

[Report 1970] / Medical Officer of Health, Glasgow.

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Glasgow (Scotland)

Publication/Creation

1970

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Report
of the
Medical Officer of Health
City of Glasgow



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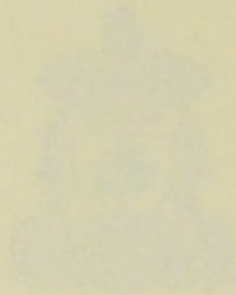
THE CORPORATION OF THE CITY OF GLASGOW

Report

of the

Medical Officer of Health

City of Glasgow



1910

THE CORPORATION OF THE CITY OF GLASGOW

1910

CORPORATION OF GLASGOW

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PREFACE

Population

The city's population continues to decrease and is now estimated to be 907,672. In 1960, the population was 1,064,700, and therefore in ten years the number of persons in the city has decreased by 157,028. Some comment on this is made in the section on School Health and the suggestion is made that the levelling off in heights and weights of children of the 5 and 13 year age groups is associated with the policy of overspill.

Vital Statistics

The relevant vital statistics for 1970 are :

Birth Rate per 1,000 living	17.9
Illegitimate Births (percentage of total births)	11.8
Deaths under 1 year per 1,000 births	23
Neonatal death rate—per 1,000 live births	13
Stillbirth rate per 1,000 births (live and still)	17
Death Rate per 1,000 living (all causes)	13.2

Housing

Over recent years a massive slum clearance operation has been in progress and between 1960 and 1969, 29,654 houses have been represented as being unfit. During the year 1970, 6,358 houses were represented under the Housing (Scotland) Act, 1969, as below the tolerable standard and for demolition, and 1,129 houses were designated for improvement. These figures entail an immense amount of work by the staff of the Department. It is estimated that if this rate of progress is continued, Glasgow could be rid of houses below the tolerable standard in between 8 to 10 years. Of the 308,612 houses in the City, 277,006 have internal water closets and 232,401 have internal baths. Remaining we have, however, 31,606 houses with external toilets and 76,211 without baths.

Air Purification

The winter sunshine in the City has increased by some 175 per cent. over the last 10-year period. This proves the benefit of the activities of the Clean Air Section and the value of clean air zones. Unfortunately the Kelvinside Order, covering the whole of Kelvinside Ward and some 9,615 premises, although approved by the Corporation was the subject of an objection under the terms of the Act and thereby was delayed. Survey work on the Maryhill Ward continued briskly and it is hoped that an Order will be before the Corporation early in 1971.

Infectious Disease

Whooping cough during 1970 was very prevalent and the total figure recorded was six times up on the previous year. Three deaths occurred during the year from this disease. Measles also showed a high incidence compared with 1969, and again there were three deaths. During 1970, two cases of Poliomyelitis were confirmed. In the early period of 1970 there was evidence of a significant outbreak of influenza. Two cases of Brucellosis were reported during the year. This is a preventable disease and an eradication campaign is currently in being. The importance of the pasteurisation of milk is again stressed. Fortunately approximately 99 per cent. of the City's milk supply is treated in this manner.

Immunisation

Since May, 1969, the calling of young children for immunisation has been arranged by computer. This is a great advance, but still a degree of parental apathy exists. It is important that all young children receive these preventive inoculations. Measles can have a high morbidity rate which can be markedly reduced by preventive inoculation in early life.

Inoculations against Rubella will be introduced in the City early in 1971. The importance of booster immunisation procedures at school is emphasised. The School Health Service gave no less than 93.9 per cent. of reinforcing doses of Poliomyelitis inoculation. The B.C.G. scheme in schools had its usual successful outcome.

Mental Health

The work in the two child development clinics expanded and now fills an important part in the Department's activities in the field of mental health. The special nursery centres continue to do good supportive work. After-care work by Health Visitors, which has been an important feature in the Department's work since the 1960 Mental Health Act, suffered a further setback by one Health Visitor withdrawing from the work. No courses are presently available for training Health Visitors in this work. The after-care of mental patients is now the responsibility of the Social Work Department.

Attachment of Nursing Staffs to General Practice Groups

The attachment of nursing staff to general practitioner groups continues and will increase as Health Centres come into operation. A restricting factor is the scarcity of trained nursing staffs. One of the difficulties in attachment is the widespread territorial areas covered by many practices. This means that nurses attached to these

practices must of necessity cover a widespread area, which is time consuming. A rationalisation of practices should come about under the new arrangements in Health Centres.

Family Planning

Arrangements for family planning expanded rapidly during the year and clinics are now available which are organised by the Department and also by the Family Planning Association. Further expansion of this service is expected in the near future.

Child Health

The general standard of health has improved and mortality has dropped. The most important thing now is to ensure that no child is hindered in full development by any unrecognised defect. For this reason, great stress is laid on screening of children at regular intervals from early infancy onwards.

Venereal Disease

A continued rise in Venereal Disease is reported, the increase being relatively greater amongst females.

The Laboratory Services

Attention is drawn to the immense work carried out by the City Laboratory. The total number of investigations conducted, 180,580, represents a vast amount of careful analytical work which is of the greatest importance in ensuring the health of the citizens. In the section dealing with Food Supplies reference is also made to the work of the City Analyst and Chemist, also of fundamental importance in preventive work.

The Staffs of the Department and Other Professional Allies

A debt of gratitude is owed to many people for the preparation of this report. To all concerned I would present my grateful thanks and particularly to Mr. Alex Arthur and Mrs. Elizabeth Emans, who acted as joint editors. I would also wish to thank the Convener and members of the Health Committee for their support and understanding during the year.

ARCHD. R. MILLER,
Medical Officer of Health.

SECTION I

VITAL STATISTICS, ETC.

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

SUMMARY

	1970	1969	1968	1967	1966
Population	907,672	927,948*	945,034*	960,572*	979,798*
Acreage	39,725	39,725	39,725	39,725	39,725
Persons per acre	23	23	24	24	25
Number of Inhabited Houses	302,882	305,986	309,313	313,453	317,715
Deaths—Number registered	12,327	12,633	12,452	11,715	12,731
Deaths—After correction for Transfers	12,022	12,338	12,220	11,482	12,441
Births—Number Registered	17,897	19,111	20,591	21,131	21,799
Births—After correction	16,233	17,405	18,816	19,332	19,766
Death rate per 1,000 living —All causes	13.2	13.3	12.9	12.0	12.7
Birth rate per 1,000 living	17.9	18.8	19.9	20.1	20.2
Deaths under One Year— After correction	375	470	494	474	598
Deaths under One Year per 1,000 births	23	27	26	25	30
Neonatal death rate— Per 1,000 live births	13	16.3	15.5	16	18.9
Stillbirth rate per 1,000 births (live and still)	17	16.1	17	18	20

*Midyear population.

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

BIRTHS

There was another decrease in the number of births registered in 1970, the total 16,233, being 1,172 fewer than in 1969 and the lowest number yet recorded in the City.

The birth rate, 17.9 per 1,000 of population compared with 18.8 in 1969, was the lowest since 1953 (18.7). Appendix Table XII shows the births and birth rates for each year since 1913 and Table IV the Ward distribution of the births and the Ward birth rates for both 1969 and 1970.

Male births formed 50.8 per cent. of the total as against 52 per cent. in 1969.

Illegitimate Births.—There were 1,914 illegitimate births in 1970, compared with 1,866 in 1969 and 1,964 in 1968. This is equivalent to 11·8 per cent. of the total live births as against 10·7 per cent. in the previous year, and is the highest rate so far recorded for the City. The following table shows the trend in the rate since 1946 :—

1946-1950 (Average)	5·6	1965	...	...	7·7		
1951-1955 (Average)	4·9	1966	...	...	8·8		
1956-1960 (Average)	4·9	1967	...	...	9·6		
1961	...	...	5·4	1968	...	...	10·4
1962	...	...	6·1	1969	...	...	10·7
1963	...	...	6·6	1970	...	...	11·8
1964	...	...	7·1				

MARRIAGES

There was a decrease in the number of marriages in 1970, 8,736 compared with 8,742 in 1969 and 8,941 in 1968. This represents a rate of 9·6 per thousand of the population as against 9·4 for the previous year. The following table shows the trend of the marriage rate since 1911 :—

MARRIAGE PER THOUSAND PERSONS LIVING

1911-1920	...	...	9·7	1961-1965	...	8·7	
1921-1930	...	...	8·9	1966	...	...	9·2
1931-1940	...	...	9·7	1967	...	...	9·4
1941-1945	...	...	11·0	1968	...	...	9·5
1946-1950	...	...	9·8	1969	...	...	9·4
1951-1955	...	...	9·6	1970	...	...	9·6
1956-1960	...	...	9·5				

This is still above the rate for Scotland as a whole, which was 8·3 in 1970 the same as the 1969 rate.

DEATHS

The number of deaths registered in 1970 was 12,327, 306 less than in 1969. After correction for transfers this total was reduced to 12,022 compared with 12,338 in the previous year. In 1970, Glasgow, with 17·5 per cent. of the population of Scotland (17·9 in 1969), accounted for 18·9 per cent. of the deaths.

The general death rate fell from 13·3 in 1969 to 13·2 in 1970. Appendix Table V shows the deaths in 1970 in each Ward and the death rates for the three years 1968 1969 and 1970.

The sex and age distribution of deaths, classified to the Eighth Revision of the International Statistical Classification of Diseases and Deaths (Short List) has been taken from the *Registrar General's provisional return* and is shown in Appendix Table VII.

The age distribution of the deaths as a rate per 1,000 deaths at all ages is given in the table below :—

	RATE PER THOUSAND AT ALL AGES										
	- 4 wks.	- 1 yr.	- 5	- 15	- 25	- 35	- 45	- 55	- 65	65+	Total
1961	35	18	7	5	8	13	33	88	192	602	1,000
1962	38	20	7	7	8	14	34	89	195	588	1,000
1963	32	21	7	6	7	13	31	84	200	599	1,000
1964	33	19	6	6	9	12	33	89	210	583	1,000
1965	29	17	6	6	9	13	31	83	200	606	1,000
1966	30	18	7	6	9	12	28	83	196	611	1,000
1967	26	15	6	6	8	10	31	79	206	613	1,000
1968	24	17	6	6	8	11	29	80	190	629	1,000
1969	23	15	5	7	6	12	27	77	197	631	1,000
1970	18	14	6	6	8	11	27	77	199	634	1,000

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 1970 the relative proportions were 4.4 and 83.3 per cent.

Over 55 years the male deaths totalled 5,019 in 1970 compared with 5,135 in 1969, while the number of female deaths was 4,997 a decrease of 85. This is equivalent to 80.8 per cent. of all the male deaths (79.9 in 1969) and 85.9 per cent. of the female deaths (85.9 per cent. in 1969).

Relative Frequency of the 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 86 per cent. and over of all deaths in 1970 and 1969 :—

	1970		1969	
	Number	Per cent. of all Causes	Number	Per cent. of all Causes
Heart Disease	3,787	31.50	3,915	31.73
Malignant Neoplasms ...	2,661	22.13	2,634	21.35
Cerebro-Vascular Disease ...	1,681	13.98	1,753	14.21
Bronchitis	770	6.41	794	6.43
Pneumonia	547	4.55	553	4.48
Violence	535	4.45	632	5.12
Congenital Anomalies and other causes of perinatal mortality	260	2.16	329	2.67
Pulmonary Tuberculosis ...	90	0.75	80	0.65
	<hr/> 10,331	<hr/> 85.93	<hr/> 10,690	<hr/> 86.64

With the exception of Pneumonia, and Violence, the relative frequency of the eight main causes remains unchanged from 1969.

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 pneumonia, violence, bronchitis, congenital anomalies and pulmonary tuberculosis in that order. Together these eight causes account for 85.56 per cent. of the total deaths compared with the City figure of 85.93. Bronchitis and pneumonia accounted for a higher proportion of the City deaths, 6.41 and 4.55 respectively as against 4.55 and 4.78 for the country as a whole. Pulmonary tuberculosis was not among the first eight causes of death in Scotland in 1970 but is included here for comparison with the City figure; it accounted for only 0.33 per cent. for all the Scottish deaths compared with 0.75 for Glasgow. In the two major groups heart disease and cerebro-vascular disease the proportions were lower for the City; for Scotland the respective figures were 33.79 and 15.64. The proportion of City deaths from malignant disease, 22.13 was higher than that for Scotland, 19.83. The proportion of deaths from violent causes was lower for the City (4.45), than in Scotland as a whole (4.58). Congenital anomalies and other causes of perinatal mortality accounted for 2.06 per cent. of all the Scottish deaths, a lower proportion than that for the City, 2.16.

CAUSES OF DEATH

The following table is a summary of the causes of death as shown in the Registrar General's provisional return for each year (see Appendix Table VI) arranged in the principal groups according to the revised International Classification adopted in 1968.

SUMMARY OF DEATH RATES *PER MILLION FROM PRINCIPAL CAUSES		1970	1969	1968
General Diseases—				
(a) Infective and Parasitic Diseases		63	77	77
(b) Tuberculosis—				
(1) Respiratory		99	86	93
(2) Nonrespiratory		20	27	14
(c) Malignant (cancer, etc.)		2,932	2,838	2,785
Diseases of the Nervous System		227	212	194
Diseases of the Circulatory System		6,411	6,545	6,399
Diseases of the Respiratory System (including Influenza)		1,721	1,609	1,563
Diseases of the Digestive System		338	341	362
Congenital Anomalies and other causes of perinatal mortality		286	355	328
Violence		589	681	638
All other causes		559	525	477
		<u>13,245</u>	<u>13,296</u>	<u>12,930</u>

* The rates have been calculated on the *midyear* population.

Malignant Disease—The Registrar General in his provisional return for 1970 attributed 2,661 deaths to malignant disease, 27 more than in 1969. The following table shows the principal sites of the disease and compares the 1970 figures with those of 1969 and 1968.

<i>Malignant Neoplasms</i> —					1970	1969	1968
of the stomach	...	...	...	M.	126	152	156
				F.	133	115	127
of trachea, bronchus and lung	...			M.	756	729	741
				F.	177	167	155
of breast	...	...	...	M.	2	2	1
				F.	216	197	199
of cervix uteri	...	...	...	M.	—	—	—
				F.	52	48	63
of lymphatic and haematopoietic tissues				M.	64	86	65
				F.	57	68	51
of all other sites	...	...	...	M.	562	534	524
				F.	516	536	550
<i>All Forms</i>	...	...		M.	1,510	1,503	1,487
				F.	1,151	1,131	1,145
<i>Grand total</i>	...	...			2,661	2,634	2,632

Deaths from violence.—In 1970 Violent Causes again ranked fifth as a major cause of death in Glasgow, the Registrar General in his provisional return allotting 535 deaths to this group.

The following table shows the sex and age distribution of the deaths allotted to this group by the Registrar General in 1951, 1961, 1965 and 1970.

Year	Males						Females					
	-5	-15	-45	-65	65+	Total	-5	-15	-45	-65	65+	Total
1951	40	38	86	84	84	332	35	9	28	35	99	206
1961	26	26	121	123	83	379	22	10	21	38	114	205
1965	40	24	131	131	99	425	14	12	38	50	115	229
1970	26	23	111	105	60	325	14	15	31	40	110	210

A full analysis of the various causes of accidental death is provided by the Registrar General in his Annual Reports. The Report for 1970 will not, however, be published till later this year but the following table has been prepared from information given in his provisional return and the figures for 1969 and 1968 shown for comparison :—

<i>Number of deaths</i> —					1970	1969	1968
Motor Vehicle Accidents	...	...			149	197	163
Other Road Vehicle Accidents	...				2	1	—
Accidents in the Home	...	...			152	179	214
Other Violence	...	...	...		180	204	176
Suicide and Self-inflicted Injury	...				52	51	50
					535	632	603

POPULATION, ETC.

It should be noted that in this Report, the various rates have been calculated on the *mid-year* population and not on the December estimate as in the years prior to 1964.

The Registrar General's estimate of the City's population, as at 30th June, 1970, was 907,672, a decrease of 20,276 from the 1969 mid-year estimate.

This continued fall in population is in line with other large cities and is due in large measure to Overspill.

Natural Increase.—Although there were fewer deaths in 1970 there was also a reduction in the number of births and the Natural Increase (excess of births over deaths) was only 4,211, the smallest in the past ten years.

NATURAL INCREASE (*for Calendar year*)

1961	9,474	1965	8,086	1969	5,067
1962	10,267	1966	7,325	1970	4,211
1963	8,901	1967	7,850		
1964	10,128	1968	6,596		

Ward Population.—Details of the estimated population in each ward of the City are given in Appendix Table I.

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.

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, from 305,986 in 1969 to 302,882, a reduction of 3,104, due to large scale redevelopment in various areas of the City. This embraces not only housing development but also the clearance of areas to make way for new motorways.

This reduction of 3,104 is, of course, the *net* change from the previous year. In actual fact there was a reduction of 5,656 houses among 26 wards offset by an increase of 2,552 in the other eleven. The decrease was most marked in the wards of Dalmarnock (691), Gorbals (578) and Kingston (460).

Increases ranged from 9 in Partick East to 553 in Pollokshaws and included 550 in Parkhead, 511 in Craigton and 253 in Cowcaddens.

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

	1970	Compared with 1969
One apartment	20,577	Decrease 1,216
Two apartments	71,610	Decrease 2,464
Three apartments	122,077	Decrease 363
Four apartments	64,256	Increase 498
Five apartments and over ...	24,362	Increase 441
	<u>302,882</u>	<u>Decrease 3,104</u>

The decrease in the number of (occupied) one-apartment houses is, of course, the *net* total for the City. Six wards showed some increase in the number of occupied one-apartment houses, from five in Langside to 120 in Pollokshaws. These increases are due to a variety of causes, e.g. the conversion of large houses to service flats or, by sub-division, to sublets and "multiple occupancies." In other wards new housing has been provided for single and aged persons. With the advent of these flats, specially designed for single and aged persons, the category of "one apartment house" is no longer synonymous with a "single end" (a single apartment in a tenement property) but may also refer to a service flat or the accommodation for an aged or single person.

The decrease in the occupancy of the older type of one apartment house was 1,501 (this figure takes no account of the decrease of 204 in the unoccupied one apartments).

The distribution of the 20,577 occupied one-apartment houses throughout the 37 wards ranges from 144 in Gorbals to 1,333 in

Dalmarnock with the greatest concentration in the older parts of the City. Seven wards in all 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 seven wards with the relative proportion of houses of all sizes in each.

	Number	As percentage of Houses of all sizes
Dalmarnock	1,798	20.0
Mile-End	1,270	16.3
North Kelvin	1,352	16.3
Cowlairs	1,105	12.6
Kelvinside	1,194	13.8
Shettleston and Tollcross ...	1,122	8.5
Partick East	1,090	14.5

Unoccupied Houses.—At Whitsunday, 1970 there were 15,060 houses unoccupied compared with 13,534 in 1969, an increase of 1,526. This is the result of action taken under the Housing Acts and the redevelopment of certain areas.

The increase was most noticeable in those of two, three and four apartments.

NUMBER OF EMPTY HOUSES

	1970	1969	1968	1967	1966	1965	1964	1963
One apartment	3,014	3,218	2,810	2,813	2,026	1,871	1,418	1,209
Two apartments	7,410	6,207	5,765	5,138	3,572	3,080	2,569	1,693
Three apartments	2,776	2,518	2,184	1,930	1,276	1,159	1,005	882
Four apartments	1,201	965	827	781	621	707	596	526
Five apartments and over ...	659	626	651	703	622	766	709	636
	<u>15,060</u>	<u>13,534</u>	<u>12,237</u>	<u>11,365</u>	<u>8,157</u>	<u>7,583</u>	<u>6,297</u>	<u>4,946</u>

This total of 7,410 two-apartment houses is equivalent to 49 per cent. of all the unoccupied houses in the City, compared with 46 per cent. in 1969. Since 1957, the proportion of unoccupied two-apartments has remained very steady, at 32 per cent. from 1957 to 1959 and 33 per cent. from 1960 to 1962. In 1964, however, there was a sharp rise to 41 per cent. and this ratio has increased steadily since.

Only a small proportion (4.4 per cent.) of the unoccupied houses were houses of five apartments and over compared with 4.6 per cent. in 1969. Dalmarnock had the greatest number of empty houses, 1,075, compared with 1,208 in 1969, but only one was of five apartments.

Wards in which 20 per cent. and over of the empty houses were of five apartments and over are shown in the following table :—

NUMBER OF EMPTY HOUSES

	Total	Five Apartments and over	Percentage
Pollokshields ...	294	72	25
Partick East ...	360	123	34
Kelvinside ...	219	51	23
Park ...	344	83	24
Pollokshaws ...	52	14	26
Langside ...	139	31	22
Craigton ...	69	21	30

METEOROLOGY

This section is being discontinued but details of the weather during the year are given in Appendix Table III. This table is supplied by courtesy of the Parks Department.

SECTION II

MATERNITY AND CHILD WELFARE

During 1970, the infant mortality rate showed a considerable drop, from 27 to 23 per 1,000.

The number of live births showed a continuing decrease from 1969, 16,233 compared with 17,405. Stillbirths numbered 279, compared with 285 in 1969. Infant deaths numbered 375, 95 fewer than in 1969.

During 1970, Child Health Clinics increasingly adopted the pattern of regular supervision of the pre-school child by periodic examination by appointment. Although the total number of attendances at clinics may be reduced, the effectiveness of supervision is increased by this method, the child has a more detailed examination with adequate time for each, and reduction in the waiting time for mothers and children.

The Assessment and Development Centres at Balvicar Street and Glenfarg Street have again been working to capacity, with the addition of a second medical officer at each centre. The importance of early referral of the child with suspected defect is again emphasised, as this helps greatly to reduce the degree of handicap from which the child suffers.

The three centres for young handicapped children have again in 1970 proved the value of day care, not only for the relief afforded to parents but, more important still, for the marked improvement in many of the children, even those with severe handicap. Full investigation of the child physically and mentally on admission is followed by continued assessment of progress while attending the centre. Drumoyne Centre, which opened towards the end of 1969, is now almost fully occupied with children aged from about two years up to 12 years. There is still a long waiting list for admission to Broomhill Centre.

During 1970, Family Planning Sessions were introduced at more of the Maternity and Child Welfare Centres, being available now at eight of these. Further expansion of this service is planned for the future, as the advantage of having it within the Maternity and Child Welfare setting has been fully realised. Increasingly it is found that the first approach for information about family planning is made to the health visitor, usually in the home, and the necessity for adequate training of all staff, medical and nursing, is appreciated.

The response to cervical cytology has been rather disappointing, and more women could be screened with the present facilities. Towards the end of 1970, a clinic was held twice weekly in one large industrial concern and will continue as long as is necessary.

During 1970, members of the child welfare staff attended the following post-graduate courses :—

Mental Deficiency	3
Family Planning	2
Developmental Paediatrics	3 (one to a six-weeks course, two to short courses.)

MATERNAL DEATHS

In attendance at the antenatal clinics were 2,256 patients whose pregnancy (excluding abortions) terminated in 1970. There were no deaths among these in 1970.

The following table, based on figures supplied by the Registrar General, compares the rates for the *whole City* with those of Scotland for the two previous years.

MATERNAL DEATHS AND RATES PER 1,000 BIRTHS (LIVE AND STILL) IN GLASGOW AND SCOTLAND

	Deaths			Rate per 1,000 Births		
	1968	1969	1970	1968	1969	1970
Abortion	—	2	—	—	0·11	—
Other complications of pregnancy childbirth and the puerperium ...	1	—	6	1	—	0·36
Total—Glasgow ...	1	2	6	0·05	0·11	0·36
Scotland ...	14*	13	17	0·14	0·14	0·19

* Includes 1 abortion.

INFANT MORTALITY

Infant deaths were ninety-five fewer than in 1969, 375 compared with 470. This decrease related to fewer births resulted in an infant mortality rate of 23·0 per 1,000 births compared with 27·0 in the previous year. In recent years the mortality rate has been falling fairly steadily but the 1970 rate is the lowest ever recorded in Glasgow.

This decrease was largely confined to the male infants, whose total 222, was 74 less than in 1969. The mortality rate for male infants

was 26.9 per 1,000 male births, compared with 32.68 in the previous year.

The number of female deaths, 153, was 21 fewer than in 1969, resulting in a slight reduction in the mortality rate, 19.1 per 1,000 female births compared with 20.84 in the previous year.

The ward distribution of the infant deaths and the ward death rates are shown in Appendix Table VIII.

In the following tables infant deaths and mortality rates for the various causes during 1970 are compared with those of the previous two years.

MALES				Actual Number of Deaths			Rate per 1,000 Births		
<i>Causes of Death</i>				1968	1969	1970	1968	1969	1970
Congenital Anomalies	...	...	...	48	51	49	4.9	5.6	5.9
Diseases of Early Infancy	...	...	...	115	130	86	11.8	14.4	10.5
Diseases of Respiratory System	...	...	...	57	67	49	5.8	7.4	5.9
Diseases of Digestive System	...	...	...	5	4	1	0.5	0.5	0.1
Diseases of Nervous System	...	...	...	9	3	6	0.9	0.3	0.7
Tuberculosis	...	...	...	—	—	—	—	—	—
Infectious Disease	...	...	...	20	22	15	2.1	2.4	1.8
Violence	...	...	...	31	11	8	3.2	1.2	1.0
All other Causes	...	...	...	6	8	8	0.7	0.9	1.0
All Causes	...	...	...	291	296	222	29.9	32.7	26.9

FEMALES				Actual Number of Deaths			Rate per 1,000 Births		
<i>Causes of Death</i>				1968	1969	1970	1968	1969	1970
Congenital Anomalies	...	...	...	48	40	27	5.3	4.8	3.4
Diseases of Early Infancy	...	...	...	77	67	55	8.5	8.0	6.9
Diseases of Respiratory System	...	...	...	39	38	45	4.3	4.5	5.6
Diseases of Digestive System	...	...	...	4	—	2	0.4	—	0.2
Diseases of Nervous System	...	...	...	1	—	1	0.1	—	0.1
Tuberculosis	...	...	...	—	—	—	—	—	—
Infectious Disease	...	...	...	17	13	10	1.9	1.6	1.3
Violence	...	...	...	9	9	7	1.0	1.1	0.9
All other Causes	...	...	...	8	7	6	0.9	0.8	0.7
All Causes	...	...	...	203	174	153	22.4	20.8	19.1

Appendix Table IX shows the various causes in more detail.

Neonatal Mortality.—There was a decrease of seventy-three in the number of neonatal deaths in 1970 (211) and a corresponding reduction in the mortality rate from 16.3 per 1,000 births to 13.0. This is the

lowest rate yet recorded for the City but is still above the rate for Scotland which was 12·8 for 1970.

This decrease was more noticeable in the male infants among whom there were 127 deaths, 52 fewer than in 1969 and the death rate fell from 19·76 to 15·41 per 1,000 male births. The 84 female deaths were 21 fewer than in the previous year, resulting in a decreased mortality of 10·5 per 1,000 female births compared to 12·58 in 1969.

The following table, based on the Registrar General's figures, shows the rate per 1,000 births for each sex for the three main causes of death in this age group, from 1968 to date :—

	Sex	1968	1969	1970
Congenital Anomalities	M.	3·08	3·64	4·37
	F.	3·42	3·11	2·38
Birth injuries, difficult labour and other anoxic and hypoxic conditions ...	M.	8·00	8·06	6·43
	F.	5·62	4·55	4·50
Other causes of Perinatal mortality ...	M.	3·80	6·07	3·88
	F.	2·87	3·47	2·38

ILLEGITIMATE MORTALITY

From 1st January, 1965, legitimacy ceased to be stated on the returns received from the local registrars and the information available to the Department is provided by the Registrar General.

In 1970, it appears that 52 of the 375 infant deaths were illegitimate. The number of illegitimate births in 1970 was 1914, 28 more than the previous year and the illegitimate mortality rate therefore was 27·17. In 1969 the rate was 41·80.

Among the 14,319 legitimate births there were 323 deaths, representing a rate of 22·56 against 25·23 in 1969.

PREMATURE BIRTHS

During 1970, there was a further decrease in the incidence of prematurity, 1,038 live births as against 1,197 in 1969. This represents 6 per cent of total live births for the year. Of these, 960 were born in hospital and 78 at home. Deaths within 24 hours of birth numbered 61. Of the 279 still births, 131 were premature (47 per cent).

The increased survival rate of the premature baby is largely due to the excellent facilities provided in the neonatal paediatric hospital departments in the City.

STILLBIRTHS

The number of stillbirths registered in the City in 1970 was 314, but after correction for usual residence this figure was reduced to 279, six fewer than in 1969. The rate per 1,000 live and stillbirths was 16·9 compared with 16·1 in 1969.

The rate for Scotland, 14·0 in 1969 was reduced still further in 1970 to 13·9, the lowest rate ever recorded in Scotland.

Stillbirths in Wards.—The ward distribution of stillbirths and the rates for 1970 and 1969 are shown in Appendix Table VIII.

The following table shows the trend in the stillbirth rate and infant and toddler rates in the past eighteen years.

	Infant Mortality Rate per 1,000 live Births	Still- Births Rate per 1,000 total Births	Neo-natal Mortality Rate per 1,000 live Births	Perinatal Mortality Rate per 1,000 Total Births	Mortality	
					1-12 Months Rate per 1,000 live Births	1-5 Years Rate per 1,000 population
1953	36	26·5	22·2	44·3	13·5	1·5
1954	35	29·4	21·5	47·1	13·6	1·2
1955	36	26·8	22·7	45·6	13·6	1·3
1956	33	25·6	20·8	43·0	12·1	1·1
1957	34·5	26·1	23·0	44·0	11·5	1·2
1958	35·1	25·5	23·2	45·0	12·0	1·03
1959	35·4	26·4	23·9	45·5	11·5	1·38
1960	32·2	24·2	21·4	41·8	10·8	1·19
1961	30·8	23·3	20·6	41·0	10·2	1·04
1962	32·4	22·2	21·1	39·3	11·3	1·13
1963	31·9	21·3	19·2	37·6	12·7	1·14
1964	28·6	19·5	18·4	35·7	10·3	0·83
1965	28·1	20·3	17·8	35·7	10·3	0·95
1966	30·2	19·7	19·0	36·2	11·3	0·93
1967	24·5	18·3	15·6	31·7	8·9	0·81
1968	26·2	16·8	15·5	29·7	10·8	0·91
1969	27·0	16·1	16·3	29·5	6·7	0·84
1970	23·0	16·8	13·0	28·0	10·1	0·83

Neonatal mortality refers here to deaths under 1 month.

The Glasgow birth rate, infant mortality and still birth rate, etc., are compared in the following table with those of Scotland, England and Wales and certain Scottish cities in 1970.

	(1) Birthrate per 1,000 of Population	(2) Stillbirth Rate per 1,000 Live and Stillbirths	(3) Neo-Natal Mortality Per 1,000 Live Births	(4) Perinatal Mortality* Per 1,000 Live and Stillbirths	(5) Infant Mortality per 1,000 Live Births
Scotland	16·8	13·9	12·8	24·8	19·6
Glasgow	17·9	17·0	13·0	28·0	23·0
Edinburgh	14·0	11·6	13·2	22·2	18·5
Aberdeen	14·4	11·0	10·0	20·0	15·0
Dundee	16·1	12·0	10·0	19·0	14·0
England and Wales	16·0	13·0	12·0	—†	18·0
Birmingham	16·7	13·9	15·7	27·5	21·4
Manchester	16·0	15·4	16·7	30·0	23·4
Liverpool	16·0	16·0	13·4	27·2	21·1
Leeds	16·3	15·4	14·0	28·0	23·0

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

† Not yet available.

MORTALITY AMONG TODDLERS

There were 76 deaths among children aged one to five years in 1970, twelve more than the 1969 total.

There were 49 male deaths and 27 female deaths compared with 1969 when these deaths were evenly divided between the sexes.

Accidents continue to be the chief cause of death in this age group accounting for 24 deaths in 1970, 2 more than in 1969. This total is equivalent to 31.6 per cent of all the deaths in this age group compared with 34.4 per cent in 1969.

A variety of accidents was responsible for the deaths of 17 boys and 7 girls as follows :—

	Male	Female
Motor Vehicle Accidents	6	3
Burns and Scalds (including Asphyxia due to fire)	6	2
Poisoning by Drugs	2	—
Inhalation and Ingestion of Food etc.	—	1
Accidental Mechanical Suffocation ...	1	—
Nature of Accident not Specified ...	2	1
	<hr/>	<hr/>
	17	7
	<hr/>	<hr/>

There were 12 deaths from respiratory disease in 1970 compared with only 6 in 1969. Seven of the deaths were males and 5 females and the individual causes were :—Pneumonia (3 males, 4 females). Other respiratory disease (4 males, 1 female).

Infectious disease was the cause of 9 deaths in 1970, one more than the previous year. Measles was responsible for one male death as was 'Enteritis and other diarrhoeal diseases'. Three (2 males, 1 female) were due to meningococcal infection, and the other four (2 males, 2 females) were allotted to the group 'other infective and Parasitic Diseases'.

Congenital anomalies accounted for 18 deaths in 1970 compared with 15 in the previous year. There were 3 male and 2 female deaths from anomalies of the nervous system and ten (4 males and 6 females) from anomalies of the circulatory system. Other congenital anomalies accounted for 2 male and 1 female death.

Malignant Neoplasms were responsible for three deaths in 1970 which is the same number allotted to this group in 1969. There were no deaths from leukemia in 1970, but the following table shows the deaths allotted to this form of cancer since 1963 :—

1963	...	...	4	1964	...	...	4
1965	...	...	3	1966	...	...	5
1967	...	...	3	1968	...	...	4
1969	...	...	2	1970	...	...	—

BURNS AND SCALDS

Burning and scalding accidents sustained by children under five years during 1970 were notified to the Health Department by various hospitals.

There were 533 such accidents notified. In 70 cases the families concerned could not be traced and therefore no details of these accidents were obtained. Information about the remaining 463 cases was collected and is analysed below.

		Male	Female	Total
Number of burns	...	109	65	174
Number of scalds	...	169	120	289
		<u>278</u>	<u>185</u>	<u>463</u>

Age in Years	Burns			Scalds			
	Male	Female	Total	Male	Female	Total	
-1 ...	9	8	17	14	13	27	
-2 ...	45	21	66	101	54	155	
-3 ...	28	17	45	35	27	62	
-4 ...	18	14	32	11	22	33	
-5 ...	9	5	14	8	4	12	
		<u>109</u>	<u>65</u>	<u>174</u>	<u>169</u>	<u>120</u>	<u>289</u>

Hospital admission was necessary for 59 children and there was permanent scarring or disability in 21 cases. One little boy of 14 months died as a result of a scalding accident.

Analysis of the burning accidents showed the undernoted main causes :—

Inadequate fire guard	...	...	...	...	40
Unguarded coal fire	...	...	...	...	27
Unguarded electric or gas fire	...	...	...	...	31
Contact with hot metal, stove, poker etc.,	...	...	...	...	20
Electric Iron	...	...	...	...	12
Faulty electric equipment	...	...	...	...	6
Chemicals	...	...	...	...	5
Lighted paper	...	...	...	...	2
Matches	...	...	...	...	3
Cigarettes	...	...	...	...	1
Fireworks	...	...	...	...	1
Bonfire in garden or backgreen	...	...	...	...	9

The unguarded or inadequately guarded fire was the most frequent causes of burning accidents. The need to have a fixed guard which completely surrounds the heated area of the hearth is not always realised. Often too, it is not appreciated that all sources of heat—electric fires, gas fires and heaters of every kind—should be adequately guarded.

The dress guard provided as a fixture on electric fires is not a sufficient protection and many children received quite severe finger burns by poking between the bars of such guards. The electric iron left cooling in an accessible place also caused a number of burns. The commonest cause of scalding accidents was the overturning of a cup or

bowl of hot liquid which had been left within easy reach of a young child. Another hazard was the dangling flex of an electric kettle and six children were scalded because the parent failed to put cold water into the bath before adding the hot water.

Poor housing and overcrowding were considered to have contributed to the accidents in 52 cases and family disharmony in 30 cases. Poverty was thought to be a contributory factor in 14 accidents. In most instances, however, there were no obvious circumstances which might have made the family more accident prone but the case histories did illustrate the need for constant forethought and care if danger is to be eliminated from the home.

CHILD WELFARE SCHEME

The following table gives the attendances at each consultation centre during 1970 with the corresponding total figures for the previous year:—

ATTENDANCES AT INFANT CONSULTATIONS, 1970

	No. of Con- sultations held	1970—Total No. of Attendances	
		Prim.	Sub.
<i>Central—</i>			
Anderston	149	322	2,468
Partick	152	575	3,920
Blawarthill	205	514	5,953
Netherton	101	255	1,809
Drumchapel	253	443	4,327
<i>North—</i>			
Provan	250	480	3,942
Springburn	152	575	5,180
Denmark Street	149	280	2,883
Milton	104	163	1,991
Cowcaddens	203	451	5,305
Maryhill	205	806	4,294
<i>East—</i>			
Redan Street	357	986	7,408
Shettleston	305	668	5,184
Carntyne	249	606	6,034
Rogerfield	149	293	3,410
Garthamlock	52	145	1,225
Easterhouse	156	382	3,296
<i>South-East—</i>			
Gorbals	201	397	4,257
Pollokshaws	155	260	3,094
Balvicar Street	256	623	9,338
Oatlands	100	168	2,587
Mount Florida	218	512	5,435
Arnprior Quadrant	152	359	4,184
Barlia Drive	153	405	4,471
<i>South-West—</i>			
Pollok	201	464	4,494
Weir Street	104	163	1,642
Govan	188	305	3,044
Elderpark	152	429	3,559
Penilee	52	125	1,868
Berryknowes	101	229	2,720
	5,224	12,383	119,322

131,705

Antenatal Consultations.—Sessions at antenatal clinics numbered 2,016 compared with 2,131 for the preceding year. The total attendances were 19,360 compared with 21,639 in 1969. Primary attendances were 2,516 or 228 less than the previous year (1969), and subsequently attendances numbered 16,844, a decrease of 2,051. Consultations and attendances at each of the centres are shown in the following table :—

ATTENDANCES AT ANTENATAL CLINICS, 1970

	No. of Clinic Sessions	Number of Attendances			Hospital Cases
		Primary	Subsequent	Total	
Richard Street ...	—	—	—	—	—
Partick ...	100	149	689	838	3
Blawarthill ...	51	32	288	320	—
Netherton ...	52	12	84	96	1
Drumchapel ...	98	97	617	714	3
Provan ...	52	25	167	192	1
Springburn ...	52	122	278	400	1
Denmark Street	52	35	270	305	3
Milton ...	27	11	39	50	—
Cowcaddens ...	101	104	942	1,046	32
Maryhill ...	104	147	824	971	—
Orr Street ...	152	225	1,556	1,781	5
Shettleston ...	52	112	726	838	7
Carntyne ...	52	22	172	194	—
Easterhouse ...	52	49	271	320	2
Rogerfield ...	52	39	346	385	3
Gorbals ...	153	265	1,451	1,716	—
Pollokshaws ...	50	40	204	244	1
Balvicar Street	101	160	1,137	1,297	1
Oatlands ...	51	36	314	350	—
Mount Florida	51	70	533	603	13
Arnprior Quadrant	52	49	367	416	—
Barlia Drive ...	52	91	663	754	1
Pollock ...	100	143	786	929	5
Govan ...	111	127	1,067	1,194	—
Elderpark ...	149	237	1,904	2,141	—
Penilee ...	48	41	428	469	—
Berryknowes ...	49	76	721	797	—
	<u>2,016</u>	<u>2,516</u>	<u>16,844</u>	<u>19,360</u>	<u>82</u>

ATTENDANCES AT POSTNATAL AND CONSULTATIVE CLINICS, 1970

	No. of		Primary		Subsequent		Total	
	Post-natal	Consultative	Post-natal	Consultative	Post-natal	Consultative	Post-natal	Consultative
Richard Street ...	—	—	—	—	—	—	—	—
Partick ...	55	50	23	143	3	153	26	296
Blawarthill ...	51	—	16	—	3	—	19	—
Netherton ...	52	—	7	—	—	—	7	—
Drumchapel ...	54	45	40	111	15	82	55	193
Provan ...	52	11	2	17	—	1	2	18
Springburn ...	52	14	4	15	—	3	4	18
Denmark Street	52	—	5	—	—	—	5	—
Milton ...	12	—	8	—	2	—	10	—
Cowcaddens ...	53	47	89	131	248	455	337	586
Maryhill ...	54	44	24	102	6	121	30	223
Orr Street ...	55	45	30	126	22	91	52	217
Shettleston ...	52	41	53	172	25	186	78	358
Carntyne ...	52	—	20	—	9	—	29	—
Easterhouse ...	52	—	15	—	2	—	17	—
Rogerfield ...	52	—	17	—	1	—	18	—
Gorbals ...	55	49	90	294	23	132	113	426
Pollokshaws ...	50	—	9	—	2	—	11	—
Balvicar ...	52	47	53	141	4	81	57	222
Oatlands ...	51	—	9	—	1	—	10	—
Mount Florida ...	51	45	27	109	1	120	28	229
Arnprior Quadrant	52	—	26	—	8	—	34	—
Barlia Drive ...	52	9	23	29	5	14	28	43
Pollok ...	55	44	35	104	—	96	35	200
Govan ...	54	25	13	64	1	58	14	122
Elderpark ...	54	52	38	419	7	386	45	805
Penilee ...	48	—	14	—	2	—	16	—
Berryknowes ...	49	—	24	—	9	—	33	—
	1,373	568	714	1,977	399	1,979	1,113	3,956

MOTHERCRAFT CLASSES

Training in mothercraft and preparation for labour form a very important part of antenatal care. Tuition is given either during antenatal sessions or at a class held specially for this at the various clinics. One health visitor teaches mothercraft full-time and holds classes at certain of the clinics, the teaching in the others being undertaken by the health visitor of these clinics. The course covers simple instruction in physiology of pregnancy and labour, preparation for confinement, preparation of layette, infant feeding, bathing and general care, and instruction in psychoprophylaxis.

The classes are open to any expectant mother and are not limited to those in attendance at the antenatal clinics. General practitioners are encouraged to send along any expectant mothers under their care who may wish to benefit from the teaching provided at the clinic.

"Health of Mother and Child."—A new edition of this book became available in the autumn of 1966. In 1970, 1,496 copies of this book were sold compared with 1,391 copies in 1969.

Of the 1,496 copies sold in 1970, 285 of these were sold at clinics, day nurseries, etc., 650 at the Royal Maternity Clinic, 500 to hospitals and 61 to the general public.

In 1969, 468 copies were sold at clinics, day nurseries, etc., 500 at the Royal Maternity Clinic, 400 to hospitals and 23 to the general public.

ULTRA-VIOLET RAY CLINIC

It is desirable to continue the arrangements for light treatment of certain children.

RECORD OF ATTENDANCES AND CONSULTATIONS DURING 1970

Number of Clinics held	Children - 1 year		Children + 1 year		Mothers		Total	
	Number of Attendances		Number of Attendances		Number of Attendances		Number of Attendances	
	Prim.	Sub.	Prim.	Sub.	Prim.	Sub.	Prim.	Sub.
Provan ... 101	—	—	26	508	—	—	26	508

DENTAL TREATMENT OF EXPECTANT AND NURSING MOTHERS AND PRE-SCHOOL CHILDREN

The situation in Glasgow regarding pre-school children is particularly disturbing as the figures show that in 1970 over 60 per cent of the 3 to 4 year olds who required treatment did not receive any treatment at all from either L.A. dentists or the general dental practitioners. The present establishment of our Service only allowed us to examine less than half of the year's new school entrants. In the 7,064 examined it was found that 5,378 had untreated decay, several teeth being involved in the majority of cases. Fluoridation of water could have reduced these children's dental caries by more than half.

SUMMARY OF CLINICAL ATTENDANCES AND TREATMENTS

Total attendances 1,752; first attendances 657; fillings 681; extractions 1,040; general anaesthetics 157; other operations 877; dentures 101.

The following figures give the position now existing in Glasgow compared with the previous year.

PRE-SCHOOL CHILDREN	1969-70	1968-69
Number of pre-school children aged 3 and 4 ...	35,000	34,000
Estimated number requiring treatment (70 per cent.)	24,500	23,800
Number treated by S.H.S. (full-time equivalent 26 operators)	538	564
Number treated by G.P.'s. (approximately 215) ...	9,117	9,845
Total treated (partially and fully)	9,655	10,409
Number requiring treatment but remaining completely untreated	14,845	13,391

FAMILY PLANNING

During 1970 Family Planning Clinics under Local Health Authority in Glasgow were increased by the provision of a weekly clinic session at Easterhouse Clinic, commencing on 16th March. The five clinics which had begun in 1969 continued during 1970 with increasing numbers of patients making use of the services provided.

From 1st September, 1970, patients were also accepted if seeking advice on other than medical grounds.

The number of new patients attending in 1970 was 680, of whom 372 had a medical indication for family planning advice.

The age range of patients was as follows :—

Under 20 years	43
From 20-24 years	217
From 25-29 years	227
From 30-34 years	117
From 35-39 years	54
40 years and over	22

Parity was as follows :—

0 —	3
1 —	98
2 —	189
3 —	174
4 —	102
5 —	50
6 —	27
7 —	20
8 —	12
8+—	5

Referral came from various sources, mainly from clinic medical officers and health visitors.

Referred by hospital	...	...	...	13
Referred by clinic medical officer	...	...	...	118
Referred by health visitor	...	...	...	271
Referred by general practitioner	...	...	...	69
Referred by self	...	...	...	180
Referred by others	...	...	...	29

Method of treatment was as follows :—

Oral contraceptives	...	...	...	463
Coil	...	...	...	121
Cap	...	...	...	35
Sterilisation	...	...	...	12
Others	...	...	...	49

Many of the patients attending these clinics require considerable support and encouragement to maintain regular attendance and treatment, and in this the health visitor has an invaluable role. Advantage is being taken of the training courses provided by the Family Planning Association, so that as many members of staff as possible can obtain the necessary knowledge.

In addition to the clinics of the Local Health Authority, the Family Planning Association provide services in four Local Authority Clinics and also in their own clinic at Lansdowne Crescent.

In February, 1970, a pilot scheme was introduced to set up a domiciliary service in one area by the Family Planning Association. Although the actual number of patients was not large, it is doubtful if any of them would have been able to use the other clinic services. It is obvious that this service has a definite value in certain cases with special needs.

Further expansion of Family Planning Services is expected in the near future.

CERVICAL CYTOLOGY

During 1970, facilities for cervical cytology were provided in 13 of the maternity and child welfare centres either weekly or fortnightly. The demand for screening has not been as great or as sustained as had been anticipated, and has had to be stimulated at intervals by various methods of publicity.

The number of women screened during 1970 was as follows :—

At well-women clinics	...	...	3,205
At ante-natal clinics	...	...	367
At post-natal clinics	...	...	628
At family planning clinics	...	...	213
			<hr/>
			4,413
			<hr/>

The age range of women attending well-women clinics was as follows :—

Under 20 years	...	...	18
From 20-29 years	...	...	791
From 30-39 years	...	...	1,050
From 40-49 years	...	...	826
From 50-59 years	...	...	462
60 years and over	...	...	58
			<hr/>
			3,205
			<hr/>

The number of cases requiring further pathological investigation was 11, the final result being as follows :—

Normal epithelium	...	...	2
Benign changes	...	...	1
Dysplasia	...	...	2
Carcinoma in situ	...	...	5
Invasive squamous carcinoma	...	...	1
			<hr/>
			11
			<hr/>

Many patients are found on examination to have other gynaecological conditions requiring treatment and are referred for this to their general practitioner.

RESIDENTIAL HOMES

CARNBOOTH HOUSE

There were 197 admissions to this home in 1970. There were no admissions for segregation before and after B.C.G. vaccination. Eight children were admitted direct from hospital for convalescence. The remainder were recommended by Medical Officers at Child Welfare Centres.

There is always a waiting list for admission, but it is longer in the summer months.

Most of the children admitted come from a poor social environment and there was evidence of a poor standard of maternal care in many of them.

The children quickly show the benefit of good diet, regular routine and open-air exercise. There are good facilities for both indoor play and outdoor play. The children play outside in the spacious grounds whenever the weather permits. These play activities are valuable to these children from backgrounds which are culturally as well as materially deprived.

MILLBRAE HOME

The total number of children admitted in 1970 was 97. Fifteen neonates were admitted for segregation following B.C.G. vaccination. One child was a tuberculosis contact. This child remained in the home for six weeks before and six weeks after B.C.G. vaccination. The remaining 81 children were referred for a period of convalescence. Twenty-five were admitted direct from hospital, The remaining 56 were referred by Medical Officers at Child Welfare Clinics.

Many of the babies have failed to thrive because of maternal incompetence and as well as their poor physical condition a proportion are apathetic and unresponsive.

The improvement in the children, both physically and mentally, is usually very rapid.

SOCIAL WORK DEPARTMENT HOMES

The homes at 9 Winton Drive and 45-47 Maxwell Drive are now administered by the Social Work Department.

Medical supervision for these homes, as well as Eglinton Home, is provided by senior medical officers of the Health Department. Medical care includes supervision of the homes with regard to general hygiene, control and prevention of infection as well as providing general practitioner services for each child.

Eglinton Home continues to have a high proportion of physically and mentally handicapped children. Also many children who are admitted have an adverse perinatal or neonatal history and require careful observation. A number of these are eventually found to have physical or mental handicap.

Visits were paid by arrangement to Blairvadach, Rhu, by a Senior Medical Officer to carry out developmental assessment on children whose developmental progress had been unsatisfactory.

THE "AT RISK" REGISTER

The "At Risk" register continues to be maintained. A small number of "high risk" categories are incorporated in the survey forms on "Obstetric and Social Factors concerned in Child-bearing" which is completed by the health visitor for every child born in the City. This forms the basis of the "At Risk" register which is kept centrally by the computer. A print out of data on each child on the register is sent to the medical officers in the child welfare clinics. Children are kept on the register until 5 years old unless they die, move outwith the City or are transferred to the handicap register.

There are still children born prior to 1969 who are on the old "At Risk" register which had a greater number of categories.

The numbers on the register on 31st December, 1970, were :—

Year of birth	1966	1967	1968	1969	1970	Total
	4	28	110	2,397	2,030	4,569

Two thousand, three hundred and thirty-five children were notified in 1970 as set out below :—

Category	Notification
History of maternal rubella (or contact) in first trimester	203
Low birth weight (less than 4½ lbs.) ...	407
Perinatal Hypoxia	911
Cerebral birth injury	27
Haemolytic disease requiring transfusion ...	51
Other conditions requiring special care ...	1,073
Family history of genetic deafness ...	156
Siblings of cases of genetic disorders ...	193

Some children are notified under more than one category as follows :—

Number of categories	1	2	3	4	5	6	7	8	Total.
	1,793	417	108	15	2	—	—	—	2,335

DEATHS

Six children on the register prior to 1969 died in 1970. Only two were attributable to the risk notified. The causes of death in these two cases were congenital atresia of bile ducts and congenital heart disease.

The causes of death in children notified to the register in 1969 and 1970 have been analysed for the two years since the register was computerised. The survey form on "Obstetric and Social Factors

concerned in Child-bearing" is completed for every child born in the City. Children who died in the perinatal period are therefore included in the register. Prior to 1969 only children alive at the time of the health visitor's first visit were included.

One hundred and eight children born in 1969 and seventy-seven born in 1970 died in the perinatal period. In most cases the cause of death was directly related to the risk category e.g. hypoxia in children dying of congenital cardiac disease. There were eight instances where the relationship was not so direct as set out below.

<i>Cause of death</i>	<i>Risk category</i>
Congenital heart disease	Rubella
Bronchopneumonia	Low birth weight
Spina bifida	Rubella
Haemorrhagic disease of newborn (5)	Low birth weight (5)

Twenty-one children born in 1969 and six children born in 1970 died in the neonatal period. In this period, also, the cause of death in most cases was directly related to the risk category e.g. hypoxia in a child dying of congenital anomaly of aorta, or conditions requiring special care in children dying of congenital anomalies such as spina bifida or cystic fibrosis. In three cases the relationship was not so direct as set out below.

<i>Cause of death</i>	<i>Risk category</i>
Spina bifida	Rubella
Hirschsprung's disease	Rubella and condition requiring special care.
Congenital heart condition	Low birth weight

Fifty-eight children born in 1969 and twenty-one born in 1970 died after the neonatal period. In seventeen cases there was a relationship between the cause of death and the risk category as set out :—

<i>Cause of death</i>	<i>Risk category</i>
Respiratory distress syndrome	Low birth weight
Congenital heart disease (5)	Hypoxia (5)
Congenital heart disease (3)	Condition requiring special care (3)
Spina Bifida (4)	Condition requiring special care (4)
Congenital anomaly upper alimentary tract	Low birth weight and hypoxia
Anomaly larynx trachea or bronchus	Hypoxia
Disorder of steroid metabolism	Condition requiring special care
Hydrocephalus	Hypoxia

DEFECTS

Children born and considered "At Risk" in 1966.

Mental retardation	2
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*Children born and considered "At Risk" in 1967.**Mental defects*

Mentally retarded...	10
Mentally retarded and visual defect	...	...	...	...	1
Cerebral degeneration	...	...	...	...	1

Physical defects

Strabismus	...	...	...	...	1
Blind in one eye	...	...	...	...	1
Agenesis of one lobe of lung	...	...	...	...	1

*Children born and considered "At Risk" in 1968.**Mental defects*

Mental retardation	...	...	...	...	9
Subdural haematoma (Battered baby)	...	...	...	...	1
Brain damage	...	...	...	...	1
Mongolism	...	...	...	...	1

Physical defects

Strabismus	...	...	...	...	7
Coloboma of retina	...	...	...	...	1
Oxycephaly	...	...	...	...	1
Paresis left leg (spina abscess)	...	...	...	...	1
Paresis right arm and leg (due to a fall)	...	...	...	...	1
Hemiplegia	...	...	...	...	1
Shortening of one leg	...	...	...	...	2
Talipes	...	...	...	...	1
*****Spina bifida	...	...	...	...	5
Cerebral palsy	...	...	...	...	5
**Cleft palate	...	...	...	...	2
**Cleft palate and hare lip	...	...	...	...	2
*Hare lip	...	...	...	...	1
Coeliac disease	...	...	...	...	1
Fibrocystic disease	...	...	...	...	1
**Congenital heart disease	...	...	...	...	9
*Methaemoglobinaemia	...	...	...	...	1
Urinary infection	...	...	...	...	2
Urinary tract abnormality	...	...	...	...	2
Nephrectomy	...	...	...	...	2

Of the above defects thirteen, indicated by asterisks had been present when the child was put on the register.

Fifty-nine children born in 1969 were transferred from the risk register to the "Handicap" register in 1970. The risk categories and number of handicapped in each is set out below :—

<i>Category</i>	<i>Notifications</i>	<i>Handicapped</i>
Rubella	261	2
Low birth weight	594	14
Hypoxia	1,149	28
Cerebral birth injury	45	4
Rhesus incompatibility	81	1
Conditions requiring special care	1,171	34
Family history of genetic deafness	220	2
Siblings of cases with genetic disorder	328	8

Forty-six children born in 1970 were transferred from the "At Risk" register to the "Handicap" register in 1970. The risk categories and the number of handicapped in each is set out below—

<i>Category</i>	<i>Notifications</i>	<i>Handicapped</i>
Rubella	203	3
Low birth weight	407	6
Hypoxia	911	22
Cerebral birth injury	27	1
Rhesus	51	0
Conditions requiring special care ...	1,073	35
Family history of genetic deafness ...	156	0
Siblings of cases with genetic disorder	193	2

HANDICAP REGISTER

The purpose of this central register is to record details of the handicapped children in Glasgow, to estimate the services which they require and to ensure regular close surveillance of their progress. The initial notification to the register is usually made by the health visitor but the clinic medical officer has the ultimate responsibility for notification. The forms used for notification are those issued by the Department of Home and Health. One copy is retained at the local clinic, one copy is kept centrally and one copy is sent to the Department so that the information can be collated by computer.

In 1970, there were 321 children notified to the register. Of this number 59 had been on the "At Risk" register. Since notification, four children have died and one has left Glasgow.

The age at notification was as follows :—

-7 days	0
8 - 28 days	24
29 days - 1 year	121
-2 years	58
-3 years	43
-4 years	37
-5 years	34
-6 years	4
	<hr/>
	321
	<hr/>

Defects such as mongolism or talipes which are easily recognised tend to be notified early but other defects such as congenital cardiac

lesions may not be diagnosed until later while mental handicap without physical stigmata may not be noted until the child fails to make normal progress. There were 48 children with two defects, four with three defects and a child who had four conditions which required treatment and supervision.

The types of handicaps noted are listed below :—

Sensory—

Deaf	...	...	...	...	1
Partially deaf	...	...	...	...	11
Blind	...	...	...	...	3
Partially sighted	...	...	...	...	6
Other sensory defect—					
Colobomata of iris	...	...	...	1	} 7
Congenital cataract	...	...	...	1	
High myopia	...	...	...	1	
Nystagmus	...	...	...	2	
Orbital fibrosis with divergence of eyes	...	...	...	1	
Strabismus	...	...	...	1	

Neuro-psychiatric—

Mental defect : educable	...	...	...	15
Mental defect : trainable	...	...	...	7
Mental defect : not trainable	...	...	...	5
Mental defect : degree not yet determined	...	...	...	63
Brain damage—cerebral palsy	...	...	...	39
Other brain damage	...	...	...	11
Epilepsy	...	...	...	13
Spina bifida and/or hydrocephalus	...	...	...	28
Speech defect	...	...	...	5

Orthopaedic—

Deformity of one or both upper limbs	...	...	...	4
Deformity of one or both lower limbs	...	...	...	25
Defects of spine (other than spina bifida)	...	...	...	2
Paralysis of limbs, back or trunk	...	...	...	3
Other orthopaedic defect—				
Congenital dislocation of hip	...	...	...	6
Perthes' disease	...	...	...	1
Multiple skeletal abnormality	...	...	...	1
Abnormality of nasal bones...	...	...	...	1

Non-Orthopaedic—

Heart disease—congenital or acquired	51
Diabetes	1
Metabolic disease—	
Coeliac disease	10
Fibrocystic disease of pancreas ...	12
Phenylketonuria	4
Cleft palate and/or hare lip	23

Skin conditions—

Multiple haemangiomata... ..	1
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Others—

Absence of external auditory meatus and pinna	1
Absence of scrotum and penis (result of assault)	1
Bifid sacrum	1
Christmas disease	1
Congenital abnormality of urinary tract	3
Congenital laryngeal stridor	1
Hirschsprung's disease	2
Hypospadias	2
Imperforate anus	1
Malformation of penis	1
Multiple congenital abnormalities ...	1
Nephrotic syndrome	1
Neurophatic bladder	1
Pierre Robin's syndrome	1
Ptosis of eyelid	1
Scarring from scalding accident	1
Turner's syndrome	1

During 1970 there were 30 children notified to the register in previous years who died, 54 who left Glasgow, 6 who could no longer be traced and 19 who were removed from the register because they had ceased to be handicapped.

The following table shows the total number of children on the register at 31st December, 1970, and gives the main disability by age and sex.

HANDICAPPED REGISTER

NUMBER ON REGISTER AS AT 31ST DECEMBER, 1970

MAIN DISABILITY BY AGE AND SEX

DISABILITY			AGE GROUPS				
			Under 1	1 to under 2	2 to under 3	3 to under 4	4 to under 5
01	Deaf	M	—	—	—	—	3
		F	—	—	—	—	—
02	Partially Deaf	M	—	2	1	2	3
		F	1	—	1	1	2
03	Blind	M	2	1	1	—	—
		F	—	—	1	1	—
04	Partially Sighted	M	—	3	2	5	4
		F	—	2	1	4	1
05	Other Sensory	M	—	1	—	1	—
		F	—	1	—	—	1
11	Mental Defect—Educable	M	—	—	3	8	4
		F	—	1	1	4	3
12	Mental Defect—Trainable	M	1	2	2	6	9
		F	2	1	1	6	3
13	Mental Defect— Not Trainable	M	—	—	1	3	1
		F	—	1	2	2	1
14	Mental Defect Undetermined	M	4	14	17	20	22
		F	4	5	11	13	11
15	Psychosis	M	—	—	—	—	—
		F	—	—	—	—	—
16	Maladjustment	M	—	—	—	—	—
		F	—	—	—	—	—
17	Brain Damage— Cerebral Palsy	M	2	11	6	10	19
		F	—	6	6	7	7
18	Other Brain Damage	M	—	4	4	4	5
		F	—	2	3	4	3
19	Epilepsy	M	—	1	—	5	6
		F	—	1	—	4	5
20	Spina Bifida/Hydrocephalus	M	7	12	13	12	6
		F	8	10	10	7	14
21	Speech Defect	M	—	—	—	1	4
		F	—	—	—	—	1
22	Other Neuro/Psy. Defect	M	—	—	1	2	3
		F	—	—	—	1	2
31	Absence of Upper Limb(s)	M	—	—	—	—	—
		F	—	1	—	1	—
32	Absence of Lower Limb(s)	M	—	—	—	—	—
		F	—	—	—	—	—
33	Deformity of Upper Limb(s)	M	—	3	3	1	4
		F	—	1	2	2	—
34	Deformity of Lower Limb(s)	M	10	7	9	5	5
		F	2	4	7	6	9
35	Spinal Defect (Not S. Bifida)	M	1	—	—	—	—
		F	—	—	—	—	1
36	Paralysis	M	—	—	1	2	3
		F	1	—	—	—	4
37	Orthopaedic	M	—	4	1	2	2
		F	2	8	3	5	2
41	Heart Disease	M	6	11	22	17	9
		F	9	18	17	14	13
42	Diabetes	M	—	—	—	1	—
		F	—	—	1	—	1
43	Other Metabol.	M	3	5	7	6	17
		F	1	4	10	9	16
44	Cleft Palate	M	7	7	9	7	7
		F	5	8	6	4	4
45	Asthma	M	—	—	—	—	—
		F	—	—	—	—	—
46	Skin Conditions	M	—	—	—	—	—
		F	—	—	—	—	—
47	Allergic Disorder	M	—	—	1	—	—
		F	—	—	—	—	—
48	Other	M	4	8	8	—	9
		F	4	2	8	6	4
	Total	M	47	96	112	120	145
	Total	F	39	76	91	101	108

REPORT ON THE ASSESSMENT AND ADVISORY CENTRE
GLENFARG STREET, N.W.

Total number of children referred in 1970	...	...	...	143
Sources of referral :—				
Hospital Paediatricians	...	...	...	6
Family Doctors	...	...	...	1
Social Work Department	...	...	...	3
Social Paediatrics	...	...	...	13
Audiologist	...	...	...	1
Child Welfare Medical Officers	...	...	...	119
			Total	143

The ages of children on referral were :—

- ½ yr.	- 1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	Total	
—	1	25	28	41	48	143	
<i>Number of Sessions</i>		237					
Total under supervision		Male	...	227	Female	...	182
Total Attendances		Male	...	534	Female	...	370

In addition, one visit was paid to Blairvadach Home, Rhu, to carry out developmental tests.

Primary diagnosis of new cases referred in 1970—

Normal	...	...	...	...	...	7
Developmental Delay	...	...	...	...	...	10
Developmental Speech Disorder	...	...	...	...	...	7
Aphasia	...	...	...	...	...	1
Primary Retardation	...	...	...	...	...	23
Retardation associated with other congenital abnormalities	...	...	...	...	...	4
Mongol	...	...	...	...	...	16
Cerebral damage	...	...	...	...	...	6
Cerebral degeneration	...	...	...	...	...	1
Metachromatic Leukodystrophy	...	...	...	...	...	1
Cerebral Palsy	...	...	...	...	...	18
Hemiplegia following valvotomy for Fallot's tetralogy	...	...	...	...	...	1
Hydrocephalus	...	...	...	...	...	4
Spina bifida	...	...	...	...	...	6
Spina bifida associated with hydrocephalus	...	...	...	...	...	13
Epilepsy	...	...	...	...	...	6
Infantile Spasms	...	...	...	...	...	1
Partial Hearing Loss	...	...	...	...	...	7
Deaf	...	...	...	...	...	1
Visual Defects	...	...	...	...	...	3
Fibrocystic disease	...	...	...	...	...	1
Valgoid deformity of feet	...	...	...	...	...	1
Abnormality of Kidneys	...	...	...	...	...	1
Obesity	...	...	...	...	...	1
Behaviour problems	...	...	...	...	...	2
Not yet diagnosed	...	...	...	...	...	1

Comment on diagnosis.—A proportion of children who are subsequently classed as normal is to be expected among the referrals. Some are children whose family history or developmental progress suggests that the child may be retarded. A few are referred for an opinion prior to fostering or adoption.

At the time of writing the report there are children whose history suggests that their developmental delay may be temporary. As there had not been a sufficiently long period to be certain they were classed as developmental delay rather than mentally retarded.

Children are frequently referred because of failure to develop speech or poor speech development. If there were no underlying factor such as hearing loss, mental retardation or severe emotional disturbance the cases were classed as developmental speech disorder.

Paediatric Consultant.—A paediatrician with a special interest in neurology now attends on a regular basis once a month.

Educational Psychologist.—The psychologist attends at one session a month. When there are a large number of children approaching school age extra sessions are required. It is an advantage for a child to be tested at the Centre where the environment is familiar and the psychologist has access to previous tests and a record of the child's progress.

Each new referral has a psychological or development test and this is usually repeated annually to assess progress. The psychologist concentrates on children approaching school age and the rest of the testing is carried out by the medical officers.

Speech Therapist.—A speech therapist was appointed in September, 1970, and attended on three sessions weekly. Many retarded children have disproportionally slow language development and a poor pattern of speech.

Thirty-one children were seen by the therapist. Twenty-eight had full speech assessment. Fifteen children were accepted for immediate treatment.

Speech failure is one of the features of mental retardation that most distresses parents and help and advice from a speech therapist are greatly appreciated.

Health Visitors.—There is one full-time health visitor attached to the centre. Three health visitors from different areas of the City each attend on one session a week. They act as liaison health visitors for

their own areas. Despite this the full-time health visitor has a considerable amount of travelling. A large proportion of her time is also used in consulting with other health visitors and social agencies both statutory and voluntary.

Liaison with Education Health Service.—As children approach school age a joint consultation is held at the centre with a Medical Officer of the Education Health Service. The probable school placement of the children is discussed with the parents and some explanation of the type of training or education is given.

The following new placements for pre-school children were made in 1970.

Day Nursery	...	...	...	...	...	2
Special Day Nursery (Broomhill)	...	...	...	...	...	15
Nursery Schools	...	...	...	...	...	14
Kelbourne (Aphasia Unit)	...	...	...	...	...	2

There is a shortage of places of all types of nursery provision, so that it is impossible to obtain places for all the children who could benefit from attendance in ordinary nurseries or special nurseries.

There is a need for the provision of day care for grossly handicapped children whose care imposes considerable strain on their families.

The Association for the Mentally Handicapped continues to provide valuable help in admitting children to the Day Centre at Laurieston House.

We are also indebted to the Ladies of Wellington Church who run a play group for handicapped children. This has to be confined to children who live within reasonable distance from the church.

The Centre continues to collaborate with the Department of Virology, Ruchill Hospital in an investigation into the role of maternal virus infection, in relation to handicap in children.

Parents' Group.—Three meetings were held in 1970. A good proportion of fathers attend. Parents find support and encouragement in meeting others with similar problems and some parents have found friendships of value to them, through contact at a meeting.

Each year the total case load of the Centre increases. This is paralleled by an increased number of attendances at the clinic and home visits. A large proportion of children attending come from the East end of the City and from areas such as Easterhouse they have a considerable distance to travel to the Centre. Another Centre to serve these areas is now becoming necessary.

THE BALVICAR CENTRE (CHILD DEVELOPMENT)

New cases during 1970, have again increased. (Males, 97 ; Females, 47 ; Total, 144.)

The sources of referral are shown in the table below :—

Age Source	- 6 mths.		6 mths.-1		1-2		2-3		3-4		4-5		Total		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Child Welfare Medical Officers ...	2	2	17	5	13	5	15	7	14	10	16	9	77	38	115
General Practitioners ...	1	—	1	—	1	1	—	1	2	2	3	3	8	7	15
School Health Service ...	—	—	—	—	—	—	—	1	—	—	2	—	2	1	3
Hospitals ...	—	—	—	—	1	—	2	1	—	—	—	—	3	1	4
Social Work Department Transfers In ...	—	—	—	—	—	—	1	—	3	—	—	—	4	—	4
Transfers In ...	—	—	1	—	—	—	1	—	—	—	1	—	3	—	3
Total	3	2	19	5	15	6	19	10	19	12	22	12	97	47	144

ANALYSIS OF AGE, SEX AND SOCIAL CLASS

Social Class	- 6 mths.		6 mths.-1		1-2		2-3		3-4		4-5		Total		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
I	—	—	1	—	—	—	—	—	—	1	—	—	1	1	2
II	—	—	1	—	1	1	4	—	2	—	4	—	12	1	13
III	2	2	10	2	5	3	5	6	9	9	8	7	39	29	68
IV	—	1	4	1	3	—	6	1	2	—	5	3	20	6	26
V	—	—	4	1	5	3	5	2	7	1	4	3	25	10	35
Total	2	3	20	4	14	7	20	9	20	11	21	13	97	47	144

Referrals continue to be mostly from Child Welfare Medical Officers. There is a slight rise in the number of early referrals, indicating increased awareness of the importance of this aspect of the work.

Routine return visits to the Centre numbered 308 (193 males ; 115 females).

Number of children on the register at the end of 1970 was 220 (142 males ; 78 females).

All new patients continue to be screened for hearing, vision and psychological testing and the multi-disciplinary team approach to diagnosis, treatment and management is satisfactorily fulfilling the needs of patients and parents. Multiple handicaps are common.

Children seen by Visiting Consultants (at Balvicar Centre)—

	Male	Female	Total
Ophthalmologist ...	73	39	112
Orthopaedic Surgeon ...	75	41	116
Otologist ...	5	3	8
Paediatrician ...	26	10	36
Neurologist ...	20	7	27
Child Psychiatrist... ..	1	—	1
Psychiatrist (Mental Deficiency)	—	2	2
Dentist ...	11	7	18
Educational Psychologist ...	20	23	43
Audiologist ...	96	47	143
Griffiths Developmental Tests carried out by Medical Officers at Centre	108	52	160

<i>Condition or Diagnosis—</i>	Male	Female	Total
N.A.D.	4	2	6
Cerebral Palsy	20	5	25
Spina bifida/Hydrocephalus ...	16	4	20
Congenital Disease of Hip ...	—	3	3
Cardiac Heart Disease	2	1	3
Erb's Paralysis	1	—	1
Renal Abnormality	1	—	1
Multiple Naevi	1	—	1
Partially Sighted	1	—	1
Partially Deaf	7	3	10
Deaf	1	1	2
Visual Defects	17	11	28
<i>Minimal Cerebral Dysfunction—</i>			
Dysphasia	25	12	37
Hyperkinesia	1	2	3
Epilepsy	2	—	2
Mental Retardation	31	16	47
Down's Syndrome	4	3	7
Turner's Syndrome	—	1	1
Laurence-Moon-Biedl Syndrome	1	—	1
Microcephaly	1	—	1
Amsterdam Dwarf	—	1	1
Phenylketonuria	1	1	2
Rhesus Incompatibility	2	1	3
Physical Defects (including Prematurity, Anaemia, etc.) ...	4	4	8
Behaviour Problems	15	4	19
Adverse Social Conditions ...	4	2	6

Special Day Nursery.—During the year 19 children (12 males, 7 females) were admitted and 17 children (9 males, 8 females) were dismissed.

<i>Play Therapy—</i>	Male	Female	Total
No. of children attending Play Therapy Groups	38	21	59
No. of New Patients	27	7	34
Total Attendances	284	205	489
<i>Physiotherapy—</i>			
No. of children attending for treatment	6	5	11
No. of treatments	323	227	550

Speech Therapy.—As no Speech Therapist was available for part of the year, figures cannot be quoted for the whole year but the following indicates the trend :—

	Male	Female	Total
No. of children assessed	8	5	13
No. of children treated	5	3	8

In general all these therapies are administered once weekly, but in order to obtain the best results more frequent sessions should be available. It is regrettable there is a waiting list for all of these and consequent delay in treatment.

<i>Analysis of Dismissals—</i>				Male	Female	Total
Ordinary School	...	...		21	10	31
Special School	...	...	...	6	7	13
Occupational Centre	...	...		6	3	9
Unfit for Education or Training (Section 66B)	...	...	...	5	5	10
Permanent Residential Care	...	...	...	2	1	3
Nursery Class—						
Kelvin School	...	...		2	—	2
Kelbourne School (Aphasic)	...	...	...	1	1	2
Kelbourne School (Spastic)	...	...	...	3	1	4
Problem Resolved	...	...		8	—	8
Social Work Department Cases—						
Assessment Complete	...	...	...	4	1	5
Transferred outwith Area	...	...	...	9	7	16
N.A.D.	...	...	...	1	—	1
Refused to return to Centre	...	...	...	4	2	6
Removed—Address Unknown	...	...	...	5	2	7
Emigrated	...	...	...	2	—	2
Died	...	...	...	1	1	2
				80	41	121

Parents' Meetings.—These evening meetings have again been held and are well attended. This informal service is appreciated especially by the fathers who cannot be present at the Centre in working hours.

Voluntary Workers.—A small number of ladies render assistance in play therapy, transport and other general duties. This help enables the staff to deal with more patients and is greatly appreciated.

Teaching and Research.—The staff undertake instruction in developmental paediatrics to postgraduates and students and the following have attended the Centre :—

Post Graduate Course in Mental Deficiency (Glasgow University).

Course for Senior School Medical Officers (Society of Medical Officers of Health).

Course for Clinical Psychologists (Glasgow University).

Health Visitors Course (Corporation of Glasgow).

Course for Personnel in Occupational Centres (Jordanhill College).

Course for Speech Therapists.

General Remarks.—During the year the staff have welcomed to the Centre, Medical Officers, Nurses, Social Workers and others from the United Kingdom and Overseas.

Films have been prepared which are used by the staff at meetings of both professional and lay audiences. In this way an endeavour is made to inform the public regarding the work of the Centre.

The Medical Officers of the Centre were invited to make contributions to the following :—

The International Round Table Conference held in The Hague in March 1970, where the social implications of educational counselling and vocational guidance were considered.

The Symposium on Developmental Paediatrics at the Scottish Home and Health Department in Edinburgh.

The Scottish Branch of the Society of Medical Officers of Health, submitting evidence on the training of Occupational Centre Instructors, and also on the Committee of Enquiry into Speech Therapy services.

Mention of Balvicar Centre was made on a B.B.C. programme, entitled "Caring for People", and an interesting letter from Durban, South Africa, gave news of a Child Development Centre which had been modelled on Balvicar Centre, as described in the "Journal of Developmental Paediatrics and Child Neurology".

SOCIAL PAEDIATRIC RESEARCH GROUP

Staff Changes.—Dr. Elizabeth White left in November to become a lecturer in the Department of Public Health, University of Bristol.

Miss Mary T. Reid was appointed Field Worker on 1st October to undertake a study of child health services. She was previously a Health Visitor on the staff of the Health Department.

Research Projects.—An outline of the research being conducted by the Group is given below. In all these investigations valuable help has been received from the Health Department's medical, health visiting, maternity and clerical staff and the Corporation's computer department. Generous financial support of these projects has been provided by the Scottish Hospital Endowments Research Trust, the Scottish Home and Health Department and the Children's Research Fund.

The Glasgow Child Health Record Linkage System.—Development of this system and continued arrangements were made for the inclusion of obstetric records (the Scottish Home and Health Department SMRM form) and in-patient records (SMR1). It is anticipated that, during 1971, the linked data will be used to identify and compile registers of vulnerable families.

Glasgow Obstetric Survey.—Two investigations were conducted during 1970 :—

1. Computer analyses were made of births and perinatal deaths in 1969 using the linked data. Some of the important trends are shown in Table 1. A decline in total births occurred from 1967 to 1969 accompanied by an increase in the illegitimate birth rate and an increase in hospital confinement rates. In spite of an improvement in selection for hospital confinement of women with certain criteria, substantial numbers of high parity births were still occurring at home.

The efficiency of zoning for hospital care was investigated and some of the findings are presented in Table 2.

Reason for the widely differing hospital perinatal mortality rates (ranging from 3.5 per thousand to 53.4 per thousand) were examined and were found to be related to the proportion of low birth weight infants at each hospital and the percentage of births to women admitted as emergencies having had no hospital care. These results will be published later along with data for births in 1970.

2. From 1st January, 1970, the Domiciliary Midwifery Service completed a Scottish Home and Health Department Maternity Record Form (SMRM) for each domiciliary birth attended. These records were used for analyses for births in January to June 1970.

Of the 495 cases delivered at home, 361 (73 per cent) had been booked for home confinement, 106 (29 per cent) for hospital and 28 (6 per cent) were emergencies having had no antenatal care. Each case was allocated to a risk category based on maternal age and parity and previous obstetric history (Table 3) and according to the recommendations of the Montgomery Report all cases classed as medium or high risk should be delivered in hospital. At least 73 per cent of those booked for home confinement should, therefore, have been delivered in hospital.

The mean height of women delivered at home was 5.2" but 168 (34 per cent) were under 5.2" including 23 who were under 5.0".

Of the 361 cases booked for home confinement and delivered at home, 16 per cent had booked a midwife before 17 weeks, but 40 per cent had delayed until 30 weeks or later. A long interval elapsed in many instances between confirmation of the pregnancy by the G.P. and receipt of an application for the services of a midwife; in at least 40 per cent it was 10 weeks or longer and in at least 15 per cent it was 20 weeks or more.

Some of the antenatal complications recorded were: threatened abortion (10), anaemia (27), unstable lie (15), pyelitis (10) and toxæmia (18).

33 women booked for home confinement were admitted to hospital in labour, the most frequent reasons being first-stage delay (11), antepartum haemorrhage (10), malpresentation (6) and premature labour (3). 21 women were admitted to hospital in the third stage of the puerperium, the most frequent reasons being retained placenta (8) and severe postpartum haemorrhage (7).

53 infants were admitted to hospital, the most frequent reasons being low weight (10), poor home circumstances (10), following resuscitation (12) and congenital defect (8).

14 perinatal deaths (including 9 stillbirths) occurred among the 495 home confinements, 7 being in cases booked for home confinement, 4 in women booked for hospital confinement and 3 in emergency cases. Of these 14 deaths, 6 were due to congenital malformation but the other deaths might well have been prevented by good obstetric care; 12 of these perinatal deaths were in the high risk cases.

Studies in Child Development.—The second part of this three-year survey was completed during 1970. Infants, randomly sampled, were examined in their homes at 12-weekly intervals starting at 4 weeks and of the original sample of 168 infants, 123 were seen at all five ages, plus or minus one week. The large amounts of data collected in this study are being analysed by computer and, it is hoped, will provide useful information on the rates and ranges of development in infancy and on their determinants.

Malformations of the Central Nervous System.—Using the register of Glasgow births in 1964 to 1968 with neural tube defects (compiled by Dr. T. S. Wilson) two studies were made of this group of malformations:

1. The family problems of 86 survivors were investigated by domiciliary visiting. How the parents were told, their reaction to the news

and the social and educational needs of these families have all been documented.

2. A genetic study of anencephalus and spina bifida in which the City's health visiting staff played an active role.

The results of these two investigations will be published in due course.

The Organisation and Utilisation of Child Health Services.—The use made of child welfare clinics in Glasgow is poor, especially after the first year, and this investigation is being conducted to determine parental attitudes to these services and the reasons for non-attendance. Samples of children at their first to fourth birthdays have been selected and the information is being collected by domiciliary visiting.

Respiratory Diseases in Childhood.—During the course of data collection in the above survey, a respiratory symptoms questionnaire is being completed for each child selected. This is a pilot study and may lead on to a larger investigation of this important problem.

Colloquium.—Dr. Daniel Reid, Consultant in the Epidemiology of Communicable Diseases, gave an illustrated talk on "Gamma-globulin in the prevention of hepatitis and rubella".

Other Activities.—Members of the Group lectured to outside bodies, participated in the training of health visitors and took part in a B.B.C.2 "Horizon" programme dealing with the uses of statistics (based mainly on Glasgow).

Dr. Richards was awarded a Council of Europe Fellowship to study computer applications in health service management in Sweden and the Netherlands.

Visitors :—

Dr. K. G. Ball of South Australia.

Dr. A. L. Skinner of the American Academy of Pediatrics, Washington, U.S.A.

Dr. Tutchinde of Thailand

Dr. Halina Wior of the State Research Institute for Mother and Child, Warsaw.

Mr. A. Masduki and Mr. Yee Woon Chee (medical students) of Kuala Lumpur, Malaysia.

Publications :—

“Use of maternity care in Glasgow”. Richards, I.D.G., Donald, E.M and Hamilton, F.M.W. (1970), in “In the Beginning—Studies of Maternity Services” (ed. G. McLachlan and R. F. Shegog). O.U.P. for Nuffield Provincial Hospitals Trust.

“The Glasgow linked system of child health records”. Smith, A., Richards, I.D.G., Nicholson, M.F. and Granick, E. (1970), in “Problems and Progress in Medical Care—Essays on Current Research”, 4th series, (ed. G. McLachlan). O.U.P. for Nuffield Provincial Hospitals Trust.

“The Glasgow linked system of child health records”. Richards, I.D.G. and Nicholson, M.F. (1970). *Devel. Med. Child Neurol.*, 12, 357.

TABLE I

SOME CHARACTERISTICS OF GLASGOW BIRTHS IN 1967 TO 1969

	1967	1968	1969
<i>Total Births</i>	19,841	19,813	17,763
<i>Illegitimate Births (per cent)</i>	8	9	11
<i>Place of Confinement (per cent)—</i>			
Home	14	11	8
Hospital... ..	85	88	90
Nursing home	1	1	2
<i>Hospital Confinement Rates (per cent)*—</i>			
Primipara	94	96	95 (2)
Fourth or subsequent	76	82	81 (2)
Multipara aged 35 +	81	85	85 (1)
Any of the above	86	89	89 (2)
History of previous stillbirth	84	88	91 (1)
Multiple pregnancy	95	95	96 (1)
Antepartum haemorrhage	94	96	98 (0)
Instrumental delivery	97	98	98 (1)
Breech delivery... ..	N.K.	N.K.	95 (1)

* Births in general practitioner units in 1967-68 are included in the hospital rates ; for 1969 they are shown separately in brackets.

TABLE II

SOME CHARACTERISTICS OF GLASGOW BIRTHS IN THE FOUR ZONES, 1969

	S.W.	S.E.	N.E.	N.W.	All zones
Total births	1,652	4,543	8,204	3,366	17,763
Perinatal mortality rate (per 1,000 total births)	38.9	27.4	31.8	29.9	28.8
Social classes IV and V (per cent) ...	34	30	40	26	34
Fourth or subsequent birth (per cent)	21	24	27	22	24
Hospital confinement rate (per cent)	89	84	89	92	88
Deliveries in zone hospital (per cent)	64	54	57	64	58
Mean distance to zone hospital (miles)	2.0	4.5	2.6	2.7	3.0
Births to women living 5 miles or more from zone hospital (per cent)	4	37	5	11	14
Zone hospitals	Southern General	Royal Maternity Ross	Stobhill Robroy- ston	Queen Mother's Redlands	
			East District Belvidere		

TABLE III

RISK CATEGORY OF 495 CASES DELIVERED AT HOME

<i>Type of case</i>	<i>Cases</i>	<i>Percentage in each risk category.</i>			<i>All cases</i>
		<i>Low</i>	<i>Medium</i>	<i>High</i>	
Booked for home confinement ...	361	27	19	54	100
Booked for hospital confinement ...	106	26	28	46	100
Emergencies	28	11	11	78	100

The risk categories are as follows :—

Low Age 20-30 with 2nd or 3rd pregnancy and no previous obstetric complications.

Medium Age under 20 ; age 20-34 with previous obstetric complication ; primigravida under 30.

High 4th or subsequent pregnancy ; age 35 + ; primigravida aged 30 + ; all cases with a bad obstetric history (e.g. A.P.H. or stillbirth) or neonatal death.

HEALTH VISITING SERVICE

During 1970 the Health Visiting staff suffered 9 losses by reason of death (1), retiral (2), removal to another district (1) and family reasons (5) but on balance the number of staff has remained more or less the same, as six Health Visitors were appointed and five were re-appointed to part-time duties having previously left to have children. Of this five, two have since taken up full-time duties as their children are now in nurseries or day schools.

At present we have thirteen Health Visitors doing a one-year contract following training in Glasgow.

The Woodside Health Centre is to be staffed by Local Health Authority Nursing Staff. Considerable planning has gone into this to provide Health Visitor service for the eighteen doctors who will practice from the centre. Provisional attachments to practice groups have been made of six Health Visitors but full-time attachment cannot be undertaken until the premises are available. A Nursing Officer Group Advisor was appointed to the centre in November, and teams of health Visitors and District Nurses are already combining to serve the practices concerned.

Eight local authority clinics now have Family Planning sessions apart from those held in local authority premises by the Family Planning Association and six more Health Visitors obtained the Family Planning Association Certificate during the year.

Cytology clinics have continued and sessions have been held in the Post Office Savings Bank at Cowglen with an excellent response.

Of the thirteen Health Visitors attached part-time to psychiatric units, one had to withdraw because of personal illness. One evening club at Orr Street was disbanded because of lack of staff (hospital and local authority) but the club at Springburn continues. The Health Visitors attached to Woodilee Hospital attend this evening club weekly.

Four students attending courses in Nursing Education at Edinburgh University spent a week with the Staff. Occupational Therapy students and Child Care course students were given experience in home visiting as were student nurses from the hospitals in Glasgow who come out on to the community at three weekly intervals. Each group has talks on Health Visiting and on Mental Aftercare.

During the past year some Public Health Nurses have been decentralised to the clinics and as well as helping out in clinics, visited the sick elderly people in the areas. The power cuts in the latter part of the year, particularly in all-electric households affected the elderly more than others, but the nursing staff had been round those known to them in only a few days. Neighbours in less vulnerable situations were most helpful and their assistance in supplying hot water and often inviting the older people into their homes was much appreciated.

In February a survey was started of post-natal mothers (delivered in Redlands) who had no immunity to German Measles and were given Rubella vaccination. These and a control group were visited weekly

for three weeks following vaccination. The findings were for the Medical Research Council and will be published.

Afternoon and evening lectures to outside bodies, Red Cross, Youth Groups, Guilds, etc., have been given by the staff including one to a Rotary Club who have asked if this could be repeated.

Despite the shortage of Health Visitors the staff have managed to cover their own areas as well as undertaking duties in areas uncovered by permanent staff. They also covered the B.C.G. Campaign for 13 year olds in the City's schools.

Of several requests for Health Visitor attachment to General Practice groups, only a very few were possible because of lack of available staff.

The outbreak of Cholera in the Middle East and the despatch of vaccine from Britain to the infected areas created a shortage here. As we had just received a supply, we managed to provide vaccination to intending travellers from a very wide area of Western Scotland, none was available elsewhere. This meant a large increase in numbers of people attending the clinic at 20 Cochrane Street.

HEALTH AND TUBERCULOSIS VISITING

The following table shows the number of home visits and cases attended by the Health Visiting staff in 1970.

NUMBER OF HOME VISITS AND CASES

Visited by Health Visitors, i.e., Certificated Health Visitors and others doing health visiting work						Number of cases	Number of visits
1.	Expectant Mothers	...	...	...	...	2,129	2,129
2.	Children born in 1970	...	...	...	...	15,872	57,109
3.	Children born in 1969	...	...	...	...	15,557	48,686
4.	Children born 1965-68	...	...	...	...	43,311	77,397
5.	School children	...	...	...	...	8,450	8,387
6.	(a) Persons aged 65 and over	...	...	...	...	10,004	43,379
	(b) Persons included above who were visited at the special request of a general practitioner or hospital					1,884	8,137
7.	(a) Mental Health: care and after-care	...	...	...	...	690	4,738
	(b) Persons included above who were visited at the special request of a general practitioner or hospital					519	4,191
8.	(a) Other hospital after-care	...	...	...	...	136	153
	(b) Persons included above who were visited at the special request of a general practitioner or hospital					130	140
9.	Tuberculous households	...	...	...	...	7,067	6,582
10.	Other infectious diseases	...	...	...	...	104	700
11.	Other	...	...	...	...	803	1,250
	Total	...	...	...	...	<u>106,656</u>	<u>262,978</u>

HEALTH VISITOR TRAINING SCHOOL

The 1969/70 Course of Training commenced on Monday, 8th September, 1969, with a total of 32 students. Of this number, 14 were sponsored by the City of Glasgow Corporation, 17 were sponsored or seconded on salary by 8 County Councils and County Burghs in Scotland. One candidate was accepted for training as an independent student. Two students sponsored by Glasgow and the County of Lanark respectively, withdrew from the Course in December, 1969.

The vacancy for a tutor which has obtained since April, 1968, has still not been filled and this staff shortage continues to make extra demands on the three tutors in post. The overall administration of the three week programmes of Public Health Training for Student Nurses remains the responsibility of the Principal Health Visitor Tutor. An experienced health visitor, appointed as Health Visitor Instructor, is responsible for the day-to-day administration of these Courses and maintains close liaison with the Health Visitor Training School.

For the main series of lectures the School was fortunate in having the established team of excellent lecturers from the University of Strathclyde and the University of Glasgow, and members of the Health Department medical staff. Other lecturers from allied statutory and voluntary services also made an important contribution. The continued interest, co-operation and enthusiasm of all lecturers which maintained the high standard of training, is warmly acknowledged. A total of 19 fieldwork instructors in Glasgow and other sponsoring authorities were responsible for teaching in the practical field. Where possible, students were placed with fieldwork instructors in their own sponsoring area. Individual and group meetings with the tutorial staff throughout the year, the sharing of seminar sessions and group discussions in the School were invaluable to students, fieldwork instructors and tutors. To ensure as wide an experience as possible for the students the co-operation of other members of health visiting staff and personnel in allied services was much appreciated. As in past years, visits of observation to specialised community and hospital services were a feature of the Course.

The written and oral parts of the qualifying examination were held in May and June, 1970, the tutorial staff being responsible for organisation and general arrangements. The Moderating Board which met in April and the Examiners' Meeting following the oral examination was attended by the Internal and External Examiners. The Professional Adviser from the Council for the Training of Health Visitors, who acts as liaison between the Council and the School, attended the Examiners' Meeting. Miss M. B. Nation, Principal Health Visitor

Tutor, Vaughan College, City of Leicester, and Dr. J. L. Burn, Salford, acted as External Examiners for the second year.

All 30 students were successful in the Examination and three were awarded distinctions. The Examiners were in general agreement about the high standard achieved by the majority of students.

Following satisfactory completion of the required period of supervised practical work all students were awarded the Certificate of the Council.

Health Visitor Superintendents and County Nursing Officers were most helpful in making arrangements for practical placements throughout the Course. Meetings between them and the tutorial staff from time to time facilitated discussion in the informal atmosphere of the School.

The Prizegiving Ceremony was held in the Banqueting Hall of the City Chambers on Friday, 28th August, 1970. The presentation of awards and Training School Certificates was made by Miss C. Keachie, M.B.E. Dr. A. R. Millar, Medical Officer of Health, presided over the function.

Throughout the year an increasing number of health visitors made use of the teaching aids available in the School for Health Education with varied groups. Visitors to the School included public health personnel from home and overseas and three students from the Institute of Health Education in London.

PUBLIC HEALTH TRAINING OF STUDENT NURSES

The Public Health Training for student nurses continued at 3 Lancaster Crescent, under the organisation and administration of the Health Visitor Training School.

Fourteen courses, each of three weeks duration, were completed during the year. Each course comprised a programme of theoretical and practical tuition by members of the Health Department and allied statutory and voluntary services.

Each class also worked on Group Projects, the aim being to widen the nurses' knowledge of the health hazards and social problems in the community. Many people within the Health Department were approached by the nurses for information regarding these projects, as were members of hospital staffs and voluntary organisations and their help was greatly appreciated.

The nurses, who were seconded from the five general hospitals in the City, expressed their gratitude to the members of the Health Department for the interest shown in their training.

At the end of the session 339 students had completed training compared with 378 in 1969. This number included 19 male students compared with 21 male students in the previous year.

DOMICILIARY MIDWIFERY SERVICE

In 1970 the number of registered midwives practising in the City was 73. Of these, 51 were full-time domiciliary midwives in the service of the Corporation and 6 part-time; included in this number are the Chief Supervisor and nine Assistant Supervisors. The introduction of part-time midwives has been most successful. The six now employed are fully trained and qualified and have carried out their duties in an excellent manner. Of the remainder, 8 were Queen's Nurses engaged in full-time midwifery and other 8 midwives were employed in association with maternity homes.

The Corporation midwifery service has, since its inception in 1940, been very popular with Glasgow mothers. With the new trend in midwifery, doctors giving antenatal care advise hospitalization especially for first confinements and fifth and subsequent confinements. Far too many women, however, delay booking a midwife for the approaching confinement until well into the seventh or eighth month. In 1970, of the 2,471 applications, 194 were not made till the seventh and 139 till the eighth month of pregnancy. No less than 56 applications were made as late as the ninth month. This militates against the mother receiving adequate antenatal care and sufficient mothercraft teaching from the midwives.

During the year the municipal midwives attended 871 cases, paying 8,864 antenatal visits and 18,406 during the puerperium, while the Queen's Nurses attended 48 cases, to whom they paid 1,764 visits.

A supervisor is always on duty, day and night, to deal with emergency calls and/or arrange for admission to hospital. 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 house 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 1,427 of these, costing 21s. 3d. each, were issued free of charge in 1970.

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.

Entonox 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, Glasgow Royal Maternity Hospital, Queen Mother's Hospital, Eastern District, Robroyston and Redlands. The scheme provides that there is always a domiciliary midwife at each confinement. For this training 45 of the midwives are approved by the Central Midwives' Board. During the year, 211 pupils from the above hospitals attended 476 confinements and made 5,110 puerperium and 1,899 antenatal 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 11 midwives are authorised to attend.

The following table shows the work carried out by the midwives during 1970.

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.					
	Doctor present at actual confinement	Doctor present at any time during Labour	Doctor not present at any time	Midwife alone (no doctor engaged)	Total
(a) Midwives employed by the Authority ...	556	29	249	37	871
(b) Midwives employed by voluntary organisations	19	14	15	—	48
(c) Total	<u>575</u>	<u>43</u>	<u>264</u>	<u>37</u>	<u>919</u>

Fees to doctors attending emergency cases amounted to £12·11.

OPHTHALMIA NEONATORUM

The number of cases notified during 1970 was 25.

The cases were classified as follows :—

Gonococcal ophthalmia	...	...	4
Purulent conjunctivitis	...	...	16
Simple conjunctivitis	...	...	5

Age at onset was as follows :—

- 12 hours	...	...	2
- 4 days	...	...	2
- 8 days	...	...	7
+ 8 days	...	...	14

Attendance at birth was as follows :—

General Practitioners	...	...	2
Institutions	...	...	23
Midwives	...	...	—

Bacteriological examination was carried out in all cases with the undernoted results :—

Gonococcus	...	...	4
Staph. aureus	...	...	3
Staph. albus	...	...	4
T.R.I.C. agent	...	...	2
E. coli	...	...	2
Mixed growth of diptheroids str. virideus, staph. albus			2
No pathogen found	...	...	8

Six cases were admitted to Ruchill and one to Belvidere. The number of gonococcal ophthalmias was two fewer than in the previous year.

WELFARE FOODS

DETAILED ACCOUNT OF THE YEAR'S WORKING, 1970

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 Social Security on application.

A list of distribution centres and their hours of opening is attached to this Report.

The welfare price of National dried milk was increased from 10½d. to 2s. 4d. per packet 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 factor being babies now being given solid foods at a much earlier age.

National dried milk may be purchased at a price of 4s. per Packet if no valid token is available. The average weekly issues of such milk in 1970 was 160 as compared with 188 in 1969 and 223 in 1968.

From 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. Year 1970 Glasgow, has shown a slight increase in demand for vitamin products.

VITAMIN PRODUCTS

PERCENTAGE UPTAKE OF POTENTIAL

	1970	1969	1968	1967	1966	1965	1964
Orange Juice ...	8%	7%	6%	6.8%	6.4%	6.2%	5.8%
Cod Liver Oil ...	3%	3%	3.2%	3.7%	3.7%	4.3%	4.9%
A. & D. Tablets ...	16%	13%	11%	10%	9.7%	9.2%	9.4%

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

SECTION III

SCHOOL HEALTH SERVICE

In 1968 our record card was replaced by one designed by the Scottish Home and Health Department which was processed by the Department Computer in Edinburgh. This meant that many statistical errors could not be eradicated at source. Once in use it was felt that the yield of information produced by this card on the health and environment of our Glasgow school population could be improved. As a result of discussion of these problems and with the staff of the Glasgow Corporation Computer Department willing to assist, the Home and Health Department gave permission for Glasgow to design a record card more suited to our requirements. Tables listed by the Scottish Home and Health Department have been retained but additional tables have been created. The table assessing remediability of defect has been revived and housing information, which was previously recorded every 5 years, has been included enabling us to compare the situation with previous surveys which in some instances go back to the year 1906.

It has been found that with few exceptions the heights and weights or ordinary school children increase with the number of apartments in the house.

With the exception of social class 2 the medical remediability of defects lessened from social class 1 to 5.

Heights and weights of 5 and 13 year old boys and girls seen last year to have been levelling off over recent years have this year taken a turn downwards.

Arrestment in height for both 5 year old boys and girls began in 1960 and in weight of 5 years old boys in 1960 but not till 1967 in the weight of 5 year old girls. Similar arrestment showed for 13 year old boys and girls height in 1967 but not till 1969 for weight. Attempts have been made to make comparisons with experience in England but only Sheffield and Liverpool have been found to keep records over some years. In Sheffield no arrestment was noted till 1968 when the height of 13 year old boys and girls and the weight of 5 and 13 year old boys showed a slight tendency to level off. All other heights and weights continued to rise. In Liverpool arrestment was noted first in 1967 when heights of 8 and 12 year old boys and weights of 12 year

old boys and 14 year old girls showed a slight tendency to level off, all others continuing to rise.

With the help of Sir David Cuthbertson, C.B.E., M.D., D.Sc., LL.D., etc., formerly Director of the Rowett Research Institute, Aberdeen, and now of the Department of Pathological Biochemistry, Royal Infirmary, Glasgow, efforts were made to find the answer to this Glasgow experience. Correspondence with the Department of Science and Education revealed that in Birmingham the rate of increase had fallen off in recent years and that in the Inner London Education Authority there has been virtually no increase in the last few years. From the Department of Health and Social Security Nutrition Section nothing was found to account for our plateau in the 1960's, nor according to the National Food Survey had there been any apparent decrease in consumption of particular foods.

It must be concluded that this Glasgow experience is the result of both planned and voluntary overspill from Glasgow. In Cumbernauld 80 per cent.* of the population of 30,000 are recorded to be former Glaswegians and in East Kilbride with a population of 66,000, 57 per cent.* are stated to have come from Glasgow. It would appear that this social mobility affecting as it does skilled people has produced the social imbalance which we see now in the falling heights and weights of our school children.

In this respect the numbers of underweight children noted are very much up on the figures of last year as are pediculosis capitis, dental caries, dental abscess, swollen glands and blepharitis in the entrants. Defective clothing and footwear show a higher record than in former years when these defects were recorded.

While efforts are made to cover the many aspects of the Service constant inadequacy in numbers and the frequent changes in staff make it difficult for the Service to give its full potential.

Health Education continues within schools and colleges. Our services are in constant demand but many areas cannot be covered. It is worth passing note that for Acne Vulgaris the 16 year old girls and boys and the 13 year old girls of social class 1 are recorded to be the greatest sufferers.

There is great goodwill and help from our teaching colleagues in the work we try to do. In one school with a high percentage of immigrant children from India and Pakistan one child showed a "pointing"

* "New Town Story" by Frank Schaffer.

tubercular cervical gland and many looked so fragile that doubts were expressed about their ability to withstand the winter. With parental permission school staff undertook to administer daily to each child a multi-vitamin syrup from November till the following April. Heights and weights were noted at the beginning and end of the exercise and each child was found to have made a satisfactory gain. An unexpected dividend was the favourable effect on the regularity of school attendance with the other attendant benefits thus produced.

GENERAL STATISTICS

Number of Schools—

(a) Primary	...	...	...	...	...	...	214
(b) Secondary	...	...	...	...	...	...	64
(c) Schools for Handicapped Children	...	...	...	...	...	...	26
(d) Occupational Centres	...	...	...	...	...	...	11
(e) Approved Schools	...	...	...	...	...	...	2
(f) Residential Schools	...	...	...	...	...	...	12
(g) Nursery Schools	...	...	...	...	...	...	50
(h) Hospital Schools	...	...	...	...	...	...	8
(i) Gardening Schools	...	...	...	...	...	...	1
Total Schools under Education Authority	388
(j) Schools in receipt of grant and under medical inspection	10

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SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT

Inspection

Routine Medical Inspection in ordinary schools was given to Entrants—Infants—and those born in 1956 and 1953; doctor/health visitor team tested, for vision only, those born in 1960. In addition Routine Medical Inspection was carried out in schools and classes for handicapped children.

Other arrangements were broadly similar to those in the previous year.

A new medical card (S.H.S. Form 1) was devised in collaboration with Glasgow Corporation's Computer Section and used this year for the first time. The statistical information obtained was more comprehensive than that required by the Scottish Home and Health Department for their annual return.

TREATMENT

A list of the school clinics and services given were as follows :—

CLINIC	Skin, Eye, Ear and other minor diseases	Refraction	Dental	Special Skin	Ultra-violet ray	Orthopaedic	Scabies Baths
80/90 Kinfauns Drive, W.5	1	1	2	—	—	1	—
18 Plean Street, W.4	1	—	1	—	—	—	—
4 Sandy Road, W.1	1	1	1	—	—	—	—
130 William Street, C.3	1	—	1	1	—	—	—
91 Denmark Street, N.2	1	1	2	—	—	—	—
Hyde Park School, N.1	1	1	1	—	—	—	—
15 Glenbarr Street, N.1	1	1	4	—	1	1	1
60 Avenuepark Street, N.W.	1	1	1	—	—	1	—
40 Grovepark Street, N.W.	1	1	1	—	—	—	—
2 Lochdochart Road, E.4	1	—	—	—	—	—	—
5 Craiglockart Street, E.3	1	—	—	—	—	—	—
74 Wellhouse Crescent, E.3	1	1	1	—	—	—	—
155 Crail Street, E.1	1	1	2	—	—	—	—
23 Acorn Street, S.E.	1	1	2	—	—	—	—
22 Arnprior Quadrant, S.5	1	1	—	—	—	—	—
Ashtree Road, S.3	1	1	2	—	—	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	2	—	—	—	—
74 Berryknows 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	—	—	—	—

Two mobile dental units were functioning during the Session—No. 1 Unit at Castlemilk and No. 2 at Easterhouse.

Other treatment facilities provided were as before.

HOLIDAY CAMP FOR UNDERPRIVILEGED

Each summer since 1959 the School Health Service has been directly responsible for the organisation of a holiday camp for children with epilepsy, otorrhoea, enuresis, ped. cap. and other incapacitating conditions associated with underprivilege which would prevent their going to other camps. Success depends on the goodwill and co-operation of School Health Service and Education Department staffs along with voluntary help which has sometimes included senior school girls taking the Duke of Edinburgh award.

During six weeks in July and August 1970 arrangements were again made for three consecutive camps at Seafeld Residential School,

Ardrossan. The numbers accommodated were : from 6th to 17th July, 30 boys and 32 girls ; from 21st to 31st July, 22 boys and 27 girls ; from 3rd to 14th August, 30 boys and 21 girls—Total of 162 children for the complete period of six weeks.

MEDICAL EXAMINATION OF SCHOOL MEALS STAFF

This scheme was instituted in 1949, applicants for posts being medically examined beforehand, employees being examined annually.

			Numbers Summoned	Numbers Attended	Numbers Found Fit	Numbers Found Unfit	Number Deferred
<i>New Cases—</i>							
Full-time	...	...	667	510	480	24	6
Part-time	...	...	144	102	96	4	2
<i>Old Cases—</i>							
Routine Examinations			347	255	255	—	—
			<u>1,158</u>	<u>867</u>	<u>831</u>	<u>28</u>	<u>8</u>

CO-OPERATION WITH OTHER AGENCIES

By arrangement with Professor Hutchison of the Royal Hospital for Sick Children, 30 D.C.H. students visited several nursery schools and school clinics.

School clinics referred to hospital 227 cases (134 boys and 93 girls), the ailments from which they suffered being as follows :—

					Boys	Girls
<i>Skin—</i>						
Wounds, etc. (minor injuries)	...	...	...	...	65	35
Fractures	...	...	...	...	7	15
Other skin conditions	...	...	...	...	42	33
General	...	...	...	...	4	3
Eye	...	...	...	...	12	6
Ear, Nose and Throat	...	...	...	...	4	1
					<u>134</u>	<u>93</u>

Glasgow Convalescent Home, Lenzie, continued to admit children during the year ending 31st July, 1970. Sixty-four children (31 boys and 33 girls) were seen at school clinics for preliminary medical examination and admitted to the Home.

During June, July and August, 21 children were summoned to school clinics for preliminary medical examination prior to going on holidays organised by the W.R.V.S. Seventeen children attended, 16 of these being considered "fit" and 1 "unfit."

MEDICAL TREATMENT

(A) MINOR AILMENTS

Throughout the treatment tables, "Single Visit Cases" includes those treated and disposed of at first visit, cases not for treatment, and cases without apparent disease.

(1) CUTS, BRUISES, SPRAINS, MINOR INJURIES, ETC.

	Boys	Girls	Total
<i>Details of new cases—</i>			
Cuts, bruises, sprains, etc. ...	2,441	1,671	4,112
Burns and scalds	166	121	287
	<hr/>	<hr/>	<hr/>
	2,607	1,792	4,399
	<hr/>	<hr/>	<hr/>

The attendances are included with those for skin conditions (page 75).

(2a) DISEASES OF THE EAR

EXAMINED ONLY—	Boys	Girls	Total
Recommended operation for tonsils and/or adenoids ...	51	39	90
Other operations recommended	7	6	13
Referred to hospital	9	5	14
Single visit cases	247	201	448
	<hr/>	<hr/>	<hr/>
Totals ...	314	251	565
	<hr/>	<hr/>	<hr/>
TREATMENT AT CLINICS—	Boys	Girls	Total
<i>Details of new cases—</i>			
Chronic suppurative inflammation (Otorrhoea)—single ...	69	44	113
double ...	7	13	20
Results of above diseases ...	11	12	23
Retracted membrane	3	5	8
Chronic aural catarrh	7	11	18
Ceruminous collection (wax)	76	65	141
Nasal catarrh	13	10	23
Laryngitis	5	4	9
Polypus	—	1	1
Other diseases	60	73	133
	<hr/>	<hr/>	<hr/>
	251	238	489
Cases from previous session ...	327	287	614
	<hr/>	<hr/>	<hr/>
Totals ...	578	525	1,103
	<hr/>	<hr/>	<hr/>
Clinic attendances of above cases	4,961	4,636	9,597
	<hr/>	<hr/>	<hr/>

EXAMINATIONS BY SPECIALISTS—

Cases to the number of 1,418 (758 boys and 660 girls) were summoned to school clinics for examination by aurists. Of that total

428 (238 boys and 190 girls) failed to attend, the remainder being dealt with as under :—

<i>At school clinics—</i>	Boys	Girls	Total
Recommended operation for tonsils and/or adenoids ...	70	62	132
Other operations recommended	8	6	14
Referred to hospital ...	56	38	94
For X-ray ...	39	38	77
For Audiogram ...	48	62	110
For Hearing Aid ...	—	—	—
Other recommendations and treatments ...	299	264	563
	<hr/>	<hr/>	<hr/>
	520	470	990
	<hr/>	<hr/>	<hr/>

AUDIOMETRIC EAR CASES

Cases attending ear clinics were referred for audiograms and for examination by the specialist or medical officers attached to ear clinics, with the following results :—

Summoned 221 (122 boys and 99 girls) ; attended 141 (82 boys and 59 girls) ; recommendations included audiogram 80 ; front seat 41 ; lip-reading 16 ; hearing-aid 9 ; E.N.T. Specialist 21 ; tonsil/adenoids operation 10.

X-RAY EXAMINATIONS

Cases which included some children from the audiometric surveys, were x-rayed in Stobhill Hospital and at Florence Street Chest Clinic, on the recommendation of the specialists, with the results as shown. A few were x-rayed for more than one condition.

	Positive		Negative		Totals		
	Boys	Girls	Boys	Girls	Boys	Girls	Total
Sinuses ...	29	16	6	3	35	19	54
Mastoids ...	4	5	5	—	9	5	14
Mastoids and sinuses ...	2	7	—	—	2	7	9
Sinuses and chest ...	8	4	1	—	9	4	13
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total examinations ...	43	32	12	3	55	35	90
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

(2b) DEFECTIVE HEARING

During the year ended 31st July, 1970, the work done in connection with cases of defective hearing was as follows :—

Classification—Pupils to the number of 576 (327 boys and 249 girls) were summoned with a view to grading as regards special education and, of that total, 362 (203 boys and 159 girls) attended, 3 being graded for deaf classes and 8 for partly deaf classes. The specialist also made the following recommendations :—

Audiogram, 25 ; hearing aid, 13 ; hospital treatment, 7 ; front seat in class, 29 ; lip-reading, 17 ; tonsil/adenoid operation, 26 ; dysphonia clinic, 2 ; speech therapy, 15 ; neurological clinic, 3 ; psychometric tests, 6 ; and other recommendations, 16.

Hearing Aids—29 children (13 boys and 16 girls) had hearing aids recommended and supplied. Proprietary aids were recommended by the specialist for 1 boy and 4 girls.

Audiograms—1,109 (629 boys and 480 girls) were tested by audiogram at Florence Street Audiometric Clinic.

(3) DISEASES OF THE EYE, EXCLUDING DEFECTIVE VISION

	Boys	Girls	Total
<i>Details of new cases—</i>			
Blepharitis	316	253	569
Hordeolum (Stye)	100	105	205
Conjunctivitis, catarrhal	65	54	119
Conjunctivitis, muco-purulent	2	2	4
Ophthalmia, strumous (includes Phlyctenular conjunctivitis and keratitis)	3	—	3
Keratitis (interstitial)	—	—	—
Corneal ulcers	—	—	—
Corneal opacities	1	—	1
Dacryocystitis	—	—	—
Epiphora	—	—	—
Injuries	41	16	57
Other diseases	28	21	49
Single visit cases	260	250	510
	<hr/>	<hr/>	<hr/>
	816	701	1,517
Cases from previous session	15	15	30
	<hr/>	<hr/>	<hr/>
Totals	831	716	1,547
	<hr/>	<hr/>	<hr/>
Clinic attendances of above cases	2,940	2,665	5,605

(4a) DISEASES OF SKIN, EXCLUDING RINGWORM AND FAVUS

	Boys	Girls	Total
Scabies	756	753	1,509
Pediculosis capitis	57	90	147
Impetigo Contagiosa	799	622	1,421
Ped, Cap. and Imp. Cont.	76	99	175
Ecthyma	11	18	29
Dermatitis seborrhoeica	20	35	55
Eczema	70	79	149
Alopecia areata	5	2	7
Psoriasis	10	10	20
Herpes zoster (shingles)	21	13	34
Lupus	1	—	1
Ulcers and abscesses	369	295	664
Urticaria	470	609	1,079
Warts	676	796	1,472
Other skin diseases	340	373	713
Single visit cases	2,786	2,483	5,269
	<hr/>	<hr/>	<hr/>
	6,467	6,277	12,744
Cases from previous session	245	251	496
	<hr/>	<hr/>	<hr/>
Totals	6,712	6,528	13,240
	<hr/>	<hr/>	<hr/>
Clinic attendances of above and ringworm cases	56,432	53,831	110,263
<i>Special Cleansing Clinics—</i>			
New cases, 1,744; Attendances, 6,432			

(4b) SPECIAL SKIN CLINICS

	Boys	Girls	Total
New cases	57	57	114
Attendances	189	215	404

(4c) BATH TREATMENT OF SCABIES

	Boys	Girls	Total
Cases receiving baths	691	646	1,337
Baths given	2,648	2,308	4,956

(B) DEFECTIVE VISION

(a) CASES DEALT WITH AT REFRACTION CLINICS

	Boys	Girls	Total
Subjected to refraction—			
Spectacles prescribed	2,350	1,967	4,317*
Spectacles not prescribed—			
For further treatment ... ..	...	...	2,718
No treatment required ... ..	...	...	834
			<u>7,869</u>
Not subjected to refraction—			
For further treatment ... ..	...	...	279
No treatment required ... ..	...	...	195
Postponed ... ..	...	...	442
			<u>916</u>
Total number dealt with at refraction clinics ...			8,785
Number of clinics held			952
Average number of children per clinic			9.2
Average number subjected to refraction at each clinic			8.2

* See below

At school clinics, 1 new occlusion case was put on treatment while an additional 251 children were kept under observation. The number of children referred to hospital for further treatment was 209 and a further 729 were put off treatment.

At the end of the school session approximately 10,710 children were awaiting refraction, distributed as follows :—

New cases, 582 ; " failed to attend," 8,406 ; retests, 1,722

*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
994	1,470	847	431	542	33	4,317

(b) PROVISION OF SPECTACLES

New cases were supplied with spectacles under the scheme to the total of 3,782. The nickel type was provided in 891 instances free of charge and the cellulose acetate in 2,891 on payment by each parent of a contribution towards the cost. In addition two children who were allergic to nickel were supplied free of charge with the cellulose acetate type.

Replacements and repairs totalled 1,051, the details being as follows :—New lenses, 182 ; replaced lens, 236 ; frames, sides, etc., 633 (nickel 152, cellulose acetate 481). A contribution towards the cost of replacement or repairs was made by the parent in 464 instances. The other 17 children had minor repairs done to the cellulose acetate type without the necessity of asking the parent to pay anything.

(c) KEYSTONE VISION CASES DEALT WITH AT REFRACTION CLINICS

Included in the figures in (a) on previous page are 234 cases which emanated from the testing of children's vision in schools by the Keystone apparatus. Of these, 216 were subjected to refraction, *161 (88 boys and 73 girls) of these having glasses prescribed, whilst 32 were referred for further treatment and 23 were considered as not requiring treatment. The remainder, 18, were not subjected to refraction and were noted "for further treatment" (5), "no treatment required" (7) and "postponed" (6).

*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
51	70	12	4	24	—	161

At the end of the school year 330 children were awaiting refraction :—

New cases, 73 ; "failed to attend," 257

The results of Keystone screening in schools are given on page 150.

(d) CONSULTANT AT KELVIN SCHOOL

Dr. William Wilson, Consultant Ophthalmologist, attended Kelvin School during the year on 7 occasions and the treatment was as follows :—

	Boys	Girls	Total
<i>Subjected to refraction—</i>			
Spectacles prescribed	13	3	16*

*Classification of refraction errors was as follows :—

Hypermetropia			Myopia		Anisopia	Total
H.	H.A.	M.	M.A.	M.xA.		
4	5	2	5	—	—	16

(C) EAR, NOSE AND THROAT OPERATIVE TREATMENT

(i) TONSILS/ADENOIDS OPERATIONS PERFORMED

The table below shows the number of operations for removal of tonsils and/or adenoids performed in the several hospitals during 1969-70.

	Boys	Girls	Total
Mearns Kirk Hospital	209	261	470
Ear, Nose and Throat Hospital	24	24	48
	<hr/>	<hr/>	<hr/>
	233	285	518
	<hr/>	<hr/>	<hr/>
Clinic (including Hospital) attendances			1,363

Other forms of treatment were also given to children receiving tonsils and adenoids operations, and a few patients were detained in hospital for more than the normal period before or after operations for medical reasons.

All children were instructed to report to the school clinic two weeks after discharge from hospital for post-operative examinations.

The numbers on the waiting list at 31st July, 1970 totalled 672 (470 boys and 202 girls).

(ii) OTHER EAR, NOSE AND THROAT OPERATIONS

In addition to those treated for tonsils and/or adenoids, children to the number of 85 (43 boys and 42 girls) were admitted to Mearns Kirk and Ear, Nose and Throat Hospitals during the year for operative and other treatment of various ear, nose and throat conditions. Some of the patients were treated for more than one defect.

(D) ORTHOPAEDIC AND POSTURAL DEFECTS

The following are the statistics relating to the treatment of deformities at the five centres :—

	Boys	Girls	Total
Number of children examined by			
School Medical Officers ...	621	613	1,234
Orthopaedic Surgeon ...	770	696	1,466
Number of attendances of "old cases" reporting for observation	856	770	1,626

The staff of physiotherapists carried out treatment for the following cases :—

<i>Details of new cases put on treatment at Clinics—</i>	Boys	Girls	Totals
Deformities of spine (kyphosis, lordosis, scoliosis) ...	97	102	199
Paralysis, infantile and other	38	36	74
Flat-foot and other deformities of the foot ...	198	207	405
Wry-neck (torticollis) ...	4	2	6
Deformities of chest ...	120	41	161
Knock-knees ...	78	101	179
Others ...	4	7	11

Cases from previous session ...	539	496	1,035
	145	130	275

Totals ...	684	626	1,310
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<i>Discharge from Orthopaedic Clinic—</i>	Boys	Girls	Totals
Fit ...	333	293	626
For Hospital treatment ...	2	1	3
Convalescent ...	2	—	2
Transferred to other clinic or treated by appliances ...	12	14	26
For other reasons (leaving school, improved, etc.) ...	94	98	192
Totals ...	443	406	849

Number still on treatment ...	176	160	336
Number of attendances made by children for treatment ...	6,828	6,240	13,068

DEFORMITIES TREATED IN SPASTIC UNIT

Treatment provided in the two departments was as follows :—

	No. of cases treated			No. of treatments		
	Boys	Girls	Boys	Total	Girls	Total
Physiotherapy ...	29	17	46	5,785	2,951	8,736
Occupational Therapy	29	17	46	4,123	3,541	7,664

Of the four children discharged during the year, one boy was transferred, and one boy and two girls were found suitable to attend the sheltered workshop at Hillington.

Admissions during the Session were two boys and two girls.

(E) OTHER DISEASE

(a) CASES DEALT WITH AT THE REGULAR CLINIC FOR "GENERAL" DISEASES

<i>Details of new cases—</i>	Boys	Girls	Total
Bronchitis and bronchial catarrh	253	219	472
Anaemia and/or debility ...	756	840	1,596
Rickets	1	4	5
Tubercular conditions—			
Pulmonary (including contacts	—	—	—
Non-pulmonary	1	—	1
Paralysis	1	1	2
Heart disease	8	6	14
Chorea	—	1	1
Enlarged tonsils and/or adenoids	52	51	103
Adenitis	2	7	9
Rheumatism	4	2	6
Enuresis	570	461	1,031
Malnutrition	9	14	23
Epilepsy	5	8	13
Digestive disorders	16	35	51
Infectious diseases	1	4	5
Mental deficiency	1	—	1
Nervous disorders	24	30	54
Others	394	330	724
Single visit cases	2,247	2,085	4,332
	<u>4,345</u>	<u>4,098</u>	<u>8,443</u>
Clinic attendances of above cases	7,738	7,515	15,253

(b) SUPPLY OF MEDICINES

<i>Details of new cases seen elsewhere than at "General" Clinics—</i>	Boys	Girls	Total
Sent from school inspection for immediate supply	53	54	107
Sent from skin, eye and ear clinics	2,195	2,084	4,279
Additional attendances at "General" Clinics for medicine	3,137	3,116	6,253
Totals	<u>5,385</u>	<u>5,254</u>	<u>10,639</u>

(c) ARTIFICIAL LIGHT TREATMENT

	Boys	Girls	Total
<i>Details of new cases—</i>			
Anaemia and/or debility ...	89	112	201
Nervous disorders	2	—	2
Chronic bronchitis	21	12	33
Skin conditions	25	19	44
Rickets	5	1	6
Others	4	4	8
Totals	146	148	294
Clinic attendances of above cases	3,215	3,141	6,356

(d) CASES SEEN AT CARDIAC CLINICS

Dr. A. S. 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, 441 children (255 boys and 186 girls) were summoned, of whom 120 (75 boys and 45 girls) failed to attend. The remainder reported as follows :—

New cases		Re-examinations		Totals	
Boys	Girls	Boys	Girls	Boys	Girls
91	54	89	87	180	141

The Specialist referred 12 children (5 boys and 7 girls) for further investigation at the Cardiology Clinic or for admission to Stobhill Hospital, where some were operated on for the treatment of certain forms of congenital heart disease. Electrocardiograms were carried out at the school clinics for 64 boys and 48 girls. In addition, 1 boy and 3 girls were referred to the E.N. and T. Specialist, one girl was referred for dental treatment and one boy to the Skin Specialist.

During the year, the children interviewed at special clinics and assessed as regards capability for suitable employment were as shown below :—

June, 1970, 3.

Since the commencement of the assessment scheme in June, 1950, 478 children in all have been interviewed at these special clinics.

Dr. Rogen asked to comment on the special clinic instituted twenty years ago for assessing children regarding employment, remarks :

“A close eye was kept on the children after they left school in the early years when an after-care worker followed them up, but there is no such after-care now.

Dr. Andrew Curran of the Department of Preventive Medicine, Ruchill Hospital has taken the place of Professor T. Ferguson at the interview sessions.

For the first four years of the clinics, 280 children were seen, of whom just over 100 were boys. Of those who could be followed up regularly, 32 per cent. of the boys and 63 per cent. of the girls were working strictly as had been agreed when they were seen, but a good many more were, in fact, satisfactorily placed, some of them in work very similar that which had been suggested for them. As a result, at the end of two years, 62 per cent. of the boys and 78 per cent. of the girls were thought to be in satisfactory employment.

The figures for the past six years have been supplied by Dr. Curran and show that in this period 28 boys and 15 girls only have been called to these clinics. No follow-up service has been available throughout this time and Dr. Curran wondered if it would be possible to have the services of a medical social worker to look into the position of at least every fifth one on the list, if not all.

One other point worth mentioning is the marked drop in numbers attending these clinics. There is no doubt that the marked reduction in rheumatic fever and rheumatic heart disease will account for a considerable number. Further, surgery on congenital heart disease has been much more frequently carried out in the past few years and children satisfactorily operated on are not called to the clinic. I personally have no other thoughts to explain the marked drop."

(e) CASES SEEN AT NEUROLOGY CLINICS

Dr. I. Draper, Neurology Specialist from the Western Infirmary, attended school clinics for the purpose of examining children specially referred by School Medical Officers and recommending any necessary treatment.

During the Session 148 children (92 boys and 56 girls) were summoned, of whom 19 boys and 15 girls failed to attend. The remainder reported as follows:—

	New cases		Re-examinations		Totals	
	Boys	Girls	Boys	Girls	Boys	Girls
	53	23	20	18	73	41
Results were :					Boys	Girls
Not to return					34	15
To be reviewed later					39	26
Recommendations—						
For E.E.G.					28	7
For I.Q. Test					1	1
Refer to Stobhill Hospital					—	1
For Dyslexia Class (Dr. Clarke)					1	2
For Change of Medicine					10	2
For Dr. W. Wilson					1	—
For Referral to E. N. and T. Spec.					—	1

(F) TREATMENT AT SPECIAL SCHOOLS

The total treatments given by nurses were as follows :

	Boys	Girls	Total
Ear conditions	1,367	1,894	3,261
External eye defects	1,085	1,301	2,386
Skin diseases	12,739	12,557	25,296
Uncleanliness (nits, vermin, etc.)	17,280	17,357	34,637
Medicines issued	22,417	19,266	41,683

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 :—

- (1) *Mentally handicapped*—21 Day Schools, 1 Residential School and 11 Occupational Centres.
- (2) *Physically Handicapped*—9 Day Schools, 8 Hospital Schools and a Scheme of Home Tuition. (One day school made provision for spastic children and aphasic children between the ages of 3 and 16 years).
- (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 Day School and 1 Day/Boarding School for the partially hearing and 2 Day/Boarding Schools for the Deaf. In addition, teachers from the Speech Reading Unit visit ordinary schools to give speech-reading instructions 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 Department (Maternity and Child Welfare Section) where the hearing of young children under school age is investigated).

The age range for spastic children, blind children and those suffering from defective hearing is 3 to 16 years.

At 30th June, 1970, the number of children receiving special educational treatment in special schools administered by the Corporation was as follows :—

Physically handicapped children, 283 (including 49 in school for spastics, and 8 aphasic children); children with hearing defects, 227; children with defects of vision, 104; mentally handicapped (educable) children, 3,231; mentally handicapped (trainable) children, 429; total, 4,294.

HOSPITAL SCHOOLS

The following is a list of the Hospital schools with the number of pupils receiving tuition at 30th June, 1970.

Drumchapel Home (46); Lenzie Home (29); Mearnskirk Hospital (21); Victoria Auxiliary Infirmary, Philipshill (27); Royal Hospital for Sick Children (54); Stobhill Hospital together with annexe at the Royal Infirmary (Burns Unit) (73); Strathblane Home (21); and Woodlands Day Centre (14).

ASCERTAINMENT OF MENTAL HANDICAP

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

	Boys	Girls	Total
First examinations	357	264	621
Re-examinations	895	651	1,546
	<hr/>	<hr/>	<hr/>
	1,252	915	2,167
	<hr/>	<hr/>	<hr/>

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 and subsequently by the Social Work Department. Other details are :—

- (i) Number of boys/girls suspected of mental handicap and referred for examination under Section 66A of the Education (Scotland) Act, 1969. Boys, 357 ; Girls, 264 ; Total, 621.
- (ii) Number of boys/girls ascertained as mentally handicapped and transferred to special schools or classes. Boys 282 ; Girls, 200 ; Total, 482.
- (iii) Number of boys/girls ascertained as mentally handicapped and transferred to junior occupational centres. Boys, 23 ; Girls, 19 ; Total, 42.
- (iv) Number of boys/girls who were the subject of a report under Section 66B of the Education (Scotland) Act, 1969. Boys, 19 ; Girls, 8 ; Total 27

HOME TUITION SCHEME

At 30th June, 1970, the number of children participating in the Scheme was 19 and the main causes of incapacity were :—

Spina bifida, 2 ; asthma, 1 ; miscellaneous, 11.

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 :—

- Coltness House, Wishaw*—4 severely physically handicapped children.
- Craigerne School, Peebles*—3 maladjusted pupils (primary age).
- Harmeny House School, Balerno, Midlothian*—1 maladjusted pupil (primary age).
- Lendrick Muir School, Rumbling Bridge, Perthshire*—5 maladjusted pupils (secondary age).
- The Mary Hare Grammar School, Newbury, Berks*—1 Roman Catholic deaf girl taking courses leading to the Certificate of Education.
- Trefoil School, Hermiston*—2 physically handicapped boys requiring residential education.
- Eastpark Homes, Glasgow and Largs*—26 severely physically handicapped children requiring long-term nursing care.
- Corseford School, Johnstone*—2 spastic children requiring residential education.
- Ladymary School, Edinburgh*—3 Roman Catholic maladjusted children.

- Castlecraig School, Peebles*—1 physically handicapped pupil requiring residential education.
- Kilquhanity House School, Castle Douglas*—1 maladjusted boy (secondary age).
1 maladjusted girl (secondary age).
- Stanmore House, Lanark*—16 mentally handicapped spastic children requiring residential training.
- Carsemeadow School at the Colony for Epileptics, Bridge of Weir*—12 children suffering from serious epilepsy.
- The Royal Blind School, Edinburgh*—17 Protestant blind children.
- The Royal Scottish National Hospital, Larbert*—29 mentally handicapped boys.
- St. Joseph's Private Hospital, Rosewell, Edinburgh*—2 mentally handicapped Roman Catholic children.
- St. Charles' Private Hospital, Carstairs*—25 Roman Catholic mentally handicapped children.
- Merchiston House Hospital, Johnstone*—3 mentally handicapped pupils.
- Waverley Park Hospital, Kirkintilloch*—26 mentally handicapped girls.
- Birkwood Hospital, Lesmahagow*—4 Protestant mentally handicapped children.
- Caldwell House Hospital, Uplawmoor*—14 mentally handicapped children.
- Bellefield Hospital, Lanark*—2 mentally handicapped children.

(b) MALADJUSTED CHILDREN — CHILD GUIDANCE

(*Mr. G. A. Dell, Principal Psychologist*)

During the year under review the Child Guidance Service dealt with a total of 6,114 children. This represents an increase of 645 over last year's figures. Total clinic attendances were 48,179, an increase of 8,380. These changes are accounted for principally by increases in the numbers of children attending for educational help and for speech therapy. Five thousand, four hundred and ninety-six school visits were paid, and 1,243 home visits.

Of the total number of children, 795 were seen in connection with ascertainment procedures. The great majority of the remainder were cases of poor adjustment or educational retardation, and treatment was offered as appropriate.

The most frequently recorded age on referral was 8 years, and the ratio of boys to girls was 2 : 1. Approximately 14 per cent. of referrals were of children in the secondary school age range.

Schools accounted for 3,691 referrals, and medical sources for 1,026. The remainder were referred by other statutory or voluntary organisations, apart from 310 children who were referred directly by parents or by self referral.

Among the group referred for reasons of maladjustment, 464 showed enuresis as a leading presenting symptom, 427 temper tantrums,

393 theft, 336 attention-seeking behaviour, 299 truancy, 289 persistent lying, 279 extreme shyness and inhibition, 270 exaggerated defiance of authority, and 251 lethargic and negativistic attitudes. In general there was a tendency for psycho-somatic symptoms and various types of withdrawal symptom to increase, whereas there was a reduction in the incidence of the outgoing reactive symptoms, although the latter still predominate.

Fuller information can be found in the report on the Child Guidance Service issued annually by the Education Department. Among the principal developments described in the report for 1969/70 are the preparations for the opening of a second day school for maladjusted children adjacent to the new Langside Child Guidance Clinic. At the end of June, 1970, approximately 25 children were in residence at Nerston School, and a similar number were enrolled at the Fairfield Day School for maladjusted children.

(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 six weeks for convalescents and two weeks for nursery children.

(i) NORMAL—		
Achnamara, Lochgilphead ...	36	Protestant boys and girls (Secondary 1st year).
Galloway, Wigtown	112	Protestant boys and girls (Primary V, VI and VII).
Southannan, Fairlie	23	Roman Catholic boys or girls (Primary V, VI and VII).
(ii) CONVALESCENT—		
Agnes Patrick/Stevenson, Ascog	58	Roman Catholic boys and girls (8-15 years).
Caol Ruadh, Colintrave ...		Closed for reconstruction.
Castle Toward, by Dunoon ...	96	Protestant boys and girls (8-15 years).
Fornethy, near Alyth ...	74	Protestant girls (8-12 years).
Craig, Kilmarnock	56	Roman Catholic boys (5-12 years)
Hillfoot, Bearsden	45	Protestant mentally handicapped children (7-13 years).
Lumsden, Maybole	29	Roman Catholic girls (5-12 years).
Seafield, Ardrossan	68	Protestant boys (5-12 years).
South Park, Ascog	28	Protestant girls (5-15 years).

ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN

(a) ADMINISTRATION AND NUMBER OF MEALS

On 31st May, 1970, there were 140 kitchens preparing meals for school children. In addition, one kitchen supplied Kosher meals to Jewish children. On an average day in May, 1970 (Monday, 18th May), the total number of dinners served was 60,522 of which 26,854 were supplied free.

Dinners only were supplied to pupils of ordinary schools and schools for handicapped children. In Nursery Schools, dinners and teas were served.

The meals were served in 405 dining rooms, 389 of which were on school premises, the remainder being in church and other halls.

The number of dinners prepared in kitchens during the year ended 31st May, 1970, was 14,248,724 compared with 17,373,992 in 1969 and 18,810,659 in 1968.

(b) FOOTWEAR AND CLOTHING

During the year 1st June, 1969 to 31st May, 1970, 1,853 children were provided with footwear and clothing as compared with 1,732 during the previous twelve months. The National Assistance Board continued to accept responsibility for the clothing requirements of children of their dependents.

(c) 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 July, 1970, was 23,220,873. The most recent census figures showed that 96.40 per cent. of the children present in primary schools on a particular day in January, 1970, were taking school milk compared with 94.06 per cent. in January, 1969.

Food Inspectors of the Health Department took 84 samples of milk for examination and of that number 9 failed to pass the coliform test. The average composition of samples was satisfactory at 3.74 per cent. milk fat and 8.85 per cent. non-fatty solids. Of 4 samples supplied for biological examination as to the presence of tubercle, all were found to be negative.

AUDIOMETRIC SURVEY UNIT REPORT

(Dr. Margaret Dunn, Assistant Principal Medical Officer)

A great deal of thought has had to be given this year to the coverage of the work of the Unit by a reduced number of staff. On the medical side, one officer attended the Manchester training course in the Spring and later another officer was added to the team and will participate in the entrance course at Manchester. The establishment of audiology technicians was badly depleted by two members moving to London and Canada respectively, resulting in heavy commitment for the remaining staff and reshaping of the work programme. Fortunately the positions here are now filled which will ease the position considerably.

The major referral source to the Unit is from sweep testing in schools and it continues to surprise the staff that parents do not always note children with appreciable hearing losses. It is gratifying to realise from the number of teacher referrals at these school visits by the audiology technicians that the school staffs are conscious of the importance of early detection and investigation of children who have a possible defect. This year, coverage of only one age group was possible, but the number was inflated as, in making the age of choice five years, the six-year-old group had to be overtaken in this transition year to avoid missing a whole age-group. From next year the initial testing age will be five years.

The referral of new cases originates from many sources and the continuous need for identifying children at risk for hearing defect is constantly being discussed with the medical and nursing personnel in the department. Several cases of severe deafness following meningitis have been seen this year and the co-operation of the hospital medical staffs in referring such cases for assessment is much appreciated.

Case counselling sessions with the Speech Reading Unit staff take place monthly. Thus the progress of all children wearing hearing aids in the ordinary school is noted and individual placement reviewed regularly.

The Ascertainment Panel for children with hearing defects has met at intervals throughout the year. The locus has been Florence Street Clinic, Balvicar Centre or the Deaf Schools. At these meetings, the placement or review of children has been discussed and recommendation made to the Education Authority. These meetings are time consuming but fruitful—the pooling of professional opinion can but be to the child's advantage to help him accentuate his assets.

With the help of Miss Knox of the Royal National Institute for the Deaf, a word list tape for use with Kamplex audiometer has been made and speech audiometry will be added to the test procedures involved in total assessments. The pop-up toy audiometer has been fitted for free field testing and this will be useful for work with young children.

The subject area of delayed speech development, dysphasia and allied defects appears to be enlarging, possible because of better identification of cases. Earlier referral is being made, and this is most satisfactory both for investigation and treatment, and under the Education (Scotland) Act, 1969, the School Health Service can be involved in assessment from the earliest possible age. This ensures through-going of help under the umbrella of education. In this connection the linkage with the Child Health Assessment Centres, Balvicar and Glenfarg Street, is a happy one and opens up a long term observation situation in cases of hearing or speech defect. These can lead to placement in the Nursery for the Deaf or Nursery Class for Children with Communication difficulties. The latter is a most useful format and allows for professional observation, assessment and pre-school evaluation for education in due course.

Visitors to the clinic have included D.P.H., D.C.H. and H.V. students and some general practitioners. A Reader from Manchester University who hailed from U.S.A. and taught in a deaf school there showed great interest in the scope and administration of the Unit.

The essential help given by the head masters and staffs of the Glasgow schools and in particular the School for the Deaf and Partially Hearing, the Child Guidance Service, the Audiology Unit and the Speech Reading Unit has been as ever much appreciated. The continuous excellent association with Special Schools Department is a heartening situation.

The retiral of Sister Angela from St. Vincent's School is noted with mixed feelings. The unique contribution she made to the education of the deaf, her personal qualities of dedication, selflessness and kindness will be remembered by all. We wish her well in her retirement but she will be sorely missed.

In this year immense and increasing amounts of work has been carried out by the clerical department with speed and willingness. This has been gratefully appreciated.

Finally I wish to thank members of the team for the work they have done in a very strenuous year.

THE PART PLAYED BY THE HEALTH VISITOR IN
THE EDUCATION OF A CHILD WITH A HEARING LOSS

(Miss Catherine McDade, Health Visitor)

A child's education begins in the natural environment of the home. Parents who have a child with a hearing defect should be encouraged to realise that, with help and guidance, they can give the child the immediate educational training he needs. Guidance by the health visitor at this stage involves the day-to-day happenings in the home—the language of the different parts of the body, the language of shopping, etc.—with emphasis on devoting time in speaking to the child as knowledge is developed through speech. It is of critical importance that the child should be drawn into the day-to-day facets of family living and, to this end, daily efforts have to be made by parents and siblings.

At regular intervals during the child's school career his hearing is assessed by the ascertainment team which consists of an otologist, school medical officers, teachers, audiology technicians and health visitors, to ensure that the child is suitably placed educationally for his hearing defect. In order that the child takes full advantage of his schooling the co-operation of the parent is essential in carrying out the advice given by the specialists. The health visitor is the link between the home, the team and the school as, for example, the child who requires a hearing aid may need a great deal of encouragement to accept and wear the aid. The education of a child is not limited to the class room. The brothers and sisters of the child with a hearing defect should be taught, by the parents, the necessity of being ready and willing to receive the child with the defect into all their games and playthings and, further afield, to introduce him to their friends and teach the latter by example to cope with the deaf child.

The parents of children with hearing defects are often dealing with difficulties outwith their experience. The health visitor who is known to the family is in an ideal position to give advice and support on the many difficulties which may arise from the time of diagnosis of deafness till the child leaves school.

THE CASE LOAD AT A SPECIAL INVESTIGATION CLINIC

(*Dr. Mary Gallager, School Medical Officer*)

The case load at an S.I. Clinic is derived from three main sources :—

- (1) The medical officer at routine and non-routine school examinations ;
- (2) the teaching staff ;
- (3) the parents.

The area in which one works undoubtedly influences the type of cases seen at an S.I. clinic. In the socially deprived area in which I work, approximately 35 per cent. of the children seen are suffering from general debility. They are smaller than average and underweight, and many of them are referred with a view to recommendation for a spell of residential education. Many of them improve markedly with the administration of vitamin supplements and counselling of parents re adequate diet and rest.

Approximately 35 per cent. of the cases are enuretic ; mainly primary enuresis due in many cases to lack of training and also to inadequate toilet facilities available. Success seems to be related to establishing rapport with the child and securing his co-operation in curing the condition. A smaller number of the cases of enuresis is secondary to some emotional trauma and some of these cases require referral to the child guidance service.

Fifteen per cent. of the cases are suffering from respiratory disease, e.g., asthma and bronchial catarrh. Many of these cases improve with medication and physiotherapy, especially if persuaded to carry out breathing exercises regularly.

Approximately 10 per cent. of the children who attend are obese and have been advised as to diet. I have had very little success with such children.

A small percentage of referrals are due to behaviour problems in schools and most of such cases I have referred to the child guidance service. In the last year, two of the cases referred by teachers have been cases of pregnancy in fourteen-year-old schoolgirls.

Thus the S.I. clinic presents a variety of problems and I think it is a valuable means of establishing good relationships with parents and also a medium for individual health education.

THE REFERRAL AND TREATMENT OF THE PRE-SCHOOL CHILD WITH SPEECH DEFECT

(Miss Pauline Chambers, Senior Speech Therapist)

The assessment and treatment of the pre-school child is inevitably and necessarily an important aspect of any speech therapist's work. Each year, as people become more aware of the help available in this field, an increasing number of pre-school children is seen in our clinics.

The majority of referrals come from four separate groups: child welfare clinics, child guidance clinics, general practitioners and parents.

There are two categories into which the communication problems of the pre-school child can be divided.

- (1) the child who is communicating vocally, whose language is adequate, but who has defective articulation.
- (2) the child who is non-speaking, or who is communicating only to a minimal degree.

With the first group the causes are usually lack of stimulation and poor auditory perception. The therapist will give frequent advice to the parents and may admit the child for group or individual therapy.

With the second group, the problem is one of differential diagnosis—the possibilities being mental handicap, deafness, emotional and psychiatric disturbance and developmental aphasia.

In making the diagnosis, the therapist works closely with the psychological and medical staff until agreement on aetiology is reached. When the diagnosis is finally made, the therapist can then give appropriate and intensive treatment.

In Glasgow, we have an assessment class where the children receive a specialised form of nursery education, until future placement has been decided upon. It is hoped that this will eventually extend so that the aphasic or emotionally disturbed child will be able to continue until he is ready to be placed in an appropriate educational environment.

With the increasing advances in the social services, one envisages a system whereby all children with communication difficulties will be able to receive as much treatment as they require at the appropriate age, and where parents become more informed in dealing with what can be a very distressing problem.

HEALTH AND HEALTH EDUCATION IN A FURTHER EDUCATION COLLEGE

(Miss Elizabeth M. Scott, Health Visitor)

A Student Health Advisory Service is provided for students in Colleges of Further Education. Medical Examination of those taking a full-time course is arranged, but they form only a small percentage of the total number of students attending the college. Medical examination of students on "day release" from employment should be arranged by their employers under the Factory Act, 1961 (Para. 118)—the result of this examination is not available to us.

Examination of the full-time students is on a voluntary basis but all the students attend. Defective vision is commonly found and, as the students are anxious about their eyesight, sometimes with a view to passing the car driving test, they seek further treatment. Any other ailments discovered are usually being treated already or the patients are willing to seek treatment.

Health education varies from college to college and from class to class within a college. As many students attend college on the "day release" or "block release" system, only a small number of the college population can be given health education.

A number of students on the "block release" system are seen on perhaps one or two occasions and a decision has to be made on the most suitable health topics. As most seen by us are employed in various trades on building sites, the first topic chosen is "Accidents at Work" making use of a film strip showing some of the dangers involved. In the ensuing discussion the students usually agree that there is a fair amount of carelessness and larking among apprentices, but that it is often led by older and more experienced workmates. The second chosen topic is "Narcotics—The Decision" making use of a film of that name. Some of the students already have a knowledge of drug taking, but lack of knowledge of the long-term effect. Following a discussion there is still a suggestion of disbelief and "it couldn't happen to me."

Where it can be arranged, a class will be given a course of talks over a period of 5–6 weeks at weekly intervals. The topics are "avoidable ills," "smoking," "accidents at work and home," "venereal disease," "drugs" and "tension and mental health." The students are interested in their own health, which is shown by the discussion

at the end of a talk, but it is difficult to assess whether they change their habits or take avoiding action with their new knowledge. The smokers agree on all the points in favour of stopping the habit, but don't stop. Discussion following some of the other topics questions the right of the individual in relation to subjects which are known to be a health hazard.

As many of the full-time students choose health education from a number of subjects available at that period, it is interesting to see a fairly full class room at each visit. Two questions on health are included in the end of term examinations, in the general studies paper, and are not compulsory, but chosen by an encouraging number of students. Again, their answers pose the question of the law in relation to preventive medicine.

The time spent on health education in Further Education Colleges can be very rewarding in the interest shown by the students and the discussion which follows the talks. Unfortunately, it is difficult to assess the long-term effect and improvement in health it may have on future generations.

DENTAL INSPECTION AND TREATMENT REVIEW

Treatment carried out under Section 59 and 60 of the Education Act, 1962, and 58A of the Education Act, 1969, i.e. for children having full-time education, are detailed in Table 21. Treatment done under Section 22, i.e. for mothers and pre-school children, is given elsewhere in this report. Dental figures recorded in Table 1 and 2 refer solely to conditions reported by *doctors* doing *medical* examinations.

It is now seven years since a new group of ancillary personnel, dental auxiliaries, joined our Service. Auxiliaries who complete a two-year course as opposed to a five-year course for dentists, are allowed to carry out specific kinds of treatment under the supervision of a local authority dental officer or under staff supervision in a dental hospital. They were originally introduced because of a shortage of dentists, but over the years they have demonstrated their value to such a degree that they have now become accepted as essential members of the dental team. Their clinical work is of a very high standard and they have proved themselves indispensable in the field of dental

health education. Economically, while the basic overheads are the same for dentists and auxiliaries, as the latter's salaries are only about one third of the dental officers, this compensates for the fact that on average the auxiliary only does about three-fifths of the work of the dentist and this work is, of course, limited to her restricted sphere. Our records show that the necessary supervision works out at 1.75 minutes of the dentist's time to one hour of the auxiliary's clinical time. Having these combined teams of operators working in harmony, has contributed to the improved clinical productivity of the Dental Section which has increased by 49.5 per cent. per treatment session since the appointment of the present Chief Dental Officer. By the end of August, 1970, we shall have six auxiliaries on the staff.

The following figures give the position now existing in Glasgow compared with the previous year.

	1969-70	1968-69
<i>School Children—</i>		
Number of school children ...	175,118	174,392
Number requiring treatment (80%)	140,094	139,514
Number treated by S.H.S. (full-time equiv. 26 operators) ...	25,747	23,285
Number treated by G.P.'s (approximately 215) ...	70,541	71,019
Total treated (partially or fully) ...	96,288	94,304
Number requiring treatment but re- maining completely untreated ...	43,806	45,210

These figures provide ample evidence of the urgent need for water fluoridation or the implementation of a temporary measure such as the large scale use of fluoride tablets or topical fluoride application.

ARRANGEMENTS FOR PHYSICAL EDUCATION

(*Mr. W. Tinto, Adviser in Physical Education*)

With recent cuts in expenditure the priority of pavilions on grounds such as Toryglen, Nether Pollok and Shieldhall has had to yield to the demands for school buildings and extensions in other parts of the City. It is unfortunate also that playing fields adjacent to large schools in the City have had to be taken over for school building extensions,

thereby creating increased expenditure on transport for pupils to other games areas with consequent loss of that valuable commodity, time.

Our Easter Sailing Course this year was replaced by a Learn to Swim Week when 18 of our 30 school ponds were opened during Easter Week to allow about 3,000 pupils from 100 primary schools five consecutive lessons in swimming. Weather conditions were not of the best but once inside the pool halls all the conditions were present for learning to swim—a warm and friendly atmosphere, warm water, enthusiastic pupils and a competent and energetic staff of teachers who had given up their holiday to take part in this scheme. From every angle this scheme was a pronounced success and at the end of the week 50 per cent. of these attending were able to swim.

Courses for teachers included two basketball sessions, a lecture/demonstration on canoeing and the tenth course on Swimming for Primary Class Teachers. This latter course was the most successful so far and was attended by 36 teachers from primary schools.

The Panel on Physical Education in the Primary School has held monthly meetings throughout the year and a book of guiding notes on Inventive Movement and Games has been prepared for teachers in primary schools. The remaining sections of this book namely on Swimming and Expressive Movement will be prepared in the course of the ensuing term. A video tape on all the apparatus now in use in the gymnasium of the Modern Primary School in Glasgow was shown on closed circuit on four occasions throughout the year.

For the first time since the war the staffing situation on the female side is showing a distinct improvement. So much so, that it is possible we may open in September, having met most of the requirements on the female side. This means also that we shall be able to dispense with the assistance given by teachers who were conditionally registered and the time is opportune to record our sincere appreciation of excellent services which these teachers rendered in the schools. On the male side, the position is less happy and we anticipate a shortage of at least 10 teachers at the beginning of the new term. Our recruitment of male staff has suffered not least from the fact that some qualified teachers elect to go straight from College to posts furth of Scotland. One would hope that eventually all students may be persuaded to remain in this country for at least two years, particularly when our staff needs will increase with the raising of the school leaving age.

TABLE I
NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

No. of Children examined	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
7,957	7,779	6,795	7,237	1,775	1,586	16,886	17,011	33,897	
<i>Clothing—</i>									
Unsatisfactory	13 (0.1)	16 (0.2)	4 (0.0)	7 (0.0)	0 (0.0)	1 (0.0)	19 (0.1)	24 (0.1)	43 (0.1)
Ragged	11 (0.1)	6 (0.0)	6 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	17 (0.1)	9 (0.0)	26 (0.0)
Dirty	17 (0.2)	12 (0.1)	29 (0.4)	23 (0.3)	0 (0.0)	0 (0.0)	47 (0.2)	37 (0.2)	84 (0.2)
Totals	41 (0.5)	34 (0.4)	39 (0.5)	33 (0.4)	0 (0.0)	1 (0.0)	83 (0.4)	70 (0.4)	153 (0.4)
<i>Footwear—</i>									
Unsatisfactory	22 (0.2)	20 (0.2)	31 (0.4)	22 (0.3)	1 (0.0)	0 (0.0)	57 (0.3)	45 (0.2)	102 (0.3)
None	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)
Total	23 (0.2)	21 (0.2)	31 (0.4)	22 (0.3)	1 (0.0)	0 (0.0)	58 (0.3)	46 (0.2)	104 (0.3)
<i>INFECTIVE AND PARASITIC—</i>									
Late effects of acute poliomyelitis	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	2 (0.0)
Chickenpox	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Measles	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Mumps	2 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	2 (0.0)	4 (0.0)
Ringworm	1 (0.0)	1 (0.0)	20 (0.2)	8 (0.1)	16 (0.9)	5 (0.3)	37 (0.2)	14 (0.0)	51 (0.1)
Threadworms	2 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	1 (0.0)	4 (0.0)
Pediculosis	147 (1.8)	330 (4.2)	170 (2.5)	437 (6.0)	3 (0.1)	2 (0.1)	326 (1.9)	792 (4.6)	1,118 (3.2)
Scabies	42 (0.5)	34 (0.4)	23 (0.3)	21 (0.2)	0 (0.0)	0 (0.0)	68 (0.4)	58 (0.3)	126 (0.3)
Common Cold	84 (1.0)	81 (1.0)	20 (0.2)	32 (0.4)	4 (0.2)	9 (0.5)	108 (0.6)	124 (0.7)	232 (0.6)
Gastro-Enteritis	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	2 (0.0)
Vaginitis or Vulvitis	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	2 (0.0)
Totals	281 (3.5)	450 (5.7)	236 (3.4)	498 (6.8)	24 (1.3)	17 (1.0)	550 (3.2)	993 (5.8)	1,543 (4.5)

TABLE 1—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
SKIN DISEASE—									
Molluscum Contagiosum ...	3 (0.0)	3 (0.0)	7 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)	10 (0.0)	3 (0.0)	13 (0.0)
Warts or Verruca ...	46 (0.5)	47 (0.6)	72 (1.0)	101 (1.3)	16 (0.9)	9 (0.5)	135 (0.7)	159 (0.9)	294 (0.8)
Haemangioma ...	6 (0.0)	19 (0.2)	2 (0.0)	2 (0.0)	0 (0.0)	1 (0.0)	8 (0.0)	22 (0.1)	30 (0.0)
Boil or Carbuncle ...	5 (0.0)	2 (0.0)	2 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	8 (0.0)	5 (0.0)	13 (0.0)
Cellulitis of Finger ...	1 (0.0)	1 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	2 (0.0)	5 (0.0)
Impetigo ...	21 (0.2)	21 (0.2)	7 (0.1)	3 (0.0)	0 (0.0)	0 (0.0)	29 (0.1)	24 (0.1)	53 (0.1)
Eczema (unspecified) ...	34 (0.4)	40 (0.5)	14 (0.2)	19 (0.2)	7 (0.3)	3 (0.1)	56 (0.3)	62 (0.3)	118 (0.3)
Eczema (due to detergents)	1 (0.0)	0 (0.0)	1 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	3 (0.0)	5 (0.0)
Eczema (specific agents) ...	3 (0.0)	10 (0.1)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	13 (0.0)	16 (0.0)
Eczema (allergic) ...	38 (0.4)	38 (0.4)	10 (0.1)	14 (0.1)	3 (0.1)	3 (0.1)	53 (0.3)	55 (0.3)	108 (0.3)
Dermatitis ...	9 (0.1)	8 (0.1)	1 (0.0)	8 (0.1)	2 (0.1)	1 (0.0)	12 (0.0)	17 (0.0)	29 (0.0)
Psoriasis ...	8 (0.1)	11 (0.1)	12 (0.1)	35 (0.4)	6 (0.3)	8 (0.5)	26 (0.1)	55 (0.3)	81 (0.2)
Ichthyosis ...	16 (0.2)	8 (0.1)	8 (0.1)	9 (0.1)	2 (0.1)	0 (0.0)	26 (0.1)	17 (0.0)	43 (0.1)
Keloid Scar ...	11 (0.1)	5 (0.0)	7 (0.1)	3 (0.0)	0 (0.0)	0 (0.0)	18 (0.1)	8 (0.0)	26 (0.0)
Alopecia Areata ...	5 (0.0)	4 (0.0)	6 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	12 (0.0)	5 (0.0)	17 (0.0)
Acne ...	1 (0.0)	0 (0.0)	83 (1.2)	206 (2.8)	219 (12.3)	128 (8.0)	305 (1.8)	338 (1.9)	643 (1.8)
Other Disease of Sebaceous Glands ...									
Urticaria ...	105 (1.3)	74 (0.9)	25 (0.3)	19 (0.2)	0 (0.0)	2 (0.1)	133 (0.7)	97 (0.5)	230 (0.6)
Abrasions ...	18 (0.2)	5 (0.0)	7 (0.1)	2 (0.0)	3 (0.1)	0 (0.0)	28 (0.1)	7 (0.0)	35 (0.1)
Hairy Mole or Pigmented Naevus ...									
Totals ...	340 (4.2)	311 (3.9)	282 (4.1)	445 (6.1)	263 (14.8)	158 (9.9)	896 (5.3)	926 (5.4)	1,822 (5.3)

TABLE I—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTIONS

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
TEETH AND MOUTH—									
Adontia	3 (0.0)	2 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	3 (0.0)	6 (0.0)
Impacted Teeth	0 (0.0)	1 (0.0)	10 (0.1)	10 (0.1)	1 (0.0)	0 (0.0)	11 (0.0)	11 (0.0)	22 (0.0)
Dental Caries	2,322 (29.1)	2,342 (30.1)	961 (14.1)	879 (12.1)	145 (8.1)	68 (4.2)	3,524 (20.8)	3,378 (19.8)	6,902 (20.3)
Attrition of Teeth	4 (0.0)	1 (0.0)	4 (0.0)	1 (0.0)	1 (0.0)	1 (0.0)	9 (0.0)	4 (0.0)	13 (0.0)
Ankylosis of Teeth	0 (0.0)	0 (0.0)	3 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	3 (0.0)	6 (0.0)
Disease of Teeth Tissue	1 (0.0)	1 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	2 (0.0)	5 (0.0)
Dental Abscess	12 (0.1)	17 (0.2)	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	14 (0.0)	18 (0.1)	32 (0.0)
Stomatitis	1 (0.0)	1 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	4 (0.0)	1 (0.0)	5 (0.0)
Cleft Palate	0 (0.0)	1 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	3 (0.0)
Cleft Palate and Hare Lip	2 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	3 (0.0)	6 (0.0)
Totals	2,345 (29.4)	2,367 (30.4)	986 (14.5)	899 (12.4)	147 (8.2)	69 (4.3)	3,575 (21.1)	3,425 (20.1)	7,000 (20.6)
EAR, NOSE AND THROAT—									
Otitis Externa	5 (0.0)	3 (0.0)	4 (0.0)	5 (0.0)	0 (0.0)	0 (0.0)	9 (0.0)	8 (0.0)	17 (0.0)
Otitis Media—Acute	16 (0.2)	13 (0.1)	5 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	21 (0.1)	16 (0.0)	37 (0.1)
Otitis Media— Chronic Suppurative	20 (0.2)	33 (0.4)	29 (0.4)	19 (0.2)	2 (0.1)	0 (0.0)	53 (0.3)	52 (0.3)	105 (0.3)
Other Infective Disease of Ear	6 (0.0)	4 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	8 (0.0)	5 (0.0)	13 (0.0)
Wax in Ear	14 (0.1)	14 (0.1)	15 (0.2)	13 (0.1)	13 (0.7)	2 (0.1)	42 (0.2)	29 (0.1)	71 (0.2)
Other Disease of Ear	1 (0.0)	2 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	3 (0.0)	5 (0.0)
Sinusitis	5 (0.0)	2 (0.0)	4 (0.0)	5 (0.0)	0 (0.0)	3 (0.1)	10 (0.0)	10 (0.0)	20 (0.0)
Acute Tonsillitis	5 (0.0)	4 (0.0)	4 (0.0)	6 (0.0)	0 (0.0)	0 (0.0)	9 (0.0)	10 (0.0)	19 (0.0)
Tonsillar Hypertrophy	835 (10.4)	821 (10.5)	147 (2.1)	166 (2.2)	7 (0.3)	14 (0.8)	1,024 (6.0)	1,029 (6.0)	2,053 (6.0)
Chronic Pharyngitis	0 (0.0)	5 (0.0)	4 (0.0)	5 (0.0)	0 (0.0)	0 (0.0)	5 (0.0)	10 (0.0)	15 (0.0)

TABLE I—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Girls	Girls	Boys	Girls	
Chronic Nasopharyngitis ...	18 (0.2)	16 (0.2)	14 (0.2)	8 (0.1)	4 (0.2)	2 (0.1)	38 (0.2)	26 (0.1)	64 (0.1)
Deflected Nasal Septum ...	0 (0.0)	4 (0.0)	6 (0.0)	3 (0.0)	3 (0.1)	1 (0.0)	10 (0.0)	8 (0.0)	18 (0.0)
Nasal Polyposis	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	2 (0.0)
Hay Fever	5 (0.0)	2 (0.0)	6 (0.0)	7 (0.0)	1 (0.0)	4 (0.2)	12 (0.0)	14 (0.0)	26 (0.0)
Congenital Anomaly of Ear	1 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	3 (0.0)	5 (0.0)
Epistaxis	8 (0.1)	6 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	11 (0.0)	6 (0.0)	17 (0.0)
Totals	939 (11.8)	930 (11.9)	243 (3.5)	245 (3.3)	30 (1.6)	26 (1.6)	1,256 (7.4)	1,231 (7.2)	2,487 (7.3)
HEARING DEFECTS—									
Complete Hearing Loss (both ears)	4 (0.0)	4 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	6 (0.0)	4 (0.0)	10 (0.0)
Deafness in one ear ...	1 (0.0)	1 (0.0)	9 (0.1)	4 (0.0)	1 (0.0)	0 (0.0)	12 (0.0)	5 (0.0)	17 (0.0)
Impaired Hearing (one or both ears) ...	47 (0.5)	58 (0.7)	35 (0.5)	39 (0.5)	6 (0.3)	1 (0.0)	89 (0.5)	99 (0.5)	188 (0.5)
Totals	52 (0.6)	63 (0.8)	46 (0.6)	43 (0.5)	7 (0.3)	1 (0.0)	107 (0.6)	108 (0.6)	215 (0.6)
EYES—									
Conjunctivitis	7 (0.0)	2 (0.0)	2 (0.0)	2 (0.0)	0 (0.0)	2 (0.1)	9 (0.0)	6 (0.0)	15 (0.0)
Blepharitis	59 (0.7)	49 (0.6)	51 (0.7)	31 (0.4)	8 (0.4)	1 (0.0)	120 (0.7)	82 (0.4)	202 (0.5)
Stye	3 (0.0)	0 (0.0)	8 (0.1)	2 (0.0)	0 (0.0)	1 (0.0)	11 (0.0)	3 (0.0)	14 (0.0)
Corneal Ulcer	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Iritis	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Other Infective Disease of Eye	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)
Refractive Errors (All) ...	180 (2.2)	205 (2.6)	721 (10.6)	918 (12.6)	233 (13.1)	236 (14.8)	1,149 (6.8)	1,380 (8.1)	2,529 (7.4)

TABLE 1—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Corneal Opacity	2 (0.0)	6 (0.0)	5 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	8 (0.0)	8 (0.0)	16 (0.0)
Strabismus	284 (3.5)	247 (3.1)	68 (1.0)	80 (1.1)	5 (0.2)	11 (0.6)	367 (2.1)	351 (2.0)	718 (2.1)
Vascular Lesions of Retina	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	1 (0.0)	3 (0.0)
Colour Blindness	29 (0.3)	2 (0.0)	251 (3.6)	12 (0.1)	65 (3.6)	4 (0.2)	347 (2.0)	18 (0.1)	365 (1.0)
Chalazion	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)
Other Diseases of Eye ...	3 (0.0)	2 (0.0)	4 (0.0)	0 (0.0)	1 (0.0)	4 (0.2)	9 (0.0)	6 (0.0)	15 (0.0)
Blindness (both eyes) ...	1 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)
Blindness (one eye) ...	3 (0.0)	4 (0.0)	8 (0.1)	5 (0.0)	7 (0.3)	0 (0.0)	18 (0.1)	9 (0.0)	27 (0.0)
Nystagmus	1 (0.0)	2 (0.0)	4 (0.0)	2 (0.0)	2 (0.1)	1 (0.0)	7 (0.0)	5 (0.0)	12 (0.0)
Totals	574 (7.2)	520 (6.6)	1,124 (16.5)	1,055 (14.5)	322 (18.1)	261 (16.4)	2,050 (12.1)	1,872 (11.0)	3,922 (11.5)
SPEECH—									
All Speech Defects	230 (2.8)	131 (1.6)	43 (0.6)	15 (0.2)	4 (0.2)	3 (0.1)	283 (1.6)	154 (0.9)	437 (1.2)
Totals	230 (2.8)	131 (1.6)	43 (0.6)	15 (0.2)	4 (0.2)	3 (0.2)	283 (1.6)	154 (0.9)	437 (1.2)
LUNGS—									
Primary Tuberculous Complex	1 (0.0)	0 (0.0)	4 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	6 (0.0)	3 (0.0)	9 (0.0)
Acute Bronchitis	54 (0.6)	40 (0.5)	5 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	60 (0.3)	42 (0.2)	102 (0.3)
Influenza (unqualified) ...	2 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	3 (0.0)	5 (0.0)
Chronic Bronchitis	42 (0.5)	21 (0.2)	10 (0.1)	6 (0.0)	1 (0.0)	2 (0.1)	53 (0.3)	30 (0.1)	83 (0.2)
Asthma	87 (1.0)	26 (0.3)	83 (1.2)	36 (0.4)	17 (0.9)	1 (0.0)	196 (1.1)	65 (0.3)	261 (0.7)
Pleurisy	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)
Bronchiectasis	0 (0.0)	3 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	4 (0.0)	4 (0.0)
Totals	187 (2.3)	94 (1.2)	102 (1.5)	48 (0.6)	19 (1.0)	3 (0.1)	318 (1.8)	148 (0.8)	466 (1.3)

TABLE 1—*Continued*

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
HEART AND CIRCULATION—									
Iron Deficiency Anaemia ...	16 (0.2)	22 (0.2)	11 (0.1)	21 (0.2)	0 (0.0)	1 (0.0)	27 (0.1)	44 (0.2)	71 (0.2)
Anaemia (unspecified) ...	11 (0.1)	11 (0.1)	9 (0.1)	4 (0.0)	1 (0.0)	6 (0.3)	21 (0.1)	22 (0.1)	43 (0.1)
Haemophilia ...	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Allergic Purpura ...	0 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	1 (0.0)	3 (0.0)
Chronic Rheumatic Heart Disease ...									
	2 (0.0)	2 (0.0)	7 (0.1)	5 (0.0)	3 (0.1)	1 (0.0)	12 (0.0)	8 (0.0)	20 (0.0)
Fallot's Tetralogy ...	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Interventricular Septal Defect	8 (0.1)	8 (0.1)	5 (0.0)	6 (0.0)	0 (0.0)	2 (0.1)	13 (0.0)	16 (0.0)	29 (0.0)
Interatrial Septal Defect ...	5 (0.0)	6 (0.0)	2 (0.0)	3 (0.0)	0 (0.0)	1 (0.0)	7 (0.0)	10 (0.0)	17 (0.0)
Other Malformations of Heart	10 (0.1)	8 (0.1)	7 (0.1)	7 (0.0)	2 (0.1)	3 (0.1)	19 (0.1)	20 (0.1)	39 (0.1)
Patent Ductus Arteriosus	3 (0.0)	3 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	4 (0.0)	7 (0.0)
Coarctation of Aorta ...	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	2 (0.0)
Totals ...	58 (0.7)	61 (0.7)	43 (0.6)	47 (0.6)	7 (0.3)	14 (0.8)	108 (0.6)	125 (0.7)	233 (0.6)
ORTHOPAEDIC—									
Spine Osteochondrosis ...	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	2 (0.1)	2 (0.0)	2 (0.0)	4 (0.0)
Osteochondrosis of Hip ...	2 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	3 (0.0)	2 (0.0)	5 (0.0)
Osteochondrosis, Other ...	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	2 (0.0)
Bunion ...	1 (0.0)	0 (0.0)	2 (0.0)	6 (0.0)	0 (0.0)	3 (0.1)	3 (0.0)	9 (0.0)	12 (0.0)
Bursitis, Synovitis ...	3 (0.0)	0 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	5 (0.0)	2 (0.0)	7 (0.0)
Infective Myositis, etc. ...	0 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	3 (0.0)
Curvature of Spine (not congenital) ...									
	8 (0.1)	14 (0.1)	31 (0.4)	31 (0.4)	10 (0.5)	7 (0.4)	49 (0.2)	53 (0.3)	102 (0.3)
Flat foot (not congenital) ...	104 (1.3)	95 (1.2)	31 (0.4)	37 (0.5)	8 (0.4)	4 (0.2)	149 (0.8)	141 (0.8)	290 (0.8)

TABLE 1—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Hallux Valgus (not congenital)	8 (0.1)	0 (0.0)	3 (0.0)	14 (0.1)	0 (0.0)	3 (0.1)	11 (0.0)	18 (0.1)	29 (0.0)
Hallux Rigidis, etc. ...	62 (0.7)	92 (1.1)	11 (0.1)	17 (0.2)	0 (0.0)	0 (0.0)	74 (0.4)	109 (0.6)	183 (0.5)
Club Foot	7 (0.0)	4 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	9 (0.0)	5 (0.0)	14 (0.0)
Congenital Dislocation of Hip	1 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	2 (0.0)	4 (0.0)
Other Congenital									
Anomaly lower limb ...	24 (0.3)	19 (0.2)	8 (0.1)	5 (0.0)	3 (0.1)	3 (0.1)	37 (0.2)	32 (0.1)	69 (0.2)
Congenital Anomaly of Spine	2 (0.0)	7 (0.0)	5 (0.0)	2 (0.0)	0 (0.0)	1 (0.0)	7 (0.0)	10 (0.0)	17 (0.0)
Unspecified Anomaly of Musculo-Skeletal System ...	8 (0.1)	4 (0.0)	19 (0.2)	8 (0.1)	10 (0.5)	4 (0.2)	37 (0.2)	16 (0.0)	53 (0.1)
Swelling of Joint	2 (0.0)	1 (0.0)	1 (0.0)	4 (0.0)	3 (0.1)	1 (0.0)	6 (0.0)	6 (0.0)	12 (0.0)
Totals	232 (2.9)	238 (3.0)	122 (1.7)	128 (1.7)	34 (1.9)	30 (1.8)	397 (2.3)	409 (2.4)	806 (2.3)
UROGENITAL CONDITIONS—									
Nephrotic Syndrome ...	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)
Chronic Nephritis	1 (0.0)	1 (0.0)	1 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	2 (0.0)	4 (0.0)
Infections of Kidney ...	1 (0.0)	9 (0.1)	1 (0.0)	3 (0.0)	0 (0.0)	1 (0.0)	2 (0.0)	13 (0.0)	15 (0.0)
Other Pyelonephritis ...	4 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	4 (0.0)	2 (0.0)	6 (0.0)
Cystitis, etc.	0 (0.0)	2 (0.0)	2 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	5 (0.0)	7 (0.0)
Hydrocele	4 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	5 (0.0)	0 (0.0)	5 (0.0)
Phimosis	6 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	6 (0.0)	0 (0.0)	6 (0.0)
Atrophy of Vagina	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)
Undescended Testes ...	79 (0.9)	0 (0.0)	11 (0.1)	0 (0.0)	3 (0.1)	0 (0.0)	93 (0.5)	0 (0.0)	93 (0.2)
Hypospadias	5 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	5 (0.0)	0 (0.0)	5 (0.0)
Totals	101 (1.2)	15 (0.1)	15 (0.2)	8 (0.1)	3 (0.1)	1 (0.0)	120 (0.7)	24 (0.1)	144 (0.4)

TABLE 1—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
EMOTIONAL—									
Anxiety Neurosis	3	2	3	5	0	1	7	8	15
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Paranoid (traits)	3	0	5	1	0	1	8	2	10
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Emotional Instability ...	4	5	1	2	1	0	6	7	13
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Aggressiveness	2	0	1	1	0	0	3	1	4
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Passive Dependency	6	10	0	0	0	0	7	11	18
	(0.0)	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Anxiety State	5	2	2	3	0	0	7	5	12
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Nightmares	4	0	0	0	0	0	4	0	4
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Enuresis	316	338	30	8	0	0	358	354	712
	(3.9)	(4.3)	(0.4)	(0.1)	(0.0)	(0.0)	(2.1)	(2.0)	(2.1)
Encopresis	1	3	0	0	0	0	1	3	4
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Transient Situational Disturbance	14	7	1	3	0	1	15	12	27
	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Behaviour Disorder (tantrums)	10	7	2	1	0	0	12	8	20
	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Totals	368	374	45	24	1	3	428	411	839
	(4.6)	(4.8)	(0.6)	(0.3)	(0.0)	(0.1)	(2.5)	(2.4)	(2.4)
NEUROLOGICAL—									
Meningitis (H. Influenzae)	1	0	2	1	0	0	3	2	5
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Hydrocephalus (acquired) ...	1	1	2	0	0	0	3	2	5
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Progressive Muscular Atrophy	0	0	1	0	0	0	1	0	1
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Hereditary Spinal Ataxia ...	0	0	1	0	0	0	1	0	1
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Cerebral Palsy (congenital)...	5	4	12	6	0	0	18	10	28
	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)
Cerebral Palsy (unspecified causes) ...	2	0	0	2	0	0	2	2	4
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
Epilepsy (Petit Mal) ...	8	7	11	11	1	3	20	21	41
	(0.1)	(0.0)	(0.1)	(0.1)	(0.0)	(0.1)	(0.1)	(0.1)	(0.1)
Epilepsy (Grand Mal) ...	7	7	7	6	1	2	15	15	30
	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)	(0.0)

TABLE 1—Continued

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Epilepsy (Jacksonian) ...	2 (0.0)	0 (0.0)	2 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	4 (0.0)	1 (0.0)	5 (0.0)
Migraine	1 (0.0)	2 (0.0)	8 (0.1)	5 (0.0)	3 (0.1)	4 (0.2)	12 (0.0)	11 (0.0)	23 (0.0)
Bell's Palsy	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	2 (0.0)
Totals	27 (0.3)	21 (0.2)	46 (0.6)	33 (0.4)	5 (0.2)	10 (0.6)	79 (0.4)	66 (0.3)	145 (0.4)
MENTAL RETARDATION—									
Borderline Mental Retardation (following infections) ...	5 (0.0)	4 (0.0)	23 (0.3)	31 (0.4)	0 (0.0)	2 (0.1)	29 (0.1)	37 (0.2)	66 (0.1)
Borderline Mental Retardation (following trauma) ...	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)	2 (0.0)
Borderline Mental Retardation (other and unspecified) ...	3 (0.0)	1 (0.0)	26 (0.3)	34 (0.4)	2 (0.1)	1 (0.0)	31 (0.1)	40 (0.2)	71 (0.2)
Mild Mental Retardation (following infections) ...	2 (0.0)	0 (0.0)	21 (0.3)	16 (0.2)	0 (0.0)	0 (0.0)	23 (0.1)	16 (0.0)	39 (0.1)
Mild Mental Retardation (following trauma) ...	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)
Mild Mental Retardation (other and unspecified) ...	0 (0.0)	3 (0.0)	8 (0.1)	7 (0.0)	0 (0.0)	3 (0.1)	8 (0.0)	17 (0.0)	25 (0.0)
Moderate Mental Retardation (following infections) ...	2 (0.0)	0 (0.0)	2 (0.0)	3 (0.0)	0 (0.0)	0 (0.0)	4 (0.0)	3 (0.0)	7 (0.0)
Moderate Mental Retardation (other and unspecified) ...	0 (0.0)	1 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	1 (0.0)	3 (0.0)
Unspecified Mental Retardation	1 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	2 (0.0)
Totals	14 (0.1)	9 (0.1)	83 (1.2)	92 (1.2)	2 (0.1)	6 (0.3)	101 (0.5)	115 (0.6)	216 (0.6)
OTHER DISEASES AND DEFECTS—									
Simple Goitre (unspecified)	1 (0.0)	0 (0.0)	0 (0.0)	5 (0.0)	0 (0.0)	2 (0.1)	1 (0.0)	7 (0.0)	8 (0.0)
Cretinism	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)

TABLE 1—*Continued*

NUMBERS AND PERCENTAGES OF CHILDREN FOUND WITH
DEFECTS AT ROUTINE MEDICAL INSPECTION

	Entrants		13-year-olds		16-year-olds		All ages		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls		
OTHER DISEASES AND DEFECTS										
<i>Continued—</i>										
Myxoedema	1	0	0	0	0	0	2	0	2	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Diabetes Mellitus	2	3	4	7	2	3	8	13	21	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	
Vitamin D Deficiency	1	0	0	0	0	0	1	0	1	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Malnutrition	9	7	4	0	1	0	14	7	21	
	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Coeliac Disease	10	14	1	6	0	0	11	21	32	
	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.0)	
Underweight	58	75	20	17	1	0	82	94	176	
	(0.7)	(0.9)	(0.2)	(0.2)	(0.0)	(0.0)	(0.4)	(0.5)	(0.5)	
Obesity	22	33	127	175	31	81	187	289	476	
	(0.2)	(0.4)	(1.8)	(2.4)	(1.7)	(5.1)	(1.1)	(1.6)	(1.4)	
Inguinal Hernia	25	0	2	0	1	0	28	0	28	
	(0.3)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)	
Femoral Hernia	6	1	0	0	0	0	6	1	7	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Umbilical Hernia	3	7	1	0	0	0	4	8	12	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Constipation	7	3	0	3	0	0	7	7	14	
	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	
Swollen Glands	57	93	5	25	2	3	69	126	195	
	(0.7)	(1.1)	(0.0)	(0.3)	(0.1)	(0.1)	(0.4)	(0.7)	(0.5)	
Debility undue fatigue	8	14	9	15	0	0	17	29	46	
	(0.1)	(0.1)	(0.1)	(0.2)	(0.0)	(0.0)	(0.1)	(0.1)	(0.1)	
Miscellaneous	38	34	27	20	3	4	69	60	129	
	(0.4)	(0.4)	(0.3)	(0.2)	(0.1)	(0.2)	(0.4)	(0.3)	(0.3)	
Totals	249	284	200	273	41	93	507	662	1,169	
	(3.0)	(3.6)	(2.9)	(3.7)	(2.3)	(5.9)	(3.0)	(3.9)	(3.4)	
ALL DEFECTS—										
Total	5,997	5,868	3,616	3,853	909	695	10,775	10,669	21,444	
	(75.3)	(75.4)	(53.2)	(53.2)	(51.2)	(43.8)	(63.8)	(62.7)	(63.2)	

TABLE 2
 NUMBERS AND PERCENTAGES (BY SOCIAL CLASS) OF CHILDREN SUFFERING FROM DEFECTS

	ENTRANTS										16-YEAR-OLDS										ALL AGES					TOTAL			
	1		2		3		4		5		1		2		3		4		5		1	2	3	4	5				
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%							No.	%	No.
No. Examined	283	1,879	4,863	5,222	3,489	350	1,955	4,263	4,539	2,925	226	1,107	1,010	755	263	887	5,046	10,366	10,755	6,843	33,897								
Clothing Unsatisfactory	M	0	0	1	4	8	0	0	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0	2	5	12	19		
	F	0	0	0	5	11	0	1	2	2	2	0	1	0	0	0	0	0	0	0	0	0	2	2	7	13	24		
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	2	1	3	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	4	1	4	9	
Clothing Ragged	M	0	0	2	1	8	0	0	3	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	5	3	9	17	
	F	0	0	2	1	3	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Clothing Dirty	M	1	0	1	3	12	0	0	4	9	16	0	0	0	0	0	0	0	0	0	0	1	0	0	5	13	28	47	
	F	0	0	1	3	8	0	1	5	4	13	0	0	0	0	0	0	0	0	0	0	0	1	6	9	21	37		
	M	1	0	4	8	28	0	0	8	12	19	0	0	0	0	0	0	0	0	0	0	1	0	0	12	21	49	83	
	F	0	0	3	9	22	0	2	9	6	16	0	1	0	0	0	0	0	0	0	0	0	3	12	17	38	70		
Totals	M	1	0	4	8	28	0	0	8	12	19	0	0	0	0	0	0	0	0	0	0	1	0	0	12	21	49	83	
	F	0	0	3	9	22	0	2	9	6	16	0	1	0	0	0	0	0	0	0	0	0	3	12	17	38	70		
Footwear	M	0	0	8	8	6	0	1	8	9	13	0	1	0	0	0	0	0	0	0	0	0	0	2	16	18	21	57	
Unsatisfactory	F	0	0	2	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	5	13	27	45	
Footwear None	M	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	
	F	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	
Totals	M	0	0	8	8	7	0	1	8	9	13	0	1	0	0	0	0	0	0	0	0	0	2	16	18	22	58		
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3	5	14	0	0	0	0	0	0	0	0	0	0	0	0	0	6	13	27	46	
	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	F	0	0	3	6	12	0	0	3																				

TABLE 2—Continued

	ENTRANTS					13 YEAR OLDS					16 YEAR OLDS					ALL AGES					TOTAL
	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	
<i>Ear, Nose and Throat—</i>																					
<i>(Contd.)—</i>																					
<i>Congenital</i>																					
M	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
<i>Anomaly of Ear</i>																					
F	0	0	0	0	1	0	1	1	0	0	0	0	0	0	0	0	1	1	0	1	3
	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
<i>Epistaxis</i>																					
M	0	0	2	5	1	0	0	0	2	0	0	0	0	0	0	0	0	3	7	1	11
	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)
F	0	2	0	4	0	0	0	0	0	0	0	0	0	0	0	0	2	0	4	0	6
	(0-0)	(0-2)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
<i>TOTALS</i>																					
M	14	130	282	303	210	9	24	73	81	56	1	7	12	5	5	24	165	383	408	276	1,256
	(13-8)	(13-4)	(11-3)	(11-4)	(12-0)	(5-7)	(2-4)	(3-5)	(3-7)	(3-9)	(1-0)	(1-1)	(2-2)	(1-2)	(3-6)	(6-5)	(6-3)	(7-3)	(7-6)	(8-1)	(3-7)
F	26	93	302	317	192	5	27	60	85	68	2	11	5	5	3	35	134	379	414	269	1,231
	(14-2)	(10-2)	(12-7)	(12-3)	(11-0)	(2-5)	(2-8)	(2-7)	(3-5)	(4-5)	(1-5)	(2-1)	(1-0)	(1-4)	(2-3)	(6-7)	(5-4)	(7-3)	(7-6)	(7-7)	(3-6)
<i>Hearing Defects—</i>																					
<i>Complete Loss of</i>																					
<i>Hearing</i>																					
M	0	0	1	3	0	0	0	1	0	1	0	0	0	0	0	0	0	2	3	1	6
	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
F	0	0	1	2	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	4
	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
<i>Deafness in</i>																					
<i>One Ear</i>																					
M	0	0	0	0	1	2	1	2	3	1	0	0	1	0	0	2	1	4	3	2	12
	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(1-2)	(0-1)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-5)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
F	0	0	0	1	0	0	0	0	2	2	0	0	0	0	0	0	0	0	3	2	5
	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)
<i>Impaired Hearing</i>																					
M	1	8	12	12	14	1	3	9	12	10	0	0	0	5	1	2	11	22	29	25	89
	(0-9)	(0-8)	(0-4)	(0-4)	(0-8)	(0-6)	(0-3)	(0-4)	(0-5)	(0-7)	(0-0)	(0-0)	(0-0)	(1-2)	(0-7)	(0-5)	(0-4)	(0-4)	(0-5)	(0-7)	(0-2)
F	1	4	16	18	19	1	5	9	14	10	0	0	1	0	0	2	9	27	32	29	99
	(0-5)	(0-4)	(0-6)	(0-6)	(1-0)	(0-5)	(0-5)	(0-4)	(0-5)	(0-6)	(0-0)	(0-0)	(0-2)	(0-0)	(0-0)	(0-3)	(0-3)	(0-5)	(0-5)	(0-8)	(0-2)
<i>TOTALS</i>																					
M	1	8	13	15	15	3	4	12	15	12	0	0	1	5	1	4	12	28	35	28	107
	(0-9)	(0-8)	(0-5)	(0-5)	(0-8)	(1-9)	(0-4)	(0-5)	(0-6)	(0-8)	(0-0)	(0-0)	(0-1)	(1-2)	(0-7)	(1-0)	(0-4)	(0-5)	(0-6)	(0-8)	(0-3)
F	1	4	17	21	20	1	5	9	16	12	0	0	1	0	0	2	9	28	37	32	108
	(0-5)	(0-4)	(0-7)	(0-8)	(1-1)	(0-5)	(0-5)	(0-4)	(0-6)	(0-7)	(0-0)	(0-0)	(0-2)	(0-0)	(0-0)	(0-3)	(0-3)	(0-5)	(0-6)	(0-9)	(0-3)

TABLE 2—Continued

		ENTRANTS					13 YEAR OLDS					16 YEAR OLDS					ALL AGES					TOTAL
		1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	
Eyes—(Contd.)— Vascular Lesions of Retina	M	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1	0	2
	F	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	1
Colour Blindness	M	0	5	10	9	5	11	44	69	81	46	3	20	29	11	2	14	71	108	101	53	347
	F	0	0	0	2	0	0	0	8	2	2	0	2	0	0	0	0	2	8	4	4	18
Chalazion	M	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	F	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1
Other Diseases of Eye	M	1	0	0	1	1	0	2	1	0	1	0	0	0	1	0	1	2	1	3	2	9
	F	0	0	0	1	1	0	0	0	0	0	0	1	1	1	1	0	1	1	2	2	6
Blindness (Both Eyes)	M	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
	F	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	1
Blindness (One Eye)	M	0	0	0	1	2	1	0	0	6	1	1	1	5	0	0	2	1	5	7	3	18
	F	0	0	1	1	2	0	0	1	3	1	0	0	0	0	0	0	0	2	4	3	9
Nystagmus	M	0	0	0	1	0	0	0	0	1	3	0	1	1	0	0	0	1	1	2	3	7
	F	0	0	0	2	0	0	0	2	0	0	0	0	0	1	0	0	0	2	3	0	5
TOTALS	M	5	59	178	196	136	29	163	312	362	258	12	108	108	64	30	46	334	602	636	432	2,050
	F	13	58	136	169	144	33	152	302	354	214	15	77	83	56	30	63	289	532	590	398	1,872
		(7-1)	(6-3)	(5-7)	(6-5)	(8-2)	(17-0)	(15-8)	(13-8)	(14-8)	(14-2)	(11-7)	(14-7)	(17-3)	(16-3)	(23-6)	(12-0)	(11-8)	(10-3)	(10-8)	(11-5)	(5-5)

TABLE 2—Continued

	ENTRANTS					13 YEAR OLDS					16 YEAR OLDS					ALL AGES					TOTAL																						
	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5																							
Coeliac Disease	M	1	1	3	2	3	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	3	2	4	11	(0-9)	(0-1)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-2)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)
	F	0	2	3	4	5	0	0	0	4	2	0	0	0	0	0	0	0	0	0	0	0	2	3	9	7	21	(0-0)	(0-2)	(0-1)	(0-2)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-2)	(0-0)
Underweight	M	1	7	15	12	23	0	1	6	7	6	0	1	0	0	0	0	1	0	0	0	1	9	22	21	29	82	(0-9)	(0-7)	(0-6)	(0-4)	(1-3)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-2)	(0-3)	(0-4)	(0-3)	(0-8)	(0-2)
	F	0	2	22	30	21	0	1	3	6	7	0	0	0	0	0	0	0	0	0	0	0	3	25	36	30	94	(0-0)	(0-2)	(0-9)	(1-1)	(1-2)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-4)	(0-6)	(0-8)	(0-2)
Obesity	M	1	3	9	4	5	6	27	38	41	15	4	14	6	6	1	11	47	53	52	24	187	(0-9)	(0-3)	(0-3)	(0-1)	(0-2)	(3-8)	(2-7)	(1-8)	(1-9)	(1-0)	(3-0)	(1-8)	(1-0)	(0-9)	(0-7)	(0-5)					
	F	0	3	14	13	3	1	31	46	65	32	2	23	26	23	7	3	57	86	101	42	289	(0-0)	(0-3)	(0-5)	(0-5)	(0-1)	(0-5)	(3-2)	(2-1)	(2-7)	(2-1)	(0-5)	(2-3)	(1-6)	(1-8)	(1-2)	(0-8)					
Inguinal Hernia	M	0	3	11	7	4	0	1	0	1	0	0	0	0	0	0	0	4	12	8	4	28	(0-0)	(0-3)	(0-4)	(0-2)	(0-2)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-2)	(0-1)	(0-1)	(0-0)					
	F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)										
Femoral Hernia	M	0	0	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	6	(0-0)	(0-0)	(0-0)	(0-1)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)					
	F	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)					
Umbilical Hernia	M	0	0	1	1	1	0	0	0	1	0	0	0	0	0	0	0	0	1	2	1	4	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)					
	F	0	1	5	0	1	0	0	0	0	0	0	0	0	0	0	0	1	6	0	1	8	(0-0)	(0-1)	(0-2)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)					
Constipation	M	1	1	1	2	2	0	0	0	0	0	0	0	0	0	0	1	1	1	2	2	7	(0-9)	(0-1)	(0-0)	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-2)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)					
	F	0	1	1	1	0	0	0	1	1	1	0	0	0	0	0	0	1	2	2	2	7	(0-0)	(0-1)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)	(0-0)					
Swollen Glands	M	3	7	21	13	13	0	0	2	3	0	0	0	1	1	0	3	8	25	19	14	69	(2-9)	(0-7)	(0-8)	(0-4)	(0-7)	(0-0)	(0-0)	(0-0)	(0-1)	(0-0)	(0-8)	(0-3)	(0-4)	(0-3)	(0-4)	(0-2)					
	F	6	19	33	19	16	0	7	3	5	10	0	1	0	1	1	6	27	39	27	27	126	(3-2)	(2-0)	(1-3)	(0-7)	(0-9)	(0-0)	(0-1)	(0-0)	(0-2)	(0-6)	(1-1)	(1-1)	(0-7)	(0-4)	(0-3)	(0-3)					

TABLE 3
 AVERAGE MEASUREMENTS OF SCHOOL CHILDREN RELATED TO SOCIAL CLASS
 (INCHES AND POUNDS)

	5 YEAR OLDS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
	Height	Weight	Height	Weight	Height	Weight	Height	Weight
Social Class 1 (Professional) ...	101	182	156	194	98	128	365	522
	43-8	43-6	61-6	61-9	68-2	63-7		124-8
	43-2	43-6	101-8	107-2	140-7			
Social Class 2 (Intermediate) ...	969	910	996	959	584	523	2,603	2,443
	43-6	43-1	61-0	61-2	67-4	63-4		123-6
	43-2	42-6	100-2	105-0	134-6			
Social Class 3 (Skilled) ...	2,487	2,376	2,075	2,188	545	465	5,205	5,161
	42-6	42-4	60-0	60-2	67-1	62-8		120-5
	42-2	41-2	96-5	101-2	131-7			
Social Class 4 (Semi-skilled) ...	2,650	2,572	2,150	2,389	412	343	5,322	5,433
	42-5	42-4	59-8	60-1	67-0	62-7		122-4
	41-8	40-8	95-7	101-0	101-0			
Social Class 5 (Unskilled) ...	1,750	1,739	1,418	1,507	136	127	3,391	3,452
	41-9	41-6	59-9	59-3	66-5	63-0		122-1
	41-0	39-7	91-9	98-7	130-0			
TOTAL NUMBERS EXAMINED ...	7,957	7,779	6,795	7,237	1,775	1,586	16,886	17,011
	42-6	42-3	60-1	60-1	67-2	63-0		122-4
	41-9	41-0	95-9	101-3	132-8			

TABLE 4
 AVERAGE MEASUREMENTS OF SCHOOL CHILDREN BY POSITION IN FAMILY
 (INCHES AND POUNDS)

POSITION IN FAMILY	5 YEAR OLDS				13 YEAR OLDS				16 YEAR OLDS				ALL AGES					
	Boys		Girls		Boys		Girls		Boys		Girls		Boys	Girls				
	Height	Weight	Height	Weight	Height	Weight	Height	Weight	Height	Weight	Height	Weight						
1	1,833	42-6	1,816	41-9	2,264	60-2	97-0	60-5	103-2	2,327	60-5	103-2	741	133-0	63-0	122-6	4,928	4,893
2	2,244	42-3	2,114	41-5	2,072	60-4	96-8	60-2	101-6	2,237	60-2	101-6	575	134-1	63-2	122-9	4,987	5,018
3	1,579	41-6	1,539	40-6	1,267	59-7	94-6	60-1	100-3	1,323	60-1	100-3	276	130-5	63-1	122-5	3,186	3,158
4	1,050	41-3	1,079	40-2	676	60-4	95-4	59-7	100-2	743	60-4	95-4	113	134-0	63-0	119-6	1,889	1,984
5	595	41-5	526	40-2	271	59-2	92-5	59-1	96-2	303	59-1	96-2	44	125-9	62-1	118-8	936	892
6	327	41-1	349	39-7	154	59-0	93-3	59-1	95-9	176	59-1	95-9	18	126-2	62-5	126-1	516	558
7	140	40-9	168	39-0	56	58-9	87-8	59-4	97-3	81	58-9	87-8	5	135-6	62-0	119-5	211	260
8	98	40-1	84	39-7	15	58-5	87-3	58-6	94-2	17	58-5	87-3	1	136-0	65-5	120-5	118	107
9	47	40-9	59	39-3	10	58-9	87-9	59-1	98-8	8	58-9	87-9	2	139-2	59-0	85-0	60	72
10	21	41-9	26	39-5	3	63-5	62-5	59-3	95-4	11	63-5	62-5	0	0-0	0-0	0-0	24	38
11	8	41-3	7	41-2	3	59-1	94-6	58-7	99-0	6	59-1	94-6	0	0-0	0-0	0-0	11	13
12	6	41-2	1	42-0	1	55-0	80-0	59-0	107-5	2	55-0	80-0	0	0-0	0-0	0-0	7	4
13	3	40-1	2	43-0	0	0-0	0-0	0-0	0-0	0	0-0	0-0	0	0-0	0-0	0-0	3	2
14	1	39-0	0	43-7	0	0-0	0-0	0-0	0-0	0	0-0	0-0	0	0-0	0-0	0-0	1	0
15	1	42-0	1	45-0	0	0-0	0-0	0-0	0-0	0	0-0	0-0	0	0-0	0-0	0-0	1	1
		43-0		43-0		0-0	0-0	0-0	0-0		0-0	0-0		0-0	0-0	0-0		

TABLE 5

AVERAGE MEASUREMENTS OF SCHOOL CHILDREN IN MONTHS BEYOND YEAR OF AGE

Average Months Beyond Age	5 YEAR OLDS				13 YEAR OLDS				16 YEAR OLDS			
	Boys		Girls		Boys		Girls		Boys		Girls	
Months Beyond Age—	Height	Weight	Height	Weight	Height	Weight	Height	Weight	Height	Weight	Height	Weight
	4:5	4:8	5:3	5:4	4:7	4:6						
0 - 1 Months ...	41.7	40.9	41.4	39.7	59.1	91.3	59.4	97.8	66.5	128.8	62.7	122.7
1 - 2 Months ...	41.9	41.0	41.5	39.6	59.1	92.5	59.4	95.0	66.8	132.3	62.9	123.8
2 - 3 Months ...	42.3	41.1	41.6	40.0	59.3	93.0	59.8	96.8	66.4	128.8	63.0	118.8
3 - 4 Months ...	42.3	41.6	41.9	40.4	59.3	93.1	59.8	99.3	66.8	130.9	63.0	124.4
4 - 5 Months ...	42.4	41.9	42.1	40.7	59.2	92.9	60.0	101.7	67.0	132.4	62.9	123.3
5 - 6 Months ...	42.6	42.1	42.2	41.0	60.3	93.8	60.0	100.2	67.2	133.0	62.9	121.3
6 - 7 Months ...	42.8	42.4	42.5	41.5	60.6	96.1	60.2	103.5	67.7	135.3	63.3	122.4
7 - 8 Months ...	43.6	42.3	43.6	41.6	60.0	97.0	60.0	101.7	66.7	131.8	63.0	122.3
8 - 9 Months ...	43.1	43.2	42.9	41.8	60.3	97.6	60.5	101.9	67.2	134.9	63.2	123.4
9 - 10 Months ...	43.3	43.4	43.1	42.6	60.2	97.3	60.4	103.4	67.4	133.2	63.2	121.3
10 - 11 Months ...	43.4	43.4	43.3	42.8	60.8	99.3	60.8	104.6	68.0	136.0	63.3	122.2
11 - 12 Months ...	44.5	46.5	43.7	43.7	61.0	99.5	60.9	105.7	68.4	138.5	63.1	123.5

TABLE 6
 ADDITIONAL INFORMATION REGARDING RESULTS OF SYSTEMATIC EXAMINATIONS
 (PERCENTAGES IN BRACKETS)

	ENTRANTS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Parents present at examination	7,423 (93.3)	7,199 (92.6)	985 (14.5)	963 (13.3)	26 (1.4)	31 (1.9)	8,691 (51.5)	8,490 (49.9)	17,181 (50.7)
Parents notified of defects requiring treatment ...	3,932 (49.4)	3,847 (49.4)	2,341 (34.4)	2,546 (35.2)	569 (32.0)	408 (25.7)	7,003 (41.4)	6,955 (40.9)	13,958 (41.1)
Children noted for re-inspection as "at risk" cases	807 (10.1)	766 (9.8)	650 (9.5)	766 (10.6)	138 (7.7)	164 (10.3)	1,626 (9.6)	1,720 (10.1)	3,346 (9.8)
Children free from defects in terms of Table 7—									
(a) No recorded defect	3,263 (41.0)	3,173 (40.8)	3,625 (53.4)	3,819 (52.8)	918 (51.7)	957 (60.4)	7,966 (47.2)	8,158 (48.0)	16,124 (47.6)
(b) Defects of clothing only	3 (0.0)	6 (0.0)	19 (0.2)	13 (0.1)	0 (0.0)	1 (0.0)	24 (0.1)	20 (0.1)	44 (0.1)
(c) Defects of cleanliness only	46 (0.5)	123 (1.5)	69 (1.0)	223 (3.0)	3 (0.1)	1 (0.0)	122 (0.7)	358 (2.1)	480 (1.4)
(d) Minor dental defects	1,220 (15.3)	1,328 (17.0)	657 (9.6)	656 (9.0)	98 (5.5)	46 (2.9)	2,024 (12.0)	2,081 (12.2)	4,105 (12.1)
Teeth—Sound	5,203 (65.4)	5,026 (64.6)	5,618 (82.8)	6,180 (85.5)	1,585 (89.3)	1,481 (93.6)	12,657 (75.0)	12,985 (76.4)	25,642 (75.7)
One to four decayed	2,179 (27.4)	2,205 (28.3)	1,095 (16.1)	970 (13.4)	173 (9.7)	91 (5.7)	3,532 (20.9)	3,351 (19.7)	6,883 (20.3)
Five or more decayed	567 (7.1)	541 (6.9)	70 (1.0)	74 (1.0)	15 (0.8)	10 (0.6)	677 (4.0)	651 (3.8)	1,328 (3.9)
Visual Acuity—Good 6/6	7,639 (96.1)	7,464 (96.0)	5,944 (87.6)	6,177 (85.5)	1,517 (85.5)	1,403 (88.6)	15,440 (91.5)	15,428 (90.8)	30,868 (91.1)
Fair 6/9, 6/12	254 (3.1)	270 (3.4)	600 (8.8)	792 (10.9)	191 (10.7)	141 (8.9)	1,064 (6.3)	1,216 (7.1)	2,280 (6.7)
Bad 6/18, etc.	56 (0.7)	38 (0.4)	239 (3.5)	255 (3.5)	65 (3.6)	38 (2.4)	362 (2.1)	343 (2.0)	705 (2.0)

TABLE 6—Continued

	ENTRANTS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Diphtheria Immunisation—Partial	98 (1.4)	75 (1.0)	14 (0.7)	1 (0.00)	389 (2.3)	374 (2.2)	763 (2.2)
Completed	6,340 (93.4)	6,815 (94.3)	1,718 (96.8)	1,556 (98.3)	14,687 (87.0)	14,982 (88.1)	29,669 (87.6)
Not Immunised	345 (5.0)	334 (4.6)	41 (2.3)	25 (1.5)	1,790 (10.6)	1,631 (9.6)	3,421 (10.1)
Smallpox Vaccination—									
Successful	3,321 (41.7)	3,385 (43.5)	1,382 (78.0)	1,238 (78.2)	8,709 (51.6)	8,894 (52.3)	17,602 (51.9)
Successful Re-vaccination	56 (0.7)	55 (0.7)	9 (0.5)	31 (1.9)	138 (0.8)	161 (0.9)	299 (0.8)
Unsuccessful or none	4,572 (57.5)	4,332 (55.7)	382 (21.5)	313 (19.7)	8,020 (47.5)	7,932 (46.6)	15,952 (47.1)
Tuberculin Test—Negative	70 (0.8)	63 (0.8)	10 (0.5)	3 (0.1)	129 (0.7)	110 (0.6)	239 (0.7)
Positive	4 (0.0)	8 (0.1)	112 (6.3)	82 (5.1)	368 (2.1)	291 (1.7)	659 (1.9)
B.C.G. Vaccination	5,438 (68.4)	5,304 (68.2)	1,560 (87.9)	1,431 (90.4)	12,373 (73.3)	12,493 (73.5)	24,866 (73.4)

TABLE 7

NUMBERS AND PERCENTAGES OF CHILDREN IN ORDINARY SCHOOLS PLACED IN VARIOUS
MEDICAL CLASSES ACCORDING TO THE REMEDIABILITY OF THE MAJOR DEFECTS FOUND
IN THE INDIVIDUAL CHILD

	ENTRANTS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
MEDICAL CLASSIFICATION—									
I Free from defect or having defects of clothing, cleanliness and/or minor defects of teeth only									
	4,532 (57.0)	4,630 (59.6)	4,370 (64.6)	4,711 (65.4)	1,019 (57.5)	1,005 (63.6)	10,136 (60.2)	10,617 (62.6)	20,753 (61.4)
II Having one or more minor defects of vision and/or dental defects requiring treatment—									
(a) Vision not worse than 6/12 in the better eye with or without glasses, or									
	83 (1.0)	82 (1.0)	216 (3.1)	247 (3.4)	73 (4.1)	39 (2.4)	379 (2.2)	373 (2.2)	752 (2.2)
(b) Oral Sepsis	340 (4.2)	320 (4.1)	46 (0.6)	45 (0.6)	9 (0.5)	8 (0.5)	411 (2.4)	389 (2.3)	800 (2.4)
(c) Both (a) and (b)	10 (0.1)	11 (0.1)	0 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	11 (0.0)	13 (0.0)	24 (0.1)
TOTALS	433 (5.4)	413 (5.3)	262 (3.9)	294 (4.0)	82 (4.7)	47 (3.0)	801 (4.7)	775 (4.6)	1,576 (4.7)
III Having one or more defects other than above from which complete recovery is anticipated in a few weeks ("temporary" defects)									
	1,666 (20.9)	1,634 (21.0)	1,157 (17.0)	1,503 (20.8)	469 (26.4)	371 (23.4)	3,345 (19.8)	3,567 (20.9)	6,912 (20.4)

TABLE 7—Continued

	ENTRANTS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
IV Having one or more defects less remediable than those specified in II or III distinguishing cases where—									
(a) Complete cure or restoration of function (in the case of eye defect, full correction) is considered possible ...	833 (10.4)	689 (8.8)	597 (8.8)	361 (5.0)	131 (7.3)	110 (6.9)	1,589 (9.4)	1,178 (6.9)	2,767 (8.1)
(b) Improvement only is considered possible, e.g., without complete restoration of function ...	467 (5.9)	394 (5.0)	352 (5.1)	323 (4.5)	65 (3.6)	46 (3.0)	909 (5.3)	786 (4.6)	1,695 (5.0)
TOTALS ...	1,300 (16.4)	1,083 (13.9)	949 (14.0)	684 (9.5)	196 (11.0)	156 (9.9)	2,498 (14.8)	1,964 (11.5)	4,462 (13.2)
V Having defects from which improvement is not considered possible ...	18 (0.2)	12 (0.1)	45 (0.6)	32 (0.4)	7 (0.4)	3 (0.1)	70 (0.4)	51 (0.3)	121 (0.3)
TOTAL NUMBERS EXAMINED ...	7,949	7,772	6,783	7,224	1,773	1,582	16,850	16,974	33,824

TABLE 8
NUMBERS AND PERCENTAGES OF CHILDREN IN ORDINARY SCHOOLS ARRANGED ACCORDING TO THEIR SOCIAL GROUP AND MEDICAL REMEDIABILITY CLASS

MEDICAL CLASS	SOCIAL GROUP					TOTAL
	1	2	3	4	5	
I	559 (63.2)	3,268 (64.8)	6,417 (62.0)	6,560 (61.1)	3,929 (57.5)	20,733 (61.3)
II	24 (2.7)	158 (3.1)	484 (4.6)	544 (5.0)	365 (5.3)	1,574 (4.6)
III	195 (22.0)	1,015 (20.1)	2,052 (19.8)	2,192 (20.4)	1,482 (21.7)	6,936 (20.5)
IV	103 (11.6)	593 (11.7)	1,355 (13.1)	1,404 (13.0)	1,003 (14.7)	4,458 (13.1)
V	3 (0.3)	5 (0.0)	33 (0.3)	34 (0.3)	44 (0.6)	119 (0.3)
(Medical classes as detailed in Table 7—social classes as given in Table 3)						

TABLE 9
 CHILDREN IN ORDINARY SCHOOLS PLACED IN CERTAIN MEDICAL "REMEDIABILITY"
 CLASSES ARRANGED ACCORDING TO NUMBER OF APARTMENTS IN THEIR HOUSES
 (PERCENTAGES IN BRACKETS)

	5 YEAR OLDS			13 YEAR OLDS			16 YEAR OLDS			ALL AGES		
	III	IV	V	III	IV	V	III	IV	V	III	IV	V
One Apartment ...	80 (25.1)	44 (13.8)	2 (0.6)	14 (20.2)	8 (11.5)	0 (0.0)	1 (33.3)	1 (33.3)	0 (0.0)	101 (24.4)	58 (14.0)	2 (0.4)
Two Apartments ...	647 (21.4)	431 (14.2)	6 (0.1)	253 (19.9)	158 (12.4)	7 (0.5)	24 (20.0)	14 (11.6)	1 (0.8)	956 (21.0)	616 (13.5)	14 (0.3)
Three Apartments ...	1,283 (19.7)	976 (14.9)	12 (0.1)	923 (18.6)	543 (10.9)	25 (0.5)	241 (25.5)	87 (9.2)	4 (0.4)	2,493 (19.6)	1,636 (12.9)	44 (0.3)
Four Apartments ...	908 (22.0)	675 (16.3)	6 (0.1)	951 (17.7)	632 (11.7)	24 (0.4)	279 (24.3)	127 (11.0)	1 (0.0)	2,174 (20.0)	1,467 (13.5)	31 (0.2)
Five or more Apartments	364 (20.4)	249 (13.9)	4 (0.2)	482 (18.5)	282 (10.8)	16 (0.6)	288 (24.9)	122 (10.5)	4 (0.3)	1,155 (20.3)	666 (11.7)	25 (0.4)
TOTAL	3,282 (20.8)	2,375 (15.0)	30 (0.1)	2,623 (18.4)	1,623 (11.3)	72 (0.5)	833 (24.7)	351 (10.4)	10 (0.2)	6,879 (20.1)	4,443 (13.0)	116 (0.3)

(Medical classification as given in Table 7)

TABLE 10
 NUMBER OF INMATES IN THE HOUSES OF CHILDREN EXAMINED
 (AVERAGE NUMBER IN BRACKETS)

	5 YEAR OLDS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
ORDINARY SCHOOLS—								
<i>One Apartment—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	147 (1.8)	170 (2.1)	35 (0.5)	32 (0.4)	2 (0.1)	1 (0.0)	200 (1.1)	210 (1.2)
Inmates -10	323 (2.1)	370 (2.1)	135 (3.8)	125 (3.9)	7 (3.5)	4 (4.0)	499 (2.4)	520 (2.4)
Inmates -10	383 (2.6)	446 (2.6)	29 (0.8)	36 (1.1)	0 (0.0)	0 (0.0)	450 (2.2)	503 (2.3)
TOTAL	706 (4.8)	816 (4.8)	164 (4.6)	161 (5.0)	7 (3.5)	4 (4.0)	949 (4.7)	1,023 (4.8)
<i>Two Apartments—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	1,573 (19.7)	1,435 (18.4)	570 (8.2)	660 (9.0)	58 (3.2)	57 (3.5)	2,256 (13.2)	2,222 (12.9)
Inmates -10	3,958 (2.5)	3,463 (2.4)	2,447 (4.2)	2,810 (4.2)	224 (3.8)	216 (3.7)	6,811 (3.0)	6,687 (3.0)
Inmates -10	4,211 (2.6)	3,944 (2.7)	675 (1.1)	745 (1.1)	31 (0.5)	30 (0.5)	5,069 (2.2)	4,928 (2.2)
TOTAL	8,169 (5.1)	7,407 (5.1)	3,122 (5.4)	3,555 (5.3)	255 (4.3)	246 (4.3)	11,880 (5.2)	11,615 (5.2)
<i>Three Apartments—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	3,314 (41.5)	3,179 (40.8)	2,361 (34.0)	2,517 (34.4)	515 (28.9)	426 (26.7)	6,309 (37.0)	6,263 (36.5)
Inmates +10	8,832 (2.6)	8,516 (2.6)	10,090 (4.2)	10,907 (4.3)	2,139 (4.1)	1,724 (4.0)	21,418 (3.3)	21,564 (3.4)

TABLE 10—Continued

Inmates - 10	...	...	...	8,410 (2.5)	8,191 (2.5)	2,222 (0.9)	2,404 (0.9)	162 (0.3)	162 (0.3)	11,075 (1.7)	11,080 (1.7)
TOTAL	...	...	...	17,242 (5.2)	16,707 (5.2)	12,312 (5.2)	13,311 (5.2)	2,301 (4.4)	1,886 (4.4)	32,493 (5.1)	32,644 (5.2)
<i>Four Apartments—</i>											
Children Examined	...	...	...	2,077 (26.0)	2,025 (26.0)	2,577 (37.1)	2,694 (36.8)	605 (33.9)	540 (33.9)	5,365 (31.4)	5,369 (31.3)
Inmates + 10	...	...	...	6,940 (3.3)	6,855 (3.3)	12,793 (4.9)	13,733 (5.0)	2,781 (4.5)	2,549 (4.7)	22,921 (4.2)	23,547 (4.3)
Inmates - 10	...	...	...	6,033 (2.9)	5,791 (2.8)	3,131 (1.2)	3,402 (1.2)	333 (0.5)	271 (0.5)	9,744 (1.8)	9,724 (1.8)
TOTAL	...	...	...	12,973 (6.2)	12,646 (6.2)	15,924 (6.1)	17,135 (6.3)	3,114 (5.1)	2,820 (5.2)	32,665 (6.0)	33,271 (6.1)
<i>Five or more Apartments—</i>											
Children Examined	...	...	...	829 (10.4)	952 (12.2)	1,243 (17.9)	1,324 (18.1)	594 (33.3)	559 (35.1)	2,727 (15.9)	2,915 (17.0)
Inmates + 10	...	...	...	3,069 (3.7)	3,304 (3.4)	6,413 (5.1)	7,082 (5.3)	2,872 (4.8)	2,710 (4.8)	12,601 (4.6)	13,410 (4.6)
Inmates - 10	...	...	...	2,360 (2.8)	2,660 (2.7)	1,507 (1.2)	1,691 (1.2)	340 (0.5)	293 (0.5)	4,339 (1.5)	4,812 (1.6)
TOTAL	...	...	...	5,429 (6.5)	5,964 (6.2)	7,920 (6.3)	8,773 (6.6)	3,212 (5.4)	3,003 (5.3)	16,940 (6.2)	18,222 (6.2)
<i>Totals—</i>											
Children Examined	...	...	...	7,940 (99.6)	7,761 (99.7)	6,786 (97.9)	7,227 (98.8)	1,774 (99.6)	1,583 (99.4)	16,857 (98.8)	16,979 (99.1)
Inmates + 10	...	...	...	23,122 (2.9)	22,508 (2.9)	31,878 (4.6)	34,657 (4.7)	8,023 (4.5)	7,203 (4.5)	64,250 (3.8)	65,728 (3.8)
Inmates - 10	...	...	...	21,397 (2.6)	21,032 (2.7)	7,564 (1.1)	8,278 (1.1)	866 (0.4)	756 (0.4)	30,677 (1.8)	31,047 (1.8)
TOTAL	...	...	...	44,519 (5.6)	43,540 (5.6)	39,442 (5.8)	42,935 (5.9)	8,889 (5.0)	7,959 (5.0)	94,927 (5.6)	96,775 (5.6)

TABLE 10—Continued

SPECIAL SCHOOLS—	5 YEAR OLDS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
<i>One Apartment—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	1 (0-0)	0 (0-0)	2 (0-0)	0 (0-0)	0 (0-0)	0 (0-0)	3 (0-0)	0 (0-0)
Inmates -10	2 (2-0)	0 (0-0)	9 (4-5)	0 (0-0)	0 (0-0)	0 (0-0)	11 (3-6)	0 (0-0)
TOTAL	3 (3-0)	0 (0-0)	5 (2-5)	0 (0-0)	0 (0-0)	0 (0-0)	8 (2-6)	0 (0-0)
<i>Two Apartments—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	3 (0-0)	5 (0-0)	23 (0-3)	16 (0-2)	2 (0-1)	3 (0-1)	32 (0-1)	28 (0-1)
Inmates -10	7 (2-3)	12 (2-4)	104 (4-5)	72 (4-5)	6 (3-0)	13 (4-3)	138 (4-3)	110 (3-9)
TOTAL	8 (2-6)	15 (3-0)	34 (1-4)	33 (2-0)	3 (1-5)	3 (1-0)	48 (1-5)	52 (1-8)
<i>Three Apartments—</i>								
Children Examined	...	...	...	...	...	...	...	...
Inmates +10	13 (0-1)	5 (0-0)	44 (0-6)	21 (0-2)	1 (0-0)	3 (0-1)	63 (0-3)	42 (0-2)
Inmates -10	37 (2-8)	12 (2-4)	190 (4-3)	103 (4-9)	3 (3-0)	17 (5-6)	264 (4-1)	198 (4-7)
TOTAL	28 (2-1)	15 (3-0)	73 (1-6)	26 (1-2)	2 (2-0)	4 (1-3)	106 (1-6)	62 (1-4)
TOTAL	65 (5-0)	27 (5-4)	263 (5-9)	129 (6-1)	5 (5-0)	21 (7-0)	370 (5-8)	260 (6-1)

TABLE 10—Continued

<i>Four Apartments—</i>											
Children Examined	...	...	...	10 (0.1)	6 (0.0)	54 (0.7)	34 (0.4)	2 (0.1)	0 (0.0)	73 (0.4)	49 (0.2)
Inmates + 10	...	...	...	25 (2.5)	22 (3.6)	290 (5.3)	191 (5.6)	9 (4.5)	0 (0.0)	364 (4.9)	265 (5.4)
Inmates - 10	...	...	...	25 (2.5)	18 (3.0)	99 (1.8)	64 (1.8)	1 (0.5)	0 (0.0)	136 (1.8)	111 (2.2)
TOTAL	...	...	...	50 (5.0)	40 (6.6)	389 (7.2)	255 (7.5)	10 (5.0)	0 (0.0)	500 (6.8)	376 (7.6)
<i>Five or more Apartments—</i>											
Children Examined	...	...	...	2 (0.0)	1 (0.0)	20 (0.2)	16 (0.2)	1 (0.0)	2 (0.1)	23 (0.1)	19 (0.1)
Inmates + 10	...	...	...	10 (5.0)	8 (8.0)	120 (6.0)	94 (5.8)	5 (5.0)	12 (6.0)	135 (5.8)	114 (6.0)
Inmates - 10	...	...	...	9 (4.5)	3 (3.0)	37 (1.8)	44 (2.7)	2 (2.0)	2 (1.0)	48 (2.0)	49 (2.5)
TOTAL	...	...	...	19 (9.5)	11 (11.0)	157 (7.8)	138 (8.6)	7 (7.0)	14 (7.0)	183 (7.9)	163 (8.5)
<i>Totals—</i>											
Children Examined	...	...	...	29 (0.3)	17 (0.2)	143 (2.0)	87 (1.1)	6 (0.3)	8 (0.5)	194 (1.1)	138 (0.8)
Inmates + 10	...	...	...	81 (2.7)	54 (3.1)	713 (4.9)	460 (5.2)	23 (3.8)	42 (5.2)	912 (4.7)	687 (4.9)
Inmates - 10	...	...	...	73 (2.5)	51 (3.0)	248 (1.7)	167 (1.9)	8 (1.3)	9 (1.1)	346 (1.7)	274 (1.9)
TOTAL	...	...	...	154 (5.3)	105 (6.1)	961 (6.7)	627 (7.2)	31 (5.1)	51 (6.3)	1,258 (6.4)	961 (6.9)

TABLE 10—Continued

ORDINARY AND SPECIAL SCHOOLS—		5 YEAR OLDS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES	
<i>Totals</i> —		Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Children Examined	...	7,969 (100.0)	7,778 (100.0)	6,929 (100.0)	7,314 (100.0)	1,780 (100.0)	1,591 (100.0)	17,051 (100.0)	17,117 (100.0)
Inmates + 10	...	23,203 (2.9)	22,562 (2.9)	32,591 (4.7)	35,117 (4.8)	8,046 (4.5)	7,245 (4.5)	65,162 (3.8)	66,415 (3.8)
Inmates - 10	...	21,470 (2.6)	21,083 (2.7)	7,812 (1.1)	8,445 (1.1)	874 (0.4)	765 (0.4)	31,023 (1.8)	31,321 (1.8)
TOTAL	...	44,673 (5.6)	43,645 (5.6)	40,403 (5.8)	43,562 (5.9)	8,920 (5.0)	8,010 (5.0)	96,185 (5.6)	97,736 (5.7)

TABLE 11

CHILDREN IN ORDINARY SCHOOLS ARRANGED ACCORDING TO REMEDIABILITY,
OVERCROWDING AND OCCUPANCY
(PERCENTAGES IN BRACKETS)

<i>Not Overcrowded</i> —	5 YEAR OLDS		13 YEAR OLDS		16 YEAR OLDS		ALL AGES		
	I, II	III	I, II	III	I, II	III	I, II	III	
Landlord	398 (67.9)	125 (21.3)	295 (74.6)	59 (14.9)	165 (60.6)	68 (25.0)	881 (68.6)	255 (19.8)	148 (11.5)
Tenant	7,432 (63.5)	2,421 (20.7)	7,312 (69.4)	1,957 (18.5)	1,821 (64.7)	697 (24.7)	16,952 (66.2)	5,168 (20.2)	3,459 (13.5)
Lodger	114 (62.2)	42 (22.9)	36 (81.8)	4 (9.0)	5 (0.0)	0 (0.0)	159 (66.5)	48 (20.0)	32 (13.3)
Institution	7 (63.6)	2 (18.1)	7 (58.3)	1 (8.3)	2 (66.6)	1 (33.3)	16 (61.5)	4 (15.3)	6 (23.0)
TOTALS	7,951 (63.7)	2,590 (20.7)	7,650 (69.6)	2,021 (18.4)	1,993 (64.4)	766 (24.7)	18,008 (66.3)	5,475 (20.1)	3,645 (13.4)

TABLE 11—Continued

<i>Moderately Overcrowded—</i>													
Landlord	...	71	27	16	20	3	1	9	0	1	103	32	18
	...	(62.2)	(23.6)	(14.0)	(83.3)	(12.5)	(4.1)	(90.0)	(0.0)	(10.0)	(67.3)	(20.9)	(11.7)
Tenant	...	1,367	432	315	1,318	359	251	122	56	18	2,865	866	594
	...	(64.6)	(20.4)	(14.9)	(68.3)	(18.6)	(13.0)	(62.2)	(28.5)	(9.1)	(66.2)	(20.0)	(13.7)
Lodger	...	58	30	11	10	4	4	3	0	1	72	35	16
	...	(58.5)	(30.3)	(11.1)	(55.5)	(22.2)	(22.2)	(75.0)	(0.0)	(25.0)	(58.5)	(28.4)	(13.0)
Institution	...	1	0	0	0	1	0	0	0	0	1	2	0
	...	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(33.3)	(66.6)	(0.0)
TOTAL	...	1,497	489	342	1,348	367	256	134	56	20	3,041	935	628
	...	(64.3)	(21.0)	(14.6)	(68.3)	(18.6)	(12.9)	(63.8)	(26.6)	(9.5)	(66.0)	(20.3)	(13.6)
<i>Much Overcrowded—</i>													
Landlord	...	26	16	3	27	10	4	2	1	0	58	28	8
	...	(57.7)	(35.5)	(6.6)	(65.8)	(24.3)	(9.7)	(66.6)	(33.3)	(0.0)	(61.7)	(29.7)	(8.5)
Tenant	...	504	168	124	662	223	125	34	10	8	1,242	419	265
	...	(63.3)	(21.1)	(15.5)	(65.5)	(22.0)	(12.3)	(65.3)	(19.2)	(15.3)	(64.4)	(21.7)	(13.7)
Lodger	...	36	19	8	8	2	2	0	0	1	49	22	13
	...	(57.1)	(30.1)	(12.6)	(66.6)	(16.6)	(16.6)	(0.0)	(0.0)	(0.0)	(58.3)	(26.1)	(15.4)
Institution	...	0	0	0	0	0	0	0	0	0	0	0	0
	...	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)
TOTAL	...	566	203	135	697	235	131	36	11	9	1,349	469	286
	...	(62.6)	(22.4)	(14.9)	(65.5)	(22.1)	(12.3)	(64.2)	(19.6)	(16.0)	(64.1)	(22.2)	(13.5)
<i>Totals—</i>													
Landlord	...	495	168	82	342	72	46	176	69	40	1,042	315	174
	...	(66.4)	(22.5)	(11.0)	(74.3)	(15.6)	(10.0)	(61.7)	(24.2)	(14.0)	(68.0)	(20.5)	(11.3)
Tenant	...	9,303	3,021	2,275	9,292	2,539	1,635	1,977	763	319	21,059	6,453	4,318
	...	(63.7)	(20.6)	(15.5)	(69.0)	(18.8)	(12.1)	(64.6)	(24.9)	(10.4)	(66.1)	(20.2)	(13.5)
Lodger	...	208	91	46	54	10	10	8	0	2	280	105	61
	...	(60.2)	(26.3)	(13.3)	(72.9)	(13.5)	(13.5)	(80.0)	(0.0)	(20.0)	(62.7)	(23.5)	(13.6)
Institution	...	8	2	2	7	2	4	2	1	0	17	6	6
	...	(66.6)	(16.6)	(16.6)	(53.8)	(15.3)	(30.7)	(66.6)	(33.3)	(0.0)	(58.6)	(20.6)	(20.6)
TOTAL ALL GROUPS	...	10,014	3,282	2,405	9,695	2,623	1,695	2,163	833	361	22,398	6,879	4,559
	...	(63.7)	(20.9)	(15.3)	(69.1)	(18.7)	(12.0)	(64.4)	(24.8)	(10.7)	(66.1)	(20.3)	(13.4)

The standards of occupancy for assessment of overcrowding adopted for the purposes of this Table and

Table 12 were based on the Housing Acts and were as follows :

Not Overcrowded : one apartment, 2 adults ; two apartments, 3 adults ; three apartments, 5 adults ; four apartments, 7½ adults ; five apartments, 10 adults. Children under 10 years of age were each taken as half-an-adult, two of such children being regarded as the equivalent of one adult.

TABLE 12

HEIGHTS AND WEIGHTS OF FIVE-YEAR-OLD BOYS IN ORDINARY SCHOOLS ARRANGED
ACCORDING TO NUMBERS OF APARTMENTS AND INMATES IN THEIR HOUSES

Number of Inmates—	1 APARTMENT		2 APARTMENTS		3 APARTMENTS		4 APARTMENTS		5 OR MORE APARTMENTS	
	Height (ins.)	Weight (lbs.)	Height (ins.)	Weight (lbs.)	Height (ins.)	Weight (lbs.)	Height (ins.)	Weight (lbs.)	Height (ins.)	Weight (lbs.)
1-5	...	10	42.5	10	43.0	12	44.1	4	0	0.0
2-0	...	7	42.5	32	42.7	26	43.0	8	2	42.0
2-5	...	21	42.4	140	42.9	221	43.1	49	33	44.4
3-0	...	32	42.5	406	42.7	813	43.4	238	150	44.5
3-5	...	30	42.3	352	42.5	789	42.9	312	132	44.5
4-0	...	20	42.2	239	42.3	466	42.4	283	82	44.3
4-5	...	11	42.1	128	42.3	351	42.4	314	63	43.2
5-0	...	4	42.2	90	42.3	221	42.3	235	43	42.4
5-5	...	4	48.7	55	42.1	145	42.2	163	52	42.3
6-0	...	1	41.5	37	41.9	86	42.0	122	49	40.9
6-5	...	0	41.9	29	41.6	70	42.0	101	56	42.7
7-0	...	2	41.2	17	42.4	35	42.0	74	36	42.5
			41.2	39.8	41.8		41.8	41.6		42.6

TABLE 12—Continued

7.5	...	...	...	1	37.0	15	41.0	29	40.7	55	41.2	40	41.2
					42.0		41.2	41.4		41.8		41.9	
8.0	...	...	...	2	43.2	11	43.0	23	39.7	43	41.3	27	41.7
					42.7		42.3	41.3		42.3		42.1	
8.5	...	...	...	2	35.5	5	38.7	8	40.8	22	40.7	16	42.0
					39.5		40.3	41.5		41.2		42.5	
9.0	...	...	...	0	0.0	3	39.8	7	35.7	18	38.5	7	38.7
					0.0		41.1	40.3		40.8		41.0	
9.5	...	...	...	0	0.0	2	43.5	8	41.2	8	40.4	9	40.3
					0.0		41.7	41.1		41.8		41.8	
10 +	...	...	...	0	0.0	2	44.0	4	43.0	28	40.9	32	41.5
					0.0		43.5	42.2		41.6		41.9	
TOTAL	...	...	...	147	1,573	3,314	2,077					829	

N.B. For the purpose of Table 11, the groups above the heavy lines are regarded as not overcrowded, those within the lines as moderately overcrowded and those below the lines as much overcrowded.

TABLE 13

AVERAGE HEIGHTS AND WEIGHTS OF BOYS AGED 5 AND 13 YEARS IN ORDINARY SCHOOLS
ARRANGED ACCORDING TO HOUSING CONDITIONS — NUMBERS OF BOYS IN 1970 AS
IN TABLE 1

Age	Year	HEIGHT IN INCHES					All	WEIGHT IN LBS.					All
		1	2	3	4	5+		1	2	3	4	5+	
5 Years	1906	39.0	39.9	40.7	41.4	40.1	40.1	37.2	38.6	39.5	40.1	38.7	
	1924	40.2	40.3	41.3	41.7	40.7	40.7	38.1	*†37.8	39.9	40.6	39.1	
	1931	40.3	40.7	41.6	42.3	40.9	40.9	38.4	39.1	40.3	41.5	39.5	
	1936	40.9	41.2	41.7	†42.1	41.4	41.4	39.0	39.7	†40.3	†41.1	39.9	
	1944	41.3	41.7	42.0	42.4	41.8	41.8	40.5	41.1	41.4	42.1	41.2	
	1951	41.6	42.2	42.7	*†42.6	42.3	42.3	40.8	41.8	42.4	*42.3	41.9	
	1956	41.8	†42.2	†42.6	*†42.6	42.4	42.4	41.2	41.9	42.5	42.8	42.3	
	1961	42.1	42.5	42.8	*†42.7	42.7	42.7	41.7	42.5	42.8	*†42.6	42.6	
	1966	†42.0	42.6	†42.7	*†42.7	†42.7	†42.7	†41.1	†42.3	†42.6	42.7	†42.6	
	1970	†41.7	†42.5	*†42.4	†42.5	†42.6	†42.6	†40.0	†41.6	†41.9	*†41.9	†41.9	
13 Years	1906	53.4	54.1	55.1	55.8	54.5	54.5	69.9	72.3	75.3	76.8	73.5	
	1924	54.1	54.4	55.7	56.5	†44.5	†44.5	72.2	73.2	78.1	79.2	74.9	
	1931	55.3	55.7	56.6	57.5	56.2	56.2	77.1	78.2	81.4	84.2	79.7	
	1936	56.1	56.8	57.4	57.9	57.2	57.2	79.2	81.6	83.6	85.7	82.9	
	1944	57.8	58.3	58.7	*58.7	58.5	58.5	87.0	87.8	89.1	*89.0	88.6	
	1951	†57.7	58.7	59.0	59.1	58.9	58.9	†85.2	89.3	90.1	90.2	89.8	
	1956	58.0	†58.7	59.3	*59.8	59.1	59.1	87.9	91.1	92.7	*91.7	92.0	
	1961	59.1	59.5	60.0	*59.9	59.7	59.7	92.1	96.4	96.8	*96.0	96.5	
	1966	†57.0	†59.4	60.1	*60.0	60.1	60.1	†87.3	†95.5	97.3	*96.1	96.9	
	1970	58.5	59.7	60.3	*†59.8	†60.1	†60.1	91.2	†94.5	†96.5	*†94.8	†96.0	

* Exceptional averages which contradict the general trend of increase in average measurements with increase in number of apartments.

† Exceptional averages which contradict the general trend of increase in average measurements from year to year.

TABLE 14

AVERAGE HEIGHTS AND WEIGHTS OF GIRLS AGED 5 AND 13 YEARS IN ORDINARY
SCHOOLS ARRANGED ACCORDING TO HOUSING CONDITIONS — NUMBERS OF GIRLS IN
1970 AS IN TABLE 1

Age	Year	HEIGHT IN INCHES					All	WEIGHT IN LBS.					All
		NUMBER OF APARTMENTS						NUMBER OF APARTMENTS					
5 Years		1	2	3	4	5+	1	2	3	5	5+		
	1906	38.9	39.8	40.2	41.0	41.0	36.6	37.8	38.0	39.2	37.8	37.8	
	1924	39.3	40.1	41.2	41.7	42.1	37.3	38.0	38.5	39.5	38.5	37.4	
	1931	40.0	40.5	41.3	41.9	42.4	†37.1	†37.8	38.8	40.0	40.9	38.1	
	1936	40.6	41.0	†41.3	†41.7	†42.4	37.5	38.2	†38.8	†39.4	†40.8	38.4	
	1944	41.0	41.3	41.7	42.0	42.1	38.9	39.4	39.8	40.6	*†40.5	39.6	
	1951	41.3	41.7	42.3	42.4	42.8	39.4	40.2	40.8	41.1	41.7	40.5	
	1956	41.4	41.8	†42.2	42.4	†42.7	39.6	40.5	41.1	41.4	42.2	40.8	
	1961	41.7	42.1	42.4	42.5	43.0	40.1	41.2	41.3	†41.4	42.4	41.3	
	1966	†41.6	42.2	42.5	*†42.4	†43.0	†39.7	†41.1	41.5	*41.5	42.8	41.5	
	1970	†41.5	42.4	*†42.1	†42.2	†43.0	†39.1	†40.5	†40.8	†41.0	†42.3	†41.0	
13 Years	1906	53.9	54.8	55.5	56.4	56.4	71.9	73.9	76.3	79.3	75.1	75.1	
	1924	55.2	*†54.6	56.5	57.3	*56.8	76.3	76.8	80.0	81.6	*80.1	78.2	
	1931	56.0	56.8	57.5	58.3	58.8	79.5	82.0	84.3	87.3	90.0	86.2	
	1936	57.4	57.8	58.3	58.7	59.5	84.9	86.4	88.2	89.6	94.4	87.6	
	1944	58.5	58.9	59.2	59.4	60.1	90.3	92.0	*91.1	93.3	96.5	92.4	
	1951	†58.4	†58.9	59.4	*†59.4	†60.1	91.0	93.0	94.7	*94.4	97.2	94.0	
	1956	58.6	59.4	59.8	*59.7	60.3	92.2	97.4	97.7	*96.6	99.7	97.3	
	1961	59.5	59.9	60.2	60.4	60.8	102.2	102.4	*101.7	*101.7	104.4	102.2	
	1966	†58.6	60.0	†60.2	*†60.2	61.0	†93.7	†101.4	102.1	†100.7	†104.1	†101.8	
	1970	58.9	†59.7	†60.1	*†60.0	†60.8	100.4	102.0	*†101.4	*†100.2	†102.9	†101.3	

* Exceptional averages which contradict the general trend of increase in average measurements with increase in number of apartments.

† Exceptional averages which contradict the general trend of increase in average measurements from year to year.

TABLE 15

AVERAGE HEIGHTS AND WEIGHTS ARRANGED ACCORDING TO NUMBER OF APARTMENTS OF 16-YEAR-OLD BOYS AND GIRLS IN ORDINARY SCHOOLS

	Boys		GIRLS	
	Height (ins.)	Weight (lbs.)	Height (ins.)	Weight (lbs.)
One Apartment ...	68.0	2	63.0	1
Two Apartments ...	68.5	58	62.2	57
Three Apartments ...	66.9	551	62.7	426
Four Apartments ...	67.0	605	62.9	540
Five or more Apartments	67.5	594	63.6	559
Totals... ..	67.2	1,774	63.1	1,583
		132.8		122.4

TABLE 16

SYSTEMATIC EXAMINATION OF CHILDREN IN SCHOOLS

OTHER AGE GROUPS

The medical record card provides for statistical information relating to entrant, thirteen-year-old and sixteen-year-old children. During the year, however, the results of systematic examination of children in age-groups outwith those mentioned were recorded for a selected list of defects. Altogether 1,430 pupils were examined in the other age-groups. The results were as follows :—

Numbers and Percentages of Children Suffering from Defects

Nature of Defects Found	Boys	Girls	Totals
Uncleanliness of Head (nits)	1	1	2 (0.1)
Skin Conditions of Head or Body	7	4	11 (0.8)
Defective Nutrition	2	—	2 (0.1)
Dental Defects	9	3	12 (0.8)
Naso-pharyngeal Conditions	5	5	10 (0.7)
Eye Diseases (including Strabismus)	3	7	10 (0.7)
Defective Vision (for refraction)	9	2	11 (0.8)
Ear Disease (including defective hearing)	1	1	2 (0.1)
Defective Speech	2	1	3 (0.2)
Mental and Nervous Conditions	7	6	13 (0.9)
Defects of Circulatory System	1	—	1 (0.1)
Pulmonary Conditions	1	4	5 (0.3)
Deformities	—	2	2 (0.1)
Other Diseases or Defects	17	7	24 (1.7)

Total number of children examined—809 boys and 621 girls : Total of **1,430**.

TABLE 17

VISUAL ACUITY OF CHILDREN BORN IN 1960

Result of Eyesight (Snellen) Test

		Number and Percentage				
		1970			1969	1968
		Boys	Girls	Totals	Totals	Totals
Children who wore glasses at examination	With Glasses—					
	Good, 6/6	214 (4.4)	196 (4.3)	410 (4.4)	496 (5.0)	538 (5.1)
	Fair, 6/9	118 (2.4)	120 (2.6)	238 (2.5)	321 (3.2)	308 (2.9)
	Bad, 6/18	24 (0.5)	29 (0.6)	53 (0.6)	77 (0.8)	78 (0.7)
	Without glasses—					
	Good, 6/6	85 (1.8)	87 (1.9)	172 (1.8)	206 (2.1)	241 (2.3)
Fair, 6/9	144 (2.9)	119 (2.6)	263 (2.8)	295 (3.0)	298 (2.9)	
Bad, 6/18	127 (2.6)	139 (3.1)	266 (2.8)	393 (4.0)	385 (3.7)	
Children not wearing glasses at examination	Good, 6/6	4,051 (83.3)	3,695 (81.4)	7,746 (82.3)	7,809 (78.6)	8,309 (79.6)
	Fair, 6/9	349 (7.2)	392 (8.6)	741 (7.9)	947 (9.5)	977 (9.4)
	Bad, 6/18	109 (2.0)	108 (2.4)	217 (2.3)	277 (2.8)	233 (2.2)
		<u>4,865</u>	<u>4,540</u>	<u>9,405</u>	<u>9,927</u>	<u>10,443</u>

Summary of findings (taking the better eye and with spectacles if worn at examination) :—

		Number and Percentage				
		1967			1969	1968
		Boys	Girls	Totals	Totals	Totals
Good, 6/6		4,265 (87.7)	3,891 (85.7)	8,156 (86.7)	8,305 (83.7)	8,847 (84.7)
Fair, 6/9		467 (9.6)	512 (11.3)	979 (10.4)	1,268 (12.8)	1,285 (12.3)
Bad, 6/18		133 (2.7)	137 (3.0)	270 (2.9)	354 (3.6)	311 (3.0)
		<u>4,865</u>	<u>4,540</u>	<u>9,405</u>	<u>9,927</u>	<u>10,443</u>

Of those with defective eyesight 722 (375 boys and 347 girls) were recommended for refraction or retest.

TABLE 18

VISUAL ACUITY OF SEVEN-YEAR-OLD CHILDREN

A survey of seven-year-old children was undertaken during the session by the teams operating the Keystone apparatus. 187 schools were visited and 12,228 children (6,296 boys and 5,932 girls) were tested for visual acuity with the following results :—

RESULTS OF TEST BY KEYSTONE APPARATUS

		Number and Percentage		
		Boys	Girls	Totals
Children who wore glasses at examination	With Glasses—			
	Good, 6/6	127 (2.0)	135 (2.2)	262 (2.0)
	Fair, 6/9, 6/12	81 (1.2)	96 (1.5)	177 (1.4)
	Bad, 6/18	33 (0.5)	35 (0.6)	68 (0.5)
	Without Glasses—			
	Good, 6/6	76 (1.2)	76 (1.2)	152 (1.2)
Fair, 6/9, 6/12	79 (1.2)	99 (1.6)	178 (1.4)	
Bad, 6/18	86 (1.3)	91 (1.5)	177 (1.3)	
Children not wearing glasses at examination	Good, 6/6	5,568 (85.2)	5,330 (86.0)	10,898 (85.6)
	Fair, 6/9, 6/12	509 (7.8)	421 (6.8)	930 (7.3)
	Bad, 6/18	219 (3.3)	181 (2.9)	400 (3.2)
		<u>6,537</u>	<u>6,198</u>	<u>12,735</u>

Summary of findings (taking the better eye and with spectacles if worn at examination) :—

	Number and Percentage		
	Boys	Girls	Totals
Good, 6/6	5,695 (87.1)	5,465 (88.2)	11,160 (87.6)
Fair, 6/9, 6/12	590 (9.0)	517 (8.3)	1,107 (8.7)
Bad, 6/18, etc.	252 (3.9)	216 (3.5)	468 (3.7)
	<u>6,537</u>	<u>6,198</u>	<u>12,735</u>

Of those with defective eyesight, 646 (350 boys and 296 girls) were recommended for refraction or retest.

TABLE 19

OTHER EXAMINATIONS

(i) IN SCHOOLS—	
Systematic Inspection of Nursery School Children	3,105
Other Examinations in Nursery Schools (including " at risk " cases)	1,609
1960 age-group (Visual Acuity only)—(by doctor/ health visitor team)	9,405
Special Cases (in respect of particular defects) ...	27,428
Re-inspections by Medical Officers	15,368
Leaving interviews	5,280
Examinations regarding Mental Defect	2,145
Discharges in Special Schools and Classes ...	12
Audiometric Surveys (by audiometricians) ...	21,449
Keystone Vision Screening by nurses (Survey of 7-year-olds)	12,228
Total	98,029
(ii) MAINLY AT CLINICS—	
Applicants for Licences under the Corporation Bye- laws for the Employment of Children	439
Adult Employees of the Corporation	917
Children as to fitness for School Journeys abroad, Educational Excursions, Camps, etc.	17,022
Children as to fitness for admission to Residential Schools	7,112
Pre-vocational Students	1,157
Examinations in Remand Homes	2,658
Total	29,305
(iii) CLEANLINESS AND SPECIAL EXAMINATIONS—	
Cleanliness Inspections—(by school nurses) ...	310,536

TABLE 20

SUMMARY OF INSPECTION AND TREATMENT STATISTICS

(of which details are given throughout Report)

A. INSPECTION

Type	Cases
Systematic Examinations	33,897
Other Examinations in Schools	98,029
Other Examinations mainly in Clinics ...	29,305
Cleanliness Examinations	310,536
Dental Inspections	52,540
Total	524,307

TABLE 20—Continued

B. TREATMENT					Cases	Attendances
Disease or Defect						
<i>(a) MINOR AILMENTS—</i>						
<i>Ear—</i>						
Examined only	...	...	...	565	}	9,597
Clinic Treatment	...	...	...	1,103		
Aurists' Examinations	...	...	...	990		990
Aurists' Classifications	...	...	...	362		362
Audiometric Survey	...	...	...	1,182		1,182
Audiometric Ear Cases	...	...	...	141		141
				4,343		12,272
<i>Eye</i>	...	...	...	1,547		5,605
<i>Skin—</i>						
Cuts, minor injuries, etc.	...	...	...	4,399	}	110,263
Clinic Treatment	...	...	...	13,240		
Cleansing Clinics	...	...	...	1,744		6,432
Specialists' Cases	...	...	...	114		Included under " clinic treatment "
Scabies Baths	...	...	...	1,360		above 4,956
				20,857		121,651
<i>(b) DEFECTIVE VISION—</i>						
Clinic Treatment	...	...	...	8,343		8,785
Spectacles supplied	...	...	...	3,782		4,833
				12,125		13,618
<i>(c) EAR, NOSE AND THROAT—</i>						
Tonsils, and Adenoids and other E.N.T. Operations	...	...	...	603		1,363
				603		1,363
<i>(d) ORTHOPAEDIC—</i>						
Examined only	...	...	...	1,665		1,665
Treated by Exercises	...	...	...	1,310		13,068
Treated in Spastic Unit	...	...	...	46		8,736
				3,021		23,469
<i>(e) OTHER DISEASES—</i>						
General	...	...	...	8,443		15,253
Supply of Medicines	...	...	...	4,386		10,639
Artificial Light	...	...	...	294		6,356
Cardiac Cases	...	...	...	145		321
Neurological Cases	...	...	...	114		114
				13,382		32,683

TABLE 20—Continued

B. TREATMENT—Continued—

Disease or Defect	Cases	Attendances
(f) DENTAL—		
Ordinary (incl. Emergency Cases)	25,336	81,404
Orthodontic 	411	4,751
	<hr/> 25,747	<hr/> 86,155
(g) REMAND HOME 	176	176
(h) DEFECTIVE SPEECH 	1,431	2,025
(i) OCCUPATIONAL THERAPY 	46	7,664
Totals 	<hr/> 83,278	<hr/> 306,681

TABLE 21

DENTAL INSPECTION AND TREATMENT

(1) GENERAL STATISTICS :

Age in Years	Number of Children seen at Routine Dental Inspection				Total Number Treated	Emerg- ency Cases Number Treated
	Number Inspected	With Dental Defects	Offered Treat- ment	Accept- ing Treat- ment		
5	7,064	5,378	5,157	2,021	1,931	535
6	7,371	5,796	5,523	2,291	2,357	534
7	7,893	6,377	6,134	2,431	2,657	505
8	7,452	6,055	5,785	2,240	2,650	562
9	7,206	5,662	5,334	1,968	2,580	690
10	6,920	5,126	4,765	1,691	2,389	574
11	6,553	4,615	4,230	1,410	2,190	488
12	1,969	1,382	1,273	373	1,333	386
13	46	34	34	29	952	435
14	32	23	23	15	683	345
15	30	24	24	9	268	105
16	4	4	4	2	110	18
17 and over	—	—	—	—	48	11
Totals ...	<hr/> 52,540	<hr/> 40,476	<hr/> 38,286	<hr/> 14,480	<hr/> 20,148	<hr/> 5,188

Number of attendances for treatment : 5-17 years, **81,404**

(2) DETAILS OF TREATMENT (*School Children*) :

	Routine	Emergency	Total
Fillings—permanent teeth	36,784	—	36,784
deciduous teeth	12,529	—	12,529
Extractions (incl. orthodontic)—			
permanent teeth	4,782	1,204	5,986
deciduous teeth	16,803	2,766	19,569
Administrations of general anaesthetic ...	2,538	21	2,559
Other operations—permanent teeth ...	26,535	1,669	28,204
deciduous teeth	5,832	462	6,294
Dentures—partial	—	—	207
full	—	—	10
Repairs to dentures	—	—	64
Radiographs—number of exposures (not incl. orthodontic)—intra-oral	—	—	632
extra-oral	—	—	29

(3) ORTHODONTIC TREATMENT :

Cases continued from previous year, 353 ; new cases, 411 ; completed cases, 199 ; discontinued cases, 79 ; cases continuing at end of year, 486 ; attendances for treatment, 4,751.

Diagnostic examinations, 1,907 ; number of removable appliances fitted, 600 ; repairs to appliances, 20 ; radiographs : intra-oral, 1,519 ; extra-oral, 895.

(4) ALLOCATION OF TIME :

<i>Number of half-days occupied in—</i>	Dental Surgeons	Dental Auxiliaries
Routine inspection	288	—
Treatment—school	8,995.3	1,451.5
orthodontic	571.5	20
Dental health education	58	116
	<hr/> 9,912.8	<hr/> 1,587.5

(5) ADDITIONAL INFORMATION :

Fillings of permanent teeth included 38 crowns, 71 gold inlays, 58 root treatments ; 9 pulpotomies were also carried out.

Statistics do not include Maternity and Child Welfare work.

APPENDICES

INSPECTION OF SPECIAL CASES

("NON-ROUTINE" AND "AT-RISK")

Defects found in children presented for medical inspection as "Non-Routines"—27,428 children were presented for "non-routine" inspection (generally on account of defect observed or suspected by teachers); 25,853 of these were pupils in ordinary schools and 1,575 in special schools.

Some of these children were found on examination to have more than one defect. The individual results were: nits minor, 2,132; nits major and/or vermin, 582; skin condition, 3,082; eye conditions (including defective vision), 4,924; ear, nose and throat defects, 2,665; "general" defects, 4,677; defective teeth, 3,981; no apparent disease, 2,688; and other causes, 2,697.

Re-inspection of Cases "At Risk"—The total number of re-inspections was 15,368. Of these 8,472 (4,362 boys and 4,110 girls) in ordinary schools were found to have defects and 121 (59 boys and 62 girls) in special schools were also found to be suffering from ailments.

(Details of "non-routine" and "at risk" cases examined in Nursery Schools are given on page 157.)

OTHER SPECIAL INSPECTIONS

The following table includes children seen during the Routine Medical Inspection period at schools:—

HOLIDAY CAMPS, EDUCATIONAL EXCURSIONS AND HOLIDAYS AT HOME AND ABROAD (SPRING AND SUMMER, 1970)

	Boys		Girls	
	Final or Number	Only Inspection Per Cent.	Final or Number	Only Inspection Per Cent.
Fit	6,866	80.0	6,933	82.1
*Fit?	1,512	17.6	1,403	16.6
Unfit	200	2.3	108	1.3
	<hr/>		<hr/>	
	8,578		8,444	
	<hr/>		<hr/>	

* Doubtful Fitness.

CLEANLINESS INSPECTION IN SCHOOLS BY NURSES

The results of inspection by Cleanliness Inspectresses are as follows :—

	Boys		Girls	
<i>First Inspections—</i>				
Examined ...	101,715		97,702	
Infested ...	2,236	(2.2%)	4,338	(4.4%)
Infected ...	8,829	(8.7%)	13,102	(13.4%)
<i>Re-Inspections—</i>				
Examined ...	48,425		62,694	
Infested ...	2,623	(5.4%)	5,741	(9.1%)
Infected ...	11,587	(23.9%)	21,558	(34.3%)

In 491 instances, formal notices to cleanse children within 24 hours were issued, mainly by Cleanliness Inspectresses and Senior Woman Assistants.

On re-inspection 49 were found to have been cleansed at home by the parents and 116 to have been compulsorily disinfected at school or clinic.

Under Section 61 of the Education (Scotland) Act, 1962, 16 parents were convicted during the course of the year, the fines imposed being as follows:

13 of £1; 2 of £3; 1 of £1 with 14 days to pay; 1 of £1 and £2 for contempt of Court.

1 case was abandoned as the father was deceased, 5 were admonished and 3 were "deserted *pro loco*".

CLEANLINESS SUPERVISION BY SENIOR WOMAN ASSISTANTS (ASSISTED BY WELFARE ATTENDANTS) AT SELECTED SCHOOLS

The following table gives the percentages of children in the 32 selected schools found to be "clean and well-cared for in every respect" at two general inspections during the Session :—

	First Inspection		Second Inspection	
	Boys	Girls	Boys	Girls
Six original schools (January, 1941)	86.7	73.4	85.9	75.6
All thirty-two selected schools ...	82.8	71.6	82.9	74.1

In the *six original schools* the boys and girls at both inspections were unimproved compared with last year.

For *all selected schools* percentages were reduced at both inspections, except for girls at the second inspection.

The total numbers seen were :—

At first inspection ...	17,966 (9,081 boys and 8,885 girls).
At second inspection ...	17,383 (8,682 boys and 8,701 girls).

NURSERY SCHOOLS

At the end of June, 1970, the Education Department was responsible for the administration of 53 Nursery Schools and Classes within the City having places for 3,683 children and of Dunclutha Nursery School, Kirn, where 23 children were accommodated.

During the year children in the nursery schools to the number of 3,105 (1,579 boys and 1,526 girls) were subjected to "routine inspection". 1,453 were medically examined at the request of teachers and 156 were re-inspected. The results of these examinations are detailed below.

ROUTINE INSPECTION

Numbers and Percentages of Children suffering from Defects

Nature of Defects Found	Boys	Girls	Total
Uncleanliness of Head (nits)	10	14	24 (0.8)
Skin Conditions of Head or Body	47	46	93 (3.0)
Defective Nutrition	7	8	15 (0.5)
Dental Defects	124	125	249 (8.0)
Naso-pharyngeal Conditions	105	61	166 (5.3)
Eye Diseases (including strabismus)	46	42	88 (2.8)
Defective Vision (for refraction)	77	4	81 (2.6)
Ear Disease (including defective hearing)	22	14	36 (1.2)
Defective Speech	55	25	80 (2.6)
Mental and Nervous Conditions	23	7	30 (1.0)
Defects of Circulatory System	32	17	49 (1.6)
Pulmonary Conditions	17	10	27 (0.9)
Deformities	83	54	137 (4.4)
Other Diseases or Defects	92	59	151 (4.9)

INSPECTION OF NON-ROUTINE CASES :

Children to the number of 1,453 were presented for inspection on account of defects observed or suspected by teachers. The individual results were as follows :—

Head infestation 21 ; skin conditions 118 ; eye conditions 256 ; ear, nose and throat defects 196 ; "general" defects 253 ; defective teeth 85 ; no apparent disease 247 ; and other causes 277.

RE-INSPECTION OF "AT RISK" CASES :

One hundred and fifty-six pupils were re-inspected during the Session.

PREVENTION OF TUBERCULOSIS

TEACHERS' SICK PAY REGULATIONS :

During the year ended 31st July, 1970, teachers to the number of 2,965 (1,316 males and 1,649 females) were X-rayed.

The numbers recalled for large film (including report from Chest Physicians) were 48 men and 33 women, the diagnosis being as shown :—

	Males	Females
Active Pulmonary Tuberculosis	—	—
Inactive Pulmonary Tuberculosis (including calcified or fibrotic conditions)	16	7
Inactive Pulmonary Tuberculosis (pleural thickening)	3	3
Healed Simple Inflammatory	—	2
Cardiac Hypertrophy	—	1
Chronic Bronchitis and Emphysema	2	—
Bone Defects	1	—
Bronchial Carcinoma	1	—
Bronchiectasis	—	1
Fibrosis following Mastectomy and Radiation	—	1
No apparent defect	25	18
	—	—
Total	48	33
	—	—

During the same year, 52 nursery assistants and 15 occupational centre assistants were X-rayed.

B.C.G. VACCINATION CAMPAIGN, 1969 :

Total Schools visited	104
Total forms issued	15,934
Parental consents granted	15,493
Total absent	1,163
Total number tested	14,330

	Boys	Girls	Total
MANTOUX RESULTS—			
Positive	1,504	1,226	2,730
Negative	5,660	5,940	11,600
VACCINATIONS	5,656	5,932	11,588

RADIOGRAPHY SURVEY OF FURTHER EDUCATION COLLEGES :

During October to December, 1969, the Mass Radiography Service examined students in five colleges of further education. Altogether 2,949 (2,638 males and 311 females) were X-rayed, 47 (43 males and 4 females) of these being recalled for large film.

Of the three pulmonary tuberculosis cases detected two had not been X-rayed previously and one had had a satisfactory X-ray two years earlier.

As usual all those with abnormalities of any significance were informed of the result and a report, together with an indication of the action considered advisable, was sent to their own doctor. Those requiring further assessment would be given an opportunity of attending the chest clinic for the area in which they were resident.

The following table summarises the results :—

	Male	Female	Total
Number examined ...	2,638	311	2,949
Recalled for large film ...	43	4	47
<i>Pulmonary Tuberculosis—</i>			
Active	3	—	3
Inactive	2	—	2
Known	3	1	4
	—	—	—
	8	1	9
	—	—	—
<i>Other Abnormalities—</i>			
Pneumonic Condition	1	—	1
Pleural thickening ...	1	—	1
	—	—	—
	2	—	1
	—	—	—

MASS RADIOGRAPHY :

Details of children X-rayed by the Mass Radiography Service of Elmbank Street are given in the following tables.

Dr. T. J. R. Miller, Medical Director of the Mass Radiography Service, reports as follows :—

1,212 boys and 994 girls, a total of 2,206 mantoux positive pupils, were X-rayed for the first time. It is pleasing to note the absence of active pulmonary tuberculosis in this group (Table A).

2,510 pupils (1,457 boys and 1,053 girls) mantoux positive the previous year were re-X-rayed. One girl, a frequency of 0.94 per thousand in girls, and of 0.39 per thousand in the total re-examined had an active lesion (Table B).

692 pupils (400 boys and 292 girls) who missed the mantoux test were X-rayed. One boy with an acquired heart condition was referred to hospital but no cases of pulmonary tuberculosis were detected.

The parents of children with abnormalities of any significance were informed of the results and reports were sent to their own doctors. Those requiring further assessment would be given the opportunity of attending their area chest clinic. The girl found to have active tuberculosis was admitted to hospital for treatment.

TABLE A
 MANTOUX REACTORS X-RAYED FOR THE FIRST TIME
 ABNORMALITIES FOUND AND ACTION TAKEN BY MASS RADIOGRAPHY SERVICE
 YEAR ENDING 31st JULY, 1970

	No action after investigation		Referred to own doctor		Out-patient treatment		Observation		Sent to hospital		Total Number Examined (and rate per thousand)		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
PULMONARY TUBERCULOSIS—													
Healed Primary	3	4	—	—	—	—	—	1	—	—	3 (2.40)	5 (9.94)	8 (3.62)
Inactive	—	—	—	—	—	—	—	1	—	—	—	1 (1.00)	1 (0.46)
Known Cases	—	—	—	—	—	—	1	—	—	—	1 (0.82)	—	1 (0.46)
OTHER PULMONARY ABNORMALITIES—													
Pulmonary fibrosis	1	—	—	—	—	—	—	—	—	—	1 (0.82)	—	1 (0.46)

Numbers examined: 1,212 boys and 994 girls—Total, 2,206.

TABLE B
 MANTOUX REACTORS X-RAYED A YEAR PREVIOUSLY
 ABNORMALITIES FOUND AND ACTION TAKEN BY MASS RADIOGRAPHY SERVICE
 YEAR ENDING 31st JULY, 1970

	No action after investigation		Referred to own doctor		Out-patient treatment		Observation		Sent to hospital		Total Number Examined (and rate per thousand)		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Totals
PULMONARY TUBERCULOSIS—													
Active ...	—	—	—	—	—	—	—	—	—	—	—	1 (0.94)	1 (0.39)
Healed Primary ...	4	5	—	—	—	—	—	—	—	—	4 (2.74)	5 (4.74)	9 (3.58)
Inactive ...	1	—	—	—	—	—	2	1	—	—	3 (2.05)	1 (0.94)	4 (1.59)
Known Cases ...	—	1	—	1	—	—	—	—	—	—	—	2 (1.89)	2 (0.79)
OTHER PULMONARY ABNORMALITIES—													
Pulmonary fibrosis ...	—	—	—	—	—	—	1	—	—	—	1 (0.68)	—	1 (0.39)
Acquired heart condition ...	1	—	—	—	—	—	—	—	—	—	1 (0.68)	—	1 (0.39)

Numbers examined: 1,457 boys and 1,053 girls—total 2,510.

MEDICAL SUPERVISION OF REMAND HOMES

During the year ended 31st July, 1970, 1,665 boys were admitted to Larchgrove Home and 240 girls to Beechwood Home; Medical examinations were 2,355 boys and 320 girls and those found to be suffering from various ailments were, on the advice of the visiting School Medical Officer, disposed of as follows :—

141 boys were treated in the Home, 3 at clinic; 2 were X-rayed and 10 were removed to hospital.

8 girls were treated in the Home, 4 at clinic; 2 were X-rayed and 3 were removed to hospital.

IMMUNISATION CAMPAIGNS IN SCHOOLS

(i) DIPHTHERIA AND TETANUS :

Injections given by School Medical Officers :—

First	Second	Re-inforcing	Total Doses
5,352	4,901	21,450	31,703

(ii) POLIOMYELITIS :

Oral doses administered by School Nurses to children at primary schools :—

First	Second	Third	Re-inforcing	Total Doses
2,039	1,758	1,350	16,298	21,445

AUDIOMETRIC SURVEYS

A summary of the work done, in connection with Surveys Nos. XXA and XXI throughout the year, are as follows :—

SURVEY NO. XXA/XXI (CHILDREN BORN IN 1963/64)

	Routine	Non-Routine	Total
Number of schools visited	—	—	208
Number "sweep" tested in schools	21,434	15	21,449
Number failed in "sweep" test	1,331	2	1,333
Number examined by School Medical Officer	Routine and	Non-Routine	671
Number recommended for Threshold test by	Routine and	Non-Routine	671
School Medical Officer	Routine and	Non-Routine	671
Number Threshold tested	134	5	139
Number awaiting Threshold test (including	Routine and	Non-Routine	351
5 for tonsil/adenoid operation)	Routine and	Non-Routine	351
Number awaiting treatment before having	Routine and	Non-Routine	19
Threshold test	Routine and	Non-Routine	162
Number did not attend for Threshold test	Routine and	Non-Routine	162
Number attended for retest	2	—	2
Number awaiting retest	Routine and	Non-Routine	89
Number awaiting result of Threshold test	Routine and	Non-Routine	13
Number graded	Routine and	Non-Routine	122
Number awaiting grading	Routine and	Non-Routine	48

The results of the 122 children graded were :—

	Routine	Non-Routine	Total
Referred to Consultant	1	—	1
Graded—A	—	—	—
Graded—Normal	120	1	121
	<u>121</u>	<u>1</u>	<u>122</u>

Most of the remainder were at the end of the year awaiting testing, re-testing, clinic treatment or grading.

The Consultant Aurist classified 90 cases from the various surveys as follows :—

	Boys	Girls	Total
Normal ...	44	32	76
Grade A ...	6	5	11
Grade B ...	1	—	1
Grade D ...	—	1	1
Grade E ...	1	—	1

Brought forward from Session 1969 were children from previous Surveys, some of whom were dealt with as follows :—

	Routine	Non-Routine	Total
Referred to Consultant ...	60	—	60
Graded—A ...	5	—	5
Graded—Normal ...	301	1	302

MEDICAL EXAMINATIONS :

	First Examination		Re-Examination		Total
	Boys	Girls	Boys	Girls	
Summonses ...	641	579	645	644	2,509
Attendances ...	312	269	304	297	1,182
Examinations ...	312	269	304	297	1,182

RECOMMENDATIONS—

Audiogram ...	250	207	212	214	883
Clinic treatment and audiogram	33	36	30	33	132
Speech therapy ...	3	3	4	1	11
Front seat in class ...	24	13	28	24	89
Lip-reading ...	—	—	5	1	6
Tonsil/adenoid operation ...	12	6	13	11	42
Hearing aids ...	—	—	4	—	4
Referred to Consultant ...	1	—	7	5	13
Other recommendations ...	—	2	5	2	9

RISK GROUP :

Two hundred and thirty-two (102 boys and 130 girls) were summoned for examination and 98 (43 boys and 55 girls) attended. Ninety-one children were recommended for audiogram test, 5 for clinic treatment and audiogram, 3 for front seat in class and 7 for other forms of treatment.

TWINS' REGISTER :

Fifty-four (26 boys and 28 girls) were summoned and 37 (20 boys and 17 girls) attended. Recommendations comprised, 32 for audiogram, 2 for clinic treatment and audiogram, 1 for tonsil/adenoid operation and 2 were discharged.

DISPOSAL :

During the course of the Session, the records of 122 children were passed to Special Schools section for disposal. Of these 93 were graded, 14 had failed to attend, 5 desired private treatment, 7 had moved from Glasgow and 2 had died.

SPECIAL DIETS

During the session, 42 children (14 boys and 28 girls) were recommended to have special diets provided in place of the normal school meals.

The conditions were as undernoted :—

	Boys	Girls
Coeliac Disease ...	5	8
Diabetes ...	2	4
Obesity ...	6	12
Peptic Ulcer ...	1	—
Duodenal Ulcer ...	—	1
Urticaria ...	—	1
Low Cholestrol ...	—	1
Salt Free ...	—	1
	<u>14</u>	<u>28</u>

MORTALITY OF SCHOOL CHILDREN

Deaths during the year ended 31st July, 1970 of children aged 5-15 years.

Cause of Death	5-10 Years		10-15 Years		All Ages		Totals
	Boys	Girls	Boys	Girls	Boys	Girls	
Road traffic accidents ...	6	6	4	1	10	7	17
Other violent causes ...	12	4	11	4	23	8	31
Measles ...	—	1	—	—	—	1	1
Benign neoplasms ...	1	—	—	1	1	1	2
Malignant neoplasms ...	9	3	1	—	10	3	13
Cardiovascular degeneration ...	1	—	—	—	1	—	1
Cardiac failure ...	—	—	—	1	—	1	1
Influenza ...	1	—	—	2	1	2	3
Pneumonia ...	2	1	2	1	4	2	6
Bronchitis ...	1	—	1	—	2	—	2
Chronic Asthma ...	1	—	—	—	1	—	1
Appendicitis ...	1	1	—	—	1	1	2
Nephritis and nephrosis ...	—	1	—	—	—	1	1
Congenital anomalies ...	—	1	1	1	1	2	3
Subarachnoid haemorrhage ...	—	—	1	1	1	1	2
Severe exfoliative dermatitis ...	—	—	1	—	1	—	1
Status Epilepticus ...	—	—	2	—	2	—	2
Totals ...	<u>35</u>	<u>18</u>	<u>24</u>	<u>12</u>	<u>59</u>	<u>30</u>	<u>89</u>

SECTION IV

HEALTH EDUCATION

The following main projects give some indication of the range of work carried out by the Health Education Section during the year :—

CAMPAIGNS

Spring Clean for Safety—This national drive to clean out old medicines and unwanted tablets from households took place in April.

The Lord Provost opened the Glasgow campaign at a public ceremony at Boots, Union Street, in which representatives of the Glasgow Home Safety Committee and Glasgow and West of Scotland Branch of the Pharmaceutical Society of Great Britain took part.

A committee, representing Police, Cleansing, Pharmaceutical and Health interests considered security and disposal arrangements for material received during the campaign.

As a background to the campaign, the rising trend in poisoning accidents involving the under-fives gave cause for concern. Numbers had gone up from 158 cases in 1963 to 278 cases in 1968, and these figures represent only those children going into hospital, not those who attended the family doctor or who were treated at home. Most poisoning accidents involving adults related to overdosage of sedative drugs.

During the campaign substantial support was obtained from Press and television in reporting the opening ceremony and drawing attention to the hazards of unwanted pills and medicines.

Reports from chemists, whose shops were being used for collection of medicines and tablets, showed that in certain areas there was good public response, but in other districts little reaction.

Chemists gave prominent position in their shops to the publicity material, including posters, which was produced by the Scottish Health Education Unit.

Anti-Tetanus—A campaign offering protection against this disease was held during the month of May with support from the Markets Department and meat trades employers. Publicity material was produced and distributed in the Meat Market.

Smoking and Health—The following campaigns have been organised during the year :—

“*Take it to Heart*” related coronary heart disease to smoking and ran from January until April. Its purpose was to point out to the community that cigarette smoking not only causes death from lung cancer, but also fatal coronary attacks.

“*Smoking during pregnancy*” distribution of material, produced by the Scottish Health Education Unit.

Co-operation with the Scottish Health Education Unit on “*like father like son*” theme—special arrangements were made to present a poster under the joint imprint of the Health Department and the above Unit. A total of 3,000 were printed and distributed throughout the transport fleet of the Corporation and in clinics.

“*Smoking and Bronchitis*”—A winter campaign with the purpose of pointing out to the community the relationship between cigarette smoking and chronic bronchitis. Smoking is by far the most important cause of chronic bronchitis.

Smoking and health posters were distributed during the year to hospitals, doctors, schools and youth groups.

HOME SAFETY

The Glasgow Home Safety Committee met on several occasions to consider reports from the Scottish and National Home Safety Committees.

A Home Safety Exhibit was held at the Modern Homes Exhibition, Kelvin Hall, and featured how a chip pan fire should be dealt with. In addition, visitors were invited to give their homes a “Six-point safety check”.

A competition arranged during the Exhibition attracted over 5,000 entrants and a total of 25,000 home safety leaflets were distributed.

Winners received their prizes from the Medical Officer of Health at a ceremony arranged by the Glasgow Home Safety Committee in the City Chambers.

HOME SAFETY SURVEY IN SCHOOLS

The Health Education Officer carried out a survey in City schools with the assistance of the Adviser in Homecraft. A total of 448 pupils

took part in the project, which was later reported by the Health Education Officer to the Annual meeting of the Scottish Accident Prevention Council.

One hundred and eighty-two pupils reported recent accidents in the home. As to be expected most of the accidents happened to girls and mothers—58 per cent. of the total affected girls and 11 per cent. mothers; boys were involved in 25 per cent. of the total casualties; fathers, 4 per cent., grandparents 2 per cent.

The kitchen is the danger room of the home, 49 per cent. of accidents happened there. In the lounge, 12 per cent.—bedroom, 12 per cent.—stairs, 10 per cent.—courtyards, 11 per cent.—garden, hall and bathroom 6 per cent.

It became apparent that the size of the house affects the accident rate. Twenty-eight per cent. occurred in the three-apartment house. In this situation we see the factor of inadequate living space producing a crop of accidents—such as a child bumping into the mother as she carries a plate of hot soup to the table, or other members of the family falling over electric fires.

Most of the accidents that came to light through this survey seemed to be due to carelessness.

As we know, even a small injury can cause discomfort and inconvenience, and 56 per cent. of these were treated at home. Of the more severe injuries 30 per cent. were treated at hospital and 14 per cent. by the general practitioner.

Within the area of general home accidents, a pattern emerged; 53 per cent. of accidents reported occurred between the hours of 5 p.m. and 8 p.m., a period of the day when there is an upsurge of activity in getting meals ready, followed by bedtime preparations for young children, then, there are friends and family constantly coming and going. In the hours between 3 p.m. and 5 p.m., 34 per cent. of the accidents happened to children and mothers, both indoors and out.

HEALTH INFORMATION BULLETIN

The above was issued in two forms (1) on current health matters for the use of television and newspapers, (2) on general health topics related to prevention, to the public with assistance in distribution by the City Librarian.

Three issues of (2) were published during the year with topics ranging from diet to the hazards of smoking.

PUBLIC RELATIONS

The Department's activities were widely supported by the Press and television.

TALKS

Among organisations to which talks were given by the Health Education Officer were the Annual Conference of the Scottish Accident Prevention Council and the Glasgow Branch of the Chiropodists' Society.

PUBLICATION

"Motivation and Immunization against Poliomyelitis—Situations of Public Response in Glasgow" by the Health Education Officer was published in the Health Education Journal, by the Health Education Council in October 1970.

DENTAL HEALTH

In co-operation with the Scottish Health Education Unit a campaign of dental health education took place early in the year with appeal to young people in the 15 to 21 years' range.

CHEST AND HEART ASSOCIATION

This project took place in the McLellan Galleries during April and the Health Education Officer was invited to assist with promotion in relation to the health check for adults over 40, and also the exhibition and general publicity.

HEALTH TALKS WITH B.M.A.

It was decided to co-operate with the British Medical Association, Glasgow Division, in a series of talks to be held early in 1970 in the McLellan Galleries.

TOURING EXHIBITION

A touring exhibition was designed with a view to future use in youth and community centres throughout the City.

VISUAL AIDS

Assistance was given in the preparation of slides for various lectures.

POSTERS

The demand for posters increased during the year particularly from youth groups who were interested in anti-smoking material.

SECTION V

DISTRICT NURSING SERVICE

RECORD OF WORK FOR THE YEAR ENDED
31ST DECEMBER, 1970

Cases on books at 1st January, 1970	...	...	3,067	
Number of new cases added	...	...	7,709	
Number of cases dismissed	...	...	7,344	
Number of cases remaining at 31st December, 1970			3,432	
<i>Dismissed—</i>			<i>General.</i>	<i>Midwifery.</i>
Treatment completed	...	...	4,199	84
Hospital	...	...	2,011	
Died	...	...	1,050	
Total number of visits paid by Nursing Staff	...	...	300,995	
<i>Training—</i>				
Student Teaching Rounds	...	...		123
Student Assessment Rounds	...	...		58
State Enrolled Nurses	...	...		19
<i>Visits with Trained Staff</i>	...	...		19

The number of patients cared for and the number of nursing visits have increased since 1969. These figures are significant of present thinking and the future trend is for a greater number of patients to be nursed in the community.

As closer liaison is established with the General Practitioner and the Hospital Service the work of the District Nursing Staff will grow in volume and in interest. With improved communications there will be greater efficiency in the care of the patient.

GENERAL PRACTITIONER ATTACHMENT

Twenty-six Groups have a District Nursing Sister attached. Nursing staff favour liaison: as members of the team they can more readily discuss nursing problems with the Doctor and so provide a more effective nursing service.

One major disadvantage of this scheme is the additional time spent in travelling and waiting for public transport. This is a problem which is always with us in the Service, but is aggravated by the wide geographical area covered in Group practice.

1/4/70-31/12/70

General Surgery Sessions	2,397
Patients treated	10,828

MIDWIFERY

The steady decline in the number of patients booked for home confinement made it uneconomical in the use of staff to continue this service especially when a Domiciliary Midwifery service already existed in the City. The District Nurse Midwife attends Ante-Natal and Post-Natal Clinics in Group practice, and attends mothers and babies who are discharged from the Maternity Hospitals before the tenth day.

CONFINEMENTS

1965	1966	1967	1968	1969	1/1/70- 30/6/70
727	549	344	269	184	85

NURSING APPLIANCES

The number of appliances issued on loan during the year was 2,529. Some of the items issued to patients remain in use over long periods.

DISTRICT NURSE TRAINING

Post Graduate Training for the National Certificate is a popular choice for the Registered General Nurse and all available places in the Classes have been taken. There has been an increase in the number of Day Release Students for theoretical training from County Areas engaged in practical training.

1/12/70-31/12/70

Glasgow Students ...	...	39
Seconded by Counties ...	...	5
Day Release ...	...	17
Total ...		61

Two Practical Work Instructors' Courses for field staff engaged in the practical training of Students have been most successful both for staff in the City and the County areas.

The Queen's Institute relinquished their responsibility for providing a "Course of Instruction" for the Enrolled Nurse working on district. A Panel of Assessors have assumed responsibility. The Course lasts for ten weeks with continuous assessment of practical work and a written examination at the end of the Training period. The County Areas send Enrolled Nurses for theoretical training on a day release basis.

Queen's Course

10

*Training for National Certificate
Glasgow Day Release*

8

3

NURSES (SCOTLAND) ACT, 1951

NURSING AGENCIES

No new applications were received during the year for registration of a Nursing Agency. As satisfactory reports were made on the existing four agencies, their licences were renewed.

NURSING HOMES REGISTRATION (SCOTLAND) ACT, 1938

One application for registration under the above Act was received during the year but registration will not be granted until necessary structural alterations have been completed. One registration was cancelled due to the retiral of the owners. At the end of the year, the number of Nursing Homes registered was 20 and the number exempted was 2.

SECTION VI

INFECTIOUS AND OTHER DISEASES

Although there was a slight overall increase in the incidence of infectious disease in 1970 this was due mainly to large increases in one or two diseases and the general trend was really towards a reduction in incidence.

The whooping cough cases in 1970 were six times the 1969 figure and there were three deaths. Measles more than doubled in incidence as did the cases of rubella, which became notifiable in November, 1970.

There was evidence of a significant outbreak of influenza during the first quarter of 1970 but there were fewer cases of pneumonia probably due to mild weather in the latter half of the year.

During 1970 one case of poliomyelitis occurred but there were no cases of diphtheria.

Scarlet fever remained at the same low level of incidence as in 1969 and there were fewer cases of gastro-enteritis.

There was only one case of typhoid fever and the incidence of dysentery was reduced.

Infective jaundice and food poisoning had notable reductions in their incidence.

Cases of cerebrospinal fever were reduced even further this year and there were fewer cases of chickenpox.

There were no cases of anthrax or Weil's disease but two cases of brucellosis are reported on.

The reduction in the incidence of scabies noted in 1969 was further improved during 1970.

HOSPITAL ADMISSIONS

(excluding Tuberculosis)

Admissions to hospital during the year totalled 4,558 compared with 5,100 in 1969. This includes 1,622 removed to hospital and ultimately diagnosed as other non-infectious disease. Pneumonia and dysentery continue to make the heaviest demands on hospital accommodation. In 1970 cases of pneumonia treated in hospital formed 49.8 per cent. of all infectious disease cases (excluding tuberculosis) admitted as against 49.0 per cent. in 1969. Fewer cases of pneumonia were admitted to hospital in 1970 and the proportion of the total (77 per cent) was four per cent. less than in 1969. Fifty-one per cent of all

dysentery cases were admitted to hospital compared with 40 per cent. in 1969. This is equivalent to 17.6 per cent. of all cases of infectious disease admitted during the year. In 1969 this proportion was 21.4.

Details of notifiable and non-notifiable diseases are given in Appendix Table XI.

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 1970, 2,837 travellers were inoculated against yellow fever. In 1969 the figure was 2,976. In addition, 1,316 inoculations were given against smallpox, cholera, typhus and the enteric group.

As in previous years, as a matter of convenience where crews of ships were concerned, the immunisations were carried out on board ship. This accounted for 50 of the yellow fever inoculations and 56 of the other group of procedures.

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. In addition primary vaccinations are carried out at the Child Welfare clinics and where necessary at day nurseries or at children's homes. In all 5,431 primary vaccinations were done during the year as compared with 4,824 in 1969 and 6,852 in 1968.

The figures showing the age distribution of those vaccinated for the first time in 1970 are as follows :—

Year of Vaccination	- 1	Age Group		Not Stated	All ages	Revaccinations
		- 5	5 and over			
1970	26	4,139	1,266	—	5,431	5,793

LEPROSY

Leprosy 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 the disease is prevalent. In the last twenty years only eleven cases came to the notice of this Department.

There was no case of this disease in 1970.

MALARIA

This disease like smallpox and leprosy, usually occurs in seamen or servicemen, returning to the City from abroad, or in foreign visitors. During 1970 there were six cases, three male and three female. There was one death, a woman of forty-one years of age who was on holiday from the Congo region of Africa. Incidence in recent years was as follows :—

1956-60 ...	...	...	45
1961-65 ...	...	...	16
1966 ...	...	...	4
1967 ...	...	...	6
1968 ...	...	...	4
1969 ...	...	...	10
1970 ...	...	...	6

TYPHOID, PARATYPHOID AND DYSENTERY

TYPHOID

Only one case was registered this year.

In the South-Western Division of the City, in September, a twenty-one year old female was on holiday in Spain from 11th-24th July. On 9th August she sickened with pyrexia and mental confusion and on 20th August was admitted to hospital for investigation. On 26th August, *Salmonella typhi* Vi phage type E1 was isolated from a blood culture and she was transferred to an infectious diseases hospital. It appears certain that she was infected in Spain where there were other cases of this infection. As she was a schoolteacher, a series of faeces specimens were examined after her dismissal from hospital and no *Salmonella* organisms were isolated.

PARATYPHOID

There were no cases of paratyphoid this year.

CHRONIC CARRIERS

There are now twelve City carriers. M.B., Ward 32, South-Western Division, has been added to the paratyphoid carriers. The list is as follows :—

TYPHOID—

M.I., Ward 35, South-Eastern 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.

S.A., Ward 28, South-Western Division.—She is aged about 35. She is a faecal carrier of *Salmonella typhi*, phage type 46. She is an immigrant from Pakistan in 1968, who was discovered to be a chronic carrier when in April 1969, she infected a baby living in the same multiple occupancy house. There is no history of the original typhoid illness.

PARATYPHOID—

- M.G., Ward 5, Eastern Division*—She is a chronic faecal carrier of *Salmonella* paratyphoid B, phage type 1.
- J.L., Ward 17, Northern Division*—This man, born 1887, was visited this year but refused to submit specimens.
- E.S., Ward 15, Northern Division*—She is a faecal carrier, born 1889, of paratyphoid B, phage type 1, whose first positive specimen had been a colostomy sample in 1957. The mother's faeces specimen is still positive for *Salmonella* paratyphi B; urine is negative. Her daughter, who lives with her, remains well and free from infection.
- S.M., Ward 13, Central Division*—This lady is still residing at the same address with her husband and four children and previous attempts at eradication treatment with Ampicillin were abandoned due to side effects.
- L.M., Ward 23, Central Division*—A faecal carrier, born 1892, he was last tested in 1939; he has given up his shoemaker's business. He does not wish to submit bacteriological specimens.
- D.M., Ward 24, Central Division*—During the year there had been considerable correspondence regarding institutional care for this lady but it has to be stated that there are no suitable facilities for such a case. She has been seen by geriatricians in connection with this matter. She was admitted to an infectious diseases hospital for a short period to allow the family to have a rest and a holiday. During this time her specimens were still positive.
- A.L., Ward 27, South-Western Division*—She was born in 1902 and she was detected as a faecal carrier of *Salmonella* paratyphi B, phage type 3A, in 1938. She was last found to have a positive faeces in 1967.
- J.J., Ward 35, South-Eastern Division*—This woman, born 1904, a faecal carrier of phage types 1 and 2, was last tested and found positive in 1961.
- B.S., Ward 24, Central Division*—This lady lives with her son. Her other son, whose wife contracted paratyphoid B and died in 1968, occasionally comes to live with her also.
- M.B., Ward 32, South-Western Division*—This lady was born in 1908. She was detected as a faecal carrier of *Salmonella* paratyphi B, phage type 1, when in August, 1970, she infected three friends who were guests at a meal in her house. The date of the original illness is unknown but she has remained a persistent excretor.

DYSENTERY

There were 1,022 registrations as compared with 1,830 last year. Every ward in the City was again affected and as usual there were wide differences between the numbers registered in the various wards, for example, less than ten cases from Kelvinside, Park, Exchange and Parkhead while 115 cases were registered from Provan.

Seasonal incidence was as follows:—

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
Home	152	173	225	355	905
Institutional	10	57	18	32	117

The fourth quarter was the worst.

More than half the non-institutional cases stayed at home, the number removed to hospital being 401.

The annual institutional figure for dysentery was 117. Sixteen institutions were concerned—nine medical institutions, two children's institutions and five miscellaneous residential institutions. In six instances only a single case was notified. The largest contribution came from a medical institution where there were forty-six cases in an outbreak which lasted approximately six weeks.

The following table shows the age distribution of the notifications :

	- 1 Year	- 5 Years	- 15 Years	- 55 Years	+ 55 Years	Total
Home	74	429	166	193	33	905
Institutional	5	35	11	30	36	117

There were three deaths from dysentery.

In the Central Division of the City, a female patient, aged 80 years, died on 2nd August, 1970, in a general hospital. The death certificate stated :—

Cause—

- I (a) Dehydration and peritonitis
- (b) Sonne dysentery
- II Pernicious anaemia
- Chronic pyelonephritis
- Cerebro-vascular accident

A female child, aged three years, living in the Northern Division of the City was admitted to a hospital on 19th September, 1970, with a twenty-four hour history of diarrhoea and vomiting. On admission she was toxic and semi-comatose with signs of meningismus. Lumbar puncture was negative and blood chemistry normal; despite antibiotic therapy and intravenous infusions, her condition deteriorated and prior to death she was having convulsions. Post mortem examination revealed only an acute severe dysentery.

A male child, aged three years, living in the Eastern Division of the City died on 28th November, 1970, in an infectious diseases hospital; he had a fulminating infection with endotoxin shock and died in spite of therapy. At post mortem he had acute severe colitis with bilateral adrenal haemorrhage; the organism was Flexner type 2A.

DIARRHOEA AND ENTERITIS (GASTRO 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. 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 1966 but is not a complete picture of the incidence of diarrhoeal infection in the City :—

Age in Years ...	Age Distribution				
	1970	1969	1968	1967	1966
- 1	184	316	301	203	336
- 2	28	38	38	23	25
- 5	27	22	20	6	6
5 and over ...	55	38	57	34	25
	<u>294</u>	<u>414</u>	<u>416</u>	<u>266</u>	<u>392</u>

The seasonal distribution of cases in the past five years is as shown :—

	1970	1969	1968	1967	1966
1st Quarter ...	53	80	59	39	53
2nd Quarter ...	68	82	119	55	97
3rd Quarter ...	31	138	105	67	129
4th Quarter ...	44	114	133	105	113
	<u>294</u>	<u>414</u>	<u>416</u>	<u>266</u>	<u>392</u>

Following the recent revision of the International Classification of Causes of Death, Enteritis, formerly included under the heading of " Gastritis, duodenitis, enteritis and colitis " was reclassified in 1968 as " Enteritis and other diarrhoeal diseases ". Also allotted to this new group are deaths from Diarrhoea of the Newborn, formerly included in " Infections of the Newborn ".

In 1970 the Registrar General attributed 23 deaths to Enteritis, distributed by sex and age as follows :—

	Males	Females	Both Sexes
Under 4 weeks ...	2	2	4
Under one year ...	7	6	13
Under five years ...	1	—	1
Under ten years ...	—	1	1
Under 65 years ...	—	2	2
65 and over ...	—	2	2
	<u>10</u>	<u>13</u>	<u>23</u>

FOOD POISONING

The number of incidents of food poisoning notified to the Department during 1970 was 107 and the number of cases was 171. During the last three years the incidents and cases have been as follows :—

	Incidents			Cases		
	1968	1969	1970	1968	1969	1970
Community Outbreaks	5	5	9	598	111	32
Family Outbreaks ...	39	24	17	112	70	58
Sporadic ...	163	108	81	163	108	81
Total ...	<u>207</u>	<u>137</u>	<u>107</u>	<u>873</u>	<u>289</u>	<u>171</u>

TYPE OF ORGANISM

	Family Outbreaks		Community Outbreaks		Sporadic Cases	Total Cases
	Incidents	Cases	Incidents	Cases		
Salmonellae ...	6	18	7	29	58	105
Staphylococci ...	1	2	—	—	—	2
Clostridium welchii	2	20	—	—	—	20
Unknown ...	8	18	2	3	23	44
Total ...	<u>17</u>	<u>58</u>	<u>9</u>	<u>32</u>	<u>81</u>	<u>171</u>

SALMONELLA ORGANISMS

<i>Salmonella</i> —						
agona	...	...	...	...	...	1
bredeney	...	...	...	...	...	27
derby ...	...	...	...	...	...	3
dublin	...	...	...	...	...	2
enteritidis	...	...	...	...	...	12
heidelberg	...	...	...	...	...	4
montevideo	...	...	...	...	...	3
panama	...	...	...	...	...	1
senftenberg	...	...	...	...	...	1
thomson	...	...	...	...	...	2
typhimurium	...	...	...	...	...	40
virchow	...	...	...	...	...	1
not yet identified	...	...	...	...	...	8
						<u>105</u>

The number of cases whose aetiology remained unknown this year was 44.

In December, a male patient, aged 88 years, was transferred from a general hospital to an infectious diseases hospital as it was discovered that he had a *Salmonella typhimurium* infection. He died six days later. The death certificate gave the causes of death as :—

- I (a) Intestinal haemorrhage
- (b) Gastric carcinoma
- II *Salmonella typhimurium*

SCARLET FEVER

One hundred and twenty-one cases of scarlet fever were registered in Glasgow during 1970. Only 15 patients (12.4 per cent.) were treated in hospital, this being the same number as treated in hospital during 1969.

The incidence of this disease during the last five years is set out below :—

	Total Cases	Treated in Fever Hospitals	Treated in Other Institutions	Treated at Home
1966 ...	175	35	1	139
1967 ...	249	38	2	209
1968 ...	212	25	—	187
1969 ...	219	15	—	204
1970 ...	121	15	—	106

Of the 121 patients, 36 (30 per cent.) were under the age of five years, three of these being under the age of one; 75 (62 per cent.) were aged between 5 and 15 years; and 9 (7 per cent.) were between 15 and 25 years; and one was in the age group between 35 and 45 years.

There have been no deaths from scarlet fever since 1956.

ERYSIPELAS

There were 23 cases of Erysipelas in 1970, 8 less than in 1969. Of this total, 8 were males and 15 females.

The age distribution of the cases was as follows :—

- 15 years ...	—	- 45 years ...	5
- 25 years ...	1	- 65 years ...	7
- 35 years ...	3	65 + years ...	7

There were no deaths in 1970.

DIPHTHERIA

Apart from one fatal imported case in 1964, there have been no cases of diphtheria in Glasgow since, 1956, and no deaths from this disease since 1954.

Immunisation.—The following table shows the number of children who completed a primary course of diphtheria immunisation in 1970.

The 1969 figures are shown for comparison.

Vaccine used	Under 5 years		Over 5 years	
	1970	1969	1970	1969
Diphtheria only ...	41	37	2	9
Diphtheria and Pertussis	46	9	—	—
Diphtheria and Tetanus	56	75	4,456	4,575
Pertussis, Diphtheria and Tetanus ...	10,760	6,390	115	165
*Quadruple ...	—	—	—	—
	<u>10,903</u>	<u>6,511</u>	<u>4,573</u>	<u>4,749</u>
All ages ...	1970 = 15,476.		1969 = 11,260.	

The numbers who received maintenance inoculations in these two years were as follows :—

	Under 5 years		Over 5 years	
	1970	1969	1970	1969
Diphtheria only ...	5	15	17	35
Diphtheria and Pertussis	—	2	5	2
Diphtheria and Tetanus	85	173	22,313	21,438
Pertussis, Diphtheria and Tetanus ...	1,572	4,035	551	783
*Quadruple ...	—	—	—	—
	<u>1,662</u>	<u>4,225</u>	<u>22,886</u>	<u>22,258</u>
All ages ...	1970=24,258.		1969=26,483.	

* Diphtheria, Pertussis, Tetanus, Polio.

See also page 134 of the School Health Service section of this Report.

CEREBROSPINAL FEVER (MENINGOCOCCAL INFECTION)

Sixteen cases were known to the Department, which is the lowest figure ever recorded in the City.

The age incidence was :—

Under 1 year	1-5 years	5-15 years	Over 15 years
4	7	2	3

The cases were distributed fairly evenly throughout the City and throughout the year although there were no cases during the last quarter.

Deaths from Meningococcal Infection : Four deaths were recorded, one under one year and three between one and five years. This is equal to the lowest death rate recorded in the City.

The incidence and deaths from Meningococcal Infection since 1951 is as follows :—

	Cases	Deaths
Average 1951-55 ...	107	13
Average 1956-60 ...	65	8
Average 1961-65 ...	52	6
1966 ...	28	7
1967 ...	24	8
1968 ...	30	4
1969 ...	26	6
1970 ...	16	4

POLIOMYELITIS

During the year two cases of poliomyelitis occurred in the City, the first since 1968.

In July, a 22 year old man was admitted to hospital with what was assumed at the time to be a virus meningitis. He soon developed muscle weakness on the left side. Later with the isolation of Polio Virus Type 1, it was confirmed that this was in fact a case of paralytic polio.

The man claimed to have been fully immunised in childhood but this could not be confirmed because he spent the first decade of his life in Eire. Enquiries failed to elicit any possible source of infection.

In December a girl aged three was confirmed as a case of paralytic polio Virus Type III. Scrutiny of the department's records did not support the mother's claim that the child had been previously immunised.

VIRUS MENINGITIS

(LYMPHOCYTIC OR ASEPTIC MENINGITIS)

Virus Meningitis is usually a mild disease recognised as a clinical meningitis. The condition is caused by a multiplicity of viruses, many of which are responsible for transitory infection of the alimentary tract. A few of these viruses can attack the central nervous system and give rise to a degree of paralysis and indeed simulate the picture of poliomyelitis.

During the year 1970, there were 37 cases of virus meningitis treated in hospital, occurring in the City, an increase of one from 1969. Cases domiciled outside the City, although treated in Glasgow hospitals, are not included in the analysis.

Age-Group Sex	-1		-2		-5		-10		-15		-25		-35		-46		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Mumps ...	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	2	—	2
Zoster ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1
Echo 17 ...	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	1	1	2
Virology Negative ...	—	1	1	—	4	—	6	—	6	1	4	2	4	—	—	3	25	7	32
	—	1	1	—	4	—	8	—	6	2	5	2	4	—	1	3	29	8	37

Of the total of 37 cases there were 29 male and 8 female ; children and young persons were principally affected, the youngest being a girl of eleven months.

The most striking feature of the 37 cases is really a negative one because in 32 cases no causative organism could be incriminated, although in two cases recent infection with measles was suggested by serological findings, but the cerebro-spinal fluid (C.S.F.) findings, together with the symptoms, confirmed the diagnosis. Of the 5 "attributable" cases, 2 were due to mumps (both confirmed by serological examinations), 2 to Echo Type 17 infection (confirmed by virus isolation from faecal specimens) and one to Herpes Zoster (confirmed by serological examinations). There was in addition, one case which presented as meningitis with C.S.F. findings compatible with virus meningitis but serological studies proved the aetiological agent to be *L. Canicola*.

Virus				1966	1967	1968	1969	1970
Mumps	...	...	...	6	9	5	7	2
Measles	...	...	...	—	1	—	—	—
Coxsackie type	A5	...	...	—	—	1	—	—
	A7	...	...	—	1	—	—	—
	A9	...	...	—	—	—	2	—
	B1	...	...	—	—	—	2	—
	B3	...	...	—	2	—	—	—
	B5	...	...	—	—	1	—	—
	B6	...	...	—	3	—	—	—
Echo type	1	...	...	1	—	—	—	—
	3	...	...	—	2	1	—	—
	6	...	...	3	—	—	1	—
	9	...	...	—	—	1	4	—
	14	...	...	—	1	—	—	—
	17	...	...	—	—	—	—	2
	19	...	...	—	—	2	—	—
30	...	...	1	—	—	—	—	
Adeno-virus	...	...	...	2	—	1	—	—
Herpes simplex	...	...	...	1	1	—	1	—
Herpes zoster	...	...	...	—	—	—	—	1
Unidentified	...	...	...	1	—	—	—	—
Virology Negative	...	...	...	14	31	26	19	32
				<u>29</u>	<u>51</u>	<u>38</u>	<u>36</u>	<u>37</u>

Cases of virus meningitis occurred throughout the year but more occurred in the later months with the peak month being June as will be seen from the following table:—

SEASONAL DISTRIBUTION

				Herpes Virology			Total	
				Mumps	Echo 17	Zoster		Negative
January	...	...	...	—	—	—	1	1
February	...	...	...	—	—	—	2	2
March	...	...	...	1	—	—	1	2
April	...	...	...	—	—	—	1	1
May	...	...	...	1	—	—	2	3
June	...	...	...	—	1	1	7	9
July	...	...	...	—	—	—	2	2
August	...	...	...	—	1	—	3	4
September	...	...	...	—	—	—	3	3
October	...	...	...	—	—	—	4	4
November	...	...	...	—	—	—	3	3
December	...	...	...	—	—	—	3	3

Cases of virus meningitis were scattered throughout the City but without any significant distribution.

POLIOMYELITIS VACCINATION

During 1970, 13,218 persons were given a primary course of poliomyelitis vaccination and 18,065 persons a reinforcing dose. As in 1969, oral (Sabin) vaccine was used in every case.

The ages of the persons given primary vaccinations were as follows:

Year of Birth	Age at 31.12.70	
1970	Under 1 year	596
1969	1 year	8,893
1968	2 years	1,130
1967	3 years	190
1966	4 years	126
1965 or earlier	5 years and over	2,283
		<u>13,218</u>

The number of vaccinated children at each year of age under five is given below, and is also expressed as a percentage of the number of births less deaths under one year in the relevant year.

Year of Birth	Age at 31.12.70	Births minus Deaths under 1 year	Number Vaccinated at 31.12.70	Percentage Vaccinated at 31.12.70
1970	0	15,858	596	3.8
1969	1	16,935	9,315	55.0
1968	2	18,322	11,593	63.3
1967	3	18,858	13,199	70.0
1966	4	19,168	13,753	71.7

The computer-controlled appointments system is available for arranging for the vaccination of children born in or after May, 1969 and 45.9 per cent. of the primary poliomyelitis vaccinations given in 1970 were arranged in this way. Of the primary vaccinations 48.3 per cent. were given by the Child Welfare Service, 36.6 per cent. by general practitioners and 15.1 per cent. by the School Health Service.

The School Health Service gave no less than 93.9 per cent. of the reinforcing doses.

	Primary Vaccinations		Reinforcing Doses	
	Number	Percentage	Number	Percentage
Computer-controlled appointments system—				
Child Welfare Service	3,675	27.8	—	—
General Practitioners	2,391	18.1	—	—
Others—				
Child Welfare Service	2,712	20.5	29	0.2
General Practitioners	2,440	18.5	1,068	5.9
School Health Service	2,000	15.1	16,968	93.9
	<u>13,218</u>	<u>100.0</u>	<u>18,065</u>	<u>100.0</u>

ENCEPHALITIS

Viral Encephalitis.—There have been only sporadic cases of this infection since the small outbreak which occurred in 1937.

There were no cases or deaths in 1970.

Post-Encephalitis Lethargica.—A group of cases, 19 in number, the remaining survivors of a Glasgow epidemic which affected 70 persons in all, have been under 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 17 cases in the Spring of 1971 :—

PHYSICAL CONDITION

	Males	Females	Total
Fit for housework	—	4	4
Fit for employment	4	—	4
Unfit but going about	3	3	6
Bedridden at home	—	—	—
Cases in General Hospital	1	—	1
Cases in Mental Hospital	—	—	—
Cases untraced	1	1	2
	<hr/>	<hr/>	<hr/>
	9	8	17
	<hr/>	<hr/>	<hr/>

These are classified as follows :—

	Spring 1970	Spring 1971
Group I. Recovery complete	3*	3*
Group II. Recovery incomplete :—		
Class A. Mental Retardation...	1	1
Class B. Mental Instability ...	1	1
Class C. Nervous Instability ...	8	10
Group III. Perversion of Conduct	—	—
Group IV. Parkinsonians :—		
Class A. Normal Mentality ...	3*	3*
Class B. Abnormal Mentality	1	4
Group V. Died	1	—
	<hr/>	<hr/>
	18	17
	<hr/>	<hr/>

* One not traced.

There was no change in the classification of these 17 cases during the year but two of them showed further physical and/or mental deterioration, whilst three have improved physically and mentally. Details of these cases are as follows :—

A 70-year-old woman, Group IV, Class A (Parkinsonian 1924) has more difficulty in walking; a constant tremor of the right arm and her speech is difficult and incoherent. She spent some time in hospital following an accident while crossing the road but has made a fair recovery.

The mental condition of a 53-year-old man, Group II, Class B continued to deteriorate. He is very excitable, incoherent of speech, and eyesight and memory are poor. He goes out only occasionally and is now unfit for work.

A 59-year-old man, Group IV, Class B (Parkinsonian 1928) is still in hospital but his physical condition has improved due to a new drug (Levodopa). He is now up each day. The tremor of his arms and legs is improved as is his speech, and he can now feed himself.

A 71-year-old woman, Group II, Class C is improved greatly since last year. She suffers from Polio-arthritis of the right hand but there is now more power in it and she is able to use it freely. She also goes out more frequently.

Though still unfit for work the physical condition of a 57-year-old man, Group II, Class C, has improved and he is not as troubled with asthma.

MEASLES

Measles became notifiable from 1st October, 1968. Previous to that date cases were registered mainly on information by Head Teacher and School Attendance Officers. During 1970, there were 4,354 cases, an increase of 2,446 from the previous year; 275 cases were admitted to hospital. There were 3 deaths. Measles is an acute highly communicable viral disease with a peak incidence every other year.

The recorded incidence of measles during the last five years was :—

Year	Registered Cases	Deaths	Fatality per cent.
1966	2,000	3	0.15
1967	642	3	0.47
1968	1,376	1	0.07
1969	1,908	—	—
1970	4,354	3	0.07

The quarterly percentage incidence during 1970 and the previous four years was :—

		PERCENTAGE OF YEAR'S TOTAL				
		1966	1967	1968	1969	1970
1st Quarter	...	4	72	7	39	7
2nd Quarter	...	10	21	26	37	50
3rd Quarter	...	12	1	9	16	33
4th Quarter	...	74	6	58	8	10

The age and sex distribution in 1970 was :—

Age		Male	Female
- 1	...	149	161
- 5	...	1,400	1,160
- 15	...	713	748
15 +	...	8	15

Live measles vaccine is recommended to be given under the schedule for immunisations at the age of 15 months and during 1970, 3,995 doses were administered.

RUBELLA (GERMAN MEASLES)

Rubella became notifiable in November 1970. Before that cases were registered mainly on information from school sources. The incidence during the past five years was :—

1966	...	25
1967	...	27
1968	...	30
1969	...	20
1970	...	58

The age and sex distribution was :—

Age		Male	Female
- 1	...	5	—
- 5	...	13	11
- 15	...	14	13
15 +	...	—	2

A vaccine is now available against this condition, whose main importance is the possibility of foetal abnormality resulting from rubella occurring in pregnancy, especially in the first trimester.

WHOOPING COUGH

There was a large increase in the incidence of whooping cough in 1970, 1,063 cases being notified. This follows two very low years and is closely comparable with the figure of 1,050 for 1967. Of the 1970 cases, 15 per cent were under one year and 27 per cent. between one and five years; 166 cases were admitted to hospital. There were three deaths, the first since 1967.

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
Average 1960-64	1,657	1	0.07
1965	459	—	—
1966	876	—	—
1967	1,050	3	0.28
1968	369	—	—
1969	160	—	—
1970	1,063	3	0.28

CHICKENPOX

The number of cases of chickenpox brought to the notice of the Department during 1970 was 500 a decrease of 352 from the previous year's total.

The distribution of cases throughout the five divisions of the city was as follows :—

	1970
Central	40
Northern	34
Eastern	111
South-Eastern	172
South-Western	126
Institutions and Harbour ...	17
	<hr/>
	500
	<hr/>

During the year only 35 cases were removed to hospital. There were no deaths from Chickenpox in 1970.

PEMPHIGUS NEONATORUM

For the ninth year in succession no cases of this disease were reported. In 1961 there were 12 cases and as recently as 1959, 44.

RABIES

No cases of rabies is known to have occurred, but one seven year old boy had to receive anti-rabies treatment after he had been bitten by a wild baboon while on holiday in Zambia.

The Police Department supply the following information regarding the number of persons injured by animals during 1969 and 1970 :—

	1970	1969
Injured by dogs	916	987
Injured by horses	3	1
Injured by other animals ...	4	1

TRACHOMA

Trachoma was made notifiable in Glasgow in 1914 under the provisions of the Infectious Diseases (Notification) Act, 1889.

No new cases of the disease were notified in 1970. During the year, eight cases were removed from the Register, one having died and seven having gone away from the district.

At the end of 1970, the total number of cases on the Register was thirty-one.

At a special clinic, patients made a total of 204 attendances and the nurses carried out 230 home visits.

A review of the Trachoma position in Glasgow from 1914 to 1968 was published in the Health Bulletin, Vol. XXVII, No. 3, July, 1969.

ANTHRAX

No cases were notified during 1970.

Since 1960 when Anthrax became notifiable, there have been two cases in 1965, one in 1966 and one in 1967.

Samples of imported bone grist and bone meal have been shown to contain the causative organism, bacillus anthracis.

INFECTIVE JAUNDICE

Two forms of viral hepatitis caused by different viruses are recognised.

- (i) Infectious hepatitis has a short incubation period (15-45 days) and is caused by IH virus = Virus A. Spread of this virus is usually by the faecal-oral route either directly or indirectly via food, milk or water.

- (ii) Serum hepatitis has a long incubation period (50-200 days) and is caused by SH virus = Virus B. The most important route of infection is penetration of the skin or contamination of skin abrasions with blood containing the virus. Infection may rarely be spread by the faecal-oral route.

Differentiations of serum from infectious hepatitis is not possible on clinical or biochemical grounds.

Previous to notification, which became operative from 1st October, 1968, cases were recorded which had been mainly hospital admissions. The numbers were as follows :—

1957	80	1964	218
1958	90	1965	135
1959	117	1966	149
1960	274	1967	185
1961	152	1968	357 (225 from 1st October, 1968)
1962	57	1969	661
1963	64	1970	441

Compared with 1969 there was a decrease of 220 and the number of cases admitted to hospital was 127. One death occurred.

The quarterly incidence for the last three years was as follows :—

			1968	1969	1970
1st Quarter	...	...	27	187	117
2nd Quarter	...	...	47	136	103
3rd Quarter	...	...	58	124	97
4th Quarter	...	...	225	214	124

The age and sex incidence in 1970 was as follows :—

Age Group	- 1	- 5	- 15	- 25	- 35	- 45	- 65	65 +	Total at all Ages	
Males	1	19	115	35	17	8	6	3	204
Females	...	2	31	111	48	23	4	12	6	237

LEPTOSPIROSIS

Incidence	Serogroup Involved	
	<i>L. icterohaemorrhagica</i>	<i>L. canicola</i>
1961	—	1
1962	2	2
1963	—	6
1964	1	4
1965	1	4
1966	—	1
1967	1	—
1968	—	3
1969	—	2
1970	—	1

The one case was a 23 year old female veterinary assistant who was admitted to hospital as a pyrexia of unknown origin and after investigation was diagnosed as lymphocytic meningitis due to *L. Canicola*.

BRUCELLOSIS

Returns from bacteriological laboratories and subsequent investigations of case histories showed that two recognised cases of brucellosis occurred in Glasgow during 1970. A third patient had serological evidence of infection at a significant titre but was found to be suffering from another disease.

A forty-year-old policeman was admitted to hospital in July with a provisional diagnosis of cerebrospinal fever. He had a three-week history of fatigue, general malaise, sweating, shivering and occipital headache. On admission he was found to have enlargement of the liver and slight stiffness of the neck, which had given rise to the suspicion of meningitis. During his first two weeks in hospital he had bouts of fever, especially in the evenings. His blood was found to contain antibodies to *Brucella abortus* at a titre of 1 : 1280 but was sterile on culture. He was given a seven day course of streptomycin and was also started on treatment with tetracycline. Two weeks after the start of his treatment he was discharged home, being then symptom-free. He had been in hospital three weeks. When he was seen again five weeks later he had remained well and the tetracycline treatment was then discontinued.

The milk supplied to the patient's home was pasteurised, but he had been in the habit of visiting farms around the city in the course of shooting expeditions. He had also had a holiday in Argyllshire earlier in the year. He may well have drunk unpasteurised milk on one of those occasions.

A fifty-one-year-old business executive became ill in October. He complained of malaise, extreme tiredness, night sweats and loss of weight. The diagnosis of brucellosis was made two months later, when his blood was found to contain antibodies to *Br. abortus* and *Br. melitensis* each at a titre of 1 : 1280. Blood culture was sterile. He was admitted to hospital for four days for further investigation. At this stage he was described as "an ill-looking man" and his temperature was raised, on occasion as high as 102°F. There was enlargement of the spleen but not of the liver or lymph glands. He was treated with "Septtrin" (trimethoprim and sulphamethoxazole) and when seen five weeks after his discharge he reported that he was much improved, his sweating had stopped and his energy was increased.

A twelve-year-old schoolgirl became ill in November. Her symptoms including swelling of the eyelids and of the hands and feet and she also had enlargement of cervical, axillary and inguinal lymph glands. Her blood contained antibodies to *Br. abortus* and *Br. melitensis*, each at a titre of 1 : 1280, and at one stage it was thought that her illness was due to brucellosis but she did not respond to tetracycline treatment and it was later decided that she was suffering from polymyositis.

The business executive and the schoolgirl both drank "Premium" milk (i.e. milk of high quality but unpasteurised) supplied by dairies near their homes and produced on the same farm in Ayrshire. On enquiry it was learned that in October 1969 the farmer had purchased from a neighbour and introduced into his herd six Jersey cows. At that time the herd appeared to be on the point of obtaining attestation but when the next brucellosis test was made the six Jersey cows were all found to be reactors and one was said to be a carrier. They were immediately removed from the herd but in subsequent tests a further forty-four cows were found to be reactors and were disposed of. A sample of milk taken from the farm in December, 1970 failed the Milk Ring and Whey Agglutination Tests and grew *Br. abortus* on culture.

These cases recall a similar incident in 1964 when two Glasgow patients contracted brucellosis from drinking what was then called "Certified" milk (i.e. high-grade milk, unpasteurised and farm-bottled) produced on an Ayrshire farm, and once again they illustrate the danger of drinking unpasteurised milk, even of the highest quality.

SCABIES

The number of cases of scabies treated by nurses has decreased by 259.

Division	Number of Families			Number of Cases		
	1970	1969	1968	1970	1969	1968
Central	274	260	979	510	450	1,949
Northern	507	530	468	1,029	1,100	937
Eastern	412	493	224	689	812	464
South-Eastern ...	140	158	243	244	319	504
South-Western ...	250	262	125	438	488	269
Total	<u>1,583</u>	<u>1,703</u>	<u>2,039</u>	<u>2,910</u>	<u>3,169</u>	<u>4,123</u>

For many years now no reception arrangements have existed in the City and cases have had to be treated within their own homes. Children at school are treated at Florence Street and Glenbarr Street Clinics and also in the district clinics.

SCHOOL CHILDREN TREATED AT CLINICS FOR SCABIES

Month	Boys	Girls	Total
January	106	93	199
February	123	127	250
March	107	111	218
April	190	178	368
May	143	125	268
June	97	111	208
July	20	7	27
August	33	38	71
September	298	296	594
October	237	219	456
November	138	144	282
December	45	54	99
	<u>1,537</u>	<u>1,503</u>	<u>3,040</u>

The figures given for school children treated at clinics are in addition to the divisional figures quoted.

The total for the equivalent group for 1969 came to 2,799 and for 1968 to 8,230.

INFLUENZA

There was evidence of a significant outbreak of influenza in the first quarter of the year and the virological evidence indicates that this was due to virus of the A2/Hong Kong/68 subtype. The figures suggest that this was the largest outbreak since the major outbreak in the autumn of 1957.

As the disease is not notifiable an estimate of its incidence must be taken from the following sources:—

1. Isolation of virus or identification by significant rise in titre—
from weekly "Communicable Diseases Scotland" reports
(Glasgow figures only).
2. New claims for sickness benefit made to the Department of
Health and Social Security.
3. Notified cases of Influenzal Pneumonia.
4. Deaths from Influenza.

ISOLATION OR IDENTIFICATION OF INFLUENZA VIRUS. 1970

	Serology			Isolation		
	A	B	C	A	B	C
1st Quarter ...	130	2	—	37	7	—
2nd Quarter ...	13	10	—	3	5	—
3rd Quarter ...	—	1	—	—	—	—
4th Quarter ...	2	—	—	—	—	—
Total ...	<u>145</u>	<u>13</u>	<u>—</u>	<u>40</u>	<u>12</u>	<u>—</u>

Almost all of the Type A isolations were shown to be of the A2/Hong Kong/68 subtype. There appears to have been an almost complete absence of influenza virus during the second half of the year.

WEEKLY RETURNS OF NEW CLAIMS FOR SICKNESS BENEFIT

The total number of new claims for sickness benefit made in Glasgow each week during the year normally runs in the region of between five and seven thousand. This figure rose rapidly in 1970 reaching 22,000 in the second week of the year but fell back rapidly to about 7,000 by the end of January and was below 7,000 from the month of April onwards. These are the greatest figures returned since the major outbreak of influenza due to the A/Asian virus in the autumn of 1957 when the maximum weekly claims reached over 30,000. Figures reaching a maximum, however, of 17,000 occurred at the beginning of 1966 and of 1968 when there were also outbreaks of influenza.

MONTHLY DISTRIBUTION OF NOTIFIED CASES OF INFLUENZAL PNEUMONIA, 1970

January ...	...	50	July ...	...	—
February ...	...	7	August ...	...	—
March ...	...	—	September ...	...	—
April ...	...	—	October ...	...	—
May ...	...	1	November ...	...	—
June ...	...	1	December ...	...	5
			Total ...	...	<u>64</u>

While these figures are not of great significance, it is recognised that most cases of pneumonia due to influenza are never notified unless hospital admission is required but the figure of 50 cases during January is an unusually high figure but much lower than the figure in 1957 when over 300 cases were notified in one month.

DEATHS FROM INFLUENZA (REGISTRAR GENERAL'S FIGURES) 1970

Age Group	Total
Under five years ...	—
5—14 years ...	3
15—54 years ...	10
55—64 years ...	32
65—74 years ...	38
75—84 years ...	37
85 years and over ...	9
Total ...	<u>129</u>

This is the highest figure for deaths from influenza since 1957 when there were 161 deaths. The figure is, however, roughly comparable with the figure for 1961 when there were 115 deaths.

It is, of course, recognised that any outbreak of influenza has the effect of accelerating the deaths of many frail and elderly persons who may have been expected to die from other conditions within a comparatively short time and the certified death rate is not a true indication of the seriousness of an epidemic.

The available figures are not an accurate indication of the incidence of the disease but it can be seen there was a significant outbreak of influenza in the first quarter of 1970 and especially in January due to virus type A2/Hong Kong/68. The figures suggest that this is the most severe outbreak since the autumn of 1957 but it did not approach this outbreak in its severity.

PNEUMONIA AND BRONCHITIS

Of the 1,833 cases of primary pneumonia notified during the year, 1,440 (78·6 per cent.) were treated in hospital. Over a quarter of the patients notified were children under school age and two-fifths were persons over 65.

The distribution by age-group and sex of the notifications of primary pneumonia was as follows :—

	Males	Females	Total	Percentage
Under 1 year ...	131	97	228	12·4
1-4 years ...	165	96	261	14·3
5-44 years ...	162	115	277	15·1
45-64 years ...	197	135	332	18·1
65 years and over	341	394	735	40·1
	<hr/> 996	<hr/> 837	<hr/> 1,833	<hr/> 100·0

The Registrar General's Annual Return shows that 547 persons died of pneumonia, 770 of bronchitis, emphysema and asthma, and 116 of "other respiratory diseases" (i.e. other than pneumonia, bronchitis, etc., influenza and tuberculosis).

The distribution by age-group and sex of the deaths from pneumonia and bronchitis, etc., was as follows :—

	Pneumonia				Bronchitis, Emphysema and Asthma			
	Males	Females	Total	Percentage	Males	Females	Total	Percentage
Under 1 year	40	35	75	13·7	—	—	—	—
1-4 years ...	3	4	7	1·3	—	—	—	—
5-44 years ...	10	10	20	3·7	3	9	12	1·6
45-64 years ...	41	22	63	11·5	170	62	232	30·1
65 years and over	154	228	382	69·8	379	147	526	68·3
	<u>248</u>	<u>299</u>	<u>547</u>	<u>100·0</u>	<u>552</u>	<u>218</u>	<u>770</u>	<u>100·0</u>

TUBERCULOSIS

	Pulmonary	Incidence Non-Pulmonary	Total
1935-39 (Average)	1,650	657	2,307
1940-49 do.	2,565	579	3,144
1950-56 do	2,232	287	2,519
1957 (Mass X-ray)	3,925	172	4,097
1958-62 (Average)	1,108	130	1,238
1963	863	116	979
1964	814	135	949
1965	721	104	825
1966	634	102	736
1967	570	87	657
1968	525	55	580
1969	455	59	514
1970	484	69	553

The figures show an increase in incidence of tuberculosis compared with the previous year. Apart from the X-ray campaign year of 1957, there has not been a rise in the incidence for over twenty years. The figures are, in fact, incorrect due to an error of omission in one of the divisions. A number of cases were booked in March, 1970, which had been notified earlier, most of them in 1969. This means that the incidence of pulmonary cases in 1969 should be twenty more and in 1970 some twenty less. The pulmonary incidence in 1970 would then show a small decrease. If this is accepted, the figures still show a levelling off which has been seen in other cities previously but not in Glasgow. The chest physicians notify the bulk of pulmonary cases in Glasgow according to a rule of thumb that a patient treated is notified. Several of the chest physicians admit that cases which would have been kept under observation in the past are now promptly treated and notified. One physician says that he is "scraping the barrel" in regard to notifications and considers that the pool of infection in his area is less although notifications may be more. This is reassuring. The doubt remains that there is some complacency about tuberculosis. It is premature to regard it as a disease of the past which is now well controlled.

The next table shows age and sex distribution of cases booked in 1970 compared with 1969 :—

Age groups	Pulmonary				Non-Pulmonary			
	Males		Females		Males		Females	
	1970	1969	1970	1969	1970	1969	1970	1969
- 5	3	10	1	2	1	—	—	—
- 15	7	8	8	13	2	2	2	3
- 25	28	24	25	24	3	3	4	10
- 35	39	26	27	26	5	2	8	12
- 45	32	33	19	26	9	3	9	6
- 55	64	62	30	23	7	2	5	3
- 65	92	56	17	17	1	1	3	2
+ 65	68	80	24	25	3	3	7	7
	<u>333</u>	<u>299</u>	<u>151</u>	<u>156</u>	<u>31</u>	<u>16</u>	<u>38</u>	<u>43</u>

Pulmonary Tuberculosis.—The trends apparent in the pulmonary figures for some years continue. There is a small decrease in the children notified and the younger groups remain fairly stable. Only in older males is there a notable increase, especially in men from 55 to 64 years inclusive. The proportion of females to males is smaller than ever; the female notifications are only 45 per cent. of the male total.

Of these 484 new cases, 195 were infectious at the time of diagnosis in that tubercle bacilli were found in their sputa. Five of the 195 had bacilli which were resistant to one or more of the standard drugs used in treatment.

Intimations of Primary Tuberculosis.—There were 32 intimations in 1970 comprising 24 boys and 8 girls compared with 28 in 1969. Intimations have been made for several years by the paediatricians in respect of children who are not ill and notification is not considered appropriate. The intimation allows the Health Department to make a search for the source of the child's infection.

Non-Pulmonary Tuberculosis.—The notified incidence of non-pulmonary disease shows an increase which is only in male cases.

The sites of involvement in the 69 patients were :—

- 32 superficial glands
- 23 genito-urinary
- 7 bones and joints
- 5 meningeal
- 1 abdominal
- 1 " other organ "

In a paper written in 1970, Dr. Bruce of the Tuberculosis Reference Laboratory at Mearnskirik noted that "the fall in incidence of pulmonary tuberculosis has not been reflected in urogenital tuberculosis." His figures referred to the years 1963-1969 inclusive and to the West of Scotland.

In the past, the epidemiology of tuberculosis in Glasgow has been considerably affected by immigrants from the Highlands and Islands and from Ireland with their different backgrounds of infection and immunity. At present there is a similar but small effect due to Asian immigrants. Of the 484 new pulmonary cases notified, 20 were of Asian origin, and similarly 15 of the 69 new non-pulmonary cases. Incidence rates are not calculated. The census figures may provide an accurate denominator to allow for this. There were also six Asian cases transferred in from other areas during the year which suggests that increased mobility of recent arrivals may also be a factor.

Mortality.—There were 90 deaths from pulmonary tuberculosis in 1970 compared with 80 in 1969. This is equivalent to a death rate of just under 10 per 100,000 compared with 9 per 100,000 in the previous year.

Deaths from non-pulmonary disease were seven fewer than the 25 recorded in 1969.

As in 1969, there were no deaths from tuberculosis under 25 years of age. In 1970 there was only one death from pulmonary tuberculosis under 35 years.

As with new cases of pulmonary tuberculosis, the deaths are concentrated in the older males. It will be seen from the following table that 53 of the pulmonary deaths occurred in men over 55 years of age.

DEATHS FROM TUBERCULOSIS

Age	Pulmonary			Non-Pulmonary*		
	Male	Female	Total	Male	Female	Total
Under 25 ...	—	—	—	—	—	—
Under 35 ...	1	—	1	2	—	2
Under 45 ...	8	2	10	2	2	4
Under 55 ...	10	6	16	1	—	1
Under 65 ...	19	6	25	2	2	4
Under 75 ...	25	1	26	2	2	4
Under 85 ...	9	3	12	1	1	2
85 + ...	—	—	—	1	—	1
	72	18	90	11	7	18

* Other tuberculosis, including late effects.

B.C.G. VACCINATION

B.C.G. vaccination in 1970 decreased to 26,216 compared with 26,950 in 1969. This is largely accounted for by the smaller number of infants vaccinated—11,712 in 1970 as against 12,240 in 1969. The vaccinated infants represent 70 per cent. of the live births and 74 per cent. of the hospital births.

School Campaign.—The success of the thirteen-year-old vaccination campaign has come to be expected. Consent forms issued numbered 15,981 and 15,656 consents were obtained representing a 98 per cent. success rate. This points to excellent co-operation from school staff, parents and children. In fact, in seven schools all the pupils returned the consent forms.

Tuberculin Testing.—The Government issue P.P.D. of 10 Tuberculin Unit strength was used. This is a short life preparaton and even a small delay in delivery can upset the smooth running of the campaign. To avoid this, a small reserve was held of another P.P.D. preparation which can be used till some six months after manufacture. This reserve was used for testing at six schools on two consecutive days. On reading these tests it became obvious that the results were not in line with other test results. In the six schools 967 pupils were tested giving 361 (37·3 per cent.) positives. The table which follows shows a positive reactor rate for the whole city of 19·0 per cent. In fact, if the six schools above are omitted, the remainder of the city gave only 17·7 per cent. of positives and this may be accepted as the positive reactor rate for the year. Also there was a much larger proportion of "large positives" in these six schools; pupils with such reactions being referred to the chest clinics.

A sample of the stand-by supply of long-life tuberculin was sent to the Medical Research Laboratory in London for testing on guinea pigs. These tests proved negative in that the tuberculin was reported to correspond to the strength stated by the manufacturers. This result disagreed with our evidence from testing children which showed unequivocally a difference compared with the normal government issue P.P.D. of the same labelled strength. There is little doubt that the human results are to be preferred to the guinea pig tests. The children tested with the reserve supply were divided nearly equally between the sexes and therefore did not to any extent affect a difference between the sexes.

It will be seen from the table below that 19·7 per cent. of boys were positive reactors and only 18·4 per cent. of girls. The higher

proportion of positive reactions in boys is statistically significant (at the usual acceptable 5 per cent. level). In 1969 and 1968 there was an even greater preponderance of positive results in boys. If one goes back to 1965 and 1961, the same feature of more positive boys is noted. On the other hand, in the years 1962-1964, 1966 and 1967, boys and girls showed no significant difference in regard to Tuberculin sensitivity. No explanation is offered for these peculiar findings.

One hundred and fifty-three children of Asian immigrant families were tested at school and of these, 65 (42.5 per cent.) were positive reactors. This shows that there is a significantly higher rate of infection in this section of the population at this age.

Vaccination in the school campaign numbered 12,068, an increase of 480 over the previous year.

SCHOOLS B.C.G. CAMPAIGN, 1970

1. PUBLIC RESPONSE—PARENTAL CONSENT TO VACCINATION

	Schools	Pupils	Consents	% Response
Public Schools ...	93	15,784	15,467	98.0
Private Schools ...	6	381	367	96.3
Total ...	99	16,165	15,834	98.0

2. LOSS DUE TO ABSENCE FROM SCHOOL

	(1) Consents	No. Absent 1st Visit	% of (1)	No. Tested	No. Absent 2nd Visit	% of (1)	Total No. Absent	% of (1)	No. of Tests Read
Public Schools	15,467	672	4.3	14,795	244	1.6	916	5.9	14,551
Private Schools	367	4	1.1	363	—	—	4	1.1	363
Total	15,834	676	4.3	15,158	244	1.6	920	5.8	14,914

3. RESULTS OF MANTOUX TESTS

	Tests	Positive	Per Cent.	Negative	Per Cent.
MALE—					
Public Schools ...	7,343	1,452	19.8	5,891	80.2
Private Schools ...	163	23	14.1	140	85.9
Total ...	7,506	1,475	19.7	6,031	80.3
FEMALE—					
Public Schools ...	7,208	1,340	18.6	5,868	81.4
Private Schools ...	200	20	10.0	180	90.0
Total ...	7,408	1,360	18.4	6,048	81.6
All Results ...	14,914	2,835	19.0	12,079	81.0

B.C.G. VACCINATION

				Negative	Not	%	Vaccinated
MALE—				Reactors	Vaccinated		
Public Schools	...	...		5,891	6	0.1	5,885
Private Schools	...	...		140	—	—	140
Total ...				6,031	6	0.1	6,025
FEMALE—							
Public Schools	...	...		5,868	4	0.1	5,864
Private Schools	...	...		180	1	0.6	179
Total ...				6,048	5	0.1	6,043
Both Sexes ...				12,079	11	0.1	12,068

Routine Vaccination Scheme.—The five health divisions continue to run regular clinic sessions aimed at contact vaccination, although numbers attending are falling each year.

The addition of 26,216 vaccinations in 1970 now brings the total of B.C.G. vaccinations to 426,739 over a period of 21 years.

B.C.G. VACCINATIONS—GLASGOW, 1950/70

Group	Centre	1950/65	1966	1967	1968	1969	1970	Total
Indoor	Moffat Street	895	—	—	—	—	—	895
Contacts	Carnbooth	570	—	3	1	—	—	574
	Millbrae	716	2	11	—	1	1	731
N.B. Infants	Millbrae	1,038	—	1	1	—	6	1,046
Total		3,219	2	15	2	1	7	3,246
Outdoor	Health Department	20,122	598	537	682	665	404	23,008
Contacts	R.H.S.C.	1,009	—	—	—	—	—	1,009
Total		21,131	598	537	682	665	404	24,017
Nurses	Hospitals	2,438	121	83	125	202	167	3,136
	Langside College Trainees	238	30	29	16	20	18	351
	Logan and Johnston Trainees	280	47	2	—	—	—	329
	H.V. Trainees	18	—	—	—	—	—	18
Total		2,974	198	114	141	222	185	3,834
Students	University	842	10	37	27	34	37	987
	Others	93	—	—	—	—	—	93
Total		935	10	37	27	34	37	1,080
Total Primary Groups		28,259	808	703	852	922	633	32,177

B.G.G. VACCINATIONS—GLASGOW, 1950/70—*Continued.*

Group	Centre	1950/65	1966	1967	1968	1969	1970	Total
N.B. Infants	Maternity Hospital ...	32,329	1,721	2,506	2,831	2,771	2,874	45,032
	Robroyston Hospital ...	18,470	1,819	1,833	1,731	1,443	1,628	26,924
	Stobhill Hospital ...	16,586	1,879	1,649	1,496	1,361	1,185	24,156
	Western District Hospital	11,765	—	—	—	—	—	11,765
	Southern General Hospital	5,905	275	613	1,017	961	1,064	9,835
	Eastern District Hospital	4,822	326	404	886	530	512	7,480
	Redlands Hospital ...	4,362	1,006	1,072	1,042	996	1,057	9,535
	Maternity Hospital— Ross Annexe ...	13,081	1,691	1,645	1,474	1,473	865	20,221
	Belvidere Hospital ...	2,602	929	883	952	942	875	7,183
	Queen Mother's Hospital	3,084	1,903	1,820	1,942	1,763	1,652	12,164
Total ...	113,006	11,549	12,425	13,371	12,240	11,712	174,303	
Scholars	Schools ...	133,592	10,879	11,232	11,623	11,588	12,068	190,982
Others	Various ...	19,084	2,189	2,116	1,885	2,200	1,803	29,277
Total ...	152,676	13,068	13,348	13,508	13,788	13,871	220,259	
Total Secondary Groups		265,682	24,617	25,773	26,879	26,028	25,583	394,562
Total All Groups		293,941	25,425	26,476	27,731	26,950	26,216	426,739

Cumulative Total — 426,739

X-RAY SECTION

The important event of 1970 was the purchase of a new X-ray apparatus of Watson manufacture combined with an Odelco 70 mm. camera. The tube, which was obtained for the old set in 1969, was suitable for the new. Installation was done in a few days including the Easter weekend and there was minimal interruption to the work of the department.

There has been a great improvement in the diagnostic quality of the miniature films. The old set required heavy physical work from the radiographer and the modern one is easy to handle. The opportunity was also taken to provide new protective screens which are particularly important for the staff.

A considerable increase in teachers' sick pay examinations was offset by a decrease in superannuation X-rays, the net effect being an increase of 233 miniature films compared with the previous year.

The following table shows the recall rates :—

	Males	Females	Total
Miniature ...	4,088	4,882	8,970
Recalled ...	152	146	298
Recall Rate ...	3.7%	3.0%	3.3%

The rates compare favourably with those for 1969—5·2 per cent. (male), 3·4 per cent. (female) and 4·2 per cent. (total). The improvement is no doubt due to the new apparatus and represents a saving in money and less inconvenience to the clients.

The 8,970 miniature films taken in 1970 are classified below :—

MINIATURE FILMS, 1970

	Males	Females	Total
1. Contacts, new	217	251	468
2. Contacts, return	3	7	10
3. Superannuation	1,875	909	2,784
4. Sick Pay	397	1,018	1,415
5. Police	264	112	376
6. Special Surveys	82	50	132
7. Nursery Staff, etc.	1	190	191
8. Entrants to Homes	—	1	1
9. Other Local Authorities	3	2	5
10. Miscellaneous	197	736	933
11. School Teachers	1,049	1,606	2,655
	<u>4,088</u>	<u>4,882</u>	<u>8,970</u>

The 614 full-size films consisted of 298 recalls and 316 primary full-size films. In 1969 there were 660 large films made up of 369 recalls and 291 primary. The majority of those taken on a large film at their first visit are old folk for entry to Corporation Homes.

The findings for 1970 are classified as follows :—

FULL-SIZE FILMS, 1970

Groups	Phthisis		Pleurisy	Root Lesions	Non-Pulm. Lesions	Neo-plasm.	N.A.D	Total
	Active	Inactive						
MALE—								
1. Contacts, new	2	1	1	2	—	—	7	13
2. Contacts, return	—	—	—	—	—	—	—	—
3. Superannuation	12	24	5	2	14	—	36	93
4. Sick Pay	10	10	4	2	4	1	11	42
5. Police	—	2	1	—	—	—	27	30
6. Special Surveys	—	—	—	—	—	—	2	2
7. Nursery Staff, etc.	—	2	1	—	—	—	—	3
8. Entrants to Homes	5	13	6	2	12	—	41	79
9. Other Local Authorities	—	—	—	—	—	—	—	—
10. Miscellaneous	2	4	3	—	—	—	16	25
11. School Teachers	1	7	3	—	—	—	20	31
	<u>32</u>	<u>63</u>	<u>24</u>	<u>8</u>	<u>30</u>	<u>1</u>	<u>160</u>	<u>318</u>
FEMALE—								
1. Contacts, new	7	1	—	4	1	—	12	25
2. Contacts, return	—	—	—	—	—	—	—	—
3. Superannuation	3	7	3	1	2	—	13	29
4. Sick Pay	5	8	5	—	6	—	27	51
5. Police	—	2	—	—	—	—	3	5
6. Special Surveys	—	—	1	—	—	—	—	1
7. Nursery Staff, etc.	1	4	1	2	—	—	1	9
8. Entrants to Homes	—	14	5	3	19	—	78	119
9. Other Local Authorities	—	—	—	—	—	—	—	—
10. Miscellaneous	2	8	—	1	5	—	24	40
11. School Teachers	2	6	—	—	1	—	8	17
	<u>20</u>	<u>50</u>	<u>15</u>	<u>11</u>	<u>34</u>	<u>—</u>	<u>166</u>	<u>296</u>

In 52 of those examined, a diagnosis of pulmonary tuberculosis with the possibility of activity was suggested compared with 47 in 1969.

A tentative diagnosis of lung cancer was made in only one male case compared with seven in the previous year. This is no indication of the prevalence of lung cancer in the community but indicates an absence of this disease from superannuation candidates and teachers.

The non-pulmonary lesions include bony abnormalities and heart abnormalities, there being 51 of the latter. As would be expected, 30 of the "heart cases" were applicants for admission to homes for the elderly.

VENEREAL DISEASE

The numbers of new patients attending the special clinics in Glasgow continued to increase in 1970 when 7,042 patients were seen. This compares with 6,504 in 1969 and is over 1,000 more than were seen in 1968. The numbers of patients admitted on transfer continue to decrease. In all, 8,929 patients were dealt with during the year. As far as disposal of the patients is concerned, 3,628 were dismissed as cured, 2,919 defaulted during observation and 474 were transferred out. One thousand, nine hundred and thirteen patients remained on the register at the end of the year, an increase from 1969 when 1,773 were carried over. The figures for the admission and disposal of the patients from 1965-1970 are set out in Table 1 which shows the various trends over the years. Table 2 sets out the number of new patients by sex and diagnosis, again over the past 6 years. In 1970 there was an increase in the number of both male and female patients, 240 and 256 respectively. It is to be noted that this year the increase of female patients was greater than that for males. In 1970 there was an increase in the number of male and female patients with gonorrhoea and an increase in the number of females with syphilis but a decrease in the number of males. The numbers of male and female patients with other sexually transmitted conditions continued to rise but there was a slight drop in the number of those who attended but did not require treatment.

NON-SPECIFIC URETHRITIS

Once again there was an increase in the number of male patients attending with non specific urethritis, 1,332 in 1970 compared with 1,283 in 1969.

This condition continues to be the more common cause of urethritis in male patients seen in Glasgow. Nothing point nothing nine per cent. developed arthritic complications in 1970 as compared with 0.08 per cent. in 1969.

TRICHOMONAS VAGINALIS

In 1970, only 16 male patients were diagnosed as suffering from *T. vaginalis* and it is apparent that our present methods of diagnosis are failing to find all male patients suffering from this condition. The number of female patients dropped from 485 in 1969 to 479 in 1970. This drop is not significant but it confirms the large number of female patients who attend for examination at the clinics.

OTHER VENEREAL CONDITIONS

There was a further increase in the number of male patients suffering from other venereal conditions in 1970, 1,591 attended compared with 1,445 in 1969. Once again one male patient was found to be suffering from lymphogranuloma venereum. The rise in the number of female patients with other venereal conditions was again proportionately higher than for males, 387 were seen in 1970 compared with 213 in 1969, a further indication of the increased work being carried out in the female clinics.

One hundred and twenty-nine men and 9 women were treated for phtherius pubis infestation and 106 men and 6 women were treated for scabies. The rise continues in the number of patients with sexually transmitted diseases, female candidosis is, in part, due to an increase in the general use of the contraceptive pill but in both sexes is an indication of the promiscuity of our clinic population.

NON VENEREAL CONDITIONS

During 1970 there was a drop in the number of patients who attended the clinic and were found to be free from any sexually transmitted disease—1,081 males compared to 1,131 in 1969 and 381 women compared with 384 in 1969. This drop is of little significance. This still indicates that a large number of people are coming for check-ups and, once more widely displayed publicity is available, these numbers can be expected to rise.

The decrease in the number of babies referred for serological tests for syphilis to be carried out prior to adoption continued in 1970 when 139 male and 103 female babies were tested.

During 1970, 1,024 cervical smears were taken from 804 patients. This is an increase in cervical exfoliative cytology from 978 smears from 707 women in 1969. The results of the smears on 4 patients were

such that they were referred to a gynaecologist ; 2 refused to attend but both those who did attend were found to have carcinoma in situ. Once again it is to be regretted that these women did not attend the gynaecologist and possibly because of the confidential nature of our treatment they were not followed up as vigorously as they might have been.

SYPHILIS

The types of syphilis diagnosed in new patients in 1965 to 1970 are set out in Table 3. There was a decrease in the number of male and an increase in the number of female patients with contagious syphilis as compared with 1969. Of the 25 male patients, one was a homosexual who acquired his infection locally ; 5 were merchant seamen, 1 acquired his infection locally, 1 elsewhere in the U.K. and 3 abroad. Of the other 19 men, 16 acquired their infections locally, 1 elsewhere in the U.K. and 2 abroad ; 3 attended as contacts of patients already attending the clinic.

This is the first time in several years that merchant seamen have exceeded the holidaymakers in importing contagious syphilis into Glasgow. Of the 14 women with contagious syphilis, 13 acquired their infections locally and 1 elsewhere in the U.K. Nine attended as contacts of men already under treatment.

Thirty men and 16 women attended with late syphilis. This is an increase in numbers over 1969 (19 men and 13 women) but the figures are so low that this is possibly of no great consequence.

It is to be regretted that 1 baby was born with congenital syphilis in Glasgow during 1970. The baby was premature, its mother was unmarried and had had no ante-natal care. The diagnosis was made following routine blood tests on the mother at the maternity hospital.

ANTE NATAL BLOOD TESTS

There was a decrease in the number of ante natal serological tests for syphilis carried out in Glasgow during 1970, 23,517 compared with 23,814 in 1969 but as has become the practice in all the laboratories doing this work, all sera giving positive or doubtful results to the non-specific tests were subjected to one or more of the specific tests. The City Laboratory tested 3,339 sera from ante-natal clinics, 12 (0.36 per cent.) giving positive results to the non specific tests of which 3 were confirmed by the specific tests. This Laboratory also tested 2,495 sera from the patients attending their general practitioners ; 10 (0.4 per cent.) giving positive non specific results, 2 of which were confirmed by the specific tests. The other Laboratories in Glasgow carried out a further 17,653 tests on sera from ante natal patients ; 101 (0.54 per cent.)

giving positive non specific results, 15 being confirmed by the specific tests. All 20 (16.3 per cent.) of the 123 positive or doubtful non specific results were confirmed, giving an overall incidence of syphilis among these ante natal patients of 0.085 per cent. This is a rise from 0.042 per cent. in 1969 and 0.051 per cent. in 1968.

GONORRHOEA

Seven cases of gonococcal ophthalmia neonatorum were referred to the Department of Venereology in 1970. This figure is the same as in 1969. As mentioned before, there remains a deficiency in the ante natal management of some mothers. Four children were referred with gonococcal vulvo-vaginitis. The number of cases by age groups and sex of sexually transmitted gonorrhoea attending from 1965-1970 is set out in Table 4. In 1970 there was an increase in the number of male cases 1,233 compared with 1,037 in 1969. The number of female patients continued to rise, 496 in 1970 compared with 411 in 1969. As some patients attend with more than one infection during the year the actual number of patients concerned was as follows: 1,076 male patients, 460 females so that there has been an increase in patients of both sexes with gonorrhoea as compared with 1969.

THE SENSITIVITY OF GONORRHOEA TO THE ANTIBIOTICS

Full sensitivity reports were received from the City Laboratory on 1,397 strains of *N.gonorrhoeae* during 1970. Each report included the sensitivity or resistance to streptomycin, sulphonamides, kanamycin and tetracycline as well as to various other antibiotics being tested in the Department. All the strains' sensitivity to penicillin G was estimated. This drug by injection remains the treatment of choice in gonorrhoea unless the patient has had a previous reaction to it. Fifty-six point five per cent. of strains were sensitive to 0.03 microgms/ml penicillin G compared with 50.5 per cent. in 1969 and 14.0 per cent. required a concentration of 0.3 microgms/ml or more compared with 10.1 per cent. in 1969. It would appear that more strains are becoming either more sensitive or resistant but there are fewer in the middle range of sensitivity. There has not been any marked increase in the severely resistant strains imported from elsewhere in the world. The *in vitro* resistance of the other antibacterial agents is set out in Table 5 by quarters. Seventy-seven point five per cent. were sensitive to all agents; 21.8 per cent. were resistant to streptomycin and 1.5 per cent. to the sulphonamides. This shows a drop in resistance to both these antibacterial agents. There was no strain resistant to tetracycline and only one to kanamycin. These results are of the greatest importance when we are treating patients who cannot take penicillin.

ATTENDANCE OF SEAMEN AT SPECIAL CLINICS

There was a further rise in the number of seamen attending the Glasgow clinics in 1970 when 539 attended compared with 474 in 1969. Again, a large number attended for reassurance only, but we have noted an increase in the number of patients with gonorrhoea, 100 seamen compared with only 54 in 1969. Table 6 sets out the incidence of syphilis and gonorrhoea in seamen. Five attended with contagious syphilis, 1 acquired his infection locally, 1 elsewhere in the U.K. and 3 abroad. The cause of the increase in the number of seamen coming for treatment for gonorrhoea is not known but it is very welcome.

CONTACT TRACING

Of the 1,258 men with contagious venereal disease, 34 attended as contacts of patients already attending. Interrogation concerning female contacts showed that 324 were out of the area, but there was only sufficient information in 49 cases to pass on to other clinics. Of 1,096 local contacts, 473 (43.2 per cent.) were located which reflects the efficiency of the contact tracing system, and once again the deficiency of interrogation. The outcome of the local contact tracing is set out in Table 7 and shows that of those located all but 37 attended for examination. The amount of promiscuity of female contacts found to be suffering from gonorrhoea is set out in Table 8. Of the 510 women with sexually acquired disease, 341 attended only as a result of contact tracing.

The change in the type of contacts noted last year, with a decrease in the number of highly promiscuous women and an increase in the number of mildly promiscuous ones continued in 1970 and it did not help in our ability to trace these casual women early enough.

CASE HOLDING

Case holding efforts have been increased during 1970. Three hundred and twenty-nine default visits had to be carried out because of the increased number of patients. This is compared with 251 visits in 1969. Despite the difficulties of case holding, the average number of attendances by male and female patients with gonorrhoea was 6.0 and 5.3 respectively which is but little change from 1969. The efforts made to persuade defaulters to reattend in 1970 are set out in Table 10. There was an increase in the number of default episodes of men with gonorrhoea, 686 compared with 507 in 1969 and in women 814 compared with 467 in 1969. The number of false names and addresses as far as males were concerned dropped to 69 (7.0 per cent.) and women 127 (17.5 per cent.) ; in both cases, a drop from the previous year.

TABLE I

ADMISSION AND DISPOSAL OF PATIENTS 1965-1970

	1965	1966	1967	1968	1969	1970
On Register at 1st January ...	933	1,545	1,700	1,586	1,802	1,773
New Patients	5,098	5,492	5,875	6,009	6,504	7,042
Other cases admitted	147	102	115	180	155	114
Totals	6,169	7,139	7,690	7,775	8,461	8,929
Discharged	2,325	2,727	2,740	3,114	3,534	3,628
Defaulted	1,737	2,256	2,789	2,333	2,628	2,914
Transferred	562	456	575	526	526	474
On Register at 31st December	1,545	1,700	1,586	1,802	1,773	1,913

TABLE II

NEW PATIENTS BY DIAGNOSIS, 1965-1970

Sex	Year	Non		Trichomonas Infections	Other Venereal Infections		Non Venereal Conditions	Total
		Syphilis	Gonorrhoea Specific Urethritis		Venereal	Venereal		
Male	1965	50	1,045	751	29	706	1,215	3,796
	1966	49	1,062	807	23	926	1,163	4,030
	1967	71	1,091	1,024	28	1,099	1,077	4,390
	1968	65	1,058	1,118	22	1,217	1,100	4,580
	1969	60	1,041	1,283	23	1,445	1,131	4,983
	1970	56	1,237	1,332	16	1,541	1,081	5,263
	Female	1965	32	282	—	341	66	572
1966		25	336	—	410	121	570	1,462
1967		33	422	—	483	144	403	1,485
1968		20	391	—	411	159	448	1,429
1969		25	414	—	485	213	384	1,521
1970		33	499	—	479	387	381	1,779

TABLE III

TYPES OF SYPHILIS IN NEW PATIENTS, 1965-1970

Year	Contagious		Late acquired		Congenital			
	M	F	M	F	Under 1 yr.	1-4 yrs.	5-14 yrs.	15 yrs. & over
1965	6	5	39	15	—	1	—	11
1966	15	10	32	7	—	—	—	10
1967	46	16	24	11	1	—	—	6
1968	36	9	27	10	—	—	—	3
1969	40	10	19	13	—	—	—	3
1970	25	14	30	16	1	—	—	3

TABLE IV

SEXUALLY ACQUIRED GONORRHOEA BY AGE GROUPS, 1965-1970

Sex	Year	Under						Total
		15	15-19	20-24	25-34	35-44	45 & over	
Male	1965	—	59	258	455	168	102	1,042
	1966	—	73	286	457	160	78	1,054
	1967	1	93	269	447	161	115	1,086
	1968	—	131	301	392	140	87	1,051
	1969	—	97	318	414	137	71	1,037
	1970	1	131	359	514	151	77	1,233
Female	1965	1	61	100	69	38	7	276
	1966	3	74	99	121	22	11	330
	1967	8	70	124	162	40	12	416
	1968	4	87	135	113	33	14	386
	1969	4	94	133	129	48	3	411
	1970	4	129	165	150	34	10	496

TABLE V

Antibacterial Agent	1st Quarter		2nd Quarter		3rd Quarter		4th Quarter		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%
Streptomycin	47	23.0	58	16.2	99	23.3	100	24.4	304	21.8
Sulphonamide	8	3.9	5	1.4	4	0.9	4	1.0	21	1.5
Kanamycin	0	—	1	0.3	1	0.25	1	0.2	3	0.2
Tetracycline	0	—	0	—	0	—	0	—	0	—
No. of strains examined	204	100	359	100	424	100	410	100	1397	100
No. of strains sensitive to all agents	153	75.0	299	83.2	321	75.7	309	75.4	1082	77.5

TABLE VI

THE INCIDENCE OF CONTAGIOUS SYPHILIS AND GONORRHOEA IN SEAMEN COMPARED WITH TOTAL MALES OVER THE PAST SIX YEARS

Year	Contagious Syphilis			Gonorrhoea		
	Total	Seamen	%	Total	Seamen	%
1965	6	1	17	1,042	96	9.2
1966	15	7	47	1,054	83	7.7
1967	46	10	22	1,086	75	6.9
1968	36	7	19	1,051	65	6.2
1969	40	8	20	1,037	54	5.2
1970	25	5	20	1,233	100	8.1

TABLE VII
THE OUTCOME OF CONTACT TRACING EFFORTS

Notification	Status	Total	Not Traced		Notified		Located Locally	Refused	Diagnosis	
			Else-where	Local	Else-where	Locally			Confirmed	Not Confirmed
From Local Clinics	Marital	175	7	0	7	161	7	118	36	
	Others	1,220	608	273	37	302	27	215	0	
From Elsewhere	Marital	2	0	0	0	2	0	2	0	
	Others	24	8	2	5	9	3	6	0	
Total		1,421	623	275	49	474	37	341	36	

TABLE VIII
THE PROMISCUITY OF FEMALE CONTACTS ATTENDING WITH GONORRHOEA

Named by 1 man	...	291
Named by 2 men	...	30
Named by 3 men	...	8
Named by 4 men	...	2
Named by 7 men	...	1
		332

TABLE IX
THE DIAGNOSIS OF CONTACTS ATTENDING THE CLINICS

Sex	Syphilis	Gonorrhoea	Other Venereal Conditions	Non Venereal Conditions	Total
Male ...	3	31	5	16	55
Female ...	9	332	52	51	444
Total ...	12	363	57	67	499

TABLE X
ATTEMPTS TO GET DEFAULTERS TO RE-ATTEND IN 1970

Sex	Diagnosis	Nos. at Risk	Default Episodes	Re-attending Efforts		Needed	
				No.	%	Visits	Letters
Male	Gonorrhoea ...	1,533	686	271	40	2	707
	Contagious Syphilis	102	76	63	83	6	102
	Late Syphilis ...	137	77	56	73	6	90
	Congenital Syphilis	10	3	3	100	—	4
Total ...		1,782	832	393	47.2	14	903
Female	Gonorrhoea ...	676	814	242	30	265	669
	Contagious Syphilis	45	37	19	51	32	23
	Late Syphilis ...	83	29	19	66	15	22
	Congenital Syphilis	34	11	7	64	3	12
Total ...		838	891	287	32.2	315	726

SECTION VII

MENTAL SERVICES

The Social Work Department are responsible for the community care of the mentally disordered since November 1969, but Health Department personnel are still involved and co-operating in some aspects of the work.

A report on the Child Development Clinics is included in the Child Welfare section of the report.

The three day-centres for mentally handicapped children continue to do good work in making their charges socially acceptable, in providing play and playmates in happy surroundings and in improving their chances of some form of education or occupation.

Balvicar Nursery Centre—There was a full complement of 25 children at the end of the year—16 boys and 9 girls. There were 17 leavers during 1970 and a corresponding number of new admissions. This was partly due to the opening up of the Drumoyne Centre to which 6 children were transferred. Children reaching the age of five were formerly sent home if they did not meet educational standards. This is now happily avoided by transfer to Drumoyne. Of the remaining 11 children, 2 went to ordinary day nurseries, 1 to ordinary school, 5 to Junior Occupation Centres, 2 to Special Schools and 1 left Glasgow.

Drumoyne Nursery and Junior Centre—At the end of 1969, 7 children were attending this Centre and during the year this was increased to 39.

	Male	Female	Both Sexes
Under 5 years	6	3	9
Over 5 years	16	14	30
	<hr/>	<hr/>	<hr/>
	22	17	39
	<hr/>	<hr/>	<hr/>

Only 3 children left during the year and they were taken into full-time institutional care.

The build-up of numbers at Drumoyne has relieved pressure on the Laurieston House Centre run by the Scottish Society for Mentally Handicapped Children.

Broomhill Nursery and Junior Centre—Numbers on the register compared with the previous year were as follows :—

	1970			1969		
	Male	Female	Both Sexes	Male	Female	Both Sexes
Under 5 years	18	6	24	18	7	25
Over 5 years	9	6	15	10	7	17
	<u>27</u>	<u>12</u>	<u>39</u>	<u>28</u>	<u>14</u>	<u>42</u>

The reduction of numbers to 39 was a temporary matter quickly made good from the waiting list which usually amounts to some two dozen names and does not include all children who could benefit from the service. Many of these children come from the east end of the City which is still poorly catered for.

Of 19 dismissals, 6 went into residential care, including one to Stanmore House. Two went to ordinary school and two more to nursery school. Five were admitted to special schools. Three moved out of Glasgow and one to south of the river was transferred to Drumoyne.

DEFECTIVES UNDER GUARDIANSHIP AND INFORMAL CARE

Dr. Stewart and Dr. Lindsay who have for many years been involved in the care of these adult patients continue their work "in association" with the Social Work Department.

The following enumeration of cases was made early in 1971 :—

	Within the City	Outwith the City
Mentally defective under guardianship	211	153
Mentally ill under guardianship	—	7
Mentally defective under informal supervision	657	70
	<u>868</u>	<u>230</u>

It is the aim of the two medical officers to visit the guardianship cases three times a year and the informal cases twice. Any extra problem which arises with a patient will involve additional visits.

CARE OF THE MENTALLY ILL

Medical Officers of the Department examined 16 mentally ill persons during the year. Of these 11 were certified and compulsorily admitted to hospital. The remaining five were either informally admitted or other action followed.

AFTER CARE BY HEALTH VISITORS

One Health Visitor withdrew from this work during the year reducing the number from twelve to eleven. There was a small reduction in the number of patients receiving care from 382 at the end of 1969 to 351 at the end of 1970.

	Male	Female	Both Sexes
Discharged from Hospital ...	54	258	312
Referred from Out-Patient Clinics	2	37	39
	<u>56</u>	<u>295</u>	<u>351</u>

There is the usual preponderance of female patients over males. The average case load of 32 patients per health visitor is the same as in the previous year.

There were 293 new referrals (62 men and 231 women). This is a considerable reduction from 385 referrals in 1969.

Here follows a diagnostic classification of the cases in care at the end of the year.

	Male	Female	Both Sexes
Schizophrenia ...	18	89	107
Affective Psychosis ...	12	80	92
Psychoneurosis ...	6	72	78
Organic States ...	5	12	17
Geriatric	7	23	30
Addiction	6	11	17
Others	2	8	10
	<u>56</u>	<u>295</u>	<u>351</u>

There is a considerable drop in the number of neurotic cases compared with the previous year. It is observed that the geriatric cases have increased from 14 to 30. This is perhaps a hopeful sign in that the mental hospitals have always had great difficulty in returning their older patients to their homes.

SECTION VIII

BLIND PERSONS

In 1970, in the area of the Joint Committee for the Blind for Glasgow and South-West Scotland, 1,311 persons were examined with a view to the certification of blindness. Of these, 766 (58.4 per cent.) were examined for the first time and 649 (49.5 per cent.) were examined at home.

Of the 766 examined for the first time, 451 (58.9 per cent.) were certified blind and 213 (27.8 per cent.) were certified partially sighted, 102 (13.3 per cent.) falling into neither category. Of the 545 persons re-examined, 190 (34.9 per cent.) were certified blind, 283 (51.9 per cent.) were certified partially sighted and 72 (13.2 per cent.) fell into neither category.

The age and sex distributions of persons certified blind, either initially or on re-examination, and of persons certified partially sighted initially are shown in Table I.

TABLE I

Age and Sex Distributions of Persons Certified Blind in 1970, either on initial examination or on re-examination, and Certified Partially Sighted on initial examination

Age in Years	Initial Examinations						Re-Examinations		
	Certified Blind			Certified Partially Sighted			Certified Blind		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
0-1 ...	2	1	3	2	—	2	—	—	—
2-4 ...	6	2	8	1	1	2	2	1	3
5-15 ...	2	1	3	3	2	5	7	3	10
16-29 ...	4	3	7	6	5	11	—	4	4
30-39 ...	7	7	14	4	1	5	6	1	7
40-49 ...	7	5	12	3	2	5	2	3	5
50-59 ...	16	14	30	11	4	15	16	7	23
60-69 ...	36	56	92	15	24	39	7	23	30
70 and over ...	76	206	282	41	88	129	34	74	108
	<u>156</u>	<u>295</u>	<u>451</u>	<u>86</u>	<u>127</u>	<u>213</u>	<u>74</u>	<u>116</u>	<u>190</u>

Of the 1,311 persons examined, 523 (39.9 per cent.) resided in Glasgow and 295 (22.5 per cent.) in Lanarkshire. Of the 766 examined for the first time 274 (35.8 per cent.) resided in Glasgow and 187 (24.4

per cent.) in Lanarkshire, and of the 545 persons re-examined, 249 (45.7 per cent.) resided in Glasgow and 108 (19.8 per cent.) in Lanarkshire.

The local authority area distribution of persons examined for the first time is given in Table II.

TABLE II

Initial Examinations, 1970
Local Authority Distribution

Local Authority	<i>Certified Blind</i>			<i>Certified Partially Sighted</i>			<i>Not Certified</i>		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
Glasgow	43	113	156	34	47	81	11	26	37
Airdrie	3	2	5	2	3	5	2	1	3
Coatbridge	3	6	9	4	2	6	3	1	4
East Kilbride ...	1	4	5	2	1	3	1	1	2
Hamilton	2	5	7	2	10	12	—	—	—
Motherwell and Wishaw	5	5	10	—	4	4	1	1	2
Rutherglen	1	5	6	1	1	2	—	—	—
Other Lanarkshire ...	29	27	56	9	16	25	8	13	21
Greenock	14	11	25	4	4	8	—	—	—
Paisley	4	10	14	4	6	10	—	5	5
Port Glasgow ...	—	3	3	1	—	1	—	2	2
Other Renfrewshire	9	16	25	3	4	7	1	4	5
Dumbarton	—	4	4	3	1	4	—	—	—
Clydebank	2	4	6	—	—	—	—	1	1
Other Dunbartonshire	5	8	13	2	5	7	—	—	—
Falkirk	3	3	6	1	—	1	—	2	2
Stirling	1	2	3	3	1	4	—	—	—
Other Stirlingshire	5	6	11	1	5	6	2	3	5
Ayr	3	6	9	—	2	2	—	1	1
Kilmarnock	1	1	2	1	2	3	—	—	—
Other Ayrshire ...	14	29	43	6	8	14	6	6	12
Argyll County ...	2	12	14	1	3	4	—	—	—
Bute County	5	6	11	—	—	—	—	—	—
Dumfries Burgh ...	1	7	8	2	2	4	—	—	—
	<u>156</u>	<u>295</u>	<u>451</u>	<u>86</u>	<u>127</u>	<u>213</u>	<u>35</u>	<u>67</u>	<u>102</u>

At the request of the examining surgeon, at their own request or owing to altered circumstances, 545 persons were re-examined during the year. There was no change in the classification of 412 persons, 87 of whom were blind. Of the 133 persons whose classification was changed, 103 were now found to be blind.

The causes of blindness in the persons examined are shown in Table III. Cataract (24.0 per cent), vascular diseases (20.7 per cent.),

glaucoma (13.6 per cent.), myopia (11.4 per cent.), diabetes (9.2 per cent.) and congenital anomalies and abiotrophies (6.6 per cent.) accounted for 85.5 per cent. of all causes.

TABLE III

*Initial Examinations and Re-examinations, 1970**Causes of Blindness*

	Initial Examina- tions	Re- Examina- tions
<i>Congenital and Undetermined—</i>		
Congenital anomalies	18	10
Abiotrophies, etc.	10	4
Myopia	45	28
Glaucoma, primary	67	20
Cataract, primary	104	50
Others	2	2
<i>Infectious and Toxic—</i>		
Exogenous : Ophthalmia neonatorum ...	—	1
Trachoma	1	—
Others	7	2
Endogenous : Syphilis, Congenital	1	1
Syphilis, Acquired	1	—
Others	14	11
<i>Traumatic and Chemical</i>	4	7
<i>Systemic Diseases—</i>		
Diabetes	42	17
Vascular diseases	106	27
Intracranial neoplasm	5	1
Others	6	3
<i>Not Classified</i>	18	6
	<hr/> 451	<hr/> 190

FOLLOW-UP SCHEME

This scheme deals with those patients examined at the Regional Clinic and considered by the examining surgeons to be likely to benefit from further treatment. With the co-operation of the Society for the Blind, home teachers enquire and report on the treatment and progress of those patients. When operative or other treatment has been completed the patient is re-examined and any improvement noted, except for those few cases where treatment was recommended for systemic disease and the eye condition was not amenable to treatment.

TABLE IV

Follow-up Scheme of Persons considered likely to benefit from Medical or Surgical Treatment or from the Continuation of such Treatment

	<i>Blind</i>				Treatment not Carried Out				Follow-up not yet Completed	Total
	Treatment Carried Out				Dead	Unfit	Unwilling	Others		
	Now Still Blind	Partially Sighted	Now Sighted	Not Yet Re-examined						
Surgical	1	2	1	15	4	12	16	—	22	73
Medical	—	—	—	—	—	—	—	—	—	—
	<u>1</u>	<u>2</u>	<u>1</u>	<u>15</u>	<u>4</u>	<u>12</u>	<u>16</u>	<u>—</u>	<u>22</u>	<u>73</u>

The group "unwilling" is comprised mainly of elderly persons who, owing to their advanced age, do not wish to undergo an operation. In the group "others" are included patients who for medical reasons are not yet ready for operation.

SECTION IX

HOUSING

The total number of municipal houses completed during 1970 was 2,845. The following table shows the rate of completion since 1966 by the Corporation and the Scottish Special Housing Association :—

Year	Direct Labour	Contractors	Scottish Special Housing Assoc.	Total Municipal Houses from all Sources
1966	1,811	1,827	1,372	5,010
1967	1,743	2,680	1,156	5,579
1968	1,802	2,257	440	4,499
1969	1,458	2,492	627	4,577
1970	1,282	1,305	258	2,845

REHOUSING OF TUBERCULOUS FAMILIES

TABLE I

Year	Number of Families	
	Recommended	Rehoused
1934/45	3,764	1,484
1946/55	5,459	4,372
1956/65	2,336	2,300
1966	53	34
1967	30	42
1968	36	25
1969	27	14
1970	26	17
	<u>11,731</u>	<u>8,288</u>

TABLE II

Recommendations, 1934 to December, 1970	...	11,731
Number of families Rehoused :—		
Rehousing	...	2,310
Intermediate	...	1,973
Ordinary	}	3,502
Super Ordinary		
Housing Manager's Houses and Others	...	180
Temporary Houses	...	323
Recommendations remaining but not yet Rehoused—		
Refused Offers	...	191
Did not reply	...	184
Gone away—Address unknown	...	508
Cancelled	...	923
Patient Deceased	...	1,592
Still to be dealt with	...	<u>11,686</u>
		45

TABLE III

SUMMARY OF TUBERCULOUS FAMILIES REHOUSED SINCE 1934

Recom- mended	1934/60	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	Total
1934/59	... 7,600	28	8	2	1	—	—	—	—	—	—	7,639
1960	... 78	66	3	4	—	—	1	—	—	—	—	152
1961	... —	86	51	13	4	—	—	—	1	—	—	155
1962	... —	—	57	30	3	—	—	—	—	—	—	90
1963	... —	—	—	29	20	2	—	—	—	—	—	51
1964	... —	—	—	—	41	11	—	—	1	—	—	53
1965	... —	—	—	—	—	19	17	1	—	—	—	37
1966	... —	—	—	—	—	—	16	24	1	1	—	42
1967	... —	—	—	—	—	—	—	17	7	—	—	24
1968	... —	—	—	—	—	—	—	—	15	9	2	26
1969	... —	—	—	—	—	—	—	—	—	4	10	14
1970	... —	—	—	—	—	—	—	—	—	—	5	5
	<u>7,678</u>	<u>180</u>	<u>119</u>	<u>78</u>	<u>69</u>	<u>32</u>	<u>34</u>	<u>42</u>	<u>25</u>	<u>14</u>	<u>17</u>	<u>8,288</u>

SECONDARY PRIORITY SCHEME

During 1970, 350 recommendations were made under the scheme.

This figure in no way represents the amount of work involved in investigating and assessing the thousands of applications received by the Department.

DETERIORATION OF PROPERTY

During the year, 6,358 dwellings were represented under the 1969 Act by the Medical Officer of Health to the Housing Committee as failing to meet the tolerable standard and requiring demolition. The wastage of houses over the last ten years is shown in the following table :—

Year	Closing Order	To be rendered Fit for			Treatment Area for Demolition	Total
		Demoli- tion Order	Human Habi- tation	Slum Clear- ance		
1961/65	4,838	4,826	—	—	—	9,664
1966	1,194	1,293	—	—	—	2,487
1967	1,279	1,772	—	—	—	3,051
1968	2,840	3,054	—	—	—	5,894
1969	2,918	3,229	—	—	57	6,204
1970	1,952	3,360	—	—	1,046	6,358
	<u>15,021</u>	<u>17,534</u>	<u>—</u>	<u>—</u>	<u>1,103</u>	<u>33,658</u>

The number of houses condemned by the Master of Works as dangerous in 1970 was 2,972.

SECTION X

THE CITY LABORATORY

To the epidemiologically orientated bacteriologist the course of events at the Laboratory seemed relatively tranquil in 1970. Few incidents of communicable diseases, and certainly no major outbreaks, occurred. There was some respite even from that perennial Glasgow nuisance, bacillary dysentery, the number of patients from whom shigellae were isolated (466) being the lowest since 1948. But whatever satisfaction can be derived from this is immediately dispelled by a glance at the statistics for venereal diseases; the number of cases of gonorrhoea (1,397, an increase of 19.6 per cent. as compared with the previous year) was the highest ever recorded at this Laboratory, a sombre reminder of the worsening worldwide trend in the incidence of this disease.

However the prevalence of diseases such as salmonellosis and shigellosis, which usually necessitate large numbers of bacteriological examinations, *was* reduced and this might have been expected to have diminished the workload very considerably. But, in fact, the total number of investigations conducted, 180,580, was only 8.6 per cent. less than in 1969, the reason being that the volume of clinical pathology undertaken has continued to rise.

COMMUNICABLE DISEASES—EPIDEMIOLOGICAL INVESTIGATIONS

Bacterial Infections of the Upper Respiratory Tract.—The number of throat swabs received, 290, was small in comparison with recent years (561 in 1969 and 1,046 in 1968). *Strep. pyogenes* was isolated from 94 of them, an isolation rate of 24.1 per cent. (cf. 24.8 per cent. in 1969); but the tetracycline-resistance rate of the strains isolated, which had remained around 20 per cent. during the previous two years, rose again to 25.5 per cent. It is to be hoped that this does not mean that the habit of "blindly" prescribing broad-spectrum antibiotics is again on the increase, but it must be added that the decline in the number of throat swabs submitted does lend some credence to such a suspicion.

All but 27 of the throat swabs received were also examined specifically for *C. diphtheriae* but, as in the previous six years, in every

case with negative results. Microscopic examination of smears of 381 throat or mouth swabs for evidence of Vincent's infection confirmed the diagnosis in 25 cases.

Staphylococcal Infections.—The number of strains of *Staph.aureus* isolated from swabs of various lesions also dwindled to 145 (cf. 274 in 1969) and 106 (73·1 per cent.) of these were penicillin-resistant (cf. 76·3 per cent. in 1969).

Glandular Fever.—The slide test for glandular fever was performed on 97 sera, in most cases with negative results, but the minority which gave positive or doubtful results, or those from "slide-test negative" patients with suggestive haematological findings, were then submitted to the full Paul Bunnell test and 15 of them gave a conclusively positive result (cf. 21 out of 114 in 1969).

Brucellosis.—The number of sera submitted for the diagnosis—or, more usually, the exclusion of the diagnosis—of brucellosis was only 14 (cf. 17 in 1969). The results in one case, a young girl with an unexplained pyrexia (who had previously lived in a country district) were sufficiently suggestive to warrant referral to hospital but, when the tests were repeated a few days later at the hospital laboratory, the suspicion was not confirmed and, by that time, she was symptom-free and remained so thereafter. The remaining 13 sera gave completely negative results.

Enteric Fever.—The number of stool specimens received for examination, specifically, for organisms of the enteric group was 302 (cf. 653 in 1969). *S.typhi* was isolated once, from a known carrier, and *S.paratyphi B* from 15 specimens but, as 13 of these were repeat specimens, from only two individuals, one new case and one previously known carrier.

Widal tests were performed on 27 sera, three or more of them from one patient, the new case (referred to in the previous paragraph) from whom *S.paratyphi B* was isolated, and on every occasion on which she was tested her serum was found to contain the corresponding agglutinins in high titre. None of the other sera tested showed significant titres. The drop, from 255 in 1969, in the number of Widal Tests performed was due to the fact that, unusually, in 1970 no sera for these tests (or any other specimens) were received from Water Department employees. It is understood that, by agreement between the Lower Clyde Water Board and the Corporation of Glasgow Health Department, arrangements have since been made for the resumption of this important "monitoring" activity.

Food Poisoning due to other salmonellae.—The number of faecal specimens examined for salmonellae was little more than half what it was in 1969. Salmonellae were isolated from 134 of the 6,665 specimens received (cf. 178 from 12,742 in 1969) but 70 of these were reisolations, so that the number of individuals diagnosed—as cases or symptomless excretors—was 64 (cf. 95 in 1969). The serotypes with which they were infected are listed in the table, which also gives the corresponding figures for the previous eleven years. The only ones not previously encountered at this laboratory were *S.ohio* and *S.durham*, serotypes of no known particular significance.

	1970	1969	1968	1967	1966	1965	1964	1963	1962	1961	1960	1959
<i>S.typhimurium</i>	35	53	403	17	24	44	68	35	52	70	93	73
<i>S.typhimurium</i> <i>var.copenhagen</i>	—	3	5	1	—	—	—	—	—	—	—	—
<i>S.enteritidis</i>	10	—	1	3	6	—	1	4	—	—	—	8
<i>S.enteritidis var.</i> <i>jena</i>	—	—	—	—	—	6	—	—	—	15	—	—
<i>S.newport</i>	1	—	7	—	—	—	—	—	—	—	1	—
<i>S.thompson</i>	1	—	—	—	—	—	—	—	—	—	—	1
<i>S.saint-paul</i>	—	—	—	—	—	—	1	—	—	—	—	—
<i>S.montevideo</i>	2	4	4	—	—	—	—	—	—	—	1	—
<i>S.bovis</i> <i>morbificans</i>	—	1	—	—	—	—	2	1	1	—	—	1
<i>S.senftenberg</i>	—	7	—	—	—	—	—	—	—	—	—	—
<i>S.bredeney</i>	3	—	10	7	—	—	—	—	1	—	—	—
<i>S.stanleyville</i>	—	3	—	—	—	—	—	—	4	1	—	—
<i>S.stanley</i>	—	—	—	—	6	—	—	—	28	—	4	—
<i>S.anatum</i>	—	1	—	7	2	2	3	3	—	—	—	—
<i>S.cholerae suis</i> <i>var.Kunzen-</i> <i>dorf</i>	—	—	—	—	—	—	—	2	—	—	—	—
<i>S.cholerae suis</i> <i>var. American</i> <i>type</i>	—	—	—	—	—	—	—	—	—	—	1	—
<i>S.derby</i>	2	—	1	—	—	—	—	—	—	3	1	2
<i>S.heidelberg</i>	4	3	—	—	4	—	—	—	1	1	—	7
<i>S.oranienberg</i>	—	—	—	—	—	—	—	—	—	—	1	—
<i>S.cubana</i>	—	—	1	—	—	—	—	—	1	—	—	—
<i>S.panama</i>	—	6	6	—	1	—	2	—	—	—	—	—
<i>S.vancouver</i>	—	—	—	—	—	—	—	—	—	—	—	5
<i>S.dublin</i>	1	6	—	1	3	2	—	—	—	—	—	1
<i>S.bleadon</i>	—	—	—	—	—	—	—	—	—	—	—	1
<i>S.meleagridis</i>	—	—	—	—	—	—	—	—	—	—	2	—
<i>S.hvittingfoss</i>	—	—	—	—	—	—	—	—	—	2	1	—
<i>S.loma-linda</i>	—	—	—	—	—	—	—	—	—	—	1	—
Carried forward	59	87	438	36	46	54	77	45	88	92	106	99

Food Poisoning due to other Salmonellae—continued

	1970	1969	1968	1967	1966	1965	1964	1963	1962	1961	1960	1959
Brought forward	59	87	438	36	46	54	77	45	88	92	106	99
<i>S. infantis</i>	1	—	2	—	22	2	10	3	2	2	—	—
<i>S. bareilly</i>	—	—	—	—	—	—	—	—	1	—	—	—
<i>S. ibadan</i>	—	—	—	—	—	—	—	1	—	—	—	—
<i>S. blockley</i>	—	—	—	—	—	—	—	1	—	—	—	—
<i>S. essen</i>	—	—	—	—	—	—	—	1	—	—	—	—
<i>S. chester</i>	—	—	—	—	—	—	1	—	—	—	—	—
<i>S. london</i>	—	—	—	—	—	—	1	—	—	—	—	—
<i>S. congo</i>	—	—	—	—	—	—	14	—	—	—	—	—
<i>S. livingston</i>	—	—	2	—	—	1	—	—	—	—	—	—
<i>S. budapest</i>	—	—	—	—	6	1	—	—	—	—	—	—
<i>S. decatur</i>	—	—	—	—	—	1	—	—	—	—	—	—
<i>S. reading</i>	—	—	20	6	—	—	—	—	—	—	—	—
<i>S. haifa</i>	—	—	—	1	—	—	—	—	—	—	—	—
<i>S. ealing</i>	—	—	—	1	—	—	—	—	—	—	—	—
<i>S. abony</i>	—	—	2	—	—	—	—	—	—	—	—	—
<i>S. virchow</i>	—	—	2	—	—	—	—	—	—	—	—	—
<i>S. havana</i>	—	2	—	—	—	—	—	—	—	—	—	—
<i>S. duisburg</i>	—	1	—	—	—	—	—	—	—	—	—	—
<i>S. agona</i>	—	1	—	—	—	—	—	—	—	—	—	—
<i>S. ohio</i>	1	—	—	—	—	—	—	—	—	—	—	—
<i>S. durham</i>	1	—	—	—	—	—	—	—	—	—	—	—
<i>S. 4,12 : d</i>	2	4	—	—	—	—	—	—	—	—	—	—
Unidentifiable serotypes	—	—	1	—	—	—	—	—	—	2	—	—
	64	95	467	44	74	59	103	51	91	96	106	99

The isolates were nearly all from sporadic cases or from those occurring in small—usually family—groups. Nothing resembling an outbreak happened during 1970 and the only “incident” of note was one affecting a small group on their return from a holiday abroad. Two unrelated families were involved and they had spent their holidays in different areas in Spain but, by chance, returned to Glasgow on the same flight. The infecting organism was *S. typhimurium* phage type U129, a type known to be prevalent in Spain. But it was about 24-36 hours after they returned home that they sickened and, on further inquiry, it was learnt that the five who had symptoms had partaken of a meal, including cold meats and salad, on the flight. Three members of one family had refused the proffered meal because they did not happen to want it—not that they considered the food in any way unappetising—and, significantly, they remained well. There can be no doubt therefore that this was the culpable meal. Whether any of

the other passengers had a similar illness is not known for certain because, after landing at Glasgow Airport, they proceeded to other destinations near and far, but it seems scarcely credible that these five were the only ones affected. For them, however, much of the sense of wellbeing with which everyone returns from an enjoyable holiday was soon dissipated by this unpleasant, though fortunately not serious, infection; and it had been acquired when they were almost within sight of home. But of course the aircraft had been provisioned at the port of departure. The offending organism was isolated from only three of the cases (one from one family and two from the other), probably because bacteriological investigations of the other two were unavoidably delayed till the post-convalescent stage.

Additionally 55 stool specimens from residents in surrounding areas (in Stirlingshire) were examined (cf. 14 in 1969) and *S.muenter* was isolated from one of them, a fifteen year old boy from whom the organism, as reported in the last Annual Report, was first isolated in 1969. This shows that some (probably only a few) individuals can remain carriers of even "non-enteric" salmonellas for very long periods.

Food poisoning due to other organisms.—It is the routine practice to examine all stool specimens from suspected cases of food poisoning for all three accepted main bowel pathogens until the nature of the outbreak has been established, after which the examinations are made on a more selective basis. In 1970 the cases in which the clinical and epidemiological findings suggested a strong likelihood of a clostridial or staphylococcal aetiology were very few indeed—only 6 and 61 respectively—and, in the event, *Cl.welchii* was isolated from 5 of the 6 stool specimens from the former group but *Staph.aureus* was not isolated from any of the latter.

Foodstuffs (or food "utensils") suspected of having caused (or conveyed) Food Poisoning.—Similarly the number of these examinations was low in comparison with recent years. *Staph.aureus* was isolated from 6 out of 64 such samples examined (cf. 20 out of 70 in 1969) but no evidence of contamination with *Cl.welchii* or salmonellae was found in any of them.

Dysentery.—The number of stool specimens examined for shigellae, likewise, was down to about half what it was in the previous year. The figures, with the corresponding figures for 1969 in brackets, were :—

	Specimens	No. Positive	% Positive
From suspected cases and contacts ...	7,510 (14,668)	466 (1,151)	11.7 (12.4)
From repeat specimens for clearance ...		411 (681)	

Sh. sonnei was the infecting organism in 64.4 per cent. of the cases and contacts (cf. 73.3 per cent. in 1969) and various serotypes of *Sh. flexneri* in the remaining 35.5 per cent. (cf. 26.6 per cent. in 1969); so, as the table shows, the ratio of Flexner/Sonne strains continued to rise to 0.55.

Year	Number of (new) isolates			Flexner/Sonne Ratio*
	<i>Sh. sonnei</i>	<i>Sh. flexneri</i>	Totals	
1946	111	158	269	1.42
1947	66	39	105	0.59
1948	434	386	820	0.89
1949	501	374	876 (including 1 <i>Sh. schmitzii</i>)	0.75
1950	1,865	105	1,970	0.06
1951	949	40	989	0.04
1952	1,779	14	1,793	<0.01
1953	1,694	272	1,966	0.16
1954	2,524	1,754	4,278	0.69
1955	2,763	1,484	4,247	0.54
1956	2,388	309	2,697	0.13
1957	1,830	190	2,020	0.10
1958	1,556	273	1,829	0.17
1959	1,805	621	2,427 (including 1 <i>Sh. boydii</i>)	0.34
1960	864	1,421	2,285	1.64
1961	1,153	512	1,665	0.44
1962	1,385	186	1,571	0.13
1963	923	145	1,068	0.16
1964	1,110	250	1,360	0.23
1965	776	354	1,130	0.46
1966	811	293	1,104	0.36
1967	471	440	911	0.93
1968	767	183	950	0.24
1969	844	307	1,151	0.36
1970	300	166	466	0.55

* The denominator, which is unity throughout, has been omitted; thus 1.42 should be read as 1.42/1, 0.59 as 0.59/1, etc.

Not included in the foregoing are 4 isolates (one of *Sh. sonnei*, 3 of *Sh. flexneri*) from persons resident in Stirlingshire. These were obtained from a total of 58 specimens (cf. 2 *Sh. sonnei* from 9 in 1969).

Amoebic Dysentery.—Only 32 specimens were received for examination for *E. histolytica*, the cysts of which were found in one case (cf. 30 negative examinations in 1969).

Venereal Diseases.—The volume of syphilis serology undertaken was slightly larger than in the preceding year, the total number of blood samples received being 17,780 (cf. 16,756 in 1969); 13,184 of them were submitted for "screening" purposes only and 5,834 of these were routine antenatal specimens. The remaining 4,596, with 230 sera which had given positive or doubtful results in the screening tests, were more fully investigated by the Reiter Protein CF test and the

quantitative VDRL test. To complete the investigations the FTA-ABS test was performed on 606 of the sera. By reliance on this scheme of progressive elimination, culminating in the highly specific FTA-ABS test, it is only very rarely nowadays that a serum has to be referred for the *Treponema Pallidum* Immobilization Test.

The final total of all these serological tests for syphilis was 41,452 (cf. 39,020 in 1969). Of the antenatal sera 32 showed some degree of positivity but the confirmatory tests showed that 29 of them were Biologic False Positives, so that the "true" positive rate was 0.08 per cent. (cf. 0.03 per cent. in 1969). For reasons explained in previous Annual Reports it would be inappropriate to divulge the results obtained on testing the other specimens.

The number of cerebrospinal fluid specimens received for the Colloidal Gold Test increased to 67 (cf. 26 in 1969).

Gonococcal Infections.—These showed a sharp increase in 1970. In all 15,097 genital swabs were received and *N.gonorrhoeae* was isolated from 1,734 of them but, as some of them were "double isolates" (concurrently derived from cervical and urethral swabs) or repeat specimens, the number of new cases diagnosed was 1,397. In 1969 the numbers were: 12,815 swabs, 1,577 isolates and 1,168 cases. Although better contact-tracing is bound to bring to light more cases, the 1970 figures cannot all be explained on this basis, and it must be concluded that, in Glasgow as elsewhere, the incidence of this disease is once more on the increase.

For want of a better serological test the gonococcal CF test is still performed, and out of 149 sera so tested, 15 gave a positive result (cf. 2 out of 63 in 1969).

Trichomoniasis.—In 1970, in an endeavour to speed up the throughput of specimens, the pre-culture microscopic examination of genital swabs for *T.vaginalis* was omitted (the cultures still being examined microscopically of course). This explains the apparent decrease of about 7,000 in the number of these examinations as compared with the previous year. *T.vaginalis* was isolated on culture from 850 (5.6 per cent.) of the 15,086 swabs examined in 1970 and, allowing for "double" and/or repeat specimens, from 484 (4.4 per cent.) of 10,999 patients. In 1969 the diagnosis was confirmed in 574 (6.0 per cent.) of the 9,137 patients examined. Now from what can be gleaned from other sources (notably the cervical smear cytological service) it is known that the incidence of trichomoniasis has certainly

not declined and there can be no doubt therefore that this 4·4 per cent. positive rate was falsely low, i.e., the infection was being "under-diagnosed" at this Laboratory. In other words the changed procedure for these examinations was a failure and it has since been abandoned in favour of the method of direct microscopy *followed by* culture, as practised at the Laboratory for many years in the past. But the trial illustrated that, in this as in so many other aspects of microbiological work (unlike other laboratory disciplines, such as biochemistry), speeding up the work does not necessarily enhance efficiency; a great many tasks can be properly accomplished only by painstaking work at the bench and the more "man-hours" that can be devoted to these the greater the likelihood of success, hence the need for adequate staffing.

Eye Infections in Infancy.—As in the previous year *N.gonorrhoeae* was isolated from only one of the 167 conjunctival swabs from infants examined during the year (cf. 232 in 1969) but a number of others yielded other pathogens on culture, notably *Staph.aureus* and pneumococci.

Tuberculosis.—*M.tuberculosis* was isolated on culture from 7 out of 279 sputa examined but, as three of these were repeat specimens, the number of sputum positive cases was only 4; the corresponding figures in 1969 were 14 isolates (from 7 cases) from 220 specimens received. In addition cultures of tubercle bacilli were obtained from 6 out of 347 other specimens, mostly urinary deposits examined, (cf. 4 out of 340 in 1969), and 5 other specimens were inoculated into guinea-pigs, all with negative results (cf. 1 positive out of 14 specimens similarly dealt with in 1969).

In all 10 cases of tuberculosis were diagnosed during the year (cf. 11 in 1969) but how many of these were new cases is not clear from the information supplied on the request forms.

CLINICAL PATHOLOGY

Urine examinations.—There was a further increase, to 13,007, in the number of urine specimens submitted for the diagnosis of pregnancy (cf. 10,482 in 1969), and to 12,076 in the number for bacteriological examinations (cf. 11,059 in 1969).

Haematology.—Specimens received for blood grouping totalled 6,097 (cf. 6,560 in 1969); of these 5,837 were routine antenatal specimens, 2,498 of which came from clinics and 3,339 from general practitioners, so the relative proportions of blood samples received from these two sources remained at about the same level. The numbers found to be Rhesus (D) Negative were 440 among the former group

and 871 among the latter, i.e., 22.2 per cent. of the total (cf. 19.2 per cent. in 1969). All the samples received were screen-tested for irregular blood group antibodies and 191 of them gave presumptive positive results; these were then referred to the Regional Blood Transfusion Centre where the presence of definitive antibodies was confirmed in 20 of them, but only 14 of these involved the Rhesus system.

Sequestrene blood samples sent, primarily, for haemoglobin estimations totalled 18,956 (cf. 19,154 in 1969) and, of these, 3,649 required full haematological investigation.

Miscellaneous investigations.—These, which totalled approximately 20,000 (about 9,000 fewer than in 1969), consisted of antibiotic sensitivity tests, examination of urines for protein, glucose, cellular deposits, faeces for occult blood, sera for ASO titres and Rose-Waaler tests, etc., and 23 perianal swabs or stool specimens for examination for helminths. *Taenia saginata* (beef tapeworms) were found in three of the latter. One unusual specimen was a live "insect" of a type said to be infesting a house in the City. On examination the "insect" was found to be the larva of a beetle, probably a *Dermestes sp.*, and it was referred to the Pest Control Officer for final identification and any further action which, in his opinion, might be required.

PUBLIC HEALTH—GENERAL CONTROL

Milk Supply. Bacterial content.—There was a further decrease, to 1,629, in the number of milk samples received for examination (cf. 1,727 in 1969 and 1,923 in 1968). The results, summarised in the table, show that the improvement observed in 1969 in the standards of the raw milk samples was maintained during 1970. But there was no comparable improvement in the quality of the pasteurised milk samples; indeed those from hospital supplies were actually worse than in the previous two years.

	Number of Samples	No. complying with standards	Percentage complying in 1970	Percentage complying in 1969
<i>Hospital Supplies—</i>				
Raw Milk { Premium Milk ...	0	—	—	—
{ Standard Milk ...	3	3	100	66.6
Pasteurised Milk ...	277	212	76.5	80.8
<i>Public Supplies—</i>				
Raw Milk { Premium Milk ...	71	56	78.8	68.4
{ Standard Milk ...	84	73	86.9	85.7
Pasteurised Milk ...	841	743	88.3	87.9
Ultra heat-treated Milk ...	25	25	100.0	100.0
Raw Ordinary Milk ...	6	6	100.0	91.6
<i>School Supplies—</i>				
Pasteurised Milk ...	80	70	87.5	88.8
<i>Milk from Dispensing Machines—</i>				
Pasteurised Milk ...	122	66	54.1	41.9
<i>Miscellaneous</i> ...	120	—	—	—

The quality of the samples of pasteurised milk taken from dispensing machines, though slightly better than in 1969 (when only 46 of the 112 tested complied with the standards), was still far from satisfactory as the following figures show :—

Plate count per ml.	Number of samples complying with the Pasteurised standard*	Number of samples not complying with the Pasteurised standard*	Total
0 - 10,000 ...	28	5	33
10,000 - 50,000 ...	29	14	43
50,000 - 200,000 ...	9	6	15
200,000 - 1,000,000 ...	0	14	14
Over 1,000,000 ...	0	17	17
Total ...	66	56	122

* Absence of coliforms from 1/100ml.

The number of milk samples similarly examined at the request of the County Health Department, Argyll, was only 696, a decrease of 239 as compared with the previous year.

Examination of Milk for tubercle bacilli.—Requests for guinea-pig inoculation tests for the presence of mycobacteria in milk were received on 37 occasions, 26 of the samples having been collected in Glasgow and 11 in surrounding local authority areas (cf. 39 and 12 respectively in 1969). The results, as might have been expected, were all negative.

Examination of Milk for evidence of Br.abortus infection.—The Milk Ring Test (MRT) was performed on 244 samples of milk from sources in Glasgow, and 53 gave positive results (cf. 96 out of 325 in 1969). *Br.abortus* was not, however, isolated from any of the samples from which culture was attempted.

The MRT was performed also on 752 samples from Argyll, Bute and Wigtownshire but only 28 of these were positive ; when these were further tested by the Whey Agglutination Test, 9 of them reacted positively, i.e., the titres of brucella agglutinins in the whey were 1 in 10 or higher, 5 of them as high as 1 in 40 or more. Such titres are generally indicative of actual udder infection but out of all these samples only one yielded a growth of *Br.abortus* on culture ; another, though negative on culture, was presumed to have contained viable brucellae because a guinea-pig inoculated with it developed serum agglutinins to a titre of 1 in 160 but, again, all attempts to culture the organism from organs removed from the animal at autopsy proved unsuccessful.

Two inferences may perhaps be drawn : (a) the fact that only 81 (8.1 per cent.) of all these 996 samples were MRT positive suggests that much progress has been achieved in eradicating brucellosis from

the dairy herds in Glasgow and the other counties mentioned, (b) the failure to isolate *Br.abortus* from all but one of the 81 MRT positive samples is probably due to the fact that they were mostly pooled (if not bulk) milk samples. The MRT is of course an extremely sensitive test which will give a positive result on a pooled sample derived from 25 or more cows *when only one of them happens to be secreting brucella antibodies in her milk*; and it is important to remember that it is the presence of *antibodies*—not necessarily active infection—which is detected. Now the two states, antibody secretion and the excretion of viable brucellae in the milk, may co-exist but the dilution effect of “pooling” greatly diminishes the likelihood of isolating the organisms on culture; in other words, the surest way of obtaining positive cultures is to go back and collect individual cow samples from all the cows which have contributed to the MRT positive pooled samples. But this is a time-consuming exercise for the Milk Officers and, understandably therefore, once a milk supply comes under suspicion the matter is presumably referred to the Veterinary authorities who undertake the further investigations required.

Examination of Milk Bottles, Dairy Equipment, etc.—During the year 80 washed milk bottles were received for bacteriological examination and 67 (83·7 per cent) of them complied with the standards (cf. 94·6 per cent. of the 36 examined in 1969). The number of examinations of rinses from milk cans, 72, was the same as in 1969 but the results were poorer, with only 83·3 per cent. satisfactory (cf. 91·6 per cent.), 7 per cent. fairly satisfactory and 9·7 per cent. unsatisfactory (cf. 7 per cent.). Very few swabs and rinses of other dairy equipment were received, only 21 (cf. 78 in 1969).

Additionally, 21 of these investigations were carried out for the Health Departments of Argyll and Bute.

Cream.—The improvement, noted in last year's Report, in the bacterial counts of dairy cream samples was maintained, but in 1970 the results of the coliform tests on these samples were also much better. The results for the 302 samples received, compared with the 290 examined in 1969, were as follows:—

Bacterial count per gram	No. of Samples	Percentage	
		1970	1969
0 - 50,000 ...	260	86·0	85·9
50,000 - 200,000 ...	24	7·9	6·3
200,000 - 1,000,000 ...	10	3·3	5·5
Over 1,000,000 ...	8	2·6	2·0
Coliform bacilli in 1/100 g.	25	8·2	15·5

Ice-Cream.—The 352 samples of ice-cream examined in 1970, likewise, showed up appreciably better than the 377 in the previous year, the results being :—

Bacterial count per gram	No. of Samples	Percentage 1970	Percentage 1969
0 - 50,000 ...	317	90.0	84.0
50,000 - 200,000 ...	17	4.8	9.0
200,000 - 1,000,000 ...	10	2.8	4.0
Over 1,000,000 ...	8	2.2	3.0
Coliform bacilli in 1/100 g.	64	18.1	21.7
Samples conforming to provisional standard of a plate count of no more than 50,000 per g. and coliform bacilli absent from 1/100 g. ...	274	77.8	72.6

Imitation Cream.—A similar improvement was found in this product when the results of the examination of the 67 samples submitted in 1970 were compared with those of 77 examined in 1969 :—

Bacterial count per gram	No. of Samples	Percentage 1970	Percentage 1969
0 - 50,000 ...	62	92.5	87.0
50,000 - 200,000 ...	3	4.5	6.5
200,000 - 1,000,000 ...	1	1.5	4.0
Over 1,000,000 ...	1	1.5	2.0
Coliform bacilli in 1/100 g.	5	7.5	11.7

Bottles other than Milk Bottles.—Possibly because the results of the bacteriological examination of the few (only 20) presumed "clean" beer and mineral water bottles submitted in 1969 had been so poor, 72 such bottles were brought for examination in 1970 and 10 of them failed to comply with the standards, a failure rate of 13.9 per cent.—not as bad as the 25 per cent. in the previous year but still not good enough

Public Water Supplies.—Fewer water samples were received during 1970, the total being 1,888, compared with 1,982 in 1969; 1,636 were routine samples from reservoirs, mains and taps, 40 were taken from ships' tanks and dock supply points, and the remaining 212 were miscellaneous samples, 130 of which were submitted by the Clyde River Purification Board.

Roughly half the routine samples were of chlorinated water from the two main City supplies, viz., Loch Katrine and the Gorbals system,

and the results of these examinations were satisfactory, in fact marginally better than in 1969. The details are presented in the following table :—

Supply	No. of Samples	Average bacterial count per ml. at		Most Probable Number in 100ml.							
		37°C/24hrs.	22°C/72hrs.	Coliform bacilli				Typical ("faecal") <i>Esch. coli</i>			
				0	1	3	5 or more	0	1	3	5 or more
Loch Katrine ...	918	1	48.5	841	50	9	18	880	26	3	9
Gorbals ...	338	30	32	323	9	2	4	331	3	2	2

Swimming Baths.—There was a further increase, to 511, in the number of samples of pond water received (cf. 472 in 1969 and 447 in 1968). The results of the examinations were as follows :—

Source	No. of Samples	No. with a Bacterial Count of 10 or more per ml. at 37°C/24 hrs	No. containing Coliform bacilli in 100 ml.	MPN in 100 ml.	
				Coliform bacilli	Typical ("faecal") <i>Esch. coli</i>
Public Ponds ...	212	9	4	{ 1 1 3 11	0 (1 sample) 1 (1 " 1 (1 " 0 (1 ")
School Ponds ...	232	12	3	{ 1 1 17	0 (1 sample) 1 (1 " 1 (1 ")
Private Ponds ...	67	2	5	{ 1 3	1 (2 samples) 0 (2 ")

As usual, the concentration of free chlorine was below the recommended level in the few samples which gave not so good results in the coliform test but the standards of the majority of the samples were very satisfactory.

Foodstuffs (fitness for consumption) and related miscellaneous samples.—There were 2,247 samples in this category but the proportions received from the three main sources differed from the 1969 figures (in brackets). Thus the Corporation Chief Veterinary Officer, the Port Health Inspectors and the City Food Inspectors submitted 1,773 (852), 286 (631) and 188 (722) respectively.

It was the samples sent by the Veterinary Officer which roused most interest. These were :—

Boneless meat imported from	France	...	810
	Australia	...	629
	New Zealand	...	43
Miscellaneous samples	...	...	59
Abattoir drain swabs	...	...	232

Salmonellae were isolated from : 1 of the drain swabs (*S. agona*), 3 of the French meat samples (2 *S. panama* and 1 *S. anatum*), and 10 of the Australian samples (3 *S. typhimurium*, 6 *S. derby* and 1 *S. muenchen*).

The reaction to this last finding was prompt and praiseworthy. A senior veterinary official on the staff of the Australian High Commissioner in London came on a special mission to Glasgow to express his concern and, in the company of the Corporation Chief Veterinary Officer, paid a visit to the Laboratory. He made it convincingly clear that every care is taken at the exporting establishments in Australia to minimise the risk of contamination of the meat and he was genuinely mystified by the sampling results. The fact that nearly all the positive samples were in the batches received during a period of a few weeks in the first quarter of the year may indicate that they all came from one ship's cargo. But, whatever the explanation, it was very reassuring to find highly placed representatives of a great exporting country taking the matter so much to heart, with the evident intention of upgrading their already stringent scrutinies of the sources and quality of the meat which they export.

The samples submitted by the Port Health and Food Inspectors included only 198 samples of desiccated coconut and 11 of imported egg products (cf. 506 and 63 respectively in 1969), the reduced numbers reflecting diminishing anxiety about these products and, again, no salmonella was found in any of them. As for the other samples, although they showed great variation in their bacteriological "purity" (no standards are laid down for foods in general), no recognised pathogen was isolated from any of them.

Additionally 27 samples of shellfish were examined (cf. 26 in 1969), 2 of which were sent at the request of the Medical Officer of Health for Bute (cf. 12 in 1969). The results for the Glasgow samples were :—

Scallops	17	Grade 1*
	1	Grade 3
	1	<i>S.typhimurium</i> isolated †
Mussels	2	Grade 1
	1	Grade 2
Whelks	3	Grade 1

and the Bute samples :—

Whelks	1	Grade 1
Clams	1	Grade 1

(* Grade 1=satisfactory; Grade 2=suspicious; Grade 3=unsatisfactory)

† On the results of the coliform test this sample would have been graded "satisfactory" because it contained less than 5 "typical" (faecal) *E.coli* per ml. of flesh, but the presence of *S.typhimurium* obviously made it unacceptable.

Other Investigations and Services for the Health Department, Port Health Authority, etc.—The number of samples of animal feeding-stuffs (or their ingredients) increased to 62 and salmonellae were isolated from 2 of them (1 *S.binza* from meat meal and 1 *S.tennessee* from fish meal). This compared with one salmonella isolate from 26 samples in 1969. Examinations of imported materials for *B.anthraxis* totalled 66 and the results were :—

Bones, bone meal, etc.	48 (13 positive) *
Wool	4
Goatskin	3
Other hides, animal hair, etc.	11 (1 positive) †
	—
	66 (14 positive)
	—

This compared with 31 positives out of 153 samples examined in 1969.

* Including 3 at the request of Greenock Health Department.

† Including 1 at the request of Renfrewshire Health Department.

As usual, a few rats caught in ships or on the docks were brought for examination for *Pasteurella pestis* but the organism was not found in any of the 30 examined (cf. 37 in 1969) ; in fact these examinations have been consistently negative for very many years.

As for other miscellaneous services performed at the Laboratory the largest numerically is the reconstitution of yellow fever vaccine and 3,300 doses of this were issued in 1970 (cf. 3,295 in 1969).

This review of another year's work shows that there is a continuing demand for the service provided by the Laboratory. It may fluctuate a little from year to year but it remains substantial, and it is a demand that could not otherwise be met if this Laboratory, or another one like it, did not exist. What is becoming increasingly evident, however, is that the structure and layout—and especially the site—of the premises are no longer suitable for this purpose. In the last eight years the Regional Hospital Board has spent a lot of money—and with some success, but it would be a wanton waste for a mere tenant to spend more—in an endeavour to adapt them for present day needs. But the end result is still an ill-assorted conglomeration of working laboratories (and an atrociously cramped office) linked together by awkward corridors which, for want of space elsewhere, get cluttered up with impedimenta, to the dismay of the Fire Prevention Officers. They are costly to maintain, impossible to heat in winter, and perched on the top floor of a five-storey block served only by one lift of outmoded design and fitful performance. This aged contraption is

expected to haul passengers *as well as* all the equipment and materials delivered to the Laboratory and everything (including refuse) that daily emerges from it. When the lift fails, as it often does, there are always of course the stairs, nine long flights of them—a grand vista of elegant marble and richly wrought iron, but a grim prospect for anyone who has to climb them, even unladen. And all this is incongruously situated at the commercial heart of a busy city, remote from the rest of the hospital service of which it forms an integral part. The time has surely come to look for a site in the grounds of one of the Glasgow hospitals where a new, purpose-built City Laboratory can better serve the needs of the future.

T. F. ELIAS-JONES,
Director.

PUBLICATIONS, REPORTS, ETC.

"Gonorrhoea in Glasgow in 1969"

Schofield, C. B. S., Laidlaw, M. and Elias-Jones, T. F. (1970),
Communicable Diseases Scotland Reports, CDS 70/13.

"Antibiotics in diarrhoeal illnesses"

Elias-Jones, T. F. (1970), *Lancet* (C), 2, 1308.

TOTAL OF EXAMINATIONS FOR YEAR 1970

CITY OF GLASGOW

INFECTIOUS DISEASES

						<i>Positive</i>	<i>Total</i>
<i>Diphtheria and General Throat Infections—</i>							
Diphtheria	...	...	Suspects	...	...	0	363
Streptococcal Infections	...		Suspects and control	...	...	94	390
Vincent's Infections			Suspects and control	...	...	25	381
Pernasal swabs	...	...	...	...	...	0	3
Staphylococcal Infections	...		Suspects and control	...	...	145	145
<i>Gastro-intestinal Infections—</i>							
Enteric Fever— (Typhoid and Paratyphoid)							
	...		Suspects and control	...	...	16	302
Food Poisoning— (Salmonellosis)							
	...		Suspects and control	...	...	134	6,665
			Foodstuffs	...	...	0	65
			Miscellaneous swabs	...	...	1	232
	(Staphylococcal)	...	Foodstuffs, etc.	...	...	6	64
	(Clostridial)	...	Suspects and control	...	...	5	6
			Foodstuffs etc.	...	...	0	64
Dysentery—							
Bacillary							
	...	...	Suspects and Control	...	...	877	7,510
			Colicine-typing of <i>Sh.sonnei</i>				613
	Amoebic	...	...	...	...	1	32
	Giardiasis, etc.	...	...	...	...	2	2
	Specific <i>Esch.coli</i>	...	...	...	...	39	882
	Cholera	...	...	...	...	0	4
<i>Tuberculosis—</i>							
			Sputa	...	...	2	279
			Other specimens (micros. exam.)	...	...	1	347
			Various specimens (biological exam.)	...	...	0	5
			Various specimens (culture)			13	624
<i>Venereal Diseases—</i>							
			Serological Tests for Syphilis (W.R., etc.)	...	...		41,452
			Lange's Colloidal Gold Test				67
			Gonococcal Complement Fixation Test	...	...		149
			Smears and cultures of Urethral and Cervical Exudates for <i>N.gonorrhoea</i>	...	...	1,734	15,097
			Ophthalmia Neonatorum (smears and cultures)	...	...	1	167
			Carry forward	...	...		75,910

	<i>Positive</i>	<i>Total</i>
<i>Brought forward</i> ...		75,910
OTHER EXAMINATIONS—		
Blood—Rh factor		6,097
Blood—ABO grouping		6,097
Blood—group antibody tests		6,107
Blood—general haematology, cell counts, haemoglobin, etc.		18,956
Blood—cultures, Paul-Bunnell tests, etc		206
Urines, etc.		21,742
Exudates—various		293
Faeces for worms	3	23
Faeces for occult blood	6	14
Swabs for Trichomoniasis	850	15,086
Pregnancy tests		13,007
Antibiotic sensitivity tests		7,968
Miscellaneous		5
Identification of insects		1
GENERAL PUBLIC HEALTH—		
City Milk Supplies (plate count and coliforms)		1,349
City Milk Supplies (<i>Br. abortus</i>)		244
Hospital Milk Supplies (plate count and coliforms)		280
Milk (biological tests)		26
Miscellaneous swabs and rinses		21
Milk bottles (bacterial counts)		80
Swabs from milk cans		72
Ice-cream		352
Foodstuffs—fitness for consumption :—		
Imitation cream, cream, etc.		369
Miscellaneous foods, dried egg, etc.		188
Shellfish		25
Beer and mineral water bottles		72
Water Supplies—routine		1,848
Water from swimming ponds		511
Meat, from Chief Veterinary Officer	13	1,541
Animal feeding stuffs	2	62
PORT HEALTH AUTHORITY—		
Anthrax (hides, skins, hair, bone, etc.)	14	62
Plague (examination of rats)	0	30
Foodstuffs—fitness for consumption		286
Water samples		40
OUTSIDE AUTHORITIES—		
Gastro-intestinal infections	113	
Foodstuffs—Fitness for consumption	3	
Antibiotic sensitivity tests	5	
Shellfish	2	
Milk (biological tests)	11	
Milk samples for <i>Br. abortus</i>	752	
Milk samples (plate counts)	696	
Cream	1	
Imitation Cream	3	
Milk bottles (bacterial counts)	14	
Miscellaneous swabs	6	
Anthrax	4	
		1,610
		<hr/> 180,580 <hr/>

SECTION XI

AIR PURIFICATION

Winter sunshine has increased in the City by some 175 per cent over the period 1960/69 as against the period 1931/60 (graph on page 239 by courtesy of the Glasgow Weather Centre). It is perhaps of interest to reflect that at the turn of the century experiments were carried out by the City Analyst on the assessment of ultra-violet radiation in the city centre compared with the outskirts, the result of which showed that the City Centre received only one-third to one-half the intensity available in the country. On only seven days in the year (GLASGOW FAIR) did the City Centre receive the full ultra-violet radiation that was available in the country.

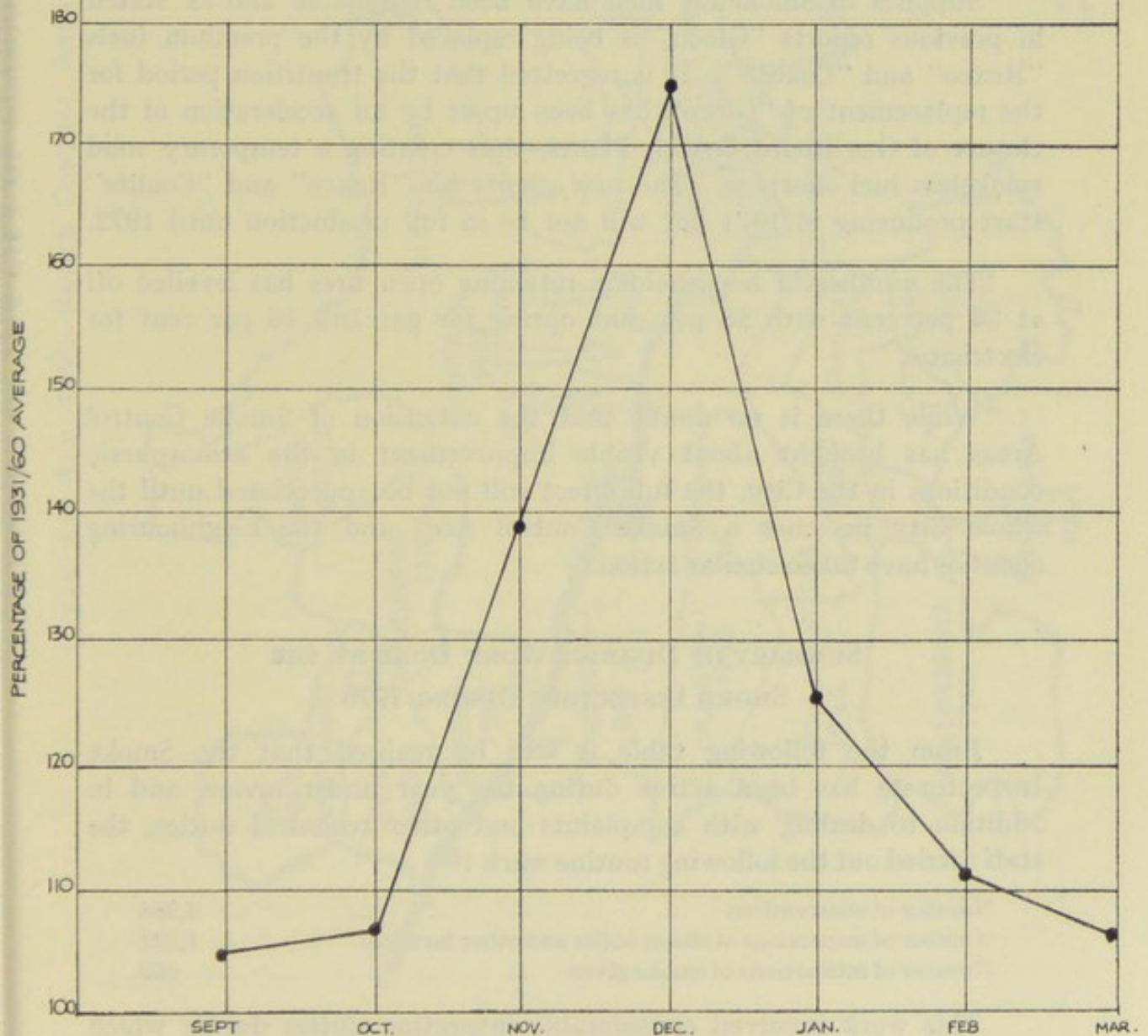
The City's Clean Air Campaign continues. The highlight of this conservation year was the Annual Conference of the Scottish Division of the National Society for Clean Air which was held in the McLellan Galleries, Glasgow, together with a Clean Air Exhibition sponsored by the Society. The exhibition was opened by the Lord Provost and the Conference by Lord Hughes. The Health Committee extended the usual hospitality to the Delegates to the Conference. The Conference was for Delegates only but the Exhibition was open to the Public and an estimated 6,000 persons visited the Exhibition during the five days it was open to the Public. Both the Conference and the Exhibition received good coverage by both press and T.V. The Department had its own stand at the Exhibition and extended every assistance to the Society in promoting the Exhibition.

The Secretary of State has drawn the attention of the Corporation to the possible temporary shortage of Solid Smokeless Fuels during the winter 1970/71 and possibly the winter of 1971/72, thereafter, it is expected that the new National Carbonising (Rexco) and Coalite Plants will be in full production. The Scottish position is expected to be much better than that of England.

Due to the national (temporary) solid smokeless fuel crisis the operative date of the Yoker Order has been extended until 31st May, 1971, as a precautionary measure.

The Kelvinside Order covering the whole of the Kelvinside Ward and some 9,615 premises was approved by the Corporation but has been the subject of an objection under the terms in the Act. It is expected that the Secretary of State will set up a Public Enquiry.

AVERAGE MONTHLY DURATION OF SUNSHINE AT
GLASGOW (SPRINGBURN PARK) DURING THE PERIOD
1960/69 AS A PERCENTAGE OF THE 1931/60 AVERAGE



SOURCE :- GLASGOW WEATHER CENTRE.

Preliminary survey work in respect of the Maryhill Ward is almost complete. It is hoped to place the Order for Maryhill before the Corporation early in 1971 with an operative date 1972. Further preliminary work is in progress in the Ward of Ruchill.

It is expected that by the end of 1970 the acreage of the City covered by Smoke Control Area Orders will be 59 per cent, (48.6 per cent of the houses and 50 per cent of the population.)

The table on page 252 and the map on page 241 illustrate the progress since the inception of the Campaign.

Supplies of Smokeless fuels have been reasonable and as stated in previous reports "Gloco" is being replaced by the premium fuels "Rexco" and "Coalite". It is regretted that the transition period for the replacement of "Gloco" has been upset by an acceleration of the closure of Gas Board Coking Plants, thus creating a temporary solid smokeless fuel shortage. The new plants for "Rexco" and "Coalite" start producing in 1971 but will not be in full production until 1972.

The number of householders retaining open fires has levelled off at 26 per cent with 58 per cent opting for gas and 16 per cent for electricity.

While there is no doubt that the extension of Smoke Control Areas has brought about visible improvement in the atmospheric conditions in the City, the full effect will not be appreciated until the whole City becomes a Smoke Control Area and the neighbouring counties have taken similar action.

SUMMARY OF DISTRICT WORK DONE BY THE SMOKE INSPECTORS DURING 1970

From the following table it will be realised that the Smoke Inspectorate has been active during the year under review and in addition to dealing with complaints and other technical duties, the staff carried out the following routine work :—

Number of observations	...	...	...	...	...	...	4,264
Number of inspections of steam boiler and other furnaces	...	...	...	...	...	...	1,322
Number of intimations of smoke given	...	...	...	...	...	...	450

This work involved considerable inspection duties during which advice was given to the plant operators on the best means of abating any nuisance conditions. These inspections not only furnished the management with information relevant to the current condition and

operation of their plant but also any physical defects which, if allowed to develop, might cause loss of efficiency and violation of the Clean Air Acts. Such advice is well received and recommendations made by the Inspectors are invariably acted upon. The fundamental idea has been not just to order abatement of infringements of the Clean Air Acts, but also to co-operate with and advise on methods of elimination.

The greater proportion of the observation work was carried out in the Smoke Control Areas and mainly entailed the enforcement of the regulations relevant to Smoke Control over domestic premises. This is carried out by six Assistant Inspectors responsible exclusively for the control of smoke from domestic fires.

INVESTIGATION OF COMPLAINTS

The sale of unauthorised fuel in the Smoke Control Areas and the burning of electrical cable, car bodies, etc., in open bonfires accounted for the majority of the complaints dealt with during the year.

Though in fact the supply of smokeless fuel was adequate to meet the requirements of the Smoke Control Areas, a number of merchants still persist in retailing household coal regardless of the number of prosecutions taken against them.

During the year several merchants were found to be retailing a fuel in the Smoke Control Areas, stated to be "Smokeless Nuts" or "Washington Doubles". Since the Department was of the opinion that this fuel was not an authorised low volatile coal, samples were taken for analysis. The City Analyst's report agreed with the Department that this fuel did not come within the terms of the Authorised Fuels as given under the Clean Air Act, 1956. Both the National Coal Board and the Coal Merchants' Federation were notified of our findings and subsequently the North-East England Division of the Coal Board reported that this fuel, now known as Glebe Plant Doubles, was for Industrial use only and should not be offered for sale on the domestic market as a smokeless fuel. Though there have been no further instances of the sale of this particular fuel in Glasgow, reports have been received regarding its appearance in the Smoke Control Areas of adjoining local authorities.

The burning of cable and scrap material, with its subsequent heavy smoke and noxious fumes, can be an intolerable nuisance. The practice

of 'cleaning' scrap cars by setting them alight undoubtedly causes a contravention of Section 1 of the Clean Air Act, 1968 and the Smoke Inspectors are particularly keen to stop this source of air pollution. Successful court actions were taken on two occasions against scrap metal dealers where previous warnings had been ignored.

The commissioning of Braehead Power Station to oil-firing brought a number of complaints of excessive smoke. Since these emissions were both prolonged and dense, the South of Scotland Electricity Board were notified of our concern for the public in the Whiteinch area, who were being severely inconvenienced by this pollution. The Electricity Board then seconded additional technical staff to Braehead during the remainder of the conversion period, bringing an immediate improvement in the situation.

The power cuts in the electricity supply which occurred during the month of December, caused many boiler installations to be shut down. A number of smoke complaints were lodged against industrial premises which had hastily brought standby coal-fired plant into action or adapted solid fuel mechanically fired boilers to hand-firing with natural draught. The inspectors were able to advise the operators in the "best practicable means" to minimise the emission of smoke.

During the particularly cold spell which occurred in January, a number of industrial smoke complaints were dealt with by the staff. Some were due to the boiler plants being "forced" to operate beyond their designed loads while others referred to installations using heavy fuel oil. Insufficient storage tank and fuel line heating accounted for the bad conditions in most of the latter cases.

With the extensive demolition work at present being carried out in the City, several complaints were lodged against the burning of debris from this operation, on the site. In order to alleviate this nuisance, frequent visits were carried out in all areas of demolition, notifying the contractors of the regulations governing the burning of waste materials. Provided the burning of waste timber from demolition operations is done in a methodical manner, properly supervised and with the minimum of smoke, it is exempt from the provisions of Section 1 of the Clean Air Act, 1968. Efforts are made to have all the smoky material removed from the wood, prior to the burning, e.g., roofing felt, linoleum, plastic, etc. In some cases the moving of the bonfire to a more remote site satisfied the complainers.

INCINERATION

The problem of refuse disposal is mounting each year. Modern packaging techniques have led to a situation where the volume of waste being dealt with has nearly doubled over the last ten years, though its weight has hardly changed. This state of affairs has caused a number of industrial and commercial premises to install incinerators to deal with their own trade refuse.

Generally the modern incinerator with its after-burning system and fly-ash collector operates within the terms of the Clean Air Acts, but a few firms attempt to burn materials for which these incinerators were not designed, which results in heavy smoke emissions.

Generally speaking plastics cannot be readily burned smokelessly in the standard type of incinerator.

In many cases, smoke and fly-ash problems from incinerators are due entirely to inefficient operation or overloading of the furnace.

Action was taken against a large firm in the west end, after several warnings, for the discharge of heavy smoke from their incinerator plant. This incinerator has now been closed down—the factory waste is now transported daily to one of the City's destructors.

The Corporation Cleansing Department has been very much to the fore in modernising its refuse disposal works. The opening of Dawsholm Destructor marked the completion of the third of a four phase programme, started at the end of the war—the other two works being Govan and Polmadie. The Dawsholm Works deal with 250 tons of crude refuse per shift and is fitted with high efficiency electrostatic precipitators, designed to ensure a maximum grit and dust emission of 0.1 grains/ft.³ of dry gas at N.T.P. The opening of this modern plant will relieve some of the remaining inefficient destructors, which have been a source of both smoke and grit for a considerable time now, of much of their load.

SHIPPING IN DOCK AND HARBOUR AREAS

In common with the general operations throughout the City, the harbour and dock areas came under routine observation. Thankfully the heavy prolonged emissions of smoke from the coal-fired coasters have largely been eliminated by their conversion to oil-firing. Though the use of oil fuel for steam raising has removed much of the smoke

problem associated with shipping, it should be realised that in the hands of an unskilled boiler operator, very dense emissions of smoke can occur. There are occasions when it is difficult to avoid emitting smoke from ship's boiler plant, particularly when the boiler auxiliary plant is undergoing repairs while the vessel is in dry dock.

Each case is dealt with on its own merits and the Inspectors, with their past marine experience, are able to discuss the problem with the ship's engineers and advise.

By and large the shipping companies are well aware of the fact that their boilerplant, with its high rating, is potentially a source of considerable air pollution if not properly operated. Leaflets notifying the masters and chief engineers of the smoke regulations relating to vessels, have been printed and are distributed to the ships by the river pilots at the Clyde estuary.

When a foreign registered vessel is found to be emitting excessive smoke, not only is the master of the ship given a warning but the consul representing the country of the ship's registration is also notified of our action.

During the year 1970, a total of twenty-eight notices of offences were served on ships in the dock and harbour areas for contraventions of the Clean Air Act, 1956, Section 20.

PRIOR APPROVAL APPLICATIONS

CLEAN AIR ACT, 1956, SECTION 3

CLEAN AIR ACT, 1968, SECTION 6

There was a decrease in the number of prior approvals dealt with during the year—85 compared to 99 for the previous year. It would appear that Industrial Managements in many cases have slowed down their boiler and process plant modernisation. The arrival of Natural gas in the Glasgow area in 1971 may be the reason for the temporary lull in the installation of new plant this year.

Applications relevant to heating and processing plants together with chimney heights, required visits to the loci of the proposed installations. In several instances, meetings were required with the Consultant Engineers before a satisfactory conclusion was reached.

IMPROVEMENTS TO PLANT NOTED DURING THE YEAR, 1970

The number of improvements and additions to steam generation and processing plants which were dealt with are listed below in their respective categories. Though some of the alterations were relatively simple, all have been conducive to a purer atmosphere.

Number of new boilers installed to give increased capacity	...	86
Number of oil-fired air heaters	... ..	47
Number of mechanical stokers fitted to furnaces	... ..	3
Number of new chimneys erected or existing chimneys heightened		63
Number of steam boiler or process furnaces converted to oil	...	51
Number of other improvements not included	... ..	8

It will be noted from the above table that the trend is still to either convert existing plant from coal to oil-firing or install a completely new boiler installation burning oil fuel. The substantial rise in the number of listed conversions to oil-firing compared to last year can be attributed to the run-down in the production of gas coke. Many of the Corporation Schools, clinics, cooking centres, etc., which formerly used gas coke in their heating plant, have now been converted to oil-burning. Most of the oil-fired air heaters are in the new industrial estates throughout the City.

The following is a brief description of some of the more noteworthy improvements carried out during 1970.

One of the most significant improvements completed during the year was the replacement of the solid fuel fired boilerplant of a large dairy in the south-eastern area, by a modern oil-fired installation. Frequent complaints of smoke and grit were lodged against this firm in the past and in one case punitive action was taken against them. The new installation, which consists of two modern, fully automatic package boilers, has been operating very satisfactorily since its commissioning.

Many low pressure hot water boilers, formerly coal fired, have now been converted to burn oil fuel. One example under this category was a ballroom in the south-side of the City which, prior to its boiler conversion, was a source of annoyance to the immediate neighbourhood, with its frequent emissions of dense smoke. This converted plant is now operating without the emission of any smoke.

The Scottish Industrial Estates Management made good progress with its boilerhouse modernisation programme during 1970. Further conversions to oil-firing were carried out in the Industrial Estates at Thornliebank, Queenslie and Hillington. Formerly these units were solid fuel fired by underfeed stokers. Usually one fireman attended to several boilerhouses, consequently if the fuel being used was of a caking quality, the combustion conditions in the furnace tended to deteriorate causing heavy smoke emissions. Since most of the industrial estates are now in Smoke Control Areas, these emissions of smoke caused the Department a great deal of concern. Conditions have improved considerably following these conversions.

It should be noted that though oil fuel will, if properly operated, burn smokelessly, some of these fuels oils can cause a higher discharge of Sulphur Dioxide into the atmosphere than that of coal. However, since 1 ton of oil fuel has roughly the same heat content as 1.7 tons of coal, less is required to be burned to give the same heat output, consequently the increase in SO_2 discharged into the atmosphere is relatively small. Nevertheless it is gratifying to note that the conversions to oil-firing carried out by the Industrial Estates Management and also the Corporation Heating Section in various schools, clinics, etc., have all used 35 second Redwood No. 1 viscosity fuel oil, with a sulphur content of 0.8 per cent. In some cases, oil burning plant, which previously burnt fuel with a high sulphur content, have been adapted to operate on the 35 second viscosity oil. Such a changeover is extremely valuable especially in the city centre from the point of view of keeping the concentration of SO_2 in the atmosphere to a minimum.

Firms in the manufacture of wood products have frequently found themselves involved in discussions with their local authorities regarding the emissions of smoke from their furnaces when burning waste wood. It has been shown clearly in many cases that boilers designed for coal-firing are not entirely suitable for the combustion of wood waste. Wood burning furnaces should have a large grate area and also a substantial amount of furnace brickwork to radiate heat back to the fuel bed.

Two cooperages in the City installed furnaces designed for wood burning during the year. These replaced converted coal fired boilers which at times caused heavy emissions of smoke. The new units are operating very satisfactorily.

PROSECUTIONS TAKEN DURING THE YEAR

It was decided by the Department that the most effective way to reduce the amount of coal being illegally burned in the Smoke Control Areas was to carry out a vigorous campaign against coal merchants retailing this unauthorised fuel. This action resulted in a reduction of the number of cases taken against householders for emitting smoke in the Smoke Control Areas, compared to last year, while the prosecutions taken against coal merchants for contravening Section 9 (1)(c) of the Clean Air Act, 1968, increased. Much of this work required early, late and weekend duties, since the offending merchants tended to retail the bituminous coal outside of the normal office hours in an effort to avoid detection by the inspectors.

Seventy-nine cases against coal merchants for contravention of the Clean Air Act, 1968, Section 9(1)(c) were dealt with by the Stipendiary Magistrates at the Central, Marine and Govan Courts.

The following are the findings of the courts :—

- 4 Pled guilty and were each fined £20
- 27 Pled guilty and were each fined £10
- 25 Pled guilty and were each fined £7
- 10 Pled guilty and were each fined £5
- 3 Pled guilty and were each fined £3
- 3 Pled guilty and were each fined £2
- 4 Pled guilty and were admonished
- 1 Failed to appear—warrant issued
- 1 Case deserted *pro loco*
- 1 Pled not guilty—Trial set for January, 1971.

Action was also taken against 77 tenants in the Smoke Control Areas for contravention of the Clean Air Act, 1956, Section 11.

The findings of the Courts were as follows :—

- 10 Pled guilty and were each fined £5
- 2 Pled guilty and were each fined £4
- 10 Pled guilty and were fined £3
- 35 Pled guilty and were each fined £2
- 2 Pled guilty and were each fined £1
- 8 Pled guilty and were admonished
- 5 Cases deserted *pro loco*
- 1 Failed to appear—warrant issued
- 4 Pled not guilty—Trial set for 1971

A total number of 176 warning letters were sent to first offenders in the Smoke Control Areas during the year under review.

Court action taken against 4 industrial concerns for contravention of Section 1 of the Clean Air Act, 1956, resulted in fines ranging from £15 to £5 being imposed by the Stipendiary Magistrates.

The first two cases taken under Section 1 of the Clean Air Act, 1968, which prohibits the emission of dark smoke from bonfires in Industrial or Trade premises, resulted in fines of £10 and £5 being levied on two scrap metal dealers.

ATMOSPHERIC POLLUTION ESTIMATION, RECORDING AND INSTRUMENTATION

The smoke and SO₂ content of the atmosphere are recorded at sixteen sites throughout the City; most of these units are now automatic, requiring attention only once each week. The remaining units, which are installed in Corporation Clinics, are operated daily by the nursing staff.

In using these volumetric analysis units, the smoke content, from a known volume of air, is deposited on a filter paper producing a stain. By measuring the density of this smoke stain with a reflectometer, the concentration of smoke in the atmosphere can be calculated. After passing through the filter paper, the smoke free sample is then 'bubbled' through a hydrogen peroxide solution which oxidises the SO₂ present to Sulphuric acid. The strength of the acid is found by titration and is related to the amount of SO₂ in the air sample.

Graph I indicates the average winter concentrations of smoke and SO₂, taken over a period from October to March, for the City since 1960.

The monthly rainfall and deposit of solids are obtained from fourteen standard deposit gauge bottles. Of these, eleven are situated within the City and the remaining three in country sites. The contents of the bottles are analysed monthly by the City Analyst and from the results an average figure for the whole of Glasgow can be found. (See table.) It can also be seen from the table that the high deposits of solids in February and the autumn months coincide with an exceptionally high rainfall.

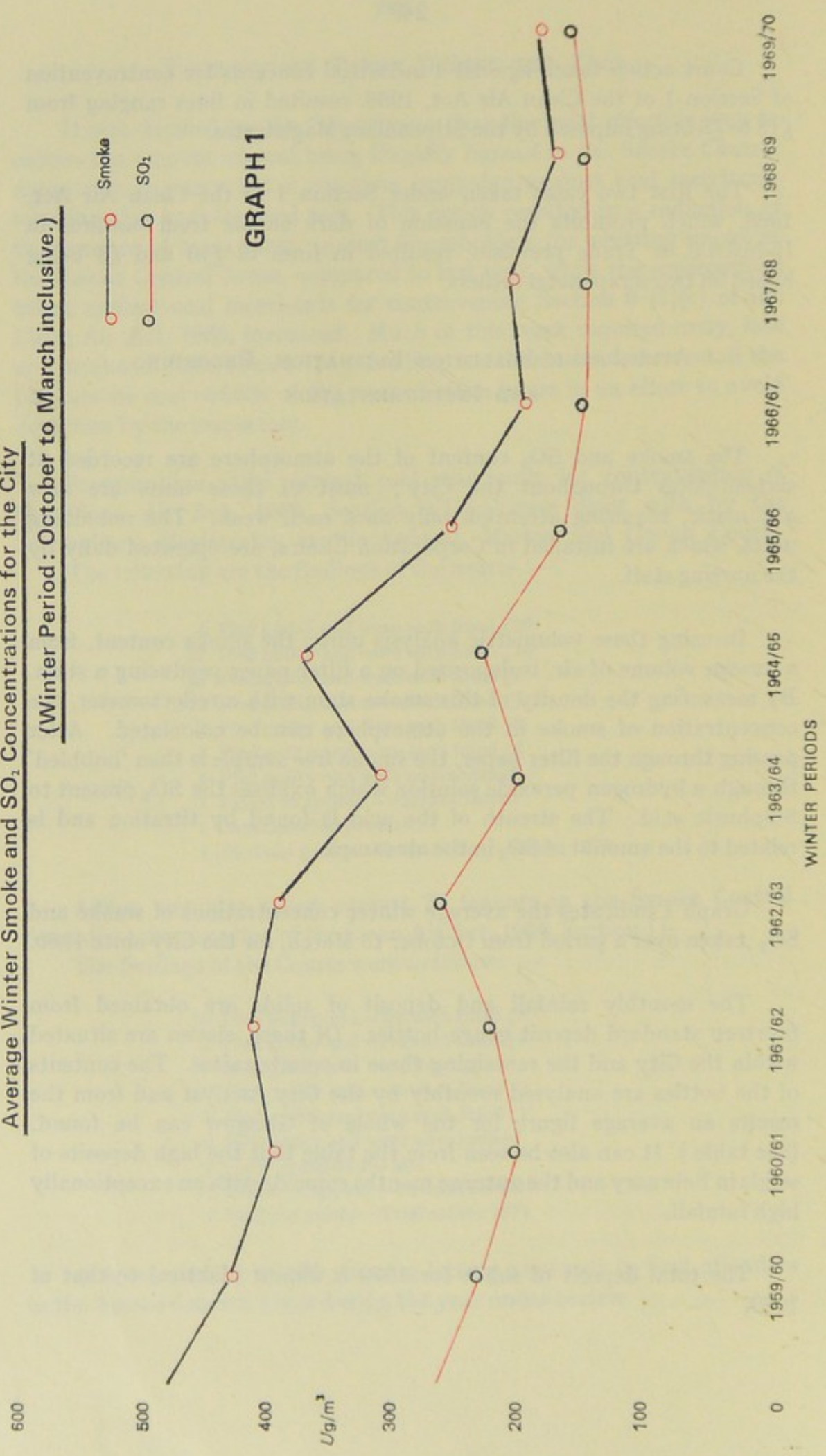
The total deposit of solids for 1970 is almost identical to that of 1969.

Average Winter Smoke and SO₂ Concentrations for the City

(Winter Period: October to March inclusive.)

Smoke
SO₂

GRAPH 1



A number of field tests were carried out during the year in the identification and measurement of impurities in the atmosphere which were causing local nuisance. In addition to this, data on air pollution was supplied to schools, universities and other interested parties researching in the subject.

EDUCATION ACTIVITIES—TRAINING OF OPERATIVES
EVENING COURSES IN BOILERHOUSE PRACTICE
AND SMOKE ABATEMENT

Following past procedure, all departments of the Corporation of Glasgow and Industrial firms within the City area were informed of the arrangements for the resumption of the classes. Adjoining Local Authorities, who have shown an interest in this course throughout the years, were also notified.

The 55th Session, under the joint auspices of the Corporation of Glasgow Health Department and the Scottish Division of the National Society for Clean Air commenced on the 27th October, 1970 and concluded on the 8th April, 1971. The fee for the course remained at 7s. 6d. Two lectures were given each week, on Tuesdays and Thursdays, between the hours of 7.30 p.m. and 9.15 p.m.—a total of 40 for the course. During the session technical officers from the Esso Petroleum Co. Ltd. and the Scottish Gas Board, each gave a lecture to the class on their respective fuels. Two evenings were given to technical films dealing with such subjects as "Clean Air," "Operation of Mechanical Stokers." and "Oil Firing." Class visits were also made to Dalnarnock Power Station and Provan Gas Works.

The total enrolment for the class was disappointing, viz.—22. With the advent of more specialised day release classes for boiler operators, there has been a steady fall off in the number coming forward for evening classes in this subject. The Technical Colleges in the City have been unable to run an evening class for boiler operators for some time now, due to the lack of interest.

The class examination was held on 13th April, 1971, between the hours of 7.00 p.m. and 9.30 p.m., in the Lecture Room, Health Department, 20 Cochrane Street, Glasgow, C.1. A total of 13 candidates came forward resulting in three in the Advanced Class and nine in the Ordinary Class being awarded merit certificates. The pass mark was 50 per cent.

CLEAN AIR ACT, 1956 — SMOKE CONTROL AREAS.

Area.	Date of Order.	Date of Approval by Secretary of State.	Order comes into Force.	Acreage.	No. of Industrial Premises.	No. of Commercial Premises.	No. of Dwellings.	No. of Other Premises.
Central	11th Dec., 1958	15th Apr., 1959	15th Oct., 1959	201	420	3,546	253	34
Central No. 2 (Extension West of Central)	24th Dec., 1959	29th Mar., 1960	15th Oct., 1960	160	113	2,154	634	45
Central No. 3 (Extension East of Central)	24th Dec., 1959	29th Mar., 1960	15th Oct., 1960	91	48	341	1,436	15
Pollokshaws	24th Dec., 1959	29th Mar., 1960	15th Dec., 1960	2,794	36	85	10,620	203
Pollokshields	9th June, 1960	26th Apr., 1961	15th May, 1962	1,239	22	252	3,856	81
Pollokshields (No. 2)	22nd Dec., 1960	29th Aug., 1961	30th Sept., 1962	2,010	3	54	6,823	49
Provan	21st Dec., 1961	4th Apr., 1962	15th May and 16th Aug., 1963	4,845	40	185	21,472	66
Craigton	20th Dec., 1962	27th May, 1964	30th Sept., 1965	1,566	29	244	12,525	87
Shettleson and T'cross	29th Apr., 1963	24th Oct., 1963	30th Sept., 1964	610	19	53	5,120	20
Dennistoun	19th Dec., 1963	17th March, 1965	31st Oct., 1966	689	38	495	8,518	74
Cathcart (No. 1)	10th Sept., 1964	12th March, 1965	31st Aug., 1966	641	4	387	5,260	57
Cathcart (No. 2)	10th Sept., 1964	12th March, 1965	31st Aug., 1966	2,096	3	300	13,912	36
Pollokshaws (No 2)	10th Sept., 1964	6th June, 1966	31st Aug., 1967	288	Nil	39	1,931	7
Camphill	23rd Dec., 1965	30th Aug., 1966	30th Nov., 1967	481	16	761	8,155	143
Govanhill	23rd Dec., 1965	30th Aug., 1966	30th Nov., 1967	365	10	587	9,565	29
Langside	23rd Dec., 1965	30th Aug., 1966	30th Nov., 1967	801	10	495	9,614	192
Knightswood (No. 1)	15th Sept., 1966	23rd Aug., 1967	30th Sept., 1968	544	12	87	3,944	85
Knightswood (No. 2)	15th Sept., 1966	23rd Aug., 1967	30th Sept., 1968	1,070	5	162	10,041	222
Whiteinch	12th Aug., 1968	28th Oct., 1968	31st Oct., 1969	790	30	324	6,759	105
Fairfield	12th Aug., 1968	28th Oct., 1968	31st Oct., 1969	1,299	63	151	4,034	64
Yoker	22nd July, 1969	1st Oct., 1969	31st Oct., 1971	1,213	37	185	11,034	291
Kelvinside	21st Sept., 1970			1,160	17	498	8,551	549

AVERAGE DEPOSIT OF EACH ELEMENT OF ATMOSPHERIC POLLUTION FOR EACH MONTH OF 1970
ENGLISH TONS PER SQUARE MILE

	Month	Rainfall in millimetres	INSOLUBLE MATTER						Included in Soluble			TOTAL SOLIDS					
			Tar	Carbonaceous less Tar	Ash	Total Insoluble Matter	Total Soluble Matter	% SO ₄ Sulphate	% Cl. Chloride	Total Solids, 1970	1969	1968	1967	1966	1965	1964	
Mean of 13 Stations	January	84.85	0.29	1.93	8.09	10.29	9.59	1.91	0.70	15.86	17.35	28.44	11.57	21.37	20.86	19.25	
Mean of 14 Stations	February	108.07	0.26	4.20	8.62	13.37	9.13	1.77	3.13	22.50	10.67	8.73	18.38	23.62	10.11	14.22	
Mean of 14 Stations	March	51.57	0.25	3.38	5.53	9.17	3.23	0.89	0.95	12.41	13.11	20.92	23.34	15.63	24.51	20.09	
Mean of 14 Stations	April ...	79.14	0.22	2.33	4.52	7.20	2.79	0.99	0.53	9.99	10.68	9.45	11.56	12.17	16.99	21.38	
Mean of 14 Stations	May ...	37.64	0.18	2.70	4.65	7.55	3.98	1.05	0.48	11.53	11.30	14.21	13.76	16.42	11.37	13.50	
Mean of 13 Stations	June	66.00	0.28	4.67	6.70	11.87	4.59	0.98	0.49	16.47	13.04	9.14	12.52	14.85	15.01	14.87	
Mean of 14 Stations	July ...	76.14	0.23	1.41	2.12	3.76	2.78	0.68	0.40	6.54	6.83	8.29	6.62	9.10	10.35	12.96	
Mean of 14 Stations	August	86.78	0.13	1.69	1.84	3.65	2.78	1.21	0.26	6.44	8.27	7.94	7.72	14.74	13.37	16.49	
Mean of 13 Stations	September	124.85	0.18	1.36	1.69	3.36	6.27	1.04	0.93	8.94	9.66	17.06	6.76	11.14	13.52	12.71	
Mean of 14 Stations	October	108.64	0.16	1.70	2.44	4.29	6.63	1.23	2.12	10.92	11.29	12.27	17.79	13.18	19.79	16.56	
Mean of 14 Stations	November	202.43	0.19	2.54	4.10	6.82	10.30	2.22	3.44	17.12	13.46	12.03	9.20	27.78	13.80	18.80	
Mean of 14 Stations	December	61.78	0.09	1.84	2.21	4.15	4.05	0.72	1.19	8.20	14.78	9.70	9.86	17.73	20.27	18.35	
Yearly Deposit in Tons per square mile		1,087.89	2.46	29.75	52.51	85.48	62.12	14.69	14.62	146.92	140.44	158.18	149.08	194.73	189.95	199.18	
Monthly Mean of all Gauges		90.66	0.20	2.48	4.37	7.12	5.18	1.22	1.22	12.24	11.70	13.18	12.42	16.23	15.83	16.60	

SECTION XII

SANITARY SERVICES

The continuing impetus of slum clearance and rehabilitation of the older houses takes up a considerable part of the inspectors' working day, leaving other duties to be carried out according to the priority of the time. Nevertheless, despite the work load on housing, the number of public health nuisances abated has been maintained. This I may say against reasonable predictions that as the slums are cleared, the nuisance potential should drop.

Other duties, particularly regarding Offices, Shops and Railway Premises and Food Hygiene inspections, are still not able to be undertaken as frequently as is necessary to maintain a high standard in all premises due to the shortage of staff.

PUBLIC HEALTH (SCOTLAND) ACT, 1897

During the year, some 59,065 nuisances were abated and in one hundred and ninety instances court action required to be initiated to have the nuisance abated.

The following tables show the position in each public health division in respect of nuisance conditions in the City.

TABLE I
NUMBER OF NUISANCES ABATED DURING 1970
IN DIVISIONS

Central Division ...	9,415
Northern Division ...	20,347
Eastern Division ...	13,804
South-Eastern Division	4,762
South-Western Division	10,737
Total	<u>59,065</u>

TABLE II
DETAILS OF COURT PROCEEDINGS IN TERMS OF THE
PUBLIC HEALTH (SCOTLAND) ACT, 1897, DURING 1970

Division	Number of Nuisances Submitted to Sheriff Court	Number Decided in favour of Pursuer	Number Unsuccessful	Number Continued	Costs	Expenses
Central	53	35	1	17	£274-69	£157-50
Northern	111	140	—	33	£3,900-12	£795-90
Eastern	11	7	—	4	£1,025-65	£78-75
South-Eastern ...	3	1	—	2	—	£5-25
South-Western	12	9	—	3	£1760-26	£115-50
Total	<u>190</u>	<u>192</u>	<u>1</u>	<u>59</u>	<u>£5,960-72</u>	<u>£1,152-90</u>

THE GLASGOW CORPORATION ORDER CONFIRMATION ACT, 1959

There was a decrease during the year of 893 in the number of notices issued. The statutory action taken in terms of this act is necessary to enable choked drains to be cleared within the prescribed period. The cost of clearing choked drains is increasing year by year and in some cases where a street opening is involved, this could mean several hundred pounds in expenditure.

The following table reveals the position in the Divisions.

TABLE III
ACTION TAKEN UNDER THE GLASGOW CORPORATION
ORDER CONFIRMATION ACT, 1959, DURING 1970

Division	Number of Notices Issued	Cleared by Owner within Statutory Period		Cleared by Corporation	
		No.	Percentage	No.	Percentage
Central	1,594	1,072	67	537	33
Northern	4,874	3,866	80	999	20
Eastern	4,144	3,691	89	453	11
South-Eastern	1,307	1,081	83	226	17
South-Western	2,470	2,347	95	123	5
Total	14,389	12,057	82.8	2,338	17.2

THE HOUSING (SCOTLAND) ACTS, 1966-69

During the year some 5,312 houses were subject to Closing and Demolition Orders and a further 1,046 houses designated in Treatment Areas for demolition. This gives a total of 6,358 houses for condemnation and is an increase on the figures for each of the two preceding years.

In addition, some 1,129 houses were submitted to and approved by the Corporation in Treatment Areas for the improvement or rehabilitation of the houses. The number of houses condemned, therefore, over the period 1968, 1969 and 1970 totalled 18,399 which represents more houses condemned than in the twenty-two year period between 1917 and 1939. Remarkable progress indeed!

The report of the Glasgow Working Party on Housing was published during the year and set a target over the next ten years. If, therefore, the slum clearance target is maintained over the next decade and is accompanied by a programme of rehabilitation, then at long last the problem of slum housing in the City will be within manageable proportions. Although it is proposed to survey some 60,000 houses during 1971 to find out if they are above or below the tolerable standard,

the statistics on housing indicated later in this report reveal that the houses with outside water closets are now just under 10 per cent of the total housing stock in the City.

Unfortunately, the evidence of dereliction created by the slum clearance programme does not present a good image, but seems to be inevitable. One could say that it is a price that has to be paid for progress

The main practical problems in clearing slums after representation are (1) rehousing of families, and, (2) time taken to demolish the property after the last tenant has been rehoused. The clearance of properties quickly after condemnation is of major importance for maintenance of essential services such as restoring water supplies, clearing choked drains and sealing houses against unauthorised entry, falls on the Department. Correspondingly maintenance costs chargeable to the Department are rising each year. On average, it is taking at least one year to clear a tenement and thereafter if the property is the subject of a Demolition Order, a further six weeks must elapse after the last tenant is rehoused before steps can be taken to initiate demolition procedure. A speed up in the rehousing of tenants is desirable. Closing orders on houses in tenements present the problem when it is not possible to demolish the tenement because of the business premises. Invariably such properties become dangerous in time and are demolished through the Master of Works.

In terms of the Housing (Scotland) Act, 1969, it is now possible to make Treatment Areas for demolition of houses subject to closing Orders and this procedure was adopted in the Hutchesontown/Polmadie Area as a tidying up process.

RENT QUALIFICATION CERTIFICATES

This is a completely new attitude towards increasing rents in houses, and means that on successful application to the Local Authority a landlord may apply to the Rent Office to change a "controlled tenancy" to a "regulated tenancy" and apply for a "Fair Rent". As a result, the landlord is allowed to phase in an increase in rent over a number of years.

Before commenting further on this aspect of the Act, Rent Restriction, as it was previously known, has been one of the principal factors in the deterioration of property over a period of fifty years. Little wonder with the inflationary spiral in the economy after the second World War, rents did not keep pace with maintenance costs and properties deteriorated beyond economic repair.

Some 8,495 applications were received in the Department during 1970 causing a further considerable work load on the staff on inspections.

TABLE IV
HOUSES DEALT WITH DURING 1970 UNDER HOUSING (SCOTLAND)
ACTS, 1966-69 DEAN OF GUILD ACTION OR BY CLOSURE
OR DEMOLITION

Division	Represented under Housing (Scotland) Act, 1969	Dealt with under Dean of Guild Procedure	Private Closures or Demolitions	Corporation Houses Closures or Demolition	Total
Central	451	81	118	255	905
Northern	2,668	183	12	757	3,620
Eastern	2,573	157	46	150	2,296
South-Eastern	349	82	19	784	1,234
South-Western	317	108	115	81	621
Total	<u>6,358</u>	<u>611</u>	<u>310</u>	<u>2,027</u>	<u>9,306</u>

TABLE V
RENT QUALIFICATION CERTIFICATES GRANTED AND
REFUSED DURING 1970

Division	Granted	Refused	Total Granted/ Refused	Total forms received
Central	50	587	637	1,650
Northern	14	385	399	536
Eastern	196	363	559	672
South-Eastern	631	1,163	1,794	4,273
South-Western	131	261	392	1,364
Total	<u>1,022</u>	<u>2,759</u>	<u>3,781</u>	<u>8,495</u>

TABLE VI
HOUSING STATISTICS AS AT 31ST DECEMBER, 1970

Division	Number of Standard Houses	Number of Sub- Standard 'A' Houses	Number of Sub- Standard 'B' Houses	Houses Unfit on existing 5 year list	Total
Central	51,200	10,073	2,378	1,544	65,195
Northern	40,815	8,984	3,020	8,886	61,705
Eastern	46,281	4,972	7,287	9,505	68,045
South-Eastern	56,552	4,745	6,162	1,030	68,489
South-Western	31,868	3,625	7,666	2,019	45,178
Total	<u>226,716</u>	<u>32,399</u>	<u>26,513</u>	<u>22,984</u>	<u>308,612</u>

Division	Total Number of Houses	Number of houses with internal water supply	Number of houses with internal water closet	Number of houses with external water closet	Number of houses with internal bath	Number of houses with out bath
Central	65,195	65,195	64,019	1,176	53,953	11,242
Northern	61,705	61,705	51,723	9,982	41,935	19,770
Eastern	68,045	68,045	54,945	13,100	46,806	21,239
South-Eastern	68,489	68,489	64,856	3,633	56,552	11,937
South-Western	45,178	45,178	41,463	3,715	33,155	12,023
Total	<u>308,612</u>	<u>308,612</u>	<u>277,006</u>	<u>31,606</u>	<u>232,401</u>	<u>76,211</u>

TABLE VII

CLOSING/DEMOLITION AND CLEARANCE OF PROPERTIES

Year	Closing Order	Demolition Order	Clearance Areas or Treatment Areas (Demolition)	Total
1945-49 ...	192	271	—	463
1950-59 ...	3,831	5,499	504	9,834
1960-69 ...	13,924	14,875	855	29,654
1970- ...	1,952	3,360	1,046	6,358
Total ...	<u>19,899</u>	<u>24,005</u>	<u>2,405</u>	<u>46,309</u>

TABLE VIII

HOUSING (SCOTLAND) ACT, 1969

TREATMENT AREAS FOR IMPROVEMENT DESIGNATED BY CORPORATION DURING 1970

Oatlands "Shawfield" Treatment Area	288 houses
Oatlands "Richmond" Treatment Area	351 houses
Old Swan Treatment Area	228 houses
Linthouse Treatment Area	192 houses
Brunton Street/Brunton Terrace Treatment Area	70 houses
	<u>1,129 houses</u>

TABLE IX

TREATMENT AREAS FOR DEMOLITION APPROVED BY CORPORATION DURING 1970

Elmfoot Treatment Area	244 houses
Hutchesontown/Polmadie Treatment Area	†172 houses
Maryhill Treatment Area No. 1	399 houses
Doncaster Street Treatment Areas Nos. 1, 2 and 3	403 houses
	<u>1,218 houses</u>
Net Total	1,046

† Previously dealt with as Closing Orders.

ABANDONED PROPERTIES

There was an increase of 9 in the number of properties recorded as abandoned during the year.

The following table reveals the position at the end of the year.

TABLE X
NUMBER OF HOUSES AND PROPERTIES
RECORDED AS ABANDONED

	Houses	Properties
Central Division	48	8
Northern Division	16	2
Eastern Division	61	13
South-Eastern Division	39	4
South-Western Division	36	6
	<hr/>	<hr/>
	200	33
	<hr/>	<hr/>

GLASGOW CORPORATION (GENERAL POWERS) ORDER CONFIRMATION
ACTS, 1960-62
BYELAWS MADE THEREUNDER

REDECORATION OF WALLS OF CLOSES AND STAIRS

Surveys of closes and stairs in tenements continued and during the year some 2,168 received attention.

TABLE XI
NUMBER OF CLOSES AND STAIRCASES
LIMEWASHED AND PAINTED

Division	As a Result of Notice	Voluntary by Owners	Total
Central	507	36	543
Northern	465	81	546
Eastern	273	150	423
South-Eastern	40	139	179
South-Western	301	176	477
	<hr/>	<hr/>	<hr/>
Total	1,586	582	2,168
	<hr/>	<hr/>	<hr/>

CLEANSING OF CLOSES AND STAIRS

New bye-laws were introduced during the year which enabled inspectors to overcome the anomaly in the previous bye-laws whereby owner/occupiers have the same obligation to cleanse closes and stairs with occupiers of rented houses. The new bye-laws are more flexible and allow for discretion on the part of the sanitary inspector.

COURT CASES

CORPORATION PROPERTY—

Number of Complaints received during 1970 involving tenants	...	...	155
Number of Cases where Rotation Cards were issued	...	...	161
Number of Tenants taken to Court	...	...	49
Result of Court Procedure	{ Successful	...	38
	{ Unsuccessful	...	2
Number of Court Cases Pending	...	...	9

PRIVATE HOUSING SECTOR

Number of Complaints recieved during 1970 involving occupiers	...	...	...	...	921
Number of Cases where Rotation Cards were issued	...	...	...	...	224
Number of occupiers taken to Court	...	...	...	...	5
Result of Court procedure	...	Successful	...	...	1
Number of Court Cases Pending	...	...	...	...	4

FARMED-OUT HOUSES

There was a decrease of four in the total number of Farmed-Out Houses registered in the City over the previous year. Towards the end of the year houses in multiple occupation were being surveyed with a view to declaring them as Farmed-Out Houses.

TABLE XII

Division	No. of Declared Farmed-out houses during year ended 31.12.70	No. of Farmed- out houses Regd. during year ended 31.12.70	No. of Farmed- out Houses deleted during year ended 31.12.70	Total No. on Register as at 31.12.70
Central ...	—	—	—	—
Northern ...	—	5	1	4
Eastern ...	—	5	2	3
South-Eastern	—	—	—	—
South-Western	—	—	—	—
Total	—	10	3	7

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

One of the main problems is the completion of general inspections. This is confined principally to the Central Division of the City where during the year some 978 general inspections were completed. This represents good progress in one year and it is hoped to maintain this figure during 1971.

New developments which are completed without prior approval of the Department cause irritation when the occupiers find themselves receiving contraventions which the developer should have corrected when the property was being built. This is understandable, but it is virtually impossible for the staff to give detailed objections to every plan going through the Dean of Guild Court. Again, in many instances, the developer builds virtually the shell of the building and does not know how it will ultimately be occupied. The transfer of the Post Office to a Public Trading Corporation has meant additional general inspections and revealed a large number of contraventions.

ACCIDENTS

There was a decrease in the number of accidents notified to the Department during the year, 229 compared to the 274 reported in 1969. Some 223 visits were made in respect of these accidents. The comparatively low total of notification suggests that all accidents are not reported. One accident of note which was investigated following a report in the press, was referred to the Procurator Fiscal and resulted in action being taken in terms of Section 17 (1). A young apprentice butcher was engaged in preparing ingredients for sausages and while operating the mincing machine, caught his left hand in the worm of the mincer, causing amputations through the proximal inter-phalangeal crease. The mincer involved was an Elcho-Minor 32, which has a feed opening of 5½ inches diameter and the worm is 6½ inches below the level of the food platform. It is normally guarded by a circular restriction plate having five 2 inch diameter openings to permit the use of a dumper. Investigation revealed that this plate had been cut, allowing access of the hand into the opening and being thus in contravention of Section 17 (1). The case, at which the defendant, pled "Not Guilty", was called on 2nd December, 1970, and trial fixed for 16th February, 1971.

HOIST AND LIFT REGULATIONS, 1968

During the year 175 contraventions were found and 152 remedied.

In the Central Division which has by far the largest number of lifts, 78 form F54's were received and some 39 lifts were notified as requiring repairs, renewals or alterations to be carried out immediately. In consequence the occupiers of 38 premises were advised to discontinue the use of the lift owing to repairs not having been carried out within the time stated and, in respect of two such notices, legal action had to be taken in the Sheriff Court in terms of Section 22 of the Offices, Shops and Railway Premises Act, 1963. In respect of both cases, orders were made by the Sheriff prohibiting the use of the lifts in question until repairs were carried out to the satisfaction of the Local Authority. Some difficulty was experienced during the year in that in some cases Insurance Engineers were including the absence of enclosure of lift shafts under item 5 F54 and stating mainly a time factor under the heading "immediate." This was finally resolved through the opinion of H.M. Deputy Chief Engineering Inspector. While this decision is accepted, nevertheless it would appear to be rather unusual as at least one of the cases submitted to the Sheriff Court in Glasgow concerned the absence of an enclosure in a lift shaft and the Sheriff accepted the statement by the Engineer to the effect that the absence of such an enclosure rendered

the lift in such a state that it could not be continued to be used with safety pending completion of the enclosure.

During 1969 in the Eastern Division, a lift was found to be in a dangerous condition and was removed from service by the owner. The same lift was treated in a like manner this year although no Form F54 had been received.

In another case, one of three lifts in a large warehouse was the subject of Form F54 from a competent person. In this case, the enclosure gate on the fourth floor could be opened while the cage was at a lower floor. Direct confrontation with the management resulted in the lift being put out of service.

Lift Engineers were in attendance the following day and while the engineer was replacing a fuse in another lift, the newly fitted lock catch on which he was working was removed and the contacts wedged in position, presumably by an employee. This lift is now out of service and the enclosure gates are wired in the closed position pending major alterations.

Regular visits are required to ensure that this lift is not brought back into service.

It was also noted during inspections throughout the City that many firms did not have form F54 available for inspection. Although most firms had arrangements for regular servicing by a lift engineer and kept records of these visits, they seemed to be singularly unaware of the necessity for reports on the prescribed form.

A recently constructed goods lift in a public house was found to have no form of enclosure or safety device and it was only after repeated visits and correspondence that it was put out of operation until the necessary alterations were made. Despite this, a Form F54 was not sent to the local authority and a copy was not available for inspection. This requirement is being enforced.

It is unfortunate that, apart from the submission of F54 Forms by competent persons to the local authority, the only other method of discovering the existence of lifts in premises covered by the Act, is by survey.

Statistics of the work done in terms of the Act during the year are as follows.

See attached tables, Offices, Shops and Railway Premises Act, 1963.

TABLES 13, 14, 15, 16, 17, and 18.

TABLE XIII
OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963
ANNUAL REPORT, 1970

	Class of premises—in Division						Totals	Analysis of Employees—in Division						Total
	C.	N.	E.	S.E.	S.W.	Totals		C.	N.	E.	S.E.	S.W.	Total	
Offices	242	28	29	12	16	327*	7,597	445	674	176	244	9,136*		
	3,696	348	575	480	318	5,417	66,455	5,823	5,024	4,585	4,255	86,142		
Retail Shops	310	10	15	39	8	382*	1,355	57	57	214	21	1,704*		
	2,117	1,078	1,215	1,349	837	6,596	23,430	4,416	5,151	6,806	3,128	42,731		
Wholesale Shops or Warehouse	11	6	16	1	6	40*	181	99	191	3	301	775*		
	474	58	181	102	65	880	8,998	1,087	2,158	1,099	2,146	15,488		
Catering	41	8	1	8	1	59*	398	124	12	52	3	589*		
	425	185	268	208	178	1,264	6,953	1,422	1,938	1,483	953	12,749		
Canteens	—	—	—	—	—	—	63	2	8	—	—	73*		
	10	6	3	—	1	20	1,111	173	69	52	—	1,410		
Fuel Stores	1	—	—	—	—	1*	4	—	—	—	—	4*		
	1	1	—	—	1	3	26	5	27	1	—	79		
Totals	605	52	61	60	31	809*	9,598	727	942	445	569	12,281*		
	6,723	1,676	2,242	2,139	1,400	14,180	106,973	12,926	14,367	13,826	10,507	158,599		
						Males ...	5,611	461	566	168	362	7,168*		
						Females ...	48,054	6,461	6,779	6,001	4,851	72,146		
							3,987	266	376	277	207	5,113*		
							58,919	6,465	7,588	7,825	5,656	86,453		
							141,180	—	Total premises	Total employees—158,599				

* New Registrations, 1970
(Included in totals)

TABLE XIV
OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963
CITY RETURN. CONTRAVENTIONS FOUND DURING 1970. ALL DIVISIONS

Sec.	Offices			Retail Shops			Wholesale Shops or Warehouses			Catering Establishments open to the public			Canteens			Fuel Stores			Common Parts			Grand Total																																
	C.	N.	E.	C.	N.	E.	C.	N.	E.	C.	N.	E.	C.	N.	E.	C.	N.	E.	C.	N.	E.																																	
4	127	16	2	2	6	153	262	67	6	52	8	395	36	4	5	1	1	47	38	319	1	3	361	1	1	2	2	11	2	13	972																							
5	5	—	—	—	5	1	2	—	—	—	—	3	6	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17																							
6	183	16	4	5	4	212	467	26	16	58	7	574	19	6	12	2	4	43	65	40	—	8	1	114	4	—	4	3	3	—	2	952																						
7	260	36	8	8	7	319	371	20	16	82	8	497	26	22	3	2	3	56	21	21	—	8	—	50	—	—	—	1	1	—	1	924																						
8	443	74	1	—	2	520	829	51	3	4	1	888	61	30	4	—	1	96	115	115	—	1	2	233	—	—	—	4	4	18	—	1,759																						
9	418	75	17	28	13	551	669	48	23	148	59	947	42	20	12	—	5	79	101	221	—	4	6	332	2	1	3	5	5	167	2	169	2,086																					
10	502	56	4	3	7	572	715	40	14	59	6	834	38	15	8	—	—	61	94	122	—	3	—	219	1	1	2	5	5	71	2	73	1,766																					
11	207	34	—	2	—	243	354	24	1	15	—	394	17	8	—	—	1	26	12	42	—	—	—	54	—	—	—	3	3	—	—	720																						
12	36	34	1	2	—	73	139	12	3	7	1	162	1	5	2	—	—	8	4	13	—	2	—	19	—	—	—	2	2	—	1	1	265																					
13	3	1	—	—	—	4	51	12	3	13	—	79	—	1	—	—	—	2	21	73	—	—	—	94	1	—	1	—	—	—	—	180																						
14	308	23	3	1	—	335	47	5	—	1	—	53	6	4	—	—	—	10	5	3	—	—	—	8	1	—	1	1	1	—	—	408																						
15	28	5	—	—	—	33	186	7	—	2	—	195	8	—	—	—	—	8	2	1	—	—	—	3	—	—	—	2	2	—	—	241																						
16	139	60	14	10	20	243	373	15	16	57	34	495	22	23	12	1	9	67	103	144	—	7	27	281	—	1	1	1	1	13	2	15	1,103																					
17	—	4	—	—	2	6	13	—	1	3	1	18	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	25																						
19	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1																					
22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																					
23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1																				
24	142	15	5	8	1	171	312	19	7	55	3	396	12	4	3	2	—	21	50	36	—	9	5	100	5	—	5	2	2	—	1	1	696																					
50	174	19	7	10	8	218	338	22	22	47	19	448	12	4	6	2	6	30	63	52	—	10	10	135	1	1	2	2	2	—	1	1	836																					
Totals																						2,975	468	66	79	70	3,658	5,127	370	131	603	149	6,380	306	146	68	11	31	562	695	1,203	—	53	54	2,005	15	5	20	33	33	280	14	294	12,952
																						3,658			6,380			562			2,005			20			33			294			12,952											

TABLE XV
OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963
CITY RETURN. CONTRAVENTIONS REMEDIED DURING 1970. ALL DIVISIONS

Sec.	Offices			Retail Shops			Wholesale Shops or Warehouses			Catering Establishments open to the public			Fuel Stores		Common Parts																													
	C.	N.	E.	C.	N.	E.	C.	N.	E.	C.	N.	E.	Total	C.	Total	C.	Total																											
4	9	11	5	1	5	31	42	12	23	13	17	107	6	1	1	9	6	102	1	2	111	—	—	—	—	258																		
5	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1																	
6	13	10	15	1	2	41	96	7	38	21	12	174	—	1	3	7	7	13	4	3	4	31	—	—	—	—	253																	
7	15	8	14	—	3	40	58	6	35	12	11	122	1	3	1	2	7	1	4	2	—	1	8	—	—	—	177																	
8	35	21	3	—	—	59	124	5	4	1	2	136	4	3	1	—	8	4	29	—	2	35	—	—	—	—	238																	
9	26	20	22	6	3	77	84	11	56	31	37	219	2	6	5	2	15	2	34	4	2	11	53	—	—	—	365																	
10	29	19	15	1	3	67	93	9	26	11	12	151	—	7	2	2	11	3	31	—	1	35	—	—	—	—	265																	
11	16	13	—	—	1	30	51	4	1	—	1	57	1	3	—	4	2	8	—	—	—	10	—	—	—	—	101																	
12	4	2	3	1	—	10	19	2	4	1	4	30	—	2	—	2	—	2	—	—	—	2	—	—	—	—	44																	
13	—	1	—	—	—	1	8	3	5	4	2	22	—	—	—	—	4	11	—	—	—	15	—	—	—	—	38																	
14	16	3	2	—	—	21	7	—	—	—	7	1	—	1	—	2	—	—	—	—	—	—	—	—	—	—	30																	
15	—	—	—	—	—	—	24	2	—	—	26	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	27																	
16	15	17	16	2	6	56	75	4	25	7	32	143	8	2	9	1	20	14	24	2	—	47	87	—	—	—	306																	
17	1	—	—	—	2	3	2	—	—	—	1	3	—	—	1	—	1	—	—	—	—	—	1	—	—	—	8																	
19	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																
22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																
23	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																
24	16	8	9	1	1	35	68	4	28	16	13	129	4	2	4	2	12	4	13	5	3	1	26	—	—	—	—	202																
50	19	10	16	1	3	49	56	4	31	11	22	124	—	2	4	—	8	5	12	5	2	12	36	—	—	—	—	217																
Totals																	214	143	121	14	29	521	808	73	276	128	166	1451	28	32	32	15	107	52	283	24	11	80	450	—	—	—	2	2
																	521			1,451			107			450						2			2,531									

TABLE XVIII

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

NOTIFIABLE ACCIDENTS—FORMS O.S.R.2 RECEIVED
AND VISITS MADE 1969

Type of Premises	Quarters of year	C.		N.		E.		S.E.		S.W.		Total Accidents	Total Visits
		Forms	Visits	Forms	Visits	Forms	Visits	Forms	Visits	Forms	Visits		
Offices	1	7	7	1	1	—	—	—	—	1	1	9	9
	2	17	17	3	3	1	—	—	—	1	1	22	21
	3	16	16	2	2	—	—	1	1	—	—	19	19
	4	17	17	1	1	—	—	1	1	1	1	20	20
	Total	57	57	7	7	1	—	2	2	3	3	70	69
Shops	1	18	18	1	1	1	1	2	2	—	—	22	22
	2	16	16	3	3	3	2	3	3	—	—	25	24
	3	13	13	1	1	1	1	2	2	1	1	18	18
	4	13	13	1	1	1	1	1	—	3	3	19	18
	Total	60	60	6	6	6	5	8	7	4	4	84	82
Wholesale Dept. or Warehouse	1	3	3	6	6	—	—	1	—	2	2	12	11
	2	—	—	3	3	3	2	2	2	—	—	8	7
	3	2	2	1	1	1	1	3	3	4	4	11	11
	4	3	3	2	2	2	2	1	—	—	—	9	7
	Total	8	8	12	12	6	5	7	5	6	6	39	36
Catering Establ's	1	7	7	—	—	—	—	—	—	1	1	8	8
	2	4	4	—	—	—	—	—	—	—	—	4	4
	3	3	3	—	—	1	1	—	—	—	—	4	4
	4	4	4	—	1	—	1	1	1	2	2	8	8
	Total	18	18	—	—	2	2	1	1	3	3	24	24
Staff Canteens	1	2	2	1	1	—	—	—	—	—	—	3	3
	2	1	1	—	—	—	—	—	—	—	—	1	1
	3	3	3	1	1	1	1	—	—	—	—	5	5
	4	3	3	—	—	—	—	—	—	—	—	3	3
	Total	9	9	2	2	1	1	—	—	—	—	12	12
Fuel Depots	1	—	—	—	—	—	—	—	—	—	—	—	—
	2	—	—	—	—	—	—	—	—	—	—	—	—
	3	—	—	—	—	—	—	—	—	—	—	—	—
	4	—	—	—	—	—	—	—	—	—	—	—	—
	Total	—	—	—	—	—	—	—	—	—	—	—	—
Totals	...	152	152	27	27	16	13	18	15	16	16	229	223

FOOD HYGIENE (SCOTLAND) REGULATIONS 1959-61

The inspection of food premises in terms of the above Regulations is so important if we are to obtain increased standards but, due to the priorities of other duties, it is not possible to inspect every premises in the City in one year.

Apart from the continual improvement which is taking place in food premises through action by the Department more has to be done in the education of the food handler on his duties if we are to match the structural and equipment progress with food hygiene techniques.

There was a slight decrease in the number of food premises in the City, and only just over one quarter of the premises were inspected.

During the year, three separate cases came before the Sheriff involving 42 charges, the defendants were fined £222 on 33 charges and admonished on 9 charges.

The number of food premises and inspections and visits carried out by the five divisions are as follows.

TABLE XIX

Division	No. of Premises in Division	No. of Premises Inspected	No. of Visits
Central	1,155	139	508
Northern	503	120	514
Eastern	881	73	201
South-Eastern	1,009	450	536
South-Western	498	318	559
Total	4,046	1,100	2,318

FACTORIES ACT, 1961

The number of factories on the register at the end of the year decreased slightly over the previous year. Because of other duties, it was not possible to complete the inspections of all factories during the year. The following table reveals the distribution of factories throughout the City.

TABLE XX

Division	Number of Premises Registered at 31.12.70				Number of Inspections			
	Mech.	Non-Mech.	Building Operations or Works of Engineering Construction	Total	Mech.	Non-Mech.	Building Operations or Works of Engineering Construction	Total
Central	1,064	35	28	1,127	397	22	28	447
Northern	362	8	39	409	328	8	39	375
Eastern	529	40	5	574	552	49	10	611
South-Eastern	368	25	17	410	336	20	17	373
South-Western	399	13	10	422	425	14	20	459
Port	1	18	—	19	4	47	—	51
Total	2,723	139	99	2,961	2,042	160	114	2,316

DRAINAGE

There were no radical changes or items of note during the year other than the fact that the use of plastic pipes is increasing year by year.

TABLE XXI

Divisions				Number of Applications Dean of Guild	Number of Tests to Old Tenement Drains	Number of Con- sultations Re Drainage Schemes
Central	...	...	...	835	—	1,139
Northern	...	...	...	823	—	288
Eastern	...	...	...	293	—	183
South-Eastern	...	...	...	954	1	332
South-Western	...	...	...	364	—	364
Total	...	...	...	<u>3,269</u>	<u>1</u>	<u>2,306</u>

RAG, FLOCK AND OTHER FILLING MATERIALS ACT, 1951

At the end of the year there was a reduction of ten in the number of premises registered. The number of licensed premises remains the same as in the previous year.

TABLE XXII

Division				Registered Premises	Licensed Premises
Central	...	...	...	4	1
Northern	...	...	...	3	—
Eastern	...	...	...	9	1
South-Eastern	...	...	...	6	—
South-Western	...	...	...	16	—
Total	...	...	...	<u>38</u>	<u>2</u>

AGED AND INFIRM PERSONS

The continued vigilance by members of the staff in visiting the aged on the Department's register is essential in this age if tragic circumstances are to be avoided as there is a feeling among some old

folk who are alone that they have nothing in common with society. In these days of ever increasing costs, it must be very difficult for old people who are alone and have only the financial support of the State pension.

TABLE XXIII

Division	Males	Females	Total	Houses Cleaned	Compas- sionate Washings
Central	810	1,688	2,498	80	1,276
Northern... ..	646	1,463	2,109	34	1,729
Eastern	750	1,609	2,359	61	1,687
South-Eastern ...	477	1,219	1,696	122	388
South-Western ...	377	951	1,328	22	82
Total	<u>3,060</u>	<u>6,930</u>	<u>9,990</u>	<u>319</u>	<u>4,862</u>

NOISE ABATEMENT

There was nothing unusual to report on noise complaints during the year. The pattern of noise complaints remain the same, namely punematic drills, compressors, mechanical fans in shops below houses and refrigerating machinery, particularly in butchers' shops.

There was a decrease of twenty-four in the number of noise complaints received in the Department from the previous year and are recorded in divisions as follows.

TABLE XIV

LIST OF VARIOUS COMPLAINTS UNDER HEADINGS

	Central	Northern	Eastern	South Eastern	South Western	Total
Industrial ...	23	3	3	3	5	37
Commercial ...	4	3	2	3	4	16
Dwelling Houses	5	—	—	—	—	5
Others ...	—	1	—	1	1	3
Total ...	<u>32</u>	<u>7</u>	<u>5</u>	<u>7</u>	<u>10</u>	<u>51</u>

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, 1970

THE IMPORTED FOOD (SCOTLAND) REGULATIONS, 1968

Containerisation played a more prominent role in the work of the Section this year, 1,510 containers being received. Their contents varied from bubble gum to fruit cocktail and fresh fruit.

The Public Analyst examined 543 samples of which 37 gave adverse reports—flour showed minor deficiencies in chalk, potato crisps showed errors in labelling, one can of meat showed excess lead. Two samples contained sorbic acid which is a non-permitted preservative in the products concerned.

The City Bacteriologist examined 91 samples from which no adverse report was received.

THE SAUSAGE AND OTHER MEAT PRODUCT (SCOTLAND) REGULATIONS,
1967

This year the survey was switched from Meat Pies and Sausage Rolls to the meat content in sausages. Two hundred and thirty-two samples were procured—160 beef, 65 pork and 7 various. Two beef sausages and twenty pork sausages were deficient in meat content. Letters of advice indicating the amount of deficiency were sent to those concerned. These regulations have no bearing on the quality of meat used.

The large sausage manufacturers are more able to comply with the regulations, in respect, that they employ a quality control officer, whereas the private butcher can make a perfectly good and palatable sausage by estimating the lean and fat content and the resultant product acceptable to his customers.

THE FOOD AND DRUGS (SCOTLAND) ACT, 1956
INSPECTION OF FOOD AND FOOD PREMISES

Ten thousand, one hundred and forty-two visits were paid to premises during which 1,805 lots of food were examined, which amounted to 335 tons, 19 cwt. 8lb., 163 tons, 13 cwt. 89½ lb. more than last year.

A heavier responsibility was placed on inspectors due to the increase in the number of containers bringing food to various ports throughout the country, and from the container depots to warehouses and wholesalers throughout the city.

THE FOOD AND DRUGS (SCOTLAND) ACT, 1956, SECTION 9
SUSPECTED FOOD

The number of complaints reached an all time record of 605. Some of these are worthy of comment :—

1. A larder beetle was found in a paper bag of sugar, but when the house was inspected larder beetles were found there.
2. Another complaint involving sugar was the finding of salt being present. This one remains unresolved.
3. A glass-like substance was found in a can of Tuna fish. This, of course, was simply magnesium ammonium phosphate which occurs in stored salmon and tuna fish and is quite harmless.
4. A turkey cooked at Christmas time appeared to be contaminated with phenols. It was considered that the contamination may have been absorbed by the turkey from a chemical oven cleaner but this was proved not to be the case, only steel wool and soap having been used in the cleaning of the oven. Other poultry in the shop were free from phenols.
5. Complaint was made of cracked crockery in a restaurant, but when the attention of the management was directed to this incident it was learned that crockery of rather poor quality had been used as a stand by until the order for the proper crockery arrived.

Other complaints followed the usual pattern, many of which were quite unfounded.

THE FOOD AND DRUGS (SCOTLAND) ACT, 1956

TABLE SHOWING NATURE AND NUMBER OF TOTAL SAMPLES
PROCURED AND EXAMINED DURING 1969

Article	Informal		Formal	
	Number Taken	Number Non-Genuine	Number Taken	Number Non-Genuine
Baking Powder, Golden Raising Powder	2	—	1	—
Bread	2	—	—	—
Butter	3	—	16	—
Cheese (including spreads and processed cheese)	20	3	11	—
Coffee (including essences and mixtures)	4	—	2	—
Cream (including single, double and sterilised)	192	16	—	—
Dried and Preserved Fruit ...	9	—	31	—
Fish Cakes	—	—	—	—
Fish Pastes and Spreads	9	—	8	—
Flour and Self-Raising	—	—	5	—
Flour Mixtures (cake, pudding, sponge mixtures and cake flour)	22	—	23	—
Fruit Conserves (e.g., tinned and bottled fruit)	18	—	2	—
Gelatine	—	—	—	—
Ice Cream	258	5	8	—
Ice Lollies	1	1	—	—
Jams, Jellies and Fruit Curds ...	18	—	12	—
Margarine	4	—	4	—
Meat Pies, Pastries and Sausage Rolls	3	—	—	—
Meat Pastes and Spread (chopped and potted)	27	—	5	—
Milk (excluding dried, condensed, evaporated and flavoured, etc., milk)	1,529	15	502	2
Milk (condensed and dried) ...	8	—	1	—
Mince	34	16	98	38
Saccharin	1	—	—	—
Salad Cream and Mayonnaise ...	1	—	1	—
Sausage and Sausage Meat ...	257	62	74	6
Soft Drinks (excluding fruit juices)	37	5	1	—
Spices and Condiments	83	3	28	—
Spirits	—	—	6	1
Suet	1	—	—	—
Sugar and Confectionery	22	3	8	—
Synthetic Cream	—	—	—	—
Table Jellies	40	—	6	—
Tomato Ketchup and Sauces ...	3	—	—	—
Other Articles (including all articles not named above)	471	28	181	5
	<u>3,079</u>	<u>157</u>	<u>1,036</u>	<u>52</u>

THE MILK AND DAIRIES (SCOTLAND) ACT, 1914
THE MILK (SPECIAL DESIGNATIONS) ACT, 1949, AND
THE MILK (SPECIAL DESIGNATIONS) (SCOTLAND) ORDER, 1965-66

There are now 1,759 premises on the dairy register compared with 1,806 last year. This figure includes 15 producers, 9 creameries, 14 retailers holding supplementary licences and 1,721 retailers.

The average number of cows kept over the year was 421 although there is accommodation for 833 in the fifteen remaining byres. Visits of inspection and sampling numbered 183.

The number of visits of inspection paid to dairy premises totalled 4,843 when hygienic conditions were noted and intimations under the Hygiene Regulations issued where necessary.

Formal and informal samples amounted to 2,031. The average fat and solids-not-fat were 3.53 and 8.74 per cent respectively. Designated milk samples examined during the year totalled 1,021.

The *Ultra High Temperature* milk plant continued to operate satisfactorily, although two samples of the 25 samples taken failed because of minor deficiencies in fat content. The average content was 3.52 per cent fat and 8.71 per cent solids-not-fat. Some U.H.T. milk and cream was exported to the Middle East.

No *Sterilised Milk* is processed in the city and none was received

Standard Milk—Eighty-four samples were obtained and examined and gave readings of 4.08 and 8.80 per cent respectively.

Pasteurised Milk—The average fat content was 3.72 per cent and non-fatty solids 8.79 per cent. These figures compare favourably with those of previous years.

MILK SUPPLIED TO HOSPITALS OF THE
REGIONAL HOSPITAL BOARD

	Examined	Failed
" Premium " 	—	—
" Standard " 	3	—
" Pasteurised " 	277	65
	280	65
	280	65

Milk for School Children—Pasteurised milk only is supplied to the city schools and as last year by four contractors. Eighty samples were examined in terms of the Milk (Special Designations) Order. Ten

failed the coliform test while eight samples were subjected to the biological test—all gave negative results. The total consumption was 93,050 gallons. The quality was maintained, 3·73 and 8·73 per cent fat and solids-not-fat respectively.

Milk Dispensing Machines—One hundred and twenty-two samples were examined of which 56, or 45·90 per cent, failed the coliform test prescribed in the 1965 Order for Pasteurised milk. These results show a slight improvement on previous years.

Dairy Cream—Food Standards (Cream) Order, 1951

There were 302 samples of dairy cream examined bacteriologically and 48 of these were considered unsatisfactory because of high count (over 50,000 per gram) and/or the presence of coliform organisms. In addition 192 were examined in terms of the Order; 16 failed to conform because of minor deficiencies of fat. The figure of 192 is higher than last year while the failures are slightly fewer.

The results of all samples were reported to the dairyman concerned.

The efficiency of bottle washing and can washing was satisfactorily carried out—only 13 bottles failed to pass the test and only 8 cans failed.

The Ice Cream (Scotland) Regulations, 1948, and

The Ice Cream (Scotland) (Amendment) Regulations, 1948 to 1961

Registered ice cream dealers on the register now number 293 while 437 Certificates of Registration are held in respect of vehicles. Certificates of Authorisation issued and recorded during the year numbered 283, being 11 fewer than last year. Inspections were made of 1,837 ice cream premises and vehicles.

During the summer months, the exercise of inspecting ice cream vehicles and other street trading vehicles on Sunday afternoons was continued and proved worthwhile.

Three hundred and fifty-two samples were obtained of which 274, or 78·12 per cent, were satisfactory, compared with 270, or 71·61 per cent last year, while 78 (22·18 per cent) samples failed in count or coliform. Of the 352 informal samples taken 258 were subjected to both chemical and bacteriological examination, while 94 were sent for bacteriological examination only. Of 266 samples, only 3 (1·12 per cent) failed to comply with the legal chemical standard.

Samples which failed either of the tests were followed up with advice and repeat samples invariably complied.

The Cheese (Scotland) Regulations, 1970

Two cheeses, Amsterdam Cheese and Orkney Cheese, were found to contravene the above Regulations in respect they were not included on the list in the first Schedule, although they had been manufactured for many years.

The Colouring Matter in Food (Scotland) Regulations, 1966

The following table indicates the kinds of colour and the number of instances in which the colour was found.

Colour	Occasions on which colour was found		Colour	Occasions on which Colour was found	
	1969	1970		1969	1970
Ponceau MX ...	5	4	Tartrazine ...	33	38
Ponceau 4R ...	1	2	Yellow 2G ...	3	6
Carmoisine ...	3	7	Sunset Yellow FCF	3	4
Amaranth ...	8	15	Oil Yellow XF ...	—	—
Red 10B ...	—	—	Green S ...	3	14
Erythrosine BS	8	6	Blue VRS ...	—	—
Red 2G ...	—	—	Indigo Carmine ...	—	—
Red 6B ...	—	—	Violet BNP ...	2	1
Red FB ...	—	—	Brown FK ...	1	2
Ponceau SX ...	—	—	Chocolate Brown FB	—	—
Fast Red E ...	—	—	Chocolate Brown HT	—	—
Orange G ...	—	—	Black PN ...	—	1
Orange RN ...	15	11	Black 7964 ...	—	—
Oil Yellow GG	—	—			

A can of Lump fish Caviar was found to contain Brilliant Blue SCF, which is not a permitted colouring matter. It so happened this was the only can in stock, but was reported to the importers.

Bye-laws for Regulating Street Trading

The standard of street trading vehicles continues to improve, the persons engaged in street trading realising that hygiene is good business.

Inspections of vehicles and storage accommodation totalled 2,504. The attention of street traders was directed to contraventions of the Bye-laws and the Food Hygiene (Amendment) Regulations by letter. Twenty-seven such letters, listing 98 faults, were sent.

Food Hygiene (Scotland) Regulations, 1959-1966

Inspections under the regulations numbered 2,662 during which circumstances requiring attention were noted and shortcomings were remedied by advice and written intimation. Seventy-seven intimations, listing 282 contraventions were sent to owners and occupiers of food premises.

The classes on Food and Food Hygiene conducted by the Extra-Mural Studies Department of the University of Glasgow continue to be fully subscribed and a wide variety of food handlers took advantage of these courses. Talks were also given to Women's and Men's Organisations, School Meals Service and Trade Organisations.

*Labelling of Food Orders, 1953-61 and
The Food and Drugs (Scotland) Act, 1956, Section 6*

Omissions and discrepancies were observed in the wording on labels affixed to pre-packed foods.

1. Golden Vegetable Soup was stated to be cream soup when prepared as directed. The manufacturers were having new packs printed.
2. Canned Strawberries were found to contain less than 50 per cent of strawberries.
3. Pre-packed Ice Cream, manufactured and wrapped in England, did not bear a list of ingredients on the wrapper. This was rectified on the next batch of wrappers.
4. Polish Pickled Onions did not bear a label listing the ingredients. Sticker labels were printed and affixed.
5. A powder Calcium Drink was found to contain cyclamates. This was of old stock but the contents of the can were sound.
6. Pre-packed sugar from the Far East was not properly labelled. This was taken up with the importers.

Public Health (Meat) Regulations (Scotland) 1932, Section 15

Ten certificates of approval, two more than last year, were granted in respect of storage accommodation and 94 certified copies of these certificates, 10 fewer than last year, were issued for vehicles operating from these premises.

*Imitation Cream**Food and Drugs (Scotland) Act, 1956, Section 6*

The number of samples taken was 67. Sixty-two (92·54 per cent) were satisfactory.

Egg—The Liquid Egg (Pasteurised) (Scotland) Regulations, 1963

The one breaking-out plant in the city continues to operate satisfactorily; the 32 samples taken being reported "No Salmonella isolated" and conforming to the amylase test.

In addition, 4,180 tins (51 tons) of Frozen Whole Hen Egg was imported from Holland and Poland. Eighty-two samples were examined and each satisfied the tests.

SPECIAL SANITARY OPERATIONS

(a) *Food and Drugs, etc.—*

	1964	1965	1966	1967	1968	1969	1970
1. Dairies—							
Registered during year ...	162	246	270	175	209	173	176
Removed from Register ...	161	272	307	166	148	196	225
On Register at 31st December	1,797	1,771	1,751	1,758	1,829	1,794	1,759
Number of Inspections ...	5,895	6,552	6,123	5,132	5,346	5,052	4,664
Contravention of Orders, Acts and Byelaws ...	2	12	13	5	—	—	—
Prosecutions for same ...	2	11	13	2	—	—	—
Repairs or Improvements effected ...	—	—	—	—	—	—	—
2. Dealers in Ice-Cream—							
Registered during year :							
Premises ...	15	16	17	11	9	12	11
Vehicles ...	81	60	80	58	49	89	67
Removed from Register :							
Premises ...	31	42	39	36	11	25	45
Vehicles ...	180	88	67	41	45	54	78
On Register at 31st Dec. :							
Premises ...	416	390	368	343	341	327	293
Vehicles ...	405	377	390	407	411	448	437
Number of Inspections ...	2,192	2,299	1,983	1,940	2,063	1,816	1,837
Contravention of Acts, Orders or Byelaws ...	5	111	70	37	40	—	—
Prosecutions for same ...	1	—	4	—	—	—	—
Repairs or Improvements effected ...	4	—	70	37	40	—	—

SPECIAL SANITARY OPERATIONS—Continued

Food and Drugs, etc.—Continued—

	1964	1965	1966	1967	1968	1969	1970
3. Byres for Milch Cows—							
Number of Dairy Byres as at 31st December	36	36	31	29	29	29	15
Number of Cows Licensed for	1,025	1,025	969	937	937	937	833
Average Number kept	741	768	733	783	721	670	421
Number of Inspections	234	221	251	251	248	216	153
4. Unwholesome Food—							
Number of Inspections	9,406	9,636	9,494	9,558	9,391	10,321	10,142
Number of Lots dealt with ...	2,173	2,037	2,115	2,089	1,946	1,872	1,805
Nature of Food destroyed at Inspector's instance with Owner's consent	Tons	Tons	Tons	Tons	Tons	Tons	Tons
Assorted Foodstuffs	Cwts.	Cwts.	Cwts.	Cwts.	Cwts.	Cwts.	Cwts.
	Lbs.	Lbs.	Lbs.	Lbs.	Lbs.	Lbs.	Lbs.
	143	126	188	230	227	172	335
	11	8	13	4	—	5	19
	75½	106½	32	110½	110	30½	8
5. Food and Drugs (Scotland) Act—							
Informal Samples analysed ...	3,601	3,841	3,536	3,474	3,416	3,218	3,079
Statutory Samples analysed	1,355	1,411	1,349	1,304	1,233	1,134	1,036
Statutory Samples found non-genuine	32	29	33	47	35	26	32
Proceedings instituted	20	18	22	37	24	19	30
Number of Convictions	20	18	22	37	24	18	30
Amounts of Fines imposed ...	£135	£100	£120	£185	£152	£115	£225
Number dismissed or found "Not Guilty"	—	—	—	—	—	1	—
Number Deserted Simpliciter	—	—	—	—	—	—	—
Number No Action	—	—	—	—	—	1	2
Number Dismissed	—	—	—	—	—	—	—
Number Admonished	—	—	—	2	—	—	2
Number Acquitted	—	—	—	—	—	—	—

ABSTRACT OF COURT PROCEEDINGS

ADULTERATED SAMPLES AND CONTRAVENTIONS DURING 1970

No. of Complaints	Nature of Complaints and Alleged Offence	No. of Convictions	Amount of Fines Imposed	No. Admonished	No. Deserted	No. Action
<i>Food and Drugs (Scotland) Act, 1956</i>						
5	<i>Sausages—</i> Contained an excess of preservative	5	£35	—	—	—
23	<i>Mince—</i> Contained preservative during prescribed period	23	160	2	—	—
2	<i>Mince—</i> Contained an excess of preservative during permitted period	2	15	—	—	—
1	<i>Sweet Milk—</i> Not of substance demanded ...	2	15	—	—	—
		32	£225	—	—	—
		—	—	—	—	—

*Other than Food and Drugs Act**The Milk and Dairies (Scotland) Act, 1914*

4	Carrying on the business of a							
—	Dairyman without a Certificate							
	of Registration	4	£14	—	—	—	—	—
		—	—	—	—	—	—	—
36	<i>Grand Total</i>	36	£239	2	—	—	—	—
—		—	—	—	—	—	—	—

PORT HEALTH AUTHORITY

With the closing of Queen's and Kingston Docks two of the oldest dock areas in the Port of Glasgow have ceased to operate having been in constant use for over one hundred years.

Previous to the River Clyde becoming navigable above Dumbarton, in 1780, all sailing ships were required to anchor in the river, off Dumbarton, to discharge their cargoes over-the-side into small river craft and their merchandise was ferried upriver to Glasgow.

In 1812, a new element was introduced into the navigation of the River Clyde by the appearance of the steamboat "*Comet*". This event was to be the forerunner of a tremendous change in the future prosperity of Glasgow.

To-day, another new element has recently been introduced namely, "Containerisation" which is reckoned to be as revolutionary as the advent of steam was to shipping, over a century ago.

The number of foreign and coastwise vessels has decreased during the year, although the tonnage of foodstuffs landed at the port continues to show an increase.

Approximately 2,992 vessels, with an aggregate tonnage of 4,434,478 entered the port.

One thousand, two hundred vessels, arrived from foreign ports, 483 of them from ports in infected areas (168 direct and 315 via home ports). The remaining 717 vessels came from foreign ports in non-infected areas.

Particulars of arrivals are given in the following table :—

NATIONALITY OF VESSELS ARRIVING DURING 1970

Nationality	Ships	Crew	Passengers
American	6	491	49
Argentinian	2	85	—
Brazilian	4	155	—
British	571	23,778	45
Bulgarian	5	171	—
Cyprian	3	62	—
Danish	74	1,230	4
Dutch	117	1,561	17
Egyptian	1	50	—
Finnish	5	127	10
French	3	68	—
German	117	1,718	22
Ghanaian	2	100	—
Greek	25	721	9
Guinian	1	39	—
Indian	10	635	—
Israeli	4	126	2
Italian	3	82	—
Japanese	10	416	—
Kuwaiti	3	145	—
Lebanese	1	30	—
Liberian	59	1,741	1
Monroviaian	4	131	1
Nigerian... ..	3	143	—
Norwegian	67	1,732	20
Pakistani	1	52	—
Panamanian	11	212	—
Polish	2	40	2
Portuguese	2	100	—
Singapore	3	109	—
South African	7	355	—
Spanish	6	174	—
Suriniam	1	10	—
Swedish	47	1,570	11
U.S.S.R.	12	573	—
Yugoslavian	8	240	4
	<hr/>	<hr/>	<hr/>
	1,200	38,972	197

PUBLIC HEALTH (SHIPS) (SCOTLAND) REGULATIONS, 1966

During the year no quarantinable diseases were found on vessels arriving at the Port of Glasgow.

All crews on vessels arriving from ports in infected areas were kept under surveillance until the incubation period had expired. Similar action was taken in respect of Asiatic crews arriving from the East within a period of 48 hours on notification from the Medical Officer at London airport.

Only a few minor cases of illness were reported during the year.

CASES OF ILLNESS REPORTED ON VESSELS ON ARRIVAL AT GLASGOW

Disease	Hospital	Home	Clinic	Remained on Board	Died	Total
Chickenpox ...	1	—	—	—	—	1
Infective Jaundice	1	—	—	—	—	1
Pneumonia ...	1	—	—	—	—	1
Scarlet Fever ...	1	—	—	—	—	1
Others	2	1	—	2	—	5
	—	—	—	—	—	—
	6	1	—	2	—	9
	—	—	—	—	—	—

WATER SUPPLY

Complaints were received from vessels taking on water supplies from points in certain dock areas.

Samples were drawn and submitted for chemical analysis and the results indicated a high iron content in the water.

The docks involved were situated within an area of road development in connection with the new Kingston road bridge project. The Water Authority was consulted and it was pointed out that the excess of iron was due to disturbances with the shutting-off in mains supply at times when new road works were in progress and consequently the scouring of the mains which would affect water supplies in certain areas. With the co-operation of the Clyde Port Authority, arrangements were made to flush the dockside pipelines at regular intervals with satisfactory results.

(a) *Chemical*

Twenty-five samples of water from dock hydrants and vessels were submitted and reported suitable for human consumption although eight were somewhat high in iron content.

(b) *Bacteriological*

Thirty-eight samples from water points and vessels were examined and one vessel was requested to carry out tank cleaning, at the first available opportunity, as the result indicated high bacterial counts.

ALIENS ORDER, 1953

There was a decrease both in the number of vessels carrying alien passengers and in the number of aliens landed at the port. The comparable figures for the year 1970 were 65 vessels with 157 alien passengers as against 95 vessels with 217 aliens in 1969.

NATIONALITY						
American	...	...	...	...	...	51
Austrian	...	...	...	...	...	1
Belgian	...	...	...	...	...	1
Danish	...	...	...	...	...	3
Dutch	...	...	...	...	...	18
Finnish	...	...	...	...	...	11
German	...	...	...	...	...	20
Greek	...	...	...	...	...	10
Israeli	...	...	...	...	...	2
Norwegian	...	...	...	...	...	21
Polish	...	...	...	...	...	2
Stateless	...	...	...	...	...	1
Swedish	...	...	...	...	...	11
Yemen	...	...	...	...	...	1
Yugoslav	...	...	...	...	...	4
						157
						157

MEDICAL INSPECTION OF ALIEN AND COMMONWEALTH IMMIGRANTS

Close co-operation is maintained with H.M. Immigration Officers.

There was one request by the Immigration Officer to examine an alien who was rejected on medical grounds.

HYGIENE IN CREW'S ACCOMMODATION

Routine inspection of all vessels arriving within the port areas are carried out by the inspectors in the respective dock areas.

The main purpose is to maintain a satisfactory standard in the seamen's accommodation and to ensure the health and welfare of the crew is in no way impaired by the lack of hygienic conditions.

Inspection and re-inspection of vessels revealed a number of defects. In most instances the majority of them were remedied before the vessels

sailed ; but in a few instances, it was necessary to communicate with other Port Health Authorities at the next port of call in the United Kingdom to ensure the repairs were completed.

Thirteen intimations issued in terms of Section 19 of the Public Health (Scotland) Act, 1897, were served on the masters of vessels and 152 verbal warnings were given in respect of minor faults.

A total of 2,385 initial visits and 275 re-visits were made by the inspectors to vessels during the year.

SUMMARY OF STRUCTURAL AND OTHER DEFECTS

Accumulation of refuse on deck	...	...	16
Accumulation of refuse on floors	...	...	1
Food lockers broken or dirty	...	...	3
Food preparation room, storeroom and equipment dirty	...	...	84
Galleys dirty	...	...	51
Pantries dirty	...	...	1
Hospital dirty	...	...	2
Mess room tables broken or dirty	...	...	4
Quarters—approach alleyways dirty	...	...	16
Quarters—dirty	...	...	2
Quarters—verminous	...	...	85
Scuppers—choked	...	...	15
Scuppers—defective	...	...	3
Ventilation and decklights defective	...	...	4
Wash basins—broken or defective	...	...	3
Wash basins—foul or dirty	...	...	2
Water closets—flushing apparatus defective	...	...	5
Water closets—foul or choked	...	...	11
Water closets—floors uneven or broken	...	...	3
			<hr/>
			311
			<hr/>

IMMUNISATION OF SEAMEN

The Port Medical Staff provided 52 seamen with immunisation against yellow fever, 38 against cholera and 16 against smallpox.

DANGEROUS DRUGS

During the year only one request was received to authorise the purchase of scheduled drugs for a foreign-owned vessel restocking medical stores whilst in port.

VENEREAL DISEASE

The special clinics at the Southern General Hospital and Black Street continued to operate as follows :—

Monday to Friday	...	09.30 - 12.30 hrs.
		14.00 - 18.30 hrs.
Saturday	... ..	09.30 - 12.00 hrs.

Details are recorded in the Infectious Disease Section on page 203.

HYGIENE IN DOCK AREAS

Premises within the dock areas are kept under observation by the port inspectors.

Visits to factories, dock canteens and amenity blocks are made to check for nuisances and to ensure that these premises are maintained in a reasonably hygienic condition.

The modernisation of water-closet accommodation in the various dock areas is practically completed. The standard and facilities are first class, but unfortunately vandalism is difficult to control.

Notices have been posted warning that vandals will be prosecuted.

Two intimations and ten verbal warnings for nuisances in dock areas were sent out to the Clyde Port Authority and remedied without delay.

FACTORIES ACT, 1961

The following table shows the number of premises and the number of visits made to factories in the dock areas :—

No. of Premises Registered at 31.12.70			No. of Premises Inspected during Year			No. of Visits		
Non-Mech.	Mech.	Total	Non-Mech.	Mech.	Total	Non-Mech.	Mech.	Total
17	1	18	38	3	41	53	4	57

THE FOOD HYGIENE (SCOTLAND) REGULATIONS, 1959-66

No. of Premises	No. of Premises Inspected	No. of Visits
9	9	31

RAT DESTRUCTION

The total number of rats destroyed during the year was 126.

On board foreign-going vessels 75 were destroyed—52 as a result of fumigations and 23 by trapping.

On shore premises 51 rats were trapped.

Thirty-six specimens of rats, 13 from vessels and 23 from shore

premises, were submitted to the bacteriologist for examination. All were reported negative for Pasteurella Pestis.

ON BOARD FOREIGN-GOING VESSELS

Method of Destruction	Infected Ports				Non-Infected Ports				Total
	R. Rattus		R. Norvegicus		R. Rattus		R. Norvegicus		
	M.	F.	M.	F.	M.	F.	M.	F.	
H.C.N. ...	—	—	—	—	—	—	—	—	—
Methyl Bromide ...	35	17	—	—	—	—	—	—	52
Trapping ...	10	11	—	—	1	1	—	—	23
	<u>45</u>	<u>28</u>	<u>—</u>	<u>—</u>	<u>1</u>	<u>1</u>	<u>—</u>	<u>—</u>	<u>75</u>

IN SHEDS AND OTHER PREMISES

	Male	Female	Total
R. Rattus ...	28	23	51
R. Norvegicus ...	—	—	—
	<u>28</u>	<u>23</u>	<u>51</u>

The rodent operators made 2,616 visits to vessels and 1,840 visits to shore premises.

INTERNATIONAL DERATTING AND DERATTING EXEMPTION CERTIFICATES

The total number of certificates issued during the year was 292.

Deratting Certificates were issued to five vessels, two after fumigation with Methyl Bromide and three by trapping.

Nine Exemption Certificates were issued to new vessels at the request of the builders or shipping companies and thirty-four Exemption Certificates to vessels berthed at outlying ports at Ardrossan, Bowling, Finnart and Irvine.

PREVENTION OF DAMAGE BY PESTS ACT, 1949, AND APPLICATION TO SHIPPING ORDER, 1951-56

Rodent Control Exemption Certificates were issued to 15 coasting vessels during the year.

RAGS, HAIR, HIDES AND BONES

Fifty-five samples of bones, hides, wool, blood and hair were submitted for bacteriological examination for anthrax. Twelve bone samples were reported positive. This information was passed to H.M. Medical Inspector of Factories and all parties concerned.

The following table shows the amount of imported rags, hair, hides, bones and dried blood, with the country of origin :—

Country of Origin	Rags		Hair		Hides		Bones		Wool		Dried Blood	
	Ships	Bales	Ships	Bales	Ships	Bales	Ships	Bags	Ships	Bales	Ships	Bags
America ...	—	—	3	655	5	148	—	—	—	—	—	—
Argentina ...	—	—	2	91	2	87	4	60,806	3	189	—	—
Australia ...	—	—	—	—	3	900	—	—	2	2,621	—	—
Batswana ...	—	—	—	—	—	—	—	—	—	—	1	611
Beirut ...	—	—	—	—	—	—	—	—	1	53	—	—
Canada ...	—	—	—	—	2	110	—	—	1	1	—	—
China ...	2	80	—	—	1	100	—	—	5	691	—	—
Cyprus ...	—	—	—	—	—	—	—	—	1	308	—	—
East Africa ...	—	—	1	5	2	121	—	—	—	—	—	—
France ...	—	—	—	—	1	907	—	—	—	—	—	—
India ...	—	—	—	—	3	184	11	32,855	6	2,778	—	—
Ireland ...	—	—	—	—	—	—	—	—	3	95	—	—
Italy ...	—	—	—	—	—	—	—	—	4	82	—	—
Japan ...	2	216	—	—	5	1,500	—	—	1	206	—	—
Kenya ...	—	—	1	57	6	1,247	1	200	1	50	—	—
Lebanon ...	—	—	—	—	—	—	3	2,180	5	364	—	—
Mombasa ...	—	—	—	—	1	110	—	—	—	—	—	—
New Zealand ...	—	—	2	54	3	35	—	—	6	2,596	7	6,020
Pakistan ...	—	—	—	—	—	—	1	1,400	—	—	—	—
South Africa ...	—	—	—	—	3	110	1	500	2	97	2	1,059
Tanzania ...	—	—	—	—	4	698	—	—	—	—	—	—

IMPORTED FOOD (SCOTLAND) REGULATIONS, 1968

Importation of Chinese, Indian and Pakistani foodstuffs in many instances do not meet the requirements and standards as laid down in the various regulations controlling the importation of food from overseas. It would appear that some of these consignments of foodstuffs were intended only for use in the country of origin and not for shipment to this country, although a recent feature has indicated that some attention is now being paid to our regulations, as cases of foodstuffs are being stamped "For Export Only".

Consignments of canned melon cubes from Israel were reported to contain excess tin, over the recommended food standard of 250 parts per million. From examination of the cans it was observed that the inner surfaces were insufficiently laquered, as only the ends appeared to be so treated, whereas the sides of the cans were exposed and were "etched and feathered". This contamination to the fruit would increase if consignments were stored for any length of time, with consequent metallic taste to the product. Information was passed to the manufacturers in Israel who gave an assurance that this fault would be remedied in future consignments.

During the year, 902,773 tons of imported foodstuffs from overseas arrived at the port. One thousand and thirty samples were drawn and submitted for examination by the City Analyst, who reported 63 samples unsatisfactory in their present state, or unfit for human consumption. Two hundred and seventy-eight samples were tested by the bacteriologist who reported one unsuitable, due to extensive mould contamination.

There were many other irregularities which were notified to the importers, mostly for offences against the Labelling of Food Order and deficiencies in volume and weight in various containers.

A total of 699 tons were found unsuitable for human consumption, with flour, grain and potatoes forming the bulk of foodstuffs condemned. Every effort, however, is made to salvage these products, but in the majority of cases they go for use as animal feeding or technical purposes and are released under strict conditions to prevent any misuse for purposes other than as stated in the undertaking received from the purchaser.

PRESERVATIVES IN FOOD (SCOTLAND) REGULATIONS, 1962

It was reported that consignments of desiccated coconut from Ceylon contained sulphur dioxide, a non-permitted preservative, under the above regulations.

The attention of importers was drawn to this situation and they were advised that pending investigation all consignments would be detained. The importers agreed that small quantities of SO₂ were accidentally introduced to the product during processing, *i.e.* in the drying out of the product. It was also claimed that the coconut is a fruit and as a dried fruit was permitted to have 2,000 parts per million.

Agreement was reached whereby consignments would be released where samples tested did not reveal excess of 150 parts per million of SO₂. This arrangement was a temporary measure pending possible re-classification of the product under the regulations.

COLOURING MATTER IN FOOD (SCOTLAND) REGULATIONS, 1966

Several consignments of exotic foodstuffs from Hong Kong, when analysed, revealed the presence of non-permitted colouring matter in the products. The importers were notified and given permission to re-export the product back to the country of origin.

LEAD IN FOOD (SCOTLAND) REGULATIONS, 1961

The City Analyst reported on samples drawn from consignments of foodstuffs imported from Hong Kong containing excess lead in contravention of the regulations. These consignments were re-exported.

ARSENIC IN FOOD (SCOTLAND) REGULATIONS, 1959-60

Consignments of Lychees and Dried Moss from India revealed arsenic in quantities, in excess of the standards laid down in the regulations.

OFFICIAL CERTIFICATES FOR IMPORTED MEAT PRODUCTS

A small consignment of Spiced Haslet from China was not accompanied by official Certificates. The importers surrendered the product for destruction under the supervision of the inspector.

THE IMPORTED FOOD (SCOTLAND) REGULATIONS, 1968

The following statement indicates the work done under the Foreign Meat Regulations during 1970 :—

		EXAMINED.	
	<i>Beef</i>	Quarters	200
		Cuts ...	430
		Cartons ...	24,391
	<i>Mutton</i>	Carcases ...	12,668
		Cartons ...	10,393
	<i>Lamb</i>	Carcases ...	69,497
		Cartons ...	837
	<i>Rabbits</i>	Carcases ...	4,150
<i>Beef Offal</i>	Tongues ...	Cartons ...	73
	Cheeks ...	Cartons ...	309
	Hearts ...	Cartons ...	264
	Livers ...	Cartons ...	2,943
	Kidneys ...	Cartons ...	669
	Skirts ...	Bags ...	98
	Tails ...	Cartons ...	252
	Casings ...	Tierces	79
	Mixed Offal ...	Bags ...	5,620
<i>Mutton Offal</i>	Tongues ...	Cartons ...	608
	Hearts ...	Cartons ...	294
	Livers ...	Cartons ...	4,037
	Stomachs ...	Bags ...	676
	Kidneys ...	Cartons ...	1,466
	Casings ...	Tierces ...	82
	Mixed Offal ...	Cartons ...	11,540
<i>Lamb Offal</i>	Hearts ...	Cartons ...	389
	Livers ...	Cartons ...	2,360
	Kidneys ...	Cartons ...	217
	Sweetbreads ...	Bags ...	15
	Casings ...	Tierces ...	42
<i>Pork Offal</i>	Mixed Offal ...	Bags ...	377
<i>Inedible Offal</i>	for animal feeding	Cartons	70,205

EXAMINATION FOR SALMONELLA IN IMPORTED
BONELESS BEEF, MUTTON AND VEAL

One thousand, five hundred and twenty-eight representative samples were taken. Thirteen of these were positive, of which 6 revealed the presence of *Salmonella derby*, 3 *Salmonella typhimurium*, 2 *Salmonella panama*, 1 *salmonella meunchen* and 1 *Salmonella anatum*. The 13 positive cartons were seized as unfit.

OTHER CONDITIONS

Nineteen cartons of French boneless beef (1,095 lbs) and 574 forelegs and flanks of French Beef (77,194 lbs) were also examined and seized as unfit due to Decomposition.

PEST CONTROL UNIT

During the year the work of the Unit has been maintained at the same level. Although there has been a considerable decrease in the number of premises rat infested, the number of mice infestations has increased. The reason for the increase in mice complaints has still not been solved, could it be that people are more willing to report mouse infestations or has alphachoralose not proved to be as effective as claimed?

The problem of overflowing waste bins and disused washhouses in back courts remains one of the major problems in rodent control in the city but some progress was made in 1970 by dealing with the washhouses under Section 4 of the Prevention of Damage by Pests Act, 1949.

During the year a large block control exercise was carried out with considerable success.

Details of the units work are as follows.

Division	Complaints Received	Premises Infested and Treated		Total Premises	
		Rats	Mice	Infested	Premises Rat-Proofed
Central ...	2,310	1,327	241	1,568	327
Northern ...	1,742	1,429	107	1,536	299
Eastern ...	1,687	554	788	1,342	97
South-Eastern	1,197	522	604	1,126	63
South-Western	949	428	205	633	194
Total ...	7,885	4,260	1,945	6,205	980

In addition to the work shown in the previous table, a block control area was carried out in the Central Division of the city. The survey of the area lasted from 31st March until 4th May, 1970, when the following information was compiled.

Area—Drumchapel

Number of properties inspected ...	1,493
Number of properties infested ...	74
Number of houses in area ...	8,012
Number of houses infested ...	11

Treatment of the first section commenced on Tuesday, 4th April, and finished on the fourth section on 29th May.

POISON

The anti-coagulant poison Racumin 57, in conjunction with CYMAG gassing powder was used in the operation.

Total amount of Racumin 57	520 lbs.
Total amount of CYMAG ...	47 lbs.

During the year several calls were due to people having lost pet hamsters or mice—the hamsters being mistaken for rats.

One frantic call of a strange animal trying to get in a house door turned out to be a large ferret which had escaped from its hutch.

DISINFESTATION.

The work has been maintained at the same high level, the total number of apartments treated again showing a considerable increase on previous years.

The following table shows the amount of work carried out in each Division.

Division	NUMBER OF APARTMENTS TREATED				Total
	Bug Infestation	Tenants Being rehoused	Cockroach infestation	Other insects	
Central	14	3	73	1,049	1,139
Northern	22	2	35	1,375	1,434
Eastern	57	38	31	2,282	2,408
South-Eastern	18	2	39	1,025	1,084
South-Western	31	2	132	704	869
Total	<u>142</u>	<u>47</u>	<u>310</u>	<u>6,435</u>	<u>6,934</u>

OTHER INSECTS.

This aspect of the Unit's work continued as in previous years showing a considerable increase in the number of apartments treated. The very large increase in flea infestations is due to the policy of the Housing Management Department having most empty houses sprayed as a precautionary measure.

The following table shows the amount of work carried out in each Division.

Division	NUMBER OF APARTMENTS TREATED				Total
	Verminous Bedding	Flea Infestation	Fly Infestation	Other Insects	
Central	92	603	8	346	1,049
Northern	48	804	8	515	1,375
Eastern	40	719	12	511	2,282
South-Eastern	19	683	17	296	1,025
South-Western	10	405	21	268	704
Total	<u>209</u>	<u>4,224</u>	<u>66</u>	<u>1,936</u>	<u>6,435</u>

OTHER PREMISES.

In addition to the work shown in the previous tables, 465 treatments of other premises (shops, schools, public baths, etc.) were carried out for various kinds of insect pests.

Following requests from the Police, Housing Manager, Schools and householders, the Unit successfully dealt with 128 wasps' nests which were on or in close proximity to houses, schools, nurseries, etc.

The following table shows the number of visits made during the year for all types of infestation.

Bug Infestation and Rehousing	...	...	...	120
Cockroach Infestation	...	...	...	433
Verminous Bedding	...	...	...	779
Flea Infestation	...	...	...	1,646
Fly Infestation	...	...	...	150
Other Insect Infestation	...	...	...	1,854
				<hr/>
				4,982
				<hr/>

I again record thanks to the staff of Zoology Department, Glasgow University, for the help so willingly given throughout the year.

DISINFECTING SECTION.

This Section carries out the disinfection of premises, clothing, books, etc., following a case of infectious disease in the home. It also supplies materials so that tenants themselves can do cleaning, white-washing or distempering. The following table shows the number of premises and books dealt with on account of infectious diseases.

Houses, etc., disinfected	...	...	1,473
Library and school books disinfected			125

The amount of materials used for these purposes and also issued to the public is shown below.

Formaldehyde, 40 per cent.	...	...	11 gallons
Naphthaline Powder	...	...	615 lbs.
Disinfectant (crude)	...	...	36 gallons
Whiting	...	...	28 lbs.
Colour (dry)	...	...	12 lbs.

During the year the Section also undertook on behalf of the Food and Dairies Section, the stencilling of the "Approved for Food" sign on 625 vehicles. In addition to the above works 77,500 articles of second-hand clothing were disinfected before export to other countries. Three consignments of second-hand clothing were sent to relatives in Eastern Europe and some 291 certificates were issued in respect of consignments to Eire.

APPENDIX

FACTORIES ACT, 1961

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 153(1) of the Factories Act, 1961, 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.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1970 FOR THE CORPORATION
OF THE CITY OF GLASGOW *

PRESCRIBED PARTICULARS ON THE ADMINISTRATION
OF THE FACTORIES ACT, 1961

PART I OF THE ACT

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(1)	(2)	(3)	(4)	(5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities†	139	160	17	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2,723	2,042	451	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority‡ (including out-workers' premises)	99	114	—	—
	<u>2,961</u>	<u>2,316</u>	<u>468</u>	<u>—</u>

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".)

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	8	12	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	3	2	—	—	—
Inadequate ventilation (S.4) ...	1	1	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ...	19	22	—	1	—
(b) Unsuitable or defective ...	1,200	1,135	8	35	—
(c) Not separate for sexes ...	41	23	—	2	—
Other offences against the Act (not including offences relating to Out-work) ...	240	205	—	1	—
Total ...	1,512	1,400	8	39	—

* County or Burgh.

† To prevent any differences between the lists kept respectively by the Local Authorities and H.M. Inspectors of Factories of the numbers of factories in which sections 1, 2, 3, 4 and 6 of the Factories Act, 1961 are enforced by Local Authorities, it is requested that Local Authorities should compare their lists of factories with the lists kept by H.M. Inspectors of Factories.

‡ *i.e.* Electrical Stations (Section 123(1)), Institutions (Section 124), sites of Building operations and Works of Engineering Construction (Section 127), Slaughterhouses (Section 175) (1) (d) and (e)) and Railway Running Sheds (Section 175(2) and (10)).

PART VIII OF THE ACT.

OUTWORK

(Sections 133 and 134).

Nature of Work	Section 133			Section 134		
	No. of out-workers in August list required by Section 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions 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., Cleaning and Washing ...	—	—	—	—	—	—
Household Linen ...	—	—	—	—	—	—
Lace, lace curtains and nets ...	—	—	—	—	—	—
Curtains and furniture hangings ...	—	—	—	—	—	—
Furniture and upholstery	—	—	—	—	—	—
Electro-plate ...	—	—	—	—	—	—
Brass and brass articles	—	—	—	—	—	—
Fur pulling ...	—	—	—	—	—	—
Iron and steel cables and chains ...	—	—	—	—	—	—
Iron and steel anchors and grapnels ...	—	—	—	—	—	—
Cart gear... ..	—	—	—	—	—	—
Locks, latches and keys	—	—	—	—	—	—
Umbrellas, etc. ...	—	—	—	—	—	—
Artificial flowers ...	—	—	—	—	—	—
Nets, other than wire nets	—	—	—	—	—	—
Tents	—	—	—	—	—	—
Sacks	—	—	—	—	—	—
Racquet and tennis balls	—	—	—	—	—	—
Paper bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
File making	—	—	—	—	—	—
Brush making	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons, etc.	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosacques, Christmas crackers, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—
Lampshades	—	—	—	—	—	—
Total	—	—	—	—	—	—

SECTION XIII

OCCUPATIONAL HEALTH

The Occupational Health Section is responsible for medical assessment in connection with the recruitment of employees of all Corporation Departments except Fire, Police and Transport, which have their own medical officers.

The questionnaire medical assessment introduced in 1969 was continued in 1970. This method was used for Entry, Sick Pay and Superannuation. The employee is asked to fill in a questionnaire answering questions about height and weight, present state of health and past medical history. The employee attests that the answers are correct so far as is known and that no medical information has been withheld. The form is then scrutinised by a medical officer and those persons who have been in good health and have satisfactory height and weight measurements are passed fit if their chest X-ray is satisfactory.

Two thousand, six hundred and fifty applications for Entry, Sick Pay and Superannuation were dealt with by questionnaire without medical examination.

Those persons who were found to have significant medical histories were called for examination. The numbers of these referred in this way for examination are included in the total number of examinations for the year.

Medical Examinations—Entrance, Sick Pay, Superannuation—were carried out as in previous years. One thousand, eight hundred and forty persons were examined for the first time and 363 were examined for the second or subsequent time. There were 63 retiral examinations and 85 examinations carried out by special request of Corporation Departments and on behalf of other local authorities. In addition, this year 274 examinations were carried out on employees who required a medical certificate with their application for a Heavy Goods Vehicle Licence. This certificate is required by the Licensing Authority and is mandatory for those making a first application for such a licence and for every application after the age of 60. This made the total number of examinations conducted during the year 2,619.

Table I shows how these examinations were distributed by Scheme and Department.

TABLE I
MEDICAL EXAMINATIONS CARRIED OUT AT
20 COCHRANE STREET DURING 1970

Department	Entrance		Sick Pay		Super- annuation		Retiral		Special		Re- examination		Vehicle Licence		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Airport ...	9	3	—	—	5	—	—	—	11	—	1	—	9	—	33	3
Architect's ...	9	2	—	—	3	—	1	—	2	—	—	1	—	15	3	
Baths ...	—	—	20	3	48	9	—	1	—	—	5	8	—	—	73	21
Building ...	8	3	15	1	113	1	3	1	11	—	26	—	29	—	205	6
City Assessor ...	2	—	—	—	1	—	—	—	—	—	2	—	—	—	5	—
City Chamberlain...	2	3	—	—	—	—	—	—	—	—	—	1	—	—	2	4
Civil Defence ...	—	—	—	—	—	—	1	—	—	—	1	—	—	—	2	—
Cleansing ...	2	—	88	13	218	1	2	—	4	1	42	6	154	—	510	21
Curator ...	4	8	—	4	—	4	—	—	—	3	—	5	—	—	4	24
Education ...	38	90	13	213	25	68	6	14	2	8	6	98	29	—	119	491
Estates ...	4	—	1	—	—	—	—	—	—	—	1	—	—	—	6	—
Halls ...	—	—	—	—	3	2	—	—	—	—	—	—	—	—	3	2
Health ...	—	—	1	4	12	9	—	5	2	—	5	6	—	—	20	24
Highways	4	—	21	1	56	—	1	—	3	—	12	—	10	—	107	1
Office of Public Works...	8	1	—	1	3	—	—	—	—	1	1	—	4	—	16	3
Sewage ...	—	—	9	—	14	—	3	—	—	—	1	—	—	—	27	—
Housing Management	11	1	9	—	20	1	—	—	—	—	5	—	8	—	53	2
Libraries ...	3	14	1	—	1	—	—	—	—	1	2	3	—	—	7	18
Lighting ...	25	—	4	—	36	—	6	—	10	—	10	—	9	—	100	—
Luncheon ...	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Markets ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Museums ...	4	—	2	—	2	—	1	—	—	—	2	—	—	—	11	—
Parks ...	2	—	25	10	120	5	3	—	—	—	46	2	10	—	206	17
Planning ...	1	2	—	1	5	1	—	—	—	—	—	1	—	—	6	5
Printing ...	—	—	2	1	3	3	—	—	—	—	4	—	—	—	9	4
Registrars ...	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Social Work ...	6	19	—	118	11	34	3	1	1	4	2	48	—	—	23	224
Sports Centre ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Town Clerk ...	1	1	—	—	—	1	—	—	—	—	—	—	—	—	1	2
Veterinary Surgeon	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
Weights and Measures ...	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
Work Study ...	1	1	—	—	—	1	—	—	—	—	—	—	—	—	1	2
Blind Workshops	—	—	2	2	1	—	—	—	1	1	—	—	—	—	4	3
Scottish Society for Mentally Handicapped Children ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Lower Clyde Water Board ...	14	3	14	—	83	—	5	—	2	—	9	—	12	—	139	3
Outside Appointments	—	—	—	—	—	—	—	—	14	3	—	—	—	—	14	3
Clerk of Courts ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	163	153	227	373	784	140	35	22	63	22	184	179	274	—	1,730	889

Total ... 2,619

Four hundred and forty (24 per cent.) of 1,840 persons examined for the first time for Entrance, Sick Pay and Superannuation purposes were found to be unfit because of conditions shown in Table II.

TABLE II

CLINICAL CONDITIONS FOUND IN PERSONS EXAMINED FOR THE FIRST TIME WHICH CAUSED THEM TO BE FOUND UNFIT.

	Male	Female
Tuberculosis, active, new cases	1	—
Tuberculosis known cases	8	3
Other Radiological Chest Lesions requiring investigation	10	4
Chronic Bronchitis and Bronchiectasis	20	3
Cardiac disease	15	5
Hypertension	47	35
Varicose veins	1	2
Hernia	13	—
Indigestion and Peptic Ulcer	15	6
Arthritis	5	1
Mental illness	13	4
Glycosuria	10	2
Albuminuria	1	—
Skin diseases	2	3
Obesity	50	102
Dental Caries	21	2
Others	30	6
Total	<u>262</u>	<u>178</u>

Three hundred and sixty-three persons who had been found unfit at previous medical examinations were re-examined and of these 156 (43 per cent.) were again found to be unfit. Forty-three persons in this group were classified as permanently unfit for acceptance into the schemes.

A considerable number of employees found unfit on account of tuberculosis and other radiological chest lesions, albuminuria, glycosuria and dental caries are likely to be found fit at a later date after investigation and treatment have been carried out. All employees found unfit for entrance to the schemes are referred to their family doctors.

Chest X-ray examination is carried out at the Department's X-ray unit when each employee is 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. This also applies to employees who are not examined because of a satisfactory questionnaire. During the year one new case of active pulmonary tuberculosis was discovered. A number of other persons are under observation at chest clinics as a result of their X-ray examination.

Sixty-four persons were examined with a view to premature retirement on health grounds. Six of these examinations were carried out at the employees' homes ; in one case there was insufficient grounds to recommend retiral. The conditions causing premature retiral are shown in Table III.

TABLE III
CLINICAL CONDITIONS CAUSING EARLY RETIRAL

	Male	Female
Chronic Bronchitis and Bronchiectasis	7	4
Asthma	—	—
Cardio-Vascular Disease—		
(i) Ischaemic Heart Disease	8	5
(ii) Hypertension	3	—
(iii) Arteriosclerosis	2	—
Central Nervous System—		
(i) Polyneuritis	1	1
(ii) Cerebral Thrombosis	3	1
(iii) Epilepsy	1	—
(iv) Intractable Head Pain	1	—
Musculo Skeletal—		
(i) Fractured Wrist with residual disability ...	—	1
(ii) Fractured Femur with residual disability ...	—	1
(iii) Spondylosis	2	1
(iv) Arthritis	4	2
Endocrine Disease	—	1
Carcinoma—		
(i) Bronchial	1	—
(ii) Brain	—	1
(iii) Stomach	—	1
Psychiatric Conditions	1	7
Peptic Ulcer	—	2
Amputation : Lower Limbs	1	—
Not Retired	1	—
	<hr/>	<hr/>
	36	28
	<hr/>	<hr/>

Two hundred and seventy-four persons were examined in connection with their applications for Heavy Goods Vehicle Licence. Four of those examined were found to be unfit to drive a Heavy Goods Vehicle. The clinical conditions causing this unfitness were defective vision (two), diabetes (one) and ischaemic heart disease (one).

The total number of examinations carried out during 1970 was 2,619 compared with 4,849 in 1969, a decrease of 46.2 per cent. The reason for this reduction was the use of the questionnaire medical assessment during the year, which has thus proved its benefit in allowing a smaller staff to cope with a similar number of persons.

The Occupational Health Section is also consulted by the Corporation Departments for advice on working conditions and on the degree of physical fitness required for certain occupations.

Apart from the routine assessment and medical examinations, Water Department employees are seen when a specimen of blood is taken for Widal test and specimens of faeces and urine obtained for bacteriological examination for Salmonella and Shigella. Cases of diarrhoeal illness among Water Department employees are notified to the Medical Officer of Health for surveillance and clearance prior to return to work.

Immunisation against Leptospirosis is available for sewer workers of the Highways Department.

SECTION XIV

CHIROPODY SERVICE

In order to meet the increased demand for chiropody treatment, particularly from homebound patients, three additional chiropodists were recruited during the year. There are now fifteen full-time chiropodists employed by the Department.

The chiropodist who is employed by the Hospital Board at Foresthall has been withdrawn from the Home Section owing to pressure of work in the Hospital, so the residents are now receiving regular chiropody treatment from this Department.

A new clinic for old people has been opened in the Cardonald district of the city.

The number of treatments given at the various centres is as follows :—

<i>Treatment Centre.</i>	<i>No. of treatments.</i>
Residential Homes	6,090
Domiciliary	7,388
Fernie Street Clinic	2,650
Whiteinch Clinic, Medwyn Street, W.4	2,692
Denmark Street Clinic, N.2	2,167
Pollok Clinic, Langton Road, S.W.3	2,413
Drumchapel Clinic, Kinfauns Drive, W.5	553
Pearce Institute Clinic, S.W.1	515
David Cargill Clinic, Ledard Road, S.2	474
St. Mungo Clinic, McAslin Street, C.4	468
Cardonald Clinic, Kirriemuir Avenue, S.W.2	598
Laurieston House Clinic, Carlton Place, C.5	272

On the contractual side of the Service, thirty-nine private chiropodists gave a total of 68,327 treatments in their own surgeries to approximately 18,000 old people at a cost to this Department of £43,127.35.

APPENDIX.

TABLE I.—GLASGOW, 1970.—ESTIMATED POPULATION AS AT 30TH JUNE, IN EACH MUNICIPAL WARD, ACREAGE, AND PERSONS PER ACRE.

MUNICIPAL WARDS	POPULATION				Acreage	Persons per acre (including Inst'utions and Shipping)
	Without Institutions and Shipping	Institu- tions	Shipping*	Total		
1. Shettleston and Tollcross ...	40,043	326	—	40,369	1,167	35
2. Parkhead ...	16,817	406	—	17,223	819	21
3. Dalmarnock ...	22,099	—	—	22,099	487	45
4. Calton ...	12,071	655	—	12,726	404	32
5. Mile-end ...	19,250	156	—	19,406	443	44
6. Dennistoun ...	21,252	—	—	21,252	689	31
7. Provan ...	76,769	2,185	—	78,954	4,846	16
8. Cowlairs ...	20,591	926	—	21,517	645	33
9. Springburn ...	29,298	1,539	—	30,837	2,118	15
10. Townhead ...	11,875	1,333	—	13,208	301	44
11. Exchange ...	4,030	3,047	4	7,081	507	14
12. Anderston ...	9,228	580	412	10,220	530	19
13. Park ...	10,765	891	—	11,656	317	37
14. Cowcaddens ...	11,296	267	—	11,563	488	24
15. Woodside ...	11,280	229	—	11,509	170	68
16. Ruchill ...	37,965	380	—	38,345	1,962	20
17. North Kelvin	18,694	128	—	18,822	278	67
18. Maryhill ...	26,327	87	—	26,414	2,210	12
19. Kelvinside ...	18,461	1,635	5	20,101	1,160	17
20. Partick (East)	16,286	1,123	—	17,409	351	50
21. Partick (West)	17,682	29	61	17,772	464	38
22. Whiteinch ...	18,843	49	—	18,892	894	21
23. Yoker ...	30,169	247	14	30,430	1,213	25
24. Knightswood	52,465	150	—	52,615	1,614	33
25. Hutchesontown	11,814	—	—	11,814	387	30
26. Gorbals ...	9,409	—	—	9,409	252	37
27. Kingston ...	8,862	—	10	8,872	355	25
28. Kinning Park	15,022	58	466	15,546	402	39
29. Govan ...	17,522	56	—	17,578	489	36
30. Fairfield ...	15,541	1,159	266	16,966	1,351	13
31. Craigton ...	37,514	301	—	37,815	1,566	24
32. Pollokshields	32,814	2,027	—	34,841	3,239	11
33. Camphill ...	18,325	416	—	18,741	481	40
34. Pollokshaws ...	49,353	555	—	49,908	3,223	15
35. Govanhill ...	23,257	163	—	23,420	365	64
36. Langside ...	25,099	746	—	25,845	801	32
37. Cathcart ...	66,253	244	—	66,497	2,737	24
CITY ...	884,341	22,093	1,238	907,672	39,725	23

* as at Census 1961.

TABLE II.—GLASGOW, 1970.—INHABITED AND UNOCCUPIED HOUSES
IN EACH MUNICIPAL WARD AS AT WHITSUNDAY, 1970.

MUNICIPAL WARDS	INHABITED HOUSES				Empty Houses
	1970	1969	Decrease	Increase	
1. Shettleston and Tollcross	12,798	13,136	338	—	480
2. Parkhead	6,668	6,118	—	550	109
3. Dalmarnock	7,897	8,588	691	—	1,075
4. Calton	4,584	4,876	292	—	494
5. Mile-end	7,022	7,314	292	—	773
6. Dennistoun	8,078	8,159	81	—	196
7. Provan	21,071	21,113	42	—	66
8. Cowlairs	8,240	8,121	—	119	544
9. Springburn	9,470	9,601	131	—	290
10. Townhead	4,507	4,828	321	—	926
11. Exchange	2,264	2,423	159	—	317
12. Anderston	3,655	3,951	296	—	636
13. Park	4,439	4,544	105	—	344
14. Cowcaddens	4,289	4,036	—	253	378
15. Woodside	4,408	4,564	156	—	494
16. Ruchill	12,029	11,865	—	164	245
17. North Kelvin	7,413	7,785	372	—	887
18. Maryhill	9,430	9,306	—	124	359
19. Kelvinside	8,453	8,352	—	101	219
20. Partick (East)	7,144	7,135	—	9	360
21. Partick (West)	6,873	7,266	393	—	800
22. Whiteinch	6,707	6,777	70	—	173
23. Yoker	10,950	10,962	12	—	58
24. Knightswood	13,796	13,777	—	19	18
25. Hutchesontown	4,321	4,356	35	—	460
26. Gorbals	2,655	3,233	578	—	940
27. Kingston	2,749	3,209	460	—	637
28. Kinning Park	5,671	5,965	294	—	445
29. Govan	5,991	6,125	134	—	650
30. Fairfield	6,133	6,285	152	—	319
31. Craigton	12,989	12,478	—	511	69
32. Pollokshields	10,400	10,541	141	—	294
33. Camphill	7,921	7,932	11	—	240
34. Pollokshaws	14,254	13,701	—	553	52
35. Govanhill	8,977	9,055	78	—	417
36. Langside	9,608	9,459	—	149	139
37. Cathcart	19,028	19,050	22	—	157
CITY	302,882	305,986	3,104	—	15,060

These figures (supplied by the City Assessor) include Farmed-out Houses, houses attached to business premises and inhabitant occupiers.

TABLE III.—ABSTRACT OF METEOROLOGICAL OBSERVATIONS TAKEN AT
SPRINGBURN PUBLIC PARK.

MONTHS 1970	TEMPERATURE			RAINFALL		SUNSHINE Hours
	Highest Temp. in Shade	Lowest Temp. in Shade	Mean Temp.	No. of Days	* Amount Collected in milimtrs.	
January ...	49	10	29.5	25	87.1	29.7
February ...	46	20	33.0	18	99.9	109.7
March ...	53	26	39.5	17	51.6	143.3
April ...	58	28	43.0	24	73.4	126.4
May ...	67	35	51.0	18	38.2	116.3
June ...	77	43	60.0	12	61.9	206.4
July ...	72	44	58.0	26	74.5	108.2
August ...	79	45	62.0	13	83.3	148.8
September ...	69	40	54.5	23	114.9	89.9
October ...	64	34	49.0	21	140.2	86.4
November ...	54	29	41.5	28	141.9	51.2
December ...	52	27	39.5	19	59.2	46.9
1970 ...	79	10	46.7	244	1,026.1	1,263.2
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
1964 ...	72	19	47.1	211	36.94	1,145
1965 ...	74	11	45.3	198	41.52	1,190
1966 ...	80	19	46.3	216	43.66	1,151
1967 ...	75	21	47.0	237	42.69	1,221
1968 ...	80	21	46.7	174	40.62	1,192
1969 ...	79	16	46.7	211	34.67	1,282

* 1959-1969 measurements shown in inches.

TABLE IV.—GLASGOW.—BIRTHS AND BIRTH-RATES *per Million* IN EACH WARD, FOR THE YEAR 1970 AND NUMBER AND PERCENTAGE OF ILLEGITIMATE BIRTHS.

MUNICIPAL WARDS.	Births 1970	Birth- rate 1970	Birth- rate 1969	Illegitimate Births	
				No.	% Total Births.
1. Shettleston and Tollcross ...	676	16,882	20,107	96	14.2
2. Parkhead ...	241	14,331	17,261	33	13.7
3. Dalmarnock ...	615	27,829	32,507	101	16.4
4. Calton ...	304	25,184	28,885	63	20.7
5. Mile-end ...	603	31,325	37,251	101	16.7
6. Dennistoun ...	444	20,892	20,610	40	9.0
7. Provan ...	1,228	15,996	15,212	151	12.3
8. Cowlares ...	628	30,499	35,830	59	9.4
9. Springburn ...	481	16,418	16,462	65	13.5
10. Townhead ...	283	23,832	27,465	37	13.1
11. Exchange ...	77	19,107	19,991	15	19.5
12. Anderston ...	220	23,840	27,795	39	17.7
13. Park ...	276	25,639	20,143	47	17.0
14. Cowcaddens ...	233	20,627	26,058	36	15.5
15. Woodside ...	317	28,103	31,928	46	14.5
16. Ruchill ...	593	15,620	14,693	92	15.5
17. North Kelvin ...	597	31,935	34,980	69	11.5
18. Maryhill ...	491	18,650	19,539	67	13.6
19. Kelvinside ...	295	15,980	13,093	35	11.9
20. Partick (East) ...	310	19,035	17,258	40	12.9
21. Partick (West) ...	317	17,928	19,569	12	3.8
22. Whiteinch ...	269	14,276	16,500	19	7.1
23. Yoker ...	336	11,137	11,987	41	12.2
24. Knightswood ...	703	13,399	12,378	101	14.4
25. Hutchesontown ...	281	23,785	27,377	37	13.2
26. Gorbals ...	168	17,855	21,073	23	13.7
27. Kingston ...	235	26,518	28,372	29	12.3
28. Kinning Park ...	362	24,098	26,024	42	11.6
29. Govan ...	504	28,764	26,293	52	10.3
30. Fairfield ...	382	24,580	23,633	28	7.3
31. Craigton ...	347	9,250	9,062	32	9.2
32. Pollokshields ...	491	14,963	13,846	49	10.0
33. Camphill ...	323	17,626	17,243	13	4.0
34. Pollokshaws ...	715	14,487	14,590	87	12.2
35. Govanhill ...	600	25,799	30,543	31	5.2
36. Langside ...	385	15,339	14,532	21	5.5
37. Cathcart ...	895	13,509	14,851	58	6.6
Institutions ...	8	—	—	7	—
Harbour ...	—	—	—	—	—
CITY ...	16,233	17,884	18,756	1,914	11.8

TABLE V.—GLASGOW.—DEATHS AND DEATH RATES *per Million* IN EACH MUNICIPAL WARD, FOR THE YEAR 1970, AND CORRESPONDING RATES FOR 1969 AND 1968. (Compiled in the Department).

MUNICIPAL WARDS	Deaths 1970	Death-rates		
		1970	1969	1968
1. Shettleston and Tollcross ...	492	12,287	13,196	12,862
2. Parkhead	298	17,720	17,011	16,490
3. Dalrnarnock	286	12,942	13,794	14,895
4. Calton	181	14,995	18,838	16,605
5. Mile-end	247	12,831	14,706	13,647
6. Dennistoun	343	16,140	14,353	15,201
7. Provan	660	8,597	8,518	7,785
8. Cowlairs	284	13,792	15,054	15,229
9. Springburn	348	11,878	12,029	11,081
10. Townhead	168	14,147	13,696	13,346
11. Exchange	121	30,025	26,584	20,183
12. Anderston	155	16,797	17,801	15,243
13. Park	200	18,579	14,863	13,827
14. Cowcaddens	145	12,836	13,076	15,850
15. Woodside	176	15,603	15,270	13,305
16. Ruchill	533	14,039	12,341	14,121
17. North Kelvin	240	12,838	13,020	13,170
18. Maryhill	351	13,332	13,632	14,542
19. Kelvinside	285	15,438	13,240	13,570
20. Partick (East)	237	14,552	13,921	14,638
21. Partick (West)	237	13,403	15,621	13,967
22. Whiteinch	283	15,018	15,750	13,009
23. Yoker	485	16,076	14,353	15,200
24. Knightswood	477	9,092	8,776	8,783
25. Hutchesontown	175	14,813	15,505	14,305
26. Gorbals	124	13,179	13,123	13,495
27. Kingston	123	13,879	13,326	13,578
28. Kinning Park	220	14,645	16,055	16,281
29. Govan	227	12,955	15,485	14,577
30. Fairfield	251	16,151	15,352	15,675
31. Craigton	530	14,128	14,595	14,093
32. Pollokshields	385	11,733	11,326	10,478
33. Camphill	341	18,608	17,721	17,254
34. Pollokshaws	534	10,820	10,213	9,327
35. Govanhill	327	14,060	13,065	14,527
36. Langside	336	13,387	14,685	12,749
37. Cathcart	602	9,086	9,210	8,887
Institutions	616	—	—	—
Harbour	3	—	—	—
CITY	12,026	13,249	13,294	12,930

TABLE VI.—GLASGOW.—DEATHS AND DEATH-RATES *per Million* FROM DIFFERENT CAUSES, FOR THE YEAR 1970, AND THE CORRESPONDING RATES FOR 1969 AND 1968.

(from Registrar General's Annual Return)

* Code No.	CAUSE OF DEATH	Deaths 1970	Annual Death Rate per Million			
			1970	1969	1968	
4	Enteritis and other diarrhoeal diseases	23	25	37	39	
5	Tuberculosis of the respiratory system	90	99	86	93	
6	Other tuberculosis, including late effects	18	20	27	14	
9	Whooping Cough	3	3	—	—	
11	Meningococcal infection	4	4	7	4	
12	Acute poliomyelitis	—	—	—	—	
14	Measles	3	3	—	1	
17	Syphilis and its sequelae	4	4	7	2	
18	Other infective and parasitic diseases †	20	22	33	33	
19	Malignant neoplasms	2,661	2,932	2,838	2,785	
20	Benign and unspecified neoplasms	24	26	38	15	
21	Diabetes mellitus	158	174	142	119	
22	Avitaminoses and other nutritional deficiency	13	14	13	4	
23	Anaemias	34	37	33	40	
46-0	Other general diseases	31	34	32	46	
24	Meningitis	13	14	8	18	
46-1	Other diseases of nervous system	193	213	204	176	
25	Active rheumatic fever	2	2	—	2	
26	Chronic rheumatic heart disease	198	218	188	185	
27	Hypertensive disease	167	184	244	223	
28	Ischaemic heart disease	2,919	3,216	3,193	3,124	
29	Other forms of heart disease	503	554	595	625	
30	Cerebrovascular disease	1,681	1,852	1,889	1,817	
46-2	Other circulatory diseases	349	385	436	425	
31	Influenza	129	142	40	70	
32	Pneumonia	547	603	596	626	
33	Bronchitis, emphysema and asthma	770	848	856	757	
46-3	Other respiratory diseases	116	128	117	110	
34	Peptic ulcer	101	111	82	95	
35	Appendicitis	8	9	11	12	
36	Intestinal obstruction and hernia	32	35	52	56	
37	Cirrhosis of liver	50	55	48	71	
46-4	Other digestive diseases	116	128	148	128	
38	Nephritis and nephrosis	61	67	80	31	
39	Hyperplasia of prostate	16	18	18	32	
46-5	Infections of kidney	49	54	45	65	
46-6	Other diseases of genito-urinary system	38	42	34	40	
40	Abortion	—	—	2	—	
41	Other complications of pregnancy, childbirth and the puerperium	6	7	—	1	
46-7	Diseases of the skin, musculoskeletal system, etc.	51	56	45	44	
42	Congenital Anomalies	119	131	142	125	
43	Birth injury, difficult labour and other anoxic and hypoxic conditions	90	99	121	136	
44	Other causes of perinatal mortality	51	56	92	67	
45-0	Senility without mention of psychosis	16	18	18	20	
45-1	Ill-defined and unknown causes	10	11	18	16	
E47	} Road vehicle accidents	151	166	213	173	
E48-0		Accidents in the home (part BE 50)	152	167	193	226
E48-1		Other violence (part BE 50)	180	198	220	186
E48-2		Suicide and self-inflicted injury	52	57	55	53
E49						
	Total	12,022	13,245	13,296	12,930	

* International Classification—Eighth Revision Abbrev. List "B"

† Including typhoid fever, scarlet fever and streptococcal sore throat, diphtheria and acute infectious encephalitis.

TABLE VIIA.—GLASGOW, 1970.—DEATHS FROM DIFFERENT CAUSES AT SEVERAL AGE PERIODS (MALES).

(from Registrar General's Annual Return)

Code No.	CAUSE OF DEATH	-4 Wks	4- Wks	1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85+	Total Males
4	Enteritis and other diarrhoeal diseases ...	2	7	1	—	—	—	—	—	—	—	—	—	—	10
5	Tuberculosis of the respiratory system ...	—	—	—	—	—	—	1	8	10	19	25	9	—	72
6	Other tuberculosis, including late effects ...	—	—	—	—	—	—	2	2	1	2	2	1	1	11
9	Whooping Cough ...	—	2	—	—	—	—	—	—	—	—	—	—	—	2
11	Meningococcal infection ...	—	1	2	—	—	—	—	—	—	—	—	—	—	3
12	Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14	Measles ...	—	1	1	—	—	—	—	—	—	—	—	—	—	2
17	Syphilis and its sequelae ...	—	—	—	—	—	—	—	—	—	—	1	—	—	1
18	Other infective and parasitic diseases † ...	—	2	2	—	—	—	—	1	2	—	—	2	—	9
19	Malignant neoplasms ...	—	1	3	8	—	11	15	40	146	459	543	251	33	1,510
20	Benign and unspecified neoplasms ...	—	1	1	—	—	—	—	1	2	3	4	—	—	12
21	Diabetes mellitus ...	—	—	—	—	—	—	1	—	6	8	18	11	1	45
22	Avitaminoses and other nutritional deficiency ...	—	2	—	—	—	—	—	—	—	—	2	—	—	4
23	Anaemias ...	—	1	—	—	—	—	—	—	—	1	5	2	2	11
46-0	Other general diseases ...	—	—	1	—	1	—	—	—	—	4	4	1	—	11
24	Meningitis ...	1	3	—	—	—	1	—	—	1	1	—	—	—	7
46-1	Other diseases of nervous system ...	—	2	1	—	—	5	2	6	16	20	18	22	6	98
25	Active rheumatic fever ...	—	—	1	—	—	—	—	—	—	—	—	—	—	1
26	Chronic rheumatic heart disease ...	—	—	—	—	—	—	—	11	17	17	14	7	3	69
27	Hypertensive disease ...	—	—	—	—	—	1	—	9	8	16	26	15	7	82
28	Ischaemic heart disease ...	—	—	—	—	—	2	5	44	175	475	520	313	76	1,610
29	Other forms of heart disease ...	—	—	1	—	—	—	2	2	11	36	76	60	29	217
30	Cerebrovascular disease ...	1	1	—	—	—	—	5	9	31	124	206	193	57	627
46-2	Other circulatory diseases ...	—	—	—	—	—	—	—	—	2	14	53	41	26	136
31	Influenza ...	—	—	—	1	1	—	—	—	5	12	17	13	5	54
32	Pneumonia ...	2	38	3	1	1	1	2	5	14	27	59	60	35	248
33	Bronchitis, emphysema and asthma ...	—	—	—	1	—	—	—	2	29	141	221	122	36	552
46-3	Other respiratory diseases ...	—	9	4	1	1	—	—	1	5	16	18	14	2	71
34	Peptic ulcer ...	—	—	1	—	—	—	—	3	4	24	23	7	1	63
35	Appendicitis ...	—	—	—	—	—	—	—	—	1	2	—	—	1	4
36	Intestinal obstruction and hernia ...	—	1	—	—	—	—	—	—	1	3	3	4	2	14
37	Cirrhosis of liver ...	—	—	—	—	—	—	2	3	3	12	4	4	—	28
46-4	Other digestive diseases ...	—	—	—	—	—	—	2	4	5	11	16	7	2	47
38	Nephritis and nephrosis ...	—	—	—	—	1	1	1	1	3	6	5	7	1	26
39	Hyperplasia of prostate ...	—	—	—	—	—	—	—	—	—	—	4	9	3	16
46-5	Infections of kidney ...	—	—	—	—	—	—	—	—	—	5	2	3	1	11
46-6	Other diseases of genitourinary system ...	—	1	—	—	—	—	—	—	1	4	4	5	5	20
40	Abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
41	Other complications of pregnancy, childbirth and the puerperium ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
46-7	Diseases of the skin, musculo-skeletal system etc. ...	—	—	—	—	1	—	—	—	2	1	6	4	1	15
42	Congenital Anomalies ...	36	13	9	1	—	6	1	—	1	1	1	—	1	70
43	Birth Injury, difficult labour and other anoxic and hypoxic conditions ...	53	1	—	—	—	—	—	—	—	—	—	—	—	54
44	Other causes of perinatal mortality ...	32	—	—	—	—	—	—	—	—	—	—	—	—	32
45-0	Senility without mention of psychosis ...	—	—	—	—	—	—	—	—	—	—	—	—	3	3
45-1	Ill-defined and unknown causes ...	—	—	—	—	—	—	—	—	1	1	2	1	—	5
E47 E/ 48-0 E/ 48-1	Road vehicle accidents ...	—	—	6	6	9	19	11	9	11	17	9	7	—	104
E/ 48-2 E49	Accidents in the home (part BE 50) ...	—	4	8	—	—	—	4	5	10	17	7	9	3	67
	Other violence (part BE 50) ...	—	4	4	5	3	12	20	17	16	16	14	4	1	116
	Suicide and self-inflicted injury ...	—	—	—	—	—	5	2	7	6	12	1	4	1	38
	All causes ...	127	95	49	24	18	64	78	189	545	1,529	1,933	1,212	345	6,208

* International Classification—Eighth Revision Abbrev. List "B".

† Including typhoid fever, scarlet fever and streptococcal sore throat, diphtheria and acute infectious encephalitis.

TABLE VII B.—GLASGOW, 1970.—DEATHS FROM DIFFERENT CAUSES
AT SEVERAL AGE PERIODS (FEMALES).

(from Registrar General's Annual Return)

* Code No.	CAUSE OF DEATH	-4 Wks	4- Wks	1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85+	Total F'mls	Total Both Sexes
4	Enteritis and other diarrhoeal diseases ...	2	6	—	1	—	—	—	—	—	2	—	1	1	13	23
5	Tuberculosis of the respiratory system ...	—	—	—	—	—	—	—	2	6	6	1	3	—	18	90
6	Other tuberculosis, including late effects ...	—	—	—	—	—	—	—	2	—	2	2	1	—	7	18
9	Whooping Cough ...	—	1	—	—	—	—	—	—	—	—	—	—	—	1	3
11	Meningococcal infection ...	—	—	1	—	—	—	—	—	—	—	—	—	—	1	4
12	Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14	Measles ...	—	—	—	1	—	—	—	—	—	—	—	—	—	1	3
17	Syphilis and its sequelae ...	—	—	—	—	—	1	—	—	1	1	—	—	—	3	4
18	Other infective and parasitic diseases† ...	1	—	2	—	—	—	—	1	3	2	1	1	—	11	20
19	Malignant neoplasms ...	—	—	—	4	—	8	17	34	126	293	331	267	71	1,151	2,661
20	Benign and unspecified neoplasms ...	—	—	—	—	—	—	1	1	1	1	5	2	1	12	24
21	Diabetes mellitus ...	—	—	—	—	1	—	—	4	3	22	47	34	2	113	158
22	Avitaminoses and other nutritional deficiency ...	—	1	—	—	—	—	—	—	2	—	2	4	—	9	13
23	Anaemias ...	—	—	1	—	—	—	3	—	1	1	4	9	4	23	34
46-0	Other general diseases ...	1	2	—	—	—	—	1	2	—	5	4	4	1	20	31
24	Menigitis ...	—	—	—	—	—	—	1	1	1	2	1	—	—	6	13
46-1	Other diseases of nervous system ...	—	1	2	1	—	3	4	2	7	15	17	28	15	95	193
25	Active rheumatic fever ...	—	—	—	—	—	—	1	—	—	—	—	—	—	1	2
26	Chronic rheumatic heart disease ...	—	—	—	—	—	1	—	10	33	43	24	13	5	129	198
27	Hypertensive disease ...	—	—	—	—	—	—	2	3	4	9	33	25	9	85	167
28	Ischaemic heart disease ...	—	—	—	—	—	3	2	11	55	182	387	461	208	1,309	2,919
29	Other forms of heart disease ...	—	—	—	—	—	1	—	3	9	19	74	114	66	286	503
30	Cerebrovascular disease ...	—	—	—	—	—	2	2	11	41	112	279	388	219	1,054	1,681
46-2	Other circulatory diseases ...	—	—	—	—	—	—	1	2	2	13	53	81	61	213	349
31	Influenza ...	—	—	—	—	1	—	—	4	1	20	21	24	4	75	129
32	Pneumonia ...	2	33	4	—	1	2	2	5	9	13	61	91	76	299	547
33	Bronchitis, emphysema and asthma ...	—	—	—	—	—	1	4	4	26	36	66	53	28	218	770
46-3	Other respiratory diseases ...	1	9	1	1	—	—	—	1	4	7	11	7	3	45	116
34	Peptic ulcer ...	—	—	—	—	—	—	—	—	2	5	11	15	5	38	101
35	Appendicitis ...	—	—	—	1	—	—	—	—	—	—	—	2	1	4	8
36	Intestinal obstruction and hernia ...	1	—	—	—	—	—	—	1	—	—	3	10	3	18	32
37	Cirrhosis of liver ...	—	—	—	—	—	—	—	1	6	6	5	3	1	22	50
46-4	Other digestive diseases ...	—	1	—	—	—	—	2	—	3	6	8	17	24	8	69
38	Nephritis and nephrosis ...	—	—	—	1	—	—	—	1	—	3	5	12	4	35	61
39	Hyperplasia of prostate ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16
46-5	Infections of kidney ...	—	—	—	—	—	1	1	—	3	10	8	11	4	38	49
46-6	Other diseases of genito urinary system ...	—	1	—	—	—	—	—	—	1	—	5	9	2	18	38
40	Abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
41	Other complications of pregnancy, childbirth and the puerperium ...	—	—	—	—	—	—	3	2	1	—	—	—	—	6	6
46-7	Diseases of the skin, musculo-skeletal system etc. ...	—	—	—	—	—	—	1	1	4	2	13	10	5	36	51
42	Congenital Anomalies ...	19	8	9	3	—	2	1	4	1	1	1	—	—	49	119
43	Birth injury, difficult labour and other anoxic and hypoxic conditions ...	36	—	—	—	—	—	—	—	—	—	—	—	—	36	90
44	Other causes of perinatal mortality ...	19	—	—	—	—	—	—	—	—	—	—	—	—	19	51
45-0	Senility without mention of psychosis ...	—	—	—	—	—	—	—	—	—	—	—	1	12	13	16
45-1	Ill-defined and unknown causes ...	—	1	—	—	—	—	—	—	—	2	—	2	—	5	10
E/47 E/ 48-0 E/ 48-1	Road vehicle accidents ...	—	—	3	9	3	5	2	2	3	4	7	8	1	47	151
E/ 48-1 E/ 48-2 E/49	Accidents in the home (part BE 50) ...	—	4	3	—	—	2	2	7	8	8	9	23	19	85	152
	Other violence (part BE 50) ...	2	1	1	1	2	1	4	3	6	3	9	22	9	64	180
	Suicide and self-inflicted injury ...	—	—	—	—	—	1	—	2	6	2	2	1	—	14	52
	All causes ...	84	69	27	23	8	36	57	128	385	862	1,526	1,756	853	5,814	12,022

* International Classification—Eighth Revisor Abbrev. List "B".

† Including typhoid fever, scarlet fever and streptococcal sore throat, diphtheria and acute infectious encephalitis.

TABLE VIII.—GLASGOW.—STILLBIRTHS, DEATHS UNDER 1 YEAR AND DEATH-RATES PER 1,000 BIRTHS IN EACH MUNICIPAL WARD, FOR THE YEARS 1970 AND 1969

MUNICIPAL WARDS	Still births 1970	Rate per 1,000 Births* 1970	Rate per 1,000 Births* 1969	Deaths —1 year 1970	Death Rate per 1,000 Births† 1970	Death Rate per 1,000 Births† 1969
1. Shettleston and Tollcross ...	11	16	14	14	21	22
2. Parkhead ...	6	24	7	4	17	29
3. Dalmarnock ...	12	19	17	21	34	35
4. Calton ...	10	32	20	7	23	26
5. Mile-end ...	5	8	17	15	25	39
9. Dennistoun ...	9	20	23	12	27	36
7. Provan ...	29	23	21	36	29	31
8. Cowlairs ...	10	16	16	14	22	26
9. Springburn ...	11	22	12	18	37	22
10. Townhead ...	5	17	8	6	21	29
11. Exchange ...	2	25	—	3	39	32
12. Anderston ...	4	18	11	3	14	34
11. Park ...	3	11	8	6	22	12
14. Cowcaddens ...	2	9	18	7	30	22
15. Woodside ...	3	9	8	6	19	27
16. Ruchill ...	11	18	18	19	32	31
17. North Kelvin ...	17	28	18	11	18	13
18. Maryhill ...	8	16	21	18	37	25
19. Kelvinside ...	2	7	4	4	14	7
20. Partick (East)	4	13	26	9	29	12
21. Partick (West)	9	28	20	5	16	29
22. Whiteinch ...	3	11	13	4	15	23
23. Yoker ...	6	18	13	8	24	18
24. Knightswood ...	15	21	24	20	28	29
25. Hutchesontown	5	17	13	7	25	13
26. Gorbals ...	2	12	5	3	18	33
27. Kingston ...	2	8	11	2	9	42
28. Kinning Park	8	22	20	8	22	50
29. Govan ...	6	12	16	8	16	27
30. Fairfield ...	2	5	15	8	21	28
31. Craigton ...	5	14	19	4	12	36
32. Pollokshields ...	4	8	16	11	22	23
33. Camphill ...	6	18	18	4	12	18
34. Pollokshaws ...	15	21	17	22	31	25
35. Govanhill ...	8	13	19	12	20	28
36. Langside ...	4	10	10	1	3	24
37. Cathcart ...	15	16	12	15	17	24
Institutions ...	—	—	—	—	—	—
Harbour ...	—	—	—	—	—	—
CITY ...	279	17	16	375	23	27

* Live and Stillbirths.

† Live Births.

TABLE IX.—GLASGOW INFANT DEATHS, 1970.
(from the Registrar General's Annual Return).

Abbreviated List B.		Males			Females			Both sexes — 1 year
		-4 wks.	4 wks. +	Total	-4 wks.	4 wks. +	Total	
	<i>Congenital Anomalies—</i>							
42-0	—of nervous system	8	4	12	5	3	8	20
42-1	—of circulatory system	10	7	17	10	4	14	31
42-2	Other congenital anomalies ...	18	2	20	4	1	5	25
	<i>Diseases of Early Infancy—</i>							
43	Birth injury, difficult labour and other anoxic and hypoxic condi- tions	53	1	54	36	—	36	90
44	Other causes of perinatal mortality	32	—	32	19	—	19	51
	<i>Diseases of the Respiratory System—</i>							
31	Influenza	—	—	—	—	—	—	—
32	Pneumonia	2	38	40	2	33	35	75
33	Bronchitis, emphysema and asthma	—	—	—	—	—	—	—
46-3	Other respiratory disease	—	9	9	1	9	10	19
	<i>Diseases of the Digestive System—</i>							
36	Intestinal obstruction and hernia	—	1	1	1	—	1	2
46-4	Other digestive disease	—	—	—	—	1	1	1
	<i>Diseases of the Nervous System—</i>							
24	Meningitis	1	3	4	—	—	—	4
46-1	Other diseases of the nervous system	—	2	2	—	1	1	3
	<i>Tuberculosis—</i>							
5	Respiratory	—	—	—	—	—	—	—
6	Non-respiratory	—	—	—	—	—	—	—
	<i>Infectious Disease—</i>							
4	Enteritis and other diarrhoeal diseases	2	7	9	2	6	8	17
9	Whooping Cough	—	2	2	—	1	1	3
11	Meningococcal infections	—	1	1	—	—	—	1
12	Poliomyelitis	—	—	—	—	—	—	—
14	Measles	—	1	1	—	—	—	1
17	Other infective or parasitic ...	—	2	2	1	—	1	3
	<i>Violence—</i>							
E 48-1	Accidents in the home	—	4	4	—	4	4	8
E 48-2	Other violent causes	—	4	4	2	1	3	7
	<i>All other causes</i>	1	7	8	1	5	6	14
	Totals	127	95	222	84	69	153	375

TABLE X.—GLASGOW, 1969-1970—ABSTRACT OF NOTIFICATIONS UNDER
NOTIFICATION OF BIRTHS ACT, 1907

	1970	1969	1968
Total Number of Notifications	16,690	18,107	19,206
Doctor at Home	820	1,290	1,709
Doctor in Nursing Home	81	85	92
Doctor in Institution... ..	15,507	16,488	17,006
Maternity Hospital (Outdoor) Nurse ...	—	—	—
Midwife in Nursing Home	230	180	264
Certified Midwife	—	—	—
Municipal Midwife	49	61	130
Others	3	3	5

TABLE XI.—GLASGOW, 1970 and 1969.—CASES OF INFECTIOUS DISEASE REGISTERED AND NUMBERS OF THESE TREATED IN FEVER HOSPITALS, &C.

	1970				1969			
	Fever Hosp.	Other Institutions	Home	Total	Fever Hosp.	Other Institutions	Home	Total
<i>A. Notifiable—</i>								
Anthrax	—	—	—	—	—	—	—	—
Cerebrospinal Fever	10	6	—	16	16	10	—	26
Continued Fever	17	—	—	17	29	1	2	32
Diphtheria	—	—	—	—	—	—	—	—
Dysentery	456	62	504	1,022	690	38	1,102	1,830
Encephalitis Lethargica	—	—	—	—	—	—	—	—
Erysipelas	11	—	12	23	10	—	21	31
Food Poisoning	65	3	103	171	78	2	209	289
*Infective Jaundice	123	4	314	441	205	15	441	661
Leprosy	—	—	—	—	—	—	—	—
Malaria	6	—	—	6	9	1	—	10
Measles (a)	263	12	4,079	4,354	105	5	1,798	1,908
Ophthalmia Neonatorum	18	6	1	25	18	6	5	29
Pneumonia—								
Acute Influenzal	1	21	42	64	1	6	18	25
Acute Primary	896	544	393	1,833	1,139	525	373	2,037
Polio-Encephalitis, Acute	—	—	—	—	—	—	—	—
Poliomyelitis—								
Paralytic	1	1	—	2	—	—	—	—
Non-paralytic	—	—	—	—	—	—	—	—
Puerperal Fever	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	32	1	34	1	60	1	62
Scarlet Fever	15	—	106	121	15	—	204	219
Smallpox	—	—	—	—	—	—	—	—
Trachoma	—	—	—	—	—	—	—	—
Typhoid Fever (and								
Paratyphoid B)	1	—	—	1	4	—	1	5
Whooping Cough	165	1	897	1,063	29	—	131	160
<i>B. Not Notifiable—</i>								
Chickenpox	32	3	465	500	58	4	790	852
Gastro-enteritis	128	22	144	294	238	43	133	414
German Measles|| ... ..	5	—	53	58	10	—	10	20
Others	° 7	—	2	9	° 36	° 1	° 12	49
	2,221	717	7,116	10,054	2,691	717	5,251	8,659
Notified but diagnosis altered to Non Infectious Disease	† 1,622	—	—	1,622	× 1,692	—	—	1,692
	3,843	717	7,116	11,676	4,383	717	5,251	10,351

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 Institutions in times of pressure; cases of puerperal fever, puerperal pyrexia, and ophthalmia neonatorum occurring in other than Fever Hospitals and allowed to remain; and cases of trachoma treated in Stobhill Hospital; the cases shown under the headings "Other Institutions" are for the most part, accidental.

* Prior to October 1968 this referred only to "Weil's Disease" but now includes Infective Hepatitis.

(a) Became notifiable as from 1st October 1968.

× Includes 2 Dysentery carriers.

° Mumps.

† Includes 1 *Leptospira Canicola*

|| Became notifiable in November, 1970.

TABLE XII.—GLASGOW—POPULATION: BIRTHS AND DEATHS; BIRTH—RATES AND DEATH—RATES PER 1,000; ALSO DEATHS UNDER 1 YEAR OLD.

DEATH-RATES PER 1,000 BIRTHS SINCE 1913.

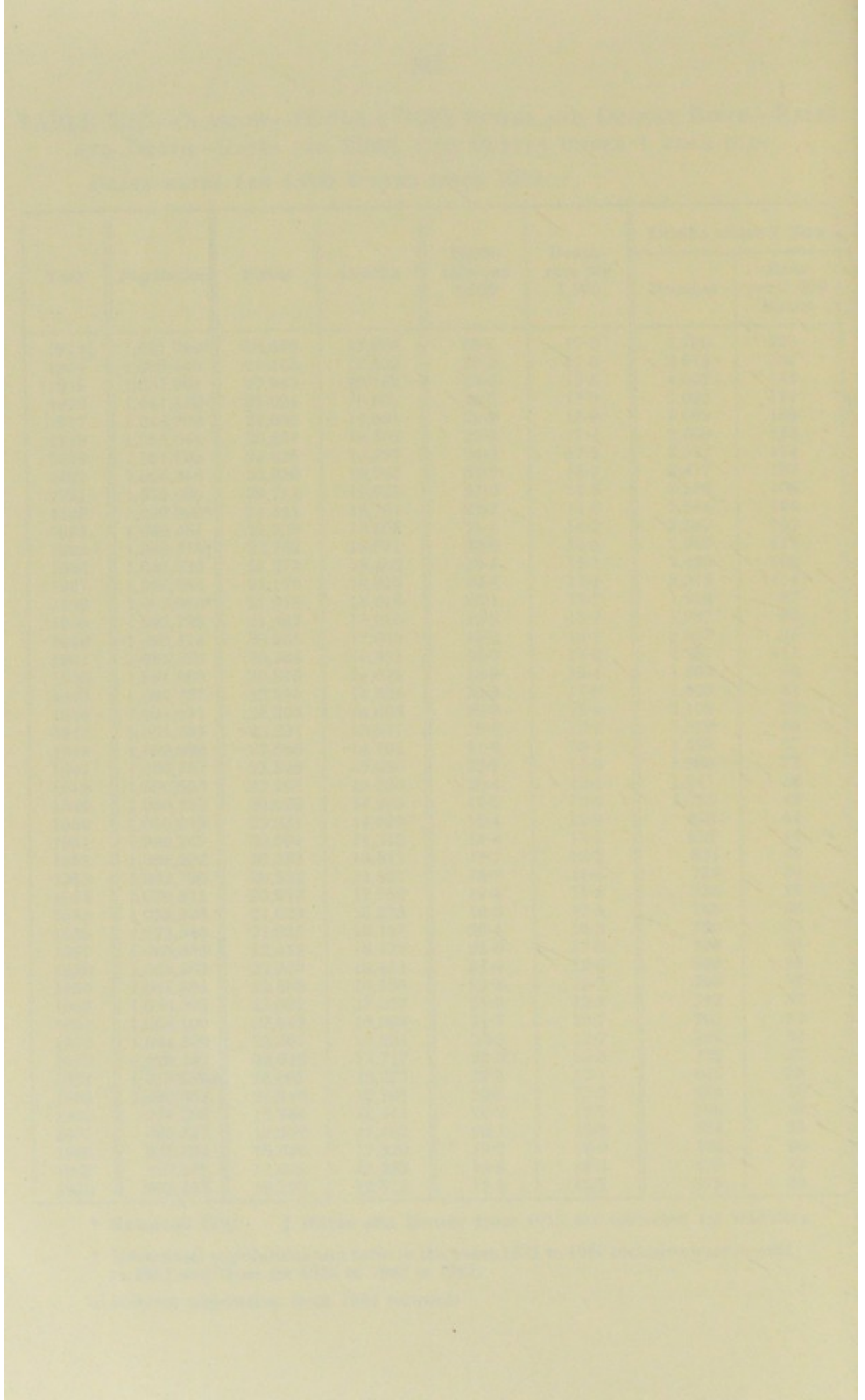
Year	Population	Births	Deaths	Birth-rate per 1,000	Death-rate per 1,000	Deaths under 1 Year	
						Number	Rate per 1,000 Births
1913†	1,021,789*	28,688	17,693	28.1	17.3	3,706	129
1914	1,028,440	29,462	17,522	28.6	17.0	3,913	133
1915	1,035,091	27,943	20,159	27.0	19.5	4,007	143
1916	1,041,742	27,094	16,601	26.0	15.9	2,996	111
1917	1,048,393	24,030	16,691	22.9	15.9	3,089	129
1918	1,055,044	23,524	18,362	22.3	17.4	2,660	113
1919	1,061,695	25,835	18,237	24.3	17.2	2,937	114
1920	1,068,346	32,626	16,765	31.5	15.7	3,477	107
1921	1,075,000	29,712	15,625	27.6	14.5	3,138	106
1926	1,090,380*	24,541	15,731	22.7	14.6	2,548	104
1931	1,088,461	22,926	15,505	21.1	14.2	2,397	105
1932	1,088,215†	22,732	16,071	20.9	14.8	2,542	112
1936	1,087,230	22,273	16,406	20.5	15.1	2,429	109
1937	1,086,984	22,176	16,379	20.4	15.1	2,313	104
1938	1,092,968*	21,979	15,016	20.1	13.7	1,919	87
1939	1,092,722	21,682	15,010	19.8	13.7	1,737	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	1,091,983	20,615	14,679	18.9	13.4	1,863	90
1943	1,091,737	22,363	14,824	20.5	13.6	1,825	82
1944	1,091,491	22,203	14,603	20.3	13.4	2,108	95
1945	1,091,245	20,294	13,941	18.6	12.8	1,379	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	1,090,506	22,292	13,620	20.4	12.5	1,241	56
1949	1,090,260	20,923	14,203	19.2	13.0	1,033	49
1950	1,090,013	20,031	14,090	18.4	12.9	879	44
1951	1,089,767	20,091	14,312	18.4	13.1	922	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	1,079,311	20,977	12,750	19.4	11.8	736	35
1955	1,075,825	21,023	13,275	19.5	12.3	765	36
1956	1,072,340	21,885	13,194	20.4	12.3	720	33
1957	1,068,855	22,413	13,177	21.0	12.3	774	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	1,053,100	22,842	13,368	21.7	12.7	703	31
1962	1,044,500	23,491	13,224	22.5	12.7	762	32
1963	1,029,147	22,618	13,717	22.0	13.3	722	32
1964	1,018,582 ^a	22,405	12,277	22.0	12.1	642	29
1965	1,000,857	20,846	12,761	20.8	12.7	586	28
1966	979,798	19,766	12,441	20.2	12.7	598	30
1967	960,527	19,332	11,482	20.1	12.0	474	25
1968	945,034	18,816	12,220	19.9	12.9	494	26
1969	927,948	17,405	12,338	18.8	13.3	470	27
1970	907,672	16,233	12,022	17.9	13.2	375	23

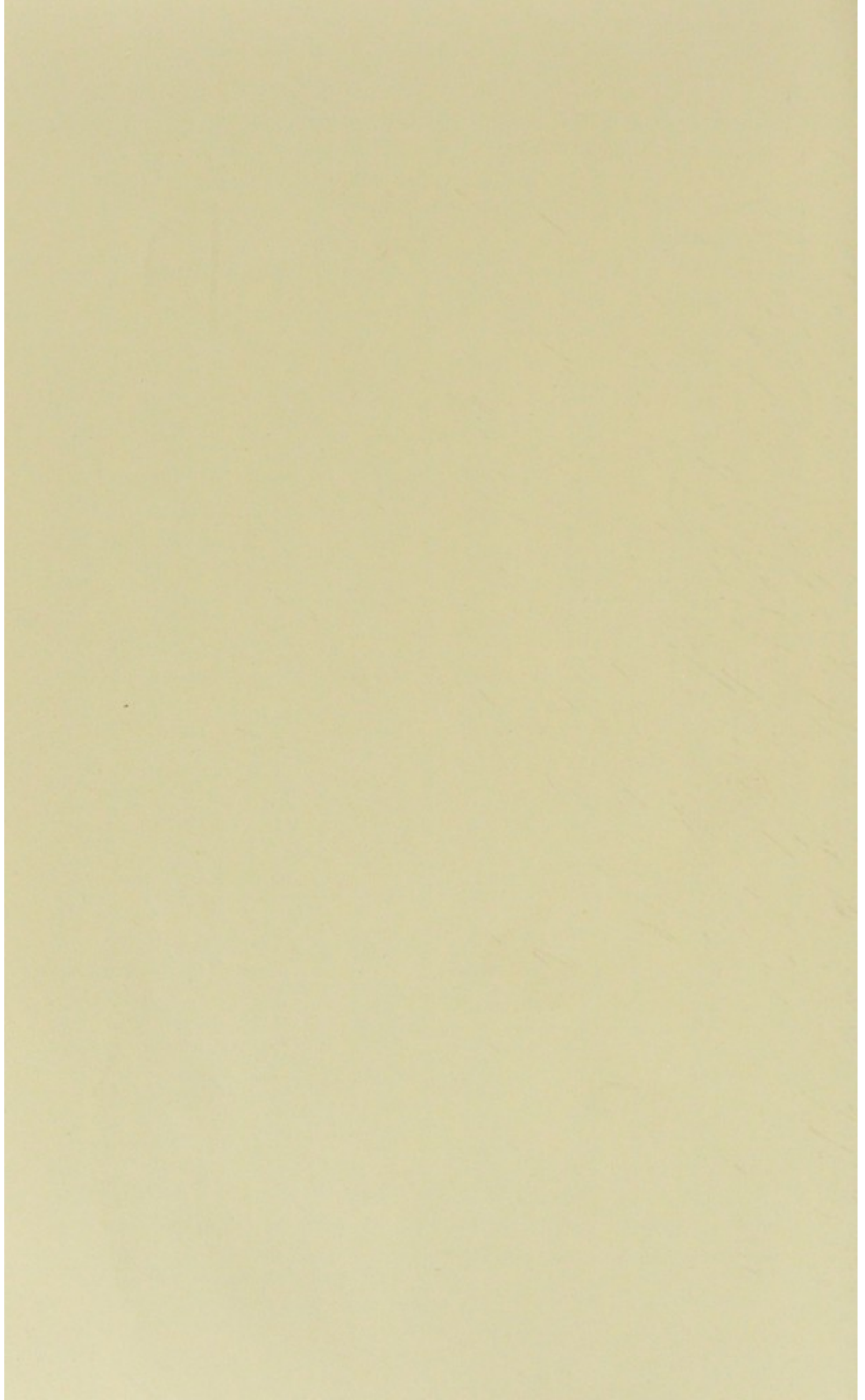
* Extended City. † Births and Deaths from 1913 are corrected for transfers.

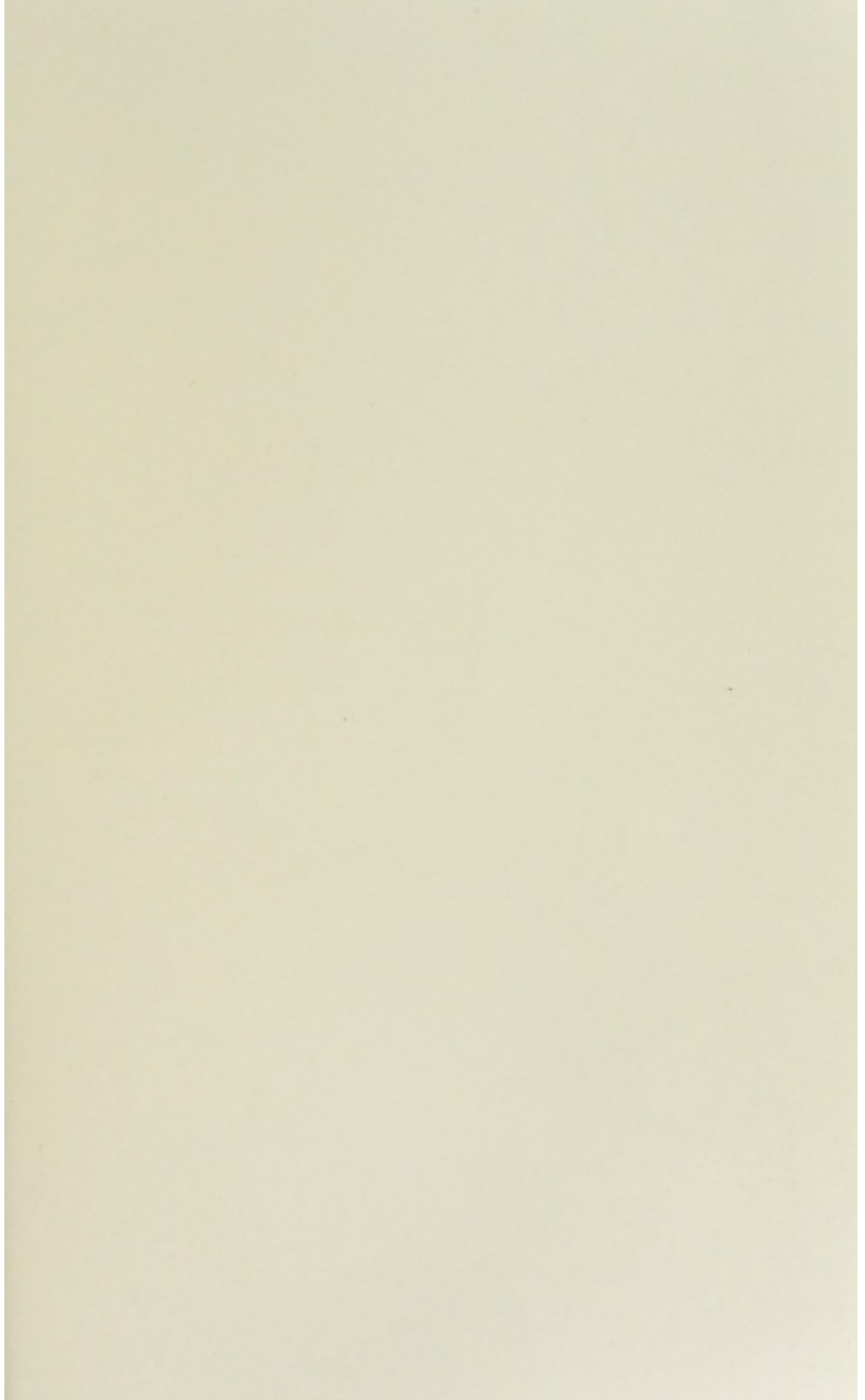
† Intercensal populations and rates in the years 1932 to 1950 inclusive were revised in 1951 and those for 1952 to 1960 in 1961.

^a Midyear population from 1964 onwards









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