[Report 1939] / Medical Officer of Health, Edinburgh City.

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PUBLIC HEALTH DEPARTMENT,
JOHNSTON TERRACE,
EDINBURGH, *December* 1940.

To

The Department of Health for Scotland and
The Right Honourable the Lord Provost,
Magistrates and Council of the City of Edinburgh.

MY LORD PROVOST, LADIES AND GENTLEMEN,

I have the honour to submit the Report of the Public Health Department of the City of Edinburgh for the year 1939.

Despite the outbreak of war, the health of the City, as revealed by the vital statistics for the year, showed little deviation from the normal. The four months of hostilities during 1939 were preceded by eight months of extremely unsettled international relations, commonly alluded to as a " war of nerves," but the City's health indicators remained comparatively undisturbed.

The death-rate was equal to 13·1 per 1000 of the population, which was 0·4 higher than the record low rate returned in 1938 and 0·1 below the average for the previous five years. The infantile mortality rate, which had fallen to its lowest point in 1938, was further reduced from 61 to 59 per 1000 live births.

There was no change in the death-rate from tuberculosis but the incidence of the disease was the lowest on record, the number of cases showing a drop of 43 in the pulmonary group and of 50 in the non-pulmonary group as compared with the previous year.

The number of live births registered in the City was 7,300—3,802 males and 3,498 females, representing a sex ratio of 109 males to every 100 females. The birth-rate was 15·5 per 1000 of the estimated population, as compared with 16·1 for 1938 and an average of 15·8 for the previous five years.

As will be readily realised, the normal work of the Public Health Department was overshadowed by the pressing need of setting up casualty services throughout the City and of expanding the hospital accommodation. Routine activities were, however, maintained as far as possible, and these are reviewed briefly in the order recommended by the Department of Health for Scotland.

MEDICAL SERVICES.

1. Maternity.—The framing of a domiciliary maternity scheme in which the services of midwife, doctor and consultant would be co-ordinated, was hampered for some time by difficulties experienced in the interpretation of certain provisions of the Maternity Services (Scotland) Act, 1937. Discussions with medical practitioners and with local voluntary organisations which were to co-operate in the scheme had proceeded satisfactorily, but the outbreak of war and the necessity for speeding up civil defence measures led to a further postponement of what promised to be an extremely valuable reform. The war brought an immediate curtailment in hospital accommodation for maternity cases, and it was found

necessary to arrange two schemes for the dispersal of expectant mothers to receiving areas. After having been closed during the early months of the war, the maternity ward of the Western General Hospital was re-opened in January, 1940, and again fulfilled its normal function.

2. Infant Welfare.—The demand for premises to accommodate A.R.P. services caused a slight dislocation of infant welfare clinics, but the service was quickly restored to normal, and the full staff of medical officers and health visitors has been maintained. The children and staff at Victoria Park Convalescent Home were sent to a new institution on the Borders along with the patients and personnel from a similar home at Bruntsfield House. Three of the four day nurseries were closed, but one was subsequently re-opened, and a third was placed at the disposal of the Public Assistance Department for use as a Children's Home.

An encouraging reflection of child welfare activities was the fact that the infant mortality rate for the year was 59 per 1000 births—the lowest ever recorded in the City. In the year 1917, when the Child Welfare Department was inaugurated, the rate was 123. With a view to securing a further reduction in infant mortality and improving the health of children, negotiations took place with the University and other interested bodies, the intention being that the University would co-operate in the medical services in new housing areas and that facilities would be provided in community centres for the instruction of students, nurses, mothers and others concerned. The erection of one community centre had been planned in the Granton area, but the scheme was held up by the war.

3. Children under School Age.—Agencies devoted to the care of the pre-school child had their activities sharply interrupted by the war. The Voluntary Health Workers' Association, who controlled 22 toddlers' playgrounds accommodating about 800 children, did not re-open their classes in September, but arranged that Superintendents should visit the children in their homes. Later, permission was given to open the playgrounds with a restricted group of twelve of the older children, provided easy and rapid access to protection from air raids was available. Most of the children who were evacuated returned home with their mothers.

4. School Children.—In November 1938, three full-time dental surgeons took over the previous part-time service. The benefits of a full-time service are obvious but, on the present scale, one dental surgeon is allocated for 19,000 children while the number usually accepted as desirable is one for 5,000. The programme of clinic expansion has been held up by the outbreak of war.

A new type of medical record card together with a " follow-up " card—both uniform throughout Scotland—was introduced during the session. This has involved considerable re-organisation as more clerical work has to be done by Medical Officers and in the office. Further additional work has been caused by attendance at the Regent Road Junior Instruction Centre to advise the young people attending, and by the rendition, for each young person entering the National Health Insurance scheme, of an abstract of the School Medical History Sheets.

5. Infectious Diseases.—A table on page 10 gives details of the infectious diseases reported throughout the year. There was no abnormal incidence of any

one disease, except that whooping cough accounted for 1,521 notifications, as against 253 in the previous year. Diphtheria declined from 600 cases in 1938 to 351, and scarlet fever from 1,430 to 734.

6. Tuberculosis.—There has been little change in the death-rate from tuberculosis in the City during recent years, but the Tuberculosis Officer reports a slight but definite lessening in the incidence of the disease. Notifications of cases of pulmonary tuberculosis decreased from 476 in 1938 to 433 in 1939, and the number of non-pulmonary cases dropped from 228 to 178. The incidence is the lowest ever recorded in the City.

During the Spring of 1939 the Tuberculosis Officer, accompanied by Dr. Rhodes, senior lecturer in Bacteriology in the University of Edinburgh, visited Dr. Guerin at the Pasteur Institute, Paris, to obtain first-hand information regarding the preparation and administration of B.C.G.—the vaccine devised by the late Professor Calmette and Dr. Guerin for the prevention of tuberculosis. It was hoped to commence its use in Edinburgh in the autumn when the complicated technical arrangements for its manufacture had been completed locally, but changes arising out of war conditions necessitated the postponement of the undertaking.

During the past year, the treatment of cases of pulmonary tuberculosis by artificial pneumothorax has been steadily extended, with beneficial and encouraging results, and in several instances the more recently devised form of bilateral pneumothorax has been successfully undertaken. It is hoped to extend the treatment of certain types of pulmonary tuberculosis by specialised forms of surgical collapse by establishing a surgical chest unit which will work in co-operation with the Tuberculosis Department. There can be no doubt that, as a result of recent advances in thoracic surgery, many patients who otherwise would be doomed to a life of hopeless and chronic invalidism, are not only rendered non-infective, but are restored to working capacity.

7. Venereal Diseases.—A decrease of 16 per cent. in the total number of new patients reporting for treatment at the venereal disease centres was recorded during the year. There was a drop of 25 per cent. in the number of applicants with no venereal disease and of 10 per cent. in infected patients. Due largely to the evacuation of hospital beds on the outbreak of war, the number of in-patients declined from 1,663 in 1938 to 1,278 in 1939. The out-patient attendances dropped from 100,169 to 78,277, and this was due mainly to two factors, *viz.*, the marked decrease in new cases of gonorrhœa, and the influence of sulphapyridine therapy in producing more rapid cure, with fewer attendances for irrigation.

An important development during 1939 was an investigation of the results of the treatment of gonorrhœa with drugs of the sulphonamide class, the special object being to ascertain the percentage of cures achieved, the proportion of cases which relapsed, the proportion of drug-resistant cases, and the amount of default. The results of this analysis will be published soon.

Collaboration with the Army medical authorities in measures to reduce venereal infection have included lecturing to R.A.M.C. officers and dispensers in training. The suitability of this system has resulted in its extension to other areas, notably Perthshire and Lanarkshire.

One result of the war was the loss of a very valuable department in the Northern General Hospital, which was at first evacuated and subsequently disbanded. This department was ideally adapted for the reception and subdivision of special conditions in women and children. Arrangements were eventually made for receiving these cases in the Royal Infirmary. Another major change was the adaptation of the men's out-patient department in the Royal Infirmary as a reception station for stretcher gas casualties. This involved the giving up of three rooms and the consequent crowding of the work, and also the training of the staff into a team proficient in anti-gas technique.

8. Sick Poor.—The Corporation has an obligation to provide medical attendance when required for over 12,000 persons who are on the poor roll. For this purpose one medical officer is in attendance daily at the office in Castle Terrace, and 19 other doctors hold appointments to minister to the sick poor in the various wards of the City. This includes three areas where special arrangements exist, one of them being the Craigmillar area, where, in addition to the doctor, two resident nurses attend to minor injuries and visit cases on the direction of the District Medical Officer. The service to the sick poor of the City is adequate and no serious difficulties have been noted during the year.

9. Hospitals.—The year was one of considerable change and expansion in regard to hospitals. With the exception of the City Hospital for infectious diseases, all the Corporation's institutions were affected by evacuation schemes and by the necessity for providing additional accommodation. Fortunately the needs had been visualised and considered for many months before the outbreak of hostilities, and by the month of September preparations relating to additional staff and equipment, emergency stores and alternative water and cooking facilities were well advanced.

At the request of the Department of Health for Scotland the Western and Eastern General Hospitals were included in the Emergency Hospital Scheme for the reception of casualties, and an exchange was made with the Public Assistance Department under which the Northern General Hospital became a home for elderly semi-invalid people, and Craiglockhart Institution after alterations had been carried out, became an emergency hospital. From these three emergency hospitals the Corporation had the call on 500 beds for ordinary civilian sick persons. This represented a substantial reduction of the peace-time accommodation and entailed a careful selection of cases for admission. As a result of adaptations made subsequently at Craiglockhart, the number of beds for non-casualty cases was further reduced to 457. This number was insufficient to meet the recurring demand for beds for elderly patients whose primary requirement was nursing rather than active treatment, and careful investigation into home conditions was made before sanctioning admission to hospital.

Bangour Hospital, the largest of the group included in the emergency hospital scheme, was relieved of its function as a mental institution for the duration of the war. At the outbreak of hostilities all the patients, except a small proportion whose services were of value in the grounds, were dispersed to institutions in the south and east of Scotland along with the appropriate staff. The bed accommodation was greatly extended by the erection of a hutted annexe, and medical and surgical teams were appointed. In view of the shortage of nurses which had existed for some years, the value of having trained personnel available in the Civil Nursing

Reserve immediately became apparent. Accommodation for this auxiliary staff presents some difficulty, but it is hoped that a solution may be found in the provision of adequate living-out arrangements. In the meantime a large proportion of the domestic labour is provided by non-resident servants.

Gogarburn Institution was not originally included in the emergency hospital group, but towards the end of the year it was deemed advisable to provide accommodation for casualties. To facilitate this, alternative accommodation for 130 adult male defectives was obtained at Larbert.

Apart from the changes caused by civil defence measures, the general hospitals have fulfilled their normal functions on a restricted scale. Co-operation has been continued between the Corporation and the University under which teaching facilities are made available in the hospitals, while the Corporation obtains the services of the University Professors and Lecturers. It is regretted that a proposal by the University to build a hostel for fifty fourth year students at the Western General Hospital had to be postponed owing to the war. Similarly, the scheme of extension which had begun at this hospital was arrested, although the nurses' home and the new kitchens—two much appreciated additions to the resources of the Hospital —were opened during the year.

10. Evacuation.—On September 1st and 2nd, 1939 there were evacuated from Edinburgh, 31,395 persons of whom 17,811 were school children. The story of the high percentage of uncleanliness is an old one and usually attributed to the suddenness of the order to evacuate and its occurrence after weeks of non-supervision by the medical staff. The chief conclusions to be drawn, however, are the dishearteningly slow progress of "education" in elementary hygiene, for the parents of these children were pupils in our schools a generation ago; and the need for more compulsion in enforcing cleanliness. The personal abuse and even threats of violence which the medical staff received are indicative of the attitude of too many parents and must, in some way, be checked if the staff are not to be deflected from strict supervision.

In the reception areas there is no doubt that the vast majority of the children have improved physically and have broadened their outlook. Indeed numbers have definitely announced their intention not to return to the City. In several instances, however, parents, after visiting their children in receiving areas, have made complaints. Chiefly, these complaints are that the dietary is inadequate, especially during holidays when school meals are in abeyance, that cleanliness, particularly of heads, is not attended to and that the children have become undisciplined. Though the number of such complaints is relatively small, it might be considered whether there is any way in which official supervision in private billets —as distinct from hostels and camps—might be increased.

Conclusion.—I wish to record my gratitude to the members of the Public Health and other Committees for their interest and support, and to express thanks to the various heads of Departments, Hospitals and Institutions for their loyal service throughout the year.

I have the honour to be,

My Lord Provost, Ladies and Gentlemen,

Your obedient servant,

WILLIAM GEORGE CLARK,
M.B., Ch.B., D.P.H. (Camb.), M.R.C.P. (Edin.).
Medical Officer of Health.

SUMMARY OF STATISTICS

For the Years 1935, 1936, 1937, 1938 and 1939.

	1935	1936	1937	1938	1939
Population Estimated to middle of year - -	460,877	464,139	466,817	469,448	471,897
Area of City—Acres -	32,526	32,526	32,526	32,526	32,526
Density of Population—					
Persons per acre- -	14·2	14·3	14·4	14·4	14·5
Houses Inhabited - -	118,741	121,181	123,544	126,096	128,167
Marriages Registered- -	4,291	4,478	4,451	4,512	5,498
Birth-rate - - - -	15·3	15·9	15·8	16·1	15·5
Death-rate - - - -	13·3	13·4	14·0	12·7	13·1
Infantile Mortality - -	70	68	70	61	59
Cancer Death-rate - -	1·7	1·7	1·8	1·9	1·9
Pulmonary Tuberculosis Death-rate - - -	·6	·6	·6	·6	·6
*Epidemic Diseases Death-rate	·3	·3	·3	·3	·2

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

VITAL STATISTICS.

In the accompanying table a decennial survey of the increase which has taken place in the population of the City from 1861 to 1921, and a yearly survey from the latter year onwards, are given. The births and deaths with the rates per 1000 of the population are also shown, together with the infantile mortality rates per 1000 live births.

Year.	Population.	Deaths.	Rate per 1000.	Births.	Rate per 1000.	Infantile Mortality.
1861	170,444	3,946	23·1	5,694	33·4	135
1871	196,979	5,484	27·8	6,874	34·8	151
1881	228,346	4,308	18·8	7,360	32·2	128
1891	261,225	5,257	20·1	7,382	28·2	138
1901	316,921	5,633	17·7	7,920	24·9	143
1911	320,829	4,652	14·4	6,507	20·8	115
*1921	420,264	6,048	14·4	9,028	21·5	96
1922	422,112	6,447	15·3	8,772	20·8	91
1923	423,956	5,875	13·9	8,662	20·4	82
1924	425,802	6,312	14·8	8,404	19·7	89
1925	427,664	6,138	14·4	7,843	18·3	96
1926	429,535	5,710	13·3	7,926	18·5	80
1927	431,413	6,066	14·1	7,621	17·7	80
1928	433,299	5,872	13·6	7,420	17·1	75
1929	435,195	6,442	14·8	7,304	16·8	80
1930	437,098	6,038	13·8	7,307	16·7	82
1931	443,042	5,726	12·9	7,164	16·2	69
1932	447,800	6,032	13·5	6,960	15·5	73
1933	452,773	5,964	13·2	6,835	15·1	66
1934	457,099	5,873	12·8	7,188	15·7	62
1935	460,877	6,132	13·3	7,037	15·3	70
1936	464,139	6,226	13·4	7,391	15·9	68
1937	466,817	6,544	14·0	7,375	15·8	70
1938	469,448	5,974	12·7	7,549	16·1	61
1939	471,897	6,169	13·1	7,300	15·5	59

* City boundaries extended.

DEATH-RATES IN LARGE SCOTTISH TOWNS.
1939.

	Rate per 1000 of Population.		Rate per 1000 of Population.
Glasgow	13·3	Paisley	12·8
Edinburgh	13·1	Greenock	13·4
Dundee	13·5	Motherwell and Wishaw	12·7
Aberdeen	11·6	Clydebank	11·3

SCOTLAND - - - - 12·9

TABLE showing the number of Deaths (including Deaths transferred from other districts) and the Death-rates per 1000 of the Population during 1939 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		471,897	7,057	28,000	35,057	37,895	34,075	86,646	75,202	62,097	58,271	46,446	26,321	9,887	436,840
Deaths from all Causes		6,169	432	114	546	63	29	155	198	296	570	1.044	1,551	1,717	5,623
Annual Death-rate per 1,000		13·1	61·2	4·1	15·6	1·1	·9	1·8	2·6	4·8	9·8	22·5	59·0	173·6	12·9
Typhoid Fever	·00	2	...	...	...	...	...	...	...	1	1	...	...	...	2
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	·00	2	...	2	2	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	·00	1	...	1	1	...	...	...	...	...	...	...	...	...	...
Whooping Cough	·08	41	26	14	40	1	...	...	...	...	...	...	...	...	1
Diphtheria	·06	29	1	17	18	10	...	...	...	1	...	...	...	...	11
Influenza	·18	85	2	1	3	1	...	5	3	5	12	15	22	19	82
Erysipelas	·01	6	1	...	1	...	...	...	...	...	...	...	3	2	5
Encephalitis Lethargica	·02	12	...	...	...	...	...	...	...	1	3	4	4	...	12
Cerebro-Spinal Meningitis	·00	2	...	1	1	1	...	...	...	...	...	...	...	...	1
Tuberculosis of Respiratory System	·60	285	2	5	7	...	1	57	51	52	59	34	17	7	278
Tuberculous Meningitis	·09	47	5	10	15	13	4	11	3	...	...	1	...	...	32
Tuberculosis of Intestines & Peritoneum	·01	6	...	...	...	...	1	3	...	...	...	2	...	...	6
Other Tuberculous Disease	·04	21	...	...	...	1	1	4	4	2	2	3	3	1	21
Malignant Disease	1·87	884	...	...	...	...	1	2	12	40	101	247	294	187	884
Rheumatic Fever	·03	17	...	...	...	5	1	3	1	2	3	...	2	...	17
Meningitis	·03	17	5	2	7	1	...	3	2	1	...	1	2	...	10
Cerebral Hæmorrhage, etc.	1·36	645	1	2	3	...	...	1	3	6	46	127	218	241	642
Other Nervous Diseases	·18	88	4	5	9	...	3	4	5	7	17	20	15	8	79
Heart Disease	3·24	1,530	...	...	...	1	1	9	17	43	115	251	496	597	1,530
Other Diseases of Circulatory System	·39	187	...	...	...	1	...	...	...	4	11	31	50	90	187
Bronchitis	·51	245	11	3	14	1	2	1	3	8	18	32	64	102	231
Pneumonia (all forms)	·67	318	71	13	84	2	2	7	8	19	23	45	63	65	234
Other Diseases of Respiratory System	·23	110	4	1	5	...	...	...	4	4	10	13	34	40	105
Diarrhœa and Enteritis	·14	66	39	6	45	...	1	...	3	2	1	4	4	6	21
Appendicitis	·06	31	...	4	4	5	...	3	2	4	5	4	2	2	27
Diseases of Liver and Gall Bladder	·09	47	...	...	...	1	...	...	...	5	5	16	17	3	47
Other Diseases of Digestive System	·35	168	9	3	12	3	2	5	7	19	27	34	24	35	156
Nephritis—Acute and Chronic	·31	145	...	1	1	...	2	2	...	13	17	30	41	39	144
Other Genito-Urinary Diseases	·23	112	2	...	2	...	...	...	1	5	10	19	39	36	110
Puerperal Sepsis	·02	13	...	...	...	...	...	3	7	3	...	...	...	...	13
Other Diseases associated with Childbirth	·05	25	...	...	...	...	...	3	17	5	...	...	...	...	25
Disease of Early Infancy & Malformations	·50	238	235	2	237	...	...	1	...	...	...	...	...	...	1
Violent Deaths	·67	319	8	12	20	14	4	19	32	25	41	53	49	62	299
All Other Causes	·90	425	6	9	15	2	3	9	13	19	43	58	88	175	410

TABLE showing the Population, etc., also the Births and Deaths in each Ward during 1939.

No.	Ward.	Estimated Population.	Area in Acres.	Density of Population per Acre.	Births.		Infantile Mortality.		Deaths.					
									Pulmonary Tuberculosis		Epidemic Diseases.		All Causes.	
					Number.	Rate per 1000.	Deaths.	Rate per 1000 Births.	Number.	Rate per 1000.	Number.	Rate per 1000.	Number.	Rate per 1000.
1	Calton - -	19,676	228	86·3	297	15·1	21	71	12	·6	4	·2	246	12·5
2	Canongate -	17,054	965	17·7	297	17·4	9	30	8	·5	4	·2	280	16·4
3	Newington -	20,194	891	22·7	215	10·6	4	19	5	·2	...	...	273	13·5
4	Morningside -	21,084	1,358	15·5	192	9·1	7	36	7	·3	1	·1	371	17·6
5	Merchiston -	19,512	677	28·8	203	10·4	14	69	6	·3	...	...	319	16·3
6	Gorgie - -	30,115	676	44·5	498	16·5	15	30	18	·6	8	·3	294	9·7
7	Haymarket -	19,138	959	20·0	183	9·6	6	33	3	·2	2	·1	209	10·9
8	St. Bernard's -	20,873	1,250	16·7	327	15·7	17	52	9	·4	7	·3	281	13·5
9	Broughton- -	17,000	472	36·0	231	13·5	14	61	18	1·1	1	·1	203	11·9
10	St. Stephen's -	15,321	190	80·6	246	16·1	18	73	12	·8	2	·1	270	17·6
11	St. Andrew's -	9,260	206	45·0	169	18·3	11	65	6	·6	3	·3	151	16·3
12	St. Giles - -	16,679	266	62·7	302	18·1	29	96	17	1·0	9	·5	273	16·3
13	Dalry - -	19,077	187	102·0	335	17·6	13	39	10	·5	4	·2	241	12·6
14	George Square -	16,909	248	68·2	248	14·7	15	61	19	1·1	5	·3	269	15·9
15	St. Leonard's -	16,198	104	155·8	302	18·6	12	40	11	·7	6	·4	211	13·0
16	Portobello -	38,035	2,200	17·3	501	13·2	26	52	32	·8	4	·1	419	11·0
17	South Leith -	28,143	819	34·4	382	13·6	30	79	14	·5	10	·4	305	10·8
18	North Leith -	15,790	218	72·4	267	16·9	19	71	20	1·3	3	·2	228	14·4
19	West Leith -	18,150	462	39·3	270	14·9	23	85	8	·4	6	·3	244	13·4
20	Central Leith -	12,907	142	90·9	225	17·4	18	80	10	·8	5	·4	152	11·7
21	Liberton - -	20,584	6,339	3·2	506	24·5	45	89	12	·6	21	1·0	259	12·6
22	Colinton - -	16,020	5,602	2·9	268	16·7	13	49	8	·5	...	...	187	11·7
23	Corstorphine & Cramond -	32,472	8,067	4·0	729	22·5	44	60	17	·5	8	·3	373	11·5
	Institutions -	11,706	...	...	107	...	9	...	3	...	4	...	111	...
	Totals - -	471,897	32,526	14·5	7,300	15·5	432	59	285	·6	117	·2	6,169	13·1

INFECTIOUS DISEASES.

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

Disease.	Jan.	Feb.	Mar.	April.	May.	June.	July.	August.	Sept.	October.	Nov.	Dec.	Total.
Diphtheria	35	23	20	30	34	37	27	33	31	31	27	33	361
Erysipelas	49	32	36	30	21	28	17	21	23	36	22	18	333
Scarlet Fever	74	68	71	66	58	49	88	78	50	53	39	40	734
Typhoid Fever	1	1	3	...	5	3	1	7	3	...	1	...	25
Puerperal Fever	8	12	3	3	6	11	3	8	4	1	...	4	63
Puerperal Pyrexia	4	10	4	14	5	12	11	7	7	5	6	1	86
Cerebro-spinal Fever	1	5	1	1	2	1	1	3	4	2	1	1	23
Infective Jaundice	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis, Pulmonary	36	43	39	46	52	36	33	26	27	18	27	50	433
Tuberculosis, other forms	17	20	13	20	12	20	15	17	10	10	8	16	178
Ophthalmia Neonatorum	27	20	20	21	19	14	28	14	4	14	15	9	205
Malaria	...	3	2	...	2	2	...	...	...	1	...	...	10
Dysentery	20	26	62	28	38	28	27	25	7	36	39	12	348
Acute Primary Pneumonia	67	40	37	48	39	33	43	16	20	13	28	24	408
Acute Influenzal Pneumonia	13	31	8	5	2	1	2	1	3	...	2	10	78
Measles	26	35	33	18	49	140	177	108	22	15	22	33	678
Whooping Cough	147	213	291	278	263	165	78	41	20	5	17	3	1,521
Poliomyelitis	2	...	...	1	...	...	...	...	1	1	2	...	7
Polio-encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	1	...	...	...	1	3	...	1	...	...	...	...	6
Totals	528	582	643	609	608	583	551	406	236	241	256	254	5,497

BACTERIOLOGICAL SERVICES.

The following report is submitted by the Director of Bacteriological Services on the work carried out for the City in the Bacteriology Department of Edinburgh University from January to December 1939.

ROUTINE BACTERIOLOGICAL EXAMINATIONS

(including examinations for Municipal Hospitals).

			Total
Swabs and cultures from throat, nose and ear examined for *B.diphtheriæ*	Positive	530	
	Negative	3,184	
			3,714
B. diphtheriæ virulence tests	Positive	139	
	Negative	259	
			398
Throat nose and ear swabs for hæmolytic streptococci and general bacteriological examination — Positive: Hæmolytic Streptococci		1,184	2,909
Throat and vaginal swabs for Lancefield Grouping of hæmolytic streptococci			28
Sputum examined for *B. tuberculosis* by the microscopic method	Positive	204	
	Negative	2519	2,723
Pus examined for *B. tuberculosis*, by microscopic method	Positive	2	103
Urine and fæces examined for *B. tuberculosis*, by microscopic method	Positive	5	385
Cultivation test for *B. tuberculosis** (sputum and other specimens)	Positive	92	
	Negative	2,395	
			2,487
Animal inoculation for *B. tuberculosis*	Positive	34	204
Blood† for Widal reaction (including *B. abortus* agglutination test) — Positive	*B. typhosus*	6	
	B. para. B.	16	
	B. abortus	3	
	Negative	81	
			106
Blood clot cultures from specimens submitted for Widal reaction — Positive: *B. para. B.*		3	101
Fæces and urine† examined for organisms of enteric and dysentery groups — Positive	*B. typhosus*	1	
	B. para. B.	52	
	B. dys. Flexner	193	
	B. dys. Sonne	78	
	B. ærtrycke	3	
	Negative	3,356	
			3,683

Number of cases proved by isolation of specific organism and/or serological examination to be due to:

B. typhosus	5
B. paratyphosus B.	27
B. ærtrycke	2
B. dysenteriæ Flexner	146
B. dysenteriæ Sonne	52
B. abortus	2

Sputum, pleural and cerebro-spinal fluids, pus, etc., examined for Pneumococcus (including determination of serological type)	99
Carry forward	16,940

		Brought forward	16,940
Number of cases due to:			
Type 1 - 9	Type 7 - 1	Type 16 - 3	
Type 2 - 13	Type 8 - 2	Type 17 - 2	
Type 3 - 3	Type 9 - 2	Type 19 - 3	
Type 4 - 2	Type 11 - 1	Type 20 - 2	
Type 5 - 3	Type 13 - 2	Type 29 - 3	
Type 6 - 1	Type 15 - 1	Type 31 - 1	
Cerebro-spinal fluid† for general bacteriological examination (including examination for *B. tuberculosis* and Meningococcus)	Positive	Meningococcus 7 Pneumococcus 2	219
"Cough plates" examined for *B. pertussis*		Positive 9	46
Blood for Wassermann reaction		Positive 138 Negative 1,383	1,521
Syphilis flocculation test—modified Sachs-Georgi method		Positive 127 Negative 1,323	1,450
Syphilis flocculation test—Kahn* method		Positive 142 Negative 1,362	1,504
Cerebro-spinal fluid for Wassermann reaction		Positive 20 Negative 163	183
Cerebro-spinal fluid for cytological examination, protein, globulin and colloidal gold tests			241
Vaginal, uterine and urethral swabs and smears for gonococcus and general bacteriological examination (for gonococcus—3 pos.)			221
Gonococcal complement fixation test		Positive 1 Negative 57	58
Blood examined for *Leptospira icterohæmorrhagiæ* (including animal inoculation test)			6
Blood for culture (general)			85
Pus for general bacteriological examination			124
Sputum for general bacteriological examination			175
Pleural and peritoneal fluids for general bacteriological examination (including examination for *B. tuberculosis*, by microscopic method)			122
Urine and fæces for general bacteriological examination			476
Conjunctival smears for general bacteriological examination			40
Rats examined for plague infection‡			26
Water specimens for bacteriological examination			637
Milk specimens for bacterial count			5
Autogenous vaccines prepared			8
Serum from whooping-cough convalescents prepared for preservation and examined for sterility and the Wassermann reaction		530 c.c.	
Miscellaneous examinations			95
		Total	24,182

* See note on this examination.
† The numbers given include repeat tests.
‡ These were carcases of rats caught in docks or on board ships arriving from foreign ports and were examined as a precautionary measure. All were negative.

EXAMINATIONS FOR MUNICIPAL HOSPITALS.

Western, Eastern and Northern General Hospitals.

	Total
Throat, nose and ear swabs for *B. diphtheriæ*	224
B. diphtheriæ virulence tests	13
Throat swabs for hæmolytic streptococci and general bacteriological examination	382
Sputum for *B. tuberculosis*	227
Pus for *B. tuberculosis*	68
Urine and fæces for *B. tuberculosis*	322
Cultivation test for *B. tuberculosis* (sputum and other specimens)	190
Animal inoculation for *B. tuberculosis*	119
Blood for Widal reaction	25
Blood clot cultures from specimens submitted for Widal reaction	23
Fæces and urine for organisms of enteric and dysentery groups	146
Sputum, pleural and cerebro-spinal fluids, pus, etc., examined for pneumococcus (including determination of serological type)	78
Cerebro-spinal fluid for general bacteriological examination (including examination for *B. tuberculosis*)	67
Blood for Wassermann reaction	1,234
Syphilis flocculation test—modified Sachs-Georgi method	1,177
Syphilis flocculation test—Kahn method	1,223
Cerebro-spinal fluid for Wassermann reaction	162
Cerebro-spinal fluid for cytological examination, protein, globulin and colloidal gold tests	157
Vaginal, uterine and urethral swabs and smears for gonococcus and general bacteriological examination	58
Pus for general bacteriological examination	83
Sputum for general bacteriological examination	148
Pleural and peritoneal fluids for general bacteriological examination (including examination for *B. tuberculosis*)	90
Urine and fæces for general bacteriological examination	316
Other examinations	191
Total	6,723

Western General Hospital	Total	3,639
Eastern General Hospital	Total	2,497
Northern General Hospital	Total	587

City Hospital for Infectious Diseases.

	Total
Throat, nose and ear swabs for *B. diphtheriæ*	961
B. diphtheriæ virulence tests	354
Throat swabs for hæmolytic streptococci	7
Sputum for *B. tuberculosis*	47
Pus for *B. tuberculosis*	15
Urine and fæces for *B. tuberculosis*	24
Cultivation test for *B. tuberculosis* (sputum, etc,)	89
Animal inoculation for *B. tuberculosis*	52
Blood for Widal reaction	53
Blood clot cultures from specimens submitted for Widal reaction	50
Fæces and urine for organisms of enteric and dysentery groups	2,494
Sputum, pleural and cerebro-spinal fluids, pus, etc., examined for pneumococcus (including determination of serological type)	10
Cerebro-spinal fluid for general bacteriological examination (including examination for *B. tuberculosis*)	125
Blood for Wassermann reaction	28
Syphilis flocculation test—modified Sachs-Georgi method	28
Syphilis flocculation test—Kahn method	28
Carry forward	4,365

Brought forward	4,365
Cerebro-spinal fluid for cytological examination, protein, globulin and colloidal gold tests	62
Vaginal, uterine and urethral smears for gonococcus and general bacteriological examination	126
Pus for general bacteriological examination	16
Sputum for general bacteriological examination	5
Pleural and peritoneal fluids for general bacteriological examination (including examination for *B. tuberculosis*)	18
Urine and fæces for general bacteriological examination	115
Serum from whooping-cough convalescents prepared for preservation and examined for sterility and the Wassermann reaction	530 c.c.
Other examinations	59
Total	4,766

Royal Victoria Dispensary and Hospital.

	Total
Throat, nose and ear swabs for *B. diphtheriæ*	6
Throat swabs for hæmolytic streptococci	6
Sputum for *B. tuberculosis*	1,843
Cultivation test for *B. tuberculosis* (sputum, etc.)	1,860
Animal inoculation for *B. tuberculosis*	7
Blood for Wassermann reaction	72
Syphilis flocculation test—modified Sachs-Georgi method	72
Syphilis flocculation test—Kahn method	72
Other examinations	11
Total	3,949

Bangour Mental Hospital and Gogarburn Institution.

	Total
Throat, nose and ear swabs for *B. diphtheriæ*	12
Throat, nose and ear swabs for hæmolytic streptococci and general bacteriological examination	18
Blood for Wassermann reaction	126
Syphilis flocculation test—modified Sachs-Georgi method	122
Syphilis flocculation test—Kahn method	124
Cerebro-spinal fluid for Wassermann reaction	16
Other examinations	18
Total	436

Bangour Mental Hospital - Total - 417
Gogarburn Institution - Total - 19

Craiglockhart Hospital.

	Total
Throat, nose and ear swabs for *B. diphtheriæ*	9
Throat swabs for hæmolytic streptococci	18
Sputum for *B. tuberculosis*	9
Pus for *B. tuberculosis*	2
Urine and fæces for *B. tuberculosis*	3
Cultivation test for *B. tuberculosis* (sputum, etc.)	6
Blood for Widal reaction	1
Fæces and urine for organisms of enteric and dysentery groups	786
Blood for Wassermann reaction	15
Syphilis flocculation test—modified Sachs-Georgi method	14
Syphilis flocculation test—Kahn method	15
Cerebro-spinal fluid for Wassermann reaction	1
Pus for general bacteriological examination	3
Sputum for general bacteriological examination	3
Urine and fæces for general bacteriological examination	6
Other examinations	36
Total	927

Total Examinations for Municipal Hospitals - - - 16,801

The total number of examinations (24,182) represents a decrease as compared with that of the previous year (28,706) but is still much higher than the figure for 1937 (18,831). The decrease in 1939 may be attributed largely to the war-time changes in the medical services of the City including the evacuation of municipal hospitals and possibly the evacuation of population following the outbreak of war. Thus, the reduction was most pronounced in September and less obvious in the later months of the year. In October the number of examinations approached closely to that of the same month in the previous year, but at this time an unusually large amount of laboratory work had to be undertaken in connection with an outbreak of bacillary dysentery in Craiglockhart Hospital. Excluding the last four months of the year there was an appreciable diminution in the examinations for diphtheria as compared with 1938, but both in 1937 and 1938 more examinations for diphtheria were carried out than in each of the three previous years. The number of examinations for tuberculosis also dropped in the pre-war months of 1939 as compared with 1938 in which an unusually large number of such examinations were carried out with a relatively high number of positive results. These figures illustrate the considerable fluctuations in the bacteriological work required by the public health department and hospitals of a large city, and show how necessary it is to maintain an adequate laboratory organisation to cope with even the routine investigation of the infectious diseases.

In the year under review 637 examinations of water specimens were carried out as compared with 545 in 1938 and 89 in 1937. Prior to the war routine weekly examinations were made of samples from all the separate water supplies of the City, both filtered and raw waters. After the outbreak of the war the Water Department was obliged to reduce the routine sampling to fortnightly intervals. It seems desirable, however, to revert if possible to the weekly sampling so as to ensure the frequent check on the bacteriological condition of these supplies particularly during the summer season.

Scottish Emergency Bacteriological Service.—In 1938 a scheme was prepared by the Department of Health for instituting an Emergency Bacteriological Service in the event of war, and this was put into operation on the 11th September 1939. In the Emergency Service the Bacteriology Department of Edinburgh University has undertaken the functions of a Central Laboratory for Edinburgh, Stirlingshire and the south-eastern area of Scotland. The scheme has been based for the most part on the pre-existing laboratory organisation of the local authorities, but at the same time has provided for reinforcement of these services and their integration under the central control of the Department of Health. The Emergency Service is thus in a position to cope more effectively with such special demands for bacteriological investigation as might arise under war conditions, and a certain number of transportable laboratory units are held in readiness to be operated wherever they may be required, for example, if there should be an unusual prevalence of an infectious disease in areas in which no local facilities are available for bacteriological investigation. So far the work of the Edinburgh Central Laboratory has been mainly on the same lines as in peace time, but arrangements have been made for quickly adapting the service of the laboratory to any altered conditions that may arise during the war.

THE BACTERIOLOGICAL DIAGNOSIS OF DIPHTHERIA.

While primary cultivation on Löffler's serum medium remains the standard method of examination for the presence of *B.diphtheriae* in throat and nasal swabs, it has been the practice of this laboratory to test new methods from time to time. In the last annual report there was mention of experimental observations on the Folger-Solé method and Horgan and Marshall's medium, and this year trial has been made of the differential medium elaborated by Clauberg. This method has been found to give excellent results, leading to the demonstration of diphtheria bacilli in a higher percentage of cases than is the case when Löffler's serum alone is employed. The usefulness of the medium in routine laboratory work is somewhat limited, however, by the fact that 24 hours' incubation may be required before a report can be issued to clinicians, whereas this may be possible after 12-18 hours when Löffler's serum is employed. It should also be noted that Clauberg's medium *per se* does not enable true diphtheria bacilli to be differentiated from certain diphtheroid organisms. It has been found a convenient alternative to M'Leod's medium for isolating diphtheria organisms preparatory to carrying out virulence tests, as large colonies appear in 24 hours which can be readily subcultured to furnish a pure culture for subsequent animal inoculation.

TYPES OF DIPHTHERIA BACILLI IN EDINBURGH.

The incidence of the biological types of *B.diphtheriae* which occur in Edinburgh has been studied since 1933. During the period, 1933 to 1939, Type III (" gravis "), the starch-fermenting type which was associated with the severe epidemics in Leeds and other places in England some years ago and which has come to be regarded as the " epidemic " type, completely replaced Type II (" intermediate ") as the predominant type in Edinburgh. Practically absent until 1934 when Type II was isolated from 50 to 60 per cent. of the cases examined, Type III suddenly became more frequent in 1936, and accounted for over 30 per cent. of cases in 1937 and nearly 60 per cent. in 1938. After a sudden fall in incidence in 1935 followed by an increase, Type II has steadily decreased and was isolated from approximately only 20 per cent. of cases in 1938. Types I and IV, have also declined to insignificant proportions during the latter part of the investigation. During the period January to May 1939, the upward trend of Type III incidence has been maintained (71.1 per cent.) and Type II has still further decreased to 11.3 per cent.

The medical staff of the City Hospital for Infectious Diseases have co-operated in the investigation throughout and have supplied clinical notes of the cases from which the strains were isolated. The combined proportion of cases classed as " severe " and " moderately severe " has shown a steady but doubtfully significant increase from just over 20 per cent. in 1934 to 29 per cent. for the first five months of 1939 ; and the case mortality has shown a similar slight tendency to rise. However, there has been no clinical evidence of an unusual epidemic prevalence or severity of diphtheria in the Edinburgh area in the period under review.

Some serological observations were made, and it was found that at least the majority of the Type III strains isolated in Edinburgh during the winter of 1938-9

were of the same serological type (Type A, Orr-Ewing) as " gravis " strains isolated near the end of the Leeds epidemic. These strains have been considered to be representative of the type prevalent during the epidemic, but it is possible that some change in the serological type had taken place since the peak period. On the other hand, it may be that this type has not yet been predominant in Edinburgh for a sufficiently long period to produce the conditions necessary for a severe epidemic. So far, however, the results of this investigation point to the conclusion that " gravis, Type A " cannot properly be regarded as the " epidemic type " of *B.diphtheriae.*

(*H. Wright.*)

DIAGNOSIS OF TUBERCULOSIS BY DIRECT CULTIVATION OF THE TUBERCLE BACILLUS.

The diagnosis of tuberculous infection by cultivation is now firmly established in the practice of this laboratory, and its value is widely recognised by hospital physicians and surgeons, tuberculosis officers, as well as general practitioners.

In time of war this method of examination is of special value as it is inexpensive and is an economical substitute for the guinea-pig inoculation test.

The results in 1939 were as follows :

Total number of specimens (sputum, pus, urine, C.S.F., etc.), cultivated - - - - - - - - - - - - - -	2,487
Total number found positive by direct microscopic examination -	149
Total number found positive by culture, though negative by direct film - - - - - - - - - - - - - -	92

It is thus seen that direct microscopic examination only yielded 62 per cent. of the total positive results. Cultures are now examined after 4, 5 and 6 weeks, and it has been found that quite a number of cultivation tests which are negative after 4 weeks become positive after 6 weeks.

INTESTINAL INFECTIONS DURING 1939.

Bacillary dysentery has continued to be a prevalent infection during the past year. While in 1938 it was reported that the commonest infective agent in Edinburgh was *B.dysenteriae* Sonne, in 1939 *B.dysenteriae* Flexner supplanted it as the more frequently encountered organism. 198 cases of dysentery were diagnosed bacteriologically by isolation of the causal bacillus, *B.dysenteriae* Flexner occurring in 146 of these and *B.dysenteriae* Sonne in 52. A noticeable feature has been a tendency for the disease to spread throughout families, doubtless due to more or less direct contact infection.

Towards the end of the year a sharp outbreak of dysentery occurred in one of the municipal institutions, and bacteriological investigation showed that it was due to *B.dysenteriae* Flexner. In addition to the active cases in which this organism was found two female carriers were detected among the personnel and inmates of the institution.

Thirty-two cases of enteric fever were diagnosed bacteriologically during the year. Five of these were due to *B.typhosus*, and 27 to *B.paratyphosus B*. Once again it has to be reported that the bacteriological diagnosis of enteric fever is seldom made until a relatively late stage in the illness. Blood-culture in the early stage, which is the most expeditious and direct method of laboratory diagnosis, is seldom requested by clinicians and practitioners. Thus, of these 32 cases, in only 3 was the diagnosis made by blood culture during the first 7 to 10 days of illness. In all the others the diagnosis was made by the Widal reaction or by the isolation of the causal organisms from the urine or fæces, *i.e.*, in the majority of cases not until the second, third, or even subsequent weeks of the illness.

In the diagnosis of enteric fever in the early stages, various procedures are open to the practitioner : (*a*) blood may be withdrawn with a syringe and injected into culture medium contained in a special blood-culture bottle (which is supplied from the laboratory on request) ; (*b*) the blood may be allowed to clot in a test tube : a Widal test can then be performed with the serum and the clot can be specially cultivated for enteric organisms in a bile medium (" clot-culture ") ; (*c*) Behring venules are also available containing bile medium and the use of these for drawing a blood specimen from a vein simplifies the procedure for the practitioner ; (*d*) even in the very early cases it is appropriate to submit a sample of stool for cultural examination.

In the later stages of the illness, of course, serum should be submitted for a Widal test and urine and fæces examined by cultural methods.

In connection with the bacteriological diagnosis of paratyphoid fever by examination of the stool, it may be of interest to mention here the findings in a recent enteric outbreak (occurring in a country area) which was investigated in this laboratory. In all, some 600 specimens of fæces were examined simultaneously by the three following methods : direct plating on MacConkey's medium ; enrichment in brilliant green peptone water, followed by plating on MacConkey's medium ; and enrichment in tetrathionate broth, followed by plating on MacConkey's medium. 306 speciments, from 37 cases, were found to contain *B. paratyphosus B*. Direct plating on MacConkey's medium was only responsible for 48 per cent. of the total positive results whereas 77 per cent. were positive by brilliant green enrichment, and 81 per cent. by tetrathionate enrichment. It was found that in individual cases, however, any one of these methods (even direct plating on MacConkey's medium) might yield a positive result when the others proved negative. While in general the brilliant green and tetrathionate enrichment methods proved superior to direct plating, the results demonstrated the importance of carrying out at least two, if not all three, of the methods mentioned, in the attempted isolation of enteric fever organisms from the stool. Another selective medium for isolating typhoid-paratyphoid from fæces (Wilson and Blair's bismuth sulphite medium) has also been used in this laboratory from time to time : exact comparison of results with it and other methods have not so far been made in a large series of specimens but it has not generally proved superior to brilliant green enrichment.

THE DIFFERENTIATION OF SALMONELLA ORGANISMS.

The differentiation of the organisms of the *Salmonella* group (enteric fever and food-poisoning) is a common problem in routine bacteriological laboratories. While in the majority of cases this may be achieved comparatively easily by agglutination tests with specific antisera, trouble is experienced when the organism isolated proves to be in the group or non-specific phase. In such cases the fermentation of sodium dextro-tartrate forms a useful test, the great majority of strains of *B. paratyphosus B* failing to ferment this substance, while strains of *B. aertrycke* and other food-poisoning organisms cause fermentation. During the past year 100 strains of *Salmonella* organisms have been examined without finding any exceptions to this rule, though uncommonly such exceptions may possibly be encountered; that is to say certain strains of *B. paratyphosus B* may cause fermentation and some strains of *B. aertrycke* may not produce fermentation. The test is of definite value in routine laboratories.

(*S. W. Challinor and A. J. Rhodes*).

The Bacteriological Services have been carried out under the direction of Professor T. J. Mackie.

The members of the departmental staff who took part in the work in 1939 were: Dr. A. J. Rhodes, Lecturer for Local Authority Bacteriological Services; Dr. Scott Thomson, Lewis Cameron Lecturer (now County Bacteriologist, Dumfriesshire); Dr. H. L. de Waal, Lewis Cameron Lecturer (from October 1939); Dr. R. K. Oag and Dr. S. W. Challinor, Lecturers; Dr. J. C. J. Ives, Assistant for Local Authority Bacteriological Services; Dr. M. Ludlam and Dr. G. Ludlam, Assistants; Mr R. K. Farmer, Technical Assistant.

Voluntary assistance in a special investigation was given by Dr. Helen A. Wright, Kirk-Duncanson Fellow of the Royal College of Physicians, and Demonstrator.

SANITARY DEPARTMENT.

ANNUAL STATEMENT FOR THE YEAR 1939.

Complaints by citizens	3,083
Complaints by other departments	85
Nuisances discovered and reported by District Inspectors	7,400
Total Nuisances dealt with by the Department	10,568

CLASSIFICATION OF NUISANCES.

Drainage and Sanitary Appliances.

Drains cleared or repaired and sanitary appliances renewed or repaired	751

Water Supply.

Cisterns and water pipes repaired or renewed	395

Repairs to Houses.

Repairs to floors, windows, doors, walls, etc.	506

Nuisances Removed.

Nuisances due to smoke, flooding, overcrowding, rats and other causes	8,916
Total	10,568

HOUSING.

Slum Clearance and Redevelopment.

Houses vacated	357
Persons displaced	1,498
Houses demolished	162

SMOKE ABATEMENT.

Inspections.

Inspection of steam boiler and other furnaces	232
Visits to Railway stations and depots	74
Observations of chimneys (extending to one hour)	500
Intimations re excessive discharge of smoke	60
Public complaints investigated	56

Improvements effected.

New steam boilers installed including replacement of old boilers	5
Mechanical stokers fitted to steam boilers	8
New chimneys erected or existing ones heightened to increase their draught	4
Factory bakers' coal-burning furnaces put out of use	4
Furnaces in which anthracite, coke or semi-bituminous fuel have been substituted for coal	8

SHOPS ACTS, 1912-38.

Inspections of retail and wholesale shops including warehouses	4,203
Contraventions regarding hours of employment, closing orders, etc.	382
Improvements effected in sanitary accommodation, washing facilities, heating and other sanitary matters	614
Convictions obtained in prosecutions	22
Total fines imposed	£11

SALE OF FOOD AND DRUGS ACTS, ETC.

Total Samples of Food and Drugs taken		1,569

Milk.

Statutory samples of Sweet Milk taken		198
Samples reported adulterated		25
Prosecutions		5
Total fines imposed	£41, 0s. 0d.	

Mince.

Statutory samples of mince		53
Contraventions respecting the addition of preservatives		15
Convictions obtained		15
Total fines imposed	£60, 0s. 0d.	

Sausages.

Statutory samples of sausages		62
Convictions obtained respecting the addition of preservatives		3
Total fines imposed	£8, 3s. 0d.	

Sausage Meat.

Statutory samples of sausage meat		4
Samples found to be mince containing a prohibited preservative		2
Prosecutions		1
Fine imposed	£5, 0s. 0d.	

Imported Foodstuffs.

Statutory samples of imported Foodstuffs		12
Samples conforming with regulations		12

The Fertilisers and Feeding Stuffs Act, 1926.

Statutory samples		14
Samples not conforming to the provisions of the Act		1

The Merchandise Marks Act, 1926.

Convictions obtained for contravention of Act		1
Fine imposed	£1, 0s. 0d.	

The Rag Flock Acts, 1911-1928.

Samples of Rag Flock		10
Samples in conformity with the Act		10

PORT SANITARY INSPECTION.

Ships boarded and inspected		621
Nuisances discovered and removed, including lack of cleanliness in living quarters, galleys, food stores and pantries, defective sanitary appliances, and the presence of rats and other vermin		3,316
Baits laid for the destruction of rats in the dock areas		14,000

VETERINARY SERVICES.

REPORT BY CHIEF VETERINARY INSPECTOR.

Milk and Dairies (Scotland) Act, 1914.

Visits to dairy premises	304
Newly-calved cows inspected in the Markets before being offered for sale	794
Premises on the Register at 31st December	47
Cowsheds on these premises	79
Average number of cows accommodated therein	1,313
Certificate of Registration transferred to new tenant	1
Certificates of Registration cancelled	2
Premises licensed under the Cattlesheds in Burghs (Scotland) Act, 1866	22
Average number of cows accommodated therein	59

Milk (Special Designations) Order (Scotland), 1936.

Producers' licences in force at January 1939:	
Standard	2
Certified	1
New licences granted during the year:	
Standard	7

Bacteriological Laboratory.

Bacteriological examination of milk:

Number of samples examined:		
Certified	39	
Tuberculin tested	41	
,, ,, (as supplied to Schools)	22	
Standard	23	
Pasteurised	30	
Milk for City Hospitals	3	
	—	158

Bulk Milk Samples submitted to biological test for tuberculosis:—

(Brought forward incomplete at end of 1938)—	51	Positive	1	Inconclusive	3
Tested and completed at 31st December 1939—	129	Positive	11	Inconclusive	3
Total	180				

Percentage infected with living Tubercle B.	6·8
No. of Positive cases in which infection was traced	8
No. of cows slaughtered under the Tuberculosis Order in the eight investigations	12

INSPECTION OF MEAT AND OTHER FOODS.

Gorgie Abattoir.

Class of Animals.	Number of Animals.			Weight (in lbs.) of Condemned Meat and Offals. (Offal Weights Estimated).
	Slaughtered.	Wholly Condemned.	Partially Condemned.	
Cattle	35,362	355	672	538,142
Sheep	170,634	759	764	60,564
Pigs	23,314	198	169	58,995
Calves	3,751	43	9	3,877

Wholesale Dead Meat Markets :—Meat (fresh and frozen) imported into City, estimated equivalent to 49,939 carcases.

Notification received of home killed carcases from beyond the City boundaries :—

Inspected—Carcases	1,087
Parts of Carcases	7
Seized and destroyed :—Carcases	47
Parts of Carcases	3
Heads	2

Retail Shops, Street Hawkers, Etc. :—

Visits during the year	7,257

Foodstuffs seized in Markets, Etc.	64,540 lbs.

Merchandise Marks Orders :—

Warnings issued re failure to observe requirements of this Order in respect of the ticketing of Imported Meat	10

Public Health (Meat) Regulations :—

Certificates of Approval granted in respect of accommodation provided for the storage of meat overnight, by persons who do not keep an open shop (Renewals during 1939)	5

Imported Foodstuffs inspected under the Public Health (Imported Food) Regulations (Scotland), 1937. Number of consignments	3,348

Imported Foodstuffs condemned or rejected and re-exported at the Port of Leith 888,729 lbs.

Summary, showing total diseased and unsound foodstuffs dealt with by the Department, in the City, during 1939 :—

	Weight in lbs.
At Abattoir—Carcases	375,557
Offal (weight estimated)	286,021
In Shops, Warehouses, etc.	64,540
At the Port of Leith	888,729
	1,614 847

Equal to 720 Tons 18 Cwts. 31 lbs.