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PUBLIC HEALTH DEPARTMENT,

GREENOCK, 5TH MAY, 1926.

*To the Members of the Scottish Board of Health,  
and to the Local Authority of the Burgh of Greenock.*

GENTLEMEN,

I have the honour to submit my seventh Annual Report on the health of the Burgh of Greenock for the year 1925, in accordance with the requirements of the Scottish Board of Health.

The Vital Statistics for the year compare most favourably with the year preceding when, as it was then stated, the mortality was high, consequent upon epidemics of measles and whooping cough. During 1925 we were fortunate in escaping these diseases in epidemic form, and it would appear to me that the mortality figures, especially in urban districts, vary from high to low just according to the presence or absence of these diseases in epidemic form. From the nature of the incidence of both of these diseases, where the infection is spread before any preventative measures can be taken, the Public Health Authorities would appear to have very little scope in regard to the control of such diseases amongst those under school age, and will continue to be thus handicapped until the causative germs have been isolated and protective sera prepared by the Bacteriologists. The death-rate from all causes is 14.32 after correction for transfers, as compared with 15.22 in 1924, and an average of 15.69 for the preceding five years. The high mortality from these diseases results of course from the sequelae, bronchitis and pneumonia, and the action of the Scottish Board of Health in sanctioning a grant for the hospital treatment of such cases would appear to have been very well founded and has been taken advantage of during the year. The birth-rate, 24.54 compares with 24.16 in 1924, and an average of 23.47 for the preceding five years. It is pleasing to note that the birth-rate, which had been steadily declining for several years previously, has now commenced to rise again.

The Phthisis death-rate, 8.37 per 10,000 of the population, is the lowest rate on record in this community, and compares with 9.86 in 1924, whilst the death-rate from all tuberculous diseases was 14.03 per 10,000 of the population, as compared with 14.25 in 1924. This also is a record figure, which is most satisfactory.

Last year I had occasion to suggest co-operation by the Education Authority with the Local Authority in the direc-

tion of providing open-air schools for the young contacts of tubercular disease, who live under the most unfavourable housing conditions, but this has not yet been done, and I think we may fairly claim that the improved figures in regard to tubercular disease may not be unreasonably referred to the distinct improvement in the housing conditions which have been accomplished during 1925 by the clearing of slum dwellings and the erection of more healthy houses, which has been more marked during 1925 than in any preceding year. The treatment of all kinds of Tubercular Diseases has been carried out systematically in our local Institutions and at the Tuberculosis Dispensary, where much greater advantage has been taken of the forms of treatment at these places than in preceding years. Provision of rents and clothing from the King Edward Memorial Fund has been fully taken advantage of, in addition to a very liberal distribution of suitable nourishment in necessitous cases provided by the Corporation. The Simpson Light at the Dispensary has also been used with marked success for the treatment of Tuberculosis otherwise than Pulmonary disease, and I am hopeful of an early installation of Artificial Sunlight Lamps for such treatment, both in Gateside Hospital and in Smithston Pavilion. We also derived much benefit from working agreements which we have established with other Institutions for the treatment of Tubercular Patients.

The Clinic at Shaw Place continues to be attended by ever increasing numbers, and the additional medical assistance which was authorised during 1924 has been fully made use of during 1925, with beneficial results to both patients and medical assistants. The numbers of children brought there are still suffering from inanition due to want of nourishment rather than actual disease, and the cases referred by the Medical Officer from the Clinic to the Milk Committee for the supply of Free Milk have become increased to a great extent. No fewer than 132,000 pints of milk were thus distributed during 1925 by the Milk Committee. The visitation by Health Visitors to children under five years has also been most efficiently carried out, no fewer than 40,320 visits having been made by the Health Visitors as compared with 25,460 in 1924. The figures above mentioned must surely indicate a very real work which is being done by the Child Welfare Department.

The Maternity Hospital at Togo House, a record of which is referred to in my Report elsewhere, still continues to do good work, and the extension of the Hospital, which I referred to last year, would have been almost an accomplished fact by this time but for the delay caused by difficulties in

regard to the acquiring of adjacent property, which the Scottish Board of Health suggested should be the direction of the extension of the Hospital. These difficulties have now been overcome and I can confidently anticipate that the extended Hospital will be doing useful work during 1926.

With regard to the Clinic for the treatment of Venereal Diseases at the Royal Infirmary, this still continues to be very satisfactorily accomplished to an ever increasing number of patients, and Dr. Donald, the Medical Officer in charge, reports that much benefit has been derived by those attending the Clinic. Mr. Carson, the Orderly, continues to work most satisfactorily, and by his tact and ability would seem to have succeeded in continuing the success of the Clinic which was so marked during the period in which Mr. Brownness occupied the position. The treatment of female cases still continues to be carried out in connection with the Glasgow Treatment Centres and the Clinic at Paisley for indoor cases, but I am still hopeful of establishing a Treatment Centre for Females in this district, which would obviate the inconvenience to the patients of travelling to and from Glasgow so frequently for treatment.

I am,

Gentlemen,

Your obedient Servant,

*J. H. Fairlie Whiteford* B.A., M.B., D.P.H.

*Medical Officer of Health.*

## BOUNDARIES OF DISTRICTS.

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- A**—**EAST**—All east of a line running down the centre of Lynedoch Street and Bogle Street, by way of Regent Street. (Wards I., II., III.)
- B**—**EAST CENTRAL**—From a line drawn down the centre of Ann Street, Buccleuch Street, and Vennel to West Harbour, and thence eastward to boundary of foregoing district. (Wards IV., and V.)
- C**—**WEST CENTRAL**—From a line down the centre of West Burn, Nelson Street, Argyle Street and Laird Street, by way of West Blackhall Street, to the Albert Harbour, and thence eastward to boundary of foregoing districts. (Wards VI. and VII.)
- D**—**WEST**—All west of the foregoing district to the borders of Gateside Area.
- E**—**GATESIDE AREA**—The area annexed under the Greenock Corporation Act, 1909, including Smithston Poorhouse and Asylum, Gateside Fever Hospital, the cottages at Gateside, and a few farms.

# REPORT

ON THE

## Health of the Burgh of Greenock

*For the Year 1925.*

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### VITAL STATISTICS.

Population.—The population as estimated by the Registrar-General to the middle of 1925 is 81,200, and will be used throughout this Report, although, as in former years, and for the same reasons, I am by no means satisfied that this number is not considerably underestimated.

Deaths.—There were 1,196 deaths registered in the Burgh during 1925, representing a gross death-rate of 14.72 per 1000 of the population. This figure, however, is subject to correction in respect of transfers, there being 33 "In" and 66 "Out," and the net total deaths number 1,163, equivalent to a death-rate of 14.32. The average for the last five years was 15.70.

Age Distribution of Mortality.—Table 1 shows the total deaths in the Burgh, arranged according to age periods.

Under 1 year there were	214	deaths, or	18.40	per cent. of the whole.
Between 1 and 2 years	78	"	6.71	"
" 2 and 5 years	54	"	4.64	"
" 5 and 15 years	45	"	3.87	"
" 15 and 25 years	61	"	5.25	"
" 25 and 45 years	118	"	10.14	"
" 45 and 65 years	240	"	20.64	"
Over 65 years,	353	"	30.35	"

This shews an increase in the ages over 65 years, but a decrease at all other age periods.

The Infantile Mortality Rate (deaths under 1 year per 1000 births).—There were 214 deaths amongst infants under 1 year, equivalent to a rate of 107.37. In 1924 there were 225 deaths, equivalent to a rate of 113.40, and the average for the last five years was 107.52.

The natural increase of population, i.e., excess of births over deaths, was 830, as against 730 in 1924, and the average for the last five years was 1,103.

Area.—The area of the Burgh is 2,945 acres, and the density of the population is 27.57 persons per acre. This is explained by the Registrar-General's estimate being 900 less than for the preceding year.



Births.—1,993 births were registered during the year. This was equivalent to a birth-rate of 24.54 per 1000 of the population, and represents an increase of .38 per 1000. In 1924 the births numbered 1,984, this being equivalent to a birth-rate of 24.16 per 1000 of the population, and the average for the last five years was 24.47.

Of the births registered 1037 were male and 956 female, thus shewing for the sixth consecutive year an excess of males over females. As I had occasion to remark last year, that even then the regular increase of males as compared with females was unique in comparison with other districts, and it is further all the more remarkable that the same state of affairs has again persisted during 1925. The illegitimate births number 113, or 5.67 per cent. of the whole, which shews an increase from last year when the rate was 4.78.

#### Comparison of Districts A. B. C. and D.

For the purpose of comparing the Districts of A, B, C, and D, I have estimated the population of each. This estimate is based upon the ratio which the total number of Parliamentary voters in the Burgh bears to the total population, and the number of voters in each ward multiplied by this figure gives the estimated population. This has enabled me to ascertain the state of each district from the Public Health point of view, and the results are set out in the following Tables, District E. being ignored, although this will not be the case during 1926, owing to the housing schemes which are being carried out in that district.

District.	Population.	Death-rate.	Phthisis Death-rate.
A. East, ... ..	24,914	14.57	0.96
B. East Central, ... ..	17,073	13.06	0.99
C. West Central, ... ..	24,295	14.90	0.86
D. West, ... ..	14,838	11.45	0.26
Whole Burgh, ... ..	81,200	14.32	0.83

District,	Births.	Birth-rate	Infantile Death-rate.
A. East, ... ..	704	29.30	102.73
B. East Central, ... ..	430	25.18	76.74
C. West Central, ... ..	672	27.66	133.92
D. West, ... ..	154	10.37	64.93
Whole Burgh, ... ..	1,993	24.54	107.37

As will be seen from the above the East District again shews the highest birth-rate. The West Central shews the highest infantile death-rate, as also the highest death-rate. The Phthisis death-rate in the East Central District is higher than in any of the other districts.

## CLASSIFICATION AND THE CAUSES OF DEATH.

**Zymotic Diseases.**—The various forms of infectious disease, including Influenza, but excluding Phthisis and Pneumonia caused 72 deaths, as against 182 in 1924. Compared with 1924 this shews a decrease of 110 deaths. The Zymotic death-rate for the year is 0.89, a decrease of 1.32 as compared with 1924, and a decrease as compared with the average of the last five years of 1.04, when the average was 1.93.

**Tuberculous Diseases.**—Phthisis caused 68, and other Tuberculous Diseases 46 deaths. The latter included 14 deaths from Tubercular Meningitis and 15 from Abdominal Tuberculosis. The corresponding figures for 1924 and the previous five years' average are as follows:—

	Phthisis.	Other Tuberculous Diseases.
1924, ... ..	81	36
Previous 5 years' average, ...	82	47

The death-rate from Phthisis was 0.83 per 1000 of the population; and from all forms of Tuberculous Disease, including Phthisis, 1.40, as compared with 1.42 in 1924. The relative figures for the average of the last five years were 1.00 and 1.58.

**Diseases Classified according to Systems.**—Diseases of the Respiratory System stand highest with 206 deaths, including 123 from Pneumonia and Broncho-Pneumonia and 59 from Bronchitis, whilst the diseases of the Circulatory System caused 201 deaths. It is to be noted that the deaths from diseases of the Circulatory System are steadily increasing. Deaths from diseases of the Nervous System numbered 113, and there were 63 deaths from diseases of the Digestive System.

**Malignant Diseases (including Cancer).**—There were 88 deaths, of which 35 were males and 53 females, and the average for the last five years was 97. It is satisfactory to note that, whilst Malignant Diseases, generally speaking, throughout the country shew an increase, there was a decrease in Greenock during 1925 as compared with previous years.

**Accidents and Violence.**—36 deaths were caused in this manner, 27 being males and 9 females. 5 of the deaths were due to drowning, as against 2 last year, and 4 were suicidal.

**Premature Births.**—34 deaths were accounted for through Premature Birth, equal to 17.06 per 1000 births.

This shews a very considerable decrease from last year when the figures were 43, and seems to suggest that the benefit from the ante-natal clinics is beginning to make itself shewn.

### INFECTIOUS DISEASES.

1,674 cases of Infectious Disease, and 188 cases of Tubercular Disease—in all 1,862 cases—were ascertained during the year. In 1924 the numbers were respectively 3,939 and 171—a total of 4,110. Compared with 1924 the following show an increase:—Diphtheria, Pneumonia, Erysipelas and Chickenpox, while Scarlet Fever, Enteric Fever, Measles and Whooping Cough shew a decrease.

There were no cases of Malaria. 111 cases of Pneumonia were ascertained, and are included in the figure above given for Infectious Diseases. 31 of the 111 cases of Pneumonia occurred in children under one year of age, and this would seem to account for the infantile mortality figures being still somewhat high.

Table II shews the mortality at different periods of life occurring in each of the five districts during the year.

Table III shews the number of deaths belonging to the Burgh of Greenock, but occurring in other districts during the year.

Table IV. shews the total mortality during the year with the equivalent death-rates.

Table V. shews the number of cases ascertained month by month during the year, and indicates the prevalence of disease as regards season. The greatest number of cases was ascertained in the month of January, chiefly owing to Whooping Cough, the prevalent disease, and the lowest number in July.

Table VI. shews the source of information of the existence of Infectious Disease. Of the 1674 cases ascertained (in addition to the 188 cases of Tubercular Disease) 1,065 were reported by Householders in terms of the Greenock Corporation Act, 1909, 390 were notified by Medical Practitioners, 72 by Householders and Medical Practitioners, 37 by Public Health Officers, 1 by House Surgeon, 1 by Education Authority Officer, and 108 were reported after death by the Registrars. The cases reported by the Registrars included 29 cases of Whooping Cough, 1 case of Encephalitis Lethargica, 33 cases of Diarrhoea, and 45 cases of Pneumonia.

Table VII. gives a comparative statement of the number of cases of Zymotic Diseases treated at Home and in Hospital, and shews the number of apartments in the homes of the patients. Of the Scarlet Fever cases 100 per cent. were treated in Hospital; of Enteric Fever 76.92 per cent.—3 cases were treated at Smithston—and of Diphtheria 98.83 per cent.

Table VIII. shews the number of cases of Infectious Diseases ascertained with the removals to Hospital from the five districts during the year.

Table IX. shews the number of cases of Measles and Whooping Cough, with or without medical attendance, and the percentage of death to cases ascertained month by month.

Table X. compares the mortality at home and in hospital in relation to Scarlet Fever, Enteric Fever and Diphtheria.

Table XI. shews the number of families and persons accommodated in the Reception House during the year.

#### INDIVIDUAL DISEASES.

Smallpox.—There was no case of Smallpox during the year, which is very satisfactory considering the very large increase of Smallpox cases in England during the past year.

Chickenpox.—During the year 513 cases were reported under the Greenock Corporation Act, 1909. There was no death. The number of cases reported in 1924 was 203.

Enteric Fever.—13 cases of this disease were notified in the Burgh during the year, including 3 cases which occurred at Smithston Hospital amongst the mental patients. The circumstances there were investigated in conjunction with Board of Health experts, with the result that 2 intermittent carriers were discovered and isolated along with the one referred to in my last year's report.

With regard to the cases in the Burgh, there did not seem to be any common origin for these cases, and the origin of each individual case could not be definitely ascertained. The usual preventive measures were taken, and there was no apparent connection whatever between the various cases.

Typhus.—There were 14 cases of Typhus Fever during 1925, 4 of which were notified as Continued Fever, but subsequently diagnosed as Typhus Fever after admission to Hospital. There were 4 deaths, being 28.57 per cent. of the total cases. It is very interesting to note that the cases first affected in the two outbreaks last year were distinctly connected with the persons concerned in the outbreak five years'

previously, and, from that point of view, the whole question of the successive outbreaks of Typhus Fever and their causation would appear to require careful consideration of the life history of the vermin, which undoubtedly play an important part in the dissemination of this disease.

Scarlet Fever.—99 cases were notified. The diagnosis in 3 cases was altered after admission to Hospital. There was one death, being 1.01 per cent. of the cases ascertained. In 1924 the number of cases and the mortality rate were 217 and 2.30 respectively.

100 per cent. of the cases notified were treated in Hospital, this being similar to that of 1924.

All contacts, excepting such as previously had had the disease, adult persons, and the occupiers of houses where the need for isolation was obviously unnecessary, were accommodated in the Reception House for a period of 10 days from last exposure to infection. Disinfection of the clothing and of the infected houses was carried out by the Department after each case, and the susceptible contacts who were attending school were debarred for a period of 10 days. The usual notices to the headmasters of schools were issued in regard to the debarring and freeing of the children.

Diphtheria.—172 cases were notified, of which 170 were removed to Hospital. There were 8 deaths, all of which occurred in Hospital. The diagnosis in 4 cases was altered after admission to Hospital. In 1924 there were 147 cases and 5 deaths.

Swabs from the throats of all contacts were taken, and in those cases where a positive result was obtained the individuals were removed to Hospital for local treatment until two negative results were obtained. In this manner incipient cases, which would have developed at home and probably spread the disease, were placed under proper and effective local treatment in favourable conditions and the development of the disease arrested. 656 swabs were taken during the year. 23 of the swabs shewed positive results. The contacts with negative results were permitted to attend school. Apart from the cases where the swabs of the contacts shewed positive results, and which were included amongst the cases notified as Diphtheria, no connection whatever between the cases occurring could be ascertained, and the disease appeared to be of a sporadic nature.

Measles.—87 cases of Measles were ascertained during the year. Of the cases notified, 82 were reported by Householders under the Greenock Corporation Act, 1909; 2 by Doctors; 2 by Householders and Doctors; 1 by Public Health

Officer. Of the cases notified 82, or 94.25 per cent. were reported by Householders under the requirements of the Local Act, which is somewhat lower, however, than in the preceding year.

There were no deaths. In 1924 there were 49 deaths, or 2.59 per cent. of the cases ascertained.

Whooping Cough.—555 cases were ascertained, 519 being notified by Householders in terms of the Corporation Act, 2 by Doctors, 5 by Public Health Officials, and 29 by the Registrars after death. There were 32 deaths, or 5.76 per cent. of the cases ascertained. In 1924 there were 1,303 cases ascertained and 45 deaths.

Erysipelas.—53 cases were ascertained, and there was no death. In 1924 there were 38 cases and 1 death.

Puerperal Fever.—There were 10 cases and 2 deaths, 1 occurring in Hospital, and 1 at the Maternity Hospital. The diagnosis in 1 case was altered after admission to Hospital. 8 cases in 1924 were notified, and there were 2 deaths.

Diarrhoea.—33 deaths were reported by the Registrars. 31 of the deaths occurred in houses of one and two apartments. 21 of the deaths were amongst children under 1 year of age. In 1924 there were 16 deaths, and 15 of these occurred in houses of one and two apartments, whilst 12 of the deaths were amongst children under 1 year of age.

Infantile Mortality.—This is reported on in that part of the Report dealing with the Maternity Service and Child Welfare Scheme.

#### DIPHThERIA ANTI-TOXIN.

Diphtheria Anti-Toxin is supplied free to doctors desirous of administering a dose before a patient is removed to Hospital in an emergency, and in home treatment cases.

Arrangements have been made, through the courtesy of the Chief Constable, whereby a supply of Anti-Toxin is kept at the Central Police Station, so that Medical Practitioners may avail themselves of it at any time, especially during the night or when the Public Health Department Offices are closed, or in cases of emergency. A supply is also available at Gateside Hospital for the same purpose, an arrangement which Dr. Love very kindly agreed to some years ago.

72,000 units in all were supplied in this way during the year.

## ANTI-MENINGOCOCCUS SERUM.

A free supply of this serum is also available for Medical Practitioners for use within the Burgh. There were no applications during the year.

## TUBERCULOSIS.

68 deaths occurred from Phthisis, equivalent to a death-rate of 8.37 per 10,000 of the population. This is most satisfactory, and represents the lowest figures on record of this disease.

The number of deaths from other forms of Tuberculosis during the year was 46, comprising 14 from Tubercular Meningitis, 15 from Abdominal Tuberculosis and 17 from other Tuberculous Diseases. This shews slightly higher figures than in the previous year. The equivalent death-rate was 5.66 per 10,000 of the population.

All forms of Tuberculosis, including Phthisis, caused 114 deaths or 14.03 per 10,000 of the population. In 1924 there were 117 deaths or 14.25 per 10,000. From the above figures it is satisfactory to note that deaths not only from Phthisis, but from all forms of Tuberculosis, shew the lowest figures on record in this district.

65.62 per cent. of the Phthisis cases notified, and 85.00 per cent. of the other Tuberculous cases were from houses of one and two apartments.

During the year 188 cases were notified, of which 128 were of Phthisis and 60 of Tuberculosis not Phthisis. This compares with 171 in 1924, and 182 in the previous five years' average.

As regards season, the greatest number of Phthisis cases was notified in May, when 17 cases were reported, and the lowest in the month of August, when 5 cases were notified. The number of cases of Tuberculous Disease, not Phthisis, notified varied from 13 in the month of September to none in the month of February.

## TUBERCULOSIS SCHEME.

The Pavilion at Smithston has been practically fully occupied during the year, whilst the number of cases treated at Gateside Hospital has also been much in excess of those treated during the previous year.

I am of opinion that more specialised provision for the treatment of surgical tuberculosis in young people would have a satisfactory result. The means at our disposal for this are not satisfactory at Gateside, owing to the want of sufficient ward accommodation. This has resulted in children of both sexes being treated in the one ward, with the result that children between the ages of 8 and 15 have had to be accommodated in the adult wards, which are, unfortunately, all too fully occupied.

Throughout the year I followed out, as formerly, the principle of allowing patients, who were able to go about the privilege of returning home during the daytime for one day per month, and have to record that this would appear to be a satisfactory arrangement, the number of cases abusing this privilege being comparatively small. The other Institutions with which working agreements have been entered into for the treatment of cases of Tubercular Disease were still utilised throughout the year.

#### SUPERVISION OF TUBERCULOSIS IN 1925.

There were 707 cases of Tuberculosis under supervision at 31st December, 1925. Of these 449 were of Phthisis, and 258 of Tuberculosis other than Phthisis. Of the Phthisis patients 10 were in Bridge of Weir Sanatorium, 7 in Noran-side Sanatorium, Forfar, 1 in Lanfine Home, 1 in Brompton Sanatorium, Frimley, Surrey, 28 in Gateside Hospital, 17 in Smithston Pavilion, 83 under Home Supervision, whilst 302 were attending the Dispensary.

Home Supervision.—Patients under Home Supervision were, for the most part, fit for work, and their condition was duly noted by the Visiting Nurses. If anything further in the way of treatment appeared to be required, they were requested to visit the Dispensary. In addition I visited those who were not able to come to the Dispensary and who refused treatment in the Institutions. 841 cases, including 199 new cases, were visited by the Nurses, who made 4,978 visits during the course of the year.

Dispensary.—The ever increased number of attendances at the Tuberculosis Dispensary under the present medical arrangements has only been rendered possible by an increased number of Nurses being supplied during the hours of the Clinics, the numbers attending for Simpson Light treatment requiring a Nurse specially for that purpose. The numbers during 1925 were 3,657 as against 2,713 in 1924. This again shews an increase of 34.7 per cent. over the previous year. The actual number of persons attending the Dispensary during 1925 was 361 as compared with 306 in 1924.



Domiciliary treatment was given in 240 cases where it was obvious that want of proper nourishment would be responsible for a diminution of the resisting power to the disease, and the resultant improvement in weight of the patients was most satisfactory. During the present unsatisfactory housing conditions still obtaining in many parts of the town, with the resultant tendency to continued lowering of health in those resident in such, I have felt bound to continue Domiciliary treatment in the direction of nourishment more extensively than would otherwise have been the case, although I am perfectly well aware that fresh air and light give far better results than the mere question of nourishment. Of course the continued condition of unemployment tends in no small measure to cause this disease to flourish in our midst.

In addition to this, I have gratefully to record the assistance in the direction of the provision of rents, beds and bedding and underclothing for wear in Sanatorium received from the Renfrewshire Memorial to the late King Edward. Many patients were enabled to occupy more suitable houses in which to combat the disease than their means permitted of their doing otherwise.

During the year a new Simpson Light apparatus was installed with most satisfactory results, and the results gained from the use of the light in cases of Lupus and unhealthy tubercular ulcerations have been the subject of most favourable comments from all concerned.

#### TREATMENT OF PATIENTS IN SANATORIA AND HOSPITALS.

Sanatoria.—There were 8 patients in Bridge of Weir Sanatorium on 1st January, 1925. 14 patients were admitted during the year, and 12 were discharged, leaving 10 in the Sanatorium on 31st December, 1925.

Of the cases discharged, 3 were improved, 4 much improved, and 5 not improved.

There were 5 cases in Noranside Sanatorium on 1st January, 1925, 16 were admitted during the year, 13 were discharged, and 1 died, leaving 7 in the Sanatorium on 31st December, 1925.

Of the cases discharged, 11 were improved and 2 not improved.

There was 1 patient in Manor Valley Sanatorium on 1st January, 1925, 2 were admitted during the year, and 3 were discharged.

One patient was admitted to Lanfine Home, Kirkintilloch, during the year, and there was 1 patient in the Home on 31st December, 1925.

Two patients were admitted to Brompton Sanatorium, Frimley, Surrey, 1 was discharged improved, and there was 1 patient in the Sanatorium on 31st December, 1925.

Hospitals.—There were 33 patients in the Phthisis Wards of Gateside Hospital on 1st January, 1925. During the year 64 patients were admitted, 43 discharged, 17 died in Hospital and 37 remained under treatment at the end of the year.

Of the 43 discharged, 17 were improved, 3 much improved, 4 not improved and 19 remained in statu quo.

There were 25 patients in Smithston Pavilion on 1st January, 1925. During the year 40 patients were admitted, 35 discharged, 9 died, leaving 21 in the Pavilion at the end of the year.

Of the 35 discharged, 22 were improved, 4 much improved, and 9 not improved. 15 of the patients left against advice.

The housing condition in Greenock, whilst still unsatisfactory, has shewn during the year a greater tendency towards an improvement than in the previous years, and in no disease is it of more importance that the housing conditions should improve than in the case of Tubercular Disease, where it is perfectly hopeless to cope with the problem so long as the patients have to return to what have been, in the past, very little better than hovels, after gaining strength most satisfactorily from their institutional treatment. The provision of a suitable After-Care Scheme in this district is very much to be desired, even although the housing condition should become vastly improved to what it is at present.

It is proposed ere long to institute sun-light treatment in our two local hospitals, Gateside and Smithston, and it is hoped that by this means the results to be obtained from treatment will become more marked than in the past.



## Summary of Cases under Treatment during 1925.

	Manor Valley Sanatorium.	Noranside Sanatorium	Bridge-of-Weir Sanatorium.	Lanfine Home Kirkintilloch.	Brompton Sanatorium, Frimley.	Gateside Hospital.	Smithston.
Number at 1st January, 1925, ...	1	5	8	1	—	33	25
Admitted during year, ...	2	16	14	—	2	64	40
Treated during year, ...	3	21	22	1	2	97	65
Total number discharged, ...	3	13	12	1	1	43	35
Left against advice, ...	—	—	—	—	—	21	15
Died, ...	—	1	—	—	—	17	9
Number remaining at 31st Dec. 1925	—	7	10	1	1	37	21

## MATERNITY SERVICE AND CHILD WELFARE SCHEME.

## 1. Infantile Mortality.

- (a) Number of Deaths, ... .. 214.  
 (b) Rate per 1000 Births, ... .. 107.37.  
 (c) Number of Deaths and Rates per 1000 Births classified according to age groups and causes of death.

CAUSES OF DEATH.	AGE GROUPS.					Totals.	Rate per 1000 Births.
	Under 1 week	1—4 weeks.	4 weeks—3 months.	3 months—6 months.	6 months—12 months.		
Chickenpox, ...	...	...	...	...	...	...	...
Measles, ...	...	...	...	...	...	...	...
Scarlet Fever, ...	...	...	...	...	...	...	...
Whooping Cough, ...	...	...	4	3	3	10	5.02
Diphtheria and Croup, ...	...	...	...	...	...	...	...
Erysipelas, ...	...	...	...	...	...	...	...
Tuberculous Diseases, ...	...	...	...	1	4	5	2.50
Meningitis (not T.B.), ...	...	...	1	...	5	6	3.01
Hydrocephalus, ...	...	...	1	...	...	1	0.50
Convulsions, ...	1	1	3	1	5	11	5.52
Pneumonia (all forms), ...	...	...	3	4	24	31	15.56
Bronchitis, ...	...	...	1	2	3	6	3.01
Diarrhoea and Enteritis, ...	...	1	2	10	8	21	10.54
Other Digestive Diseases, ...	...	2	...	3	2	7	3.52
Congenital Malformation, ...	4	1	1	1	...	7	3.52
Congenital Heart, ...	...	...	...	...	...	...	...
Premature Birth, ...	29	2	3	...	...	34	17.06
Atrophy, Debility & Marasmus	20	15	9	7	5	56	28.09
Atelectasis, ...	2	...	...	...	...	2	1.00
Injury at Birth, ...	1	...	...	...	...	1	0.50
Suffocation, Overlying, ...	...	...	1	...	...	1	0.50
Syphilis, ...	...	...	...	1	...	1	0.50
All other Causes, ...	...	5	2	2	5	14	7.02
Rate per 1000 Births, ...	57 28.60	27 13.54	31 15.56	35 17.56	64 32.11	214	107.37

## 2. Births.

- (a) Number Registered, 1993 (1) Legitimate, 1880.  
(2) Illegitimate, 113.
- (b) Number Notified, 1992.
- (c) Number classified according to nature of attendance  
(doctor, midwife, etc.)
- (1) Doctors, ... .. 275.  
(2) Midwives and Nurses, ... 1614.  
(3) Institutions, ... .. 103.
- (d) Number of Still Births (Births of Dead Children),  
79, of which 23 occurred in the Maternity Hospital,  
where abnormal cases are treated.

## 3. Maternal Mortality.

- (a) Number of deaths resulting from miscarriage or  
childbirth, ... .. 9.
- (b) Number of Deaths resulting from Puerperal  
Sepsis, ... .. 1.

## 4. Report under Midwives (Scotland) Act, 1915.

## Births in Area or District.

Total No. of Births during 1925	Total No. of Deaths of new-born children (within 10 days) during 1925.	Actual No. of Births attended by Midwives during 1925.	Actual No. of Deaths of new-born children (within 10 days) occurring in the practice of Midwives during 1925.	Actual No. of Cases not attended by a Doctor or Midwife during 1925.	
				Births.	Deaths.
1,993	60	1,616	43	...	...

## Cases of Ophthalmia Neonatorum.

Total number of cases during 1925.	Actual Number of Cases occurring in the practice of Midwives during 1925.	Actual Number of Cases occurring where Confinement not attended by a Doctor or Midwife during 1925.
36	31	Nil.

## Cases of Puerperal Sepsis.

Total No. of Cases during 1925.	Total No. of Deaths during 1925.	Actual No. of Cases occurring in the practice of Midwives during 1925.	Actual No. of Deaths occurring in the practice of Midwives during 1925.	Actual number of Cases occurring where confinement not attended by a doctor or Midwife during 1925.	
10	2	7	1	Cases	Deaths
				...	...

## Cases of Still-birth (Dead Born).

Total Number of Cases during 1925.	Actual Number of Cases occurring in the practice of Midwives during 1925.
79, of which 23 occurred in the Maternity Hospital where abnormal cases are treated.	48

## CASES OF EMERGENCY.

There were 302 cases of emergency, viz.:—Face Presentation, 2; Prolonged Labour, 54; Illness of Child, 17; Torn Perineum, 89; Hydramnios, 1; Illness of patient during puerperium, 28; Prematurity, 9; Breech Presentation, 15; Adherent Placenta, 20; Contracted Pelvis, 15; A.P. Haemorrhage, 20; Transverse Presentation, 4; Abortion, 7; Stillbirth, 9; Prolapse of Cord, 6; P.P. Haemorrhage, 5; Miscarriage 1.

## GENERAL REPORT ON THE WORKING OF THE ACT.

Of the total number of Midwives on the roll, viz.: 48, 28 only are really practising.

83 supervisory visits were paid by the Inspectors of Midwives during the year.

I have nothing further to report since last year, and the working of the Act has been satisfactory during 1925.

## 5. Home Visitation.

## (1) Infants.

(a) Number of First Visits, 1878. (b) Number of Re-visits 9417.

(c) Number of Infants at age of 6 months.

(1) Breast fed,	948.
(11) Partially Breast Fed,	207.
(111) Artificially Fed,	348.

(d) Number of Infants born (1) prematurely, 28. (2) at full time, 1964.

(2) Children (1-5 years)—

(a) Number of First Visits,	57.
(b) Number of Re-visits,	28,718.

(3) Expectant Mothers—

(a) Number of First Visits,	104.
(b) Number of Re-Visits,	5.
(c) Number who consulted a doctor or ante-natal clinic,	70.

(4) Nursing Mothers—

(a) Number of First Visits,	141.
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6. Voluntary Health Visitor's Report.— Nil.

7. Ante-natal Consultations.

One Session weekly—2-2½ hours.

(a) Total number of Attendances, 1197.

(b) Total number of First Attendances, 400.

(c) Classified summary of Conditions found:—

Debility and Anaemia,	109.
Cardiac Conditions,	16.
Pregnancy doubtful,	22.
Threatened Miscarriages,	12.
Varicose Veins,	23.
Constipation and Haemorrhoids,	44.
Bronchitis and respiratory conditions,	43.
Contracted Pelvis,	8.
Carious Teeth,	15.
Mastitis,	1.
Vomiting of Pregnancy,	37.
Eye Conditions,	1.
Skin Conditions,	8.
Venereal Disease,	4.
Genito Urinary Conditions,	6.
Goitre,	1.
Gynaecological Conditions,	10.
Digestive Conditions,	10.
Rheumatism,	2.
Albuminuria of Pregnancy,	1.
Paralysis,	2.

(d) Number of Cases (1) referred to ante-natal ward,	Nil.
(2) Referred to family doctor,	4.
(3) Treated at Clinic,	All Others.

### 8. Post-Natal and other Consultations.—

Number of Attendances, First Visits, 426; Re-visits, 1240.

#### Conditions found:—

Anaemia and Debility,	162.
Carious Teeth,	36.
Agalactia,	7.
Digestive Disorders,	31.
Skin Diseases,	10.
Venereal Disease,	12.
Ear, Nose and Throat conditions,	9.
Eye Conditions,	4.
Bronchitis,	9.
Phthisis,	1.
Epilepsy,	2.
Genito Urinary Conditions,	10.
Mastitis,	7.
Cardiac Conditions,	2.
Gynaecological,	3.
Rheumatism,	11.

### 9. Child Welfare Consultations.—

6 Sessions weekly—4 of 3½ hours; 2 of 2 hours.

#### (a) Total Number of Attendances:—

(1) Under 1 year of age,	7,376.
(2) Over 1 year of age,	7,601.

#### (b) Number of First Attendances—

(1) Under 1 year of age,	866.
(2) Over 1 year of age,	231.

#### (c) Illnesses Recorded:—

Chickenpox,	4.
Measles,	1.
Scarlet Fever,	1.
Whooping Cough,	101.
Diphtheria and Croup,	6.
Tubercular Abdomen,	8.
Other Tubercular Diseases,	7.
Rheumatism,	1.
Hydrocephalus,	2.
Convulsions,	8.



Pneumonia,	19.
Bronchitis,	220.
Diarrhoea and Enteritis,	348.
Other Digestive Diseases,	147.
Congenital Malformation,	8.
Premature Birth,	5.
Atrophy, Debility and Marasmus,	74.
Underweight,	199.
Venereal Diseases,	10.
Phimosis,	42.
Ear, Nose and Throat,	160.
Eye,	58.
Hernia and Hydrocele,	17.
Umbilical and Polypus,	28.
Mastitis,	4.
Rickets,	136.
Skin Conditions,	230.
Adenitis,	54.
Worms,	65.
Accident and Injury,	15.
Teeth,	46.
Septic conditions,	28.
Stomatitis,	41.
Cardiac conditions,	1.
Infantile Paralysis,	3.
Mental Deficiency,	8.
Vaccinations,	172.
Genito-Urinary,	17.

An enquiry was made into the incidence of Rickets at the Child Welfare Clinic among 1000 consecutive cases, and the results were as follows:—

884 cases were unaffected by Rickets, while 116 were affected by Rickets, 57 were found, for the first time, to have Rickets. 20 had previously been found to have Rickets, and 39 developed Rickets later.

Of the 57 cases found for the first time to have Rickets, 26 were slight cases, 26 fairly severe, and 5 severe.

Of the 116 cases 55 occurred in dwellings of one apartment, tenement in type, and 46 in dwellings of two apartments, tenement in type, and 15 in houses of larger dimensions.

#### 10. Special Treatment Centres.—

##### (1) Teeth.—

(a) Number of Attendances: (1) Mothers, 122. (2), Children, 51.

## (b) Classified Summary of Conditions Remedied.—

## (1) Mothers:—

Cariou Teeth extracted, Local anaesthetic,	75.
Gums treated,	9.
Fillings,	3.
Referred elsewhere,	1.

## (2) Children:—

Cariou Teeth extracted, Local anaesthetic,	20.
General anaesthetic,	20.
No anaesthetic,	2.
Gums treated,	10.

## (c) Number of Dentures supplied:—

9 Upper Dentures.
1 Upper and Lower Denture.

## (d) Nett cost of Dentures less sums re-

covered,	£26 14s 6d.
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## (2) Eyes.—Eye Infirmary.

(a) Number of Attendances, 795.

## (b) Classified summary of conditions remedied:—

Conjunctivitis,	66.
Purulent Conjunctivitis,	18.
Keratitis,	13.
Corneal Ulcer,	19.
Strumous Ophthalmia,	23.
Ophthalmia Neonatorum,	16.
Hordeola,	6.
Obstruction of Lachrymal Duct,	1.
Squint,	16.
Accident,	4.
Glioma,	1.
Iritis,	1.
Eczema of Lids,	4.
Ptosis of Lids,	2.
Meibomean Cyst,	2.
Optic Atrophy,	1.
Naevus,	1.
Other conditions,	3.

## (3) Other Ailments. Ear, Nose and Throat Dispensary.

(a) Number of attendances, 526.

## (b) Classified summary of conditions:—

Otitis Media,	32.
---------------	-----

Cat. Rhinitis,	18.
Hyper. Tonsils,	26.
Adenoids,	11.
Radical Mastoid operation,	4.
Mumps,	1.
Furunculosis,	2.
Accidents,	2.
Others,	4.

Royal Infirmary, Greenock.

Number of Attendances, 287.

Accidents,	36.
Abscess formation,	18.
Phimosis,	30.
Cellulitis,	6.
T. B. Peritonitis,	4.
Respiratory Diseases,	23.
Hernia,	17.
Other Tubercular Diseases,	7.
T.B. of Spine,	2.
Radical Operation for Mastoid,	7.
Appendicitis,	2.
Cleft Palate,	1.
Genito-urinary diseases,	3.
Alimentary Diseases,	3.
Congenital Malformation,	3.
Skin conditions,	3.

(4) Provision of Insulin.

(a) Number of Cases supplied with Insulin,	Nil.
(b) Nett Cost,	Nil.

11. Day Nurseries, Kindergartens and Play-Centres.—Nil.

12. Food and Milk.

(a) Number of applications for Food and Milk:—

(1) Mothers, 456. Of these 105 were ante-natal cases.

(2) Children, 580.

(b) Number of Cases certified on Medical Grounds as requiring Food or Milk:—

(1) Mothers, 400.

(2) Children, 450.

(c) Number of Cases under (b) certified as Necessitous:—

(1) Mothers, All.

(2) Children, All.

(d) Gross Cost, £1,522. 6s. Sums recovered, None.



## (1) Ante-natal Cases:—

(a) Number of cases treated, 23.

(b) Statement of conditions found:—

(c) Results of Treatment.—

9 Albuminuria and Eclampsia,	{	6 treated, delivered and recovered. 1 treated, but died before delivery. 2 treated and dismissed before delivery.
4 Ante-partum Haemorrhage,	{	4 delivered after treatment and recovered,
3 Placenta Praevia,		3 delivered after treatment and recovered.
2 Cardiac Disease,	{	1 treated, delivered and recovered. 1 treated and dismissed, to return later.
1 Pyelitis and Epilepsy,		1 transferred to a General Hospital.
1 Contracted Pelvis,		1 Caesarean Section after treatment and recovered.
1 Hydramnios,		1 treated, delivered and recovered.
2 Mental Depression,		2 treated and sent home slightly improved.

## (2) Abortions,—

(a) Number of Cases, Nil.

## (3) Abnormal and Complicated Cases:—

(a) Number of Cases, 33.

(b) Conditions found:— (c) Results:—

4 Breech,		4 delivered manually and recovered.
5 Placenta Praevia,		5 delivered of still-born children and recovered.
1 Adherent Placenta,		1 removed under chloroform and recovered.
1 Accidental Haemorrhage,		1 delivered under chloroform and died.
12 Contracted Pelvis,	{	8 Caesarean Section. 7 recovered and 1 died. 4 Forceps delivery. 4 recovered.
8 Delay of 2nd Stage,		8 Forceps delivery. 6 recovered and 2 died.
2 Eclampsia,	{	1 Caesarean Section and died. 1 delivered manually and recovered.

## (4) Other Cases of Confinement:—

- |   |           |
|---|-----------|
| (a) Number of normal deliveries,  | 42.       |
| (b) Number of cases delivered without medical attendance at delivery,                     | 37.       |
| (c) Number of instrumental deliveries (exclusive of those appearing under (3),            | Nil.      |
| (d) Number of cases of Morbidity (B.M.A. Standard),                                       | 12.       |
| (e) Number of cases under (d) in which delivery was instrumental,                         | 6.        |
| (f) Number of Deaths, 6; Classified:—   |           |
| Accidental Haemorrhage,   | 1.        |
| Eclamptic before delivery,  | 1.        |
| Eclamptic after Caesarean Section,  | 1.        |
| Caesarean Section from Sepsis,  | 1.        |
| Collapse and Sepsis after forceps delivery (1 of which had a ruptured uterus),            | 2.        |
| (5) Receipts from patients,   | £132 13s. |
| (6) (a) Number of Infants born (1) alive, 56; (2) Stillborn, 23.                          |           |
| (b) Number of cases of twins (1) alive, 2 sets. (2) Stillborn, Nil.                       |           |
| (7) Number of Deaths of Infants under 8 days old,   | 6.        |
| (8) Number of cases of Puerperal Sepsis removed from Institution, 2 to Gateside Hospital. |           |

18. Homes for Unmarried Mothers before and after Confinement, Nil.

## 19. Hospitals for Sick Children:—

The Child Welfare has again had a busy year. I do not think that, during the last five years, we have had such severe cases in Hospital as during 1924-1925. It speaks highly for the nursing staff that the results are as good as they are, and I can vouch for the extreme care with which the different treatments have been carried out, a care which has necessitated, for the Matron especially, much night work in addition to strenuous day work.

The main point to emphasise in connection with the children is the debilitated condition in which many were admitted, thus re-acting against their rapid cure.

A virulent type of Enteritis began to appear in Greenock in August and September, and 13 cases, all very ill, were admitted. The Enteritis in most cases was cured, but in some cases Pneumonia developed, which proved fatal. I am

pleased to report that, owing to the care of the nursing staff this infectious Diarrhoea did not spread, not a child already in Hospital having developed it.

We had 25 cases of Diarrhoea of the non-infectious type, an uncommonly large per centage of the cases admitted. Many of these proved untractable for some time, and left the patients in poor condition and requiring special care.

The fine Summer helped us in our treatment of the Rickets and the Debility, Atrophy, and Marasmus groups, and I hope that, with the kind gift of the Mercury Vapour Lamp which we have received, and which is now installed, I shall be able to report even better results. We are specially proud of one Rickety child of four years of age, who came in unable to walk, and who can now walk with assistance.

Two cases of Early Tubercular Disease of the Spine were successfully treated, and will encourage us to try further cases.

As will be seen from the list of diseases on admission, our work covers a large field, and is proving yearly more valuable to the children of Greenock.

1st November, 1924, to 31st October, 1925.

In Hospital, on 31st October, 1924,	19.
Admissions,	156.

Total,	175.
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Discharges,	128.
Deaths,	26.
In Hospital on 31st October, 1925,	21.

Total,	175.
--------	------

Analysis of 128 Discharges.

Home, very well,	97.
Home, improved,	22.
Home, unimproved,	7.
Transferred to Gateside Hospital,	1.
Transferred to Royal Infirmary,	1.

Total,	128.
--------	------

Of the unimproved cases, two were found to have Whooping Cough and were dismissed; one was sent in moribund, and when the parents understood this they took it home; one with an abdominal fistula was also in a hopeless condition and was taken home in six days. Three others were not in long enough to benefit from treatment.

Classification of Diseases of 156 Admissions.	
Debility, Atrophy and Marasmus,	27.
Prematurity,	1.
Rickets,	8.
Syphilis,	1.
Gastro-Enteritis (infective),	13.
Diarrhoea (non-infective),	25.
Alimentary,	7.
Bronchitis,	13.
Pneumonia,	16.
Septic Conditions,	5.
Early Tubercular Disease of the Spine,	2.
Other Tubercular Diseases,	7.
Fractured Femur,	1.
Convulsions,	3.
Skin Conditions,	5.
Impetigo of Head with abscesses,	2.
Eye Conditions,	5.
Mental Deficiency,	2.
Croup,	4.
Congenital Malformation,	1.
Purpura,	1.
Nephritis,	1.
Other Diseases,	6.
	<hr/>
Total,	156.

The average period of residence was 51.4 days.

With regard to Infectious Diseases, one child developed Erysipelas and was removed to Gateside Hospital, two were found to have Whooping Cough and removed home. The report of the 13 cases of Infective Diarrhoea is given above.

#### Analysis of 26 Deaths.

Gastro-Enteritis,	5.
Pneumonia,	4.
Bronchitis,	1.
Tubercular Disease of the Abdomen,	1.
Nephritis,	1.
Septicaemia,	1.
Debility, Atrophy and Marasmus,	10.
Congenital Malformation,	1.
Prematurity,	1.
Convulsions,	1.
	<hr/>
Total,	26.

Of these, 18 were under 1 year of age, and 8 over 1 year.  
20. Convalescent Homes.

There were no cases of children under 5 years of age treated in the Convalescent Home in 1925.



21. Boarding-out,	Nil.
22. Home Helps,	Nil.
23. Educational,	Nil.
24. Note of Agencies, not referred to above, associated with Scheme,	Nil.
25. Other Provisions. (e.g., treatment of Pneumonia and Bronchitis; after-care of cases of Poliomyelitis anterior acuta),	Nil.

### CORPORATION MIDWIFE.

Miss Wishart, our Corporation Midwife, has continued to perform her duties in a very satisfactory manner.

There is still the same objection taken to our Corporation Midwife by the local Midwives' Association, and it is difficult to really understand their point of view. Whilst they are naturally averse to doing un-remunerative work, and our Corporation Midwife would appear to be able to deal with such cases, the contention put forward by the Midwives' Association that the Corporation should remunerate them for work done amongst the class of persons who are not really able to pay for the services of a midwife does not seem to me to be a solution of the question from the point of view of the Corporation, because I fear that an ever increasing list of such persons would have to be dealt with by the Corporation each year, owing to the fact that it would be impossible for me to ascertain the financial position of all the clients of the midwives before the services of the midwives were required, and I fear that it would only be a question of time, especially in time of unemployment as at present, before the Corporation would be saddled with the payment for the vast majority of confinement cases done by the local midwives. My reason for holding this view is that our experience has been in that direction in regard to the provision of medical assistance for emergency cases. During the first year of such provision the amount recovered from the patients was considerable, whilst at the present time little or nothing is ever recovered for such services. I am afraid, therefore, that I cannot agree with the contention taken up by the local Midwives' Association, and have every reason to be satisfied with the appointment of the Corporation Midwife. If, however, a change requires to be made in the terms of our appointment with Miss Wishart, I would be in favour of the division of Greenock into three districts, with a Midwife acting as Corporation Midwife in each district for a period of twelve months, she to be followed by another midwife at the expiry of that time for another period of twelve months, and so on. Such a Scheme has been put before the Board of Health and

has obtained their sanction. In the meantime, so long as Miss Wishart remains in the service of the Corporation, I do not suggest any alteration from the present methods.

### VACCINATION (SCOTLAND) ACT, 1907.

The figures for 1925 not being available until the expiry of six months after the end of the year, the statistics given will require to deal with the year 1924.

995 statutory declarations of conscientious objections were received by the Registrars during the year ending 31st December, 1924, representing 50.15 per cent. of the births registered, as compared with 1,140 declarations equivalent to 57.45 per cent. of the births in the year ending 31st December, 1923. I regret that these figures are still far too high, although they are considerably less than in the previous year.

The number of successful vaccinations returned in 1924 was 765, or 38.55 per cent. of the births.

The following table shews the results of the Vaccination Act during 1924:—

District.	Vaccinated.	Conscientious		Insuscept.	Removed.	Died before	Previously
		Objectors.	Postponed.			Vaccinated.	Vaccinated.
East,	411	539	5	6	25	70	1
West,	354	456	5	2	17	63	2

### VENEREAL DISEASES.

The Venereal Diseases Clinic continues to perform a very large amount of satisfactory work, and the numbers attending for treatment have increased month by month. The Executive Medical Officer, Dr. Donald of Paisley, reports that the working is in every way satisfactory. The percentage of those prematurely stopping treatment is again very small as compared with his experience elsewhere, and even smaller than in the previous year. Mr Carson continues to be of great value as the Orderly in attendance, and is giving satisfaction to all concerned.

I regret to have to record no further advance in the provision of facilities for the treatment of female cases as compared with what was previously recorded. This has been interfered with to a great extent by a proposal by the Renfrewshire Education Authority to acquire, for the purposes of a

school, part of the ground upon which it was proposed to erect a female V.D. Clinic, and, whilst the sanction of the Scottish Board of Health has already been received for the erection of this Clinic, it has been found impossible to proceed with the building whilst the negotiations continue between the Corporation and the Education Authority. I am hopeful that these negotiations will be concluded before the publication of my next Report.

The treatment of female cases has, for the above reasons, had to be performed in the year 1925 by cases being sent to Glasgow Institutions. The taking of blood for Wassermann reaction has been carried out by Dr. Macmillan in a large number of cases, and she has one Clinic per week for this purpose, and also for examination and administrative instruction for females who present themselves for examination and treatment.

By an arrangement with the Paisley Corporation, we have managed to reserve 3 male and 1 female beds in the Parish Council Hospital, Paisley, and cases attending the Special Treatment Clinic, who required indoor treatment, and female cases seen here, were accommodated therein.

The following Table deals with cases treated at the Special Treatment Centre, Royal Infirmary, Greenock, and shews the comparison between the years 1924 and 1925.—

Year.	New Cases.	No. seen by Doctor at Clinics.	Attendance at Centre.	Total.
1924,	160	2,054	8,490	10,544
1925,	178	2,363	10,070	12,483

#### HOSPITAL ACCOMMODATION AND AMBULANCE ARRANGEMENTS.

The Gateside Fever Hospital, which is under the management of the Greenock and District Combination Hospital Board, has provision for the treatment of Scarlet Fever, Enteric Fever, Diphtheria, Typhus Fever, Tuberculosis, and a few cases of Measles, Erysipelas, and Puerperal Fever. As in former years it has been well conducted in every respect, and is well adapted for its purpose. Dr. Love, Medical

Superintendent, has furnished me with the following Tables shewing particulars of the cases treated:—

GREENOCK AND DISTRICT COMBINATION INFECTIOUS DISEASES HOSPITAL, YEAR 1925.

I.—CASES TREATED CLASSIFIED ACCORDING TO DISEASE.

Disease.	Cases in Hospital 1st Jan., 1925	Admitted during 1925	Discharged during 1925	Died in Hospital	Cases remaining in Hospital at 31st Dec., 1925	Fatality Rate
Scarlet Fever,	38	123	151	1	9	0.6
Enteric Fever,	1	11	11	1	—	8.3
Diphtheria,	25	200	189	14	22	6.2
Phthisis,	33	63	43	16	37	16.6
Measles,	1	—	1	—	—	—
Puerperal Fever,	—	8	7	1	—	12.5
Erysipelas,	—	11	10	—	1	—
Encephalitis Letnargica,	—	5	4	1	—	20.0
Typhus Fever,	—	10	7	3	—	30.0
Others,	—	29	19	9	1	31.0
	98	460	442	46	70	8.2

II.—DISEASES CLASSIFIED ACCORDING TO DISTRICTS FROM WHICH ADMITTED.

District.	Cases in Hospital 1st Jan., 1925	Admitted during 1925	Discharged during 1925	Died in Hospital	Cases remaining in Hospital at 31st Dec., 1925
Greenock, ...	89	385	375	36	63
Port-Glasgow, ...	4	39	31	9	3
Gourock, ...	5	33	33	1	4
County, ...	—	2	2	—	—
Outside Case, ...	—	1	1	—	—
	98	460	442	46	70

III.—AVERAGE DAYS' RESIDENCE OF CERTAIN DISEASES DISCHARGED DURING 1925.

Disease.	Patients Discharged during 1925	Aggregate number of Days' Residence	Average Days' Residence.
Scarlet Fever, ...	151	6,039	39.9
Enteric Fever, ...	11	474	43.0
Diphtheria, ...	189	6,140	32.4
Phthisis, ...	43	4,559	106.0

SMALLPOX HOSPITAL.

The accommodation at Johnstone Hospital was not taxed in any way during the year as no case of Smallpox occurred. The question of transport of cases to Johnstone Hospital has been under consideration and, whilst no definite conclusion was come to during the year, the proposal to acquire an ambulance which might be utilised by the participating parties in the hospital has been considered and will possibly be adopted.

## AMBULANCES.

Patients are conveyed to Gateside Hospital by the Motor Ambulance, which is stationed there, and a Hospital Nurse accompanies the Ambulance and takes charge of the patients during the journey. When the case is a stretcher one, a member of the Public Health Staff is present.

## DISINFECTING STATION.

The Disinfecting Station has been kept in satisfactory order and continues to meet the requirements of the town. As the Clayton Disinfecting Apparatus is still proving most satisfactory for all forms of disinfection and disinfestation of houses and clothing, the Steam Disinfector has not been called upon during the whole of the year. We have applied this machine for the purpose of overcoming rat nuisances at the Slaughterhouse and elsewhere in the district during the year, and also for the purpose of disinfecting certain parts of vessels in the harbours, with most satisfactory results.

During the outbreaks of Typhus Fever no fewer than 95 houses were treated by the Clayton Disinfecting Apparatus for the disinfestation of the possible verminous causation. As the structure of the building in 8 Ann Street was such as to make it impossible to deal with any single house, I decided to disinfest the whole tenement from the roof to the basement. This meant the actual disinfestation of 95 houses. It is difficult to understand how the destruction of these vermin could have been accomplished by any other means of disinfestation so far as I am aware of such.

## RECEPTION HOUSE.

The duties of Matron during the year have been satisfactorily performed by Miss Byle under very strenuous circumstances, when one considers that, during the outbreak of Typhus Fever, the Reception House was utilised for the housing of 206 contacts. The numbers were so large that an additional temporary Reception House had to be opened in a house at Craigieknowes recently occupied by Mr. Devine, the late Sanitary Inspector. In addition, 239 persons belonging to 47 families were accommodated in the Reception House for a period of a little over two days in order that the disinfestation could be necessarily carried out in the properties from which cases of Typhus Fever had been removed. It is difficult to understand how the contacts in this outbreak could have been satisfactorily housed or how the outbreak could have been controlled without such accommodation as the Reception House provides, and this experience has only served to emphasize the necessity of such accommodation in a town of very considerable dimensions.

Table XI. gives particulars of persons accommodated month by month during the year and shews that 385 persons belonging to 85 families were accommodated, the average stay being 12.1 days. 168 of the persons had been in contact with Scarlet Fever. 6 with Diphtheria and 206 with Typhus Fever, of which 69 were accommodated in the temporary Reception House at Craigieknowes.

## PUBLIC HEALTH (REGULATIONS AS TO FOOD) ACT, 1907.

There was no importation of foreign meat at Greenock during the year, and active steps were, therefore, not necessary.

## FACTORIES AND WORKSHOPS.

There are 259 workshops on the Register kept by the Local Authority in terms of Section 131 of the Factory and Workshops Act, 1901.

426 visits of inspection were made and in 24 instances the premises were found to be disconform to the sanitary requirements of the Act in respect of want of cleanliness; unsuitable or defective sanitary conveniences; breaches of sanitary requirements as to bakehouses and other nuisances.

27 intimations under the Public Health (Scotland) Act, 1897, were served on the occupiers and also upon the owners in certain cases. The terms of the notices were duly complied with.

There was only one firm in the Burgh employing outworkers and the usual lists of outworkers were furnished in the months of February and August. These lists respectively contained the names and addresses of 84 and 89 outworkers. In each list two outworkers were shewn as residing outwith the Burgh and the Local Authority of the appropriate districts were duly informed.

The work performed by the outworkers was principally sewing and crocheting and their homes are maintained in satisfactory order.

## NUISANCES.

In connection with nuisances under Section 16 of the Public Health (Scotland) Act, 1897, I was not called upon during 1925 to inspect any premises on which the Sanitary

Inspector had reported to the Local Authority that nuisances existed, and where the authors had failed to comply with the Statutory intimations served under Section 19 of the Act.

### SHIPPING.

The temporary working arrangement come to with the Medical Officer of the Glasgow Port Sanitary Authority in 1924 has been carried out satisfactorily, and we are enabled to become aware at once of any persons disembarked at this port who have been in contact with Infectious Disease before sailing. It does not appear to be customary for the Shipping Authorities to make enquiry of passengers when embarking as to whether or not they have come from infected houses, and as the duration of the voyage is less than the incubation period of several of the diseases, I think that such information should be sought by the Shipping Authorities and supplied to the Port Sanitary Medical Authorities in addition to any information regarding the actual presence of disease occurring during the voyage.

I have to acknowledge the careful attention which Dr. Sieger has paid to the terms of the temporary arrangement come to between the Medical Officer of Health of Glasgow Port Sanitary Authority and myself.

The Board of Health have sanctioned the Scheme of Port Sanitary Administration which was drawn up by me, and regular visits are made by me and representatives from my Department in terms of the Port Sanitary Scheme thus sanctioned.

### BACTERIOLOGICAL EXAMINATIONS.

The Bacteriological Examinations of specimens from suspected cases of Phthisis, Enteric Fever, Diphtheria, and Diphtheria contacts, Cerebro-spinal Meningitis and contacts, Malaria and Venereal Disease (with the exception of blood tests) have been carried out by Dr. Love, Medical Superintendent of Gateside Infectious Diseases Hospital.

The total number of specimens examined was 1,328. I am able to record the fact that in no single instance did a second case of diphtheria developed following upon the first case, although 23 positive swabs were obtained, and I am still confident that the number of cases of Diphtheria would have been largely increased but for the methods adopted in this direction.

The following Table shews the examinations carried out and the results:—

	Positive	Negative	Total.
Enteric Fever, ... ..	10	33	43
Diphtheria, ... ..	98	963	1061
Phthisis, ... ..	27	180	207
V.D. Smears, ... ..	—	6	6
Anthrax, ... ..	1	—	1
Cerebro-Spinal Fluid, ... ..	—	1	1
Pleural Fluid, ... ..	—	6	6
Pernicious Anaemia, ... ..	—	1	1
Urine, ... ..	—	1	1
Labial Discharge, ... ..	—	—	—
	136	1192	1328

### HOUSING.

I have to thank Mr. Miller for the following information in connection with the Housing of the Town during the past year.

Private Enterprise:—Houses passed by Dean of Guild Court.

- 2 Bungalows of 5 apartments.
- 1 Bungalow of 4 apartments.
- 4 Semi-detached Bungalows of 4 apartments.
- 1 Cottage of 4 apartments.
- 1 Villa of 4 apartments.
- 1 Villa of 7 apartments.
- 4 Semi-detached Villas of 5 apartments.
- 1 Flatted house of 2 apartments.
- 2 Altered dwellings of 9 apartments.
- 1 Altered dwelling of 6 apartments.
- 1 Altered dwelling of 5 apartments.
- 2 Altered dwellings of 4 apartments.

—  
15 New Houses and 6 Altered Dwellings.

Greenock Corporation.

Housing Insanitary Areas. Sinclair Street (2nd Section Eastern).

- 90 tenement dwellings of 3 apartments.
- 84 tenement dwellings of 2 apartments.

Cowdenknowes Scheme second development.

- 18 Cottages of 3 apartments.
- 36 Flatted Houses of 3 apartments.

Housing Insanitary Areas Sinclair Street (2nd Development).

- 90 Tenement Dwellings of 3 apartments.
- 90 Tenement Dwellings of 2 apartments.
- 1 Cottage Atholl type of 4 apartments.

—  
409 Total.



## Houses certified for occupancy during 1925.

- 6 Flatted Villas of 5 apartments.
- 1 Flatted Villa of 6 apartments.
- 1 Flatted Villa of 7 apartments.
- 1 Semi Villa of 5 apartments.
- 2 Semi Villas of 4 apartments.
- 4 Double Cottages of 4 apartments.
- 1 Semi Bungalow of 4 apartments.
- 1 Cottage of 5 apartments.
- 1 Cottage of 4 apartments.
- 2 Villas of 6 apartments.
- 1 Villa of 7 apartments.
- 1 Bungalow of 7 apartments.
- 3 Bungalows of 5 apartments.
- 1 Bungalow of 4 apartments.
- 1 Bungalow of 3 apartments.

---

27 Total.

## Greenock Corporation.

## Cowdenknowes Scheme.

- 100 Flatted Houses of 3 apartments.
- 8 Cottages of 4 apartments.
- 55 Cottages of 3 apartments.

## Housing Insanitary Areas, Sinclair Street.

- 18 Tenement Dwellings of 2 apartments.
- 12 Tenement Dwellings of 3 apartments.

---

193 Total.

Private Enterprise,	27 Houses.
Corporation Housing Schemes,	193 Houses.

From this it will be seen that the number of houses, not only those passed by the Dean of Guild Court, but those certified for occupancy during the year, has been very much increased as compared with former years, and, whilst this is satisfactory, much more requires to be done. What has been done during the last two years must certainly have some effect in proving our Vital Statistics. So long as the Housing problems remain unsolved, Greenock can never hope to have ideal results for the large sums expended in accordance with the Board of Health Schemes unless and until the present shocking housing conditions have been replaced by dwelling-houses in which the people of the district can be supposed to live. At present one might almost say that many of them are not even fit to exist in.

It is impossible, however, to put all the blame associated with slum areas entirely upon the shoulders of those respon-

sible for housing, as I am convinced that the personal habits of many of the occupants of these houses are dirty and slovenly in the extreme. It would appear impossible to instil the first ideas of cleanliness into the minds of certain human beings, and I make bold to say that unless a most efficient system of supervision is undertaken by the Corporation in regard to their new houses, the tendency will be for even the best of them to be reduced to the level of some of our present slum dwellings, purely because of the methods of living followed out by certain of these people. Whilst it is known that the keeping of a dirty house is punishable under the Public Health Act, there are many degrees of dirtiness which may exist and be responsible for bad health, and yet at the same time not attain to that degree of dirtiness which would permit of a conviction under the terms of the Public Health Act, and I am of opinion that the hands of the Authorities should be strengthened in the direction of dealing successfully with houses which, in the slightest way, might act as conducing to bad health.

#### INSPECTION OF MEAT.

The arrangement of the Corporation in regard to the inspection of meat at the Slaughter-house, whereby the part-time service only of Mr McIntyre, M.R.C.V.S., was made available as Veterinary Inspector, and Mr. George McNeill, Certificated Meat Inspector, was appointed Superintendent of the Slaughter-house, has worked satisfactorily, and the Slaughter-house has been kept in excellent order.

Nothing further has been decided upon in regard to the erection of a new Slaughter-house.

The following Return by the Veterinary Inspector shews an analysis of the work of Meat Inspection carried out during the year:—

CLASS.	Number Slaughtered.	Number affected with Tuberculosis.	Percentage affected with Tuberculosis.	Whole Carcases seized for Tuberculosis.	Parts of Carcases seized for Tuberculosis.	Whole Carcases seized for Diseases other than Tuberculosis.	Parts of Carcases seized for Diseases other than Tuberculosis.
Bullocks,	2,544	250	9.8	1	17	1	2
Bulls,	125	41	32.8	2	1	1	3
Cows,	748	432	57.7	21	68	14	9
Heifers,	850	82	9.6	1	10	—	—
Swine,	2,066	155	7.5	8	13	10	17
Sheep,	10,611	—	—	—	—	20	3
Calves,	1,594	2	0.1	14	—	3	—
Total,	18,538	962	—	47	109	49	34

# TABLES.

TABLE I.—Vital Statistics.

(a) DEATHS.

AGES.	Population Estimated at Mid-Year by M.O.H.	Number of Deaths.	Death-rate per 1000 of the Population	Percentage of Total Deaths	Average Death-rate per 1000 of population during preceding years.
Under 1 Year, -	1,983	214	107·91	18·40	122·1
Under 5 Years, -	9,556	346	36·20	29·75	43·5
From 5 to 15 Years,	17,940	45	2·50	3·87	2·9
From 15 to 65 Years,	49,408	419	8·48	36·03	9·4
Above 65 Years, -	4,296	353	82·16	30·35	72·1
TOTAL, - -	81,200	1,163	14·32	100·00	15·3

(b) BIRTHS.

Births,	Legitimate, 1,880	} TOTAL 1,993
	Illegitimate, 113	
Birth Rate per 1000 of Population.	24·54	

DISEASES, &c.	Under 1 year		1 and under 2		2 and under 5		5 and under 15		15 and under 25		25 and under 45		45 and under 65		65 and up.		Total.	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Enteric Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	1	1	6	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup, -	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza, -	2	2	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Septic Diseases, { Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other septic Diseases, not puer. fever	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis, -	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis, -	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Diseases { Tuberculous Meningitis,	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Abdominal Tuberculosis, -	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Tuberculous Diseases, -	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Cancer, Malignant Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Arctic Rheumatism, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous Diseases { Meningitis, not Tuberculous,	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Cerebral Hemorrhage, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Nervous Diseases, -	4	1	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Circulatory System, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory Diseases { Pneumonia & Broncho Pneumonia	9	8	6	3	4	3	...	...	...	...	...	...	...	...	...	...	...	...
{ Bronchitis, -	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Respiratory Diseases, -	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Digestive Diseases, { Diarrhoea and Enteritis, -	4	6	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Digestive Diseases, -	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Debility and Malformation, including Premature Birth, -	12	16	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Violence, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, Ill-Defined or Unknown, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Uncertified, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL, -	37	38	19	12	11	5	10	10	7	14	20	13	35	38	42	52	181	182

Table 2 (District B.)—Mortality for the Year ending 31st December, 1925.

DISEASES, &c.	Under 1 year.		1 and under 2		2 and under 5		5 and under 15		15 and under 25		25 and under 45		45 and under 65		65 and up.		Total.		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	Enteric Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Septic } Erysipelas, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, } Other Septic Diseases, not puer. fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous } Tuberculous Meningitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases } Abdominal Tuberculosis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cancer, Malignant Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Arctic. Rheumatism, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous } Meningitis, not Tuberculous, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases } Cerebral Hemorrhage, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Nervous Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Circulatory System, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory } Pneumonia & Broncho Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, } Bronchitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Respiratory Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Digestive } Diarrhoea and Enteritis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, } Other Digestive Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Debility and Malformation, including Premature Birth, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Violence, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, Ill-Defined or Unknown, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Uncertified, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL, -	20	13	7	6	6	6	3	6	6	5	15	14	24	24	37	31	118	105	...

DISEASES, &c.	Under 1 year		1 and under 2		2 and under 5		5 and under 15		15 and under 25		25 and under 45		45 and under 65		65 and up.		Total.		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Enteric Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	3	3	4	2	1	3	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza, -	2	1	1	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Septic Diseases, { Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other septic Diseases, not puer. fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis, -	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Diseases, { Tuberculous Meningitis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Abdominal Tuberculosis,	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Tuberculous Diseases,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cancer, Malignant Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Arctic Rheumatism, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous Diseases, { Meningitis, not Tuberculous,	2	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Cerebral Hæmorrhage,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Nervous Diseases,	3	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Circulatory System, -	1	...	5	2	6	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory Diseases, { Pneumonia & Broncho Pneumonia	6	1	1	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Bronchitis,	2	1	1	0	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Respiratory Diseases,	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Digestive Diseases, { Diarrhoea and Enteritis,	2	5	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Digestive Diseases,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Debility and Malformation, including Premature Birth, -	26	25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Violence, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, Ill-Defined or Unknown, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Uncertified, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL,	49	41	17	12	12	9	5	5	15	8	12	22	28	36	52	39	190	172	...

TABLE 2 (District D.)—Mortality for the Year ending 31st December, 1925.

DISEASES, &c.	Under 1 year		1 and under 2		2 and under 5		5 and under 15		15 and under 25		25 and under 45		45 and under 65		65 and up.		Total.		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Enteric Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Septic Diseases, { Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other septic Diseases., not puer. fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Diseases { Tuberculous Meningitis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Abdominal Tuberculosis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Tuberculous Diseases,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cancer, Malignant Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Arctic Rheumatism, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous Diseases { Meningitis, not Tuberculous,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Cerebral Hemorrhage,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Nervous Diseases,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases of Circulatory System, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory Diseases { Pneumonia & Broncho Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Bronchitis,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Respiratory Diseases,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Digestive Diseases, { Diarrhoea and Enteritis, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
{ Other Digestive Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Debility and Malformation, includ- ing Premature Birth, -	2	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Violence, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diseases, Ill-Defined or Unknown, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Uncertified, -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL,	5	5	2	3	2	2	4	4	1	3	1	4	6	19	24	40	49	79	91





TABLE III.—Deaths belonging to the Burgh of Greenock but occurring in other Districts during the Year ending 31st December, 1925.

DISEASES, &c.	Under 1 year.		1 and under 2		2 and under 5		5 and under 15		15 and under 25		25 and under 45		45 and under 65		65 and up.		Total.	GRAND TOTAL.	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
Enteric Fever, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhus Fever, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Smallpox, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Whooping Cough, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria and Croup, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Influenza, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Septic Diseases, } Erysipelas, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Other Septic Diseases, not puer. fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever, -	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Cerebro-Spinal Meningitis, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Phthisis, -	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..
Tuberculous Diseases } Tuberculous Meningitis, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Abdominal Tuberculosis, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Other Tuberculous Diseases, -	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
Cancer, Malignant Diseases, -	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	2
Acute Arctic Rheumatism, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Nervous Diseases } Meningitis, not Tuberculous, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Cerebral Hæmorrhage, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Other Nervous Diseases, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diseases of Circulatory System, -	..	..	..	..	..	..	..	..	..	..	3	1	..	..	..	..	..	..	..
Respiratory Diseases, } Pneumonia & Broncho Pneumonia	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
} Bronchitis, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Other Respiratory Diseases, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Digestive Diseases, } Diarrhoea and Enteritis, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
} Other Digestive Diseases, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Congenital Debility and Malformation, including Premature Birth, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Violence, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Defined Diseases, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diseases, Ill-Defined or Unknown, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Uncertified, -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	..	..	..	..	1	..	..	..	..	1	1	8	2	6	3	5	19	14	33



TABLE V.—Table of Infectious Diseases ascertained Month by Month during the Year ending 31st December, 1925.

MONTH.	Pneumonia.	Influenza.	Enteric Fever	Typhus Fever	Continued Fever.	Cerebro Spinal Fever.	Diphtheria	Scarlet Fever	Puerperal Fever.	Erysipelas.	Malarial Fever.	Dysentery.	Chickenpox.	Measles.	Whooping Cough.	Diarrhoea.	Encephalitis Lethargica.	Total
January,	11	...	...	...	1	...	13	9	...	1	...	...	20	12	243	1	1	312
February, ...	6	...	...	...	...	...	13	23	1	2	...	...	21	4	147	1	1	219
March, ...	5	...	2	...	...	...	16	10	1	2	...	...	52	5	59	1	2	155
April, ...	3	...	7	...	...	1	4	7	2	4	...	...	77	17	29	3	...	154
May, ...	3	...	...	2	...	...	13	8	2	3	...	...	93	15	22	...	...	161
June, ...	5	...	...	...	...	...	11	8	...	5	...	...	61	7	20	...	3	120
July, ...	4	...	1	...	...	...	15	2	...	3	...	...	19	3	15	2	...	64
August, ...	9	...	...	7	3	...	13	6	...	3	...	...	25	2	7	10	...	85
September,	8	...	2	1	1	...	18	6	1	6	...	...	27	3	3	7	...	83
October, ...	13	...	1	...	1	...	23	7	...	5	...	...	42	5	2	4	...	103
November,	13	1	...	...	...	...	17	8	2	7	...	...	45	6	8	4	...	111
December, ...	31	...	...	...	...	...	16	5	1	12	...	...	31	8	...	...	2	106
Total,	111	1	13	10	6	1	172	99	10	53	...	...	613	87	555	33	9	1673

TABLE VI.—Shewing how the cases of Infectious Disease were notified or ascertained during the Year ending 31st December, 1925.

DISEASE.	BY WHOM REPORTED.								Total.
	Householders.	Householders and Doctors.	Doctors.	House Surgeons.	School Medical Inspector.	Education Authority Officers.	Public Health Officers.	Registrars.	
Pneumonia, -	...	...	66	...	...	...	...	45	111
Enteric Fever, -	...	2	10	1	...	...	...	...	13
Typhus Fever, -	...	1	9	...	...	...	...	...	10
Continued Fever, -	...	...	6	...	...	...	...	...	6
Cerebro-Spinal Fever, -	...	...	1	...	...	...	...	...	1
Diphtheria, -	...	25	147	...	...	...	...	...	172
Scarlet Fever, -	...	31	68	...	...	...	...	...	99
Puerperal Fever, -	...	...	10	...	...	...	...	...	10
Erysipelas, -	...	4	49	...	...	...	...	...	53
Chickenpox, -	464	6	11	...	...	1	31	...	513
Measles, -	82	2	2	...	...	...	1	...	87
Whooping Cough, -	519	...	2	...	...	...	5	29	555
Diarrhoea, -	...	...	...	...	...	...	...	33	33
Encephalitis Lethargica, -	...	1	7	...	...	...	...	1	9
Influenza, -	...	...	1	...	...	...	...	...	1
<b>Total,</b>	1065	72	389	1	...	1	37	108	1673

TABLE VII.—Comparative Statement of the number of cases of Zymotic Diseases treated at Home and in Hospital in different sized houses during the year 1925.

DISEASE	TREATED AT HOME FROM HOUSES OF APARTMENTS.										TREATED IN HOSPITAL FROM HOUSES OF APARTMENTS.										Grand Total.									
	One.	Two.	Three.	Four.	Five & over.	Semi-detach.	Self-Contain.	Com Lodging Houses.	Royal Infirmary.	Child Welfare Hospital.	Smithston.	Maternity Hospital.	Tot. at Home	One.	Two.	Three.	Four.	Five & over.	Semi-detach.	Self-Contain.		Com Lodging Houses.	Royal Infirmary.	Maternity Hospital.	Child Welfare Hospital.	Gateside Hospital.	Smithston.	Ships.	Total in Hospital.	
Pneumonia,	12	67	12	1	1	1	...	4	4	4	4	3	109	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	111
Enteric Fever,	...	...	...	...	...	...	...	...	...	...	...	3	3	3	1	2	1	...	...	...	...	...	...	...	...	...	4	10	13	
Typhus Fever,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	10	
Continued Fever,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	6	
Cerebro-Sp. Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
Diphtheria,	...	...	...	...	...	...	...	...	...	...	...	...	2	18	93	30	6	14	5	...	...	...	...	...	...	...	...	170	172	
Scarlet Fever,	...	...	...	...	...	...	...	...	...	...	...	...	...	8	39	17	7	8	...	...	...	...	...	...	...	...	...	1	99	
Puerperal Fever,	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	1	...	...	...	...	...	...	...	...	...	...	...	9	10	
Erysipelas,	3	28	10	2	...	...	1	...	...	...	...	...	44	1	6	1	...	...	...	...	...	...	...	...	...	...	...	9	53	
Measles,	22	30	18	10	2	3	6	...	...	...	...	...	86	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	87	
Whooping Cough,	135	314	78	4	4	7	11	...	...	...	...	2	555	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	555	
Chickenpox,	104	246	123	17	9	4	8	...	...	...	...	...	511	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	513	
Diarrhoea,	8	23	2	...	...	...	...	...	...	...	...	...	33	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	33	
Encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Lethargies,	...	2	...	...	...	...	...	...	...	...	...	2	4	...	5	...	...	...	...	...	...	...	...	...	...	...	...	5	9	
Influenza,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
	284	710	238	34	16	16	27	4	4	4	4	10	1348	37	161	51	14	22	13	5	2	3	2	1	9	4	1325	1673		

from the five [unclear]

from the five Districts, and from Ships, for the year 1925.

DISTRICT.	Cases.	Pneumonia.	Influenza.	Enteric Fever.	Typhus Fever	Continued Fever.	Cerebro Spinal Fever.	Diphtheria.	Scarlet Fever.	Puerperal Fever.	Krysipelas.	Malarial Fever	Dysentery.	Chickenpox.	Measles.	Whooping Cough.	Diarrhoea,	Encephalitis Lethargica.	Total.
District A,	{ Ascertained, Removed,	44 1	...	2 2	...	...	1 1	68 68	45 45	2 2	17 4	...	...	109 ...	47 ...	174 ...	14 ...	4 4	527 127
District B,	{ Ascertained, Removed,	23 ...	1 1	2 2	2 2	1 1	...	26 26	9 9	2 2	9 2	...	...	111 ...	9 ...	125 ...	5 ...	...	325 45
District C,	{ Ascertained, Removed,	31 1	...	1 1	8 8	4 4	...	49 49	21 21	5 4	23 3	...	...	202 ...	21 1	227 ...	13 ...	1 ...	606 92
District D,	{ Ascertained, Removed,	10 ...	...	1 1	...	1 1	...	28 26	17 17	1 1	4 ...	...	...	86 ...	10 ...	27 ...	1 ...	2 ...	188 47
District E,	{ Ascertained, Removed,	3 ...	...	7 4	...	...	...	1 1	6 6	...	...	...	...	5 2	...	2 ...	...	2 ...	26 13
Ships,	{ Ascertained, Removed,	...	...	...	...	...	...	...	1 1	...	...	...	...	...	...	...	...	...	1 1
Total,	Ascertained, Removed,	111 2	1 1	13 10	10 10	6 6	1 1	172 170	99 99	10 9	53 9	...	...	513 2	87 1	555 ...	33 ...	9 5	1673 825

TABLE IX.—Shewing the number of cases of Measles and Whooping Cough with and without Medical Attendance, and the percentage of deaths to cases ascertained Monthly, for the Twelve Months ending 31st December, 1925.

MONTH.	MEASLES.				WHOOPIING COUGH			
	With Medical Attend.	Without Medical Attend.	Total.	Percentage of deaths to cases ascertained.	With Medical Attend.	Without Medical Attend.	Total.	Percentage of deaths to cases ascertained.
January, ...	8	4	12	Nil	88	155	243	4·11
February, ...	1	3	4	Nil	72	75	147	4·76
March, ...	3	2	5	Nil	27	32	59	6·78
April, ...	9	8	17	Nil	18	11	29	13·79
May, ...	8	7	15	Nil	11	11	22	13·63
June, ...	3	4	7	Nil	9	11	20	10·0
July, ...	2	1	3	Nil	11	4	15	6·66
August, ...	1	1	2	Nil	1	6	7	Nil
September, ...	3	...	3	Nil	...	3	3	Nil
October, ...	1	4	5	Nil	1	1	2	50·0
November, ...	5	1	6	Nil	2	6	8	Nil
December, ...	5	3	8	Nil	...	...	...	Nil
Total,	49	38	87	Nil	240	315	555	5·76

TABLE X.—Shewing the number of cases of Infectious Disease treated at Home and in Hospital, the mortality at Home and in Hospital from these Diseases, with the percentage of deaths (1) to the cases treated in each, (2) to the total cases, (3) and to total deaths from all causes in Greenock during 1925.

DISEASE.	GREENOCK POPULATION, 1925—			TOTAL DEATHS FROM ALL CAUSES—1163 (Rate per Thousand of Population—14·32)					
	Cases at		Total Cases.	Deaths at		Percentage of Deaths to cases treated.		Percentage of deaths to total cases.	Percentage of deaths to total deaths from all causes.
	Home.	Hospital		Home.	Hospital	Home.	Hospital.		
	...	...	...	...	...	...	...	...	
Typhus Fever, -	...	10	10	...	4	...	40·00	40·00	0·34
Continued Fever, -	...	†6	6	...	...	...	...	...	...
Enteric Fever, -	*3	10	13	...	1	...	10·00	7·69	0·08
Scarlet Fever, -	...	9·9	99	...	1	...	1·01	1·01	0·08
Diphtheria, -	2	170	172	...	8	...	4·70	4·65	0·68
Cerebro Spinal Fever, -	...	†1	1	...	1	...	100·00	100·00	0·08
Encephalitis Lethargica,	4	5	9	3	1	75·00	20·00	44·44	0·34
Total, - - -	9	301	310	3	16	33·33	5·31	6·12	1·63

\*3 Cases were treated in Smithston.  
 †4 Cases were subsequently diagnosed as Typhus Fever.  
 †1 Case was subsequently diagnosed as T.B. Meningitis.



TABLE XI.—Shewing the number of Families with the number of Persons therefrom accommodated in the Reception House each Month during the Year 1925, also the average stay,

MONTH.	Number of Families.	Number of Persons.	Average stay per person.	NUMBER OF PERSONS IN CONTACT WITH.					Total.
				Diphtheria	Typhus Fever.	Enteric Fever.	Scarlet Fever.	Under Observat.	
January, - -	1	4	12·5	...	...	...	4	...	4
February, - -	3	15	10·3	...	...	...	15	...	15
March, - -	5	26	9·4	11	...	...	15	...	26
April, - -	3	11	7·6	...	...	...	11	...	11
May, - -	11	38	10·7	...	16	...	22	...	38
June, - -	5	24	12·9	...	..	...	24	...	24
July, - -	2	8	12·2	...	...	...	8	...	8
August, - -	17	75	12·8	...	69	...	6	...	75
September, - -	15	85	14·7	...	74	...	11	...	85
October, - -	17	76	15·0	...	47	...	29	...	76
November, - -	4	18	16·0	...	...	...	18	...	18
December, - -	2	5	11·0	...	...	...	5	...	5
	85	385	12·1	11	206	...	168	...	385

Number of families admitted during the year, - - - 85

„ persons „ „ - - - 385

Average stay per person, 12·1 days.