

[Report 1966] / Medical Officer of Health, Motherwell & Wishaw.

Contributors

Motherwell & Wishaw (Lanarkshire, Scotland)

Publication/Creation

1966

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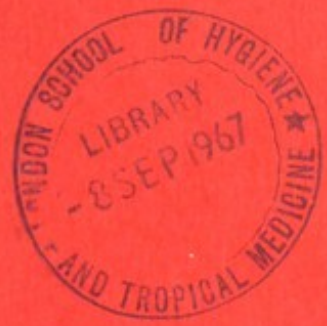


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BURGH OF MOTHERWELL AND WISHAW



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year, 1966



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HEALTH DEPARTMENT STAFF

To the Provost, Magistrates and Councillors of the Burgh of Motherwell and Wishaw and to the Scottish Home and Health Department.

Deputy Medical Officer of Health
Ian W. Stewart, M.B., Ch.B., D.P.H.

Senior Dental Officer
James H.B. Steel, L.D.S., R.F.P.S.

Dental Officer
Neil Macdonald, B.D.S.

Ladies and Gentlemen,

I have the honour to submit a report on the health of the Burgh and the work of the Health Department for the year 1966.

Yours faithfully,

WILLIAM C. YOUNG,
Medical Officer of Health

Health Department,
49 Airbles Road,
Motherwell.



Clinic Visiting Staff

Elizabeth Young
Lucy Rintoul
Robin Hepburn
Jean Tyler
Jennifer Black

Assistant Superintendent at Clinics
Staff Nurse
Staff Nurse
Practitioner

HEALTH DEPARTMENT STAFF

Medical Officer of Health
William C. Young, M.B., Ch.B., D.P.H., D.P.A.

Depute Medical Officer of Health
Ian B.C. Eckford, M.B., Ch.B., D.P.H.

Senior Dental Officer
James H.B. Steel, L.D.S., R.F.P.S.

Dental Officer
Neil MacEwan, B.D.S.

Superintendent of Health Visitors, Home Nurses and Supervisor of Midwives
Margaret M.S. Cameron, R.G.N., S.C.M., H.V., Q.I.D.N.

Assistant Superintendent of Health Visitors, Home Nurses and
Assistant Supervisor of Midwives.
Mary McCue, R.G.N., S.C.M., H.V., Q.I.D.N.

Health Visitors

Catherine Anderson
Jessie Brown
Amelia Cumming
Elizabeth Findlay
Jeanie Freel
Elizabeth Graham
Barbara Mackie
Ann Prentice
Euphemia McDougall
Janet Ramage
Betsy Ferguson

Margaret Cockburn
Catherine Stevenson
Helen Herbert
Clara Lamb
Ann McGregor
Patricia Quinn
Margaret Watters
Jeanie MacFarlane
Mildrid White
Elizabeth Brown
Jeanie McCaveney

Home Nurses

Elizabeth Helling
Margaret Dunn
Margaret Greenshields
Jean McLaughlin
Margaret Maguire

Catherine Campbell
Mary Gibson
Marjorie Johnstone
Janet Heron
Irene Showell

Clinic Nursing Staff

Assistant Superintendent at Clinics
Sister
Staff Nurse
Staff Nurse
Probationer

Elizabeth Young
Agnes Rintoul
Robina Hepburn
Jean Pyper
Jennifer Black

Dental Surgery Assistants

Fiona Smith
Vera Williamson

Midwives

Alice Boylan
Bridget Quinn
Mary Moffat
Isabella McGuffie

Janet Ferguson
Sarah Gamble
Ann Mailer

Clerical Staff

Eleanor Morton

Elizabeth Tannahill
Agnes Paterson
Janet Gray
Elizabeth Simpson

Isabella Brown
Elizabeth Duncan
Wilma Scott
Mary Knobbs

Welfare Foods

Margaret Freel

Domestic Help Supervisor

Margaret Thomson

Loaning Occupational Centre

Instructor
Assistant Instructor
Assistant Instructor

William McRoberts
Marion Sands
Robert Reid

Clinics - Child Welfare Centre, Airbles Road, Motherwell

Ante-Natal	Monday 8.45a.m. and Wednesday 1.30p.m.
Artificial Sunlight	Tuesday and Friday 2p.m. (By appointment)
Child Welfare	Thursday 2p.m.
Dental	Monday 9a.m. and Wednesday 2p.m. (Inspection of new Cases) Otherwise daily by appointment.
Immunisation & Vaccination	At Child Welfare Clinics
Midwives Session	Tuesday 3.30p.m., Thursday and Friday 2.30p.m.
Post-Natal and Gynaecological	Monday 1.30p.m. and 3.30p.m.
Tuberculosis Contact Clinic	2nd and 4th Monday and Thursday of each month at 9.30a.m.
B.C.G. Clinic	Last Thursday of each month 9.30a.m.
Mothercraft Classes	Tuesday 10a.m.
Well Women Clinics	By appointment

Clinic Premises used by Voluntary Associations

Motherwell, Wishaw and District Women's Advisory Association

2nd and 4th Tuesday of each month at 2p.m.
1st Tuesday of each month at 2p.m.

Motherwell, Wishaw and District Marriage Guidance Council

Marriage Guidance Counselling - By Appointment

Junior Paraplegic Therapy Group

Monday and Thursday morning.

Assistant Superintendent at Clinics
Sister
Staff Nurse
Staff Nurse
Physician

Elizabeth Young
Agnes McIntosh
Sonia Heyburn
Jean Pyper
Jeanie Black

General Medical Practitioner/Midwife Ante-Natal and Post-Natal Clinics

Drs. J.P. McMillan,
Marie McMillan and
E. McKenna

Tuesday 2 - 3.30p.m.

Dr. H. Simpson

Thursday 2 - 3.30p.m.

Drs. J. Simpson and
D.W. Clementson

Thursday 3.30 - 5p.m.

Drs. J.R. Thomson,
J.S. Chapman and
T. Moffat

Tuesday 2p.m. (Surgery Premises)
Thursday 1p.m. (Surgery Premises)

Drs. W. Wilkie and
F. Allan

Friday 2 - 3.30p.m.

Drs. K. Cameron,
C. MacDonald and
T. Blair

Friday 2 - 3.30p.m.

Forgewood Clinic, - Community Centre, Dinmont Crescent, Motherwell

Child Welfare and distribution
of Welfare Foods
Immunisation and Vaccination
Dental Inspection

Wednesday 9.30a.m.

Calder Clinic, Calder Street, Motherwell

Child Welfare and distribution
of Welfare Foods
Immunisation and Vaccination

Monday 2p.m.

Muirhouse Clinic, St. Margaret's Church Hall, Motherwell

Child Welfare and distribution
of Welfare Foods
Immunisation and Vaccination

Monday 2p.m.

Clinics - Child Welfare Centre, Stewarton Street, Wishaw

Ante-Natal	Tuesday and Thursday 8.45a.m.
Artificial Sunlight	Monday and Wednesday 2.30p.m. (By Appointment)
Child Welfare	Tuesday and Friday 2.30p.m.
Dental	Tuesday and Thursday 9a.m. (Inspection of new cases) Otherwise daily by appointment.
Immunisation and Vaccination	At Child Welfare Clinics.
Midwives Session	Tuesday 2.30p.m.
Post-Natal & Gynaecological	Thursday 1.30p.m. and 3.30p.m.
Mothercraft Classes	Wednesday 3p.m.
Tuberculosis Contact Clinic	2nd and 4th Monday and Thursday of each month at 11a.m.
B.C.G. Clinic	Last Thursday of each month at 11a.m.
Well Women Clinics	By appointment.

General Medical Practitioner/Midwife Ante-Natal and Post-Natal Clinic

Dr. W. Wood Thursday 2 - 3.30p.m.

Drs. J. McMillan
and Marie McMillan
and Dr. McKenna Friday 2 - 3.30p.m.

Clinic Premises used by Voluntary Associations

Motherwell, Wishaw and District Women's Advisory Association

1st and 3rd Monday of each month 2p.m.

Coltness Clinic (St. Aiden's Church Hall)

Wednesday 2 - 4p.m.

SUMMARY OF VITAL STATISTICS FOR THE YEAR, 1966

Population (Registrar General's Estimate) to middle of 1966	75,963
Number of live births (Corrected for Usual Residence)	1,454
Birth rate per thousand of the population	19.1
Illegitimate birth rate per 100 live births	4.7
Number of deaths (Corrected for Usual Residence)	843
Death rate per 1,000 of the population	11.1
Death rate adjusted for age and sex distribution	12.8
Number of deaths of infants under one year (Corrected for Usual Residence)	22
Infant mortality rate (per thousand live births)	15
Neonatal mortality rate (per thousand live births)	9.6
Total number of still-births (Corrected for Usual Residence)	23
Still-birth rate per 1,000 total births	16
Number of deaths from all forms of tuberculosis (Corrected)	6
Death rate from all forms of tuberculosis (per 1,000 of population)	0.08
Number of deaths from Pulmonary tuberculosis	6
Death rate from pulmonary tuberculosis (per 1,000 of population)	0.08
Number of deaths from malignant neoplasms (Corrected)	161
Death rate from malignant neoplasms (per 1,000 of population)	2.12
Number of deaths from bronchitis and pneumonia (Corrected)	88
Death rate from bronchitis and pneumonia (per 1,000 of population)	1.16
Number of deaths from road transport accidents (Corrected)	13
Death rate from road transport accidents (per 1,000 of population)	0.17
Number of deaths from accidents in the home (Corrected)	12
Death rate from accidents in the home (per 1,000 of population)	0.16

POPULATION, BIRTHS AND MARRIAGES

The population of the Burgh as estimated by the Registrar General at 30th June, 1966 was 75,963. The number of live births registered within the Burgh during the year was 1,370 and the total births corrected for usual residence was 1,454 - a fall of almost 100 births on the previous year. The crude birth rate for 1966 was 19.1 per 1,000 of the population and that standardised for age and sex was 18.5. The total of illegitimate births corrected for usual residence was 68. The number of marriages registered was 608.

DEATHS

The total number of deaths corrected for usual residence was 843 during 1966, an increase of 54 on the previous year. Cancer accounted for 161 of the total deaths and 29 of these were cases of lung cancer. Bronchitis and Pneumonia accounted for 88 of the total deaths for the year. Thirteen deaths from road transport accidents and 12 deaths from home accidents unhappily remain very constant.

INFANT DEATHS AND STILL BIRTHS

1966 was a remarkably good year in respect of infant deaths during the first year of life. In 1965, 34 infant deaths gave a death rate of 22 per 1,000 live births - one of the lowest on record. In 1966 there were only 22 infant deaths giving an exceptionally low death rate of 15 per 1,000 live births. This figure is a great credit to all of those whose work is directed towards the saving of infant lives and one of which the Burgh may be justly proud.

There were 23 still births corrected for usual residence giving a still birth rate of 16 which is also the lowest rate that the Burgh has ever experienced.

SERVICES FOR YOUNG CHILDREN

Services directed towards the health and welfare of young children have always been prominent in the work of the Health Department. These services have their origin in voluntary efforts made to reduce the high infant mortality rate prevailing at the beginning of this century. Like all successful voluntary work this became government policy and Local Health Authorities were in time required to provide maternity and child welfare schemes and it is from these that the services of today have developed.

The main prop of the children's services is the Health Visitor. The birth of each Burgh child, whether born within or outwith the Burgh is notified to the Medical Officer of Health. A record is made out for each newly born baby and the Health Visitor begins visiting the home when the work of the home or hospital midwife is finished. The number of parents who ask that the Health Visitor should not call is remarkably small. Inquiry has shown that no Health Visitor in the Burgh has more than one or two families who do not wish her to visit.

In the past each child has been visited in a routine way, irrespective of progress, but this has been an uneconomical use of the skill of the Health Visitor. Gradually more and more time has been devoted by them to the child who does not progress as it should and less to the normally developing child who, however, is still kept under routine supervision. From this change in practice has developed the "at risk" register. Any child, who, as a result of abnormal conditions noted in the ante-natal period, during the birth or subsequent to the birth, is placed on the "at risk" register, is supervised in a more intensive way. At the end of the year 1966, 169 children were on the "at risk" register. The child is removed from the register when it is observed to be developing normally. On the other hand should physical or mental abnormality be suspected, steps are taken to have the child fully assessed. When physical or mental abnormality is confirmed, the child is removed from the "at risk" register and is placed either on the physically handicapped or the mentally handicapped register. Thereafter visits are paid by the District Health Visitor or a specially trained Health Visitor appointed for handicapped children and every effort is made by them to see that the child benefits from any service available to assist his particular disability.

There are five clinic premises which are in use as Child Welfare Clinics. These are situated in the Health Department in Airbles Road, the Community Centre in Dinmont Crescent, a hall in Milton Street, the Health Clinic in Stewarton Street and St. Aiden's Church Hall, Coltness Road. In these clinics, consultation with the Clinic Medical Officer and Health Visitor is available, routine immunisation and vaccination is provided and welfare foods are available. A sixth clinic is planned to be opened in St. Margaret's Church Hall, Barons Road, early in 1967. It has been found that Child Welfare Clinics are well attended whenever they are provided within the new development areas where they are within the range of a mother walking with a pram. The policy has therefore been to provide these wherever possible in existing halls and to plan for proper consulting and waiting rooms in Community Centres as they are built in these development areas.

The Health Department Dental Service for pre-school children provides inspection and treatment at the Airbles Road and Stewarton Street Clinics. In addition to this a Dental Inspection Service has begun in the Forgewood Clinic and it is hoped to extend this if possible to other centres.

In 1966 arrangements were made for two Health Visitors to assist at the Consultant Paediatrician's Clinic once a week in Strathclyde Hospital. In this respect a useful link has been forged with the hospital paediatric service which also serves to add interest and value to the Health Visitors' work with young children.

For a number of years now the urine of all infants of a few weeks of age has been tested for phenylpyruvic acid by Health Visitors using a qualitative colorimetric test. The purpose of the test was to screen all infants for the severe mental defect associated with phenylketonuria. From the month of November 1966 the urine test was replaced by the taking of blood from each infant at about the 7th day of age. The blood samples are examined at Stobhill Hospital Laboratory for phenylalanine by the Guthrie Test - this test being considered to be more accurate than that on the urine. In the last two months of the year 1966 250 blood samples were examined. No case of phenylketonuria has yet been discovered but a severely mentally handicapped pupil of 12 years attending the Occupational Centre was found to be suffering from the illness.

The importance of discovering the condition in the early days of infancy lies in the fact that effective treatment is possible at this stage which can prevent the development of severe mental defect.

There are no day nurseries for pre-school children in Motherwell and Wishaw but three pre-school playgroups are registered with the Town Council under the Nursery and Child Minders Regulations Act, 1948. These are situated at Glencairn Primary School, Glencairn Street, Wishaw Academy, Academy Street and St. Margaret's Church Hall, Barons Road, Motherwell. These pre-school playgroups or part-time day nurseries provide play and occupational therapy for 25 - 30 children each between the ages of 3 and 5 years. Parents of many of the children take an active part in the running of these centres, which are to be encouraged as they fill a great need particularly for children living in high flats with the restricted possibilities there for play with other children. Also the limiting of these activities to forenoons and the exclusion of infants and very young children would appear to be in the interest of the children generally.

Welfare foods in the form of vitamin fortified dried milk, cereal and vitamin preparations are made available through six Health Department centres in the Burgh. There has been a great increase in the demand for these foods which is encouraging in view of the increased incidence of vitamin D deficiency noted in hospital admissions. Care has to be taken, however, to ensure that mothers of young children understand the importance of providing vitamin D to the child in addition to the more popular vitamin C preparations. The staff of the Health Department stress the importance of giving dried fortified milk for the first year of life, fortified cereals for the first two years and vitamin D and C preparations for the first three years. The child most at risk from Vitamin D deficiency is the one who is fed from an early age on cow's milk without the addition of vitamin D to the diet.

WELFARE FOODS

During the year 1966 the uptake of Welfare Foods was as follows:-

National Dried Milk	7,707
Orange Juice	25,717
Cod Liver Oil	3,670
Vitamin Tablets	1,395

SERVICES FOR EXPECTANT MOTHERS

There were 7 midwives employed in the Health Department during 1966, 1 less than in 1965. Much of the domiciliary work of the Midwife connected with home confinements has been reduced as a result of the tendency for more and more births to be carried out in hospital. On the other hand more and more mothers having babies in hospital are discharged at an early date and the Domiciliary Midwives have to supervise their care at home following discharge. In addition the Midwives along with Health Visitors take part in the General Medical Practitioners' Ante-Natal and Post-Natal Clinics of which there are 8 held each week.

Much has been said in previous reports on the Co-ordinated Maternity Service and therefore only brief reference will be made to it this year. General Medical Practitioners take part in a co-ordinated scheme whereby they carry out their Ante-Natal and Post-Natal care with Midwives and Health Visitors in Town Council clinic premises. Expectant mothers attending these clinics are referred routinely to the Obstetrician's Ante-Natal and Post-Natal clinics which are held in the same premises. Each expectant mother has one record which is passed between each clinic thus ensuring that a full record is available at each examination. During 1966 there were 729 births in mothers who attended the G.P./Midwife clinics for ante-natal care within the Co-ordinated Maternity Services Scheme.

CERVICAL CYTOLOGY

Plans were made during the year for the establishment of well-women clinics in the Burgh at which women would be examined for early signs of cervical and breast cancers. It is hoped that with co-operation from the laboratory service of the Western Regional Hospital Board these clinics will be commenced as soon as possible in 1967.

SERVICES FOR THE AGED

Domiciliary services for the aged include Health Visiting, Home Nursing and Domestic Help. 633 aged persons received a total of 1,896 visits from Health Visitors and 483 received 15,891 visits from Home Nurses during the year. 320 elderly infirm persons had the services of a Domestic Help from the Health Department during the year. The assistance which the aged receive from these Health Department domiciliary services cannot be overestimated. Health Visitors are also available to visit an old person prior to discharge from a hospital geriatric bed so that a link may be established between the progress made by a patient in hospital with the maintenance of that progress following discharge to the care of relatives at home.

HEALTH VISITING OF THE AGED

The over-seventies are visited by the Health Visitors three-monthly, or more often if necessary.

Many of these elderly people live alone and have few friends or relatives. For many, loneliness is the greatest problem, and for this group, the Health Visitor is very welcome as a social visitor. Quite a number are helped by reference to

- (a) Ministry of Social Security.
- (b) Home Help Service.
- (c) Meals on Wheels.
- (d) Care by the District Nurse and issue of Nursing Equipment.
- (e) Chiropody.
- (f) Recommendation for rehousing - Claims for Rebate of Rent & Rates.
- (g) Services of the Welfare Department.

Many are also helped by recourse to the Voluntary Social Agencies such as the W.V.S., the Red Cross Society and the St. Vincent De Paul Society.

Many of the old people do not require specific help but are given advice on diet, exercise, budgeting, etc. They are also informed of clubs which they may join, outings which are arranged and the possibility of holidays at the Town Council's holiday home at Rothesay or other holiday homes for which they may be eligible.

MENTAL HEALTH SERVICES

The Health Department provides supervision for all mentally handicapped persons who can benefit from such a service. This takes the form of regular home visits from a Medical Officer, Mental Health Officer and Mental Health Visitor. 274 were supervised in this way during 1966, 253 of these being on the informal mentally handicapped register and 21 being under guardianship and on the formal mentally handicapped register. At the end of the year 6 of these Mental Defectives (4 males and 2 females) were on the waiting list for admission to mental defective hospitals. 25 were resident in mental hospitals at the end of the year. In circumstances of emergency at home or where parents or guardians are in need of relief from the strain of caring for a mentally handicapped person, it is sometimes necessary to arrange for a temporary period of residential care for the handicapped person. This was done on 4 occasions during 1966.

The Senior Training and Occupational Centre for mentally handicapped continued in temporary premises in The Loaning. During the year 57 pupils attended, the average daily attendance being 44. In the month of September work for an outside factory was begun, "flats" being delivered to the centre where the pupils erected them into shirt boxes which were then collected by factory transport. An average of 6,000 boxes were completed each week for which the factory makes a payment of 4d per dozen. This type of work is popular with the pupils and leaves ample time for the carrying out of other crafts and instruction. The income from this work is to be used towards that part of the cost of meals at the Centre which is payable by the pupils. It is unlikely that further work of this kind will be taken on in the present premises.

One of the objects of the work of the centre is to assist pupils, wherever possible, to fit themselves for outside employment. In this respect the staff have been surprisingly successful, since 23 pupils have obtained and held outside employment.

The jobs which they are carrying out include employment in Shirt Factories, Local Authority (Parks and Street Departments), Laundries and Tradesmen's Delivery Vans. Two pupils were also transferred during this period to the Sheltered Workshop in Glasgow Road.

Plans to build a new Training Centre have moved very slowly owing to staffing difficulties in the Burgh Architect's Department and the problem of finding a suitable site. It is planned that the new centre should have training facilities for 120 senior pupils including a Special Care Unit for 12 severely handicapped. There would also be included a Day Care Centre of 16 places for mentally handicapped up to the age of 6 or 7 years. It is felt that such accommodation would also meet the needs of the small number of mentally handicapped of school age who are found unfit for admission to Education Authority junior training centres. It is hoped that the site which is finally chosen for the new centre will be capable of accommodating a hostel for mentally handicapped adults. The question of providing hostels is being examined at present by the co-ordinating committee. When the parents or guardians of mentally handicapped persons become no longer able to care for them and when there is no-one else to take their place, the only solution at the moment is admission of the handicapped persons to a mental defective hospital. The purpose of a hostel would be to take care of them within the community.

Mentally Ill - Hospital

(a) Detained Patients for year ended 31.12.66

	<u>M.</u>	<u>F.</u>	<u>Total</u>
Total at 31.12.65.....	30	4	34
Admitted since	13	18	31
	<hr/>	<hr/>	<hr/>
	43	22	65
Discharged since	3	3	6
Deaths since	1	0	1
To Informal Roll	14	13	27
	<hr/>	<hr/>	<hr/>
Total at 31.12.66	25	6	31

(b) Informal patients during year ended 31.12.66

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Total at 31.12.65 ...	72	88	160
Direct Admissions ...	91	120	211
From Detained Roll ..	14	13	27
	<hr/>	<hr/>	<hr/>
	177	221	398
Discharged since	90	94	184
Detained since	6	1	7
Died since	14	8	22
	<hr/>	<hr/>	<hr/>
Total at 31.12.66	67	118	185

Mentally Ill - Domiciliary

Patients under statutory guardianship	3
Number of visits	18
Patients under informal care	11

Mentally Handicapped in Institutions at end of December, 1966

Kirklands Hospital	18
Birkwood	20
Waverly Park	1
St. Charles'	1
St. Joseph's	4
St. Mary's	2
Larbert	3
Lennox Castle	2
	<hr/>
	51
	<hr/>

Mentally Handicapped - Domiciliary

Patients under statutory guardianship	21
Number of visits	92
Patients under informal care	271
Number of visits	701

HEALTH VISITING

Twenty-two full-time health visitors were employed during the year.

The following is a summary of Health Visiting -

<u>Expectant Mothers</u>	
Number visited	1,113
Total visits	3,420
<u>Children under 1 year</u>	
Number visited	1,464
Total visits	11,336
<u>Children between 1 and 5 years</u>	
Number visited	8,531
Total visits	21,995
<u>Tuberculosis Cases</u>	
Number visited	275
Total visits	1,279
<u>Aged Persons</u>	
Number visited	633
Total visits	1,896
<u>Other Cases</u>	
Number visited	902
Total visits	1,356
Total visits paid	41,282

HOME NURSING

The number of home nurses employed has not varied to any great extent during recent years and the demand for their services in the homes of those who are sick is fairly constant.

There is a constant demand for all types of equipment to assist in the care of those who are ill or disabled at home. In particular there is a high demand for commodes, bed pans and rubber sheeting. The following items of equipment are provided on loan, wheel chairs, zimmer walking aids, tripod walking aids, bed pans, commodes, urinals, rubber air rings, rubber sheeting, bed cages, back rests and feeding cups. In exceptional cases involving paralysis lifting aids are also provided.

The following is a summary of home nursing -

	<u>Medical</u>	<u>Surgical</u>	<u>Diabetic</u>	<u>Total</u>
Number visited	780	95	38	913
Total visits	17,393	2,872	5,155	25,420

Of the 913 cases attended by home nurses during the year 483 were to aged persons and of the 25,420 visits paid, 15,891 were to aged persons, 13,287 visits were for the purpose of giving injections.

<u>Children under 1 year</u>	
Number visited	22
Total visits	22
<hr/>	
<u>Children between 1 and 5 years</u>	
Number visited	481
Total visits	1,351
<hr/>	
<u>Tuberculosis Cases</u>	
Number visited	6
Total visits	18
<hr/>	
<u>Aged Persons</u>	
Number visited	11
Total visits	1,896

<u>Other Cases</u>	
Number visited	81
Total visits	1,356
<hr/>	
Number visited	1
Total visits paid	1
St. Charles	1
St. Joseph	4
St. Mary	2
<u>HOME NURSING</u>	1
Total	8

The number of home nurses employed has not varied to any great extent during recent years and the demand for their services in the homes of those who are sick is fairly constant.

There is a constant demand for all types of equipment to assist in the care of those who are ill or disabled at home. In particular there is a high demand for commodes, bed pans and rubber wheelchairs. The following items of equipment are provided on loan, wheel chairs, slinger walking aids, tripod walking aids, bed pans, commodes, urinals, rubber air rings, rubber kneeling, bed orders, back rests and feeding cups. In exceptional cases involving patients sitting aids are also provided.

MIDWIFERY

7 full-time midwives were employed during the year 1966.

Notifications of Births

The number of live births notified as occurring within the Burgh (including illegitimate) was 1,427 and the number of still-births was 23 giving a total of 1,450 births within the Burgh.

Total number of births occurring in institutions:-

Motherwell Maternity	878
Bellshill Maternity	141
Beckford Lodge	128
William Smellie	98
Calderbank	11
St. Francis	7
Royal Maternity	2
Belvidere	2
Lockhart	2
Simpson Memorial	1
Southampton General	1
Eastern District	1
Stobhill	1

1,272

Total number of births occurring at home 178

Administration of Analgesics

Number of midwives in the area qualified to administer analgesics and employed on local health authority work 7

Number of sets of apparatus in use at 31st December, 1966
Trilene 7

HOME HELP SERVICE

The Home Help Service was begun in 1948 with a view to assisting the aged and infirm, women in confinement, problem families and various other cases where there was a need for domestic help.

With the passing of the years, this service has grown considerably and is now established as a very necessary part of the Health Department. In many instances it is the means of keeping a patient in her own home and consequently relieving congestion in the various hospitals.

The cost of this service is dependent on the weekly income of the patient, but the maximum charge is 5/- per hour and the minimum is 2/6d. per day.

The Home Help herself, is employed only after being interviewed and studied carefully for the qualities which are required to make an efficient Home Help. She must be sympathetic, tolerant, honest and kind as well as being a good worker.

The number of Home Helps employed last year varied from 79 to 82 and the types of cases dealt with were:-

Elderly infirm persons	-	320
Chronic Sick	-	45
Confinements	-	5
Mentally Disordered	-	4
Others	-	6
		<hr/>
Total		380
		<hr/>

IMMUNISATION AND VACCINATION

Immunisation and Vaccination is offered in respect of the following diseases - Poliomyelitis, Diphtheria, Whooping Cough, Tetanus, Smallpox and Tuberculosis.

Diphtheria, Whooping Cough and Tetanus is offered in combined form at the age of 3 months, to be followed by vaccination against Poliomyelitis after the age of 6 months. Vaccination against Smallpox is given between 1 and 1½ years of age to be followed by a booster dose of Diphtheria, Whooping Cough and Tetanus before the end of the second year of age. A Poliomyelitis booster and a second Diphtheria and Tetanus booster dose is given just prior to school entry. B.C.G. Vaccination against Tuberculosis continues to be offered to school children between the ages of 13 years and 14 years and to all contacts of this disease. A measles vaccine became available during the year. It was decided not to offer this routinely but to make it available in special circumstances only. During 1966 the Health Visitors were authorised to offer Poliomyelitis vaccination in the home in cases where facilities of the clinics were not accepted.

The number of persons vaccinated during the year was as follows:-

Immunisation and Vaccination	In Town Council Clinics	By General Medical Practitioner	Total
<u>Diphtheria.</u>			
No. of persons completing course	829	400	1,229
" maintenance inoculations	625	432	1,057
<u>Whooping Cough</u>			
No. of persons completing course	829	400	1,229
" maintenance inoculations	625	432	1,057
<u>Tetanus</u>			
No. of persons completing course	829	400	1,229
" maintenance inoculations	625	432	1,057
<u>Poliomyelitis</u>			
No. of persons completing course	1,173	631	1,804
" maintenance inoculations	644	590	1,234
<u>Smallpox</u>			
No. of persons with successful primary vaccination	293	284	577
No. of persons having no local reaction to primary vaccination	51	48	99
No. of persons re-vaccinated	52	41	93
<u>B.C.G.</u>			
No. of school children vaccinated	1,012	-	1,012
" tuberculosis contacts vaccinated	155	-	155

INFECTIOUS DISEASES

The incidence of Infectious Diseases was again low during 1966 and there were no deaths under this heading other than those from Tuberculosis. The number of new cases of confirmed pulmonary tuberculosis in 1966 was 30, which is the lowest ever recorded in the Burgh. The incidence of this disease continues to fall, not in the dramatic fashion of earlier years but nevertheless in a steadily reducing trend. There were 6 deaths from respiratory tuberculosis during the year.

There was one case of confirmed typhoid fever during the year. The patient was sharply ill and had recently returned from a holiday in Spain. Investigation showed that this was a case of typhoid fever contracted outside this country. Supervision of contacts ensured that there was no local spread of infection.

	In Town Council Clinics	Private Practitioners	Total
of persons completing course	859	400	1,259
" maintenance inoculations	652	432	1,084
of persons completing course	859	400	1,259
" maintenance inoculations	652	432	1,084
of persons completing course	1,173	631	1,804
" maintenance inoculations	644	290	934
of persons with successful primary vaccination	293	284	577
of persons having no local section to primary vaccination	21	48	69
of persons re-vaccinated	28	41	69
of school children vaccinated	1,012	-	1,012

TUBERCULOSIS

Incidence

During the year 37 notifications of tuberculosis were received. The diagnosis was confirmed in 36 cases. Of these 30 were pulmonary. Classification of confirmed cases according to age group and sex incidence is shown in the statistical tables at the end of the report.

All Tuberculosis

There are 256 persons resident in the Burgh of Motherwell and Wishaw who are known to be suffering from tuberculosis at 31st December, 1966. These are classified according to age and sex in the statistical tables at the end of the report.

Deaths

There were 6 deaths from respiratory tuberculosis during the year. Tables giving particulars of the period elapsing between discharges from an institution and death, and deaths and death rates from tuberculosis since 1931 are given in the statistical tables at the end of the report.

The death rate for 1966 is 0.08 per thousand of the population.

Contact Investigation and B.C.G. Vaccination

236 contacts, of whom 162 were children under 15 years of age, were traced during the year and all contacts over 15 years were offered X-ray of chest. At special contact sessions held twice weekly in the Airbles Road Clinic Centre 162 persons were tuberculin tested. The following tables show the result obtained from skin testing of contacts under 15 years of age.

	<u>Tuberculin Tested</u>	<u>Positive</u>	<u>Negative</u>
Under 1 year	42	-	42
1 - 4 years	40	3	37
5 - 9 years	60	3	57
10 - 15 years	20	1	19
	<hr/>	<hr/>	<hr/>
	162	7	155

Of the 155 negative reactors all were given B.C.G. Vaccination as under. All were successfully converted to tuberculin positive.

Under 1 year	42
1 - 4 years	37
5 - 10 years	57
Over 10 years	19
	<hr/>
	155
New born babies in tuberculosis families	74
	<hr/>
	229
	<hr/>

B.C.G. Vaccination in Schools - Session 1965-66

The number of children eligible under the scheme was 1,437. Consent for testing and vaccination was received for 1,268 children. This figure represents 83% of the children eligible under the scheme.

Of these 1,268 children 1,249 received a preliminary skin test under the School B.C.G. Scheme. 1,232 reported for reading 3 days later. Of these 219 were positive (18%) and 1,013 negative (82%). 1,013 children were vaccinated with B.C.G.

Domiciliary Supervision

Cases under supervision	256
Visits by Health Visitor	1,279
Cases nursed at home	28
Home nursing visits	1,041
	<hr/>
	1,041
	<hr/>

VENEREAL DISEASES

The Clinic is held at Oak Lodge, Hamilton.

The following figures are furnished by Dr. Hamilton, Consultant Venereologist, and give an indication of the extent of Venereal Diseases in the Burgh during the year 1966.

The number of patients from the Burgh dealt with during the year, at or in connection with the out-patient department, for the first time is as follows:-

	<u>Male</u>	<u>Female</u>
Syphilis	21	36
Gonorrhoea	66	20
Non-specific Urethritis	39	-
Other Venereal Conditions	2	2
Non-Venereal Conditions	64	33

Total number of attendances of all patients residing in the Burgh -

<u>Male</u>	<u>Female</u>	<u>Total</u>
192	101	293

MOTHERCRAFT TEACHING

Two classes per week are held, on a Tuesday morning in Motherwell and a Wednesday afternoon in Wishaw.

The class starts off with a recorded talk by Dr. Grieve on

- (1) The Mother
- (2) The Birth
- (3) The Baby

which lasts approximately 30 minutes. The Health Visitor then enlarges on Dr. Grieve's talk by explanation, demonstration and answering of questions. The Health Visitor then lectures for approximately 1 hour, the first lecture covering Preparation for Motherhood, Physiology of Pregnancy, Ante-natal Care and Maternity Benefits.

The second talk covers the physiology of labour, the management of breast and bottle feeding and a demonstration of the Milton Method of sterilizing feeding bottles.

The third lecture deals with the early management of the baby, the importance of attending for Post-Natal examination and a demonstration of bathing the baby.

OTHER TALKS

38 talks were given to various organisations during the year and included such subjects as Problems of childhood, Home Nursing, Immunisation, Diet and General Health. Many of the talks were accompanied by films.

SMOKING AND HEALTH CAMPAIGN

A smoking and health campaign was held during the month of April. The main centre of attraction was the Dome which was situated adjacent to the Town Hall. The Dome provided visual presentation of the dangers of smoking linked to a sound track and was open to the public for 23 days during which time 17,030 visits were paid. A high proportion of those attending were young people in their late teens and early twenties. Most of those who visited the Dome continued into the Town Hall to an exhibition where staff discussed problems with the help of exhibits and where films were shown continuously until 8p.m.

During the last fortnight of the campaign 30 talks by Doctors accompanied by films and discussions were arranged in schools throughout the Burgh.

Distribution of publicity material to all households in the Burgh was made possible by volunteers from the churches and posters and further publicity material was distributed to all schools and main shops.

A clinic for smokers was a feature of this campaign which had not been included in previous campaigns of this kind. The object was to bring into a group, people who had a genuine desire to give up smoking and, by discussion against the background of the campaign and its attendant publicity, to assist them in achieving success. A weekly evening session was held in the Health Department during which time 47 persons attended most of whom had paid a visit to the Dome and exhibition. The Medical Officer of Health with assistance from the Superintendent of Nurses and her Depute conducted the meetings which took the form of short addresses from 2 experienced Chest Physicians, a Medical Officer from the Scottish Home and Health Department and appropriate films. Each evening new members completed a personal schedule of their present and past smoking habits and a plan to be followed for the ensuing six weeks. The greater part of each evening was occupied with a summary of individual progress and discussion among members in general. By the end of the 3 months, of the 47 attenders 11 (23%) had stopped smoking for varying periods and 9 (19%) had reduced their smoking to a few cigarettes per day. Contact was maintained with all who had attended the clinic and six months later it was found that 11 (23%) had been successful in continuing as non-smokers and 4 (9%) had continued at a substantially reduced number of cigarettes. Two had removed from the district, eleven reported no change in smoking habits and 19 volunteered no reply and were therefore assumed to have been unsuccessful.

In summing up the campaign I would say that it had an effect on smoking habits in the Burgh at least on a short term basis. This is not an opinion based on the survey which accompanied the campaign, the results of which have not yet been made known. Of the 17,030 persons who visited the Dome and exhibition, representing a quarter to a fifth of the population of the Burgh, some must have been influenced by what they saw and heard even on a short term basis. Many were young people showing

a great awareness of the dangers of smoking to health. The addresses and films to school children, while serving a very useful purpose, required more time and preparation of presentation. The smokers' clinic in converting 23% of attenders to non-smokers and maintaining this percentage for six months accomplished some success. I do not think the solution to the problem lies in intensive time consuming campaigns of this kind but rather in continuing national publicity supported by local publicity.

HEALTH AND HOUSING PRIORITY

During the year 7 families were rehoused from private property and sublet accommodation on account of tuberculosis. In accordance with an allocation of 2 per month 24 families were rehoused from private property and sublet accommodation on account of other medical conditions. These included condition of the heart, paralysis, arthritis, blindness and carcinoma. During the year 9 families were housed with aged tenants of Town Council houses who were unable to look after themselves, the young families being given an assurance of tenancy in the event of the death of the aged tenant. 71 families were transferred on health recommendation during the year from unsuitable Town Council accommodation.

ADAPTATIONS TO THE HOMES OF DISABLED PERSONS

The Director of Welfare Services has kindly provided the following information on adaptations which have been made during 1966 to the homes of disabled persons to enable them to overcome their handicaps.

38 persons were assisted in this way at a total cost of £563.15.0d. The adaptations took the form of the following

Provision of handrails at entrance on inner stairs and over baths	-	28
Ramps and alterations to steps	-	6
Alteration to level of bath	-	3
Alteration to level of W.C.	-	1
		<hr/>
		38

JUNIOR PARALYTIC THERAPY GROUP

In March, 1966 the Scottish Spinal Injuries Association was authorized to start a junior paraplegic therapy group for 2 sessions per week in the Health Department. In the beginning 6 children attended and by the end of the year this number had increased to 11, 5 being under 2 years of age and 6 being between 2 and 5 years. The Association provides a physiotherapist who is responsible for remedial therapy while a play group in an adjoining room is run by members of the Association.

FLUORIDATION OF WATER SUPPLY

During 1966 the Town Council gave final approval to fluoridation of its water supplies and referred to the Water Committee the matter of providing the best means of carrying out the process of fluoridation.

MEDICAL EXAMINATION OF STAFF

A total of 136 persons were examined during 1966 for suitability of appointment under the superannuation schemes and for fitness after illness.

Twenty two police recruits were examined for fitness during the year.

VOLUNTARY BODIES USING CLINIC PREMISES

FAMILY PLANNING CLINIC

It will be seen from the figures of attendance given below that the family planning clinics held in the Health Department and in the Wishaw Centre are very busy, active clinics.

During the year, 44 ordinary family planning clinics were held and in addition 11 oral contraceptive clinics were held in the Health Department. 247 new patients attended during the year of whom 61 attended the special oral contraceptive clinic. In addition to these first visits 367 check visits and 426 supply visits were made.

These clinics, staffed by a Medical Officer, 8 Health Visitors and 6 voluntary workers, are conducted under the auspices of the Motherwell, Wishaw and District Women's Advisory Service.

MARRIAGE GUIDANCE COUNCIL

The Motherwell, Wishaw and District Marriage Guidance Council has provided a counselling service in the Motherwell Health Department for 4 years. During 1966 5 counsellors held afternoon and evening counselling sessions at which 41 new cases were dealt with and 124 interviews were conducted.

In addition 2 counsellors have qualified as Education Counsellors and have held 19 discussion groups with various organisations, Youth Fellowships, Parents Groups etc., in addition to two engaged couples courses.

Eleven publicity addresses to various organisations have been given by members of the Council during the year.

JUNIOR PARAPLEGIC THERAPY GROUP

In March, 1966 the Scottish Spina Bifida Association was authorised to start a junior paraplegic therapy group for 2 sessions per week in the Health Department. In the beginning 6 children attended and by the end of the year this number had increased to 11, 5 being under 2 years of age and 6 being between 2 and 5 years. The Association provides a physiotherapist who is responsible for remedial therapy while a play group in an adjoining room is run by members of the Association, mainly mothers of disabled children.

This therapy group serves a very useful purpose in training these pre-school children prior to their attaining school age. Owing to modern surgical treatment the prospect of improvement in their disability is much greater than hitherto and great advantage is to be had in the therapy and play being provided as near to their homes as possible.

DENTAL SERVICES REPORT
BY CHIEF DENTAL OFFICER

There was a complete change of staff in the Dental Department commencing in January, 1966. With the exception of one month the service was fully staffed and operational. There has been no serious illness in the staff and two members have had complete attendance at work.

The arrangements for treatment remain the same as before, with part of Wednesday morning and Thursday afternoon devoted to operations under general anaesthesia.

Inspection clinics have been started in the new housing areas at Forgewood and Coltness and this has proved an asset both to the Dental Service as a source of patients and to the population as a whole. Dental advice is now available without going to a central clinic.

All priority classes of patients are dealt with at all sessions, the main source of patients being the Ante-natal, Post-natal and Child Welfare clinics.

It was felt in the Department that there was more need for dental health education and so one Mothercraft session a month at Motherwell and one at Wishaw is now devoted to a talk and film show on dental care. Interest in this is gradually growing.

My first year in office has proved most fruitful and I should like to record in my report my appreciation for the help given to me by the Health Committee for allowing attendance at post-graduate courses, to the Medical Officer of Health for kind and patient co-operation, to the Health Visitors for distribution of appointment cards and to the clerical staff of the Health Department for all their work and lastly I should like to thank my own staff in the Dental Department for helping to build the dental service we now have.

ATTENDANCES AND TREATMENT GIVEN

NEW CASES

Ante-natal	-	766
Post-natal	-	150
Pre-school	-	<u>321</u>
Total		<u>1237</u>

ATTENDANCES AT CLINICS - 3557

TEETH EXTRACTED

Mothers	-	689
Children	-	266
		<hr/>
Total	-	955
		<hr/>

GENERAL ANAESTHETICS - 170

TEETH FILLED

Mothers	-	603
Children	-	370
		<hr/>
Total		973
		<hr/>

Other operations including scaling, gum treatment, taking impressions, trying-in and the fitting of dentures and the treatment of children's teeth with silver nitrate.

Mothers	-	1190
Children	-	666
		<hr/>
Total		1856
		<hr/>

PROVISION OF DENTURES

Full	-	99
Partial	-	69
Repairs	-	21
		<hr/>
Total		189
		<hr/>

NEW CASES

SUMMARY OF VITAL STATISTICS FOR THE YEAR 1966

Population (Registrar General's Estimate) to middle of 1966	75,963
Number of live births (Corrected for usual Residence)	1,454
Birth rate per thousand of the population	19.1
Illegitimate birth rate per 100 live births	4.7
Number of deaths (Corrected for Usual Residence)	843
Death rate per 1,000 of the population	11.1
Death rate adjusted for age and sex distribution	12.8
Number of deaths of infants under one year (Corrected for Usual Residence)	22
Infant mortality rate (per thousand live births)	15
Neonatal mortality rate (per thousand live births)	9.6
Total number of still-births (Corrected for usual Residence)	23
Still-birth rate per 1,000 total births	16
Number of deaths from all forms of tuberculosis (Corrected)	6
Death rate from pulmonary tuberculosis	0.08
Number of deaths from pulmonary tuberculosis	6
Death rate from pulmonary tuberculosis (per 1,000 of population)	0.08
Number of deaths from malignant neoplasms (corrected)	161
Death rate from malignant neoplasms (per 1,000 of population)	2.12
Number of deaths from bronchitis and pneumonia (Corrected)	88
Death rate from bronchitis and pneumonia	1.16
Number of deaths from road transport accidents (per 1,000 of population)	13
Death rate from road transport accidents (per 1,000 of population)	0.17
Number of deaths from accidents in the home (Corrected)	12
Death rate from accidents in the home	0.16

Deaths

The following table shows the corrected death rate since 1931:-

<u>Period</u>	<u>Rate</u>
1931 - 35	11.9
1936 - 40	12.3
1941 - 45	12.1
1946 - 50	11.5
1951	11.6)
1952	11.3)
1953	10.4)
1954	11.9)
1955	11.1) 11.2
1956	11.1)
1957	11.1)
1958	10.7)
1959	11.2)
1960	11.5) 11.1
1961	11.1)
1962	11.1)
1963	12.4)
1964	10.8)
1965	10.3) 11.1
1966	11.1)

The various causes of death are indicated in the following table:-

	<u>Under 5</u>	<u>Over 5</u>	<u>Total</u>
Tuberculosis of respiratory system	-	6	6
Other infective and parasitic diseases	1	2	3
Malignant Neoplasms	-	161	161
Diabetes Mellitus	-	9	9
Anaemias	-	4	4
Other general diseases	1	3	4
Vascular lesions affecting central nervous system	-	136	136
Other diseases of nervous system	-	12	12
Chronic rheumatic heart disease	-	13	13
Arteriosclerotic heart disease, including coronary disease	-	202	202
Degenerative heart disease	-	48	48
Other diseases of heart	-	14	14
Hypertensive heart disease	-	13	13
Other hypertensive disease	-	2	2
Other circulatory disease	-	15	15
Pneumonia (except of newborn)	5	40	45
Bronchitis	3	40	43
Other respiratory diseases	-	23	23
Ulcer of stomach and duodenum	-	5	5
Appendicitis	-	1	1
Intestinal obstruction and hernia	1	5	6
Gastritis, duodenitis, enteritis and Colitis (except diarrhoea of newborn)	3	2	5
Cirrhosis of liver	-	3	3
Other diseases of liver	-	3	3
Other digestive diseases	-	2	2
Nephritis and nephrosis	-	3	3
Infections of kidney	-	2	2
Diseases of skin and organs of locomotion	-	2	2
Congenital malformations of nervous system and sense organs	1	1	2
Congenital malformations of circulatory system	1	1	2
Other congenital malformations	-	1	1
Birth injuries, post-natal asphyxia and atelectasis	4	-	4
Infections of the newborn	3	-	3
Other diseases peculiar to early infancy and immaturity unqualified	3	-	3
Senility without mention of psychosis	-	2	2
Ill-defined and unknown cases	-	2	2
c/f.	26	778	807

STILL BIRTHS AND INFANT DEATHS

Perinatal Death Rate

There were 10 deaths during the first week of life. This combined with the 23 still-births gives a total of 33 perinatal deaths and a perinatal death rate of 22 per thousand total births.

Still Births

During the year 1966 there were 23 still births - 4 less than in the previous year. The still-birth rate per thousand total births is 16.

The causes this year were:-

Maternal

Eclampsia	1	
Anoxia	2	
Prematurity	2	
Rhesus Negative	3	
Ante-Partum Haemorrhage	3	11

Hazards of Birth

Cord round neck	2	2
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Foetal Abnormalities

Anencephaly	3	
Congenital Abnormalities	3	6

Ill-defined

Intra-uterine	4	4
---------------	---	---

Total 23

Infant Deaths

During 1966, there were 22 deaths of infants under the age of one year, which is 12 less than in 1965.

The infant mortality rate per thousand live births is 15.

The number of infant deaths occurring within the first twenty-eight days of life was 14 (64%) giving a neo-natal death rate of 9.6 per thousand live births.

The number of infant deaths occurring within the first week of life was 10 giving a death rate of 6.8 per thousand live births.

The following table shows the cause of death and the age at death of the 22 infants who died during the year.

	<u>AGE AT DEATH</u>										
	<u>WEEKS</u>					<u>MONTHS</u>					Total
	0-1	1-2	2-3	3-4	Up to 1 mth.	Over 1 and under 3	3-6	6-9	9-12		
Prematurity	3	-	-	-	3	-	-	-	-	3	
Congenital Malformation	2	-	-	-	2	-	-	-	-	2	
Respiratory Infection	1	1	-	1	3	3	-	3	1	10	
Asphyxia and Atelectasis	1	-	-	-	1	-	-	-	-	1	
Exomphalos	1	-	-	-	1	-	-	-	-	1	
Gastro Enteritis	-	1	-	-	1	-	1	-	-	2	
Intra-Cranial Injury & Haemorrhage	1	-	-	-	1	-	-	-	-	1	
Haemolytic Disease	1	-	-	-	1	-	-	-	-	1	
Viraemia	-	1	-	-	1	-	-	-	-	1	
Total	10	3	-	1	14	3	1	3	1	22	

<u>Period</u>	<u>Rate</u>
1931 - 1935	80
1936 - 1940	76
1941 - 1945	66
1946 - 1950	47.2

The following table indicates the number and rate of still-births, neo-natal deaths and perinatal deaths during the past 10 years.

	Still Births No.	Rate	Deaths in first week	Deaths in 2nd, 3rd & 4th wks.	Neo-natal No.	Deaths Rate	Perinatal No.	Deaths Rate
1957	34	22	29	6	35	23	63	42
1958	27	17	24	2	26	17	51	33
1959	27	18	28	3	31	21	55	37
1960	24	16	30	1	31	20	54	35
1961	26	16	24	6	30	19	50	31
1962	32	20	17	2	19	12	49	31
1963	25	16	25	4	29	19	50	33
1964	31	19	22	2	24	15	53	33
1965	27	17	19	3	22	14	46	29
1966	23	16	10	4	14	10	33	22
Total	253	17	222	28	281	17	503	32

Infant Deaths

During 1966, there were 22 deaths of infants under the age of one year, which is 17 less than in 1965.

The infant mortality rate per thousand live births is 15.

The number of infant deaths occurring within the first twenty-eight days of life was 14 (64%) giving a neo-natal death rate of 9.6 per thousand live births.

The number of infant deaths occurring within the first week of life was 10 giving a death rate of 6.8 per thousand live births.

The following table gives the age period at which deaths occurred from cancer during the year 1966.

<u>Age</u>	<u>No. of Deaths</u>	<u>% of Deaths</u>
1 - 14	-	-
15 - 24	1	0.8
25 - 34	2	1.3
35 - 44	7	4.3
45 - 54	15	9.3
55 - 64	46	28.5
65 - 74	58	36.0
75 - 84	25	15.5
85 and over	7	4.3

Lung Cancer

The following table gives the incidence of lung cancer deaths since 1957.

<u>Year</u>	<u>Deaths in Males</u>	<u>Deaths in Females</u>	<u>Total</u>
1957	18	1	19
1958	16	1	17
1959	25	5	30
1960	27	-	27
1961	34	4	38
1962	48	3	51
1963	32	4	36
1964	27	5	32
1965	30	5	35
1966	26	3	29

Infant and Maternal Mortality

The following table shows infant mortality rates per 1,000 live births since 1931 and the number of infant deaths since 1951:-

<u>Period</u>	<u>Rate</u>
1931 - 1935	85
1936 - 1940	76
1941 - 1945	66
1946 - 1950	47.2

<u>Year</u>	<u>Total Live Births</u>	<u>Infant Deaths</u>	<u>Infant Mortality Rate</u>
1951	1,183	48	41)
1952	1,288	40	31)
1953	1,347	32	24)
1954	1,307	43	33)
1955	1,372	35	26) 31
1956	1,445	40	28)
1957	1,493	56	38)
1958	1,532	43	28)
1959	1,481	48	32)
1960	1,517	47	31) 31.4
1961	1,569	49	31)
1962	1,530	31	20)
1963	1,509	55	36)
1964	1,596	45	28)
1965	1,552	34	22) 27.4
1966	1,454	22	15)

There were 23 still-births during the year 1966 giving a still-birth rate of 16 per 1,000 total births. The still-birth rates since 1952 are as follows:-

1952	32)	1960	16)	
1953	23)	1961	16)	17.8
1954	23)	1962	20)	
1955	16)	1963	16)	
1956	26)	1964	19)	24
1957	22)	1965	17)	
1958	17)	1966	16)	17.6
1959	18)			

The following table shows the maternal death rates per 1,000 live births since 1931 and the number of maternal deaths since 1951:-

<u>Period</u>	<u>Rate</u>
1931 - 1935	7.9
1936 - 1940	3.9
1941 - 1945	2.8
1946 - 1950	1.5

<u>Year</u>	<u>No. of Maternal Deaths</u>	<u>Maternal Mortality Rate</u>
1951	3	2.5)
1952	1	0.8)
1953	-	-)
1954	1	0.76)
1955	1	0.73) 0.96
1956	2	1.38)
1957	1	0.67)
1958	-	-)
1959	3	2.02)
1960	-	-)
1961	-	-)
1962	-	-)
1963	1	0.66)
1964	-	-)
1965	-	-)
1966	-	-) 0.13

Births

During the year live births numbered 1,454 giving a birth rate of 19.1.

The following table shows the birth rate per 1,000 of the population since 1931 and the number of live births since 1951.

<u>Period</u>	<u>Rate</u>
1931 - 1935	20.58
1936 - 1940	19.46
1941 - 1945	19.44
1946 - 1950	21.06

<u>Year</u>	<u>Total Live Births</u>	<u>Birth Rate per 1,000 of population</u>
1951	1,183	17.3)
1952	1,288	18.6)
1953	1,347	19.4)
1954	1,307	18.8)
1955	1,372	19.6) 18.74
1956	1,445	20.4)
1957	1,493	20.9)
1958	1,532	21.2)
1959	1,481	20.4)
1960	1,517	20.7) 20.72
1961	1,569	21.4)
1962	1,530	20.8)
1963	1,509	20.5)
1964	1,596	20.9)
1965	1,552	20.3) 20.78
1966	1,454	19.1)

Marriages

The number of marriages in 1966 was 608 which gave the marriage rate of 8.0 per 1,000 of population.

The following table shows the marriage rate per 1,000 of the population since 1931 and the number of marriages since 1951:-

<u>Period</u>	<u>Rate</u>
1931 - 1935	6.44
1936 - 1940	8.04
1941 - 1945	8.82
1946 - 1950	8.76

<u>Year</u>	<u>No. of Marriages</u>	<u>Marriage Rate per 1,000 of Population</u>
1951	657	9.7)
1952	618	8.9)
1953	595	8.6)
1954	566	8.2)
1955	650	9.3) 8.94
1956	676	9.6)
1957	606	8.5)
1958	622	8.6)
1959	595	8.2)
1960	559	7.6) 8.5
1961	614	8.4)
1962	613	8.3)
1963	613	8.3)
1964	564	7.4)
1965	646	8.5) 8.18
1966	608	8.0)

Tuberculosis

The following table gives the confirmed cases of tuberculosis in 1966 classified according to age group and sex incidence.

	<u>Pulmonary</u>		
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	1	1
5 - 14 years	1	2	3
15 - 24 years	1	4	5
25 - 34 years	1	5	6
35 - 44 years	2	3	5
45 - 54 years	-	2	2
55 - 64 years	2	-	2
65 and over	6	-	6
	<hr/>	<hr/>	<hr/>
	13	17	30

Non Pulmonary

	<u>Non Pulmonary</u>		
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	-	-
5 - 14 years	-	-	-
15 - 24 years	-	2	2
25 - 34 years	-	-	-
35 - 44 years	-	3	3
45 - 54 years	1	-	1
55 - 64 years	-	-	-
65 and over	-	-	-
	<hr/>	<hr/>	<hr/>
	1	5	6

Total Pulmonary and Non Pulmonary

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	1	1
5-14 years	1	2	3
15 - 24 years	1	6	7
25 - 34 years	1	5	6
35 - 44 years	2	6	8
45 - 54 years	1	2	3
55 - 64 years	2	-	2
65 and over	6	-	6
	<hr/>	<hr/>	<hr/>
	14	22	36

The following table shows the tuberculosis incidence rates since 1931 and the number of cases confirmed annually since 1951:-

<u>Period</u>	<u>Pulmonary Rate</u>	<u>Non Pulmonary Rate</u>	<u>Total</u>
1931 - 1935	1.06	0.71	1.77
1936 - 1940	1.06	0.62	1.68
1941 - 1945	1.57	0.54	2.11
1946 - 1950	2.08	0.33	2.41

<u>Year</u>	<u>Pulmonary</u>		<u>Non Pulmonary</u>		<u>Total</u>	
	<u>Cases</u>	<u>Rates</u>	<u>Cases</u>	<u>Rate</u>	<u>Cases</u>	<u>Rate</u>
1951	192	2.82)	17	0.25)	209	3.07)
1952	138	2.02)	23	0.34)	161	2.36)
1953	150	2.17)	15	0.22)	165	2.39)
1954	123	1.78)	22	0.32)	145	2.1)
1955	103	1.47)2.05	15	0.21)0.27	118	1.69)2.32
1956	86	1.2)	7	0.1)	93	1.3)
1957	76	1.06)	9	0.13)	85	1.19)
1958	99	1.4)	12	0.17)	111	1.57)
1959	68	0.94)	6	0.08)	74	1.02)
1960	36	0.49)1.02	7	0.09)0.11	43	0.58)1.13
1961	32	0.44)	9	0.12)	41	0.56)
1962	43	0.59)	5	0.07)	48	0.66)
1963	33	0.44)	13	0.18)	46	0.62)
1964	43	0.56)	9	0.12)	52	0.68)
1965	38	0.49)0.5	13	0.17)0.13	51	0.66)0.63
1966	30	0.39)	6	0.08)	36	0.47)

There were 256 persons resident in the Burgh of Motherwell and Wishaw known to be suffering from Tuberculosis at 31st December, 1966. These are classified according to age and sex as shown in the following table. The Pulmonary cases include persons suffering from pleurisy with effusion.

Pulmonary

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	2	2
5 - 14 years	2	9	11
15 - 24 years	4	22	26
25 - 34 years	10	26	36
35 - 44 years	30	22	52
45 - 54 years	22	14	36
55 - 64 years	33	7	40
65 and over	20	2	22
	<hr/>	<hr/>	<hr/>
	121	104	225

Non Pulmonary

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	-	-
5 - 14 years	1	1	2
15 - 24 years	2	3	5
25 - 34 years	3	3	6
35 - 44 years	3	9	12
45 - 54 years	1	4	5
55 - 64 years	-	-	-
65 and over	-	1	1
	<hr/>	<hr/>	<hr/>
	10	21	31

Total Pulmonary and Non Pulmonary

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 5 years	-	2	2
5 - 14 years	3	10	13
15 - 24 years	6	25	31
25 - 34 years	13	29	42
35 - 44 years	33	31	64
45 - 54 years	23	18	41
55 - 64 years	33	7	40
65 and over	20	3	23
	<hr/>	<hr/>	<hr/>
	131	125	256

Deaths from Tuberculosis

There were 6 deaths from Respiratory Tuberculosis during the year.

Age at Death

Under 5 years	-
5 - 14 years	-
15 - 24 years	-
25 - 34 years	-
35 - 44 years	1
45 - 64 years	2
65 and over	3
	-
	6
	-

The following table shows the death rates per 1,000 of the population from tuberculosis since 1931 and the number of deaths since 1951:-

<u>Period</u>	<u>Pulmonary Rate</u>	<u>Non Pulmonary Rate</u>	<u>Total</u>
1931 - 1935	0.50	0.20	0.70
1936 - 1940	0.59	0.23	0.82
1941 - 1945	0.65	0.23	0.88
1946 - 1950	0.78	0.15	0.93

<u>Year</u>	<u>Pulmonary</u>		<u>Non Pulmonary</u>		<u>All Tuberculosis</u>	
	<u>Deaths</u>	<u>Rate</u>	<u>Deaths</u>	<u>Rate</u>	<u>Deaths</u>	<u>Rate</u>
1951	34	0.50	6	0.09	40	0.59
1952	19	0.28	2	0.02	21	0.30
1953	18	0.26	5	0.07	23	0.33
1954	13	0.19	3	0.04	16	0.23
1955	10	0.14	2	0.03	12	0.17
1956	16	0.23	1	0.01	17	0.24
1957	11	0.15	-	-	11	0.15
1958	10	0.14	3	0.04	13	0.18
1959	6	0.08	3	0.04	9	0.12
1960	5	0.07	1	0.01	6	0.08
1961	10	0.14	1	0.01	11	0.15
1962	4	0.05	-	-	4	0.05
1963	3	0.04	1	0.01	4	0.05
1964	4	0.05	1	0.02	5	0.07
1965	2	0.03	1	0.01	3	0.04
1966	6	0.08	-	-	6	0.08

Hospital Accommodation

Respiratory Tuberculosis

The following table indicates the number of patients who received institutional treatment during the year:-

	<u>In Hospital on January 1st</u>	<u>Admitted during year</u>	<u>Discharged during year</u>	<u>Died in Hospital</u>	<u>In Hospital on 31st December</u>
Under 15 years					
Male	-	-	-	-	-
Female	-	1	1	-	-
15 - 45 years					
Male	2	5	6	-	1
Female	3	12	14	1	-
45 years and over					
Male	7	7	4	4	6
Female	1	3	2	1	1
	13	28	27	6	8

Non Respiratory Tuberculosis

	<u>In Hospital on January 1st</u>	<u>Admitted during year</u>	<u>Discharged during year</u>	<u>Died in Hospital</u>	<u>In Hospital on 31st December</u>
Under 15 years					
Male	-	-	-	-	-
Female	-	-	-	-	-
15 - 45 years					
Male	-	-	-	-	-
Female	1	4	4	-	1
45 years and over					
Male	-	-	-	-	-
Female	-	2	1	-	1
	1	6	5	-	2

Factories Act, 1937 to 1959

<u>Premises</u>	<u>Number on Register</u>	<u>Inspections</u>	<u>Number of</u>	
			<u>Written Notices</u>	<u>Occupiers Prosecuted</u>
(1) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	25	-	-	-
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority	245	119	-	-
(3) Other Premises in which Section 7 is enforced by the Local Authority (including out-workers' premises)	13	5	-	-
	<u>283</u>	<u>124</u>	<u>-</u>	<u>-</u>

The following table gives particulars of the defects which were found:-

<u>Particulars</u>	<u>Found</u>	<u>Remedied</u>	<u>Referred to H.M. Inspector</u>	<u>By H.M. Inspector</u>	<u>Number of cases in which Prosecutions were instituted</u>
Want of Cleanliness (S.1.)	-	-	-	-	-
Overcrowding (S.2.)	-	-	-	-	-
Unreasonable temperature (S.3)	1	1	-	1	-
	<u>1</u>	<u>1</u>	<u>-</u>	<u>1</u>	<u>-</u>

