

locker for keeping any clothing deposited by him during working hours. In the smaller bakehouses such provision is conspicuous by its absence, and wearing apparel may be found hung in odd corners and recesses.

10. **Undesirable Employees.**—A restriction should be imposed on employers and employees alike to ensure that no person is engaged in the manufacture or the handling of bread or foodstuffs while suffering from any skin affection or other form of contagious disease. It should also be possible to prevent the employment of any person in the preparation of foodstuffs whose person or habitation does not conform to the standard of ordinary cleanliness. On one occasion a worker was found by an inspector to be suffering from scabies; and she was busily employed in the manufacture of oatcakes. Another instance was that of a baker who resided in a common lodging-house.

11. **Medical Inspection of Operatives.**—Under the Factory Act at present, all young persons under 16 years of age are presented to the certifying surgeon for medical examination within 7 days of their employment in a bakehouse. Although this ensures that only healthy young persons enter the industry, there is no provision for re-examination at any future date. In the case of adults there is no medical examination whatever. Undoubtedly it would be more satisfactory if the system of examination were extended to include adults engaged in the manufacture of food.

12. **Smoking and Spitting.**—Smoking while at work in the bakehouse is a most objectionable practice, and warnings against it have had to be given repeatedly to operatives. In some bakehouses, however, notices have been affixed by employers prohibiting smoking while in the bakehouse. This matter is not covered by legislation. It should be an offence to smoke or spit within a bakehouse.

13. **Dangers of Contamination.**—The storing of bread foodstuffs, whether manufactured or in process of manufacture, or any ingredient used in the manufacture, is important, involving a possible risk of contamination, *e.g.*, owing to the proximity of sanitary conveniences or the depositing of dust or sweepings. Such irregularities have been discovered in the course of inspection.

14. **Distribution of Bread.**—The foregoing may be said to apply mainly to the production of bread. Equally glaring irregularities occur in the general insanitary system of bread distribution. The evil is only too apparent. Bakers spend thousands of pounds on elaborate machinery which eliminates the need for handling at any stage of the making of the bread; and then the loaves are placed in the careless and often dirty hands of vanmen and boys, and most of the good is undone. Another unsatisfactory feature in distribution is the conveyance of bread on the top of vans, and the carrying of boards containing "smalls" by errand boys. By such practices, the manufactured article is exposed to the four winds of heaven and the dust of the street, frequently in full view of the public. Although bread is not the sole item in an indictment that can be made very general, the ideal solution of the present unsatisfactory method of distribution so far as the loaf is concerned may be found by resorting to delivery in a sealed wrapper. The wrapping of bread, unfortunately, has not yet been adopted in Edinburgh, although it has been tried and carried out successfully in England, and is now practised by a few large firms in Glasgow. From certain business standpoints arguments may be used against the adoption of bread-wrapping, but as the public demand for such becomes more clamant, the baker will be expected to comply in providing this practical hygienic remedy in the distribution of the staff of life.

OTHER FOODSTUFFS.

While bread has been specially referred to, it is only an example of what is required at all stages in the production and sale of foodstuffs in general, including groceries, confectionery, etc., and in the exposure and handling of such foods as fruit, vegetables, and fish.

Exposure of Food.—Certain classes of food such as tea, sugar, biscuits, dried fruit, and confectionery are commonly exposed in shop windows and shelves and become liable to contamination by dust and flies. Food is also needlessly exposed on shop counters and is subject to the handling and breathing of customers. This is avoided to some extent in the better class shops by the provision of glass or transparent paper covers. This should not be the exception but the general requirement for all shops. The aim should be to protect all food from exposure in every way possible.

Unsuitable Premises.—Many premises are quite unsuitable for the preparation or sale of foodstuffs. Especially is this the case as regards dwelling-houses or shops with houses in direct communication. Instances have been known of sickness in rooms in rear of food shops, and it has happened that the combined duties of nurse and shop attendant have been performed by one and the same person. In ordinary circumstances, all the functions of life have to be carried on in these premises, which often merely consist of a one-apartment adjunct to the shop. Their use as food shops should be prohibited.

Street Contamination.—Frequently, foodstuffs are sold from barrows, stalls, and shop windows open to the street; and still more frequently bags, baskets, and boxes of goods are placed upon the floors, or pavements at shop doors, and are thus exposed to various kinds of contamination. This should be entirely prohibited.

Wrapping of Food.—The wrapping and proper care of food conveyed by vans and messengers to the homes of consumers is often lacking. It seems curious that if the purchaser calls at the shop for certain articles of food she receives them carefully wrapped and tied in two clean papers, but if the same goods are sent home, she may receive them crudely from the unclean hands of the errand boy.

In Edinburgh, the occupiers of fried fish shops have been asked to use only clean white paper for wrapping fried fish and chip potatoes. This should be made compulsory for certain classes of goods, and the use of soiled, printed, or coloured paper should be prohibited for wrapping such articles as bread, fish, meat, meat preparations, cheese, or butter.

Restaurants.—While the City is fortunate in having well-equipped hotels, restaurants, and cafés, where due regard is paid to hygienic principles in cooking and serving, including the cleanliness of vessels and appliances, and to the tidiness and cleanly habits of employees, it is desirable that all such places where meals are prepared and sold should be properly controlled and regulated from a sanitary point of view. Butchers' back shops and small bakehouses also require special supervision.

Transport.—Much is left to be desired in the methods of transport both by road and rail. This applies not only to the want of discrimination in mixing food with other kinds of merchandise, due apparently to the absence of properly constructed food wagons, but also to the lack of proper precautions in handling and disposal.

Legislation.—Having regard to all the facts, the urgency of adopting such legislation in this country as will ensure food from exposure to contamination must be apparent. The compulsory registration of all premises used for the manufacture, preparation, storage, or sale of food seems to be desirable. This may be considered an irksome procedure by some, but it should be welcomed by all those whose premises and methods are beyond reproach. In addition to registration, regulations applicable to the conduct of food businesses are required. These should deal with the construction and sanitation of the premises, cleanliness in production, preparation, storage, selling, etc., and the methods best calculated to prevent contamination. Such regulations have already been adopted for safe-guarding the milk supply and for preventing the contamination of meat. They have also been in operation for a number of years in other countries, including America, Australia, and New Zealand.

PORT SANITARY INSPECTION.

The boarding and inspecting of vessels arriving at Leith Docks and Granton Harbour has been assiduously carried out during the year. Vessels arriving from foreign ports numbered 1574, representing 1,476,514 tons, whilst vessels arriving from home ports numbered 8338, representing 1,476,884 tons. The total number of ships, including steamers, motor, sailing, and fishing vessels, arriving in the Port Sanitary District was 9912, having a total tonnage of 2,941,398, an increase of 876 vessels and 77,551 tons over last year.

In the course of inspection, over 10,000 nuisances and defects were dealt with, and these were brought to the notice of the Masters or Officers in charge of the respective vessels concerned. Of that number, 77 per cent. were found within the crews' quarters necessitating the thorough cleansing of floors, bunks, lockers, and bedding, the removal of dampness, the improvement of light and ventilation, the extermination of vermin, and the painting of the interior surfaces. Other defects discovered called for the cleansing and repair of sanitary conveniences, the removal of garbage, the cleansing of fresh water tanks and bilges, and the washing or painting of galleys, food stores, mess-rooms, pantries, etc.

There are several factors which contribute to the large number of nuisances found in the crews' quarters. In many ships the dirty conditions appear to be due to personal factors, where the crew show indifference to the sanitary condition of their quarters. This indifference, however, is often the result of the lack of proper organisation and exercise of discipline of those in charge. Men complain, in many cases, of not being allowed sufficient time during working hours to attend to their quarters, especially in vessels of the smaller type; and in others where sufficient time is allowed for the proper cleansing of these quarters, generally little interest and, in many cases, no supervision at all is exercised over the periodical cleansing of such places. Congested and badly designed quarters, lack of proper cleansing facilities, and the nature of certain cargoes are all factors which contribute to the dirty and uncongenial conditions found in many of the crews' quarters. These conditions are not confined to British shipping only. Standards of cleanliness vary on board ships of all nationalities, and the highest is generally found on vessels provided with spacious, well-lighted and ventilated quarters, having ample washing facilities, modern conveniences, separate mess-rooms, etc., where the work on board is thoroughly organised and discipline maintained.

Preventive measures were taken on board all vessels arriving from plague areas. These consisted of rat-guarding all mooring ropes and hawsers to prevent escape of rats ashore, and the taking of rat destructive measures on board. Specimens of rats secured were submitted for bacteriological examination, and these, in all cases, gave negative results. Similar tests and results were made and obtained from rats secured in the sheds and wharves in the dock area. Thirty-three examinations were made in all for evidence of plague in rats.

During the year, periodical and systematic measures were taken for the destruction of rats ashore by the Dock Commissioners. Trapping and the laying of poisons were found to be the most effective and practical means. In all, 15,000 baits were prepared and laid. These were liberally taken, and the total rats destroyed on shore and ship numbered 1395. The measures taken on board ship consist of the laying of poisons, trapping, or fumigating. The best results were obtained when the measures taken were by specially employed persons or contractors. Members of the crew regard work of this nature as outside the scope of their duties, and have little or no interest or time to spare, with the result that poisons secured are seldom laid, traps purchased are little used, and when utilised are generally imperfectly set and neglected. Cage traps have been found set without being baited and some such excuse offered that there were no baits on board to use.

Several applications were received for fumigation certificates for vessels proceeding to ports in the United States of America, where vessels are required to fumigate every six months for the destruction of rats unless evidence can be shown that vessels entering have been fumigated within six months previous in a port approved by the U.S.A. Public Health Service, and the fumigation carried out in accordance with the American Quarantine Regulations. Leith being an approved port, seventeen such applications were dealt with throughout the year, and in each case the official certificate of the Scottish Board of Health was granted and duly viséd by the American Consul after supervision of the necessary fumigation measures. The agent used in these fumigations was Cyanogen Chloride Gas which has been found the quickest, most efficient, and least harmful to fittings or cargo.

Under the auspices of the British Social Hygiene Council, pamphlets of the Scottish Committee containing a list of treatment centres in Scotland approved by the Scottish Board of Health under the Public Health (Venereal Disease) Regulations (Scotland), 1916, were distributed on board vessels arriving in the Port Sanitary District. These leaflets are printed in several languages, offer free treatment, specify the days and hours of clinics, and thereby meet the special requirements of shipping.

The Dock Commissioners maintain a high standard of cleanliness within the Dock area, the roads, wharves, sheds, conveniences, etc., being regularly and systematically kept clean ; and the active measures taken in rat repression are much appreciated.

In the execution of the duties of the Port Sanitary Department much valuable assistance has been received from H.M. Collector of Customs, the Leith Dock Commissioners, the Granton Harbour Official, and the various shipping companies and agents, to whom this opportunity is taken of expressing my thanks and appreciation of their esteemed co-operation.

FORM A.

Amount of Shipping entering the Port Sanitary District during the year 1925.

		Number.	Tonnage.	Number Inspected.		Number reported to be defective.	Number of Notices issued.
				By the Medical Officer of Health.	By the Sanitary Inspector.		
Foreign	Steamers	1,557	1,456,937	90	389	47	2
	Motor *	8	16,681	...	5	...	...
	Sailing	9	2,896	1	2	...	...
	Fishing	...	...	...	...	...	...
Total Foreign		1,574	1,476,514	91	396	47	2
Coastwise	Steamers	4,358	1,171,296	1	278	20	...
	Motor	20	10,488	...	1	...	...
	Sailing	39	5,001	...	...	...	...
	Fishing	3,921	278,099	...	127	...	...
Total Coastwise		8,338	1,464,884	1	406	20	...
Total Foreign and Coastwise		9,912	2,941,398	92	802	67	2

* Includes mechanically propelled vessels other than steamers.

FORM B.

RATS DESTROYED IN 1925.

Number of.	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year.
Black rats } - - - - -	59	61	118	136	101	159	166	179	104	159	65	88	1395
Brown rats }													
Rats examined - - -	...	...	...	...	...	11	2	4	4	11	...	1	33
Rats infected with plague -	...	...	...	...	...	...	...	...	...	...	...	...	...
Rats not infected with plague -	...	...	...	...	...	11	2	4	4	11	...	1	33

FORM C.

PRECAUTIONS AGAINST PLAGUE.

Particulars relating to vessels "Infected" or "Suspected" or from Infected Ports.

No. of Vessel.	Date of Arrival.	Whether Infected, Suspected, or from an Infected Port.	Methods of Rat Destruction Employed.			No. of Rats killed.	Whether a Certificate of Deratisation was issued.	Remarks.
			SO_2.	H.C.N.	Traps and Poison.			
1	2	3	4	5	6	7	8	9
1	13 January	Bombay	...	...	1	12	...	...
2	19 January	Rangoon	...	...	1	...	...	...
3	19 January	Alexandria	...	...	1	5	...	...
4	26 January	Bombay	...	...	1	1	...	...
5	20 February	Calcutta	...	...	1	4	...	...
6	24 February	Bombay	...	...	1	11	...	...
7	27 February	Bombay	...	...	1	13	...	...
8	7 March	Karachi	...	...	1	9	...	...
9	14 March	Calcutta	...	...	1	5	...	...
10	27 March	Bombay	...	...	1	20	...	...
11	23 April	Bombay	...	...	1	17	...	...
12	2 May	Calcutta	...	1	...	27	...	...
13	5 May	Karachi	...	...	1	14	...	...
14	20 May	Bombay	...	...	1	...	...	...
15	27 May	Far East	...	...	1	7	...	...
16	30 May	Bombay	...	...	1	6	...	...
17	10 June	Alexandria	...	...	1	8	...	...
18	15 June	Calcutta	...	...	1	6	...	...
19	10 July	Calcutta	...	...	1	...	...	...
20	27 July	Rangoon	...	...	1	10	...	...
21	27 July	Bombay	...	...	1	...	...	...
22	4 August	Bombay	...	...	1	...	...	...
23	5 August	Calcutta	...	...	1	...	...	...
24	7 August	Bombay	...	...	1	16	...	...
25	21 August	Bombay	...	1	...	10	...	...
26	7 September	Calcutta	...	...	1	2	...	...
27	15 September	Rangoon	...	...	1	...	...	...
28	17 September	Bombay	...	...	1	12	...	...
29	23 September	Durban	...	1	...	21	...	...
30	8 October	Bombay	...	...	1	6	...	...
31	19 October	Bombay	...	...	1	4	...	...
32	24 October	Calcutta	...	...	1	3	...	...
33	9 November	Bombay	...	...	1	...	...	...
34	9 November	Rangoon	...	...	1	...	...	...
35	9 November	Rangoon	...	...	1	8	...	...
36	9 November	Durban	...	...	1	9	...	...
37	21 November	Durban	...	...	1	4	...	...
38	23 November	Calcutta via Dunkirk	...	...	...	...	...	Fumigated last Port
39	9 December	Bombay	...	...	1	...	...	...
40	14 December	Bombay via Dunkirk	...	...	...	...	...	Fumigated last Port
41	15 December	Calcutta	...	...	1	...	...	...
			...	3	36	270	...	...

FORM D.

Vessels (other than those dealt with in Form C) subjected to measures of Rat Destruction.

No. of Vessels fumigated by SO_2.	No. of Rats killed.	No. of Vessels fumigated by H.C.N.	No. of Rats killed.	No. of Vessels on which Trap, Poison, etc., were employed.	No. of Rats killed.	No. of Fumigation Certificates issued on Form "Port 10."	No. of other Certificates issued.	Remarks.
1	2	3	4	5	6	7	8	9
1	...	28	652	37	227	17	11	...

PORT SANITARY INSPECTION—Yearly Statement.

Ships boarded and inspected	1,381
Number of revisits made	892
Number of nuisances and defects discovered	10,351
Number of nuisances and defects abated	10,034
Number of communications written	48
Number of notices served	89
Number of verbal warnings	798
Number of ships fumigated or otherwise treated for vermin by owners	128
Number of rats exterminated	1,395
Number of ships provisioned with "Rat Guards" by request	420
Number of fumigation certificates granted	66
Notices of Regulations served upon Masters or Officers in charge	434

NUISANCES and DEFECTS DISCOVERED.

Dirty floors, decks, etc.	1,043
Dirty bunks and bedding	3,485
Dirty partitions and ceilings	822
Dirty lockers	2,544
Foul closets and latrines	326
Foul wash-basins	251
Foul sinks	3
Foul baths	9
Foul scuppers	76
Choked and defective latrines	31
Choked wash-basins	40
Obnoxious odours	29
Accumulations of garbage, etc.	291
Dirty fresh water tanks	264
Foul and offensive bilges	585
Dampness in quarters	12
Insufficient light and ventilation	29
Ships without Rat Guards affixed to mooring ropes	308
Presence of rats and mice	46
Presence of cockroaches and beetles	41
Presence of bugs and fleas	84
Miscellaneous	32
Total	10,351

STAFF.

The year under review has been a very busy one in all sections of the Department's work. I desire to express my cordial appreciation of the hearty co-operation and the enthusiastic services rendered by Mr Thomas Bishop, Depute Chief Inspector, and all the members of the Staff.

I am,

My Lord Provost and Gentlemen,

Your obedient Servant,

ALLAN W. RITCHIE, F.R.San.Inst.,
Chief Sanitary Inspector.

SUMMARY.

Number of complaints by citizens	3,405
„ „ „ other Departments	136
Number of nuisances discovered and reported by District Inspectors	9,987
Total number of nuisances dealt with by the Department	13,528
Of these have been abated	11,759
The remainder being in progress or under arrangement	1,769
Number of intimations of existence of nuisance served	1,881
„ notices to remove nuisances served at the instance of the Local Authority	172
„ notices delivered cautioning persons against casting garbage over windows	1,973
„ notices served on occupiers failing to take due rotation of stair sweeping and washing	695
„ notices served for the cleaning of dirty areas, cellars, etc.	356
„ notices and letters served for the whitewashing and cleansing of houses	370
„ notices and letters served for the removal of accumulation of manure	22
„ notices and letters served for the cleansing of floors, bedding, etc.	7
„ notices served in connection with defective drains and soil pipes	204

SANITARY IMPROVEMENTS IN 1925.

Nature of Nuisance.	Calton	Canongate	Newington	Morningside	Merchiston	Gorgie	Haymarket	St Bernard's	Broughton	St Stephen's	St Andrew's	St Giles	Dalry	George Square	St Leonard's	Portobello	South Leith	North Leith	West Leith	Central Leith	Liberton	Colinton	Corstorphine and Cramond	Totals
Accumulations of rubbish, garbage, and filth removed from areas, roofs, cellars, and vacant houses	33	65	12	25	14	30	28	37	81	66	77	160	56	55	291	99	62	39	12	16	10	4	5	1277
Stairs and passages in a dirty condition and cleansed by tenants	88	144	32	52	29	88	20	38	53	69	98	331	93	134	308	42	87	123	27	20	...	2	...	1878
Choked water-closets cleared	21	28	1		...	...	...	4	2	2	13	41	3	22	44	7	6	16	1	2	4	2	3	222
Water-closet apartments insufficiently lighted and ventilated—improvements effected	...	...	...	1	6	...	9	...	1	...	...	3	...	...	1	...	...	...	...	...	...	...	...	21
Defective water-closets—																								
New apparatus substituted	6	5	...	10	7	1	9	...	2	7	2	15	8	3	39	...	26	6	12	9	...	...	...	167
Improved or repaired	10	40	8	1	6	6	1	7	7	3	13	79	13	15	57	17	18	39	5	5	1	6	2	359
Partitions of w.c. apartments repaired	...	...	...	...	...	...	...	...	...	...	...	2	...	...	4	...	...	1	...	...	...	...	...	7
Water-closets introduced	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	79	5	4	90
Insanitary water-closets removed	..	...	...	1	...	...	...	...	2	1	...	...	...	...	...	...	1	...	...	1	...	2	...	8
Water-closets and sinks in a filthy condition and cleansed	4	51	...	2	...	2	2	3	1	6	13	25	1	18	48	6	3	19	2	...	...	...	2	208
Defective sinks—																								
Sinks introduced	...	...	...	2	...	...	...	...	...	1	...	6	2	1	...	...	...	...	...	...	77	5	6	100
Insanitary sinks abolished	...	...	...	...	...	...	...	...	1	2	...	...	...	...	1	...	...	...	...	...	...	...	...	4
Earthenware sinks substituted	24	9	5	...	4	6	5	3	1	8	7	7	23	5	31	2	13	21	9	20	...	...	...	193
Repaired (woodwork, etc.)	9	24	4	13	7	6	1	7	11	12	17	16	11	6	17	18	18	31	27	8	1	2	2	278
Removed to more sanitary situations	...	...	...	...	...	...	...	...	...	2	...	...	...	1	...	...	...	2	...	...	...	...	...	5
Choked sinks, wash-tubs, etc., cleared	6	7	3	3	1	2	2	3	1	1	4	13	4	10	8	5	2	4	6	1	...	...	...	86
Wash-hand basins renewed or introduced	...	...	...	6	1	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	9
Houses and shops flooded from defects on flats above	3	2	...	3	5	...	1	...	6	1	4	7	2	9	7	...	7	2	1	...	...	...	...	60
Smells from shops, etc., underneath dwellings	2	1	1	2	...	1	...	...	2	3	2	3	1	...	3	...	...	1	...	...	...	...	...	22
Animals kept in, or in close proximity to, dwellings	2	...	2	...	2	6	8	3	2	9	2	...	1	2	4	2	2	...	3	...	...	...	1	51
Carry forward	208	376	68	121	82	148	86	105	174	193	252	708	219	281	864	198	245	304	105	83	172	28	25	5045

SANITARY IMPROVEMENTS IN 1925—*continued.*

Nature of Nuisance.	Calton	Canongate	Newington	Morningside	Merchiston	Gorgie	Haymarket	St Bernard's	Broughton	St Stephen's	St Andrew's	St Giles	Dalry	George Square	St Leonard's	Portobello	South Leith	North Leith	West Leith	Central Leith	Liberton	Colinton	Corstorphine and Cramond	Totals
Brought forward	208	376	68	121	82	148	86	105	174	193	252	708	219	281	864	198	245	304	105	83	172	28	25	5,045
Houses distempered, papered, or painted by—																								
Tenants	1	7	2	1	1	...	1	...	1	1	...	4	1	6	26	2	5	8	1	1	...	...	...	69
Owners	11	23	6	23	24	9	3	23	19	25	18	78	17	43	55	1	12	6	10	4	...	4	4	418
Floors and bedding of houses in a dirty condition and cleansed by tenants	5	23	6	2	1	3	...	8	1	9	15	38	3	27	66	9	6	50	5	6	...	...	1	284
Staircases painted	106	109	38	33	39	73	18	8	58	54	13	87	70	69	203	39	85	134	69	99	2	2	2	1,410
Nuisances due to bad smells in dwelling-houses caused by escapes of gas, dead vermin, etc.	1	2	1	5	1	3	2	5	7	4	3	9	1	8	2	1	9	5	1	...	1	2	3	76
Damp houses remedied or abated	2	4	1	4	2	2	4	2	6	1	2	8	8	3	3	5	3	7	14	3	...	3	2	89
Damp and uninhabitable houses vacated	...	...	...	...	...	...	...	...	...	1	...	1	...	1	..	...	...	...	...	...	6	1	4	14
Houses overcrowded	51	98	24	3	4	10	7	7	16	26	39	213	29	94	224	35	99	151	35	27	9	1	..	1,202
Reported cases of overcrowding	1	1	1	...	1	1	...	2	2	2	2	3	1	1	3	...	5	5	...	1	...	1	...	33
Premises infested by rats	7	20	4	4	11	20	8	11	9	6	9	7	4	5	7	11	15	31	6	28	34	20	20	297
Premises infested by other vermin	4	4	6	4	...	1	2	1	4	...	6	24	5	8	16	...	5	6	...	3	...	2	...	101
Houses temporarily without water supply, due to burst pipes, etc.	12	9	1	...	...	...	...	...	16	1	18	72	...	49	75	...	52	2	...	1	...	...	...	308
Smoke in houses due to foul or obstructed vents	5	7	...	2	...	1	...	...	...	6	12	21	4	6	13	7	7	5	4	3	...	5	1	109
Accumulations of manure near dwellings	1	5	7	7	10	6	10	4	4	6	...	1	9	2	3	15	7	5	2	...	2	1	1	108
Disused cellars cleaned and closed	2	1	...	...	...	...	1	3	3	7	5	5	2	7	7	...	1	3	1	...	...	...	...	48
Choked surface traps cleared	6	2	2	1	2	66	6	2	4	3	6	8	11	4	28	5	12	20	4	4	...	2	2	200
Choked drains cleared	30	33	8	4	8	38	10	11	18	31	18	61	57	30	127	36	29	41	13	9	2	1	3	618
Surfacing of courts repaired or renewed	2	1	...	...	2	1	...	...	...	...	...	1	1	1	1	2	1	...	1	...	2	1	1	18
Drains repaired or renewed	1	...	...	2	3	2	3	5	...	2	...	9	1	2	1	...	3	1	4	...	...	...	3	42
Soil pipes repaired or renewed	3	3	1	4	1	3	1	1	1	1	1	7	3	4	4	...	5	2	...	...	...	...	...	45
Sinks, etc., waste pipes repaired or renewed	2	3	4	10	2	6	4	2	2	7	1	17	9	2	18	2	10	2	3	...	...	1	1	108
Rain-water conductors repaired or renewed	1	...	2	1	2	3	4	...	3	1	2	...	2	...	4	2	1	1	2	...	...	...	1	32
Drains, etc., introduced for houses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	2	1	8
Carry forward	462	731	182	231	196	396	170	200	348	387	422	1382	457	653	1750	370	617	789	280	272	235	77	75	10,682

SANITARY IMPROVEMENTS IN 1925—*continued.*

Nature of Nuisance.	Calton	Canongate	Newington	Morningside	Merchiston	Gorgie	Haymarket	St Bernard's	Broughton	St Stephen's	St Andrew's	St Giles	Dalry	George Square	St Leonard's	Portobello	South Leith	North Leith	West Leith	Central Leith	Liberton	Colinton	Corstorphine and Cramond	Totals
Brought forward	462	731	182	231	196	396	170	200	348	387	422	1382	457	653	1750	370	617	789	280	272	235	77	75	10,682
Fried fish shops and restaurants cleaned	...	...	...	...	...	...	...	...	...	1	...	...	...	...	2	1	...	...	...	...	...	...	...	4
Shops cleaned by tenants or owners	...	...	...	2	...	...	...	...	...	...	...	1	...	...	2	1	...	...	...	...	...	...	...	6
Floors, hearths, doors, etc., repaired	3	8	1	6	7	1	4	1	8	5	15	15	4	26	25	11	14	13	28	4	...	2	3	204
Coal bunkers repaired or provided	...	4	1	...	...	...	...	2	1	...	3	...	...	...	10	...	...	1	4	...	...	...	...	26
Windows and skylights repaired or renewed	7	23	...	27	7	2	4	4	7	9	16	27	57	30	38	16	3	13	18	2	...	5	1	316
Defective roofs repaired	1	6	1	3	4	...	2	2	7	6	12	8	14	5	15	4	12	9	10	4	...	2	2	129
Grates or ranges repaired or substituted	3	1	1	2	...	...	...	...	...	1	4	10	4	18	6	2	...	5	7	...	...	...	1	65
Plaster repaired	5	10	4	11	3	...	...	3	10	8	10	33	5	35	38	1	5	16	17	5	1	6	...	226
Tenants casting garbage over windows	6	12	4	11	10	4	9	7	8	8	6	10	2	10	7	...	4	3	1	3	...	...	1	126
Dogs and cats committing nuisance in common stairs	13	5	2	1	6	8	6	5	5	13	8	8	5	10	7	2	10	2	3	3	...	1	...	123
Persons committing nuisance in common stairs	2	...	...	4	...	...	...	...	...	1	4	1	1	3	...	...	...	1	...	...	...	...	...	17
Water pipes repaired	2	2	2	2	3	2	1	3	2	1	1	4	...	3	10	2	3	5	1	...	1	...	...	50
Areas, courts, etc., limewashed	...	...	...	...	...	...	1	...	...	2	...	...	...	...	...	2	...	...	...	...	...	...	...	5
Boiler of kitchen ranges renewed	1	...	1	1	1	...	...	...	...	...	...	1	...	...	2	1	...	1	...	...	...	...	...	9
Pails provided for privy closets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	2	6
Back to back houses converted into through houses	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	14	...	...	14
Piggery premises improved	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	2	...	...	3
Schools—Wash down w.c.'s substituted	...	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12	...	...	18
Miscellaneous nuisances	6	8	7	10	6	9	9	11	9	3	8	10	4	9	6	6	10	8	9	4	1	3	4	160
Cisterns—																								
Found dirty	453	3	2	356	...	...	2	1	2	3	364	6	1	3	4	1	3	1	...	1	...	...	...	1,206
Without covers	9	1	1	17	...	...	...	...	...	...	...	1	...	2	1	1	...	1	1	3	...	...	...	38
Repaired or renewed	4	3	2	2	...	2	1	1	2	2	3	8	4	4	9	...	9	3	...	...	...	...	...	59
Waste pipes disconnected from drains	1	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Removed to more sanitary situation	...	...	...	...	...	...	3	...	...	...	.	...	...	...	4	...	...	...	1	...	...	...	...	8
In insanitary situation—abolished	...	...	...	...	...	...	9	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	9
Branches taken off the main	...	...	...	11	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...	...	14
Totals	978	817	211	707	243	424	221	240	409	451	876	1526	558	811	1936	422	690	871	381	301	266	100	89	13,528

VETERINARY DEPARTMENT,
PUBLIC HEALTH CHAMBERS,
EDINBURGH, *June* 1926.

To

The Lord Provost, Magistrates, and
Council of the City of Edinburgh.

MY LORD AND GENTLEMEN,

I beg to submit herewith my Report on the work of the Veterinary Department during the year 1925.

The appended statements and tables have been drawn up to show details of the various sections of work carried out during the year.

INSPECTION OF MEAT AND OTHER FOODS.

(a) Abattoirs.—Constant supervision has been maintained throughout the year at the Gorgie and Leith Abattoirs. The number of animals passed through the Slaughterhouses was 180,076 as compared with 171,355 in 1924, an increase of 8721. Sheep and calves increased by 7833 and 237 respectively, whilst cattle and swine showed increases of 34 and 617.

(b) Fat Stock Markets.—The usual attendance has been given to the weekly fat stock sales, and the animals exposed in the markets have been brought under close supervision. Twenty-four animals were found in the markets in an obviously sick or injured condition, and were removed to the abattoirs and there slaughtered under supervision.

(c) Wholesale Dead Meat Markets.—During the year, fresh and frozen meat approximately equivalent to 46,129 carcases was imported into the City for sale in the wholesale dead meat markets, in addition to boneless beef of an estimated weight of 170 tons. Approximately 75 per cent. of the imports were represented by frozen and chilled meat imported from abroad, and the balance was derived from home sources.

(d) Retail Shops, Street Hawkers, etc.—During the year, 5936 visits of inspection were paid to retail shops, cold stores, and to barrows, carts, etc., of street hawkers.

UNSOUND AND DISEASED FOODSTUFFS CONDEMNED.

Five hundred and twenty-four carcases and 620 parts of carcases were condemned in the City abattoirs as unfit for human food on account of disease or injury, representing a total weight of approximately 92 tons. This is an increase of 3 tons as compared with the previous year. Tuberculosis was responsible for 739 or 64·5 per cent. of these seizures, as compared with non-Tuberculous disease and injury, on account of which 405 seizures were made. 16,314 organs were condemned for various causes, as shown in the appended Tables, Tuberculosis being responsible for 40·30 per cent. of the seizures. The estimated weight of organs condemned and destroyed is 52 tons.

One hundred and ninety parcels of unsound food-substances were seized in shops, wholesale markets, etc., representing a weight of over 12 tons. Details of these seizures will be found in Table 9, page 119.

Reference may be made to the very great increase during the past year in the numbers of bovine livers condemned and destroyed on account of invasion with the liver fluke (Fasciola hepatica). This parasite was responsible for heavy losses amongst sheep stocks during the spring and preceding winter, the increased activity of the fluke being favoured by the very wet conditions which prevailed. The economic importance of the fluke in relation to sheep is well known, but less attention has been directed to the loss for which it is responsible in cattle. The direct loss may be illustrated by the numbers of bovine livers condemned, which during the past year increased approximately 100 per cent. as compared with the preceding year. Expressed in cash terms, fluke was responsible for the destruction of bovine livers to a value exceeding £2000.

PERCENTAGE INCIDENCE OF TUBERCULOSIS.

The percentage incidence of tuberculosis in the different classes of animals as disclosed by post-mortem examination during the year is shown in Table 7, page 119. These figures vary a little from year to year, but the average over a period of years remains fairly constant, and shows approximately 8·5 per cent. of all cattle to be affected with tuberculosis. The incidence is lowest in oxen and highest in cows, being on an average 3·5 per cent. for the former and 48 per cent. for the latter. The tuberculosis rate in swine is fairly constant at about 5 per cent. During the year, 0·73 per cent. of the cows slaughtered were found to be affected with tuberculous mastitis. This compares with an average of 0·79 per cent. during the last five years.

Tuberculosis is responsible for approximately 80 per cent. (by weight) of the carcases condemned and 50 per cent. of edible offal.

DISPOSAL OF CONDEMNED FOODSTUFFS.

The Market Committee have now installed an Iwel dry process plant for the economical treatment and sterilisation of condemned meat and offal together with a blood-drying machine. Work was commenced with the new plant in June. A marked improvement has resulted in the quality and saleability of the by-products recovered, with a consequent increase of revenue which is credited to the Slaughterhouse account. Stated approximately, saleable by-products were recovered from the new Iwel sterilisation plant during the period June to December as follows :—Tallow, 13 tons 11 cwts. ; Meat and Bone Meal, 22 tons 3 cwts. ; Second Grade Meat Meal, 4 tons ; Blood Meal, 36 tons 10 cwts. The value of these by-products exceeded £1000.

PORT FOOD INSPECTION.

The usual supervision has been maintained as to the condition and soundness of foodstuffs landed at the Port of Leith. The numbers of fresh pig carcases landed at the Port increased from 12,073 in 1924 to 74,054 in 1925, rather more than a sixfold increase. The majority of these pigs have their origin in Holland, but it has been noted during the past year that an increasing number of pigs have been imported from Belgium through Dutch ports. The ships engaged in this trade for the most part are not provided with refrigerating rooms, and as a consequence the trade contracts to very small proportions during the warm months of the year. To a small extent the imported pigs are sold as fresh pork, mainly they are distributed to bacon factories throughout Scotland for curing, to be sold later as "home-cured bacon." The Dutch imports are additional to the usual large shipments of Danish bacon.

In the month of May your Chief Veterinary Inspector paid a visit to Holland and was afforded the opportunity of seeing at first hand the methods and procedure of inspection followed in many of the slaughterhouses engaged in the export trade. Dr Berger, Chief Veterinary Officer of the Dutch Government, and his Staff very kindly arranged facilities for these visits, and I am indebted to them for their guidance and assistance and for much information as to the organisation which has been provided in Holland for meat inspection, particularly in relation to export to Great Britain.

In the past, attention has been directed to the possibility of the introduction of scheduled contagious animal disease through the agency of fresh pig carcases imported into this Country from the Continent. Recent events have shown that this danger is real, and the danger is relatively greater in relation to fresh meat imported from countries in close proximity to Great Britain than in relation to similar imports from more distant countries. In the former case the carcases arrive at British ports within 60 hours or less of the time of slaughter. During this period the activity of the virus of a disease such as foot-and-mouth disease will be little if at all impaired. On the other hand, a journey entailing a voyage of from two to three weeks will proportionately lessen the risk of introducing active infection by means of carcases, since it is well known that the virus of foot-and-mouth disease, apart from a living host, remains active for only a relatively short period of time. It cannot be said, however, that the risk will be entirely removed, and no doubt the cold storage, which is indispensable to long sea transport, will tend to lengthen the duration of viability of the virus.

It is to be remembered, in this connection, that each individual carcase when imported bears an officially recognised stamp or label which is the equivalent of a certificate to the effect that the meat has been inspected in the country of origin by competent officers, and that it is derived from animals which are free from disease. Experience has unfortunately shown that some at least of these certificates of inspection in the country of origin can only be accepted with a considerable amount of reserve. It is the accepted practice at all ports to examine approximately 10 per cent. of each consignment of imported food when discharged from the ships on to the quay, and to extend the examination if need be to each individual item of the whole consignment in the event of the 10 per cent. inspection disclosing evidence which makes that course desirable. Further, port food inspection does not relieve the Local Authorities to whose districts imported foods are distributed of their responsibilities in relation to the inspection and soundness of such foods after they reach their destinations. It will be obvious, for instance, that food to which no exception can be taken at the port may be delivered at its destination, after a journey by road or rail, in a condition in which it is unsound and quite unfit for sale or use as human food. In warm weather fresh meat and soft fruit are particularly liable to undergo rapid deterioration during transport. Under existing conditions, port inspection of imported carcases of animals, whether fresh or frozen, is concerned solely with the public health aspect of the question, and only very indirectly does it bear any relation to the control or prevention of the importation of animal disease. It ought now to be a matter for very serious consideration as to whether these two functions should in future be conjoined and additional powers of control be granted so as to embrace carcases which although healthy have by contact with those which are diseased become media for the dissemination of infection in animals. During the year, 34 pig carcases were condemned at the Port and re-exported to the country of origin. The total weight of unsound foodstuffs dealt with at the Port of Leith amounted to approximately 142½ tons, and comprised game, soft fruit, vegetables, flour, sugar, etc.

TOTAL WEIGHT OF UNSOUND FOODSTUFFS.

The total weight of unsound foodstuffs dealt with by the Department during the year at the abattoirs, docks, and other premises in the City amounted to 246 tons 18 cwts. 39 lb., exclusive of edible offal, the weight of which has been estimated at 52 tons.

INSPECTION OF COWSHEDS AND DAIRY COWS.

The number of licensed dairy byres in the City on the 31st December was 155, a decrease of 5 as compared with the previous year. Fifteen licences were given up during the year and 10 new licences were granted. The cow population in the byres

decreased by 129 to 4301. The number of newly calved cows falling under observation when exposed for sale in the Live Stock Markets of the City was 4047 compared with 3961 in the previous year.

During the year, 88 cows were removed from dairy byres under the powers contained in the Edinburgh Municipal and Police (Amendment) Act, 1891, and the Tuberculosis Order of 1925. Of these, 15 were affected with tuberculosis of the udder and 11 with advanced clinical tuberculosis. Twenty-four of these tuberculous cows are known to have been slaughtered, but it has not been possible to obtain definite information as to the disposal of the remaining 2. Sixty-two cows suffering from non-contagious disease, but which injuriously affected the milk, were removed from dairy byres.

The year has been marked by the reintroduction of the Tuberculosis Order by the Ministry of Agriculture and by the issue of an Order by the Scottish Board of Health under which the Milk and Dairies (Scotland) Act, 1914, became operative on 1st September. It will be remembered that the Tuberculosis Orders of the years 1913 and 1914 were suspended on the outbreak of war in 1914. Local Authorities and many other public bodies after the conclusion of the war urged successive governments to reintroduce the Order, and it was only in September that these representations produced the desired result. Although administered by the Diseases of Animals Branch of the Ministry of Agriculture, the Tuberculosis Order is in effect an important public health measure and complementary to the Milk and Dairies (Scotland) Act. Until the Order became operative, the owner of a tuberculous cow which had been demonstrated to be a cause of the tuberculous infection of milk was at liberty to dispose of the animal in such manner as he thought fit. The Milk and Dairies (Amendment) Act of 1922 rendered the owner of such an animal liable to heavy penalties, if he sold her milk or offered it for sale for human consumption, unless he showed that he could not with reasonable care have ascertained that the cow was giving tuberculous milk. But the necessary evidence on which to found a prosecution in these cases was difficult to obtain, and in practice it frequently happened that these cows were simply transferred from one district to another. They continued to supply milk for human consumption through another channel, and not uncommonly to the same district from which they had originally been moved. The Tuberculosis Order makes certain forms of tuberculosis in cattle a notifiable disease, and, subject to the payment of compensation, gives Local Authorities the power to slaughter bovine animals which are

(1) Affected with tuberculosis of the udder, or which are giving tuberculous milk.

(2) Subjects of tuberculous emaciation.

or (3) Affected with chronic cough and show definite clinical evidence of tuberculosis.

The animals which are responsible for the tuberculous infection of milk fall into one or other of these three categories. It may therefore be confidently anticipated that the Tuberculosis Order will exercise a direct influence in reducing the incidence of these forms of human tuberculosis which are attributable to infection from bovine sources.

At the close of the year the arrangements for operating the Milk and Dairies (Scotland) Act had not been completed. In many respects, however, the Act made little change in the system of milk supervision which has been in operation in the City for many years. It did, however, modify the system of registration and conferred on the Local Authority the power to refuse or to cancel registration if the person or the premises were or became unsuitable for carrying on the trade of dairykeeping. It became necessary in terms of the Act to prepare new bye-laws applicable to dairy premises, and advantage has been taken of the opportunity to remodel the existing bye-laws and to bring them up to date. Reference should be made to one feature of the Act from which considerable benefit must accrue to the City. For the first time it imposed on all Local Authorities an obligation to make periodical inspections of all

premises and dairy stock, and thus ensured a more uniform and effective supervision than had previously existed in the producing districts beyond the City boundaries from which over fifty per cent. of the City's milk supply is derived.

An important decision has been reached to establish a tubercle-free herd at Colinton Mains for the supply of milk to the City Hospitals. Some time must elapse before the necessary arrangements can be made, but the decision is welcomed as a step in the right direction.

The arrangements with the Local Authorities of Midlothian and Peebles in connection with the application of the tuberculin tests and the clinical supervision of herds licensed under the Milk (Special Designations) Orders for the production and sale of certified milk have continued in force. The results of the tuberculin tests were satisfactory and they were duly reported to the respective Local Authorities. The licence for the certified herd at Gracemount in the City has been renewed. Commencing with a stock of 8 cows, the demand for milk from this herd, carrying as it does a guarantee of freedom from tuberculous infection as well as of hygienic quality, has led to steady growth, and in a couple of years the herd has increased to over 30 cows in milk. During the year an application for a producer's licence for the sale of Grade A milk was granted and became operative on 1st January 1926.

The Public Health Committee decided to repeat the Clean Milk Competition which was held during the winter months, 1924-25, the second competition to extend over a period of six months from 1st January 1926. The conditions of the second competition were substantially the same as for the first. At the request of the Committee, Mr William Lindsay, Edinburgh, again agreed to act as a judge in collaboration with your Chief Veterinary Inspector and Mr E. J. H. Sewell, Senior Assistant Veterinary Inspector.

It was hoped that the number of entrants for the second competition would show a considerable increase as compared with the first, but in this respect some disappointment has been experienced. At this stage, however, it can be stated that the competitors have more than compensated for their small numbers by the keenness with which they have entered into the spirit of the competition. Further, the results achieved by certain competitors reflect the highest credit on their work, but it would be premature to further discuss these results before the termination of the competition.

BACTERIOLOGICAL LABORATORY.

Summary by Mr W. Jowett, F.R.C.V.S., D.V.H., of work performed in the Laboratory during 1925.

A.—BACTERIOLOGICAL EXAMINATION OF MILK.

During 1925, attention to the bacteriological examination of milk samples—as carried out during the two or three previous years—has been continued, and indeed extended. The necessity for the extension of this class of work arose partly from an increase in the number of the licensees supplying "graded" milks to the City, and also to the two "clean milk competitions," one of which concluded in the earlier months of 1925, whilst the second came into operation in January 1926.

Many of these clean milk competition samples are included in the subjoined tables under the heading of "Ordinary market milk," and in view of this, the present table of figures is hardly comparable with that for "Ordinary market milk" published in former reports, for the reason that in this instance many of the so-called ordinary market milk samples shown had originated from sources where *special* efforts had been made to ensure cleanliness and freedom from contamination—efforts which, no doubt, had not been made in former years.

A recent report by a bacteriologist in one of the Southern Counties in England contains a statement to the effect that coliform organisms are invariably present in quantities of one cubic centimetre of every sample of ordinary market milk tested. Reference to the subjoined tables will show that amongst the ordinary market milk samples collected and tested in Edinburgh during the past year there were a small number in which coliform organisms were certainly absent in the amount of one cubic centimetre of each of such samples when submitted to the test (*i.e.*, the presumptive coli test), thus, these samples attained a high standard of cleanliness from this particular point of view and they compare very favourably with those from some other centres. Moreover, evidence furnished by the test of such samples demonstrates the great practical utility of "Clean Milk Competitions" as a factor in the hygienic control of milk supplies.

In the table appertaining to Ordinary Market Milk samples, reference to the fourth column therein will show that quite a lengthy period—in many instances 18 hours—had elapsed between arrival of the sample at the retailer's and examination at the laboratory. It should be explained, in this connection, that samples for the clean milk competition were collected at the producer's premises, and, on arrival at the laboratory, they were stored in sealed containers for a uniform period—usually from twelve to eighteen hours—under conditions identical in each series of tests, and, without exception, at a temperature approximating, but not exceeding, 60° F. They were then placed on ice or examined forthwith. The conditions of storage after collection would thus approximate—at any rate in so far as concerns the duration of such storage and temperature conditions—to those in a retailer's shop or in a household; this is mentioned in order to show that the high standard of cleanliness evidenced by many of the samples was such as might reasonably be expected in a corresponding sample purchased by the consumer in the ordinary course and held for an average period of time under quite ordinary conditions prior to its consumption. The storage and temperature conditions demonstrate, moreover, that the test was not carried out in such manner as to favour the producer and to obtain merely a "show" of attractive figures. It follows from the foregoing that many of the samples examined reflect credit on the producers concerned.

Turning to the next tables, these, as shown, refer to Certified and Grade "A" Milk samples respectively. These do not call for any special explanation or comment beyond the statement that the number of samples examined was greater during 1925 than in previous years, and the demand and supply of such "graded" milk in the City would evidently appear to be on the increase.

With regard to the table of figures under the heading of "Pasteurised Milk," it should be mentioned that in the standard laid down in the Milk (Special Designations) Order, 1923, a sample to conform to these regulations is required merely to contain not more than one hundred thousand (living) micro-organisms per cubic centimetre—*i.e.*, after pasteurisation and before its delivery to the consumer. For this particular article there is not any specified standard for the content in coliform organisms. This notwithstanding, it is the custom in this laboratory to examine all milk samples (including pasteurised milk) for the coliform content, in addition to making a general enumeration of the bacteria present.

On reference to the table for Pasteurised Milk, attention is at once arrested by the large proportion of such milk samples in which coliform organisms were found present in one-tenth of a cubic centimetre. One is aware of the fact that certain strains—a very small percentage, however—of coliform organisms have been found able to survive the temperature generally used in commercial pasteurisation, but in our case the number of milk samples in which coliform organisms were found appears unduly high, and the inference drawn by the writer is that the temperature to which the local milk samples had been submitted in the process of pasteurisation was probably such as barely to attain the minimum requirement only, namely, a temperature of 145° F.

(approximately 63° C.) for the necessary period (half an hour), rather than to approach the safer maximum, namely, 150° F. (approximately 65° C.), for a like period. In otherwords, whilst the required minimum standard *may* have been in force, it was probably only *barely* the minimum, and without any allowance for a "safety margin."

The object of those concerned in the pasteurisation of milk in subjecting that fluid to but the bare minimum temperature required by the regulation—or to a still lower temperature, or for a period less than the necessary thirty minutes—is, doubtless, with a view to conserving the "cream line," and also, possibly, in the fear that any overheating might have a prejudicial effect on the appearance, taste, and flavour of the milk. As a matter of fact, as concerns the last mentioned point, it has been shown that the taste and flavour of milk are hardly, if at all altered by heating up to and at 65° C. under proper precautions. With regard to the "cream line," it is the case that this does become somewhat reduced in milk which has been subjected to an efficient pasteurisation temperature, and whilst milk which exhibits a reduced "cream line" may be no worse thereby from the dietetic standpoint, the purchaser has been accustomed to look for, and to demand a well marked "cream line."

From the foregoing it will be evident that there undoubtedly exists a temptation to underheat milk in the process of pasteurisation.

It is perhaps hardly necessary to state that, actually, much more importance attaches to the effect of the heating (pasteurising) process on any tubercle bacilli which may be present in the milk rather than on the ubiquitous coli organisms, but in this connection the remarks of a recent writer on this subject, namely, Cuthbert Dukes, M.D., M.Sc., D.P.H. (Lecturer on Bacteriology, King's College, London), may be quoted. This observer states as follows :—

"The consensus of opinion among scientific workers is that few tubercle bacilli survive a temperature of 60° to 65° C. (approximately 140° to 150° F.) for 30 minutes, and those which may escape destruction have their virulence so impaired as to make them harmless. Whether or not this result is attained by ordinary commercial pasteurisation is difficult to establish by direct experiment, but indirect evidence suggests very forcibly that it will not be achieved with any but the most efficient appliances. If an excretal organism such as B. coli survive the ordeal of pasteurisation successfully, how shall we expect by this process certainly to rid milk of the more resistant tubercle germ?

"The statement, so frequently repeated, that 'pasteurisation destroys pathogenic bacteria and renders milk safe,' cannot be accepted without qualification. We admit that an appliance so designed that all the milk is heated to 65° C. (approximately 150° F.) for a full 30 minutes and promptly cooled, yields a wholesome, and, to the best of our knowledge, a harmless milk; but, until bacteriological analysis proves incontrovertibly that the result has been obtained by the appliances in common use, we cannot afford to accept the statement that milk 'has been pasteurised' as a guarantee that it contains no living germs of infectious disease."

Ordinary Market Milk.

No.	Month.	Temperature on arrival at Lab.	Approximate age of milk at time of examination (in hours).	Approximate No. of Micro-organisms per c.c.	Coliform Organisms.	
					Present in	Absent in
					c.c.	c.c.
196	January	60° F	18	35,800	...	1
198	Do.	57° F	18	95,000	...	1
199	Do.	56° F	18	46,000	...	1
201	Do.	60° F	18	83,400	1	0·1
202	Do.	60° F	18	482,000	0·01	0·001
203	Do.	60° F	18	61,000	0·001	...
204	Do.	60° F	18–19	93,600	1	0·1
205	Do.	60° F	18	209,000	0·001	...
206	Do.	60° F	18	35,000	0·001	...
207	Do.	60° F	18	74,000	0·01	0·001
208	Do.	...	17	2,600	...	0·1
209	Do.	...	18	56,000	0·1	0·01
210	Do.	...	17–18	38,000	0·1	0·01
213	Do.	...	18–19	190,000	1	0·1
214	Do.	...	18	196,000	0·001	...
215	Do.	...	18–19	25,200	0·01	0·001
216	Do.	...	18	59,600	...	1
217	Do.	56° F	...	36,000	0·1	0·01
218	Do.	...	12	2,470	...	0·1
219	Do.	...	12	4,090	...	0·1
222	February	...	18–19	1,096,000	1	0·1
223	Do.	...	...	58,700	0·1	0·01
227	Do.	...	...	35,700	1	0·1
228	Do.	...	18	46,050	1	0·1
229	Do.	...	18	120,000	0·1	0·01
233	Mareh	...	12	10,840	1	0·1
234	Do.	...	12	5,470	...	1
235	Do.	...	12	1,990	...	1
236	Do.	...	18	1,224,000	0·001	...
237	Do.	...	18	89,000	0·001	...
238	Do.	...	18	345,000	0·001	...
239	Do.	...	...	151,000	0·01	0·001
240	Do.	...	...	634,000	0·001	...
242	Do.	...	18	262,000	1	0·1
243	Do.	...	18	1,860	...	1
244	Do.	...	18	88,500	1	0·1
245	Do.	...	18	56,500	0·1	0·01
246	Do.	55° F	17–18	55,600	...	1
253	April	50° F	...	39,400	...	1
268	May	48° F	18	45,400	...	0·1
274	June	60° F	18	20,100	0·1	...
277	Do.	...	18	294,600	0·01	0·001
279	Do.	...	18	149,000	0·001	...
284	Do.	...	18	203,600	0·1	0·01
285	Do.	...	18	79,200	0·001	...
288	August	...	5	6,280	0·01	...
299	Do.	55° F	18	391,000	0.0001	...
302	Do.	...	18	357,000	0·001	...
308	September	53° F	...	7,600	...	0·01
309	Do.	60° F	12	130,500	0·01	0·001
310	Do.	60° F	12	70,000	0·01	0·001
311	Do.	59° F	12	720,000	0·001	0·0001
312	Do.	...	12	1,500,000	0·0001	...
313	Do.	...	12	76,000	0·1	0·01
317	October	...	20	89,000	0·1	0·01
324	Do.	...	18	3,000	...	0·01
331	Do.	...	18	19,000	0·001	0·0001
336	November	65° F	18–19	20,400	0.00001	...
338	Do.	68° F	18	9,760	0·01	...
341	Do.	53° F	12	660,000	0·1	0·01
342	Do.	...	16	21,000	0·001	0·0001
352	December	...	18	19,200	...	0·01

"Certified" Milk.

The standard for certified milk laid down in the Milk (Special Designations) Order, 1923, is as follows:—

"On a sample being taken at any time before delivery to the consumer, the milk shall be found to contain (*a*) not more than 30,000 bacteria per cubic centimetre, and (*b*) no coliform bacillus in one-tenth of a cubic centimetre."

No.	Month.	Temperature on arrival at Lab.	Approximate age of milk at time of examination (in hours).	Approximate No. of Micro-organisms per c.c.	Coliform B.	
					Present in	Absent in
					c.c.	c.c.
195	January	...	...	1,220	...	0·1
197	Do.	...	...	1,920	...	0·1
200	Do.	50° F	...	12,700	...	0·1
211	Do.	57° F	...	1,400	...	0·1
220	Do.	57° F	12	16,600	...	0·1
221	February	57° F	12	2,510	...	0·1
224	Do.	56° F	18	1,825	...	0·1
225	Do.	57° F	12	9,785	...	0·1
230	Do.	...	12	5,350	...	0·1
249	March	57° F	12	1,910	...	0·1
250	Do.	58° F	12	1,890	0·1	...
251	Do.	56° F	12	4,700	...	0·1
252	Do.	56° F	18	3,800	0·1	...
254	April	50° F	12	2,010	...	0·1
255	Do.	...	18	2,180	...	0·1
256	Do.	55° F	12	270	...	0·1
257	Do.	55° F	...	230	...	0·1
260	Do.	...	...	20,900	...	0·1
261	Do.	57° F	...	18,700	...	0·1
263	Do.	55° F	...	15,600	...	0·1
265	May	61° F	...	4,260	0·1	...
266	Do.	60° F	12	2,100	...	0·1
269	June	58° F	12	2,640	...	0·1
270	Do.	59° F	12	3,010	...	0·1
271	Do.	59° F	18	2,470	...	0·1
272	Do.	57° F	12	5,640	0·1	...
276	Do.	63° F	12	1,410	...	0·1
280	Do.	58° F	...	25,400	0·1	...
281	Do.	59° F	12	130,600	0·1	...
282	Do.	58·5° F	12	2,800	...	0·1
283	Do.	65° F	12	4,700	...	0·1
289	August	65° F	...	1,860	0·1	...
292	Do.	69° F	12	81,100	0·1	...
293	Do.	60° F	12	8,040	0·1	...
294	Do.	69° F	...	5,120	...	0·1
296	Do.	66° F	...	12,000	0·1	...
297	Do.	60° F	18	14,840	0·1	...
298	Do.	53° F	12	12,600	...	0·1
303	Do.	61° F	12	3,400	...	0·1
304	Do.	60° F	12	1,190	...	0·1
305	Do.	58° F	...	1,070	...	0·1
318	October	64° F	12	158,400	0·1	...
320	Do.	61° F	...	6,600	0·1	...
322	Do.	55° F	...	2,800	0·1	...
325	Do.	55° F	...	1,020	...	0·1
327	Do.	58° F	...	9,320	0·1	...
328	Do.	58° F	12	1,900	...	0·1
329	Do.	57° F	...	2,860	0·1	...
334	November	53° F	18	4,800	...	0·1
339	Do.	53° F	...	4,260	...	0·1
343	Do.	53° F	...	3,300	...	0·1
344	December	44° F	12	4,880	...	0·1
345	Do.	46° F	18	650	...	0·1
346	Do.	46° F	12	430	...	0·1
348	Do.	...	18	2,200	0·1	...
349	Do.	46° F	12	1,450	0·1	...
351	Do.	47° F	12	4,950	0·1	...

Grade "A" Milk.

The standard for Grade "A" milk laid down in the Milk (Special Designations) Order, 1923, is as follows:—

"The milk shall be produced and treated under such conditions that on a sample being taken at any time before delivery to the consumer the milk shall be found to contain (*a*) not more than 200,000 bacteria per cubic centimetre, and (*b*) no coliform bacillus in one-hundredth of a cubic centimetre."

No.	Month.	Temperature on arrival at Lab.	Approximate age of milk at time of examination (in hours).	Approximate No. of Micro-organisms per c.c.	Coliform B.	
					Present in	Absent in
					c.c.	c.c.
212	January	...	12	18,000	...	0·01
232	March	58° F	12	9,800	...	0·01
241	Do.	58° F	12	8,900	...	0·01
259	April	56° F	12	7,300	...	0·01
262	Do.	58° F	12	15,100	...	0·01
264	Do.	58° F	12	65,600	...	0·01
267	May	62° F	12	5,640	...	0·01
275	June	65° F	12	31,600	...	0·01
291	August	65° F	12	2,680	...	0·01
295	Do.	68° F	18	275,000	0·01	...
300	Do.	62° F	12	1,320	...	0·01
307	September	52° F	12	9,700	...	0·01
314	Do.	...	12	142,000	0·01	...
316	Do.	...	12	10,200	...	0·01
319	October	64° F	12	4,600	...	0·01
323	Do.	58° F	12	34,800	0·01	...
324	Do.	...	12	3,000	...	0·01
330	Do.	57° F	12	12,400	0·01	...
335	November	...	12	43,400	0·01	...
346a	December	53° F	12	see note below *	...	0·01
347	Do.	47° F	12	2,640	...	0·01
352	Do.	...	17	19,200	...	0·01
353	Do.	57° F	12	12,180	0·01	...

PASTEURISED MILK.

The standard for Pasteurised milk laid down in the Milk (Special Designations) Order, 1923, is as follows:—

"On a sample of the milk being taken after pasteurisation and before delivery to the consumer, the milk shall be found to contain not more than 100,000 bacteria per cubic centimetre."

No.	Month.	Temperature on arrival at Lab.	Approximate age of milk at time of examination (in hours).	Approximate No. of Micro-organisms per c.c.	Coliform B.	
					Present in	Absent in
					c.c.	c.c.
226	February	56° F	12	28,600	...	0·1
231	Do.	...	12	15,440	...	0·1
247	March	...	12	7,100	...	0·1
248	Do.	...	12	8,000	...	0·1
258	April	55° F	12	3,790	...	0·1
273	June	61° F	12	12,600	...	0·1
278	Do.	59° F	12	8,384,000	0·1	...
286	Do.	...	12	658,000	0·1	...
287	Do.	...	12	270,000	0·1	...
290	August	...	12	25,000	0·1	...
301	Do.	59° F	12	93,000	0·1	...
306	September	52° F	12	8,220	0·1	...
307	Do.	52° F	12	9,700	...	0·1
315	Do.	...	12	12,000	0·1	...
321	October	55° F	12	56,500	0·1	...
332	Do.	56° F	12	see note below *	...	0·1
337	November	50° F	17	12,800	0·1	...
340	Do.	53° F	12	see note below *	0·1	...
350	December	...	12	60,200	...	0·1

* The micro-organisms present were uncountable, a sporing bacillus present in the milk having overgrown the cultures and rendered enumeration impracticable.

B.—BACTERIOLOGICAL EXAMINATION OF OTHER MATERIALS.

Material.	Number Examined.	Object.	Nature of Examination.	Result.
Blood preparations	116	Diagnosis	Microscopical (102) Cultural (13)	Anthrax— Positive . 1 Negative . 115
Skin scrapings	8	Diagnosis	Microscopical	"Mange" (scheduled forms)— Positive . 2 Negative . 6
Do.	4	Diagnosis	Microscopical	"Mange" (rabbit)— Notoldres cuniculi 1 Dog— Demodex folliculorum 1 "Ringworm" Microsporosis 2
Milk from individual cows	179	Detection of tubercle bacilli	Microscopical	Positive . . 15 Negative . . 164
Expectorate (cow's)	7	Do.	Do.	Positive . . 4 Negative . . 3
Urine (cow's)	4	Do.	Do.	Positive . . 1 Negative . . 3
Milk from individual cows	7	To determine the presence of tubercle bacilli	Biological	Positive . . 5 Negative . . 2
Do.	25	To determine the presence of other specific organisms	Cultural	Streptococci . 7 Staphylococci . 4 C. pyogenes . 13 "Yeasts" . . 1
Mixed milk from country districts	74	To determine the presence of tubercle bacilli	Biological	Positive . . 6 Negative . . 68
Diseased organs and material	22	Diagnosis	Microscopical and in certain instances cultural and biological in addition	Tuberculosis . 8 Swine erysipelas 1 B. necrosis . 3 Str. actinomyces 1 Actinobacillosis 2 Coccidiosis . 1 Corynebacterium pyogenes infection 2 Johne's disease 1 Lymphomatosis 2 Undetermined . 1
Meat and Bone Meal samples	3	To determine the presence of tubercle bacilli	Biological	Negative . . 3
Other material for diagnosis, etc.	5	...	...	...

The case of "ringworm" referred to in the above Table is worthy of note, in that in this instance there was clear evidence of the transmission of the disease from the infected animals (dogs) to human beings with whom they had been in contact.

Material from the skin of the two infected dogs was obtained, and from this the causal organism was isolated and cultivated artificially in the laboratory, for the purpose of identification. It proved to be the disease-producing fungus known as Microsporon audouïni (*var.* canis), otherwise the microsporum caninum, a common cause of "ringworm" in the dog.

Cases of transmission of "ringworm" from the lower animals to mankind have, of course, been recorded hitherto, the instance here mentioned is nevertheless of interest.

One other item in the above Table to which attention may be specially directed is the percentage of country milk samples (sampled on their arrival at the railway stations in Edinburgh) which, on being submitted to the Biological test, were proved to contain tubercle bacilli. This worked out at 8·8 per cent.

It may be of interest to compare this figure with those of previous years in Edinburgh and also with figures published by one of the larger cities in England (Manchester), the published records of this last mentioned city being readily available and covering a lengthy period.

With regard to Edinburgh, the percentage of tuberculous milk samples detected amongst those sampled on arrival from the country was as follows :—

1918	8·4 per cent.	1922	2·0 per cent.
1919	9·3 „	1923	5·2 „
1920	9·9 „	1924	14·0 „
1921	11·6 „	1925	8·8 „

The average for this period of eight years works out, therefore, at approximately 8·6 per cent.

Comparing these figures with those published by the City of Manchester over a period of 14 years, the average of tuberculous milk samples found in that city worked out at exactly the same percentage as is mentioned in the preceding paragraph, namely, 8·6.

So that the percentage of tuberculous milk samples found amongst those arriving in Edinburgh during the past year (and also over a period including the previous seven years, *i.e.*, 1918-1925) is in no way excessive when compared with other cities of corresponding or greater size.

Undoubtedly a lowering of this percentage is desirable, and it would seem reasonable to look for material improvement in this connection in the near future, if for no other reason than that the Tuberculosis Order (1925) which is now in operation must result in the elimination of the more dangerous "open" cases of tuberculosis from dairy herds.

W. JOWETT, F.R.C.V.S., D.V.H.

CLEANSING DEPARTMENT STUD.

Four hundred and eight visits of attendance were made to the stud under the control of the Cleansing Department, and 33 horses were subjected to inspection and examination prior to consideration of purchase by the Cleansing and Lighting Committee.

STAFF.

I desire to take this opportunity to express my thanks to the Staff of the Department and my appreciation of the efficient manner in which they have carried out their duties throughout the year.

I am,

My Lord and Gentlemen,

Your obedient Servant,

A. GOFTON, F.R.C.V.S.,
Chief Veterinary Inspector.

INSPECTION OF MEAT AND OTHER FOODS.

Table 1, showing number of animals slaughtered at Gorgie and Leith Abattoirs during 1925.

		Gorgie.	Leith.	Total.
Cattle	Oxen	24,853	2,443	27,296
	Bulls	478	...	478
	Cows	3,183	225	3,408
	Heifers	602	11	613
		29,116	2,679	31,795
Calves		4,948	30	4,978
Sheep		118,000	7,239	125,239
Swine		16,214	1,850	18,064
		168,278	11,798	180,076

Table 2.—Meat imported into the City :—

	1924.	1925.
Beef (Frozen)	equal to 11,715 carcases.	equal to 13,589 carcases.
„ (Home Killed)	„ 3,180 „	„ 2,692 „
Veal (Home)	„ 1,521 „	„ 1,556 „
„ (Dutch)	„ 600 „	„ 897 „
Sheep and Lambs (Frozen)	„ 20,987 „	„ 15,511 „
„ „ (Home Killed)	„ 5,806 „	„ 7,336 „
Pigs (Imported Fresh or Frozen)	„ 3,113 „	„ 3,500 „
„ (Home Killed)	„ 1,366 „	„ 1,032 „
Venison	„ 37 „	„ 16 „
Boneless Beef (Frozen)	155 tons.	170 tons.

(The above figures are approximate only.)

Table 3, showing number of carcases in the different classes of animals condemned at Abattoirs during 1925, and showing weights of condemned carcases.

	Totally condemned.		Partially condemned.		Total Weight in lb.
	No.	Weight in lb.	No.	Weight in lb.	
Oxen	49	27,096	150	22,701	49,797
Bulls	2	1,820	6	1,484	3,304
Cows	168	79,338	301	45,674	125,012
Heifers	8	2,910	11	1,488	4,398
Calves	25	1,476	1	5	1,481
Sheep	166	6,408	72	904½	7,312½
Swine	106	12,455	79	2,684	15,139
Total	524	131,503	620	74,940½	206,443½

Table 4, showing number of carcases condemned in the different classes of animals slaughtered in Abattoirs during 1925, and causes of condemnation.

	Cattle.										Sheep.		Swine.		Totals.
	Oxen.		Bulls.		Cows.		Heifers.		Calves.						
	Total.	Partial.	Total.	Partial.	Total.	Partial.	Total.	Partial.	Total.	Partial.	Total.	Partial.	Total.	Partial.	
Tuberculosis	36	125	2	6	148	278	7	11	6	1	...	...	61	58	739
Œdema and Emaciation	6	...	...	...	7	...	...	...	1	...	78	32	6	...	130
Traumatism	...	14	...	...	1	12	...	...	...	...	8	23	5	9	72
Septic conditions ...	1	5	...	...	4	4	...	...	3	...	7	6	1	1	32
Pericarditis	...	1	...	...	...	...	...	...	...	...	...	...	2	...	3
Peritonitis	...	1	...	...	...	...	...	...	...	...	...	...	1	1	3
Pleurisy and Pneumonia	...	1	...	...	1	5	...	...	...	...	...	3	2	2	14
Moribund and Illbled ...	5	...	...	...	6	1	1	...	14	...	71	5	9	...	112
Jaundice	...	...	...	...	...	...	...	...	...	...	...	...	10	...	10
Decomposition	1	2	...	...	...	...	...	...	...	...	2	...	1	...	6
Fracture	...	1	...	...	...	...	...	...	...	...	...	3	...	8	12
Immaturity	...	...	...	...	...	...	...	...	1	...	...	...	7	...	8
Other Causes	...	...	...	...	1	1	...	...	...	...	...	...	1	...	3
Total ...	49	150	2	6	168	301	8	11	25	1	166	72	106	79	1144

Table 5, showing comparison between Tuberculous and Non-Tuberculous diseases as causes of condemnation in carcases of animals slaughtered in Abattoirs during 1925.

		Cattle.						Sheep.	Swine.	Total.
		Oxen.	Bulls.	Cows.	Heifers.	Calves.	Total.			
Tuberculosis . .	Total	36	2	148	7	6	199	...	61	260
	Partial	125	6	278	11	1	421	...	58	479
Total and Partial . .		161	8	426	18	7	620	...	119	739
Non-Tuberculous Diseases	Total	13	...	20	1	19	53	166	45	264
	Partial	25	...	23	...	...	48	72	21	141
Total and Partial . .		38	...	43	1	19	101	238	66	405

Table 6, showing numbers of Organs condemned in the different classes of animals at Abattoirs during 1925, and causes of condemnation.

	Cattle.						Swine.	Sheep.	Total.
	Oxen.	Bulls.	Cows.	Heifers.	Calves.	Total.			
Lungs—									
Tuberculosis	434	25	1427	43	4	1933	169	...	2102
Abscesses	22	1	3	...	1	27	1	19	47
Pneumonia	4	...	12	...	...	16	44	2	62
Pleurisy	17	1	11	...	...	29	22	10	61
Parasitism	66	...	46	...	...	112	...	58	170
Actinomycosis	2	...	...	...	...	2	...	...	2
General Emac. and Œdema	5	1	23	...	2	31	10	158	199
Other Conditions	4	...	3	...	4	11	11	22	44
Hearts—									
Pericarditis	3	...	1	...	...	4	13	2	19
„ Tuberculous	1	...	...	...	...	1	...	...	1
Abscesses	...	...	...	...	...	...	...	4	4
General Emac. and Œdema	6	1	25	...	6	38	14	179	231
Other Conditions	...	...	...	...	...	...	5	2	7
Bowels—									
Tuberculosis	211	11	604	14	4	844	104	...	948
Enteritis	...	...	1	...	...	1	...	...	1
Actinomycosis	1	...	...	...	...	1	...	...	1
Septic Conditions	1	...	2	...	4	7	9	22	38
General Emac. and Œdema	5	1	23	...	2	31	10	158	199
Stomachs—									
Tuberculosis	66	3	184	11	4	268	49	...	317
Abscesses	32	...	14	...	...	46	...	...	46
Peritonitis	66	3	190	11	3	273	1	...	274
Actinomycosis	4	...	...	...	...	4	...	...	4
General Emac. and Œdema	6	1	25	...	6	38	19	180	237
Spleens—									
Tuberculosis	72	5	183	11	5	276	76	...	352
Abscesses	...	...	...	...	...	...	...	1	1
General Emac. and Œdema	6	1	25	..	6	38	19	180	237
Carry forward	1034	54	2802	90	51	4031	576	997	5604

Table showing Organs condemned during 1925—*continued.*

	Cattle.						Swine.	Sheep.	Total.
	Oxen.	Bulls.	Cows.	Heifers.	Calves.	Total.			
Brought forward	1034	54	2802	90	51	4031	576	997	5604
Livers—									
Tuberculosis	192	9	260	10	6	477	160	...	637
Abscesses	386	4	57	1	3	451	3	26	480
Bacterial Necrosis	17	...	4	...	...	21	1	1	23
Cirrhosis	137	3	21	1	...	162	72	1	235
Cav. Angioma	3	..	41	...	...	44	...	...	44
Echinococcus	2	...	40	..	...	42	7	...	49
Distomatosis	4590	32	506	19	...	5147	...	422	5569
Degeneration	2	...	23	5	...	30	5	22	57
Actinomycosis	4	...	...	...	..	4	...	...	4
General Emac. and Œdema	5	1	23	...	2	31	15	159	205
Kidneys—									
Tuberculosis	20	1	39	1	...	61	4	...	65
Abscesses	9	...	1	...	...	10	...	...	10
Cysts	4	...	...	...	...	4	...	1	5
Nephritis	6	...	5	...	4	15	4	21	40
Degeneration	1	...	...	...	...	1	...	..	1
General Emac. and Œdema	5	1	23	...	2	31	15	159	205
Udders—									
Tuberculosis	...	...	41	1	...	42	1	...	43
Mastitis	...	...	366	...	...	366	...	1	367
Traumatism	...	...	1	...	...	1	...	...	1
Heads—									
Tuberculosis	665	40	482	29	3	1219	891	...	2110
Actinomycosis	83	1	3	...	1	88	...	...	88
Abscesses	...	...	...	...	...	...	...	3	3
Traumatism	20	...	22	2	13	57	39	132	228
General Emac. and Œdema	5	1	23	...	2	31	10	158	199
Feet—									
Septic Conditions	7	...	6	...	...	13	26	3	42
Total	7197	147	4789	159	87	12,379	1829	2106	16,314

Table 7, showing percentage incidence of Tuberculosis in animals slaughtered at Abattoirs during the years 1924 and 1925.

	1924.		1925.	
		Per Cent.		Per Cent.
Cattle	Oxen ... 3·61 Bulls ... 10·08 Cows ... 46·56 Heifers ... 13·85	... 7·82	Oxen ... 3·57 Bulls ... 12·30 Cows ... 47·38 Heifers ... 6·68	... 8·46
Calves	... ...	... 0·08	... ...	... 0·14
Swine	... ...	... 4·95	... ...	... 5·00

Table 8, showing number of visits paid to Shops, etc., during the year 1925.

Butchers' Shops	470
Provision Shops	823
Fishmongers' Shops	183
Fruiterers' Shops	452
Meat Sales and Wholesale Meat Shops	2211
Live Stock Sales and Markets	249
Street Hawkers	14
Railway Stations	565
Hide and Skin Merchants	675
Fish Markets	294
Total ...	5936

Table 9, showing numbers and weights of foodstuffs seized in Markets, Shops, and other premises in the City.

	No.	Weight in lb.
Beef	54	4,006¾
Mutton	59	2,862
Pork	14	637¾
Veal	11	774
Poultry and Game	16	7,504
Edible Offal	5	89
Fruit and Vegetables	13	2,839½
Provisions	7	192
Fish	11	8,115½
Total	190	27,020½

PORT FOOD INSPECTION.

Table 10.—Imported Foodstuffs Inspected under the Public Health (Oversea Meat) Regulations (Scotland), 1925.

Country of Origin.	Foodstuffs.	No. of Consignments.	
Holland . . .	Bacon . . .	26	
	Calf offal . . .	51	
	Calves . . .	51	
	Fat Compound . .	2	
	Lambs . . .	3	
	Lard . . .	2	
	Pigs . . .	225	
	Pigs' heads . .	1	
	Sheep	2	
	Sheep's offal . .	1	
		——	364
	Carry forward .		364

Imported Foodstuffs Inspected under the Public Health (Oversea Meat) Regulations (Scotland), 1925—(*continued*).

Country of Origin.	Foodstuffs.	No. of Consignments.	
	Brought forward		364
Denmark	Bacon	100	
	Canned Meat	3	
	Lard	8	
	Pigs' feet	51	
	„ gut	13	
	„ heads	80	
	„ tongues	1	
			256
U.S.A.	Hams	4	
	Lard	1	
	Lunch tongues (canned)	15	
	Mince Collops	1	
			21
Canada	Hams	19	
	Lard	18	
	Lunch tongues	11	
			48
Iceland	Mutton		1
			690

Imported Foodstuffs Inspected under the Public Health (Unsound Food) Regulations (Scotland), 1925.

Country of Origin.	Foodstuffs.	No. of Consignments.	
Holland	Fruit	259	
	Vegetables	791	
	Provisions	1246	
	Fish	36	
	Cereals	14	
	Yeast	97	
			2443
Denmark	Fruit	10	
	Provisions	379	
			389
Belgium and France	Fruit	65	
	Vegetables	4	
	Provisions	101	
			170
U.S.A.	Fruit	5	
	Provisions	50	
	Cereals	89	
	Vegetables	6	
			150
Germany	Fruit	41	
	Vegetables	39	
	Provisions	134	
	Fish	1	
			215
Canada	Provisions	53	
	Cereals	75	
	Fruit	10	
			138
Iceland	Ptarmigan	1	
	Fish	51	
	Provisions	1	
			53
Australia	Cereals		2
Spain	Vegetables		1
Sweden	Provisions		2
Russia	Provisions	18	
	Fruit	2	
			20
South America	Cereals		1
			3584

Table 11.—Imported Foodstuffs condemned or rejected at the Port under the Public Health (Oversea Meat) Regulations (Scotland), 1925.

	Wt. in lb.	Wt. in lb.
Pork	6469	
Fat Compound	1120	
		7,589

Imported Foodstuffs condemned under the Unsound Food Regulations.

	Wt. in lb.	
Fruit—		
Black-currants	60	
Cherries	396	
Pears	3020	
		3,476
Vegetables—		
Cabbage	7,800	
Carrots	16,940	
Chicory	883	
Cucumbers	840	
Lettuce	9,824	
Potatoes	198,850	
Turnips	27,500	
		262,637
Provisions—		
Flour	24,920	
Sugar	19,704	
		44,624
Game—		
Ptarmigan		1,305
	Tons	Cwts. Lb.
319,631 =	142	13 95

Table 12.—Summary showing total diseased and unsound Foodstuffs dealt with by the Department in the City during 1925.

	Wt. in lb.
At Abattoirs—Carcases	206,443½
Offal (weight estimated)	116,480
In Shops, Warehouses, etc.	27,020½
At the Port of Leith	319,631
	Tons Cwts. Lb.
669,575 =	298 18 39

DAIRY INSPECTION.

Table 13.—Summary of work under Dairies, Cowsheds, and Milkshops Orders and the Edinburgh Municipal and Police (Amendment) Act, 1891.

	1924.	1925.
No. of Licensed Dairy Byres	160	155
Average Cow Population	4430	4301
No. of Visits to City Byres	2579	2245
No. of Visits to Country Byres	26	25
No. of Country Cows Inspected	848	594
No. of newly calved Cows Inspected in Gorgie Markets	3961	4047

No. of Cows removed from Dairy Herds under Edinburgh Municipal and Police (Amendment) Act, 1891, and Tuberculosis Order of 1925 :—

	1924.		1925.	
Tuberculosis of Udder	23		15	
Advanced Clinical Tuberculosis	4		11	
Other causes	56		62	
	—	83	—	88

Notices served requiring :—

Limewashing of Premises	332		332	
Removal of Manure	10		9	
Removal of Diseased Cows	31		35	
Carrying out Repairs, etc.	6		6	
	—	379	—	382

Dairy herds tested with Tuberculin :—

		Reactors.		Non-Reactors.		Doubtful.		Total.	
No. 1 herd	February	...		30		1		31	
	April	...		65		...		65	
		—	...	—	95	—	1	—	96
No. 2 herd	April	...		47		...		47	
		—	...	—	47	—	...	—	47
No. 3 herd	April	1		38		2		41	
	October	1		39		...		40	
		—	2	—	77	—	2	—	81
			2		219		3		224

CLEANSING DEPARTMENT STUD.

Visits to Cleansing Department Stables	408