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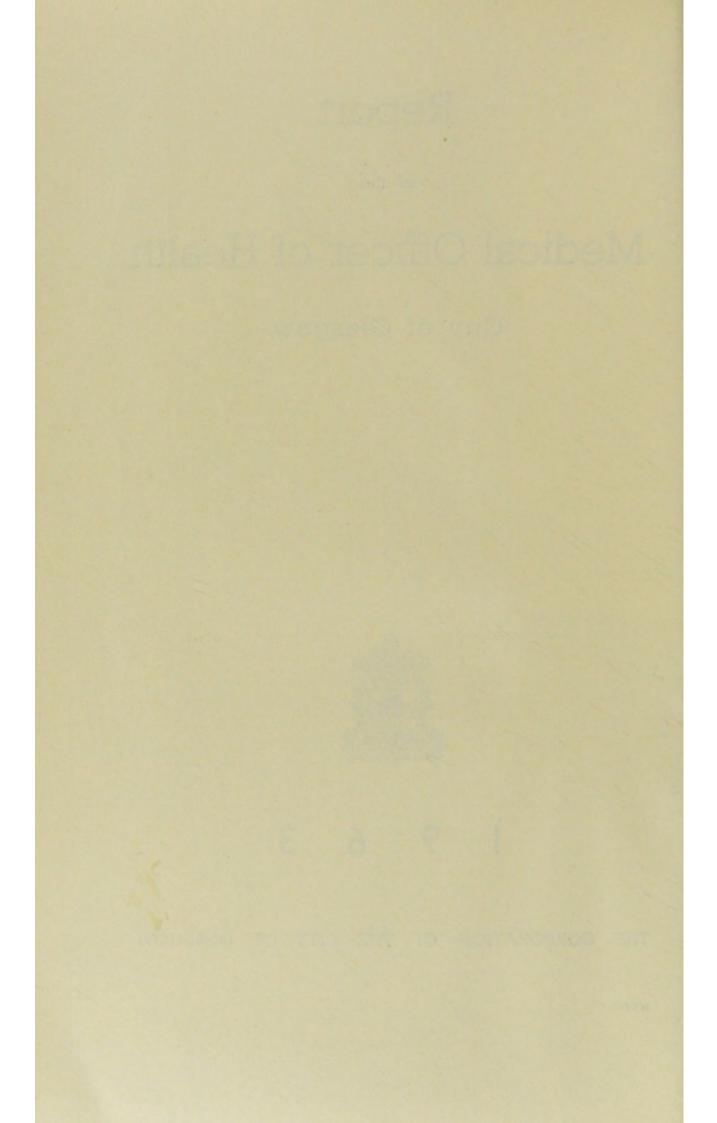
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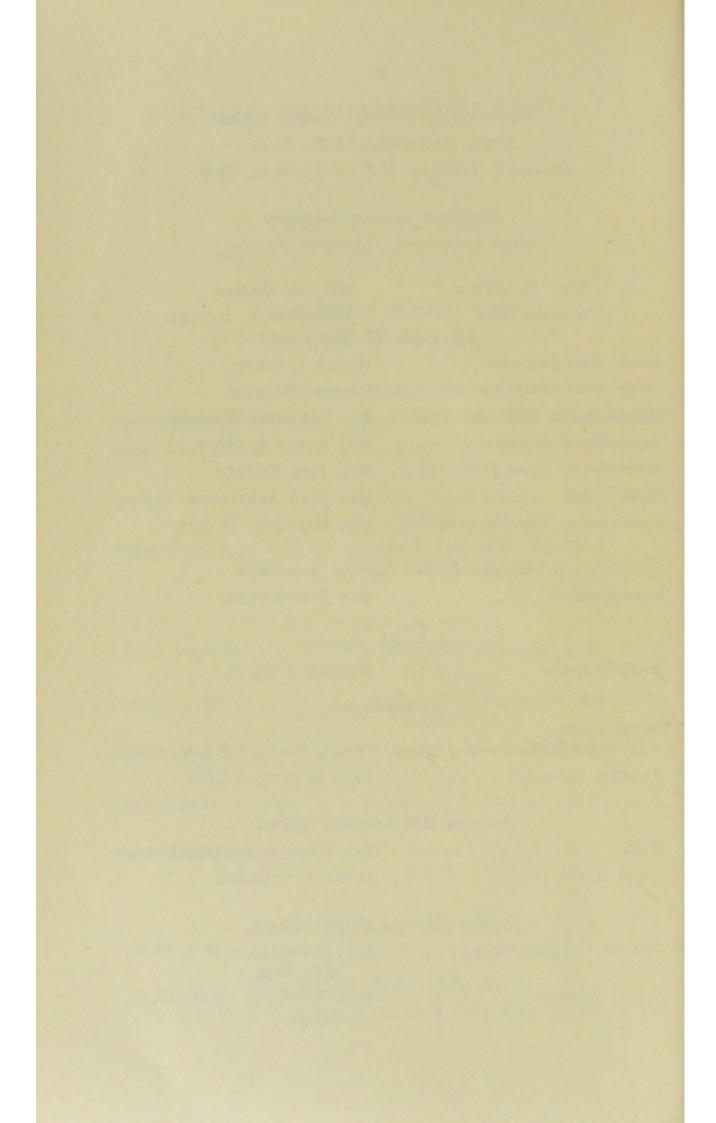
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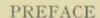
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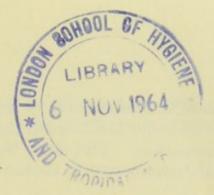
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The year has been one of slow and steady improvement in some fields but little progress is being made in others. There was improvement in tuberculosis and other infectious disease, but the infant mortality rate has remained stationary and the nutritional state of some of the children gives cause for concern. Environmental problems and difficulties continue to demand the full resources of the Department in spite of the progress being made in the closing and demolition of slum properties.

The section on Maternity and Child Welfare and allied services is the last to be prepared by Dr. Nora I. Wattie, Principal Medical Officer, who retired on the 31st May, 1964 after forty years' service with the Corporation. Dr. Wattie has been in charge of these services since 1933 and has been an outstanding figure in the field of maternal and child care. She has devoted the whole of her life to the improvement of the physical and mental health of the children of Glasgow and has taken an active part in other fields of public health. Dr. Wattie was President of the Society of Medical Officers of Health for the session 1961-62, only the second woman and first Scots woman resident in Scotland to hold this office. She has also been President of the Royal Sanitary Association of Scotland. In the Birthday Honours in recognition of her services to public health Her Majesty bestowed on her the Order of the British Empire. With the consent of the Committee on Health and Welfare Dr. Wattie is to continue her work in the field of health education with particular reference to the training of the mothers and fathers of the future by taking part in schemes of health education in Secondary Schools and in Further Education Colleges.

The frontispiece of the report this year is a photograph of the Moffat Street Reception House which was purchased by the Corporation in 1891. The house was originally built in 1818 by Claude Girdwood, machine maker of Hutchesontown, and since coming into the possession of the Corporation has been used as a Reception House. In terms of the Public Health (Scotland) Act, 1897, a Reception House is "for convalescents from infectious disease and for persons who have been exposed to infection." When not used for these purposes it has provided at various times valuable accommodation as a B.C.G. preventorium for school children, a centre for B.C.G. vaccination, a scabies treatment

centre, a delousing centre and, in recent years, a special day nursery for mentally handicapped children and a work centre for a voluntary organisation. The house has now been demolished as part of the Hutchesontown/Part Gorbals Development Area.

The slow progress being made in the improvement of the health of the City and the increasing demands for all the services makes most unlikely any contraction in the services as has been possible elsewhere. The duties of the Local Health Authority under the Mental Health (Scotland) Act, 1960, are in course of development and extension, and systematic health education of the population as a whole has hardly begun. Up to the present much of the health education has been carried out by health visitors in clinics, in schools and in the homes. The Dental Health Campaign for Glasgow and the West of Scotland which took place in 1964 is one of the few instances of health education of the public in general. Much time and energy in the future must be devoted to this aspect, particularly in education for living of school children and adolescents and of all food handlers in adequate food hygiene. Some training in food hygiene has been undertaken at the manager and assistant manager level, but the lessons learned are only slowly percolating down. The shoppers are becoming irritated by the many examples of unhygienic handling of food, the use of the bare hands in place of instruments, the exposure of uncovered food on the top of display shelves and inadequate protective clothing of the assistants. While many of the structural changes required by the Food Hygiene Regulations have been put into force, the practice of food handling still falls far below an acceptable level.

The population of the City has again decreased from 1,044,500 in 1962 to 1,029,147 in 1963, representing some 24,000 persons. The natural increase of births over deaths fell below 9,000 for the first time since 1956.

There were fewer births, 22,618, and the birth rate fell from 22.5 to 22.0, but is still the second highest rate within the past fifteen years. The illegitimate birth rate rose from 6.1 to 6.6 of the total births, the highest rate since 1945, and represents close on 1,500 children.

The marriage rate continued its slow fall to 8-6 per 1,000 of the population.

The death rate was 13.3 per cent., representing 13,717 deaths, the highest total since 1947. This increase was due chiefly to deaths from respiratory disease. Deaths from lung cancer in men and women continued their upward trend.

The total number of occupied houses at Whitsunday, 1963, was 321,655, being 3,424 fewer than in 1962. The number of unoccupied houses was 4,946 compared with 4,362 in 1962.

MATERNAL AND CHILD CARE.

The infant mortality rate has remained unchanged at 32 per 1,000 births. In the course of the last ten years the rate has varied between 36 and 31, and in spite of the massive efforts being given to maternal and child care little or no impression has been made on this rate.

Progress has been made in the reduction of stillbirths and neonatal deaths, but the number of deaths of infants between one and twelve months remains high. It reflects the adverse factors present in the City, such as bad housing, size of the birth rate, distribution of births throughout the social classes, parity and health of the mother, and the standard of maternal care. There are also social and educational factors illustrated by the marked distinction between the rate in babies born in Social Class V as compared with Social Class I. Intensive education of these families in the former group on the basic needs of infants and young children is still necessary.

While steps have been taken by the Regional Board to provide an increased number of hospital beds for mothers the need is still pressing until the standard laid down by the Montgomery Report is reached and passed. Glasgow is still far short of the 80 per cent. of births in hospital which is possible in Edinburgh and Dundee and over 90 per cent. in Aberdeen.

The nutrition of young children, particularly in the age group six months to two years, is unsatisfactory, and rickets has now reappeared in the City. The number of cases treated during 1963 at the Royal Hospital for Sick Children was 9, but there has been a marked increase in 1964. This problem is being investigated in co-operation with the paediatricians of the Royal Hospital for Sick Children.

Deaths from congenital malformations and diseases of early infancy together comprise the largest group of causes of death in children under one year. Another important factor is deaths from violence such as accidental asphyxia, accidental suffocation and injury. The number in this category was 35 as against 26 in 1962 and 22 in 1961.

Deaths in the age group one to five years were 101, 2 more than in 1962 and 10 more than in 1961. Deaths in male children were twice as many as in female children. The most common cause of death is accidents and violence such as poisoning, road accidents, etc.

The City hospitals report that they have provided treatment for 978 cases of burns and scalds in children under five years of age, 452 being burning accidents and 526 scalding accidents. Again the most frequent cause of burning accidents was the unguarded or inadequately guarded open fire and secondly contact with hot metal. In the case of the scalding accidents the majority were due to tea or hot water being spilled over the child.

The first full year's report on the working of the Assessment and Advisory Centre is included. This centre is now leading to a better assessment of the handicapped child's potential and to careful planning of his supervision. A second Assessment Centre is being opened in 1964 in the Queen's Park district of the City and is associated with a maternity and child welfare clinic and a special day nursery.

The health visitors attached to the Maternity and Child Welfare Service have had a particularly busy year dealing with new and complex problems that are arising in family life. They continue to visit young children who have suffered from burns and scalds, many of them avoidable. Health visitors are also in demand to speak at meeetings of various kinds and on a variety of topics associated with their work.

The number of registered midwives practising in the the City was 142, of whom 96 were full-time and 23 part-time domiciliary midwives in the services of the Corporation. During the year municipal midwives attended 4,590 cases, paying 44,084 antenatal visits and 59,208 during puerperium. Gas and air analgesia and trilene are now administered by midwives to those patients certified by their doctors as requiring it. Only midwives duly certified by the Central Midwives Board as being properly qualified to administer such analgesics are permitted to do so.

Welfare Foods.

The uptake of Welfare Foods, including National Dried Milk, again fell, although much of the decrease in National Dried Milk is being replaced by the more attractively packaged proprietary baby foods. The reappearance of rickets emphasises that children require foods which have been fortified with the necessary vitamins. National Dried Milk or similar milk should be included in a child's diet at least up to the end of the second year unless the appropriate vitamins are being obtained from another source. Cow's milk does not have sufficient vitamins to protect the child against rickets.

HOME HELP SERVICE.

This service which was originally intended to provide help in the home during the mother's confinement, now affords assistance in a variety of circumstances, and without it a family may have to separate or an old or infirm person be removed to hospital for an indefinite period. The service is not designed to provide permanent assistance but to give the family concerned time to make their own arrangements for securing assistance. Where, however, there is no family or near relative to care for an applicant who is so incapacitated by illness or infirmity as to require assistance for a more prolonged period the extended scheme is available.

Of the 1,712 domestic helps employed 438 were on a whole-time and 1,274 on a part-time basis.

The demand from the elderly chronic sick continues, and most of the part-time workers had two cases for two hours each and most of the full-time helps had three cases.

During the year 8,828 cases were assisted, 1,988 being maternity, 6,713 general, etc., and 127 tuberculosis.

A night sitter service for cancer patients reaching the terminal stage of their illness came into operation on 1st November, 1962. This service was initiated at the request of the Marie Curie Memorial Foundation and financed from Foundation funds. A night service is also available for patients suffering from other diseases. The night sitters are in attendance from 10 p.m. till 8 a.m. from Monday to Friday (inclusive). If no relatives are available to help during the weekend the night sitter attends on all seven nights.

HOME NURSING SERVICE.

During the year the Home Nursing Service staff paid 316,699 visits. These included 30,786 visits to maternity patients and 16,548 to patients suffering from tuberculosis.

The number of Home Nursing staff remained the same at 160, but the staffing position is still difficult and it has been found impossible to replace assistant superintendents for whom there are at present two vacancies.

The number of nursing appliances issued on loan during the year was 2,976, a slight increase on the number for 1962. Many of these items remain in use by patients over long periods.

SCHOOL HEALTH SERVICE.

The account of the work of the School Health Service is now included in the report of the Medical Officer of Health. For this year all the statistics deal with the calendar year ending 31st December, 1963. The statistics for the school year ending 31st July, 1963, have been prepared separately and submitted to the Scottish Home and Health and the Scottish Education Departments.

Medical staffing difficulties continued but have been eased by the employment of regular part-time staff and by the Assisted D.P.H. Course which has brought the shortage in medical staff down to three in July, 1964. The continuance of the Corporation's Assisted D.P.H. Scheme should ensure the full establishment before the end of 1965.

With the consent of the Corporation the routine medical inspection of nine-year-olds was discontinued and replaced by regular surveillance by the school medical officer and the health visitor by monthly visits to schools in their "parish" to see children selected at the five-year-old medical inspection for continued supervision and also any children recommended by the headmaster, the class teacher or the parent for special examination. A "Cases at Risk" Register has been formed to pinpoint children requiring greater medical supervision than was possible under the scheme of routine medical inspection.

During the autumn a poliomyelitis campaign was conducted principally in the age group five to six years. Also in the autumn there was B.C.G. vaccination and X-raying of 13-year-old pupils. Children of 14 years who gave a positive skin test in the previous year were re-X-rayed. On this occasion an opportunity was taken during the diphtheria immunisation campaign to give protection against tetanus.

Health education talks were extended to more schools and additional health visitors and seven married women doctors took part in this work. Authority has been obtained for employing up to 10 married women doctors to increase the health education programme. In this programme an endeavour is made to prepare young people to face the stresses and strains of adult life.

The audiometric survey scheme continued on the same pattern as in the previous year. The staff was increased by the appointment of one medical officer and two audiometricians. The acquisition of light-weight transistor apparatus was helpful as it avoided the need for special electrical connections being prepared for the school visits. The work of the audiology unit is to pick up deaf or hard of hearing children and to carry out a full examination to find the cause and remedy the defect or give such assistance as may be necessary.

A class was established for aphasic children, that is children who are found to be not deaf but who do not speak.

The number of speech therapists has been increased by five. The introduction of tape recorders for the use of the speech therapists has been found to be a valuable aid for children with speech difficulties, including a number of stuttering Pakistanis and Indians. Once these children become more fluent in English, the stuttering tends to disappear.

It is with regret that we have to record the sudden death of Mr. David MacLaren, the Chief Dental Officer, in the early part of the year. His place was taken by Mr. Martyn L. H. Davies who has prepared the section of the report on dental inspection and treatment. For the first time for many years the number of dental officers has reached full establishment and four dental auxiliaries joined the staff under a pilot scheme of the Scottish Home and Health Department.

In addition to the work of the Dental Section the Chief Dental Officer was also involved in preparations for an intensive dental health campaign which took place early in 1964.

A considerable waiting list exists for tonsillectomy in children who reside north of the River. This matter has been taken up on several occasions with the Western Regional Hospital Board but little progress has been made.

A survey of burns and scalding accidents to school children was carried out by health visitors. By far the largest number of burns were due to fire-works and open or electric fires.

In the treatment of orthopaedic cases it was noted that foot defects among older children were due to the wrong type and fitting of shoe. Parents should consider some of the factors that go to make up a shoe suitable for the foot of a growing child.

The heart consultant has remarked that fewer new cases of organic heart disease are now being seen at the clinics for the first time.

Deaths of school children were fewer than last year but there were more fatalities in boys in the 5-10 year age group due to violence of all kinds.

The number of free dinners provided at school is increasing, 25,483 on a typical day in November, 1963, compared with 20,730 and 19,652 on similar days in May, 1962, and June, 1961.

INFECTIOUS DISEASES.

The immunisation centre for the West of Scotland against yellow fever and certain other diseases likely to be met with in a foreign country has continued to operate during the year, its seventeenth year of existence. Some 3,459 travellers were inoculated against yellow fever compared with 2,912 in 1962. In addition 3,669 inoculations were given against smallpox, cholera, tetanus, typhus and enteric fever. As a matter of convenience where crews of large ships are concerned it is customary to offer vaccination against yellow fever on board ship.

The presence of smallpox in England in 1962 increased considerably the numbers coming forward for vaccination and re-vaccination. In 1963, however, the total number of persons coming forward for vaccination has fallen considerably, even lower than the pre-1962 level. There is also the effect of the recommendation that primary vaccination in infancy should be carried out preferably in the second rather than the first year of life. This has led to a considerable reduction in the total number of infants vaccinated. Should smallpox be introduced into Glasgow it is inevitable that an increasing number of completely unvaccinated persons will die of the most acute form of the disease if the present low level of vaccination continues.

There was a limited outbreak of paratyphoid in the south-side of the City in which the circumstantial evidence pointed to the source of infection being imported egg albumen used to make meringue shells. While no positive result was obtained to extensive bacteriological examination the outbreak would appear to parallel the much larger outbreak in Edinburgh which occurred at the end of 1962.

The list of chronic carriers of enteric infection has been brought up to date and continued supervision maintained.

The number of notifications of dysentery reached 2,675, a decrease on the previous year, but in no way indicating the continuing diminution in this infection. Both Flexner and Sonne types are present in the City. Strict attention to hand-washing before preparing and eating food and after visiting the toilet is the most important preventive measure which does not appear to be practised where dysentery is prevalent.

Reference is made elsewhere to the presence of undulant fever in the City due to Brucella abortus from drinking infected unpasteurised milk. Emphasis is again placed on the danger of purchasing unpasteurised milk even of the highest quality.

The number of cases of food poisoning notified to the Department increased, although there was a decrease in the number of incidents.

In more than half the cases the casual organism was not found, due to delay in notification with the resultant prior disposal of the suspected food. The majority of cases where a source was found were due to various types of Salmonella organism, particularly Salmonella typhimurium.

The number of cases of scarlet fever notified fell to 274, just 4 less than last year. There have been no deaths from this disease since 1956.

For the seventh successive year no case of diphtheria was recorded, and no deaths have occurred for the past nine years.

The presence of poliomyelitis in the City in 1962 and the heavy vaccination programme that was undertaken has resulted in the absence of poliomyelitis in the City. There is, however, another group of illnesses which may be regarded as parallel to poliomyelitis and which were prevalent in 1963. This group of acute virus infections have been increasing over the year, and in 1962, 228 patients were admitted to hospital suffering from virus meningitis due to three main viruses—Mumps virus, the Coxsackie virus and the ECHO virus. The Coxsackie and the ECHO viruses have numerous strains and can cause illnesses resembling poliomyelitis sometimes with muscular weakness. Only the development of virology in recent years has permitted these cases to be separated from true poliomyelitis.

The possibility of the return of poliomyelitis makes it essential to maintain a high level of protection, particularly in children under two years of age who are most vulnerable to this infection. Each year in the spring a campaign is launched to secure a high level of protection in the most susceptible children, and the percentage protected in this age group between one and two years is now 68.

1963 should have been an epidemic year for measles but only 2,296 cases were brought to the notice of the Department. There were three deaths.

It is customary to expect that whooping cough and measles epidemics will alternate in succeeding years. Certainly the number of whooping cough cases notified in 1963 (2,695) compares with 272 in 1962, the lowest number of cases notified since 1889. There were 2 deaths. The evidence would point to both measles and whooping cough departing from their usual periodicity.

No case of Weil's disease was reported during 1963. Starting in December, 1962, sewermen were offered inoculation against this disease

with a vaccine prepared by the Consultant Bacteriologist of the Glasgow Royal Infirmary. Sewermen are liable to develop this infection from contact with infected rats. There were also six cases due to Leptospira canicola infection, a disease associated with cattle, dogs and swine.

There were 3,708 cases of primary pneumonia notified during the year, 25·2 per cent. being aged 65 and over. There were 738 deaths, 52·8 per cent. occurring in the first quarter of the year. The number of deaths from bronchitis was 900, an increase of 123 compared with the previous year. Almost all the deaths from bronchitis occurred at ages over 65.

A comparison is given in the report of the death rates from pneumonia and bronchitis in Glasgow and other cities in Scotland and England.

Influenza was again present in the City during the first half of the year, and the number of deaths, 95, is 59 greater than in 1962. The statistics for respiratory disease, including influenza, have been influenced of course by the severe climatic conditions experienced in the first quarter.

TUBERCULOSIS.

There were 863 cases of pulmonary tuberculosis notified in 1963 compared with 927 in 1962. The slow progress in the control of tuberculosis is disappointing, particularly as the incidence of the disease elsewhere is still below the trend in Glasgow. Continuous and persistent efforts are being made, but only a fractional improvement is being obtained and it may well be years before the disease is finally eradicated.

As in 1962, the statistics for mortality from tuberculosis have been shown on a basis computed by the Registrar-General. There were 214 deaths from pulmonary tuberculosis compared with 189 in 1962, giving a death rate of 20.8 compared with 18.1 in 1962. This is the first time the rate has increased since 1958. There was a preponderance of male deaths, but no death of a male under 35 years of age, while there were 119 deaths in men over 55 years of age. This is the age group which is notably affected by chronic respiratory disease. The adverse weather of the early winter may well have had some effect on the death rate. As will be seen from the table in the Tuberculosis Section of the report, however, the death rate in the City is far above that ruling in other cities in Scotland and England.

The number of cases of non-pulmonary tuberculosis notified remains approximately the same, 116 as compared with 117 in 1962. Included in this figure are 11 cases of tuberculous meningitis. These figures give rise to some concern for although no infant had tuberculous meningitis there were four cases in the age group one to five years. The total of meningitis cases was the highest since 1958 and the ratio of meningitis to non-pulmonary tuberculosis the worst since 1957. This has happened in spite of the fact that more infants were given B.C.G. vaccination in 1963 than ever before.

The vaccination of school leavers with B.C.G. continues, and a further effort was made in 1963 to secure a high level of parental consent. Out of a total of 15,936 school children consent was obtained in 95·3 per cent., only fractionally lower than 95·5 per cent. in 1962. The percentage of negative reactors was 83, which compares with 82·4 in 1962 and 80·5 and 80·7 in the previous two years. These rates are still indicative of considerable infection within the community and emphasise that tuberculosis is still a disease to be reckoned with.

The B.C.G. campaign reflected the usual high standard of ability shown by the teams of medical officers, health visitors and clerkesses, and was again matched by the courtesy and co-operation of the Education Department and the teaching staffs which played a large part in the successful operation of the scheme.

The total number of vaccinations of new-born infants during the year was 11,439, a slight increase on 1962 and above the peak year of 11,263 in 1961.

The total number of miniature and full-size X-ray films taken in the X-ray Section in 1963 was 9,418 compared with 11,815 in 1962. One of the principal causes of the decrease in numbers was the decision that school teachers in future should be asked to be X-rayed only in alternate years. This has been made possible with the marked reduction in the incidence of tuberculosis and the yield from the X-ray survey.

An important contribution to the detection of tuberculosis was the arrangement introduced in March, 1963, for the pre-employment X-ray of immigrants recruited to the Corporation Transport Department. Of the 240 who were X-rayed 5 cases of tuberculosis were discovered.

VENEREAL DISEASE.

The total number of new cases of venereal disease increased from 1,424 in 1962 to 1,433 in 1963. The increase was due to a rise in the number of cases of acute gonorrhoea in males and females. The number

of patients attending the treatment centres suffering from conditions other than syphilis and gonorrhoea also increased in males and females. The number of new and transferred-in cases of all types attending for the first time numbered 4,721 as compared with 4,609 in 1962. There was no case of congenital syphilis in a child under one year of age, and only four cases at all other ages, the lowest figure so far attained.

MENTAL HEALTH.

Community care for those suffering from mental disorder continued on the same lines as in 1963.

The special day nursery at Moffat Street opened in October, 1961, has had to be closed owing to redevelopment, and accommodation was found in a temporary hutted building in Broomhill which was specially adapted and equipped for the purpose. The new centre is more spacious and has the advantage that there is open ground for outdoor activities. The centre has 25 places and continues to take children for a five-day week.

The diversionary centre mentioned last year, also in Broomhill, is still not yet available. The work of adaptation is in progress and it should be completed before the end of 1964. The diversionary centre is one of our most urgent needs at the present time as there is no alternative local authority provision for children found unsuitable for education and training.

The assessment centre for handicapped children at Glenfarg Street completed its first full year of operation. It is obvious that it is filling a need in the community. To the centre come children handicapped by mental or physical defect for assessment and guidance. The sister attached to the clinic has taken the six months' course on mental health for health visitors and is now spending the greater part of her time in the clinic and on home visitation and counselling. In this work we have had the co-operation of the Professor of Child Health and the Senior Child Psychiatrist.

The day centre established at Laurieston House by the Glasgow Branch of the Scottish Society for Mentally Handicapped Children continues to do good work and make the best of the accommodation available. Only 20 children can be taken at a time, including six helpless or "cot" cases. The children spend one day a week at the centre which is staffed by volunteer ladies who have now become very experienced in the handling of these children and have an intimate knowledge of each child.

The Stewart Home at Cove, also run by the Society, continues its valuable work in providing holidays for mentally handicapped children and thereby giving temporary relief to the parents. The holiday period ranges from two weeks to two months and the children are aged from one to thirteen years.

The Department has two work centres for adult mental defectives, one at Laurieston House for men, the other at Killearn Street for women. The Scottish Society has also provided a work centre in huts at Broomhill owing to previous accommodation in Moffat Street having to be cleared for redevelopment. They carry out simple work for commercial concerns.

The after-care of the mentally ill carried out by health visitors attached to mental hospitals and psychiatric units has attracted much favourable comment. Because of the thorough initial training and the in-service experience which involves contact with the psychiatrist and psychiatric social workers the service they provide is of a high standard. At the end of the year arrangements were made to expand the service by providing two health visitors for Stobhill Hospital and one for Gartloch, and additional health visitors for Southern General, Woodilee and Eastern District Hospitals. In the case of the Eastern District it was proposed that one of the health visitors would include in her work the after-care of the attempted suicide cases treated in the Royal Infirmary. The number of health visitors carrying out after-care work has been increased and additional health visitors will have gone through the Mental Health Course by 1964.

The training programme of the Department includes not only the six months' course in mental health for health visitors but also three-week courses for medical officers and attendance of senior welfare officers at the course organised by the Edinburgh Public Health Department. There is also the two-year course for the certificate in social work of the Scottish College of Commerce. This year two medical officers were permitted to attend the lecturers' discussions and case conferences of the mental health course for health visitors and similar attachments will be made for the succeeding courses.

BLIND PERSONS.

At the Regional Certifying Clinic 757 persons were examined for the first time and 399 re-examined. Of the number examined for the first time 59·3 per cent. were certified blind and 27·6 per cent. partially sighted. Of those re-examined 45·6 per cent. were certified blind and 44·1 per cent. partially sighted. Of the patients examined for the first time 43.9 per cent. were seen at home and of those re-examined 33.1 per cent. at home.

With the co-operation of the Mission to the Outdoor Blind a followup scheme deals with those patients seen at the clinic and considered by the surgeons as likely to benefit by further treatment.

PORT HEALTH AUTHORITY.

The main alteration in the work of the Port Health Authority was the closure of the Boarding Station at Princes Pier, Greenock, on 31st May, 1963. This station was established in 1901 principally to safeguard the City of Glasgow from seaborne infection from ships coming from foreign and possibly plague infected ports. During 1900-1 there were 48 cases of plague with 16 deaths, and for this reason the inspection of shipping in harbour areas within the jurisdiction of Glasgow was extended to all ships calling at plague infected ports during the voyage. At first the station was manned by the port medical officer and one inspector, but during the period of both world wars the staff was greatly augmented to cope with the huge convoys of ships proceeding to and from the Clyde. In recent years the incidence of infectious disease has fallen and only cases of minor sickness are now being recorded. The need, therefore, to maintain the Boarding Station was reconsidered by the Committee on Health and Welfare, and after 62 years of valuable service the station was finally closed down.

Information on statistics compiled and issued by the World Health Organisation help to maintain a constant watch on the control of infectious diseases all over the world. With the closing of the Boarding Station ship owners and agents were informed of the new instructions necessary to ensure conformity with the Public Health (Ships) (Scotland) Regulations, 1952 to 1963. Ships direct from foreign ports must now send a wireless message to "Portelth, Glasgow," not more than 12 hours and not less than 4 hours before the arrival of the ship at the Tail of the Bank. The message should include the name of the ship, whether there is a clear bill of health and if not the probable condition from which the patient is suffering.

All ships are now boarded by the Port Health staff and a representative of H.M. Customs Waterguard when the ship finally docks at the appointed berth in the Glasgow dock area. There will still be occasions, however, when boarding at the Tail of the Bank is necessary.

During the year 6,391 vessels with an aggregate tonnage of 7,812,792 entered the port. Of this total 1,316 vessels had an aggregate tonnage of 4,264,712 arrived from foreign ports, 650 of which were from infected ports.

There was no case of plague, cholera, yellow fever, smallpox or typhus in any of the vessels entering the area. The introduction of smallpox into England and Wales by air from Pakistan early in the year made it necessary to maintain a careful watch on all vessels coming from smallpox infected ports. The cases of minor sickness which arose included chickenpox, infective hepatitis, measles, mumps, pneumonia and tuberculosis.

The investigation into the conditioning of drinking water supplies on ships has been continued. All vessels must now have their water supply system completely independent of all other water systems aboard.

The Seamen's Hostel in Queen's Dock continues to function smoothly. The additional accommodation required in 1962 has greatly improved the social facilities for the native seamen residing in the hostel.

Special attention has been paid to hygiene and sanitation in the dock areas, and an experimental system for the disposal of refuse from wharves, sheds and roads in the dock area at King George V dock has been carried out for a period of one year.

The control of rat infestation in ships and on the dock side is an important duty of the Port Health Authority. The rat searchers made 2,468 visits to vessels in the port, and 3,932 visits to premises in the dock area, where in 245 instances they found evidence of rats. The presence of the black rat, r. rattus, is a reminder that this type of rat carries plague. Specimens of black rats are taken from time to time to the Laboratory for examination, but on no occasion for many years has the germ of plague been found.

During the year a total of 761,207 tons of foodstuffs was landed at the dock, most of it from ships arriving from overseas ports. All food products landed were examined under the Public Health (Imported Food) (Scotland) Regulations, 1937-48, and some minor irregularities found. These matters are brought to the attention of the importers and a decision taken as to the disposal of food found unfit for consumption.

The importation of egg products and desiccated coconut still demands sampling to ensure that they do not contain food poisoning organisms. The Liquid Egg (Pasteurisation) (Scotland) Regulations, 1963, will ensure that all egg products are pasteurised before being exported from the country of origin.

THE CITY LABORATORY.

Included in the report is a section on the work of the City Laboratory by its Director, Dr. T. F. Elias-Jones. The Corporation's Public Health Laboratory was transferred to the Western Regional Hospital Board in 1962. The Laboratory has undergone considerable alteration to improve its efficiency and has required many new items of equipment.

The total number of examinations completed during the year was 141,991, an increase of 16 per cent. over the figure for 1962. While the volume of work concerned with public health control remained more or less constant the increase was almost entirely due to an extension of the clinical pathological work and particularly work done for general practitioners.

Of the 453 nose and throat swabs examined during the year for the presence of the diphtheria bacillus there were two positives both of the C.diphtheriae gravis type, but both were found to be non-virulent.

At the beginning of the year an interesting investigation was undertaken because a patient admitted to one of the city hospitals in December, 1962, had been found to be suffering from abortus fever. The patient was one of a small group of individuals who had been supplied by milk from a farm. This episode illustrates yet again that the only safe milk is heat-treated milk. It also draws attention to the fact that for every case of known brucellosis there may be many unsuspected subclinical infections.

There were 215 specimens submitted for the diagnosis of enteric fever and a further 329 specimens for control purposes. Eight individuals were found to be excreting S. paratyphi B, but four of these were known carriers. S. typhi was isolated from three persons already known as persistent carriers.

The search for the cause of food poisoning resulted in 3,970 specimens being submitted from patients or their contacts. This led to the diagnosis of 51 new cases due to the salmonella food poisoning organisms, 40 fewer than last year. The most common type was S. typhimurium which was isolated from 35 of the 51 new cases.

There were also submitted 100 samples of foodstuffs suspected of causing food poisoning. S. typhimurium was isolated from a sample of whole eggs and Cl. welchii and Staph. aureus were found on six and five occasions respectively.

The number of isolations of dysentery bacilli from new cases fell to 1,068 compared with 1,571 in 1962. Towards the end of the year,

however, the number of isolations increased. Of this total Sh. sonnei was responsible for 86.4 and Sh. flexneri (including the Newcastle/Manchester type) for 13.6 per cent. A total of 14,616 specimens was examined, 9,115 from suspect cases and 5,501 from contacts and repeat specimens for clearance.

Specimens of blood submitted to "screening" tests for syphilis amounted to 16,514. Any specimens giving a positive or doubtful reaction to the "screening" test are more fully investigated by means of the Cardiolipin Wassermann Reaction, the Reiter Protein Complement Fixation Test and the Precipitation Test.

Rather fewer specimens were submitted for the Gonococcal Complement Fixation Test, and 35 of the 241 tested were found positive. The number of smears and swabs of exudates amounted to 6,138, of which 73 smears were positive. Of the 4,729 specimens that were cultured for the presence of N. gonorrhoeae 361 were found positive.

In the clinical pathological work there was an increase in the number of specimens from 50,000 to 58,000. These specimens included urine for the presence of bacteria and particularly the sensitivity of these bacteria to various types of antibiotics, the *in vitro* test in pregnancy diagnosis, haematological specimens and miscellaneous investigations.

Investigations into the City's milk supply continued. "Certified" milk and "Tuberculin Tested" milk, both raw milk, still fail to reach a satisfactory high standard.

Reference has been made in previous reports to the unsatisfactory nature of specimens from the "whirlcool" type of dispenser, although there has been some improvement this year. These machines, if they are not frequently sterilised and at all times kept scrupulously clean, can be a serious source of contamination of "Pasteurised" milk.

In the supervision of the City's milk supply are included examination of the bacteriological standards of milk bottles, milk cans and other equipment.

Examination has been continued of the quality of cream, ice cream and imitation cream. The results obtained were not quite up to the standard in 1962.

Samples of foodstuffs were submitted for wholesomeness, including milk foods.

HOUSING.

The total number of houses provided by the Corporation and the Scottish Special Housing Association since the beginning of local government operations amounts to 123,910. The number constructed during the year was 3,492 compared with 2,005 in 1962 and 3,049 in 1961.

The clearance of slum dwellings continues by the representation of houses for closing and demolition, and during the year 1,866 houses were represented as unfit. During the past ten years 17,297 houses have been closed or demolished, and to these have to be added houses condemned as dangerous by the Master of Works and houses closed voluntarily by the owners.

During the year 65 tuberculous families were recommended for priority housing and 78 families were rehoused, leaving 84 families to be dealt with.

The secondary priority scheme continues to absorb a large amount of valuable staff time. Some 277 recommendations were made to the City Factor, a figure equal to 6 per cent. of all the applications received. With the pressure on housing it is to be expected that the applicants will endeavour to find some basis to satisfy the conditions for letting laid down by the Property Management Committee. It is unfortunate, however, that so much time has to be spent on applications that have no hope of being considered for priority.

The increasing demand for housing accommodation has continued to result in high density building. The limited space available within the City for new building makes it imperative that if high density building is not to continue more space must be found even be it outside the City. The new towns and the expanded towns are not meeting Glasgow's housing needs with the speed which they require.

FOOD INSPECTION.

The new legislation coming into force during the year included amending regulations to the Ice Cream (Scotland) Regulations, 1948, the Bulk Transport of Milk (Scotland) Order, 1963, the Liquid Egg (Pasteurisation) (Scotland) Regulations, 1963, and various food standards and codes of practice.

During the year a total of 5,063 samples of a wide variety of foodstuffs was submitted to the City Analyst for examination. Of the 1,371 formal samples 41 (3 per cent.) were found to be adulterated, and of the 3,692 informal samples 92 (2.5 per cent.). Successful proceedings were taken in 25 cases.

As in previous years court proceedings against butchers for the presence of preservatives in mince and sausage meat outnumbered those taken against all other traders.

Meat colour preservatives have now been declared prohibited substances. These are in the main nicotinic acid and ascorbic acid. Sample preservatives were examined for the presence of these substances and the results were positive in 17 per cent. for nicotinic acid and 12.8 per cent. for ascorbic acid.

The number of complaints received by the Department alleging adulteration, contamination or unhygienic practices in shops and restaurants increased during the year to 241. The public are becoming more conscious of malpractices and their co-operation in maintaining an adequate standard is to be commended.

The number of milk producers in the City is 25, the number of pasteurising establishments 15, and the number of dairies 1,812, the last mentioned including 25 producers and 16 dairymen holding supplementary licences.

The average daily consumption of milk, excluding school milk, fell from 92,151 to 91,269 gallons. The percentage of failures in tests of "Certified" milk rose from 16·1 to 18·2 per cent., and the failures from Tuberculin Tested (Unpasteurised) milk rose from 7·0 per cent. to 12·6 per cent.

Reference has already been made to the advantages of consuming properly pasteurised milk. In spite of the advantages claimed for "Certified" milk and raw "Tuberculin Tested" milk there are still the dangers inherent in untreated milk.

Visits of inspection made to dairy premises numbered 6,561. It was found necessary after several warnings to report to the Procurator-Fiscal one shopkeeper who was selling milk without first having obtained a certificate of registration from the local authority. He was convicted and fined £5.

Reference has been made in previous years to the unsatisfactory nature of milk samples drawn from milk dispensing machines. While some improvement has resulted from the efforts of the Milk Officer in advising the operators of the proper method of management of these machines they still fall far short of what should be accepted. There is as yet, however, no legal bacteriological standard for milk dispensing machines.

The investigation begun last year into the hygienic handling, storage and display for retail sale of cooked meats was continued. The results obtained from sampling are still not satisfactory. Where unsatisfactory results are reported the necessity for scrupulous cleanliness in cutting, handling, display and storage are stressed to the charge hand. The investigation continues.

The wording on labels enclosing pre-packed foods exposed for sale was again the subject of close check for possible misleading descriptions and infringements of the Labelling of Food Orders, 1953 to 1961, and Section 6 of the Food and Drugs (Scotland) Act, 1956. A number of examples are included in the report.

The Department co-operates with the University of Glasgow in the classes on Food and Food Hygiene conducted by the University Extramural Study Department for managers and supervisory staff of food premises. Much retraining and education has yet to be carried out before the standard of food handling by the personnel of retail shops reaches an acceptable level.

AIR PURIFICATION.

The coming into force of the Smoke Control Order for the Corporation's seventh area, the Ward of Provan, doubled the number of houses covered by Orders in the City. Orders now affect 41,150 houses and an area of 11,339 acres.

The Craigton Smoke Control Area Order made by the Corporation in 1962 was the subject of an official enquiry and was approved by the Secretary of State with minor alterations. The Order now comes into force on 30th September, 1965.

With the delay in the Craigton Ward it was decided to proceed with the Shettleston and Tollcross area, and an Order was made by the Corporation on 2nd May, 1963, and approved by the Secretary of State on 24th October, 1963. The area has an acreage of 610 and consists of 5,248 dwellings.

The last remaining ward of the City's first five-year plan for clean air is Dennistoun. An Order covering Dennistoun was made on 19th December, 1963, and the Secretary of State's approval is awaited.

The first five-year plan for one reason or another will take seven years to complete. The Health and Welfare Committee have been considering the next step but their hope of making the remaining part of the City smoke-free within seven years is likely to be somewhat delayed owing to difficulties in fuel supply, particularly electricity.

In Section 95 of the Housing Act of 1964, the Secretary of State has power to withhold grant for adaptations to fireplaces which would use scarce fuel, and notification has been given that these powers are likely to be used to restrict the adaptation of fireplaces to electricity.

Routine and special observations have been continued by the Air Purification staff both over the existing Smoke Control Areas and industrial and shipping parts of the City. It has been found necessary to prosecute a number of tenants for the emission of smoke and to warn others of the need to use only smokeless fuel. Numerous complaints have been received from members of the public in Smoke Control Areas of failure to comply with the Order, not only denying the area the advantage of clean air but imperilling the health of their neighbours.

Complaints are still received about the smoke problem of engine servicing depots and smoke being emitted from steam locomotives in the centre of the City. While there has been a marked improvement with the development of electrification and the use of diesel locomotives the presence of steam locomotives pouring out smoke is all the more noticeable.

The classes in boilerhouse practice promoted by the Corporation of Glasgow and the Scottish Division of the National Society of Clean Air were carried on during the year, their 48th winter session. The need for adequate training of boilerhouse operatives is now recognised not only as an essential part of the clean air programme but as a measure to secure efficiency in steam raising.

The estimation of atmospheric pollution by instruments has continued, and use has been made of the latest equipment designed by the Department of Scientific and Industrial Research for the automatic control of apparatus over the period of a week.

GENERAL SANITARY OPERATIONS.

Measures have been continued to reduce the pigeon population within the City. The area previously treated on the north side of the River Clyde was extended and in addition a similar area was treated on the south side. In all during the year four operations were carried out and 8,745 pigeons destroyed. This work was only made possible by the co-operation of the various authorities involved.

No success has been obtained in the control of starlings. The equipping of buildings in the main shopping centre with bird repellent systems has improved conditions for the customers and passersby, but the birds have moved out into adjacent areas not so far treated.

A special drive was mounted during the year to deal with rat infestation in sewers by using a fluoride compound. Sections of the sewers were dealt with one after the other, and during the period of the operation some 4,074 manholes were treated and in 33 per cent. a substantial "take" was recorded. The assistance provided by the Master of Works and City Engineer made these operations possible and did much to ensure their success.

An extensive rat infestation in the north-west part of the City was complicated by the fact that the rats appeared to be insensitive to Warfarin. An operation was mounted which lasted five weeks and included extensive prebaiting. The use of other poisons in addition to trapping and gassing cleared the infestation which had affected hedgerows, and stackyards in the vicinity of farm buildings.

Reference is made in the report to the complications that have arisen from the redevelopment of the area in the Cowcaddens Ward known as the "soda waste." Under the waste are springs which dissolve out some of the chemicals. If this liquor reaches the sewer system it will create complaints of smells over a very wide area. For this reason the liquor is drained into a special pipe which passes along the Queen Street tunnel, down the middle of Buchanan Street to the river. The first sign that any part of this pipe is choked is complaint of smells from St. George's Cross area. It is because of this long standing condition that special steps have had to be taken to deal with the liquor during redevelopment.

The number of nuisances coming to the attention of the Department has remained consistently high, and some 51,013 were abated during the year. As in previous years choked drains still outnumbered all other types of nuisance, and the use of Section 5 of the Glasgow Corporation Consolidation (General Powers) Order Confirmation Act, 1960, has had the effect of having the drain cleared expeditiously in most cases by the owner's tradesmen.

Early in the year it was decided to increase the number of staff dealing with the problems existing among the aged and infirm. A number of nurses previously engaged on the survey of Corporation houses were allocated to this task. In the course of this work many sociological problems were uncovered and met.

Under Section I of the Noise Abatement Act, 1960, noise or vibration which would amount to nuisance becomes one of the categories of nuisances to be dealt with under Part 2 of the Public Health (Scotland) Act, 1897. During the year 24 complaints of noise were

investigated, many of them relating to industrial premises or to early morning traffic noise. Some improvement or abatement was obtained in each case.

WELFARE.

The number of small Homes for the accommodation of old people remains at 18. Work has commenced on a house adjoining Mainsholm and when completed it will increase the accommodation there by 15 beds. The opportunity has been taken to instal a passenger lift, and while this work is in progress the residents of Mainsholm have been transferred to Frognal where they will be for about six months.

The fourth specially designed house is in course of erection at Castlemilk and will accommodate 41 patients. It is most conveniently sited close to a group of old people's flats within easy access of shops and the public library.

The total residential accommodation remains at 1,750 comprising 581 places in the small Homes, 647 in Foresthall and 492 in Crookston. In Foresthall of those in residential accommodation 74 per cent. are of pensionable age, and those in the younger age groups are suffering from some handicap which makes residential care and attention necessary. In the smaller Homes the majority of the residents occupy single, double and three or four-bedded rooms.

Burnbank, Windlaw and Davislea, along with Crookston and part of Foresthall, continue to provide for the most frail and a 24-hour nursing staff is on duty in these Homes.

Of the 1,720 beds available in the City for the accommodation of old people 506 are reserved for those in the frail ambulant class.

Close co-operation exists between the Department and the Hospital Geriatric Service under the direction of Dr. W. Ferguson Anderson. Residents in small Homes suffering from temporary illnesses even where there is not a 24-hour nursing service are nursed by the staff as they would be cared for in one's own home.

The total number of applicants for admission to Homes during the year was 1,202 an increase of 7 over the previous year.

In addition to providing accommodation in Corporation Homes the Department supplement the cost of maintenance of aged persons in voluntary homes. Under the National Assistance (Registration of Homes) (Scotland) Regulations the local authority is required to inspect and register Homes, the sole or main object of which is the provision of accommodation for aged persons, for the blind, crippled or deaf and dumb. During the year three additional Homes were registered, bringing the number to 19.

The domiciliary services for the aged include the Meals-on-Wheels Service operated by the W.V.S. with the support of the Health and Welfare Department, the work of the Glasgow Old People's Welfare Committee who run clubs in almost every district of the City, and the various voluntary organisations which run lunch clubs where pensioners may purchase a lunch at 1s. per head, the balance being met by the Health and Welfare Department.

During the year the first all-day club for old people was opened at St. Mungo's Church, Parson Street, by a local organisation affiliated with the Glasgow Old People's Welfare Committee. This club is open six days of the week and has the usual facilities, including a daily lunch club. A similar club has been planned by the Old People's Welfare Committee in the Battlefield district. This Committee also provides a home visiting service for older people who are no longer able to attend clubs or lunch clubs.

Many elderly people and many handicapped younger people are confined to their homes through physical disability. Services to increase the independence of such people have been growing steadily over the past few years and have been limited only by the shortage of trained occupational therapists. Adaptation to houses or the provision of aids of a substantial nature are provided by the Corporation. These include pavement crossovers to enable handicapped persons to use an invalid vehicle, the provision of a very loud bell or flashing light to indicate a caller at the door of a deaf person, the provision of rails at the bath to provide support, the widening of doorways or the provision of sliding doors to give access for invalid chairs, and the provision of ramps over steps to enable a person confined to a wheel chair to get out into the open air. Also available are hydraulic lifts to transfer a severely handicapped person from a bed to a chair or to lower that person into a bath.

The After-Care Section continue to interview along with the head teacher and youth employment officer all young persons leaving the 13 special schools and the 11 junior occupational centres. If there is little prospect of work in open employment admission to the Department's senior occupational centres may be necessary. In addition to the two existing centres at South Portland Street and Killearn Street

work is proceeding at the Pollokshields Burgh Hall and at Whiteinch Hall which will on completion be opened as additional centres for young women and men respectively.

The Department's social clubs for adult handicapped persons continue to function. At Laurieston House the most severely handicapped are catered for and special transport is provided by the Department for those unable to travel. Premises are also available for committee meetings and special meetings of any voluntary organisation providing for the handicapped in the City.

The first "Welfare of Disabled Week" was held in June, 1963. The Department co-operated with the various voluntary organisations taking part and provided at Laurieston House an exhibition of gadgets to increase independence and adaptations which could be undertaken in the homes of the handicapped persons.

Mention has been made of the two-year training course for Welfare Officers at the Scottish College of Commerce in Glasgow. Two further members of the staff have been nominated to attend the next training course commencing in October, 1964. Students from the Probation Service, the Scottish College of Commerce, the University School of Social Study, the School Welfare Service and Health Visitor trainees are all now seconded to the Welfare Section for part of their practical training, and this of course involves the time of the senior officers of the section.

It gives me much pleasure to thank the Convener and members of the Health and Welfare Committee for their generous support and encouragement during the year. In the preparation of this report I have had the assistance of all sections of the Department and in particular of Miss Knox, the Department's Librarian, to whom I am much indebted for her work in collating and arranging the material. I also wish to express my sincere thanks and warm appreciation to all members of the Health and Welfare Department for their able and loyal assistance during the year.

WILLIAM A. HORNE.

SECTION I

POPULATION.

The Registrar General's estimate of the City's population, as at 31st December, 1963, is 1,029,147—a decrease of 15,353 from the estimate of December, 1962. The Natural Increase (excess of births over deaths) in 1963 was 8,901, the lowest since 1956, as will be seen from the following table—

NATURAL INCREASE.

1955	 7,748	1958	 9,306	1961	 9,474
1956	 8,691	1959	 9,062	1962	 10,267
1957	 9,236	1960	 10,055	1963	 8,901

This natural increase of 8,901 if added to the estimated population in 1962 of 1,044,500 would have given in 1963 a population of 1,053,401. According to this estimate, therefore, there has been an actual loss of 24,254 persons from the City. From information supplied by the Registrar General this loss can be accounted for partly by emigration abroad and, to a much greater extent than formerly, by migration outwith the City, some to other areas of Scotland and the United Kingdom but chiefly to the adjacent counties. In 1963 the estimated net migration loss was some 24,000 persons. Of this number, 14,600 (60 per cent.) went to other parts of Scotland and 6,100 (25 per cent.) elsewhere in the United Kingdom. Three thousand six hundred (15 per cent.) went to countries abroad. This loss was slightly offset by releases from H.M. Forces.

In 1962, 57 per cent. of the migration loss was to other areas in Scotland, 30 per cent. to other parts of the United Kingdom and 13 per cent. overseas.

This considerable loss of population is confirmed by the reduction in the number of persons in the Voters' Roll between October, 1962, and February, 1963, a decrease of 11,933. On a ratio of population to voters based on the latest Census this represents a population loss of some 18,200 persons.

The Registrar General's estimate of 1,029,147 has been used for the calculation of the respective rates throughout this Report.

CENSUS, 1961

The Glasgow volume was not published till August, 1963, and it was not possible therefore to include any of the information in the Annual Report for 1962. Some of the basic data with special relevance to the Health and Welfare Services has now been analysed and is set out as follows:—

Sex and Age.—At April, 1961, there were 505,716 males, two per cent. less than in 1951. The 549,301 females were also fewer by 3.8 per cent. In proportion to the total population, however, there has been a slight increase (0.3 per cent.) in the males and a corresponding decrease in the females. The relative proportions at the last three Census periods was as follows:—

		Males	Females
1961		47.9	52-1
1951	•••	47-6	52-4
1931		48.2	51.8

In 1961 females outnumbered males in the ratio of 108.6 to 100 males compared with 110.0 in 1951. This is comparable with the ratio of 108.5 for Scotland as a whole.

PERCENTAGE OF THE POPULATION IN EACH AGE GROUP AT THE CENSUS, 1951 and 1961

	1	961	1	951
Males	Number	Percentage	Number	Percentage
Ages - 5	51,931	10-27	50,833	9.80
- 15	89,784	17-75	86,271	16-63
- 25	75,398	14.91	75,063	14-47
-35	67,823	13-41	77,021	14.84
-45	64,256	12-71	76,923	14.82
-55	66,193	13-09	66,783	12.87
- 65	52,338	10.35	45,586	8.79
+65	37,993	7.51	40,337	7.77
N.S.	-	_	54	0.01
	518,871	100-00	505,716	100-00

		19	961	1951		
Females		Number	Percentage	Number	Percentage	
Ages	- 5	49,407	8.99	48,515	8-50	
	-15	85,833	15-63	84,728	14-84	
	- 25	79,617	14.50	86,886	15-22	
	-35	68,677	12.50	82,228	14-40	
	-45	68,770	12-52	82,930	14-53	
	- 55	72,885	13-27	75,199	13-17	
	- 65	63,076	11-48	57,100	10-00	
	+65	61,036	11-11	53,245	9-33	
	N.S.	_	_	65	0-01	
		549,301	100.00	570,896	100-00	
		-	-			

At the 1951 Census the proportion of children under 5 years of age was the largest five-year age group in the population of which they formed 9.1 per cent. This was also the largest age group in 1961 and the proportion rose to 9.6 per cent. Within this age group there were, however, fewer children at 3 and 4 years of age than in 1951. There were more females than males in all the five-year age groups except under 5, under 10, and under 15 years. This predominance, least noticeable in the 25-35 age group, becomes increasingly apparent with each successive age group. At 65 years and over there were 23,043 more women than men in the population. While women aged 65 and over form a steadily increasing proportion of the female population, 11.11 in 1961 compared with 9.33 in 1951 and 6.05 in 1931, there has been a decrease in the proportion of males in this age group, 7.51 per cent. (7.77 in 1951 and 5.05 in 1931). The proportion of all persons aged 65 and over continues to rise and for every 1,000 of the population in 1961 there were 94 persons in this age group compared with 86 in 1951 and 56 in 1931.

The following table shows the changes in the three major agegroups, under 15, between 15 and 64, and 65 years and over, between 1951 and 1961:—

		M Number	ales Percentage of Male Population	Fer Number	Percentage of Female Population	Both	Sexes Percentage of Total Population
1961—Under 15	***	141,715	28-0	135,250	24-6	276,955	26.2
15-64	***	326,008	64.5	353,025	64-3	679,033	64-4
65 and Over	***	37,993	7-5	61,036	11-1	99,029	9-4
1951—Under 15	***	137,104	26-4	133,243	23-3	270,347	24.8
15-64	***	341,376	65-8	384,343	67-3	725,719	66-6
65 and Over	***	40,337	7.8	53,245	9-3	93,582	8-6

The distribution of the male and female population under 21 years of age at 1951 and 1961 was as follows:—

	Under 5		5 to 16		17 to 20		Total Under 21	
	Number	% of Total	Number	% of Total	Number	% of Total	Number	%
1961 Males	51,931	27.5	105,665	56.0	31,041	16-5	188,637	100-0
Females	49,407	27-0	101,358	55-3	32,528	17-7	183,293	100-0
	101,338	27.2	207,023	55.7	63,569	17-1	371,930	100-0
1951 Males	50,833	28-1	103,245	57-1	26,803	14.8	180,881	100-0
Females	48,515	26-1	101,901	54.9	35,249	19.0	185,665	100-0
	99,348	27-1	205,146	56-0	62,052	16-9	366,546	100-0

There was another decrease in the number of women of child bearing age (15-44 years) in 1961 and the proportion of the total female population fell from 44.15 in 1951 to 39.52.

		Women aged 15-44 years	Percentage of total female population
1961		217,064	39-52
1951		252,044	44-15
1931	-	272,715	48-35

The following table shows the percentages of the male and female population aged 16 and over who were single, married, widowed or divorced at each of the three Censuses 1931, 1951 and 1961:—

		1961	Males 1951	1931	1961	Females 1951	1931
Single		29.0	31.1	39-8	26.2	30.3	39.2
Married	***	65-8	62-8	54.2	58-9	56-1	49.6
Widowed		4-7	5.7	5.9	14.1	13.0	11.1
Divorced	***	0.5	0.4	0.1	0.8	0.5	0.1

Age Constitution of Ward Populations.—The following table based on the Glasgow Census report should be studied in conjunction with the Appendix Tables. Mortality rates are closely related to the sex and age constitution of the population at risk and with the information now available it will be possible to assess more accurately the incidence of disease and the variations in mortality between the wards.

GLASGOW CENSUS 1961 POPULATION IN CERTAIN AGE GROUPS

Age Group

					P. C.O.			
							60 and	All
No			0-4	5-16	17-20	21-59	over	Ages
1	Shettleston and		2.057	0.500	0.147	01 071	5.010	11.050
0	Tollcross		3,957	9,566	3,147	21,971	5,612	44,253
	Parkhead	***	1,456	2,973	1,083	8,547	3,064	17,123
	Dalmarnock	***	4,264	5,480	1,682	15,795	3,937	31,158
	Calton		2,113	3,352	1,010	9,531	2,917	18,923
	Mile-end		3,897	5,320	1,658	15,224	3,581	29,680
	Dennistoun		2,154	3,690	1,179	12,001	4,203	23,227
	Provan		7,308	21,013	4,818	35,685	6,471	75,295
	Cowlairs		2,345	3,182	1,010	10,779	3,971	21,287
9	Springburn		2,938	6,809	2,583	17,895	4,362	34,587
10	Townhead		3,217	4,676	1,406	13,398	3,787	26,484
11	Exchange	***	1.147	1,698	616	6,667	2 347	12,475
	Anderston		2,463	3,525	1,174	11,048	3,247	21,457
13	Park		1,532	2,543	1,320	10,127	3,565	19,087
14	Cowcaddens		2,687	3,245	964	9,250	2,229	18,375
15	Woodside		2,518	3,289	1,004	10,115	2,722	19,648
16	Ruchill		3,753	9,855	3,262	21,756	6,332	44,958
17	North Kelvin		2,542	3,374	1,088	11,816	3,252	22,072
18	Maryhill		2,418	4,735	1,429	12,344	3,353	24,279
19	Kelvinside		1,315	2,690	1,188	10,892	5,153	21,238
20	Partick East		1,458	2,866	1,359	10,885	4,005	20,373
21	Partick West		2,125	3,045	958	10,988	3,682	20,798
22	Whiteinch		1,930	3,378	1,145	10,529	3,609	20,591
	Yoker		1,542	4,268	1,717	13,266	5,183	25,976
24	Knightswood		4,270	15,700	3,605	25,275	4,432	53,282
	Hutchesontown		3,085	3,222	922	9,997	2,316	19,542
26	Gorbals		3,186	4,715	1,289	11,578	2,660	23,428
27	Kingston		2,617	3,693	1,105	9,762	2,331	19,508
	Kinning Park		2,578	3,653	1,218	11,875	3,071	22,395
	Covan		3,232	5,061	1,505	12,912	3,376	26,086
	Traindings.					10,835		
	C	***	1,923 1,889	3,325 6,333	1,174 2,475	18,451	3,956 6,665	21,213
	Pollokshields			45.000				35,813
		***	2,227	7,581	3,058	19,423	5,673	37,962
	Camphill Pollokshaws		1,236	2,524	815	10,334	4,905	19,814
			4,058	12,346	3,673	23,658	4,816	48,551
	Govanhill		2,400	3,583	1,084	12,728	3,946	23,741
	Langside		1,568	4,281	1,464	13,750	5,442	26,505
3/	Cathcart		5,990	16,434	3,382	31,052	6,775	63,633
	City		101.338	207,023	63,569	532,139	150,948	1,055,017
	Percentage of to						,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	population		9.6	19-6	6.0	50-4	14.3	100-0
	This may be com	nar-	Security Contracts	-	-			NAME OF TAXABLE PARTY.
	ed with the							
	Census distribu							
	of	***	9.1	18.8	5.7	53.5	12-9	100-0
			-					

Birthplace.—The following table shows the principal birthplaces of the population:—

	1961		1951		
	Number	Percentage of Total	Number	Percentage of Total	
Scotland	970,214	92.0	1,000,890	91.8	
England	32,345	3.1	37,032	3.4	
Wales	1,443	0.1	1,584	0.2	
Northern Ireland	13,074	1.2	16,665	1.5	
Irish Republic	16,835	1.6	17,661	1.6	
Ireland (part not stat-					
ed)	1,184	0.1	149	0.0	
Isle of Man, Channel					
Islands	273	0.0	299	0.0	
Commonwealth					
Countries, Colonies,					
etc	7,444	0.7	5,478	0.6	
Foreign Countries and			250000		
at Sea	8,892	0.8	10,004	0.9	
Not Stated	3,313	0.3	5	0.0	
	1,055,017	100-0	1,089,767	100.0	

The number of persons of Scottish birth enumerated in Glasgow in 1961 was 970,214, a decrease of 30,676 since 1951. This is 92.0 per cent. of the total population, a slightly higher proportion than in 1951. There were fewer persons from foreign contries but more from the Commonwealth countries and the Colonies. Of the total population of the City, 804,384 or 76.2 per cent. were born within it compared with 74.3 per cent. in 1951.

Ward Population.—Details of the population in each ward of the City are given in Appendix Table I and the distribution of the population in the five administrative divisions of the City is shown in Section XV—General Sanitary Administration, page 324. Ward populations are based on the Census ratio of population to local government electors as changes in the electoral register provide as accurate an index as any of the movement of population between wards.

Exchange ward now has the smallest population of all the wards, 11,388 in 1963 or 1.2 per cent. of the City total. Only other two wards have populations of less than 18,000—Parkhead (16,620) and Cowcaddens (16,470).

Institutional Population.—On the 30th June each year a special census of persons resident in hospitals and institutions, hotels, etc., is taken by the district inspectors and in 1963 this population totalled 23,332, a decrease of 328.

The largest institutional population (2,810) was in Exchange Ward where most of the City's hotels are located. Of the 2,130 persons in Pollokshields Ward more than half were resident in Hawkhead Mental

Hospital, 465 in Crookston Home and the remainder distributed throughout the many nursing homes and residential homes (for children and for aged persons) which are a feature of this area. Robroyston and Stobhill Hospitals together account for most of the 1,911 persons in Springburn Ward. Kelvinside Ward (1,905) has, in addition to the three hospitals, several hotels in this area and a growing number of residential homes for aged persons. Provan Ward where Barlinnie Prison and Gartloch Hospital are located, had an institutional population of 2,115.

The main Glasgow hospitals are distributed throughout the City as shown in the following table:—

LOCATION IN WARDS OF THE VARIOUS GLASGOW HOSPITALS AND THE NUMBER OF PERSONS RESIDENT THEREIN AS AT 30TH JUNE, 1963.

	Ward			Hospital		Persons Resident
1.	Shettleston and	Toller	ross	Lightburn		51
2.	Parkhead			Belvidere		444
7.	Provan			Gartloch		863
9.	Springburn			Stobhill		1,245
				Robroyston		653
10.	Townhead			Royal Infirmary		966
				Eastern District		269
11.	Exchange			Royal Maternity		377
	Anderston			Ear, Nose and Throat		89
				Royal Hospital for Sick Chile		422
13.	Park			Eye Infirmary		105
				Royal Beatson Memorial		112
15.	Woodside			Oakbank		239
16.	Ruchill			Ruchill		463
18.	Maryhill			Eastpark Home		49
	Kelvinside			Gartnavel		954
				Homoeopathic		33
				Redlands		65
20.	Partick East			Western Infirmary		806
23.	Yoker			Knightswood	***	170
				Blawarthill		43
24.	Knightswood			R.H.S.C., Drumchapel		108
	Fairfield			Shieldhall		143
				Elder Cottage		33
				Southern General		909
				David Elder		78
32.	Pollokshields			Hawkhead	***	1,122
34.	Pollokshaws			Darnley	***	63
35.	Govanhill			Samaritan		159
36.	Langside			Victoria Infirmary	***	665
						11,698

There was little material alteration in the institutional population of individual wards in 1963.

The following wards however showed some reduction, due to fluctuations in hospital and/or hotel population—Exchange (217), Springburn (136), Pollokshields (135). The closure of two nursing homes and two hotels in Park Ward reduced the total in that area by 122.

The institutional population, as at 30th June, 1963, was accommodated as follows:—

			1963	1962
General Hospitals			 2,805	2,847
Infectious Diseases Hospita	als		 1,077	946
Mental Hospitals			 2,939	3,079
Sanatoria and Other			 4,956	4,958
Nursing Homes		***	 645	740
Children's Homes			 266	278
Hotels and Guest Houses			 3,634	3,770
Hostels			 789	820
Homes for Aged Persons			 1,724	1,709
Common Lodging Houses			 1,519	1,529
Special Institutions			 2,978	2,984
Squatters			 2,070	2,001
Tota	al		 23,332	23,660
			-	

Acreage.—The area of the City remains unaltered at 39,725 acres. The following table shows the progress of the City's expansion since the beginning of the century:—

		Acres
1901	 	12,681
1911	 	12,975
1921	 	19,183
1931	 	29,511
1951	 ***	39,725

The 37 wards of the City vary considerably in size, from the smallest, Woodside, with 170 acres, to Provan with 4,846 acres. Cowcaddens, Woodside and Gorbals are the only three wards which have remained unchanged in area throughout the various extensions to the City and alterations in ward boundaries which have taken place since the wards were first "recast" in 1920.

Density.—The average density of the City remains unchanged at 26 persons per acre. Three of the oldest wards of the City, Townhead Gorbals and Woodside, are still the most densely populated with densities well above those of the other 34 wards. The progressive reduction in the density of these wards over the past forty years is shown as follows:—

		Woodside	Gorbals	Townhead
1921		 222	207	171
1931		 195	186	156
1951	(Census)	 158	145	116
1957		 133	114	102
1958		 128	107	98
1959		 124	106	95
1960	***	 119	100	93
1961	(Census)	 116	93	88
1962		 113	87	85
1963	***	 107	83	85

While the density of the City as a whole at the 1961 Census (26.5 persons per acre), showed little change from that of 1951 (27.4), the extensive housing developments in three wards, Provan (Easterhouse) Knightswood (Drumchapel) and Cathcart (Castlemilk) has materially increased the density in these areas as the following table shows:—

		Persons per acr					
		1963	1961	1951			
Provan		 17	16	5			
Knightswo	bod	 33	33	11			
Cathcart		 23	23	8			

Occupied Houses.—A return of occupied and unoccupied houses (including inhabitant occupiers) as at Whitsunday of each year is compiled by the City Assessor and the following analysis is based on the information given in this return.

There was another decrease in the number of occupied houses in 1963, the total for this year, 321,655, being 3,424 fewer than in 1962.

The only substantial increase was 482 in Provan Ward where building is still in progress at Easterhouse. Other increases were 138 in Fairfield, 127 in Kelvinside, 126 in Yoker and 122 in Langside.

Increases in nine wards totalled 1,229, but this was offset by the decrease in 27 wards of 4,653. There was no change in Partick East ward.

Wards with fairly substantial decreases mainly due to closure and/or demolition of unfit houses, were Hutchesontown (754), Woodside (538), Gorbals (354), Anderston (344), and Kingston (303).

The number of occupied houses in the City according to size is as follows:—

		1963	Compared	with	1962
***		25,771	Decrease	***	1,023
		92,776	Decrease		2,829
		113,664	Increase		539
		63,847	Decrease		159
and o	ver	25,597	Increase		48
		321,655	Decrease		3,424
			25,771 92,776 113,664 63,847 and over 25,597	25,771 Decrease 92,776 Decrease 113,664 Increase 63,847 Decrease and over 25,597 Increase	25,771 Decrease 92,776 Decrease 113,664 Increase 63,847 Decrease and over 25,597 Increase

The considerable decrease in the number of (occupied) oneapartment houses is of course the *net* total for the City. No less than eleven wards however showed an increase in the number of (occupied) one-apartment houses, from 3 in Pollokshields to 129 in Provan, a total of 506 in all. A small proportion of these are "multiple occupancies". Most of this increase is new housing for single and aged persons, an instalment of the 1,328 linings passed by the Dean of Guild in the year ending 31st August, 1962. With the advent of these flats specially designed for single and aged persons the category of "one-apartment house" has assumed a new significance. At one time synonymous with a "single end" it may now refer to a service flat or accommodation for the aged or single person, as well as to a single apartment in a tenement property.

The decrease in occupancy of the older type of one-apartment house was 1,529 in all (this figure takes no account of the increase of 74 in the unoccupied one apartments).

The distribution of the 25,771 occupied one-apartment houses throughout the 37 wards ranges from ten in Yoker to 2,669 in Dalmarnock with the greatest concentration in the older parts of the City. Eight wards have over 1,000 of this type of house.

The following table shows the total number (occupied and empty) of one-apartment houses in these eight wards with the relative proportion of houses of all sizes in each of the following:—

				Number	As percentage of Houses of all sizes
Dalmarnock				2,763	26-0
Mile End				1,947	19-6
Hutchesontow	n			1,750	28-1
North Kelvin				1,258	15.0
Cowlairs			***	1,257	15.8
Woodside				1,144	17-6
Calton				1,109	17.6
Shettleston ar	nd To	llcross		1,105	8.5

Unoccupied Houses.—At Whitsunday, 1963, there were 4,946 houses unoccupied compared with 4,362 in 1962, an increase of 584.

The increase in 1963 affected all sizes of house.

NUMBER OF EMPTY HOUSES.

			1963	1962	1961	1960	1959	1958	1957	1956
One apartment		 	1,209	1,135	1,111	1,057	947	776	892	705
Two apartments		 	1,693	1,445	1,427	1,445	1,258	1,102	1,145	825
Three apartments		 	882	655	628	642	564	480	571	541
Four apartments			526	497	492	507	486	394	402	362
Five apartments and	over	 ***	636	630	677	705	712	679	537	520
			4,946	4,362	4,335	4,356	3,967	3,431	3,547	2,953

Of this total of 4,946, 12.8 per cent. were houses of five apartments and over compared with 14.4 per cent. in 1962. This year Woodside had the greatest number of empty houses, 404 compared with 215 in 1962 but only six were of five or more apartments. Wards in which over 30 per cent. of the empty houses were of five apartments and over are shown in the following table:—

NUMBER OF EMPTY HOUSES.

	Five Apartments					
		Total	and over	Percentage		
Pollokshields	 	112	71	63-4		
Partick East	 	190	76	40-0		
Kelvinside	 	197	71	36-0		
Park	 	208	76	36-5		

Dean of Guild Linings.—During the year ended 31st August, 1963, 9,195 linings were granted compared with 5,746 in 1962. Details of the number and size of house for which these were granted are given in Appendix Table III, with a comparison of the figures for the preceding years from 1919. Of the total linings granted, 5,161 were for three-apartments, 861 for four-apartments, 81 for five-apartments and two six-apartments. Accommodation for single and aged persons is to be provided by 678 single and 2,412 two-apartment houses distributed throughout the City.

METEOROLOGY 1963.

The year was notable for the severity of the weather in the first three months and the unexpected mildness of its close. The intense cold in the last week of 1962 persisted throughout January and February and minimum temperatures remained well below freezing point into the first week of March. The spring months were cool, with a snow storm on 12th April and although June was warm at first cooler weather followed and temperatures in July and August were below the seasonal average. There was a brief spell of warm weather in September, but the autumn months were, on the whole, cool. A snow storm on the 17th November seemed to presage more severe conditions, but, apart from some cold days in mid-December the year ended in very mild weather with a complete absence of snow. There was a less than average amount of rainfall, January, February, July and December being unusually dry, while March, June and November were wetter than usual. The year was a sunny one, January, February and September being unusually bright, August however was dull. Fog was present on several occasions in January, November and December, but was never dense.

For Scotland as a whole it was the coldest year since 1918—even Loch Lomond was frozen over from early in January until 4th March.

Temperature.—The mean temperature for the year, 45.6°F. was lower than that of 1962 (46·1°F.) and below the average for the ten years 1950 to 1959 (47·3°F.). This is the lowest mean temperature since records began in 1920, the previous lowest being 46·2°F. in 1954. There has been a steady fall since 1959 (48·9°F.) and in 1963, mean temperature for the first time dropped below 46°F. Only March and April attained their 1950/59 average and only June and October exceeded theirs (by a small margin only).

January was the coldest since 1941, with a great deal of frost, and snow lying each morning until the 24th. Maximum temperatures fell steadily from 38°F. on the 1st to 24°F. on the 12th. This was followed by a sharp rise to 39°F. (on 14th and 15th) and another fall to 26°F. on the 17th. Thereafter temperature rose steadily into the upper thirties to reach 43°F. and 46°F. on the 25th and 26th respectively. Minimium temperatures remained at or below freezing point on all but four widely separate days. The three coldest days were the 12th (Max. 24°F: Min. 14°F.), the 13th (Max. 31°F: Min. 11°F.) and the 17th (Max. 26°F.: Min. 17°F.). The maximum and minimum readings on the 25th were 43°F. and 24°F. respectively. The mean temperature for the month (30·4°F.), the lowest since 1941 (29·9°F.), was below that of 1962 (37·9°F.) and the average for 1950/59 (36·2°F.).

February too was very cold, with a much lower mean temperature (30.6°F.) than in the previous year (38.8°F.), lower than the average for 1950/59 (36.8°F.), and the lowest since 1947 (28.5°F.). Maximum temperatures ranged from 30°F. on the 2nd into the lower forties towards the end of the month. The highest day temperature, 45°F. on the 27th was accompanied by a low minimum temperature of 24°F. With one exception minimum temperatures remained below freezing point throughout, 16°F. being recorded on both the 4th and 5th. Snow lay from the beginning of the month until the 3rd March.

The weather became less severe towards the end of the first week in March with a final complete thaw on the 5th. Minimum temperatures remained below freezing point and then rose sharply from 26°F. on the 5th to 42°F. on the 6th. Thereafter, with two exceptions, the minimum temperatures remained above freezing point and rose to 45°F. on the 15th. Maximum temperatures ranged from 39°F. on the 2nd to 53°F. on the 15th and 20th. The mean temperature (41·3°F.) was higher than in 1962 (36·3°F.). This was also the average mean temperature for the month in the period 1950/59.

April too had the same mean temperature (45·3°F.) as the 1950/59 average—a little above the 1962 figure of 44·9°F. The range of maximum temperature was from 40°F. on the 12th to 61°F. on the 23rd and 26th. Minimum temperatures were as low as 31°F. on the 12th, when there was a snowstorm, but rose slowly to 49°F. on the 27th and 28th.

May was cool, with a maximum temperature as low as 45°F. on the 24th, warming to 67°F. on the 31st. Minimum temperature on the 5th was 35°F. but rose to 47°F. on the 26th. The mean temperature, 48.9°F., was below the 1950/59 average of 51.3°F. and the 1962 figure of 50.1°F. This was the lowest May temperature since 1955 (also 48.9°F.).

June began with a temperature of 72°F. and after a slight setback on the next two days became increasingly warm to reach its highest day temperature of 77°F. (on the 11th). During the following weeks temperatures fluctuated between the mid fifties and lower sixties reaching their lowest point, 55°F. on the 18th. Minimum temperatures were as high as this on the 14th, and as low as 45°F. on the 4th. The mean temperature (56.6°F.) was above that of 1962 (55.1°F.) which had been very similar to the 1950/59 average (55.9°F.).

Although the highest day temperature of the year (78°F.) was recorded on July 30th, the month was cool and the mean temperature (56·7°F.) little different from that of June. Compared with 1962 (55·9°F.) it was warmer, but the mean temperature was below the 1950/59 average (58·8°F.). Maximum temperatures were variable throughout the month until the last four days when temperatures over 70°F. were recorded. The range of minimum temperature was from 45°F. on the 25th to 54°F. on the 22nd and 31st.

Maximum temperature in the first two days of August was 76°F. and 72°F. respectively but for the rest of the month ranged between the upper fifties and lower sixties. There was a difference of only one degree between the maximum (58°F.) and minimum (57°F.) readings on the 5th. Minimum temperatures which were as high as 61°F. on the 2nd fell to 41°F. on the 28th. The mean temperature (55·7°F.) was very similar to that of 1962 (55·3°F.) which had been the lowest since 1956 (53·4°F.). The 1950/59 average was 58·0°F.

September had a mean temperature of 53·3°F, a little below the 1950/59 average of 54·1°F, but higher than in 1962 (51·9°F.). Maximum temperature on the warmer days was in the upper sixties, reaching 67°F, on the 20th and 21st. Minimum temperature varied from 41°F, on the 12th and 25th to 55°F, on the 16th.

The mean temperature for October, 49·3°F., was very similar to that of 1962 (49·9°F.) and above the 1950/59 average (48·5°F.). Maximum temperatures of 59°F. were recorded on the 24th and 25th, falling to 45°F. on the 28th. Minimum temperatures were as high as 52°F. on the 24th then fell to 34°F. on the 28th.

The first fortnight of November was mild, temperatures of 50°F. or over being recorded on seven days in this period. There were only two degrees between the maximum (53°F.) and the minimum (51°F.) temperatures on the 3rd, but this was followed by colder weather in the third week when the maximum temperature fell to 34°F. on the 17th. Temperatures of 50°F. however were reached on the 21st and 24th only to fall again to 36°F. on the last two days of the month. Minimum temperatures were below freezing point from the 15th to 18th inclusive, the lowest reading being 26°F. on the 17th. The range of day temperature on the 21st was from a minimum of 27°F. to a maximum of 50°F. There was hard frost on the 16th and a fall of snow on the 17th. Mean temperature was 41.9°F. compared with 40.3°F. in 1962—both below the 1950/59 average of 42.3°F.

Apart from some cold weather in the second and third weeks, December was comparatively mild. Maximum temperatures in the mid forties were recorded on the first week, and after falling to 31°F. on the 24th, rose to 50°F. on the 27th and remained at 49°F. until the 31st. Minimum temperatures fell to and below freezing point between the 10th and 15th, and again from 18th to 25th inclusive. Maximum temperature on the coldest day (20th) was only 34°F. and the minimum 23°F. but by the end of the month (on the 31st) the latter had risen to 40°F. and the maximum was 44°F. The mean temperature (37·4°F.) was above that of 1962 (36·5°F.) but below the 1950/59 average (38·9°F.) and was the same as recorded in 1958.

Rainfall.—Although rain was recorded on 223 days in 1963 as against 208 in 1962, the total amount was less, 37.62 inches and 43.35 inches respectively. This was less than the average for the period 1950/59 (40.26 inches). As in 1962 more than half the total was in the second half of the year and distributed in the four quarters as follows:—

1st—5.90 ins. 2nd—9.94 ins. 3rd—9.62 ins. 4th—12.16 ins.

In the first quarter, March, and in the fourth, November, were unusually wet.

November was the wettest month of the year with 6.36 inches rain in 28 days, more than twice the 1962 total of 2.70 inches and well above the 1950/59 average of 3.68 inches. Falls of 0.99 inches and

0.91 inches were recorded on the 21st and 24th. It was the wettest November since 1954 (6.38 inches).

Four months had over 4 inches of rain. October had 4·44 inches compared with 2·24 inches in 1962, more than the 1950/59 average of 3·79 inches. In contrast to the abnormally low rainfall in this month in 1962 (1·19 inches), March had 4·28 inches of rain in 22 days, almost twice the 1950/59 average of 2·30 inches. It was the wettest March since 1957 (4·58 inches). August had 4·16 inches in 19 days compared with 5·86 inches on 24 days in 1962. The average for 1950/59 was 4·07 inches and 18 days. There has not been a drier August since 1957 (4·10 inches). Although June had only three wet days in the first fortnight, the total for the month, 4·05 inches, was more than twice the 1962 figure of 1·88 inches and above average (2·77 inches in 1950/59). This is only the second occasion since 1945 (4·43 inches) that the rainfall in this month has exceeded 4 inches.

May too was wetter (3.48 inches) than in 1962 (2.33 inches) although no rain was recorded on the last five days. This is the month's heaviest rainfall since 1954 (3.54 inches).

The 2.41 inches of rain in April were spread over 21 days compared with 2.02 inches in 13 days in 1962. The average for 1950/59 was 1.95 inches. Rainfall in this month has been very variable in amount over the years.

Although rain was recorded on 17 days in July compared with 10 in 1962, the total rainfall, 2·18 inches was less (3·04 inches) and well below the 1950/59 average of 4·37 inches. It was the driest July since 1955 (1·23 inches).

The variation in the rainfall since 1920, in this, Glasgow's Fair Holiday month, is shown as follows:—

RAINFALL IN THE MONTH OF JULY.

	Amount in inches					Amount in inches
1920-29 (average)	 3.57	1957	***			3.51
1930-39 "	 3.92	1958				5-82
1940-49 ,,	 3.25	1959			***	5.23
1950-54 ,,	 4.40	1960			***	4-07
1955	 1.23	1961	***	***	***	2.99
1956	 5.88	1962			***	3.04
	1963	2	-18			

February, with only 0.69 inches of rain in 11 days as against 3.55 inches on 22 days in 1962, was the driest since 1934 (0.55 inches). January too was notable for its extreme dryness with 0.93 inches in

11 days compared with 6.58 inches in 1962 and the 1950/59 average of 3.60 inches. It was the driest January since 1941 (0.76 inches). This is the second year since 1920 that there has been less than 1 inch of rain in this month. The Weather Centre reported that the rainfall in the Glasgow Area during the first two months of the year had been only "15 per cent. of the average for these two months. . . the lowest recorded rainfall since records began in 1868. The previous lowest was 1.68 inches in 1895".

September, which in 1962, had been exceptionally wet (7.47 inches in 23 days) was very much drier in 1963 (3.28 inches in 21 days). This total was also less than the average for 1950/59 (4.10 inches).

December, with 1.36 inches in 11 days was the driest since 1933 (0.93 inches). This was well below the 1962 total of 4.49 inches and the 1950/59 average of 4.69 inches. In the past twenty years there have been only other two similarly dry Decembers—in 1943 and 1950 both with 1.69 inches. For the country as a whole it was the second driest December of the century.

Sunshine.—There was more sunshine than in 1962, 1,281 hours, compared with 1,230 in 1962, and more than the average for 1950/59 of 1,205 hours. It was the sunniest year since 1955 (1,563 hours). There was more sunshine in the first quarter (240 hours) than in 1962 (196 hours), but less in the second, 503 hours and 554 hours respectively.

January was particularly bright with 52 hours as against 34 hours in 1962, and above the 1950/59 average of 39 hours. February too was unusually sunny with 99 hours, 37 more than in 1962 and far above the 1950/59 average (57 hours). March (90 hours) was duller than in 1962 (99 hours) but still above its 1950/1959 average of 82 hours. April had only 130 hours sunshine in contrast to 191 in 1962, well below the average for 1950/59 of 142 hours. May, the sunniest since 1959 (217 hours) had 202 hours' sunshine, only nine hours more than in 1962, and more than the 1950/59 average of 190 hours. June had a near average amount of sunshine, 172 hours, very similar to that in 1962 (169 hours).

July was much sunnier (166 hours) than in 1962 (148 hours) but this total was only 3 hours more than the 1950/59 average (163 hours). This month, which has become increasingly sunny in the past four years' was the sunniest July since 1955 (292 hours).

August, on the other hand, has become increasingly dull during the same period, and in 1963 with only 99 hours' sunshine (125 in 1962) was the dullest since 1958 (97 hours). This was well below the 1950/59

average (121 hours). September was sunny, the 126 hours recorded being above the 1950/59 average (103 hours). This was in sharp contrast to 64 hours in 1962 when this month had been exceptionally dull.

October (71 hours) had less than its 1950/59 average of 72 hours sunshine and less than in 1962 (72 hours). There was more sunshine in November this year, 41 hours compared with 31 in 1962, but not much more than the 1950/59 average (39 hours). No sunshine was recorded on nine successive days in the first fortnight of December and the total for the month, 34 hours, was less than that of 1962 (39 hours). This figure however is above the 1950/59 average for the month (23 hours).

Fog was present in the City on several occasions, four in January, one in February and in March, two in October, five in November, and three in December. Only on two of these, on 27th January and on the 10th December, was it at all thick or persistent.

There were strong winds at times in March and September.

SECTION II

VITAL STATISTICS.

The following is a summary of the principal vital statistics of the City:—

SUMMARY.

	1963	1962	1961	1960	1959
Population	1,029,147	1,044,500	1,053,100	1,058,398	1,061,884
Acreage	39,725	39,725	39,725	39,725	38,725
Persons per acre	26	26	26	27	27
Number of Inhabited Houses	321,655	325,079	326,614	325,946	326,777
Deaths—Number registered	14,536	13,937	14,029	13,691	14,135
Deaths—After correction					
for Transfers	13,717	13,224	13,368	13,037	13,536
Births—Number registered	22,349	23,321	22,703	22,768	22,443
Births—After correction	22,618	23,491	22,842	23,092	22,598
Death rate per 1,000 living					
—All causes	13.3	12.7	12.7	12.3	12.7
Birth rate per 1,000 living	22.0	22.5	21.7	21.8	21.3
Deaths under One Year-					
After correction	722	762	703	743	799
Deaths under One Year					0.7
Per 1,000 births	32	32	31	32	35
Neonatal death rate—Per	10.0	01.1	20.6	21.4	22.0
1,000 live births	19-2	21.1	20.6	21.4	23.9
Stillbirth rate per 1,000 births (live and still)	21	22	23	24	26
Diffus (nve and still)	41	44	20	41	20

Particulars of the causes of mortality together with the rates are given in Taple VII in the Appendix, and the age and sex distribution in Table VIII.

BIRTHS.

The number of births registered in 1963 was 22,618, a decrease of 873 from the figure for 1962 and the lowest since 1959 (22,598). The following table shows the trend since 1930:—

1930-39 (Average)	22,238	1960	23,092
1940-49 (Average)	21,941	1961	22,842
1950-54 (Average)	20,334	1962	23,491
1955-59 (Average)	22,136	1963	22,618

The rate per 1,000 of the population was 22.0 compared with 22.5 in 1962. This latter figure, however, had been unusually high, and with one exception (23.7 in 1947), the highest birthrate recorded in the City since 1926 (22.7).

The proportion of male births which had also been unusually high in 1962 (52.0 per cent.) reverted in 1963 to its normal level, 51.7—the same figure as for 1954 and 1955.

Provan Ward, for the fourth successive year, had the greatest number of births in 1963 (1,251), 26 fewer than in 1962. The only other wards with 1,000 or more births, Dalmarnock (1,138) and Mile-End (1,021), had more births than in 1962. Cathcart, which had taken third place in 1962, had fewer births in 1963 (934). Since 1956 Hutchesontown has had the highest birthrate of all the 37 wards but in 1963 Dalmarnock (39·4) and Mile-End (36·8) took precedence of this ward which had a rate of only 35·3 compared with 40·1 in 1962. Other wards with somewhat similar rates were Cowcaddens (35·2), Townhead (34·9) and North Kelvin (34·4).

Craigton, which for the past ten years has had the lowest birthrate of all the wards, had a lower rate (10·1) than in 1962 (11·0). Other low rates were Knightswood (12·7), Yoker (13·9), Cathcart (14·9) and Pollokshields (14·6).

Attention has been drawn in previous reports to one result of the low birthrates in five wards—an excess of deaths over births. With the exceptions indicated in the table below, Kelvinside, Camphill and Langside have consistently shown this unfavourable balance since 1949 and Yoker and Craigton since 1955.

		196	3	Dec	Decrease (except where indicated by *)					*)
		Births	Deaths	1963	1962	1961	1960	1959	1958	1957
Kelvinside		324	306	18*	63*	16	22*	26*	3	2*
Camphill	 	311	354	43	-	5*	1*	43	31	73
Langside	 	399	395	4*	47*	35	44	10	34	19
Yoker	 	356	371	15	68	39	11	32	29	2
Craigton	 	347	437	90	103	118	97	126	41	25

While Kelvinside again had an excess of births over deaths in 1963 (18), this was smaller than in 1963. Camphill, with fewer births and more deaths than in 1962, had an unfavourable balance of 43. In Langside, where there had been considerable improvement in 1962, the births exceeded deaths by 4 only. The unfavourable balance in Yoker was reduced to 15 in 1963, the result of an increase of births in conjunction with fewer deaths. Although there were fewer deaths in Craigton, there were also fewer births and the adverse balance, although less than in 1962, was still relatively large.

Illegitimate Births.—During 1963, 1,484 births were registered compared with 1,426 in 1962. This is equivalent to 6.6 per cent. of the total births as against 6.1 in the previous year and is the highest rate recorded since that of 1945 (8.3). The following table shows the trend in the rate since that year:—

1945	 	8.3	1959	 	4.9
1955	 	4.7	1960	 	5.3
1956	 ***	4.8	1961	 	5.4
1957	 	4.7	1962	 	6.1
1958	 	4.9	1963	 	6.6

The highest ward rates were those of Park $(12\cdot4)$, Exchange $(11\cdot0)$, Gorbals $(10\cdot3)$ and Calton $(10\cdot2)$. The lowest rate was Campbill $(2\cdot8)$ followed by Langside $(2\cdot9)$ and Craigton $(3\cdot1)$.

A more accurate comparison of the legitimate and illegimate birth rates is obtained when the calculation is based on the number of women of child-bearing ages; the former on married women of 16 to 44 years of age, and the latter on the unmarried women and widows of 15 to 44. This is given in the following table (the latest available figure being that of 1962):—

GLASGOW—BIRTH RATES DISTINGUISHING LEGITIMATE AND ILLEGITIMATE IN CERTAIN YEARS FROM 1881. (Based on Figures of the Registrar-General).

Year	Number of Legitimate Births	Rate per 1,000 Married Women 16-44 Years	Number of Illegitimate Births	Rate per 1,000 Unmarried Women and Widows 15-44 Years
1881	 17,605	293	1,501	22
1891	 18,304	283	1,553	21
1901	 22,676	260	1,530	14
1911	 19,966	229	1,603	14
1921	 27,790	238	1,922	13
1931	 21,504	176	1,427	10
1951	 19,029	134	1,062	9.6
1952	 19,378	137	961	8.9
1953	 19,211	136-5	1,021	9.7
1954	 19,954	141.9	1,023	9.9
1955	 20,036	142-2	987	9.9
1956	 20,834	147-4	1,051	10.9
1957	 21,367	151.0	1,048	11.3
1958	 21,643	153-2	1,117	12.3
1959	 21,497	152-6	1,101	12.5
1960	 21,858	156-5	1,232	14.5
1961	 21,606	155-6	1,236	15.0
1962	 22,064	163-0	1,430	17-1

These rates are higher than those for Scotland as a whole. In 1962 the comparable legitimate birth rate for Scotland was 146.4 and the illegimate 13.2.

MARRIAGES.

The number of marriages decreased still further in 1963, 8,957 compared with 9,146 in 1962 and 9,447 in 1961. This represents a rate of 8.6 per thousand of the population as against 8.7 for the previous year. The following table shows the trend of the marriage rate since 1881:—

MARRIAGE PER THOUSAND PERSONS LIVING.

	19	63	 	8-6			
1931-1940	 	9.7		1962	***		8-7
1921-1930	 	8.9		1961			8-9
1911-1920	 	9.7		1956-1960	***	***	9.5
1901-1910	 	8.8		1951-1955			9-6
1891-1900	 	9.4		1946-1950		***	9.8
1881-1890	 	9.3		1941-1945			11-0

This is still above the rate for Scotland as a whole, 7-6 in 1963 compared with 7-7 in 1962.

DEATHS.

The number of deaths registered in 1963 was 14,536, an increase of 599 on the 1962 total. After correction for transfers, 2,036 outward and 1,217 inward deaths, this total was reduced to 13,717 compared with 13,224 in 1962. In 1963 Glasgow, with 19.9 per cent. of the population of Scotland, accounted for 20.9 per cent. of the deaths, the same proportion as in the two previous years. The death rate which had remained at 12.7 in 1961 and 1962, rose to 13.3 per 1,000.

Camphill had the highest death rate (18.6) of all the wards and so regained the distinction it has held, with only three exceptions, since 1950. Other wards with high rates were Exchange (17.5), Whiteinch (15.8), Parkhead (15.8), Kelvinside (15.7) and Langside (15.6).

Eleven wards had rates lower than that for the City and two (Shettleston and Govan) the City rate. Provan Ward, for the second successive year, had the lowest rate (8·2 as against 7·4 in 1962). Other low rates were those of Knightswood (8·3), Pollokshaws (9·6), Cathcart (10·0) and Pollokshields (10·7).

Age and Sex Distribution.—The increase in the number of deaths was relatively greater in the females, 6,404 as against 6,118 in 1962. Male deaths totalled 7,313, an increase of 207 The proportion of male deaths in 1963 was 53.3 per cent. of all the deaths, 0.4 per cent. lower than in

1962. This proportion, however, varies little from year to year. Details of the sex and age distribution of deaths according to the International Classification of Causes of Death (Short List) are given in Appendix Table VIII.

The age distribution of deaths as a rate per thousand and deaths at all ages is shown from 1951 onwards in the table below. In 1951, 8.5 per cent. of all the deaths occurred at ages under 15 years and 73 per cent. at ages over 55. In 1963 the relative proportions were 6.6 and 79.8 per cent.

There were fewer deaths in males under one year of age but a slight increase at ages 1 to 9 years. Deaths at ages up to 55 years were fewer than in 1962, as were also those between 65 and 75. Almost all the increase in the male deaths was at ages 75 and over.

The female deaths were more numerous at ages 35 upwards, most of the increase being at ages 75 and over.

RATE PER THOUSAND DEATHS AT ALL AGES.

	-1	-5	-15	-25	-35	-45	55	65	65+	Total
1951	 64	12	9	16	25	45	98	180	551	1,000
1953	 57	9	9	13	23	43	102	175	569	1,000
1955	 58	7	7	10	18	37	100	179	584	1,000
1957	 59	7	7	9	19	37	98	185	579	1,000
1959	 59	9	5	8	14	33	94	189	590	1,000
1960	 57	8	6	7	16	33	88	189	596	1,000
1961	 52	7	6	7	13	33	88	192	602	1,000
1962	 58	7	6	9	14	34	89	195	588	1,000
1963	 53	7	6	7	13	31	85	200	598	1,000

Male deaths over 55 years totalled 5,657 in 1963 compared with 5,363 in 1962, while the number of female deaths was 5,295, an increase of 297. This is equivalent to 77.4 per cent. of the male deaths at all ages (75.5 in 1962) and 82.7 per cent. of all the female deaths 81.7 in 1962.

Classification of Deaths.—Until four years ago the system in operation in this Department for selecting the principal cause of death from two or more causes stated together was one of preferences, whereby the cause of death was selected according to broadly defined rules which gave certain diseases preference over others.

For example, under this system all infectious diseases had a degree of preference over most other causes and within the infectious disease group itself the major epidemic diseases had a very high preference, being second only to a violent cause of death. This procedure, however, always resulted in a different grouping of the causes from that shown by the Registrar General.

As deaths which were due to or associated with infectious disease became fewer this difference became more apparent, especially in the Pulmonary Tuberculosis group, with the Medical Officer of Health always showing a higher figure than that published by the Registrar General.

In an endeavour to obtain closer approximation with the latter's figures it was decided, as from 1st January, 1961, to select the first major cause as the cause of death, the only exception to this rule being Influenza which continued to have a preference over other causes.

While this change in procedure brought the Medical Officer of Health figures more into line with those of the Registrar General, the difficulties inherent in two Departments separately analysing some thirteen thousand deaths annually still made complete reconciliation of the figures an impossibility.

Difficulties in Classification.—The problem of analysing causes of death for vital statistics is relatively simple when only one cause of death is involved. However, in many cases two or more morbid conditions contribute to the death and in such cases the problem is to select one of these causes for tabulation. This cause has been variously described as "the cause of death," "primary cause of death," "principal cause," etc., but is now generally designated "the underlying cause of death" and may be defined as "the disease or injury which initiated the train of morbid events leading directly to death." The selection of this cause presents no problem when the causal sequence is clear, e.g.,

"Cancer of Colon;
Intestinal Obstruction;
Peritonitis;"

where the underlying cause is obviously the first-mentioned condition. A further example would be—

"Septicaemia;
Peritonitis;
Ruptured Appendix;"

where although the sequence is reversed it is clear that the underlying cause is the last-mentioned condition and this should be taken for statistical tabulation.

However, such clarity in certification is the exception rather than the rule and in many cases the correct causal sequence could only be established by reference to the certifier who is in a better position than any other individual to decide which of the morbid conditions led directly to death. This only the Registrar General is in a position to do and when one of the causes in those doubtful cases is an infectious disease (principally Tuberculosis) he informs this Department by the use of a stereotype memo, which indicates that "additional information from the certifier" revealed that Tuberculosis either was or was not the cause of death. It is noticeable, however, that in other cases of an equally doubtful nature, for example, where a cause of death is stated to be a neoplasm, cyst or tumour without further definition, such additional information as to whether the tumour was malignant or benign is not provided and consequently there is always a difference between the figures in those two groups—with the Registrar General showing more malignant tumours and fewer of an undetermined nature than the Medical Officer of Health.

International Classification of Causes of Death.—The problem of the statistical treatment of joint causes of death is one that successive international conferences since 1900 have endeavoured to solve. As from 1st January, 1964, a new International Medical Certificate has been in use in Scotland and it is already apparent that the information which this was expressly designed to elicit is, in a large number of cases, not correctly stated.

Where the information on the certificate is inconsistent with a causal sequence, or appears incomplete or equivocal, certain selection rules are applied. It should be emphasised, however, that such rules are arbitrary and cannot constitute a successful substitute for a properly completed certificate or certificates where points of doubts have been clarified by reference to the certifier and this the Registrar General is in a position to do.

In view of these facts, therefore, future Reports of this Department will so far as possible make use of the Registrar General's analysis of the causes of death. This will be supplemented, where more detailed information is required, by other statistics compiled by the statistical section of this Department.

A comparison of the Registrar General's and the Medical Officer's classification of Causes of Death in 1963 is incorporated in Appendix Table VII.

Relative Frequency of Causes of Death.—A comparison is made in the following table of the commonest causes, or groups of causes, of death which were together responsible for 83 per cent. and over of all deaths in 1963 and 1962:—

Malignant Neoplasms 2,435 17-75 2,436	62 cent, f all auses
The state of the s	29-33
	18-42
Vascular Lesions 1,955 14-25 1,912	14-46
Bronchitis 900 6-56 777	5.88
Pneumonia 738 5-38 542	4-10
Violence 667 4-86 665	5-03
Congenital Malformations and	
Diseases of Early Infancy 498 3-63 578	4-37
Pulmonary Tuberculosis 214 1.56 189	1-43
11,387 83-0 10,978	83-02

^{*} Excluding Hypertension.

With the exception of Pneumonia the relative frequency of the eight main causes remains unchanged from 1962. As a result of the increase in the number of deaths from this cause in 1963 Pneumonia now takes precedence of Violent Causes and Congenital Malformations, etc., in the above table.

An analysis of the provisional figures of the causes of death for the whole of Scotland shows the first three causes as above but followed by Bronchitis, Violent Causes, Pneumonia, Congenital Malformations, etc., and Pulmonary Tuberculosis. Together these eight causes account for 83.1 per cent. of the total deaths compared with the City figure of 83.0. Bronchitis and Pneumonia accounted for a much higher proportion of the City deaths, 6.56 and 5.38 respectively as against 4.66 and 4.56 for the country as a whole. Pulmonary Tuberculosis was not among the first eight causes of death in Scotland in 1963 but it is included here for comparison with the City figure: it accounted for only 0.71 of all the Scottish deaths compared with 1.56 for Glasgow. In the two major groups, Heart Disease and Vascular Lesions, the proportions were lower for the City; for Scotland the respective figures were 32.37 and 15.16. The proportion of City deaths from Malignant Causes, 17.75, was only slightly less than that for Scotland, 17.89. Deaths from Violent Causes formed a slightly higher proportion of the City deaths, 4.86, compared with the Scottish figure of 4.60. Congenital Malformations and Diseases of Early Infancy accounted for 3-12 of all Scottish deaths compared with 3.63 of the City total.

CAUSES OF DEATH.

The following table is a summary of the causes of death as shown in Appendix Table VII arranged in the principal groups according to the International Classification adopted in 1950.

SUMMARY OF DEATH RATES PER MILLION FROM PRINCIPAL CAUSES.

	1963	1962	1961
General Diseases—			
(a) Infectious	43	29	37
(b) Tuberculosis—			
(1) Respiratory	208	181	182
(2) Non-Respiratory	4	12	12
(c) Malignant (Cancer, etc.)	2,366	2,332	2,219
Diseases of the Nervous System (including Mental			
Disorders)	2,170	2,086	2,101
Diseases of the Circulatory System	4,507	4,354	4,378
Diseases of Respiratory System (including Influenza)	1,805	1,393	1,535
Diseases of Digestive System	356	375	355
Congenital Defects and Diseases of Early Infancy	484	554	536
Violence	648	637	544
All Other Causes	737	708	795
	13,328	12,661	12,694
	13,328	12,661	12,694

These rates are calculated on the population as at December each year.

Infectious Disease.—There was an increased mortality from infectious disease in 1963, 44 deaths compared with 30 in 1962 and 38 in 1961. Almost all the increase was due to diarrhoea (under 2 years of age) which was responsible for 32 deaths, ten more than in 1962. Meningococcal infections accounted for 5 deaths, one more than in 1962. All were males—a man aged 61 years and four young children, two a year old and two others aged 9 months and 11 months respectively. A 66 year old woman died from Food Poisoning and a 57 year old man from (Cerebral) Malaria. There were two deaths from Whooping Cough—females aged 4 months and one year respectively and three from Measles, two boys aged 2 years and a one year old girl. There were deaths from Scarlet Fever or Diphtheria.

Tuberculosis.—The Registrar General in classifying a death generally accepts the first mentioned cause in preference to tuberculosis where this and certain other diseases appear together on the death certificate. In an endeavour to obtain as exact an estimate as possible of the extent of the tuberculosis prevalence in the City it has been the practice of this Department to classify, as a tuberculosis death, most instances where this disease appears on the certificate, whether

or not associated with another cause to which the Registrar General would accord priority. From 1950 to 1960 the only exceptions to this rule were in favour of violent causes and infectious diseases.

From 1st January, 1961, however, these two causes have no longer been accorded priority. The effect of this change is most noticeable in the sharp reduction in deaths from pulmonary tuberculosis.

Up till 1949 there was little material difference between the two sets of figures but this discrepancy became more pronounced from 1950 onwards. The following table shows the trend during this period and the close approximation to the Registrar General's figure in 1961 following the change of procedure.

DEATH RATES PER 100,000 FROM TUBERCULOSIS IN GLASGOW, 1950 TO 1963. COMPARISON WITH REGISTRAR GENERAL'S FIGURES.

	Pulmonary Tu	berculosis	Non-Pulmonary	Tuberculosis
	Medical Officer of Health	Registrar General	Medical Officer of Health	Registrar General
1950	87	84	12	11
1951	64	60	9	9
1952	52	49	7	6
1953	43	40	4	3
1954	39	34	3	3
1955	34	28	3	3
1956	34	25	2	2
1957	33	24	2	2
1958	35	26	2	1
1959	27	20	2.5	2
1960	28	19	1.7	2
1961	18	17	1.2	2
1962	18	18	1.2	
1963	. 21	20	0.4	-

The death rates are given in preference to the actual number of deaths in order that this table may be compared with that given in the Tuberculosis Section of this Report where the Glasgow death rates are compared with those of other towns.

Two hundred and fourteen deaths were attributed to Pulmonary Tuberculosis in 1963, as against 189 allotted to this cause in 1962. The rate, which in 1962 had reached its lowest level yet of 181 per million, rose to 208 per million in 1963. The chart on page 212 (based throughout on the Registrar General's figures for the Glasgow deaths) shows the sharp fall in the rate from 113 per 100,000 in 1948 to 17 in 1961. Male

deaths were almost three times as many as those of the females (160 and 54 respectively), but formed a smaller proportion (75 per cent.) of the total deaths than in 1962 (78 per cent). There were no male deaths under 35 years and only 41 under 55 years. Forty-seven were under and 72 over 65 years. Of the 54 female deaths, one was a 7 months old infant and another a young adult under 25. More than half the deaths were at ages under 55; under 65 years, there were 12 and over 65 years, 10 deaths.

The following table shows the age distribution of the deaths from Pulmonary Tuberculosis (stated as a percentage of the total).

MALES-		-15	-20	-25	-35	-45	-55	-65	65+	All Ages
1963	***	_	_	_	_	8.7	16.9	29.4	45.0	100.0
1962		0.7	-	0.7	3.4	12.8	16.9	33-1	32.4	100.0
1961		_	_	_	3.7	13-1	21.9	22.6	38.7	100.0
1960		0.5	_	0.5	3.7	7.3	16.5	35.3	36.2	100.0
1951		2.1	2.8	5.8	13-1	16-1	20.7	24.9	14.5	100.0
FEMALES-		-15	-20	-25	-35	-45	-55	-65	65+	All Ages
1963		1.8	_	1.8	13.0	25.9	16.7	22.2	18.5	100.0
1962		-	2.4	_	14.6	24.4	22.0	17.1	19.5	100.0
1961		-	-	1.8	20.0	23.6	20.0	16.4	18.2	100.0
1960		3.8	1.3	1.3	19.0	20.2	15.2	17.7	21.5	100.0
		5.7	9.0	18-1	23.0	18.5	9.1	8.7	7.9	100.0

This sex difference in the age distribution of mortality from the pulmonary form of the disease should be compared with the following table in which the rates for each sex and age group are based on the respective Census populations:—

PHLMONARY TUBERCULOSIS:

RATES PER THOUSAND POPULATION IN EACH AGE GROUP.

-15	-20	-25	-35	-45	-55	-65	65+	All Ages
0-17	0.95	1.35	1.22	1.54	1.59	1.21	0.76	0.96
0.10	0.24	0.73	0.74	0.95	1.36	2.02	1.49	0.82
-	_	-	0.09	0.28	0.45	0.99	1.58	0.33
0.26	1.47	1.41	1.11	0.79	0.62	0.60	0.23	0.75
0.12	0.67	1.40	1.08	0.66	0.35	0.39	0.30	0.55
0.01	_	-	0.16	0.19	0.15	0.16	0.20	0.10
	0·17 0·10 — 0·26 0·12	0·17 0·95 0·10 0·24 — — 0·26 1·47 0·12 0·67	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

There was another reduction in deaths from non-respiratory tuberculosis in 1963, from 12 in 1962 to 4—the lowest number yet recorded. These four deaths were all in the miscellaneous group "other forms of tuberculosis" and all but one (-20 years) were females. Two were under 55 years of age and one under 65.

Diseases of the Nervous System.—There were more deaths in this group of causes in 1963, 2,233 compared with 2,180 in 1962 and 2,214 in 1961. Vascular lesions, which rank third on the list of major causes of death, accounted for 1,955, 87.5 per cent. of all deaths in this group—very much the same proportion as in 1962. Fourteen deaths were allotted to non-meningococcal meningitis, four fewer than in 1962. Deaths from certain mental disorders in the group were more numerous, 100 as against 88 in the previous year. A variety of other nervous diseases accounted for 164 deaths, two more than in 1962.

Diseases of the Circulatory System.—This, the major group of causes of death, accounted in 1963 for 4,638 deaths in all, 33·8 per cent. of the deaths from all causes, a proportion 0·6 per cent. less than in 1962. Since 1952, this figure has varied little between 32 and 33 per cent. but has been showing a tendency to increase. In 1962, deaths in this group totalled 4,548. Of the 4,638 deaths, 77·6 per cent. were due to arterio sclerotic and degenerative heart disease which in 1963 accounted for 3,601 deaths, eighty-six more than in 1962. The proportion of these deaths classified as coronary thrombosis was 67·7 per cent. as against 68·0 per cent. in 1962 and 65 per cent. in 1961. The increase in deaths from this cause, apparent since 1953, still continues.

Mortality from this form of heart disease is consistently higher in men than in women as the following table shows:—

	Males	Females	Total
1954	 958	555	1,513
1955	 1,062	609	1,671
1956	 1,102	637	1,739
1957	 1,151	717	1,868
1958	 1,235	690	1,925
1959	 1,238	723	1,961
1960	 1,313	803	2,116
1961	 1,392	883	2,275
1962	 1,472	918	2,390
1963	 1,505	935	2,440

The age distribution of these deaths shows a marked disparity between the sexes in each age group.

	-35	-45	- 55	- 65	-75	75+	All Ages
Males	 7	55	207	503	437	296	1,505
Females	 2	14	60	186	335	338	935
	9	69	267	689	772	634	2,440
	-	-	-		Section 1	Section 1	

Deaths from coronary thrombosis at ages under 55 formed a much smaller proportion than usual of all male deaths from this cause in 1963, 17.9 per cent. compared with 19.8 per cent. in 1962. The average for the previous four years was 19.8 per cent. In females this proportion showed some increase over that of 1962, 8.1 and 7.2 per cent. respectively In addition, there were 6 deaths (3 male and 3 female) from angina pectoris, 7 fewer than in 1962 and all over 55 years of age. There were more deaths from chronic rheumatic heart disease, 191 as against 186 in 1962. Deaths among females greatly outnumber those of males from this cause, 132 and 59 respectively. There were three deaths at ages under 25 years and 20 over 75 years. The heaviest mortality was at ages between 55 and 75. Two hundred and seventy-seven deaths were classified as hypertension, a reduction from the 1962 total of 310. Deaths from "Other Diseases of the Heart" numbered 188, ten more than in 1962. A variety of circulatory disorders, shown in the Short List as "Other Diseases of the Circulatory System" accounted for 381 deaths in 1963 compared with 359 in the previous year.

Diseases of the Respiratory System.—Severe weather conditions in the first quarter of the year were followed by a considerable increase in the mortality from respiratory disease. Deaths in this group were 1.859, some 400 more than in 1962 (1,455) and the rate rose from 1,393 to 1,805 per million. Most of the increase was in pneumonia which accounted for 738 deaths as against 542 in 1962 and 692 in 1961. The rate was 717 per million compared with 519 in 1962. Deaths from bronchitis, 900 in 1963 were 123 more than in 1962. This total is equivalent to 48.4 per cent. of all the deaths in this group, a proportion smaller than that of 1962 (53.4 per cent.) but still above that of 1961 (43.3 per cent.). A detailed review of age, sex and seasonal distribution of the deaths from bronchitis and pneumonia will be found in the Infectious Disease Section at page 206 of this Report. Influenza which was present in the City in 1963 was responsible for 95 deaths, fifty-nine more than in 1962. There was some increase too in deaths from "Other Respiratory Diseases," 126 compared with 100 in the previous year.

Diseases of the Digestive System.—There was some reduction in the deaths from this group of causes in 1963, 367 compared with 391 in 1962 and the rate, which was 375 per million in that year, fell to 356, almost the same rate as in 1961 (355). The major single cause in this group is ulcer of the stomach and duodenum which in 1963 accounted for 89 deaths, eleven fewer than in 1962. The rate was 86 per million as against 96 in 1962. There was another reduction in the number of deaths from intestinal obstruction and hernia, 69 as against 79 in the previous year. Cirrhosis of the Liver accounted for 68 deaths, ten fewer than in 1962 and the rate fell from 75 in 1962 to 66 per million in 1963. Deaths from enteritis and colitis (over two years of age) were also fewer, 33 as against 49 in 1962. There were fewer deaths from appendicitis, 8 as against 12 in 1962 and the rate, 8 per million (11 in 1962). A variety of causes grouped under "Other Digestive Diseases" was responsible for 98 deaths, 26 more than in 1962.

Congenital Defects and Diseases of Early Infancy.—With the exception of the deaths from congenital malformations, all the deaths attributed to this group occur at ages under 1 year and these are discussed in the appropriate section of Maternity and Child Welfare. A large proportion of the deaths from congenital malformation also occur before 1 year of age (in 1963, 129 of the 157 deaths were in the age group) but the mortality is not confined to this age group and the deaths, though relatively small in number, are widely distributed throughout all the age groups, the over 65's not excepted. The physical handicap of a congenital defect does not apparently curtail the normal lifespan—a fact of some importance in the provision of welfare services for those severely incapacitated by a congenital defect.

The distribution of the deaths from congenital malformations in 1963 is compared with the average for 1950-54 and subsequent years as follows:—

Males—			-1	-15	-45	-65	-75	75+	All Ages
1950-54	(avera	ge)	61	6	5	3	1	_	77
1955-59	(avera		63	8	6	4	1	-	82
1960			51	9	2	4	-	-	66
1961	***	***	73	14	4	5	1	1	98
1962	***		82	9	11	1	1	-	104
1963			65	10	4	3	1	-	83
Females									
1950-54	(avera	ge)	54	7	4	3	1	_	70
1955-59	(avera		64	8	5	3		_	80
1960			60	8	3	2	2	-	75
1961	***		73	14	3	4	-	-	94
1962			65	14	8	3	_	_	90
1963			64	6	3	1	_	-	74

Cancer.—The group Malignant Neoplasms ranks second on the list of major causes of death, accounting in 1963 for 17.7 per cent. of the deaths from all causes, a smaller proportion than in 1962 (18.4 per cent.). There were 2,435 deaths in this group in 1963, almost exactly the same total as in 1962 (2,436). The trend of the rate during that period was as follows:—

	RATE PI	ER MILLION.	
1953	 2,058	1958	 2,196
1954	 2,074	1959	 2,202
1955	 2,157	1960	 2,234
1956	 2,174	1961	 2,219
1957	 2,208	1962	 2,332
	1963	2,366	

The following table, which relates the deaths from cancer to the total deaths from all causes for each sex and in each group, shows the higher proportion of deaths from cancer among males and the tendency of the proportion to increase, while that for females has till now remained fairly stable around 16 per cent.

DEATHS FROM CANCER AS A PERCENTAGE OF DEATHS FROM ALL CAUSES FOR EACH SEX AND IN EACH AGE GROUP.

Males-	-15	-25	-35	-45	-55	-65	-75	75+	All Ages
	 0-17	1-83	2-78	6-80	12.79	17.95	15.38	8.12	8.73
********	 1.38	6-93	12-76	16-76	22-07	22-24	18-34	11-96	16-10
	 1-67	10.88	14-65	19-94	25.22	27-11	21.28	13-62	19-34
FEMALES-								10110	
1930/32	 0.12	0.65	3.91	11-76	21.41	21-69	15.31	8-19	10-24
1950/52	 0.98	3-43	8.94	22.76	27-05	25.02	17-36	9.24	15-11
*000/00	 2.28	5-61	19.83	28.35	36.58	25-11	17-20	10.97	16-51

The following table shows the sex ratio of the deaths from cancer from 1931 onwards. In 1963 there was an increase of 50 male deaths and a decrease of 51 female, causing a marked increase in the ratio to 145.

	RATIO	: MALE	es to 1	00 Fema	LES.	
1931		97		1955		120
1941		103		1961	***	131
1951		113		1962		132
		1963		145		

In 1963 this male preponderance obtained at all ages except 35 and 45 years and was most pronounced in the age group 55 to 65 at which ages one third of the male deaths from cancer occurred. At ages over 75 deaths of males (277) were only seven more than the female.

MALE DEATHS AS A RATIO OF 100 FEMALE DEATHS.

	-15	-25	-35	-45	-55	-65	-75	75+	All Ages
1930-32	 114	271	60	66	76	102	111	68	92
1950-52	 180	150	120	83	126	123	118	106	116
1960-62	 96	350	96	104	115	193	140	90	132

In the age period 45-55 there occurs in both sexes a sharp rise in the number of cancer deaths. As will be seen from the table on page 73, the heaviest mortality in males was at ages 55-64, whereas in females the number of deaths increased in each successive age group up to 75 years. In 1963 61-6 per cent. of all the male deaths occurred between the ages of 55 and 75 and 19-0 at over 75. In 1962 the respective ratios were 62-5 and 17-5. In females there was an increase in the younger age group, 51-6 compared with 48-5. The proportion of deaths at ages over 75 was, however, smaller—27-1 per cent. compared with 29-5 in 1962.

The following table shows the age distribution as a percentage of the total cancer deaths in each sex :—

1963	-15	-25	-35	-45	-55	-65	-75	75+	All Ages
Males	 0.8	0.6	1.3	3.4	13-1	32-6	29.0	19-2	100-0
Females	 0.8	0.7	1.5	5.2	13-1	22.5	29-1	27-1	100-0

Apart from a slight recession in 1954, 1957 and 1959 male mortality from cancer has increased steadily since 1951. In 1963 the male deaths numbered 1,440 as against 1,390 in 1962 and 1,324 in 1961. Female deaths numbered 995 compared with 1,046 in 1962 and 1,013 in 1961. Since 1953 the female mortality from cancer has shown a tendency to increase.

Of the total male deaths from cancer 652 (45.3 per cent.) were due to cancer of the respiratory organs, the corresponding percentage among females being only 12.3 per cent. The trend of this form of

cancer is clearly shown in the following table which compares the male and female deaths from cancer of the respiratory and of the digestive organs over a period of some years:—

	Average										
Males—	1932/41	1942/51	1952/61	1962	1963						
Respiratory Organs	96	244	518	648	652						
Digestive Organs	491	554	483	461	467						
Females—											
Respiratory Organs	38	69	100	132	122						
Digestive Organs	429	473	453	420	374						

In 163 of the 467 male and 147 of the 374 female deaths from cancer of the digestive organs, the site of the disease was located in the stomach and small intestine. This is a decrease of 29 from the 1962 figure of 187 male and 152 female deaths. The deaths from cancer of this site in 1963 are compared, as follows, with the average for each of the three preceding ten year periods:—

DEATHS FROM CANCER OF THE STOMACH AND INTESTINE.

			Average									
		1932/41	1942/51	1952/61	1962	1963						
Males	 	190	219	201	187	163						
Females	 ***	161	179	174	152	147						

There were twenty more deaths than in 1962 from cancer of the rectum, 109 compared with 89 in 1962. The male deaths numbered 69 as against 40 female deaths. There were more deaths from cancer of the liver and biliary passages, 50 as against 41 in 1962 and of these 22 were females. The number of deaths from cancer of the pancreas remained at the same figure as in 1962 (107), and of these, 68 were males and 39 females. The sub-group "Other Digestive Organs" accounted for 211 deaths, 21 fewer than in 1962. In 1963 cancer of the large intestine, usually included in "Other Digestive Organs" was responsible for practically all the deaths in this group.

Deaths from cancer of the buccal cavity and pharynx, were more numerous, 38 compared with 27 in 1962. There were 24 male and 14 female deaths. Male deaths from cancer of this site have shown a

marked decline since the 1930's in comparison with the female mortality, which has been showing a tendency to increase.

DEATHS FROM CANCER OF THE BUCCAL CAVITY AND PHARYNX.

		Average									
		1932/41	1942/51	1952/61	1962	1963					
Males	 	70	57	36	19	24					
Females	 	11	13	15	8	14					

Deaths from cancer of the breast, which after cancer of the stomach, is the most common form of death from cancer in the female, were fewer by three, 163 as against 160 in 1961. Of this number 20 were under 45 years, and 72 at ages over 65. Included in the total are two deaths from cancer of the breast in males.

There were more deaths from cancer of the lymphatic and haematopoietic tissues in 1963, 128 as against 122 in 1962. There were 74 male deaths and 54 female. Of this total of 128, twelve were under 15 years of age.

Most of the deaths in this group are due to leukaemia, a form of cancer which has attracted some attention in recent years owing to the fact that a larger proportion of the cases than in other kinds of malignant disease occur in children. Since 1951 deaths from leukaemia have varied between 34 and 40 a year. In 1963 there were 49 deaths compared with 33 in 1962. Of these 49 deaths (29 male and 20 female), four were under five years of age. In 1961 there were six deaths in this age group. The distribution throughout the age groups is shown as follows for 1963 and the five previous years:—

	-1	-2	-5	-20	-45	-55	-65	-75	75+	All Ages
1957	 1	1	5	2	4	6	7	15	9	50
1958	 -	1	5	2	11	8	11	11	10	59
1959	 -	-	2	2	3	8	17	9	7	48
1960	 _	-	2	6	10	7	10	9	7	51
1961	 _	1	5	3	4	1	13	8	9	44
1962	 1	1	_	4	7	1	6	8	5	33
1963	 _	1	3	6	3	8	7	10	11	49

Details of the age and sex distribution of cancer with respect to the site of the disease are given in the table on the next page. The totals of both sexes for certain earlier years are shown for comparison.

GLASGOW, 1963-DEATHS FROM CANCER IN THE DIFFERENT SITES AS GIVEN IN THE INTERNATIONAL LIST OF CAUSES OF DEATH.

8	1942	77	45	371	73 73 11	310 221 122	29	46	. 172	1,851
Sexes	ll ages 1952	67	75	383	51 82 3	263 494 101	49	65	279	2,233
Both	All 1962	27	89	339	41 107 5	232 780 81	57 160	65 20	122	2,436
Вотн	SEXES 1963	38	53	310	50 107 1	211 774 84	54	88	128	2,435
	-Total	14	17	147	39	109 122 84	54	16	54	995
	75+	-	10	68	13	39 21 12	35	4	14	270
	-75	10	3	39	13	37 27 27	13	100	13	289
	-65	-	01	27	118	22 33 17	17	4	9 27	224
FEMALES	-55	1	01	9 6	0101	5 25 22	14 30	100	9 10	130
FEM	-45	1	1	0 -	-	663	17	-	6 7	52
	-35	1	1	00	111	0	100	11	0 0	15
	25	-	1	-	111	111	11	11	- 4	7
	-15 -	1,	1	11	111	111	11	1-	01 10	00
	Total-	24	36	163	28 68 1	102 652	01	88	74	1,440
	75+	14	00	18	111	32 64	1-	38	8 22	1888
	-75 75+	ıs	12	46	19	35	11	29	12 34	417 277
10	-65	4	00	46	925	24 266	1-	2 2 2	15 45	470
MALES	-55	-	00	26	41	97	11	- 3	113	188
M	4	1	- 1	4 4	-	28 2	11	4 61	3	49
	-35	1	ĺ		111	10	11	11	9 8	19
	-25	1	I	11	111	1-1	11	64	60 61	00
	-15	-	1	11	111	111	11	11	10	12
STTE OF LESION		Buccal Cavity and Pharynx Digestive Organs and				(g) Other Digestive Organs Respiratory Organs Uterus	Other Female Genital Organs Breast	Male Gentto-Unnary Organs Skin	Lymphatic and Haema- topoietic Tissues Other or Unspecified Organs	Totals

Deaths from Violence.—In 1963 this group, with 667 deaths, took sixth place as a major cause of death in Glasgow. This is two more than in 1962 and equivalent to 22 per cent. of all the Scottish deaths from Violent Causes, the same proportion as in the previous year. The death rate was 648 per million. There were 246 female deaths in this group in 1963 compared with 243 in 1962 while the male deaths were 421 and 422 respectively. Male deaths outnumbered the female deaths at all ages, except over 65 years.

The following table shows the sex and age distribution of the deaths from violence since 1945:—

			MAL	ES				FE	MAL	ES		
Year	-5	-15	-45	-65	65+	Total	-5	-15	-45	-65	65+	Total
1945-49 Ave	. 39	45	89	92	87	352	25	13	27	40	92	197
1950-54 Ave	. 41	31	88	95	102	357	28	11	26	40	116	221
1955-59 Ave	. 40	26	108	115	114	403	26	8	31	46	129	240
1960	43	22	125	127	89	406	27	7	44	35	133	246
1961	26	26	123	120	85	380	20	9	19	38	107	193
1962	30	29	134	142	87	422	20	10	42	54	117	243
1963	40	33	131	137	80	421	27	4	48	54	113	246

The age and sex distribution of these 667 deaths according to the type of accident is shown on page 76.

Under one year of age Inhalation and Ingestion of food accounted in 1963 for more than half the deaths from Violent Causes (54 per cent.) and accidental mechanical suffocation (i.e. by blankets, pillow, over-laying) 26 per cent. In the age group 1-5 years accidents involving motor vehicles accounted for 12 of the 32 deaths in this age group. Details are given elsewhere in this Report (in the Maternity and Child Welfare Section) of the deaths of infants under one year and of toddlers (1-5 years) as a result of accidents in the home.

There is usually a marked disproportion between the male and female deaths in the age groups 5-10 years. In 1963 all but one of the 28 deaths were male. Nine of these were due to motor vehicle accidents, 8 to drowning, 3 to falls and 7 to "other or unspecified accidents." The one female death resulted from a fall.

At ages over 65 years female deaths preponderate. In 1963, 113 or 46 per cent. of the female deaths were in this age group compared with 80 males (19 per cent.). The respective figures for 1962 were 48 per cent. and 21 per cent.

An analysis of the deaths at ages 65 years and over shows the following distribution of the major causes of deaths from violence compared with those of 87 male and 113 female deaths in 1962:—

Percentage of Total Deaths from Violent Causes.
At Ages over 65 Years.

					Mai	les	Fema	les
					1963	1962	1963	1962
Falls					25.0	24.1	48.7	41.9
Road Accide	nts	***			13.7	20.7	15.0	12.0
Poisoning (G	as and	Drugs)			13.7	29.9	15.9	19.6
Drowning					5.0	8.0	1.8	-
Burns					10.0	4.6	10.6	12.0
Suicide					8.8	1.2	2.7	3.4
Other Violen	ce (inc	luding H	omicid	le)	23.8	11.5	5.3	11-1
					100.0	100.0	100-0	100.0

Falls are the most common accident in this age group, especially among women (in 1963, 49 per cent. as against 25 per cent. in males), Another common home accident, gas poisoning, accounted for 24 deaths (9 male and 15 female), 24 per cent. of the deaths at all ages from this type of accident. There were more deaths from burns in 1963, 20 (8 males and 12 females). A common accident is that of an old person's clothing becoming ignited at an electric radiator, gas fire or an open coal fire. A common cause of burning accidents among elderly men is smoking in bed.

Exact information as to the circumstances in which the accident occurred, or the cause is, in a very large number of deaths, not recorded and any figures shown hitherto regarding the number of accidents occurring at home should therefore be regarded as an approximation only.

In 1963, however, information provided by the Registrar General showed that in Glasgow, accidents in the home resulted in 281 deaths, 41 per cent. of all the deaths from Violent Causes, a little above the Scottish rate of 40·2 per cent. This proportion was much higher in females, 57·6 of all female deaths from Violent Causes being due to an accident in the home compared with only 31·2 per cent. in males. The rates for Scotland were 59·9 and 27·3 per cent. respectively.

One hundred and sixteen (41.3 per cent.) of the deaths from Home Accidents were at ages 65 years and over, the proportion in females being twice that of the males. (55.1 per cent. and 26.1 per cent, respectively).

In 1963 road accidents took second place as a cause of death in this age group, 13.7 per cent. of all the male and 15.0 per cent. of all the female deaths. The relative proportions in 1962 were 20.7 and 12.0 respectively.

The sex and age distribution of the deaths from Violent Causes are shown in the following table according to the International Classification, with the totals for 1961 and 1960 for comparison:—

SEX AND AGE DISTRIBUTION OF DEATHS FROM VIOLENT CAUSES.

1963, COMPARED WITH THE TOTALS FOR 1961 AND 1962.

*											
Long				Δ	ges				Tot	al All	Acres
No.			-1	-5	-15	-45	-65	65+	1963	1962	Ages 1961
802	Dellusy and other Train soci	3.0				2					
802	Railway and other Train acci-	M F	1		_	_	4	1	7	9	6
825	Mr. don Mahinin Annidona	M	2	8	12	25	19	11	77	82	83
020	Motor Venicle Accident	F	_	4	2	12	8	17	43	41	31
841	Other Street Accident	M	200				_		-	-	-
845		F	-	-	-		_	_	_	-	1
858	Water and Other Transport	M	-	-	-	1	-	_	1	2	6
866	(incl. Air) Accident	F	-	-	-	-	-	-	-	-	_
888	Accidental Poisoning—	M	-	1	-	11	15	2	29	27	9
	by Drugs	F	-	-	-	9	7	3	19	25	6
890	Accidental Poisoning-	M		-	-	17	39	9	65	97	67
895	by Gases and Vapours	F	-	1	-	6	15	15	37	45	37
904	Accidental Falls	M	-	-	3	9	12	20	44	42	51
910/	Other Assidents (folling shipsts	F	1	1	2	2	1	55	62	54	55
914	Other Accidents (falling objects,	M F	-	2	1	5	3	-	11	13	11
314	ments, machinery, electric	F	-	-	-	1	-	-	1	1	-
	current).										
916/	Burns and Scalds	M	1	3	-	3	4	8	19	15	8
917		F	-	1	_	3	5	12	21	18	17
921/	Inhalation and Ingestion of	M	11	-	-	2	1	-	14	16	16
923	Food, etc	F	8	1	-	-	-	-1	10	11	8
924/	Accidental Mechanical Suffo-	M	4	-	-	1	-	_	5	9	6
925	cation	F	5	-	-	-	-	-	5	2	2
926	Lack of Care of Infants under	M	1		-	-		-	1	-	-
000	1 year	F	1	-	-	-	72	-	1	-	-
929	Accidental Drowning	M	-	3	9	13	7	4	36	36	35
933	Unness Thirst and Panasura	F	-		-	2	3	2	7	7	8
300	Hunger, Thirst and Exposure	M F	-	-	-	1	-	-	1	1	1
930-2	Other and unspecified accidents	M	-	- 0	-0	1	10	10	1	2	
-4-6	Other and unspectifed accidents	F	1	3	8	20	16	16	63	52	54
	Therapeutic Misadventure	M	-	-	_	9		4	20	15	22
	The appearance of the second o	F								1	1
956	Late complications of surgical \	M	-	100	I	1	3	2	6	1	4
960	operation and late effect of	F		_		-	-	1	1	1	
965	other accidental and war										
3000	injuries.										
970/	Suicide	M	-	-		10	13	7	30	14	19
979	** ***	F	-	-	-	7	6	13	16	13	3
980/	Homicide	M	-	1	-	10	1	-	12	6	3
985		F	-	-	-	-	2	-	2	6	3
	Total 1962	M	10	0.	90	101	100	00	401	400	-
	10tal 1962	M F	19	21	33	131	137	80	421	422	380
		-	16	11	4	48	54	113	246	243	193
	Grand Total 1963		35	32	37	179	191	193	667	_	
	1962		26	24	39	176	196	204	001	665	
	1961		22	24	35	142	158	192	-	000	573
			-	-	00		100	4.74		- 175	010

SECTION III

MATERNITY AND CHILD WELFARE.

During 1963 there was a decrease in the number of births, 22,618 compared with 23,491 in 1962, and in infant deaths from 762 to 722, but this figure was not sufficiently low to give any improvement in the infant mortality rate of 32 per 1,000. This was most disappointing. Progress was apparent in the reduction of stillbirths and neonatal deaths, and the stationary rate was due to an increase in the number of deaths of infants from one to twelve months. In particular, the number of deaths from pneumonia rose sharply in the first quarter of the year during the particularly cold and inclement weather at that time. The deaths from diarrhoea rose from 20 to 30, and deaths from accidental asphyxia from 18 to 28.

These post-neonatal deaths show a very marked class distinction, the rate in babies born in Class V being eight to nine times higher than those born in Class I. Many adverse factors, social and educational, are still operating in the city. Many parents are failing to give their infants proper care. Intensive education of these families on the basic needs of infants and young children is still necessary. An increasing number are getting into financial difficulties owing to excessive expenditure on hire purchase and betting. They are unable to budget properly and have arrears of rent, and may be evicted from their homes. The children of such families are in some instances showing signs of malnutrition.

Reference was made in the 1962 report to the reappearance of rickets in the City and not specially in the coloured population but in Glasgow children. The position shows no improvement. During the year 1963 nine cases were treated at the Royal Hospital for Sick Children. In co-operation with Dr. Arneil, Consultant Physician at that Hospital, two Health Visitors carried out a special survey of the feeding pattern and general upbringing of infants at six months, one year, one-and-a-half years and two years in the Dalmarnock and Springburn Wards. The results of the survey are not yet available. The establishment of an "At Risk" Register is securing the recognition at the earliest possible time of infants who may be handicapped, and such children are followed up specially, and co-operation with the assessment centre is most beneficial. Short reports on the work of this centre and that of the special day nursery are included in this section.

Great demands are made on the staff of the Department to give talks and demonstrations to various organisations and meetings, and they are always met most willingly.

MATERNAL DEATHS.

In attendance at the Ante-Natal Clinics were 5,297 patients whose pregnancy (excluding abortions) terminated in 1963. There was one death among these in 1963. Ten deaths were registered in the city as a whole and the rate was 0.43 per 1,000 (live and still) births compared with 0.42 in 1962.

The following table, based on figures supplied by the Registrar General compares the rates from each cause for the whole city with those of previous years.

STATEMENT SHOWING MATERNAL DEATHS AND RATES PER 1,000 BIRTHS IN GLASGOW AND SCOTLAND IN THE YEARS 1959-1963.

	Deaths					Rate per 1,000 (live and still) Births					
Application of the party of	1959	1960	1961	1962	1963	1959	1960	1961	1962	1963	
Accidents of Pregnancy	2	1	3	3	3	0.09	0.04	0-13	0-13	0.13	
Puerperal Haemorrhage	2	4	-	1	2	0.09	0-17	-	0.04	0.04	
Puerperal Septicaemia, including Post-abortive Sepsis	1	1	3	3	3	0.04	0-04	0-13	0-13	0.13	
Toxaemia of Pregnancy Albuminuria, Convulsion		2	1	2	_	0.04	0.09	0-04	0-08	0-09	
Other Puerperal Diseases	2	-	1	1	2	0.09	_	0-04	0.04	0.04	
Totals— Glasgow	8	8	8	10	10	0.35	0.34	0.34	0-42	0-43	
Scotland	36	34	37	42	39	0.4	0.33	0.36	0.39	0.38	

INFANT MORTALITY.

The decrease in the number of births registered in 1963 was accompanied by a decrease in the deaths of children under one year of age, 722 compared with 762 in 1962. The rate, however, remained unchanged at 32 per 1,000 births.

This reduction was confined to the male infants, their 414 deaths being fewer by 42. The rate, which was 37.3 in 1962, fell to 35.4.

Female deaths, 308 in number, were two more than in 1962 and the rate rose from 27.1 to 28.2.

Since 1930 the trend of infant mortality in Glasgow has been as follows:—

1930-34	 102	1955-59	 	35
1935-39	 93	1960	 	32
1940-44	 95	1961	 	31
1945-49	 64	1962	 	32
1950-54	 37	1963	 	32

Infant Mortality.—This decrease in infant deaths was not general throughout the city, as fifteen of the thirty-seven wards had higher rates than in 1962. Rates were lower in nineteen wards and in the remaining three, Shettleston and Tollcross (44), Maryhill (29) and Govanhill (22), the rate remained unchanged.

Fourteen wards had higher rates than that for the city in 1963, and only two, Cowcaddens and Woodside, had a similar rate.

The highest ward rate was that of Gorbals, 52 per 1,000 births (46 in 1962). Other wards with rates of 40, or over, were Shettleston and Tollcross (44), Springburn (44) Govan (42) and Knightswood (41). Whiteinch had the lowest rate of all the wards, 12 per 1,000 births. The rate for Kelvinside, which in the two preceding years was 18, became 19 in 1963. Other low rates were those of North Kelvin (18), Hutchesontown (20), Craigton (20) and Govanhill (22).

Cause of Death.—Details of the cause of death for each sex and each quarter of the first year of life are given in Appendix Table XI. The following table compares the rates for each sex and group of causes for each of the previous five years:—

Males-		Ra	ate per 1	,000 Birt	hs	
Causes of Death	1958	1959	1960	1961	1962	1963
I. Congenital Malformations	4.2	6.2	4.3	6.2	6.7	5.6
II. Diseases of Early Infancy	21.1	22.3	18.8	18.4	20.0	17-4
III. Diseases of Respiratory System	5.7	4.5	4.7	3.9	5.1	6.8
IV. Diseases of Digestive System	1.6	2.0	1.5	1.3	1.4	1.8
V. Diseases of Nervous System	0.6	0.6	0.7	0.7	1-1	0.9
VI. Tuberculosis	0.1	_	0.2	0.1		_
VII. Infectious Diseases	0.2	0.4	0.3	0.4	0.3	0.2
VIII. to XI. All other causes	3.0	4.1	3.9	2.2	2.7	2.7
All causes	36.5	40.1	34-4	33-2	37-3	35.4

FEMALES-		Rate pe	r 1,000	Births		
Causes of Death	1958	1959	1960	1961	1962	1963
I. Congenital Malformations	6.7	5.7	5-3	6-6	5-8	5-9
II. Diseases of Early Infancy	16.3	15-3	15-0	14-1	12.4	12-6
III. Diseases of Respiratory System	5.0	4.0	3.9	3.9	4.8	4-4
IV. Diseases of Digestive System	1.0	1.8	1.3	1.2	1-0	2-3
V. Diseases of Nervous System	0.7	0.4	0-5	0.4	0-7	0-5
VI. Tuberculosis	-	-	0.2	-	-	0-1
VII. Infectious Diseases	0.6	0.5	0.4	0.1	-	0.1
VIII. to XI. All other causes	3.4	2.6	3.2	2.0	2.4	2.3
All causes	33.7	30-3	29.8	28.3	27-1	28-2
Ratio—Males to 100 Females	108	132	115	117	137	129
-						_

There was another increase in the deaths from respiratory disease in this age-group in 1963, 127 compared with 117 in 1962, the respective rates being 5.61 and 4.98 per 1,000 births. This increase was confined to male infants with 79 deaths in 1963 as against 63 in the previous year, the rate increasing from 5.1 to 6.8. The 48 deaths of female infants were 6 fewer than in 1962 and the respective rates were 4.4 and 4.8.

Of the 127 deaths, 57 male and 34 female were due to pneumonia and one male and six female to bronchitis. There were no deaths from influenza in 1963. Twenty-one male and eight female deaths were attributed to one or other of the various forms of respiratory disease grouped under the heading "Other Respiratory Diseases."

Deaths from digestive diseases were also more numerous, 47 (21 male and 26 female) compared with 28 (17 male and 11 female) in 1962. Most of this increase was due to diarrhoea and enteritis (excluding diarrhoea of the newborn) in the female infants, 18 as against 7 in 1962. The male deaths were 12 and 13 respectively. There were 17 deaths from "Other Digestive Disease."

Diseases of the nervous system accounted for 16 deaths (11 male and 5 female), five fewer than in 1962.

Deaths from infectious disease were three in all, the same total as in 1962 and were as follows:— two males (one 9 and the other 11 months) from meningococcal infection, and one female infant of four months from whooping-cough.

There was one death from pulmonary tuberculosis, a female infant of 7 months.

Violence continues to be a major cause of death in children under one year of age. In 1963 there were 35 deaths in this group as against 26 in 1962. The total has been as high as 58 (in 1953) and in the past five years has ranged from 22 (in 1961) to 42 (in 1960). Of the 35 deaths in 1963, 19 were male and 16 female, all but four males and two females being less than six months old. Accidental asphyxia was responsible for the death of all but seven of these, 19 resulting from the inhalation of vomit or regurgitation of food. Three male infants and two female infants were suffocated by over-laying. No details as to the cause of the accident were available in respect of the remaining four deaths from "accidental suffocation." The other seven deaths were due to a variety of accidents. Two infants (foundlings) died from lack of attention at birth and two from injuries received in vehicle accidents. A month-old baby died after a fall and another, less than a week old, from a burned foot. A nine-month old child died from a head injury but no details are available as to how this was sustained.

Deaths from congenital malformations and diseases of early infancy together comprise the largest group of causes of death in children under one year of age, and in 1963 470 (65 per cent. of all deaths) were so attributable. This is 61 fewer than in 1962. The decrease was almost wholly confined to males whose deaths fell from 326 in 1962 to 268 in 1963. The greatest reduction (in the males) was in congenital malformations (from 82 in 1962 to 65), injury at birth (from 77 to 47) and premature births (from 53 to 39). There were, however, more deaths from pneumonia of the newborn, 19 as against 7.

Among the female infants there were 202 deaths (205 in 1962). While deaths from injury at birth (29) were 12 fewer than in 1962, those from premature birth (33) were 8 more. Female deaths from congenital malformations numbered 64, one less than in 1962.

Neonatal mortality.—There were 435 deaths in this age-group in 1963 compared with 496 in 1962 and the rate fell from 21·1 to 19·2. The decrease was most apparent in the male infants whose rate fell from 25·12 in 1962 to 21·65. The rate for female infants was 16·65 compared with 16·8 in 1962. The rate for Scotland was also lower, 16·8 as against 17·9 in 1962.

The rate per 1,000 births for each sex and for each of the four chief causes of death in this age group, from 1958 onwards, are as follows:—

		1958	1959	1960	1961	1962	1963
Premature Birth	M.	5.40	3-94	3.56	4-19	4.34	3-16
	F.	5.14	3-11	3-45	3.41	2-13	3-02
Atelectasis	M.	7.28	8.13	6.86	7-00	6-22	6-42
	F.	5.77	5.86	4.70	4.22	4-08	4.30
Injury at Birth	M.	4.54	5.56	4.83	3.33	6-22	3-94
	F.	2.80	3.57	3-46	3-41	3-64	2.56
Congenital Malformations	M.	2.65	4.45	2.80	3.93	4.66	3-25
	F.	4.51	3.57	3.81	3-77	3.73	3-57

These infant deaths were analysed in more detail and the results for 1963 were as follows:—

ANALYSES OF INFANT AND NEONATAL DEATHS, 1963.

The total number of deaths of Glasgow children was 722. No information was available in 8 cases, leaving 714 to be analysed.

Number of Males ... 408

Number of Females 306

714

The age at death was as follows :-

Under 1 we	ek	377	2 months		47	7	months		1
1-2 weeks		19	3 months		55	8	months		16
2-3 weeks	***	16	4 months	***	34	9	months	***	10
3-4 weeks		23	5 months	***	31	10	months	***	8
1 month		52	6 months		13	11	months		2
			Total		14				

The position in the family was as follows :-

1st	 	164	6th			43	11th		3
2nd	 	143	7th		***	36	12th		3
3rd	 	109	8th		***	15	12th+	***	5
4th	 	91	9th			14	Not stated		17
5th	 	62	10th	***		9			

Total ... 714

The age of the mother was as follows :-

14 years	***	1	20-24 years	 221
15 years		_	25-29 years	 180
16 years		4	30-34 years	 129
17 years		10	35-39 years	 89
18 years		21	40-44 years	 22
19 years	***	34	45 years	 _
			Not Stated	 3
	То	tal	714	

The causes of death were as follows:-

	Male.	Female.	Total.
Congenital Malformations	63	64	127
Birth Injury	47	29	76
Atelectasis	75	48	123
Haemolytic Disease of Newborn	6	7	13
Prematurity	38	33	71
Pneumonia	57	34	91
Congenital Debility	8	3	11
Diseases of Respiratory System (excluding pneumonia)	22	14	36
Diseases of Digestive System	21	26	47
Diseases of Nervous System	11	5	16
Accidental Asphyxia	15	13	28
Other Violence	4	3	7
Infectious Disease	2	1	3
Other Causes	39	26	65
	408	306	714
	No. of Contract of		

Neo-natal deaths.—The number of neonatal deaths in 1963 was 435, a decrease of 61 from the previous year. Three hundred and seventy-seven deaths occurred in the first week of life. Of these 154 were premature. Attendance at birth in these cases was as follows:—

Institution	 345
Domiciliary	 32
	377

The ante-natal care was as follows :-

General Practitioner			116
Corporation Ante-na	tal Clinic		73
Hospital Ante-natal			150
No Ante-natal Care			13
Not Stated			25
	Total	***	377

The main causes of death in the first week were as follows:-

Cause of	Death		Institution	Domiciliary	Total
Prematurity			59	4	63
Asphyxia		***	27	5	32
Atelectasis			90	9	99
Congenital Abr	normali	tv	48	10	58
Cerebral Haem			44	2	46
Rh. Factor			13	_	13
Pneumonia			15	3	18

In recent years, there has been an increase in the number of unexpected deaths in infants. In 1963, 109 cases were certified as "seen after death." Analysis of these 109 cases gave the cause of death as follows:—

Accidental Asphyxia	 9
Inhalation of Vomitus	 20
Pneumonia	 29
Respiratory Infection	 21
Bronchitis	 2
Convulsions	 7
Congenital Defects	 5
Other Causes	 16
Total	 109

Illegimate Mortality.—There were 57 deaths of illegitimate infants, the same number as in 1962. There were 1,484 illegitimate births, an increase of 58 from the previous year, and the illegitimate mortality rate therefore was 38.41 per 1,000 births as against 39.97 in 1962. Among the 21,134 legitimate births there were 660 deaths and the rate was accordingly 31.23. In 1962 this figure was 31.95.

PREMATURE BIRTHS.

A matter of concern is the failure to secure any reduction in the number of infants born prematurely. The Perinatal Mortality Survey First Report published this year emphasises the importance of prematurity and the part it plays in perinatal mortality. Of the 492 stillbirths, 296 were premature (60 per cent.); of the total births, 22,618, 2,413 were premature (10 per cent.); these are disturbingly high figures. The Scottish Home and Health Department has asked that a special analysis of prematurity be made each year for submission in the annual statistical returns from each local health authority. It will now be possible to have an accurate picture of the position throughout the country. The table on the next page shows the figures for 1963.

PREMATURE LIVE BIRTHS

			13			Born	at home o	Born at home or in a private maternity home	ate mate	rnity home				Premature	Tre Tre
		Born it	Born in Hospital		Nui	sed entirel	Nursed entirely at home or in a private maternity home	or in	Tra	Transferred to hospital on or before 28th day	erred to hospital of before 28th day	on or		Stillbirths	hs
Weight			Died				Died				Died		Born	u.	
Birth	Total Births	Within 24 hours of Birth	In 1 and under 7 days	In 1 In 7 and under and under and under 7 days 28 days : Births	Total Births	Within 24 hours of Birth	In 1 In 7 and under and under 7 days 28 days	In 7 and under 28 days	Total Births	Within 24 hours of birth	In 1 and under 7 days	In 1 In 7 and under and under 7 days 28 days	In hosp- ital	At	In a private matern-
2 lb. 3 oz. or less (1)	96 ()	39	111	1	7	10	1	1	67	1	1	1	41	1	ity nome
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. (2)	d 172	39	21	1	25	90	4	1	60	1,	1	1	71	7	1
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (3)	d 356	61	53	61	25	io	6	1	4	1	1	1	75	00	89
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (4)	d ; 372	10	13	77	61	+	0	1	10	1	1	1	41	4	1
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (5)	, 718	11	111	9	239	61	64	61	9	1	-	1	38	10	1
Total	1,713	121	258	12	384	24	12	4	20	3	5	1	266	25	20
	(1)=1,0	(1)=1,000g. or less.		(2)=1,001-1,500 g.		(3)=1,501-2,000 g.		(4)=2,001-2,250 g.	0 8.	(5)=2,251-2,500 g.	-2,500 g.				

STILLBIRTHS.

The number of stillbirths registered in the city in 1963 was 528, a decrease of 57. There were 61 outward and 25 inward transfers, so that the total for the city was 492 compared with 534 in 1962 and 546 in 1961. The rate was 21.3 per 1,000 live and stillbirths as against 22.2 in 1962.

Stillbirths in Wards.—Fourteen wards had higher rates than that of the city while three, Mile End, Springburn and North Kelvin, had a similar rate. Cowcaddens (38) had the highest ward rate, followed by Kinning Park (35), Craigton (33), Cathcart (32) and Parkhead (31). The lowest rates were those of Pollokshields (6), Park (7), Partick West (12), Whiteinch (12) and Kingston (14). The three wards of Dennistoun, Maryhill and Kelvinside all had a rate of 15.

From information obtained under the Notification of Births Act, it appears that 7.5 per 1,000 of all the births attended at home by doctors were stillbirths and of those attended in institutions and nursing homes 24.6 per 1,000. The respective figures for 1962 were 10.5 and 28.

A special analysis is made of the stillbirths each year, the results for 1963 being as follows:—

being	as 10	HOWS	-		
			gow Cases n available	492 (Male 231 : Female 6	261)
	Nu	mber	analysed	486	
	A	Ger Cor Hos Nor	el Supervision- neral Practition poration Clinic spital Clinic ne	er 143 116 190 8	
		Not	Total	29	
Posi	tion in	Fan	nily	Age of Mother	
1st			122	10	
2nd			93	177	
3rd			76	10	
4th			47	18 years 17	
5th			47	20-24 years 119	
6th			29	25-29 years 121	
7th			18	30-34 years 94	
8th		***	8	35-39 years 88	
9th			7	40-44 years 23	
10th			10	45+ years —	
11th	***	***	5	To 1 years	
12th+			7	482	
Not St	ated		469 17	Not Stated 4	
			486	486	
				480	

Attendance at Birth-			
Hospital		426	
Nursing Home	*** *** ***	8	
General Practitioner		33	
General Practitioner and	Midwife	13	
General Practitioner and	District Nurse	4	
No One in Attendance	*** *** ***	2	
	Total	486	
Cause of Death	Institution	Domiciliary	Total
Congenital Abnormality	. 104	8	112
Antepartum Haemorrhage	. 66	-	66
Rh. Factor	. 24	2	26
Conditions associated with Cord	. 34	3	37
Conditions associated with Placenta	. 64	10	74
Toxaemia of Pregnancy	. 12	3	15
Birth Injury	. 19	2	21
Difficult Labour	. 14	6	20
Prematurity Unqualified	. 8	3	11
Asphyxia	. 40	5	45
Atelectasis	. 7	2	9
Maceration	. 12	1	13
Other Causes	. 18	3	21
Unspecified Cause	. 12	4	16
		-	

The following table shows the trend in the stillbirth and infant mortality rates in the past twelve years and indicates the relative importance of the perinatal rate with the rate in later infancy:—

		Infant Mortality Rate per 1,000 live Births	Still- Births Rate per 1,000 total Births	Neo-natal Mortality Rate per 1,000 slive Births	Perinatal Mortality Rate per 1,000 Total Births	Mortality 1-12 Months Rate per 1,000 live Births
1951	 	46	28.1	25.9	47.9	20.0
1952	 	41	27-4	24.1	45.8	16-7
1953	 ***	36	26.5	22.2	44.3	13.5
1954	 	35	29.4	21.5	47-1	13.6
1955 1956	 	36 33	26·8 25·6	22·7 20·8	45·6 43·0	13·6 12·1
1957	 	34.5	26-1	23.0	44.0	11.5
1958	 	35-1	25.5	23.2	45.0	12.0
1959	 	35-4	26-4	23.9	45.5	11.5
1960	 	32.2	24.2	21.4	41.8	10.8
1961	 	30.8	23.3	20.6	41.0	10.2
1962	 	32.4	22.2	21.1	39-3	11.3
1963	 	31.9	21.3	19-2	37-6	12.7

Neonatal mortality refers here to deaths under 1 month.

The Glasgow birthrate, infant mortality and stillbirth rate, etc., are compared in the following table with those of Scotland, England and Wales and certain Scottish and English cities in 1963.

			Birthrate per 1,000 of Population	Stillbirth Rate per 1,000 Live and Stillbirths	Neo-Natal Mortality per 1,000 Live Births	Perinatal Mortality* Per 1,000 Live and Stillbirths	Infant Mortality per 1,000 Live Births
Scotland	***		19.7	19	17	33	26
Glasgow	***	***	22.0	21	19	38	32
Edinburgh			17-9	18	17	33	23
Aberdeen			17-9	15	11	24	19
Dundee	***		20.5	19	13	30	20
England and	Wales		18-2	17	14	29	21
Birmingham			20.0	19	15	32	24
Manchester	***	***	20.3	21	19	37	29
Liverpool			21.3	22	16	35	26
Leeds			18.5	16	18	32	27

Perinatal mortality rate—the number of stillbirths and deaths under one week per 1,000 live and stillbirths.

MORTALITY AMONG TODDLERS.

Deaths in the age group 1 to 5 years were 101 in 1963, two more than in 1962. Of this number, 66 were males and 35 females. Forty-five were under 2 years of age and 56 between 2 and 5 years.

The most common cause of death in this age group is accidents and violence, and the number of deaths from this cause in 1963 was 32, an increase of eight in the 1962 figure. This total is equivalent to 31.7 per cent. of all the deaths at these ages, a much higher proportion than in the previous year (24.2 per cent.).

The deaths of male children were twice as many as the female (21 and 11 respectively) and almost three-quarters (21) were in the 2 to 5 year age group. Of these 32 deaths 12 (eight male and four female) were due to accidents involving road vehicles and the other 20 to a variety of other accidents, as follows:—

A 1-year-old boy died from salicylate poisoning and a year old girl from asphyxia due to aspiration of vomitus. A 2-year old girl died from coal-gas poisoning while on holiday and another, aged 3 years, fell from a second storey window. Two boys, aged 1 and 2 years respectively, and a girl of 3, died from burns sustained when fire broke out in their homes. The cause of the accident in which another 1

year old boy was fatally burned, is not known. Three boys, two aged 4 and one aged 2 years, were drowned. An unusual accident, but one which may well become more common, was that of a year old boy who was electrocuted when he grasped a live wire at the back of a radio set. Another year-old boy was similarly killed when he touched a live electric wire.

A 2-year-old boy was the victim of manslaughter. In the remaining six deaths (three girls aged 1 year, a boy of 2 years and two aged 4 years) no details were available as to the nature of the accident.

Respiratory disease is the other major cause of death among toddlers, and in 1963 deaths in this group (20) were three less than in 1962. Deaths from pneumonia (14) were more numerous among the male children, 10 as against 4 female. There were three deaths from bronchitis (two male and one female). In the sub-group "Other Respiratory Disease" there were two male and one female deaths. There was one death from influenza (a boy of 2 years of age) but no deaths from tuberculosis.

Deaths from Malignant Neoplasms (9) were two more than in 1962, and of these six were male and three female. All but one female were in the 2 to 5 age group. The deaths alloted to this group in the years 1951 to 1963 are shown as follows:—

NUMBER	OF DEATHS.	
	1050	

1951	 	6	1958	 	16
1952	 	6	1959	 	8
1953	 	6	1960	 	4
1954	 	12	1961	 	12
1955	 ***	3	1962	 	7
1956	 	2	1963	 	9
1957	 	15			

Four of these were due to leukaemia.

Infectious disease accounted for seven deaths—all but two being under 2 years of age. Of these seven, one was due to whooping-cough, three to measles, two to "Meningococcal Infection" and one, a 2-year-old girl to mumps encephalitis.

There were 10 deaths from congenital malformations (seven male and three female), six less than in 1962. There were five deaths in each of the two age-groups.

The following table compares the infant mortality with that of toddlers and shows the progressive reduction in both since 1900:—

Year		Infant Mortality Rate per 1,000 Births	Deaths 1-5 Years : Actual Number	Rate per 1,000 Population at Ages 1-5 Years
1900	 	153	2,754	39-2
1911	 	139	1,862	26.7
1921	 	106	1,494	19-2
1931	 	105	1,341	17-2
1941	 	111	635	8-3
1951	 	46	171	2.1
1952	 	41	140	1.8
1953	 	36	118	1.5
1954	 	35	92	1-2
1955	 	36	99	1.3
1956	 	33	85	1.1
1957	 	34.5	100	1.2
1958	 	35.1	86	1-03
1959	 	35.4	117	1.38
1960	 	32.2	103	1-19
1961	 	30-8	91	1-04
1962	 	32.4	99	1-13
1963	 	31.9	101	1-14

HOME ACCIDENTS, 1963.

Total number of accidents reported Number not resident in Glasgow	3,929 510
Glasgow Accidents	3,419
Classified according to Sex—Males Females Sex not known	1,535 1,882 2
	3,419

In 1963, Glasgow Royal Infirmary supplied the monthly total figures for home accidents, with no further information, the figures being as follows:—

Male ... 819 Female ... 953

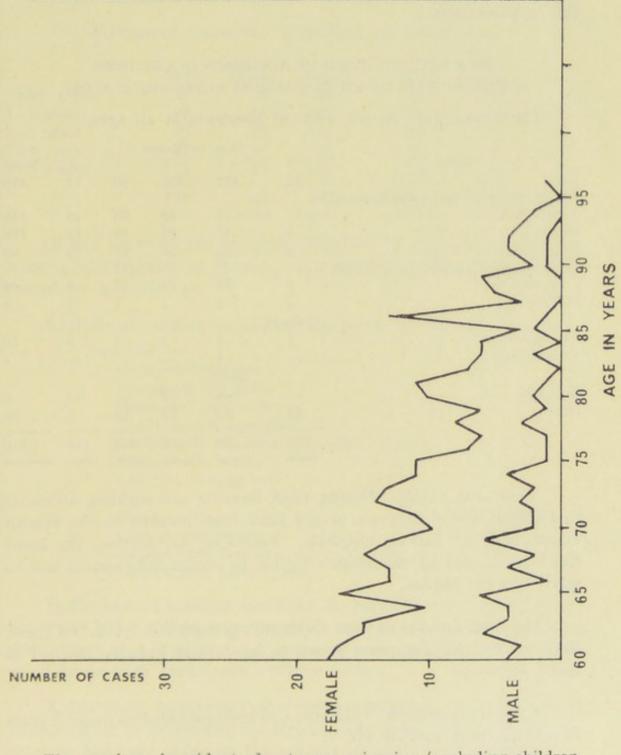
These figures are not included in the further detailed analysis. A study of the two main age-groups was made.

Accidents in those over 60 years of age:—
Male ... 123
Female ... 420

Total ... 543 or 16 per cent, of total accidents.

In this age-group, accidents due to falls were as follows :-

Male ... 71 Female ... 325 396 or 73 per cent. of total.



The number of accidents due to gas poisoning (excluding children under 5 years) was 13, 3 males and 10 females. This shows a marked decrease from previous years.

Accidents due to poisoning (excluding children under 5 years) numbered 50, 21 males and 29 females. This shows an increase from the previous year.

The number of burning and scalding accidents (excluding children of 15 years and under) was 112. This shows a marked decrease from the previous year.

ANALYSIS OF CAUSES OF ACCIDENTS IN CHILDREN UNDER 5 YEARS OF AGE (EXCLUDING BURNS AND SCALDS).

These constitute 30 per cent. of accidents at all ages.

						Age i	n Years	3		
	Ca	use			-1	-2	-3	-4	-5	Total
Falls					72	172	102	80	47	473
Foreign Body	y (swa	allowed	or inse	erted						
in orifice)			***		10	24	46	23	16	119
Poison					8	57	61	19	13	158
Lacerations					- 8	29	20	13	14	84
Hand or fing	er jar	nmed (e.g., in	door						
or window	1)	***			4	20	19	12	9	64
Suffocated					4	1	1	1	1	8
					(2 died)					
Gas Poisonin	ng				1	3	2	1	3	10
Electrocuted					-	1	-	_	-	1
						(died)				
Dog Bite					-	_	3	_	_	3
Others					17	32	22	18	7	96
					124	339	276	167	110	1,016

Burns and Scalds.—During 1963, burning and scalding accidents in children under 15 years of age have been notified to the Health Department by various hospitals. Following notification, the home has been visited by the Health Visitor to obtain information and to advise on prevention.

The total number of such accidents reported was 1,429. Of these, some on investigation were found to have been wrongly notified as home accidents.

A full analysis of the 978 burns and scalds in children under 5 years of age has been carried out.

Accidents involving school children are the subject of a separate report in the School Health Service Section, page 122.

Total number of accidents reviewed was 978.

	Male	Female	Total
Number of burns	250	202	452
Number of scalds	307	219	526
	557	421	978
	The same of the sa	Annual Contraction of the Contra	Technologies.

ACCIDENTS CLASSIFIED ACCORDING TO AGE-GROUPS.

		Burns			Scalds	
	Male	Female	Total	Male	Female	Total
Under 1 year	 37	25	62	30	26	56
1-2 years	 97	66	163	172	93	265
2-3 years	 65	69	134	60	61	121
3-4 years	 32	19	51	27	25	52
4 - 5 years	 19	23	42	18	14	32
	250	202	452	307	219	526
	-	Section 2	-	-	-	-

Of this number, 159 required admission to hospital. Permanent scarring was reported in 45 cases. One death in a child of 1 year was caused by a house fire.

Analysis of burning accidents gave the following main causes :-

Burns due to-				
Unguarded coal fire				165
Inadequate fire guard				45
Unguarded electric fire				22
Faulty electric equipment			***	17
Contact with hot metal (e.g	g., sto	ove, coo	oker)	50
Contact with hot iron				58
Gas oven blowing out				7
Cigarette				6
Contact with hot ashes				4
Contact with bonfire				6
Contact with chemicals		***		5
Contact with lighted paper		***		3

In the case of scalding accidents the majority were due to tea or hot water being spilled over the child, again, as in previous years, in many cases at a late hour. A factor in many was the overcrowded small house with inadequate working surface.

A disturbing feature is that in several instances when the Health Visitor called to investigate an accident due to an unguarded fire, no attempt had been made by the parents to prevent a recurrence.

In 61 cases no follow-up was possible, either because the family had removed or the address given could not be traced.

CHILD WELFARE SCHEME

Child Welfare Centres—There are now 54 ante-natal, 29 post-natal, 17 consultative, 105 child welfare and 2 ultra-violet ray treatment sessions each week. In addition, three child welfare clinics continue to be held at the Royal Maternity and Women's Hospital.

The time table of the clinics as now organised is as follows:—
WELFARE CENTRES FOR EXPECTANT AND NURSING MOTHERS AND
CHILDREN UNDER FIVE YEARS OF AGE.

Clinics for Children and Nursing Mothers		Clinic: Expectant		and Clinic	consultative Clinics and Clinics for Post-natal Mothers	
33 RICHARD STRE	ET—					
Monday,	1.30 p.m.	Monday,	8.30 a.m.	Monday,	8.30 a.m.	
Wednesday,	8.30 a.m.	Tuesday,	1.30 p.m.	†Wednesday,	1.30 p.m.	
Thursday,	8.30 a.m.	_		_		
Friday,	8.30 a.m.	_		_		
12 SANDY ROAD-						
Monday,	8.30 a.m.	Monday,	1.30 p.m.	Monday,	1.30 p.m.	
Wednesday,	1.30 p.m.	Thursday,	8.30 a.m.	†Tuesday,	8.30 a.m.	
Thursday,	1.30 p.m.	_		_		
18 PLEAN STREET						
Tuesday,	8.30 a.m.	Monday,	1.30 p.m.	Wednesday,	1.30 p.m.	
Tuesday,	1.30 p.m.	Wednesday,		†Thursday,	1.30 p.m.	
Wednesday,	8.30 a.m.	_		_		
Friday,	1.30 p.m.	_		-		
BLACKWOOD STRE	ET—					
Tuesday,	1.30 p.m.	Wednesday,	8.30 a.m.	Wednesday,	8.30 a.m.	
Friday,	1.30 p.m.	_		_		
190 KINFAUNS DR	IVE—					
Monday,	1.30 p.m.			_		
Wednesday,	8.30 a.m.	Monday	8.30 a.m.	-		
Wednesday,		Thursday,		Thursday,	8.30 a.m.	
Thursday,	1.30 p.m.	_		†Thursday,	1.30 p.m.	
Friday,	1.30 p.m.	_		_		
ROYAL HOSPITAL	FOR SICK CHI	ILDREN—				
Tuesday,	8.30 a.m.	Marian T		_		
Friday,	1.30 p.m.	_				
15 GLENBARR STR	EET-					
Monday,	8.30 a.m.	Tuesday,	8.30 a.m.	Tuesday,	8.30 a.m.	
Monday,	1.30 p.m.	_		Ministra -		
Tuesday,	1.30 p.m.			_		
Wednesday,	8.30 a.m.	Thursday,	8.30 a.m.	†Tuesday,	8.30 a.m.	
Friday,	8.30 a.m.	_		_		
Friday,	1.30 p.m.	_		-		
	† Consultativ	ve Clinics				

WELFARE CENTRES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE YEARS OF AGE-Continued.

Clinics for Children and Nursing Mothers		Clinic Expectant	s for Mothers	Consultative Clinicand Clinics for Post-natal Mothe		
194 FERNBANK ST						
Monday,	1.30 p.m.	Tuesday,	1.30 p.m.	Tuesday,	1.30 p.m.	
Tuesday,	8.30 a.m.	Thursday,	1.30 p.m.	†Tuesday,	1.30 p.m.	
Thursday,	8.30 a.m.		rico pinii	1 - 400040),	rioo pilli	
Control of the Contro						
101 DENMARK STE		117 1 1	0.00	177.11	0.00	
Monday,	8.30 a.m.	Wednesday,	8.30 a.m.	†Friday,	8.30 a.m.	
Wednesday,	1.30 p.m.	_		Wednesday,	8.30 a.m.	
Friday,	1.30 p.m.	_				
120 LIDDESDALE I	ROAD-					
Wednesday,	1.30 p.m.	Monday,	8.30 a.m.	Monday,	8.30 a.m.	
3 CALLANDER STR	EET-					
Monday,	8.30 a.m.	Tuesday,	1.30 p.m.	Friday,	8.30 a.m.	
Tuesday,	8.30 a.m.	Friday,	8.30 a.m.	†Friday,	1.30 p.m.	
Wednesday,	1.30 p.m.			-		
Thursday,	8.30 a.m.	_		_		
Thursday,	1.30 p.m.	_		_		
60 AVENUEPARK S		Torreland	0.20	4Monday	1 20	
Tuesday,	1.30 a.m.	Tuesday,	8.30 a.m.	†Monday,	1.30 p.m.	
Wednesday,	8.30 a.m. 8.30 a.m.	Thursday,	1.30 p.m.	Friday,	8.30 a.m.	
Thursday, Friday,	8.30 a.m.					
106 ORR STREET-					0.00	
_		Monday,	8.30 a.m.	Monday,	8.30 a.m.	
_		Tuesday,	8.30 a.m.	†Friday	1.30 p.m.	
_		Thursday,	1.30 p.m.			
_		Friday,	8.30 a.m.			
10 REDAN STREET	_					
Monday,	1.30 p.m.			_		
Tuesday,	1.30 p.m.	_		_		
Wednesday,	8.30 a.m.			_		
Wednesday,	1.30 p.m.	-		_		
Thursday,	8.30 a.m.	and a		_		
Thursday,	1.30 p.m.	_				
Friday,	8.30 a.m.					
Friday,	1.30 p.m.					
50 WELLSHOT RO		Mandan	0.20	4Thursday	1 30	
Monday,	1.30 p.m.	Monday,	8.30 a.m.	†Thursday,	1.30 p.m 8.30 a.m.	
Tuesday,	8.30 a.m.	Tuesday,	1.30 p.m.	Thursday,	0.00 a.III.	
Tuesday,	1.30 p.m.	Thursday,	1.30 p.m.	The state of the s		
Wednesday,	8.30 a.m.					
Wednesday, Friday,	1.30 p.m. 1.30 p.m.					
Filday,		Clinica				
	Consultative	Chines.				

WELFARE CENTRES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE YEARS OF AGE—Continued.

CITEDICE: 0212		0 11 11 011
Clinics for Children	Clinics for	Consultative Clinics and Clinics for
and Nursing Mothers	Expectant Mothers	Post-natal Mothers
	* 0000000000000000000000000000000000000	
Mobile Unit, Carntyne— Tuesday, 1.30 p.m.	Tuesday, 8.30 a.m.	Tuesday, 8.30 a.m.
Friday, 8.30 a.m.		_
Friday, 1.30 p.m.		
5 Craiglockhart Street— Wednesday, 1.30 p.m		Monday, 8.30 a.m.
		, , , , , , , , , , , , , , , , , , , ,
74 WELLHOUSE CRESCENT—		Tuesday 0 20
Tuesday, 1.30 p.m. Thursday, 8.30 a.m.	Tuesday, 8.30 a.m.	Tuesday, 8.30 a.m.
Thursday, 1.30 p.m.		
2 Lochdochart Road—		
Monday, 1.30 p.m. Wednesday, 1.30 p.m.		Wednesday, 8.30 a.m.
Friday, 8.30 a.m.		- Cuicsday, 0.00 a.m.
Friday, 1.30 p.m.		
26 Florence Street— Monday, 1.30 p.m.	Monday, 8.30 a.m.	Monday, 8.30 a.m.
Tuesday, 1.30 p.m.		†Friday, 1.30 p.m.
Thursday, 1.30 p.m.		
Friday, 1.30 p.m.		
12 FAULDHOUSE STREET—		
Monday, 1.30 p.m. Thursday, 8.30 a.m.	Wednesday, 8.30 a.m.	Wednesday, 8.30 a.m.
39 Bengal Street— Tuesday, 1.30 p.m.	Friday, 8.30 a.m.	Friday, 8.30 a.m.
Wednesday, 1.30 p.m.		- 0.50 a.m.
46 Balvicar Street—Temp		Church Hall—
Monday, 8.30 a.m. Monday, 1.30 p.m.		Friday, 1.30 p.m.
Wednesday, 1.30 p.m.		†Friday, 8.30 a.m.
Thursday, 8.30 a.m.		
183 Prospecthill Road, Me Monday, 1.30 p.m.		†Tuesday, 8.30 a.m.
Monday, 1.30 p.m. Tuesday, 1.30 p.m.		Friday, 8.30 a.m.
Thursday, 8.30 a.m.		
Thursday, 1.30 p.m.		
22 ARNPRIOR QUADRANT—		
Monday, 1.30 p.m.	Thursday, 1.30 p.m.	Thursday, 1.30 p.m.
Tuesday, 8.30 a.m.		
Thursday, 8.30 a.m.		
Barlia Drive—		
Tuesday, 8.30 a.m.	Tuesday, 1.30 p.m.	Tuesday, 1.30 p.m.
Friday, 1.30 p.m.		p.m.
NETHERPLACE ROAD, POLLO Monday, 1.30 p.m.		†Tuesday. 1.30 p.m.
Wednesday, 1.30 p.m.		†Wednesday, 8.30 p.m.
Thursday, 8.30 a.m.		
Friday, 1.30 p.m.		-
† Consultativ	e Clinics.	

WELFARE CENTRES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE YEARS OF AGE—Continued.

	r Children	Clinic Expectant		Consultative Clinics and Clinics for Post-natal Mothers		
132 WEIR STREET	_					
Tuesday,	8.30 a.m.			-		
Thursday,	8.30 a.m.	_				
401 GOVAN ROAD-						
Monday,	1.30 p.m.	Monday,	8.30 a.m.	†Tuesday, 1.30 p.	m.	
Wednesday,	1.30 p.m.	Tuesday,	8.30 a.m.	Thursday, 8.30 a.		
Friday,	8.30 a.m.	Thursday,	1.30 p.m.	_		
		Friday,	1.30 p.m.	_		
the same and		7,,				
20 ARKLET ROAD-						
Monday,	1.30 p.m.	Monday,	8.30 a.m.	†Thursday, 8.30 a.	m	
Wednesday,	1.30 p.m.	Tuesday,	8.30 a.m.	Friday, 8.30 a.		
Thursday,	1.30 p.m.	Tuesday,	1.30 p.m.	- 0.00 a.		
Friday,	1.30 p.m.	rucsday,	1.00 p.m.			
rilday,	1.50 p.m.					
74 Berryknowes	ROAD					
Tuesday,	1.30 p.m.	Monday,	8.30 a.m.	Monday, 8.30 a.	m	
Friday,	1.30 p.m.	Monday,	0.00 a.m.	Monday, 0.00 a.		
rilday,	1.50 p.m.					
CRAIGMUIR ROAD,	Denitee					
Wednesday,	1.30 p.m.	Monday,	1.30 p.m.	Monday, 1.30 p.	m.	
Friday,	1.30 p.m.	monday,	1.00 p.m.			
Tilday,	1.00 p.m.					
MATERNITY HOSPI	TAI					
*Monday,	9 a.m.	Monday,	1.30 p.m.	_		
*Wednesday,	9 a.m.	Tuesday,	1.30 p.m.			
*Friday,	9 a.m.	Wednesday,	1.30 p.m.	_		
_		Thursday,	1.30 p.m.	_		
_		Friday,	1.30 p.m.	_		
_		Saturday,	9.30 a.m.	_		
	CItation	Clinian				

[†] Consultative Clinics.

INFANT CONSULTATIONS.

There was an increase of 182 in the number of sessions, 5,290 in 1963 compared with 5,108 in 1962.

The total number of primary attendances of all children was 15,303 and subsequent attendances 170,735 compared with the corresponding figures of 16,144 and 186,814 in 1962.

^{*} Clinics for infants under One Year of Age.

As a result of certain changes in the age grouping in the following table the figures are not all comparable with those of previous years.

The following table gives the attendances at each consultation centre during 1962 with the corresponding total figures for the previous year:—

ATTENDANCES AT INFANT CONSULTATIONS, 1963.

	No. of Con- sulta- tions held	born	ildren 1963 lo. of endances	bo	hildren rn 1962 No. of endances	oth	dren bor er years No. of endances Sub.	To	tal No. No. of endances Sub.	Atte	—Total o. of ndances Sub.
Central—	Heid	Timi	. Jub.	T tilli.	Dub.		Dub.				
Cochrane Street	52	62		14		11	40	87	487	74	622
Richard Street	201	442	1,900	66	1,344	127	784	635	4,028	604	5,967
Partick	150	493	3,200	69	2,220	19	237	581	5,657	678	5,619
Blawarthill	201	445	2,631	128	2,339	100	705	673	5,675	679	6,400
Royal Hospital for		100	005	10	ONE	0	105	107	1.005	140	0 105
Sick Children		109		16		2	135 303	127	1,925	148	2,105
Netherton		177	1,436	21	1,031	4		202	2,770	282	3,067
Drumchapel	248	405	3,276	73	3,307	24	649	502	7,232	501	3,376
North Provan	298	732	7,228	178	6,520	85	1,274	995	15,002	958	14,746
Springburn	152	563	3,917	72	2,492	4	308	639	6,717	573	6,309
Denmark Street	148	292	1,806	46		28	204	366	3,462	370	3,652
Milton	101	163	1,556	34	1,040	2	169	199	2,765	150	2,270
Cowcaddens	255	509	3,729	67	2,509	16	383	592	6,621	660	7,095
Maryhill	152	518	3,309	75	2,067	18	165	611	5,541	626	4,777
East—			-,		-,						
Redan Street	359	1,192	7,108	169	4,740	73	994	1,434	12,842	1,397	13,873
Shettleston	301	657	5,488	110	3,069	56	826	823	9,383	792	9,985
Mobile—Carntyne	152	338	2,163	73	1,913	26	401	437	4,477	383	4,382
Rogerfield	199	295	4,266	43	2,763	34	675	372	7,704	446	8,373
Garthamlock	50	103	761	24	574	3	177	130	1,512	114	1,676
Easterhouse	155	339	2,720	58	2,508	24	578	421	5,806	471	6,999
South-East-											
Gorbals	201	564	3,046	114	2,324	45	450	723	5,820	843	6,442
Pollokshaws	101	162	970	24	955	7	192	193	2,117	255	2,709
Balvicar Street	198	385	3,002	66	2,449	37	645	488	6,096	722	7,288
Oatlands	100	183	2,172	41	1,210	34	307	258	3,689	222	2,759
Mount Florida	203	465	3,287	95	3,241	23	617	583	7,145	789	7,557
Arnprior Quadrant		284	1,992	55	2,341	20	384	359	4,717	382	5,167
Barlia Drive	102	214	1,628	49	1,546	29	531	292	3,705	291	3,781
South-West-	000	005	0.000		0.001		400				
Pollok	200	395	2,389	86	2,231	15	485	496	5,105	497	6,708
Weir Street	104	289	1,878	42	1,405	11	253	342	3,536	357	4,335
Govan	149	460	2,834	47	2,006	25	315	532	5,155	623	6,011
Elderpark	200	617	4,427	110	3,460	39	493	766	8,380	752	11,157
Penilee	101	163	1,352	25	844	17	319	205	2,515	265	3,196
Berryknowes	102	159	1,522	75	1,370	6	237	240	3,129	240	3,411
THE PROPERTY.	5,290	12,174	88,222	2,165	68,278	964	14,235	15,303	170,735	16,144	186,814
		110	,396	70,	,443	15	,199	186	,038	202	,958

Infant Consultations are also held at the Maternity Hospital and attendances at these in 1963 numbered 2,273 compared with 2,124 in 1962.

Ante-Natal Consultations.—Sessions at ante-natal clinics numbered 2,677 compared with 2,724 for the preceding year. The total attendances were 48,056 compared with 47,608 in 1962. Primary attendances were 5,375 or 154 less than the previous year (1962), and subsequent attendances numbered 42,681, an increase of 602. Consultations and attendances at each of the centres are shown in the following table:—

ATTENDANCES AT ANTE-NATAL CLINICS, 1963.

	No. of	Ucenital			
	Clinic - Sessions	Primary	Subsequent	Total	Hospital Cases
Richard Street	 99	231	1,570	1,801	1
Partick	 100	251	1,577	1,828	1
Blawarthill	 99	173	1,490	1,663	8
Netherton	 50	62	478	540	_
Drumchapel	 57	149	1,065	1,214	3
Provan	 104	97	1,137	1,234	5
Springburn	 103	187	1,258	1,445	1
Denmark Street	 49	78	533	611	7
Milton	 47	21	180	201	5
Cowcaddens	 102	150	1,355	1,505	57
Maryhill	 104	293	2,147	2,440	44
Orr Street	 203	368	3,825	4,193	86
Shettleston	 151	154	1,214	1,368	11
Mobile—Carntyne	 52	30	249	279	1
Garthamlock	 45	15	98	113	_
Easterhouse	 52	70	463	533	
Rogerfield	 50	63	506	569	2
Gorbals	 200	459	3,138	3,597	_
Pollokshaws	 51	108	806	914	1
Balvicar Street	 101	204	1,388	1,592	3
Oatlands	 51	113	819	932	_
Mount Florida	 100	200	1,842	2,042	_
Arnprior Quadrant	52	73	697	770	
Barlia Drive	 51	80	657	737	
Pollok	 150	312	2,342	2,654	17
Govan	 202	604	4,708	5,312	37
Elderpark	 152	613	5,387	6,000	11
Penilee	 52	91	873	964	2
Berryknowes	 48	126	879	1,005	2
	2,677	5,375	42,681	48,056	305

ATTENDANCES AT POST NATAL AND CONSULTATIVE CLINICS, 1963.

No. of									
		Cons	ultations		imary	Sub	sequent	Total	
	1	Post-	Consult-	Post-	Consult-	Post-	Consult-	Post-	Consult-
	1	natal	ative	natal	ative	natal	ative	natal	ative
Richard Street .		48	18	85	55	35	17	120	72
D 11-1		45	50	82	366	7	118	89	484
201 (1.11)		50	39	51	96	14	65	65	161
27 12		50	_	33	_	5	_	38	-
7 1 1	**	52	_	58		5		63	_
n		52	45	29	103	3	21	32	124
0 -1 -1	**	51	23	43	27	1	9	44	36
~		50	24	7	30	_	16	7	46
3531		47		9	_	1	_	10	_
0 11		51	45	64	105	18	89	82	197
3.6 3.111	**	50	47	115	209	30	303	145	512
0 01 1		48	47	83	165	98	120	181	285
C1 -1411	**	52	43	47	103	20	91	67	194
Mobile—Carntyne		52	40	18	100	3	_	21	101
0 11 1 1		45	Maria Land	3		1		4	_
77 / 7		52	_	21		2		23	
77 71 7 7		50	26	34	25	3	23	37	98
0 1 1		48	50	80	355	24	257	104	612
TO II I I		51	00	31	000	4	207	35	_
T 1 . O		59	46	70	203	12	13	82	216
0 11 1	**	51		40	200	10		50	
3.5 1 731 13		58	52	113	255	10	65	123	320
Arnprior Quadran	+	52		38	200	15	_	53	-
D. P. D.		51		9		2		11	_
D-11-1-		40	52	154	312	104	549	258	861
0		52	52	97	553	43	415	140	968
Tildamania		51	52	119	670	74	257	193	927
D T		50	02	35	010	10	207	45	-
D1		48		38		3		41	
Dollykhowes .		10				,		**	
	1,	459	711	1,606	3,685	557	2,428	2,163	6,113
	-	-			-				-

COURSES IN MOTHERCRAFT.

Courses in mothercraft are given in 27 of the centres, either during ante-natal sessions or at a class held specially for this subject. The course covers physiology of pregnancy and labour; preparation for confinement; making of layette; preparation for breast and artificial feeding; general care of the new-born infant, including bathing. Simple instruction on basic breathing is given by health visitors. Classes are open to any expectant mother in the city. She need not be attending the Local Health Authority ante-natal clinic for supervision. Efforts have been made to encourage general practitioners to refer expectant mothers to the centres for this teaching and the response has been a little better during the past year. The importance of this educational work cannot be over-emphasised, and the mothers who attend appreciate very much this side of the work. It is during pregnancy that the mother is particularly responsive and at these classes she learns a great deal about child welfare which helps her to be an intelligent mother.

"Health of Mother and Child."—A new edition of this publication price 1s. 6d. was issued in 1957. The booklet is sold at Child Welfare Clinics and city hospital ante-natal clinics, and to other Local Authorities in Scotland and England. Requests for copies are received from all parts of the world. In 1963 the total number of copies issued was 3,806, of which 1,297 were sold at the Child Welfare Clinics (compared with 1,654 in 1962 and 2,945 in 1961).

ULTRA-VIOLET RAY CLINIC.

It is necessary and desirable to continue the arrangements for light treatment of certain children. The housing of the city is such that large numbers of families are still living in a bad environment, and ultra-violet light treatment is most beneficial in the prevention of early treatment of rickets and malnutrition.

RECORD OF ATTENDANCES AND CONSULTATIONS DURING 1963.

	Number of Clinics		Nui	ildren 1 year mber of endances	Children + 1 year Number of Attendances		Mothers Number of Attendances		Total Number of Attendances	
Provan	***	held 104	Prim.		Prim. 93	Sub. 1,491	Prim.	Sub.	Prim. 93	Sub. 1,491
		Designation of the last of the		-	_				-	-

DENTAL TREATMENT OF EXPECTANT AND NURSING MOTHERS.

In accordance with the terms of Section 22 of the National Health Service (Scotland) Act, 1947, dental treatment was again made available to expectant and nursing mothers on application and free of cost to the patient.

A summary of the work during 1963 is given in the table below, along with comparative statistics for each of the previous years back to 1958.

New cases were the lowest in number for many years and total attendances were similarly reduced.

SUMMARY OF CLINIC ATTENDANCES AND TREATMENTS.

First Attendances Total Attendances	 1963 328 1,618	1962 398 2,069	1961 514 2,354	1960 539 2,891	1959 529 2,980	1958 489 3,082
Extractions— Local Anaesthetic	 907	906	1,571	2,514	2,804	3,334
General Anaesthetic Fillings Dentures completed	 824 241 269	485 209 285	1,280 303 632	1,093 307 557	201 249 586	334 604

Scalings totalled 78, repairs to dentures were 20 and other operations amounted to 597.

The Chief Dental Officer, Mr. Martyn L. H. Davies, has provided the following note on the year's work.

"The figures for first visits continue to show a decrease on previous years. This is largely due to the increasing awareness of expectant and nursing mothers that they can now obtain free treatment and dentures from general practitioners under the National Health Service as well as from our Clinics. It is hoped that these figures will start to increase again as a result of the more complete service about to be offered. This will include more General Anaesthetic sessions and the provision of immediate and temporary dentures."

DAY NURSERIES AS AT END OF 1963.

Approved for training		oved	Chile on re at er	gister ad of	Average daily attendances during year		at	sts end
	0-2	2-5	0-2	2-5	0-2	2-5	0-2	
"Badfard Street " 40 Badfard	yrs.	yrs.	yrs.	yrs.	yrs.	yrs.	yrs.	yrs.
"Bedford Street," 42 Bedford Street, C.5 "Bridgeton," 106 Orr Street,	10	30	10	30	7	22	28	62
S.E Yes "Broompark," 7 Broompark	20	30	20	30	16	25	64	56
Circus, E.1 Yes "Clutha Street," 36 Clutha	30	30	30	30	18	25	11	8
Street, S.W.1 Yes "Cowcaddens," 91 Dunblane	20	30	20	30	15	24	40	30
Street, C.4 Yes	18	27	18	27	13	26	54	91
"Craigielea," 2 Craigpark, E.1 Yes	20	30	20	30	18	29	14	26
"Crail Street," 60 Crail Street, E.1 Yes	20	30	20	30	14	23	8	2
"Elderpark," Arklet Road, S.W.1	10	30	10	30	9	28	9	55
"Hamiltonhill," 101 Ellesmere	10	30	10	30	9	20	9	33
Street, N.1 Yes "Holmlea," 77 Holmlea Road,	20	30	20	30	17	26	25	15
S.4 Yes	20	30	20	30	18	25	30	28
"Kingston," 132 Weir Street, C.5	8	32	8	32	6	31	21	9
C.5	20	40	20	40	13	28	9	12
Street, S.3 — —	10	30	10	30	9	24	3	8
Street, E.1 Yes	21	_	21	_	19	_	8	_
22 Sandy Road, W.1 Yes	15	25	15	25	12	23	22	50
1 Sandyford Place, C.3 Yes	30	20	30	20	28	18	22	26
1107 Gt. Western Road, W.2 —	10	25	10	25	9	20	23	25
Total	302	469	302	469	238	397	391	503

DAY NURSERIES.

Total attendances numbered 155,304 compared with 155,587 attendances in 1962.

Each nursery is visited routinely every fortnight by a medical officer of the Child Welfare Staff and any emergency visits are dealt with by medical staff from the Central Office.

TRAINING OF NURSERY STUDENTS.

The scheme of training undertaken by the Health and Welfare Department (in conjunction with Nursery Schools and Further Education Departments) for suitable applicants between 15 and 21 years of age, continues to be very popular. Many girls living in outlying districts apply for residential vacancies, but only a limited number can be accommodated as the Nursery Nurses' Hostel, which accommodates 12 girls, is always full to capacity.

During 1963 there were 149 girls in various stages of the two years training course for the Nursery Nurses' Certificate. Seventy students sat the Scottish Nursery Nurses' examination and 67 were successful—seven with merit.

SPECIAL DAY NURSERY FOR MENTALLY HANDICAPPED CHILDREN, BROOMHILL PLACE, GLASGOW, W.1.

This nursery, formerly housed in Moffat Street Reception House, was transferred in April to new hutted premises in Broomhill Place. The nursery has now accommodation for 25 children. Six of the children in Moffat Street were transferred to the Broomhill Nursery and 19 new admissions were made. A number of these children were from a younger age group, as provision for babies was available. The results from the care and training which the children have received are most encouraging. Even the most disabled from very poor homes show definite improvement and progress. An achondroplastic child, who when admitted could not walk, talk or feed herself, and was not toilet trained, now plays happily, loves to help the staff and thinks she is running the nursery. Her I.Q. is 68, she can talk, feed herself, and helps to feed other children and is completely toilet trained. A mentally retarded child who had no speech and was not toilet trained improved so rapidly that within four months he was transferred to an ordinary nursery school with an I.Q. of 95 and toilet trained. His improvement was greatly helped by the discovery that he had quite a severe refractive error which was corrected by spectacles. These the child enjoyed wearing, and they really transformed his reactions.

Most of the children when admitted are quite severely undernourished because of their difficulty in eating, and their mothers have continued to feed them from a bottle; thus they have been denied the full mixed diet they require for their healthy development.

In the great majority of cases the gratitude of the parents and their happy response to the fact that something constructive is being done for their child with such obvious good results are most rewarding for all members of staff. Without their loving devotion and skilled care of these children such encouraging results could never be achieved.

REPORT ON ASSESSMENT AND ADVISORY CENTRE, GLENFARG STREET.

The centre was opened in September, 1962. The premises were adapted from a former tuberculosis clinic which had served for a time as a child welfare clinic. In addition to the usual consulting rooms, health visitors' room and waiting hall, there is a play room fitted with a one-way vision screen. This is used for observation of the children and also for teaching purposes. The centre is bright and not being large, has an intimate atmosphere which reassures children and parents.

Eighty-six children have been seen since the centre opened until the end of December, 1963. To begin with, one session a week was held but there are now three sessions. Children are seen by appointment. The referring doctor writes to the clinic and the appointment is usually made by the health visitor who first visits the home to assess the social conditions and family relationships.

Children were referred from the following sources :-

Hospital Paediatricians		16
Department of Child Psychiatry		3
S.H.S. Child Guidance Clinics	***	1
Family doctor	***	2
Child Welfare Medical Officers	2.00	64

The largest category of children seen are those classed as simple retardation. There are 24 children in this group. Twelve had severe retardation. The other twelve fall within the educationally subnormal range. In this latter group many children have severe visual defects. One severely retarded child is blind.

The next largest group are children suffering from cerebral palsy, of which there are 15. Eleven of these children are severely retarded and of those, two are also blind. Four of the children were considered to be only slightly mentally retarded and one child with hemiplegia was of normal intelligence.

Nine of the children referred were mongols. One of them has a severe heart lesion, one had talipes and two had errors of refraction for which spectacles were prescribed.

There is a group of fifteen children with miscellaneous conditions, made up as follows:—

Spina bifida ... 2—One has complete lower flaccid paralysis and lack of sphincter control. The intelligence of both is within normal limits.

Toxoplasmosis ... 1—This child has a severe visual defect and is mildly retarded.

Microcephalus ... 3—One has palsy of the external rectus muscle of one eye.

Constitutional dwarfism associated with

retardation ... 2 Post-encephalitis ... 1

Hydrocephalus ... 2-Both severely retarded and blind.

Treated Cretin ... 1

Minimal brain damage ... 3—One child had talipes and one had paralysis of the external rectus muscle of one eye.

Six children were referred with locomotor delay. One was thought to be slightly retarded but the others were considered to be essentially normal.

Eight children have been classed as cases of developmental retardation of speech; their hearing is normal, they are of average intelligence and have no obvious functional disturbance.

Nine children were considered normal. They were referred for various reasons, e.g., history of febrile convulsions, transient abnormal neurological signs in an infant.

These last three groups of children indicate a not unimportant function of this centre, namely to investigate cases of deviation from developmental norms. Such investigation and observation require time which is not available in a busy welfare clinic or surgery.

In addition to the children seen at the clinic, one child was examined in one of the children's homes and two in hospital.

All the handicapped children are reassessed periodically. In addition to assessment, a very important part of the work of the centre is support and counselling of parents. When handicap is first diagnosed,

it may be necessary to see the parents frequently to help them to accept the situation. Visits to the clinic are supplemented by home visits by the Health Visitor who has had special training in mental health.

A parents' meeting was held once a month during last winter. Following a short talk or film there was discussion over a cup of tea. These meetings could be regarded as an important supplement to individual counselling. Feelings could often be expressed in the group that would not come out in an individual interview. It was very encouraging that some fathers were present at each meeting and also that other relatives or friends sometimes came along too. A further function of the centre is to utilise the resources of the community available to aid the handicapped and their families.

Ten children were admitted to the nursery for handicapped children. Four were admitted to day nurseries, one to a nursery school, and one to Kelbourne nursery school for spastics. We have been much indebted to the Association for the Mentally Handicapped for admitting so many of the children to the day centre at Laurieston House and also for short-stay residential care at Mount Stewart Home at Cove.

From the planning stage we have had invaluable co-operation and advice from the Department of Child Health and the Department of Child Psychiatry. Professor Hutchison acts as consultant to the centre in cases which present any difficulty in diagnosis. Dr. Schaffer, formerly of the Department of Child Psychiatry, has attended once a month for an informal case conference at which various topics such as parents' emotional difficulties and children's behaviour problems were discussed.

SUMMARY OF CASES SEEN.

Simple Retardati	on				24
Cerebral Palsy					15
Mongols	***				9
Spina bifida	***				2
Toxoplasmosis		***		***	1
Microcephalus		***		***	3
Constitutional D	warfi	ism	***		2
Post-encephalitis			***		1
Hydrocephalus					2
Cretin					1
Minimal Brain D	ama	ge			3
Locomotor Delay	,				6
Development Spe		Retard	ation		8
Normal					9

RESIDENTIAL HOMES AND NURSERIES.

SHORT STAY NURSERIES.

There are two Short Stay Nurseries, one at Glenrosa, 47 Maxwell Drive, and the other at 9 Winton Drive. These Nurseries provide accommodation and care for children under the age of five years whose mothers are in hospital. The maximum duration of stay is one month.

This service is much appreciated and is in constant demand. During 1963 there were 416 admissions to Glenrosa and 418 to 9 Winton Drive.

CARNBOOTH HOUSE.

During 1963 there were 158 admissions to this Home. Six children came for segregation before and after B.C.G. vaccination, and 152 were admitted for a period of general care in good surroundings. These children were recommended for convalescence by the Medical Officers at the Child Welfare Clinics.

Carnbooth House stands in pleasant grounds which give ample scope for outdoor play and the children who come to it from poor surroundings show marked benefit.

MILLBRAE HOME.

The total number of children admitted to this Home in 1963 was 104. There were 68 neo-nates admitted from hospital for segregation following B.C.G. vaccination. There were also 22 children under the age of two years who were contacts of tuberculosis. These latter children remained in the Home for six weeks before and six weeks after B.C.G. vaccination. The remaining 14 children were referred either by the Child Welfare Medical Officers or by hospital almoners for a period of convalescence.

The standard of care in this Home is excellent, and the babies, many of whom are very frail, responded in a most gratifying way to the devoted attention they received there.

SCOTSTOUN HOME.

The number of admissions to this Home in 1963 was 115. The Home is situated in the upper flat of 1107 Great Western Road. It opened in January, 1963, as a temporary, partial replacement of

Scotstoun House which was closed in November, 1962. The Home has accommodation for 18 children under the age of two years. The premises are rather cramped and the facilities for out-door play are limited but in spite of these disadvantages most children who go there for convalescence do show considerable improvement as a result of the nursing care, good diet and the regular routine provided.

CHILDREN'S DEPARTMENT HOMES.

The Medical Officers of the Child Welfare staff again undertook the medical care of the children in Eglinton, Eversley, Lochgarry and Castlemilk Homes during 1963.

Quarterly visits were also paid to Blairvadach, Corrybeg and Lochaber for administrative purposes.

The Medical Officers examine all the children when they are admitted to the Homes and regular medical attention is provided for all the resident children. A routine weekly visit is paid to all the Homes in the city and the medical officers act as general practioners and treat the children when necessary. In addition the children's diet, their daily routine, and all matters relating to the prevention of infection, are kept under supervision.

NURSERIES AND CHILD MINDERS.

The Nurseries and Child Minders Regulations Act, which came into operation in August, 1948, provides for the regulation of certain nurseries and of persons who, for reward, receive and look after children in their homes.

Three tentative applications were made during 1963 but after consideration one was refused registration owing to constructional unsuitability and the others were advised not to proceed with their applications.

Four day nurseries closed down during the year, leaving the number of nurseries at December, 1963, at fourteen, providing accommodation for 278 children under school age.

Inspection of all nurseries was carried out during the period and each was found to conform to the required standards.

HEALTH VISITING SERVICE.

During the year there were several resignations and appointments among the staff, but at the end of the year the number of Health Visitors employed in the Department was approximately the same as in previous years, namely, 224. Of this number 145 carry out child welfare, 23 tuberculosis, 48 education health and 2 venereal disease duties respectively. The problems in each service in the city are still of such magnitude and complexity that the duties of the Health Visitors continue to be specialised in these various fields of work. Six part-time nurses help at the busy ante-natal sessions, enabling the Health Visitors to spend their time on educational and counselling work for which they are specially trained and experienced.

New and complex problems are arising in family life and the child welfare Health Visitors have had a particularly busy year. Reference is made to some of these problems in the introduction to this section. They continue to visit young children who have suffered from burns and scalds. Many of these accidents are avoidable and occur again and again in the same families. Lack of adequate fireguards, failure to use them properly, and carelessness with teapots and cups of tea are largely responsible.

Of the 34 Health Visitors with the special training in mental health, 17 are now engaged in the after-care of patients who have been in a mental hospital; one is attached to the assessment centre in Glenfarg Street and carries out home visits to and counselling of parents of handicapped children attending the centre. One Health Visitor now works in the psychiatric unit of the Royal Infirmary, following up and counselling persons who have attempted to commit suicide. Dr. Sclare, consultant psychiatrist, is extremely pleased with the results of this special work. This visiting is by no means easy and requires a great deal of time and tact.

Despite additional clinics held for poliomyelitis vaccination, the response in the age group six months to two years is still unsatisfactory. Most of the children vaccinated are those who attend the child welfare clinics and have co-operative parents.

Though the incidence of tuberculosis is continuing to decline slowly, it is still much higher than that in the other large cities in Britain and the Health Visitors engaged in the service have a difficult and challenging task. It is they who are mainly responsible for securing the examination of all contacts and the appropriate action, e.g., B.C.G. vaccination when necessary. Quite a number of patients default in taking the drugs for the prescribed period and an important aspect of the Health Visitor's work is the persuasion of these patients to continue the necessary course of treatment. The annual B.C.G. clinics held in schools at the beginning of the school year for the 13-15 year olds continue with increasingly good results.

Many demands are made on the Health Visitors to speak at meetings of various kinds, and on a variety of topics. They also give valuable help to the Girls' Guildry, Girl Guides, the Red Cross organisations, Girls' Training Corps, and other organisations in their various training schemes.

HEALTH AND TUBERCULOSIS VISITING.

The following table shows the number of home visits and cases attended by the Health Visiting Staff in 1963:—

NUMBER OF HOME VISITS AND CASES.

	Visited by Health V Health Visitors and other					k	Number of cases	Number of visits
1.	Expectant Mothers				***		1,602	2,593
2.	Children born in 1963						22,151	68,222
3.	Children born in 1962						20,873	76,149
4.	Children born 1958-61						55,681	115,830
5.	School children						15,496	16,163
6.	(a) Persons aged 65 and	over		***			101	345
	(b) Persons included ab						01	150
_	special request of a		-		or hos	pital	61	153
7.	(a) Mental Health: car	e and	after-c	are	***	***	515	2,979
	(b) Persons included ab							
	special request of a	genera	l pract	itioner	or hos	pital	436	1,904
8.	(a) Other hospital after-	care		***	***		438	462
	(b) Persons included ab	ove w	ho we	re visi	ted at	the		
	special request of a						124	154
9.	Tuberculous households						13,068	65,639
10.	Other infectious diseases				***	***	100	464
11.	Other		***		***	***	488	1,709
			T	otal		***	131,134	352,766

HEALTH VISITORS' TRAINING COURSE.

The 1962-63 Course of Training commenced on Monday, 3rd September, with a complement of 34 students, 13 of whom were given monetary assistance while undergoing training and remained under contract to the Department for one year after training.

Nineteen of the students received financial assistance in other ways, either by educational grants or by secondment from other local authorities.

In addition two candidates were enrolled in June for the Integrated Course of Training for District Nurses and Health Visitors. These two students completed their training in June, 1963, and were successful in both examinations, gaining the Certificates of the Royal Sanitary Association and the Queen's Institute of District Nursing.

All the student health visitors were successful in gaining the Certificate of the Royal Sanitary Association.

The ceremony of the presentation of Prizes and Certificates was carried out by the former Lord Provost, Dame Jean Roberts, D.B.E., J.P., and the function was presided over by the Right Honourable the Viscountess Weir.

The Health Visitor Refresher Course took place in April, 1963. Several subjects of current interest provided topics for discussion and study and were appreciated by the staff attending. The Course covered two full days.

DOMICILIARY MIDWIFERY SERVICE.

In 1963 the number of registered midwives practising in the city was 142. Of these 96 were full-time domiciliary midwives in the service of the Corporation and 23 part-time; included in this number is the Chief Supervisor and nine Assistant Supervisors. The introduction of part-time midwives has been most successful. The 23 now employed are fully trained and qualified and have carried out their duties in an excellent manner. Of the remainder 23 were Queen's Nurses engaged in full-time midwifery. Twenty midwives were variously employed, 18 in association with maternity homes and 2 in private practice.

The Corporation midwifery service has, since its inception in 1940, been very popular with Glasgow mothers and many of them, having experienced the advantages of this service during their first confinement, now readily book a Corporation midwife for their second and subsequent pregnancies. Far too many women, however, delay booking a midwife for the approaching confinement until well into the seventh or eighth month. In 1963 of the 6,604 booked applications, 1,381 were not made till the seventh and 1,940 till the eighth month of pregnancy. No less than 252 applications were made as late as the ninth month. This militates against the mother receiving adequate ante-natal care and sufficient mothercraft teaching from the midwives.

During the year the municipal midwives attended 4,590 cases, paying 44,084 ante natal visits and 59,208 during the puerperium, while the Queen's Nurses attended 1,196 cases, to whom they paid 30,786 visits.

A supervisor is always on duty, day and night, to deal with emergency calls and/or arrange for admission to hospital, etc. The close co-operation which exists between the hospitals and district staff is invaluable in an emergency and is very much appreciated. In addition, a considerable part of the work of the supervisors is the general supervision of midwives under the Midwives (Scotland) Act, 1951, and the inspection of the patients' homes with regard to their suitability for a confinement. All midwives are encouraged to report cases where the house is only a single apartment or overcrowded, so that arrangements may be made for the confinement to take place in a hospital. Where necessary the aid of the Department's Disinfecting staff is invoked to have the houses sprayed or disinfected and washing done prior to the confinement taking place—a much appreciated service.

Maternity outfits are available on application for women who are to have a home confinement and 6,849 of these, costing 13s. 9d. each, were issued free of charge in 1963.

The introduction of these sterilised dressings has been of the greatest benefit to both patient and midwife, not least as a practical demonstration of the value of personal hygiene.

Gas and Air Analgesia and Trilene can now be administered by midwives to those patients certified by their doctors as requiring it. Only midwives duly certified by the Central Midwives Board as being properly qualified to administer such analgesics are permitted to do so.

The domiciliary staff also undertake the training of pupil midwives from the maternity units of the following hospitals:—Stobhill, Southern General, Western District, Eastern District, Robroyston and Lennox Castle. In September 1961 this Department took over the training of the pupil nurses from the Glasgow Royal Maternity Hospital. This has increased considerably the number of pupils now taking cases on the district, sometimes as many as 70. The scheme provides that there is always a domiciliary midwife at each confinement. For this training 54 of the midwives are approved by the Central Midwives' Board. During the year 451 pupils from the above hospitals attended 3,304 confinements and made 3,565 puerperium and 12,537 ante natal visits. Training of pupil midwives is also carried out by the District Nursing

Association and reference to this will be found in the Home Nursing Section of this report.

Post-graduate courses for midwives are held each year in one or other of the larger cities and four midwives are authorised to attend.

The following table shows the work carried out by the midwives during 1963.

Number of births classified to show nature of attendance at birth :-

Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947.

(a) Midwives employed by	Doctor present at actual confine- ment	Doctor present at any time during Labour	Doctor not present at any time	Midwife alone (no doctor engaged)	Total
the Authority (b) Midwives employed by	2,239	989	1,276	86	4,590
voluntary organisations	609	525	62	_	1,196
(c) Total	2,848	1,514	1,338	86	5,786
	-	-	the second second	The second second	Editor and the Control of the Contro

Fees to doctors attending emergency cases amounted to £71 11s. 6d.

Cases of Puerperal Fever Occurring in the Practice of Midwives.

**			Cases
Yea		Midwives	Notified
Average	1939-45	33	45
Do.	1946-50	25	33
Do.	1951-55	5	5
Do.	1956-60	2	2
	1961	-	_
	1962	1	1
	1963	1	1
Thoro	THE ONE	death in	1963

There was one death in 1963.

OPHTHALMIA NEONATORUM.

The number of cases of Ophthalmia Neonatorum notified during 1963 was 37 (an increase of 12 on the preceding year), 24 males and 13 females.

The cases were classified as follows:-

Ophthalmia Neonatorum		21
Purulent Conjunctivitis		10
Simple Conjunctivitis		5
Not Classified		1
(Insufficient information	given)	

Age at onset was as follows :-

-	12 hours		 ***	4
-	4 days		 	11
-	8 days	***	 ***	13
+	8 days		 	9

Attendance at birth was as follows :-

General Prac	titione	rs	 14
Institutions			 21
Midwives			 2

Bacteriological examination was carried out in 35 cases with the following result:—

Gonococci		10
Staphylococci		11
Haemolytic Streptococci		1
Pneumococci		3
Gram Neg. Cocci (not g.c.)	1
No Organism Found		9
No Swab Taken		1
Not stated if Swab Taken		1

Twenty-one cases were admitted to hospital, 19 to Ruchill and to to Belvidere.

PUERPERAL FEVER AND PUERPERAL PYREXIA

During the year there were registered 216 cases of puerperal fever and 74 cases of puerperal pyrexia compared with 159 and 126 respectively for the preceding year. All but one case of puerperal fever and one of pyrexia were removed to hospital or other institution.

There were two deaths among these cases of puerperal fever but none from puerperal pyrexia.

WELFARE FOODS. 1963.

DETAILED ACCOUNT OF THE YEAR'S WORKING.

The distribution of welfare foods was taken over from the Ministry of Food on 28th June, 1954.

Under the Ministry of Food there were 25 distribution centres in Glasgow. There are now 33 centres. The additional centres are necessary to cover the outlying housing schemes.

The documents of entitlement to welfare foods are issued to beneficiaries by the Ministry of Pensions and National Insurance on application.

The following is the average weekly issue of each food at the Centres during the year 1963 compared with the issues in the three previous years:—

		National Dried Milk (tins) Full Cream Half Cream	Oil	"A" and "D Tablets (packets)	" Orange Juice (bottles)
1963		4,937 113	727	325	3,153
1962		5,346 132	585	244	2,326
1961		6,482 157	1,008	478	4,257
1960	***	8,452 206	1,394	730	7,248

The welfare price of National Dried Milk was increased from 10½d. to 2s. 4d. per tin in 1957, and since then there has been a continuing drop in demand. The increase in price is not the only reason for the decline in issues, other contributing factors being (1) babies now being given solid foods at a much earlier age, and (2) parents buying the more attractively packaged proprietary baby food

National Dried Milk may be purchased at a price of 4s. per tin if no valid token is available. The average weekly issue of such milk in 1963 was 136 as compared with 92—1962 and 101—1961.

From the 1st June, 1961, the following price increases for Vitamin Products came into effect:—

```
Orange Juice ... ... 1s. 6d. per bottle, previously 5d. Cod Liver Oil ... 1s. per bottle, previously FREE. Vitamin Tablets ... 6d. per packet, previously FREE.
```

Tokens are no longer required for vitamin products (other than free issues) and no proof of identity is required of beneficiaries. This last increase brought about a further very considerable reduction in the demand for vitamin products throughout the country, and the decrease in Glasgow was on a par with the rest of Britain. It is encouraging to note, however, that the fall in issues of vitamin products in Glasgow was arrested in 1963 due in no small part to the endeavours of the Clinic Medical Staff and Health Visitors.

During the year the uptake of the potential was as follows :-

```
Orange Juice ... ... ... 4.9 per cent. Cod Liver Oil ... ... ... 3.9 per cent. "A" and "D" Tablets ... ... 7.9 per cent.
```

No reasonably accurate figure of uptake in relation to potential can be given in regard to National Dried Milk, because tokens can be used for either liquid milk or dried milk.

SECTION IV

SCHOOL HEALTH SERVICE.

Shortages and illnesses of medical staff necessitated employment of part-timers. Routine medical inspection of 9 year-olds was discontinued in the latter half of the year.

Fewer pupils were seen at systematic inspection for most agegroups, but more 16 year-olds were seen and also more "non-routines" and "cases at risk."

Health education talks were extended to more schools. Additional Health Visitors and 7 married women doctors were taken on part-time for this work. Authority was obtained to employ up to 10 of these doctors for this purpose.

A survey of accidents due to burns or scalding was carried out by Health Visitors, and the results were interesting.

The results of routine medical inspection compared unfavourably with those of last year for most of the listed defects. Fewer parents were present at inspections and fewer were notified of defects found. Children noted for re-inspection were reduced and the percentage of pupils with "no recorded defects" was smaller.

X-ray examination of school children, teachers and other adult employees continued. In a survey of Further Education Colleges over 4,000 students were X-rayed with satisfactory results.

Medical supervision of nursery school children was again undertaken and male medical officers shared in the work.

The audiometric survey scheme continued on the same pattern as before. Staff was increased by the appointment of 1 medical officer and 2 audiometricians. The acquisition of transistor apparatus was helpful, the compilation of a risk register was attempted and a class for aphasic children was established.

Dr. Rogen, Heart Consultant, remarked that fewer new cases of organic heart disease were now being seen at clinics for the first time.

In the treatment of orthopaedic cases, Dr. Parker noted that foot defects among older children were due to the wrong type and fitting of shoes—Oxford type was his recommendation. Mr. Guest, Orthopaedic Surgeon, comments on the shortage of occupational therapy staff at School for Spastics which is hindering the work.

The establishment of speech therapists was increased by 5. The introduction of tape recorders for the use of the speech therapists was a valuable aid. A number of stuttering Pakistanis and Indians were referred to the clinics.

Dental staffing was improved during the year, dental officers reaching the established number and 4 dental auxiliaries being appointed for the first time. A survey of 1,200 children revealed the need for health education and a campaign was launched early in 1964.

The number of free dinners provided at schools was increasing—25,483 on a typical day in November, 1963, compared with 20,730 and 19,652 on similar days in May, 1962, and June, 1961, respectively.

Deaths of school children were fewer than last year but there were more fatalities among boys in the 5-10 group due to violence of all kinds.

Children requiring special education were fewer but more were examined for mental defects: 35 were referred under Sec. 65 of the Education (Scotland) Act, 1962, to the Health and Welfare Department as unsuitable for education or training in a special school.

The usual "drives" in school were again successfully conducted, viz., B.C.G. Vaccination, Diphtheria Immunisation and Polio Vaccination.

An investigation of the connection between mumps and diabetes in childhood was undertaken with negative result.

Notes on medical supervision of the Remand Home and the results of investigation of allergy cases are provided by Dr. T. F. W. Gemmell.

GENERAL STATISTICS

Number of Schools at 31st December, 1963.

(a) Primary	207	
(b) Secondary	76	
(c) Schools for Handicapped Children	24	
(d) Approved Schools	2	
(e) Residential Schools	13	
(f) Nursery Schools	41	
(g) Hospital Schools	7	
(h) Agricultural Schools	1	
(i) Gardening Schools	1	
Total Schools Under	Ref (e	
Education Authority	372	
(i) Schools in receipt of grant and		
under medical inspection	9	
		381

There were also 11 Occupational Centres housed in ordinary schools.

The average number of children on the register of all schools was 177,944 and the average number in attendance during the year was 160,092 (90·1 per cent.).

SANITARY CONDITION OF SCHOOLS.

Section 19 (5) of the Education (Scotland) Act, 1962, states :-

"With a view to securing that the premises, furnishing and equipment of schools . . . under the management of an education authority are maintained in such condition as to contribute to the good health of the pupils, it shall be the duty of an education authority to cause their medical officers as part of their ordinary work from time to time to inspect and to report to them upon the said premises and equipment, and in making the said inspections, the medical officers shall have special regard to the lighting, heating and ventilation, and to the sanitary arrangements."

In accordance with the above instruction, School Medical Officers visit the various schools (including residential and nursery schools) in the course of the year and any defects found are reported to the appropriate Department for the necessary action to be taken. On the occasion of each visit to a school the Officer also takes the opportunity of interviewing the Head Teacher and class teachers for the purpose of discussing with them the health and well-being of their pupils and giving advice in particular cases.

During the year, 144 visits were paid to 139 schools for the purpose of general inspection. In the same period, 38 visits were made to 38 kitchens and dining halls where meals for school children were prepared and served.

ORGANISATION AND ADMINISTRATION.

A. SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT.

The operation of the scheme is controlled from the central office. A school clinic serves a group of schools in each district of the city. To each clinic and its attendant group of schools, one or two (depending on the size of the area) school medical officers are allocated for the purpose of medical inspection, treatment and supervision of the pupils who attend the schools in the specific area. Part-time consultants seconded by the Hospital Board organisation work at central clinics. Pupils in residential and approved schools are given emergency treatment by local medical officers and dentists, by arrangement with the various Executive Councils.

Details of the arrangements for medical inspection and supervision of children in the nursery schools will be found on page 141.

INSPECTION.

The scheme of inspection is conducted broadly on the lines suggested by the Scottish Home and Health Department in a circular letter issued at the beginning of August each year. The circular specifies the years of birth of the pupils to be medically inspected systematically during the ensuing school session (five age-groups). It also advises that provision should be made for the re-examination of pupils found defective at previous inspections, for the special examination of pupils suspected by teachers, parents, nurses or others to be suffering from defects, and for the general supervision of the health and cleanliness of pupils, through visitation of schools by school medical officers and school nurses, at frequent intervals. The systematic medical inspection of children attending nursery schools is also required and information on various other matters is requested from time to time.

Parents are given three days' notice on each occasion of the routine medical inspection of their children and are invited to attend thereat. School Medical Officers visit the schools for the purpose of conducting systematic examinations according to a fixed time-table based primarily on the estimated numbers due for examination as supplied previously by Head Teachers. A medical record card for each child is kept in the school and a "Hollerith" card is made out for statistical purposes.

The programme during the year was as follows :-

Routine Medical Inspection in ordinary schools was given to (1) Entrants—Infants (children in the Infant Department who had not previously been subject to detailed routine inspection); (2) 9 year-olds (but discontinued after June 1963); (3) 13 year-olds; (4) 16 year-olds; (5) 7 year-olds (testing of vision only by nurses); (6) 6 year-olds (testing of hearing by audiometricians).

"Non-Routine" Inspections were also undertaken, comprising pupils (a) outwith the above-mentioned groups presented at any inspection because of defect observed by teacher and (b) approaching "fixed dates" for leaving school who were presented for "Leaving Interview."

"Cases at Risk" (that is, pupils found at previous inspection to be suffering from disease or defect) were re-examined at intervals determined by the school medical officer.

In Schools for the Handicapped, routine medical inspection was also provided for physically and mentally handicapped pupils. Additional inspections for the purpose of re-assessment were also arranged at suitable intervals.

Other Inspections included: children for residential schooling, school camps and educational excursions, printers' apprentices, applicants under Byelaws, Remand Home children and adult employees.

Cleanliness Inspection by nurses and various "drives" in schools were undertaken—diphtheria/tetanus immunisation, poliomyelitis vaccination and B.C.G. vaccination, including Mantoux testing and X-raying.

TREATMENT.

Children found or suspected to have a defect are reported by school medical officers, nurses, teachers, attendance officers and others and, unless in emergency, such cases are summoned by letter, sent from the central office, to the local school clinic. Signed application by the parent is, however, necessary but treatment is provided free of charge.

A list of the school clinics and services given are as follows :-

CLINIC			Skin, Eye, Ear and other minor diseases	Refraction	Dental	X-ray (Skin Treatment)	Ultra-violet ray	Orthopaedic	Scabies Baths
80/90 Kinfauns Drive, W.5			1	1	2			1	
18 Plean Street, W.4	***		Î	_	1				
4 Sandy Road, W.1		***	1	1	1	1			
130 William Street C 2			i	1	1	1		-	
01 Donmark Street NO	***		1	1	2	1			_
Harda Dank Calant M. 1	***	***	1	1	1		1000	70	7
15 C11 C1 37 1	***		1	1	1		1	-	1
60 Avenuepark Street, N.W.	***	***	1	1	4	-	1	1	1
40 Grovepark Street, N.W.	***	***	1	1	1	_		1	-
5 Craiglockhart Street, E.3			1		1	_	-		-
74 Wellhouse Crescent, E.3	***	***	1	-	-	-	-	-	-
155 Crail Street E 1		***	1	1	_	-	-	-	-
155 Crail Street, E.1 23 Acorn Street, S.E.		***	1	1	2	-	-	-	-
till the state of			1	1	-	-	-	-	-
10 Redan Street, S.E		***	-	-	1	-	-	-	-
22 Arnprior Quadrant, S.5	***	***	1	1	-	-	-	-	-
20 Harriet Street, S.3	***		1	1	1	-	-	1	-
Calder Street School, S.2	***		-	-	1	-	-	-	-
26 Florence Street, C.5	***	***	1	1	2	-	1	1	1
Netherplace Road, S.W.3			1	1	1	-	-	-	-
74 Berryknowes Road, S.W.2			1	_	_	-	_	-	-
Fairfield School, S.W.1	***		-	-	1	-	-	-	-
St. Anthony's School, S.W.1	***	***	1	_	_	_	_	-	
29 Govan Road, S.W.1			1	1	1	_	_	_	_
				-				-	_

In addition to the above, children with speech defects are treated by qualified speech therapists at schools or clinics and maladjusted children are treated in Child Guidance Clinics. Orthopaedic treatment is carried out by qualified physiotherapists at the five centres and a staff of medical auxiliaries is attached to the Spastic Unit in Kelbourne School to give physiotherapy, occupational therapy and speech therapy to the pupils there. A staff of four audiometricians is centred at Florence Street Clinic, testing the hearing of pupils at schools and at the centre.

By arrangement with the hospitals, special hospital treatment (including operations for removal of tonsils and adenoids and X-ray facilities) is also provided free of charge and consultants for cardiac, ear (including defective hearing), orthopaedic, ophthalmic, skin and E.N.T. conditions and an anaesthetist for dental cases are seconded to attend the school clinics regularly. Hearing-aids are also provided by arrangement with a hearing-aid clinic and proprietary aids are purchased on the authority of the Corporation where the ordinary issue is unsuitable.

B. SYSTEM AND EXTENT OF DENTAL INSPECTION AND TREATMENT.

Decentralisation was completed by the end of the year, the clinics arranging appointments for treatment (including orthodontic) and for routine dental inspection without reference to the central office. Appointments for gas and dentures clinics continued to be made centrally.

Detailed statistics of the year's work are given in Table V, and the Chief Dental Officer's report appears on page 146.

C. SCHOOL NURSING ARRANGEMENTS.

During the Session, 16 Health Visitors lectured on health education to the older boys and girls in selected schools. In addition, Health Visitors gave lectures on child care in connection with the Duke of Edinburgh Award scheme, 450 girls subsequently receiving the Bronze and Silver awards. A further 40 girls were given instruction in everyday nursing which enabled them to qualify for the Gold Award. The assistance of 16 Health Visitors was also given to the Child Guidance Service for home visitation and case work and it was found necessary to pay evening visits to homes where both parents were working, or to contact both parents together to gain a better insight into conditions in the home as they affected the child. Extra-mural activities included talks to Parent-Teacher Groups and Guilds.

Summary of the work by Health Visitors during the year is as follows:—

Home visits—15,777 (15,220 cases seen). Periods (half-days) at clinics and schools—clinics, 15,456; medical inspection, 6,989; cleanliness inspection, 2,046; schools for the handicapped, 2,283;

health education, 493; nursery schools and occupational centres, 583; child guidance clinics, 212.

A special investigation into Burning and Scalding Accidents among children aged 5 to 10 years was undertaken by the School Health Visitors with the following results:—

Survey of Burns and Scalding Accidents, 1st January—31st December, 1963, as conducted by Health Visitors of the School Health Service.

		1	TABLE	E 1.			
	Nu	MBER	OF A	ACCIDE	NTS.		
				5-10 Boys	years Girls	10-15 Boys	years
Burns-							
Outdoor	 			32	2	15	_
Indoor	 			29	22	27	16
Scalds-							
Outdoor	 			4	2	3	2
Indoor	 			57	42	28	45

TABLE 2.

COMMON TYPE OF BURNING ACCIDENTS.

			5-10 Boys	years Girls	10-15 Boys	years Girls
Fireworks and bonfires			26	1	18	_
Fires (open or electric)			18	12	2	_
Laboratory accident at	school		_	_	3	_
Clothing catching fire			2	5	_	4
Faulty plugs			1	1	5	2
Sunburn			-	-	1	-
Cookers			4	3	4	2
Electric iron			2	1	-	5
Others (e.g. investigating tins, old cars, detona	empty p	etrol				
soda found on ground			8	1	9	3

TABLE 3.
RESIDUAL DISABILITIES.

		5-10 Boys	years Girls	10-15 Boys	years Girls
Burns— Clothing catching fire Burning paper	 ***	- 1		=	1
Scalds— Burst hot water bottle Boiling fat	 	1		_	1
Boiling tablet	 ***	-	=	=	1

TABLE 4.

Deaths-				
Clothing	caught	alight	(Child	re-
moved	guard)	***	***	***

TABLE 5.

BY SOCIAL CLASS.

Burns—				5-10 Boys	years Girls	10-15 Boys	years Girls
No father	 			3	2	7	5
Professional	 				_	_	_
Clerical	 			1	1	3	_
Skilled	 			16	6	10	3
Semi-skilled	 			26	8	13	3
Labourer	 			15	7	9	5
Scalds-							
No father	 			7	2	4	9
Professional	 				_	1	_
Clerical	 			-	1		3
Skilled	 		***	26	19	11	13
Semi-skilled	 	***	***	11	15	6	12
Labourer	 			17	7	9	10

TABLE 6.

ACCIDENT PRONENESS.

Children who have had previous accidents within last 2 years.

5-10	years	10-15	years
Boys	Girls	Boys	Girls
12	2	4	5

TABLE 7.

PERIOD OF YEAR ACCIDENT OCCURRED.

				5-10	years	10-15	years
				Boys	Girls	Boys	Girls
January				 1	1	2	2
February				 13	8	2	2
March	***	***		 9	5	13	3
April				 8	6	9	9
May				 8	6	4	6
June	***			 8	7	4	6
July	***		***	 4	3	7	8
August				 12	2	4	4
September			***	 17	4	5	5
October				 12	9	3	5
November				 19	8	17	5
December	***		***	 11	9	3	8

TABLE 8.

Housing of Parent or Guardian.

(Home Accidents Only).

					5-10	years	10-15	years
		Roo	ms		Boys	Girls	Boys	Girls
1					 2	2	8	6
2					 36	21	19	15
3					 29	15	18	15
4				+++	 16	22	10	15
5+	***				 3	3	_	8
Unabl	e to lo	cate			 14	10	6	6
	format		ailable		 1	_	-	1
	t notif				 3	_	1	1

HEALTH EDUCATION.

The following note has been supplied by Dr. M. P. Menzies, Assistant Principal Medical Officer:—

- "During the year health education has continued, as in previous years, an integral part of the day-to-day work of the Service.
- "In addition to this, in several of the clinics senior health visitors have experimented with a scheme of talks and discussions with waiting groups of parents during minor ailment or other clinics where such groups could be gathered.
- "Parents were given to understand that on subsequent visits, information on health matters would be given in this way, and discussion would take place on any subjects they wished to raise. Thus participation and interest were built up.
- "Since our Pilot Experiment of 1960-61, when we began teaching personal health within the school curriculum, the number of requests for these talks from head teachers of secondary schools has continued to increase.
- "The talks have been adapted and modified to suit the age groups and the academic skills of the young people. They are still largely directed to the teaching of the thirteen-fourteen year old in the lower stream of secondary education. However, in this year, visits have been made to several of the senior secondary classes towards the end of the academic year, when pressure of examinations was over and time could be given to health talks without interfering with the school curriculum.
- "In some schools we have returned to pupils now fourteen-fifteen years who were given the first group of talks a year previously, directing these further talks to their increasing maturity and the threshold of leaving school. As trained staff increased we were able once more to devote some time to classes for boys and in addition to health visitors undertaking these classes, two of the male medical officers gave talks to classes of boys. Shortage of medical staff has prevented extension in this field.
- "A request for talks was received from the headmaster of an approved school for boys and a health visitor gave a course of weekly talks at this school. During this year too, the scheme of talks was

extended to boys and girls at a school for mentally handicapped young people. These talks were given by a woman doctor.

"The purpose of this form of health education remained as in the original plan, to prepare young people to face, in the widest possible sense, the stresses and strains of adult life by teaching how to care for for their bodies and prepare for the change from school life to becoming a young adult.

"This year the number of health visitors teaching personal health has increased to twenty-five. Some of this number are engaged in teaching Child Care for the Bronze and Silver Awards of the Duke of Edinburgh Award Scheme and Everyday Nursing for the Gold Award.

"In addition, for the last three months we have had the services of seven married women doctors who have joined us for the sole purpose of assisting with this special form of health teaching. They have made themselves available on fixed days weekly, have had schools allocated to them and are also carrying out the course of weekly teaching/discussion sessions.

"For all of this we have had to build up a wider store of visual aids. We have now made and purchased a variety of flannelgraphs, many private firms have supplied us with posters and demonstration materials, and we have had films, both on loan from them and on hire. Some films we have been able to purchase. For these young people, adequate visual aids are of vital importance.

"An expansion of the health talks of particular interest to us has occurred within the last three months. Requests were received from head teachers of three primary schools for our health visitors to give talks to their senior classes. It has always been our view that certain aspects of our health teaching should begin before thirteen years of age and we hope that this idea may be adopted in other primary schools. This would permit some of the material now being taught to the older age groups to become merely revisionary and allow more time for deepening the content and giving a shorter series to the older age groups, and perhaps to cover a greater number of schools."

ORTHOPAEDIC AND POSTURAL DEFECTS

Mr. Guest, Orthopaedic Consultant, has supplied the following report regarding the work at the Orthopaedic Unit in Mearnskirk Hospital for the year ending 31st December, 1963.

"There are five established school orthopaedic clinics in the city and here several hundred children are kept under constant review by the Visiting Orthopaedic Consultant. These children suffer from such disabilities as spinal deformities, poliomyelitis, cerebral palsy and congenital deformities. Physiotherapy is given in the active stages of disability and post operatively and the provision of this service at the clinics ensures minimal loss of school attendance.

"The School for Spastics is still hindered by the shortage of staff in the therapy department but continues to do valuable work in the training and teaching of these badly handicapped children; over 40 of them are accommodated at the school.

"During the past year 174 children were admitted from the clinics or Spastic School to the Orthopaedic Unit at Mearnskirk Hospital.

"Details of the work during the year 1963 are shown below :-

Cases in l Number a	nospital or dmitted d	1.1.63 turing the	 year	 18 156
Number d	ismissed d	uring the	session	 174 159
Number i	n hospital	on 31.12	.63	 15

" Of the cases dismissed the causes of disability were :-

"Foot deformities, 103; (congenital 2, acquired 13, post poliomyelitis 65, spastic 23). Other conditions due to poliomyelitis, 3; torticollis, 8; muscle dystrophy, 18; correction of limb shortening, 14; cerebral palsy, 3; spinal deformities, 1; knock-knees, 1; miscellaneous, 8.

"Twenty children were treated by general physiotherapy or were admitted for investigation. The remainder were admitted for operative treatment as under:

"Manipulations, including tenotomy and wrenching, 49; elongation of tendo achilles, 23; tenotomy for torticollis, 8; tendon transplants, 18; stabilisations, 13; stapling operations, 14; osteotomy, 2; reconstructive operations on the hand, 2; miscellaneous, 10; total operations, 139.

"The average stay in hospital for these children was 34 days.

"The number on the waiting list for admission to Mearnskirk on 31.12.63 was 35."

Dr. James M. Parker, School Medical Officer, has provided the following report on orthopaedics as it concerns a School Medical Officer:—

"There are more foot defects to be found among children of a school leaving age than among school entrants. In most cases this increase is due to wrong type and fitting of shoes. It is these ill-fitting shoes of childhood that cause many adult foot deformities. When buying shoes the parent should consider some of the factors that go to make a shoe suitable for the growing foot of a child:—

"No substitute has yet been found to equal leather in shoemaking. It absorbs natural and toxic excretions from the foot and does not cause condensation.

"The correct shoe for a child is one which supports the tarsus and has a rigid shank. It should fit closely round the heel and instep and have ample room for toes. The length should be half-an-inch beyond the longest toe which may not necessarily be the great one. Lacing is much to be preferred to buckles. When laced the shoe should corset the instep and hold foot firmly in the heel seat yet still leave a gap between uppers. If a new shoe can be laced to bring the eyelets together then the ankle fitting is too large.

"The ideal type of shoe for a child is the Oxford as it combines all the above factors.

"Do not let the child dictate the fashion of his shoes. In truth it is shoes, not clothes, that 'make the man.'"

SPECIAL CARDIAC CASES

Dr. Rogen, the Heart Specialist from Stobhill Hospital, again attended school clinics for the purpose of examining school children specially referred by School Medical Officers and recommending any necessary treatment. During the Session, he saw the following cases:—

New	Cases	Re-exa	minations	To	otals
Boys	Girls	Boys	Girls	Boys	Girls
75	64	93	72	168	136

In reviewing the year's work, Dr. Rogen reports:-

"An interesting change is occurring in the type of patient seen at the school cardiac clinics, no doubt related to the fact that the general practitioner is now much more aware of the benefits which can be afforded to children with heart disease; many are being referred directly to hospital for advice before they reach school age. As a result there are not as many new cases of organic heart disease being picked up for the first at the school clinics.

"While this means that less interesting cases are being found by us it is of course a good thing that children with organic heart disease are being diagnosed and dealt with at an earlier age than was the case, even a few years ago.

"I think this is the only point that I would make indicating any change in the pattern of work which continues along the lines adopted over the past sixteen years."

INVESTIGATION OF ALLERGIC CONDITIONS

Dr. T. W. F. Gemmell, School Medical Officer, provided the following note:—

"An allergy clinic for all Glasgow school children is held in Crail Street Clinic, Glasgow, E.1.

"All forms of allergic conditions are investigated including asthma, hay fever and urticaria. Where skin test reactions show definite positive results treatment can be given by dietary instructions, or by a course of antihistamine preparations or by a series of specific desensitising injections. These are carried out either at the child's local clinic or in co-operation with the family doctor.

"The results generally are fairly good but the earlier investigation and treatment are carried out the better are the prospects of alleviation or cure."

AUDIOMETRIC SURVEYS

The following report was prepared by Dr. Margaret Dunn, School Medical Officer:—

"During the past session the work of the Audiometric Survey Unit has followed in essence the already established pattern.

"The personnel has been increased by the inclusion in the team of a medical officer already experienced in ear, nose and throat work. The consultant otologist, Mr. Bailie, attached to the Unit for the past seven years and whose advice has always been of inestimable value, was succeeded by Mr. Bain, who is equally interested in this field. One

audiometrician resigned and two were added to the establishment and incorporated into the Ear, Nose and Throat Hospital training scheme for audiometricians. With the addition of these members to the staff, the school nurses trained in Sweep Testing were not deployed latterly, but due credit must be given for their great value and service to the Unit at a time when the manpower situation was at a seriously low level. Health visitors in all areas have visited many children to pursue the policies of the Unit.

"Transistorised audiometers have been acquired this year and have proved very beneficial. So far they have been free from minor or major defects, being initially checked by the Regional Physics Department. Transport or electrical preparation were unnecessary and freedom from complicated schoolroom arrangements were a good feature.

"The clinic itself was painted on the outside, presenting a much sprucer appearance, though losing some of its sound baffling with the razing of the surrounding buildings in the redevelopment of the area. Nevertheless, estimation of the acoustic quality of the consulting room done by Miss Knox of the Regional Physics Department showed conditions to be very satisfactory under the headings, octave band analysis of background noise in the room, speech interference level, and sound pressure level.

"Student audiometricians from the Ear, Nose and Throat Hospital were again given practical help in the Unit or in schools, and the work was demonstrated to doctors taking the D.C.H. and D.P.H. courses. A talk given to the Society for the Study of Infectious Disease has led to closer co-operation between hospital medical officers and the Unit with respect to children coming into the Risk Group category.

"Co-operation between the Audiology Unit and Speech Reading Unit with the Audiometric Survey has been excellent, as before, many problems being resolved at informal level, with case consultations a regular and important feature of especial importance in the pre-school age-group. Child Guidance and Speech Therapy Departments feature prominently as regards excellent co-operative action and liaison has been established with the recently formed Maternity and Child Welfare Assessment Centre.

"A point of less happy note is the hold-up in the tonsil and adenoid operations in some parts of the city. In addition to delaying production of accurate data it is a flaw in the service offered to aid children's hearing.

"The following table prepared from two previous surveys shows collation of totals and details of the provision of hearing aids in a group of children investigated by reason of age alone, and in whom deafness was not suspected or was not being investigated.

DETAI	LS OF TWO SURVE	YS	
	Survey X 1958-59 Children born 1949 Routine	Childre	XI 1959-60 n born 1950 Non-Routine
No. Sweep Tested in School	14,957	15,141	275
No. failed Sweep Test	1,592	1,425	120
No. examined by S.M.O	1 000	1,0	
No. Threshold Tested Results—	0.00	883	64
Grade Normal	339	264	15
Grade I	600	601	45
Grade I/IIa	10	10	4
Hearing Aid required	0	8	4 0
No. seen by Otologist	97	140	20

"This year an attempt was made to prepare an at Risk Register from details initially based on information gained at the 5 year-old school medical examination. The results are not complete and another attempt will be made next year to evaluate efficacy of this technique and whether this approach justifies the work necessitated in such a compilation.

"The establishment of a class by the Education Authority in co-operation with School Health Service for a group of non-deaf children with speech difficulties, varying from aphasics to those with retarded speech development was made in February this year. These children were all reviewed in the clinic as regards diagnosis disposal and suitability for this purpose. More of these cases are coming to notice and the future of this new venture will be watched with much interest.

"In viewing the broad picture of the work done this year in the Unit, it is obvious that the acoustic climate has to be adapted to each child, and individual decision has to be made as to suitable policy in this respect especially when consideration is being given to a partially deaf child's placement in an ordinary school. As well as the hearing defect, the personality of the child must be considered and its adjustment and adaptation to its handicap and the personalities, understanding and attitude of the parents determined. The language barrier imposed by deafness slows the rate of educational progress, and if the word image is poorly developed there will eventually be isolation from the

environment. With these points in mind it is clear that early detection of hearing loss is of paramount importance.

"Many ideas worthy of investigation appear in dealing with children with hearing defects, and it is hoped to pursue some research projects next session."

A summary of the work done during the year, in connection with Survey No. XIV, is as follows:—

SURVEY No. XIV (CHILDREN BORN	IN 1956		
	Routine	Cases at risk	Total
No. of schools visited	_	_	227
No. "sweep" tested in schools	16,881	63	16,944
No. failed in "sweep" test	1,568		1,607
No. examined by School Medical Officer	Routine	+Risk	1,377
No. recommended for Threshold test by School			0.0000000
Medical Officer	Routine	+Risk	1,377
No. Threshold tested	876	39	915
No. awaiting Threshold test (including 34 for tonsil/		100	
adenoid operation)	Routine	+ Risk	137
No. awaiting treatment before having Threshold test	Routine	+Risk	34
No. did not attend for Threshold test	Routine	+ Risk	291
No. awaiting retest (including 13 for tonsil/adenoid			
operation)	Routine	+ Risk	103
No. awaiting result of Threshold test		+ Risk	5
No. referred to Consulting Aurist	51		59
No. classified Grade I	191	6	197
No. classified Normal	437	8	445

Children at risk within Survey XIV (apart from earache and otitis cases) to the number of 71 were classified as follows:—

Grade 1, 14; Normal, 49; Referred to Consulting Aurist, 8.

	Risk within Survey 14	Hearing Grade	Disposal			
B: B:	Congenital: Toni Fand Congenital: Harelip a Perinatal or prenatal One of quadruplets	nd cle	eft pala	te	2a 1/2a 1/2a 1/2a	Hearing Aid Removed to Germany Front seat in school Speech Reading tuition Review 1 year
G : G :	Premature Premature One of twins history mastoiditis				1 1/2a 1/2a 1	Awaiting Otologist Awaiting Otologist Awaiting Otologist Awaiting Otologist

Hearing Aids provided in Survey 14 to Date.

Boy	 1	Risk: Congenital: Toni Fanconi Syndrome
Girl	 1	No History
Total	 2	

Distribution of children in Special Schools for the Deaf or Partially Hearing is as follows:—

(a) According to disability-

		tially		verely leaf	Т	otal
	Boys	Girls	Boys	Girls	Boys	Girls
Glasgow children	 37	32	40	29	77 .	61
Outside Glasgow	 7	4	49	33	56	37
	44	36	89	62	133	98
	_	-	-	-	Securities.	-

(b) According to school-

(0)	Gla	ldren		tside	Т	otal
	Boys	Girls	Boys	Girls	Boys	Girls
Parkhouse Nursery	16	6	-	_	16	6
Parkhouse	21	15	_	-	21	15
Glasgow School for the						
Deaf	18	14	21	23	29	37
St. Vincent's (Tollcross)	22	26	35	14	57	40
	77	61	56	37	133	98
			-	the same of	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, whic	Section 1

MEDICAL SUPERVISION OF REMAND HOMES.

Dr. T. W. F. Gemmell, School Medical Officer, supplied the following note:—

"The School Health Service exercises medical supervision over the Larchgrove Remand Home for boys and Beechwood Remand Home for girls. There seems to be no close season for juvenile delinquency. Larchgrove has been continually overcrowded for a considerable time. During the year a total of 2,350 boys were admitted, making an average of almost 50 per week. This showed an increase of fully 200 on the previous year and the numbers continue to rise. This increase is not peculiar to Glasgow but is general throughout the country. The number of girls in Beechwood is very much smaller but there is still a steady flow.

"The general physical health of most of the delinquents is reasonably satisfactory though many are below average physique and the vast majority are well below average intelligence."

PREVENTION OF TUBERCULOSIS.

B.C.G. VACCINATION.

The annual campaign in schools was conducted in November and December, 1963, and the results are given in the section on Tuberculosis.

MASS RADIOGRAPHY.

The School Health Service continued to arrange with the Mass Radiography Centre, Elmbank Street, for the X-raying of pupils attending Glasgow Schools.

Pupils to the number of 2,193 (1,097 boys and 1,096 girls) found to be positive to the Mantoux test in the Campaign were examined during the year. In addition 1,849 (960 boys and 889 girls) positive reactors in the previous year were re-examined.

Of those X-rayed for the first time, 5 boys (4.54 per 1,000) and 7 girls (6.38 per 1,000), a total of 12 children (5.46 per 1,000) were found to have active pulmonary tuberculosis. Of the 1,849 children re-X-rayed, 1 boy (1.04 per 1,000) and 1 girl (1.12 per 1,000) were found to have active lesions. Inactive pulmonary tuberculosis was recorded in 6.84 per 1,000 of children X-rayed for the first time and in 2.7 of those re-examined. Healed primary cases were found in 82.53 per 1,000 of first examinations and in 95.72 of re-examinations. The rates are, of course, per 1,000 of children with positive Mantoux.

SURVEY OF FURTHER EDUCATION COLLEGES.

In the period November/December, 1963, the Mass Radiography Service, Elmbank Street, X-rayed 4,079 students (2,962 males and 1,117 females) attending the various colleges. 89 (73 males and 16 females) were recalled for large film.

The resu	lts were as f	follows :-
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	Males	Females	Totals
Active and? Active Pulmonary Tuberculosis	4	_	4
Inactive and ? Inactive Pulmonary			0
Tuberculosis	6		6
Known Pulmonary Tuberculosis	3	-	3
? Pneumonic condition	1	1	2
Cardiac enlargement	4	1	5
Acquired heart condition	-	1	1
	10		- 21
	18	0	21

The recorded incidence of active pulmonary tuberculosis (0.9 per thousand) was satisfactorily low.

TEACHERS' SICK PAY REGULATIONS.

During the year ended 31st December, 1963, teachers to the number of 3,137 (1,471 males and 1,666 females) were X-rayed.

The numbers recalled for large film (including reports from Chest Physicians) were 50 men and 46 women, the diagnoses being as shown:—

	Males	Females
Active Pulmonary Tuberculosis	1	1
Inactive Pulmonary Tuberculosis (including calcified or fibrotic conditions)	19	16
Inactive Pulmonary Tuberculosis (pleural thicken- ing)	6	4
Cardiac Hypertrophy	1	1
No apparent defect	24	25
	51	47

Examinations were fewer in the period as the result of the Education Committee's decision in November, 1962, to modify the scheme. X-ray examinations of teachers were now limited to one every second year except for "cases at risk" as recommended by the Medical Officer of Health.

SPECIAL SCHOOLS AND CLASSES AND RESIDENTIAL SCHOOLS.

(a) HANDICAPPED CHILDREN.

Educational provision was made as follows in schools for handicapped children under the management of the Corporation :—

- Mentally handicapped—17 Day Schools, 1 Residential School and 11 Occupational Centres.
- (2) Physically handicapped—12 Day Schools, 7 Hospital Schools and a Scheme of Home Tuition. (One day school made provision for spastic children and aphasic children).
- (3) Defective vision—1 Day/Boarding School for blind children and 1 Day School for the partially sighted. The former serves the whole of Scotland and Northern Ireland and accommodates Roman Catholic children. (Protestant blind children attend the Royal Blind School, Edinburgh).
- (4) Defective hearing—1 Nursery/Infant Day School, 1 Day School and 1 Day/Boarding School for the partially deaf and 2 Day/Boarding Schools for the deaf. In addition, teachers from the Speech Reading Unit visited ordinary schools to give speech-reading instruction and auditory training to pupils not sufficiently deaf to require education by deaf methods. (Two teachers are also allocated to the Audiology Unit administered by Health and Welfare Department (Maternity and Child Welfare) where the hearing of young children under school age is assessed.)

At 30th June, 1963, the number of children receiving special educational treatment in special schools administered by the Corporation was as given below:—

Physically handicapped children, 339 (including 42 in school for spastics); children with hearing defects, 242; children with defects of vision, 88; mentally handicapped (educable) children, 2,509; mentally handicapped (trainable) children, 459; total, 3,637. This total compared with 3,761 in 1961 and 3,715 in 1962.

Hospital Schools.—The following is a list of the Hospital Schools with the number of pupils each receiving tuition at 30th June, 1963.

Drumchapel Home (32); Lenzie Home (24); Mearnskirk Hospital (70); Victoria Auxiliary Infirmary, Philipshill (19); Royal Hospital for Sick Children (77); Stobhill Hospital (89); and Strathblane Home (28).

HOME TUITION SCHEME.

At 31st December, 1963, the number of children participating in the scheme was 38 and the main causes of incapacity were :—

Spina bifida, 7; muscular dystrophy, 3; heart diseases, 2; pulmonary conditions, 5; bladder defect, 3; orthopaedic conditions, 3; miscellaneous, 15.

EXAMINATION AND AFTER-CARE OF MENTALLY HANDICAPPED CHILDREN.

The number of children specially examined by School Medical Officers during the year regarding mental defects was as follows:—

	Boys	1963 Girls	Totals	1962 Totals	1961 Totals
First Examinations	 399	292	691	517	386
Re-examinations	 1,068	717	1,785	1,509	1,578
	1,467	1,009	2,476	2,026	1,964

Provision for After-Care in terms of the National Health Service (Scotland) Act, 1947, was continued throughout the year by the Health and Welfare Department.

In addition to the foregoing provision, Glasgow children in need of specialised care and attention were accommodated and educated at the following Centres not under the management of the Corporation:—

Biggart Memorial Home, Prestwick-40 physically handicapped children requiring nursing care.

The Mary Hare Grammar School, Newbury, Berks.—1 deaf girl suitable for a course leading to the Certificate of Education.

Coltness House, Wishaw-4 severely physically handicapped boys.

Eastpark Homes, Glasgow and Largs-43 severely physically handicapped children requiring long-term nursing care.

Scotscraig School, Paisley—2 spastic girls requiring residential education.

Stanmore House, Lanark-2 spastic boys requiring residential training.

The Colony for Epileptics, Bridge of Weir-10 Protestant children suffering from serious epilepsy.

The Royal Blind School, Edinburgh-28 Protestant blind children.

The Royal Scottish National Institution, Larbert—9 mentally handicapped boys and girls (Protestant).

- St. Charles' Certified Institution, Carstairs—24 Roman Catholic mentally handicapped children.
- St. Joseph's Certified Institution, Rosewell—1 Roman Catholic mentally handicapped child with severe physical handicap.

Waverley Park Certified Institution, Kirkintilloch—14 Protestant mentally handicapped girls.

Birkwood Certified Institution, Lesmahagow—14 Protestant mentally handicapped children.

Broadfield Hospital, Port Glasgow-1 Roman Catholic mentally handicapped girl.

Caldwell House Certified Institution, Uplawmoor—2 Protestant mentally handicapped children.

During the year, 35 children were referred, under Section 65 of the Education (Scotland) Act, 1962, to the Health and Welfare Department as unsuitable for education or training in a special school.

(b) MALADJUSTED CHILDREN.

CHILD GUIDANCE.

The following report was supplied by Miss C. M. McCallum, Principal Educational Psychologist.

"The Child Guidance Service during the year dealt with a total of 5,493 pupils either in Child Guidance Clinics or in Schools: 39,281 attendances were made at clinic, 5,656 visits were paid to schools and 2,215 visits to homes of children. As well as maladjusted children, there were 1,156 cases for ascertainment of mental handicap and examinations of High School entrants and 60 children examined or tested under research projects in co-operation with educational, medical and University organisations.

"Of all children referred to clinics, 3,200 came directly from the schools and 1,273 from medical sources. The remainder were referred by other statutory or voluntary organisations or directly by the parents themselves.

"Among the maladjusted children, the symptoms of highest incidence were:—enuresis and encopresis, 815; psycho-somatic illness, 429; temper and tantrums and unruliness, 431; shyness, inhibition and avoidance reactions, 456; sleeping and feeding difficulties, 363; aggression, violence and defiance of authority, 500; theft, 331; weepiness and dependence, 292.

"Further information can be found in the report on Child Guidance Service issued annually by the Education Department."

(c) RESIDENTIAL SCHOOLS.

The Centres outwith the City are listed below along with the accommodation available for pupils. Periods of residence varied according to the needs of the individual child and averaged four weeks for the normal child, four to eight weeks for convalescents and two weeks for nursery children.

(i) Normal
Achnamara, Lochgilphead ... 48 Protestant boys and girls
(12-15 years).

Dalguise, near Dunkeld ... 48 Roman Catholic boys and girls
(Primary V, VI and VII).

Galloway, Wigtown 112 Protestant boys and girls
(Primary V, VI and VII).

(ii) CONVALESCENT		
Agnes Patrick/Stevenson, As	cog	58 Roman Catholic boys and girls (8-15 years).
Caol Ruadh, Colintraive		36 Protestant boys (8-15 years).
Castle Toward, by Dunoon		100 Protestant boys and girls (8-15 years).
Craig, Kilmarnock		56 Roman Catholic boys (5-12 years).
Hillfoot, Bearsden		45 Protestant mentally handi- capped children (8-14 years).
Lumsden, Maybole		29 Roman Catholic girls (5-12 years).
Seafield, Ardrossan		65 Protestant boys (5-12 years).
South Park, Ascog		28 Protestant girls (5-15 years).
Fornethy, near Alyth		74 Protestant girls (8-12 years).
(iii) NURSERY Southannan, Fairlie		36 Protestant and Roman Catholic boys and girls (2-5 years).
(iv) Homecraft Nerston, near East Kilbride		20 Protestant and Roman Catholic
		girls (14-15 years.)

ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN.

(a) Administration and Nature of Meals.

In November, 1963, there were 106 kitchens preparing meals for school children. In addition, one kitchen supplied Kosher meals to Jewish children. On an average day in November, 1963 (Friday, 8th November), the total number of dinners served was 74,901 of which 25,483 were supplied free.

Dinners only were supplied to pupils of ordinary schools and schools for handicapped children. In the Nursery Schools, dinners and teas were served, while a Health and Welfare Day Nursery received breakfasts, dinner and teas.

The meals were served in 407 dining rooms, 373 of which were on school premises, the remainder being in church and other halls.

(b) NUMBER AND COST OF MEALS.

The number of dinners prepared in kitchens during the year ended 31st May, 1963, was 17,388,647.

Weekly tickets were purchased by pupils requiring dinners in schools at the following prices:—

For 5 meals per week—4s. 9d. for the first child of a family, 4s. 4d. for the second, and 3s. 11d. for the third and subsequent children; equivalent prices for 6 dinners were 5s. 7d., 5s. 2d., and 4s. 9d. Remission rates of 3s. 11d., 3s., 2s., or 1s. (based on family income) were charged for a ticket valid for 6 dinners per week, the price being the same for each member of the family.

In schools for handicapped children, the prices were 1s. 10d. and 2s. 1d. for 5 and 6 dinners respectively, or at remission for 6 dinners of 2s. and 1s.

On Saturdays and holidays, meals were supplied to children entitled to free meals and to children who held tickets purchased at partial remission rates. In addition to this, during holidays only, meals were supplied to children holding purchased tickets at normal prices and whose parents or guardians were unable to make suitable arrangements to provide a midday meal, thereby avoiding hardship to the children.

(c) FOOTWEAR AND CLOTHING.

During the year 1st January to 31st December, 1963, 2,349 children were provided with footwear and clothing as compared with 1,412 during the previous twelve months. The undertaking given by the National Assistance Board to accept responsibility for the clothing needs of children of their dependants continued satisfactorily.

(d) MILK SUPPLIED TO SCHOOL CHILDREN.

All milk supplied to schools under the Milk in Schools Scheme was Tuberculin Tested (Pasteurised).

The total number of milk rations during the year ended 31st December, 1963, was 36,119,746. The most recent census figures

showed that 96.53 per cent. of the children present in school on a particular day in September, 1963, were taking school milk compared with 96.10 per cent. in September, 1962.

Food inspectors of the Department took 151 samples of milk for examination and of that number, 1 failed to pass the coliform test. The average composition of samples was satisfactory at 3.71 per cent. milk fat and 8.84 per cent. non-fatty solids. Of 44 samples supplied for biological examination as to the presence of tubercle, all were found to be negative.

ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

Mr. W. Tinto, Superintendent of Physical Training, supplied the following note:—

"The provision of staff to cover the needs of physical education in the secondary schools becomes increasingly difficult and the extension of visits by assistant members of staff to the primary schools is almost impossible. At the beginning of the session, however, all but a few schools had sufficient staff to implement a full programme of physical education, and the loyalty and enthusiasm of all members of staff during school hours, and the interest of many carried beyond the confines of the school into playing field and outdoor activities have maintained a high standard of health and a healthy interest in sport amongst our Glasgow pupils.

"Courses conducted by the supervisory staff for teachers in the primary school covering the whole range of the Primary syllabus from Infants to Seniors were well attended in three areas of the city. The Kelvin Frame now installed in more than 100 primary schools has provided, in the hands of many enthusiastic teachers, an excellent medium for exercise and skill on the part of the primary pupils.

"A considerable expansion in accommodation and facilities has taken place. Apart from the new schools which have been opened, the new pavilions now in use at Nethercraigs and Colston and the reconstruction of Scotstoun are ample evidence of the efforts of the Committee to provide facilities which match up to the requirements of modern teaching methods and which stimulate staff and pupils to higher endeavour.

"The latest addition to our swimming pools in St. Margaret Mary's Secondary School is a tremendous asset in the Castlemilk area, where it is already helping to meet the drastic need for swimming facilities in this new housing area for both day school pupils and evening classes."

NURSERY SCHOOLS.

Dr. Menzies provided the following note:-

"The regime of a visit to each nursery school by the school medical officer and health visitor together at four weekly intervals has continued. Routine examination of the children was carried out, complaints investigated and arrangements made to treat a child where necessary.

"The nursery school child has available all the range of clinic treatment which may be required, and full use has been made of this service. Any suspected loss of hearing has been investigated, eye-sight is tested as a routine by the 'E' test, children refracted and glasses provided where necessary.

"Health visitors visit the nursery schools during the intervening weeks and nursery school teachers themselves have established good relations with the staff of the school clinics in their districts so that children who require to visit a clinic may do so without fear.

"Attendance at the nursery schools has always been a prerogative of the women medical officers of the staff, on occasion necessitating quite a large amount of travelling by the woman medical officer to cover the requisite number of nursery schools. This arrangement meant that the well-known doctor of the nursery schools was not the one seen by the child who might have to attend the local clinic. The doctor at the clinic could well be an unknown male.

"With the introduction last year of the 'parish system', in which each medical officer worked in a district based on his or her clinic, looking after all educational establishments in the district, it was decided to terminate the former arrangement of women doctors only visiting nursery schools and to allow the male medical officers to look after the nursery schools of their district.

"This has proved very satisfactory. A child knowing the doctor during nursery school years, transfers to infant school and greets the doctor as a friend at the first routine inspection there.

"The usual minor infections took place but there was no infection of any moment apart from the continuous reports of dysentery from one or other of the schools. These outbreaks never reached any magnitude usually not more than four/five children at a time showing positive stools, but the amount of anxiety and work entailed both by the nursery school staff and the city laboratory is colossal. Wherever suspicion is aroused of a child's being infected, a specimen is sent to the laboratory. Where a positive report is given all children and staff are tested, some may be symptom free though infected; three negative results are required before freedom from infection is declared. Sanitary inspectors and divisional medical officers are all involved in tracing adult contacts and ensuring that the infection is quickly limited.

"Children proceeding to Southannan, the Residential School at Fairlie, have been examined throughout the year. No outbreak of infection has been recorded there this year.

"During the year, Woodlands Nursery School for Deaf Children has moved to be part of the school for older children at Parkhouse, and a new class, the Aphasia Class, with a group of pre-school children in it, has been set up in a part of Kelbourne School for Spastic Children.

"The Aphasia Class is for children who have been found not to be deaf but who do not speak and the class has been initiated in an attempt to train and teach these children."

At the end of December, 1963, the Education Department was responsible for the administration of 46 Nursery Schools and Classes having places for 2,059 children and of Southannan Residential Nursery School, Fairlie, and Dunclutha Nursery School, Kirn, where 36 and 14 children respectively were accommodated.

During the year ended 31st December, 1963, children in the nursery schools to the number of 1,336 (693 boys and 643 girls) were subjected to "routine inspection." 2,124 were medically examined at the request

of teachers, and 118 were re-inspected. The results of these examinations are detailed below.

ROUTINE INSPECTION.

(i) Numbers and Percentages of Children Suffering from Defects (see Table IIa for full details of headings).

Nature of defects found	No.	Boys	Girls	Г	otals
Uncleanliness of head (nits)		4	11	15	(1.1%)
Skin conditions of head or body		31	23	54	(4.0%)
Defective nutrition		5	7	12	(0.9%)
Mouth and teeth unhealthy		2	_	2	(0.1%)
Naso-pharyngeal conditions		84	85	169	(12.6%)
Eye diseases (including strabismus)		13	23	36	(2.7%)
Defective vision (for refraction)		2	7	9	(0.7%)
Ear disease (including defective hearing)		7	5	12	(0.9%)
Defective speech		11	3	14	(1.0%)
Mental and nervous conditions		5	1	6	(0.4%)
Defects of circulatory system		24	17	41	(3.0%)
Pulmonary conditions		25	27	52	(3.9%)
Deformities		55	44	99	(7.4%)
Other diseases or defects		11	13	24	(1.8%)

(ii) Classification of Children according to Remediability of Major Defects Found in the Individual Child (see Table III for full details of headings).

Classificat	ion		Boys	Girls		
Free from defects		 	487	391	878	(65.7%)
Defects of vision or oral	sepsis	 	2	3	5	(0.4%)
Temporary ailments		 	129	132	261	(19.5%)
"Curable" defects		 	45	67	112	(8.4%)
"Improvable" defects		 	30	50	80	(6.0%)
Defects "not improvable	**	 	-	-	-	-
Totals		 	693	643	1,336(100-0%)

(iii) ADDITIONAL INFORMATION.

Parents were notified of defects found in 181 instances, 40 (2.9 per cent.) of these being due to clothing, cleanliness, or minor dental defects, 141 (10.5 per cent) being in respect of other defects. School Medical Officers also noted 88 cases (6.6 per cent.) for re-inspection as a result of defects observed in clothing or cleanliness, or for minor dental defects, and 354 children (26.5 per cent.) having other defects. "Sound teeth" was recorded in 1,029 cases (77.0 per cent.), 1,102 pupils (82.5 per cent.) were recorded as having had complete diphtheria immunisation and 840 (62.9 per cent.) as having been successfully vaccinated or re-vaccinated against smallpox.

INSPECTION OF NON-ROUTINE CASES.

Children to the number of 2,124 were presented for inspection on account of defects observed or suspected by teachers. The individual results were as follows:—

Head infestation, 6; skin conditions, 141; eye conditions, 415; ear, nose and throat defects, 168; "general" defects, 1,177; defective teeth, 24; no apparent disease, 119; and other causes, 74.

RE-INSPECTION OF "ABNORMAL" CASES.

118 pupils were re-inspected during the Session.

SPEECH THERAPY.

The following report was prepared by Miss McKirdy, Senior Speech Therapist.

"During the past Session a start has been made in introducing tape recorders to clinics for the use of speech therapists. A high proportion of children attending for speech therapy require ear training for defective sounds and tape recorders provide the ideal way of dealing with this part of treatment. When a stutterer has achieved a certain amount of fluency by controlling his stutter, to hear his improved speech pattern on the tape recorder helps the child psychologically and builds up his confidence in his speech.

"An increasing number of Pakistani and Indian boys were referred to clinic on account of a stutter. Examination showed that these boys, whose command of English was poor, were developing a repetitive hesitancy on initiating speech in a search for words in the English language. Treatment here had to take the form of vocabulary building and increasing their command of English. No direct approach to controlling their stutter was attempted. As their command of English improved and they achieved more confidence in the language the initial hesitancies began to decrease.

"A group of Junior Secondary boys attended Florence Street Clinic all being re-referred on account of stutters. Intellectually these boys were incapable of learning to control their speech by recognised methods but some improvement was achieved by weekly attendance at clinic and the fact that someone was interested in them and trying to help them. Prognosis with such cases is poor and on leaving school their speech will no doubt return to its former pattern.

"Contact has been kept in Florence Street Clinic with Dr. Dunn in order to refer and check on children referred by speech therapists for E.N.T. and specialist examination and also on children suspected of having a hearing loss.

"Speech therapy has started now for the group of aphasic children in Kelbourne School. It is hoped to provide therapy daily for these children when more staff becomes available. Again there is close liaison with Dr. Dunn in dealing with this group of children."

The work of the speech therapists during the year is summarised as follows:—

as follows:—					
	Advice only	Cases treated	No. of treat- ments	Home visits	School visits
Children attending—					
Schools for Physically capped	9	82	838	22	All seen in school
Schools for Mentally capped	23	297	3,482	138	All seen in school
Spastic School	 -	25	1,178	33	All seen in school
Ordinary School	 496	1,641	15,661	182	494
Pre-School	 40	197	1,775	-	31 (to Kelbourne Group)

In the autumn, the establishment of speech therapists was increased from 11 to 16. By the end of the year it had not been possible to obtain the additional staff but it was hoped that this would be rectified before the commencement of the new school year.

MUMPS/DIABETES SURVEY.

In the course of a survey during the year, the possible connection between mumps and diabetes in childhood was investigated. School Attendance Officers supplied names and addresses of pupils absent from school due to mumps. These children were seen by School Health Service staff and samples of urine were tested for indications of sugar by means of the Clinistix test.

Of the total seen only three were shown as positive by the test and they were referred to the Royal Hospital for Sick Children for thorough investigation as out-patients. Eventually all three cases were reported as negative.

The total numbers seen by School Health Service staff during the survey were :—

Total number of mumps cases reported during period of investi-	
gation	1,387
Total number tested shortly after child returned to school (i.e.,	
within a period of three months of return)	1,106
Total number re-tested 6 months after illness	688

DENTAL INSPECTION AND TREATMENT.

Mr. Martyn L. H. Davies, Chief Dental Officer, reports as follows:—

"It is with regret that we have to record the sudden death of Mr. David MacLaren, the Chief Dental Officer.

"In August for the first time in many years the number of our Dental Officers reached its established strength. In addition, four Dental Auxiliaries joined our Staff under a pilot scheme of the Scottish Home and Health Department. These auxiliaries, who have proved themselves to be highly satisfactory, divide their time between simple clinical work carried out under supervision and dental health education.

"In November, a survey was carried out to assess the dental condition and habits of 1,200 children aged 5, 8 and 14 years.

The average 5 year-old has 5 teeth decayed, extracted or filled, 9 per cent. being caries free.

The average 8 year-old has 9 teeth decayed, extracted or filled, 2 per cent. being caries free.

The average 14 year-old has 11 teeth decayed, extracted or filled, 0.34 per cent. being caries free.

"From these figures it is apparent that an intensive dental health education is urgently required. A dental Health Campaign directed at primary school children was undertaken early in 1964 and an account will be included in the next report.

STATISTICAL APPENDIX.

TABLE I-TOTAL NUMBER OF CHILDREN EXAMINED.

(a) SYSTEMATIC EXAMINATIONS.

Nursery						1,336
Entrants			***		***	18,734
Second Age Group						6,420
Third Age Group						14,696
Fourth Age Group		***	***			2,154
Others						1,321
Special Schools and	Classes-	_				
physically handicar	oped		***	***		191
mentally handicapp	ped					546

(b) OTHER EXAMINATIONS.

Nursery (special and re-inspection cas	es)	2	2,242
Vision testing (7 year-olds)		15	5,903
Special Cases (non-routines)		24	1,561
Re-inspections (cases "at risk")		29	,573
Leaving Interviews		8	3,133
Examinations regarding mental defect	***	2	2,226
Discharges in Special Schools and Cla	sses		89
Audiometric Survey (by audiometricia		22	2,724
Applicants for Licences under Byelaw		***	385
Adult Employees of Corporation		2	2,145
Holidays Abroad, Educational Excurs	ions, Camps	15	5,384
Residential School Examinations .		8	3,257
Pre-Vocational Students			184
Remand Home Examinations		(6,541
Cleanliness Inspections (by nurses)		136	6,016

TABLE II—AVERAGE MEASUREMENTS OF SCHOOL CHILDREN DURING YEAR ENDED 31st DECEMBER, 1963.

		Boys		Girls	
		Height	Weight	Height	Weight
5 years 4 months Number examined		(ins.) 9,098	(lbs.)	(ins.) 8,777	(lbs.)
		42.59	42.75	42.28	41.18
		2,266 51·70	64.32	2,713 51·41	63-41
		5,974 60·12	96-70	6,548 60·36	101-81
37	hs	5·54 1,064		5·57 668	100.50
Average measurements .		67.54	129.96	63.37	122.53

TABLE IIA-SYSTEMATIC EXAMINATION OF CHILDREN IN ORDINARY SCHOOLS.

NUMBERS AND PERCENTAGES OF CHILDREN SUFFERING FROM DEFECTS.

An individual child may appear in several sections but only once in any section, i.e., only the child's major defect in any section

lines tion.	92	Totals	8 43,325	(0.03)) (0.01) 5 35) (0.1)	2 52) (o·r)	(0.002)	2 43) (o·r)	351	(0.1) (0.1) (0.01)	3,011
rizontal that sec	All ages	Girls	21,868	(0.05)	(0.04) 15 (0.1)	(o·r)	(0.1)	(o·r)	(6.00) (2.322) (4.00.0)	(0·1) 20 20 (0·1) 3 (0·01)	2,369
by the hordefect in		Boys	21,457	8 (0.04)	(0.01) 20 (0.1)	30 (0.1)	30 (0·1) 1 (0·01)	31 (0.1)	(0.04) 581 (2.7)	(0·2) (0·2) (0·01)	(3.0)
ndicated least one	group:	Girls	808	1 1	1	1		1	(0:2)	11	(0.0)
aving at l	4th age	Boys	1,346		1	-	1 1	1	+ 1 1	11	1
. " Sectio	group	Girls	7,654	(0·1)	10 (0.1)	14 (0.2)	(o·x)	(o·x)	973 (72.7)	(0·1) (0·1) (0·2) (0·03)	(173.0)
this table dividual	3rd age	Boys	7,042	7 (0.1)	(0·01) 4 (0·1)	12 (0.2)	(0.2)	(0.2)	(0.03) 210 (3.0)	(0.01) 20 (0.3)	233
gnored in bers of in	group.	Girls	3,537	(0.03)	(o·r)	3 (0.1)	(0.2)	(0.2)	394 (TT-T)	(0·1) 4 (0·1)	403
tion are ig	2nd age	Boys	2,883	(0.03)	(0.03)	8 (0.3)	(0.03)	(0.3)	(0·r) 90 (3·r)	(0.3)	108
same sectorals give	Entrants	Girls	9,198	(0.01)	(0.01)	5 (0.1)	(0.01)	(0.01)	(0.01) 866 (0.4)	(0·1) 6 (0·1) 1 (0·01)	883
ects in the	Entr	Boys	9,536		8 (0·r)	8 (0.1)	(0.03)	3 (0.03)	(0.04) 262 (2.7)	(0.02) (0.02) (0.01)	276
is recorded—any minor defects in the same section are ignored in this table. "Sections" are indicated by the horizontal lines across the columns, and the section totals give the numbers of individual children having at least one defect in that section.	Acres Consessed	sdnoro age	Number examined	I. CLOTHING Ilberter of defects found Insufficient	_	Totals	2. FOOTGEAR UNSATISFACTORY None	Totals	3. Uncleanliness (Dirty (a) Head Nits	(b) Body (Verminous	Totals

4. SKIN	Ringworm	- ::	ī	1	ī	I	I	1	1	T	1	1	1
Land (c)	Impetigo	:	21	14 (0.3)	5 (0.3)	6 (0.3)	3 (0.04)	5 (0.1)	1	1	32 (o·r)	25 (0.1)	57
(a) Head	Injuries	:	6	6	(0.1)		(0.03)	(0.00)	1	1	14 (0.1)	(0.1)	25, (o.r.)
	Others	1	53	51	18	6	74	103	38	11	061	179	369
	Ringworm	:	(0.0)	(0.0)	(0.0)	(0.3)	(7.7)	(4.3)	(0.2)	(+, +)	(60)	(000)	(0.01)
	Impetigo	:	9	0	4	1	67	(0.04)	1	1	12	(0.01)	15
(b) Body	Scabies	:	(o·r) 18	(0.03)	(0·1) 10	3	(0.02)	8	1	1	(0·1) 43	(0.01)	(0.03
	Inimies		(0.5)	(0.2)	(0.3)	(0·I)	(0.2)	(0·I) 3	67	-	(0.2)	(0·1) 18	(0.2)
	rujurres	:	(o·r)	(0·r)	(0.3)	(J.0)	(o·r)	(0.04)	(1.0)	9.0	(0·I)	(0·I)	(0·I)
	Others	:	(2.6)	(5.4)	(c.7)	(7.8)	(2.3)	(2.3)	(8.1)	(3.0)	(2.3)	(2.3)	(2.3)
Totals	:	:	361	328	104	88	264	298	64 (4.8)	35	823	765	1,588
		1	(00)	(00)	(0.0)	(0-)		160	10.43	10.11	3	100	1000
5. NUTRITION	Slightly		259	366	53	79	105 (7.5)	106 (7.4)	(o·x)	1	(2.0)	(3.6)	(2.3)
	Bad	:	(0.0)	(6.04)	(0.03)	1	(0.01)	(1·0)	1	1	(6.03)	(o·r)	(0.1)
Totals	:	:	263	370	54	79	106	115	1	1	436	579	1,015
			(2.8)	(4.0)	(6.1)	(2.2)	(1.5)	(1.5)	(o.1)		(2.0)	(3.0)	(5.3)
6. Mouth and Teeth Unhealthy	ETH UNHEALT	н	94	82	17	11	88	62 (0.8)	7	2 (0.0)	215	163	378
		-	(I.0)	(6.0)	(0.0)	(5.0)	(2.7)	(0.0)	(0.0)	100	1 (0.7)	1/2/	1661

			TABLE	Ha-	Continued						
	Ent	Entrants	2nd age	group:	3rd age	group	4th age group	group		All ages	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
7. NASO PHARYNX (a) Nose Obstruction—for observation	95	96	7	7	19	10	-		117	211	933
Obstruction for operation	(1.0)	(r·o) 52	(0.2)	(0.2)	(0.2)	(0·r)	(o·r)	-	(0.5)	(0.5)	(0.5)
	(0.4) 126	(0.6)	(o·r) 15	(0.2)	(o·r) 26	(0.03)	2	(0.1)	(0.2)	(0.3)	(0.2)
Other conditions	$\binom{(r\cdot3)}{13}$	(0.8)	(0.5)	(0.4)	(6.4)	(0.5)	(o·r)	(o·I)	(0.8)	(0.6)	(0.7)
	(0·I)	(0.5)	(0.5)	(J.0)	(J.O)	(0.1)	(o·I)	((I.0)	(o·I)	(o·I)
Tonsils—for operation	(8.3)	(8·1) 247	(3.4)	(3.4)	(1.0)	(r·9)	(0.3)	(r·r)	990	(4.7)	(4.7)
	(3.6)	(2.7)	(0.8)	(0.9)	(0.3)	(0.4)	1	1	(r.4)	(7.5)	(1.4)
	(1.0)	(0.03)		(o·r)	(o·r)	(0.5)			(0.1)	(o.z.)	(0.1)
	79	38	13 (0.5)	10 (0.3)	8 (0.1)	7 (0.1)	1	1	104	57	161
For operation	-	1		51		(0.0x)	1	1	51	(0.004)	(0.000)
Totals	1,401 (14.7)	1,265 (13.8)	163 (5.7)	196 (5.5)	156 (2.2)	257	6 (2.0)	111 (r·4)	1,770 (8.2)	1,769 (8·1)	3,539
8. EYES (a) External Diseases Plembartic	00	90	in c	i.	00	011			100	-	i
Conjunctivitis	(6.0)	(I·I)	(1.2)	(1.0)	(1.2)	(r·5)	(o·r)	(0.0)	(r·o)	(F·2)	(F.T.) 88.
ties	(0·1)	(o·r)	(o·r)	(o·r)	(0.04)	(0·1)	(o·r)	1	(0·r)	(0.1)	(o·r)
Strabismus	(0.04)	(0.03)	(0.1)	(0.03)	(0.03)	(0.03)	(o·r) 6	60	(o·r) 560	(0.02)	(0.04)
Other diseases	(4.0)	(3.8)	(2.4)	(2:1) 4 (2:1)	(7.4)	(7.3)	(4.0)	(0.4)	(2.6)	38	(5.2)
4	100		16.01	(101)	1001	10.01	(va)		(an)	(and	(= 0)
Lotals	503	485	121	2	197	220	12	6	1000	862	1.717

2,283 (9:3) 723 (2:9)	3,006 (12.2)	1,641 (3·8) 372 (0·9)	2,013 (4.7)	183 (0.4) 107 (0.2) 205 (0.5) 57 (0.0) 4 (0.0r) - 556 (1.3)
1,241 (9.8) 397 (3.1)	1,638	861 (3.9) 175 (0.8)	1,036 (4.7)	85 (0.4) 58 (0.3) 100 (0.5) 29 (0.7) 274 274 (7.3)
1,042 (8·7) 326 (2·7)	1,368	780 (3.6) 197 (0.9)	(4.6)	98 (0.5) 49 (0.2) 105 (0.5) 28 (0.1) 282 (0.01) 282 (1.3)
57 (7·r) 13 (7·6)	70 (8.7)	21 (2·6) 8 (7·0)	(3.6)	(o·r)
126 (9.4) 29 (2·2)	155 (11.6)	30 (2.2) 112 (0.9)	(3.1)	(0·1) (0·4) (0·4) (0·4)
732 (9·6) 280 (3·7)	1,012 (x3·3)	391 (5·r) 96 (r·3)	437 (6.4)	(0·3) (0·3) (0·1) (0·4) (0·4) (0·1) (0·3) (0·9)
618 (8·8) 221 (3·1)	(217.6)	342 (4.9) 131 (7.9)	473 (6-7)	36 (0·5) (0·2) (0·2) (0·3) (0·1) (0·1) (0·1) (0·1)
389 (17.0) 81 (2.3)	480 (13.3)	197 (5·6) 36 (r·0)	233 (6.6)	(0·3) (0·3) (0·4) (0·7) (0·7) (0·7) (0·7)
251 (8·7) 52 (r·8)	303 (xo·5)	147 (5·r) 28 (r·o)	175 (6·x)	(0·5) (0·3) (0·3) (0·1) (0·1) (0·1) (0·1)
11	1	209 (2·3) 24 (0·3)	233 (2.6)	(0.6) (0.3) (0.3) (0.6) (0.2) (0.2) (0.2) (0.2)
11	1	225 (2.4) 20 (0.2)	245 (2.6)	43 (0.5) 24 (0.3) 51 (0.2) (0.2) 2 (0.02) -
8. EYES (b) Visual acuity (Snellen)* Fair, 6/9 or 6/12 Bad, 6/18 or worse	Totals	Recommended for Refraction Recommended for Re-test	Totals	9. EARS (a) Diseases Other diseases (b) Defective hearing Grade I—For ordinary class ,, IIa—for front seat ,, IIb—For class for semideaf ,, III—For Deaf class Totals

* The record of defective vision applies to the better eye, and is with spectacles if worn at examination. The figures do not include entrants, as they cannot be examined by means of test types. The percentages given, therefore, relate to the children outwith the entrants group: 24,584 children in all—7 cases fewer than the total number examined outwith the "entrants" age group.

		Totals	420 (r·o) 72 (o·2)	492 (r·r)	47 (0·1) 26 (0·1) 5 (0·01)	142 (0·3) 56 (0·1) (0·1) (0·2) (0·2)	399	196 (0·5) 60 (0·7) 573 (7·3)
	All ages	Girls	154 (0·7) 14 (0·1)	168 (0.8)	22 (0·1) 5 (0·02) 3 (0·01)	(0·2) (0·2) (0·2) (0·2)	166 (0.8)	(0.4) (0.4) (0.2) (1.3) (1.3)
		Boys	266 (r·2) 58 (o·3)	324 (I·5)	25 (o·r) 21 (o·r) 2 (o·or)	(0·3) (0·3) (0·1) (0·1) (0·1)	173	103 (0·5) 22 (0·7) 288 (r·3)
	group:	Girls	11	1			1	(0·r) (0·r) (0·s)
	4th age group	Boys		2 (o·r)		(0·r) (0·r) (0·r)	3 (0.2)	(0·r) (0·r) (0·r) (0·r) (0·r)
	group	Girls	7 (0·1) 5 (0·1)	12 (0.2)		16 (0·2) 1 (0·0) 9 (0·1)	26 (0.3)	(0·3) (0·3) (0·3) (1·0)
-Continued	3rd age	Boys	15 (0·2) 37 (0·5)	52 (0.7)	(0·01) (0·01)	3 (0·04) (0·0) (0·1)	14 (0.2)	(0·3) (0·3) (0·2) (0·8) (0·8)
TABLE IIA-Con	2nd age group	Girls	8 (0·2) 3 (0·1)	(0.3)	(0·1) (0·03)	(0:3) (0:1) (0:1) (0:1)	(0.5)	(0.9)
		Boys	17 (0·6) 8 (0·3)	(0.0)	3 (0·1) 6 (0·2)	16 (0·6) (0·7)	(0.0)	(0·3) (0·03) (0·07) (0·7)
	Entrants	Girls	138 (r·5) 6 (o·r)	144 (X·6)	(0·2) 5 (0·1) 2 (0·02)	(0.5) (0.3) (0.3) (0.2)	114 (1.2)	58 (0·6) 4 (0·04) 173 (r·9)
	Entr	Boys	225 (2·4) 9 (0·r)	234 (2.5)	16 (0·2) 13 (0·1) 2 (0·02)	(0·5) (0·3) (0·1) (0·0)	120 (7.3)	73 (0·8) (0·1) (201) (2·1)
			10. Speech Defective articulation Stammering	Totals	11. Mental and Nervous Condition Backward Dull Mentally handicapped (educable)	Highly nervous Difficult in behaviour Epilepsy (Mild) " (Severe)	Totals	12. CIRCULATORY SYSTEM (a) Organic Heart Disease Congenital Acquired (b) Functional Conditions

				1	.00					
(0·1) (27)	(2.6) (2.6) (2.6) (0.3)	1,345 (3·x)	326	39 (o·r) 49	(0.03) 807 (7.9)	1,234 (2.8)	16 (0.04)	168 (0.4)	(0.1)	1,909 (4.4)
(0·1) (14)	(0.1) 529 (2.4) 72 (0.3)	(2.9)	140 (0.6)	(0·r) (0·r)	(0.02) 413 413 (7.9)	595 (2.7)	(0.03)	51 (0.2)	13 (o·r)	980 (4.5)
36 (0.2)	(2.8) (2.8) 52 (0.2)	704 (3.3)			(0.04) (0.04) 394 (7.8)	(3.0)	10 (0.04)	117 (0.5)	(0.03)	929 (4:3)
1 1	3 (0.4)	3 (0.4)	(0.0)	(0.2)		(3.0)	- 1	(0.2)	(0.2)	34 (4.2)
(0·T)	(o·r)	(o·r)	(0.3)	(0·r)	(7.7) 18 (7.3)	26 (r·9)		(6.4)	(0.1)	(r.6)
8 (0.0)	(0.8) (0.8) (0.3)	97 (1.3)		(0.1)	(0.01) (0.01) (0.01) (0.02) (0.05)	233 (3.0)		(0.3)	8 (0.1)	275 (3.6)
(0.1)	(0.2) 86 (7.2) 14 (0.2)	118 (7-7)	(0.0)	(0.1)	(0.03) 146 (2.1)	204 (2.9)	1	33 (0.5)	(o·I)	283 (4.0)
(0.1)	(0·1) 49 (1·4) (0·1)	58 (2.6)	24 (0.7)	(0·r) 4	(0·1) (0·1) 66 (1·9)	98 (2.8)	1	(0.2)		185 (5.2)
(0.2)	(7.6) 46 (7.6) 3 (0.1)	56 (2.9)	(0.8)	(0.03)	(0.03) (0.03) (2.1)	91 (3.2)		13 (0.5)	1	115 (4.0)
(0.2)	(0.02) 402 (4.4) 43 (0.5)	462 (5.0)	74 (0.8)	(0·1) 10	(0.07) 116 116 (7.3)	209	(I·0)	(0.2)	3 (0.03)	450 (4.9)
(0.2)	(0.03) 457 (4.8) 35 (0.4)	515 (5.4)	110 (7-2)	(0·1) (0·2)	(0.2) 4 (0.04) 153 (7.6)	292 (3·r)	9 (0.1)	(9.0)	(0.02)	479 (5.0)
Chronic Bronchitis Suspected Tuberculosis	Catarrh Other diseases	Totals	14. Deformities (a) Congenital	(b) Acquired Infantile Paralysis Probable Rickets	Cerebral Palsy Other causes	Totals	15. Infectious Diseases	16. Аѕтнма	17. Diabetes	18. OTHER DISEASES OR DEFECTS

TABLE IIb-ADDITIONAL INFORMATION REGARDING RESULTS OF SYSTEMATIC EXAMINATIONS.

Except in respect of the dual information regarding children who wore glasses, no child appears more than once in each section. "Sections" are indicated by horizontal lines across the columns.

	1		0.0		100		444			A.11 annual	-
	Entrants	ants	Znd age	group	ord age	group	4th age group	group		All ages	
··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
Parents present at examination	8,917 (93.5)	8,491 (92-3)	1,683	2,344 (66·3)	788	1,062 (x3.9)	(2.0)	(3.0)	11,656 (54.3)	12,199 (55-8)	23,855 (55·r)
Children notified to parents as requiring treatment:— (a) Defects of clothing and/or cleanliness and trivial caries of the temporary teeth printed	498 (5·2) 132 (7·4)	1,067 (rr-6) 252 (2:7)	199 (6.9) 88 (3.1)	283 (8·0) 169 (4·8)	186 (2.6) 154 (2.2)	182 (2:4) 342 (4:5)	(0.6)	(0·r) (0·z)	915 (4·3) 394 (1·8)	1,574 (7.2) 797 (3.6)	2,489 (5.7) 1,191 (2.7)
	1,796 (18·8) 962 (10·1)	1,632 (17.7) 930 (10.1)	350 (12:1) 310 (10:8)	500 (<i>r</i> 4: <i>r</i>) 370 (<i>r</i> 0:5)	706 (10.0) (15) (8.7)	626 (8·2) 615 (8·0)	(5·0) (21) (7·6)	(5·7) 22 (2·7)	2,990 (73·9) 1,981 (9·2)	2,884 (13.2) 2,015 (9.2)	5,874 (13·6) 3,996 (9·2)
Children noted for re-inspection:— (a) Defects of clothing, etc. (as above) (b) Other defects	854 (9.0) 2,964 (3.r.r)	959 (10.4) 2,738 (29.8)	194 (6-7) 730 (25-3)	360 (10.2) 926 (26.2)	392 (5.6) 1,707 (24.2)	589 (7.7) 1,786 (23.3)	(0.8) (9.0)	7 (0-9) 136 (x6-8)	1,488 (6·9) 5,693 (26·5)	1,989 (9·1) 5,770 (26·4)	3,477 (8·0) 11,463 (26·5)
Children excluded from attendance at school	(0.3)	18 (0.0)	(0.2)	(o·r)	10 (0.1)	7 (0·x)			41 (0.2)	22 (o·r)	(0.1)
Children " free from defects " in terms of Table III :— (a) No recorded defect (b) Defects of clothing only (c) Defects of cleanliness only	3,770 (39·5) (0·03) 83 (0·0)	3,495 (38.0) 1 (0.01) 218 (2.4)	1,499 (52.0) 3 (0.1) 46 (7.6)	1,772 (50·1) 2 (0·1) 152 (4·3)	4,790 (68.0) 9 (0.1) 138 (2.0)	4,647 (60·7) (0·04) (8·1)	1,058	628 (777) 1	(5.7.5) (5.7.5) (6.7.1) (7.7) (7.3)	10,887 (49.8) (60.02) 1,035 (4.7)	(5r.6) 21 (0.7) (0.7) (3.9)
(d) Minor dental defect with or without clothing and/or	1,769	1,833	392	453	-	2		-	2,188	2,324	4,512

31,682 (73°1) 10,118 (23°4) 1,525 (3°5)	2,213 (9.0) 637 (2.6) 122 (0.5) 834 (3.4) 695 695	1,443 (5·9) (5·9) 1,646 (6·7) 601 (2·4)	393 (0·9) 36,264 (83·7) 6,668 (15·4)	24,612 (56.8) 54 (0·1) 18,659 (43·1)
16,114 (73.7) 5,004 (22.9) 750 (3.4)	1,180 (9·3) 360 (2·8) 76 (0·6) 464 (3·7) 365 (2·9)	787 (6·2) 9,850 (77·8) 881 (7·0) 321 (2·5)	201 (0·9) 18,446 (84·4) 3,221 (14·7)	12,349 (56·5) (27 (0·1) 9,492 (43·4)
15,568 (72.6) 5,114 (23.8) 775 (3.6)	1,033 (8·7) 277 (2·3) 46 (0·4) 370 (3·x) 330 (2·8)	656 (5·5) 9,515 (79·9) 765 (6·4) 280 (2·3)	192 (0·9) 17,818 (83·0) 3,447 (76·7)	12,263 (57·1) 27 (0·1) 9,167 (42·7)
774 (95.8) 31 (3.8) 3 (0.4)	201 (24.9) 29 (3.6) 4 (0.5) (7.7) 35 (4.3)	137 (17.0) 537 (66.5) 28 (3.5) 9 (7.1)	(0·1) 776 (96·0) 31 (3·8)	707 (87·5) 6 (0-7) 95 (11·8)
(92.1) 96 (7.1) 11 (0.8)	289 (21.5) 48 (3.6) (0.6) (0.6) (5.1) (5.0)	$\begin{array}{c} 210 \\ (x5.6) \\ 902 \\ (67.2) \\ 78 \\ (5.8) \\ 21 \\ (x.6) \end{array}$	(0-r) 1,296 (96·3) 48 (3·6)	1,153 (85·7) 15 (r·x) 178 (13·2)
6,402 (83.6) 1,155 (75.1) 97 (17.3)	729 (9·5) 223 (2·9) 44 (0·6) (0·6) (3·8) (2·9)	5,912 (77.3) 509 (6.7) 236 (3.1)	20 7,392 (96.6) 242 (3.2)	4,401 (57.5) 8 (0.1) 3,245 (42.4)
5,655 (80·3) 1,296 (18·4) 91 (1·3)	554 (7.9) 151 (2.7) 22 (0.3) (0.3) (2.9) 170 (2.4)	350 (5·0) (6·0) (6·6) (6·6) (2·8)	(0·3) (6,724 (95·5) (4·2)	4,151 (58·9) 7 (0·1) 2,884 (41·0)
(75.7) (75.7) 809 (22.9) 50 (1.4)	200 (5·7) 96 (2·7) 23 (0·7) (2·7) 98 (2·8)	2,866 (8r.r) 293 (8.3) (8.3) 58 (r.6)	28 (o·8) 3,379 (95·5) 130 (3·7)	1,918 (54°2) 4 (0°1) 1,615 (45°7)
(73.6) (73.6) (892 (24.0) (69 (2.4)	158 (5·5) 68 (2·4) 111 (0·4) (2·8) (2·8) (2·7)	2,419 (84°0) (84°0) (6°4) (6°4) (7°4)	(0.6) 2,748 (95·3) 118 (4·1)	1,474 (5r·r) — 1,409 (48·9)
2,857 (62.6) 2,857 (31.1) 584 (6·3)	ty ty nrts t	See page 151	145 (r·6) 6,340 (68·9) 2,713 (29·4)	4,940 (53.7) 7 (0.1) 4,251 (46.3)
0,003 (63.6) 2,883 (30.2) 590 (6.2)	Visual acuity of entrants not recorded	See	145 (7·5) 6,508 (68·2) 2,883 (30·2)	5,116 (53.6) 4 (0.04) 4,416 (46.3)
One to four decayed		Good, 6/6 Fair, 6/9, 6/12 Bad, 6/18, etc.	Partial Completed Not immunised	Successful vaccination Successful re-vaccination Unsuccessful or no vaccination
One	Visual acuity (Snellen Children who wore glasses at examination	Children not wearing glasses at examination	Diphtheria Immunisation	Smallpox Vaccination

TABLE IIIa—SYSTEMATIC MEDICAL EXAMINATION OF ACCORDING TO REMEDIABILITY OF THE MAJOR

CLASSIFICATION					F CHILI GROUP	
	I	Entrant	S	Secon	d Age C	Froup
	Boys	Girls	Total	Boys	Girls	Total
I. Children free from defects	5,625 (59·0)		11,172 (59·6)		2,379 (67·2)	
II. Children (otherwise free from defects) who suffer from— (a) Defective vision not worse than 6/12 in the better eye with or						
without glasses; or (b) Oral Sepsis	189 (2·0) 68 (0·7)	(2.5)	(2·2) 131	187 (6·5) 16 (0·6)	(8·3) 6	(7.5)
(c) Both (a) and (b)	(0.03)	(0.01)	4	1	2	(0.05)
Totals	260 (2·7)			204 (7·1)		507 (7-9)
III. Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks	1,835 (19·2)		The second second		419 (11·8)	
IV. Children suffering from (or suspected to be suffering from) defects less remediable than defects specified in II or III, distinguishing cases— (a) Where complete cure or restoration of function (in the case of eye defect, full correction) is considered possible (b) Where improvement only is			2,503 (13·4)			
considered possible, e.g., without complete restoration of function	463 (4·9)	The second second			100000000000000000000000000000000000000	4 44
Totals	1,803 (18·9)	Control of the Contro				
V. Children suffering from defects from which improvement is not considered possible	13 (0.1)	The second second		(0.03)	(0.03)	2 (0.03)
Total numbers of children examined	9,536	9,198	18,734	2,883	3,537	6,420

^{*} Includes 1,321 children

CHILDREN IN ORDINARY SCHOOLS. CLASSIFICATION DEFECTS FOUND IN THE INDIVIDUAL CHILD.

EXAMIN PERCEN	ED IN TAGES).					No. of children examined (and percentages).				
Thir	d Age G	roup	Four	rth Age (Group		* All Age Totals, 196			
Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total		
4,938 (70·1)	5,269 (68·8)	10,207 (69·4)	1,058 (78·6)	629 (77·8)	1,687 (78·3)	13,972 (65·1)	14,252 (65·2)	28,224 (65·1)		
480 (6·8) 67 (1·0) 6 (0·1)	584 (7·6) 44 (0·6) 6 (0·1)	1,064 (7·2) 111 (0·8) 12 (0·1)	112 (8·3) 3 (0·2) 4 (0·3)	54 (6·7) 1 (0·1)	166 (7·7) 4 (0·2) 4 (0·2)	1,002 (4·7) 160 (0·7) 15 (0·1)	1,211 (5·5) 120 (0·5) 9 (0·04)	$\begin{array}{c} 2,213 \\ (5\cdot I) \\ 280 \\ (0\cdot 6) \\ 24 \\ (0\cdot I) \end{array}$		
553 (7·9)	634 (8·3)	1,187 (8·1)	119 (8·8)	55 (6·8)	174 (8·1)	1,177 (5·5)	1,340 (6·1)	2,517 (5·8)		
756 (10·7)	864	1,620 (II·o)	94 (7·0)	58 (7·2)	152 (7·1)	3,138 (15·5)	3,225	6,363 (14·7)		
495 (7·0) 286 (4·1)	583 (7·6) 292 (3·8)	1,078 (7·3) 578 (3·9)	39 (2·9) 27 (2·0)	40 (5·0) 26 (3·2)	79 (3·7) 53 (2·4)	2,211 (10·3) 921 (4·3)	2,167 (9·9) 859 (3·9)	4,378 (10·1) 1,780 (4·1)		
781 (II·I)	875 (II·4)	1,656	66 (4.9)	66 (8.2)	132	3,132	3,026	6,158 (14·2)		
14 (0.2)	12 (0.2)	26 (0.2)	9 (0.7)	_	9 (0.4)	38 (0.2)	25 (o·x)	63 (o·1)		
7,042	7,654	14,696	1,346	808	2,154	21,457	21,868	43,325		

outwith normal Age Groups.

TABLE IIIb-SOCIAL GROUP AND MEDICAL REMEDIABILITY CLASS.

By analysing the information obtained at systematic medical inspection it is possible to show the comparative health conditions of children belonging to each of the so-called Social Groups. In the following table, therefore, the occupations of the parents Numbers and Percentages of Children in Ordinary Schools Placed in Various Medical ("Remediability") Classes arranged according to Social Group of Parent. have been arranged in five groups and related to the medical remediability classifications of Table III.

	1 1 101	angua.	or Summon moduling		June .	- 6						1
	1		2		03		4		5			
Social Group of Parent	Professional	ional	Clerical	cal	Skilled	pa	Semi-skilled	illed	Labouring	ing	Totals	S
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
I. Children free from defects (other than clothing, cleanliness or minor dental defects)	540	70-4	3,554	0-69	10,344	2.99	7,486	64.1	6,040	59.0	27,964	9-19
II. Children suffering only from slightly defective vision and/or oral sepsis	58	7.6	340	9.9	822	5.3	704	0.9	693	8.9	2,617	0.9
III. Children suffering from temporary defects (other than in II)	80	10.4	580	11.3	2,152	13.9	1,807	15.5	1,824	17.8	6,443	14.9
Iv. Children suffering from curable or improvable defects	89	11.6	665	12.9	2,163	14.0	1,660	14.2	1,663	16.2	6,240	14-4
V. Children suffering from defects not considered improvable	1	1	10	0.2	14	0.1	19	0.2	18	0.5	61	0.1
Total Numbers of Children Examined	767	100.0	5,149	100.0	15,495	100.0	11,676	100.0	10,238	100.0	43,325	100-0

Perusal of the statistics in the table reveals the following :-

(1) The percentage of children free from defects (Class I) was greatest for Social Group 1 (Professional) and diminished progressively for each of the remaining groups.

(2) Percentages in Classes III and IV increased more or less consistently from Social Group 1 to 5.

TABLE IV—SUMMARISED TREATMENT STATISTICS.

				Cases A	ttendances
EAR-					
Examined only			***	524	18,759
Clinic treatment				1,967	10,700
Aurists' Examinations				1,478	1,478
Aurists' Classifications		***		4	4
Audiometric Survey				1,277	1,277
EYE		***		1,659	11,606
SKIN—					100000
Clinic treatment				14,513	124,155
Cleansing clinics		***	***	365	868
Scabies baths				1,094	4,723
DEFECTIVE VISION—				0.000	0.750
Clinic treatment	***	***		8,753	8,753
Spectacles supplied	***		•••	4,524	5,964
To Many on Tongon					
EAR, NOSE AND THROAT—				624	624
Aurist's Examinations				959	2,990
Tonsil/Adenoid operation	S			939	2,550
ORTHOPAEDIC—					
			***	1,524	1,524
Examined only Treated by exercises				906	18,057
Treated by exercises Treated in Spastic Unit	***			43	3,437
Treated in Spastic Ont			***		0,101
OTHER DISEASES—					
General				6,947	21,157
Supply of medicines				2,046	10,001
Artificial Light				559	9,432
Cardiac cases				139	304
Cardiac cases					
Dental-					
Ordinary				18,540	52,819
Orthodontic		***		147	3,747
O. C.					
REMAND HOME				645	645
DEFECTIVE SPEECH			***	2,810	22,934
				-	0.044
OCCUPATIONAL THERAPY			***	32	2,244

TABLE V-DENTAL INSPECTION AND TREATMENT.

(1) GENERAL STATISTICS.

Special and Emergency Cases

Number of Children seen at Routine Dental Inspection

	Age	in yea	rs	Number ispected		Number accepted treat- ment	Number treated	Number made dentally fit	Number treated
3 or	under				_	_	15	6	91
4				 _	_	_	34	20	157
5				 6,375	4,954	1,975	1,534	602	216
6				 7,286	5,839	2,470	2,464	1,091	199
7				 7,036	5,838	2,314	2,325	969	205
8				 6,732	5,529	2,167	2,296	1,023	268
9				 6,399	5,064	1,943	2,072	996	332
10				 6,060	4,557	1,677	1,837	961	296
11				 5,703	4,316	1,510	1,651	877	276
12				 2,158	1,601	522	762	311	478
13				 9	6	3	111	46	583
14				 11	9	7	66	29	522
15				 11	8	8	21	8	141
16				 1	-				43
17 o	r over			 -	-	-	- 2	1	12
				47,781	37,721	14,596	15,141	6,914	3,819

No. of attendances for treatment: 0-4 years, 523; 5-17 years, 52,251; total 52,774.

(2) DETAILS OF TREATMENT.

		Routine	Special and	Total
Fillings parmanent to the			Emergency	
Fillings—permanent teeth	***	14,897	6,281	21,178
—deciduous teeth		4,502	617	5,119
Extractions (not incl. orthodontic)—				
—permanent teeth		2,196	2,059	4,255
—deciduous teeth		11,863	2,142	14,005
Administrations of general anaesthetic		272	129	401
Other operations—permanent teeth		5,420	2,796	8,216
—deciduous teeth		4,642	860	5,502
Dentures—partial		28	136	164
—full		_	7	7
Repairs to dentures		5	15	20
Radiographs—number of exposures (not			
incl. orthodontic)		_	-	285
A W COLOR OF				

Note.—Treatment statistics include pre-school children.

(3) ORTHODONTIC TREATMENT.

Cases from previous year, 241; new cases, 147; cases completed, 125; cases discontinued, 10; cases continuing at end of year, 253; attendances for treatment, 3,806.

Diagnostic examinations, 185; cases treated—with removable appliances, 794, with fixed appliances, 2; extractions (non-carious)—permanent teeth, 30, deciduous teeth, 11; repairs to appliances, 11; radiographs—intra-oral, 63, extra-oral, 2.

(4) ALLOCATION OF TIME.

Estimated number of half-d	avs oc	cupied i	n		Dental Surgeons	Dental Auxiliaries
Inspection		***			270	_
Treatment (other than	ortho	dontic)			7,045	288
Orthodontic treatment				***	534	_
Dental Health Educati Administration	on	***	***		92	220
Absence due to illness	***	***	***	***	152	_
Hosenee due to inness		***			159	12
					8,252	520

(5) Additional Information.

Routine dental inspection fillings of permanent teeth included 3 crowns, 19 incisal edge restorations and 15 root treatments (7 septic and 8 non-septic).

Special and emergency fillings of permanent teeth included 1 crown, 19 incisal edge restorations, 4 inlays and 27 root treatments (15 septic and 12 non-septic).

TABLE VI-IMMUNISATION CAMPAIGNS IN SCHOOLS.

(1) Diphtheria and Tetanus

Injections given by School Medical Officers :-

Diph	theria and	Tetanus	Tetan	us only	Total
First	Second	Re-inforcing	First	Second	Doses
14,545	13,063	33	2,635	2,507	32,783

(2) Poliomyelitis

Oral doses administered by School Nurses :-

First	Second	Third	Re-inforcing	Total Doses
4,112	3,130	2,569	19,628	29,439

TABLE VII-MORTALITY OF SCHOOL CHILDREN.

Deaths During Year ended 31st December, 1963, of Children Aged 5-15 Years.

of Children Aged 5-15 Tears.									
Cause of Death	5- yea	10 ars	10- yea		A Ag		1963		
Cause of Death	Boys	Girls	Boys	Girls	Boys	Girls	Totals		
Tuberculosis—									
Respiratory	-	-	-	-	-	-	-		
Meningeal	-	,-	-	-	-	-	-		
Abdominal				I					
Others									
Infectious Diseases—									
Diphtheria	-		_	-		-	-		
Acute Poliomyelitis Measles									
Dysentery	_	_	_	_		_	_		
Chickenpox	_	_	-	_	-	-	_		
Others	1	-	-	-	1	-	1		
Mental and Nervous Diseases—							-		
Epilepsy	_	-	-	-	-	_	-		
Cerebral Diplegia	1	-	-	-	1	-	1		
Meningitis (non- Meningococcal)	1		Contract of the second		1		1		
Others	1	2	1	2	2	4	6		
Circulatory Diseases—									
Rheumatic Fever	-	-	-	-	-	-	-		
Chronic Rheumatic Heart Disease	_								
Other Heart Diseases									
Other Circulatory Diseases	-	_	_	-	_	_	_		
Respiratory Discuss									
Respiratory Diseases— Influenza			The same of						
Pneumonia	1	2		1	1	3	4		
Bronchitis	î	_	_	_	î	_	1		
Others	_	_	_	_	_	-	_		
Digestive Diseases—									
Enteritie and Colitic			,		4		,		
Appendicitis	1		_		1		1		
Others	1	_	_	_	i	_	î		
Violence—									
Road Traffic Assidants	0		0	0	10		.,		
Other Violent Causes	9	1	3 3	2	12 21	2 2	14 23		
							20		
Other Diseases—	1	1000	-	-		1000			
Malignant Neoplasms Benign and Unspecified	3	1	2	3	5	4	9		
Neonlasme	1	2		3/1-3		0	0		
Diabetes Mellitus		4	1		1	2	2		
Anaemias	1	-	_	_	1	_	1		
Congenital Malformations	2	2	1	1	3	3	6		
Nephritis and Nephrosis	1	-	1	-	2	-	2		
All Other Causes	-	1	1	_	1	1	2		
Totals	42	11	14	10	EG	91	77		
	120	11	14	10	56	21	77		

SECTION V

HOME HELP SERVICE.

This service, which was originally intended to provide help in the home during a mother's confinement, now affords assistance in a variety of circumstances and without it a family may have to separate or an old or infirm person be removed to hospital for an indefinite period. Under Section 28 of the National Health Service (Scotland) Act, 1947, "A local health authority may make such arrangements as the Secretary of State may approve for providing domestic help for households where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over school age within the meaning of the Education (Scotland) Act, 1946."

This service has been greatly appreciated by those who have had the benefit of it and in consequence is now widely known and in great demand. Applications for help under the General and "Extended" Schemes increased again in 1963. Despite the increase in staff from 368 in 1948 to 1,712 in 1963, the number is still inadequate to satisfy the demand.

Of the 1,712 domestic helps employed, 438 were on a whole-time and 1,274 on a part-time basis. Included in this total were 35 helps engaged on Tuberculosis cases. The demand from the elderly chronic sick continued and most of the part-time workers had two cases for two hours each and most of the full-time helps had three cases.

The following table shows the category and number of cases assisted in the past six years :—

	1958	1959	1960	1961	1962	1963
Maternity	2,176	2,230	2,413	2,375	2,126	1,988
General, etc.	4,916	5,078	5,025	5,583	5,963	6,713
Tuberculosis	204	177	141	111	117	127
	7,296	7,485	7,579	8,069	8,206	8,828
	-	-	-	Section 1988	-	Designation of the last

The charge to individual patients for Home Help service varies according to means. In May, 1963, the maximum charge was increased to 30s. per day for full-time help, 15s. per half day and 7s. 6d. for two hours. The minimum charge remained at 4s. per day for full-time,

and 2s. per day for part-time, help. The two hours' help given on Sundays is charged at weekday rates but the Corporation night-sitter and evening service is without charge to the patient. Old age pensioners with no other source of income receive assistance in the payment for Home Help from the National Assistance Board.

MATERNITY AND CHILD WELFARE SCHEME.

Maternity cases are given priority and the number requiring parttime help showed some decrease in 1963. The period of help given is two weeks although many cases finish after one week. The number of cases in this section assisted in 1963 was 1,988, of which 1,587 were confinements.

Child Welfare cases may have help for several months if a medical certificate is received with the application for an extension. Four motherless children were cared for in 1963, three of them having had help since 1962.

Of the total 1,988 cases assisted 1,565 had full-time and 423 parttime help. The maximum charge was paid by 115 and the minimum rate by 600 cases.

GENERAL SCHEME.

These cases make the heaviest demand on the service, a large proportion of them being cases of prolonged illness or incapacity who would otherwise have to go into hospital. The service was not designed to provide permanent assistance but to give the family concerned time to make their own arrangements for securing assistance. The number of such cases assisted in 1963 was 3,889, a large percentage receiving only two hours' help per day. Two hundred and thirty-two received full-time help and 3,657 part-time help, in 1963. The maximum charge was paid by 103 cases and the minimum by 2,727.

EXTENDED SCHEME.

In a large number of instances there is no family or near relative to care for the applicant who is so incapacitated by illness or infirmity as to require assistance for a more prolonged period than that permitted by the General Scheme. A special "extended" scheme was devised in 1947 to help 12 cases who, having exhausted the maximum eightweek period allowed by the General Scheme, still required assistance. The number of such cases has steadily increased year by year and in 1963, 1,035 new cases were added to those already receiving this

help. In all, 2,718 cases were assisted in 1963 and were given two to four hours' daily help according to need. Of this total, 16 paid the maximum charge while 2,279 were only able to pay the minimum.

DISSEMINATED SCLEROSIS SCHEME.

Owing to the peculiarly crippling nature of their disability a similar long-term system of assistance is provided for certain cases of disseminated sclerosis, most of them being allowed four hours' help daily. Twenty-six new cases came under care during 1963 and the number assisted was 106. None paid the maximum charge; the minimum charge by 65.

TUBERCULOSIS CASES.

There were 77 new cases in 1963, bringing the total number of such cases helped in 1963 to 127. Of this number 30 were given full-time help and 97 part-time. The maximum charge was paid by only one case while 65 paid the minimum.

NIGHT-SITTER AND SUNDAY, ETC., SERVICE.

A night-sitter service for cancer patients reaching the terminal stage of their illness came into operation on 1st November, 1962. This service was initiated at the request of the Marie Curie Memorial Foundation and financed from the Foundation's funds. During 1963, 14 cases were assisted in this way the maximum charge being paid by this Organisation (which also paid for day help for three seriously ill cancer patients).

A similar night service was also provided for 15 terminal cases of other disease. The night sitters are in attendance on these patients from 10 p.m. to 8 a.m. from Monday to Friday inclusive. If no relatives are available to help during the weekends the night sitter attends on all seven nights. Her duties are to keep the patient clean and comfortable, give nourishment as required, and allow any members of the family who are working by day to have an undisturbed night. This service is much appreciated.

A Sunday service was given to 283 cases, an increase on last year's total. There was, however, some decrease in the number of cases helped in the evenings of whom there were 105 in 1963.

The following table shows the illness or other condition in respect of which applications for home helps under the General and "E" Schemes were made in 1963:—

GENERAL AND "E" SCHEMES, 1963.

					Under	10.00	Over	Total
	Illness.				40 yrs.	40-60 yrs.	60 yrs.	Total.
1.	Respiratory Disea	se		***	16	101	671	788
2.	Circulatory Diseas	se			2	39	421	462
3.	Senility		***		-	-	185	185
4.	Debility				1	9	560	570
5.	Digestive Disease				1	11	73	85
6.	Cardiac				10	145	900	1,055
7.	Cancer				3	33	95	131
8.	Blindness				1	12	92	105
9.	Diabetes				2	10	123	135
10.	Intracranial Vasc	ular L	esion		1	48	365	414
11.	Rheumatism				3	92	608	703
12.	Hemiplegia, Para	plegia,	Paraly	ysis	8	120	77	205
13.	Kidney and Blade	der			3	19	47	69
14.	Post Operative				26	147	340	513
15.	Nervous				5	34	207	246
16.	Accident				7	45	388	440
17.	Other Causes			***	25	67	201	293
					114	932	5,353	6,399

SECTION VI

HOME NURSING SERVICE, ETC.

The distribution of the staff of the Glasgow District Nursing Association as at 31st December, 1963, is shown as follows:—

HOME NURSING STAFF.

						1963
Senior Superintendent of Ho	me N	ursing				1
Superintendent/Tutor						1
Assistant District Nurse Tut	or			***		1
Superintendents of Homes .						4
Assistant Superintendents .						5
						-
0 1 11 0 11						12
Queen's Nurses on General	Work					75
Queen's Nurses on Midwifery	y Wor	k				25
State Registered Nurses in T	rainin	g for t	he Que	een's R	oll	2
State Registered Nurses on	full-tir	ne Nu	rsing			23
State Registered Nurses on	part-ti	ime Nu	irsing			20
Queen's Nurses undertaking	Part	II Mid	lwifery	Traini	ng	
D						_
Queen's Nurses undertaking	Part I	Midwi	fery Tr	raining	in	
Hospital						-
Part II Midwifery Pupils .						3
					-	160
					_	100

The recruitment of staff has been similar to 1962. The Student intake almost balances the resignations. It has been impossible to replace Assistant Superintendents and there have been two vacancies in this grade for almost one year.

The following is a detailed account by the Superintendent of the work done by the nurses during the year:—

RECORD OF WORK FOR THE YEAR ENDED 31ST DECEMBER, 1963.

The population has moved from the central area of the city and most of the nursing work is now in the new housing areas. These areas are widespread and transport is difficult in the "off peak" periods, which means there is less time in which to do actual nursing, and a consequent reduction in the case load.

In the "over 65 years" group the number of patients visited was about the same as in previous years. The number of visits paid continues to decrease gradually. The patients are now encouraged to be ambulant quickly after illness, and remain independent for a longer time.

The number of Tuberculosis patients nursed continues to decrease.

PULMONARY TUBERCULOSIS.

	1959	1960	1961	1962	1963
Patients	 619	519	493	408	352
Visits	 30,465	26,091	25,360	21,822	16,548

MIDWIFERY.

During the year 1,381 maternity patients received 30,786 visits, a slight decrease from 1962.

The Night Midwifery Service has helped greatly in the recruitment and willingness of the nurses to practise Midwifery. Being centralised at the Central Home the night staff are in an excellent position to cope with the work throughout the city.

NURSING APPLIANCES.

The number of appliances issued on loan during the year was 2,976 being a slight increase on the previous year. Some of the items issued remain in use by the patients over long periods.

DISTRICT TRAINING.

The Course is of three months' duration for nurses with S.C.M. and four months for those with R.G.N. only. Thirty-nine Students entered for the Queen's Roll Examination, and all were successful.

MIDWIFERY TRAINING.

This Association is recognised by the Central Midwives Board as a Training Institution for the Part II Examination. Ten Pupils completed training and were successful in the Examination.

Under the Scheme of co-operation with the Western Regional Hospital Board 19 Pupils from the Cresswell Maternity Hospital, Dumfries, took extern training under the supervision of the senior midwives. From November, 1963, Glasgow Royal Maternity Hospital Part II Pupils (in groups of six) have also taken their extern training with the Association. In addition 182 cases were taken by Pupils from Glasgow Hospitals.

REFRESHER COURSES AND CONFERENCES.

Training Home Superintendents' Conference, London, was attended by the Senior Superintendent, Superintendent/Tutor and Assistant District Nurse Tutor.

Queen's Institute of District Nursing Refresher Course, Glasgow.

One Assistant Superintendent and 2 District Nurses attended this Course.

A number of the nurses attended an afternoon or morning session.

Heart and Chest Association—Chronic Bronchitis. Six nurses attended the One Day Conference.

CASES DEALT WITH DURING THE YEAR.

Cases on books at 1st January, 1963		2,354
Number of new cases added		8,793
Number of cases dismissed		8,747
Number of cases remaining at 31st December	ber,	
1963	***	2,400

Dismissed—				General.	Midwifery.
Convalesc	ent		 	 4,144	1,357
Hospital			 	 1,726	
Died		***	 	 1,171	
Removed			 	 349	

Total number of visits paid by Nursing Staff		316,699
Number of Teaching Rounds paid with Students	by	
Administrative Staff		342
Number of Inspections of Nurses		120

Analysis of All Cases Attended During 1963.

Bronchitis	***					665	
Pneumonia						209	
Cardiac						844	
Arthritis						285	
Hemiplegia						626	
Senility						747	
Carcinoma						599	
Diabetes						256	
	***					4	
Puerperal Infectious Disea	***	***				4	
Infectious Disea	ises			***	***		
Gynaecological					***	107	
Other medical			***		***	3,961	
							8,307
Operations		***				2	
Post Operation	Surgio	cal				542	
Other Surgical					***	476	
							1,020
Pulmonary Tub	erculo	sis				352	
Non-pulmonary						77	
Surgical						10	
Complete		1000					439
Midwifery		***				1,381	1,381

SUB ANALYSIS OF CASES.

Injections.

Insulin					***		237	
Penicillin							1,005	
Streptomy	ycin	T.B.				***	392	
Streptom	ycin	Others	***	***	***		74	
Liver Ex							1,122	
T							538	
Other Inj	ectio	ns		***		***	641	
								4,009
		Patie	nts 6	5 years	and	over.		
35.1							1 527	
Males	***	***				***	1,537	
Females						***	3,853	
								5,390

NURSING APPLIANCES ISSUED ON LOAN DURING YEAR ENDED 31ST DECEMBER, 1963.

Appliance—					No. issued.
Wheel Chairs					168
Walking Aids					61
Commodes					417
Water and Air	Beds				4
Air Rings					361
Bed Pans					663
Bed Cradles					131
Back Rests					283
Rubber Sheets					449
Urinals					237
Warral Sticks					145
Dunlopillo Beds					13
Dunlopillo Cushi					11
Hair Mattresses	111			***	12
Hospital Beds			***		15
Cot Beds			***	***	4
Spinal Carriages	***		***		1
Sani-chairs		***	***	***	1
Sam-chairs	***			***	1
					2,976

NURSES (SCOTLAND) ACT, 1951. NURSING AGENCIES.

No new applications were made during the year but the five agencies on the register all applied for renewal of their licences for the supply of nurses.

A Medical Officer of this Department submitted satisfactory reports on the running of these agencies and licences were granted for the year ended 31st December, 1963.

NURSING HOMES REGISTRATION (SCOTLAND) ACT, 1938.

One application for registration was received during the year.

The application is under consideration and a certificate will probably be granted in 1964.

Two cancellations were made. Both homes concerned have applied for registration as Old Persons' Homes under the National Assistance Act, 1948. One has been granted and the other will be registered early in 1964.

Three homes re-applied for exemption from registration under the Nursing Homes (Scotland) Act, 1938, and after inspection by a medical officer, exemption was granted in each case.

The position at 31st December, 1963, was as detailed below:-

Registered	 	 	21
Exempted	 	 	3
			-
			24

SECTION VII.

INFECTIOUS DISEASE-GENERAL REVIEW.

The number of infectious disease cases registered in 1963 was 16,259, an increase of 839 on the 1962 total. But for a sharp increase in whooping-cough the incidence of infectious disease in 1963 would have been even less than in 1962 which had the lowest total recorded since 1919 when pneumonia and dysentery first became notifiable. The diseases most prevalent in 1963 were primary pneumonia, whooping-cough, dysentery and measles in that order. Severe weather conditions in the early part of the year resulted in an increase in cases of primary pneumonia and influenza virus A was again present in the city in the first and second quarters. Whooping-cough which had fallen to an exceptionally low level in the two preceding years again assumed its usual prevalence. There were more cases of measles and of rubella and as neither of these diseases is notifiable it is not unlikely that the incidence of both may be greater than is shown by the figures given in this Report.

The record low incidence of scarlet fever in 1962 was maintained in 1963 and for the seventh successive year no cases of diphtheria occurred in the city.

The most outstanding epidemiological feature of the year was the complete absence of poliomyelitis. Thirteen suspected cases were notified but in no instance was the diagnosis confirmed. Lymphocytic meningitis, however, was prevalent. The incidence of poliomyelitis in Glasgow in the past ten years or so has been as follows:—

1953 50	1957— 28	1961-11
1954— 39	1958—127	1962-49
1955-245	1959— 8	1963-Nil
1956— 54	1960— 1	

Pulmonary tuberculosis continued its slow decline and attained a new record low level in 1963. There is, however, little change in the incidence of non-pulmonary tuberculosis.

There was some reduction in both dysentery and food poisoning but gastro-enteritis was more prevalent. Paratyphoid fever also showed some increase but the general level of incidence is low. The prevalence of typhoid and paratyphoid fever in Glasgow in the past twenty years or so has been as follows:—

During the war and post-war period of 1940 to 1949, there were 213 cases of typhoid, of which 63 occurred in 1942 (41 from a localised meat-borne outbreak). Of the 504 cases of paratyphoid B. registered in the same period, 339 were recorded in one year, 1940. From 1950 to 1959 the incidence of typhoid was reduced to 27 cases and paratyphoid B. to 216. Only one case of paratyphoid A was recorded in the years 1940 to date—in 1958 when a Pakinstani returned from a visit to his home where this disease was rife. From 1960 to date the incidence of these diseases has been as follows:—

	Typhoid	Para A.	Para B
1960	 1	-	21
1961	 5	_	24
1962	 5	_	5
1963	 _	_	17

There was one case of undulant fever in 1963. The incidence of this disease during the past twelve years is reviewed on page 183.

HOSPITAL ADMISSIONS.

Admissions to hospital during the year totalled 10,636 compared with 10,170 in 1962. This total includes 3,182 removed to hospital and ultimately diagnosed as other non-infectious disease. Pneumonia and dysentery continued to make the heaviest demand on hospital accommodation. In 1963 cases of pneumonia treated in hospital formed 44.5 per cent. of all infectious disease cases admitted as against 43.3 per cent. in 1962. Although more cases of this disease were admitted to hospital in 1963, the proportion (89 per cent.) remained unchanged. Sixty per cent. of all dysentery cases were treated in hospital compared with 54 per cent. in 1962. This is equivalent to 21.7 per cent. of all cases of infectious disease admitted during the year. In 1962 this proportion was 24.9 per cent.

Details of notifiable and non-notifiable diseases are given in Appendix Table XIII. Table XIV illustrates the seasonal prevalence of these in 1963 and the admissions, dismissals and deaths in the four fever hospitals are shown in Appendix B.

GLASGOW: INFECTIOUS DISEASE—CASE RATES PER MILLION

1943-1963

A.—Notifiable— Light Freet and Paratyphoid B											YEAR.									1	-	
Terrar Practical B 40 28 55 40 33 14 79 16 16 4 10 27 45 19 21 10 10 10 10 10 10 10 10 10 10 10 10 10		1943	1944	1945	1946	1947	1948	1949	1950	1981	1952	1953	1954	1955	1956	1957	1958	1959	0961	1961	1962	1963
Tuberculosis 2,544 2,527 2,420 2,575 2,535 2,544 2,925 2,944 2,927 2,72 2,23 2,28 180 161 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A.—Notifiable— Typbus Fever Enteric Fever and Paratyphoid B Continued and Undefined Fever Puerperal Fever Puerperal Fever Smallpox Scarlet Fever Diphtheria and Membranous Croup Erysipelas Croup Erysipelas Croup Erysipelas Croup Acute Encephalitis Lethargica Acute Polionyelitis Acute Polionyelitis Acute Polionyelitis Acute Primary Pneumonia Whooping Cough Malaria Dysentery Infective Jaundice (Weil's Disease) Anthrax					1			166 116 1103 1103 1103 1103 1103 1105 1105 1105	48 48 48 48 102 102 102 103 103 103 103 103 103 103 103	20 20 4 497 497 497 497 493 131 131 131 131 131 131 131 131 131 1	117 1187 1187 1116 11766	27 164 1164 1135 1106 1106 1106 1106 1106 1106 1106 110	45 45 109 98 98 1,116 1,116 1,116 1,116 1,126 1,	198 199 74 74 199 62 43 62 43 62 43 4,170 4,170 50 4,170 50 74	21 21 21 35 143 908 108 108 108 108 108 108 108 118 118 1	8 211 76 175 908 908 65 65 65 65 65 65 65 65 7 7 7 3,170	288 200 2011 872 872 773 775 771 775 8 4,474	21 21 1139 6113 613 613 613 72 72 72 73 73 73 73 73 73 73 74 74 75 75 76 76 77 77 77 77 77 77 77 77 77 77 77	28 28 1162 1128 396 65 65 65 65 782 782 782 3,710	10 110 121 121 121 121 121 121 121 13 13 16 16 16 16 16 16 16 16 16 16 16 16 16	116 116 120 220 220 220 220 230 230 230 230 230 2
tifiable————————————————————————————————————	Pulmonary Tuberculosis Other Forms of Tuberculosis Leprosy Food Poisoning		and the	0.716.1								272	223	258	180	231	157	372	103	130	334	113
. Pemphigus 57 146 68 62 111 55 44 41 83 57 135 91 85 43 133	tifiable— asles		100000000				1 12 11 11 11 11 11 11 11		8,272 3,027 6,426	3,934	6,326	1,602	5,325	3,546	4,292 643 6,503	5,317 4,057 228	724 329 5,072 289	10,739 155 3,086 436	556 312 8,493 456	5,878 884 3,020 351	1,978 3,406 3,406	2,231 85 2,088 437
44.4	Pemphigus etc	57	146	89	62	E	55	4	=	- 1	57		91			133	691	165	378	219	72	158
Totals 38,626 33,492 28,681 32,347 28,746 28,931 22,562 31,656 29,111 26,230 30,479 28,878 24,135 26,340 27,489 18,411				28,681	32,347	28,746	28,931	22,562	_	=1	230	_	878	1,135	_	27,489		30,047	26,32	20,270	P 1	5

Whooping Cough became notifiable as from 1st January, 1950
Leprosy
Food Poisoning ... 1st July, 1956
Anthrax

IMMUNISATION CENTRE.

This centre at 20 Cochrane Street provides intending travellers from the West of Scotland with immunisation against yellow fever and certain other infectious diseases likely to be met with in a foreign country. During 1963 3,459 travellers were inoculated against yellow fever. In 1962 this figure was 2,912. In addition, 3,669 inoculations were given against smallpox, cholera, tetanus, typhus and enteric fever.

As in previous years, as a matter of convenience where crews of ships were concerned, rather than have a large crew attend at the clinic, the immunisations were carried out on board ship. This accounted for 317 of the above number.

SMALLPOX AND VACCINATION.

There has been no case of smallpox in Glasgow since 1950. Compulsory vaccination or declaration of conscientious objection ceased with the inception of the National Health Service (Scotland) Act on 5th July, 1948. Notification of vaccination is now made by medical practitioners, and in 1963, 1,922 notifications of primary vaccination were received and 2,710 of revaccinations. In addition, primary vaccinations are carried out at the Child Welfare clinics, and these in 1963 totalled 562. In all, 2,481 primary vaccinations were done during the year as compared with 18,827 in 1962 and 9,823 in 1961.

This decrease in the number of primary vaccinations is due to the introduction in 1963 of a new immunisation time table to which reference is made on page 177.

The following table shows the age distribution of those vaccinated for the first time in each of the years from 1953 to date:—

Year of Vaccination	-1	Age -5	Group -10	10 & Over	Not Stated	All Ages	Revacci- nations
1963	382	1,394	161	541	3	2,481	2,710
1962	5,283	7,362	2,185	3,982	15	18,827	17,932
1961	5,644	3,520	60	495	4	9,823	3,249
1960	5,908	3,287	163	497	7	9,862	3,417
1959	6,454	3,648	155	458	6	10,721	3,202
1958	5,754	3,965	147	325	3	10,194	3,240
1957	5,290	3,562	246	935		10,033	4,991
1956	5,290	3,806	173	356	7	9,632	3,877
1955	4,621	3,342	121	269	9	8,362	2,695
1954	5,112	3,500	128	254	12	9,006	3,460
1953	4,633	3,266	110	298	21	8,328	3,551

The figures for 1962 and 1963 are not comparable with those of the preceding years. An outbreak of smallpox in England and in Wales in the early part of 1962 resulted in a large number of persons requesting vaccination for the first time. Some 18,000 were revaccinated with a resultant falling off in 1963.

The 1962 outbreak is a timely reminder of the ease with which this disease may still be introduced into this country, and the rapidity of its spread when it does. The necessity for constant vigilance remains, especially in a city such as this which is not only a port of call for ships from all parts of the world, but an air terminal.

In spite of the large number of persons coming forward for vaccination early in 1962, the vaccinal state of the population in its more vulnerable age groups is still too low.

In the fourteen years from 1950 to 1963, the total number of primary vaccinations carried out was 133,429. The age distribution of this total may be expressed as follows:—

In 1963, of the city's population aged-

```
Under 5 years, 37,912 or 34·3 per cent.

10 years, 47,417 or 45·3 per cent.

15 years, 35,111 or 36·6 per cent.

Over 15 years, 13,540 or 1·9 per cent.

Phave been vaccinated in the course of the fourteen years, 1950-1963.
```

Between 1959 and 1962 the proportion of children under one year of age vaccinated at the Child Welfare Clinics was as follows:—

			Percentage
		No.	of Births.
1959	 	 5,473	25-4
1960	 	 5,516	23.9
1961	 	 5,439	23.8
1962	 	 3,571	15.2
1963	 	 42	0.2

In 1963 only 42 children in this age group were vaccinated at the Child Welfare Clinics. This was the result of certain changes in the immunisation procedure which took effect in 1963 and are summarised as follows:—

The Secretary of State was advised that Outbreak Control alone will not necessarily prove effective in an unvaccinated population and routine vaccination against smallpox should, therefore, continue in early childhood and be offered to children in their first two years' of life, preferably during the second year. New recommendations were therefore, made by the Scottish Home and Health Department in December, 1962, on the timing of smallpox vaccination in infancy in

relation to immunisation against other diseases, such as diphtheria, pertussis and poliomyelitis. General Practitioners were also advised of these arrangements. The suggested time table is as follows:-

SCHEDULE P.

(WHEN ORAL POLIO VACCINE IS USED).

Age	Visit	Vaccine	Injection	Interval
1 to 6 months	1	Diphtheria, Pertussis, Tetanus 1	1	4-6 weeks
	2	Diphtheria, Pertussis, Tetanus 2	2	4-6 weeks
	3	Diphtheria, Pertussis, Tetanus 3		
7 to 11 months	4	Poliomyelitis 1)	
	5	Poliomyelitis 2	}	4-8 weeks
	6	Poliomyelitis 3		
18 to 21 months	7	Diphtheria, Pertussis, Tetanus 4	4	
Smallpox du	ring th	ne first 2 years but preferably dur	ing the 2nd	year

School entry *Poliomyelitis 4, Diphtheria and Tetanus

8-12 years Diphtheria and Tetanus Smallpox Re-vaccination

Over 12 years B.C.G. (see Note (i) of alternative Schedule P)

* The need for maintenance doses of oral poliomyelitis vaccine has still to be determined.

LEPROSY.

Under the Public Health (Infectious Diseases) (Scotland) Amendment Regulations of 1951, this disease became compulsorily notifiable from 1st September, 1951.

This is a disease of rare occurrence in this country and such cases as have been found in Glasgow were foreign seamen or students from tropical countries where this disease is prevalent. In the twenty years prior to notification only five cases came to the notice of this Department.

One case of leprosy was notified in Glasgow during the year. This was a 25 year old Indian graduate in electrical engineering who came to this country on 1961 to continue his studies. The disease first became apparant in December, 1963, when he was admitted to hospital for investigation. His condition was finally diagnosed as lepromatous leprosy and on his discharge from hospital in June he returned to India.

Since 1951 the incidence of the disease has been as follows:-

1951-1953			***		***	Nil
1954-1956			***			5
1957			***		***	1 2
1958 1959	***	***	***	***	***	2
1960-1962						Nil
1963	***	***	***	***	***	1

MALARIA.

This disease, like smallpox and leprosy, usually occurs in seamen or servicemen returning to the city from abroad or in foreign visitors. During 1963 there were 3 cases against 4 in 1962. All were males aged 11, 29 and 57 respectively. There was one death—the 57 year old man. Incidence in recent years was as follows:—

(Average)	1930-38	 	15	1956-60		9
	1939-45	 	24	1961		3
	1946-50	 	30	1962	***	4
	1951-55	 	94	1963		3

TYPHOID, PARATYPHOID AND DYSENTERY. TYPHOID.

The year 1959 was the first time on record that there was no typhoid infections to report; this year marks the second time.

PARATYPHOID.

Seventeen cases in all were notified of which 2 (both males) were institutional cases.

In the South-Western Division on 28th February a girl aged 10 years sickened with a fairly acute pyrexial illness and was treated by her own doctor. There was no definite clinical signs and a physician was called in. A Widal test taken on 13th March gave the following figures:—

		H	0
Salmonella typhi .		 Nil	Nil
Salmonella paratyphi	A	 Nil	Nil
Salmonella paratyphi	В	 1/3200	1/1600

Although this was only a single Widal there seemed little doubt that this was an active paratyphoid infection. The source was obscure. The child had not been out of the house or at school for some considerable time, as she had had measles and rubella during late January to early February. She appeared to be quite well until 28th February. The child was treated at home as there were excellent domestic facilities for isolation. Two faeces specimens submitted to the City Laboratory were reported positive Salmonella paratyphi B—phage type Taunton. All the specimens from the family contacts were negative.

In the south-side of the city there was an outbreak of paratyphoid, the first case sickening on 10th February and the last on 31st March. Altogether there were 12 infections, one focus consisting of two cases and another of three cases plus a symptomless temporary carrier who was responsible for the infection of one of the three cases. Circumstantial evidence pointed to the source of infection being Chinese albumen used to make meringue shells. The meringues are cooked in what is known as a "cold" oven, namely, 280°F., for three-quarters to one hour. This temperature is the lowest used in the various baking processes, in some of which temperatures as high as 430°F. are employed. All the households affected obtained their cakes from the same bakery, and the kind of cake appearing most frequently on the list was meringues. The manager was advised to stop using the Chinese material and to use another type of egg product which had been pasteurised.

While no positive result was obtained to extensive bacteriological examination of the Chinese albumen or of the meringues the outbreak would appear to parallel the much larger outbreak in Edinburgh at the end of 1963. The type of phage recovered from the patients was in the main Taunton.

In July a woman aged 22 years in the Eastern Division was admitted to hospital with a provisional diagnosis of clinical dysentery. Following her admission to hospital the diagnosis of paratyphoid B was established. There were no leads towards a source of infection; she had never been overseas nor had she been in contact with anyone who had been overseas recently; she did not eat any kind of cakes so this was not a case for which we could blame Chinese eggs. She has two children; the younger boy aged 1% years had had some looseness of the bowels for several months. He was admitted to hospital at the end of July and the diagnosis of paratyphoid B was made.

In August in the Eastern Division a boy aged 4 years was admitted to hospital with a history of malaise and pyrexia of one week's duration. A diagnosis of paratyphoid B was made. The only likely source of infection was coconut snowballs which he was known to have eaten on many occasions from a confectioner's shop nearby. Two coconut snowballs and also samples of the four ingredients used in their manufacture, namely, chocolate coverature, coconut, marshmallow and wafer biscuit were examined bacteriologically but no organisms of the Salmonella group were isolated.

In September in the Eastern Division a boy aged 5 years was admitted to hospital after being listless for about 8 days; diarrhoea

began two days before his admission. The diagnosis was paratyphoid B. There was no history of contact with any known source of infection.

Two male babies, one aged $2\frac{1}{2}$ months, the other 7 months, in a general hospital sickened in May; specimens of faeces grew Salmonella paratyphoid B. As a result of the examination of the nursing staff a nurse was found to have a para B. organism on 18th June. She was symptomless. She had been attached to the ward in which the babies were patients and on questioning she appeared to have had a very mild upset approximately four weeks previously.

There were no deaths.

CHRONIC CARRIERS.

There are now 18 city carriers but only 10 in Hawkhead as FA, born 1890, died on 3.1.63 from pneumonia. The two newly detected city paratyphoid carriers, DR and MG, were in fact people previously known to the Department but who had eluded us from 1947 and 1954 respectively. The lists now stand as follows:—

TYPHOID.

- JW, Ward 5, Eastern Division.—He now states that his original illness occurred in 1897 when he was nine years old. Specimens were submitted for the first time for many years, three of faeces and one of urine. Two of the former proved positive. The phage type is now determined as C1.
- JH, Ward 31, S.W. Division.—This man, born 1898, a faecal carrier of Vi phage type E1, submitted two negative pairs of specimens. He was last found positive in 1959.
- EG, Ward 20, Central Division.—Classed as a faecal carrier, born 1901, she has refused to submit specimens since 1933. As her original illness had dated back merely to 1932, it is not certain that she is a chronic carrier.
- MI, Ward 35, S.E. Division.—An immigrant, born 1912, who carries phage type O in his faeces, he was last tested in 1961, when he proved positive. His house is now occupied only by himself, his wife and their three sons. The other immigrants, formerly his housemates, have now found homes of their own.
- RA, Ward 36, S.E. Division.—Detected in 1962, born 1926, he is a faecal carrier of phage type Vi. The original illness is not known. He is the third Oriental immigrant on our lists, having come to this country in 1962 with his wife and daughter in order to obtain bone surgery for himself. In hospital pain due to recurrence of peptic ulceration led to examination of the faeces which proved to be persistently positive. He may be returning to the East. His Widal test gave the following results:— A antigens—1:240 for typhoid and 1:30 for non-specific Salmonella; O antigens—1:30 for typhoid and paratyphoid; Vi antigen—1:20.
- CN, Ward 21, Central Division.—Detected in 1962, born 1889, she was admitted to a general hospital on 14th March, 1962, with a septic thumb, and developed diarrhoea and vomiting on the 20th, the stools proving positive for typhoid. It was decided, however, to regard her as a chronic carrier. The phage type was a degraded Vi strain. She lives alone in a good modern house. Her husband, who died several years ago, was in hospital with

typhoid from 12.7.35 to 4.10.35 but was dismissed after only two successive specimens of faeces had been reported negative. Four pairs of specimens from the female carrier were examined in 1962 after her dismissal from hospital; the faecal specimens were all positive. If she was infected by her husband, then she would be an example of a chronic carrier commencing symptomlessly; for she recalls no definite illness of her own. Medical tradition, it is true, holds that chronic carriers begin as cases with symptoms. We often observe such a beginning and besides it is a useful practice to look for an onset and a date. But, in fact, as our lists attest, many chronic carriers cannot pinpoint any original illness. We therefore seem entitled to conclude that in some instances it must be rather a slight affair.

PARATYPHOID.

- DR, Ward 9, Northern Division.—This woman, aged 89 years, is a faecal carrier of phage type 1. She was admitted to hospital on 11.7.63 as it was thought she required surgical treatment. On admission this was found not to be necessary. A specimen of stool taken on 12.7.63 revealed that she was excreting Salmonella paratyphi B organisms. She was discharged home. This lady had originally been admitted to Knightswood Hospital on 2.7.47 as a case of paratyphoid fever. Frequent tests were carried out but they were persistently positive and eventually she was discharged on 16.8.47 as a carrier.
- MG, Ward 1, Eastern Division.—This woman whose date of birth is 7.9.27 is a chronic faecal carrier of paratyphoid B, phage type 1. She suffered from paratyphoid in 1954. For some time we lost trace of her but she was found in 1963 at an address in Ward 12, Central Division, when she was admitted to a sanatorium as a case of pulmonary tuberculosis. She was immediately recommended for rehousing and was rehoused in the Eastern Division in May, 1963.
- JL, Ward 17, Northern Division, formerly Ward 22, Central Division.—This professional man, born 1887, a faecal and urinary carrier, was last tested in 1936.
- ES, Ward 15, Northern Division.—She is the faecal carrier, born 1889, of phage type 1 whose first positive specimen had been a colostomy sample. She submitted four pairs of specimens, all the faeces specimens being reported positive. She still resides in the same excellent house with only one contact, her daughter, born 1915. The latter, who was inoculated with T.A.B. earlier in 1962, also submitted a pair of specimens. The urine was found positive; but as four subsequent pairs of specimens were negative, the first result was regarded as due to contamination.
- JE, Ward 5, Eastern Division.—A faecal and urinary carrier since 1933, born 1890, she was last tested in 1961, when she was positive.
- LM, Ward 23, Central Division.—A faecal carrier, born 1892, he was last tested in 1939; still working in his shoemaker's business.
- DM, Ward 24, Central Division.—This woman, born 1894, a faecal carrier of phage type 1, was last tested and positive in 1961.
- AL, Ward 27, S.W. Division.—A faecal carrier of phage type 3a, born 1902, she gave two positive specimens of faeces and two negative specimens of urine. Her sister and housemate, MF, born 1900, formerly regarded as a chronic faecal carrier, submitted a negative pair of specimens.
- AW, Ward 6, Eastern Division.—This woman, born 1903, a faecal and urinary carrier, was last tested in 1945, when she was negative.
- JJ, Ward 35, S.E. Division.—This woman, born 1904, a faecal carrier of phage types 1 and 2, was last tested and positive in 1961.

- CM, Ward 32, S.W. Division.—This woman, born 1909, a faecal carrier of phage type 1, again submitted specimens. The faecal specimen proved positive; the urine was negative.
- SM, Ward 13, Central Division.—She is the immigrant, born 1918, who imported phage type Taunton in her faeces in 1953 and was detected in 1957 when she intranatally infected her son; he sickened of paratyphoid positive enteritis with green stools at the age of three days. There have been no tests of recent date.

FEMALE CARRIERS IN HAWKHEAD HOSPITAL.

Турноір-

- JC (born 1888)—6 urine specimens negative; 3 faeces specimens positive and 3 negative. Faeces positive in 1963.
- WP (born 1890)—6 pairs of specimens negative. She gave positive faeces in 1958.
- MD (born 1892)—6 urine specimens negative; 4 faeces specimens positive and 2 negative. Faeces positive in 1963.
- ET (born 1893)—6 pairs of specimens negative. It is not known how this woman is to be classified as regards mode of excretion of infection, if any.
- HM (born 1895)—This carrier gave 6 negative pairs of specimens. She gave positive faeces in 1957.
- MAB (born 1907)—This carrier provided 6 negative pairs of specimens. She gave positive faeces in 1961.
- EFC (born 1917)—This carrier provided 6 negative pairs of specimens. She gave positive faeces in 1957.

PARATYPHOID-

- MMcD (born 1883)—At present classed as a urinary and faecal carrier, she gave 6 negative pairs of specimens. She gave positive faeces and urine in 1961.
- JM (born 1899)—This carrier provided 6 negative pairs of specimens. She gave positive faeces in 1956.
- RE (born 1900)—She gave 6 negative pairs of specimens; so that it is still not known how to classify her as regards mode of excretion of paratyphoid, if any.

All these people had specimens examined during 1963 but only the two mentioned in the Typhoid Section proved positive.

The ward has now been divided into two portions, one portion being used for ordinary psychiatric patients. There is, however, complete separation as regards entrance, lavatory accommodation and staffing. No food is eaten by them in this unit, as they dine in a central dining hall. There seems no risk involved in this practice which makes use of the otherwise much under utilised accommodation.

DYSENTERY.

There were 2,675 registrations as compared with 3,310 in the previous year. Every ward in the city was again affected but as usual there were wide differences between the numbers registered in the various wards; for example, less than 10 cases each from Kelvinside,

Camphill and Langside, while 244 cases were registered from Calton and 238 cases from Dalmarnock. There was a relatively high incidence in Mile-End, Provan, Shettleston and Tollcross, Townhead, Cowcaddens, Hutchesontown, Gorbals and Exchange. Other wards lightly affected with between 10 and 50 cases each were Parkhead, Dennistoun, Cowlairs, Springburn, Park, Maryhill, Partick East, Yoker, Knightswood, Fairfield, Craigton, Pollokshields, Pollokshaws, Govanhill and Cathcart.

Seasonal incidence was as follows :-

		1st	2nd	3rd	4th	
		Quarter	Quarter	Quarter	Quarter	Total
Home		483	636	648	771	2,538
Institutiona	1	22	20	48	47	137

The fourth quarter was the worst.

Nearly half the non-institutional cases stayed at home, the number removed to hospital being 1,480 or 58 per cent. The institutional cases were all removed to hospital with the exception of two who were sent back to their own homes.

The annual institutional figure for dysentery cases was again low; 25 institutions were concerned—12 medical institutions, 8 children's institutions and 5 miscellaneous residential institutions. In 10 instances only a single case was notified. The largest contribution came from a Children's Department home where there were 27 cases distributed over the year, and there was also a fairly large contribution from a hospital where there were 26 cases in the year.

The following table shows the age distribution of the notifications:—

	-1	-5	-15	-55	+55	Total
Home	347	1,312	491	328	60	2,538
Institutional	16	67	24	21	9	137
There were no	death	S.				

UNDULANT FEVER.

In the ten years from 1952 to 1961 inclusive, five cases of undulant fever in Glasgow residents came to the notice of the Department, but in none of these cases was the infection contracted from milk produced in Glasgow. In 1952 two nurses took undulant fever after drinking,

in the Glasgow hospital where they were employed, unpasteurised milk produced in Ayrshire. In the same year a school teacher living in Glasgow contracted undulant fever after drinking unpasteurised milk while on holiday on a farm in Yorkshire. A doctor who took undulant fever in 1956 after being on holiday on a farm in Banffshire and later in Argyllshire considered that her infection must have been contracted during her holiday. The fifth case also occurred in 1956, the patient being a veterinary student who had attended an aborting pig.

Two cases occurring on a farm in Glasgow in 1962 and caused by the drinking of unpasteurised milk produced there were described in last year's Annual Report.

Undiagnosed cases and subclinical infections may be common, and even recognised cases need not come to our notice as the disease is not notifiable, but in order to determine as accurately as possible the incidence of undulant fever in Glasgow in 1963 enquiries were made at all the general and infectious diseases hospitals where cases might have been treated and at all the bacteriological laboratories where the diagnosis might have been established. Only one case was discovered, the patient being a girl aged 11 who, after drinking unpasteurised milk while on holiday on a farm in Aberdeenshire, was admitted to hospital in August for investigation of a pyrexia of undetermined origin. She was found to be suffering from undulant fever, two separate blood tests showing a titre of 1:5,000 against Brucella abortus. She made an excellent response to treatment with tetracycline and was sent home after being in hospital only 16 days.

The eight cases mentioned above occurred in Glasgow over a period of twelve years. Except in the case of the veterinary student, the probable source of infection was unpasteurised milk, but it will be noted that five of the patients had been living on farms, where they might have had the opportunity of drinking raw milk which would have been pasteurised before sale to the public.

DIARRHOEA AND ENTERITIS.

These infections are not yet notifiable and, as information regarding their prevalence was not readily available, comment has up to 1952 been limited to the mortality from this infection in children under two years of age. The increasing prevalence of dysentery and food poisoning in recent years has focused attention on all illness of this type, and from

1953 onwards, all cases of diarrhoea and enteritis coming to the attention of the Department have been recorded.

The following table shows the age distribution of all cases so recorded since 1959 but is not a complete picture of the incidence of diarrhoeal infection in the city:—

			Age Dist	ribution		
Age in Y	Years	1963	1962	1961	1960	1959
-1		 406	360	332	429	428
-2		 24	25	23	21	27
-5		 8	13	10	14	5
5 and	over	 12	11	5	19	3
		450	409	370	483	463
		Secretarios.	and the same of	annual of the last	Section 2	parameter 1

In spite of the very different weather conditions in each of these years there has not been any great variation in incidence. 1963, like 1962, was cold but had more sunshine and less than the average rainfall.

The seasonal distribution of cases in the past five years has been as follows:—

	1963	1962	1961	1960	1959
1st Quarter	 97	74	76	89	95
2nd Quarter	 100	111	106	133	118
3rd Quarter	 141	131	118	125	147
4th Quarter	 112	93	70	136	103
	450	409	370	483	463
			-	-	-

Mortality from these infections, which as recently as 1947 were responsible for no less than 574 deaths in children under two years of age, has been considerably reduced in recent years. In 1963 there was an increase in the mortality from this cause, 34 deaths as against 23 in 1962 and 25 in 1961. Enteritis and colitis (under two years of age) accounted for 14 male and 18 female deaths (of which all but two males were under one year of age) and diarrhoea of the newborn for the death of two female infants.

The mortality rate which had risen from 1.0 in 1958 to 1.85 in 1959 fell to 0.98 in 1962. In 1963 the rate rose again to 1.41 per 1,000

births. The decrease in the number of deaths and in the mortality rate since 1947 is shown in the following table:—

	Ma —1 year	les —2 year	Fema s -1 year -		Total	-1 year per 1,000 Births
1947	339	5	221	9	574	22
1948	156	5	86	3	250	11
1949	100	13	57	6	176	7
1950	50	2	39	3	94	4
1951	37	2	27	1	67	3
1952	42	1	24	1	68	2
1953	27	_	22	-	49	2
1954	20	2	11	1	34	1-6
1955	22	1	14	1	38	1.2
1956	14	1	9	_	24	1-1
1957	7	_	16	-	23	1-0
1958	14	_	8	_	22	1-0
1959	26	1	16	_	43	1.85
1960	12	3	14	_	29	1.26
1961	11	1	13	-	25	1-09
1962	14	2	7	-	23	0.98
1963	12	2	20	-	34	1.41

Deaths from Enteritis and Colitis over two years of age numbered 33 compared with 49 in 1962. All but two were adults over 20 years of age.

One was a girl under 5 years, the other a boy under 15.

FOOD POISONING.

Similarly to 1962, there is a reduction in the number of incidents of food poisoning notified to the Department (139), being the lowest since 1959 (206) but higher than 1958 (121) and 1957 (137). The reduction is due to a drop both in the number of family outbreaks and sporadic cases. Despite an increased number of communal outbreaks, the total number of persons affected continues to become fewer.

	Incidents			Cases		
	1961	1962	1963	1961	1962	1963
Community Outbreaks	6	3	7	52	63	88
Family Outbreaks	57	42	31	162	128	85
Sporadic	194	158	101	194	158	101
Total	257	203	139	550	408	274

The seasonal incidence, as would be expected, shows an increase in the summer months, 5 of the 7 community outbreaks occurring in June, July, August and September.

SEASONAL INCIDENCE.

	J	an.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Community		1	_	_	_	_	1	2	1	1	_	1	_
Outbreaks													
Cases	***	10	_	_	_	_	21	20	20	7	_	10	-
Family													
Outbreaks		1	-	1	3	3	7	1	4	4	4	1	2
Cases		2	-	2	8	6	17	3	11	10	18	2	6
Sporadic		7	8	12	3	16	20	7	7	5	5	4	7

TYPE OF ORGANISM.

	Family Ou	Family Outbreaks		unal	Sporadic	Total
	Incidents	Cases	Incidents	Cases	Cases	Cases
Salmonellae	11	23	_	-	47	70
Staphylococcus						
(Toxin)	-	-	-	-	2	2
(Aureus)		-	1	21	-	21
Clostr. welchii	2	6	1	20	1	27
Unknown	18	56	5	47	51	154
Total	31	85	7	88	101	274

The high percentage of cases (55·1 per cent.) in which the causal organism is not found is due to delay in notification, with resultant prior disposal of the suspected food. The affected person may have been put on treatment by a medical practitioner by the time examination of the faeces has been arranged.

SALMONELLA ORGANISMS.

Salmonella—					
anatum					3
				***	1
blockley	***	***		***	
cholera suis (var. K	unzenc	lorf)	***	1
enteritidis					3
enteritidis var		***	***	***	2
enteritidis var	jena				1
essen					1
haifa	***			***	1
ibadan	***	111	***		2
infantis					5
praha		***			1
stanleyville		***	***	***	1
thompson					1
typhimurium				***	45
Not specified					2
					-
					70

Two of the Salmonella were contracted abroad; Salmonella haifa in Italy, and Salmonella enteritidis (var jena) in Switzerland. Salmonella typhi-murium infections (45) numbered a little less than 1962 (51) and apart from 1958, when comparatively few cases (40) were evidenced, show a continuing reduction in frequency. From an administrative and epidemiological viewpoint S. typhimurium should be written out in full on any documents and not contracted to S.typhi. This contraction has from time to time led to considerable confusion.

Sal. blockley and Sal. ibadan have not been isolated by this Department on any previous occasion. These are additional to Sal. cubana and Sal. brandenberg isolated for the first time in 1962.

In connection with the 139 incidents of food poisoning, samples of suspected food were submitted for examination in 11 instances, of which one revealed a positive related result (Cl.welchii).

Only one death was reported as a result of food poisoning. This was in a patient in a city hospital who succumbed to overwhelming infection of Cl.welchii; this was, however, additional to uraemia.

SCARLET FEVER.

Two hundered and seventy-four cases of scarlet fever were notified during 1963. There have been no deaths from this disease since 1956.

The incidence of scarlet fever during the last five years is set out below :-

	Total Cases	Treated in Fever Hospitals	Treated in Other Institutions	Treated at Home
1959	 926	380	25	521
1960	 649	237	28	384
1961	 417	139	6	272
1962	 278	117	1	160
1963	 274	91	_	183

Of the 274 patients, 114 (41.6 per cent.) were under the age of 5, though only one was under the age of 1; 147 (53.7 per cent.) were aged between 5 and 15 years; and 13 (4.7 per cent.) were over 15.

The seasonal incidence is shown in Appendix Table XIV.

The Park, Kelvinside, Partick East, Kingston and Camphill Wards had one case each, and two cases occurred in the Parkhead Ward which

had been free of the disease for two years. The wards with the largest number of cases were Cathcart (24 cases), Shettleston and Tollcross (20 cases) and Provan (15 cases).

ERYSIPELAS.

The decline in incidence of this disease continued in 1963 when there were 51 cases compared with 53 in 1962 and 65 in 1961. There was the usual preponderance of female cases, 32 compared with 19 males.

The age distribution of these cases was as follows :-

-1	year		_	-25	years	 _
-5	years		_	-35	years	 4
-15	years		2	-65	years	 31
		+65	years		14	

There were no deaths.

The decline in mortality in recent years is as follows:-

			I	Deaths		I	Deaths
1930-39	(average	e)		46	1957	 	1
1940-45	do.			8	1958-1960	 	
1946-50	do.			6	1961-1963	 	_
1951-56	do.			1			

PUERPERAL FEVER AND PYREXIA.

As in previous years these conditions have been discussed in the section "Maternity and Child Welfare" (page 114). As a result of alterations in the International Classification of Causes of Deaths, deaths from these two infections no longer appear under separate headings in the "Short List" but are now included in the group "Complications of Pregnancy, Childbirth and Puerperium."

DIPHTHERIA.

There have been no cases of diphtheria in Glasgow since 1956 and no deaths from this disease since 1954.

The disease in Glasgow, therefore, can meantime claim to be abolished, although in the final analysis this still depends on a maximum level of protective immunisation.

The following table, apart from its historical interest, graphically represents a lesson in the value of intensive preventive medicine.

Year			Cases	Deaths
1940		 	5,190	226
1941		 	4,039	155
1942		 	3,325	90
1943		 	2,919	81
1944		 	2,377	62
1945		 	1,970	33
1946		 	1,458	37
1947		 	502	13
1948		 	286	8
1949		 	154*	5
1950		 	86	-
1951		 	134*	4
1952		 	86	7
1953		 	50	-
1954		 	12*	1
1955		 	2	_
1956		 	1	_
1957-19	963	 	Nil	Nil

(* Includes carriers-3 in 1949, 4 in 1951 and 2 in 1954).

Immunisation.—The following table shows the number of children who completed a primary course of diphtheria immunisation in 1963. The 1962 figures are shown for comparison.

Vaccine used		Under s	1962	Over 5 1963	1962
Diphtheria only	***	19	103	5	7,833
Diphtheria and Pertussis	***	179	438	11	17
Diphtheria and Tetanus Pertussis, Diphtheria and		82	41	13,095	14
Tetanus		12,201	10,592	175	217
		12,481	11,174	13,286	8,081
All ages	1963=	25,767	1962 = 19,255.		

The numbers who received maintenance inoculations in these two years were as follows:—

		Under 5	years	Over 5	
Di dia		1963	1962	1963	1962
Diphtheria		7	22	119	21,145
Diphtheria and Pertussis	***	10	7	68	140
Diphtheria and Tetanus Pertussis, Diphtheria and		135	48	197	80
Tetanus		1,187	99	564	466
		1,339	176	948	21,831
All ages	1963=	2,287	1962=22,007.		

See also page 161 of the School Health Service Section of this Report.

Reference has already been made elsewhere in this Report (page 177) to the new recommendations made in December, 1962, regarding the timing of Immunisation in Childhood.

DISEASES OF THE CENTRAL NERVOUS SYSTEM.

Cerebrospinal Fever.—There was another decrease in the incidence of this disease in 1963, 50 cases as against 59 in 1962. Of these, 36 were male and 14 female cases. All but four were children in the following age groups:—

-1 year -5 years -15 years Males ... 14 17 2 Females ... 8 4 1

Distribution of the cases throughout the five administrative divisions of the city was as follows:—

Central	2	East	10	South-west	9
North	15	South-east	7	Institutions	7

Three wards, Provan, Townhead and Ruchill, had the maximum number of cases (4) and sixteen wards had none. Dalmarnock, Mile-End, Springburn and Kinning Park each had three. Five wards each had two cases and the remaining nine wards, one case. There were 7 institutional cases.

Seasonal incidence in the past four years has been as follows:-

	1963	1962	1961	1980
1st Quarter	 22	15	22	28
2nd Quarter	 10	18	21	8
3rd Quarter	 6	10	5	10
4th Quarter	 12	16	20	6
	50	59	68	52
	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, where the Owner, which is the Owner, whic	and the same of	SANSENGER .	-

In the Short List of Causes of Death this infection appears under the heading of "Meningococcal Infections." During 1963 there were 5 deaths so recorded compared with 4 in 1962 and 7 in 1961. All were males, their ages as follows:—

9 months; 11 months; two aged 1 year; 61 years.

The fatality rate which rose sharply from 5.3 in 1959 to 19.2 in 1960, the heaviest recorded in the previous twelve years, fell to 6.8 in 1962. In 1963 the fatality rate rose again to 10.0.

The incidence and fatality rate from this disease since 1951 is shown as follows:—

Year	Cases Registered	Deaths	Fatality Rate per cent.
1951	126	15	11-9
1952	101	10	9-9
1953	123	12	9-8
1954	90	16	17-8
1955	96	13	13.5
1956	66	8	12-1
1957	57	9	15.8
1958	72	10	13-9
1959	77	4	5.3
1960	52	10	19-2
1961	68	7	10-3
1962	59	4	6-8
1963	50	5	10-0

The comment made by the Department of Health in their Report for 1958 is still valid:—" Cerebrospinal fever still remains a serious infection. Its persistence is noticeable particularly in Glasgow and some surrounding local authority areas. Among the infectious diseases it is still a significant cause of death, although with modern treatment the fatality rate has been greatly reduced. A high proportion of deaths occur in infants where the making of a correct diagnosis is difficult. Cerebrospinal fever is one of the residual problems in the control of infectious diseases."

POLIOMYELITIS AND VIRUS MENINGITIS.

In the year 1960 poliomyelitis almost disappeared from the city, only one case with polio-virus being discovered, but in 1963 not a single case of the disease was diagnosed. Not since the epidemic of 1947 has Glasgow been completely free from the disease and it is a matter for gratitude if not for self-congratulation.

Diphtheria gradually disappeared after the introduction of mass inoculation so that now it is a vague recollection in the minds of the older doctors and members of the public. Poliomyelitis is a more recent scourge but the public memory is short and it is the duty of the medical authorities to keep the child population well protected. Virus diseases such as influenza and poliomyelitis can disappear but they can come again and with such a simple and effective weapon as oral polio vaccine it behoves us to be ready.

VIRUS MENINGITIS (LYMPHOCYTIC OR ASEPTIC MENINGITIS).

This group of illnesses, which may be regarded as less important cousins of poliomyelitis, was very prevalent in 1963. As the acute bacterial infections common before the war, such as diphtheria, scarlet fever, and dare one say typhoid, tend to decline in numbers, this group of acute virus infections, including poliomyelitis, apparently have increased. Certainly they form a large proportion of the admissions to infectious diseases hospitals.

It may not be coincidence that in years when poliomyelitis has been scarce or absent virus meningitis cases have been numerous. It is known that the presence of one virus in the bowel tends to prevent the establishment there of a second virus. In 1960 there were 268 cases of virus meningitis admitted to hospital and in 1963 the total was only slightly smaller, 228 cases. The individual viruses found among these cases form a lengthy list:—

The second secon						
Mumps Virus						19
Coxsackie A7		***	***			12
Coxsackie A9						3
Coxsackie A14						2
Coxsackie B2						3
Coxsackie B4						2
Coxsackie B5						3
Coxsackie B6						1
Coxsackie B1-6	(Poly	valent)				2
ECHO 4						28
ECHO 6						1
ECHO 7		***		***	***	1
ECHO 11						6
ECHO 14						1
Adenovirus				***		6
Unidentified Vir	us				***	8
No Virus Found						130
						-
To	tal				***	228

Only three viruses accounted for more than a handful of cases. Mumps was not so prevalent as in some previous years. The nineteen cases recorded show no obvious seasonal prevalence. Cases occurred throughout the year, mostly in children under 10 years of age.

Coxsackie A7 was mildly prevalent in May and June and the cases were mostly in younger children under 5 years.

ECHO 4 first appeared in April; the peak month was August with ten cases and the last case was admitted in October. This resembles the usual seasonal prevalence of poliomyelitis. Like poliomyelitis too, children were mainly affected, 16 of the 28 cases being under 10 years of age, but young adults were also infected, there being five women between 20 and 40 years of age. Nineteen females were affected as against nine males.

Three of the patients with virus meningitis had muscular weakness which was of limited extent and duration. Two patients with Coxsackie A7 were thus affected, one in the arm and the other in the leg. In the third case the virus results were negative and there was a weakness of one side of the face. In an epidemic year of poliomyelitis these would have been included among the paralytic cases. In the absence of poliomyelitis virus they are noted as a matter of interest.

POLIOMYELITIS VACCINATION.

Some 1,483 injections of inactivated vaccine and 78,636 doses of oral vaccine were given during the year.

Of the 407 persons receiving a primary course of inactivated vaccine, 164 persons received a second injection of Salk vaccine and 243 a third injection of quadruple vaccine, while 374 persons received a third injection and 52 a fourth injection of Salk vaccine.

A primary course (3 doses) of oral vaccine was given to 17,505 persons; 3,540 persons received a single dose of oral vaccine as reinforcement to two injections of Salk vaccine and 21,098 persons received a fourth booster dose of oral vaccine.

As remarked in the Annual Report of last year, the vaccination rate in young children falls during the winter months and is followed by a low level of protection in the Spring. Young children being particularly vulnerable to poliomyelitis it is most necessary to secure, as far as possible, their protection before the summer. To increase the number of young children between six months and two years of age vaccinated special measures were taken in April, May and June. Vaccination sessions were advertised and by mass publicity and personal approach parents were encouraged to seek protection for their children. Over 40 per cent. of first attendances for vaccination at the child welfare clinics were in the period April to June. The percentages of first attendances for vaccination at the child welfare clinics were 16-0 in the first quarter, 43-4 in the second quarter, 24-7 in the third quarter and 15-9 in the fourth quarter.

In the period September to December, the School Health Service completed a primary course of oral vaccination for 2,569 children and gave a fourth booster dose to 19,628 children.

The following table gives an estimate of the vaccination position at the end of the year and shows a fall in the percentage vaccinated under school age. There were 73,270 children under school age vaccinated

with two injections of Salk or three doses of oral vaccine at the end of 1962 and 65,371 at the end of 1963, a fall of 7,899 or 10.8 per cent. The absence of poliomyelitis in 1963 will account in large measure for the fall but the need for unflagging effort is clearly indicated.

POLIOMYELITIS VACCINATION POSITION AT 31ST DECEMBER, 1963.

		Vaccinated	with		
	(a)	Two Injections of	(b) Three		
		Salk Vaccine or	Doses		Per cent.
		Three Injections	of		of
		of Quadruple	Oral		Estimated
Age		Vaccine	Vaccine	Totals	Population
8 months and over		98	1,928	2,026	_
1 year		325	10,762	11,087	48.9
2 years		5,609	10,635	16,244	73.6
3-4 years		28,720	7,294	36,014	81.9
5-19 years		239,185	29,692	269,045	91.5
20-29 years		72,054	26,850	98,736	58.7
Others		46,364	57,696	104,060	
Totals		392,355	144,857	537,212	_

CHILDREN UNDER SCHOOL AGE RECEIVING A FULL COURSE OF VACCINATION.

8 months		ge	 	No. 1,928	Per cent. of Estimated Population
1 year			 	10,963	47-1
2 years			 	15,005	68.0
3-4 years			 	32,524	74.0
	Tota	al	 	60,420	

Full Course of Vaccination means-

(a) Three injections of inactivated (Salk) vaccine;

(b) Two injections of inactivated (Salk) vaccine followed by one (two in certain cases) dose of oral vaccine;

(c) Four doses of Quadruple Vaccine; and

(d) Three doses of oral vaccine.

Number of persons given a third injection of inactivated (Salk) vaccine	294,453
Number of persons given a reinforcing dose of oral vaccine after two injections of inactivated (Salk) vaccine	37,543
	331,996
Number of persons given a fourth injection of inactivated (Salk) vaccine	59,536
Number of persons given a fourth reinforcing dose of oral vaccine	61,876
	121,412

ENCEPHALITIS.

Viral Encephalitis—There have been only sporadic cases of this infection since the small outbreak which occurred in 1937.

There were no cases in 1963.

POST-ENCEPHALITIS LETHARGICA.

A group of cases, 23 in number, the remaining survivors of a Glasgow epidemic which affected 70 persons in all, has been under the continuous supervision of Dr. Ashie Main since 1923. There were no deaths during the year. The following tables show the physical capacity of the remaining 23 cases in the Spring of 1964:—

PHYSICAL CONDITION.

			Males	Females	Total
Fit for housework			_	6	6
Fit for employment			4	-	4
Unfit but going about			3	3	6
Bedridden at home			-	2	2
Cases in General Hospi			2	_	2
Cases in Mental Hospit	al	***	2	-	2
Cases untraced		***	1	-	1
					-
			12	11	23
				-	

These cases are classified as follows :-

Group I.	Recovery complete	Spring	1963	Spring	1964
Group II.	Recovery incomplete :-				
	Class A. Mental Retardation	1		1	
	Class B. Mental Instability	1		1	
	Class C. Nervous Instability	11		11	
			13		13
Group III. Group IV.	Perversion of Conduct Parkinsonians :—		-		-
	Class A. Normal Mentality	2		2	
	Class B. Abnormal Mentality	5		5	
			7		7
Group V.	Died		1		-
			24		23
			-	-	THE REAL PROPERTY.

There has been little change in the condition of these 23 cases during the past year.

MEASLES.

Measles is not notifiable in Scotland and cases are registered mainly on information received from Head Teachers and School Attendance Officers. The figures are therefore incomplete, but they give a reasonably accurate picture of the incidence in the school age group. There were 2,296 registered cases in 1963, this being a slight increase in the previous year; 317 cases were admitted to hospital. There were 3 deaths, all in children under 5. Most of the cases occurred during the first quarter, this being a continuance of the higher incidence noted in the last quarter of 1962. There was a high incidence in the adjoining wards of Pollokshaws and Cathcart which accounted for almost a third of the city total.

The recorded incidence of Measles during the last 5 years was :-

Year		Registered Cases	Deaths	Fatality per cent.
1959	 	11,403	7	0.06
1960	 	588	_	_
1961	 	6,190	6	0.09
1962	 	2,066	2	0.09
1963	 	2,296	3	0.13

The quarterly percentage incidence of measles during 1963 and the previous two years was :-

PERCENTAGE OF YEAR'S TOTAL.

			1961	1962	1963
1st quarter			72	3	69
2nd quarter			26	19	23
3rd quarter			1	15	2
4th quarter	***	***	1	63	6
			100	100	100
			-	-	-

The age and sex distribution in 1963 was :-

Age			Male	Female	Total
-1			 42	28	70
-5	***		 242	192	434
-15			 914	861	1,775
15+	***	***	 		
			1,204	1,092	2,296
			to the same of	Section 1975	-

RUBELLA.

(GERMAN MEASLES).

Rubella is not notifiable and, as in measles, cases are registered mainly on information from school sources. There were 88 cases registered in 1963. The average for the previous five years was 370 cases per year. Fourteen cases were admitted to hospital mainly because they were residing in Children's Homes etc. The incidence of Rubella must be higher than that suggested by the above figures, as it is recognised that the majority of persons have become immune due to natural infection before they reach adult life.

The illness itself is usually trivial and its importance is only due to the high incidence of foetal damage that occurs when women develop it during the first three months of pregnancy. Accuracy of diagnosis is therefore important among the contacts of pregnant women, but it is obviously undesirable to protect children from becoming infected.

The age and sex distribution was :-

Age			Male	Female	Total
-1	 	***	-	_	-
-5	 		5	2	7
-15	 		35	38	73
15+	 		1	7	8
			41	47	88
			ADDRESS	Service Co.	-

WHOOPING COUGH.

There was a marked increase in the incidence of Whooping Cough in 1963, 2,695 cases being notified compared with 272 cases in 1962, but this is merely a return to the average figures of recent years after two exceptionally low years. Of the 1963 cases, 13 per cent. were under one year of age and 33 per cent. between one and five years; 401 cases were admitted to hospital and there were two deaths, one in a child under 6 months and one between one and two years. These are the first deaths since 1960.

The annual incidence of Whooping Cough since 1940 has been :-

			Cases	Deaths	Fatality per cent.
Average	1940-44	 	4,463	92	2.06
Average	1945-49	 ***	3,321	32	0.96
Average	1950-54	 	4,794	13	0.26
Average	1955-59	 	2,276	3	0.11
1960		 	3,745	4	0.11
1961		 	824	_	_
1962		 	272	_	_
1963		 ***	2,695	2	0.07

This shows that although the incidence of Whooping Cough in epidemic years has remained fairly steady, the number of deaths has fallen very markedly especially since 1955. This fall coincides with both the more extensive use of Whooping Cough vaccination and the introduction of effective antibiotic treatment of the disease and its complications. The continuing high incidence of the disease shows the need for persuading considerably more parents to have their babies vaccinated against Whooping Cough (in the form of "Triple Antigen").

VACCINATION AGAINST WHOOPING COUGH.

The number of children under five years given a primary course of vaccination against Whooping Cough in 1963 was 12,380, the average for the past five years being 11,992. Less than half the population under five years has been protected against Whooping Cough. It is not considered necessary to vaccinate children over five years against Whooping Cough.

CHICKENPOX.

There were 2,149 cases of chickenpox in 1963, 1409 fewer than in 1962.

The incidence of this disease in the last thirty-one years is shown as follows:—

1930-39	(aver	age)	***	 	6,354
1940-49	(aver	age)		 	5,377
1950-54	(aver	age)		 	7,154
1955-59	(aver	age)		 	5,109
1960				 	8,989
1961				 	3,180
1962				 	3,558
1963				 	2,149

Cases are removed to hospital only in special circumstances, e.g., when occurring in institutions, children's homes, etc. During 1963, 112 cases were removed to hospital. The disease is probably much more prevalent than the bookings indicate, for it is mostly on information obtained from school attendance officers that cases are registered. The distribution throughout the city was as follows:—

Central				 	285
North				 	379
East				 	361
South-e	ast			 	659
South-v	vest			 	399
Institut	ions	and H	arbour	 	66
					2,149

The wards chiefly affected were Cathcart (352), Provan (208), Govan (127) and Pollokshaws (121).

More than two-thirds of the total was recorded in the first half of the year. Incidence was highest in the first quarter (853) and reached its peak in March, when there were 341 cases. There were no deaths.

PEMPHIGUS NEONATORUM.

There were no cases of this disease in 1963.

RABIES.

No case of rabies is known to have occurred, but there was some increase in 1963 in the number of instances of persons having been bitten by dogs or other animals reported by the police investigation.

During 1963, 631 persons were bitten by dogs, 31 seriously enough to require stitching of the wound. In 1962 there were 576 and in 1961, 517. One person was bitten by a rat, one by a cat, and two by monkeys.

TRACHOMA.

Trachoma or granular ophthalmia is an infection of the eyes to which certain races are specially subject. It is now known to be caused by a large group of atypical viruses known as the psittacosis-lymphogranulomo trachoma (P.L.T.) group.

The members of this group form inclusion bodies and have visible elementary bodies and are susceptible to sulphonamides and some antibiotics.

Attention in Glasgow was first directed to trachoma in 1905 when it became known that a number of patients suffering from this disease were receiving treatment in various eye dispensaries in the city. The patients were for the most part aliens who were passing through Glasgow on their way to Canada or the United States, and no information was known at that time regarding the distribution of trachoma in the general population. In 1914, however, following an outbreak involving 20 cases in an industrial school the Corporation made trachoma notifiable under the provisions of the Infectious Disease (Notification) Act, 1889.

Outdoor treatment is carried out in a clinic in the South-side of the city and new cases and contacts are followed up by health visitors.

The majority of the immigrants were from the Baltic—Russians, Poles, Lithuanians and Finns. There were other immigrants from the same areas who had lived in Lanarkshire employed in the mines and ironworks.

During the year five cases were notified as suffering from trachoma. In the table below is shown the number of cases notified and the number verified each year for the past six years.

Year	1	No. of New Cases Notified	Definite	Doubtful
1958		5	5	-
1959		2	2	_
1960		4	4	-
1961		_	_	_
1962		3	3	_
1963	***	5	5	_

During the year two died and three were transferred to other areas, leaving 67 cases on the register at the end of 1963.

NUMBER OF CASES ON REGISTER.

Yea	r	I	Definite Cases	Total
1958	***	 	86	86
1959		 	81	81
1960		 	79	79
1961		 	74	74
1962		 	67	67
1963		 	67	67

At the special clinic patients made a total of 777 attendances and during the same period the nurse made 80 home visits. No home contacts developed the disease during the year and no patients required treatment in hospital.

ANTHRAX

No case of anthrax was reported to the Department during 1963. Since the Public Health (Infectious Diseases) (Scotland) Amendment Regulations, 1960, came into operation on 1st October, 1960, whereby anthrax became notifiable to the Medical Officer of Health, no cases have been reported.

INFECTIONS DUE TO L. ICTERO-HAEMORRHAGIAE AND L. CANICOLA. WEIL'S DISEASE.

(Leptospirosis ictero-haemorrhagiae.)

No case of Weil's disease was reported during 1963. Starting in December, 1962, the sewermen were offered inoculation against this disease with a vaccine kindly prepared by Dr. J. C. Ives, Consultant Bacteriologist, Glasgow Royal Infirmary. Eighteen men were given

a booster dose, having previously been inoculated by three injections in 1959; fifteen men received a complete course of three injections of 1 cc. each at monthly intervals. No side effects were reported.

Blood samples from three of the men receiving booster doses showed a titre of 1: 100 against L. ictero-haemorrhagiae three months later. Of the eight blood samples from men receiving a complete course, three showed titres of 1: 10, one showed a titre of 1: 30, and four showed titres of 1: 100. Those blood samples were taken one month after completion of course.

L. CANICOLA INFECTION.

Six cases of L. canicola are known to have occurred during 1963. There were no deaths.

The first case in April concerned a plumber, age 32, who was admitted to hospital with headache, vomiting, sweating and pain in the limbs. No jaundice developed in this case and the diagnosis remained in doubt until an agglutination test showed a titre of 1: 10,000 for leptospira canicola. This family possessed a dog which was stated never to have been ill but was killed in a road accident before being examined.

In June a 23-year-old male with a history of generalised aches and pain followed by vomiting and frontal headache was admitted to hospital as a case of meningitis. Aseptic meningitis was confirmed and found to be due to L. canicola, two blood samples taken one week apart showing a titre of 1: 3,000 and 1: 30,000. A possible source of infection was the family pup, but this was not confirmed.

A divinity student resident in Scotland but studying in England returned to vacation employment on a pig farm outwith the city boundary. He suffered a sharp acute illness and was admitted to a tever hospital with pyrexia of unknown origin. Investigation revealed a degree of liver dysfunction and subsequent investigations showed a very marked rising titre against L. canicola.

The three remaining cases were all admitted to hospital as cases of aseptic meningitis in which the causative organism was shown to be L. canicola. In one of these cases, a neighbour's dog with which the patient had played was found to be suffering from canicola fever.

SCABIES.

For the fourth year in succession, a fall has occurred in the number of cases of this disease during the year, 1,539 persons in 683 families being involved, as against 1,630 persons in 668 families in 1962.

The following table shows the position in 1963 in each of the five public health divisions, as compared with 1962.

		No. of	Families	No. of	Cases
Division		1962	1963	1962	1963
Central		 155	119	284	199
Northern		 138	190	323	398
Eastern		 146	176	543	461
South-Eastern	***	 132	120	282	287
South-Western		 97	78	198	194
		668	683	1,630	1,539
		-	Secretaria de la constitución de	Name and Address of the Owner, where the Owner, which the	Desirements of the last of the

RESPIRATORY DISEASES OTHER THAN TUBERCULOSIS.

In 1963, 3,708 cases of primary pneumonia and 33 cases of influenzal pneumonia were notified, the corresponding figures for 1962 being 3,459 and 16.

Over 89 per cent. of persons notified were treated in hospital, the highest percentages being in the lower age groups. The notifications of primary pneumonia and the number and percentage treated in hospital are shown in Table A.

TABLE A.

NOTIFICATIONS OF PRIMARY PNEUMONIA AND
NUMBER TREATED IN HOSPITAL.

Age in Yea	ars	Notifications of Primary Pneumonia	Number Treated in Hospital	Percentage Treated in Hospital
Under 1		 841	785	93.3
1-4	***	 598	576	96.3
5-44		 608	535	88-0
45-64		 726	616	84.8
65 and over		 935	803	85.9
All Ages		 3,708	3,315	89.4

Of the 33 cases of influenzal pneumonia notified, 13 were treated in hospital.

The following table gives the age and sex distribution of cases of primary pneumonia:—

TABLE B.

NOTIFICATIONS OF PRIMARY PNEUMONIA

AGE AND SEX DISTRIBUTION.

Age in Years	Male Notifi- cations	Per- centage of Total	Female Notifi- cations	Per- centage of Total	Notifi- cations for both Sexes	Per- centage of Total
Under 1	519	25.4	322	19-3	841	22-7
1-4	354	17-3	244	14-7	598	16-1
5-44	344	16.8	264	15-9	608	16-4
45-64	418	20.5	308	18-5	726	19-6
65 and over	409	20.0	526	31-6	935	25.2
All Ages	2,044	- 100-0	1,664	100-0	3,708	100-0

Notifications of pneumonia are higher in males than females, except in the age group "65 years and over". The ratio of male to female notifications was 1,228: 1.

TABLE C.

AGE AND PERCENTAGE DISTRIBUTION OF THE NOTIFICATIONS OF PRIMARY PNEUMONIA FOR THE YEARS 1961, 1962 AND 1963.

	1			196	2		1963
Age in Years		Notifi- cations	Per- centage of Total	Notifi- cations	Per- centage of Total	Notifi- cations	Per- centage of Total
Under 1		674	17.9	791	22.9	841	22-7
1-4		. 686	18-2	613	17-7	598	16-1
5-44		. 721	19.2	703	20.3	608	16-4
45-64		. 767	20.4	609	17-6	726	19-6
65 and over	r	914	24.3	743	21.5	935	25.2
All Age	es	3,762	100-0	3,459	100-0	3,708	100-0

Notifications were more by 249 or 7.2 per cent. than in 1962, the increase occurring at ages under 1 year and over 45 years, the increase at these ages being partly compensated by a fall at the intervening ages.

Notifications and deaths from primary pneumonia and deaths from bronchitis are highest in the first quarter of the year and lowest in the third quarter.

TABLE D.

QUARTERLY INCIDENCE OF NOTIFICATIONS AND DEATHS OF PRIMARY PNEUMONIA AND INFLUENZAL PNEUMONIA AND OF DEATHS FROM BRONCHITIS.

	P	rimary P	neumoni	a	Influenzal Pneumonia				Bronchitis		
Period	Noti- fica- tions	Per cent. of Total	Deaths	Per cent. of Total	Noti- fica- tions	Per cent, of Total	*Deaths	Per cent. of Total	Deaths	Per cent. of Total	
1st Quarter	1,750	47-2	390	52.8	27	81.8	81	85-2	482	53.6	
2nd Quarter	633	17-1	114	15.5	2	6-1	5	5.3	141	15-7	
3rd Quarter	406	10-9	96	13-0	-	-	2	2-1	94	10.4	
4th Quarter	919	24.8	138	18-7	4	12.1	7	7.4	183	20-3	
	3,708	100-0	738	100-0	33	100.0	95	100-0	900	100-0	

^{*} Deaths include deaths from Influenza and Influenzal Pneumonia.

The death rate per million for respiratory diseases other than tuberculosis was 1,806 compared with 1,393 in 1962 and 1,534 in 1961. (Pneumonia of the new-born is not included).

TABLE E.

DEATHS FROM RESPIRATORY DISEASES
OTHER THAN TUBERCULOSIS.

Year	Pneumonia (excluding Pneumonia of the new-born)	Bronchitis	Influenza	Other Respiratory Diseases	Totals
1951	528	740	183	118	1,569
1952	532	690	119	134	1,475
1953	428	627	74	106	1,235
1954	432	545	26	113	1,169
1955	545	700	40	109	1,394
1956	579	656	50	105	1,390
1957	575	588	161	90	1,414
1958	606	820	48	106	1,580
1959	700	911	117	99	1,827
1960	533	658	43	94	1,328
1961	692	701	115	108	1,616
1962	542	777	36	100	1,455
1963	738	900	95	126	1,859

There were 738 deaths from pneumonia, an increase of 36.2 per cent. on the 1962 figures and of 6.6 per cent. on the 1961 figures. Deaths from bronchitis number 900, an increase of 15.8 per cent. on 1962 and of 28.4 per cent. on the 1961 figures. The increase in deaths from pneumonia and bronchitis occurred in the first quarter of the year.

TABLE F.

Monthly Incidence of Deaths from Primary Pneumonia and Bronchitis in 1960, 1961, 1962 and 1963.

	Dea	2000000		nonia	De	aths fro	om Bronchitis	
	1960	1961	1962	1963	1960	1961	1962	1963
January	 69	84	74	105	113	123	157	133
February	 64	134	59	168	108	120	78	196
March	 43	59	63	117	40	39	85	153
April	 50	50	53	42	55	49	54	65
May	 46	47	33	47	44	42	45	45
June	 30	33	35	25	18	36	33	31
July	 24	48	30	33	27	17	30	44
August	 32	35	33	31	34	30	27	31
September	 40	21	32	32	35	23	38	19
October	 42	31	27	42	37	39	42	41
November	 41	68	41	41	44	73	68	44
December	 52	82	62	55	103	110	120	98
	533	692	542	738	658	701	777	900

The monthly incidence of deaths from pneumonia and bronchitis in the years 1960, 1961, 1962 and 1963 are shown in Table F. The high incidence of deaths from pneumonia and bronchitis was associated with the low temperature in January and February when the mean daily temperature was below freezing point on 35 days compared with 4 days in 1962, and while March was warmer than March of 1962 68.9 per cent. of the deaths from pneumonia and bronchitis during the month occurred in the first 14 days. In addition there was some prevalence of influenza during February and March.

TABLE G.

DEATHS FROM PNEUMONIA AND BRONCHITIS

AND DEATH-RATES PER 100,000 OF THE ESTIMATED POPULATION

FOR THE PUBLIC HEALTH DIVISIONS OF THE CITY.

		Pneu	monia	Bron	chitis	Death Rate per 100,000 Estimated Population		
Division		Number	Per Cent.	Number	Per Cent.	Pneumonia	Bronchitis	
Eastern	***	173	26.1	196	23-2	72.5	82-2	
Northern	***	158	23.8	200	23.7	77-0	97-4	
Central	***	114	17.2	147	17-4	54.2	69-9	
South-Eastern	***	130	19-6	168	19-9	59-5	76-9	
South-Western	***	88	13.3	133	15-8	56-3	85-0	
		663*	100.0	844*	100-0	64-4	82-0	
		-	-	-	MATERIAL PROPERTY.	-	-	

^{*} Not included-74 Institutional and 1 Harbour.

^{† 56} Institutional cases not included.

Death rates from pneumonia and bronchitis were highest in the Northern Division and much higher than in 1962, and while the pneumonia rate in the South-Western Division and the bronchitis rate in the Central Division corresponded closely with the 1962 rates, the rates otherwise were higher.

TABLE H.

DEATHS FROM PNEUMONIA AND BRONCHITIS—1963 AGE AND SEX DISTRIBUTION.

(Percentages of Column Totals given in Brackets).

Age in Years	Male		emale	Both	h Sexes	3	Male		NCHITIS emale	Both	h Sexes
Under 1	57 (15	5.8) 34	(9:0)	91	(12.3)	- 1	(0.2)	6	(2.3)	7	(0.8)
1-4 years	10 (2.8) 4	(1.0)	14	(1.9)	2	(0.3)	1	(0.4)	3	(0.3)
5-44 years	11 (3	3.1) 9	(2.4)	20	(2-7)	11	(1.7)	8	(3.0)	19	(2-1)
45-64 years	58 (16	6-1) 51	(13.5)	109	(14.8)	263	(41-2)	72	(27.5)	335	(37-2)
65 and over	224 (62	2.2) 280	(74-1)	504	(68-3)	361	(56-6)	175	(66.8)	536	(59:6)
All ages	360 (100	0.0) 378	(100-0)	738	(100-0)	638	(100.0)	262	(100.0)	900	(100-0)

Table H shows the age and sex distribution of deaths from pneumonia and bronchitis during the year.

Of the 360 male deaths from pneumonia, 78·3 per cent. were over 45 years of age (62·2 per cent. over 65 years of age) and of the 638 male deaths from bronchitis 97·8 per cent. were over 45 years of age (56·6 per cent. over 65 years of age). Over 70 per cent. (73·1 per cent.) of the increase in male deaths from bronchitis over the 1962 figures occurred in the age-group 45-64 years. Of the 378 female deaths from pneumonia 87·6 per cent. were over 45 years of age (74·1 per cent. over 65 years of age) and of the 262 female deaths from bronchitis 94·3 per cent. were over 45 years of age (66·8 per cent. over 65 years of age). Ninety-five per cent. of the increase in female deaths from pneumonia over the 1962 figure occurred at ages 65 years and over. There were more female than male deaths from pneumonia in 1963.

The ratio of male to female deaths from pneumonia in the age-group 45-64 was 1·14 and in the age-group 65 years and over 0·80; the comparable ratios of male to female deaths from bronchitis being 3·65 and 2·06.

TABLE I.

PROPORTIONATE MORTALITY PER CENT. OF DEATHS FROM ALL CAUSES, OF DEATHS FROM PNEUMONIA, INFLUENZA AND BRONCHITIS.

(1), (4), (7)—Deaths from All Causes (2), (5), (8)—Deaths from Pneumonia, Influenza and Bronchitis (3), (6), (9)—Proportionate Mortality Per Cent.

		MALE		Fi	EMALE		BOTH SEXES			
Age in years—	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
Under 1	414	58	14.0	308	40	13.0	722	98	13-6	
1-4	66	13	19.7	35	5	14.3	101	18	17-8	
5-44	457	23	5.0	324	21	6.5	781	44	5-6	
45-64	2,508		13.5	1,393	131	9.4	3,901	469	12-0	
65 and over	The state of the s	609	15.7	4,343	495	11.4	8,212	1,104	13-4	
All ages	7,314	1,041	14.2	6,403	692	10.8	13,717	1,733	12-6	
All ages 1962	7,106	864	12.2	6,118	461	7.5	13,244	1,325	10-0	

In Table J is shown the comparison of the death-rates from pneumonia and bronchitis in Glasgow for the years 1960, 1961 and 1962 with those of other cities in Scotland and England. The pneumonia rates for the English cities were higher than those in Scotland in 1961 and 1962. For bronchitis also the Scottish cities have lower rates than those in England. Glasgow has the highest incidence for bronchitis in Scotland. The association of bronchitis with atmospheric pollution is well known and the bronchitis death rates in the industrial North of England reflect the atmospheric conditions in that area.

Compared with other European countries, however, the death rates from bronchitis in England and Wales and in Scotland are much higher. The difference is largely an index of the atmospheric pollution.

TABLE I.

DEATH-RATES PER 100,000 OF THE POPULATION FOR PNEUMONIA AND BRONCHITIS FOR SCOTLAND, THE SCOTTISH AND CERTAIN ENGLISH CITIES.

		F	neumonia			Bronchitis				
		Death	Rate per	100,000	Death	Rate per	100,000			
		1960	1961	1962	1960	1961	1962			
*Scotland		38-6	47-7	42.5	42.5	48.5	47-6			
*Aberdeen		33.1	38-3	33.9	36-3	34.5	36-6			
*Dundee		54.8	59-1	55.0	38-4	39.4	51.2			
*Edinburgh		43.2	60.5	59-1	49.2	55.3	45-4			
*Glasgow	***	48.0	61-1	49.5	66-2	72.2	77-2			
†Birmingham		50.8	67.5	72.5	75.5	76.5	84.0			
†Liverpool		117.0	114-2	100-1	87.7	99-1	106-9			
†Manchester		60.2	70.6	70.7	100-1	130-7	144-0			
†Leeds		71.3	94.0	87.6	76.5	95-6	95.0			
†Salford		88-1	83.9	91.5	171.9	156-2	167-5			
†Oldham		50.3	94.5	84.6	100-6	143-1	137-8			

These figures are based on data from-

* Registrar General's Annual Reports for Scotland.
† Registrar General (England and Wales) Statistical Reviews.

INFLUENZA.

As this disease is not notifiable, a measure of its incidence must be taken from the following sources:—

- 1. Isolation of Virus—reported from the Weekly Return to the Public Health Laboratory Service.
- 2. New Claims from Ministry of National Insurance.
- 3. Verified Cases of Influenzal Pneumonia.

	5	Para-Influenza Virus Serology Isolation				Influenza Virus Serology Isolation				on			
	1	2	3	1	2	3	A	В	0	A	В	C	Total
1st Quarter	5	-	7	2	-	-	83	2	7	2	-	-	108
2nd Quarter	-	-	2	-	-	1	46	1	6	1	-	1	58
3rd Quarter	_	_	2	_	_	1	8	-	10	_	-	_	21
4th Quarter	-	1	-	-	-	-	16	-	19	1	-	1	38
	-				-						-		-
Total	5	1	11	2	-	2	153	3	42	4		2	225
	-	-	Minne	-	-	-	-	Mennie	-	-	-	-	-

Virus Type A predominated particularly in the first and second quarters of the year, and the proportionately higher number found in the first quarter coincides with a rise in the number of new sickness claims, particularly in weeks 8, 9 and 10.

The rise in sickness benefit caused by this outbreak of influenza is only a fraction of that seen in 1957 when, with Virus A/Asian as the causal organism, the sickness rate rose to 26,604 (week 39) and 30,039 (week 40).

The figure, however, does compare with the 1952 epidemic of Virus Type B, when in weeks 10 and 11 the number of new benefits claimed rose to 9,772 and 9,697 respectively.

WEEKLY RETURNS OF NEW CLAIMS FOR SICKNESS BENEFIT.

		1962				1963	
Week ending	October	9	5,620	Week ending	October	8	5,417
		16	5,638			15	5,642
		23	5,098			22	5,484
		30	5,381			29	5,483
	November	6	5,607		November	5	5,465
		13	5,973			12	5,760
		20	5,958			19	5,945
		27	6,832			26	6,529
	December	4	6,463		December	3	6,319
		11	6,030			10	6,199
		18	5,349			17	5,905
		25				24	
		1963 >	8,286			}	10,520
Week ending	January	1				31	
		8	6,972				-
		15	7,830			1964	
		22	7,738		February	5	7,583
		29	7,426			12	8,478

WEEKLY RETURNS OF NEW CLAIMS FOR SICKNESS BENEFIT-continued.

February	19 26	9,756 10,523
March	5 12 19 26	9,425 7,918 6,146 4,993
April	9 16 23 30	5,041 5,048 4,076 5,194 4,850
tc		

The third measure of the incidence of influenza, namely, the seasonal distribution of verified cases of Influenzal Pneumonia, further substantiates the occurrence of a minor outbreak of influenza in the first quarter of 1963. Twenty of the 33 cases were treated at home, 5 in hospital and 8 in other institutions.

SEASONAL DISTRIBUTION OF VERIFIED CASES OF INFLUENZAL PNEUMONIA (1963).

January	 3	July	 _	
February	 11	August	 _	
March	 13	September	 _	
April	 _	October	 2	
May	 _	November	 _	
June	 2	December	 2	
Total	 29	Total	 4	Grand Total 33
	-		-	

Deaths from influenza (95) were more common compared to last year (36) but these were mainly in the upper age group. This figure may be partly influenced by the severe climatic conditions experienced in the first quarter of 1963.

DEATHS FROM INFLUENZA.

(including Influenzal Pneumonia).

	Male		Female	Total
Under 5 years	 1	(1)	- (2)	1 (3)
5-45 years	 1	(1)	4 (1)	5 (2)
45-65 years	 17	(4)	8 (4)	25 (8)
Over 65	 24	(8)	40 (15)	64 (23)
Totals	 43		52	95
	-		SERVICE .	DESCRIPTION OF THE PERSONS ASSESSMENT

(Last year's figures in brackets).

TUBERCULOSIS.

THE GENERAL TREND OF TUBERCULOSIS

Incidence.—There were 863 cases of pulmonary tuberculosis notified in 1963 compared with 927 in 1962 and 1,021 in 1961. There were 116 cases of non-pulmonary tuberculosis compared with 117 in 1962 and 137 in 1961. The trends of incidence are shown below.

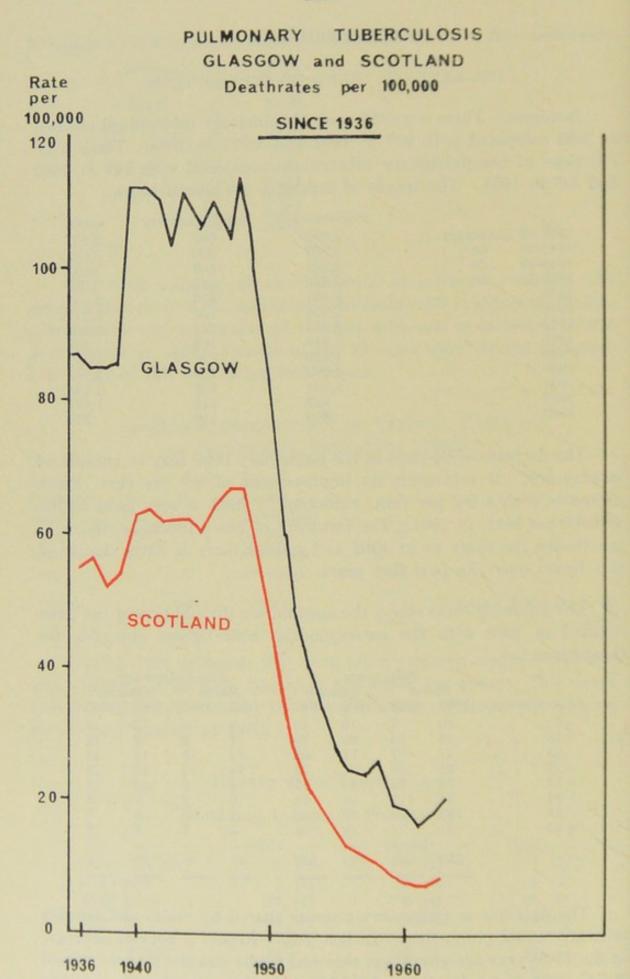
			Pulmonary	Non-Pulmonary	Total
1935-39 (Average)		1,650	657	2,307	
1940-44	do.	- F	2,367	690	3,057
1945-49	do.		2,674	468	3,231
1950-54	do.		2,297	312	2,609
1955	***	***	2,181	278	2,459
1956		***	2,024	193	2,217
1957			3,925	172	4,097
1958			1,340	167	1,507
1959			1,159	120	1,279
1960			1,092	109	1,201
1961	***	***	1,021	137	1,158
1962	***		927	117	1,044
1963			863	116	979

The decrease of 64 cases in the pulmonary total may be considered satisfactory. It represents an improvement of 6.9 per cent. which compares with a 9.2 per cent. reduction in 1962, a very good figure, and 6.5 per cent. in 1961. The incidence of non-pulmonary disease is practically the same as in 1962 and indeed there is little change in this figure over the past five years.

The following table shows the age and sex distribution of the cases notified in 1963 with the corresponding 1962 figures alongside for comparison:—

		Pulmonary				Non-Pulmonary			
		Ma	les	Females		Males		Females	
Age Groups		1963	1962	1963	1962	1963	1962	1963	1962
-5		10	7	10	13	3	4	3	1
- 15		35	33	30	25	4	3	7	12
-25		47	77	71	68	11	15	12	10
-35		75	68	71	74	14	12	19	23
-14		75	83	51	65	4	3	10	5
-55		91	117	35	44	6	2	6	5
- 65		123	134	27	23	1	2	5	6
+65	***	94	71	18	25	4	5	7	9
		550	590	313	337	47	46	69	71
		Section 1	SECURITION .	Name and Address of the Owner, where the Owner, which is the	-		-	-	-

The decrease in pulmonary cases is shared by males and females in nearly equal proportions. In last year's Report a notable decrease in the 15-25 year age-group was seen and credit was given to the school B.C.G. campaigns for this. In 1963 a further considerable fall has



YEAR

occurred in males of this age so that 47 cases were recorded compared with 77 in 1962 and 93 in 1961. The adolescent and young adult females, who were always a problem in the past, have not this year shared the improvement of their male contemporaries.

In 1962 there was an increased incidence in males between 35 and 55 years but it will be seen that in 1963 this unfavourable trend was reversed. Only the oldest men over 65 years show a significant increase.

In the non-pulmonary category there are only minor fluctuations of incidence.

An innovation in case finding was introduced in March when arrangements were made for pre-employment X-rays of immigrants recruited to the Corporation Transport Department. Two hundred and thirty-seven were X-rayed at Cochrane Street and five cases of tuber-culosis were discovered.

Work was continued by the Mass Radiography Unit on the X-ray survey of Model Lodging-Houses. Those in the Eastern Division were visited and 256 persons were X-rayed. As a result four cases of pulmonary tuberculosis were notified. This was not such a productive effort as the similar work done in the Central Division in 1962.

The Divisional staffs continued their important work with household contacts. Mantoux testing and B.C.G. vaccinations cover almost all the child contacts. Complete coverage of adult contacts by X-ray is more difficult and usually only about 85 per cent. of contacts over 15 years are persuaded to attend for X-ray. Another important aspect of the Health Visitors' work is the effort to persuade patients to continue the necessary course of treatment. The taking of drugs for two years when the patient already feels well is very apt to go by default. Many cases have relapsed and even become chronic because of this. The Chest Physicians are aware of this danger and are doing all they can to combat it. There is no doubt that a substantial reduction of these relapses would do much to reduce the pool of infection in the city and to cut down the deaths which occur in partially treated cases of several years' standing.

PULMONARY TUBERCULOSIS.

Incidence.—The case rate per 100,000 in Glasgow is shown on the next page for certain years along with the comparable incidence in other large towns in Scotland and England.

PULMONARY TUBERCULOSIS: GLASGOW AND OTHER LARGE TOWNS.

	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Glasgow	 219	204	203	189	367	126	109	103	97	89	84
Edinburgh	 169	170	136	129	90	148	59	55	56	47	48
Aberdeen	 131	123	109	123	171	52	73	48	46	34	26
Dundee	 164	171	161	140	148	252	135	57	71	63	67
Liverpool	 175	144	139	131	133	104	215	58	54	59	53
Manchester	 106	96	96	86	88	78	71	59	58	59	47
Birmingham	 111	111	103	93	77	84	64	71	64	65	56

Mortality.—There were 214 deaths from pulmonary tuberculosis in 1963. The death-rate per 100,000 of population is 20·8 compared with 18·1 for 1962. This is the first time the rate has increased since 1958 and some explanation must be sought.

In the Table VIII (A and B) at the end of the report the deaths from different causes are sub-divided according to age and sex. This tabulation shows that 160 males died from pulmonary tuberculosis as against 54 females. This preponderance of male deaths is usual but what is somewhat unusual is that no males under 35 years died from this cause whereas there were 119 deaths from pulmonary tuberculosis in men over 55 years of age. This is the age-group which is notably affected by chronic respiratory disease. It will be found in the appropriate sections of the report that there was also a considerable increase in deaths from bronchitis and pneumonia in 1963 compared with 1962 and this can be attributed in part to the very severe weather in February, 1963. There were 777 deaths from bronchitis in 1962 and 900 in 1963, an increase of 123 or 16 per cent. The month of February accounts for practically the whole of this increase, deaths rising from 78 in 1962 to 196 in 1963, i.e., an increase of 118. Similarly with pulmonary tuberculosis, deaths increased from 189 to 214 in 1963, an addition of 25 or 13 per cent. The February figures account for an addition of 23 deaths, from 12 in February, 1962, to 35 in February, 1963. To sum up, a partial explanation of the increased death rate is the number of chronic and relapsed cases with lung damage who succumb during severe weather.

The rates shown below have been computed on the Registrar-General's standard.

Pulmonary Tuberculosis: Glasgow and Other Large Towns.

Death Rates per 100,000 — 1953-1963.

Glasgow Edinburgh Aberdeen	 1953 40 23 14	1954 34 19	1955 28 10 8	1956 25 9	1957 24 7	1958 26 6	1959 20 4	19 5	1961 18 3 5	1962 18 3 2	1963 21 3
Dundee	 17	19	15	10	9	10	6	5 5	6	3	4 7
Liverpool Manchester	 33	29	24	18	16	14	14	11	11	10	7
Birmingham	 28 24	27 20	19	15 14	14	10	12	12	8 7	7	8 7

Glasgow continues to lag behind the other large towns. It is noted that there has been some set-back as regards the death-rates in other towns in 1963.

NON-PULMONARY AND DISSEMINATED TUBERCULOSIS.

Incidence.—There were 116 notified cases of non-pulmonary tuberculosis in 1963, compared with 117 in 1962 and 137 in 1961. The corresponding rates per 100,000 were 11 in 1963, 11 in 1962 and 13 in 1961. Included in the 116 were 11 cases of tuberculous meningitis. The ratio, therefore, is 1 to 10.5.

NON-PULMONARY NOTIFICATIONS.

	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Total Cases	 295	241	278	193	172	167	120	109	137	117	116
Meningitis only	 56	50	42	22	23	15	9	6	7	8	11
Ratio	 5.3	4.8	6.6	8.8	7.5	11.1	13.9	18.2	19.6	14.6	10.5

These figures give rise to some concern for although no infant had tuberculous meningitis, there were four cases in the age-group 1-5 years. The total of meningitis cases was the highest since 1958 and the ratio, given above, was the worst since 1957. This has happened in spite of the fact that more infants were given B.C.G. in 1963 than ever before.

Tuberculous Meningitis: Notifications 1953 to 1963.

			1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Males-													
0-1			-	1	1	1	1	1	-	-	1		
1-5		***	12	9	9	3	6	1	2	1	1	2	2
Over	5		20	16	13	2	3	8	2	1	1	3	2
Females-	_												
0-1			_	1	1	1	-	_	-	_		-	-
1-5			11	4	6	4	2	1	_	2	_	-	2
Over	5		13	19	12	11	11	4	5	2	4	3	5
			-	_	-	_	-	-	-	-	-	-	-
			56	50	42	22	23	15	9	6	7	8	11
			Name of Street	-	-		-	_	-	-	-	-	Sec.

Mortality.—In 1963 there were four deaths from non-pulmonary tuberculosis compared with twelve in 1962 and the death rate fell from 1.2 per 100,000 to 0.4 per 100,000.

Intimation of Primary Tuberculosis.—The number of cases of primary tuberculosis in children intimated to the Department fell further to 15 compared with 17 in 1962 and 27 in 1961. As indicated last year it is difficult to know whether this is a genuine reduction

or whether notification has replaced intimation. The distribution of cases was as follows:—

INTIMATION OF PRIMARY TUBERCULOSIS, 1963.

Division		Male	Female	Total
Central	 ***	2	2	4
Northern	 ***	2	_	2
Eastern	 	2	1	3
South-Eastern	 	_	The State of	-
South-Western		2	4	6
		_		-
		8	7	15
		-		2000

GLASGOW—CASES OF PULMONARY TUBERCULOSIS NOTIFIED AND DEATH-RATE PER MILLION IN EACH MUNICIPAL WARD DURING 1963 AND 1962.

	Pulmonary Cases Death-Rate Males Females Both Sexes											
					Fem							
Chattlasten and	Tall	000	1963	1962	1963	1962	1963	1962				
Shettleston and Parkhead			20 11	18 13	12	15 2	189 247	161 181				
Dalmarnock			22	14	17	10	311	166				
Caltan			25	9	7	10	345	223				
Mile-End	***	***	14	24	12	10	216	105				
Dennistoun			13	6	8	9	88	44				
Provan			30	43	20	24	151	129				
Cowlairs	***		14	14	11	4	237	282				
Springburn		***	15	17	8	6	124	124				
Townhead		***	13	11	7	5	210	252				
Exchange		***	7	4	7	5	816	115				
Anderston		***	16	13	3	12	276	160				
Park			14	10	6	12	57	168				
Cowcaddens		***	9	9	8	11	308	58				
Woodside			6	15	6	3	168	317				
Ruchill			14	23	15	13	298	384				
North Kelvin			7	13	6	9	140	463				
Maryhill	***		8	10	11	3	215	254				
Kelvinside			1	5	5	5	51	104				
Partick (East)			10	3	6	4	314	_				
Partick (West)			3	3	5	7	51	49				
Whiteinch			6	7	6	3	252	100				
Yoker			9	12	8	7	157	153				
Knightswood			18	20	8	9	75	148				
Hutchesontown	***		11	10	6	9	58	217				
Gorbals		***	9	30	6	7	289	318				
Kingston			9	21	8	13	55	322				
Kinning Park			19	11	7	12	192	47				
Govan		***	13	15	13	12	165	199				
Fairfield			12	11	7	3	53	103				
Craigton	***		23	15	7	10	145	85				
Pollokshields	***		17	23	8	12	28	85				
Camphill		***	6	10	3	3	105	52				
Pollokshaws	***		21	23	17	21	227	142				
Govanhill	***		15	14	5	10	216	86				
Langside	***	***	10	14	4	10	158	157				
Cathcart			22	22	8	11	175	111				
Institutions Harbour	***	,	56	48	4	6	_	-				
riarbour	***	***	2	7		-	-	-				
Total for	City	***	550	590	313	337	208	181				
			No.	BECOMMON .	010	001	200	101				

From a study of this table of geographical distribution it is found that the overall fall in notified pulmonary cases is paralleled in the wards with large populations in housing estates. For example, new cases in Provan have dropped from 67 in 1962 to 50 in 1963, in Pollokshaws from 44 to 38, and in Ruchill from 36 to 29. On the other hand certain wards in the Eastern Division are out of line with the city as a whole. Cases in Dalmarnock have increased from 24 to 39 and in Calton from 19 to 32. Parkhead and Dennistoun also show smaller increases. No ready explanation comes to mind for this feature of the epidemiology. One possible way of improving the position is to increase the number of health visitors in the area and this has been done.

The death-rate was also high in Dalmarnock and Calton, but owing to the small populations of most of the wards small variations in the number of deaths give rise to great fluctuations in the rates.

B.C.G. VACCINATION.

The level of B.C.G. vaccination was well maintained during 1963 when 26,862 vaccinations were done, practically the same as in 1962 when the number was 26,834. As would be expected from the decreasing notifications the number of contacts vaccinated continues to fall. The vaccination of new-born infants in hospital reached a record total of 11,439.

Schools Campaign.—The campaign for the vaccination of 13-yearold school children was continued as before with publicity in Corporation Transport. The Tuberculosis Health Visitors carried out follow-up visits where parental consents were not returned. The staff of the schools and the Education Department again gave the help which is so essential for the success of the campaign.

One hundred and eighteen schools were visited and pupils of the 13-year-old age-group numbered 15,936 as compared with 16,186 in 1962. Numbers in this age-group have been dropping since 1960. Fifteen thousand, one hundred and eighty-one consents were obtained representing 95·3 per cent. of the possible and very similar to the 95·5 per cent. rate of 1962. There was a small percentage (4·5) of absenteeism and 14,500 Mantoux tests were read, of which 12,035 were negative reactors. The number of children given B.C.G. vaccination was 12,007.

The negative reactor rate was 83.0 per cent. compared with 82.4 per cent. in 1962 and 80.5 per cent. in 1961. The continued improvement in this figure is gratifying.

In the 1963 campaign measurement was made of the 2,465 positive Mantoux reactions. If an arbitary dividing line is adopted at the level of 20 mm. diameter induration, there were 607 children whose reactions were larger than this.

The bulk of the work of the campaign was done between 2nd October, 1963, and 14th November, 1963. The follow-up to vaccinate absentees was carried out between 2nd and 19th December, 1963.

A statistical account of the 1963 campaign is now set out.

1. Public Response—Parental Consent to Vaccination.

Public Schools	 Schools 112	Pupils 15,626	Contents 14,878	% Response 95·2
Private Schools	 6	310	303	97-7
	118	15,936	15,181	95.3
	-	and the latest designation of the latest des		-

2. Loss due to Absence from School.

Public Schools Private Schools	(1) Consents 14,878	471	of (1) 3·1	No. Tested 14,407 300	Visit 205	(1) 1·4		(1) 4·5	Read 14,202
	15,181	474	3.1	14,707	207	1.4	681	4.5	14,500

3. RESULTS OF MANTOUX TESTS.

Male—	Tests	Positive	Per Cent.	Negative	Per Cent.
Public Schools	 7,184	1,274	17-7	5,910	82-3
Private Schools	 127	7	5.5	120	94.5
Total	 7,311	1,281	17.5	6,030	82.5
FEMALE-	-	-	-		_
Public Schools	 7,018	1,173	16.7	5,845	83.3
Private Schools	 171	11	6.4	160	93-6
Total	 7,189	1,184	16-5	6,005	83.5
All Results	 14,500	2,465	17.0	12,035	83-0
	programme	-	-	prosperations.	-

4. B.C.G. VACCINATION.

Male—			Negative Reactors	Not Vaccinated	Per Cent.	Vaccinated
Public Schools		***	5,910	7	0.1	5,903
Private Schools			120	_	_	120
Total	***		6,030	7	0.1	6,023
FEMALE-						
Public Schools			5,845	20	0.3	3,825
Private Schools			160	1	0.6	159
Total			6,005	21	0.3	5,894
Both Sexes			12,035	28	0.2	12,007

Routine Vaccination Scheme.—Indoor vaccination of family contacts are now very small in number but the diminishing numbers of contacts are still dealt with very fully by the Divisional staffs.

The total of all vaccinations for the year (26,862) brings the cumulative total of vaccinations in the City since 1950 to 239,366.

B.C.G. VACCINATIONS — GLASGOW, 1950/1963.

	2.0.0.	1100111111	0110	0		, 1000	,1000.		
Group	Centr	re	1950/5	8 1959	1960	1961	1962	1963	Total
Indoor	Moffat Street		842	25	10	9	3	6	895
Contacts	Carnbooth		511	11	20	12	6	5	565
	Millbrae		518	47	42	33	32	19	691
N.B.									
Infants	Millbrae		842	69	80	9	9	2	1,011
	Total		2,713	152	152	63	50	32	3,162
Outdoor I	Health and Wel	fare Dept.	12,699	1,464;	1,454	1,128	1,008	999	18,752
Contacts	R.H.S.C.		985	25	-	-	-	-	1,009
	Total		13,683	1,489	1,454	1,128	1,008	999	19,761
Nurses	Hospitals		1,615	122	136	112	174	89	2,248
	Langside Colle	ege Trainee	s 104	12	23	18	6	14	177
	Logan and	Johnston							
	Trainees		104	34	_	28	28	30	224
	H.V. Train	ees	4	8	3	3	-	-	18
	Total		1,827	176	162	161	208	133	2,667
Students	University		595	61	46	28	36	44	810
	Others		73	6	8	6	-	-	93
	Total		668	67	54	34	36	44	903
	Total Primary	Groups	18,891	1,884	1,822	1,386	1,302	1,208	26,493

Group	Centre 19	950/58	1959	1960	1961	1962	1963	Total
N.B.	Maternity Hospital l	3,183	1,987	2,049	3,128	2,890	3,040	26,277
Infants	Robroyston Hospital	7,574	1,584	1,422	1,637	1,658	1,677	15,552
	Stobhill Hospital	6,516	1,650	1,524	1,363	1,361	1,315	13,729
	Western District Hosp.	3,812	1,098	1,008	1,091	1,361	1,278	9,648
	Southern General Hosp.	1,534	407	795	714	573	723	4,746
	Eastern District Hosp.	528	517	867	769	488	479	3,648
	Redlands Hospital	519	475	646	603	485	340	3,068
	Maternity Hospital— Ross Annexe	1,054	1,264	2,163	1,958	1,720	1,838	9,997
	Belvidere Hospital	-	-	-	-	405	749	1,234
	Total 3	34,720	8,982	10,474	11,263	11,021	11,439	87,899
Scholars	Schools 4	18,586	11,582	13,598	12,443	12,111	12,007	110,327
Others	Various	4,565	1,664	1,924	1,886	2,400	2,208	14,647
	Total 5	53,151	13,246	15,522	14,329	14,511	14,215	124,974
	Total Secondary Groups 8	37,781	22,228	25,996	25,592	25,532	25,654	212,873

Cumulative Total — 239,366.

106,762 24,112 27,818 26,978 26,834 26,862 239,366

Total All Groups

X-RAY SECTION.

The unit functioned well throughout the year and the usual high standard of work was produced. Mrs. Campbell resigned as radiographer and was replaced by Mrs. Hoyland.

It was decided that School Teachers should in future be asked to attend for X-ray only on alternate years. After several years of yearly X-ray it had become evident that most cases of tuberculosis had been discovered and the risk to school children had been greatly reduced. The yield of new cases in recent years has been very small indeed. Another potent factor in reaching the decision was the loss of teaching time involved which could be ill afforded with the present shortage of teachers. This change has resulted in a reduction of miniature X-rays of teachers from 3,971 in 1962 to 1,727 in 1963. This fall of 2,244 accounts for the bulk of the reduction in the work done during the year.

An innovation was the X-ray of immigrant recruits to the transport service which was started in March, 1963, and proved quite valuable in revealing new cases of tuberculosis, the main object of this department.

The following table shows the recall rates :-

Miniatures	***	***	Males 4,296	Females 4,401	Total 8,697
Recalls	***	***	282	176	458
Recall Rate	***	***	6.6%	4.0%	5.3%

The corresponding rates in 1962 were 4.5 per cent. (male), 2.7 per cent. (female), and 3.6 per cent. (total). It will be seen that there is a considerable increase in the recall rates and of course a high recall rate increases costs. Actually there was an increase of 59 X-rays in the recalls total compared with 1962. The total number of large films taken remained almost the same as the previous year and there was a decrease in the number of large films in which no abnormality was detected.

The 8,697 miniature films taken in 1963 were classified as follows:—

MINIATURE FILMS, 1963.

			Males	Females	Total
1.	Contacts, New		 453	562	1,015
2.	Contacts, Return		 75	90	165
3.	Superannuation		 1,710	556	2,266
4.	Sick Pay		 371	810	1,181
5.	School Children		 2	11	13
6.	Special Surveys		 57	31	88
7.	Nationalised Serv	rices	 7	1	. 8
8.	Industrial		 _		_
9.	Other Local Aut	horities	 44	1	45
10.	Miscellaneous		 658	1,291	1,949
11.	School Teachers		 682	1,045	1,727
12.	Transport		 237	3	240
			4,296	4,401	8,697

Many reports are issued on these 70 mm. films without recall for a large film. This especially applies to pre-employment examinations where the clinical findings of the examining doctor can be supplemented. All cases where there is a suspicion of active lung disease are recalled, and it is only when the person recalled defaults from attending that the miniature film is used for the final report. One of the contacts, a Pakistani woman, comes to mind in this context. She defaulted on recall but had fairly extensive disease and was with difficulty persuaded to attend the Chest Clinic. She is not included in the active cases recorded below, as she never had a large film. Such cases are fortunately rare.

The 721 full-size films consisted of 458 recalls and 263 primary full-size films. The corresponding figures for 1962 were a total of 728 made

up of 399 recalls and 329 primary. The findings for 1963 are classified as follows:—

FULL-SIZE FILMS, 1963.

			Phth		Dlaws	Post	Non-		
	Groups		Active	In- active	isy	Root Lesions	Lesions	N.A.D.	Total
MA	LE—								
1.	Contacts, New		8	9	3	3	2	18	43
2.	Contacts, Return		1	1	1	-	1	3	7
3.	Superannuation		31	59	11	-	9	49	159
4.	Sick Pay		26	15	2	-	2	13	58
5.	School Children			-	-	-	-	-	-
6.	Special Surveys		-	3	-	-	1	11	15
7.	Nationalised Services		-	-	-	-	-	-	-
8.	Industrial		-	_	-	1	-	-	-
9.	Other Local Authorit	ies	_	1	-	-	-	1	2
10.	Miscellaneous		16	20	4	-	14	78	132
11.	School Teachers		2	6	3	-	1	12	24
12.	Transport		5	1	-	-	2	7	15
	Total		89	115	24	3	32	192	455
			-	-	-	-	-	_	-
FEN	MALE-								
1.	Contacts, New		3	10	5	1		18	37
	Contacts, Return		5	1	_	_	2	4	12
3.	Superannuation		6	7	2	_	3	7	25
4.	Sick Pay		15	17	1	_	3	15	51
5.	School Children		_	_	_	_			_
6.	Special Surveys			_	_	-	1	15	16
7.	Nationalised Services		_	_	_	_	_	-	-
8.	Industrial		_	_	-	_	-	-	-
9.	Other Local Authorit	ies	_	_	_	_	_	_	_
10.	Miscellaneous		7	22	7	1	8	53	98
11.	School Teachers		4	8	_	_	1	14	27
12.	Transport			-	_	_	_	-	-
	Total		40	65	15	- 2	18	126	266
			-	-		_	_		200

The 129 cases identified as active phthisis compare with 99 in 1962. Not all of these are new cases but the increase and the size of the total make the work of the department worth while.

There were also two cases of neoplasm discovered, a man of 59 years and a woman of 46 years. The latter was a very early case, symptomless, and the clinicians seemed hopeful of effective treatment.

VENEREAL DISEASES.

The total number of new cases of venereal disease increased from 1,424 in 1962 to 1,433 in 1963. The increase was due to a rise in the number of male and female cases of acute gonorrhoea. There was a fall in male acute syphilis.

The comparative figures for the past six years are shown below.

TABLE I.

	Acute	Syphilis	Acute Go	Acute Gonorrhoea			
Year	Males	Females	Males	Females			
1958	11	3	1,510	180			
1959	10	2	1,605	167			
1960	39	14	1,366	173			
1961	16	2	1,205	189			
1962	22	4	1,198	200			
1963	19	4	1,209	201			

The attendance of patients suffering from non-venereal conditions remains high.

TABLE II.

Year		Males	Females	Total
1958	 	1,536	311	1,847
1959	 	1,675	341	2,016
1960	 	1,590	460	2,050
1961	 	1,596	536	2,132
1962	 	1,499	480	1,979
1963	 	1,508	517	2,025

SYPHILIS.

Acute Syphilis.—The number of male patients fell from 22 to 19, while acute syphilis in females remained the same at 4.

Late Syphilis.—The number of patients suffering from late syphilis was 31, which compares with 24 in 1962. The following table shows the changes in incidence that have occurred during the past years.

TABLE III.

Year			Males	Females	Total
1958			50	33	83
1959			39	26	65
1960	***	***	28	21	49
1961			36	18	54
1962			19	5	24
1963			22	9	31

Congenital Syphilis.—There were no cases of congenital syphilis under 1 year and only 4 cases at all ages.

TABLE IV.

Year		All Cases	Cases — 1 Year
1958	 	 14	-
1959	 	 15	-
1960	 	 20	_
1961	 	 9	_
1962	 	 10	-
1963	 	 4	-

Ante-Natal Blood Tests.—During the year 9,500 ante-natal blood tests were carried out at Ante-Natal Clinics and 0.06 per cent. were found positive.

TABLE V.

Year			Number	Percentage Positive
1958	 		8,214	0.13
1959	 		7,969	0-11
1960	 		8,269	0-14
1961	 		8,382	0.05
1962	 	\	8,081	0-17
1963	 		9,500	0.06

During the same period a further 2,962 tests, of which 0.2 per cent. were positive, were carried out by general practitioners.

GONORRHOEA.

Acute Gonorrhoea.—The incidence in acute gonorrhoea in males has increased from 1,198 in 1962 to 1,209 in 1963 and there has been an increase in the number of female patients from 200 to 201 (Table I).

Chronic Gonorrhoea.—Male chronic gonorrhea has shown a slight increase, while females have decreased slightly. Table VI shows the position during the past five years.

TABLE VI.

Year		Males	Females	Total
1958	 	5	7	12
1959	 	9	25	34
1960	 	1	16	17
1961	 	4	11	15
1962	 	1	15	16
1963	 	2	12	14

TABLE VII.

OTHER DISEASES, INCLUDING

SOFT CHANCRE AND NON-SPECIFIC VENEREAL INFECTION.

Year	 	Males	Females	Total
1958	 	841	121	962
1959	 	812	129	941
1960	 	821	131	952
1961	 	959	153	1,112
1962	 	965	191	1,156
1963	 	989	225	1,214

The total number of new and transferred-in cases of all types attending for the first time is shown in Table VIII.

TABLE VIII.

Year			Total New Cases	Transferred-in
1 car			New Cases	Transferred-in
1958	 		 4,622	268
1959	 		 4,855	262
1960	 	***	 4,680	236
1961	 		 4,734	260
1962	 		 4,609	196
1963	 		 4,721	168

GENERAL.

Venereal Diseases in Seamen.—The ad hoc clinics continue to serve seamen coming to the port. The numbers suffering from both acute syphilis and acute gonorrhoea have decreased. The proportion of seamen to total cases (Black Street and Broomielaw Clinics) is shown in Table IX.

TABLE IX.

	A	cute Syphili	is	Acu	Acute Gonorrhoea			
			Per-			Per-		
Year	Total	Seamen	centage	Total	Seamen	centage		
1958	 10	4	40.0	1,494	143	9-5		
1959	 8	5	62.5	1,578	110	7.0		
1960	 32	5	15.6	1,360	92	6-7		
1961	 16	4	25.0	1,205	107	8.8		
1962	 22	9	40.9	1,198	117	9.7		
1963	 19	7	36.8	1,209	99	8.2		

Attendance of Patients.—Patients attending for the first time at the various centres numbered 4,721 an increase from the figure of 4,609 in 1962 (Table VIII). There were 17,901 attendances of new and old patients and 138 patients were admitted for in-patient treatment, 35 being admitted direct without previous attendance at a clinic. The ad hoc clinics dealt with 98.7 per cent. of all acute venereal disease coming to the diagnostic and treatment centres.

	Ad		
		t Centres	
	Males	Females	All Centres
Acute Syphilis (includes Primary, Secondary and Latent in the First Year of			
Infection)	17	4	23
Acute Gonorrhoea	1,193	201	1,410
Total Acute Venereal Disease	1,210	205	1,433
Late and Congenital Syphilis	20	12	35
Chronic Gonorrhoea	2	12	14
		-	-
Total Chronic Venereal Disease	22	24	49
	_	-	-
Other Diseases, including Soft Sore, Septic			
Balanitis, etc	979	225	1,214
Non-Venereal	1,504	517	2,025

Follow-up of defaulters.—With the rapid treatment of both acute syphilis and acute gonorrhoea, a fairly high proportion of the patients default before completing treatment. Efforts have been made to obtain the attendance of defaulters by follow-up letters and by personal visits of the health visitors in the case of females and the senior attendants in the case of males. During the year the health visitors attended 547 female patients on 697 occasions and persuaded 52·1 per cent. of the patients to resume treatment. The wrong name and address had been given by 70 patients. In the follow-up of male patients, 915 follow-up letters were sent to 635 patients who defaulted during treatment but only 28·1 per cent. resumed treatment. On 238 occasions the wrong name and address was given. The low percentage of males resuming treatment is unsatisfactory but it is probable that most patients have received sufficient treatment to reduce the danger of spread of infection.

Contact Tracing.—The contact tracing, as well as defaulter follow-up work, is carried out by the staff of the male ad hoc centres in respect of males and by the health visitors attached to the female centres in the case of females. The following table shows the follow-up by the male and female clinics:—

CONTACT TRACING AND FOLLOW-UP OF SOURCES OF INFECTION.

Referred by Male Clinics.

		Wives	Consorts
Attended Did not attend		96 (78·7%) 26 (21·3%)	49 (53·9%) 42 (46·1%)
D.	, ,	1 5 1 611 1	

Referred by Female Clinics.

	Husbands	Consorts
Attended	 7 (63·6%)	2 (33·3%)
Did not attend	4 (36·4%)	12 (66·7%)

SECTION VIII

MENTAL SERVICES.

Community care for those suffering from mental disorder continued on the same lines as in 1962. Satisfactory progress was made in training personnel of the Health and Welfare Department in this field, and the medical, nursing and welfare staff are reaching a high degree of competence. With regard to the range of services offered by the local authority under the Mental Health (Scotland) Act there is no alteration to report.

Questions remain to be answered about the role of the local authority in caring for mental detectives and the mentally ill. There is a waiting list, particularly in certain age groups, for admission of mental defectives to hospital. It has been suggested that some patients in hospital, not requiring medical, nursing or custodial care, could be transferred to the care of the local authority. Senior Occupation Centres also have a waiting list. The Scottish Society for Mentally Handicapped Children make a considerable contribution to the needs of the mentally defective children outside the Education Services. The Department's first centre for children of school age is in the course of preparation.

In the care and after-care of the mentally ill the health visitors are playing an important and increasing part. Other aspects of this community care are still subject to considerable controversy among recognised authorities on the subject. For example, a few years ago when the Act was in preparation local authority hostels for patients discharged from mental hospital were advocated. Persons of working age and especially males were thought of as the priority group. Some now think that such hostels are more appropriately run by the hospital authorities. Others say that hostels are particularly required to relieve the burden of the mental hospitals in caring for the elderly. One consultant psychiatrist recently suggested that local authority effort should be directed to sheltered workshops rather than hostels. On the other hand, leaders of the I.T.O. (Industrial Therapy Organisation), whose work is the rehabilitation of mental patients for industry, say that sheltered workshops are better managed by people with industrial know-how and commercial contacts and completely free from local or central control. In relation to this organisation the suggested roles of the local authority seems to be helping with initial finance before an I.T.O. unit becomes self-supporting and providing hostel accommodation for trainees, which is where this brief discussion began.

To limit after-care by the local authority to home visiting by health visitors would seem to be taking a narrow view of the authority's duties. As described in last year's report there is a club in Springburn for ex-patients of Woodilee Hospital run in local authority premises and largely by health visitors. This club does useful work but members are restricted and turnover is limited. This difficulty of a patient requiring permanent after-care inevitably arises even in the field of home visiting. In spite of this the provision of social facilities to help rehabilitation and alleviate loneliness may be one of the most useful contributions which a city authority can make. Behind all these matters lies the question of finance.

Training of Personnel.—As has been said, the staff of the department continued to benefit from the excellent teaching facilities which exist in the West of Scotland for instruction in mental disorder and social services.

Five of the medical officers attended the intensive three weeks' course on Mental Deficiency, and other four doctors attended the similar Introduction to Psychiatry course.

Three medical officers, including the doctor who runs the Handicap Assessment Clinic, attended a London course on Cerebral Palsy and Allied Disorders.

Because of difficulty in placement for practical work the number of health visitors sent for the five-month course was reduced. Seven Glasgow health visitors were given instruction and for the first time medical officers of the department shared this privilege. The Principal Medical Officer for Mental Health and a Medical Officer of the Maternity and Child Welfare Section were permitted to attend the lectures, discussions and case conferences. This was the third course and brought the number of trained health visitors to thirty-four.

A new two-year course for social workers was started in the autumn at the Scottish College of Commerce. One of the two welfare officers seconded for training had been doing good work in the care of mental defectives.

Two of the senior welfare officers attended the concentrated course for Mental Health Officers organised by the Edinburgh Public Health Department.

CARE OF MENTAL DEFECTIVES.

Assessment Clinic.—This was the first full year of work done at the Glenfarg Street clinic and it was obvious that the centre was filling a need in the community. Professor J. H. Hutchison attends in a consultant capacity. One-hundred and five sessions were held at the clinic during the year.

	Male	Female	Both Sexes
New patients attending	36	23	59
Total patients attending	49	37	86
Total attendances	129	113	242

The Sister attached to the Clinic is now spending the greater part of her time in the clinic and in home visitation and counselling. She made 504 home visits to the 86 patients who attended the clinic.

Nursery Centre.—This centre for mentally defective children under five years of age was accommodated at Moffat Street until the late summer when the building had to be evacuated because of redevelopment plans. It then moved to Broomhill Place in the west of the city. A "temporary" hutted building was specially adapted and equipped for the purpose and has proved excellent. The building is spacious and bright with open ground for outdoor activity. The centre has 25 places and continues to take children for a five-day week. Unfortunately some of the children taken at Moffat Street could not be transferred for geographical reasons and their places were filled by a new intake from other areas of the city. Eleven boys and fourteen girls were on the roll at the end of the year and the results achieved by the Matron and her staff are very gratifying. Eleven whole-time and two part-time workers make up the staff of the centre.

Laurieston House Centre.—The Scottish Society for Mentally Handicapped Children continue to make the best of this centre in premises which are not ideal. The demand for their services is greater than they can meet. There is accommodation for twenty children, including six helpless or cot cases. This is filled from a different part of the city each day. A few children because of the chance location of their home are taken for two days each week. The numbers attending at the end of the year were as follows:—

	Male	Female	Both Sexes
Under 5 years	23	17	40
Over 5 years	22	27	49
Total	45	44	89
	-	pend	good

The seventy volunteer ladies who staff the centre are divided into groups with a leader for each day. These volunteers have become very experienced in handling the children and of course have an intimate knowledge of each child from their work at the centre and from home visiting.

Short-Stay Home.—The Stewart Home at Cove, also run by the Scottish Society, continued its invaluable work in providing holidays for mentally handicapped children and temporary relief for the parents. During 1963 one-hundred and eighty-four Glasgow children were given holidays varying from two to eight weeks.

DEFECTIVES UNDER GUARDIANSHIP AND INFORMAL CARE.

In February, 1963, there were two retirals from the Mental Welfare Section of the Department, a Medical Officer and a Welfare Officer. The Mental Welfare Officer had known many of the mental defectives and their guardians for a long time. Such an intimate personal knowledge takes some time to replace.

In 1962 the number of patients under guardianship was reduced from 1,235 to 601, largely due to review under the new Act and placing patients under informal care. In 1963 there was again a reduction as follows:—

	City	Country	Total
On roll at 31st December, 1962	340	261	601
Enrolled during year	6	3	9
Taken off roll	46	7	53
Remaining on roll at 31st December, 1963	300	257	557

With the present trend, which seems likely to continue, and with the number of elderly patients on the guardianship roll, the numbers will continue to shrink. Anyone who visits the boarded-out patients in country areas must be impressed by the healthy and happy lives which many of them lead. A hostel in the city would probably be an inferior method of care. This Department is always reluctant to transfer elderly patients in the country to Part III accommodation at Foresthall. With younger boarded-out patients there is always a hankering after the city lights which may not be a good environment for mental defectives. It would seem a pity if the boarding-out method of care should fall into disuse.

The above figures include a small number of patients under guardianship who are legally classified as mentally ill and not mentally

defective. This also applies to the tally of visits paid by the staff of the section.

	Visits by						
	Medical Officers	Mental Welfare Officers	Total				
Patients under Guardianship	1,681	1,211	2,892				
Patients under Informal Care	1,448	712	2,160				
Total	3,129	1,923	5,052				
	-	and the same of th	Street, Square, Square				

CARE OF THE MENTALLY ILL.

The medical officers of the Department, although relieved of the responsibilities which they formerly had regarding certification of mental illness, still certify patients occasionally. During the year fifteen patients were examined and fourteen were certified (eight males and six females). One female patient was not considered certifiable.

AFTER-CARE BY HEALTH VISITORS.

The work of the health visitors attached to the mental hospitals and psychiatric units in the city has attracted much favourable comment. Because of the thorough initial training and their in-service experience which involves contact with the psychiatrists and hospital social workers, the service they provide is of a high standard.

At the end of the year arrangements were made to expand the service. Stobhill Hospital with two health visitors and Gartloch Hospital with one made use of the service for the first time. Additional visitors were attached to the Southern General Hospital, Woodilee and the Eastern District Hospital. In the case of the Eastern District, it was proposed that one of the health visitors would include in her work after-care of attempted suicide cases treated in the Royal Infirmary. This increased the number attached to psychiatric units from nine to fifteen.

The health visitors had 291 patients on their visiting lists at the end of the year:—

,	Male	Female	Both Sexes
Discharged from hospital	67	174	241
Referred from out-patient clinics	6	44	50
	73	218	291
	9000	-	Section 1

To give some idea of the type of patient being dealt with, a further rough classification in diagnostic categories follows:—

	Male	Female	Both Sexes
Schizophrenia .	22	54	76
Affective Psychosis	7	52	59
Psychoneurosis .	13	68	81
Organic States .	10	14	24
Geriatric	4	8	12
Addiction	11	16	27
Others	6	6	12
	73	218	291
	-		-

Care and after-care visits made during the year by the health visitors totalled 3,283.

SECTION IX

BLIND PERSONS.

Within the area of the Joint Committee for the Blind for Glasgow and South-West Scotland, 757 persons were examined for the first time and 399 were re-examined during 1963. Of the total 1,156, 464 or 40·1 per cent. were examined at home, 43·9 per cent. of those initially examined and 33·1 per cent. of those re-examined. In 1962, 42·1 per cent. of persons examined were examined at home and in 1961 39·0 per cent.

Of the 757 persons initially examined, 449, or 59·3 per cent. were certified blind and 209 or 27·6 per cent. partially sighted and of the 399 persons re-examined, 182 or 45·6 per cent. were certified blind and 176 or 44·1 per cent. partially sighted.

Table I gives the age and sex distribution of the 757 persons examined for the first time and Table II of the 399 persons re-examined. The majority are in the later years of life, the females considerably outnumbering the males.

TABLE I.

Initial Examinations, 1963.

Age and Sex Distribution.

	Certified Blind				Certifie	d Partially		Not Certified Both				
Age				Males	Females	Both Sexes	Males	Females	Both Sexes	Males	Females	Sexes
-1				_	-	_	_					-
1-4				3	3	6	1	1	2		-	
5-15				4	2	6	1	1	2		-	700
16-29				9	1	10	4	7	11	1	2	3
30-39				5	6	11	3	2	5	1	1	2
40-49				14	4	18	8	3	11	2	2	4
50-59				17	24	41	14	18	32	7	6	13
60-69			***	41	66	107	8	33	41	14	17	31
70+			***	89	161	250	34	71	105	17	29	46
To	otal .		***	182	267	449	73	136	209	42	57	99

TABLE II.

Re-Examinations, 1963.

Age and Sex Distribution.

		C	ertified Bl	lind Both	Certified	Partially	Sighted Both	N	ot Certifie	ed Both
Ages		Males	Females	Sexes	Males	Females	Sexes	Males	Females	
-1		 	-	_	_	-		-	-	-
1-4		 1	1	2	-	1	1	to bear		_
5-15		 4	5	9	3	2	5			-
16-29		 5	5	10	5	3	8			-
30-39		 3	3	6	1	4	5	_	-	_
40-49		 3	7	10	8	- 4	12	1	-	1
50-59		 7	12	19	11	10	21	4	3	7
60-69		 16	25	41	9	20	29	- 5	10	15
70+		 29	56	85	30	65	95	3	15	18
Total	***	 68	114	182	67	109	176	13	28	41

Of the 757 new cases examined, 313 (41.3 per cent.) resided in Glasgow and 186 (24.6 per cent.) in Lanarkshire. Of the 399 re-examinations, 174 (43.6 per cent.) resided in Glasgow and 101 (25.3 per cent.) in Lanarkshire. The allocation among the local authorities of the area of the Joint Committee of persons examined for the first time in 1963 is shown in Table III and of persons re-examined in Table IV.

TABLE III.

Initial Examinations, 1963.

Local Authority Distribution.

		Certified Blind			Certified	Certified Partially Sighted			Not Certified		
		Males	Females	Both Sexes	Males	Females	Both Sexes	Males	Females	Both Sexes	
Classes											
Glasgow	***	72	103	175	40	55	95	20	23	43	
Airdrie	***	4	3	,	2	1	3	1	3	4	
Coatbridge	***	1	11	12	4	4	8	1	1	2	
Hamilton		7	5	12	3	3	6	3	2	5	
Motherwell		2	11	13	3	3	6	1	-	1	
Rutherglen		3	3	6	1	3	4	-	-	-	
Other Lanarkshire		24	30	54	7	21	28	6	9	15	
Greenock		6	14	20	1	2	3		-	-	
Paisley		7	8	15		4	4	3	1	4	
Port Glasgow					-	_		-	_	_	
Other Renfrewshir		8	13	21	2	5	7		2	2	
Dumbarton		2	1	3		1	1	_	1	1	
Claritations		2	5	7		3	q			-	
Other Dunbartons		4	3	7	1 1 1 1 1 1 1	1	1	1	1	0	
12-11-1-1-		7	9	5	2	2	-	2	0	-	
Catallina		-	1	,		9	0	*	-	2	
	***	77	1	11		1	1	1	1	2	
Other Stirlingshire		1	,	14	3	8	11	1	3	4	
		4	9	13	_	4	4	-	3	3	
Kilmarnock	***	1	3	4	10 -	1	1		1	1	
Other Ayrshire	***	19	16	35	2	5	7	2	3	5	
Argyll County		7	9	16	2	5	7	-	1	1	
Bute County	***	_	2	2	-	2	2		-	-	
Dumfries Burgh		-	7	7	1	1	2	-	-	-	
Total		182	267	449	73	136	209	42	57	99	

TABLE IV.

Re-Examinations, 1963. Local Authority Distribution.

					,					
		Cer	tified Blin	Both	Certified	Partially	Sighted Both	No	ot Certifie	Both
		Males	Females	Sexes	Males	Females	Sexes	Males	Females	
Glasgow		25	46	71	35	55	90	4	9	13
Airdrie			2	2	3	1	4			10
Coatbridge		1	1	2	3	9	6	1		1
Hamilton		1	8	0	2	. 1	4	1	7	0
Motherwell		Ŷ	7	8	1	0	9	1	2	-
Rutherglen	***	9	1	2	0	3	0		3	2
Other Lanarkshi	TO.	g g	12	20	2		01	1	-	1
Grannack		4	0		,	14	21	1	5	6
Daieless	***	7	9	13	2	2	4		-	-
Port Glasgow	***	1	1	2		1	1	-	1	1
Other Renfrewsh		1	1	2	-	_	-	-	-	-
Dumbarton	nre	1	1	2		3	3	-	1	1
Chylebank	***	1	1	2	2000		-	_	-	-
Clydebank	***	1	1	2	1	2	3		-	-
Other Dunbarton	ashire	4	5	9	1	2	3	9000	-	-
Falkirk	+++	2	2	4	1	3	4	-	1	1
Stirling	***	toria	2	2	1	3	4	1	-	1
Other Stirlingshi	re	4	2	6	3	6	9	1	3	4
Ayr	***	3	3	6	1	1	2	_	1	1
Kilmarnock	***	****	2	2	-	2	2	1		1
Other Ayrshire	***	5	6	11	2	4	6	1	2	3
Argyll County		2	-	2	1		1			
Bute County										
Dumfries Burgh		1	1	2		1	4		-	,
		-	-	-	-				-	1
Total	***	68	114	182	67	109	176	13	28	41
			-	-	-	-	-	-	-	

Of persons examined for the first time during 1963 and certified blind, 50·3 per cent. were examined at home compared with 46·7 per cent. in 1962 and 48·0 per cent. in 1961; while of those certified partially sighted 35·9 per cent. were examined at home compared with 41·4 per cent. in 1962 and 25·9 per cent. in 1961.

TABLE V.

Initial Examinations, 1963.

Certified Blind		 At Clinic 233	At Home 226	All Cases 449	Per Cent. at Home 50.3
Certified Partially Sighted	***	 134	75	209	35.9
Not Certified		 68	31	99	31.3
		425	332	757	43.9
		Territoria de la constanta de	-	-	_

Of the 399 persons re-examined during the year, either at their own request or following altered circumstances, there was no change in the classification in 256 (64.2 per cent.), of whom 55 were certified blind. Of the remainder, 20 were found to be no longer blind and 121 who were previously not blind were now found to be blind.

Comparing the number certified blind in 1963, 570, comprising 449 persons certified blind on first examination together with 121 persons certified blind on re-examination and who were previously not blind with the number certified blind in 1962 of 569 comprising 460 persons certified blind on first examination and 109, not previously blind and certified on re-examination, it is seen that the over-all number of certifications are practically identical, with a slight increase in those certified blind on re-examination.

TABLE VI.
Re-Examinations, 1963.

	At Clinic	At Home	All Cases	
1. Blind persons previously certified as blind	37	18	55	32.7
2. Persons previously certified as blind but not now blind	13	4	17	23.5
3. Persons found not blind at the present examination and at the previous examination	142	58	200	29.0
4. Persons now certified as blind who were not blind at the previous examination	75	52	127	40.9
	267	132	399	33.1

The causes of blindness in the 449 blind persons examined for the first time and in the 182 blind persons in the group of re-examinations examined in 1963 are given in Table VII. Cataract, the most important single cause of blindness, was responsible for 105 cases of blindness (23·4 per cent. of those certified blind) in those initially examined, and in 49 (26·9 per cent.) of blind persons in the re-examined group. Among those examined for the first time arteriosclerosis 85, cerebral arteriosclerosis 5, glaucoma 66, myopia 54, diabetes 38 and chronic septicaemia 9 were responsible for a further 57·2 per cent. The corresponding figures for the re-examined group were arteriosclerosis 15, cerebral arteriosclerosis 2, glaucoma 16, myopia 44, diabetes 9, chronic septicaemia 3; 48·9 per cent. of blind persons in this group.

TABLE VII.

Initial and Re-Examinations, 1963.

Causes of Blindness.

C	auses (of Di	inane.	55.		
					Initial Examin- ations	Re- Examin- ations
Congenital and Undetern	nined-					
Congenital Anomali	es				19	13
Abiotrophies, etc.					12	_
Tumour of Globe of	r Orbit		***		1	1
Myopia					54	44
Glaucoma—Primary					66	16
Cataract—Primary					105	49
Others					1	4
Infectious and Toxic:						
Exogenous—	1000					
Ulcerative Ker					7	2
Blepharitis (Tr	ichiasis)			***	-	1
Other	***		***		1	-
Endogenous-						
Syphilis—Congenita	1				2	4
Acquired					3	4
Bacterial Infection-	-Menin	gococc	al M	enin-	1	
	gitis	Sococc	CEL THE	···	1	
	T.B. M		itis		_	1
	Others				2	
Toxoplasmosis	***		***		_	2
Phlyctenular, Strun	nous, etc	0.			7	2
Chronic Septicaemia	a. etc.				9	3
Others	***		***		2	_
T						
Traumatic and Chemical						
Birth Injury					1	3
injury at play or s	port (bo	oxing)			1	_
Traine or Transpor	tation	***		***	3	_
Assault			***	***	1	_
Industrial Trauma-	-Mining			***	1	-
	Chemic	al	***		_	1

				Initial Examin- ation	Re- Examin- ation
Systemic Diseases—					
Haemorrhage					1
Pernicious Anaemia			***	1	_
Diabetes	***			38	9
Parathyroid Disease				1	_
Nephritis				2	1
Essential Hypertension				5	_
Arteriosclerosis				85	15
Cerebral Arteriosclerosis				5	2
Other Vascular Disease				2	
Intracranial Neoplasm				3	2
Disseminated Sclerosis				3	3
Hydrocephalus				1	
Other Disease of Central	Nervous	Sys	tem	4	2
Acne Rosacea				1	_
				449	182
				-	

Follow-Up Scheme.—Where treatment, medical or surgical, or the continuation of treatment was recommended, the progress of patients initially examined at the Regional Clinic in the period January, 1961, to June, 1963, has been reviewed and Table VIII has been compiled from the results of re-examination or from the reports of home teachers. Medical treatment, however, may have been recommended for systemic disease and where the eye condition was irremediable and not amenable to treatment such cases have been excluded from the Table.

TABLE VIII.

Follow-up Scheme of Persons Initially Examined in 1961, 1962 and in the first six months of 1963, where treatment, medical or surgical, or the continuation of treatment was recommended.

(i) Blind.

	Still	Now		Not Yet			ot Carrie		Follow-up not yet	
	Blind	P.S.	Sighted	Re-exam.	Dead	Unfit	willing	Others	Completed	Totals
Surgical	11	12	11	9	25	41	35	25	11	180
Medical	7	_	-	_	5	-	_	4	_	16
	and a	-		-	-	-				-
Totals	18	12	11	9	30	41	35	29	11	196
	-	-	-	-		-	-		-	

(ii) Partially Sighted.

	Still	Freatme Now	nt Carried Now	Out Not Yet	Treat	tment N	ot Carrie	ed Out	Follow-up not yet	
	P.S.	Blind	Sighted	Re-exam.	Dead	Unfit	willing	Others	Completed	Totals
Surgical	7	9	9	1	2	12	6	12	2	60
Medical	26	16	3	5	16	-	1	6	1	74
		-	anner .	-	_	-		-		-
Totals	33	25	12	6	18	12	7	18	3	134
	-			-		2000	-			-

(iii) Not Blind.

		reatment	Carried	Out	Trea	tment N	lot Carrie	d Out	Follow-up	
	Still Not Blind	Now P.S.	Now Blind	Not Yet Re-exam.	Dead	Unfit	Un- willing	Others	not yet Completed	Totals
Surgical Medical	1 10	1 5	1 2	4	1 2	1	=	2 4	1	7 28
medicai	_	_		_	-	-	-	-	-	-
Totals	11	6	3	4	3	1	-	6	1	35
	-	_	-			paramet.	-	-	_	-

The group "Unwilling" is comprised mainly of elderly persons who, owing to their advanced age, do not feel inclined to undergo an operation.

In the group "Others" are included patients who for medical reasons are not yet ready for operative procedures.

Age at Certification—Pre-War and at Present Comparison of the five years 1934-1938 and 1959-1963.

Between 16 and 60 years of age the male incidence fell by 62-7 per cent. and the female incidence by 58-5 per cent. Between 60 and 70 years the fall in male incidence was 41-7 per cent. and in female incidence 11-6 per cent. At ages 70 and over male incidence increased by 21-1 per cent. and female incidence by 89-7 per cent.

The age incidence at certification in the two five-year periods is shown in Table IX.

TABLE IX.

Age and Sex Distribution of Persons Certified Blind at the Regional Blind Clinic during the Periods 1934-1938 and 1959-1963.

			1934-1938			1959-63	
Age Year	s	Male	Female	Both Sexes	Male	Female	Both Sexes
0-15	***	 27	33	60	24	22	46
16-29		 83	70	153	34	16	50
30-39		 99	84	183	21	18	39
40-49		 163	125	288	64	33	97
50-59		 241	213	454	99	137	236
60-69		 338	336	674	197	297	494
70 and c	ver	 361	408	769	437	774	1,211
	Total	 1,312	1,269	2,581	876	1,297*	2,173

* One female (age not given) not included in Table.

The broad classification of causes of blindness for the periods 1934-1938 and 1959-1963 is shown in Table X. Infectious, toxic, traumatic and chemical causes fell by 78.7 per cent., while systemic diseases as a cause of blindness rose by 172.4 per cent. Systemic diseases include diabetes and diseases of the vascular system.

TABLE X.

Causes of Blindness for the Periods

1934-1938 and 1959-1963

				1934-1938	1959-1963
Congenital and Undeterm	nined		 	1,394	1,299
Infectious and Toxic			 	782	162
Traumatic and Chemical			 	142	35
Systemic Diseases			 	246	670
Not Otherwise Classified			 	17	8
		Total	 	2,581	2,174

REGIONAL BLIND ROLL (AREA OF JOINT COMMITTEE FOR THE BLIND, GLASGOW AND SOUTH-WEST SCOTLAND).

Persons on the Regional Blind Roll at 31st December, 1963, numbered 4,959, of which 2,117 were males and 2,842 females. Glasgow cases numbered 2,161 (43.6 per cent.), 931 males and 1,231 females.

TABLE XI.

Age and Sex Distribution of Persons on the Regional Blind Roll at 31.12.63.

		Ma	Males		nales	Both Sexes	
Age		Number	Per Cent.	Number	Per cent.	Number Per Cent.	
-5		 5	0.2	4	0.2	9	0.2
5-14		 56	2.6	47	1.7	103	2.1
15-19		 25	1.2	21	0.7	46	0.9
20-24		 50	2.4	28	1.0	78	1.6
25-34		 77	3.6	63	2.2	140	2.8
35-44		 128	6.0	105	3.7	233	4.7
45-54		 246	11.6	218	7.7	464	9.3
55-64		 416	19.7	467	16.4	883	17.8
65-74		 467	22.1	700	24.6	1,167	23.5
75 and o	ver	 647	30.6	1,186	41.7	1,833	37.0
Not Stat		 _		3	0.1	3	0.1
				-			
		2,117	100.0	2,842	100.0	4,959	100.0
		-	-	-	-	-	

Of persons on the Blind Roll at 31st December, 1963, 879, 17.7 per cent., 458 males and 421 females, had been on the Roll over twenty years, while 2,076, 41.9 per cent., 827 males and 1,249 females, had been entered on the Roll within the past five years. Table XII gives the duration of certification of persons aged 65 years and over.

TABLE XII.

Duration of Certification of Persons aged 65 years and over on Blind Roll at 31.12.63.

Duration of Certification		Males	Females	Both Sexes	Per Cent.
Within 5 years	 	 494	888	1,382	46-0
5-9 years	 	 238	492	730	24.3
10-14 years	 	 126	206	332	11-1
15-19 years	 	 61	104	165	5.5
20-24 years	 	 51	65	116	3.9
25 years and over	 	 144	131	275	9-2
		1,114	1,886	3,000	100-0
		-			-

SECTION X

GLASGOW PORT HEALTH AUTHORITY.

The Boarding Station at Princes Pier, Greenock, was closed down on the 31st May, 1963.

This station was established in 1901, principally to safeguard the City of Glasgow from sea-borne infection, especially from ships coming from foreign and possibly plague-infected ports.

During 1900-1901, 48 cases of plague with 16 deaths were recognised in the city and adjoining areas, and for this reason the inspection of shipping in the harbour areas within the jurisdiction of Glasgow was extended to all ships calling at plague-infected ports during the voyage.

At first the station was manned by a Port Medical Officer and one inspector: however, during the period of both World Wars the staff was greatly augmented to cope with the huge convoys of ships proceeding to and from the Clyde.

In recent years the incidence of infectious disease has fallen and only cases of minor sicknesses are now being recorded. The need, therefore, to maintain the Boarding Station was not essential and so, after 62 years of valuable service, the station was finally closed down.

Information and statistics compiled and issued by the World Health Organisation and modern methods of communication help to maintain a constant watch and control over infectious disease all over the world.

Shipowners and agents were informed of the new instructions necessary to ensure conformity with the Regulations. Ships direct from foreign ports must now send a wireless message to "Portelth Glasgow" not more than twelve hours and not less than four hours before the arrival of the ship at the Tail of the Bank. The message should include the name of the ship, whether there is a clean bill of health, and if not, the probable condition from which the patient is suffering.

All ships are now boarded by the Port Health Inspector and the representative of H.M. Customs Waterguard when the ship finally docks at the appointed berth in the Glasgow dock area, except, of course, on such occasions as boarding at the Tail of the Bank is indicated.

During the past year, 6,391 vessels with an aggregate of 7,812,792 tons entered the port. Of this total, 1,316 vessels with an aggregate tonnage of 4,264,712 arrived from foreign ports; 650 of these vessels were from infected ports; 115 arrived direct and 495 called at other home ports before reaching the port of Glasgow. A further 666 foreign-going vessels arrived from non-infected areas.

TONNAGE OF VESSELS ARRIVING FROM OVERSEAS.

	No. of Ships.	Crews.	Nett Reg. Tonnage.
January	 124	5,146	382,096
February	 98	4,278	332,152
March	 128	5,365	410,062
April	 100	4,254	311,357
May	 111	4,840	355,773
June	 106	4,437	344,759
July	 104	4,994	368,804
August	 100	4,142	294,479
September	 116	4,927	368,600
October	 118	4,856	390,991
November	 102	4,422	333,199
December	 109	4,658	372,440
	1,316	56,319	4,264,712
		-	Secretario de la constante de

Particulars of arrivals are given in the following table: NATIONALITY OF VESSELS ARRIVING DURING 1963.

	Nati	onali	ty.		No.	Crew.	Passengers.
An	nerican				38	1,834	65
Ar	gentinian				1	28	1
Be	lgian				13	217	_
Be	rmudian				1	27	_
Br	itish				792	39,665	414
Da	nish				24	720	1
Du	itch		***		131	2,883	7
Ein	rean				10	348	
Fir	nnish				2	51	_
Fr	ench				1	40	The state of the s
Ge	rman				45	965	6
Gh	anaian				2	82	
Gr	eek				11	290	_
In	dian				19	1,224	_
	aeli				3	66	6
Ita	dian				5	162	
Le	banese				1	25	
Lil	perian				14	491	_
Mo	nrovian				4	142	_
	roccan				1	15	_
No	rwegian				79	2,657	4
Pa	kistanian				2	110	
Pa	namanian					35	_
Po	lish				2 5	158	
	umanian				2	71	_
Ru	issian				37	1,388	
So	uth African	1			10	572	
	anish	***	***	***	3	51	1
	redish			***	44	1,524	
	riss				9	307	
Ur	nited Arab	Repu			1	36	
Yu	igo-Slav	***			4	133	
			The state of				
			Total		1,316	56,317	505

From State 320 19 28 22 12 13 34 33 48 35 24 20 32 105 19 85 85 23 505 12 32 28 91 22 engers From Foreign Ports. TOTAL. NUMBER OF VESSELS FROM FOREIGN PORTS AND IRISH FREE STATE DURING 1963. 5,146 4,278 5,365 4,840 4,142 56,317 4,254 4,994 4,658 Crews 4,437 4,927 4,854 4,422 Ships 1,316 128 86 100 106 100 102 124 111 104 109 3 4 00 73 83 16 85 06 32 440 22 engers 24 FROM NON-INFECTED Direct and Coastwise 1,518 1,833 1,498 1,482 1,795 1,730 1,976 1,605 1,779 2,011 1,654 2,037 20,918 Crews Ships 48 999 55 53 63 09 58 47 53 63 51 64 51 Pass-engers : 15 4 12 CI 20 4 65 "B pur 3,313 3,476 2,878 2,772 3,045 2,488 2,890 2,817 2,879 2,780 2,707 35,399 3,354 A ". : Total Ships 52 56 53 47 53 58 650 47 64 57 61 51 51 FROM INFECTED PORTS. Pass-Class "B"—Coastwise. 2,508 2,026 2,493 2,226 2,593 2,233 2,165 Crews 2,794 2,937 2,451 29,158 2,571 2,161 Ships 46 39 43 40 45 35 42 46 36 495 35 47 41 Pass-engers CI 20 15 12 65 Class " A "-Direct. 546 519 209 539 539 462 439 385 537 714 761 6,241 Crews 591 Ships 12 12 16 13 15 155 9 18 13 13 12 February January October TOTALS August Month March Sept. April June Nov. July Dec. May

NATIONALITY OF SHIPS' CREWS ARRIVING DURING 1963.

	British	Indian	Chinese	Other Nationalities on British Ships	Total Crews on British Ships	Crews on Other Ships	Overall Total Crews	Passengers on British Ships	Passengers on Other Ships	Total Passengers
January	2,485	155	131	735	3,466				-	3
February	2,064	362	62 207	603 732	3,091 3,678	1,187 1,687	4,278 5,365	16	3	19
March	2,505	234	219	700	2,964	1,290		5	7	12
April	1,934 2,217	111 151	203	605	3,176		4,840		2	85
May	2,217	437	141	313	3,254			84	1	85
June	2,363	591	207	639	3,809	1,185	4,994	13	10	23
July	2,372 2,355	76		474	3,139	1,003	4,142		-	105
August September	2,557	324	242	424	3,547	1,380		91		91
October	2,653	536	74	528	3,791	1,063		31	1	32
\T	2,117	147	92	711	3,067	1,355			9	28
Desember	2,304	528	137	287	3,256	1,402			1	22
December	2,004	020	107	201	0,200	1,402	4,000	21	-	
TOTAL	27,926	3,612	1,949	6,751	40,238	16,079	56,317	471	34	505

Public Health (Ships) (Scotland) Regulations, 1952-63.

There were no cases of plague, cholera, yellow fever, smallpox or typhus on any vessel entering the port.

The introduction of smallpox into England and Wales by air from Pakistan early in the year made it necessary to maintain a careful watch on all vessels with crew members of that nationality.

The minor cases of sickness continue to decrease each year.

Chickenpox—Five cases were all removed to Ruchill Hospital.

Infective Hepatitis—Two patients admitted to the Southern General Hospital for observation were diagnosed as suffering from hepatitis and removed to Ruchill Hospital.

Measles—One case was removed to Ruchill Hospital and another had recovered on board during the voyage from India.

Mumps-Two cases were hospitalised.

Pneumonia—There were six cases removed to various hospitals in the city.

Tuberculosis—A young seaman cook was home on leave from his ship and was removed to hospital suffering from tuberculosis.

CASES OF ILLNESS ON VESSELS ON ARRIVAL IN GLASGOW.

Diseas	e	1	Hospital	Home	Clinic	On Board	Died	Total
Chickenpox	***	***	5	_	_	_	_	5
Infective Hep	atitis		2	-	-	-	-	2
Measles			1	_	-	1	_	2
Mumps		***	2		_		_	2
Pneumonia		***	6	_	_	_	-	6
Tuberculosis		***	1	-	-		-	1
Miscellaneous			3	1	-	9	1	14
			20	1	-	10	1	20
			20	1		10	1 tourness	32

SAMPLES OF DRINKING WATER.

(a) Chemical.

Ten samples from dock hydrants and ships were examined by the City Analyst, four of which were reported as unsuitable for human consumption.

The four unsatisfactory samples were obtained from a ship due to sail from the builders' yard after conversion and modernisation. The quantity of chlorine used in the chlorination of all domestic water tanks was far in excess of that laid down by the Ministry of Transport requirements for such purposes. The request by the shipping company for testing was left to the last minute before the ship sailed. The City Analyst gave a quick result to these samples; but the ship had sailed for another home port. The Head Office of the shipping company were advised immediately of the danger in using this water and advised on what action would be necessary to remedy this mistake.

(b) Bacteriological.

Twenty-seven samples from dock hydrants and ships were examined, thirteen of which were reported as unsatisfactory.

Ten of the unsatisfactory samples were as a result of a routine water check on a small coasting vessel. Water supplies for this ship had been taken from one or two points in the dock area and reported unsuitable. A systematic check on all surrounding water points on this pipeline gave almost identical bad results.

The Clyde Navigation Trustees and the Water Engineer for this area (outside Glasgow) were consulted; but they could give no explanation for this contamination: indeed the Water Engineer reported all

their samples as free from contamination. The Public Health Department for this area was also consulted and all their samples in this neighbourhood were reported satisfactory. Further enquiries as to the storage, treatment, etc., of supplies also proved negative until it was inadvertently revealed by one of the Water Engineers that the chlorination plant in one of their reception reservoirs had been out of action for some time. The water supply line to the dock area came direct from this reservoir. The Water Engineer was strongly advised to carry out a form of temporary chlorination until the fault in the chlorination plant was rectified. They also informed us that a new covered reservoir would soon take the place of this existing open reservoir.

The other three unsatisfactory samples were from ships where the plate counts were reported to be excessive. It was recommended that all tanks on these ships must be cleaned out, cement washed and supplies chlorinated.

IMMUNISATION AGAINST YELLOW FEVER.

During the year the Port Medical Staff provided 240 seamen with immunisation against Yellow Fever. These men were members of the crews on vessels which were calling at ports within the Yellow Fever Zones.

DANGEROUS DRUGS REGULATIONS.

During the year no certificates were issued under the above Regulations to the masters of foreign vessels in the port to enable them to complete the necessary medical supplies on their vessels.

ALIENS ACT, 1953.

There was an increase in the number of vessels carrying alien passengers and an increase in the number of aliens landed at the port. The comparable figures for the year are 83 vessels with 250 alien passengers as against 78 vessels with 227 alien passengers during the previous year. There were no rejections on medical grounds. Close co-operation was maintained with H.M. Immigration Officers in the examination of these persons, and every assistance was given by the shipping companies in intimating time of arrival and boarding.

The following table shows the number and nationality of aliens arriving at the port:—

African		 	 		4
American		 	 		102
Argentini	an	 	 ***		1
Belgian		 	 		3
Burmese		 	 ***		2
Danish		 	 		3
Dutch		 	 		21
Finnish		 	 		3
French		 	 		2
German		 	 		43
Greek	***	 	 		4
Israeli		 	 		8
Italian		 	 		1
Norwegian	n	 	 		24
Spanish		 	 		4
Swedish		 	 		15
Swiss		 	 	*	7
Yugo-Slav	7	 	 		3
					250
					Recording .

COMMON LODGING HOUSES.

The Seamen's Hostel in Queen's Dock continues to function smoothly. The additional accommodation acquired recently has greatly improved the social facilities for the native seamen residing in the hostel. A weekly return is received giving the numbers in residence and the figure given is always well within the maximum number of personnel permitted to use the hostel.

No case of infectious disease or other sickness was removed from the hostel during the past year.

HYGIENE IN CREW ACCOMMODATION, ETC.

During the year 10 intimations were issued under the Public Health (Scotland) Act, 1897, to masters of vessels in the dock area, and 175 verbal warnings to the ships' officers in respect of minor defects and nuisances discovered during the inspector's visit. Forty-four verbal warnings were also given in regard to the fouling of the quayside by discharge from ships.

A total of 1,973 initial visits and revisits were made by the inspectors to vessels during the year.

The following tables indicate the type of defect and the number and nationality of the vessels on which they were located:—

SUMMARY OF STRUCTURAL AND OTHER DEFECTS.

Accumulations of refuse on deck			42
Dirty quarters			40
Defective food lockers			1
Defective heating apparatus		***	2
Defective ports, decklights, etc.	***	***	3
Inadequate ventilation			7
Neglected paintwork			2
Scuppers choked	***		8
Water-closets—inadequate flush			13
Water-closets—foul or choked			8
Wash Basins—defective			8
Wash Basins—foul			4
Verminous quarters			45
			100
			183

NUMBER AND NATIONALITY OF VESSELS ON WHICH DEFECTS WERE DISCOVERED.

							Defective.
American							3
Belgian							3
British							114
Danish							4
Dutch							9
Eirean							1
German							3
Ghanaian							2
Greek						***	2
Indian							8
Italian							4
Liberian							2
Monrovian							1
Managan							1
Norwegian						***	7
Pakistania							i
Spanish				***		***	1
Swedish		***		***	***	***	4
Swiss		***	***	***		***	1
Yugo-Slav	•••		***	***	***	***	1
r ago Diav							1
							172
							Management
		Co	asters.				Defective.
British				***			2

HYGIENE AND SANITATION IN DOCK AREAS.

An experimental system for the disposal of refuse from wharves, sheds and roads in the dock area at King George V Dock is being tried out for a period of one year.

A series of metal containers are placed in position at appointed places for each berth. All refuse, formerly collected by the Cleansing Department for disposal at the destructor, is now loaded into these containers. A local contractor calls daily to collect any full containers and to remove them to a site at Bishopbriggs where the containers are emptied into disused pit shafts which have to be filled in during the next 20 years.

If this method of disposal is successful then a step forward is assured in maintaining the dock areas in a clean and tidy condition. This method will then be extended to cover all other dock areas in the city.

Five intimations were issued in terms of Section 19 of the Public Health (Scotland) Act, 1897, to the Clyde Navigation Trustees and 10 verbal instructions were also given in respect of nuisances arising on premises within their jurisdiction.

Thirty-five visits were made under the Factories Act to premises in the dock area.

RAT DESTRUCTION.

The total number of rats destroyed during the year was 246. Of that total, 151 were destroyed on board foreign-going ships, 103 as the result of fumigation by H.C.N. gas and 48 by trapping.

The rat searchers made 2,468 visits to vessels in the port and 3,932 visits to premises in the dock area. During the visits to these premises in the dock area evidence was found in 245 instances. Traps were set and 95 rats were destroyed.

Sixty-eight specimens of rats, 20 from ships and 48 from shore premises, were submitted to the City Bacteriologist for examination for Bacillus pestis; negative results were reported in each case.

The following tables show details of the rats destroyed on board ship and in the quayside sheds and other premises within the dock area:—

ON BOARD FOREIGN-GOING VESSELS.

Metho		R. I		ted Po	rts rvegicus		on-Inf Rattus		Ports rvegicus	Total
		M.	F.	M.	F.	M.	F.	M.	F.	
HCN	 	26	20	-	-	36	21	-	-	103
Trapping	 	23	13	-	-	7	5	-	-	48
	-	49	33	_	_	43	26	_	-	151
		-	-	-	SECTION 100		-	-	-	-

CARGO SHED AND OTHER PREMISES.

R. Rattus		R.	Norv	regicus	Total
M.	F.		M.	F.	
42	40		8	5	95

INTERNATIONAL DERATTING AND DERATTING EXEMPTION CERTIFICATES.

The total number of certificates issued during the year was 379. Of the total of 12 Deratting Certificates issued, nine were granted after the vessels had been fumigated with Hydrogen Cyanide and the remaining three after the vessels had been cleared by trapping.

Twenty-three certificates were issued to new vessels at the request of the shipping companies.

Thirty-four certificates were issued to vessels berthed at outlying quays at Ardrossan, Bowling, Dumbarton, Faslane, Finnart, Irvine, Old Kilpatrick, Paisley, Tail of the Bank and Troon.

On two occasions when vessels were being fumigated to qualify for Deratting Certificates the concentration of gas and periods of exposure were increased at the request of the Department of Agriculture, Insect Pest Infestation Section, for the destruction of food insect pests in the cargo spaces,

PREVENTION OF DAMAGE BY PESTS ACT AND APPLICATION TO SHIPPING ORDER.

Rodent Control Certificates were issued to 26 coastal vessels during the year.

It is becoming increasingly common to find vessels on the coastal trade with expired Rodent Control Certificates. The masters are warned of the need for renewal and they are issued with a new certificate.

RAGS, HAIR, HIDES AND BONES.

The following table shows the amount of imported rags, hair, hides and bones and the country of origin :—

Country o	f	No. of	Rags No. of Bundles	No. of	(Various) No. of Bundles	No. of	No. of		No. of Bundles
Africa		-	-	-	-	8	247	2	2,400
America		4	172	6	385	2	361	-	-
Australia		-	_	-	_	24	5,856	-	
Belgium		_	-	-	_	1	100	1	588
Canada		_	-	3	175	1	40	-	-
China		-	-	-	-	2	900	1	900
Cyprus		3	1,438	_	_	-	-	_	-
Egypt		7	3,924	_	-	_	_	-	_
Europe		26	3,151	8	309	14	2,450	3	400
France		1	55	-	_	7	4,766	-	-
India	***	_	_	1	14	7	1,240	27	59,051
Italy		_	-	_	-	9	3,275	-	-
Japan		-	-	-	-	17	17,368	-	-
New Zeala	and	_	_	-	_	1	329	-	_
Pakistan		-	_	_	_	-	_	1	3,840
South Afr	ica	-	_	-	-	1	25	-	-
Spain		-	-	-	_	-	-	1	1,400
Sweden		1	48	-	3-3	-	-	-	_
South Am	erica	-	-	2	145	1	1,023	5	81,189

ANTHRAX.

One specimen of goatskin and three specimens of hog hair were submitted to the City Bacteriologist and all reported negative.

RAGS.

The importation of bales of rags from Egypt continues to give cause for complaint with offensive odours, bad binding of the bales and soiled contents. A form of certificate is received by the shipping company but it carries no authority.

Public Health (Imported Food) Regulations (Scotland), 1937-48.

During the year a total of 761,207 tons of foodstuffs was landed at the port, 749,632 tons from ships arriving from overseas ports and 11,575 tons from ships trading coastwise. The total quantity of cargo landed is lower than last year's total and this can be attributed to the fluctuation in grain cargoes.

The coastal tonnage remains much the same as last year's low figure due to heavy competition from road haulage between the main ports throughout the country.

All food products landed were examined under the above regulations and as a result of this examination a total of 59 tons 13 cwts. were declared unsound and unfit for human consumption.

Various minor irregularities arise from time to time with imported items of food such as contravention of the Labelling of Food Order, deficiencies in weight of contents in canned goods, low standard of meat content, etc., etc. These matters are brought to the attention of the importers and so enable them to have the discrepancy rectified in any future consignment.

A consignment of peeled tomatoes was detained for 100 per cent. examination owing to excessive numbers of "blown cans." The whole consignment was ultimately re-exported to Italy, the country of origin.

OFFICIAL CERTIFICATES.

A consignment of 69 drums of Oleo Stearine from Australia was detained pending further enquiries as to the Official Certificate stencilled on the drums. In some instances the stencil was so indistinct as to be almost unreadable. The importer produced to H.M. Customs a covering certificate for this consignment and the drums were released on the

understanding that all future consignments would be clearly stencilled on the containers.

A shipment of 50 cartons of canned sausages from South Africa had no official certificates and the consignment was re-exported to the country of origin.

DESICCATED COCONUT.

This product continues to show improvement. Salmonellae were isolated from only seven of the 103 samples submitted for testing. It was found necessary, therefore, to cease from detaining all importations of coconut after routine samples had been taken. The percentage of sampling was also reduced to 2 per cent. with a repeat sampling of 10 per cent. in the event of a positive salmonella.

DESICCATED COCONUT.

1963-Importation Ratio of Grades, etc.

Fine	 No. of Containers 24,481	No. of Samples 841	Positive 3
Selected Fine	 _	_	-
Super Fine	 800	35	1
Medium	 14,167	541	3
Selected Medium	 -	_	
Thread	 15	2	_
	39,463	1,419	7

1963—Types of Salmonella in Various Grades.

	Fine	Superfine	Medium
Species— Paratyphi B	 1	_	_
Typhimurium	 2	_	3
Waycross	 -	1	_

Public Health (Preservatives, etc., in Food) Regulations (Scotland), 1962.

A consignment of foodstuffs imported from Canada was found to contain a prohibited preservative. One thousand, five hundred and fifty cartons containing jars of various jams and jellies were detained owing to the presence of Potassium Sorbate. This preservative is only permitted in five articles of food under the present regulations. On further examination it was found that in 550 cartons the contents of the jars did not contain this preservative, but the other 1,000 cartons had sorbic acid printed on the list of contents on each jar. After some discussion with the representative of the exporters the 1,000 cartons were re-exported to Canada.

An importation of Tartar Sauce from America was detained owing to the presence of Calcium Edta, a prohibited preservative in this country. The consignment was also re-exported.

FROZEN WHOLE EGG.

Only one consignment was received during the year consisting of 2,000 tins from New Zealand. Twenty-three samples were submitted for bacteriological examination and the results were satisfactory.

AMERICAN HEN EGG ALBUMEN CRYSTALS.

Thirty-one shipments were received and 179 samples tested for Salmonella. Only one Salmonella, of a less virulent type, was reported and this group was released.

AMERICAN HEN EGG ALBUMEN SPRAY.

Two consignments were dealt with and reported negative for Salmonella.

AMERICAN DRIED EGG.

One small shipment was tested and reported satisfactory.

IRISH FROZEN EGG ALBUMEN.

Two consignments were tested for Salmonella and declared negative.

The following tables show the amount of foodstuffs imported during the year:—

TABLE "A"

Foreign Imports, 1963.

	Weis	ght		Weig	ht
Article	Tons.		Article	Tons (
Acids	47	10	Macaroni	383	17
Apples	5,938	14	Maize	256,074	3
Apples (Evaporated)	4	14	Mayonnaise	1	5
Baby Foods	132	17	Meals	287	_
Baker's Sundries	13	18	Meats (Canned)	3,270	8
Barley	50,116	-	Meats (Preserved)	3	-
Beans	2,298	14	Melons	2,549	16
Brandy	532	15	Milk Powder	2,099	19
Butter	12,737	19	Milo	11,359	
Cakemix	7	2	Mineral Waters	_	12
Casein	2,118	1	Nuts	329	6
Cereals	1	2	Oils	80	14
Champagne	10	5	Onions	1,523	_
Cheese	5,651	1	Onions (Dehydrated)	4	10
Chicken (Canned)	742	1	Onions (Kibbled)	6	3
Chinese Provisions	134	_	Oranges	9,433	7
Cherries	220	10	Pears	368	3
Chocolate Crumb	535	12	Peas	10,717	17
Chutney	20	13	Peel (Various)	2,130	10
Coconut (Desiccated)	1,622	-	Peppers	21	_
Coconut (Fresh)	88		Pickles	82	8
Coconut (Oil)	297	_	Pomegranates	255	11
Coffee	187	5	Potatoes	6,669	16
Confectionery	32	9	Potatoes (Canned)	4	1
Corn	80,565	10	Puddings	2	-
Corn (Canned)	212	15	Rice	5,390	1
Egg (Albumen)	81	2	Rice (Canned)	-	19
Egg (Frozen Whole)	27	13	Rum	124	2
Egg (Dried)	15	14	Sago	344	-
Fats	257	19	Salad Dressing	_	14
Fish (Canned)	1,749	18	Sauces	29	_
Fish (Frozen)	16	1	Sherry	26	11
Fish (Paste)	3	7	Soups	34	9
Flour	40,339	,	Sugar	2,730	-
Fruit (Cake)	34,035		Soya Beans	499	-
Fruit (Canned)	0.701	9	Syrup	5	-
Fruit (Dried)	70		Tapioca	293	-
Fruit (Frozen) Fruit (Juice)	0.744	9	Tea	1,375	17
Fruit (Juice) Fruit (Pie Filling)	105		Tomatoes (Canned)	891	17
Emile (Dulm)	121		Tomatoes (Juice)	922	19
David (Claima)	12		Tomatoes (Purée and		
Cingan	502		Paste)	1,723	17
Chases	252		Tomatoes (Sauce)	4	17
Canada	234		Vegetables (Canned)	1,089	12
Grapefruit	428		Vegetables (Dehydrated)	9	-
Ham (Canned)	8		Vegetables (Fresh)	944	2
Honey	191		Vegetables (Frozen)	34	16
Jams and Jellies	149	4	Vegetables (Preserved)	21	1
Lard	660		Wheat	159,762	_
Lemons	238		Whisky	26	10
Lentils	4,448		Wine	4,639	12
Liqueurs		0	Yeast	10	_
		+ 740	632 tone 10 cuts		
	Total Weigh	10-745	0,632 tons, 10 cwts.		

TABLE "B"

COASTWISE IMPORTS, 1963.

	Weight	a total and	Weight
Article	Tons Cw	rts. Article	Tons Cwts.
Aerated Waters	68	6 Maize	61 —
Apples	200	Meat (Canned)	217 12
Baker's Sundries		2 Meat (Cooked)	21 8
Biscuits		3 Milk Powder	53 14
Blackberries		3 Nuts (Various)	2 4
Brambles		2 Oils	1
Butter		5 Oranges	— 12
Cheese	5 -	– Peas	6 10
Chocolate Coverture		7 Plums	1 1
Coffee		4 Potatoes	1,246 6
Confectionery		5 Potatoes (Crisps)	1 2
Eggs (Frozen Whole)		0 Potatoes (Powder)	130 6
Eggs (Shell)		7 Potato (Starch)	5 —
Eggs (Albumen)	3 1	0 Raspberries (Fresh)	1 18
Farinaceous Foods	-	4 Rice	4
Fats	58	2 Sausages	27 18
Fish (Pickled)	58	1 Seasoning	5
Fruit Cake		5 Scone Mix	2
Fruit (Canned)	466	7 Strawberries	15 13
Fruit (Dried)	40	8 Stout	2,007 8
Fruit (Frozen)		6 Sugar	6
Fruit (Juice)	23	4 Tapioca	1
Fruit (Pulp)	126	5 Tea	215 10
Gammons	CONTRACTOR OF THE PARTY OF THE	6 Tomatoes	8 2
Ham and Bacon	3,532 1	1 Tripe (Cooked)	19 18
Ham and Bacon (Canned)		8 Vegetables (Canned)	182 12
Honey		3 Vegetables (Fresh)	253 9
Jams and Jellies	3	5 Vegetables (Pulp)	18 —
Lard	5 1	4 Wheat	498 —
Lentils	- 1	4 Whisky	33 10

Total Weight-11,574 tons, 19 cwts.

The following foodstuffs were found unfit for human consumption and disposed of to the satisfaction of the Port Medical Officer:—

Article		Weig Cwts.		Article	Weig Cwts.	
Butter		4	3	Nuts	3	-
Chicken (Canned)	***	14	2	Oil	-	1
Chutney		9	2	Oranges	20	-
Coconut (Desiccated)		16	_	Peas	80	-
Coconut (Fresh)		1	-	Pickles	_	1
Egg (Albumen)	***	5	_	Puddings (Canned)	_	2
Fish (Canned)		_	3	Potatoes	362	-
Flour		97	_	Rice	15	3
Fruit (Canned)		442	1	Rice (Canned)	-	1
Fruit (Dried)		123	3	Sauces	2	1
Fruit (Juice)		49	_	Soups (Canned)	_	2
Fruit (Pie Filling)		_	1	Tea	-	2
Fruit (Pulp)	***	16	2	Tomatoes (Canned)	10	-
Ginger (Preserved)		2	1	Tomatoes (Juice)	24	-
Honey		_	2	Tomatoes (Pulp)	44	2
Jams and Jellies	***	10	-	Tomatoes (Purée and		
Macaroni		_	1	Paste)	271	-
Maize		323	2	Vegetables (Canned)	8	3
Meats (Canned)		25	2			

Total Weight—1,193 cwts., 2 qrs. (Includes 6 cwts. 2 qrs. Ships' Stores.)

FOODSTUFFS EXAMINED BY CITY ANALYST.

		Fit for	Unfit for Huma Consumption or	
			not Conforming	
Article		nsumption	Regulations	Remarks
Apples		9	_	
Apples (Dehydrate		1		
Baby Foods		32	_	
Beans		1		
Brandy	***	1		
Butter		22	4	River water contamination.
Cakemix		8		
Cherries (Preserved		1	-	
Chicken (Canned)	7.	12	_	
Chinese Provisions		7	1	Excess lead.
Chutney		_	1	Extraneous matter.
Coffee		2		
Coconut (Dessicate		11	5	Damp and moulds.
Condiments		1	_	Damp and mounds.
Confectionery		2		
Corn (Canned)		4		
Egg (Albumen)		42	_	
Egg (Dried)		1		
Egg (Spray)	***	2		
Fats and Oils	****	1		
		38		
Fish (Canned)		1	_	
Fish (Spread)	***		_	
Flour		2	_	
Fruit (Canned)	***	66	_	D
Fruit (Dried)	***	34	5	Damp and moulds.
Fruit (Juice)		14	2	Excess preservatives.
Fruit (Pie Filling)		10	_	
Fruit (Pulp)		4	1	Excess preservative.
Ginger		2	_	
Honey		3	_	
Jams and Jellies	***	8	6	Prohibited preservative.
Lard		10	_	
Lemons		1	-	
Lentils		1		
Macaroni (Canned))	1		
Meats (Canned)		24	-	
Meats (Cooked)		1	_	
Milk Powder		1		
Nuts		8	1	Moulds.
Oranges	***	2	_	
Pepper		1	_	
Pickles		9	_	
Puddings		1	_	
Potatoes (Canned)		2	-	
Potatoes (Diced)		1	1	Moulds.
Potatoes (Powder)		1	-	

		Fit for Human	Unfit for Huma Consumption o not Conforming	r
Article		sumption	Regulations	Remarks
Rice		5	2	Seawater damage and chemical contamination.
Rice (Canned)		1	-	
Rum		3	_	
Salad Dressings		3	-	
Sauce		3	_	
Sherry		2	-	
Soups		7	-	
Spaghetti		1	-	
Syrup		1	-	
Tea		27	1	Wet damage.
Tomatoes (Canned)	9	-	
Tomatoes (Juice)		5	_	
Tomatoes (Purée)		1	-	
Vegetables (Canne		26	_	
Vegetables (Fresh)		2	_	
Whisky	***	5	-	
Wine		13	-	
		520	30	
		020	-	
		Recorded .	-	

SAMPLES SUBMITTED TO CITY BACTERIOLOGIST.

Article	Sound	Unfit	Remarks
Baby Foods	64	_	
Butter	5		
Cakemix	5	_	
Coconut (Desiccated)	1,412	7	Bacterial contamination.
Chicken (Canned)	1	_	
Chocolate (Cooking)	1	_	
Egg (Albumen)	360	1	Bacterial contamination.
Egg (Dried)	4	-	
Egg (Frozen Whole)	23	_	
Egg (Spray)	11	_	
Egg (Whites)	11	_	
Fish (Canned)	46	_	
Fish (Spread)	1		
Lard	9	_	
Mayonnaise	1	_	
Meats (Canned)	14	1	High bacterial counts.
Meats (Cooked)	1	-	
Milk Powder	1	_	
Nuts	_	4	Moulds.
Puddings	1	_	
Tomatoes (Canned)	1	1	High bacterial counts.
	1,972	14	
		Section 197	

Public Health (Imported Food) Regulations (Scotland) 1937.

The following statement submitted by the Corporation Veterinary Inspector indicates the work done under the Foreign Meat Regulations during 1963:—

EXAMINED.

Beef-				Offal—	
Quarters			 2,544	Ox Tongues, cartons	293
Cuts			 33	Ox Hearts, cartons	155
Cartons			 24,160	Ox Livers, cartons	3,825
				Ox Stomachs, cartons	309
Venison-				Ox Kidneys, cartons	1,665
Cartons			 6	Ox Tails, cartons	325
Veal-				Ox Sweetbreads, bags	20
			104	Ox Casings, tierces	52
Cartons	***	***	 194	Ox Mixed Offal, cartons	1,436
Mutton-				Sheep Livers, cartons	1,723
Carcases			 9,885	Sheep Kidneys, cartons	25
Sides			 1,470	Sheep Casings, tierces	35
Cuts			 120	Sheep Mixed Offal, cartons	414
Cartons			 3,063	Lamb Livers, cartons	5,097
Curtons	***		 -,	Lamb Stomachs, cartons	109
Lamb-				Lamb Kidneys, cartons	10
Carcases			 38,248	Lamb Mixed Offal, cartons	45

W. J. SMITH, Senior Port Inspector.

SECTION XI

HOUSING.

The total number of municipal houses completed during 1963 was 3,492. The following table shows the rate of completion since 1959 by the Corporation and the Scottish Special Housing Association:—

Year	Direct Labour	Con- tractors	Scottish Special Housing Assoc.	Total Municipal Houses from all Sources
1959	2,514	174	370	3,058
1960	2,635	620	72	3,327
1961	2,116	769	164	3,049
1962	1,646	303	56	2,005
1963	2,299	865	328	3,492

RENT ACT, 1957.

Return of certificates issued by the Local Authority during the year :-

I. Certificates of Disrepair issued under Section 8(1) of the 1957 Act.

Applications for	or	Certifica	tes					13
Of which—								
Granted						***	4	
Refused						+++	6	
Cancelled						***	-	
Outstanding		***					3	
Applications fo	or	Revocat	ion o	f Certif	icates			9
Of which—							11 11 19	
Granted							4	
Refused				***		***	-	
Cancelled				***	***	***	1	
Outstanding							4	

No other certificates were issued under the Act.

REHOUSING OF TUBERCULOUS FAMILIES.

TABLE I.

Year		Number of Recommended	
1934-1945		3,764	1,484
1946-1959		7,133	5,959
1960	***	188	235
1961	***	189	180
1962		113	119
1963	***	65	78
		11,452	8,055

TABLE II.

Recommendations, 1934, to December, 1963			11,452
Number of Families Rehoused—			
Rehousing		2,271	
Intermediate		1,904	
Ordinary Super Ordinary \		3,380	
City Factor's Houses and Others		178	
Temporary Houses		322	
Recommendations remaining but not yet Rehous	sed		
Refused Offers		185	
Did not reply		183	
Gone away—Address Unknown		503	
Cancelled		858	
Patient Deceased		1,584	
			11,368
Still to be dealt with			84

TABLE III.

SUMMARY OF TUBERCULOUS FAMILIES REHOUSED SINCE 1934.

Recom-													
mended	1	934/53	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	Total
1934/52		4,762	120	55	33	8	_	1	_	_	_	_	4,979
1953		153	175	51	17	8	_	3	1	_	_	_	408
1954		_	160	212	63	8	2	3	2		1	_	451
1955		_	_	168	171	15	3	4	5	_	_	1	367
1956		-	-	_	260	159	11	3	1	1	_	_	435
1957		_	_	_	_	297	155	24	11	4	4	_	495
1958		_	-	_	-	-	138	115	37	6	1	1	298
1959		-	_	-	-	_	_	86	100	17	2	_	205
1960		_	_	_	_	_	_	_	78	66	3	4	151
1961		_	_	_	_		_	_	_	86	51	13	150
1962	***	_	_	_	_	-	-	_	_	-	57	30	87
1963		-	-	-	-	-	-	-		-	-	29	29
		4,915	455	486	544	495	309	239	235	180	119	78	8,055
	- 8	Section 2 and in	-	-		-				-		_	The second second

SECONDARY PRIORITY SCHEME.

During 1963, 277 recommendations were made under the scheme, classified as follows:—

Category	M.2	 187
Category	M.3	 90

DETERIORATION OF PROPERTY.

During the year 1,866 dwellings were represented to the Housing Committee as uninhabitable and a further 80 houses which had formerly been retained under Section 3 of the Housing (Repairs and Rents) (Scotland) Act, 1954, were taken out of use. The wastage of houses over the last ten years is shown in the following table:—

		То	be Rende Fit for	ered			
Year	Closing Order	Demoli- tion Order		Slum Clear- ance	Total	Section 3	Grand Total
1954-58	2,645	4,208	_	*583	7,193		7,193
1959	762	942	12	_	1,716	_	1,716
1960	862	694	-	798	2,354	_	2,354
1961	900	945	_	_	1,845	-	1,845
1962	841	971	-	-	1,812	-	1,812
1963	1,069	797	-	-	1,866	80	1,946
	7,079	8,557	12	1,381	16,786	80	16,866

^{*}Includes 243 houses previously dealt with by Closing and Demolition Orders.

The number of houses condemned by the Master of Works as dangerous in 1963 was 368.

SUPERVISION OF TENANTS IN HOUSING SCHEMES.

The development of this important branch of the Department's work from its inception in 1923 was fully reviewed in this section of the 1957 Annual Report.

This service, which was extended in 1956, now includes-

- The visitation of new schemes as they are occupied, e.g., Castlemilk, Arden and Easterhouse.
- 2. Visits to new houses where the tenants are in residence and having difficulties.
- The visitation of backward and feckless families about to be rehoused, including families who are overcrowded and have long-standing applications.

Details of the number of visits paid to houses in the various schemes, (Ordinary and Intermediate), and the conditions found, are shown in the Appendix Table XV, General Sanitary Operations (Section 30).

Supervision of Tenants in Housing Schemes.

(a) Conditions as to Cleanliness.

The number of houses in the various rehousing schemes reported on is 14,989.

No. of tenants under supervision at 1st January, 1963	14,933
Of which evicted or left owing rent during 1963 14 Of which left voluntarily during 1963 50	
Of which remaining as at 31st December, 1963 No. of tenants obtaining entry during 1963	14,290
Of which evicted or left owing rent during 1963 Of which left voluntarily during 1963	2
	- 3 661
Total number of tenants remaining as at 31st December, 196	3 14,951

At the beginning of the year 14,933 households were under supervision, and at the end of the year 14,951. The number of new tenants was 661. There were 643 removals or 4 per cent. of the total occupancies.

The changes in the condition of the 14,290 households under supervision throughout the whole year were as follows:—

Condition a	t beginn	ing of	Year— 9,872	Group Percent- ages 69·1	Con Clean 9,733	dition at Fair 136	end of Dirty 3	Year Total 9,872
Fair			4,381	30-6	342	3,911	128	4,381
Dirty			37	0.3	_	10	27	37
			14,290	100-0	10,075	4,057	158	14,290
Group	Percent	ages			70.5	28.4	1.1	100-0

A similar table is given for the 661 tenants who obtained entry during the year and were still resident in the schemes at the close:—

Condition	at date	of entry	y—	Group Percent- ages	Condition Clean	at end Fair	of Year Dirty	Total
Clean			288	43.6	213	75	_	288
Fair	***	***	370	56.0	4	364	2	- 370
Dirty	***		3	0.4	_	_	3	3
			661	100-0	217	439	5	661
Group	Percen	tages			32.8	66-4	0.8	100.0

The condition, prior to removal, of the houses occupied by families who were evicted or left owing rent and by tenants removing voluntarily during the year is compared in the following table:—

					ts Evicted ing 1963		Removing during 1963
Condition a	t date	of ren	noval-	-	Group		Group
				Number	Percentages	Number	Percentages
Clean				17	12.0	371	74-1
Fair				119	83-8	129	25.7
Dirty				6	4.2	1	0-2
				142	100-0	501	100-0
				and the same of	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, whic	Services .	Santana Santana

(b) Bug Infestation.

The total number of houses in which evidence of bed bugs was found was 1 or 0.01 per cent. This represents a considerable decrease from the previous year.

PROGRESS OF BUG INFESTATION PREVENTION IN REHOUSING SCHEMES.

Numb	er of Numb	Number of Houses in which				Percentage of Total			
Hou	ses Be	d Bugs	were	found	N	umber	of Hou	ises	
Year Insp	ected Trace	M.I.	S.I.	Total	Trace	M.I.	S.I.	Total	
1934-38 60,1	41 933	1,108	1,829	3,870	1.55	1.84	3.04	6-43	
1939-43 73,5	529 244	314	688	1,246	0.33	0.43	0.93	1-69	
1944-48 73,8	345 150	119	537	806	0.20	0.16	0.73	1-09	
1949-53 74,0	001 68	164	335	567	0.09	0.22	0.45	0.77	
1954 14,9	925 14	28	24	66	0.09	0-19	0-16	0-44	
1955 14,9	25 12	16	38	66	0.08	0.11	0.25	0.44	
1956 14,9	925 5	30	12	47	0.03	0.20	0-08	0.31	
1957 14,9	925 2	5	20	27	0.01	0.03	0.14	0.18	
1958 14,9	925 4	14	9	27	0.03	0.09	0-06	0.18	
1959 14,9	965 —	18	5	23	_	0.12	0.03	0.15	
1960 14,9	965 4	6	7	17	0.03	0.04	0.05	0-11	
1961 14,9	965 5	14	8	27	0.03	0.09	0.05	0.18	
1962 14,9	989 2	3	3	8	0.01	0.02	0.02	0.05	
1963 14,9	1 1	-	-	1	0.01	-	-	0.01	

Trace—Old hatched eggs or bug casts only.

Medium Infestation (M.I.)-Live bugs or eggs on furnishings only.

Serious Infestation (S.I.)—Living bugs or eggs on furnishings and in structure of buildings.

DISINFESTATION UNIT.

During the year the work of the Unit has been maintained at a high level. Indeed, as the figures below show, there has been a slight increase over the previous year.

TABLE I.

			Numb	er of Apart	ments Treated	1	
			D.,	Tenants	C11	0/1	Total
Division			Bug Infestation	being Rehoused	Cockroach Infestations	Other	Apartments Treated
Central			59	53	119	189	420
Northern			121	1,511	152	382	2,166
Eastern			170	339	177	299	985
South-East	tern	***	85	251	74	192	602
South-Wes	tern		92	289	87	111	579
			527	2,443	609	1,173	4,752

Rehousing.—This will remain a major activity of the Unit for many years ahead. The number of houses and amount of furniture treated prior to the tenants being rehoused again shows a considerable increase on the previous year.

Other Insects.—This part of the Unit's work has followed the same pattern as in previous years, resulting in the investigation of many complaints of a large variety of insects from all kinds of premises. An ever-increasing problem is the control of heavy infestations of Psocids (Book Lice) in the new housing schemes. Although entirely harmless to humans and structural woodwork, etc., they can be disconcerting and nauseating to a householder who finds them on foodstuffs in the larder. These small insects feed only on minute moulds and fungi on the wall surfaces and it is the opinion of this Unit that the use of the modern Hardwall plaster which does not absorb the condensation gives rise to ideal breeding conditions for these insects. This appears to be borne out by the fact that only on a very rare occasion is a complaint of Psocids received from pre-war houses where lath and plaster was the standard wall surface.

An interesting investigation resulted from a complaint of insects in a large office block in the city centre. These were found to be Spider Beetles (Ptinus) and there was an extremely heavy infestation around the window frames and ledges. These little beetles are scavengers and live on dry vegetable and animal matter and were breeding on the debris caused by the large numbers of starlings which roosted on the ledges of the building.

The following table shows the amount of work carried out in each Division in respect of other insect infestation.

TABLE II.

		Numb	per of Apart	ments Treate	d	
Division		Verminous	Flea	Fly Infestation	Other	Total
Central		 21	62	47	59	189
Northern		 27	245	26	84	382
Eastern		 28	177	17	77	299
South-East	ern	 3	106	16	67	192
South-Wes	tern	 -	79	3	29	111
		79	669	109	316	1,173
		The same of the sa	-	-		

Insect Identification.—For the identification of insects the services of the Unit were requested on 62 occasions. This part of the work takes up a great deal of time which cannot be shown by statistics. We would like to record our sincere thanks to our friends of the Zoology Department of Glasgow University for their co-operation and help so willingly given throughout the year.

Other premises.—In addition to the work shown in the previous tables, 351 treatments of other premises (restaurants, shops, schools, etc.), were carried out for numerous kinds of insect pests. This side of the work brought in a revenue of £116 14s. 9d. During the months, April to October, three additional operators were employed for fly control and 6,980 treatments of ashbin shelters, stables and piggeries were carried out.

Following requests from the Police, City Factor and householders, the Unit successfully dealt with 43 wasp nests which were either on or in close proximity to houses, schools, etc.

The following table shows the number of visits made during the year for different types of infestation:—

TABLE III.

Bug Infestation and Rehous	ing	***		3,614
Cockroach Infestation		***		1,239
Verminous Bedding, etc.				200
Flea Infestation	***	***		388
Fly Infestation	***	***	***	162
Other Insect Infestation				760
				6,363

Insecticides.—The well-known and well-tried insecticides, D.D.T., Lindane, Chlordane, Dieldrin, etc., are still being successfully used by the Unit. No evidence of insect resistance to these chemicals has been encountered up to the time of writing. Towards the end of the summer experiments were carried out with the new insecticide, Vapona. This insecticide is based on D.D.V.P. and has a quick knock down effect and high vapour phase activity. The slow release of the vapour should be effective in controlling flying insects in certain premises. Applied by trained operators at the correct dosage rates, the insecticide is safe to use and is less toxic to humans than many of the other chlorinated hydrocarbons or organophosphates. Further tests of this insecticide will be carried out during the next summer period.

SECTION XII

WESTERN REGIONAL HOSPITAL BOARD THE CITY LABORATORY.

For the City Laboratory 1963 was a year of readjustment and reappraisal. Full responsibility for its maintenance had been assumed by the Western Regional Hospital Board only towards the end of the previous year and several matters had yet to be settled. Some of these demanded urgent attention but, since the day-to-day administration of individual laboratories is not usually conducted at Regional levelthis being customarily a function of Boards of Management or Hospital Management Committees-precedent afforded little in the way of guidance. Accepting that the principle of accountability, which must govern all who are entrusted with resources gifted by the public purse, need not be so narrowly interpreted that every point of procedure is referred for decision to the summit of authority, it was equally clear that delegation to those in immediate charge should confer no more than reasonable freedom of action, and that this must never be taken to mean latitude. The situation called for flexibility and a readiness to improvise and it took a little time to evolve an effective modus operandi. In all this, the wisdom and forbearance shown by the Regional Board's Laboratory Services Sub-committee and, in particular, the unfailing support of its Convener, Dr. J. C. J. Ives, assisted by the Secretary, Mr. Robert Smith, is gratefully acknowledged.

Priority having been accorded to problems connected with the assimilation of the Laboratory staff into the structure of the hospital service, as the year progressed it became possible to take stock of the Laboratory's position and the role it has to fill in the context of the National Health Service, to assess its physical capacity to discharge its functions and to determine what, if anything, could be done to enlarge and improve its capability.

The two obvious needs were for equipment and more space. Much of the basic equipment, e.g. sterilising appliances, having given good service for many years, was becoming inefficient and obsolescent, and since such appliances tend to be built-in fixtures, the on-site installation of replacements was bound to entail some measure of structural alteration, with inevitable encroachment on working space. The available accommodation, moreover, had not been materially increased since the Laboratory had been built in 1925, although the workload had increased fourfold in the meantime. Some degree of expansion was thus a pre-

requisite of re-equipment. For the Regional Hospital Board the prospect of seeking to enlarge premises occupied under tenancy presented grave difficulties, not the least of which were the physical limitations imposed by the laboratory's situation on the fourth (and top) floor of the City Chambers Extension. But perhaps the most daunting problem of all was the realisation that the work of the Laboratory would have to carry on without break or hindrance during any alterations and that all the old equipment, however inadequate, would have to remain in daily use until replacements were in full working order.

After much deliberation and a most searching examination of every conceivable way of setting about the task, a detailed scheme of reconstruction, suitably phased so as to interfere as little as possible with the efficient working of the Laboratory, was presented to, and authorised by, the Regional Board during the summer, and architects' plans were received and approved by early autumn. Working conditions to be observed by contractors were duly negotiated with the Corporation's representatives, tenders were expeditiously considered and, though it became apparent that the funds immediately available would not cover the entire scheme, the go-ahead was given to proceed with the first, and most pressing, phase of the programme (a new serological laboratory, redesigned washing up/sterilising facilities and one or two ancillary rooms) and, in the very last week of the year, the tradesmen moved in and set to work. By the time this report was written the first phase had been completed and was generally conceded to have added much to the Laboratory's effectiveness; it is to be hoped that resumption of work on the scheme will not be too long deferred.

During the year there was one change among the professional staff, Miss Janet F. Armour, B.Sc., N.D.D., Assistant (Non-Medical) Bacteriologist, opted, for purely private reasons, to relinquish her appointment some years in advance of compulsory retirement age. She had occupied the post for nine years, specializing in the bacteriological control of water and milk, a branch of the work which benefited enormously from her wide-ranging scientific knowledge and her extensive experience of the dairy industry. To the Laboratory staff and to many associates in other departments Miss Armour had been a highly-regarded colleague and all join in sincerely wishing her a full and happy life in her retirement.

The post she vacated was filled by the appointment of Dr. G. Anagnostopoulos, a graduate of the University of Athens and a former State Scholar of Greece, who had just completed a three-year period of research in microbiology, for which he was awarded a Doctorate of Philosophy, at the University of Nottingham. At a time when the

so-called "brain drain" from Britain is the subject of so much public lament it is pleasing to be able to record this example of the reverse process.

The total number of examinations conducted during the year was 141,991, this being an increase of 16 per cent. over the figure for 1962. Close examination of the figures reveals that, while the volume of work concerned with public health control remained more or less constant, the increase was almost entirely due to an extension of what for convenience, may be termed clinico-pathological work, particularly work done for general practitioners. This is a tendency which should be welcomed and fostered, because greater familiarity with the one branch of the work cannot fail to enhance the performance of the other.

COMMUNICABLE DISEASES—EPIDEMIOLOGICAL INVESTIGATIONS.

Diphtheria.—The downward trend in the number of swabs from suspected cases continued; there were but 453 through the year—171 fewer than in the previous year. Only two of them were found to be positive and, though exhibiting the cultural characteristics (without fermenting starch) of C.diphtheriae gravis, neither proved virulent on animal inoculation. To many epidemiologists such strains are unimportant and one of these two cases would seem to vindicate this view. He was a boy of six who, on the strength of this laboratory report, was notified as a case of diphtheria and admitted to one of the City's fever hospitals. On admission he showed no clinical evidence of the disease and, although the presence of the organism in his throat was later confirmed by the hospital laboratory, he remained well and was discharged nine days later.

The second patient with a positive swab, however, had a history which may be a warning against disregarding even these avirulent strains. A woman of 48, she complained of an acute sore throat, a swab of which was found to be positive for *Strep.haemolyticus* (doubtless the cause of her symptoms) as well as the avirulent *C.diphtheriae gravis*. It then became known that in 1941/42 she had suffered from diphtheria, for which she was treated in a fever hospital for five weeks; at the same hospital, during her stay there, her four-year old son died of the disease. Was this a fresh infection in 1963, or had she remained a carrier for 21 years? If she had, then clearly the organism, through time, had lost its toxigenicity. But, if it persists in her throat, will it always remain harmless? Or might it, equally spontaneously, regain its virulence? There is experimental evidence that, through the mediation

bacteriophage, the virulence of *C.diphtheriae* can be artificially exalted. Who can say that a similar mutation cannot occur, by a caprice of nature, in the human host? Such happenings might well explain the occasional occurrence, in various parts of the country in recent years, of short sharp epidemics of diphtheria, the origins of which have so often been unsolved epidemiological mysteries. So perhaps it would be as well to continue to heed every strain of *C.diphtheriae*—and keep a discreet eye on its carrier—however innocuous the organism might appear to be.

Streptococcal Infections.—900 swabs, mainly from the throat, were examined specifically for Strep. pyogenes (Group A haemolytic streptococci) and 250 of them were found positive. The total number examined was about the same as in the previous year but the lower percentage of positives (27.7 per cent. as compared with 40.6 per cent.) indicates that these organisms caused even less anxiety than they did in 1962, when there were one or two minor outbreaks in closed communities. In 1963 the specimens almost invariably came from sporadic cases of acute upper respiratory infections, or from individuals the nature of whose intended occupations (e.g. in maternity hospitals) necessitated precautionary swabbing. There can be little doubt that penicillin, to which Strep.pyogenes is practically always highly sensitive, has played a dominant role in limiting the spread of these infections, which, in maternity units and the community at large, were so dreaded as lately as thirty years ago. Would that the same could be said of the staphylococcus!

Staphylococcal Infections.—Pathogenic (i.e. coagulase-positive) staphylococci were encountered in only 161 specimens during the year, little more than a third of the total for the previous year, a very small number indeed in proportion to the bulk and variety of specimens dealt with. This is because, as was fully explained in last year's report, very little hospital material finds its way to this Laboratory nowadays. Boils, abscesses, ear discharges and conjunctival infections (especially in young babies) accounted for most of these strains, of which 52.8 per cent. were penicillin-resistant, which is not significantly different from the 50 per cent. resistance rate in 1962.

Vincent's Infections.—Borrelia vincenti and Fusiformis fusiformis were looked for in 231 mouth and throat swabs but these symbionts could be held accountable for the symptoms in only 4 of them (compared with 15 out of 244 last year).

But if Vincent's Angina and Vincent's Stomatitis were rare conditions, microscopic evidence of fuso-spirochaetosis was found with surprising frequency in genital swabs from females, during routine screening for venereal infections. Curiously enough, the infection, though often gross, seldom seemed to cause symptoms and the finding appears to have no significance other than as a reflection on the personal hygiene of the individuals concerned, most of whom were promiscuous young delinquents.

Glandular Fever.—Requests for the Paul-Bunnell Test, though more than twice as many as in the preceding year, totalled only 24. Three of the sera gave positive results and, in each case, examination of the leucocytes corroborated the diagnosis of infectious mononucleosis.

Undulant Fever.-At the beginning of the year an interesting investigation was undertaken because a patient, admitted to one of the City's hospitals in December, 1962, had been found to be suffering from abortus fever. Though a city worker, he lived in a cottage in close proximity to a farm where there was a dairy herd of about 90 cows and. during the preceding year, a number of these had aborted. The main bulk of the herd's milk yield (about 115 gallons daily) was despatched to a pasteurising plant, but raw milk from two special cows, "Rosie" and "Elsie" (about 21 pints per day) was reserved for the farmer's household, the patient and his family, and the families of three or four neighbours, a community of some 24 individuals in all. Blood specimens from 21 of them were received for examination. Ignoring those whose serum titres in the agglutination test were 1 in 125 or less, six of them (including the known case) had Brucella agglutinins in significant amounts in their sera, three of them to a titre of 1 in 5,000 or more. One of these was the hospital patient, another was a four-year old child who, it was subsequently ascertained, had been ill with alleged "influenza" about a month previously; although it lasted only two days, this illness could well have been brucellosis in a mild form. The third was a robust young farmer who had never even felt unwell.

Four samples of pooled milk from the farm herd were examined between January and March and each showed presumptive evidence of infectivity, one or more of the following tests proving positive:—
1. Brucella Ring test; 2. Whey Agglutination Test; 3. Agglutination of standard Brucella suspensions by the sera of guinea-pigs inoculated with the milk. Also a guinea-pig inoculated with one sample developed an abdominal abscess from which was recovered an organism presenting the characteristics of *Br.abortus*. Two samples from each of the two cows "Elsie" and "Rosie" gave negative results in all these tests,

but the interesting point that emerged was that, while the four samples were, of course, taken separately and directly from each cow, the usual routine at the farm was to milk these two cows last, using the same tackle that had just been used to milk the rest of the herd. In other words milk from "Elsie" and "Rosie", however irreproachable at source, was being exposed to possible contamination with brucella from traces of herd milk in the dairy equipment.

This episode illustrates yet again that the only really safe milk is heat-treated milk; it also draws renewed attention to the fact that for every known case of brucellosis there may be many unsuspected subclinical infections. Fortunately even the overt infections seldom endanger life but, so protean is its symptomatology, this disease could well account for a great deal of unsuspected morbidity.

Enteric Fever.—There was a decrease in the number of specimens from patients in the differential diagnosis of whose illnesses enteric fever was being considered; 215 such specimens were received (in 1962 there were 274). But 329 repeat specimens were submitted for clearance and control purposes (96 more than in the previous year).

As a result of these investigations 8 individuals were found to be excreting S. paratyphi B, but 4 of them were known carriers. The corresponding figures for 1962 were 9 and 5. S.typhi was isolated from 3 persons already known as persistent carriers.

Six such specimens received from Stirlingshire gave negative results.

It had been anticipated that a comprehensive screening of water department personnel for enteric carriers would have been begun during the year but, for various reasons, this had to be postponed to 1964. As a result only 26 specimens of excreta and 15 of blood (about half the number for 1962) were examined for this purpose, all with negative results.

Food Poisoning due to Salmonellae.—3,970 specimens (some of them repeat specimens) were submitted from patients whose symptoms suggested salmonella food poisoning, or from their contacts, or from putative handlers of the suspected foods. The total was 490 more than in the previous year but salmonellae were less frequently isolated—95 times, compared with 163 in 1962—and the number of new cases diagnosed was only 51, forty fewer than last year. Among these S.ibadan S.essen and S.blockley made their appearance for the first time in 1963, but it will be recalled that the last-named had been isolated once from an imported egg product during 1962. S.typhimurium, which was isolated

from 35 of the 51 new cases, is of course the organism most frequently incriminated in these episodes of food poisoning. The following table of strains isolated in all such investigations conducted in this Laboratory over a twelve year period illustrates this very strikingly:—

	1963	1962	1961	1960	1959	1958	1957	1956	1955	1954	1953	1952
					73	40	92	123				
S.typhimurium	35	52	70	93	8	3	1		122	87	209	139
S.enteritidis	4		-	1	0	0	1	2	10	4	13	7
S.enteritidis var.			15									
jena	-	-	15	1	No.	150	-		-	_	-	-0
S.newport			-		1	2	4	-	8 25	-	3	2
S.thompson	-		_	-			1	-		-		
S.potsdam	-	_					5	_	-	1	-	
S.saint-paul	-			1	_		9	-	-		-	-
S.montevideo			-	1	-					-	-	-
S.bovis	1	1			1		1	1	1			1
morbificans	1	1			1		1	1			1	-
S.oregon S.minnesota							_				1	1
		100				1		1				
S.san diego S.senftenberg	-					1	1	1				_
01.1		1							_		_	1
S.stanleyville	-	4	1									1
Cainalana		-						-	-			1
Canadana	3				_		_	1			1	-
Catanlan	0	28		4			2	1		_	17	
Canadanasa	18 18			*			_	1		1	11	
CT.				1000	1000		-	1		1		
S. johannesburg				1						1		
S.cholerae suis										1		
(var. Kunzen-												
dorf)	2		-							1		1
S.choleran suis	-									1		
(var American												
type)	_	_	200	1	-	1	_		_	_	_	_
S.derby	_		3	î	2		-		1		_	_
S.muenchen		_	_	_	_	_		_	1	_	-	_
S.heidelberg	_	1	1	_	7	_	_	2	1	_	_	_
S.oranienberg	_		-	1					1		_	_
S.litchfield	-				_	_	_	1	_	_	-	
S.unidentifiable	-	-	2	-	-	_	_		_	_	2	-
S. (new salmonelle	ı											
unnamed)	_	_	_	_		-	_	1	_	1	1	-
S.give	-	-	-	_	_	_	1	-	-	_	_	-
S.panama	-	-		_	-	4	-	-	_	_	_	-
S.vancouver	-		_	_	5	_	_		_	-	-	-
S.dublin	-	-	_	_	1	-	_	_	-	-	-	-
S.bleadon	-	-	-	-	1	-	_	-	-	-	-	-
S.meleagridis	_	-	_	2	-	_	_	-	_	_	_	-
S.hvittingfoss	-	-	2	1	_	-	_		-	-	-	-
S.loma-linda	-	-	_	1		-	-	_	_	-	-	-
S.infantis	3	2	2	-	-	-		-	-	-	-	-
S.cubana	-	1	-	-	_	-	-	_	-	-	-	-
S.bareilly	-	1	-	-	-	-	-	-	-	-	-	-
S.ibadan	1	-	-	-	-	-	-	-	-	-	-	-
S.blockley	1	-	-	-	-	-	-	-	-	-	-	-
S.essen	1	-	-	-	-	-	-	-	-	-	-	-
Telegraphic States	E1	01				-	***		100		0.10	100
	51	91	96	106	99	51	108	132	170	96	247	160

¹⁴ similar specimens from Stirlingshire all proved negative.

Food Poisoning due to other organisms.—Heat resistant, non-haemolytic strains of Cl.welchii (Cl.perfringens) were isolated from 9 out of 127 specimens of faeces, and Staph.aureus (coagulase-positive) from 5 out of 69 specimens, from patients whose illnesses could credibly be ascribed to the ingestion of foods in the remnants of which the same organisms were found (v.infra).

Foodstuffs suspected of having caused Food Poisoning.—100 such samples (three times as many as in the previous year), representing all types of foods, from trifle and cream cakes to roast and tinned meats, were examined for salmonellae, but only one gave a positive result; this was a sample of frozen whole egg, from which S.typhimurium was isolated. Cl.welchii and Staph.aureus were looked for in 39 samples of food, the former being found in 6 and the latter in 5; the findings accorded with the clinical histories of the cases involved. Only one of the strains of staphylococci was identified (at the Phage-typing Laboratory, Western Infirmary) as a "food-poisoning" phage-type (i.e. Group 3); it had been isolated from a sample of sliced tinned meat.

Dysentery.—The number of new cases of bacillary dystentery, of which 1,068 were diagnosed during the year, was low in comparison with recent years and 503 less than in 1962, but an upward trend in the figures for November and December augured badly for 1964. The figures (with those for 1962 in brackets) may be conveniently summarised thus:—

Spec	imens	No. I	ositive	% P	ositive
9,115	(11,185)	1,068	(1,571)	11.72	(14.04)
5,501	(8,225)	542	(849)	9.9	(10.32)
14,616	(19,410)	1,610	(2,420)	11.01	(12-46)
	9,115	Specimens 9,115 (11,185) 5,501 (8,225) 14,616 (19,410)	9,115 (11,185) 1,068 5,501 (8,225) 542	9,115 (11,185) 1,068 (1,571) 5,501 (8,225) 542 (849)	9,115 (11,185) 1,068 (1,571) 11·72 5,501 (8,225) 542 (849) 9·9

While Sh.sonnei was again the dominant type, Sh.flexneri (including the Newcastle/Manchester type) still accounted for no less than 13.6 per cent. of the total number of new strains isolated. The diminution in the Flexner/Sonne ratio which had continued for the three preceding years was thus halted—

	1960	1961	1962	1963
Flexner/	1.64	0.44	0.13	0.16
Sonne	. /1	/1	/1	/1

and it will be interesting to see if it will now start to rise again. The table which follows records the distribution of types among all shigella strains isolated from new cases over an eighteen year period—

Year	Sonne	Flexner	Newcastle	Boyd	Schmitz	Total
1946	111	109	49	_	_	269
1947	66	18	21	-		105
1948	434	383	3	_	_	820
1949	501	373	1	_	1	826
1950	1,865	105		_	_	1,970
1951	949	40	_	_		989
1952	1,779	11	3	_	-	1,793
1953	1,694	272	- 111	_		1,966
1954	2,524	1,754			_	4,278
1955	2,763	1,484	1	-		4,247
1956	2,388	309		_	_	2,697
1957	1,830	190				2,020
1958	1,556	268	5*		_	1,829
1959	1,805	554	67*	1	_	2,427
1960	864	839	582*			2,285
1961	1,153	230	282*	_	_	1,665
1962	1,385	85	101*			1,571
1963	923	124	21*			1,068
1000						

^{*} Newcastle/Manchester type.

Out of 46 specimens received from Stirlingshire 3 were positive (2 Sh.sonnei, 1 Sh.flexneri).

Amoebic Dysentery.—44 specimens of faeces (2 of them from Stirlingshire) were examined for E.histolytica, all with negative results.

Giardia intestinalis.—This flagellate, usually in the cystic form, was found in 35 out of 174 stool specimens examined. The patients were nearly all small children, mostly in residential nurseries, and the aetiological significance of the findings remains problematical.

Venereal Diseases.—16,514 specimens of blood were submitted to "screening" tests for syphilis; the two screening tests used were the Standard Wassermann Reaction and Price's Precipitation Test. As usual most of these were specimens taken as part of the routine examination of pregnant women and it is sometimes questioned whether the time and energy expended on these tests is justified, considering the low incidence of positive results (no more than about 0.05 per cent.). There can be no doubt as to the answer; when the diagnosis is established, treatment, which will fully protect the unborn child, can be administered to the mother during her pregnancy, with, of course, obvious benefit to her own health also. If, by such means, even one child can be spared a syphilitic inheritance the effort is well worthwhile.

Any specimens giving a positive or a doubtful reaction in the screening tests were more fully investigated—along with specimens taken for diagnostic and follow-up purposes at V.D. clinics and by general practitioners as well as sera referred for confirmation from other laboratories—by means of the Cardiolipin Wassermann Reaction, the Reiter Protein Complement Fixation Test and the Precipitation Test over an extended range of dilutions. 3,265 sera were subjected to this procedure.

25 specimens of cerebrospinal fluid were also received for these tests and for Lange's Colloidal Gold Test.

Rather fewer specimens were submitted for the Gonococcal Complement Fixation Test in 1963. 35 of the 241 so tested were found positive, as compared with 54 out of 323 in the previous year. But the number of smears and swabs of exudates sent for the diagnosis of suspected gonorrhoea increased, by more than a thousand, to 6,138. 73 out of the 1,278 smears were positive. As for cultures, 4,729 specimens, from 1,349 patients, were swabs in Transport Medium and N.gonorrhoeae was cultured from 361, representing 245 patients. Ordinary swabs, unless they can be delivered at the laboratory a few minutes after being taken, are not so satisfactory for the culture of the gonococcus, but 131 such swabs were received. The diagnosis was established by microscopic examination of the accompanying smears in 27 instances but a positive culture was obtained in only 17. It is felt that the organism could have been cultured from some, if not all, of the remaining ten if only the specimens had been collected and transported by Stuart's method. The diagnosis of gonorrhoea by microscopy alone may have sufficed in the past but, with the emergence of antibiotic-resistant strains of N.gonorrhoeae it becomes increasingly necessary to obtain a culture of the organism from every patient, so that treatment can be rationally controlled by in vitro sensitivity tests.

The various specimens for the diagnosis of these diseases, for the follow-up of treatment, for contact-tracing or for general control purposes totalled 25,848, which showed no appreciable change from the figure for 1962 (25,499) but, because of the rather more exhaustive investigations now undertaken, the number of individual tests performed on them increased, by about 30 per cent., to 51,872.

Trichomoniasis.—Trichomonas vaginalis was found in 629 out of 4,922 genital swabs in Transport Medium examined microscopically. Cultures were then set up from the remaining 4,293 and the flagellate was isolated from 134 of these. The overall positive diagnosis rate was

thus 15.6 per cent. (763 out of 4,922), whereas it would have appeared to be no more than 12.8 per cent. had sole reliance been placed on microscopy. 61 other specimens of urethral or vaginal discharges collected on conventional swabs were not considered suitable for culture and, on microscopic examination, *T.vaginalis* was found in only 6 of them (9.8 per cent. positive).

These figures illustrate the usefulness of culture as a supplement to microscopy in the diagnosis of this condition, and the advantage of having swabs submitted in Transport Medium. The value of this may be doubted in a condition which many believe to be readily recognisable by cursory visual examination but it is surprising how often an unsuspected infection can be unmasked-or a confident clinical diagnosis of trichomonal vaginitis refuted-by careful laboratory investigation. Metronidazole provides an effective remedy for trichomoniasis but, as with all forms of chemotherapy, accurate diagnosis should precede treatment. Equal importance should be accorded to the examination, by the same means, of the patient's sexual partner, in order to guard against repeated mutual reinfestation, as otherwise treatment may be needlessly prolonged—or drug-dosage rashly increased —in the mistaken belief that the infection is proving refractory. Like so many others, this drug, though safe enough if properly prescribed, is not entirely devoid of toxicity.

But there is an even more compelling reason why the laboratory's aid should be sought in the investigation of all genital discharges: renewed attention has recently been drawn to the not infrequent coexistence of trichomonal vaginitis and gonorrhoea. According to one leading venereologist, about half the women who have gonorrhoea have a trichomonal infection as well. The following figures, collected over a five year period in this Laboratory, indicate a similar, though less marked, tendency:—

Year	N.gonnorrhoeae Positive Swabs	No. in which Tr.vaginalis were also found	Incidence of trichomoniasis in those who had gonorrhoea
1959	 201	88	43.7%
1960	 195	48	24-6%
1961	 266	75	28.2%
1962	 270	68	25.1%
1963	 361	80	22.1%
Totals	 1,293	359	27.7%

Looked at from the opposite viewpoint the figures, if not so striking, are still worth noting. Out of 1,478 swabs in which Tr.vaginalis were

found during 1962/63 N.gonorrhoeae were also present in 151, an incidence of 10·2 per cent. of gonorrhoea in those with trichomoniasis. It is impossible to deduce, from the information supplied, in how many of these there was a clinical suspicion of gonorrhoea, but there is reason to believe that in at least a few the finding of N.gonorrhoeae came as a surprising revelation. What makes the situation dangerous is that, in a female patient with the dual infection, the trichomonas may be the main, if not the only, cause of the symptoms, which may disappear completely as a result of treatment with metronidazole. It this is given empirically, the coexisting gonococcal infection will remain undiscovered until an unsuspecting consort develops gonorrhoea or until the patient herself becomes the victim of one of the more serious complications of this disease. Adequate laboratory control of the diagnosis and treatment of these infections is thus a matter of some importance.

Ophthalmia neonatorum.—57 specimens of conjunctival discharge from newborn babies were examined microscopically and by culture for gonococci but only one was positive (compared with 8 out of 75 in the preceding year).

Tuberculosis.—Acid-fast bacilli were found in 18 out of 375 sputa examined microscopically for Myco-tuberculosis. The diagnosis was confirmed by culture in all but one of these 14 cases (4 out of the 18 were repeat specimens). Sputum specimens from 6 other patients yielded a growth of tubercle bacilli on culture although microscopical examination had been negative. In all, 385 specimens of sputum were examined by concentration and culture. The numbers are relatively small because the Laboratory does not serve any chest clinics. Nevertheless 7 new cases of pulmonary tuberculosis were discovered by these examinations and the general practitioners or institutional medical officers who had submitted the specimens were thus enabled to ensure timely treatment for the patients concerned. The other 13 sputum-positive patients were known cases who had either remained positive under treatment or, as the examination revealed, had suftered reactivation of previously quiescent disease.

The strains isolated on culture were tested for their *in vitro* sensitivity to the three tuberculostatic drugs most commonly used but, at the same time, subcultures were referred to Dr. L. G. Bruce, whose laboratory at Mearnskirk Hospital has been designated the Regional Reference Laboratory for drug-resistant tuberculosis, an admirable arrangement which should lead to much-needed standardisation of the techniques used in this work.

Various other specimens (pleural fluid, pus etc.) were examined for tubercle bacilli, 52 by culture, 10 by guinea-pig inoculation and 10 solely by microscopy, all with negative results.

CLINICAL PATHOLOGY.

An increase, from about 50,000 to over 58,000 specimens, which may be broadly classified under this heading, accounted for the greatest addition to the bulk of the work done in the Laboratory during the year. These fell into various categories, a few of which may be worthy of special mention:—

Urines.—1,855 specimens of urine (an increase of more than 300 on the number for the previous year) were submitted for bacteriological assessment and (when indicated) antibiotic sensitivity tests. When dealing with so many specimens the pour-plate method of counting bacteria in urine becomes very time-consuming and a modified quantitative technique has therefore been evolved, which, in controlled trials, was found to give reliable results. But, whatever the method of performing bacterial counts, the results will not be valid if the specimen is kept at an unsuitable temperature for any length of time before being sampled by the bacteriologist. Catheterisation, as a means of obtaining urine for laboratory investigation, is now condemned—and rightly so-but this makes it even more imperative that the specimen must not be allowed to deteriorate in transit. With this in view, a refrigerator has been specially provided near the receiving counter at the 23 Montrose Street entrance; specimens can thus be kept chilled (and bacterial multiplication arrested) whilst awaiting quantitative sampling. What happens to them before they reach that point is obviously outwith the bacteriologist's control. On reviewing the findings the impression is gained that most of them are carefully collected and expeditiously delivered and, under these conditions the laboratory reports give safe and helpful guidance to clinicians. But, in a minority of cases, puzzling-or, even worse, misleading-test-results must be attributed to failure on the part of those submitting the specimens to observe these elementary precautions. It may not always be easy to send the specimens quickly and, certainly, busy doctors cannot be expected to deliver them-although, in fact, many do-but perhaps the co-operation of others might be more actively enlisted. For instance, it is surely not too much to expect the patient, if ambulant, to make a special journey to deliver a specimen the outcome of which may vitally affect his or her own welfare; or, failing the patient, a relative or friend. Bearing in mind the dire consequences of the neglect of

"silent" bacteriuria no effort should be spared to ensure the dependability of these investigations.

Pregnancy diagnosis.—In recent years a number of in vitro tests have been evolved for the detection of hormones excreted in the urine during pregnancy. The one currently in use in this Laboratory is a haemagglutination-inhibition method of estimating chorionic gonadotrophin. Its cost is not negligible but it is cheaper than the various biological tests and, as regards accuracy, it compares very favourably with them. Although this service was only begun at the end of the previous year, as many as 967 specimens were tested during 1963.

Haematology.—12,046 specimens of blood (about 900 more than in the previous year) from expectant mothers were received for blood-grouping and determination of Rhesus type. 9,140 of these came from the city's antenatal clinics, and 2,906 were submitted by 256 general practitioners. 2,117 of the clinic specimens and 521 of the others were found to be Rhesus negative—an unusually high proportion—and antibodies (mainly active against the D antigen) were present in 112 of the former and 11 of the latter. Unfortunately the pressure of other work still compels dependence on the Regional Blood Transfusion Centre for these antibody tests. This is an unjustifiable encroachment on a highly specialized department which ought not to be encumbered with such demands from a laboratory of this size. With a slight increase in the Laboratory's technical staff all the routine aspects of this work could be contained and it is to be hoped that this can be arranged before long.

All these patients were also "screened" for anaemia and those with a haemoglobin level of 10g. per cent. (69 per cent.) or less (of whom there were 1,083) subjected to closer scrutiny. In addition, a full haematological investigation was conducted on 437 other patients (men, non-pregnant women and children). The number of these investigations increased by approximately 25 per cent.

Miscellaneous investigations.—These, numbering some 8,600, embraced the usual range of tests encountered in any clinical laboratory—antibiotic sensitivity tests, the examination of urines for protein, glucose and other constituents, sputa and other exudates for pyogenic organisms, faeces for occult blood etc.—as well as the unusual, for example, the insect which had given one patient a "rather nasty-looking bite": her doctor promptly hauled the aggressor to the Laboratory, where it was found to be one of the *Ixodidae* ("Hard ticks").

assinata (beef tapeworm), 1 Trichuris trichiura (whipworm), 1 Ascaris lumbricoides (roundworm) and 1 Oxyuris vermicularis (threadworms).

PUBLIC HEALTH-GENERAL CONTROL.

Milk Supply. Bacterial content.—Out of a total of 1,872 samples of milk examined routinely, 1,584 were samples of designated milk of which 1,467 (92.5 per cent.) complied with the appropriate standard. There were 220 samples of milk from whirlcool dispensers (in cafés and milk-bars) and 27 from miscellaneous sources. All these figures closely parallel those for the previous year. (The remaining 41 samples were submitted in the course of a special investigation of staphylococcal mastitis in dairy herds.) The following table gives the details of the examinations:—

	of	Number complying with	comp	lying
	samples	standards	in 1963	in 1962
Hospital Supplies—				
Raw Milk Certified Tuberculin Tested	8	5	62.5	71-0
	70	61	87-9	81-0
T.T. Pasteurised Milk	270	256	94.8	95-6
Public Supplies—				
Dan Mill Certified	253	207	81.8	84.2
Raw Milk Certified Tuberculin Tested	175	160	91.4	92-9
T.T. Pasteurised Milk	664	635	95-6	95.8
School Supplies—				
T.T. Pasteurised Milk	144	143	99-3	97-4
Milk from Whirlcool Dispensers—				
T.T. Pasteurised Milk	220	132	60-0	47-2
Miscellaneous	27	23	85.2	75-0
Special Investigation	41	_	-	-

It may be noted with satisfaction, that there has been a further improvement in the samples from the whirlcool dispensers. In the year under review 60 per cent. of them conformed to the standard for pasteurised milk (compared with 47·2 per cent. in 1962 and 38·2 per cent. in 1961). Here may be detected the salutary influence of the Food Inspector's admonitions, soundly based on indisputable laboratory findings. But the fact that 40 per cent. were below standard shows that there is still room for improvement. These machines, if they are not frequently sterilised and at all times kept scrupulously clean, can be a serious source of recontamination of pasteurised milk.

The above figures take no account of milk samples examined for Argyll County Council, of which there were 955, 175 fewer than in 1962.

Examination of Milk for Myco.tuberculosis.—107 samples of milk, a decrease of 30 on the figure for the previous year, were tested by guineapig inoculation for tubercle bacilli but none were revealed in any of them. 46 of them were samples of designated milk on sale to the public, 3 were from hospital supplies and 42 from the City's school milk service. The remaining 16 were submitted on behalf of the Borough of Clydebank.

Milk Bottles.—115 washed bottles from distributors of milk in the city were examined and 112 (97.4 per cent.) of them were found to have been satisfactorily cleaned. Here too a continued improvement may be discerned. In 1962, when 122 bottles were examined, the corresponding figure was 93.4 per cent. and in 1961 it was as low as 79.9 per cent.

36 milk bottles were similarly examined for Argyll County Council (last year, only two).

Milk Cans.—102 rinses from milk cans were received; 75.5 per cent. of them were found to be in a satisfactory condition, 9.2 per cent. fairly satisfactory and 14.7 per cent. unsatisfactory. The results showed no significant difference from those for 1962 when 140 samples were examined.

In addition, 3 of these specimens were received from Argyllshire and 9 from Stirlingshire.

Swabs and Rinses from other equipment used for processing or vending milk.—These were taken from dairy utensils, whirlcool dispensers etc. to test their cleanliness and rather more were submitted than in the year before (83 as compared with 38). Such examinations, not infrequently instigated after a series of adverse reports have been made on certain samples, can often pinpoint a breach of hygiene at some particular stage of the milk's hazardous journey from cow to consumer.

Six such swabs were examined for Argyll County Council.

Cream.—The 114 samples of packaged cream examined during the year gave results that were not significantly different from those obtained from a smaller number of samples (59) in the previous year. The findings were :—

Bacterial count per gram	No. of Samples	Percentage 1963	Percentage 1962
0— 50,000	90	79.0	78-6
50,000— 200,000	10	8.7	5.4
200,000—1,000,000	9	8.0	7.1
Over 1,000,000	5	4.3	8.9
Coliform bacilli in 1/100 g.	30	26.3	21.4

Ice-cream.—There were 304 samples of this product and, as the tollowing table shows, the results obtained were not quite up to the standard for 1962 when 284 of them were examined:—

Bacterial count per gram	No. of	Percentage	Percentage
	Samples	1963	1962
0— 50,000	266	87·5	91·5
50,000— 200,000	18	6·0	3·5
200,000—1,000,000	16	5·2	2·5
Over 1,000,000	4	1·3	2·5
Coliform bacilli in 1/100 g.	32	10-5	13-0
Samples conforming to provisional standard of not more than 50,000 per g. and coliform bacilli absent from 1/100 g	251	82-6	82-7

11 samples of ice-cream were received from Argyllshire.

Imitation Cream.—The 138 samples of imitation cream which were examined yielded results not significantly different from those obtained from 106 samples in the preceding year, as the following table shows:—

Bacterial count per gram	No. of Samples	Percentage 1963	Percentage 1962
0— 50,000	119	86-2	89-6
50,000— 200,000	9	6-5	7.5
200,000—1,000,000	4	3.0	0-0
Over 1,000,000	6	4.3	2.9
Coliform bacilli in 1/100 g.	10	7.2	4.7

But, this time, two of the samples contained typical ("faecal") Esch.coli in 1/100g.

Bottles other than Milk Bottles.—Beer bottles, mineral water bottles etc. continue to be brought to the laboratory to be tested for cleanliness. 82 of them were examined in 1963 (an increase of 27 on the previous year) and 68 (83 per cent.) of them fulfilled the requirements.

City Water Supply.—The number of samples of water examined for bacteriological purity during the year (942) was similar to that for the previous year (957). Most of them (784) were routine samples from Loch Katrine, the Gorbals Water Works and the reservoirs at Craigmaddie and Mugdock, from various points on the mains and from laboratory taps. The remainder were examinations carried out at the request of the Port Health Authority (samples from ships' tanks, dock standpipes), the National Coal Board etc. or in response to complaints received by the Water Department or the City's Divisional Medical

Officers. The results of the routine examinations of chlorinated water from Loch Katrine and the Gorbals Water Works are summarised in the following table:—

1. Up to 17th June, 1963*

Supply		No. of Samples	count p	age bacterial at per ml. at rs. 22°C/72hrs.	Absent from 100ml.	ical ("faec Esch.coli Present in 100ml. Absent from 50ml.	Present	Absent from 100ml.	strepto- cocci Present in 100ml. Absent from 50ml.
Loch Katrine		213	1	90	189	20	4	212	1
Gorbals	***	26	33	32	26	0	0	26	0

[†] This was performed on only 103 out of the 213 Loch Katrine samples.

2. From 18th June, 1963 onwards*

					Most Probable Number in 100ml.					
	No.		Average bacteria f count per ml. at		Coliform bacilli				rpical ("faecal") Esch.coli	
Supply		Samples	37°C/24hrs.	22°C/72hrs.	0	1	20	0	1	20
Loch Katrine		273	3	26	267	5	1	268	4	1
Gorbals		28	8	5	28	0	0	28	0	0

^{*} As from June 1963 the range of tests used for Water Supplies (and swimming baths) was revised to conform with the recommendations contained in the Ministry of Health Report No. 71. H.M.S.O. 1956.

Swimming Baths.—404 samples of pond water from swimming baths were examined (11 more than in 1962). 9 out of 248 samples from public ponds, 8 out of 108 from school ponds and 1 out of 48 from private ponds yielded plate counts higher than 10 per ml. 6 of these gave plate counts exceeding 500 per ml. and estimates of the MPN (most probable number) of coliform bacilli in them ranged between 5 and 90 per 100ml. Significantly, the chlorine content of these samples had been found to vary between nil and 0·15 p.p.m., i.e. well below the level of (0·2 to 0·5 p.p.m.) residual chlorine recommended by the Ministry of Health, and, not surprisingly perhaps, typical ("faecal") Esch.coli were found in three of them to a MPN of between 5 and 17 per 100ml.

Foodstuffs: Fitness for Consumption.—Fewer of these samples were received, 2,337 as compared with 4,082 in 1962. As in other recent years, imported desiccated coconut, of which there were 1,419 samples, headed the list. 7 of them were found to be contaminated with salmonellae (5 S.typhimurium, 2 S.waycross, 1 S.mikawashima). The improvement in the standard of this product reported last year (when 39 out of the 2,802 samples examined contained salmonellae) has therefore been maintained. This is most gratifying, but let no one think that it happened fortuitously; it came about because enlightened and responsible importers grew more and more chary of accepting cargoes which could not stand up to laboratory scrutiny, and suppliers in the exporting countries quickly learned—the hard, economic way—

that "cleanliness pays". Thus is the bacteriologist's fiat felt in distant—and even primitive—market places.

Imported eggs and egg-products also gave less cause for reproach. Whereas in 1962 salmonellae were isolated from 66 out of 1,032 samples, this year these organisms could be found in only 4 of the 664 samples examined; S.typhimurium in 2 samples of liquid whole hen egg, an unidentified salmonella in another and S.montevideo in a sample of egg albumen.

Shellfish.—7 batches of mussels and 8 of whelks were examined; all were bacteriologically clean and classed as Grade I.

Miscellaneous foods.—As usual a great variety of other food samples taken at the docks or wholesale warehouses or purchased in shops were brought for examination. They included canned or processed meats, meat pastes, bakery ingredients etc. amounting to 254 samples in all. No salmonellae were found in any of these and, while their content of other bacteria varied widely, none called for special comment.

OTHER INVESTIGATIONS AND SERVICES FOR THE PORT HEALTH AUTHORITY ETC.

Anthrax.—This year only 5 samples of raw materials imported for use in manufacturing processes were examined for Bacillus anthracis—3 of hoghair, 1 of pigskin and 1 of goatskin—all with negative results.

Plague.—67 rats caught in ships' holds or on the docks were examined for Pasteurella pestis, again with consistently negative results.

Yellow Fever.—As more and more people travel the world so increases the demand for protection against the diseases of warmer climates. Yellow fever is one such disease with rather special prophylactic requirements inasmuch as the vaccine must be reconstituted from the freeze-dried state immediately before administration. Stocks of this are held in the Laboratory and 3,270 doses were prepared and issued during the year.

Such, then, is the record of the year's work, some of it exacting, much of it unexciting, none of it ever dull. Its performance has been easier and has given more satisfaction by reason of the harmonious relationship which exists between the Laboratory and its users, and grateful thanks are due to the Medical Officer of Health and his Staff, to the City's General Practitioners and to many others for their helpful co-operation.

T. F. ELIAS-JONES, Director.

TOTAL OF EXAMINATIONS FOR YEAR 1963.

CITY OF GLASGOW.

INFECTIOUS DISEASES.

	IMI	ECTIOUS DISEASES.			
Diphtheria and General	Thro	at Infections—		Positive	Total
Diphtheria		Suspects		2	453
- P		Typing		_	2
		Toxigenicity Tests		0	1
		Virulence Tests (biological)		0	2
Streptococcal					
Infections		Suspects and control		250	900
Vincent's Infections	8	Suspects and control		4	231
Staphylococcal					
Infections		Suspects and control		161	214
Gastro-intestinal Infectio	21.5				
Enteric Fever—	,,,,				
		Cumanta		A.	015
(Typhoid, paratyphoid)		Suspects Control, etc	***	29	215 329
paraty photo)	***	Water Works employees		0	41
Food Poisoning—		Tracer Troins employees			
(Salmonellosis)		Suspects and control		95	3,970
(Carmononosis)		Miscellaneous swabs		0	21
		Mice		0	2
		Foodstuffs		1	100
(Staphylococcal)		Suspects and control		5	69
		Foodstuffs		5	39
(Cl.welchii)		Suspects and control		9	127
		Foodstuffs		6	39
Dysentery—					
Bacillary		Suspects		1,068	9,115
		Control		542	5,501
		Miscellaneous swabs		0	11
		Mice	***	0	2
Amoebic				-	42
Other forms—Gia	ardia	ı, etc		35	174
Specific Esch.col	i			89	1,500
Tuberculosis—					
1 uoercutosis—		Ct-		10	975
		Sputa		18	375
		Other specimens (micros. exam.)		0	10
		Various specimens (biologi	cal		
		exam.)		0	10
		Various specimens (culture)	23	437
Venereal Diseases—					
Syphilis		Screening Tests (W.R. a	and		
-71		P.P.R)		-	32,308
		Standard Wassermann Re	ac-		0.000
		tion		-	3,290
		Cardiolipin Wassermann	re-		3,290
		action Reiter Protein Complem	ent		0,200
		Fixation Test			3,290
		Extended Price's Precipi			
		tion Reaction		-	3,290
		Lange's Colloidal Gold Test			25
		C		-	69,425
		Carry forward	***	***	05,420

	7	2	farma			Positive	Total
		Brought	-		***		69,425
Gonococcal Infections		coccal (ement l	ixa-	35	241
		rs of Un Exuda		l and C	ervi-	73	1,278
				(in Tr			1,270
	por		um)	of Ure		361	4,729
	Cultu	res of	(ordin	ary) s	wabs		
				d Cer	vical	17	131
	Ophtl	nalmia	Neona	atorum			
	(sm	ears an	id cult	tures)	***	1	57
OTHER EXAMINATIONS—							
Blood—Rh factor						_	12,046
Blood—ABO grouping						-	12,046
Blood—General Haematolog	y, cell	counts,	haem	oglobir	etc.		13,557
Blood—cultures, Paul Bunn	nell tes	ts, etc.					48
Body Fluids (urine, etc.)							3,709
Exudates—various						_	304
Faeces for worms						7	34
Faeces for occult blood						1	27
Swabs for Trichomonas	***					769	9,176
Pregnancy Tests	***					_	962
Antibiotic Sensitivity Tests				***		-	6,384
Miscellaneous	***					_	30
Insects for identification				***	***		1
GENERAL PUBLIC HEALTH—							
City Milk Supplies (plate co						-	1,515
Hospital Milk Supplies (plat	e coun	t and c	olifor	ms)		-	348
Milk (biological tests)						0	91
Swabs and rinses from appa			***		***	-	106
Swabs from miscellaneous co		ers		***	***	-	102
Miscellaneous swabs from ba		***				_	31
Milk bottles (bacterial count	t)	***	***	***	***	_	115
Ice Cream			***		***	_	304
Foodstuffs—fitness for cons		n :					0.50
Imitation cream, cream, e Miscellaneous foods, dried		to		***	***	_	258 423
Shellfish—mussels, whelks	s, etc.			***			15
Beer and Mineral Water bot						_	82
Water Supplies	***	***	***			_	892
Water from swimming pond						_	404
Bottle closures	***	***				_	1

	Brought	forw	ard		Positive	Total 138,877
PORT HEALTH AUTHORITY-						
Anthrax (hides, skins, hair, etc.)					0	5
Plague (examination of rats)					0	67
Foodstuffs—fitness for consumpt	ion				_	1,914
Water—from ships and docks					-	27
OUTSIDE AUTHORITIES—						
Stirlingshire—						
Gastro-intestinal infections				66		
Other infections				4		
Throat infections	***			1		7.1
Clydebank—				-		71
Milk (biological test for tube	rculosis)		v		0	16
Lanarkshire—						
Venereal Diseases					_	3
Argyll—						
Milk (plate count and colifor	ms)			755		
Ice Cream			***	11		
Milk Bottles				36		
Miscellaneous swabs and rins	ses			9		
The same of the sa				-		1,011
Distance in the latest and the lates						141,991
					-	

SECTION XIII

FOOD.

SUMMARY OF OPERATIONS UNDER THE FOOD AND DRUGS (SCOTLAND) ACT, 1956; THE MILK AND DAIRIES ACTS AND ALLIED ACTS, ORDERS AND REGULATIONS FOR THE YEAR ENDING 31st DECEMBER, 1963.

The improvement of hygiene still plays a most important role in the work of this Section and more samples of foodstuffs are being taken for bacteriological examination. This has proved worthwhile, because results have shown that an improvement has been achieved.

It must be repeated that intensive health education of the food handlers and young entrants to the food industries is urgently required. It is essential that they should know and understand the absolute necessity for clean, safe food and personal hygiene.

Little change, however, was made in the general pattern of the work of the Section where each function plays an equally important role, some less spectacular than others.

New Legislation which became Operative during the Year.—The Emulsifiers and Stabilisers in Food (Scotland) Regulations, 1962, became fully operative this year.

The Ice Cream (Scotland) Amendment Regulations, 1963, amend the Ice Cream (Scotland) Regulations, 1948, to permit the addition of sugar to a "complete cold mix".

The Bulk Transport of Milk (Scotland) Order, 1963, imposes requirements as to the construction, maintenance, use, cleaning and sterilising of road and rail milk tankers.

Observations were made on the following reports and memoranda issued by the Scottish Home and Health Department, Food Standard Committee and other bodies during the year:—

Food Standards Committee Report—Meat Pies; Pasta Products; Proposed Notes on Handling of Meat Pies.

Codes of Practice—Crab Meat Content in Norwegian Canned Crab Products; Labelling of Brandy.

Association of Municipal Corporation—Use of the word "Chocolate".

Proposals for Regulations on Cheese.

Proposed Amending Regulations on Soft Drinks.

Cold and Cool Storage of Eggs.

Scottish Home and Health Department Circular—Bulk Transport of Milk.

Proposed Amendment of the Milk (Special Designations) (Scotland) Order, 1951.

Addition of Chemicals to Meat.

The Merchandise Marks (Imported Goods) (Raw Cucumbers) Order, 1963.

Antibodies in Milk in Great Britain.

Food and Drugs-Composition and Labelling.

The Liquid Egg (Pasteurisation) (Scotland) Regulations, 1963.

Proposals for Regulations on Mineral Oil in Food.

Food Sampling.—During the year a total of 5,063 samples of a wide variety of foodstuffs were submitted to the City Analyst for examination, 1,371 being formal and 3,692 informal samples: 41 (2.99 per cent.) of the former and 92 (2.49 per cent.) of the latter were found to be adulterated. The corresponding figures of adulterated samples last year were 36 (2.62 per cent.) formal and 97 (2.63 per cent.) informal.

The number of cases which were reported for action in court during the year was 26, two fewer than last year. No court action, however, was instituted in one instance in which a bottle of non-brewed condiment was found to be deficient in acetic acid. Convictions were obtained in 25 cases and penalities were imposed amounting to £155, compared with £165 in 1962. Two of these cases related to adulterated milk and the remaining 23 to mince and sausages containing excess preservative.

Seven samples of cereal foods claiming to be starch reduced were purchased. Two of these samples were of bread, which was not starch reduced. The bakers were sent a letter of warning. In each case the bread was sold by shop assistants who were not aware of the requirements regarding the sale of starch reduced products. Thanks were expressed by the firms concerned for directing their attention to this matter. Three of the samples were found to be in accordance with the

claims made for them, while the two remaining samples were not precise in their claims and the firms were advised to amend the description and labelling of their products.

ABSTRACT OF TOTAL SAMPLES EXAMINED DURING 1963.

Article	Info	rmal.	Stat	tutory.		Percentage adulterated.		Percentage of Samples taken in each Group to Total	
	No. Taken	No. Non- Gen- uine	No. Taken	No. Non- Gen- uine	Informal %	Stat- utory %	Informal %	Stat- utory	
Milk	2,129	25	889	3	1.13	0.33	57-67	64-84	
Milk Products (Butter,									
Cheese, etc.)	80	1	32	-	1.25	-	2.17	2.33	
Meats and Meat Products	224	25	200	37	11-16	18-50	6.07	14-59	
Cereals	129	-	43	-	-	_	3.49	3-14	
Tea	19	_	27	_	_		0.51	1-97	
Spirituous Liquors	20	-	44	-	-	_	0.54	3-21	
Drugs	117	5	14	-	4.27	-	3-17	1-02	
Flavourings and Condiments	s 193	2	57	1	1.04	1.74	5.23	4-16	
Ice-Cream	261	27	2	_	10.34	_	7-07	0.15	
Miscellaneous	520	7	63	-	1.37	-	14-08	4.59	
	3,692	92	1,371	41	2.49	2.99	100-00	100-00	

ABSTRACT OF INFORMAL AND STATUTORY SAMPLES OF SWEET MILK EXAMINED DURING YEAR 1963.

Informal.				Statutory.				
No. No. Exam- Non- ined. Genuine		Average Percentage Composition.		1963 Month.	No. Exam-	No. Non- Genuine.	Average Percentage Composition	
	John Miles	Fat.	Non- Fat.		med.	Genume.	Fat.	Non- Fat.
205	2	3.70	8.87	January	82	-	3.71	8-93
180	_	3.73	8.99	February	79		3-69	9.04
177	2	3.70	8.95	March	85	-	3-67	8.94
156	2	3.75	8.90	April	82	1	3.66	8.88
193	3	3.82	8.91	May	87	1	3.74	8.87
170	5	3.75	9.10	June	86	-	3.58	8.95
141	2	3.71	8.86	July	79	_	3.71	8.87
195	2	3.85	8.92	August	32	-	3.71	8.89
169	-	3.92	8.95	September	74	1	3.90	8.91
191	4	4.04	8.90	September	71	-	3.95	8.93
181	1	3.93	8.89	November	69	-	3.85	8.89
159	2	3.84	8.87	December	63	-	3.77	8-86
2,117	25	3.81	8.92		889	3	3.74	8.92

1963 Percentage Adulterated: Informal—1·13; Statutory—0·33 1962 Percentage Adulterated: Informal—1·22; Statutory—0·22

THE PRESERVATIVES IN FOOD (SCOTLAND) REGULATIONS, 1962.

Over 100 varieties of foodstuffs comprising some 700 samples were examined by the City Analyst for the presence of preservatives. No prohibited preservative was found in any foodstuff.

Thirteen butchers were warned by letter that minor amounts of preservatives had been found in their products.

A special examination was carried out on one sample of Cheddar Cheese to which sorbic acid had been added experimentally in order to discover if this addition had any noticeable effect on the appearance, odour, flavour or texture. No change was detected by analytical means although 275 parts per million of sorbic acid were present.

ABSTRACT OF ARTICLES OF FOOD IN WHICH PRESERVATIVES, ETC., WERE FOUND AND THE NATURE AND AMOUNT DURING THE YEAR ENDING 31ST DECEMBER, 1963.

Nature of	Number		which eserva- Nature of		Parts per Million.		
Article.	examined	. tives, etc., were found.	Preserv	ztive, etc.	Highest.	Lowest.	
Ale	18	1	Sulphur	Dioxide		38	
Caramel Dessert			7				
Pudding	10	1	11	11		25	
Cornflour	10	3	"	11	70	25	
Fruit, Dried	55	3	.,	,,	1,792	26	
Fruit, Glace	9	2		.,,	45	21	
Gelatine	4	3	,,		371	243	
Ice Pops	2	2	,,	,,,		44	
Lemon and Orang	re						
Curd	11	4	,,	- 11	70	19	
Lucosade	1	1	,,			-03	
Mince	74	35	11	11	1,709	26	
Potato, Instant	3	2	11	3)	166	76	
Preserves	54	4	.,	,,	38	6	
Sausage	212	210		,,	2,432	32	
Semolina	13	1				6	
Soft Drinks	10	00 1	. ,,	,,	211	38	
Soft Drinks	46	22 {	Benzoic		183	39	
Vegetables, Dried	3	2	Sulphur	Dioxide	608	235	

Meat Colour Preservatives.—Substances known to be added to meat and meat products for the purpose of retaining the red colour of meat were sampled. The active agent was thought to be nicotinic acid. Seven different varieties of these substances were analysed and found to contain nicotinic acid in amounts ranging from 3 per cent. to 17 per cent.; five of these also contained ascorbic acid ranging from 4·3 per cent. to 12·8 per cent.; while the two contained sodium ascorbate,

7.3 per cent. and 12.8 respectively. (These substances have since been declared prohibited substances and must not be used on raw and unprocessed meat intended for human consumption.)

The Food and Drugs (Scotland) Act, 1956.

Table showing Nature and Number of total Samples
Procured and Examined during 1963.

I NOCONED III.D	Informal Formal				
	Ini	ormal No.			
			3.	No.	
	No.		No.	Non-	
Article	Taken	Genuine	Taken	Genuine	
Baking Powder, Golden Raising					
Powder	10	_	3	_	
Bread	7	1	-	-	
Butter	12	_	12	_	
Cheese (including spreads and					
processed cheese)	11	-	10	_	
Coffee (including essences and					
mixtures)	8		1	_	
Cream (including single, double					
and sterilised)	31	1	1	_	
Dried and Preserved Fruit	25	4	39	_	
Fish Cakes	_	_	222	_	
Fish Pastes and Spreads	17	_	-	_	
Flour and Self-raising	24	_	6	_	
Flour mixtures (cake, pudding,					
sponge mixtures, cake flour)	24	_	_	_	
Fruit Conserves (e.g., tinned and					
bottled fruit)	5	_	_		
Gelatine	3		1	1000	
Ice-Cream	261	27	2	-	
Ice-Lollies	7		-	_	
Jams, Jellies and Fruit Curds	64	_	1	_	
Margarine	18	_	7	_	
Meat Pies, Pastries and Sausage					
Rolls	_	_	_	_	
Meat Pastes and Spread (chopped					
and potted)	54	_	-	-	
Milk (excluding dried, condensed,					
evaporated and flavoured, etc.,					
milk)	2,131	25	889	3	
Milk (condensed and dried)	8	-	_	_	
Mince	30	8	44	14	
Saccharin	-	_	_	-	
Salad Cream and Mayonnaise	10	_	-	-	
Sausages and Sausage Meat	87	17	125	23	
Soft Drinks (excluding fruit					
juices)	44	_	-	-	
Spices and Condiments	164	2	23	1	
Spirits	_	_	50	-	
Suet	2	-	1	_	
Sugar and Confectionery	14	_	16	_	
Synthetic Cream		-	_	-	
Table Jellies	16	-	3	-	
Tomato Ketchup and Sauces	19		-	-	
Other articles (including all					
articles not named above)	586	7	137	-	
	2 000	00	1 071	41	
	3,692	92	1,371	41	
		Management of		-	

THE FOOD AND DRUGS (SCOTLAND) ACT, 1956.

INSPECTION OF FOOD AND FOOD PREMISES.

Routine inspections of premises were continued; 9,243 visits were made to markets, stores and wholesale and retail premises where food is prepared and distributed, and 2,069 lots were examined amounting to 107 tons, 8 cwts., $54\frac{1}{2}$ lbs., almost exactly 23 tons less than last year. On being considered unfit for human consumption it was voluntarily surrendered by the owners. Certificates of condemnation were subsequently issued for these quantities destroyed.

The need for cleansing, painting and repairs is observed during these visits and pointed out to the owners and occupiers, who as a rule have them carried out satisfactorily with little delay.

THE FOOD AND DRUGS (SCOTLAND) ACT, 1956, SECTION 9—SUSPECTED FOOD.

The number of complaints received by this Department alleging adulteration, contamination or otherwise unfit for human food and unhygienic practices in shops and restaurants rose to 241 compared with 220 last year and compared with the year 1953 when the corresponding figure was only 113. From these figures it would appear that the public are becoming more conscious of malpractices and the need to report such incidents to the local authority. This co-operation is to be commended and is appreciated. The assistance of the City Analyst was requested in ascertaining the nature and substance of the extraneous matter contaminating the foodstuffs. The largest number (41) related to bakery goods, while those relating to pies, sausage rolls and bridies were 29. The majority of these complaints were of mould growth, probably due to improper or careless attention given to rotation of stock.

There was a unique occurrence which is worthy of note—an incident in which a small beetle was found in a can of Dutch strawberries. The practice in such cases is to write to the supplier and the importer, who in turn receives an apology with a possible explanation of the cause from the packer, and quite often a parcel of goods is given to the complainer as a token of goodwill. All this was done, but the complainer was still not satisfied and consequently the Department wrote to the

Royal Netherlands Embassy in London who subsequently submitted a report on the factory and methods from their Agricultural Attache.

Complaints are also received from the Education Department School Meals Service and dealt with satisfactorily.

Several foods of which complaint was made were found on examination to be normal in appearance, odour and taste.

THE MILK AND DAIRIES (SCOTLAND) ACT, 1914.
THE MILK (SPECIAL DESIGNATIONS) ACT, 1949.

The Milk (Special Designations) (Scotland) Orders, 1951-52.

All dairy farmers, 25 in number, one more than last year, in the city are now registered milk producers. One herd produces "Certified" milk and 21 "Tuberculin Tested" milk, including the two herds managed by the Regional Hospital Board, while three farmers have ceased to keep dairy herds meantime but wish their names to remain on the Dairy Register.

The number of pasteurising establishments on the register is now 15, two fewer than last year. There are now 1,812 dairies registered in the city, including 25 producers and 16 dairymen holding supplementary licences. Registrations were transferred in 158 instances and 40 Certificates of Registration were granted for new dairy premises.

The average daily consumption of milk, excluding school milk, fell from 92,151 to 91,269, a decrease of 882 gallons. The percentage of failures in tests of Certified milk rose from 16·1 per cent. to 18·2 per cent. Failures of Tuberculin Tested milk (unpasteurised) rose from 7·0 per cent. to 12·6 per cent.

Formal and informal samples of milk totalled 3,006. The average fat percentage rose slightly from 3.75 to 3.76, while the percentage of solids-not-fat also rose slightly from 8.86 to 8.90. The number of designated milks sampled during the year was 1,092.

Visits of inspection made to dairy premises numbered 6,561, while 228 visits were paid to 37 byres of the 25 milk producers. A total accommodation for 1,166 cows is provided in these byres, but the average number kept over the year was 879.

It was found necessary, after several warnings, to report to the Procurator-Fiscal one shopkeeper who was selling milk without first having obtained a Certificate of Registration from the Local Authority. He was convicted and fined £5.

A case of undulant fever occurred in one member of a household supplied with raw milk from a farm adjacent to his home. The milk from this farm was the suspected source. Only a small quantity of the milk from this herd was consumed raw, the bulk of the supply being pasteurised. On receipt of notice of this case *all* milk from this herd was sent for pasteurisation.

Sterilised Milk.—Approximately 16 gallons of "Sterilised" milk are sold daily in the city. Twelve samples were submitted to the City Analyst. All of them conformed to the prescribed tests. The average fat content was 3.80 per cent. fat, slightly higher than last year, and 8.73 per cent. solids-not-fat.

Jersey Milk.—This year seven farmers supplied Jersey milk to city creameries. Sixty-three samples were examined both analytically and bacteriologically; the averages were 4.96 per cent. fat and 9.35 per cent. solids-not-fat, a slight rise on last year's figures. Eleven samples failed in the coliform test, five failed because of high count, five failed in both coliform and count, and five samples were below 4 per cent. fat, the statutory standard.

				1001
		1963	1962	1961
" Certified "—				
Producers		1	2	2
Dealers		1,440	1,282	983
Total Average Daily Sales (gallons)		1,840	2,034	1,917
" Tuberculin Tested "-				
Producers		22	21	21
Dealers		1,786	1,745	779
Total Average Daily Sales (gallons)		645	618	476
"Tuberculin Tested (Pasteurised)"—				
Pasteurised Establishments		15	17	17
Dealers		1,780	1,740	1,670
Total Average Daily Sales (gallons)		*88,768	†89,487	†85,239
1963—* Includes 603 gallons	Homog	genised.		
1962—† Includes 450 gallons	Homog	genised.		
1961—† Includes 800 gallons				
" Sterilised "-				
Dealers		71	61	6

RESULTS OF EXAMINATIONS OF DESIGNATED MILK (1)

	CERTIFIED	TUBERCULIN TESTED
		(a) Not more than200,000 Bacteria per ml.(b) No Coliform Bacillus
	in 1/10 ml.	in 1/100 ml.
Bacteriological Examination—		
Number examined	253	175
Number conforming to all		
requirements		153
Number exceeding count only	7	6
Number exceeding count and		
having coliforms present	10	8
Number conforming to count		
but having coliforms presen	t 29	8
Agar Count per ml.—		
Highest	1,000,000	884,000
Lowest	200	400
Presence of Coliforms (-)	214	129
(+)	39	16
Chemical Examination—		
Fat Minimum 3%—		
Number 3% or over	250	173
Number below 3%	3	2
Average Butter-Fat Content	4.16	4.08
52 Examined	Biologically with negative	ve result.

RESULTS OF EXAMINATIONS OF DESIGNATED MILKS (2),

				(PASTEURISED) No Coliform Bacillus in 1/100 ml.
			Lo	Not more than 2.3 vibond Blue Units Phosphatase Test)
Number Examined		***		664
Number passing each test				642
Number failing in one or more	of the	tests	***	22
Milk-Fat Test—				
Number Satisfactory	***	***	***	664
Number Unsatisfactory	***	***		-
Average Butter-Fat Content				3-68
91.76 per cent. of the samp terms of the Orders of	oles exa	mined d with	were in 92.57 la	conformity with the ast year.

Chemical examination showed no samples to be deficient in fat, while 2 samples were found to be below 8.5 per cent. of solids-not-fat.

MILK SUPPLIED TO THE HOSPITALS OF THE WESTERN REGIONAL BOARD.

This service to the Board was continued. The results are shown below:—

	Examined	Failed
Certified	8	3
Tuberculin Tested	70	9
Tuberculin Tested (Pasteurised	1) 270	14
	348	26
	MATERIAL STATE OF THE STATE OF	and the same of

Last year 26 samples failed out of a total of 360 samples.

MILK FOR SCHOOL CHILDREN.

This year the supply of "Tuberculin Tested (Pasteurised)" milk to the city schools was undertaken by seven contractors compared with nine last year. One hundred and fifty-one samples were examined during the year in terms of the Milk (Special Designations) Order. Only one sample failed and that in the coliform test compared with seven failures in 189 samples examined last year. Forty-four samples were subjected to biological tests with negative results.

The following table is a summary of the results of the sampling :— School Milk ("Tuberculin Tested (Pasteurised)").

	Passing bo hosphatase and Coliform Tests		Tests	No. Failing Both Tests	No. Tuber- culous	Average Fat Solids	Average Non-Fat Solids	
151	150	_	1	_	-	3.71	8.84	

The total consumption this year amounted to 1,504,991½ gallons, a decrease of 8,173½ gallons on last year. The quality standards for this milk are slightly higher than last year. Thirty-six samples were subjected to biological tests with negative results.

Milk Dispensing Machines.—The patient and painstaking efforts of the Milk Officer in showing and advising the operators the proper method of management of these machines, coupled with the sending of notices of the results obtained to the owners, thus confronting them

with factual evidence, have brought about an improvement in the hygienic standard of the milk sold in the past four years. Despite this improvement there is still a case for a legal bacteriological standard.

Year		Number camined	1	Nu	mber	Faile	d
1961	 	 228	131	or	61.84	per	cent.
1962	 	 233	123	or	52.36	per	cent.
1963	 	 220	88	or	40.00	per	cent.

Of the 220 samples taken, 88 or 40.00 per cent. failed the coliform test prescribed in the 1951 Order, i.e., coliforms absent from 1/100 ml. Coliforms were present in 116 or 52.73 per cent. of the samples when examined in 1/10 dilution, and 48 or 21.23 per cent. when examined in 1/1,000 dilution.

With regard to the colony count, 190 samples or 86·36 per cent. had counts of under 200,000 per ml.; 22 or 10·00 per cent. had counts of over 200,000, while 8 or 3·64 per cent. had counts of over 1,000,000. The lowest count was 100 and the highest 2,400,000.

In 126 samples or 57.25 per cent., coliforms were absent and had a count of less than 200,000 colonies per ml.; 63 or 28.65 per cent. coliforms present with counts of less than 200,000; 24 or 10.92 per cent. coliforms were present and with counts of more than 200,000; 7 or 3.18 coliforms absent from more than 200,000.

Dairy and Canned Cream—Food Standards (Cream) Order, 1951.—
One hundred and fourteen samples of dairy and 9 samples of canned and sterilised cream were obtained and examined. Thirty of the samples were analysed in terms of the Order and all were shown to conform.

Fifteen samples were examined both chemically and bacteriologically. All of the 114 samples of dairy cream were examined bacter-logically and 40 of these were considered unsatisfactory because of high count (over 50,000) and/or the presence of coliform organisms. Results of unsatisfactory samples were notified by letter to the dairymen concerned.

Cleansing of Milk Bottles.—Of 115 bottles submitted this year to a bacteriological examination, 102 showed counts of less than 100 colonies and coliforms absent per inner surface, and of these 43 had counts of under 10. Reports of all examinations of washed bottles are notified

to the creamery concerned. The results of bottles washed by the different methods are as follows:—

	No. of Bottles	Satis- factory	Unsatis- factory	Percentage Satisfactory
Washed by Soaker Sprayer Machine	38	36	2	94.74
Washed by Jet Type Machine	77	76	1	98.70
Washed by Rotary Brushes	_	-	_	_
Washed by Hand	_	_	_	_

During the year 33 complaints were received of milk having been delivered in bottles which had been improperly cleansed and/or containing extraneous matter. Seven of these complaints originated from suppliers outwith the city. Each incident was fully investigated and in some cases the complaint was not justified.

Cleansing of Milk Cans.—There was an improvement in the washing of cans for bulk supplies in city creameries.

		Number Examined	Number Satis- factory	Number Fairly Satis- factory	Number Unsatis- factory
1961	 ***	94	83	2	9
1962	 	140	99	18	23
1963	 	102	76	13	13

The table shows that 76 or 74.52 per cent. were satisfactorily washed compared with 99 or 70.71 per cent. last year; 13 or 12.74 fairly satisfactory compared with 18 or 12.85 per cent., while the percentage of those unsatisfactory was 13 or 12.74 per cent. compared with 23 or 16.74 per cent.

Ice-Cream.

The Ice-Cream (Scotland) Regulations, 1948.

The Ice-Cream (Scotland) (Amendment) Regulations, 1948 to 1963.

The number of ice-cream dealers registered in respect of premises in the city now stands at 432, six fewer than last year. Five-hundred and four certificates of registration are held in respect of vehicles, 13 more than last year. A number of Pakistanis have entered this field of operation.

Inspection of these premises and vehicles totalled 2,564 during the year, while 255 certificates of authorisation were issued and recorded, 22 more than last year. A fairly large number of persons holding authorisations leave the trade after taking up this occupation either on a full or part-time basis.

The Food Standards (Ice-Cream) (Scotland) Regulations, 1959.
The Labelling of Food (Amendment) (Scotland) Regulations, 1959.

The following table gives the results of the examinations of icecream compared with those of last year :-

Year	No. Examined	No. under 50,000 with Coliforms Absent	No. under 50,000 with Coliforms Present	No. over 50,000 with Coliforms Absent	No. over 50,000 with Coliforms Present
1962	284	234	28	10	12
1963	314	261	15	21	17

The table shows 261 satisfactory samples or 83·12 per cent. compared with 234 or 82·40 per cent. last year. This year 17 (5·41 per cent.) of the samples failed both in count and coliform compared with 12 of 284 or 4·22 per cent. Of the 318 informal samples taken, 256 were subjected to both chemical and bacteriological examinations, while 54 samples were for bacteriological examination only and four for chemical examination only. Of the 260 samples, 27 failed to comply with the legal standard, but only three of these failed in both fat and milk-solids-not-fat.

	No. Exam- ined	No. Adul- terated	No. Deficient in Fat	No. Deficient in Milk Solids Not Fat	
1962	230	22	17	3	2 3
1963	261	27	11	13	3
			AVERAGES.		
				Dairy Ice	
		Milk	Ices	Ice C	ream
			Milk Solids		Milk Solids
		Fat	Not Fat	Fat	Not Fat
1962		4.31%	7.64%	7.06%	9.55%
1963		3.82%	7.38%	7.79%	9-69%
			HIGHEST.		
1962		5.86%	9.10%	12.40%	16-30%
1963		5.08%	8.40%	12.51%	13.50%
1000	***	3.00%	8.40%	12.51%	13.50%

Imitation Cream.

Food and Drugs (Scotland) Act, 1956, Section 16.

The number of samples of bakers' cream filling was increased slightly from 104 to 138 samples this year. One-hundred and seventeen or 84.78 per cent. were satisfactory compared with 90 or 86.53 per cent. last year; 21 or 15.22 per cent. compared with 14 or 13.47 per cent. unsatisfactory. Six or 4.35 per cent. of the samples failed because of high counts with coliforms present; 10 or 7.25 per cent. failed in count only and five or 3.62 per cent. failed in coliform only. Of the 138 samples, 16 had a count of over 50,000 and 40 of 100 or less.

Written reports were sent to bakers from whom unsatisfactory samples were obtained and advice was given on how improvements in the method of handling could be effected.

Shellfish—Food and Drugs (Scotland) Act, 1956.—A total of 15 samples of shellfish were examined bacteriologically, were found to be clean and reported Grade 1.

Egg Imports and Sampling.

Dutch Frozen Whites.—The tonnage of this product this year was greatly reduced, 6 tons 2 cwts. compared with 10 tons 7 cwts. 21 lbs. last year. Five shipments of this product as in previous years came through the Port of Leith compared with six last year. Twenty-four samples were submitted to the Bacteriologist. Three samples were subjected to a full examination; one was sterile, while the other two gave counts of 5,500 and 100,000 respectively, with faecal B. coli in both samples. No Salmonella organism was isolated from any of the samples.

Danish Pasteurised Frozen Egg Whites.—Four consignments of this product amounting to 2 tons 2 cwts. 40 lbs. were also landed at the Port of Leith for firms in the city. Sixty samples were drawn for bacteriological examination. Three samples were subjected to a full examination; one was sterile, while the other two gave counts of 1,500 and 50,000 respectively, and both were free from coliforms. No Salmonella organism was isolated from any of the samples.

Frozen Hen Egg Albumen from Northern Ireland.—One consignment of 3½ tons of this product was received by a city egg merchant. Five samples were examined bacteriologically and were found to be free from Salmonella organisms, the one sample submitted to a full examination being sterile.

American Granular Hen Egg Albumen.—Early in the year a parcel of 2 tons 2 cwts. of this product was accepted from London for heat treatment. This was satisfactorily carried out, the report on the subsequent samples being "No organisms of the Salmonella group isolated."

Liquid Whole Hen Egg (Packed in Glasgow).—The two city breakingout plants continued to operate. All eggs handled at these plants were of British origin. The breaking-out terminated in June for the year, during which 17 samples were taken. Six samples had counts of over 100,000, eight over 10,000 and one over 1,000, while staphylococcus aureus (coagulase positive) was found in two samples and faecal B. coli was found in 14 samples. Salmonella typhimurium was isolated from two samples. This is the first occasion on which this organism had been found in any sample during the period in which this process has been carried out in the City. The British Egg Marketing Board was notified on each occasion and each day's output was immediately traced, detained and subsequently heat-treated. This would indicate that pasteurisation of this product is desirable and indeed necessary.

Imported Frozen Whole Hen Egg.—During the early part of the year there was an increase in the incidence of paratyphoid B. in Scotland, consequently sampling of this product was carried out at cold stores and bakeries, large and small. The countries of origin of this product included Australia, China, Poland and South Africa. Salmonella was isolated from three samples, one of which was an Australian consignment which had been passed at the port of entry. This product was directed for high temperature treatment. When the organism was found in the other two samples (of a Polish consignment) this was returned for treatment although it too had been passed at the port of entry. A total of 68 samples were taken.

Export Certificates.—Two certificates for use in connection with the Export of Meat and Meat Products were issued in respect of haggis being shipped to the Far East, and a Certificate of Sanitation was issued in respect of manufacturing premises exporting lecithin to Spain.

Cleansing of Beer, Soft Drinks and Mineral Water Bottles.—Examination of the cleansing of washed beer and soft drink bottles showed an improvement; 83 per cent. were satisfactory compared with 75 per cent. last year. Eighty-three bottles were examined and many were reported sterile.

Despite this action twenty-seven complaints were received. Seven of these complaints alluded to extraneous matter and the others of taste or odour. Two exciseable spirits were found to be genuine.

Merchandise Marks Acts, 1887-1953.—Routine observations on the ticketing and marking of imported foods showed that this was being reasonably well carried out. In no instance was infringement of the Acts reported and no court action was necessary.

Bacteriological Examination of Cooked Meats.—The investigation begun last year into the hygienic handling, storage and display for retail sale of cooked meats was continued.

Ninety-four samples of 17 varieties of cooked meats were examined; staphylococcus pyogenes (coagulase-positive) was isolated from 17 samples; faecal organisms were isolated from 20; Clostridium welchii in 9; proteus (spp.) in 5; only 22 samples had counts of less than 100,000 per gram with coliforms absent and considered reasonably satisfactory but not good enough.

It is interesting to note that a factory pre-wrapped packet of luncheon meat kept under refrigeration showed a count of 1,750,000.

Reports of the result obtained were given to the charge hand in all instances and where unsatisfactory results were reported the necessity of scrupulous cleanliness in cutting, handling, display and storage was stressed. The exercise continues.

The Labelling of Food Orders, 1953-1961.

The Food and Drugs (Scotland) Act, 1956, Section 6.

The wording on labels enclosing pre-packed foods exposed for sale was again the subject of close check for possible misleading descriptions and infringements of the above legislation.

The manufacturers or packers of foodstuffs inaccurately described were advised. The following are some examples of these contraventions:—

- Prepacked meats did not have a label or wrapper bearing a statement specifying the name and address of either the labeller or the packer. The butcher's attention was directed to this omission. He inserted printed slips bearing his name and address as a temporary remedial measure.
- Prepacked seasoning, it was alleged by an authority outwith the city, did not conform to the Order. Enquiries, however, revealed that the seasoning had been prepared for manufacturing purposes and not for retail sale, thus being exempt.
- A meat product labelled "Ministeak" was on analysis found to consist of sausage meat. This false description was intimated to the firm by letter, who immediately had the show card removed.
- 4. Prepacked steak and kidney pies sold in the East of Scotland but manufactured in Glasgow were reported to contravene the Order. Enquiries revealed that the manufacturer did not supply the article prepacked but supplied, on request, plain wrappers for the convenience of the retailer.
- 5. Imitation Cream prepacked was declared on the carton as having been prepared in . . . Creamery. Exception was taken to the word "Creamery" which might suggest that the product was cream. The declaration of ingredients was clearly inscribed on the outside of the carton and therefore the firm was complying with the terms of the Order,

- 6. A sample of Minced Chicken in jelly was found on analysis to be lower in meat content than agreed upon by the Food Manufacturers' Federation. The firm concerned was informed and subsequent samples of this product were found to be over the agreed standard.
- 7. Doubts arose as to the legality of the declaration on bottled Carlsberg Consort. During the time that this product was in the hands of the Analyst it was noticed in a trade journal that an inspector in England was dealing with the same matter. Correspondence passed and the matter was satisfactorily settled by having amended labels printed.
- Prepacked Glace Cherries—Included in the statement of ingredients was the
 word "Glucose" whereas the ingredient was glucose syrup. The firm
 was notified and following upon this a correct statement of ingredients
 was declared.
- Prepacked Cut Mixed Peel presented a similar error and also the fact that the ingredients were not shown in the proper order. Similar action was taken and the matter rectified.
- 10. Ice Pops (Lolly Syrup) enclosed in a sachet bore a list of ingredients, but the carton, which contains a variety of the products, did not bear a complete list of ingredients. The attention of manufacturers was directed to this omission and it was rectified forthwith.

Enquiries regarding the correct wording on labels are received from time to time from food manufacturers and packers. Sample labels and cartons are presented and opinions expressed.

Public Health (Meat) Regulations (Scotland), 1932, Section 15.—The number of certificates of approval granted in respect of meat storage premises remained the same as last year, namely 15, while 62 copies of these certificates, one more than last year, were issued for vehicles operating from these premises.

The Lead in Food (Scotland) Regulations, 1961, and other Metallic Contamination of Food.—Of 185 samples of foodstuffs examined arsenic was found in nine in varying amounts from 2.0 to 0.05 parts per million of food; of 165 samples examined for copper, 134 were found to contain copper in varying amounts from 49 to 0.1 parts per million; of 257 samples, 150 contained lead in varying amounts from 8 to 0.02 parts per million; zinc in 27 of 53 samples varied from 15 to 0.1 parts per million, while only one sample showed the presence of iron to the extent of 0.3 parts per million and in 64 samples no metallic contaminant was found. None of the samples was outwith the legal limit and/or the Food Standards Committee's recommendation.

The Colouring Matter in Food (Scotland) Regulations, 1957.—Over 40 different types of foodstuffs consisting of 113 samples were examined this year for the presence of artificial and prohibited colouring matter.

No prohibited colour was detected but the following table shows the various types of permitted colours found.

		ccasions o	found.		Occasions o	
Colour.		1962	1963	Colour.	1962	1963
Ponceau MX		-	_	*Tartrazine	40	39
*Ponceau 4R		5	5	Naphtol Yellow S	-	-
*Carmoisine		7	12	Yellow 2G		1
*Amaranth		19	8	Yellow RFS		3
Red 10B		4	5	Yellow RY	1	2
*Erythrosine		_	4	*Sunset Yellow FCF	8	9
Red 2G	***	-	4	Oil Yellow XP	_	-
Red 6B		5	2	*Green S	1	-
Red FB		-	-	Blue VRS	5	7
Ponceau SX		4	2	*Indigo Carmine	_	_
Ponceau 3R		-	-	Violet BNP	-	1
Fast Red		-	2	Brown FK	_	_
Orange G		3	2	Chocolate Brown FB	-	_
Orange RN		2	9	Chocolate Brown HT	_	_
Oil Yellow GG		_	_	*Black PN	_	_

^{*} These colours are permitted in the United Kingdom and by the European Economic Community directive.

The others are permitted in the United Kingdom but not by the European Economic Community directive.

Desiccated Coconut.—One hundred samples of desiccated coconut were taken at various points of distribution. All were free from Salmonella organisms.

Mineral Oil in Food Orders, 1949-56.—Sixty-five samples of 10 varieties of foodstuffs were examined for the presence of mineral oil. This is the ninth consecutive year in which all the samples have been found to be free from mineral oil.

Artificial Sweeteners in Food Order, 1947.—This year 296 samples were examined for the presence of saccharin. Thirteen samples showed that saccharin was present within the specified limits, but in no instance was it found in ice-cream.

Fertilisers and Feeding Stuffs Act, 1926.

Fertilisers and Feeding Stuffs Regulations, 1960.

This year 22 informal samples of fertilisers and feeding stuffs were obtained for chemical examination. Only one of these was not in accordance with the prescribed statutory statement and was to the prejudice of the purchaser, while another bore no statutory statement. Both manufacturers were informed and the infringements rectified.

Prevention of Damage by Pests Act, 1949.

Threshing and Dismantling of Stacks (Scotland) Regulations, 1949.

These Regulations were given attention during the year when inspections of premises were made under other enactments.

Byelaws for Regulating Street Trading.—Vehicles from which food is sold and the storage accommodation from which these vehicles operate entailed 2,071 visits to ascertain their suitability. The number of vehicles approved in accordance with the byelaws as having suitable food storage accommodation was 1,024, a slight decrease from 1,249, the number last year, and there were 548 persons engaged in trading from vehicles with storage facilities outwith the city or trading from vehicles only—an increase from 449. These figures show a reduction from 1,698 last year to 1,572 this year.

The standard of hygiene demanded from those engaged in street trading continues to make slow but steady progress as a result of the instruction and advice given to the persons so engaged when the vehicles are inspected.

Food Hygiene.—It is again possible to report a steady improvement in this field. Necessary improvements continued to be made as in previous years by persuasion but in 12 instances where advice was ignored written intimations listing 70 contraventions of the regulations were sent, in consequence of which the infringements were rectified.

Twenty-two complaints were received alluding to bad practices, such as, for example, slackness on the part of the assistants, cracked crockery, dirty premises and yards, flies and odours.

The classes on "Food and Food Hygiene" conducted by the Extra-Mural Studies Department of the University of Glasgow were again attended to capacity at both sessions.

As in previous years several Associations and Guilds were addressed on the subject of "Clean Food" and these talks were always followed by active discussion,

SPECIAL SANITARY OPERATIONS.

() = 1 1 = 1							
(a) Food and Drugs, etc.—	1055	1050	1050	1000	1001	1000	1000
1. Dairies—	1957	1958	1959	1960	1961	1962	1963
Registered during year	176	206	209	205	156	298	197
Removed from Register		128	147	149	215	248	153
On Register at 31st December		1,643	1,705	1,761	1,702	1,752	1,796
	10,066	13,999	9,056	6,561	7,314	6,421	6,561
Contraventions of Orders, Acts and Byelaws	20	20	8	15	25	29	1
Prosecutions for same	_		1	10	20	1	
Repairs or Improvements							
effected	17	4	3	3	15	22	1
2. Dealers in Ice Cream-							
Registered during year:	20		27				
Premises	24	31	34	24	23	17	23
Vehicles Removed from Register :	72	77	171	103	71	65	102
Premises	23	33	45	35	32	32	29
Vehicles	27	72	90	55	87	44	106
On Register at 31st Dec.:			1				000
Premises	486	484			453	438	432
Vehicles Number of Inspections	352 3,254	357 3,224		486 2,842	470 2,537	491 2,357	504 2,564
Contraventions of Acts, Orders	0,201	O, www.	0,170	2,012	2,007	2,007	2,004
or Byelaws	87	87	31	8	8	16	_
Prosecutions for same	_	1	1	-	_	-	-
Repairs or Improvements effected	17	8				3	
	17	0				0	
3. Byres for Milch Cows— Number of Dairy Byres as at							
31st December	38	35	34	37	37	37	37
Number of Cows licensed for	1,027	975	993	1,122	1,134	1,134	1,166
Average number kept	920	846	857	975	928	1,038	879
Number of Inspections	266	302	230	238	232	265	228
4. Unwholesome Food—					-		
Number of Inspections							
Number of Lots dealt with Nature of Food destroyed at	2,851	2,754	2,650	2,493	2,551	2,192	2,069
Inspector's instance—	Tons	Tons	Tons	Tons	Tons	Tons	Tons
With Owner's consent	105		151	197	149	130	107
		. Cwts.				Cwts.	
Assorted Foodstuffs	Lbs.	Lbs.	Lbs.	18 Lbs.	Lbs.	Lbs.	Lbs.
	71	591	493	27	77	543	1 2
5. Food and Drugs (Scotland) Ad	50.50	2					2
Informal Samples analysed		3.807	3.838	3,802	3.908	3,705	3,692
Statutory Samples analysed		1,330					
Statutory Samples found non-	10			10		0.0	
Proceedings instituted	49 37	58 44	41 32	42 33	41 29	36 28	41 25
Number of Convictions	37	44		32	28	28	25
Amounts of Fines imposed		£236	£154	£163	£155	£190	£155
Number dismissed or found							
"Not Guilty"	-	-	-	_	_	-	-
Number Deserted Simpliciter Number No Action				1	1	1	1
Number Dismissed		_	1		_		_
Number Admonished	-	_	_	1	_	-	-
Number Acquitted	-	-	2	-	-	-	-

ABSTRACT OF COURT PROCEEDINGS.

Adulterated Samples on Contraventions during 1963.

FOOD AND DRUGS (SCOTLAND) ACT, 1956.

No. o. Com- plaint	and	No. of Convic- tions	Amount of Fines Imposed	No. Admon- ished A	No.	No Action
1	Sweet Milk— Deficient in milk fat	1	£10	-	-	-
1	Deficient in solids other than fat	1	£5	_	-	-
12	Sausages— Contained an excess of preservative	12	£75	_	-	-
8	Mince— Contained preservative during prescribed period	8	£45			_
3	Mince— Contained an excess of preservative during permitted period	3	£20			_
1	Non-Brewed Condiment— Deficient in acetic acid	_	_	_	-	1
26		25	£155	_	_	1
	OTHER THAN	v Food	AND DE	RUGS ACT		
1	Carrying on the business of a Dairyman without a Certificate of Registration		£5			
27	Grand Totals	26	£160	Ξ	=	1

HARRY T. SMITH, Senior Food Inspector

SECTION XIV

AIR PURIFICATION.

On several occasions during 1963 the presence of fog in the city provided an excellent opportunity to observe the effect of the Clean Air Act in those areas where smoke control is fully operative. For the third year in succession it was observed that the fog in the centre of the city was less dense than in the areas which are outside smoke control. The creation of a smoke-free corridor cutting across the city from south-west to north-east is undoubtedly responsible for the comparatively clear conditions in the centre of the city.

The coming into force of the Smoke Control Order for the Corporation's seventh area, the Ward of Provan, doubled the number of houses covered by Orders in the city which now number 41,150.

The Craigton Smoke Control Area Order made by the Corporation in 1962 was the subject of an official enquiry. The Secretary of State has approved the Order with minor alterations and amended the date when the Order comes into force—30th September, 1965.

With the delay which was foreseen in the Craigton Area it was decided to proceed with the Shettleston and Tollcross Area and an Order was made by the Corporation on 2nd May, 1963, and approved by the Secretary of State on 24th October, 1963. The area consists of 5,248 dwellings and the Order comes into force on 30th September, 1964.

The last remaining ward of the city's first five-year plan for clean air is Dennistoun. An Order covering Dennistoun was made on 19th December, 1963, and is awaiting the approval of the Secretary of State.

As was mentioned in last year's report, the first five-year plan for one reason or another will take seven years to complete. The next stage in the programme has been given consideration by the Committee on Health and Welfare, and while plans were made for tackling the remaining part of the city within seven years this programme is likely to be somewhat delayed owing to difficulties in fuel supplies. The Secretary of State has power in Section 90 of the Housing Act, 1964, to withhold grant for adaptations to fireplaces which would use scarce fuel. It is unlikely that any shortage will be found in supplies of solid fuel, although the premium fuels are still limited.

CLEAN AIR ACT, 1956 - SMOKE CONTROL AREAS.

No. of Other Premises	34	42	15	203	81	64	65	87	20	74
No. of Other Dwellings. Premises	367 (244)*	1,047	1,441 (1,131)*	8,928 (a)	3,542 (b)	6,057 (c)	(p) 892'61	11,080 (e)	5,248	8,482 (f)
No. of Commercial Premises	3,546	2,154	341	82	252	54	185	244	53	495
No. of Industrial Premises.	420	113	84	36	22	60	40	29	19	38
Acreage.	201	160	91	2,794	1,238	2,010	4,845	1,566	610	689
Order comes into Force.	October, 1959	October, 1960	October, 1960	December, 1960	May, 1962	September, 1962	15th May and 16th August, 1963.	September, 1965	September, 1964	1965
Orde	15th	15th	15th	15th	15th	30th	15th 16th	30th	30th	15th
Date of Approval by Secretary of State.	15th April, 1959	29th March, 1960	29th March, 1960	29th March, 1960	26th April, 1961	29th August, 1961	4th April, 1962	25th May, 1964	24th October, 1963	
Date of Order.	11th December, 1958	24th December, 1959	24th December, 1959	24th December, 1959	9th June, 1960	22nd December, 1960	21st December, 1961	20th December, 1962	2nd May, 1963	19th December, 1963
Area.	Central	Central No. 2 (Extension West of Central)	Central No. 3 (Ex- tension East of Central)	Pollokshaws	Pollokshields	Pollokshields (No. 2)	Provan	Craigton	Shettleston and Tollcross	confir-

* Number of dwellings when Order came into operation shown in brackets.

Houses in course of erection: (a) 1,145, (b) 62; (c) 24; (d) 897; (e) 418; (f) 57

The scarce fuel which is likely to influence the speed of promotion of smoke control is electricity. At the present time the increase in demand for electrical power has reached the stage where the peak demand is at the point of outstripping supply. The new power stations to be constructed will not be available for some years, although some help will be obtained from nuclear power plant and hydro-electric stations which are becoming operative. It is clear, however, that there will be restrictions for the grant available for the conversion of fire-places to electricity. Conversely, there will be improved grant for the use of electrical storage plant and for adaptations which use gas. The Scottish Gas Board are moving quickly towards the production of a less toxic gas than that obtainable from coal.

The first stage of the new programme will be the Ward of Cathcart and the remaining part of Pollokshaws not covered either by the existing Smoke Control Area Order or the Redevelopment Order. It is expected that an Order will be made before the end of 1964 to cover these areas.

SUMMARY OF DISTRICT WORK CARRIED OUT DURING 1963.

The past year has been an exceptionally busy one for the Clean Air and Smoke Abatement Section of this Department. With the ever increasing number of domestic dwellings coming within the scope of Smoke Control Orders this aspect of the work is becoming increasingly more time-consuming and calls for early and late work and also at times involves week-end duties.

Routine and special observations were also maintained on the industrial chimneys throughout the City, including the dock and harbour areas. Numerous complaints of smoke and fumes were investigated and in all cases where the complaints were confirmed an inspection was made of the plant concerned and advice given on the best means of remedying the fault.

Work in connection with applications for Prior Approval under the requirements of Section 3 (2) of the Clean Air Act, 1956, were also dealt with and visits paid to the sites. The figures submitted in the following tables are a summary of work carried out during the year on the industrial plants, but do not include that of the domestic fires in Smoke Control Areas.

Number of observations of chimneys (industrial)			5,329
Number of inspections of steam boilers and other	furna	ces	584
Number of verbal intimations of excessive smoke			280
Number of Prior Approval locations inspected		***	71

The above figures when compared with those for 1962 show a considerable reduction in observations. This is accounted for by the time now required for supervision of the Smoke Control Areas.

Other technical duties involving the supervision, maintenance and recording of the daily and monthly results obtained from the various air recording instruments are also regularly carried out.

CLEAN AIR ACT, 1956, SECTION 3 (2). PRIOR APPROVAL APPLICATIONS.

The work in connection with this section of the Clean Air Act continues on much the same scale as last year. In all instances when a prior approval request is received, a visit is made to the location and the position and height of the new chimney in relation to the surrounding properties noted.

The memorandum on chimney heights which was published during the year gave rise to a good deal of discussion and in some instances resentment before the heights of chimneys required by the recommendations were agreed on. At times this gave rise to lengthy discussions and sometimes considerable correspondence before a settlement was reached.

When a chimney is located in the near vicinity to domestic dwellings it is essential that it be of such height that the emission of fumes, etc., will not give cause for offence. In a few instances, depending on the purpose, location and surrounding properties, a reduction in height can be agreed on.

All applicants for Prior Approval are required to complete a questionnaire giving full particulars of any alterations or new plant it is proposed to install. If accompanied with drawings and found to be satisfactory the full details are submitted to the appropriate Committee for their approval.

PLANT IMPROVEMENTS NOTED DURING THE YEAR.

It has always been the practice of this Department to keep a record of any new additions, alterations or new plants which have been installed and to offer advice in connection with the control of smoke or grit emission. Each year, therefore there is included in these reports a list of improvements which have come to the notice of the smoke inspectors during the year.

The following is a list of improvements noted during 1963:-

New steam boilers installed to give increased power	 30
Mechanical stokers fitted to steam and other furnaces	 6
New chimneys erected or existing chimneys heightened	 41
Steam boilers or process furnaces converted to oil fuel	 90
Improvements not included under the above heading	 24

A description of some of the improvements carried out may be of interest.

A clothing factory in the east end of the city has installed a large "Cochran" economic type oil fired boiler replacing two solid fuel fired units. The old plant being located near the Edinburgh Road was the focus of attention and the subject of many complaints. The new plant is working satisfactorily and gives no cause for complaint.

A well known Store in Buchanan Street has completed its boiler replacement programme by the installation of two new "Penman" treble pass wet back boilers each producing 2,000 lbs. of steam per hour. This plant is fitted with the latest type of oil firing equipment and replaces two old Cornish boilers. This improvement has removed a long standing complaint.

A Tinfoil factory in the Polmadie area have installed an additional "Penman" economic type boiler in addition to the existing boiler which was converted from coal burning to oil fuel. Since this improvement smoke conditions at these premises have been faultless.

At the Eastern District Hospital, Duke Street, a complete new boiler plant has been installed. This consists of three oil fired Packaged type boilers replacing two old Lancashire hand fired units. The new plant is of modern design and is a typical example of the increased efficiency and saving in operational costs that can be achieved by careful planning. A firm of tallow manufacturers in the Shettleston area have installed a Chain Grate Stoker to their Economic hand fired boiler in an effort to reduce the smoke emissions which in the past have been the cause of numerous complaints. The new stoker has proved to be most efficient and is now operating without any trace of smoke.

A firm of Carpet manufacturers in the east end of the city have installed two large Ruston and Hornsby type oil fired boilers to meet their increased steam requirements. A recent extension to the factory has necessitated the additional boiler power and the new plant is now operating satisfactorily.

At the Corporation Baths Department's Parkhead Baths, a new Packaged type oil fired boiler has been installed, replacing an old Lancashire hand fired unit. Many justifiable complaints of excessive smoke were received prior to the new plant becoming operative. Conditions are now satisfactory and no further complaints have been received.

At the Dalmarnock Power Station on the south-eastern boundary of the city a battery of eight Babcock and Wilcox Water Tube boilers have been fitted for oil burning to replace solid fuel firing on chain grate stokers. Numerous and persistent complaints of the heavy deposit of grit in the surrounding areas were the reason for making these changes. All Power Generating Stations are registered under the Alkali Act and thereby are under the control of the Alkali Inspector. If any unusual conditions are observed or complaints received, the Smoke Inspector will carry out an inspection, make recommendations and report the matter to the Alkali Inspector.

The General Post Office has installed two large Sectional Heating boilers to replace three Lancashire type boilers which had been the cause of many complaints. The new plant is oil fired and replaces six old type Underfeed Stokers. The plant, being located in the central area of the city, was particularly noticeable when smoke was emitted. Conditions are now satisfactory.

Many other examples of improvements to boiler and central heating plants could be quoted, but the above are a few of the outstanding alterations that have been recorded during the year. It will be observed that the trend again this year is to change from solid to oil fuel when making additions or alterations to boiler plants.

INVESTIGATION OF COMPLAINTS.

This aspect of the work continues to loom large in the daily duties of the Clean Air Section and in fact is on the increase. With the ever increasing number of domestic dwellings coming under Smoke Control Orders it is only to be expected that the slightest infringement of the Act is taken exception to and reported by the residents in the area. This has greatly added to the work of the inspectors and much time is now devoted to investigating these complaints. In many instances when the offending chimney is located in a tenement building it is only by visiting each house in turn that the culprit can be detected.

The industrial complaints handled during the year were similar to those of the previous year and occupied considerable time in observation and inspection.

With so many oil fired boilers operating within the city it is only natural that a large number of the complaints received refer to these types of plants. Locating the faults and offering advice on a suitable remedy can be time consuming and it is here that the technical knowledge of the smoke inspectors can be most valuable.

Complaints are intimated by letter, personal calls and telephone. All receive immediate attention as far as possible and are pursued until a solution is found or a noticeable reduction in the cause of complaint achieved.

PROSECUTIONS TAKEN DURING THE YEAR.

Prosecutions taken during the year were mainly in respect of smoke being emitted from dwellings in contravention of Section 11 (Sub-Section 2) of the Clean Air Act, 1956.

Unfortunately bituminous fuels continue to be sold to domestic dwellers in Smoke Control Areas, and until such time as the Act is amended to make it an offence to market such fuels, difficulties will continue to be experienced in enforcing the Act.

During the year, forty-two prosecutions were taken in respect of domestic smoke offences in Smoke Control Areas. All pled guilty. Of this number, twelve were admonished and fines amounting to £37 in total were imposed. In one instance, a fine of £5 was imposed against the offender, this being a second offence. Fines imposed on the remainder were from £1 to £2.

In the industrial and commercial field a total of six prosecutions were taken and a total of £30 was imposed in fines. Of this sum, two were fined £10 each, and four £5.

SHIPPING, DOCK AND HARBOUR AREAS.

During the year under review only one prosecution was proceeded with under this heading. Many ships were visited and inspections carried out, but in most cases the smoke emission was not excessive and on investigation, adjustments of air dampers, fans, temperatures and pressures effected a remedy.

It is usually observed on these occasions that extensive repairs are under way and the ship's personnel are extremely busy on supervisory duties under somewhat chaotic conditions, so some latitude must be observed under such circumstances.

The inspectors, being ex-marine engineers, are conversant with such conditions and are well able to sum up the prevailing difficulties and to judge if everything possible is being done to minimise the emission of smoke. Their ability to discuss on equal terms with the ship's executives any problems which may arise does make for greater cooperation and understanding.

It is only in cases of gross negligence, carelessness, or complete indifference to the smoke regulations that a prosecution is taken.

The conversion from solid to oil fuel of a number of the Clyde Navigation Trust vessels operating within the dock and harbour areas has contributed greatly to a reduction in the smoke pollution in these areas. In addition, a new Diesel Electric Dredger and two Diesel Powered Hoppers have been commissioned, replacing old vessels of a similar type which were coal fired. It is intended in the not too distant future that the entire fleet will be converted to oil burning, and when this is accomplished a further improvement can be expected, as in the past these vessels were the subject of many persistent and justifiable complaints.

Conditions in general in the Dock and Harbour areas are showing an improvement, due no doubt to the ever increasing use of oil fuel in marine practice.

RAILWAY OPERATION.

Since the introduction of the Clean Air Act a vast improvement in atmospheric conditions has been noticeable.

Inspection of stations, marshalling yards and sections of the line which previously were the subject of complaints takes place regularly but existing steam locomotives still give cause for complaint. When unneccessary smoke is observed, a complaint is immediately made to the "Running Superintendent" who takes action forthwith with satisfactory results.

The diesel engines do on occasion emit smoke from their exhausts, particularly when starting up with a heavy load. This is a momentary emission, as it is noticeable that after travelling from 25 to 50 yards this emission disappears.

The introduction of the electric trains, particularly on the Cathcart Circle and adjoining lines, is an outstandingly obvious improvement and contributes much to the cleaner air conditions in the city and suburbs.

The Railways have also effected considerable improvements in all offices, etc., within the Smoke Control Areas by the installation of anthracite stoves in which an approved fuel is in use. This replaces the many open fires which previously used bituminous coal.

EDUCATIONAL ACTIVITIES.

WINTER COURSES IN BOILER HOUSE PRACTICE AND SMOKE ABATEMENT.

As in former years, enquiries were received during the autumn period from prospective students and from firms and departments as to the probable arrangements for resumption of courses during the ensuing winter session.

Following past procedure, all departments of Glasgow Corporation and industrial firms generally in the city area were informed of the arrangements being made for the resumption of the classes for the 48th year. A joint ordinary and advanced course was begun on Tuesday, 1st October, 1963, in the Burgh Court Hall, Municipal Buildings. The joint class met on Tuesdays for three weeks and thereafter the course consisted of the ordinary syllabus on Tuesdays and the advanced on Wednesdays, the lectures being between 7.30 p.m. and 9.15 p.m. The nominal tee of five shillings was again charged for the course of lectures.

The total enrolment was 96, a similar figure to last year, and is a large number indeed. This total was made up of 80 in the ordinary and 16 of the advanced classes respectively. The course concluded on 28th January, 1964. The total regular lectures given were 29 and two additional refresher lectures were given during April to those students who had intimated their intention to go forward for either the Boiler Operator or Boiler-house Practice examinations of the City

and Guilds of London Institute. These are held for the Glasgow and West of Scotland Area during early May. Class attendances over the session were 68·1 per cent. in the ordinary class and 80 per cent in the advanced, giving a combined figure of 74·5 per cent. for the course as a whole. Having regard to the incidence of shift and late work, the attendance figures reflect a sustained interest by the students during the session.

The written class examination was held in the lecture rooms of the Health and Welfare Department at Montrose Street on Tuesday evening, 4th February, 1964, between 7 and 9.30 p.m. A total of 68 men attended, 55 taking the ordinary papers and 13 the advanced. The pass mark was 50 per cent. The Society has for years allocated three book prizes in each class to those students having top marks and who are eligible, i.e., bona fide boiler operators or of similar status. Thirty-seven men in the ordinary and thirteen in the advanced gained merit certificates.

Atmospheric Pollution Measurements and Recordings.

The recording of the atmospheric conditions prevailing throughout the city is another aspect of the work carried out by this section of the Department. A technical assistant is responsible for attending to and recording the monthly and daily results obtained from the various apparatus which is located at selected sites within the city boundaries. This work is carried out in co-operation with the Department of Scientific and Industrial Research, Stevenage, to which all readings are forwarded for inclusion in the National Survey.

The apparatus in use for recording purposes consists of 14 Deposit Gauges, 9 Volumetric Filters and 30 Lead Peroxide Candles.

DEPOSIT GAUGES.

Eleven of these are located within the City boundaries and give a fair coverage of all areas. Three additional country stations are located at Loch Katrine, Mugdock Bank and Gorbals Water Works. The following tigures have been calculated from results submitted by the Corporation Chemist in his analysis of the monthly samples from all the city gauges.

Deposit of Each Element of Atmospheric Pollution for 1962 and 1963.

		Square Mile
	1963	1962
Tar	 3.68	3.62
Carbonaceous other than Tar	 33.3	38.85
Ash	 83.6	100-63
Total Insoluble Matter	 120-58	143-11
Total Soluble Matter	 58-91	82.44
Total Solids	 179-49	225.55
Rainfall in Millimetres	 842.9	870.00

The table on page 323 give details of the average monthly deposit of each element of atmospheric pollution for 1963 and also figures for the previous six years.

VOLUMETRIC SMOKE FILTERS.

There are nine Volumetric Smoke Filters operating continuously throughout the year recording the concentration of sulphur dioxide and smoke and other suspended matter in the atmosphere. These receive the daily attention of the technician assisted by the Smoke Inspectors, and if the location is at a clinic, by the nursing staff.

The following tables give comparative figures for the years 1962-1963 of sulphur dioxide and smoke determination for one site in the Central Smoke Control Area.

MONTROSE STREET—CENTRAL SMOKE CONTROL AREA.

SO2 CONCENTRATION-MICROGRAMMES PER CUBIC METRE.

Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec.

1962 377 215 341 220 136 99 74 82 149 178 287 346 1963 415 357 200 156 126 97 — 106 149 205 322 371

SMOKE CONCENTRATION-MICROGRAMMES PER CUBIC METRE.

Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec. 1962 511 194 338 158 99 74 59 83 162 143 345 469

1963 484 406 276 167 106 102 — 105 100 136 318 372

LEAD PEROXIDE APPARATUS.

The estimation of sulphur dioxide by Lead Peroxide method is taken at thirty locations covering all districts so that a complete record can be made of the contamination in both the residential and industrial areas of the city. Included in the above are the three country sites from which a comparison can be made with conditions prevailing within the city boundaries.

CARLTON PLACE.

SO2 MILLIGRAMMES PER 100 SQUARE CENTIMETRES.

Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec. 1962 4.00 3.75 3.65 2.26 2.01 1.28 1.32 1.38 1.43 2.04 3.80 4.52 1963 3.98 4.88 3.75 2.69 2.19 1.34 1.31 1.46 2.62 2.72 3.70 5.73

The above table is a summary of comparisons of contamination from sulphur dioxide for the years 1962-1963 at Carlton Place.

SURVEY-CENTRAL SMOKE CONTROL AREA.

During the year a special survey was carried out in the Central Smoke Control Areas with a view to detecting the level and possible source of pollution still continuing in these areas.

For the tests a mini-van was equipped with a standard volumetric filter and SO₂ apparatus and operated in rotation for one hour on each of seven selected sites. This was made possible with the help of the Chief Constable from whom permission was given for parking facilities irrespective of the traffic and parking regulations. Tests were carried out between 8.00 a.m. and 7.00 p.m. daily on the third week of each month and continued for a period of one year.

The results are still in the process of tabulation and analysis, but preliminary graphical representations are available for inspection. These show the heaviest pollution to be in direct proportion to the density of traffic coupled with the prevailing weather conditions.

The Department of Scientific and Industrial Research, with whom consultations were held prior to the tests, gave valuable assistance. They are also very interested in the data obtained and a further analysis is now being carried out under their direction.

CHARLES E. STANGER, Senior Smoke Inspector.

AVERAGE DEPOSIT OF EACH ELEMENT OF ATMOSPHERIC POLLUTION FOR EACH MONTH OF 1963.

ENGLISH TONS PER SQUARE MILE.

			6	n	2	2	_	6	0	1	00	2	00	100	-
		1957	22.49	18.9	16.1	14.7	15.8	15.1	17.3	13.7	15.3	14.32	19-3	208.86	17.24
		1958	22.06	12.08	13.23	18.15	19.35	14.50	13.07	18.18	14.61	19.07	25.41	210.95	17.58
	Solids	1959	18.77	20.08	15.41	11.03	13.49	11.71	7.89	15.15	21.86	16.42	20.51	188.98	15.75
	TOTAL S	1960	20.56	18.01	17.24	18.07	13.51	14.25	15.01	13.92	17.02	12.56	24.91	216.76	18.06
		1961	22.31	15.06	18.54	10.97	11.88	17.40	13.97	19.03	20.06	22.99	25.01	216.76	18.06
		1962	38-27	18.68	19.33	20.62	13.12	9.24	10.92	20-73	14.03	18.40	21.37	225.55	18.80
led in		Chloria as Cl.	0.92	0.82	0.72	0.91	0.42	0.33	0.23	1.41	0.84	1.81	0.84	9.52	62-0
Included in Soluble		Sulphi Sulphi	2.55	2.9	2.57	1.75	1.92	1.34	1.67	1.46	86.0	2.68	1.76	22.0	1.9
	,sbilo2	Total .E361	20.85	23.64	14.59	14.73	12.12	10.08	11.36	13.63	10	23.62	17-25	179-49	4.91 14.95
	Soluble	Total	5.13							5.76	3.83	9.39	4.65	58-91 179-49	4.91
TTER		Total Insolu Matte	15.72	16.45	96.6	9.84	8.69	6.22	7.73	7.87	6.17	14.23	12.6	180.58	10.06
MAT		daA	11.23	11.37	6.54	6.04	6.39	3.93	5.89	4.88	4.19	9.27	9.97	83.6	6.9
INSOLUBLE MA	st usceous	Carbor Tess T	4.1	3.95	3.16	3.41	2.06	2.06	1.59	2.7	1.76	4.57	2.34	33.3	2.8
INS		Тат	0.39	0.63	0.26	0.39	0.24	0.23	0.52	0.29	0.22	0.39	0.59	3.68	0.31
		Rainfa	19	97	57	92	72	57	87	83.9	95	163	26	842.9	70.2
		Month	January	March		May	June	July	August	September	October	November	December	per square mile	Gauges
			Mean of 11 Stations											Yearly Deposit in tons per square mile	Monthly mean of all Gauges

SECTION XV

GENERAL SANITARY OPERATIONS.

The city is divided into 37 wards which, for convenience, are administered in five Public Health Divisions, shown as follows:—

War No.		Ward No.	North.	Ward No.	CENTRAL.
1.	Shettleston and	8.	Cowlairs.	11.	Exchange.
	Tollcross.	9.	Springburn.	12.	Anderston.
2.	Parkhead.	10.	Townhead.	13.	Park.
3.	Dalmarnock.	14.	Cowcaddens.	19.	Kelvinside.
4.	Calton.	15.	Woodside.	20.	Partick (East).
5.	Mile End.	16.	Ruchill.	21.	Partick (West).
6.	Dennistoun.	17.	North Kelvin.	22.	Whiteinch.
7.	Provan,	18.	Maryhill.	23.	Yoker.
				24.	Knightswood.

Sc	OUTH-EAST.		SOUTH-WEST.
Ward		Ward	
No.		No.	
25.	Hutchesontown.	27.	Kingston.
26.	Gorbals.	28.	Kinning Park.
33.	Camphill.	29.	Govan,
34.	Pollokshaws.	30.	Fairfield.
35.	Govanhill.	31.	Craigton.
36.	Langside.	32.	Pollokshields.
37.	Cathcart.		

The area, population and average density (persons per acre) of each Division in 1963 was as follows:—

			Area		Population	Density
Central			 7,050	acres	210,266	30
North			 8,172	,,	205,267	25
East			 8,855	,,	238,586	27
South-E	ast		 8,246	,,	218,587	27
South-W	Vest		 7,402	,,	156,441	21
		City	 39,725		1,029,147	26

The following table, which is based on information supplied by the City Assessor, shows the number of occupied and unoccupied houses in each Division as at Whitsunday, 1963:—

			Occupied	Number of Hous Empty	es Total
Central		 	66,024	1,147	67,171
North		 	65,839	1,303	67,142
East	***	 	72,839	754	73,593
South-Ea	ast	 	68,265	1,087	69,352
South-W	est	 	48,688	655	49,343
			321,655	4,946	326,601
				-	Ministration of the last of th

The work of this section is summarised in Appendix Table XV—
"Operations of the Sanitary Section"—and a short report thereon
by the Senior Divisional Inspector is as follows:—

As indicated in the Report for 1962 there has been appointed within the Department a Senior Divisional Sanitary Inspector, one of whose principal functions is to obtain uniformity of administration throughout the five divisions.

After one year it can be said that an improvement has taken place in this respect but much work still requires to be done before the various problems of co-ordination and standardisation are successfully solved. The normal work of the Divisions was carried out in the usual manner but difficulties were experienced due to a shortage of qualified staff, a shortage which appears to be prevalent throughout the entire country. It is unfortunate that the large industrial cities appear most affected by this shortage as there is no doubt that within these cities the demands made upon the sanitary inspector are greater than in the counties and burghs. In the City of Glasgow, in particular, the pressure of work falling upon the Department with its inadequate resources is having an effect upon efficiency in the various functions for which the sanitary inspector is responsible. This section of the Department has in the past been able to undertake any special type of work as and when required but, with the increases in statutory duties and the shortage of staff, this may prove to be difficult in the years to come.

MEASURES TO REDUCE PIGEON POPULATION.

Further operations were undertaken to reduce the pigeon population within the city. The area previously treated on the north side of the River Clyde was extended and, in addition, a similar area was treated on the south side. In all, during the year, four operations were carried out and 8,745 pigeons were destroyed. As 1,966 pigeons were destroyed in 1962 the total for all operations is 10,711.

The co-operation of the Chief Constable, the City Engineer, British Railways, Clyde Trust, the Royal Society for the Prevention of Cruelty to Animals, the Scottish Home and Union, the Director of the Art Galleries, the Director of Cleansing and the Department of Agriculture for Scotland was very valuable in ensuring the success of the various operations.

TREATMENT OF SEWERS FOR RAT INFESTATION.

Many complaints of rat infestation are received in the Department and for many years the number of infestations reported has remained static. It is accepted, and is well known, that rats inhabit sewers, many surface infestations being caused by rats coming from the sewers into properties. In the past certain operations have been conducted separately by the Divisions to reduce the population of rats in sewers and it was decided to co-ordinate these operations and carry out large scale sewer treatments.

In all thirty-six areas were treated and 4,074 manholes baited. The poison used was Fluorakil. A moist bait containing 2 per cent. Fluorakil is obtained by mixing two parts of Fluorakil 3 (3 per cent. Fluorakil mixed with pinhead oatmeal) to one part by weight of water and mixing thoroughly. Owing to the toxicity of this poison, the highest standard of safety precautions had to be observed in order to protect the staff engaged in the operations.

The results obtained and the extent of the treatment carried out in each of the Divisions is shown in the following table.

TABLE 1.

TABLE SHOWING RESULTS OBTAINED IN POISONING OF RATS IN SEWERS
DURING 1963.

			No. of Man-	Weight of Bait	Tak	es	No Tak		No Res	sults	
Division		Areas	holes Treated	used per Manhole	No.	Per Cent.	No.	Per Cent.	No.	Per Cent.	Total
Central	110	9	1,488		513	35	893	60	82	6	1,488
Northern	***	3	819	2 oz.	272	33	537	66	10	1	819
Eastern	***	7	326	to	118	36	208	64	Nil	Nil	326
South-East	ern	14	762	4 oz.	230	28	532	72	Nil	Nil	762
South-West	ern	3	679		210	31	437	64	32	5	679
City	***	36	4,074		1,343	33	2,607	64	124	3	4,074

Of the 4,074 manholes baited it will be observed that in 1,343 (33 per cent.) a substantial "take" was recorded. This indicates the necessity for the operations and the size of the population of rats infesting sewers.

The assistance provided by the Master of Works and City Engineer made the operations possible and the co-operation extended by the members of his staff to this Department did much to ensure their success.

RAT INFESTATION IN SUMMERSTON AREA.

An extensive rat infestation problem was reported in the Summerston area in the Northern Division of the City where approximately 511 acres were subject to periodic severe infestations. Farm steadings, small holdings and a refuse coup were particularly affected.

Normal treatment with Warfarin failed to produce satisfactory results and it was suspected that some unknown physiological factor among the rat population might be responsible for this. Consequently, after consultation with the Pests Officer of the Department of Agriculture selected areas, close to farm steadings, small holdings and the coup were treated with acute poisons—first with zinc phosphide then with arsenious oxide. Remaining small pockets of infestation were treated by trapping and gassing.

The operation, including extensive pre-baiting, took five weeks. A 78 per cent. take (833 of 1,062 poison baits laid) was recorded with the zinc phosphide, and a 45 per cent. take (475 of 1,034 poison baits laid) with the arsenious oxide. A conservative estimate of the number of rats killed, based on a ratio of three rats killed to each bait taken, is 3,924.

At the suggestion of the Department of Agriculture massive doses of Warfarin containing preservative were laid in the vicinity of farm buildings and stackyards in an attempt to prevent re-infestation.

SULPHURETTED HYDROGEN IN SEWERS.

During the latter months of the year many complaints were received from the occupiers of business premises in the city centre regarding smells emanating from the sewers and drains adjacent to their premises. On investigation the smells were found to be due to an emission from the sewers of Sulphuretted Hydrogen. The source of this gas was traced to a discharge into the sewers of surface and sub-soil drainage from the area of ground known as the "Soda Waste" adjacent to Pinkston Road in the Northern Division.

For a period of over seventy years up to 1894, by-products of the manufacture of alkalis were deposited in this area by the United Alkali Co. Ltd., St. Rollox Works. It is estimated that the quantity of by-products deposited during this period was in the region of two million tons. This waste ground, originally bog land, contains underground streams which dissolve soluble sulphur compounds and a clear transparent liquid, a complex sulphide of calcium with sulphur in solution, drains from the area into a private sewer. This sewer follows the line of the railway cutting to Buchanan Street and thence to the point of discharge and ultimately discharges into the River Clyde at a point adjacent to the Suspension Bridge.

During the current year operations commenced to develop the area of the "Soda Waste" for housing purposes and it was found necessary to provide sewers within this area. Simultaneously with this disturbance the private sewer carrying the bog liquor choked. Steps have been taken to remove the cause of this chokage and in addition a scheme has been prepared to provide a dilution chamber into which sub-soil drainage will be discharged and where its strength will be diluted before the effluent is discharged into the sewerage system of the city.

It will be recalled that an employee of the Corporation of Glasgow lost his life by being overcome by gas within a manhole attached to this scheme.

REDEVELOPMENT OF CEMETERIES.

It is also of interest that during the current year two old cemeteries were required for the purposes of development. In the Central Division operations commenced in Cheapside Street and human remains were disinterred and reburied within Linnpark Cemetery. In the South-Eastern Division the Gorbals Burial ground was similarly treated.

Both these operations were carried out under the supervision of officers from this Department and no complaints from the members of the general public were received.

REFUSE IN CITY LANES.

Many complaints have in the past been received in this Department concerning the conditions obtaining in the various lanes in the City Centre and caused by the occupiers of business premises storing refuse overnight in unsuitable containers. Under the supervision of the Divisional Sanitary Inspector officers from the Department carried out inspections of the various lanes during the night.

After the necessary evidence had been obtained as to the responsibility for the refuse, letters were sent to the persons concerned. The results obtained were exceptional and the co-operation extended to this Department by the various occupiers of business premises is appreciated. It is anticipated, however, that these conditions may recur.

NUISANCE ABATEMENT.

The clearance of the older properties in the City has brought no decline in the number of nuisances dealt with by the Department. The increase in the total figure is accounted for mainly by increases in the figures for the Central and Eastern Divisions.

TABLE II.

TABLE SHOWING THE NUMBER OF NUISANCES ABATED.

	1963
Central	 9,815
Northern	 14,972
Eastern	 13,077
South-Eastern	 3,896
South-Western	 9,253
City	 51,013

The abatement of the vast majority of the nuisances was procured by service of the intimation in terms of the Public Health (Scotland) Act, 1897. During the year, however, the Corporation authorised 253 statutory notices and legal proceedings against owners of properties had to be instituted in respect of 100 nuisances. The table overleaf shows the relevant details.

TABLE III.

TABLE SHOWING DETAILS OF COURT PROCEEDINGS IN TERMS OF PUBLIC HEALTH (SCOTLAND) ACT, 1897.

Div	ision		Number of Nuisances Submitted to Sheriff Court	Number Decided in Favour of Pursuer	Number Unsuccessful	Number Continued	(Costs		Exp	ensi	es.
Central			25	15	6	4	£1,763	12	3	£57	15	0
Northern	***	***	36	27	_	9	3,328	4	0	93	9	0
Eastern	***		10	10	-	-	100	6	0	16	16	0
South-Eas	tern		7	6	-	1	-	-		-	-	
South-Wes	stern		22	16	2	4	365	11	3	54	12	0
City	5		100	74	8	18	-	-		-	-	

Glasgow Corporation Order Confirmation Act, 1959.—The clearing of choked drains, etc., continues to be swiftly and effectively dealt with under the powers contained in the Glasgow Corporation Order Confirmation Act, 1959.

The table below shows that in 1,783 cases the Corporation had to instruct tradesmen to carry out the work in default of the owners. The percentage cleared by owners remains at over 90.

TABLE IV.

TABLE SHOWING ACTION TAKEN UNDER THE GLASGOW CORPORATION ORDER CONFIRMATION ACT, 1959.

		Number of Notices	wit	by Owner hin y Period		Cleared by Corporation		
Divis	ion	Issued	No.	Percentage	No.	Percentage		
Central		 3,043	2,461	81.0	582	19-0		
North		 5,665	5,316	93.8	349	6.2		
East		 4,513	4,228	93.7	285	6.3		
South-East		 2,008	1,491	74.0	517	26-0		
South-West		 5,252	5,202	99-0	50	1.0		
City		 20,481	18,698	91-3	1,783	8-7		

Food Hygiene (Scotland) Regulations, 1959-61.—The primary survey of food premises is not yet complete. This is due mainly to shortage of staff which consequently may be said to be adversely affecting the standards of hygiene prevailing in the city. Many contraventions of the Regulations remain to be remedied, although good

progress is being made in respect of new and largely reconstructed premises. In an attempt to cope with the volume of work, inspectors have been making inspections outside their normal working hours and in this way the back-log has been reduced. While such a situation is obviously unsatisfactory one minor advantage has accrued from it. Making visits at unconventional hours inspectors have uncovered various unsatisfactory hygienic practices which would probably not have occurred at times when visits from inspectors were expected. The table below shows the number of premises in the city and the number of inspections made.

TABLE V.

TABLE SHOWING INSPECTIONS MADE UNDER THE FOOD HYGIENE (SCOTLAND) REGULATIONS, 1959-1961.

Divis	ion	No. of Premises in Division	No. of Premises Inspected	No. of Visits
Central		 1,091	330	1,094
North		 799	799	2,954
East		 976	183	235
South-Ea	ast	 1,129	346	477
South-W	est	 729	729	2,473
City		 4,724	2,387	7,233

Prevention of Damage by Pests Acts, 1949.—The destruction of rats continues to be an important part of the work of the Department. As has been noted above, treatment of the sewers in all Divisions was undertaken during the year in an attempt to deal with one of the main reservoirs of infestation. The table below indicates that, as in previous years, the highest incidence of rat infestation is in the Central and Northern Divisions.

TABLE VI.

TABLE SHOWING NUMBER OF PREMISES FOUND TO BE INFESTED BY RATS AND/OR MICE.

Divisio	on		Number of Premises Treated
Central	***	***	702
North			820
East			667
South-East			678
South-West			359
City			3,226

Housing.—The programme of closure and demolition of unfit houses continued during the year. Progress in the reduction of unfit houses in the city is far from satisfactory and, at the present rate it will be many years before the city's housing is up to modern standards. The table below shows the distribution of houses for which decisions to secure closure or demolition were obtained.

TABLE VII.

DETAILS OF HOUSES DEALT WITH DURING 1963 UNDER HOUSING ACT,
BY DEAN OF GUILD ACTION OR BY PRIVATE CLOSURE OR DEMOLITION

Division	Closing Order or Demolition Order under Housing Act	Dealt with under Dean of Guild Procedure	Private Closures or Demolitions	Corporation Houses, Closures or Demolitions	Total
Central North East South-East South-West	336 415 521 257 337	94 125 68 28 53	5 1 31 4 53	335 144 346 977 131	770 685 966 1,266 574
City	1,866	368	94	1,933	4,261

Abandoned Properties.—There are now 107 abandoned properties containing 1,183 houses, a slight reduction on last year's figures. The Department is responsible for expenses incurred in the abatement of certain types of nuisance in these properties. The following table shows their distribution among the five divisions:—

TABLE VIII.

Number of Properties and Houses Recorded as Abandoned as at December, 1963.

D	ivision		Number of Properties	Number of Houses
Central			11	127
North			29	316
East			39	441
South-Ea	st		7	82
South-W	est	***	21	217
Ci	ty		107	1,183

Factories Act, 1961.—Inspection of factories under this Act is a normal part of the duties of a local authority and of sanitary inspectors in particular. A disturbing feature of this work is the large number of constantly recurring contraventions and the opposition met with from those responsible when they are asked to rectify them. The table below shows the number of premises and the number of visits made to them in each Division.

TABLE IX.

TABLE SHOWING INSPECTIONS CARRIED OUT UNDER THE FACTORIES ACT, 1961.

		No. of Premises Registered as at 31.12.63 Non- Non- Non- Non- No Premises Inspected during Year Non-				1	No. of Visits Non-				
Divisio	on		Mech.	Mech.	Total	Mech.	Mech.	Total	Mech.	Mech.	Total
Central	140	***	1,272	87	1,359	1,258	87	1,345	1,258	87	1,345
North			587	13	600	587	13	600	694	49	743
East			613	79	692	246	39	285	516	39	555
South-East			546	94	640	195	40	235	316	160	476
South-Wes	t	***	548	52	600	537	50	587	1,109	100	1,209
City			3,566	325	3,891	2,823	229	3,052	3,898	435	4,328

GLASGOW CORPORATION CONSOLIDATION (GENERAL POWERS) ORDER CONFIRMATION ACTS, 1960-62

Many complaints are received in the Department regarding the dirty condition of the walls and ceilings of closes and staircases.

In tenement properties if the painting and lime-washing of the walls is neglected the standard of amenity within the property is reduced. In terms of the above Act the Local Authority has power to require the owners of properties to lime-wash the walls and ceilings of closes as and when necessary.

All closes in the City of Glasgow are inspected annually and notices in terms of the above Act are issued to the owners to lime-wash or paint the closes which are found to be dirty.

In addition, many owners undertake the painting and lime-washing of closes without having received such notices. The undernoted table shows that during the year 2,369 closes were lime-washed or painted as a result of notice and 1,061 were done voluntarily, making in all 3,430 closes which were redecorated.

TABLE X.

TABLE SHOWING NUMBER OF CLOSES LIME-WASHED OR PAINTED

Division		As a Result of Notice	Voluntary by Owners	Total
Central	***	1,010	221	1,231
North		573	303	876
East		457	363	820
South-East		37	38	75
South-West		292	136	428
Total		2,369	1,061	3,430
		Street Street Street	Statement of the last of the l	

Aged and Infirm Persons.—Early in the year it was decided to increase the number of staff dealing with the problems existing among aged and infirm people in the city. A number of nurses previously engaged on survey of Corporation houses were allocated to this task. The extent and nature of the splendid work done by these nurses is shown in the table below.

TABLE XI.

TABLE SHOWING ACTION TAKEN WITH REGARD TO AGED AND INFIRM PERSONS.

Ma	les	Fem	ales		Houses	Compass- ionate
C.	P.	C.	P.	Total	Cleaned	Washings
 411	66	683	158	1,318	44	220
 253	12	524	45	834	14	466
 294	83	540	184	1,101	35	297
 41	55	86	168	350	79	141
 151	78	217	189	635	144	158
 1,150	294	2,050	744	4,238	316	1,282
	C. 411 253 294 41 151	411 66 253 12 294 83 41 55 151 78	C. P. C 411 66 683 253 12 524 294 83 540 41 55 86 151 78 217	C. P. C. P. 411 66 683 158 253 12 524 45 294 83 540 184 41 55 86 168 151 78 217 189	C. P. C. P. Total 411 66 683 158 1,318 253 12 524 45 834 294 83 540 184 1,101 41 55 86 168 350 151 78 217 189 635	C. P. C. P. Total Cleaned 411 66 683 158 1,318 44 253 12 524 45 834 14 294 83 540 184 1,101 35 41 55 86 168 350 79 151 78 217 189 635 144

C-In Corporation Houses. P-In privately owned houses.

In the course of this work many sociological problems were uncovered, confirming the importance of this work. Four typical case histories are given.

Miss A. 86 years. General health very poor. Only one eye. Living alone in a privately rented three-apartment top-floor flat. Total weekly income of £4 14s. No living relatives and extremely lonely. Unwilling to accept help or have her house cleaned.

After repeated visits was persuaded to have her house cleaned and have a home help for three hours daily. Her doctor was contacted and an "extra nourishment" certificate obtained from the National Assistance Board.

Now much happer and appreciative of all that has been done for her.

Mr. and Mrs. B.—75 and 82 years. Mr. B. very frail and Mrs. B. partially paralysed after a cerebral haemorrhage. Living in a privately

rented two-apartment flat. Total weekly income of £6 8s. 6d. With living relatives within the city not entitled to a home help.

Arrangements were made for monthly cleansing of the house and washing of bedclothes. Their doctor was contacted and a certificate for a wheel-chair for Mrs. B. obtained.

Now managing very well. Mrs. B. able to get round the house. Appreciative of help given.

Miss C.—80 years. Suffering from cardiac failure. Living in five-apartment top-flat house with two lodgers and three cats. Total weekly income of £4 10s. (including income from lodgers). House dirty, roof leaking. Reluctant to accept help.

The factor was contacted and the roof repaired. After frequent visits her confidence was gained and it was discovered that her rates were two years in arrears. Arrangements were made for a rebate of £10 of rates and for the balance to be paid in small amounts. Help was obtained for her from "Meals on Wheels" and other voluntary organisations.

The house now kept clean. The rates' deficit reduced to £50. Her attitude to her problems completely changed.

Mr. and Miss F.—63 and 70 years respectively. Brother and sister. Both mentally sub-normal. Unwashed. Living in two-apartment Corporation redevelopment flat. House dirty and bug infested. Mattresses torn. Clothing dirty.

Persuaded to wash and change clothing. Arrangements made for disinfestation and cleaning of house and bedding. Bedstead and mattress obtained with help of National Assistance Board and other voluntary organisations. Bedclothes and personal clothing obtained from Women's Voluntary Service and delivered to her.

Still under supervision. Difficult to help. Refuse to go to Women's Voluntary Service to get clothes to fit.

Full details of other duties carried out by the Sanitary Inspectors during the year are to be found in the Appendix Table XV and in the sections headed Noise Abatement Act, Rag Flock and Other Filling Materials Act, and Air Purification.

NOISE ABATEMENT ACT, 1960.

Under Section I, noise or vibration which would amount to a nuisance at common law becomes one of the categories of nuisance to be dealt with under Part II of the Public Health (Scotland) Act, 1897. Local authorities now have all the powers and duties in relation to noise nuisance that they already have in relation to other nuisances under Section 16(6) of this Act. There are exceptions for noise or vibrations caused by statutory undertakings in the exercise of their powers and for noise or vibration caused by aircraft.

By Section 118 of the Glasgow Corporation Consolidation (General Powers) Order Confirmation Act, 1960, a noise or vibration nuisance is liable to be dealt with summarily in the manner provided in Part II of the Public Health (Scotland) Act, 1897. The Section does not apply to British Transport Commission and their servants exercising statutory powers in relation to their railways.

During 1963, 24 complaints of noise nuisance were investigated, in comparison with 18 in 1962 and 31 in 1961. Three consisted of noise from motor lorries during early morning hours and discussion with managements regarding consideration for those still sleeping was sufficient to effect improvement.

Twelve cases related to industrial premises and consisted of excessive noise from machinery, comprising generator, compressor, circular saws, steam ejector and safety valves, weaving and flour machines, cranes, punch machine. In one instance no nuisance was thought to exist; two were alleviated by discontinuing work after 10 p.m.; increased insulation was effective in three cases and two were improved after repair of the machinery. Of the remaining four complaints, in one all practical steps were considered to have been taken to reduce noise; a new permanent building was to be erected in the near future in another, while further efforts were being made to find a solution regarding two industrial processes.

Eight complaints related to shops and restaurants, of which seven were attributable to fans. The overhaul of the fans and resiting in one instance were sufficient to abate any nuisance.

The following table shows the distribution of noise complaints dealt with during 1963.

	Division							
Complaint	Central	North	East	South- East	South- West	Total		
Noise from surface transport —trains	_	1	2	_	_	3		
Noise from industrial premises and engineering building sites		2	3	4	1	12		
Noise originating in a dwelling or in connection with domestic activities		_	_	_	_	1		
Noise from shops or restaurants	0	_	2	2	2	8		
	5	3	7	6	3	24		
	-	-	_	_	_	_		

RAG FLOCK AND OTHER FILLING MATERIAL ACT, 1951.

One application for registration under the above Act was received during the year, and approved. The appropriate certificate was issued. Two firms closed down and were removed from the Register. Nine licences to manufacture or store rag flock were renewed. No further application was received.

The total number of premises registered at the end of 1963 was 73, compared with 74 in 1962.

Di	vision		Registered Premises	Licensed Premises
Central		 	20	2
Northern		 	10	1
Eastern		 	15	2
South-East	ern	 	16	4
South-West	tern	 	12	_
			-	_
			73	9
			_	_

DISINFECTING SECTION.

This section carries out the disinfection of premises, clothing, books, etc. following the removal to hospital or the granting of a clearance certificate in a home case of infectious disease. It also serves the public by lending equipment and supplying materials so that the tenants themselves may do the cleaning, whitewashing or distempering.

Disinfection of Premises, etc.—The table below shows the number of premises and books dealt with on account of infectious disease.

Houses,	etc.,	disinfecte	ed		***	 4,915
Library	and	school bo	oks	disinfed	ted	 1,076

The amount of materials used for these purposes and also issued to the public is shown below:—

Formaldehyde 40 per	cent.	 	 52	gallons
Napthalene Powder		 	 1,339	lbs.
Disinfectant (Crude)		 	 31	gallons
Whiting		 	 435	lbs.
Colour (Dry)		 	 60	lbs.
Brushes loaned		 	 8	

In addition to the above work, 338,952 articles of second-hand clothing and 700 bales of rags were disinfected before export to other countries.

During the year the section also undertook, on behalf of the Food and Dairies Section, the stencilling of the "Approved for Food" sign on 924 vehicles.

Disinfection of Second-hand Clothing.—During 1963 there was an increase in the number of consignments of second-hand clothing which were disinfected by Formalin and Naphthalene or by steam process.

The trade with Eire was very similar to last year, but consignments for abroad showed a considerable increase in number. The figures for 1963 were 495 to the Irish Free State and 301 to Africa, etc.

The revenue received for the issue of disinfection certificates was £501 12s. 3d. compared with £442 12s. 8d. during the previous year.

Ruchill Disinfecting Station.—The following services, which have for many years been undertaken by Ruchill Disinfection Station, were transferred to the administration of the Baths Department on 1st June, 1963. A variety of materials is washed and disinfected at the Disinfecting Station at Ruchill, chiefly clothing, bedding and bed linen from houses in which an infectious disease has occurred and including some from dirty houses and verminous persons. In the case of infirm elderly persons compassionate washings are undertaken when necessary. A much appreciated service is that offered to men living in lodging houses who may have their clothes cleaned while they themselves have a bath on the premises.

Bedding and bedclothes, etc., from the Education Authority Holiday Camps, from Police Cells and from two Ambulance Associations are also dealt with. Laundry work is carried out for various branches of the Health and Welfare Service, viz., Day Nurseries, Old Folks' Homes, Clinics, etc.

A disinfecting service is provided for private firms exporting second-hand clothing and rags and also packing straw used in the packing of goods for export. In each case a certificate of disinfection supplied by this department is required by the importing country.

FACTORIES ACTS, 1937 to 1959.

ANNUAL REPORT[†] OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1963 FOR THE CITY OF GLASGOW IN THE COUNTY OF LANARK.

Prescribed Particulars on the Administration of the Factories Act, 1937.

PART I OF THE ACT.

 Inspections for the purposes of provisions as to health (including inspections made by Sanitary Inspectors).

		NT 1	Number of				
Premises (1)		Number on Register (2)	Inspections (3)	Written notices (4)	Occupiers prosecuted (5)		
(i)	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities		435	10	_		
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authorities		3,659	573	-		
(iii)	Other Premises in which Section 7 is enforced by the Local Authority (ex- cluding out-workers' pre- mises)	100	234	14			
		3,891	4,328	597	=		

†This table is enclosed at the request of the Minister of Labour to indicate to Medical Officers of Health the prescribed particulars required by Section 128(3) of the Factories Act, 1937, to be furnished in their Annual reports or with respect to matters under Parts I and VIII of that Act administered by the County or Town Council. It is not intended to supersede the fuller statement which is desirable in the text of the Report but should be attached as an annex.

2.—Cases in which Defects were found. (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

Number of cases in which defects were found

Particulars	Found	Remedied	To H.M.	By H.M.	Number of cases in which prosecutions were instituted
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	131	130	-	8	-
Overcrowding (S.2)	-	_	-	-	_
Unreasonable temper- ature (S.3)	1	1	-	-	_
Inadequate ventilation (S.4)	3	1	_	-	_
Ineffective drainage of floors (S.6)	_	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	35	. 27	_	14	_
(b) Unsuitable or defective	747	528	_	29	-
(c) Not separate for sexes	112	77	-	3	_
Other offences against the Act (not including offences relating to					
Out-work)	378	297	_	8	
Total	1,407	1,061	=	62	=

PART VIII OF THE ACT.

OUTWORK.

(Sections 110 and 111).

			Section 110		Section 111			
Nature of Work		No. of out-workers in August list required by Section 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions	
(1)		(2)	(3)	(4)	(5)	(6)	(7)	
Wearing Apparel— Making, etc., Clean and Washing	ing	38	_		_	_		
Household linen	***	1	_	-	_	_	_	
Other		_	_	_	_	_	-	
		_	-	-	-	-	-	
Total	***	39	-		_	_	=	

SECTION XVI

OCCUPATIONAL HEALTH.

The Occupational Health Section is responsible for medical examinations in connection with the recruitment of employees of all Corporation Departments, except Fire, Police and Transport which have their own medical officers.

Medical Examinations—Entrance, Sick Pay, Superannuation, Special and Retiral—were carried out as in previous years. Three thousand, five hundred and eighty-four persons were examined for the first time and 567 were examined for the second or subsequent occasion. Table I shows how these examinations were distributed by scheme and department.

Six hundred and ninety-five (19.4 per cent.) out of 3,584 persons examined for the first time for Entrance, Sick Pay or Superannuation purposes were found to be unfit because of the conditions shown in Table II. Five hundred and sixty-seven persons who had been found unfit at previous medical examinations were re-examined and of these 307 (54.2 per cent.) were again found to be unfit. Thirty-eight persons in this group were classified as permanently unfit.

The commonest causes of unfitness in males were, glycosuria requiring investigation, radiological chest lesions requiring investigation, obesity, hypertension, chronic bronchitis, cardiac disease and hernia. The commonest cause of unfitness in females was obesity, often associated with hypertension.

A considerable number of employees found unfit on account of tuberculosis and other radiological chest lesions, albuminuria and glycosuria are likely to be found fit at a later date after investigation and treatment have been carried out.

Chest X-ray examination is carried out at the Department's X-ray Unit when each employee is medically examined for the first time; and also on subsequent occasions if required. Miniature X-ray films are used routinely, but if a suspicious lesion is detected the person concerned is recalled for a large X-ray film to be taken.

During the year, six new active cases of pulmonary tuberculosis were detected, a rate of 1.7 per thousand X-rays. A number of other persons are under observation at chest clinics as a result of their X-ray examination.

TABLE I

MEDICAL EXAMINATIONS CARRIED OUT AT 20 COCHRANE STREET DURING YEAR ENDED 31ST DECEMBER, 1963.

	Sick	Super-			
Department Entrance		annuation	Retira	1 Specia	I Total
M. F.	M. F.	M. F.	M. F.		
Architectural and				-	100
Planning 33 16		4 3	1 -	1 -	39 19
Baths — —	6 1	29 22	2 —	- 1	37 24
Children's 1 —		5 15			6 15
City Analyst — 1					- 1
City Assessor 10 25		5 5			15 30
City Chamberlain 11 26		3 6		- 1	14 33
City Factor 8 5	5 4	2 1			15 10
Civil Defence — —	1 1	1 3	10		2 4
Cleansing 3 —	66 3	278 4	12 —	1 -	360 7
Curator	40 501	1 8	0 5		1 8
Education 67 37	49 501	48 231	2 5	- 2	166 776
Estates 3 4					3 4
Halls — 1	107	1 -	1 -11		2 1
Health and Welfare 16 13	167	22 104	1 11		39 295
Highways 1 —	18 — 143 2	142 —	3 —	4 -	165 —
Housing and Works 37 10	143 2	660 6	0 -	1 -	844 18
Kelvin Hall — — Libraries 29 69	2 7	1 - 18	_ 1	1076	32 95
			4 -	1 -	5 2
			4 -	1	
	_ 1	17 3			- 1 17 4
Markets — — Museums and Art	- 1	1/ 3			1/ +
0-11-1 7 5	- 7	1 3	1		8 16
Office of Public	- /	1 3	- 1		0 10
XXI - 1 - 10 1	6 1	23 1	2 —		41 3
D-1 0	52 —	185 —	6 —	Allen In	245 —
		8 5	0 -		8 5
D 1 4 0 0		_ 9			3 4
D Dissal 0		1 1			1 4
Town Clerk 5 9		1 -			6 9
Veterinary Surgeon 1 —					1 -
Water 2 —	9 1	47 3	4 —		62 4
Weights and Measures 1 1		2 —			3 1
Blind Asylum — —		4 1		6 —	10 1
Scottish Society for		1 1			10 1
Mentally Handicap-					
ped Children — 2	NE L	_ 3			_ 5
Mission to the Adult					
Deaf and Dumb — —		1 2			1 2
Other Local					
Authorities 18 13					18 13
AND COMMENTS OF THE PARTY OF TH					
Total 268 246	357 696	1,493 450	38 18	14 4	2,170 1,414
We the second					
Total No. of Exam	minations A	fale 2,	170		
	1	Female 1,	414		
				3,584	
Re-examinations—					
Total No. fro	m all Depa	rtments	***	567	
			-		
	Grand To	otal	***	4,151	

The re-examinations, which totalled 567 persons, are persons examined for the second or subsequent occasion.

Fifty-seven persons were examined with a view to premature retirement on health grounds, but in one case it was considered that the person was fit to continue his employment. A considerable number of these examinations were carried out at the employees' homes.

The conditions causing premature retiral are shown in Table III. The commonest conditions causing premature retiral in employees previously found fit were chronic bronchitis, cerebral thrombosis and cerebral haemorrhage. Other main causes were hypertension and coronary thrombosis.

The Occupational Health Section is also consulted by Corporation Departments for advice on working conditions and on the degree of physical fitness required for certain occupations.

The total number of persons examined during 1963 was 4,151, as compared to 3,237 during 1962, an increase of 914 persons (28.2 per cent.) examined during 1963.

TABLE II

ENTRANCE, SICK PAY, SUPERANNUATION AND SPECIAL MEDICAL EXAMINATIONS.

CLINICAL CONDITIONS FOUND IN PERSONS EXAMINED FOR THE FIRST TIME WHICH CAUSED THEM TO BE FOUND UNFIT.

TIME WE	iich (AUSE	DIL	EM 10	DE I	OUND	UNFII.	
							Male	Female
Pulmonary Tuber	culosis	-activ	ve, new	ly disc	overed		4	2
Pulmonary Tuber							16	11
Other Radiologica	1 Chest	Lesion	is requi	iring in	vestiga	tion	51	23
Non-Pulmonary T							1	
Chronic Bronchiti							23	8
C 11 TO							22	9
Hypertension				***			37	31
							19	27
YY							22	1
Indigestion requir						r	14	8
The second secon							15	1
Genito-Urinary D			ubercu	ilous)			1	
Arthritis and Rhe								2
Organic Nervous							3	
3.5 711							5	5
Diabetes Mellitus							1	
Glycosuria requiri	ng inv						75	10
Albuminuria requ	iring in	nvestig	ation				20	28
(NT. 1. TO. 1.							4	2
Endocrine Disease	8					***	_	4
01 11							48	80
Epilepsy							2	1
Malignant Neopla		***		***			1	2
Defective Vision		***		***			2	1
Other Conditions							29	24
O III O O II	40.16							
							415	280
							NAME AND ADDRESS OF THE PERSON	-

Three hundred and seven persons who were examined for the second or subsequent time were found to be still unfit. Thirty-eight persons in this group were classified as permanently unfit.

TABLE III

RETIRAL MEDICAL EXAMINATIONS.

CLINICAL CONDITIONS CAUSING PREMATURE RETIREMENT.

					Male	Female
Chronic Bronchitis	 				11	2
Bronchial Carcinoma	 				2	_
Coronary Thrombosis	 				3	1
Angina Pectoris	 				2	
Congestive Cardiac Fa					1	
Vascular Disease	 				1	
Cerebral Thrombosis an	emorrh	age			9	4
Hypertension					2	4
Arthritis and Rheumat					1	
Peptic Ulcer					1	1
Genito-Urinary Disease					_	1
Ulcerative Colitis	 	, , ,			1	1
Pernicious Anaemia	 					1
Mental Illness	 				2	1
Menieres Disease	 					1
Epilepsy	 		***	***	1	
Defective Vision			***		1	1
Detective vision	 					
					38	18
						10

In addition, one male was examined, but insufficient grounds were found to recommend premature retirement.

SECTION XVII

WELFARE SERVICES.

RESIDENTIAL ACCOMMODATION.

Details of the 1961 Census for Glasgow were published during the year now under review and showed, inter alia, that the proportion of the city's population who were over pension age (that is 60 for women and 65 for men) had increased from 1 in 9 in 1951 to 1 in 8 in 1961, which corroborated the estimated figures on which planning for the care of the older age group had been based. Since 1948 the Corporation have provided, in terms of the National Assistance Act passed in that year, residential accommodation (581 beds) for aged persons in need of care and attention in 18 Homes ranging in size from 14 to 60 beds. This accommodation supplemented that previously provided in the larger Homes at Foresthall, which has accommodation for 647 residents, in addition to the 640 beds allocated to the Western Regional Hospital Board, and at Crookston where 492 beds are available. The Department have also provided at Frognal, Troon, Ayrshire, a Holiday Home to which 30 residents from the various Glasgow Aged Persons' Homes are taken in rotation for fortnightly holiday periods. This house is also used to provide holidays for handicapped persons who are unable to have a holiday otherwise. Details of the various Homes with date of opening and accommodation in each appear on page 354.

It is planned that, during 1964, 56 additional beds will be provided in Glasgow Homes. Work has commenced on the house adjoining Mainsholm and when completed will increase the accommodation there by 15 beds: the opportunity will also be taken to install a passenger lift. While this work is in progress the residents of Mainsholm are in residence at Frognal and will probably be there for about six months. The fourth purpose-built Home is in course of erection at Castlemilk and will accommodate 41 residents. It is most conveniently sited, close to a group of old people's flats and within easy access of shops and a public library.

In Foresthall, of those in residential accommodation, 74 per cent. are of pension age and those in the younger age groups are suffering from some handicap which makes necessary residential care and attention. From time to time persons who require temporary accommodation due to unforeseen circumstances, such as fire, flood or damage to or collapse of property, have to be provided for in Foresthall: 1963 was a particularly fortunate year and there was no necessity for any such admissions. When such incidents do occur the Department also make provision for the removal and temporary storage of furniture

and property of persons who are victims of such misfortune whether they themselves are admitted to Foresthall or find temporary accommodation elsewhere.

Crookston was opened in 1934 for the accommodation of aged persons and was the first Local Authority Home in Britain to be provided solely for the care of old people. Cottages designed for one and two persons were built in the grounds and opened in 1938, and in 1950 a small building at the entrance gate, formerly used for staff accommodation, was adapted to provide 14 single rooms with appropriate dining and sitting rooms. There are therefore three sections in this Home—wards for the frailer residents; cottages for those who can substantially look after themselves and prepare their own breakfast and tea, provisions being supplied from the Home's general store, but who lunch communally; and the annexe where all food is prepared and served.

In the smaller Homes the majority of residents occupy single, double, three and four-bedded rooms—in only two Homes are there bedrooms for more than four persons—with appropriate sitting room and dining accommodation. Each resident has the use of a wardrobe and dressing table space, a bedside locker and bed light. In all Homes newspapers, wireless and television are available and library books are supplied by the Corporation Libraries Department and exchanged regularly.

At Foresthall, Crookston and Frognal shops are available where residents may purchase confectionery, cakes, biscuits, cigarettes, tobacco, matches and such small items of personal requirement as are in demand.

All residents have a minimum of 13s. 6d. per week pocket money. Concerts and entertainments are arranged in all Homes during the winter months and putting greens are available wherever garden space permits, while bowling greens are provided at Foresthall and Crookston. Church services, both Protestant and Roman Catholic, are held regularly at Foresthall and Crookston and less formal services in the smaller Homes where the greater proportion are fit to attend their own churches if they so desire. A Woman's Guild meets regularly in Crookston. Invitations extended to residents in the various Homes by church organisations, managements of cinemas and theatres, etc., are most gratefully accepted and the Department provide transport where the number invited justifies this. Details of admissions and discharges to and from all small Homes, Crookston and Foresthall are shown on page 355, while the age groups of residents are shown on page 356. From this statement it can be noted that 87.3 per cent. of the residents are within the age range 71 to 90 and 57.8 per cent. between 76 and 85, the largest number in any five-year group being 29.5 per cent. between 81 and 85 years.

Burnbank, Windlaw and Davislea continue, along with Crookston and part of Foresthall, to provide for the frailest and a 24-hour nursing staff is provided in these Homes. Of the 1,720 beds available in the city for the accommodation of old people, 506 are reserved for those in the frail ambulant class who need a degree of nursing care.

Close co-operation exists between the Department and the Hospital Geriatric Service under the direction of Dr. W. Ferguson Anderson and relations with him and his colleagues are most cordial. It is interesting to note that during the year 249 persons were referred to the Department for consideration from 24 Hospitals as persons who had been in hospital and were considered unfit to return to their former way of life. Of these 249, 117 were admitted, 90 names were withdrawn by the various Hospitals and six died before transfer could be arranged to Corporation Homes. The balance were awaiting admission or assessment at the end of the year.

Residents in Small Homes, even where there is not a 24-hour nursing service, are nursed in cases of temporary illness such as would be cared for in one's own home. When it is found that night nursing is necessary over a period exceeding a few nights, a night sitter can be provided by the Home Help Section to relieve the Matron until the patient's condition has improved or transfer to hospital has become possible and necessary. On very few occasions during the year were the services of a night sitter requested and appreciation is due to the Matrons and Superintendents who cheerfully undertake this task as part of the normal care of their residents.

The total number of applications for admission to Homes during the year was 1,202, an increase of seven over the previous year. In addition to providing accommodation in Corporation Homes the Department supplement the cost of maintenance of aged persons in Voluntary Homes: 82 such applications were dealt with and 128 persons were being so supplemented at the end of the year.

The Department employ two full-time chiropodists who visit the Homes in rotation and provide a service for the residents. They also attend a chiropody surgery set up at Laurieston House where blind and handicapped persons may also have attention.

Under the National Assistance (Registration of Homes) (Scotland) Regulations, the Local Authority is required to register and inspect

Homes the sole or main object of which is the provision of accommodation for aged persons, for the blind, crippled or deaf and dumb. During the year three additional Homes were registered, the number of Homes on the register at the end of the year being 19.

DOMICILIARY SERVICE.

It is the policy of the Department and of the Welfare Services generally to assist elderly persons to retain and remain in their own homes as long as possible and desirable. To assist persons to retain their independence and their own home, the Home Help Service (details of which appear on page 163) is the first line of defence. The Meals-on-Wheels Service operated by the W.V.S. with support from the Health and Welfare Department, who cook the meals at Foresthall, provide the special containers and other equipment and meet the cost in excess of 1s., the amount paid by the recipients, is of great value. This service is, of course, limited by the transport and personnel available and the fact that meals must all be served between the hours of 11.30 a.m. and 2 p.m. The fact that a regular call is being made when the meal is delivered twice a week is another safeguard and ensures that a recipient has a visitor every few days.

The Glasgow Old People's Welfare Committee and its affiliated bodies run clubs in practically every district of the city where old people can meet, form friendships and new interests and so guard against loneliness. This Committee, the W.V.S. and other organisations also run lunch clubs where pensioners may purchase lunch at 1s. per head, the balance of the cost being met by the Health and Welfare Department—again a safeguard against loneliness and malnutrition.

During the year the first all-day club for old people was opened at St. Mungo's Church, Parson Street. This club is open six days a week and has normal club facilities, plus a daily lunch club. Demand has exceeded all expectations and in the few months the club has been open the number lunching daily has reached 150. It is planned to provide in this building services such as chiropody, physiotherapy and hairdressing. A similar club is planned by the Glasgow Old People's Welfare Committee who have commenced building premises for the purpose in the Battlefield district.

The Glasgow Old People's Welfare Committee also provide a visiting service for older people who are no longer able to attend clubs or lunch clubs and voluntary workers undertake this duty, bringing news of club activities, discussing any problems which the old people may have or sometimes providing just a sympathetic and patient ear.

Other Voluntary Organisations providing recreation have been assisted by the provision of equipment such as crockery, tea urns, etc. The services of these Voluntary Organisations and their workers are invaluable in guarding against loneliness and providing the safeguard of regular visitation.

When workers at the clubs, W.V.S. members delivering meals, or visitors feel that an old person's health or general fitness is deteriorating, he or she can be referred to the Health and Welfare Department. A welfare officer immediately calls to see the old person, explains the services and aids which can be made available and offers any further assistance which may be necessary.

HOUSEBOUND.

Many elderly people and many handicapped younger people are confined to their homes through physical disability. Services to increase independence of such people have been increasing steadily over the past few years and have been limited only by the shortage of trained occupational therapists. Three have, however, been in continuous employment during the past year, although our present establishment provides for six.

In December, 1963, the case load was 313, a breakdown into medical certifications being shown in the table below. 68 patients were given craft-

DOMICILIARY OCCUPATIONAL THERAPY FOR THE HOMEBOUND PHYSICALLY HANDICAPPED.

Breakdown in Medical Certification of Current Case Load at 31st December, 1963.

Multiple Sclerosis				63
Rheumatoid Arthritis				61
Cerebral Accidents				45
Osteo-arthritis		***		19
Paraplegia				16
Amputees			***	16
Spastics				12
Muscular Dystrophy				11
Poliomyelitis				11
Congenital Deformities	***	***		9
Chest and Heart	***			9
Parkinson's Disease				5
Epilepsy		***		5
Ankylosing Spondylitis		***		4
Partially-sighted				23
Others		***	***	20
				313

work only, 64 were given both aids and crafts and 181 were recommended for home adaptations or provided with self-help aids. Many disabled persons have been recommended by the Divisional Medical Officers for rehousing in more suitable accommodation and where there is severe handicap the occupational therapists attached to the Welfare Section have been asked to visit the alternative house offered to ensure that no house is accepted where adaptations to meet the disabled person's particular needs are not possible. Adaptations to houses or provision of aids of a substantial nature have been approved by Committee for 103 persons during the past year. These comprised such assistance as pavement crossovers to enable handicapped persons to use an invalid vehicle, the provision of a very loud bell or flashing light to indicate a caller at the door of a deaf person, the provision of rails at the bath to provide support, widening of doorways or provision of sliding doors to give access for invalid chairs, provision of ramps over steps to enable a person confined to a wheelchair to get out or to reduce the strain on a relative taking out a handicapped person in such a chair, or a hydraulic lifter to transfer a severely handicapped person from bed to a chair or lower that person into a bath. The cost may range from an expensive lifter to a few coppers for a very simple aid such as a potato peeler with a very thick handle to enable a housewife with poor grip to continue with her household duties. The needs of each handicapped person must be assessed individually by the occupational therapist and the assistance recommended approved by the patient's general practitioner. stated, such aids are invaluable to young and old wherever the handicap justifies the supply. Where younger handicapped persons are capable of undertaking some work, although housebound, the occupational therapists endeavour to find some paid employment for them or to provide a craft which will enable them to produce something marketable. They have been successful in obtaining such homebound employment in embroidering jerseys, stringing labels and manufacturing coat-hangers. We welcome enquiries from firms who have any simple routine work which might be undertaken by handicapped persons in their own homes. Other work produced by handicapped persons under the instruction of the occupational therapists is sold at the Department's annual sale in November.

HANDICAPPED PERSONS.

Handicapped Young People.—The After-Care Section continue to interview, along with the Head Teacher and Youth Employment Officer, all young persons leaving the 13 Special Schools and 11 Junior Occupation Centres and offer the services of the Department to the pupils and

parents. Home visits are later made to each school leaver's home and if employment has not been obtained or the young person has been unable to retain employment, assistance and advice are given where necessary. In all, 438 new cases were enrolled during 1963.

If there is little prospect of work in open employment, admission to the Department's Senior Occupation Centres may be necessary. These Centres are situated for young men at 13 South Portland Street and for young women at 89 Killearn Street and work is proceeding at Pollokshields Burgh Hall and Whiteinch Hall, which will on completion be opened as additional Centres tor young women and men respectively. The number on the Roll at Killearn Street at the end of the year was 62 and at South Portland Street, 99.

The Centres are staffed by one occupational therapist and a staff of handcraft instructors. The standard of work is high considering the disabilities of the trainees, the majority of whom are mentally handicapped. Various crafts are taught, including woodwork, assembly of prefabricated parts, lampshade making, cane work, rug making, embroidery, hand and machine knitting and sewing, etc. Some work has been obtained on a contract basis and this is very valuable in providing, so far as possible, work conditions for those trainees who are nearing the standard necessary for outside employment or employment in a sheltered workshop.

Laurieston House—At Laurieston House, which is provided by the Department as the Welfare Services Centre for Handicapped in the city, and where accommodation is available rent free to all Voluntary Organisations who may desire it and who are providing a service for handicapped persons, the Department run under their own supervision three afternoon clubs weekly for handicapped persons. 88 persons are on the Roll of these clubs, average attendance per week being 60, and transport is provided for 42 of the club members who could not attend otherwise. These meetings take the form of a social afternoon when new friendships can be formed. A senior welfare officer is in charge and can give advice and assistance on personal problems. Tea is provided and, if desired, handcraft teaching is available.

The Department provide facilities for the Glasgow Branch of the Scottish Epilepsy Association for meetings and clubs in Laurieston House and give financial support for their various schemes such as sheltered workshops, holiday camps, etc. The Department also contribute towards the cost of maintenance in Bridge of Weir Epileptic Colony and the David Lewis Colony in Cheshire of 29 epileptics.

Blind.—At 31st December there were 2,070 registered blind persons ordinarily resident in the city, of whom 218 were registered during the year. Of the total register, 67 per cent. were over 60 years of age, as were 78 per cent. of the new registrations. Of the total register, 243 were employed, 166 being in sheltered employment. The ten Home Teachers paid 9,728 domiciliary visits, the great majority being of social or welfare nature as less than five per cent. were teaching visits.

A handcraft class for the Blind meets in Laurieston House each Monday afternoon and has an average attendance of 23. Club meetings are held in various districts of the city and at Laurieston House the Deaf-Blind Club meets on Friday afternoons and the Discussion Group on Friday evenings. Dances and concerts are held during the winter months at Govan Town Hall, Bridgeton Public Hall and St. Vincent Masonic Hall. Outings are arranged to the various parks during the summer months and bowling and skittles are available in Alexandra Park in summer. A bowling team selected from Glasgow players represented the city in the Scottish National Bowling Competition and won the Crookmoss Silver Rose Bowl in the West of Scotland Bowling Competition. The Department were hosts in the final of the National Bowling Competition which was held at Crookston Home in August, 1963, the competition being won by the team from the Scottish National Institute for War-blinded at Linburn.

As mentioned, the Department's chiropodists provide treatment at Laurieston House and 136 blind persons took advantage of this service during the year.

Close contact is maintained with the Ministry of Labour Blind Persons' Resettlement Officers and where possible the Home Teachers, with their intimate knowledge of the blind persons in their particular district, give assistance in plans for training or placing in employment.

Voluntary Organisations.—The Mission to the Deaf and Dumb have their own club premises at the Royal Institute in West Regent Street and act as agents for the Department in dealing with persons suffering from the severe handicap of deafness, the Department contributing towards the cost of their various services. They also have a Home for aged deaf situated at Bearsden and the Department supplement the payments by Glasgow residents admitted there.

There is excellent co-operation between the officials of the Department and the Mission. Similarly, cordial relations exist with and support is given to the St. Vincent After Care Society who deal with deaf of the Roman Catholic faith. Holidays at Frognal are provided for persons nominated by both organisations.

The Department are happy to co-operate with the various Voluntary Organisations who usually limit their activities to one particular handicap and the Committee are most sympathetic to any appeal for financial or other help from these organisations. Many use the facilities at Laurieston House for meetings and functions.

In June, 1963, the first Help the Disabled Week was held and the Department co-operated with the various Voluntary Organisations taking part and provided a display and exhibition in the hall of the Royal Institute for the Deaf at which the majority of organisations dealing with handicapped persons exhibited. An exhibition of gadgets to increase independence and adaptations which could be undertaken and had actually been undertaken in the homes of handicapped persons was staged at Laurieston House but the interest shown by the general public was very disappointing.

INVESTIGATIONS.

During the year the Welfare Section undertook investigations on behalf of the Education Department (664), the Home Help Section (6,188), the City Collector's Department in connection with applications for relief of rates (1,208) and the Child Welfare Section (752). Applications for admission to the Department's Homes for Aged numbered 1,202 and 28 applications for supplementation of payments in Voluntary Homes for the Aged were made. Reports were prepared at the request of the Lord Provost on 913 applications for assistance from the Lord Provost's Charitable Funds. In all, 13,605 applications to the Section were recorded.

STAFFING.

In February, 1963, following the review by the Organisation and Methods Officer, four District Welfare Officers were appointed and the city was divided into four areas instead of three for administrative purposes, each in charge of a District Welfare Officer. The four staff members who had been seconded to the first course of Social Work Training at the Glasgow College of Commerce resumed duty with the Department in June at the end of their two-year full-time course, each having been awarded the Certificate in Social Work of the Council for Training in Social Work set up by the Health Visiting and Social Work (Training) Act, 1962. Two further members of staff were seconded to commence the course in October, 1963. Each District Welfare Officer is well experienced and there is one qualified and two unqualified assistants attached to each district.

A 24-hour service is operated at 23 Montrose Street by the staff so that when an emergency arises at any time during day or night a Welfare Officer is always available to give help and advice and take any action necessary. The number of persons coming to our notice who have financial problems, often due to poor budgeting, seems to be increasing. The families concerned are, it is telt, in need of more of our social workers' time than is meantime possible. As the services for handicapped become more widely known the number of applications for such services, too, is growing.

Students from the Probation Service, the Scottish College of Commerce, the University School of Social Study, the School Welfare Service and Health Visitor Trainees are all now seconded to the Welfare Section for part of their practical training and this too involves the time of certain senior officials in the Section.

The statistical tables relative to this Welfare Section are as follows:—

Residential Accommodation at 31st December, 1963.

Residential Accommodation at 31st Dece	ember, 1963.
	No. of beds
Foresthall, 657 Edgefauld Road (1,287 beds, of wh	
the disposal of	
Regional Hospita	
	342
	14
Cottages	
C	492
	ned on
Woodburn, 10 Cleveden Gardens 16th April,	
Extension to Woodburn 28th June,	1962]
Tayford, 33 Newark Drive 24th June,	
Stoneleigh, 48 Cleveden Drive 1st Novemb	
Redhills, 42 Sherbrooke Avenue 18th March	
Woodmailing, 39 Sherbrooke Avenue 18th April,	
Ailsa, 13-15 Turnberry Road 9th October	
Burnbank, 20-26 Burnbank Terrace 22nd April,	
Scott House, 56 Langside Drive 19th May, Extension to Scott House 26th April,	
Huntly Lodge, 33-34 Huntly Gardens 6th October	
Fairfield, 53-55 Sherbrooke Avenue 12th Janua	
Macarthur House, 15 St. John's Road 1st June, 1	
Ravelston, 994 Great Western Road 17th Octob	
Roberton, 1 Lancaster Crescent 21st May,	
Merrylee Lodge, 55 Muirskeith Road 14th Novem	
Knowehead, 372 Albert Drive 12th Decen	
Mainsholm, 2-3 Kirklee Gardens 13th March	
Windlaw, 340 Ardencraig Road 22nd April,	
Davislea, 100 Mallaig Road 18th Octob	
Holiday Home-	581
Frognal, Southwood, Troon 5th Septem	ber, 1957 30
	1.750

SMALL HOMES:

AGE GROUPS AT 31st DECEMBER, 1963.

Home		Under 60	61/65	66/70	71/75	76/80	81/85	86/90	91/95	96/100		Total
Ailsa	M. F.	=	1	1	1	3 6	3 2	2 4	1	=	12 14	26
Burnbank	M.	-	-	-3	4	1 13	16	7		-	1	49
Davislea	F.	-	4	-	4	8	2	_	1	-	48	49
	F.		-	1	6	10	18	5	2	_	42	58
Fairfield	M. F.	_	2	1 2	=	2 4	3 2	2 3	=	=	10 11	21
Huntly Lodge	M. F.	=	- 2	- 2	6	1 5	7	4	=	=	7 26	33
Knowehead	M.	-	1		5	7	5	1	1	-	20	
Macarthur House	F.		1	3	1	5	7 2	1	_	_	18	38
Macarthur House	F.		_		2	7	-	1	=	-	10	14
Mainsholm	M. F.	=	=	1	3	7 6	2 6	1	_	=	14 15	29
Merrylee Lodge	M. F.		=	2	3 4	2 8	5 7	1 4	=	-	13 24	37
Ravelston	M.		_		3	2	3	3	-	_	11	_
D. 11.211	F.		-	2	6	6	6	2	1		23	34
Redhills	M. F.	_	1	1	2	4	2 5	2 2	=	=	7 12	19
Roberton	M. F.		=	-	-2	-6	5	-2	-		17	17
Scott House	M. F.	- 1	- 4	-1	2 3	2 7	2 7	1 5	2 2	=	9 30	39
Stoneleigh	M. F.	-	-	1 2	1 4	1 4	3 5	- 2	_	-	6	23
Tayford	M.	-	_	-	3	3	1	- 1	_	=	8	
Windlaw	F.		1	1	1	3	5	2	_	-	15	23
	F.	=	=	4	2	7	10	6	3	1	33	40
Woodburn	M. F.	_	_	1 3	3 2	3	3 8	2	2	_	12 29	41
Woodmailing	M. F.	-	=	_	1 3	2 4	2 5	2	_	_	7 13	20
Crookston Main Home	M.	-)	6)	7) 2	21 2	0 \	181	31)	5)	1) 1	103	_
Crookston Cottages	F. M. F.	1 1 -	$\frac{4}{1}$ 11^{1}	2 251	8 2 5 5 4		57 3 25 133	39 79	0		88 33	441
Totals	M. F.	- 2	12 17	16 44	61 81	78 205	93 203	51 103	12 21	1 2	324 678	1,002
Total for all Homes e Foresthall		2	29	60	142	283	296	154	33	-	,002	

All Homes except Foresthall

Percentage over 75 years of age 76.7. Percentage over 80 years of age 48.5. Percentage over 85 years of age 18.9.

Home			Under 60	61/65	66/70	71/75	76/80	81/85	86/90	91/95	96/100		Grand Total
Foresthall		M. F.	43 44	42 27	54 25	44 33	44 39	32 35	11 15	3	1	272 221	493
Totals	***	 	87	69	79	77	83	67	26	4	1	493	

Foresthall Percentage over 75 years of age 36-7.
Percentage over 80 years of age 19-8.
Percentage over 85 years of age 4-25.

SECTION XVIII

LEGISLATION

The following Acts of Parliament, Regulations, etc., applicable to the Health and Welfare Services in Scotland came into operation during the year:—

Animal Boarding Establishments Act, 1963—Regulates the keeping of boarding establishments for animals.

Offices, Shops and Railway Premises Act, 1963—Makes fresh provision for securing the health, safety and welfare of persons employed to work in office or shop premises and provision for securing the health, safety and welfare of persons employed to work in certain railway premises; amends certain provisions of the Factories Act, 1961.

CIRCULARS, REGULATIONS, ETC., ISSUED IN 1963.

S.I.—Statutory Instrument.

S.H.H.D.—Scottish Home and Health Department.

S.D.D.—Scottish Development Department.

Air Purification-

- 1. S.I. 493 of 14.3.63. Clean Air. The Alkali, etc., Works Order, 1963.
- 2. S.D.D. Circular 20 of 20.5.63. Clean Air Act, 1956. Chimney Heights.
- 3. S.D.D. Circular 21 of 20.5.63. Clean Air Act, 1956. Smoke Control Programmes, etc.
- 4. S.D.D. Circular 58 of 20.12.63. Clean Air Act, 1956. Smoke Control Areas.

Animals-

S.H.H.D. Circular 211 of 16.10.63. Animal Boarding Establishments Act, 1963.

Blindness-

S.H.H.D. Circular 241 of 28.11.63. National Assistance Act, 1948. Certification of Blindness.

Bronchitis-

S.H.H.D. Circular 38 of 28.2.63. Bronchitis Report.

Building-

- 1. S.I. 1897 (S.102) of 22.11.63. Building and Buildings. The Building Standards (Scotland) Regulations, 1963.
- S.D.D. Circular 54 of 12.12.63. Building (Scotland) Act, 1959. Building Standards (Scotland) Regulations, 1963, and Building Operations (Scotland) Regulations, 1963.

Dental Services-

- 1. S.H.H.D. Circular 58 of 28.3.63. Local Authority Dental Services.
- 2. S.H.H.D. Circular 132 of 28.6.63. Local Authority Dental Services.
- S.H.H.D. Memo. 164 of 14.8.63. Local Authority Dental Services. Annual Return.
- S.I. 1689 (S.83) of 4.10.63. National Health Service (General Dental Services) (Scotland) Amendment Regulations, 1963.

Food-

- S.H.H.D. Circular 21 of 12.2.63. Food and Drugs (Scotland) Act, 1956. Sampling of Food.
- S.I. 849 /S.24 of 22.4.63. Food and Drugs. Composition and Labelling— Scotland. The Soft Drinks (Scotland) Regulations, 1963.
- S.H.H.D. Circular 85 of 2.5.63. The Soft Drinks (Scotland) Regulations, 1963.
- S.I. 1101 (S.44) of 13.6.63. Food and Drugs. Composition—Scotland. The Ice-Cream (Scotland) Amendment Regulations, 1963.
- S.H.H.D. Circular 133 of 26.6.63. Food and Drugs (Scotland) Act, 1956.
 The Ice-Cream (Scotland) Amendment Regulations, 1963.
- S.I. 1461 (S.66) of 23.8.63. Food and Drugs. Composition and Labelling— Scotland. The Bread and Flour (Scotland) Regulations, 1963.
- S.H.H.D. Circular 178 of 4.9.63. Food and Drugs (Scotland) Act, 1956.
 Bread and Flour (Scotland) Regulations, 1963.
- S.I. 1591 (S.76) of 18.9.63. Food and Drugs. Composition—Scotland. The Liquid Egg (Pasteurisation) (Scotland) Regulations, 1963.
- S.H.H.D. Circular 200 of 30.9.63. Food and Drugs (Scotland) Act, 1956.
 The Liquid Egg (Pasteurisation) (Scotland) Regulations, 1963.

Health Visiting-

 S.H.H.D. Circular 236 of 13.11.63. Training Allowances for Health Visitor Students.

Housing-

- 1. S.D.D. Circular 1 of 18.1.63. Return of Certificates of Disrepair.
- S.D.D. Circular 24 of 29.5.63. Discretionary payments to occupier displaced by acquisition of land for slum clearance.
- 3. S.D.D. Circular 61 of 31.12.63. Housing of Elderly.

Industrial Hygiene-

 S.H.H.D. Circular 193 of 26.9.63. The Offices, Shops and Railway Premises Act, 1963.

Infectious Disease-

- 1. S.H.H.D. Memo. 30 of 25.2.63. Immunisation Publicity.
- S.H.H.D. Circular 49 of 25.3.63. Poliomyelitis Vaccination.
- 3. S.H.H.D. Circular 112 of 4.6.63. Vaccination against Poliomyelitis.
- 4. S.H.H.D. Circular 130 of 24.6.63. Poliomyelitis Vaccination.
- S.I. 1307 (S.56) of 1.8.63. Public Health (Scotland). The Public Health (Aircraft) (Scotland) Amendment Regulations, 1963.
- S.I. 1308 (S.57) of 1.8.63. Public Health (Scotland). The Public Health (Ships) (Scotland) Amendment Regulations, 1963.
- S.H.H.D. E.C.S.(M) 18 of 27.8.63. International Vaccination Certificates. Issue of Supply to General Practitioners.
- 8. S.H.H.D. Memo. 190 of 24.9.63. Poliomyelitis Vaccination.
- 9. S.H.H.D. Memo. 260 of 30.12.63. Poliomyelitis Vaccination.

Maternal and Child Welfare-

- 1. S.H.H.D. Circular 48 of 21.3.63. Welfare Foods,
- 2. S.H.H.D. Memo. 104 of 4.6.63. Maternity Benefits.
- S.H.H.D. Circular 242 of 27.11.63. National Health Service. Refresher Course for Midwives.

Meat Inspection-

- S.I. 1231 (S.52) of 11.7.63. Food and Drugs. Food Hygiene. Food (Meat Inspection) (Scotland) Amendment Regulations, 1963.
- S.H.H.D. Circular 147 of 22.7.63. Food and Drugs. Food Hygiene. Food (Meat Inspection) (Scotland) Amendment Regulations, 1963.
- S.I. 2001 (S.108) of 5.12.63. Food and Drugs. The Food (Preparation and Distribution of Meat) (Scotland) Regulations, 1963.
- S.H.H.D. Circular 255 of 17.12.63. Food (Preparation and Distribution of Meat) (Scotland) Regulations, 1963.
- FIF/1/GERM. 20.2.63. Public Health (Imported Food) (Scotland) Regulations. Federal Republic of Germany. Official Certificate.
- FIF/1/BECH. 20.3.63. Public Health (Imported Food) (Scotland) Regulations. Bechuanaland. Official Certificate.
- FIF/1/MOR. 2.9.63. Public Health (Imported Food) (Scotland) Regulations. Kingdom of Morocco. Official Certificate.
- 8. FIF/1/BECH. 31.10.63. Public Health (Imported Food) (Scotland) Regulations. Bechuanaland Protectorate. Official Certificate.

Medical Services-

- 1. S.H.H.D. Cicrular 150 of 29.7.63. Remuneration of Medical Practitioners.
- S.H.H.D. Circular 234 of 15.11.63. Report on the Field of Work of the Family Doctor.

Mental Health Service-

- S.H.H.D. Memo. 10 of 21.1.63. Mental Health (Scotland) Act, 1960. List of Approved Medical Practitioners.
- S.H.H.D. Circular 51 of 27.3.63. Mental Health (Scotland) Act, 1960. Notes on Parts VI and IX of the Act.
- 3. S.H.H.D. Memo .76 of 22.4.63. Mental Health (Scotland) Act, 1960.
- S.H.H.D. Memo. 142 of 18.7.63. Mental Health (Scotland) Act, 1960. Amendments to the revised consolidated list of approved medical practitioners.
- S.H.H.D. Circular 219 of 23.10.63. Mental Health (Scotland) Act, 1960. Amendment of Paragraph 9 of Third Schedule.
- 6. S.H.H.D. Memo. 225 of 30.10.63. Mental Health (Scotland) Act, 1960.

Milk-

- S.H.H.D. Circular 131 of 26.6.63. Annual Return of Registrations of Milk Producers and Quarterly Return of Milk Sampling at Heat-Treatment Centres.
- S.I. 1684 (S.82) of 1.10.63. Food and Drugs. Milk and Dairies. The Bulk Transport of Milk (Scotland) Order, 1963.
- S.H.H.D. Circular 220 of 24.10.63. Milk and Dairies (Scotland) Act, 1914. Bulk Transport of Milk.

National Assistance-

- S.I. 564 (S.14) of 20.3.63. National Assistance (Charges for Accommodation) (Scotland) Regulations, 1963.
- S.H.H.D. Circular 54 of 4.4.63. National Assistance (Charges for Accommodation) (Scotland) Regulations, 1963.

Nursing-

S.I. 963 (S.35) of 14.5.63. Civil Defence. Training in Nursing (Scotland) Regulations, 1963.

Poisons-

- 1. S.H.H.D. Circular 3 of 7.1.63. Pharmacy and Poisons Act, 1933.
- S.H.H.D. Circular 168 of 19.8.63. Pharmacy and Poisons Act, 1933. Poisons List Order, 1963, and Poisons Rules, 1963.
- 3. S.H.H.D. Memo. 172 of 23.8.63. Scottish Poisons Information Bureau.
- S.H.H.D. Memo. E.C.S.(M) 17A of 23.8.63. Scottish Poisons Information Bureau.

Public Health-

- S.H.H.D. Circular 28 of 19.2.63. Radiation. Protection Course for Sanitary Inspectors.
- 2. S.D.D. Circular 11 of 27.2.63. Radioactive Substances Act, 1960.
- S.H.H.D. Civil Defence (Scotland) Circular 23 of 25.6.63. Legislation affecting radioactive substances.
- S.H.H.D. Circular 118 of 12.6.63. Refresher Course for Medical Officers in the Public Health Service, 1963.
- S.H.H.D. Circular 158 of 1.8.63. Port Health Control. International Certificates of Vaccination against Smallpox.
- S.H.H.D. Circular 187 of 13.9.63. Radiation. Protection Course for Sanitary Inspectors.

Social Workers-

- 1. S.H.H.D. Circular 9 of 14.1.63. Supply of Trained Social Workers.
- 2. S.H.H.D. Circular 208 of 14.10.63. Social Workers and Social Work Training.

Water Supplies-

S.H.H.D. Circular 97 of 15.5.63. Fluoridation of Water Supplies.

Welfare Foods-

- 1. S.W.F.M. 2 of 14.2.63. Welfare Foods Service Memo. Annual Accounts.
- 2. S.W.F.M. 3 of 28.2.64. Welfare Foods Service Memo. Cod Liver Oil.
- 3. S.W.F.M. 4 of 30.4.63. Method of Payment of Welfare Foods.
- 4. S.W.F.M. 5 of 30.8.63. Cancellation of Milk Tokens, etc.

Welfare Services-

- S.H.H.D. Circular 66 of 11.4.63. Development of Local Authority Health and Welfare Services. Co-operation with Voluntary Bodies.
- 2. S.H.H.D. Circular 135 of 5.7.63. Services for Old People.

APPENDIX.

TABLE I.—GLASGOW, 1963.—ESTIMATED POPULATION IN EACH MUNICIPAL WARD, ACREAGE, AND PERSONS PER ACRE.

		POPU	LATION		1	Person per acr
MUNICIPAL WARDS	Without Institutions and Shipping	Institu- tions	Shipping*	Total	Acreage	(includin Inst'utio and Shipping
1. Shettleston and						
Tollcross	42,286	264	_	42,550	1,167	36
2. Parkhead	16,176	444	_	16,620	819	20
3. Dalmarnock	28,897	13	_	28,910	487	59
4. Calton	17,397	633	_	18,030	404	45
5. Mile-end	27,757	243	-	28,000	443	63
6. Dennistoun	22,810	7	_	22,817	689	33
7. Provan	79,544	2,115	_	81,659	4,846	17
8. Cowlairs	21,056	1,087	_	22,143	645	34
9. Springburn	32,144	1,911	-	34,055	2,118	16
10. Townhead	23,822	1,666	_	25,488	301	85
11. Exchange	8,574	2,810	4	11,388	507	22
12. Anderston	18,101	1,394	412	19,907	530	38
13. Park	17,537	753 228		18,290	317 488	58 34
14. Cowcaddens 15. Woodside	16,242	320		16,470 18,114	170	107
16 Duchill	17,794 43,665	463		44,128	1,962	22
17. North Kelvin	21,427	151		21,578	278	78
18. Maryhill	23,228	63		23,291	2,210	10
19. Kelvinside	19,522	1,905	5	21,432	1,160	18
20. Partick (East)	19,095	899	_	19,994	351	57
21. Partick (West)	19,758	49	61	19,868	464	43
22. Whiteinch	19,822	68	_	19,890	894	22
23. Yoker	25,542	213	14	25,769	1,213	21
24. Knightswood	53,620	108	_	53,728	1,614	33
25. Hutchesontown	17,305	8	_	17,313	387	45
26. Gorbals	20,795	13	_	20,808	252	83
27. Kingston	18,120	_	10	18,130	355	51
28. Kinning Park	20,781	97	466	21,344	402	53
29. Govan	24,228	145	_	24,373	489	50
30. Fairfield	19,044	1,163	266	20,473	1,351	15
31. Craigton	34,426	283	-	34,709	1,566	22
32. Pollokshields	35,282	2,130	-	37,412	3,239	12
33. Camphill	19,080	315	_	19,395	481	40
34. Pollokshaws	48,392	120	_	48,512	3,223	15 64
35. Govanhill	23,187	194	_	23,381 26,108	801	33
36. Langside	25,320	788 269	1	63,070	2,737	23
37. Cathcart	62,801	209		03,070	2,707	20
Сіту	1,004,577	23,332	1,238	1,029,147	39,725	26

TABLE II.—GLASGOW, 1963.—INHABITED AND UNOCCUPIED HOUSES IN EACH MUNICIPAL WARD AS AT WHITSUNDAY, 1963.

IN EACH MUNICI	PAL WARD	AS AI WHI	1000.	1	
Winne	11	NHABITED H	OUSES		Empty Houses
MUNICIPAL WARDS	1963	1962	Decrease	Increase	
1. Shettleston and	10.060	12,953		7	76
Tollcross	12,960 5,587	5,611	24	_	57
2. Parkhead	10,404	10,680	276	_	203
3. Dalmarnock 4. Calton	6,173	6,325	152	-	107
4. Calton 5. Mile-end	9,744	9,902	158	-	175
6. Dennistoun	8,202	8,255	53	-	122
7. Provan	19,769	19,278	_	482	14
8. Cowlairs	7,871	7,887	16	-	97
9. Springburn	9,326	9,350	24		62 181
10. Townhead	8,491	8,505	14	The state of	101
11. Exchange	3,307	3,372	65	-	136 189
12. Anderston	6,240	6,584	344	- Balley	208
13. Park	5,619	5,812	193 255		186
14. Cowcaddens	5,631	5,886 6,650	538		404
15. Woodside	6,112	0,030	000		
16. Ruchill	12,555	12,597	42		73 211
17. North Kelvin	8,176	8,186	10	1000	89
18. Maryhill	7,677	7,782	105	127	197
19. Kelvinside	7,521	7,394 6,931		127	190
20. Partick (East)	6,931	0,931			
21. Partick (West)	7,571	7,785	214	-	126
22. Whiteinch	6,848	6,924	76	100	66
23. Yoker		8,165	10	126	22 13
24. Knightswood		13,708	12		269
25. Hutchesontown	5,955	6,709	754	100	203
26. Gorbals	6,278	6,632	354	-	203
27. Kingston	5,830	6,133	303	-	129
28. Kinning Park		7,505	226	-	124
29. Govan		8,008	234	100	111
30. Fairfield	6,863	6,725	-	138	02
31. Craigton	11,063	10,963	-	100	97
32. Pollokshields	0.970	9,811	-	68	112
33. Camphill	7 747	7,806	59	-	162
34. Pollokshaws		12,721	148		102
35. Govanhill	8,602	8,606	4	_	128
36. Langside	9,132	9,010	_	122	115
37. Cathcart	17 978	17,919	-	59	108
CITY	321,655	325,079	3,424	_	4,946
	and the second second second				THE PARTY NAMED IN

These figures (supplied by the City Assessor) include Farmed-out Houses, houses attached to business premises and inhabitant occupiers.

TABLE III.—GLASGOW.—LININGS GRANTED BY DEAN OF GUILD COURT IN RESPECT OF HOUSES IN YEARS FROM 1919.

Year ending		N	UMBER OF	APARTMENT	s		
31st August	1	2	3	4	5	6	TOTAL
1919-20 (Annual Average)	_	6	692	246	107	29	1,080
1921-25 (do.)	_	308	638	400	234	51	1,631
1926-30 (do.)	_	350	3,067	1,346	448	90	5,301
1931-35 (do.)	13	349	2,287	1,578	131	23	4,381
1936-39 (do.)	_	_	1,581	2,140	533	24	4,279
1940-43 (do.)	_	_	_	_	_	_	_
1944-48 (do.)	25	23	226	792	145	2	1,213
1949-53 (do.)	90	108	2,402	2,230	288	2	5,120
1954-58 (do.)	128	120	3,287	1,102	189	3	4,829
1959	65	5	1,560	139	21		1,790
1960	613	403	2,860	264	43	2	4,185
1961	292	192	1,965	137	26		2,612
1962	1,328	905	2,733	745	35	_	5,746
1963	678	2,412	5,161	861	81	2	9,195

TABLE IV.—ABSTRACT OF METEOROLOGICAL OBSERVATIONS TAKEN AT SPRINGBURN PUBLIC PARK.

		TEMPERATUR	E	RAIN	FALL	
Months 1963	Highest Temp. in Shade	Lowest Temp. in Shade	Mean Temp.	No. of Days	Amount Collected in inches	Sunshing
January	 46	11	30.4	11	0.93	51.7
February	 45	16	30.6	11	0.69	98.9
March	 53	24	41.3	22	4.28	89.6
April	 61	31	45.3	21	2.41	129.6
May	 67	35	48.9	21	3.48	202.1
June	 77	45	56.6	18	4.05	171.7
July	 78	45	56.7	17	2.18	166.4
August	 76	41	55.7	19	4.16	98.8
September	 67	41	53.3	21	3.28	126.2
October	 60	34	49.3	23	4.44	70.9
November	 53	26	41.9	28	6.36	41.2
December	 50	23	37.4	11	1.36	34.0
1952	 79	15	46.3	195	35.32	1,280
1953	 80	20	48.6	206	36.51	1,087
1954	 73	19	46.2	247	56.31	1,030
1955	 85	12	47.2	199	31.67	1,563
1956	 78	12	46.7	221	38-19	1,196
1957	 82	24	48.3	220	42.05	1,264
1958	 82	15	47.2	224	41.51	1,052
1959	 80	18	48.9	196	34.21	1,220
1960	 79	12	47.7	230	41.32	1,260
1961	 76	15	47.4	223	46.26	1,086
1962	 76	18	46-1	208	43.35	1,230
1963	 78	11	45.6	223	37.62	1,281

TABLE V.—GLASGOW.—BIRTHS AND BIRTH-RATES per Million IN EACH WARD, FOR THE YEAR 1963, AND NUMBER AND PERCENTAGE OF ILLEGITIMATE BIRTHS

Municipal Wards. Births 1963 1962 1962 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963 1962 1963									
Tate					Births	Birth-	Birth-	Illegitima	te Births.
1963 1963 1962 No. Birtis.	MUNICIPAL	. WAI	RDS.						e/ Total
1. Shettleston and Tollcross S22 19,440 19,490 51 5-8	1120111011111	, ,,,,,,			1963			No	Births.
2. Parkhead					1000	1000	1502	140.	
3. Dalmarnock	1. Shettleston ar	nd To	llcross		822	19,440	19,490	51	5.8
4. Calton	2. Parkhead				278	17,186	21,077	14	4.8
4. Calton	3. Dalmarnock				1,138	39,381	36,850	80	6.6
5. Mile-end 1,021 36,784 38,844 70 6-4 6. Dennistoun 590 25,866 25,615 28 4-5 7. Provan 1,251 15,727 16,438 90 6-7 8. Cowlairs 660 31,345 31,096 25 3-6 9. Springburn 653 20,315 19,555 37 5-4 10. Townhead 832 34,926 34,331 42 4-8 11. Exchange 243 28,341 28,696 30 11-0 12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37	4. Calton			1000				65	10-2
6. Dennistoun 590 25,866 25,615 28 45 7. Provan 1,251 15,727 16,438 90 67 8. Cowlairs 660 31,345 31,096 25 3-6 9. Springburn 653 20,315 19,555 37 5-4 10. Townhead 832 34,926 34,331 42 4-8 11. Exchange 243 28,341 29,094 41 7-2 12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39				100				THE REAL PROPERTY.	
7. Provan	0. 11110 0110				1,021	00,701	00,011	,,,	
7. Provan	6. Dennistoun				590	25,866	25,615	28	4.5
8. Cowlairs	7. Provan			No. of the last	1.251			1000	
9. Springburn				111111111				1	1000000
10. Townhead 832 34,926 34,331 42 4-8 11. Exchange 243 28,341 28,696 30 11-0 12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 395 20,686 22,008 26 6-2 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,2476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1 32. Pollokshields 514 14,568 10,984 11 3-1 33. Camphill 311 16,300 17,150 9 2-8 34. Pollokshaws 758 15,664 15,180 48 5-9 35. Govanhill 648 27,947 27,258 22 3-3 36. Langside 399 15,758 16,678 12 2-9 37. Cathcart 934 14,872 17,345 44 4-5 Institutions 24				100000		100000000000000000000000000000000000000		30.00	
11. Exchange 243 28,341 28,696 30 11-0 12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476					0.000	CONTROL OF THE CO.			
12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056	10. Townhead				002	34,320	34,331	42	4.0
12. Anderston 527 29,114 29,034 41 7-2 13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056	11. Exchange				243	28.341	28 696	30	11-0
13. Park 415 23,664 24,266 59 12-4 14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hu				1000	The state of the s			10.000	
14. Cowcaddens 571 35,156 38,551 52 8-8 15. Woodside 586 32,932 34,878 48 7-6 16. Ruchill 741 16,970 18,501 60 7-5 17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 33,720 34,198 41 6-3 <td>10 D 1</td> <td></td> <td></td> <td>100000</td> <td></td> <td>The state of the s</td> <td></td> <td></td> <td></td>	10 D 1			100000		The state of the s			
15. Woodside				10000	1000000			1000	STATE OF THE PARTY
16. Ruchill								15395	The second
17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 <td>10. Woodside</td> <td></td> <td></td> <td></td> <td>300</td> <td>32,932</td> <td>34,070</td> <td>40</td> <td>1.0</td>	10. Woodside				300	32,932	34,070	40	1.0
17. North Kelvin 738 34,443 33,879 37 4-8 18. Maryhill 587 25,271 24,537 39 6-2 19. Kelvinside 324 16,597 17,160 18 5-3 20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 <td>16. Ruchill</td> <td></td> <td></td> <td></td> <td>741</td> <td>16 970</td> <td>18 501</td> <td>60</td> <td>7.5</td>	16. Ruchill				741	16 970	18 501	60	7.5
18. Maryhill					2017.0			10000	
19. Kelvinside					100000000000000000000000000000000000000		The state of the s		72.00
20. Partick (East) 395 20,686 22,008 26 6-2 21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1					POST SKOW IT	CONTRACTOR OF THE PARTY OF THE			100000000000000000000000000000000000000
21. Partick (West) 509 25,762 30,060 19 3-6 22. Whiteinch 412 20,785 23,485 15 3-5 23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1 32. Pollokshields		1			170 (270 (270 (270 (270 (270 (270 (270 (2				
22. Whiteinch 412 20,785 23,485 15 3.5 23. Yoker 356 13,938 12,154 28 7.3 24. Knightswood 680 12,682 12,476 59 8.0 25. Hutchesontown 611 35,308 40,056 38 5.8 26. Gorbals 667 32,075 30,724 77 10.3 27. Kingston 611 33,720 34,198 41 6.3 28. Kinning Park 639 30,749 34,563 29 4.3 29. Govan 756 31,204 30,154 46 5.7 30. Fairfield 496 26,045 23,442 19 3.7 31. Craigton 347 10,080 10,984 11 3.1 32. Pollokshields	20. Fartick (East)		•••	395	20,686	22,008	26	6.2
22. Whiteinch 412 20,785 23,485 15 3.5 23. Yoker 356 13,938 12,154 28 7.3 24. Knightswood 680 12,682 12,476 59 8.0 25. Hutchesontown 611 35,308 40,056 38 5.8 26. Gorbals 667 32,075 30,724 77 10.3 27. Kingston 611 33,720 34,198 41 6.3 28. Kinning Park 639 30,749 34,563 29 4.3 29. Govan 756 31,204 30,154 46 5.7 30. Fairfield 496 26,045 23,442 19 3.7 31. Craigton 347 10,080 10,984 11 3.1 32. Pollokshields	21. Partick (West	1			509	25 762	30.060	19	3.6
23. Yoker 356 13,938 12,154 28 7-3 24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1 32. Pollokshields 514 14,568 15,753 33 6-0 33. Camphill 311 16,300 17,150 9 2-8 34. Pollokshaws 758 15,664 15,180 48 5-9 35. Govanhill 648 27,947 27,258 22 3-3 36. Langside 394 14,872 17,345 <t< td=""><td></td><td></td><td></td><td></td><td></td><td>THE RESERVE AND ADDRESS OF THE PARTY OF THE</td><td>The state of the s</td><td></td><td></td></t<>						THE RESERVE AND ADDRESS OF THE PARTY OF THE	The state of the s		
24. Knightswood 680 12,682 12,476 59 8-0 25. Hutchesontown 611 35,308 40,056 38 5-8 26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1 32. Pollokshields 11 3-1 33. Camphill					20,000	100 100 100 100 100 100 100 100 100 100	A SECTION OF THE PERSON OF THE	100000000000000000000000000000000000000	The state of the s
25. Hutchesontown 611 35,308 40,056 38 5·8 26. Gorbals 667 32,075 30,724 77 10·3 27. Kingston 611 33,720 34,198 41 6·3 28. Kinning Park 639 30,749 34,563 29 4·3 29. Govan 756 31,204 30,154 46 5·7 30. Fairfield 496 26,045 23,442 19 3·7 31. Craigton 347 10,080 10,984 11 3·1 32. Pollokshields 14,568 15,753 33 6·0 33. Camphill .					0.0000000				
26. Gorbals 667 32,075 30,724 77 10-3 27. Kingston 611 33,720 34,198 41 6-3 28. Kinning Park 639 30,749 34,563 29 4-3 29. Govan 756 31,204 30,154 46 5-7 30. Fairfield 496 26,045 23,442 19 3-7 31. Craigton 347 10,080 10,984 11 3-1 32. Pollokshields 311 16,300 17,150 9 2-8 34. Pollokshaws <td< td=""><td></td><td></td><td></td><td></td><td>100000000000000000000000000000000000000</td><td></td><td></td><td>1000000</td><td></td></td<>					100000000000000000000000000000000000000			1000000	
27. Kingston 611 33,720 34,198 41 6·3 28. Kinning Park 639 30,749 34,563 29 4·3 29. Govan 756 31,204 30,154 46 5·7 30. Fairfield 496 26,045 23,442 19 3·7 31. Craigton 347 10,080 10,984 11 3·1 32. Pollokshields 514 14,568 15,753 33 6·0 33. Camphill 311 16,300 17,150 9 2·8 34. Pollokshaws 758 15,664 15,180 48 5·9 35. Govanhill 399 15,758 16,778 12 2·9 37. Cathcart 934 14,872 17,345 44 4·5 Institutions	25. Hutchesontow	n	•••	•••	611	35,308	40,056	38	5.8
27. Kingston 611 33,720 34,198 41 6·3 28. Kinning Park 639 30,749 34,563 29 4·3 29. Govan 756 31,204 30,154 46 5·7 30. Fairfield 496 26,045 23,442 19 3·7 31. Craigton 347 10,080 10,984 11 3·1 32. Pollokshields 514 14,568 15,753 33 6·0 33. Camphill 311 16,300 17,150 9 2·8 34. Pollokshaws 758 15,664 15,180 48 5·9 35. Govanhill 399 15,758 16,778 12 2·9 37. Cathcart 934 14,872 17,345 44 4·5 Institutions	26. Gorbals			-	667	32.075	30 724	77	10.3
28. Kinning Park 639 30,749 34,563 29 4·3 29. Govan 756 31,204 30,154 46 5·7 30. Fairfield 496 26,045 23,442 19 3·7 31. Craigton 347 10,080 10,984 11 3·1 32. Pollokshields 514 14,568 15,753 33 6·0 33. Camphill 311 16,300 17,150 9 2·8 34. Pollokshaws 758 15,664 15,180 48 5·9 35. Govanhill 399 15,758 16,778 12 2·9 37. Cathcart						The second secon		7.00	
29. Govan 756 31,204 30,154 46 5.7 30. Fairfield 496 26,045 23,442 19 3.7 31. Craigton 347 10,080 10,984 11 3.1 32. Pollokshields 514 14,568 15,753 33 6.0 33. Camphill 311 16,300 17,150 9 2.8 34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 48 5.9 36. Langside									
30. Fairfield 496 26,045 23,442 19 3.7 31. Craigton 347 10,080 10,984 11 3.1 32. Pollokshields 514 14,568 15,753 33 6.0 33. Camphill 311 16,300 17,150 9 2.8 34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 648 27,947 27,258 22 3.3 36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — Harbour — — — — —	00 0				1990 (80.00)	SENSON CONTRACTOR OF	The second secon		
31. Craigton 347 10,080 10,984 11 3·1 32. Pollokshields 514 14,568 15,753 33 6·0 33. Camphill 311 16,300 17,150 9 2·8 34. Pollokshaws 758 15,664 15,180 48 5·9 35. Govanhill 648 27,947 27,258 22 3·3 36. Langside 934 14,872 17,345 44 4·5 Institutions 24								1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1000000
32. Pollokshields 514 14,568 15,753 33 6.0 33. Camphill 311 16,300 17,150 9 2.8 34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 648 27,947 27,258 22 3.3 36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions	oo. Tairneid	•••	***	•••	496	20,045	23,442	19	3.7
32. Pollokshields 514 14,568 15,753 33 6.0 33. Camphill 311 16,300 17,150 9 2.8 34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 648 27,947 27,258 22 3.3 36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions	31. Craigton				347	10.090	10.094	11	2.1
33. Camphill 311 16,300 17,150 9 2.8 34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 648 27,947 27,258 22 3.3 36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — — Harbour								100000	72.00
34. Pollokshaws 758 15,664 15,180 48 5.9 35. Govanhill 648 27,947 27,258 22 3.3 36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — — Harbour									
35. Govanhill 648 27,947 27,258 22 3-3 36. Langside 399 15,758 16,778 12 2-9 37. Cathcart 934 14,872 17,345 44 4-5 Institutions 24 — — — — — Harbour — — — — —				***				10000	77 (20)
36. Langside 399 15,758 16,778 12 2.9 37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — — — — — — — — — — — — — — —		***	***	***	243232	The same of the sa		100000000000000000000000000000000000000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — — — — — — — — — — — — — — —	33. Govannill	***	•••	***	648	27,947	27,258	22	3.3
37. Cathcart 934 14,872 17,345 44 4.5 Institutions 24 — — — — — — — — — — — — — — — — — —	36. Langside				200	15.750	16 770	10	2.0
Institutions 24 — — 22 — — — — — — — — — — — — — — —	37 Cathoret				10000000				
Harbour — — — — — —			***			14,872	17,345		4.5
			•••		24	_	-	22	-
CITY 22.618 21.977 22.490 1.484 6.6	Harbour	•••	***	***	-	-	-	-	-
WAAA 111 111 111 111 1111 1 / 1 71/1 1 / 1 1111 1 / 1 71/1 1 / 1 1111 1 / 1 1 / 1 1111 1 / 1 1 / 1 1 / 1 1 / 1 1 / 1 1 / 1 1 / 1	CITY				99 618	21 977	22 400	1 494	G.G

TABLE VI.—GLASGOW.—DEATHS AND DEATH-RATES per Million IN EACH MUNICIPAL WARD, FOR THE YEAR 1963, AND CORRESPONDING RATES FOR 1962 AND 1961.

1902 AND 1901.				
MUNICIPAL WARDS	Deaths		Death-rates	
HUNICIPAL WARDS	1963	1963	1962	1961
1. Shettleston and Tollcross	564	13,338	11,786	11,587
2. Parkhead	255	15,764	15,702	14,014
0 D-1	397	13,738	13,049	12,686
1 6 11	265	15,233	13,799	15,794
F 353 - 3	381	13,726	12,399	11,858
5. Mile-end	001	13,720	12,000	11,000
6. Dennistoun	324	14,204	14,895	14,239
7. Provan	656	8,247	7,389	8,627
8. Cowlairs	307	14,580	12,984	16,021
9. Springburn	387	12,040	10,895	10,546
10. Townhead	334	14,021	13,372	13,120
10. 10. 11.				
11. Exchange	150	17,495	18,555	13,687
12. Anderston	270	14,916	13,265	13,569
13. Park	244	13,913	14,314	15,830
14. Cowcaddens	205	12,622	12,908	12,107
15. Woodside	250	14,050	11,297	13,110
16. Ruchill	591	13,535	13,140	13,209
17. North Kelvin	305	14,234	13,052	13,518
18. Maryhill	302	13,002	13,731	11,871
19. Kelvinside	306	15,675	13,884	16,134
20. Partick (East)	287	15,030	14,308	15,595
20. 1 411101 (2400)				
21. Partick (West)	295	14,931	13,157	13,877
22. Whiteinch	313	15,791	13,991	13,883
23. Yoker	371	14,525	14,753	13,573
24. Knightswood	445	8,299	7,678	8,346
25. Hutchesontown	212	12,251	10,515	12,666
20. Hatemesones				
26. Gorbals	288	13,849	12,344	11,447
27. Kingston	227	12,528	12,885	12,678
28. Kinning Park	279	13,426	12,641	13,781
29. Govan	322	13,290	13,031	11,894
30. Fairfield	267	14,020	16,538	13,940
31. Craigton	437	12,694	13,908	13,857
32. Pollokshields	377	10,685	11,031	11,209
33. Camphill	354	18,553	17,150	17,114
34. Pollokshaws	465	9,609	9,788	8,834
35. Govanhill	342	14,750	14,143	12,459
36. Langside	395	15,600	14,931	15,262
37. Cathcart	626	9,968	9,261	8,871
Institutions	918	-	_	_
Harbour	4	_	-	-
			10.001	10.071
CITY	13,717	13,328	12,661	12,671

TABLE VII.—GLASGOW.—DEATHS AND DEATH-RATES per Million FROM DIFFERENT CAUSES, FOR THE YEAR 1963, THE CORRESPONDING RATES FOR 1962 AND 1963.

Tuberculosis of Respiratory System								Deaths	1963	Death	
Tuberculoris of Respiratory System	No.	CA	AUSE						The second second	per 3	dillion
Tubercular Meningitis								General	M.O.H.	1963	196
Tubercular Meningitis	1	Tuberculosis of Respiratory System						207	214	208	18
20 Other Tuberculous Diseases	2							_		1000000	
3 Syphilis and its Sequelae 11 16 16 4 4 17 17 17 16 16 4 4 17 17 17 17 17 17	51	Abdominal Tuberculosis	+++		***		***	-	-	-	
Typhoid Fever	52			***	***		***	4	4	4	1
Dysentery, all forms	3				***			11	16	16	1
Scarlet Fever and Streptococcal Sore Throat			***	***	***	***	***	-	-	-	
Diphtheria					***	***	***	-	-	-	-
Whooping Cough			e Thro	oat	***	***	***	-	-	-	1
Meningococcal Infections					***		***				-
Acute Poliomyelitis	17					***					-
Malaria									10000		
16 Malaria		161									
Other Infective and Parasitic Diseases		M-1						12 3			
Malignant Neoplasms, including Neoplasms of Lymphatic and Haematopoietic Tissues 2,503 2,435 2,366 2,3		200000000000000000000000000000000000000						22			
Haematopoietic Tissues 2,503 2,435 2,366 2,3								1	24	20	1 3
Benign and Unspecified Neoplasms			127					2.503	2 435	2 386	22
Diabetes Mellitus	19									1	2,0
Anaemias	20	D: 1 . 16 W.						7572			1
Vascular Lesions affecting Central Nervous System	21	A CONTRACTOR OF THE PARTY OF TH						1		1000	
Non-meningococcal Meningitis 14	22	Vascular Lesions affecting Central N	ervous							1000	
Other Nervous Diseases 250 264 256 22 24 256 22 24 256 24 256 256 25 256 264 256 264 256 265	23							1			-
Rheumatic Fever	4	Other Nervous Diseases								100000000000000000000000000000000000000	2
Arteriosclerotic and Degenerative Heart Disease 3,635 3,601 3,499 3,3	24	Rheumatic Fever								120000	
Arteriosclerotic and Degenerative Heart Disease 3,635 3,601 3,499 3,3 Other Diseases of Heart 5.20 181 175 170 182 Hypertension with Heart Disease 181 175 170 182 Hypertension without mention of Heart 187 188 183 183 183 183 183 183 183 183 183	25	Chronic Rheumatic Heart Disease						201	191	186	17
Other Diseases of Heart	26	Arteriosclerotic and Degenerative He	eart D	isease	***	***	***	3,635	3,601	3,499	
Hypertension without mention of Heart	27	Other Diseases of Heart	***		***	***	***	164	188	183	1
55 Other Diseases of Circulatory System					***			181	175	170	1
Influenza					***		***	117	102	99	1
Pneumonia (except Pneumonia of Newborn) 728 738 717 5 5 5 5 5 5 5 5 5			n	***	***	***	***	387	381	370	3
Bronchitis						***	***	52	95	92	- 4
Other Respiratory Diseases			ewborn	n)	***		***		738	717	5
Ulcer of Stomach and Duodenum 102 89 86 834 Appendicitis	5.5		***	***	****	***	***	946	900	874	74
Appendicitis				***	***	***	***	99	126	122	1
Intestinal Obstruction and Hernia			***	***	***	***	***	102	89	86	5
Gastritis and Duodenitis 2 2 2 2 2 2 2 2 2			***	***	***	***	***	10	8	8	1
Enteritis and Colitis— Under 2 years (excluding Diarrhoea of Newborn) 2 years and over 65 33 32 31 32 31 32 33 33 32 33	5		***	***	***	***	344				1
Under 2 years (excluding Diarrhoea of Newborn) 2 years and over 33 32 31 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 33 32 33 32 33 32 33 32 33 32 33 32 33 32 33 33 32 33 33 33 34 34	fl		***	***	***	***	***	2	2	2	
2 years and over	16										
Cirrhosis of Liver		0		Newbo	rn)	***	***	65		7.5	3
Nephritis and Nephrosis Nephro	7	Circhagia of Times									4
Nephritis and Nephrosis	00 1	Other Disseller Dissers									-
Hyperplasia of Prostate											
Complications of Pregnancy, Childbirth and the Puerperium											3
Congenital Malformations						ine			100000000000000000000000000000000000000		4
Birth Injuries, Post-natal Asphyxia and Atelectasis 213 199 193 23 23 25 31 30 30 30 30 30 30 30		Commented Made							700		
Infections of the Newborn—Pneumonia 25 31 30 100. do. Diarrhoea 2 2 2 2 2 2 2 2 2				telecta	sis				557		
Do. do. Diarrhoea		Infections of the Newborn-Pneumon	nia								
Do. do. Others										The state of the s	,
Other Diseases peculiar to early infancy and Immaturity Unqualified Sensility without mention of Psychosis, Ill-defined and Unknown Causes											
Sensitive without mention of Psychosis, Ill-defined and Unknown Causes 102 128 124 11 125 126 127 128 124 118 129	4					Inqual	ified				11
Causes	5	Senility without mention of Psychos	sis, III	-define	d and	Unkn	own	00	107	104	11
6 All Other Diseases		Causes					N 100 100	102	128	124	11
Suicide, Road Traffic Accidents and Other Violent Causes 685 667 648 63			***	***	***						21
Total 12 712 12 717 12 72 72 72 72 72 72 72 72 72 72 72 72 72	50	Suicide, Road Traffic Accidents and				ses		The state of the s		The second second	63
		Total			***			13,718	13,717	13,328	12,66

^{*} See Note on page 59.

TABLE VIIIA.—GLASGOW, 1963.—DEATHS FROM DIFFERENT CAUSES IN SEXES AND AT SEVERAL AGE PERIODS (MALES).

										-		-/-			
No.	CAUSE	-1	-2	-5	-10	-15	-20	-25	-35	-45	-55	-65	-75	75+	To
1	Tuberculosis of Respiratory System									14	27	47	46	26	10
2	Tubercular Meningitis	_	_	-	-	-	-	_	-		_	-	-		
51	Abdominal Tuberculosis	-	-	-	-	-	-		-	-	-	-	-	-	-
52	Other Tuberculous Diseases	_	_		-	_	1	_	=		1	3	3	1	
3 4	Syphilis and its Sequelae Typhoid Fever				_						-	-	_		
6	Dysentery, all forms	-	_	-	_	_		_	-	_	-	_	_	-	
7	Scarlet Fever and Strepto-				THE SECOND										
	coccal Sore Throat	-	-	-	-	-	-	-	-	-	-	-	=	-	-
8 9	Diphtheria Whooping Cough	=		_	_	_		_	_	_	_	=		_	
10	Meningococcal Infections	2	2			_			-		_	1	_	_	
12	Acute Poliomyelitis	_	_	-	-	-	-	-	-	-	-	-	-	-	
14	Measles	-	-	2	-		-	-	-	-	-	-	-	-	
16	Malaria Other Infective and Para-	-	-		-			-	-	-	-	1	-	-	
11/	sitic Diseases	2	_		1	_	_	1	1		3	2	1	2	3
18	Malignant Neoplasms, in-	7			100				12		100	0.5.19	100	1000	
	cluding Neoplasms of														
	Lymphatic and Haemato-			6	3	2	7	1	19	49	188	470	417	277	1,4
19	poietic Tissues Benign and Unspecified	1	-	0	3	-	1	-	10	10	100	470	447	2.1	.,,
10	Neoplasms	1	-	-	-	-	-	-)	3	4	13	12	6	
20	Diabetes Mellitus	-	-	-	-	1	-	-	-	3	3	7	11	8	-
21 22	Anaemias Vascular Lesions affecting	1	-	-	1	-		-	1	-	-	3	5	5	100
22	Central Nervous System	-	_	1	_	1	1	1	4	11	42	143	221	394	8
23	Non-meningococcal Menin-		4	3	1		1	-						1	
	gitis	4	-	1	1	-		-	-	-	-	1	-	_	
24	Rheumatic Fever	-	-	-	-	-		-	-	-	-	-		-	
25	Chronic Rheumatic Heart Disease	_			_	_	_	1	4	7	18	20	4	5	9
26	Arteriosclerotic and Degen-								1000						
1000	erative Heart Disease	-	-	-	-	-	-	-	10	59	223	554	567	589	2,0
27	Other Diseases of Heart	-	2		-	-	-	-	2	2	6	13	26	40	1000
28	Hypertension with Heart Disease	_	-		_		_	_	-	_	7	13	22	20)
29	Hypertension without men-														
	tion of Heart	-	-	-	-	-	-	-	1	3	3	10	12	9	3
30	Influenza	-	-	1	-		-	-	1	-	4	13	11	13	1
31	Pneumonia (except Pneu- monia of Newborn)	57	10		1		-	1	3	6	11	47	76	148	3
32	Bronchitis	1	2		1		-	1	-	9	48	215	213	148	6
53	Other Respiratory Diseases	21	-	2	-	-	-	-	2	3	4	23	17	9	1
33	Ulcer of Stomach and Duo-				-		_	_	_	2	12	14	27	9	
34	Appendicitis	1	_	=	1		1		_	ī	-	-		_	
35	Intestinal Obstruction and												0	10	
1000	Hernia	2	1	-	1	-	-	-	2	-	2	8	8	13	1
	Gastritis and Duodenitis	-		-	-	-	-	-	-	-	1	1			
36	Enteritis and Colitis— Under 2 years (excluding														
00	Diarrhoea of Newborn)	12	2		-	-	-	-	-	-	-	-	-	-	
	2 years and over	-	-		-	1	-	-	-	2	5	16	11	4 2	3
37	Cirrhosis of Liver	1	=	_	1	1		2	2	3	7	9	10	4	
38	Nephritis and Nephrosis Hyperplasia of Prostate	1=			1	-		-	-	_	-	_	8	29	1
40	Complications of Pregnancy,				1					100					
1000	Childbirth and the Puer-								1		_	1200	_	-	
1	perium	65	5	2	2	1	1	1	=	2	2	1	1	_	1
41	Congenital Malformations Birth Injuries, Post-natal	0.5	3	1 4	-			1					100		
7.2	Asphyxia and Atelectasis	122	-	-	-	-		-	-	-		-	-	-	1
43	Infections of the Newborn-	1								_	-				
	Pneumonia	19	_		=	_	_	=		_		_	_	_	
	Diarrhoea Others	2			-		-	-	-	-		-	-	-	
44	Other Diseases peculiar to						1								
1000	early infancy and Imma-	00		344			-	_			-		_	-	
10	turity Unqualified Senility without mention of	60	-	-	-	-									
45	Psychosis, Ill-defined and									1	-	14	10		
1000	Unknown Causes	4	-		-	-	1	-	1	1 2	7 7	16	18 18	15 15	
46	All other Diseases	2			-	1	2	2	1	2	1	0	10	10	
47/	Suicide, Road Traffic Acci- dents and other Violent					-				-		-	100	1	100
50	Causes	19	7	14	27	6	15	23	38	55	66	71	43	37	4
54	Other Nervous Diseases	10	3	3	2	-	1	-	2	3	9	22	28	23	1
55	Other Diseases of Circulatory			- 22	_	-	_	_		_	6	16	34	- 119	1
56	System Other Digestive Diseases	5	_	_	_	_		_	_	1	4	8	14	14	
-00		-	-	-	-	-	-	-	0.5	041	700	1,788	1,885	1,984	7,3
	Total	414	34	32	42	14	30	34	95	241	720	1,700	1,000	1,004	10
1		*	1			*		-	-	-			-	-	-

TABLE VIIIB.—GLASGOW, 1963.—DEATHS FROM DIFFERENT CAUSES IN SEXES AND AT SEVERAL AGE PERIODS (FEMALES).

1					-								-			
		133													- 16	Total Both Sexe
	CAUSE												327		Total Females.	ota
		-1	-2	-5	-10	-15	-20	-25	-35	-45	-55	-65	-75	75+	Fer	F to
No.										_	_				-	
1	Tuberculosis of Respiratory System	1	_					1	7	14	9	12	5	5	.54	214
2	Tubercular Meningitis	-	_	_	_	_	-	-			-	-	-	-	-	
51 52	Abdominal Tuberculosis Other Tuberculous Diseases	_	=	=	=	_	=	=	=	_	2	1	_	=	3	4
3	Syphilis and its Sequelae	_	_	_	_	_	_		-	_	1	2	3	2	8	16
4 6	Typhoid Fever Dysentery, all forms	=	_	=		=	-	-	-	=	=	=	=		_	
7	Scarlet Fever and Strepto-															
8	coccal Sore Throat Diphtheria	=	_	=	_	_	=		=	=	_	_	_	_		_
9	Whooping Cough	1	1	-	-	-	-	_			_	_	_	_	2	2
10	Meningococcal Infections Acute Poliomyelitis		=		=	=	_			-		_		=	_	5
14	Measles	-	1	-	-	-	_	-	_	_		_	_		1	3
16	Malaria Other Infective and Para-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
	sitic Diseases	-	-	1	-	-	-	-	1	2	2	3	2	-	11	24
18	Malignant Neoplasms, in- cluding Neoplasms of			1												
	Lymphatic and Haemato-									-		-	-			0.10-
19	Benign and Unspecified	1	1	2	1	3	5	2	15	52	130	224	289	270	995	2,435
1000	Neoplasms	-	-	1	2	-	-	-	1	2	4	8	8	8	34	74
20 21	Diabetes Mellitus	1	-	1	_		=	=	1	=	2	13	43	19	79 38	112
22	Vascular Lesions affecting										-				1000	
23	Central Nervous System Non-meningococcal Menin-	-	-	-	1	-	1	-	5	15	47	142	333	592	1,136	1,955
24	gitis Rheumatic Fever	4	=	-	-	-	-	-	-	-	1	1	1	-	7	14
25	Chronic Rheumatic Heart						-	-	-	-	-		-	-	-	
26	Disease Arteriosclerotic and Degen-	-	-	-	-	-	-	2	3	11	27	37	37	15	132	191
	erative Heart Disease		-	-		-	-	1	1	18	75	227	485	792	1,599	3,601
27 28	Other Diseases of Heart Hypertension with Heart	-	-	-	-	-	-	2	-	2	4	12	23	54	97	188
	Disease	-	-	-	-	-	-	-	-	1	6	10	41	55	113	175
29	Hypertension without men- tion of Heart	-	_	_			-	_	2	1	6	7	27	21	64	102
30	Influenza	-	-	-	-	-	-	-	-	4	3	5	10	30	52	95
31	Pneumonia (except Pneu- monia of Newborn)	34	2	2	2	1	_	1	1	4	14	37	78	202	378	738
32	Bronchitis	6	-	1	-	-	1	-	2	5	26	46	67	108	262	900
53	Other Respiratory Diseases Ulcer of Stomach and Duo-	8	-	1	-	-		-	1	2	3	6	10	14	45	126
24	denum	-	-	-	-	-	-	-	-	-	2	5	11	7	25	89
34 35	Appendicitis Intestinal Obstruction and	2	-	-	-	-	-	-	-	-	-	1	-	1	4	8
	Hernia	1	-	-	-	-	-	-	-	-	-	8	12	11	32	69
100	Gastritis and Duodenitis Enteritis and Colitis—	1	-	-	-	-	-	-	-	-	-	-	-	-	1	2
36	Under 2 years (excluding					-	100								-	-
18875	Diarrhoea of Newborn) 2 years and over	18	=	1	=	=	-	1	=	1	4	4	4	10	18 25	32
37 38	Cirrhosis of Liver	-	-	-	-	-	-	-	-	1	5	10	13	2	31	68
39	Nephritis and Nephrosis Hyperplasia of Prostate	-	1	2	_	-	2	1	4	3	5	9	10	5	42	81
40	Complications of Pregnancy,														1	
1	Childbirth and the Puer- perium	-	-	-	-	-	-	2	7	3	-	-	-	-	12	12
41	Congenital Malformations Birth Injuries, Post-natal	64	-	3	2	1	2	-	-	1	1	-	-	-	74	
	Asphyxia and Atelectasis	77	-	-	-	-	-	-	-	-	-	_	-	-	77	199
43	Infections of the Newborn— Pneumonia	12	-	_	_	-	_	_	_	-				-	12	31
	Diarrhoea	2	-	-	-	-	-	-	-	-	_		1	-	2	2
44	Other Diseases peculiar to	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
V.	early infancy and Imma-							1						1		
45	Senility without mention of	47	!-	1-	-	-	-	-	-	-	-	-	-	-	47	107
	Psychosis, Ill-defined and									1			1	1	1	
46	All other Diseases	3	=	1=	1	-	1	5	3	7	16	7 38	13	35 49	65 165	128
47/	Suicide, Road Traffic Acci-				1					1		1	1	1	1	1
	Causes	16	4	7	1	3	2	5	19	22	22	32	41	72	246	667
54 55	Other Nervous Diseases Other Diseases of Circulatory	1	1	2	1	2	-	2	4	7	12	18	35	73	158	264
	System	-	-	-	-	-	-	1	1	3	3	10	36	152	206	381
56	Other Digestive Diseases	4	-	-	-	-	-	-	1	1	5	10	18	13	52	98
	70 1								1							

TABLE IX.—GLASGOW.—STILLBIRTHS, DEATHS UNDER 1 YEAR AND DEATH-RATES PER 1,000 BIRTHS IN EACH MUNICIPAL WARD, FOR THE YEARS 1963 AND 1962

Municipal Wards	Still- births 1963	Rate per 1,000 Births* 1963	Rate per 1,000 Births* 1962	Deaths -1 year 1963	Death Rate per 1,000 Births† 1963	Death Rate per 1,000 Births† 1962
1. Shettleston and Tollcross 2. Parkhead 3. Dalmarnock 4. Calton 5. Mile-end	24	28	28	36	44	44
	9	31	14	8	29	37
	18	16	19	38	33	38
	16	27	21	21	37	46
	22	21	25	37	36	35
6. Dennistoun 7. Provan 8. Cowlairs 9. Springburn 10. Townhead	9	15	20	20	34	31
	34	26	24	46	37	28
	11	16	22	18	27	32
	14	21	17	29	44	22
	16	19	23	22	26	35
11. Exchange 12. Anderston 13. Park 14. Cowcaddens 15. Woodside	7	28	4	6	25	44
	16	29	18	16	30	37
	3	7	23	12	29	46
	11	38	26	18	32	26
	17	28	29	19	32	37
16. Ruchill 17. North Kelvin 18. Maryhill 19. Kelvinside 20. Partick (East)	20	26	25	26	35	48
	16	21	27	13	18	25
	9	15	32	17	29	29
	5	15	21	6	19	18
	8	20	12	11	28	40
21. Partick (West) 22. Whiteinch 23. Yoker 24. Knightswood 25. Hutchesontown	6	12	11	15	29	30
	5	12	19	5	12	28
	6	17	15	14	39	38
	13	19	32	28	41	28
	12	19	26	12	20	22
26. Gorbals 27. Kingston 28. Kinning Park 29. Govan 30. Fairfield	20	29	29	35	52	46
	9	14	27	14	23	35
	23	35	23	25	39	32
	15	19	26	32	42	37
	9	18	23	15	30	29
31. Craigton 32. Pollokshields 33. Camphill 34. Pollokshaws 35. Govanhill	12	33	20	7	20	28
	3	6	16	13	25	27
	5	16	21	9	29	24
	19	24	21	27	36	27
	11	17	17	14	22	22
36. Langside 37. Cathcart Institutions	8 31	20 32	14 21	10 27	25 29	33 24 —
Harbour	_		_	_	_	
CITY	492	21	22	722	32	32

1	Total -1	year	Sexes.	129	76 123 31 2	13	72	127	30 17 16	-11	1	11	-1	101		28	23	722
			Total.	64	29 48 112 2	7	33.3	484	18 8 5	-11	1	11	-	11	113	500	0	308
S.			-12	1	1111	1	11	14	1	111	1	11	11	11	11	-	01	10
CAUSES	LES.	Months.	6-	61	1111	1	11	9	481	-11		11	11	11	11	-	OI.	20
SEVERAL	FEMALES	Age in l	9-	10	1111	1	11	22	00 C1	111		11	-	11	11	-	62	52
		A	-3	12		1	11	15	0 0	111		11	11	11	11	- 21	-	44
D FROM			-1	39	28 112 2	7	33	1	121	11	11	11	11		11	1-	63	182
AGES AND			Total.	65	47 75 19	9	39	9 79	12 9 11	11	11	11	11	63	11	15	14	414
			-12	67	1111	1	11	2	-	11	11	11	11	01	11	61-	1	10
AT GIVEN	ES.	Months.	6-	10	1111	1	11	10	6	11	11	11	1	111	11	-1	-	20
200	MALES	Age in N	9-	6	-111	1	11	34	988	11	11	11	1	111	11	7	22	89
IT DE		A	-3	11	1111	1	161	33	000	11	11	1	1	111	11	4-	03	63
-INFANT DEATHS			-1	38	46 75 19	9	37	6	100	11	11	1	11	111	11	- 63	100	253
1963-			-	:	::::	Ery-	自::	::	:::	::	::	:	: :	:::	: :		:	
				:	::::	Haemolytic Disease of Newborn (Ery-throblastosis)	Congenital Debility, Sclerema and Ill-defined Causes	: ша	:::	::	::	:	: :	:::	: :		:	-
GLASGOW,				:	. : : 8 -	New	cleren	(h) Others Diseases of the Respiratory System	1 :: -	Sis	Sis		: :	:::	: :		:	
		CAUSE OF DEATH.			es of Early Infancy— Injury at Birth Atelectasis Pneumonia of Newborn	se of	ty, S	tory	Diseases of Digestive System— (a) Diarrhoea (b) Others Diseases of Nervous System	culous Diseases— Pulmonary Tuberculosis Tuberculous Meningitis	Abdominal Tuberculosis Other Forms		box	Fever				Total
X	,	OF D		nation	Infarrth rth of Ne	Disea.	ses Sirth	spira	ive S	rube Men	Inber	Measles	Whooping Cough		: :			To
TE		JSE		Horn	es of Early Infi Injury at Birth Atelectasis Pneumonia of N	Haemolytic D throblastosis)	Congenital Debili defined Causes Premature Birth	Re	ea 	Disea ary ilous	(c) Abdominal T (d) Other Forms Infections Diseases.		ng C	Diphtheria Erysipelas Cerebro-spinal	Dysentery Poliomvelitis	Accidental Asphyxia Other Violence	ses	3
TABLE	,	CAT		1 Ma	es of Early Injury at Atelectasis Pneumonia	opla.	ined	Others ses of th	biarrhoea Diarrhoea Others	lmon bercu	domi	asles	ioopi	Erysipelas Cerebro-spi	Dysentery Poliomveli	ontal Asp	can	
				enita	Inju Ate Pne Dis	Had		Oth	Dia Oth	Pul Tul	Ab Oth	Me				dent		44
				Congenital Malformations	II. Diseases of Early Infancy (a) Injury at Birth (b) Atelectasis (c) Pneumonia of Newbood	(e)	5 3	(h) Disea			Tree (c)	(a)	000	g e g	88	_		
				I.	H.			III.	. Y.	Y.	TIA					VIII.	×	

TABLE XI.—Glasgow, 1961-1963—Abstract of Notifications under Notification of Births Act, 1907.

	1963	1962	1961
Total Number of Notifications	 23,363	24,069	23,551
Doctor at Home	 5,704	6,708	6,887
Doctor in Nursing Home	 318	448	509
Doctor in Institution	 16,614	15,987	14,992
Maternity Hospital (Outdoor) Nurse	 		169
Midwife in Nursing Home	 522	651	701
Certified Midwife	 1	_	
Municipal Midwife	 203	272	286
Others	 1	3	7

TABLE XII.—GLASGOW, 1961-1963—BIRTHS NOTIFIED SHOWING MEDICALLY AND NOT MEDICALLY ATTENDED.

	1963	1962	1961
Notifications Received—less Duplicates— Total Live-births Still-births Per cent. Still-births to Total	23,363	24,069	23,551
	22,899	23,531	23,006
	464	538	545
	2·0	2·3	2·3
Medically attended— Births at Home Births in Nursing Home In Institutions Total Per cent Still-births at Home Still-births in Nursing Home Still-births in Institutions	5,704	6,708	6,887
	318	448	509
	16,614	15,987	14,992
	22,636	23,143	22,388
	97	96	95
	43	71	77
	6	6	9
	411	454	448
Not Medically attended— Maternity Hospital, Outdoor Nurse Certified Midwives in Nursing Home Certified Midwives in Private Practice Municipal Midwives Others Total Per cent Still-births	-		169
	522	651	701
	1		—
	203	272	286
	1	3	7
	727	926	1,163
	3	4	5
	4	7	11

TABLE XIII.—GLASGOW, 1963 and 1962.—Cases of Infectious Disease Registered and Numbers of these Treated in Fever Hospitals, &c.

		19	63			19	62	
	Fever Hosp.	Other Insti- tutions	Home	Total	Fever Hosp.	Other Insti- tutions	Home	Total
A. Notifiable—								
Anthrax	-	_	-			-	-	-
Cerebrospinal Fever	43	3	4	50	51 23	8	1	59
Continued Fever Diphtheria	20	-	1	21	20	4	1	28
Diphtheria Dysentery	1,581	34	1,060	2,675	1,641	137	1,532	3,310
Encephalitis Lethargica								
Erysipelas	27	1	23	51	29	3	21	53
Food Poisoning	44	51	179	274	54	1	294	349
Infective Jaundice*	-	-	-		2	-	-	2
Leprosy Malaria	1 3	-	-	1 3	3	_	1	4
Ophthalmia Neonatorum	23	1	13	37	17		7	24
Pneumonia—	20	1	10	01	17		-	24
Acute Influenzal	5	8	20	33	_	3	13	16
Acute Primary	2,563	752	393	3,708	2,533	559	367	3,459
Polio-Encephalitis, Acute	-	_	-	-	-	-	-	-
Poliomyelitis—				DI TOTAL	07			
Paralytic Non-paralytic					37 7	4	_	41 8
Daniel Person	211	4	1	216	156	2	1	159
Puerperal Pyrexia†	58	15	1	74	93	31	2	126
Scarlet Fever	91	1	183	274	117	1	160	278
Smallpox	_	-	_	-	_	-	7	-
Trachoma	-	1	4	5	-	-	3	3
Tuberculosis—	500		0.11	000	540		201	007
Pulmonary Other forms	522 49	_	341 67	863 116	546 43	-	381 74	927 117
Typhoid Fever (and	40		01	110	40	-	14	117
Paratyphoid B)	17		_	17	6	1	3	10
Whooping Cough	401	2	2,292	2,695	38	_	234	272
				THE PARTY	1 1011	HOTE OF	The same of	1
B. Not Notifiable—	100		0.007	0.110	105		0.000	0.000
Chickenpox Gastro-enteritis	108	81	2,037	2,149	195	1 00	3,362	3,558
Cormon Massles	324 14	01	45 74	450 88	306 43	62	41 28	409 67
Measles	309	8	1,979	2,296	375	1	1,690	2,066
Others	‡71	4	88	163	15	3	57	75
								200
N. 420 1 1 1	6,485	969	8,805	16,259	6,330	823	8,267	15,420
Notified but diagnosis					-			1
altered to Non Infectious Disease	3,182			3,182	3,017			3,017
ious Disease	0,102			0,102	0,017			3,017
	9,667	969	8,805	19,441	9,347	823	8,267	18,437
								-

Where patients suffer from two or more diseases, each disease is reckoned as a case. Apart from cases of pneumonia admitted to General Hospitals and other Institution in times of pressure; cases of puerperal fever, puerperal pyrexia, and ophthalmia neonatorul occurring in other than Fever Hospitals and allowed to remain; and cases of trachon treated in Stobhill Hospital; the cases shown under the headings "Other Institutions" are fithe most part, accide ntal.

^{*} Weil's Disease.

[†] Includes cases treated in Robroyston Hospital.

[†] Includes 2 Paratyphoid B. Carriers.

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	YEAR	Home	-	1 1	1	183	I	23	13	4	1	1	393	20	1	1,060	341	67	1,979	0000	2,232	179	45	95	1	8,717	88
	XI	Hosp.	17	215	73	91	1	28	24	-	1	1	3 3 15	13	3	1,615	522	49	317	400	112	95	402	16,095	7,378	1	3,182
1903.		Dec.	10	26	4	26	1	010	110	1	1	1	330	2	1	218	61	00 :	41	101	188	12	59	1,162	558	604	Add Others*
Z		Nov.	1-	16	9	30	1	יט יכ	4	1	1	1	311	1	1	295	58	6	20	9000	142	19	33	1,378	594	784	Add Others*
MONTH		Oct.	-	16	00	37	1	1	30	3	1	1	278	2	1	305	78	0.5	45	0 000	154	20	50	1,453	647	806	Alte
LACH		Sept.	- u	21	3	17	1	00 0	7	1	1	1	144	1	1	287	44	11	36	270	999	41	35	1,307	513	794	
Z		Aug.		21	15	1	1	C1 CC	ক	-	1	1	130	1	1	225	93	17	0	000	111	32	41	832	530	302	
NEGISTERED	Month	July	010	12	3	29	1		3	1	1	1	132	1	1	184	09	00 0	90	7 12 7	6	18	65	889	460	228	10
IVEGI	Mo	June	2	21	5	22	1	00	1	-	1	1	171	2	1	243	71	10	99	000	138	57	37	1,061	511	550	
DISEASE		May	10	181	7	30	1	4 -	57	1	1	1	199	1	1	246	95	00 ;	1/1	000	202	27	37	1,362	537	825	
		April	4-	17	6	18	1	01 (5	1	1	1	1	263	1	1	167	72	12	282	105	294	9	26	1,311	513	798	
VEEC 110		Mar.	100	18	10	27	1	0.00	00.00	1	1	1	549	13	1	154	68	00 ;	4/4	70	341	14	17	1,817	771	1,046	
IABLE ALV CASES OF INFECTIOUS		Feb.	67	15	00	15	1	101	. 01	1	1	1	645	11	1	151	75	000	489	70	247	20	30	1,813	897	916	3
CASES		Jan.	10	15	-	16	1	2 9	00	1	1	1	556	3	1	200	67	10	879	200	265	00	20	1,911	847	1,064	
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			Enteric, including Paratyphoid Fever	Continued and Undenned Fever Puerperal Fever	Puerperal Pyrexia	Smallpox Scarlet Fever	Diphtheria and Membranous	Erysipelas	Ophthalmia Neonatorum	Trachoma	argica	Acute Poliomvelitis (Paralytic)	Acute Poliomyelitis (Non-paralytic)	Acute Influenzal Pneumonia	Malaria	Dysentery	Pulmonary Tuberculosis	Other Forms of Tuberculosis	Measles	German Measles	Chickennox	Food Poisoning	Gastro Enteritis	Total	Hospital	Home	

Mumps, 97; Infective Hepatitis, 64. Leprosy, 1; Paratyphoid Carriers, 2.

8,805

10,636

TABLE XV.

OPERATIONS OF SANITARY SECTION, 1963.

	Central	North- ern			South- Western		ity 1962
1. General							
Nuisances and defects removed or remedied	9,815	13,593	11,316	3,896	9,253	47,873	41,494
with insufficient light or venti- lation, or otherwise defective in construction Defective Chimneys causing nuis-	_	_	_	_	_	_	-
ance	37	77	18	38	70	240	267
Disrepair or dampness in Dwelling- houses Offensive smells from Drains, or	886	1,384	1,016	424	1,006	4,716	5,851
other reasonable grounds— smoke test	1	_	_	-	5	6	-
Drains, Conductors, Soil-pipes, or Rones choked or defective Sanitary Fittings choked or	4,627	7,557	6,638	2,667	5,238	26,727	23,595
defective Dirty Houses and Bedding	392 6	941 18	692 321	299	537 4	2,861 349	2,052 308
Dirty Closes, Stairs, etc. (daily and bi-weekly cleaning) Common passages, stairs or stair-	200	339	60	4	92	695	582
cases not in a cleanly state (limewashing or painting) Animals or Poultry kept so as to	1,010	573	457	37	428	2,505	1,742
be a nuisance Accumulation of Garbage or	1	7	-	-	-	8	13
Rubbish Noise Nuisances—Number dealt	357	211	91	60	39	758	570
with Samples of Water etc., for analysis Other Irregularities Reports to Master of Works Superintendent of	100 424 1,141	696 819 838	58 536 699	64 87 115	48 1,078 569	966 2,944 3,362	18 1,197 2,140 2,491
Cleansing Water Engineer Prosecutions—Sheriff Court	94 639 15	25 804 36	14 774 10	161 7	3 184 18	140 2,562 86	17 1,865 60
Number Successful	15	23 41	1 11	6	5 18	29 91	21 79
2. Drain Testing.							
Number of Applications (Dean							
of Guild) Number of Tests to old tenement	773	158	620	727	458	2,736	2,128
drains Number of Consultations re	-	4	16	1	-	21	59
drainage scheme	1,130	191	65	192	1,875	3,453	2,685

OPERATIONS OF SANITARY SECTION-Continued.

	Central	North- ern	Eastern		South- Western		1962
3. Common Lodging Houses. Number measured and registered Total number now on register With accommodation for Number of irregularities Number of prosecutions	2 5 1,073 5	- 1 280 3 -	- 2 467 3 -		1 121 —	2 9 1,941 11	- 8 2,087 61
4. Boarding Houses for Emigrants and Seamen. Number measured and registered Total number now on register With accommodation for Number of irregularities Number of prosecutions	-1 80 -					 1 80 	- 1 80 -
5. Farmed-out Houses and Houses Let-in-Lodgings. Number measured and registered Total number now on register Number of irregularities Number of prosecutions						<u>10</u>	58
6. Caravan Sites. Number of Sites licensed during the year Number on Register Number of Vans accommodated Number of irregularities found Number of prosecutions		1 7 110 5 —	1 6 125 1			2 15 242 6 —	2 13 240 16
7. Rodent Control. Number of Premises infested Number of Premises Proofed	633 51	719 108	556 52	413 29	215 252	2,536 492	2,498 292

OPERATIONS OF SANITARY SECTION—Continued.

THE RESERVE AND ADDRESS OF THE PARTY OF THE	Central	North- ern	Eastern		South- Western		
8. Mech. Bakehouses.				-	Salara .	-	M-199
	_	_	_	_	_	-	4
Number measured and registered Total number now on register	32	37	36	45	22	172	201
Number dirty	1	3	3		1	8	13
Number with sanitary conven- ience defective in light or ven-						100	6
Number with sanitary convenience	_	_					
required	-	_	-	_	- 1	3	- 2
Number with sanitary fittings choked or defective	T	2					
Number of other nuisances	1	1	3	_	3	8	13
Number of prosecutions							
							8
			The Sand		-	18 113	12.11
							Series
9. Non. Mech. Bakehouses.							
Number measured and registered	_	-	-	14	-		20
Total number now on register Number dirty		2	_	-		-	_
Number overcrowded	-	-	-	-	-	-	-
Number with sanitary conven- ience defective in light or ven-	1 100						
tilation	-	-	-	-	-	-	-
Number with sanitary conveniences required	_	_	_	_		_	
Number with sanitary fittings							200
Number of other nuisances	_			_			1
Number of other nuisances Number of prosecutions	_	_	-	-	1-	-	-
							19
					-	100	
						4542	1
	1						
10 Mach Factories					100		
10. Mech. Factories.				E TO	-	****	110
Number registered	1,240	16 550	27 577	501	23 526	135 3,394	113 3,443
Number dirty	82	45	56	2	55	240	446
Number with sanitary conven-						1 21 3	
iences defective in light or ven- tilation	132	12	8	2	19	173	155
Number with sanitary fittings	82	51	31	_	42	206	224
Number of prosecutions	-	-	-	-	-	_	-
Number of other nuisances	143	17	40	-	62	262	348
	1	1	1	1	-		

OPERATIONS OF SANITARY SECTION-Continued.

Land Part Part March	Central	North- ern		South- Eastern	South- Western	1963	ity 1962
11. Non-Mech. Factories.							
Number registered Total number now on register Number dirty Number overcrowded Number with sanitary conveniences defective in light or ventilation	2 87 2 —	11 3 —	79 1	5 80 —	51 4 —	7 308 10	319 21
Number with sanitary fittings choked or defective Number of other nuisances Number of prosecutions	<u></u>	1 _	1 2 —		1 =	3 3 —	14 26
14. Offices and other Workplaces including Shops.							
Number on Register Number dirty Number with sanitary conveniences defective in light or ven-	1,820*	1,849	3,700†	1,396	1,884	10,649	11,288 7
Number with sanitary fittings choked or defective Number of other nuisances	3 60	2 29	1 3	1 3	- 1 71	6 166	4 116
15. Homeworkers' Dwellings.							
Total number now on register Number found dirty	7	9	11	3	9	39	
16. Bothies, Chaumers.							
Number occupied Number unsatisfactory Number of nuisances	=	=	=	=	=	=	==
18. Piggeries.							
Total number now on register Contravention of Byelaws Number of nuisances Number of prosecutions	6	10 3 3 -	$\frac{8}{3}$	3 _	2 _ _ _	29 3 6 —	33 2 7 —

^{* 1951} Survey (offices not included)

[†] Survey not yet completed.

OPERATIONS OF SANITARY SECTION—Continued

	Central	North- ern	Eastern		South- Western		ty 1962
19. Offensive Trades.				Tester		-	4-19
Total number now on register Number of irregularities Number of prosecutions	<u>-</u>	5 —	37	==		44	44 —
20. Rag Flock.							
Total number now on register Number licensed Samples submitted for analysis Certified not to conform to standard Number of prosecutions Number of Irregularities	20 2 - - - 7	10 1 —	15 2 — — —	15 4 — — —	12 	72 9 — — 7	74 9 -
21. Broker's Premises. Total Number registered Number dirty Number of other nuisances	13 	14 1 1	$\frac{18}{2}$	9 —	5	59 1 3	57 2 2
24. Food Premises							
Number in Division	1,091*		976*		729	4,724	5,534
Number of Premises visited Number defective in light and ventilation	330	799	183	346	729 56	2,387	3,246
Number sanitary conveniences defective or required Washing facilities required Lack of personal cleanliness in foodhandlers and dirty equip-	2 44	38	-1	=	3 88	5 171	29 496
Number of Other Nuisances Number of Irregularities	107 138 1,866	55 236 353	6 10 48	45	106 148 907	274 532 3,219	783 951 2,441

^{*} Survey not yet completed.

OPERATIONS OF SANITARY SECTION—Continued.

					-		
grant and a second	Central	North- ern	Eastern	South- Eastern	South- Western		ty 1962
29. Work of Female Inspectors.							
(a) Verminous Children.							
Number of visits to schools	157	242	592	52	122	1,165	1,206
Number of children submitted for inspection	8,370	20,916	53,999	5,165	6,429	94,879	94,866
Number of children found with major infestation	27	91	320	8	_	446	317
Number of children found with minor infestation	1,424	3,879	4,949	163	604	11,019	11,104
Number of children found with	.,	22	73	_	_	95	37
Number of children found dirty	_	226	2,297 558	15	105	2,643 610	1,875 374
Number of written notices Number of children cleaned by	-	44					
Rumber of children cleaned by	200	1,113	5,985	3	300	7,601	6,465
officers Number of children re-inspected	5,504	25 6,498	16,701	347	1,571	30,621	30,321
(b) Homes of Verminous Children. Number of houses inspected Number of houses found dirty Number of houses with dirty bedding Number of written notices Number of re-inspections Number of houses cleaned Number of bedding cleaned	389 — — 96 — —	736 — — 8 — —	2,508 7 4 40 405 4 4	68 — — — — — —	386	4,087 7 4 40 610 4 4	4,647 2 3 19 578 8 2
(c) Other Care of old people	3,540	4,301	3,134	3,603	2,430	17,008	5,561

OPERATIONS OF SANITARY SECTION—Continued.

	Central	North- ern	Eastern		South- Western		ity 1962
30. Work of Housing Health Visitors.							
Houses other than Corporation Houses—							
Number of houses visited Number of houses found dirty Number of houses with dirty bedding Number of houses—Written notices Number of houses—Re-visits Number of houses found cleaned Number of houses—Bedding found cleaned		22 — — — — — — — — —	8 - - 7 54 - -	39 — — — 209 —	4	73 — 7 286 —	268 3 2 - 373 6
Corporation Houses—							
(a) Re-housing Scheme Visitation.							
Number of visits (See page 262 for details)	265	16,876	28,910	1,222	4,410	51,683	96,258
(b) Intermediate Housing Scheme Visitation.							
Number of houses visited Number of houses found clean Number of houses found fair Number of houses dirty Number of houses with dirty bedding Number of written notices Number of re-visits Number of houses found cleaned Number of bedding found cleaned	519 311 208 — — — 503 —		1,094 932 154 8 3 12 165 2		1 1 - - - 22 -		
(c) Ordinary Housing Visitation							
Number of houses visited Number of houses found clean Number of houses found fair Number of houses found dirty Number of written notices Number of re-visits Number of houses found cleaned	531 348 183 — 245 —	334 280 54 — 297	8,023 7,100 899 24 46 345 23	1,227 1,121 104 2 - 738 -	1 1	10,116 8,850 1,240 26 46 1,625 23	29,252 26,555 2,680 17 26 4,012 13

TABLE XVI.—GLASGOW.—POPULATION; BIRTHS AND DEATHS; BIRTH-RATES AND DEATH-RATES PER 1,000; ALSO DEATHS UNDER 1 YEAR, AND DEATH-RATES PER 1,000 BIRTHS SINCE 1901.

				Birth-	Death-	Deaths ur	der I Year
Year	Population	Births	Deaths	rate per 1,000	rate per 1,000	Number	Rate per 1,000 Births
1901	761,925	24,206	16,197	31.8	21.2	3,607	149
1911 1912	784,680 785,600	21,755	13,899	27.7	17-7	3,016	139
1913‡	1,021,789*	22,044 28,688	13,797 17,693	28·1 28·1	17.6	2,740	124
1914	1,028,440	29,462	17,522	28.6	17·3 17·0	3,706	129
1915	1,035,091	27,943	20,159	27.0	19.5	3,913 4,007	133 143
1916	1,041,742	27,094	16,601	26.0	15.9	2,996	111
1917 1918	1,048,393 1,055,044	24,030	16,691	22.9	15.9	3,089	129
1919	1,061,695	23,524 25,835	18,362 18,237	22.3	17.4	2,660	113
1920	1,068,346	32,626	16,765	24·3 31·5	17·2 15·7	2,937	114
1921	1,075,000	29,712	15,625	27.6	14.5	3,477 3,138	107 106
1922	1,074,607	28,298	17,850	26.3	16.6	3,401	120
1923 1924	1,074,215	26,710	14,875	24.9	13.8	2,388	89
1925	1,073,822 1,073,429	25,330 25,416	16,868	23.6	15.7	3,005	119
1926	1,090,380*	24,541	15,336 15,731	23·7 22·7	14·3 14·6	2,591	102
1927	1,089,988	23,578	15,439	21.6	14.0	2,548 2,527	104 107
1928	1,089,595	23,649	15,701	21.7	14.4	2,525	107
1929	1,089,202	22,799	17,760	20.9	16.3	2,438	107
1930 1931	1,088,810 1,088,461	23,322	15,455	21.4	14.2	2,355	101
1932	1,088,215†	22,926 22,732	15,505 16,071	21.1 20.9	14.2	2,397	105
1933	1,087,969	21,361	14,747	19.6	14·8 13·6	2,542 2,061	112 96
1934	1,087,723	21,822	15,234	20.1	14.0	2,140	98
1935	1,087,476	22,102	15,537	20.3	14.3	2,169	98
1936 1937	1,087,230	22,273	16,406	20.5	15-1	2,429	109
1938	1,086,984	22,176 21,979	16,379 15,016	20·4 20·1	15-1	2,313	104
1939	1,092,722	21,682	15,010	19.8	13·7 13·7	1,919	87 80
1940	1,092,476	20,965	17,603	19.2	16.1	1,983	95
1941	1,092,229	20,365	16,301	18.6	14.9	2,267	111
1942 1943	1,091,983	20,615	14,679	18-9	13.4	1,863	90
1944	1,091,737	22,363 22,203	14,824 14,603	20.5	13·6 13·4	1,825	82
1945	1,091,245	20,294	13,941	18-6	12.8	2,108 1,379	95 68
1946	1,090,998	23,560	14,502	21.6	13.3	1,588	67
1947	1,090,752	25,829	15,266	23.7	14.0	1,989	77
1948 1949	1,090,506	22,292	13,620	20.4	12.5	1,241	56
1950	1,090,260	20,923 20,031	14,203 14,090	19·2 18·4	13·0 12·9	1,033	49
1951	1,089,767	20,091	14,312	18.4	13.1	879 922	44 46
1952	1,086,202	20,337	13,841	18-7	12.7	831	41
1953	1,082,796	20,232	12,827	18.7	11.8	723	36
1954 1955	1,079,311	20,977	12.750	19.4	11.8	736	35
1956	1,075,825	21,023 21,885	13,275 13,194	19·5 20·4	12·3 12·3	765 720	36
1957	1,068,855	22,413	13,177	21.0	12.3	774	33 35
1958	1,065,369	22,760	13,454	21.4	12.6	800	35
1959	1,061,884	22,598	13,536	21.3	12.7	799	35
1960	1,058,398	23,092	13,037	21.8	12.3	743	32
1961 1962	1,053,100	22,842 23,491	13,368 13,224	21·7 22·5	12·7 12·7	703 762	31 32
1963	1,029,147	22,618	13,717	22.0	13.3	722	32

APPENDIX B.—TABLE I.

FEVER HOSPITALS-STATEMENT OF CASES TREATED ACCORDING TO SEX, ETC., BASED ON DISMISSALS AND DEATHS FOR YEAR 1963.

) ays'	Deaths	11111111 4 11128 1 128 1 1 138 1 1 138 1 1 1 1 1 1 1 1 1 1 1	18,135
Total Days' Residence	Pis- slæssim	641 265 265 411 411 1144 1158	62,983
poows	Deaths	111111111111111111111111111111111111111	+
Knightswood	Dis- nissals	1 2	61
Belvidere	Deaths	111111111111111111111111111111111111111	21
Belv	Dis- missals	111 1138 11153 11153 11153 11153 11153 11153 11154 11157 11157 11158 11157 11158 11157 11158 1159 1159 1159 1159 1159 1159 115	173
Ruchill	Deaths	111111111111111111111111111111111111111	153
Ruc	Dis- slassim	10 10 10 10 10 10 10 10 10 10 10 10 10 1	784
	Altered Diagnosis	170 170 170 170 181 245 245 245 191 191 191 191 191 191 191 191 191 19	1
age	Desths		102
Average	Dis-	63 133 133 134 137 138 138 138 138 138 138 138 138	62
	Mortality per cent.	88.4 88.4 88.4 88.4 88.4 88.4 88.4 88.4	14.9
Died	Lemales	111111111111111111111111111111111111111	49
D	Males	3 1119	129
issed	Females	11 11 13 8 8 10 10 10 10 10 11 12 12 12 13 13 13 13 13 13 14 16 17 18 18 18 18 18 18 18 18 18 18	365
Dismissed	Males	1 8 138 139 2,199 2,199 2,106 2,106	653
Admitted	Females	11 11 12 14 14 16 16 17 17 17 17 17 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	605
Adm	Males	1,348 1,	752
		ia Membranous Croi ever hargica hargica litis Pneumonia I Pneumonia I Pneumonia infective jaundic thers isease natorum	sisiqi

NALIS NALI	0	HOSPITALS.	ALS.		DEATHS		D MC	FROM CERTAIN	IN CA	AUSES,		ACCORDING	DING	TO TO	SEX		D AC	AND AGE, FOR THE	OR I	0.000	YEAI	YEAR 1963.	3.	8
-16 -15 -30 -45 -45 -45 -45 -45 -45 -45 -45 -45 -45						Ī	MALK	80	1									FEM	ALES					_
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1 1 1 1 1 1 1 1 1 1	1	1		1	- 1	1	1	1	1	1	1	-			1	1	1	1	1	1	1	1	1	1
1	04			1	1	1	1	1	1	1	-	-	60	1	-	1	1	1	1	1	1	1	1	1
1	1			1	1	1	1	1	1	1		1	1	1	1	-	-	1	1	1	1	1	1	1
1	1			1	1	1	1	1	-	-	1	- 1	1	-	1	-	1	1	1	,1	1	1	1	1
	23		64	1	-	1	- 1	1	1					-	-	-	1	1	I		-	-		20
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- -	-		-	1	1	1	1	1	1	1	1	-	61	-	1	-	1	1	1	-		1	1	-
	1		1	-	1	1	1	1	1	1	1		_	1	1	-	1	1	1	1	1	1	-	1
- -	1		1	1	1	1	1	1	-	1	1	1	1	-	1	1	1	1	1	1	1	1	1	-
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2 6 23 45 51 129 2 3 11 10 23	9 04		7		1	1	1			-		-		-	3	2	1	1	1	4	4	1	1	-
	1		1	1	1	1	2					-	1	1	1	1	1	1	1	23	62		-	

Mumps.

APPENDIX B.—TABLE III.

FEVER HOSPITALS. DISMISSALS AND DEATHS ACCORDING TO SEX AND AGE, FOR THE YEAR 1963.

	_																					_									
	Total	1=	1	3 1	10	00	16	1	11	-	867	01	13	19	,	100	18	213	3.5	99	1	1	1	141	31	16	1.877	-	1	3,756	414
	65+	1-	1	11	11	-	0	1	11	1	184	-	1	33		1-	1	1	1	1-	- 1	1	1		- 1	1	#989 #989		1	467	88
	-65	01	1	11	11		+	1	11	1	64	1	1	00 00		H	1	1	1	1	1	1	1	15	9	SI :	136	1	1	226	88
	-55	101	1	11	11		+	1	11	1	46	1	1	0	,	- 1	1	1	1	1-	- 1	1	I	00 00	1		98	1	1	161	73
	-45	1-	1	11	11	0	0	I	11	1	34	1	1	- 60		1 1	1	11	01	-	1	1	1	1-	1	15	9 19	1	1	121	55
FRMALES	-35	11	-		11	C	N	1	11	-	34	-	18	201		-1	1	11	01		- 1	1	1	-0	1	- :	80	1	1	169	63
FR	-25	1-	Т	11	11		11	1	11	1	16	1	18	7		- 7	01	10	-	01	1	1	1	-0	1	10.0	80.8	1	1	130	33
	-20	11	1	01	1-		01	1	11	1	10	1	1:	+ 67		- 6	9	1-		01 -	- 1	1	1	10	1	100	*81	1	1	1117	17
	-15	1.80	3	11	1-		11	1	11	1	=	1	15	21 21		1-	1		- 01	10	1	1	1	n	1	1.	67	1	1	107	11
	-10	1-	1	11	67	-		11	11	1	40	i	18	1 03		- 12	1	000	14	11	1	1	1		1	15	137	1	1	288	7
	-5	11	1	11	1 9		1 80	11	11	1	97	1	19	143		45	15	16	10	11	1	1	1	- 10	1	1:	179	1	1	567	04
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	7	11	1	11	00		1	11	11	1	246	1	10	1		12	13	104	1	11	I	1	13	123	1	100	301	1	1	964	1
	Total	100	13	11	16	19	1	35	11	67	1,395	01	200	50	ı	188	9	60	200	127	-	-	18	234	1	100	2,374	10	1	5,433	782
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		ric Fever	- 5	peral Pyrexia	balmia Neon	theria and	pelas	bro-spinal Fever	phalitis Lethargica	Poliomyelitis	eumonia	eumonia	Cla	onary Tuberculosis	Forms of	les	an Measles	enpox		enza	100	s Disease—	fective Jaundice			assified (Staff)	113	phigo	onatorum	Total	hsis