

**[Report 1928 / Medical Officer of Health, Fife County Council.**

**Contributors**

Fife (Scotland). County Council.

**Publication/Creation**

1928

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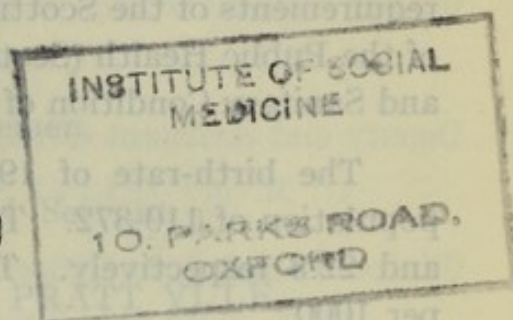
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COUNTY COUNCIL OF FIFE.



# ANNUAL REPORT

ON THE  
HEALTH AND SANITARY CONDITION  
OF THE COUNTY AND DISTRICTS  
DURING

1928

BY

G. PRATT YULE

M.D., F.R.C.P., B.Sc. (Pub. Health), Edin.

MEDICAL OFFICER OF HEALTH.

CUPAR-FIFE:

(A 18883)

PRINTED BY J. & G. INNES, LTD.

1929.



## To the County Council and District Committees of the County of Fife.

MY LORD AND GENTLEMEN,

I have the honour to present in accordance with the requirements of the Scottish Board of Health in terms of Section 15 of the Public Health (Scotland) Act, 1897, the Report on the Health and Sanitary Condition of the County for the year 1928.

The birth-rate of 1928 was 19.2 per 1,000 of an estimated population of 110,372. The birth-rates of 1927 and 1926 were 19.2 and 22.3 respectively. The Scottish birth-rate of 1928 was 19.8 per 1000.

The death-rate of the County in 1928 was 11.2 per 1,000 as compared with 11.8 in 1927 and 10.7 in 1926. The Scottish death-rate of 1928 was 13.3.

The infantile mortality of the County in 1928 was 81.9: that of 1927 was 86.5. The lowest infantile mortality rate, viz. 72, was recorded in 1926. The infantile mortality rate for Scotland in 1928 was 86, that of the County Districts of Scotland was 72.

The mortality-rates of 1928 are a distinct improvement on those of 1927 but lag behind the more satisfactory figures of 1926 when the lowest number of deaths of infants and at all ages was recorded.

The trend of the tuberculosis mortality is still downwards although apparently at a diminishing rate. The County death-rate from tuberculosis compares favourably with the rates of counties of approximately like mining-industrial conditions.

Each District Committee has now in operation dairy-byelaws framed under the Milk and Dairies Act, 1914. The conditions attending the production of milk are as various as the personalities of the dairymen concerned. The Byelaws of the four Districts are consonant in their provisions and the standard aimed at is the same for each District. In numerous dairies, the methods are very good. The sinners will be brought to repentance only by steady supervision.

An indication of the desire for and progress towards better and more sanitary conditions is observable in the number of " Special Districts " formed during recent years.

I have pleasure in recording the appointment in April, 1928, of Dr Campbell to the County Medical Officership of East Lothian. I have to thank him for much valuable service during his years of office as Assistant Medical Officer.

I have the honour to be,

My Lord and Gentlemen,

Your obedient Servant,

G. PRATT YULE,  
County Medical Officer.

May, 1929.

Public Health Department,  
County Buildings,  
Cupar-Fife.



## STAFF.

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# COUNTY OF FIFE.

## Report by the County Medical Officer of Health for the Year 1928.

### POPULATION.

The population of the Landward Area of the County, estimated by the Registrar-General to the middle of 1928, was 110,372 being a decrease of 317 from the estimated population of 1927, but an increase of 314 on the corrected Census figure of 110,058 recorded in 1921. The estimated District populations are as follows:—

Cupar District	...	14,742
Dunfermline District	...	36,514
Kirkcaldy District	...	44,607
St Andrews District	...	14,509

### BIRTHS.

During 1928 there were registered within the County Landward Area 2,124 births, of which 1,980 were legitimate and 144 were illegitimate.

AREA	Births (Total)		Illegitimate Births	
	Number	Rate per 1000	Number	Percentage of Total Births
Cupar District - - -	217	14.71	18	8.29
Dunfermline District - - -	671	18.37	41	6.11
Kirkcaldy District - - -	1010	22.64	63	6.23
St Andrews District - - -	226	15.57	22	9.73
County Landward - - -	2124	19.24	144	6.77



The birth-rate of the Landward County in 1928 was 19.24 per 1,000: the Scottish birth-rate was 19.8 per 1,000, the same as in 1927, when the births registered in Scotland were the least in number of any year with the exception of 1855, the first year of compulsory registration when doubtless it was incomplete. The births registered in the County in 1928 were 3 less than those of 1927 and were the lowest number of which I have record. With the exception of Dunfermline District in which the births registered in 1928 showed an increase of 33 over the number registered in 1927, the births in each of the other Districts were less than those of 1927.

The following table shows the number of births registered in each of the four Districts and the County during the last sixteen years:—

Year	Cupar District	Dunf'line District	Kirk'ldy District	St And. District	Fife County
1913	281	961	1359	282	2883
1914	285	983	1473	256	3003
1915	253	877	1229	266	2625
1916	259	842	1098	221	2420
1917	248	776	1008	223	2255
1918	229	873	1086	213	2401
1919	238	854	1151	215	2458
1920	306	1049	1473	310	3138
1921	282	1032	1359	289	2962
1922	255	825	1177	263	2520
1923	232	780	1242	262	2516
1924	249	831	1249	279	2608
1925	223	763	1164	252	2402
1926	268	779	1192	235	2474
1927	235	638	1019	235	2127
1928	217	671	1010	226	2124

### MARRIAGES.

The marriages in the Landward Area of the County numbered 512 (Cupar District, 71; Dunfermline District, 161; Kirkcaldy District, 203; St Andrews District, 77). There were 532 marriages in 1927, 515 in 1926, 563 in 1925, and 599 in 1924. In 1928 the number of marriages in Kirkcaldy District was three more than in 1927: there was a decrease in each of the other Districts (8 in Cupar District, 10 in Dunfermline District, and 5 in St Andrews District).



The marriage-rate is generally accepted as an indirect index of the economic prosperity of a community and the inference may be drawn that the County has not yet turned the corner in so far as its chief industries are concerned.

### GENERAL MORTALITY.

The number of deaths corrected for transfers allocated to Fife County in 1928 was 1247 as compared with 1,309 in 1927, a decrease of 62.

The County Landward death-rate corrected for transfers was 11.29 per 1,000 of a population estimated to the middle of the year as 110,372.

The number of deaths and relative rates corrected for transfers and also corrected for transfers and adjusted for age and sex distribution for each of the four Districts are set forth below :—

AREA	Number	Rate per 1000 corrected for Transfers	Rate per 1000 corrected for Transfers and adjusted for age and sex distribution
Cupar District - -	216	14.7	11.2
Dunfermline District -	361	9.9	10.8
Kirkcaldy District -	497	11.1	12.3
St Andrews District -	173	11.9	10.2
Fife County - -	1247	11.2	—

The Scottish death-rate of 1928 was 13.3 per 1,000 : the death-rate of the extraburghal or landward districts of Scotland was 12.2 per 1,000.

The quarterly death-rates for each of the four Districts and the County Landward Area are given in tabular form below :—

AREA	Quarter ending 31st March, 1928	Quarter ending 30th June, 1928	Quarter ending 30th Sept., 1928	Quarter ending 31st Dec., 1928
Cupar District - -	18.3	13.6	13.8	12.9
Dunfermline District	11.6	9.1	8.8	10.0
Kirkcaldy District -	14.8	10.5	10.4	8.8
St Andrews District -	15.8	12.2	7.9	11.8
Fife County - -	14.2	10.6	10.1	10.2



## CAUSES OF DEATH. FIFE COUNTY, 1928.

CAUSE OF DEATH	All Ages			1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85 up-wards
	Both Sexes	Males	Females											
Measles	17	11	6	13	1	...	...	...	...	...	...	...	...	...
Scarlet Fever	5	2	3	2	...	...	...	...	...	...	...	...	...	...
Whooping Cough	18	5	13	5	2	...	...	...	...	...	...	...	...	...
Diphtheria	15	7	8	5	8	...	...	...	...	...	...	...	...	...
Influenza	20	11	9	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	1	1	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Meningitis	2	1	1	2	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases	5	5	...	1	...	...	...	...	...	...	...	...	...	...
Respiratory Tuberculosis	36	24	12	...	...	...	...	...	...	...	...	...	...	...
Meningeal Tuberculosis	16	10	6	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	10	5	5	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	7	2	5	...	...	...	...	...	...	...	...	...	...	...
Malignant Tumours	113	55	58	...	...	...	...	...	...	...	...	...	...	...
Rheumatic Fever	3	3	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (not Cerebro-Spinal or Tuberculous)	10	5	5	...	...	...	...	...	...	...	...	...	...	...
Apoplexy	128	64	64	...	...	...	...	...	...	...	...	...	...	...
Heart Disease	159	81	78	...	...	...	...	...	...	...	...	...	...	...
Diseases of Arteries	22	12	10	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	64	40	24	...	...	...	...	...	...	...	...	...	...	...
Pneumonia (all forms)	69	39	30	...	...	...	...	...	...	...	...	...	...	...
Other Respiratory Diseases	16	6	10	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea and Enteritis (under 2 years)	19	12	7	...	...	...	...	...	...	...	...	...	...	...
Appendicitis	5	1	4	...	...	...	...	...	...	...	...	...	...	...
All Diseases of Liver (Non-Malignant)	11	6	5	...	...	...	...	...	...	...	...	...	...	...
Nephritis (all forms)	39	19	20	...	...	...	...	...	...	...	...	...	...	...
Puerperal Sepsis	4	...	4	...	...	...	...	...	...	...	...	...	...	...
Other Diseases & Accidents of Pregnancy, &c.	9	...	9	...	...	...	...	...	...	...	...	...	...	...
Diseases of Early Infancy and Malformations	89	59	30	...	...	...	...	...	...	...	...	...	...	...
Suicide	10	10	...	...	...	...	...	...	...	...	...	...	...	...
Other Violent Deaths	63	48	15	...	...	...	...	...	...	...	...	...	...	...
Other Defined Diseases	241	107	134	...	...	...	...	...	...	...	...	...	...	...
Causes, Ill-Defined or Unknown	21	13	8	...	...	...	...	...	...	...	...	...	...	...
Total	1247	664	583	174	32	15	56	61	54	99	158	247	205	66
Percentage	100.00	53.25	46.75	19.05	3.50	1.31	4.46	4.96	4.34	7.96	12.67	19.86	16.43	5.29



### INFANTILE MORTALITY.

The following table sets forth the more common causes of death among infants under one year of age.

#### Deaths of Infants under One Year—Fife County, 1928.

DISEASE	Cupar, District	Dunfermline District	Kirkcaldy District	St Andrews District	Fife County	Per Cent.
Measles - - -	...	...	3	...	3	1.79
Whooping Cough - -	...	4	7	...	11	6.58
Tuberculous Meningitis -	1	2	2	...	5	2.99
Meningitis (not Cer. Spin. or Tuber.) - - -	1	3	1	...	5	2.99
Bronchitis - - -	1	3	5	...	9	5.39
Pneumonia (all forms) -	...	3	11	...	14	8.39
Diarrhoea and Enteritis -	2	3	14	...	19	11.38
Diseases of Early Infancy and Malformations -	13	30	39	7	89	53.30
Other Defined Diseases -	1	3	8	...	12	7.19
Total - - -	19	51	90	7	167	100.00

The deaths of children under one year of age numbered 167 during 1928, equivalent to an infantile mortality rate of 81.92 per 1,000 births registered during the year.

In 1927, there were 184 deaths of infants (*i.e.*, children under one year of age) equivalent to an infantile mortality rate of 86.51 per 1,000 registered births.

The more common causes of infant deaths in 1928 were Pneumonia 14 (8.39 per cent. of the total infantile mortality), Diarrhoea and Enteritis 19 (11.38 per cent.) and Diseases of Early Infancy and Malformations 89 (53.30 per cent.).

The Scottish infantile mortality rate of 1928 was 86: that of the County Districts was 71.

Of the four County Districts, St Andrews had during 1928, the lowest infantile mortality, viz. 31; Dunfermline District had an infantile mortality rate of 80, Cupar 88, and Kirkcaldy 93. The lowest infantile mortality of the County was recorded in 1926, viz., 72. During 1927 and 1928, the rate has been higher, viz., 86 and 81 respectively, figures which I regard as unsatisfactory. The explanation of the higher infantile mortality is likely to be found in the strain, stress and hardship undergone by households and



especially expectant and nursing mothers as the result and aftermath of the mining-trade crisis of 1926.

The following table sets forth the infantile mortality rates for the four Districts and Fife County for the last sixteen years:—

Year	Cupar District	Dunfermline District	Kirkcaldy District	St Andrews District	Fife County
1913	60	81	98	89	87
1914	49	113	108	74	101
1915	71	111	128	105	114
1916	54	76	100	63	81
1917	60	99	102	63	94
1918	83	103	98	85	97
1919	67	90	91	65	86
1920	78	84	89	32	81
1921	74	88	85	48	82
1922	85	101	104	77	99
1923	77	80	77	64	78
1924	72	101	83	47	84
1925	63	84	80	52	76
1926	71	60	84	47	72
1927	64	99	81	98	86
1928	88	80	93	31	81

### PRINCIPAL EPIDEMIC DISEASES.

These include enteric (or typhoid fever), measles, scarlet fever, whooping cough, diphtheria and diarrhoea and enteritis (under two years) and the number of deaths caused by them during 1928 is shown in the following table:—

Principal Epidemic Diseases, Deaths and Rates, 1928.

DISEASE	Cupar Dist.	Dunfermline Dist.	Kirkcaldy Dist.	St Andrews Dist.	Fife County	
					Number	Rate per 1000
Typhoid Fever	...	...	...	...	...	...
Measles	...	9	7	1	17	0.15
Scarlet Fever	...	1	3	1	5	0.04
Whooping Cough	1	6	11	...	18	0.16
Diphtheria	1	3	8	3	15	0.13
Diarrhoea and Enteritis (under 2 years)	2	3	14	...	19	0.17
Total	4	22	43	5	74	0.67
Rate per 1000	0.27	0.60	0.96	0.34	0.67	...



In 1928 there were 17 deaths from measles and 18 deaths from whooping cough as compared with 9 and 13 respectively in 1927. The deaths from scarlet fever number 5, seven less than in 1927 while those from diphtheria were 15—an increase of two on the previous year. The deaths from diarrhoea and enteritis (under 2 years) numbered 19 as compared with 9 in 1927.

No death from typhoid fever occurred during 1928: one death from this disease was recorded in 1927. Deaths from typhoid fever are now comparatively rare. During the ten years 1919-28, the number of deaths from typhoid fever has been 10. The disease was formerly common in Fife and the diminished incidence of the infection and lessened death toll are the result of improved water supplies and of the abolition of the privy-midden and pail-closet. Formerly sewage matter and household refuse were conserved and stored in immediate proximity to the home. The speedy removal and cleansing of latter day methods by abolishing the source of infection have prevented the disease.

### DEATHS FROM TUBERCULOSIS.

The number and age distribution of deaths from pulmonary and non-pulmonary tuberculosis during 1928 are set forth in tabular form.

Period.	Pulmonary.	Non-Pulmonary.	Total.	Rate per 10,000 Estimated Population.
1914-18	78.4	50.8	129.2	1.18
1919-23	51.4	33.4	84.8	0.75
1924-28	48.8	32.6	81.4	0.70

These figures and the prospect inferred from their trend give cause for satisfaction. Various factors in all probability are responsible for the lessening of the grip of tuberculosis on the community. These are doubtless the result of a very important and successful campaign that is being waged against the disease since the Fife Scheme was first introduced as a means for the control of tuberculosis. Further measures have been established for the purpose of the pathogen, and the control and supervised in any case. The mortality rate from tuberculosis in the County compares favourably with those of other Scottish counties of like industrial character.



County and District Deaths from Tuberculosis, 1928.

AREA	Under 5 Years	5-15	15-25	25-45	45 upwards	All Ages	
						Number	Rate per 1000
Pulmonary Tuberculosis	-	-	-	-	-	-	-
	Cupar District	1	3	1	2	7	0.47
	Dunfermline District	-	-	7	3	10	0.27
	Kirkcaldy District	1	5	5	4	15	0.33
	St Andrews District	-	-	4	-	4	0.27
Fife County	-	2	8	17	9	36	0.32
Other Tuberc. Diseases	-	-	-	-	-	-	-
	Cupar District	1	-	-	1	2	0.13
	Dunfermline District	4	1	3	3	12	0.32
	Kirkcaldy District	7	3	3	1	16	0.35
	St Andrews District	2	-	-	-	3	0.20
Fife County	14	4	4	6	5	33	0.29
Total Tuberculosis—	-	-	-	-	-	-	-
Fife County	14	6	12	23	14	69	0.62
Per cent.	20.29	8.69	17.39	33.34	20.29	100.00	—



There were 69 deaths registered as caused by tuberculosis in 1928 as compared with 66 in 1927, 71 in 1926, 96 in 1925, and 90 in 1924.

Pulmonary tuberculosis caused 36 deaths in 1928 as compared with 43 in 1927, 42 in 1926, 64 in 1925, and 59 in 1924.

The deaths attributed to non-pulmonary tuberculosis in 1928 numbered 33 as against 23 in 1927, 29 in 1926, 32 in 1925, and 31 in 1924.

Reference has been made in former Annual Reports to the steady decline in the numbers of deaths from tuberculosis. The deaths from pulmonary tuberculosis in 1928 were seven less than in 1927 but deaths from non-pulmonary tuberculosis were ten more. The total tuberculosis deaths for 1928 are therefore three more than in 1927. Pulmonary tuberculosis was made compulsorily notifiable in 1912, non-pulmonary tuberculosis in 1914. As illustrative of the decrease in the numbers of deaths since both forms of the disease became notifiable the following figures are of interest :—

Period.	Pulmonary.	Non-Pulmonary.	Total.	Rate per 1000 Estimated Population.
1914	74	67	141	1.3
1928	36	33	69	0.62

The mortality rate from tuberculosis in 1928 is less than half the rate prevailing in 1914. The following are the averages of tuberculosis deaths for the three five-yearly periods since and inclusive of 1914 :—

Period.	Pulmonary.	Non-Pulmonary.	Total.	Rate per 1000 Estimated Population.
1914-18	78.4	50.8	129.2	1.18
1919-23	51.4	33.4	84.8	0.75
1924-28	48.8	29.6	51.4	0.70

These figures and the prospect inferred from their trend give cause for satisfaction. Various factors in all probability are responsible for the lessening of the grip of tuberculosis on the community. Of these doubtless the most important is the steady campaign that has been waged against the disease since 1912. The Fife Scheme differs from that usually accepted as necessary for the control of the disease. Hitherto, dispensaries have not been established in this County, the patient being visited, examined and supervised in his home. In any case, the mortality rates from tuberculosis of the County compare favourably with those of other Scottish Counties of like industrial characteristics.



**DEATHS FROM CANCER, 1928.**

District	Number	Rate per 1000
Cupar - - - - -	20	1.35
Dunfermline - - - - -	30	0.82
Kirkcaldy - - - - -	37	0.82
St Andrews - - - - -	26	1.79
Fife County - - - - -	113	1.02

The deaths attributed to cancer again show a decrease, being ten below the corresponding figure for 1927. Each of the three Districts, Cupar, Dunfermline and Kirkcaldy show a decrease of 10, 3, and 5 respectively, while St Andrews District shows an increase of 8 over the figures for 1927. During 1927 and 1928 there has been a stay in the annual steady increment in deaths from this cause noted in former Reports.

**DEATHS FROM VIOLENCE.**

There were 73 deaths from violence including suicide in 1928 as compared with 70 in 1927. There were 10 deaths from suicide. Compared with pre-war years, there has been a diminution in deaths from violence excluding suicide. The decrease however may be in measure a reflex of lessened employment.

**Deaths from Violence (including Suicide), 1928.**

District	Number	Rate per 1000
Cupar - - - - -	8	0.54
Dunfermline - - - - -	27	0.73
Kirkcaldy - - - - -	27	0.60
St Andrews - - - - -	11	0.74
Fife County - - - - -	73	0.66



## DEATHS FROM RESPIRATORY DISEASES.

There were 149 deaths from diseases of the respiratory system in 1928, equivalent to a death-rate of 1.35 per 1,000 of the estimated population of the County to the middle of the year. In 1927 the deaths numbered 213 and the death-rate was 1.92 per 1,000.

Pneumonia caused 69 deaths, bronchitis 64, and other diseases of the respiratory system 16. Of the total deaths from these causes 46 or 30.87 per cent. occurred at ages under 5 years and 86 or 57.72 per cent. at ages beyond 45 years.

Deaths from respiratory diseases in 1928 amounted to 11.94 per cent. of the mortality from all causes. The proportion in 1927 was 16.3 per cent.

The numbers of deaths from diseases of the respiratory system are slowly diminishing. Lessened crowding of the home by new and improved housing furnishing more apartments and better air space will hasten the process by diminishing the chance of contracting these diseases which are in nature and origin essentially infectious.

The attached table illustrates that diseases of the respiratory system exact their toll at the extremes of life, in the very young and at ages beyond middle life.

DISEASE		1928	1927	1926	1925	1924
Whooping Cough		12	13	23	2	7
Measles		1	2	2	2	1
Scarlet Fever		1	1	1	1	1
Pneumonia		69	87	103	9	2
Non-Pneumonia		10	18	15	11	9
Infantile Parotiditis		1	1	1	1	1
Acute Primary Pneumonia		1	1	1	1	1
Infantile Pneumonia		1	1	1	1	1
Chronic Bronchitis		1	1	1	1	1
Emphysema		1	1	1	1	1
Other		1	1	1	1	1
<b>Total</b>		<b>149</b>	<b>213</b>	<b>248</b>	<b>183</b>	<b>138</b>

Excluding chickenpox which has been retained as notifiable, the number of notifications received in 1928 was 1,154, as compared with 1,272 in 1927, 1,265 in 1926, 1,011 in 1925 and 1,115 in 1924.



## Deaths from Respiratory Diseases, 1928.

AREA	Under 5 Years	5-15	15-25	25-45	45 upwards	All Ages	
						Number	Rate per 1000
Pneumonia (all forms)	-	1	-	-	6	7	0.47
	-	1	1	1	8	20	0.54
	24	3	1	2	8	38	0.85
	-	-	-	-	4	4	0.27
	33	5	2	3	26	69	0.62
Fife County	47.83	7.24	2.90	4.35	37.68	100.00	-
Percentage							
Bronchitis	1	-	-	-	9	10	0.67
	4	-	-	1	16	21	0.57
	8	1	-	1	19	29	0.65
	-	-	-	-	4	4	0.27
	13	1	-	2	48	64	0.59
Fife County	20.32	1.56	-	3.12	75.00	100.00	-
Percentage							
Other Respira- tory Diseases	-	1	-	3	12	16	0.14
	-	6.25	-	18.75	75.00	100.00	-
Percentage							
Total Respira- tory Diseases	46	7	2	8	86	149	1.35
	30.87	4.70	1.34	5.37	57.72	100.00	-
Percentage							



### SLEEPY SICKNESS.

One death was attributed to this disease, encephalitis lethargica, in Kirkcaldy District in 1928.

So far as I have observed or learned, no person in the County contracted encephalitis lethargica during 1928. Three patients (male 1, female 2) in Dunfermline District were notified in the late stage (post-acute) of the disease. Kirkcaldy District Committee have treated several patients at Stobhill Hospital, Glasgow, without obvious improvement or permanent change for the better in the symptoms.

### NOTIFICATION OF INFECTIOUS DISEASES.

The number of compulsorily notifiable infectious diseases recorded during 1928 was 1633 being 49 less than the corresponding figure for 1927.

INFECTIOUS DISEASE	Cupar District	Dunfermline District	Kirkcaldy District	St Andrews District	Fife County
Scarlet Fever - - -	67	96	229	56	448
Diphtheria - - -	7	67	103	26	203
Typhoid Fever - - -	—	5	—	—	5
Erysipelas - - -	11	29	29	3	72
Puerperal Fever - - -	2	—	8	1	11
Pulmonary Tuberculosis - -	11	22	27	8	68
Non-Pulmonary Tuberculosis -	10	24	48	11	93
Ophthalmia Neonatorum - -	1	30	13	1	45
Acute Primary Pneumonia - -	7	70	91	11	179
Influenzal Pneumonia - - -	6	10	6	—	22
Infantile Paralysis - - -	1	1	—	2	4
Infective Jaundice - - -	—	—	1	—	1
Chickenpox - - -	35	194	186	64	479
Encephalitis-Lethargica - -	—	3	—	—	3
Total - - -	158	551	741	183	1633

Excluding chickenpox which has been retained as notifiable, the number of notifications received in 1928 was 1,154, as compared with 1,272 in 1927, 1,265 in 1926, 1,011 in 1925 and 1,115 in 1924.



In 1928, compared with 1927, there was lessened sickness from scarlet fever and diphtheria, the former showing a decrease of 49 and the latter of 65 cases. This was due to the marked decline in both diseases in Kirkcaldy District where there were 73 fewer cases of scarlet fever and 81 less of diphtheria.

The incidence of pneumonia, 201 notifications, was less than in 1927 when 228 cases were notified.

During 1928 there were 4 cases of infantile paralysis, 1 of infective jaundice and 3 of encephalitis lethargica notified.

The number of persons notified as suffering from chickenpox during 1928 was 479 (Cupar District 35, Dunfermline District 194, Kirkcaldy District 186, and St Andrews District 64).

### HOSPITAL TREATMENT OF INFECTIOUS DISEASES.

The number of persons notified as suffering from certain infectious diseases and the number removed to hospital in each of the four County Districts is shown in tabular form annexed.

The number of patients notified as suffering from scarlet fever, diphtheria, typhoid fever, erysipelas and pulmonary tuberculosis throughout the County Landward Area was 796 of whom 669 were removed for hospital treatment. The figures for 1927 were 902 patients and 772 removals to hospital.

The proportion of notified cases removed to hospital was highest in St Andrews District (89 per cent.), and least in Dunfermline District (76 per cent.). The incidence rate of the diseases noted was highest in Kirkcaldy District (8.69 per 1,000) and least in Dunfermline District (5.99 per 1,000).

There were 73 fewer cases of scarlet fever and 81 fewer of diphtheria in Kirkcaldy District; 10 more cases of scarlet fever and 17 more diphtheria in St Andrews District than last year. Cupar District had 19 more cases of scarlet fever and 8 fewer diphtheria; in Dunfermline District, scarlet cases were 5 less and diphtheria 8 more than in 1927.

Excluding chickenpox which has been retained as notifiable, the number of notifications received in 1928 was 1,154, as compared with 1,272 in 1927, 1,265 in 1926, 1,011 in 1925 and 1,115 in 1924.



## Hospital Treatment of Certain Infectious Diseases, 1928.

DISEASE	Cupar District		Dunfermline District		Kirkcaldy District		St Andrews District		Fife County	
	Cases Notified	Cases removed to Hosp'l	Cases Notified	Cases removed to Hosp'l	Cases Notified	Cases removed to Hosp'l	Cases Notified	Cases removed to Hosp'l	Cases Notified	Cases removed to Hosp'l
Scarlet Fever	-	67	96	91	229	226	56	55	448	437
Diphtheria	-	7	67	62	103	102	26	25	203	195
Typhoid Fever	-	-	5	5	-	-	-	-	5	5
Erysipelas	-	11	29	1	29	2	3	-	72	3
Pulmonary Tuberculosis	-	11	22	9	27	11	8	3	68	29
Total	-	96	219	168	388	341	93	83	796	669
Percentage removed to Hospital	-	80.20	76.71		87.88		89.24		84.04	
Average Incidence Rate per 1000 of Population	-	6.51	5.99		8.69		6.40		7.21	



## TUBERCULOSIS CONTROL.

The County Council in the capacity of County Tuberculosis Authority is responsible for the administration of its scheme of control throughout the landward area of the County and twenty-six burghs therein, that is, throughout the area of the civil County excluding the Burghs of Dunfermline and Kirkcaldy. The population of the districts of the thirty public health local authorities included within the County Tuberculosis Area was 213,435 at the Census of 1921. The County Health Department is in addition responsible for the executive duties of the tuberculosis scheme obtaining in the civil County of Kinross, of which the population at the Census of 1921 was 7,963.

During 1928, the number of persons notified as suffering from tuberculosis within the landward area of Fife was 161 (pulmonary 68, non-pulmonary 93) and within the twenty-six burghs 115 (pulmonary 54, non-pulmonary 61), the total for the County Tuberculosis Area being 276 (pulmonary 122, non-pulmonary 154).

The following statement shows for recent years the numbers of notifications of pulmonary and non-pulmonary tuberculosis for the landward area and the burghal districts within the County Tuberculosis Scheme.

Year	LANDWARD			BURGHAL		
	Pul. Tb.	Non-pl. Tb.	Total	Pul. Tb.	Non-pl. Tb.	Total
1925	129	120	249	92	73	165
1926	96	114	210	84	52	136
1927	61	86	147	82	59	141
1928	68	93	161	54	61	115

The notifications of tuberculosis in the landward area, that is, within the areas of the District Committees, in 1928 were 14 more (pulmonary 7, non-pulmonary 7) than in 1927: in burghal areas the notifications of 1928 were 26 less than those of the previous year (pulmonary 28 less, non-pulmonary 2 more).

It will be noted that there is a stay in the fall noted in former reports of the notifications of tuberculosis, those of the landward area being 14 more than in 1927. On the other hand the notifications from burghal districts numbered 26 less than in 1927, a net decrease of 12 for the County Tuberculosis Area as a whole.



The check in the hitherto steady annual fall in the number of notifications cannot be recorded with satisfaction. Taken in conjunction with the figures of deaths for 1928, it seems to point to a future lessened gain in the prevention of the disease. One hopes nevertheless that the stay in the downward trend in the numbers contracting and dying from the disease is purely temporary.

The number of patients on the Tuberculosis Register and under supervision by the County Health Department at 31st December, 1928, was 909 (pulmonary 480, non-pulmonary 429). There are in addition a number of patients under observation who have not been entered in the Register, having been brought to notice by medical practitioners as of doubtful diagnosis. These persons are visited and watched over with the others and are seldom retained long without definite diagnosis.

The admission to Glenlomond Sanatorium of 181 patients was arranged during 1928 from the following areas :—

LANDWARD :—Cupar District, 11 ; Dunfermline District, 34 ; Kirkcaldy District, 36 ; St Andrews District, 7 ; and Kinross County District, 9.

BURGHs :—Auchtermuchty, 2 ; Buckhaven, 17 ; Burntisland, 2 ; Cowdenbeath, 14 ; Cupar, 2 ; Dysart, 1 ; Inverkeithing, 2 ; Kinghorn, 1 ; Kinross, 1 ; Ladybank, 1 ; Leven, 2 ; Lochgelly, 6 ; Newburgh, 2 ; Newport, 1 ; St Andrews, 7 ; Tayport, 4.

In addition 4 patients were admitted at the cost of the Ministry of Pensions and 19 patients from areas outwith Fife.

DOMICILIARY TREATMENT.—Additional nourishment was supplied during 1928 to 55 patients at a cost of approximately £140 6s, or £2 11s per patient. The articles of food supplied are milk, eggs, meat, oatmeal, cod liver oil and malt, &c.

With two exceptions, the patients granted additional nourishment at the cost of the County Tuberculosis Authority were resident in the two western mining districts of the County (Dunfermline and Kirkcaldy) where the financial circumstances of numerous households were barely sufficient for the needs of the family even in health. Tuberculosis is probably of all diseases the most potent cause of poverty, more particularly when the bread-winner is affected. No endeavour is made therefore to define an amount per head of family per week beyond which additional nourishment will not be granted. Grants of food have often to be given for



long periods if any benefit is to follow and the amount spent depends on the time they have to be continued rather than on the number of cases dealt with.

**LUPUS (Tuberculosis of the Skin) :—**Eleven patients suffering from lupus were granted during 1928 travelling facilities to attend the Skin Department of Edinburgh Royal Infirmary for ultra-violet light treatment at a cost of £148 7s 6d. Of the above cases, two have been reported as not requiring further treatment meantime and two were considered to be in a position to meet their own travelling expenses. At the end of the year seven patients were being supplied with transport facilities to Edinburgh at the cost of the County Tuberculosis Authority.

Under the scheme of the County Tuberculosis Authority for the supply of drugs and dressings to tuberculous patients, forty-three medical practitioners prescribed for 221 persons at a cost of £211 13s 1½d. The average cost per patient was 19s 1½d, and the average per doctor was £4 18s 5d. The amount spent in 1927 was £226 5s and the average per doctor was £6 5s 8d.

**TUBERCULOSIS NURSES :—**During 1928 the amount paid by the County Authority in respect of the services of health visitors in the capacity of tuberculosis nurses was £86 12s 6d. The duty undertaken is that of the supervision of the patient in his home and the furnishing to the Public Health Department of a monthly report on his condition. The scheme does not obtain throughout the County as some local authorities do not undertake maternity and child welfare work. The work of the Health Visitor as Tuberculosis Nurse is a very valuable adjunct to that of the Tuberculosis Officers.

**STAFF :—**Dr R. L. Leask assumed duty as Executive Tuberculosis Officer and Assistant Medical Officer of Health with residence in Kirkcaldy District on 10th December, 1928.

The Report of Dr G. M. M'Gillivray on his work as Tuberculosis Officer during 1928 is subscribed. A note is also submitted of Dr Leask's impression of the work in Fife.

During the year, the notification of new cases has been satisfactory and the cordial co-operation of medical practitioners throughout the area has shown that they are anxious to do all in their power to bring patients to notice as early as possible. There has been a marked improvement in this direction during the past few years and it is evident that practitioners now fully realise the advantages of early notification and treatment of tuberculosis.



A great deal of my time has been taken up in seeing doubtful cases referred to me by the doctors. In spite of this, the proportion of advanced to early cases remains unduly high and the sick beds available at Glenlomond Sanatorium have been fully occupied during the year. The problem of the admission of sick patients has on the whole been less acute than formerly as at no time during the year was there a long waiting list with the consequent delay of weeks or months before they could be admitted.

Many of the advanced cases seen show little promise of recovery or even of benefitting to any great extent by sanatorium treatment but I am of opinion that admission should be enforced irrespective of age and whether they are considered beyond treatment or not. Advanced cases are seldom welcomed in a sanatorium or even encouraged to remain there when admitted but there can be no doubt that they do require more constant medical supervision and nursing than can be given at home by relatives. The constant strain of nursing advanced cases of tuberculosis at home soon becomes apparent and relatives cannot be expected to carry on indefinitely without a complete breakdown in health. The Sanatorium at Glenlomond as originally built was wisely constructed to deal with advanced as well as other types and it is only fulfilling its normal function by receiving all classes.

The undue proportion of advanced cases notified each year is not confined to this area only but is general throughout the whole country. This is evident from the perusal of tuberculosis reports from other sources. The fault in most cases cannot be attributed to practitioners as there is seldom unreasonable delay in referring patients to the Tuberculosis Officer. The main reason for late notification is found in the disinclination on the part of patients to report themselves to the doctor when feeling ill. This may be partly due to the insidious nature of the disease. Discomfort at first is often very slight and they frequently work on for months before calling in medical aid. Thus the most favourable time for treatment is long past and the disease is far advanced before they are brought to the notice of the Tuberculosis Officer by the practitioner.

It is recognised that tuberculosis as a disease is universally widespread, certain individuals being apparently more easily overcome by the germs and their toxins than others. It may also be that some of the general public are still ignorant of the early signs of this disease but I do not think this is the sole cause of late notification. For the most part the education of the general public in matters of health and of personal and home hygiene is now fairly thorough. A more likely cause of late notification is to be



found in the economic circumstances of many who are stricken with tuberculosis as it is difficult for them to leave off work and seek treatment having no visible means of support for themselves or their families. This is by no means uncommon, the breadwinner being kept at work though far from fit because of the fear that his family will suffer if he is ill and unable to provide for them. If some provision could be made for the family of a patient at a time when treatment holds out a reasonable prospect of cure, I think there is no doubt that less reluctance would be shown on the part of the breadwinner to seek medical advice early or go into a sanatorium if need be. In many of the advanced cases brought to notice the economic circumstances can often be traced as the reason for not giving up work or seeking medical advice sooner.

It seems unlikely, however, that we will ever be free from advanced cases so long as present conditions remain and detection of the disease at an early stage depends so largely on the individual voluntarily seeking medical advice. As pointed out in previous reports, a compulsory survey of the entire population three or four times a year by a competent medical staff would do more to improve this unsatisfactory state than anything else. Those found to be diseased could then be got under treatment at once while any doubtful cases could be watched at home or sent to a sanatorium for a period of observation.

The conditions as to housing found in new cases brought to notice remain much the same as in former years. The following table which covers a period of four years shows (1) the average number of people, and (2) the percentage of the new cases notified who were living in the different types of house :

Year	Single Room		Two Rooms		Three Rooms		Four or more Rooms	
	% of new cases in	Av. No. of people in	% of new cases in	Av. No. of people in	% of new cases in	Av. No. of people in	% of new cases in	Av. No. of people in
1925	8.67	4.5	69.82	5.7	12.82	6.0	8.67	4.0
1926	10.75	4.4	56.67	5.76	21.52	5.5	11.06	5.9
1927	8.24	3.6	65.17	5.53	14.23	5.89	12.36	5.0
1928	6.8	3.5	57.74	6.0	23.0	5.5	12.46	4.5

Most of the new cases still come from the smaller unhealthy type of dwelling, a point I have stressed in previous reports. There can be no doubt that the general health suffers in an unhealthy environment and the individual resistance to disease in any form is lowered. This is important when dealing with children as it is



often very difficult to diagnose the early stage of pulmonary tuberculosis and unless they are notified as tuberculous, sanatorium treatment is not available. It seems reasonable that every ailing child in whom there is the least suspicion of tuberculosis should be removed from the unsatisfactory house and receive adequate treatment in a sanatorium. There is no place available otherwise for the treatment of such children and even although found to be non-tuberculous, one cannot doubt the value of a period of treatment in a sanatorium to an ailing child.

It has long been recognised that those who die of tuberculosis in adult life owe this to infection in childhood. It may be asked why, after a period of quiescent years in which there is no sign of tuberculosis, there should be a reawakening of the disease in later life. In the majority there can be no doubt that adverse conditions in the form of bad housing and inadequate or poor feeding are largely responsible.

Children in infancy should thus be protected from infection as far as possible and once infected or even when infection is only suspected they should be appropriately treated to prevent as far as possible any likelihood of recurrence in adult life. If suitable treatment is available at this early stage of infection in childhood, the primary focus of disease is more likely to be securely walled off by fibrous tissue and thus prevent the spread to other organs in adult life. Suitable treatment can only be given in a sanatorium where beds should be available not only for recognised cases but also for the pre-tuberculous ailing child.

The question of family infection was dealt with in my report for 1927 and I see no reason to alter the views I then expressed. Practically everyone is infected with tuberculosis in infancy although the disease may not become apparent till late in life. Given a family living on the verge of poverty in a small overcrowded and unhealthy home, there is little wonder that one or other of the members will sooner or later show a rekindling of the flame from the childhood infection. Where there is already an active case of tuberculosis living in such circumstances with no possible means of isolation or even of giving a separate bed, then superinfection is added. It is, however, very questionable if this could be called family infection. Would it not be nearer the mark to call it an infection of circumstances. Tuberculosis differs little in this respect from other infectious diseases—provided isolation can be adequately carried out, further infection will not occur. So called family infection would practically disappear if these families could be housed under better conditions. With sufficient means and accommodation in a house to nurse and isolate an active case of



phthisis and given sufficient support to maintain life in health or disease for every member of the family, the question of family infection would be no different from that of the general population. Year after year this is apparent from the number of new cases occurring in the smaller unhealthy dwellings occupied by people who have barely sufficient to support life in health. Very few notifications of tuberculosis are received in respect of people more fortunately situated in life.

During the year, eighty-three patients (17 pulmonary, 66 non-pulmonary) were taken off the active list as quiescent. One hundred and forty-five (112 pulmonary, 33 non-pulmonary) were finally rejected as non-tuberculous. Most of these although never appearing on the tuberculosis register have been kept under observation for a considerable time. Thirty-one of the one hundred and forty-five rejected as non-tuberculous were in Glenlomond for observation at some time or other during the past three years. Sixty patients (38 pulmonary, 22 non-pulmonary) removed outwith the area of Fife County Tuberculosis Authority and were taken off the register.

The following is a summary of the cases seen by me during the year :—

New Cases		Old Cases Revisited		Contacts			Homes Visited	Ex-Ser. Men seen in Office.
Pul.	Non-Pul.	Pul.	Non-Pul.	+	—	?		
214	179	798	408	4	69	15	1574	27

DR LEASK :—As it was only in the last month of the year that I assumed the duties of Clinical Tuberculosis Officer in this County, the number of cases seen by me has been, of necessity, small. It would, therefore, be unwise on my part to draw any weighty conclusions from my experience here. Nevertheless, I have formed some general impression of the work carried on in the County under the Tuberculosis Scheme.

The majority of the cases visited by me up to the present time have been either previously notified cases of tuberculosis or suspicious cases under observation. I have also seen a few patients who have been notified for the first time and several doubtful cases of tuberculosis have been referred to me by medical practitioners for an opinion on their condition. I have found the



practitioners at all times ready and willing to co-operate with the Tuberculosis Staff in their endeavour to diagnose and treat the disease at the earliest possible moment and I hope to be able to preserve these good relations without which the work would be of little avail.

It is an unfortunate fact that many of the patients are already suffering from advanced tuberculosis when first seen by me and often beyond hope of recovery. This, however, is a state of affairs which is not peculiar to the County of Fife but holds, more or less, all over the country.

Considerable success has been attained in the education of tuberculous patients by way of inculcating hygienic habits and modes of life with a view to combating the attack of the tubercle bacillus on the body tissue and preventing infection to others. Residence, even for a short time, in a sanatorium is especially valuable from the educational standpoint and in addition the Health Visitor and Tuberculosis Officer are able to do much in this direction.

It is regrettable at the present time that there are many patients who, after having made excellent progress under sanatorium conditions, when they return home go steadily downhill. The explanation of this probably lies in the present-day economic and housing conditions and in the lack of suitable occupation for those who are unable to perform the heavy work to which they were previously accustomed.

I append no figures relating to the cases I have visited and had under my care during the year, these being included in Dr M'Gillivray's report.

### **TREATMENT OF VENEREAL DISEASES.**

One scheme obtains throughout the Counties of Fife and Kinross and includes the districts of all local authorities, burghal and landward, thirty-four in number therein. The scheme is administered by a Joint-Committee representative of the public health authorities of the two Counties.

The centres of treatment are the Public Health Dispensary, Market Street, Dunfermline; The Dispensary, Dunnikier Road, Kirkcaldy; and the Public Health Institute, 55 Constitution Road, Dundee.

In September new premises were opened at Constitution Road, Dundee, for men and women in place of the centres formerly held at Fleuchar Street and the Royal Infirmary.



During the year alterations and extension of the premises of the Kirkcaldy Centre at the entrance to the Burgh Fever Hospital were approved. These will improve the efficiency of the work at this Centre which was built for use as a tuberculosis dispensary and lacked irrigation and other accommodation sufficient for use as a clinic for the treatment of venereal diseases.

The accommodation available at the Dunfermline Centre was also under review. The working space of this Centre is limited to that available in a cottage of two apartments, the kitchen serving as waiting-room and the second apartment as consulting-room. When established, the Centre was in some respects experimental and the premises were regarded as makeshift although the site appeared suitable for the purpose: none other was available at the time. Prior to the establishment of Market Street Dispensary, overtures were made to the Managers of Dunfermline and West Fife Hospital to learn whether accommodation would be available within the Hospital as a Treatment Centre. The answer was not favourable. The question was again taken up when the Managers decided to extend the Hospital and was under consideration towards the end of 1928.

The arrangements made in conjunction with the Secretary of the Scottish Branch of the British Social Hygiene Council for public lectures during the winter months on the dangers of venereal diseases were continued. Addresses with the showing of films were given at Kirkcaldy, Newmills, Markinch, and Dunfermline. The total number in attendance was approximately 1,700, the audiences being of both sexes. At Dunfermline where the lecture was held on Sunday, the audience limited to 200 was disappointingly small. Dr Johnson, medical officer, Dunfermline, undertook all four lectures.

The following summarises the work of the Centres during 1928:—

**DUNFERMLINE CENTRE:—**There were 282 (male 198, female 84) new patients, an increase of 34 on the figure of 1927 and the greatest number yet recorded for a year. Of the persons presenting themselves at the Centre, 91 (male 50, female 41) suffered from syphilis, 96 (male 80, female 16) from gonorrhoea, 13 (male 9, female 4) from syphilis and gonorrhoea, 22 (male) from soft sore, and 64 (male 41, female 23) from conditions other than venereal disease. The total attendances at the Dispensary were 9,721, an increase of 1,172 on the number of 1927. Patients treated in Hospital numbered 22 (male 17, female 5), the average stay in hospital being  $18\frac{1}{2}$  days.



KIRKCALDY CENTRE :—There were 261 (male 218, female 43) new patients, an increase of 29 over the number in 1927. Of the new patients 64 (male 48, female 16) suffered from syphilis, 116 (male 103, female 13) from gonorrhoea, 19 males from soft sore, 7 (male 5, female 2) from mixed infections, and 55 (male 43, female 12) from conditions other than venereal disease.

The total attendances during 1928 were 3,612 (syphilis 1,627, gonorrhoea 1,678, soft sore 67, mixed infections 128, and conditions other than venereal disease 112). The number of persons ceasing to attend before treatment was completed was 38 (11·3 per cent.). The number of patients discharged on completion of treatment was 171. Eight patients were admitted to Hospital and spent 206 days therein. The number of examinations of pathological material in 1928 was 809 of which 573 were undertaken by Professor Tulloch, University College, Dundee, and 236 by the Staff of the Centre.

Dr M'Intosh in his Annual Report comments on the efforts made to induce those renouncing treatment too early to return, but states that little success attends his efforts. Reference is made to the unsuccessful attempt of Edinburgh Corporation to obtain by Provisional Order compulsory powers for dealing with such cases. The subject in Dr M'Intosh's opinion is hedged with difficulties but the existing situation is undoubtedly a most unsatisfactory one.

DUNDEE CENTRE :—The Public Health Institute serves most conveniently for patients in the northern and eastern portion of the County. The number of new patients from Fife County during 1928 was 28 (male 20, female 8) of whom 4 (male 2, female 2) suffered from syphilis, 13 (male 11, female 2) from gonorrhoea, 1 male from mixed infections, 3 (male 2, female 1) from other venereal disease, and 7 (male 4, female 3) from conditions other than venereal disease.

The total attendances were 434.

Dr W. P. S. Johnson, Medical Officer, Dunfermline Centre, continues to act as Consultant to Fife and Kinross District Asylum in regard to abnormal mental conditions having their origin in venereal disease.

The cost of transport to treatment centres of necessitous patients was £32 2s 3d in 1928 as compared with £38 14s 3d in 1927.



The arrangement with St Andrews University whereby all bacteriological work required by the Medical Officers to the Centres is undertaken at University College, Dundee, for an annual payment of £240 continues.

Further details of the work of the Kirkcaldy Centre are available in the Annual Report for the Burgh of Kirkcaldy.

Dr Johnson's report on the work of the Dunfermline Centre and at Fife and Kinross Asylum is subscribed.

I have the honour to submit to you a report of the work carried out under the Venereal Diseases Scheme for the Counties of Fife and Kinross during the year 1928.

Under the scheme provision is made for the examination and treatment of adult males, adult females, and children of both sexes, as out-patients, at the Public Health Dispensary, Market Street, Dunfermline, and in cases where admission to hospital is necessary, accommodation is available at the West Fife Infectious Diseases Hospital, Dunfermline, to the extent of six beds, the treatment in such cases being carried out there.

During the course of the year under review 282 new patients were examined, this being an increase of 34 over the figure for 1927, and also the greatest number yet recorded since the inception of the clinic.

The total of new cases presenting themselves was made up as follows :—

*Males* :—198, being an increase of 40 over 1927.

*Females* :—84 being a decrease of 6 under 1927. Included in these figures are the cases of 34 children, who were suffering from congenital syphilis or were suspected of this.

Of the cases who reported at the Centre :—

34.3 per cent. were suffering from gonorrhoea.

32.2 per cent. were suffering from syphilis.

4.6 per cent. were suffering from gonorrhoea and syphilis.

6.3 per cent. were suffering from soft sore.

22.6 per cent. were suffering from conditions other than venereal disease.

There continues to be a considerable improvement with respect to the willingness on the part of patients to report for examination and treatment at an early stage of the disease and also in suspected infection. One feels, however, that much propaganda work still



requires to be carried out before every patient suffering from these diseases will report and place themselves under suitable treatment within a few days of the condition becoming manifest.

Of the new cases reporting during the year :—

175 came of their own free will.

76 were sent by medical practitioners.

16 were transfers from other centres.

6 were requested to come by County Health Visitors.

8 were instructed to report by Parish Authorities.

1 was advised to come by a District Nurse.

The total number of routine attendances during the year was 9,721, being an increase of 1,172 over the previous year and also a record number since the inception of the clinic in 1922. The following comparative table indicates the numbers of new cases and routine attendances since then :—

			New Patients			Routine Attendances
1922	(Two months)	...	52	...	...	434
1923	...	...	242	...	...	6846
1924	...	...	270	...	...	9009
1925	...	...	252	...	...	8462
1926	...	...	207	...	...	8547
1927	...	...	248	...	...	8549
1928	...	...	282	...	...	9721

In addition to the total of new cases reporting, those whose treatment was not completed at the end of 1927 continued their attendance for routine treatment, as a matter of course. The number of visits paid by each sufferer varies, and an effort is always made that each individual patient is seen by the medical officer at least once a week or more frequently if necessary. It is undoubtedly the close personal touch with the patient and the interest in his or her case which encourages the sufferer to attend regularly. No cases of ophthalmia neonatorum or vulvo-vaginitis in young children reported to the Centre during the year.

Owing to the severity of their illness, a number of cases required bed accommodation, and during the year it was found necessary to admit 22 patients to hospital for treatment. Of these, 17 were males, and 5 females. These patients were suffering from the under-noted diseases, with complications in nearly every case :—

	Males.	Females.
Syphilis	11	5
Gonorrhoea	4	0
Syphilis and Gonorrhoea	0	0
Soft Sore	1	0
Conditions other than Venereal Disease	1	0



The total number of days in hospital in respect of the foregoing cases was 412, representing an average of 18.5 days per patient. A very considerable improvement in the condition of every case, with one exception, was obtained. The one exceptional case required removal to Springfield Asylum.

The total number of 412 days spent by patients in hospital is an increase of 278 days over 1927 and is the highest number yet recorded.

At the Combination Home and Hospital, Dunfermline, 8 new patients were examined and appropriate treatment administered.

During the year 1928, three visits were made to the Fife and Kinross District Asylum, Springfield, near Cupar, and 14 new patients were examined and appropriate therapy instigated. The treatment of those who had previously been under observation was persisted in, and beneficial results continue to be obtained. In reviewing the cases treated at the Asylum it is advisable to divide them into two main groups, viz. :—

1. Those who present mental symptoms not definitely attributable to syphilis.
2. Those who present mental symptoms resulting directly from infection of the Central Nervous System which are definitely attributable to syphilis, *i.e.*, cases of Dementia Paralytica.

Group 1 are the cases which show no pathology in the cerebrospinal fluid. In this case it is found that treatment has resulted in improvement of the general health, with resulting amelioration of the mental symptoms.

In Group 2, the results so far are very satisfactory. A certain number of these cases were previously treated with sulfarsenol and neokharsivan. These drugs have been replaced by tryparsamide and the results compared. There is not the slightest doubt but that better results are being obtained with the latter drug ; it is proving a valuable therapeutic agent in the treatment of Dementia Paralytica. It produces a definite tonic effect and this effect occurs much earlier than with other drugs of the arsenical group.

Every endeavour is made to persuade sufferers to continue their treatment at a recognised Venereal Diseases Clinic after their discharge from the Institution.



Since the treatment of patients in the Asylum commenced in 1927, the following figures are of interest :—

No. of Patients	...	...	...	...	23
Cured	...	...	...	...	3
Greatly Improved	...	...	...	...	5
Improved	...	...	...	...	3
No Improvement	...	...	...	...	4
Deceased	...	...	...	...	4

whilst in the case of four patients it is, as yet, too early for any opinion to be expressed.

Six of the above twenty-three have so far recovered, that Dr Boyd, Medical Superintendent at the Asylum, has felt justified in discharging them.

As in former years several public lectures to both sexes on Venereal Diseases have been given, along with the exhibition of appropriate films, under the auspices of the British Social Hygiene Council, such places as Kirkcaldy, Dunfermline, Markinch, and Newmills being visited in turn. Whilst in every case the interest and close attention of the audience has been very gratifying, at times one felt somewhat disappointed that a greater number had not taken advantage of the demonstration.

It is essential that knowledge of the dangers of venereal diseases should be thoroughly disseminated among the public, and these lectures are undoubtedly answering a useful purpose in that respect.

During the year it has become increasingly evident that greater success could be attained in the treatment of Venereal Diseases throughout West Fife if more suitable and spacious premises were available, and a closer liaison with the medical profession in the district established. The present "makeshift" nature of the Clinic should be replaced by a more suitable and up-to-date building. One has no hesitation in saying that if such were forthcoming, the value of the work carried out would be much enhanced. In view of the large industrial population which the centre provides for, the degree of permanency which has been ordained, and the regularity with which patients continue to present themselves, one feels that the Clinic should be on a totally different footing. The present premises are most unsuitable and inadequate.

In any clinic dealing with venereal diseases accurate and efficient pathological work is of prime importance and the centre at Dunfermline is fortunate in being associated with the Bacteriological Department, University College, Dundee.



Laboratory work is of great value in diagnosis and also to a very great extent assists in the control of the disease and is essential in patients undergoing tests of cure.

During the year, 1719 specimens have been examined, being an increase of 173 over 1927.

The methods of treating gonococcal infection during the past year show few changes and local antiseptic therapy is still employed in practically all cases. In addition vaccine therapy has been utilised and a large amount of instrumental work is carried out in treating the more chronic cases and also in the "tests of cure."

In Syphilis, Salvarsan, Bismuth, and Mercury are still the main drugs in use and 2792 injections have been given by either the intramuscular or intravenous method. Increase of 166 over 1927. Salvarsan—and its derivatives—is still the most potent drug which we have in the treatment of syphilis. Bismuth is probably next to it in potency and is undoubtedly more effective than mercury. The arsenical compounds and bismuth are given in combination in all early cases of the disease. Bismuth is extremely well tolerated and is an efficient substitute for the more potent arsenical drugs in those cases in which the latter are not well tolerated. As previously indicated Tryparsamide is used in almost all cases in which the Central Nervous System is involved.

In conclusion I wish to acknowledge my indebtedness to Dr Reekie, Medical Officer of Health, Dunfermline, for the help he has so willingly given me on several occasions, to the Nursing Staff at the West of Fife Infectious Diseases Hospital, and to the Nurse and Medical Attendant at the Centre.

W. P. S. JOHNSON,

*Clinical Medical Officer, Dunfermline Centre,  
Counties of Fife and Kinross, Venereal Diseases Scheme.*

### **MATERNITY SERVICE AND CHILD WELFARE SCHEMES.**

Schemes for these purposes are in force in the Districts of Dunfermline, Kirkcaldy and St Andrews. No scheme is in operation in Cupar District.

Centres have not been established in connection with the work of the Schemes administered by the District Committees as hitherto dependance for the success of the work has been placed



upon visitation of the home by the health visitor (in every case a hospital-trained nurse) for advice given therein on the care of the health of the expectant and nursing mother and the rearing of healthy infants and children.

The duties have thus been regarded primarily as educational and preventive rather than curative. By this method all mothers have been reached and particularly the type who must be supervised and controlled if the work of the reduction of infant and child mortality is ultimately to prove successful. There are mothers who will not and apparently cannot be persuaded to attend maternity and child welfare clinics and it is only by domiciliary visitation that these can be brought within the fold. Apart from climatic conditions which may be a factor in child mortality, the adverse circumstances and environment of the homes of these women are such that the contribution of infant deaths from this social stratum is probably disproportionately large.

After all, it is the ignorant and careless mother that must not be neglected although the work without doubt is educative and informing even to the most anxious and careful.

Centres, where medical advice and treatment are available, are necessary however if further progress in the prenatal and post-natal branches of the work and in the care, preventive and curative, of infants and pre-school children is to be made. Doubtless a broad and economic view of this question will be taken when the new Local Government (Scotland) Bill has reached the Statute Book and is in operation.

The Schemes of the District Committees embrace certain Burghs. That of Dunfermline District Committee is in operation in the Burghs of Inverkeithing and Culross. That of Kirkcaldy District Committee within the Burghs of Kinghorn, Leslie, and Markinch, the Burgh of Burntisland having withdrawn on 13th October, 1928. The Scheme of St Andrews District obtains within the Burghs of Anstruther-Easter, Anstruther-Wester, Crail, and Kilrenny.

During and after the industrial crisis in the coal trade of 1926 the expenditure by Kirkcaldy District Committee on the feeding of necessitous expectant and nursing mothers and children under five years of age was heavy. The annual cost of the Scheme is borne by the combining authorities in proportion to the mean of population and valuation. Few if any miners are resident in the Burghs combined with Kirkcaldy District for maternity and child welfare purposes and doubtless the Town Councils felt that by retiring from the Scheme the burden of unforeseen expenditure would in



future be avoided. Ultimately Burntisland was the only burgh of the four concerned which decided to operate and finance a scheme for its own area.

There are eight whole-time health visitors employed, three in Dunfermline District, three in Kirkcaldy District, and two in St Andrews District. The health visitor also serves as tuberculosis nurse and as assistant inspector of midwives.

During 1928, the County health visitors reported 2,309 births of which 26 or 1.12 per cent. were not notified as required by the provisions of the Notification of Births Act, 1907. Of the total births, 88 were born still and 72 prematurely. The number of births attended by medical practitioners was 1,681, by midwives 626, and by neither medical practitioner nor midwife 2.

Of the infants born 1936 were breast-fed, 242 were bottle-fed and 40 received mixed (breast and bottle) feeding. The occurrence of ophthalmia neonatorum was reported in 46 infants.

The number of visits made by health-visitors during 1928 was as follows :—expectant mothers 1,696 ; infants and nursing mothers 18,763 ; children 1-5 years 12,463 ; inspection of certified midwives 196 ; tuberculous patients 2,411 (pulmonary 1,241, non-pulmonary 1,170) ; or a total of 35,529 domiciliary visits in all.

**ADDITIONAL NOURISHMENT.**—During 1928 applications were received from the health visitors on behalf of 308 families. Milk, oatmeal, &c., was granted to 270 families, 143 grants being on behalf of children under five years of age, 67 for nursing mothers, 36 for expectant mothers and 24 grants were given where mothers and children generally would benefit. The cost of the additional nourishment granted by the District Committees of Dunfermline, Kirkcaldy and St Andrews amounted in all to £222 1s 8½d, a lower expenditure than that for 1927 when the nourishment granted cost £250 4s 7½d.

Two children under five years of age have received treatment during the year at the home for Crippled Children, Edinburgh, at the cost of the Maternity Service and Child Welfare Scheme. Both were treated for rickets and their maintenance in the Home cost £19 19s.

**MIDWIVES ACTS, 1915 AND 1927.**—The number of certified midwives practising in the landward area of the County during 1928 was 60 ; Cupar District 3 ; Dunfermline District 29 ; Kirkcaldy District 22 ; St Andrews District 6.



There were 126 cases of emergency in midwives' practice in which medical assistance was sought as against 80 cases in 1927. The number of forms for the notification of (1) laying out a dead body, (2) still-birth, (3) artificial feeding, and (4) liability to be a source of infection received during 1928 was 31 as against 23 received during 1927.

During 1928, 57 claims were received from medical practitioners in terms of the Midwives (Scotland) Acts, 1915 and 1927. In 29 cases, found to be necessitous, the District Committees concerned decided to defray the accounts in terms of the Maternity Service and Child Welfare Scheme. These accounts amounted to £51 6s. Recovery of the fees was recommended in 19 cases, involving £28 0s 11d. In 5 cases the doctors ultimately obtained payment privately; two cases did not fall within the terms of the Acts; one account was returned as it had not been rendered within the specified time while in one case a doctor withdrew his claim on learning that the amount of his account would be recovered from the family concerned.

Several midwives were reprimanded in respect of minor breaches of the Rules of the Central Midwives Board but no contravention serious enough to be reported to the Board occurred during the year.

The old type of *bona fide* midwife is slowly disappearing and the trained nurse taking her place. In some areas the District Association Nurses undertake midwifery work with satisfactory results.

**MATERNITY HOMES.**—Dunfermline and Kirkcaldy District Committees continue to be partners in the Maternity Homes established in the Burghs of Dunfermline and Kirkcaldy.

During 1928, 83 patients were admitted to these Homes from the areas administered by the District Committees in terms of the Maternity Service and Child Welfare Scheme, or 31 more than were admitted during 1927 when 52 women received treatment.

Of these 83 cases, 11 patients were wholly or partly necessitous, the remainder of the patients contributing an amount of £169 1s 0d towards the cost of their maintenance in the Homes. The additional cost to Dunfermline and Kirkcaldy District Committees for their shares of the maintenance of the Homes was £541 13s 9d.



**HOSPITAL TREATMENT OF MEASLES AND WHOOPING COUGH.**—Patients suffering from these infections are admitted for hospital treatment in the Districts of Dunfermline and Kirkcaldy as a matter of routine where the circumstances of the patient indicate this course as desirable. Grant in aid of the cost of treatment is received by the District Committees.

**HOSPITAL TREATMENT OF PUERPERAL CONDITIONS.**—Reference was made in the Report for 1927 to the hospital facilities available for women suffering from morbid puerperal conditions. During 1928, eleven women were notified as suffering from puerperal fever (Cupar District 2, Kirkcaldy District 8, St Andrews District 1). Five women notified as suffering from puerperal sepsis were admitted during the year for treatment in Kirkcaldy District Infectious Diseases Hospital, Thornton. In three women, the diagnosis was negatived.

The subscribed summary shows the numbers of deaths of women from puerperal sepsis and Other Diseases and Accidents of Pregnancy and Parturition in quinquennial periods for the years 1913-27 inclusive.

Period	1913-17	1918-22	1923-27	1928
Cupar District ... ..	9	6	5	1
Dunfermline District ... ..	34	34	26	4
Kirkcaldy District ... ..	26	47	31	8
St Andrews District .. ..	3	4	2	—
Fife County ... ..	72	91	64	13

The deaths from puerperal conditions for the years 1913-27 amount to 1.23 per cent. of the total deaths for that period and are not particularly impressive when expressed in that form in comparison with those of certain other diseases already dealt with. Deaths from puerperal sepsis and other diseases and accidents of pregnancy however only occur in a certain limited stratum of the population. Obviously if such deaths were taken as a proportion of those of women at the child-bearing age the ratio would prove extraordinarily high. Year in, year out this toll continues with little or no remission and occurs unfortunately at a time of life when the mother can least be spared, when her death creates the greatest hardship and difficulty to the family and when her life is at its highest economic value to the State.



The whole remedy is not known, but factors towards it are efficient ante-natal supervision and care, admission to maternity institutions of women from homes where there are no reasonable facilities for the conduct of labour and privacy is lacking, and the early removal to hospital of cases or suspected cases of puerperal pyrexia, sepsis or morbidity. There is a long furrow to plough in these respects in Fife.

### **PUBLIC HEALTH (SCOTLAND) AMENDMENT ACT, 1925.**

Schemes in terms of this Act for the supply in certain circumstances of insulin and food for the treatment of diabetes in those unable to furnish these for themselves are in operation in each of the four County Districts. Since the Act came of force, 17 persons (adults 14, children 3) have been supplied with insulin or food, sometimes both, by the Public Health Local Authority. Since the first application was granted in February, 1925, the supply of insulin, &c., to eleven patients, furnished for periods varying from a month to two and a half years, has been discontinued for various reasons. Four patients who commenced treatment in 1928 are supplied with insulin at the cost of the District Committees concerned. In some cases the drug is furnished at the reduced rate obtainable through the Scottish Board of Health.

### **SCHOOL CLOSURE.**

The temporary closure, in part or whole, of schools for the prevention of spread of infection was not found necessary in any case during 1928.

### **EXAMINATION OF MORBID PRODUCTS.**

The number of specimens submitted for examination by medical practitioners from persons resident within the Landward Districts during 1928 was 114 as compared with 136 in 1927 and 155 in 1926. In addition 77 specimens of sputum were sent for investigation by the Executive Tuberculosis Officer of which 9 were positive.

The bacteriological examination of morbid material is undertaken by Professor Tulloch, University College, Dundee.



**Morbid Products, 1928.****Fife County.**

Nature of Specimen.	Result.	Cupar. Dist.	Dunf. Dist.	Kirk. Dist.	St And. Dist.
Throat Swabs for Diphtheria	Positive	—	1	3	6
	Negative	3	15	17	24
	Total	3	16	20	30
Blood for Typhoid Fever	Positive	—	2	—	—
	Negative	2	4	4	2
	Total	2	6	4	2
Sputum for Tuberculosis	Positive	1	—	1	2
	Negative	1	6	14	6
	Total	2	6	15	8
	Positive	1	3	4	8
	Negative	6	25	35	32
	Total	7	28	39	40

**BUILDING BYE-LAWS.**

The plans examined and reported on to the District Committees of Cupar, Dunfermline, Kirkcaldy, and St Andrews involved proposals to build 93 new houses, to convert 2 existing buildings into dwelling-houses, and to alter and add to 69 existing houses.

The plans examined and criticised of premises for other than housing purposes comprised 34 new erections and additions and alterations to 30 existing buildings.

Of the proposed new houses, 8 were of two apartments, 63 were of three apartments, 11 were of four apartments, 10 were of five apartments and 1 was of eight apartments.

Of the new houses proposed to be erected, 6 were in Cupar District, 12 in Dunfermline District, 53 were in Kirkcaldy District and 22 in St Andrews District.

Of new premises other than housing, the proposals were for the erection of 4 in Cupar District, 3 in Dunfermline, 22 in Kirkcaldy and 5 in St Andrews Districts. The grant of the Government Subsidy under the Regulations of the Board of Health was approved in respect of 47 new houses.



### **CINEMA THEATRES.**

Occasion is taken to ensure that cinema theatres comply with statutory requirements prior to the grant of the licences under the Cinematograph Act in May of each year. Regard is taken to cleanliness, ventilation, and appropriate sanitary-fitment facilities. Fifteen premises were approved subject to the fixation of a few loose seats.

### **POLLUTION OF RIVERS.**

Conditions of pollution continue as set forth in previous reports.

### **HOUSING (RURAL WORKERS) ACT, 1926.**

The numbers of proposals for the renovation, alteration and extension of existing housing received under the schemes of the District Committees in terms of the Housing (Rural Workers) Act, 1926, are set forth in each District Report.

The purpose of the Act is "to promote the provision of housing accommodation for agricultural workers and for persons whose economic condition is substantially the same as that of such workers and the improvement of such accommodation by authorising the giving of financial assistance towards the reconstruction and improvement of houses and other buildings."

During 1928, the number of applications received throughout the County for grants towards the renovation and improvement of existing housing under the Act was 59 of which 55 were approved. The number of applications approved in each of the several districts was :—Cupar 14, Dunfermline 25, Kirkcaldy 10, and St Andrews 10.

Considerable difference is observable in the extent to which use is being made of the provisions of the Act in the Districts.

Hitherto housing has been provided by the District Committees of Dunfermline and Kirkcaldy for mining townships, but none has been built in rural areas for those engaged in the agricultural industry which still remains the backbone of the major area of the County.

In Fife the rural cottage of a former generation is a stone-built, tile-roofed structure, naturally without a damp-proof course, often entering from ground-level and frequently sunk into the earth to varying depth along the rear wall and gables. There are usually



two apartments, one on each side of the central doorway, often the only entrance to the cottage. There may be a third small room or closet sandwiched between the kitchen and room. The rear wall being devoid of openings, the cottage is of the "back-to-back" type the apartments being unventilated cul-de-sacs behind the door-fireplace line. The windows one on each side of the entrance door, are much too small to light the apartments which are usually of good size. The internal wall-surfaces are plastered on the solid and show evidence of dampness, often concealed by boarding to the height of a dado, particularly behind the beds. Storage accommodation is lacking: there may be a wall press adjoining the fireplace in each apartment which in addition to other uses has to serve as larder. The domestic water supply has to be carried in pails, often a considerable distance and the convenience is a pail-closet, sometimes a dilapidated wooden structure, situated at the far end of the garden. There may be no drainage, slop-water being disposed of on the ground adjacent to the door.

Some of the cottages are good substantial structures in sound condition: others are indifferent from lack of repair and maintenance: many are bad and not habitable in their existing state. Rarely are to be found the water-carriage sanitary fitments (sink tub and water-closet) which it is often perfectly practicable to provide.

Much might be done for the betterment of many of these cottages by judicious expenditure but little advantage has hitherto been taken of the undoubted benefits accruing to owner, tenant and occupier by application for and participation in the grant available for the renovation, repair and refitment on sanitary lines of old housing under the Housing (Rural Workers) Act, 1926, and there is a wide field to be covered in Fife.

The Act was intended to secure better housing for agricultural workers and it seems expedient that advantage be taken where necessary of its provisions on behalf of the farmer. The wife of the good agricultural hand is speedily learning to appreciate the lessened labour of a house with proper sanitary facilities and is beginning to demand these before moving to a new place—a factor of interest to the farmer if he is to secure the best class of worker.

Much of the work done under the schemes of the District Committees under the Housing (Rural Workers) Act has been very good. Guard should be kept however against the perpetuation of a type of house that would be better razed.



### MILK SUPPLY.

Dairy byelaws framed under the provisions of the Milk and Dairies (Scotland) Act, 1914, have now been approved for St Andrews District. New regulations governing the production of clean wholesome milk are now therefore in force throughout the County Landward Area.

In the majority of dairies, milk is produced under satisfactory conditions of byre and dairy structure, milking methods, equipment, and utensils and observance of cleanliness. In some dairies where milk-production, although a valuable adjunct, is in some respects a side-issue of farming operations, methods are not so good and cleanliness is apt to suffer when other work from climatic or other reasons falls behind and is regarded as more urgent.

There is ample room therefore for steady constant inspection and supervision of the dairying industry if milk is to be produced under the conditions which ought to apply to a food consumed as retailed and uncooked and if a reasonable endeavour is to be made to attain to the standard of the Dairy Regulations which each District Committee has adapted as desirable.

Steady progress is being made by Mr Anderson, County Veterinary Inspector, in his sphere of duty and one is glad to have his advice and the information he furnishes which is all to the advantage of the work. During 1928, the number of dairy cattle condemned by Mr Anderson in the Landward Area of the County under the Tuberculosis Order was 79, inclusive of 30 suffering from tuberculosis of the udder. In the case of 12 cows condemned for other manifestations of tuberculosis, tuberculous disease of the udder was found on *post-mortem* examination.

The bi-annual examination of dairy cattle at definite intervals recommended as expedient and necessary prior to the appointment of the County Veterinary Inspector is in measure being accomplished by Mr Anderson to the extent that the majority of dairies are now being visited twice yearly and doubtless visitation will be so devised as best to secure the purpose of the office.

Much valuable work is done by the County Veterinary Inspector on his round to secure observation of the precautions necessary to the production of a clean and wholesome milk supply.

Milk (Special Designations) Order, 1923 :—There are three graded herds licensed to sell designated milk in terms of the Order. Certified milk is produced by Mr Lohoar, Wester Balrymonth, St



Andrews, and by Lord Cochrane of Cults, at Hospital Mill Dairy, Cupar. Grade A (Tuberculine Tested) milk is produced at Wemyss Castle Dairy, Kirkcaldy. The herds have been periodically inspected and examined as also the methods of production of these milks. Chemical and bacteriological examinations undertaken at intervals throughout the year have shown percentages of butter-fat often much in excess of the standard of 3.5: the bacterial counts have been low in every case, an indication of proper milking methods, cleanly equipment and premises, and satisfactory attention to the details of production.

Pasteurised milks are also licensed for sale under the Order within the Landward area of the Districts of Dunfermline and Kirkcaldy, and are produced by Co-Operative Societies holding licences from Burghs situated within these Districts.

**NEW DAIRIES.**—Insistence is placed on the submission to the local authority of plans of new or any substantial alteration to existing dairy premises. Care and attention is given to secure that the structure shall be such as will secure the health and cleanliness of the cows and provide the means for the production of a wholesome milk.

The placard issued for permanent display in dairy premises on the "Duties of Dairymen and of Dairy Employees" in respect of "Infectious Diseases at Dairies" has proved informative and of value in preventive work.

### **REGULATIONS, CIRCULARS, &c.**

The following are some of the more important Regulations and Circulars, &c., which were received and dealt with during 1928.

The Public Health (Infectious Diseases) Regulations (Scotland), 1927. These Regulations came of force on 1st January, 1928, and were issued to all medical practitioners practising in the County.

The Public Health (Infective Jaundice) Amendment Regulations (Scotland), 1927, continued the principal Regulations of effect until 31st December, 1932, and were issued to all medical practitioners.

The Public Health (Condensed Milk) Amendment Regulations (Scotland), 1927, and the Public Health (Dried Milk) Amendment Regulations (Scotland), 1927, came of force in 1928.



Housing (Inspection of District) Regulations (Scotland), 1928, made by the Scottish Board of Health revoke similar Regulations in force since 1910.

Anthrax Order, 1928.

The Public Health (Chickenpox) Amendment Regulations (Scotland), 1928, continue the principal Regulations of effect until 31st December, 1930.

Circular, Scottish Office, No. 2273 of 22nd October, 1928, directing attention to the Merchandise Marks (Imported Goods) No. 3 Order, 1928, which provides for the marking of honey and fresh apples with indication of origin as defined in Section 10 of the Merchandise Marks Act, 1928.

Circular, Board of Agriculture for Scotland, No. 71,481, directing attention to the Agricultural Produce (Grading and Marking) Act, 1928, providing for grade designations of quality of produce, the marking of preserved eggs, &c.

## DISTRICT INFECTIOUS DISEASES HOSPITAL.

During 1928, the number of patients admitted for hospital isolation and treatment was 132 (scarlet fever 119, diphtheria 10, erysipelas 2, typhoid fever 1, and 5 cases of unspecified diseases). Of the patients treated, 58 were admitted from Cupar District (scarlet fever 53, diphtheria 5), 31 from the Burgh of Auchtermuchty (scarlet fever 27, diphtheria 2, erysipelas 2), 8 from the Burgh of Ladybank (scarlet fever 7, diphtheria 1), 28 from the Burgh of Newburgh (scarlet fever 25, diphtheria 2, typhoid fever 1), 6 from the Burgh of Falkland (scarlet fever 6), and 1 from the Burgh of Cupar (scarlet fever).

As Cupar Burgh Fever Hospital had been found unsatisfactory for the treatment of infectious diseases, the Town Council entered into negotiations for the admission of patients from the Burgh to the District Infectious Diseases Hospital, Auchtermuchty, and an



# Cupar District Report

## INFECTIOUS DISEASES.

During 1928, the number of persons notified as suffering from infectious diseases was 158 as compared with 129 notified in 1927 and the same number in 1926. The nature of the cases was:—Scarlet fever 67, diphtheria 7, erysipelas 11, puerperal fever 2, ophthalmia neonatorum 1, chickenpox 35, infantile paralysis 1, acute primary pneumonia 7, influenzal pneumonia 6, and tuberculosis 21 (pulmonary 11, non-pulmonary 10).

The number of patients removed to District Fever Hospitals was 71 (scarlet fever 65, diphtheria 6). Eight patients suffering from tuberculosis were treated in Glenlomond Sanatorium.

During 1928, scarlet fever was more prevalent, diphtheria less prevalent than in 1927. Early in the year cases occurred at Freuchie, the infection continuing in all probability by the non-recognition of the presence of the disease. There was no epidemic throughout the District, cases cropping up sporadically without apparent connection one with another. The prevalence of the disease may possibly be explained by the facilities provided for travel by the numerous motor-bus services.

## DISTRICT INFECTIOUS DISEASES HOSPITAL.

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Of the patients treated, 58 were admitted from Cupar District (scarlet fever 53, diphtheria 5); 31 from the Burgh of Auchtermuchty (scarlet fever 27, diphtheria 2, erysipelas 2); 8 from the Burgh of Ladybank (scarlet fever 7, diphtheria 1); 28 from the Burgh of Newburgh (scarlet fever 25, diphtheria 2, typhoid fever 1); 6 from the Burgh of Falkland (scarlet fever 6); and 1 from the Burgh of Cupar (scarlet fever).

As Cupar Burgh Fever Hospital had been found unsatisfactory for the treatment of infectious diseases, the Town Council entered into negotiations for the admission of patients from the Burgh to the District Infectious Diseases Hospital, Auchtermuchty, and an



Agreement for this purpose was reached and came of effect on 11th November, 1928. The District Hospital now serves all local authorities within Cupar District. During the War an arrangement was arrived at whereby persons suffering from infectious diseases resident in Cupar Burgh were admitted to Auchtermuchty Fever Hospital; the arrangement was renounced at the end of the War by the Town Council.

Accommodation at the Hospital has been improved by the provision of a new double window in a room of considerable size which was formerly so deficiently lighted as to remain unused. Wash-basin accommodation has been installed and the apartment now serves excellently as a brightly-lighted through-ventilated ward for isolation or observation purposes.

During 1928, the bed space of the Hospital was fully utilised, overflow accommodation being found at St Michael's Hospital, Leuchars, for a few cases as occasion required. The Matron and nurses have been kept very busy during the year but have discharged their onerous duties well and efficiently. Medical supervision continues in the competent hands of Dr Macmillan.

The Hospital premises are well maintained and furnishing and equipment is appropriate and satisfactory. One records with regret the death of Mr Ford who for many years served the Hospital faithfully and well as caretaker.

### **BUILDING BYELAWS.**

The sets of plans examined, criticised and reported on during 1928 comprised proposals to erect 6 new houses (1 of four apartments and 5 of three apartments), and to alter and add to 14 existing houses. The grant of the Government subsidy was approved in respect of 4 houses provided these were completed in terms of the Regulations governing assistance from Exchequer sources.

Building proposals regarding premises for other than housing purposes involved 4 new erections and alterations and additions to 3 existing buildings.

Plans were approved in respect of the erection of a large three-storeyed Nurses' Home for Fife and Kinross Asylum and of a wooden hutment of three apartments for the housing of seasonal workers.



## HOUSING.

The number of houses examined under the Housing (Inspection of District) Regulations and regarded as unfit for habitation was 5. Closing orders were made in respect of 3 houses. The defects of 3 houses were made good on representation to the owners.

Notices under Section 3 of the Housing Act, 1925, were served regarding 18 houses and 13 were reported rendered fit for habitation thereafter.

During the year, water closet accommodation was provided by owners in 22 cases.

The local authority approved the erection of two houses each of two apartments under Section III. of the Housing Act, 1925.

The number of houses furnished with water supply consonant with the terms of the Housing, Town Planning, &c., Act., 1919, was 19.

The number of houses examined on completion and approved for payment of subsidy was 10, of which one was within the Burgh of Ladybank.

HOUSING (RURAL WORKERS) ACT, 1926 :—Fourteen sets of plans were examined in respect of applications for grant under the Scheme of the District Committee under the Housing (Rural Workers) Act, 1926 ; of which ten were approved. Grant was refused in four cases ; the proposed work was however, undertaken by the owners. All work undertaken and completed during 1928 under the Act was examined and reported satisfactory prior to payment by the District Committee of the monetary assistance promised.

## WORKSHOPS.

The number of inspections in terms of the Factory and Workshops Acts and Orders was 90. Eighteen written notices were issued. The defects observed such as lack of cleanliness, defective floor drainage, insufficient sanitary convenience accommodation, &c., numbered 26 and were remedied on representation.

## ACCOMMODATION—SEASONAL WORKERS.

Byelaws in terms of Section 83 of the Housing Act, 1925, are now in operation and their provisions were reasonably enforced in respect of the housing of harvesters and potato workers on information received or otherwise coming to knowledge.



## OFFENSIVE TRADES.

**SLAUGHTER-HOUSES:**—There are seven private slaughter-houses, the annual licences of which were granted as they are in conformity with the Byelaws and are maintained and conducted satisfactorily. The slaughter-houses are situated at Auchtermuchty, Ceres, Cupar-Muir, Freuchie, Kingskettle, Springfield, and Strathmiglo.

**SLAUGHTER OF ANIMALS (SCOTLAND) ACT, 1928:**—This Act applies to the slaughter of animals in slaughter-houses and knackers' yards only and came into force on 1st January, 1929, except in so far as concerned certain excepted animals. Section 1 (2) of the Act provides that every animal to which the Act applies shall be instantaneously slaughtered or shall by stunning be instantaneously rendered insensible to pain until death supervenes. It is further provided that the slaughtering or stunning shall be done (a) by a person who is at the time a holder of a licence from the local authority, and (b) by means of a mechanically operated instrument in proper repair and of a type approved by the local authority. The District Committee approved a charge for licence of 5s per annum and 1s renewal, and also of a proprietary captive bolt pistol. Probably it would have proved wiser to have specified a "captive bolt" pistol only. One owner of a slaughter-house whose employees had used the "Greener" pistol for years was authorised to continue the use of these ball-firing pistols in the meantime.

**DAMSIDE HORSE SLAUGHTER-HOUSE:**—In terms of the Agreement set forth in the Annual Report, 1927, Mr Frank Gysels converted, with the approval of the District Committee, the substantial horse slaughter-house premises at Damside for the purposes of the conduct of a business as tallow-melter, hide factor and manufacturer of meat meal or fertiliser from the carcasses, in whole or part, of cattle and horses. The premises were appropriately fitted and equipped for these purposes and for the elimination and prevention of smells. The former dilapidated wooden buildings housing his I. W. E. L. and other plant for degreasing and meat meal manufacture were scrapped. I have received no complaint of any kind of the occurrence of obnoxious smells since the new premises and new plant were in full working order. Nor have I during surprise visits to Damside observed smells which I could regard as likely to prove a nuisance beyond the precincts of the works.

Mr Gysels submitted to the District Committee plans of a proposed new brick-built horse slaughter-house, which after slight amendment were approved. The building which adjoins his other offensive trade premises, although demarcated therefrom, was



completed apart from minor details at the end of the year. It is built on satisfactory lines and should prove appropriate for his purposes.

Byelaws regulating the businesses of tallow melter, hide factor and manufacturer of meat meal, manure or other like products from the flesh, bones, viscera, or offal of horses or cattle were approved by the District Committee and the Board of Health and came of effect during the year.

### **WATER SUPPLIES.**

**KETTLE SPECIAL WATER DISTRICT :—**This gravitation supply which has its source in Balreavie Loan, East Lomond, has not failed since augmented in 1924. In the interval there has been no year of marked drought. The water is of trustworthy potable quality.

**STRATHMIGLO SPECIAL WATER DISTRICT :—**A gravitation supply was turned on approximately three years ago which has so far proved ample in quantity. The source is the burn beginning in Glenvale, the valley between the West Lomond and Bishop Hill. There is no great storage (approximately 26,000 gallons): consequently in times of flood, the water is apt to be discoloured with suspended matter.

**PITLESSIE SPECIAL WATER DISTRICT :—**This gravitation water supply from an open reservoir and small filter appears to meet adequately the requirements of Pitlessie Village.

**FREUCHIE :—**This village has a gravitation supply which by recent extension has proved sufficient. The scheme is controlled and supervised by a Water Committee composed of residents of the village, the maintenance being secured by a toll on users. The supply is being laid-on increasingly within houses but pillar wells are likely to be required in the streets for some considerable time.

**GATESIDE :—**A gravitation supply owned privately has been made available to those desiring to lay on water within dwelling-houses.

**DUNSHALT :—**The water supply of this village remains as formerly reported. The present facilities are insufficient for the needs of the village.



### **DRAINAGE.**

There is only one Special Drainage District within Cupar District, viz., that of Freuchie. The sewage disposal works provide a fair effluent.

### **MILK SUPPLY.**

There are 62 registered dairies within the District, the number of cows therein being approximately 836. While some dairies are particularly satisfactory in respect of structure, equipment, and methods of production, many fall far below the standard of the Dairy Byelaws now in force and insistent supervision is necessary if betterment is to be attained.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923:—One designated milk is produced in the District, an application being received for licence to produce Grade A (Tuberculin-Tested) milk at Hospital Mill Dairy, Springfield, on behalf of Lord Cochrane of Cults. The dairy premises represent a high standard of construction, the lighting and ventilating provision being far in excess of the requirements of the Dairy Byelaws and the sanitary appointments of the byre are in accord with most recent practice. On examination on 5. 4. 1928, the highest bacterial count of the milk was 900 colonies per c.c., a very clean milk, and the butter fat content was 4.37 per cent., 0.87 per cent. in excess of the standard. On re-examination (chemical and bacteriological) in July, similar satisfactory results were observed and the issue of a licence to produce and retail certified milk was approved. The equipment and method of production of milk at Hospital Mill Dairy are excellent. The free ventilation of the byre during the severe frosty spell of the early months of 1929 without a sign of illness among the cows stalled therein is a lesson the majority of dairymen, who cannot be brought to believe that the cow is an open air animal, might well take to heart in their own interest and that of the consumer from the point of view of the prevention of tuberculosis.

### **MATERNITY AND CHILD WELFARE.**

No scheme of maternity service and child welfare obtains within the District.

MIDWIVES ACT, 1915:—Three midwives notified intention to practice during 1928. One emergency, in which medical assistance was sought, was intimated and three notifications of the laying-out of dead bodies were received.



## VITAL RETURNS.

The following is a summary of the vital statistics of the District set forth in tabular form at the end of this Report.

During 1928 there were 217 births (male 125, female 92), as compared with 235 in 1927. The birth-rate of 1928 was 14.7 per 1,000 of an estimated population of 14,742.

There were 18 illegitimate births equivalent to 8.29 per cent. of the total births.

Marriages numbered 71 equivalent to a crude marriage rate of 4.8 per 1,000 estimated population. The number of marriages in 1927 was 79.

The total deaths numbered 216 (male 104, female 112) equivalent to a corrected death-rate of 11.2 per 1,000 estimated population. There were 253 deaths in 1927 and the death-rate was 12.9 per 1,000.

The deaths of infants under one year of age numbered 19 equivalent to an infantile mortality rate of 88 per 1,000 births registered. The infantile mortality rate was 64 in 1927.

The death-rate from tuberculosis (all forms) was 0.61 per 1,000 estimated population, that from pulmonary tuberculosis being 0.47 per 1,000. In 1927 the death-rate from tuberculosis (all forms) was 0.60, and that from pulmonary tuberculosis was 0.54.

## MATERNITY AND CHILD WELFARE.



# Dunfermline District Report

## INFECTIOUS DISEASES.

During 1928 there were, excluding chickenpox, 357 persons notified as suffering from infectious diseases as compared with 358 in 1927.

The cases notified comprised :—Typhoid fever 5, scarlet fever 96, diphtheria 67, erysipelas 29, ophthalmia neonatorum 30, primary pneumonia 70, influenzal pneumonia 10, infantile paralysis 1, encephalitis lethargica 3, tuberculosis 46 (pulmonary 22, non-pulmonary 24). In addition 194 persons, mostly children, were notified suffering from chickenpox.

The number of patients removed for hospital and sanatorium treatment were :—Typhoid fever 5, scarlet fever 91, diphtheria 62, erysipelas 1, ophthalmia neonatorum 1, primary pneumonia 4, influenzal pneumonia 1, pulmonary tuberculosis 9, non-pulmonary tuberculosis 5, a total of 179.

Excluding chickenpox, the numbers of notifications of infectious diseases received in recent years were :—1928, 357 ; 1927, 358 ; 1926, 439 ; 1925, 406 ; 1924, 381.

In 1928 the incidence of scarlet fever was lower, that of diphtheria higher, than in 1927. No notification of puerperal fever was received in 1928 and the notified cases of tuberculosis were 4 less than in 1927.

Four cases of typhoid fever (typhoid fever 1, paratyphoid fever 3) occurred at Valleyfield. Of the paratyphoid cases two were in one family, there being a second case thirty-eight days after the first. No connection was traced between the affected households and investigation of food, milk and water supply proved negative : there was no history of the consumption of iced articles. The sources of infection were not discovered.

Nothing of the nature of an epidemic occurred during the year and there was no occasion for the closure in whole or part of any public school for the prevention of the spread of infection.

Measles and whooping cough were prevalent among young children during the year. The number of deaths from these diseases was 15 (measles 9, whooping cough 6). In comparison, the deaths from the other common infectious diseases were scarlet fever 1, diphtheria 3.



The persons (3) notified as suffering from encephalitis lethargica (sleepy sickness) had contracted that infection some years ago.

**WEST FIFE INFECTIOUS DISEASES HOSPITAL :—**The Combination Hospital which is situated just outwith Dunfermline Burgh Boundary at Rumbling Well is jointly administered by representatives of Dunfermline District Committee and the Burghs of Dunfermline, Cowdenbeath, Inverkeithing, and Culross.

The furnishing and equipment of the Hospital are thoroughly maintained and the administration of Dr Reekie, Medical Officer of Health, Dunfermline, and Miss Fraser, Matron, in their respective spheres is excellent.

Reference was made in the Annual Report of 1927 to the question of the extension of the Hospital. Accommodation for patients and staff has not grown with the increased population of the areas served and the changed and changing views of the need for hospital treatment of disease not solely, as was formerly held, for the protection of the public but as an essential in the interest of the life and health of the patient in view of the limitations of the housing and economic circumstances of the average household in a mining-industrial area. And this apart from the fact that the number of compulsorily notifiable diseases has been widely extended of recent years and that the beds at the command of the local authority must frequently be used for observation purposes and the treatment of the sequelae of infective conditions.

The accommodation of the Hospital was utilised to the full during 1928, and as it appeared desirable that the District Committee, as well as its representatives on the Committee of Management of the Hospital, should be aware of the routine working conditions prevailing therein and of the deficiencies of the administrative block for the nursing and domestic staff, a special Committee inspected the Hospital and thereafter reported unanimously in favour of extension, a finding which was homologated in due course by the District Committee. I understand that the other local authorities concerned in the Hospital arrived at similar decisions later.

**SMALLPOX HOSPITAL :—**The position remains as set forth in the Annual Report for 1927, viz., the Muircockhall building is derelict but patients requiring isolation will be admitted to the smallpox hospital of Kirkcaldy District at Fosterton. Doubtless the question of the establishment of one hospital for the County as a whole will prove more easy of settlement when the new Local Government Act is operative.



## **BUILDING BYELAWS.**

The sets of plans examined and reported upon during 1928 comprised proposals to erect 12 new houses (5 of three apartments and 7 of four apartments) and to alter and extend 5 existing houses. Proposals in respect of premises for other than housing purposes involved 3 new erections and alterations and additions to 5 existing buildings. The draft proposed new building bye-laws which were approved by the District Committee and submitted for adoption to the Board of Health still await action by that Department.

## **HOUSING.**

The number of houses built within the District during 1928 was 12, all by private enterprise, the Government subvention being granted in respect of 11.

During the years 1919-28 inclusive, the number of houses built within the District has been 618 (58 of two apartments, 468 of three apartments, 68 of four apartments, and 24 of more than four apartments).

The number of houses provided by the District Committee during the years 1921-25 was 158 comprising 8 of two rooms, 116 of three rooms and 34 of four rooms. No further building scheme is contemplated by the Committee in the meantime.

**HOUSING (RURAL WORKERS) ACT, 1926 :—**Good progress has been made during 1928, the approved applications under the Scheme in terms of the Act outnumbering those of each of the other districts of the County. Applications with relative particulars and plans were submitted for the repair, renovation and extension of 25 houses. All were approved, some after considerable amendment of the proposals originally submitted.

Time, care and attention are given to the perusal and criticism of all plans submitted under the Building Byelaws and the several Housing Acts in view of the importance of securing that reasonable building principles in aid of health will be observed and convenience in working ensured in so far as the offices of the house or duties of the housewife are concerned.

## **PUBLIC HEALTH AMENDMENT ACT, 1925.**

In terms of the Scheme under the provisions of this Act for supplying to diabetic patients the means of sufficient treatment, the District Committee furnished insulin to two persons during 1928 at a cost of £19 11s 4d. The cost of insulin furnished to a boy was however refunded by the parents.



## **WORKSHOPS.**

The inspections made of factories and workshops during the year numbered 60. Three written notices were issued in regard to defects and these were remedied without further procedure.

Inspection of bakeries falls within the purview of the Factory and Workshops Act. Sometimes the conditions and arrangements of bakehouses under which the raw materials are kept and the manufactured article is cooled and stored call for adverse comment. Similar criticism has on occasion to be made of butchers' premises. The front shop is presentably clean even to the metal hanging-fittings, knives, &c. The back shop, where much of the work of the establishment is done in some cases, is often 'another story,' falling far behind the standard of cleanliness of what is open to the public eye. The conditions referred to should not obtain in the production and preparation of food.

## **BYELAWS FOR SEASONAL WORKERS.**

The draft byelaws framed under the provisions of Section 45 of the Housing, Town Planning, &c., Act, 1919, a number of years ago remain unconfirmed. Experience shows that the housing of such workers stands in need of oversight and a decision should be secured by the District Committee early on the subject.

## **BURIAL GROUNDS.**

The new burial ground at Aberdour has now been laid out and steps should be taken for the closure of the two burial grounds in the village which were formerly reported on as unsatisfactory.

Elsewhere in the District, the burial grounds and cemeteries are in satisfactory condition and serve decently the purpose required.

## **SLAUGHTER HOUSES.**

The slaughter houses at Aberdour, Kelty and Kincardine are reported in fair sanitary condition by Mr Davison and the necessary action has been taken by the District Committee to ensure observation of the terms of the Slaughter of Animals (Scotland) Act, 1928.

## **MATERNITY SERVICE AND CHILD WELFARE.**

Reference was made in the Annual Report of 1927 to the absence of actual medical supervision of the mothers and children dealt with under the Maternity and Child Welfare Scheme ad-



ministered by the District Committee and to the steps deemed necessary and their estimated cost if a medical practitioner is to be appointed in an executive capacity. Doubtless the question will be considered with other changes imminent in local administration when the Local Government (Scotland) Act, 1929, comes of effect.

On the resignation of Nurse Roy, Miss S. M. Beddie was in February appointed Health Visitor for the central area of the District in her place. Nurse Beddie rapidly acquired an exact knowledge of the duties and proved herself a competent and conscientious health visitor.

The annual reports of all three nurses on the health-visiting and midwifery work of 1928 have been submitted to the Department of Health and the Central Midwives Board and the District Committee is cognisant of their terms. It is pleasing that the Central Department has recorded its appreciation of the matter and form of presentation of the reports of the Health Visitors.

During 1928, the Health Visitors submitted applications for additional nourishment on behalf of 162 families of which 153 related to families in the landward area and 9 to Inverkeithing Burgh. No application was made in respect of Culross Burgh during the year. Of the applications from the landward area, 134 were approved and additional food was granted to 23 expectant mothers, 25 nursing mothers, to 78 families in respect of children under five years of age and to 8 families in respect of nursing mothers and children.

The total of the accounts passed for payment during 1928 for nourishment supplied under the Scheme was £103 9s 9d as compared with £186 0s 11d in 1927 and £3663 4s 1d in 1926.

The District Committee authorised the admission of two children to the Home for Crippled Children, Edinburgh, for treatment for malformations resulting from rickets. Both children are much improved but are still at the moment of writing inmates of the Home.

MIDWIVES (SCOTLAND) ACTS, 1915 AND 1927.—My Annual Report as Medical Officer to the Local Supervising Authority has been submitted to the Central Midwives Board. Twenty-nine midwives notified their intention to practice in Dunfermline District during 1928 but three of these left the District during the year. There were 69 cases of emergency in midwives' practice where medical assistance was sought. During the year all the midwives resident in the landward area were furnished with copies of the revised Rules issued by the Central Midwives Board.



Twenty-eight claims were received from medical practitioners in respect of emergency calls by certified midwives in terms of the above Acts. Of these, twelve patients were found on inquiry to be in necessitous circumstances and the accounts, amounting to £20 16s were defrayed by the District Committee in terms of the Maternity Service and Child Welfare Scheme; in eleven cases the District Committee were recommended to recover the amounts involved which totalled £16 14s 5d; in two cases the doctors were paid privately by the patients concerned; one doctor withdrew his claim on learning that recovery of the amount involved would be sought from the patient; two accounts were returned as they did not fall within the provisions of the Acts.

**DAVAAR MATERNITY HOME :—**During 1928 thirty-seven women from the landward area of Dunfermline District were admitted to the Home. In addition seven women were admitted from Inverkeithing, that Burgh being a partner in the Maternity Scheme administered by the District Committee. Of the women admitted from the landward area, five were necessitous and were treated at the cost of the District Committee: the remaining women contributed in all the sum of £99 13s 0d. The account submitted and paid by the District Committee for the maintenance of patients in the Home for the year ending 15th May, 1928, amounted to £333 17s 9d.

### **VITAL RETURNS.**

During 1928 the number of births was 671 (male 353, female 318) as compared with 638 in 1927. The birth-rate for 1928 was 18.4 per 1,000 of an estimated population of 36,514.

Illegitimate births, 41 in number, were equivalent to 6.1 per cent. of the total births.

The marriages numbered 161, as compared with 171 in 1927, the marriage-rate of 1928 being 4.4 per 1,000 estimated population.

The deaths from all causes were 361 (male 200, female 161), the death-rate corrected for transfers and adjusted for age and sex distribution being 10.8 per 1,000. The deaths and death-rate of 1927 were 356 and 10.7 per 1,000 respectively.

Of the total deaths, 54 were those of children under one year, the infantile mortality rate being 80. The infantile mortality rate was 99 in 1927.

The death-rate from tuberculosis was 0.60 per 1,000, that from pulmonary tuberculosis being 0.27 per 1,000.

The death-rate from the principal epidemic diseases was 0.60 per 1,000 as compared with 0.33 per 1,000 in 1927.



# Kirkcaldy District Report

## INFECTIOUS DISEASES.

During 1928 there were 741 persons notified as suffering from infectious diseases (scarlet fever 229, diphtheria 103, erysipelas 29, puerperal fever 8, ophthalmia neonatorum 13, chickenpox 186, infective jaundice 1, acute primary pneumonia 91, acute influenzal pneumonia 6, tuberculosis 75 (pulmonary 27, non pulmonary 48).

Excluding chickenpox, the number of notified cases was 555 as compared with 701 in 1927.

The number of cases removed to hospital was 376 of whom 353 were treated at the Infectious Diseases Hospital and 23 at Glenlomond Sanatorium.

The number and age distribution of the persons notified as suffering from infectious diseases with the numbers of each disease removed for institutional treatment are set forth in the table at the end of this report.

KIRKCALDY INFECTIOUS DISEASES HOSPITAL, THORNTON.—The number of patients admitted and under treatment during 1928 was 565, viz. :—Scarlet fever 363, diphtheria 158, pneumonia 22, puerperal sepsis 7, tuberculous meningitis 1, ophthalmia neonatorum 5, cerebro spinal meningitis 2, typhoid fever 1, erysipelas 4, and other conditions 2. The number of patients admitted from the Districts of the Local Authorities who are partners in the Hospital Combination were :—Kirkcaldy District 383, Lochgelly 90, Leslie 28, Markinch 11, Dysart 46, Cowdenbeath 2, Dunfermline Burgh 3, Dunfermline District 2.

The Hospital which is well and efficiently administered and maintained in all respects, continues to serve adequately the requirements of the District and the Burghs of Lochgelly, Dysart, Leslie, and Markinch. The opening of the recently-built observation wards proved a welcome and most useful addition to the accommodation, and has been fully occupied since.

The equipment of the Hospital in regard to furnishings, laundry, disinfecting apparatus, &c., is satisfactory in all respects.

Of recent years the accommodation for patients has grown out of proportion to that provided for nursing and domestic staff, and kitchen space is unduly cramped for the number of patients



treated and the personnel employed. This aspect of the Hospital premises forces attention at times when there is an undue call on ward space but the question of remedy may be delayed pending the changes anticipated from recent legislation.

**KIRKCALDY DISTRICT SMALLPOX HOSPITAL.**—The Hospital is maintained in a condition to receive patients on an hour's notice. There was fortunately no occasion for the use of the premises during 1928. I understand that the negotiations with local authorities throughout the County for recognition of the hospital as the one and only centre for the treatment of smallpox continue. The question will doubtless be determined speedily on the coming into operation of the Local Government (Scotland) Act, 1929.

**SCHOOL CLOSURE.**—There was no occasion for the closure in whole or part of any school during 1928 for the mitigation or prevention of infectious disease.

### **WATER SUPPLIES.**

There are three sources of public gravitation water supply to the District, viz., (1) from the District Committee's Reservoir at Glenfarg—the main supply ; (2) from Glendevon Reservoir, the property of Dunfermline District Committee, which is in use for the high-lying communities situated near the western boundary of the District ; and (3) from Wemyss Water Trust for townships and villages in the south-eastern area of the District.

All three sources provide wholesome potable water. There is abundant work in this sphere of the District Committee's activities owing to the steady extension of the Glenfarg supply throughout the District, the additional demand as a result of the increasing installation of water and water-carriage sanitary fitments within houses, the laying-on of the supply to farm and other premises, the renovation and renewal of piping in larger bore where formerly existing schemes had to be taken over and the steady repair work necessary in an area where subsidence from mining is a common incident.

### **DRAINAGE.**

Special Drainage Districts are numerous and the number is being added to. Many communities have efficient drainage schemes. Others, and some of these are special drainage districts of many years standing, urgently require drainage in the general interest, as, for example, Kennoway, Kinglassie, Coaltown of Balgonie and Milton of Balgonie.



In the villages named, the need is clamant : instructions have been given for the preparation of schemes by the District Committee but so far nothing has materialised. Without the outlines of a scheme, it is impracticable for many of the residents who desire to provide themselves with such essential household fitments as sink, water-closet and bath to secure what they wish as any work and expense undertaken now may have to be scrapped later on the adoption of a public scheme.

The question of the efficient treatment of effluent sewage remains to be dealt with. Apart from the towns and villages situated on the seaboard, the preponderating majority of the population of the District is resident within the water-shed of the River Leven and the crude sewage of the several drainage districts (excluding that of the Auchterderran Special Drainage District, and the Burgh of Leslie which have Sewage Disposal Works) is disposed of therein as well as the trade-wastes from the factories on its banks. The River Leven is the main sewer of the District.

### **BUILDING BYELAWS.**

The number of plans submitted for examination and report in 1928 comprised proposals to erect 53 new houses (8 of two apartments, 42 of three apartments and 3 of more than four apartments) and to alter and extend 20 existing houses. In addition two plans were submitted for the conversion of existing buildings into dwelling-houses.

Proposals regarding premises for other than housing purposes involved 22 new erections and additions to 12 existing buildings.

Grant of the Government Subsidy (Certificate B) was approved after examination on completion in accordance with the Regulations of twelve dwelling-houses.

### **HOUSING.**

The District Committee continues its building programme under recent Housing Acts and schemes were completed at East Wemyss ; Gray Park, Little Raith ; Lumphinnans ; Lochore ; and Woodend, Auchterderran. Further building is contemplated by the District Committee in extension of existing schemes and in areas where no houses have hitherto been built by the Committee.

**HOUSING (INSPECTION OF DISTRICT) REGULATIONS.**—The number of houses inspected in terms of these Regulations and under the Public Health Act, 1897, was 553. The number considered



unfit for occupation was 116, of which 83 were represented for closure. Closing orders were made in respect of 77 houses. Ten houses were rendered habitable on representation of their condition to the owners. Four houses were repaired and made good after the issue of closing orders.

Seven notices were served under Section 3 (1) of the Housing Act, 1925, and four houses were made habitable under this section. Closing orders became operative in regard to seven houses under Section 3 (1) of which two were repaired and rendered habitable by the Local Authority under Section 3 (2) of the Housing Act, 1925.

HOUSING (RURAL WORKERS) ACT, 1926.—Plans, specifications, &c., in respect of the renovation, repair and extension of ten houses in accordance with the terms of the District Committee's Scheme under this Act were examined and reported upon. All were approved, some only after the work originally proposed to be done by the owner had been considerably extended and improved in view of the generous terms of the grant furnished by the District Committee.

Too little advantage is being taken by owners of property of the opportunities to alter, repair and renovate cottages and cottar houses under the Housing (Rural Workers) Act, 1926. There is scope for much to be done under the Act within the District and the fixed time during which the Scheme obtains is drawing to a close.

Many housing investigations have been made during the year of which the District Committee is cognisant and which need not be summarised here. The work of the Committee is however commensurate with the size, population and importance of the District.

### **PUBLIC HEALTH AMENDMENT ACT, 1925.**

In terms of the Scheme for the furnishing of diabetic patients with the means of sufficient treatment which they could not without hardship supply for themselves, insulin was provided by the local authority for seven patients at a cost of £41 4s 8d. The cost of the insulin was, I understand, refunded in respect of two patients. Food furnished during the year amounted to £17 7s 8d for two patients, of whom one left the District after an expenditure of £1 10s 10d had been incurred.

A female patient was granted free travelling facilities to Edinburgh Royal Infirmary (Dietetic Clinic).



### WORKSHOPS.

Inspections made under the Factory and Workshops Act, 1901, numbered 370 (factories 56, workshops 205, work-places 109) and the conditions obtaining were found generally satisfactory. Defects observed and remedied numbered six, there being in each case insufficient sanitary accommodation.

### SLAUGHTER-HOUSES.

There is one public and three private slaughter-houses within the District. The public slaughter-house is that of Markinch Burgh and is just outwith the Burgh boundary. The private premises are situated at Cardenden (two) and at East Wemyss (one); all are maintained in reasonable sanitary condition.

The procedure in regard to meat inspection continues as set forth in previous Annual Reports.

Four carcasses only were condemned and destroyed during the year.

### POLLUTION OF RIVERS.

The conditions described in former reports continue so far as the Leven is concerned. The state of the River is not likely to improve with the multiplication of water-carriage sanitary fitments. In its middle and lower reaches, the Leven is an open sewer and a nuisance in terms of the Public Health Act. A like description applies to its main tributary, the Ore, and its contributory burns.

### MATERNITY SERVICE AND CHILD WELFARE.

The Scheme administered by the District Committee is inclusive of the Burghs of Kinghorn, Leslie and Markinch. During 1928 the Burgh of Burntisland withdrew from the Combination in favour of operating a scheme within its own area.

No change has occurred in the staff during 1928 and the work continues on the lines frequently described in the past. Reference was made in the Report for 1927 to the broadening of the sphere of work. This question may well be delayed however, pending the administrative and executive changes likely to follow the operation of the Local Government (Scotland) Act, 1929.



The annual reports of the three nurses on the health visiting work and that under the Midwives Act have been submitted to the Department of Health and have been printed at length in the Minutes of the District Committee. Reports have also been made to each of the Burghs within the scheme on the work within their areas during 1928.

The total births within the area covered by the Scheme was 1,224, of which 9 only were not notified as required by the Notification of Births Acts. Still-births numbered 43, premature births 36. There were 17 plural births. The births of 896 infants were supervised by medical practitioners, 328 by midwives.

Of the homes visited, 1,097 were described as "clean," 102 as "indifferent" and 7 as "dirty."

The numbers of visits paid by the Health Visitors were:—Expectant mothers, 909; infants and nursing mothers, 7,150; children 1-5 years, 7,222. Visits as Assistant Inspectors of Midwives numbered 106 and as Tuberculosis Nurses 1,501. In all, 16,888 visits were made by the Health Visitors in 1928.

ADDITIONAL NOURISHMENT.—During 1928 applications for food were received in respect of 144 families of which 132 resided in the landward area and 12 in burghs.

Of the landward applications, 114 were authorised, grants of food being made to 13 expectant mothers, 34 nursing mothers, to 14 families in respect of mother and children and to 53 families on behalf of children under 5 years.

The food supplied is mainly milk and oatmeal, oatflour, sometimes cod liver oil, &c. Proprietary preparations of food, milk, &c., are avoided as much as possible.

The accounts authorised for payment by the District Committee in respect of food granted amounted to £117 6s 5½d.

MIDWIVES ACTS, 1915 AND 1927.—The annual Midwifery Report has been submitted.

Twenty-two midwives notified intention to practise in 1928. One certified midwife died and two removed from the District. There were 56 cases of emergency in midwives' practice for which medical assistance was sought. Midwives were furnished with copies of the Revised Rules of the Central Midwives Board issued in 1928.



Twenty-nine claims by medical practitioners in respect of services rendered on the calls of midwives were received. Of these on investigation 17 families were regarded as necessitous, the District Committee defraying the accounts which amounted to £30 10s. Recovery of the fees paid to medical practitioners was recommended in 8 cases, the amount involved being £11 6s 6d. Three accounts were returned for the medical practitioner to secure payment privately. One account was disallowed on account of lapse of time.

KIRKCALDY MATERNITY HOME.—During 1928, 33 patients were admitted to the Home from the landward area of Kirkcaldy District and two from Kinghorn Burgh. Of these 35 cases, 5 were wholly necessitous, 6 partly necessitous, while one patient's account was still outstanding at the close of the year. The fees received from patients during the year amounted to £69 8s. The account submitted to the District Committee by Kirkcaldy Town Council in respect of the patients treated in the Home from 16th May, 1927, to 15th May, 1928, amounted to £207 16s.

### MILK SUPPLIES.

The number of dairies in the District is 116, the number of cows kept at the close of the year being 2,940. The standard of cleanliness both of premises and animals is satisfactory.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.—Grade A (Tuberculin Tested) Milk is produced at Wemyss Castle Dairy. The milk was sampled on 20th July, and the bacteriological count was 3,400 per c.c. The colon test was negative in 1 c.c. and the butter fat was 4.90. The milk was thus well within the standard required.

Buckhaven Co-Operative Society retail pasteurised milk in accordance with the provisions of the Milk (Special Designations) Order within the District. A sample of the milk taken on 20th July gave a bacteriological count of 29,500 colonies per c.c. while the colon test was negative in 1 c.c. The milk was thus in conformity with requirements.

### VITAL EVENTS.

During 1928 there were 1,010 (males 537, females 473) births registered: in 1927 there were 1,019 births. The birth-rate of 1928, corrected for transfers, was 22.6 per 1,000 of an estimated population of 44,607.



Illegitimate births numbered 63, the illegitimate birth-rate being 6.2 per cent. of the total births.

There were 203 marriages registered in the District, the crude marriage-rate being 4.6 per 1,000. In 1927 the number of marriages was 200.

The deaths from all causes were 497, the death-rate corrected for transfers and adjusted for age and sex distribution being 12.3 per 1,000. In 1927 there were 508 deaths, the death-rate being 12.6 per 1,000.

The deaths of infants (under one year) numbered 94, equivalent to an infantile mortality-rate of 93. The infantile mortality-rate of 1927 was 81.

The death-rate from all tuberculosis was 0.69 per 1,000; that from pulmonary tuberculosis was 0.34 per 1,000: the similar rates for 1927 were 0.63 and 0.40 respectively.

The death-rate from the principal epidemic diseases was 0.96 per 1,000 as compared with 0.78 in 1927.

#### MILK SUPPLIES.

The number of dairies in the District is 116, the number of cows kept at the close of the year being 2,940. The standard of cleanliness both of premises and animals is satisfactory.

Milk (Special Designations) Order, 1923.—Grade A (Tuberculin Tested) Milk is produced at Wemyss Castle Dairy. The milk was sampled on 20th July, and the bacteriological count was 3,400 per c.c. The colon test was negative in 1 c.c. and the butter fat was 4.90. The milk was thus well within the standard required.

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# St Andrews District Report

## INFECTIOUS DISEASES.

During 1928 there were notified, excluding chickenpox, 119 persons suffering from infectious diseases, viz., scarlet fever 56, diphtheria 26, erysipelas 3, puerperal fever 1, ophthalmia neonatorum 1, infantile paralysis 2, primary pneumonia 11, and tuberculosis 19 (pulmonary tuberculosis 8, non-pulmonary tuberculosis 11). In 1927, 93 persons were notified; in 1926, 98.

During 1928 there were 64 children notified as suffering from chickenpox.

The nature and numbers of the cases removed for hospital treatment and isolation were:—Scarlet fever 55, diphtheria 25, pulmonary tuberculosis 3, non-pulmonary tuberculosis 2, a total of 85. Tuberculosis is treated at Glenlomond Sanatorium. The common infectious diseases from the southern parishes of the District are treated at Ovenstone Hospital, the property of the District Committee, while those from the northern parishes enter St Michael's Hospital, the property of a combination of local authorities (St Andrews District, Cupar District, Newport Burgh, Tayport Burgh).

During the early months of the year, scarlet fever occurred sporadically among the communities along the southern seaboard area of the District. In April, a number of children attending Forgan School contracted scarlet fever; all children in attendance were examined and kept under observation for missed cases but the outbreak ceased, so far as could be ascertained, on 21st April—the date of onset of the last case.

On June 9th, 1928, Dr Stewart, Medical Officer of Health, Newport, telephoned reporting the occurrence of two cases of scarlet fever on 27th May, a further case on 7th June, and three cases on 8th June, the common milk supply of all six patients being that of Mr Stanford, Flass Farm (a dairy farm of approximately 30 cows). Dr Stewart was suspicious of milk infection and desired investigation. As two cases of scarlet fever in children aged 8 and 9 years had occurred at Flass Farm Cothouses, the onset of illness being 6th and 7th June, the conditions were investigated and preventive precautions were taken regarding the milk, milkers and infected family of which the mother and an adult daughter served as milkers. The daughter also served as cleaner of Forgan School where scarlet fever had occurred six weeks previously and of which her brothers and sisters were pupils.



Further cases continued to occur in Newport Burgh and at the dairy-farm until 11th June, the apparent common factor being the milk-supply, but in all the cases, so far as I could judge, the infection seemed to have been contracted on or prior to 9th June. Suspicion fell on the milk with apparent justification. The dairy however is the largest supplying the Burgh of Newport and the milk is retailed in small quantity mostly. The milk supply was not stopped when the cases occurred.

Commerton House, a holiday-home, where twenty-five children from Dundee are always in residence for a fortnight at a time, is supplied with milk from Flass Farm Dairy. The milk is consumed uncooked. No case of scarlet fever, sore throat or other illness occurred at the Home during the weeks the dairy farm was under supervision—a fact difficult of explanation if the milk was the source of the scarlet fever infection.

In October a few cases of scarlet fever occurred among the pupils of Colinsburgh School. On investigation, I found an unrecognised case in a girl-pupil (profuse desquamation).

Chickenpox was frequent among school children at Largo in July.

SCHOOL CLOSURE.—This measure for the limitation or prevention of the spread of infection was not necessary in 1928.

ST ANDREWS DISTRICT INFECTIOUS DISEASES HOSPITAL, OVENSTONE :—The patients admitted during 1928 numbered 80 :—Scarlet fever 44, diphtheria 33, typhoid fever 1, measles 2. The local authorities contributing the cases were :—St Andrews District 60, Kirkcaldy District 2, Anstruther-Easter 5, Anstruther-Wester 2, Crail 1, Elie 1, Kilrenny 5, Pittenweem 2. Two cases of measles admitted from the Landward area were paid for privately.

The Hospital is well maintained and efficiently administered by the Medical Officer (visiting) and Miss Newbigging, Matron.

Reference was made in the Report for 1927 to the question of the extension of the Hospital by the provision of an observation block of four rooms, duty room, offices, &c. Plans of the proposed pavilion were approved by the District Committee and submitted to the Board of Health, the latter authority suggesting delay in view of forthcoming changes in local government administration.

I record with sincere regret the death of Dr Pirie who served well and conscientiously for many years as Medical Officer with great acceptance to all who fell to his care and attention. Dr Page, Pittenweem, was appointed after an interval as Medical Officer.



**ST MICHAEL'S JOINT INFECTIOUS DISEASES HOSPITAL, LEUCHARS :—**The number of patients admitted for treatment during 1928 was 65 :—Scarlet fever 55, diphtheria 8, erysipelas 1, measles 1. The local authorities contributing the cases were :—St Andrews District 20, Cupar District 13, Newport Burgh 27, Tayport Burgh 3, Falkland Burgh 1, and Newburgh 1. A number of cases were admitted from authorities in Cupar District, including the District Committee, owing to pressure on the accommodation of Auchtermuchty Fever Hospital.

St Michael's Hospital is efficiently maintained and continues to meet satisfactorily the requirements of the local authorities jointly concerned in the Hospital.

**WILLIAMSTEAD SMALLPOX HOSPITAL.**—The question of the closure of this Hospital has been approved by the District Committee but awaits the decision of Cupar District Committee. Authority has been given by the District Committee for the treatment at Kirkcaldy District Smallpox Hospital of any case that may occur in the interval until that institution is recognised as the only hospital for smallpox throughout the civil County.

There was no occasion for the opening of Williamstead Hospital during 1928.

### **WATER SUPPLIES.**

There are several special water districts for the populous communities within the Landward District. The Special Water Districts of Upper and Lower Largo, the combined district of Elie, Earlsferry, and St Monance, the districts of Leuchars, Dunino, and Largoward call for no special comment. Water supply proved sufficient during 1928, rainfall being ample.

**GUARDBRIDGE SPECIAL WATER DISTRICT :—**Complaint was made by the Guardbridge Paper Company in the early months of 1928 of the quality of the supply which is gathered above and to the west of the village of Balmullo, the works consisting of storage reservoir, filter beds and clean water well. Samples were taken at the works and in the village of Guardbridge for analysis, the County Analyst reporting both samples wholesomely potable and fit for all domestic purposes. Later, complaint was made of lack of pressure in the distributing pipes at Guardbridge, the head of water being stated to be about half the normal. The complaint was justified as leakage of approximately 30,000 gallons per day was proved, the defects being found in an old six-inch main taken over from the Paper Company about thirty years ago when the gravitation supply was installed. The old portion of the main was renewed on a somewhat different route and the trouble ceased.



Opportunity was taken to remedy a leak in the bank of the reservoir and to secure the repair of certain minor defects, the filter sand being also renewed at the same time. The reservoir has recently been emptied and cleared of a profuse growth of water-weed. The works are at present in efficient condition.

### **DRAINAGE.**

The special drainage districts are Largo, St Monance, Leuchars, and Colinsburgh. The effluents of Largo and St Monance discharge to the Firth of Forth without, so far as I have observed, pollution of the adjoining beach: those of Leuchars and Colinsburgh enter watercourses and are not, to my knowledge, the subject of complaint.

### **BUILDING BYELAWS.**

During 1928 plans were examined and reported upon dealing with proposals to erect twenty-two houses (11 of three apartments, 10 of five apartments, and 1 of eight apartments) and to alter and extend thirty existing houses. Proposals regarding premises for other than housing purposes involved five new erections and additions to ten existing buildings. Twelve of the proposed new houses were approved for grant of the Government subsidy (Certificate A).

New houses completed during the year in accordance with regulations governing the grant of the Government subsidy (Certificate B) numbered ten (1 of three apartments and 9 of four apartments).

### **HOUSING ACTS.**

During the year one house which was so old and dilapidated as to be in a dangerous condition was closed. Otherwise, no action has been taken regarding damp, defective and unworthy houses as no better alternative accommodation is available within the District and active procedure under the Housing Act would merely drive residents from the landward area or overcrowd other dwellings.

**WATER CLOSETS, WATER SUPPLY AND SINKS:—**No intimations of insufficient water closet accommodation or notices to provide houses with water supply were issued during the year. There is need for the District Committee operating the statutory powers with which it is endowed for the installation of these essential facilities and this is more particularly the case as regards St Monance, a special water and drainage district of many years standing and recently created a special scavenging district.



The population of St Monance Special District at the Census of 1921 was 1,796.

In 1924 old-standing complaints from St Monance were renewed regarding the disposal of night soil, &c., in the street channels and gullies. The following excerpt from the report of Mr Macrae, Sanitary Inspector, of 17/7/1924 summarises his finding:—"The sole cause of this long standing nuisance, as has frequently been pointed out, is the want of water closets for the houses. Within a short distance of the place complained of there are from two to three dozen houses which have neither water closets nor drains and there is no practical remedy except to have these provided. The same practice obtains at one or two other parts in the village and the cause and the remedy required are the same."

By instruction of the District Committee, a sanitary survey of the village was made, Mr Macrae reporting in November, 1924, that of approximately 350 houses inspected, 139 houses were without water closet or sink, 14 houses had water closet but no sink and 50 houses had a sink but no water closet.

After an interval intimations were issued for remedy of the deficiencies but no further effective step has been taken.

On 27th November, 1928, Mr Just, Sanitary Inspector, in reporting on an inspection of 65 of the working-class houses of St Monans gave the position in regard to sanitary convenience fitments as follows:—"There is however a very noticeable want of the introduction of sanitary fitments into the houses, and of the 22 one-roomed houses inspected:—16 houses have no W. C. and no sink, 5 houses have outside W. C. but no sink, 1 house has sink but no W. C. Of the 32 two-roomed houses visited:—30 houses have no W. C. and no sink, 6 houses have no W. C. but have sink introduced, 3 houses have outside W. C. but no sink. Of the 4 three-roomed houses visited:—3 houses have no W. C. and no sink, 1 house has no W. C. but sink introduced."

In a number of houses I have visited in St Monance, women and men, particularly the former, have spoken strongly of the need for sink and water closet facilities in their houses and of what the lack of these means in household inconvenience and dirty insanitary work fertile of smell and nuisance.

The District Committee has decided that the requirements in new housing of St Monance are likely to be met by private building enterprise but the question of better sanitary facilities for existing houses remains where it did.



In my opinion the District Committee should again consider the duty definitely laid upon it by Statute to require the provision of water supply within houses and of a water closet for every family household.

**HOUSING (RURAL WORKERS) ACT, 1926:**—This Act became operative in terms of the District Committee's Scheme in January, 1928. A small advertisement was published by the Committee with a view to making the terms of the Act and of the grant or loan available known but little advantage has so far been taken of the scheme. Applications were received and approved in regard to the repair, renovation and extension of ten cottar houses in 1928.

### **PUBLIC HEALTH AMENDMENT ACT, 1925.**

Insulin was supplied to two patients during 1928 at a cost to the District Committee of (approximately) £9 13s.

### **FACTORIES AND WORKSHOPS.**

Only minor defects remedied on representation came to light during inspections, 52 in number.

### **SLAUGHTER-HOUSES.**

These call for no special comment, reasonable cleanliness being observed. The Slaughter of Animals (Scotland) Act, 1928, came into operation at the end of the year, a humane killer of the captive-bolt type being approved for use by the District Committee.

### **MATERNITY SERVICE AND CHILD WELFARE.**

The scheme of the District Committee is by agreement in operation within the Burghs of Anstruther-Easter, Anstruther-Wester, Kilrenny, and Crail. There are two health-visitors, Nurse Brown working the northern area and Nurse Bruce the southern inclusive of the four burghs.

The number of births in the area during 1928 was 277 (landward 220, burghal 57) of which 7 were not notified as required by the Act. Of the births, 153 were males, 124 females. Still-births numbered 10, premature 9, plural 3, and illegitimate 23. The deaths reported by the Health-visitors numbered 10. Of 275 houses visited, those reported otherwise than "clean" were 65 "indifferent" and 1 "dirty."



The numbers of visits made by the health visitors were :—Expectant mothers 251, infants and nursing mothers 2,642, children 1-5 years 1,704 ; in supervision of midwives 29, and of tuberculous patients 362.

The annual reports of the nurses have already been submitted furnishing detailed information of the work done.

Two families in necessitous circumstances were granted food, the cost being £1 5s 6d.

**MIDWIVES ACTS :—**Six midwives notified intention to practice within the District : no breach of the Rules of the Central Midwives Board came to knowledge during the year.

### **MILK SUPPLY.**

Byelaws in terms of the Milk and Dairies Act, 1914, were finally approved by the Committee and Board of Health and are now in operation.

Certified milk in terms of the Milk (Special Designations) Order, 1923, is produced at Wester Balrymonth Dairy Farm and investigation of the health of the cows, of the methods of production and of the chemical and bacterial content of the milk proved these satisfactory and well within the standard of requirement during 1928.

### **VITAL EVENTS.**

The population of the District estimated to the middle of 1928 is 14,509. The estimated population is the basis of the following rates.

The births registered in the landward area numbered 226 (males 116, females 110), equivalent to a birth-rate of 15.6 per 1,000. In 1927, births numbered 235 ; in 1926, 235 ; in 1925, 252 ; and in 1924, 279.

There were 22 illegitimate births, the illegitimate birth-rate being 9.7 per cent. of the total births.

The marriages registered were 77 as compared with 82 in 1927. The crude marriage-rate of 1928 was 5.3 per 1,000.

The deaths from all causes numbered 173 as compared with 192 in 1927. The death-rate of 1928 was 10.2 per 1,000.



The deaths of infants under 1 year were 7 as compared with 23 in 1927. The infantile mortality-rate was 31 : in 1927 the infantile mortality-rate was 98 per 1,000 births registered. (The infantile mortality-rate is the number of deaths under one year as a proportion of the births for the same period.)

The death-rate from tuberculosis was 0.48 per 1,000 : that of pulmonary tuberculosis was 0.28 per 1,000. The corresponding figures for 1927 were—tuberculosis death-rate 0.82 per 1,000, pulmonary tuberculosis death-rate 0.55 per 1,000.

The death-rate from measles, scarlet fever and diphtheria was 0.34 per 1,000.



## Sale of Food and Drugs Acts, Orders, &c.

During 1928, eight hundred and sixty-seven samples of food and drugs were taken by the County Sampling Officers, under my direction as Chief Sampling Officer, and analysed and reported upon by the County Analyst. Of these, eight hundred and forty-seven were official samples and twenty were test samples. On analysis, thirty-one official samples and five test samples were found not to be of the nature and substance of the article demanded. The nature and number of the adulterated official samples were sweet milk, fifteen; whisky, four; sausages, five; meat sausage, one; mince, one; white pepper, one; wine (Enervin Tonic), one; extract meat and malt wine, one; Glendinning's Beevinalt, one; polony, one. The adulterated test samples were sweet milk, four; whisky, one.

Of the vendors of the thirty-one adulterated official samples, fourteen were fined in sums varying from 10s 0d to £4, a total of £29 10s 0d, whilst in three cases proceedings were dropped on payment of £1 each towards expenses. No proceedings were taken in eight cases, three of these being in respect of samples of Meat and Malt Wine, Enervin Wine Tonic and Glendinning's Beevinalt for which there is no official standard. In three cases the vendors were warned whilst three were discharged not guilty.

The following statement sets forth the work undertaken under the Acts by the Sampling Officers of the four County Districts:—

**CUPAR DISTRICT.**—Official samples, sixty-five, of which two were adulterated; test samples, ten, of which three were adulterated: seventy-five samples in all.

**BURGHs IN CUPAR DISTRICT.**—Official samples, one hundred and three, of which five were adulterated; test samples, five, all genuine: one hundred and eight samples in all.

Total samples taken, therefore, numbered one hundred and eighty-three of which one hundred and sixty-eight were official and fifteen test samples.

**DUNFERMLINE DISTRICT.**—Official samples, seventy-two, of which four were adulterated; test samples, three, all genuine.



BURGHs IN DUNFERMLINE DISTRICT.—Official samples, sixty-six, of which three were adulterated ; test samples, two, both adulterated.

Total samples taken, therefore, numbered one hundred and forty-three, of which one hundred and thirty-eight were official and five test samples.

KIRKCALDY DISTRICT.—Official samples, two hundred and seventy-one, of which eleven were adulterated ; test samples, *nil*.

BURGHs IN KIRKCALDY DISTRICT.—Official samples, one hundred and forty-four, of which two were adulterated ; test samples, *nil*.

Total samples taken, therefore, numbered four hundred and fifteen, all official.

ST ANDREWS DISTRICT.—Official samples, thirty-two, of which one was adulterated ; test samples, *nil*.

BURGHs IN ST ANDREWS DISTRICT.—Official samples, ninety-four, of which three were adulterated ; test samples, *nil*.

Total samples, taken, therefore, numbered one hundred and twenty-six, all official.

NEW LEGISLATION :—Regulations amending the principal Regulations of 1923 in regard to condensed milk and dried milk came of effect during 1928. The purpose of the amending regulations is to ensure by more conspicuous labelling of the containers of condensed skim and of dried skim milks and by intimation on wrappers that purchasers will be informed that the contents are unfit for food for babies.

An Order made under the Merchandise Marks Act, 1926, provides for the marking of honey and fresh apples with an indication of origin in letters of a defined size. The Order came in operation as regards apples in November, 1928, and honey in January, 1929.

Agricultural Produce (Grading and Marking) Act, 1928. Under this Act the Department of Agriculture may make regulations prescribing grade designations to indicate the quality of articles of Scottish agricultural or horticultural produce and define the quality indicated by such grade designations. In a circular dated 28/12/1928, the Department stated they proposed prescribing " grade designations " of eggs produced in Scotland.



# Tables of Samples and Results of their Analyses.

## CUPAR DIVISION.

### COUNTY DISTRICT.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ...	36	1	37	Sweet Milk ...	5	2	7
Butter, Salt ...	2	...	2	Oil, Olive ...	1	...	1
Cheese ...	1	...	1	Whisky ...	...	1	1
Flour ...	1	...	1	Wine, Meat and Malt ...	1	...	1
Ham Roll ...	1	...	1				
Jam, Gooseberry ...	1	...	1				
Lard ...	1	...	1				
Margarine ...	2	...	2				
Mincemeat ...	1	...	1				
Oil, Olive ...	1	...	1				
Orange Squash ...	1	...	1				
Raisins ...	1	...	1				
Salts, Liver ...	1	...	1				
Sausages ...	2	...	2				
Suet, Beef ...	1	...	1				
Sugar ...	2	...	2				
Tea ...	2	...	2				
Vinegar, Malt ...	1	...	1				
Water, Aerated ...	1	...	1				
Whisky ...	4	1	5				
Total ...	63	2	65	Total ...	7	3	10

The above noted adulterated sample of Sweet Milk contained 2.76% of fat and 8.75% of non-fatty solids.

The above noted adulterated samples of Sweet Milk contained the following :—

Fat %	Non-Fatty Solids %
3.70	8.00
1.90	9.00



## AUCHTERMUCHTY BURGH.

OFFICIAL.					TEST.				
		Gen.	Adult.	Total.			Gen.	Adult.	Total.
Sweet Milk	...	14	...	14	Sweet Milk	...	1	...	1
Butter, Salt	...	1	...	1	Butter, Salt	...	1	...	1
Coffee	...	1	...	1					
Greengages	...	1	...	1					
Lard	...	1	...	1					
Meat, Potted	...	1	...	1					
Oil, Olive	...	1	...	1					
Orange Peel	...	1	...	1					
Raisins	...	1	...	1					
Sausages	...	1	...	1					
Soda, Baking	...	1	...	1					
Sugar, Brown	...	1	...	1					
Vinegar, Malt	...	1	...	1					
Total	...	26	...	26	Total	...	2	...	2

## FALKLAND BURGH.

OFFICIAL.					TEST.				
		Gen.	Adult.	Total.		Gen.	Adult.	Total.	
Sweet Milk	...	12	...	12	Sweet Milk	...	1	...	1
Barley	...	1	...	1					
Cheese	...	1	...	1					
Cheese, Swiss									
Gruyere	...	1	...	1					
Cocoa	...	1	...	1					
Coffee Essence	...	1	...	1					
Flour	...	1	...	1					
Honey	...	1	...	1					
Magnesia, Heavy									
Carbonate	...	1	...	1					
Magnesia, Light									
Carbonate	...	1	...	1					
Margarine	...	1	...	1					
Tea	...	1	...	1					
Tongue, Lunch	...	1	...	1					
Total	...	24	...	24	Total	...	1	...	1



## LADYBANK BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ...	11	...	11	Sweet Milk ...	1	...	1
Allspice ...	1	...	1	Cream ...	1	...	1
Butter, Salt ...	1	...	1				
Coffee ...	1	...	1				
Meat, Sausage ...	...	1	1				
Pears ...	1	...	1				
Peas ...	1	...	1				
Salt, Saxa ...	1	...	1				
Sausages ...	1	2	3				
Tomato Puree ...	1	...	1				
Total ...	19	3	22	Total ...	2	...	2

## NEWBURGH BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ...	16	2	18				
Allspice ...	1	...	1				
Butter, Salt ...	1	...	1				
Custard ...	1	...	1				
Flour, Corn ...	1	...	1				
Lard ...	1	...	1				
Meat, Minced ...	1	...	1				
Peas, Green ...	1	...	1				
Relish ...	1	...	1				
Sausages ...	1	...	1				
Sausages, Lorne ...	1	...	1				
Semolina ...	1	...	1				
Suet, Beef ...	1	...	1				
Wine, Meat and Malt ...	1	...	1				
Total ...	29	2	31				

The above noted adulterated samples of Sweet Milk contained the following:—

Fat %.	Non-Fatty Solids %.
2.72	8.82
2.91	8.81



## DUNFERMLINE DIVISION.

## COUNTY DISTRICT.

OFFICIAL..					TEST.				
		Gen.	Adult.	Total.			Gen.	Adult.	Total.
Sweet Milk	...	52	3	55	Sweet Milk	...	2	...	2
Skimmed Milk	...	1	...	1	Wine, Meat and				
Mince	...	4	...	4	Malt	...	1	...	1
Sausages	...	4	...	4					
Sausage-meat	...	1	...	1					
Whisky	...	6	...	6					
Wine, Enervin									
Tonic	...	...	1	1					
Total	...	68	4	72	Total	...	3	...	3

The above noted adulterated samples of Sweet Milk contained the following :—

Fat %.	Non-Fatty Solids %.
2.70	8.95
2.88	8.55
2.56	8.17

## COWDENBEATH BURGH.

OFFICIAL.					TEST.				
		Gen.	Adult.	Total.		Gen.	Adult.	Total.	
Sweet Milk	...	31	1	32	Sweet Milk	...	2	2	
Skimmed Milk	...	1	...	1					
Butter, Salt	...	6	...	6					
Coffee	...	1	...	1					
Lard	...	1	...	1					
Mince	...	4	...	4					
Rum	...	1	...	1					
Sausages	...	2	...	2					
Whisky	...	5	...	5					
Wine, Extract Meat									
and Malt	...	...	1	1					
Wine, Fruit	...	2	...	2					
Wine, Glendinning's Beevinalt	...	...	1	1					
Total	...	54	3	57	Total	...	2	2	

The above noted adulterated sample of Sweet Milk contained 2.93% of fat and 8.59% of non-fatty solids.

The above noted adulterated samples of Sweet Milk contained the following :—

Fat %.	Non-Fatty Solids %.
2.80	8.70
2.95	8.67







## KIRKCALDY DIVISION.

## COUNTY DISTRICT.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ...	174	6	180
Bacon, Danish ...	1	...	1
Bacon, Wiltshire ...	1	...	1
Borax ...	1	...	1
Butter, Fresh ...	3	...	3
Butter, Salt ...	10	...	10
Cocoa ...	1	...	1
Coffee Essence ...	1	...	1
Cream of Tartar ...	4	...	4
Flour, Plain ...	1	...	1
Gin ...	3	...	3
Ginger, Ground ...	1	...	1
Jam, Apple, and Raspberry ...	1	...	1
Jam, Black Currant ...	1	...	1
Jelly, Bramble ...	1	...	1
Lard ...	4	...	4
Lemon Curd ...	1	...	1
Margarine ...	5	...	5
Meat Paste ...	1	...	1
Mince ...	7	1	8
Oil, Olive ...	1	...	1
Onions, Barr's Pickled ...	1	...	1
Peas, Preserved ...	3	...	3
Pepper, Black ...	1	...	1
Pepper, White ...	7	1	8
Pickles, Barr's ...	1	...	1
Rice ...	1	...	1
Rum ...	1	...	1
Sausages ...	5	1	6
Soda, Baking ...	3	...	3
Sugar, Brown ...	1	...	1
Tapioca ...	1	...	1
Tea ...	1	...	1
Vinegar, Malt ...	1	...	1
Whisky ...	9	2	11
Wine, Port ...	1	...	1
Total ...	260	11	271

The above noted adulterated samples of Sweet Milk contained the following:—

Fat %.	Non-Fatty Solids %.
2.53	9.22
2.73	9.02
2.73	8.51
3.77	8.27
2.37	8.89
2.64	8.51

TEST.			
	Gen.	Adult.	Total.
Sweet Milk ...	1	...	1
Butter, Salt ...	1	...	1
Cream of Tartar ...	1	...	1
Flour, Plain ...	1	...	1
Pepper, Black ...	1	...	1
Sausages ...	1	...	1
Total ...	9	...	9

Total ... 9 ... 9

TEST.			
	Gen.	Adult.	Total.
Sweet Milk ...	...	...	...

Total ... 2

The above noted adulterated samples of Sweet Milk contained the following:—

Fat %.	Non-Fatty Solids %.
2.80	8.51
2.05	8.51



## LESLIE BURGH.

## OFFICIAL.

	Gen.	Adult.	Total.
Sweet Milk ...	8	...	8
Condensed Milk ...	1	...	1
Butter, Fresh ...	2	...	2
Butter, Salt ...	2	...	2
Cheese, Gouda ...	1	...	1
Cream of Tartar ...	1	...	1
Gin ...	2	...	2
Jam, Black Currant ...	1	...	1
Jam, Raspberry ...	1	...	1
Jam, Strawberry ...	1	...	1
Margarine ...	1	...	1
Margarine, Marvo ...	1	...	1
Peas, Preserved ...	1	...	1
Pepper, White ...	2	...	2
Rum ...	1	...	1
Whisky ...	2	...	2
Total ...	28	...	28

## TEST.

Gen. Adult. Total.

Sweet Milk ...	30	...	30
Condensed Milk ...	1	...	1
Butter, Salt ...	2	...	2
Cheese, Gouda ...	1	...	1
Cream of Tartar ...	1	...	1
Dipping ...	1	...	1
Lard ...	2	...	2
Margarine ...	2	...	2
Oil, Olive ...	2	...	2
Pepper, White ...	2	...	2
Pickles, Mixed ...	2	...	2
Sausages, Pork ...	1	...	1
Tapioca ...	1	...	1
Whisky ...	4	...	4

Total ...

## LEVEN BURGH.

## OFFICIAL.

	Gen.	Adult.	Total.
Sweet Milk ...	33	...	33
Butter, Fresh ...	1	...	1
Jam, Gooseberry ...	1	...	1
Jelly, Red Currant ...	1	...	1
Cinnamon ...	1	...	1
Coffee & Chicory (Unitas, Shield-hall) ...	1	...	1
Margarine ...	1	...	1
Salad Cream ...	1	...	1
Total ...	40	...	40

## TEST.

Gen. Adult. Total.

Sweet Milk ...	9	...	9
Butter, Fresh ...	2	...	2
Cinnamon ...	2	...	2
Coffee ...	1	...	1
Margarine ...	1	...	1
Mince ...	1	...	1
Onions, Pickled ...	1	...	1
Peas, Preserved ...	1	...	1
Pepper, White ...	1	...	1
Salmon, Tinned ...	1	...	1
Sausages ...	5	...	5
Tes ...	1	...	1
Vinegar ...	1	...	1
Whisky ...	1	...	1

Total ...



## LOCHGELLY BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ...	30	...	30				
Condensed Milk ...	1	...	1				
Butter, Salt ...	2	...	2				
Cocoa ...	1	...	1				
Cream of Tartar...	1	...	1				
Dripping ...	1	...	1				
Lard ...	2	...	2				
Margarine ...	2	...	2				
Oil, Olive ...	2	...	2				
Pepper, White ...	2	...	2				
Pickles, Mixed ...	2	...	2				
Sausages, Pork ...	1	...	1				
Tapioca ...	1	...	1				
Whisky ...	4	1	5				
Total ...	52	1	53				

## MARKINCH BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ...	9	...	9				
Butter, Fresh ...	2	...	2				
Butter, Salt ...	2	...	2				
Chutney, Indian ...	1	...	1				
Cinnamon ...	1	...	1				
Coffee ...	1	...	1				
Margarine ...	2	...	2				
Mincemeat ...	1	...	1				
Onions, Pickled ...	1	...	1				
Peas, Preserved ...	1	...	1				
Pepper, White ...	1	...	1				
Salmon, Tinned ...	1	...	1				
Sausages ...	5	1	6				
Tea ...	1	...	1				
Vinegar ...	1	...	1				
Whisky ...	1	...	1				
Total ...	31	1	32				



## ST ANDREWS DIVISION.

## COUNTY DISTRICT.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ...	25	1	26
Butter, Sweet ...	2	...	2
Whisky ...	4	...	4
Total ...	31	1	32

The above noted adulterated sample of Sweet Milk contained 2.34% of Fat and 9.14% of Non-Fatty Solids.

## EAST ANSTRUTHER BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Chicken and Ham			
Roll ...	1	...	1
Oatmeal ...	1	...	1
Sausages ...	1	...	1
Sausage Roll ...	1	...	1
Sugar ...	1	...	1
Whisky ...	2	...	2
Total ...	7	...	7

TEST.		
Gen.	Adult.	Total.

## WEST ANSTRUTHER BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ...	2	...	2
Total ...	2	...	2

TEST.		
Gen.	Adult.	Total.

## CRAIL BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Jam, Raspberry	1	...	1
Polony ...	...	1	1
Relish, Yorkshire	1	...	1
Sausages ...	...	1	1
Veal and Tongue	1	...	1
Total ...	3	2	5

TEST.		
Gen.	Adult.	Total.



## ELIE BURGH.

OFFICIAL.					TEST.				
		Gen.	Adult.	Total.			Gen.	Adult.	Total.
Sweet Milk	...	10	...	10					
Cinnamon	...	1	...	1					
Cocoa	...	1	...	1					
Cream of Tartar	2	...	2						
Oatmeal	...	1	...	1					
Pepper, Black	...	1	...	1					
Pepper, White	...	1	...	1					
Sausages	...	2	...	2					
Tea	...	1	...	1					
Total	...	20	...	20					

## KILRENNY BURGH.

OFFICIAL.					TEST.				
		Gen.	Adult.	Total.			Gen.	Adult.	Total.
Sweet Milk	...	5	1	6					
Relish, Yorkshire		1	...	1					
Sausage Roll	...	1	...	1					
Whisky	...	1	...	1					
Total	...	8	1	9					

The above noted adulterated sample of Sweet Milk contained 2.73% of Fat and 8.88% of Non-Fatty Solids.

## NEWPORT BURGH.

OFFICIAL.				TEST.			
		Gen.	Adult. Total.			Gen.	Adult. Total
Sweet Milk	...	18	...	18			
Farola	...	1	...	1			
Oatmeal	...	1	...	1			
Rice, Ground	...	1	...	1			
Rice, Whole	...	1	...	1			
Sausages	...	3	...	3			
Semolina	...	1	...	1			
Sugar	...	1	...	1			
Whisky	...	1	...	1			
Total	...	28	...	28			



## PITTENWEEM BURGH.

		OFFICIAL.			TEST.		
		Gen.	Adult.	Total.	Gen.	Adult.	Total.
Sweet Milk	...	5	...	5			
Ketchup	...	1	...	1			
Relish, Yorkshire		1	...	1			
Sausages	...	1	...	1			
Whisky	...	2	...	2			
Total	...	10	...	10			

## TAYPORT BURGH.

		OFFICIAL.			TEST.		
		Gen.	Adult.	Total.	Gen.	Adult.	Total.
Sweet Milk	...	10	...	10			
Relish, Yorkshire		2	...	2			
Sausages	...	1	...	1			
Total	...	13	...	13			

CUPAR DISTRICT

DUNFERMLINE DISTRICT

KIRKCALDY DISTRICT

ST ANDREWS DISTRICT







# I.—Return of Cases of INFECTIOUS DISEASE notified, &c., during the year ending 31st December, 1928

Population Census 1921—15,418; Population estimated to middle of 1928—14,712.

## DISTRICT OF CUPAR.

### COUNTY OF FIFE.

## Statistical Tables

FOR

CUPAR DISTRICT

DUNFERMLINE DISTRICT

KIRKCALDY DISTRICT

ST ANDREWS DISTRICT



**I.—Return of Cases of INFECTIOUS DISEASE notified, &c.,  
during the year ending 31st December, 1928**

Population, Census 1921—15,418; Population estimated to middle of 1928—  
14,742.

COUNTY OF FIFE.

DISTRICT OF CUPAR.

DISEASE	NUMBER OF CASES COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH										
	At all Ages	At Age—Years							Cases removed to Hospital	Cases not removed to Hospital	
		Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards			
A—DISEASES SPECIFIED IN THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889											
Scarlet Fever or Scarlatina	67	...	13	44	6	4	...	..	65	2	
Diphtheria and Membranous											
Croup ... ..	7	...	1	4	1	...	...	1	6	1	
Erysipelas ... ..	11	...	...	...	...	8	2	1	...	11	
Puerperal Fever .. ..	2	...	...	...	1	1	...	...	..	2	
Total ... ..	87	...	14	48	8	13	2	2	71	16	
B—DISEASES NOTIFIABLE IN TERMS OF REGULATIONS MADE UNDER SECTION 78 OF THE PUBLIC HEALTH (SCOTLAND) ACT, 1897											
Ophthalmia Neonatorum ...	1	1	...	...	...	...	...	...	...	1	
Chickenpox ... ..	35	5	6	23	...	1	...	...	...	35	
Infantile Paralysis ... ..	1	...	1	...	...	...	...	...	...	1	
Acute Primary Pneumonia	7	...	2	...	2	1	2	...	...	7	
Acute Influenzal Pneumonia	6	...	...	...	...	3	2	1	...	6	
Pulmonary Tuberculosis ...	11	...	1	1	4	4	1	...	6	5	
Non-Pulmonary Tuberculosis	10	...	1	3	3	1	2	...	2	8	
Total of A and B	158	6	25	75	17	23	9	3	79	79	
C—DISEASES TO WHICH THE PROVISIONS OF THE INFECTIOUS DISEASE (NOTIFICATION) ACT HAVE BEEN EXTENDED BY THE LOCAL AUTHORITY											
Nil.											
D—NOTIFIED UNDER LOCAL PROVISIONS, NOT UNDER THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889.											
Nil.											

*Name of Hospital or Hospitals in which Cases were treated—*

Auchtermuchty Joint Infectious Diseases Hospital.

St Michael's Joint Infectious Diseases Hospital.

Glenlomond Sanatorium.



## II.—Return of Cases of DEATHS registered during the Year ending 31st December, 1928.

### DISTRICT OF CUPAR.

Population, Census 1921—15,418; Population estimated to middle of 1928—14,742.

	Numbers Registered in District	Transfers		Corrected Number		
		Out	In	Both Sexes	Males	Females
Total Births (including Illegitimate)...	203	14	28	217	125	92
Illegitimate Births ...	9	...	9	18	7	11
Marriages ...	71	...	...	...	...	...
Deaths ...	254	80	42	216	104	112

### PRINCIPAL RATES PER 1000 OF ESTIMATED POPULATION.

	Uncorrected	Corrected for Transfers	Corrected for Transfers and adjusted for Age and Sex Distribution
Birth-rate ...	13.8	14.7	...
Illegitimate Birth-rate per 100 Total Births	...	8.3	...
Marriage-rate ..	4.8	...	...
Death-rate—All Causes ...	17.2	14.7	11.2
Do. All Tuberculosis ...	...	0.61	...
Do. Tuberculosis of Respiratory System ...	...	0.47	...
Do. Principal Epidemic Diseases	...	0.27	...
Infantile Mortality Rate (Deaths under One Year per 1000 Births) ...	...	88	...

### CAUSES OF DEATH (CORRECTED FOR TRANSFERS)

CAUSES OF DEATH	All Ages			AGE												
	Both Sexes	M	F	-1	1-5	10	15	25	35	45	55	65	75	85 up		
Whooping Cough ...	1	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...
Diphtheria ...	1	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...
Influenza ...	7	2	5	...	...	...	...	1	...	1	1	2	2	...	...	...
Other Epidemic Diseases ...	1	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis of Respiratory System ...	7	5	2	...	...	1	3	1	...	...	1	1	...	...	...	...
Tuberculous Meningitis ...	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis of Intes. and Peritoneum	1	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...
Malignant Tumours ...	20	10	10	...	...	...	...	...	...	1	9	3	6	1	...	...
Meningitis (not Cer. Spin. or Tuberc.)	2	2	...	1	...	...	1	...	...	...	...	...	...	...	...	...
Apoplexy ...	32	17	15	...	...	...	...	...	...	...	4	14	10	4	...	...
Heart Disease ...	34	17	17	...	...	...	2	...	2	2	5	13	8	2	...	...
Diseases of Arteries ...	6	1	5	...	...	...	...	...	...	...	1	4	...	1	...	...
Bronchitis ...	10	5	5	1	...	...	...	...	...	1	2	...	5	1	...	...
Pneumonia (all forms) ...	7	4	3	...	...	1	...	...	...	...	...	2	4	...	...	...
Other Diseases of Respiratory System	1	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...
Diarrhoea and Enteritis (under 2 yrs.)	2	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Appendicitis ...	1	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant)	4	2	2	...	...	...	...	...	1	...	2	1	...	...	...	...
Nephritis, Acute and Chronic ...	5	3	2	...	...	...	...	1	...	1	1	1	1	...	...	...
Other Dis. & Acc. of Preg. & Parturit'n	1	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...
Dis. of Early Infancy & Malformations	13	12	1	13	...	...	...	...	...	...	...	...	...	...	...	...
Suicide ...	1	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Other Violent Deaths ...	7	3	4	...	1	2	3	1	...	...	...	...	...	...	...	...
Other Defined Diseases ...	46	12	34	1	...	2	1	...	1	4	...	5	8	13	11	...
Causes Ill-defined or Unknown ...	5	3	2	...	...	...	...	...	...	...	2	1	2	...	...	...
ALL CAUSES ...	216	104	112	19	3	5	3	11	5	7	7	34	50	51	21	...



**I.—Return of Cases of INFECTIOUS DISEASE notified, &c.,  
during the year ending 31st December, 1928**

Population, Census 1921—34,870 ; Population estimated to middle of 1928—36,514

COUNTY OF FIFE

DISTRICT OF DUNFERMLINE

NUMBER OF CASES COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH										
DISEASE	At Age—Years								Cases removed to Hospital	Cases not removed to Hospital
	At all Ages									
		Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards		
A—DISEASES SPECIFIED IN THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889										
Typhoid or Enteric Fever	5	...	...	3	2	...	...	...	5	...
Scarlet Fever or Scarlatina	96	...	20	67	7	1	1	...	91	5
Diphtheria and Membranous										
Croup	67	1	12	42	6	4	2	...	62	5
Erysipelas	29	...	1	2	1	10	11	4	1	28
Total	197	1	33	114	16	15	14	4	159	38
B—DISEASES NOTIFIABLE IN TERMS OF REGULATIONS MADE UNDER SECTION 78 OF THE PUBLIC HEALTH (SCOTLAND) ACT, 1897										
Ophthalmia Neonatorum	30	30	...	...	...	...	...	...	1	29
Chickenpox	194	11	54	125	3	1	...	...	...	194
Infantile Paralysis	1	...	...	1	...	...	...	...	...	1
Encephalitis Lethargica	3	...	...	1	...	2	...	...	...	3
Acute Primary Pneumonia	70	5	19	31	5	3	5	2	4	66
Acute Influenzal Pneumonia	10	...	...	1	4	4	1	...	1	9
Pulmonary Tuberculosis	22	...	...	7	6	7	2	...	9	13
Non-Pulmonary Tuberculosis	24	2	5	11	1	4	1	..	5	19
Total of A and B	551	49	111	291	35	36	23	6	179	372
C—DISEASES TO WHICH THE PROVISIONS OF THE INFECTIOUS DISEASE (NOTIFICATION) ACT HAVE BEEN EXTENDED BY THE LOCAL AUTHORITY										
Nil.										
D—NOTIFIED UNDER LOCAL PROVISIONS, NOT UNDER THE INFECTIOUS DISEASES (NOTIFICATION) ACT, 1889.										
Nil.										

*Name of Hospital or Hospitals in which Cases were treated—*

Dunfermline District Joint Infectious Diseases Hospital.  
Kirkcaldy District Joint Infectious Diseases Hospital.  
Royal Hospital for Sick Children, Edinburgh.  
Glenlomond Sanatorium.



## II.—Return of Cases of DEATHS registered during the year ending 31st December, 1928

### DISTRICT OF DUNFERMLINE

Population, Census 1921—34,870 ; Population estimated to middle of 1928—36,514

	Numbers Registered in District	Transfers		Corrected Number		
		Out	In	Both Sexes	Males	Females
Total Births (including Illegitimate)...	651	28	48	671	353	318
Illegitimate Births ...	36	2	7	41	20	21
Marriages ...	161	...	...	...	...	...
Deaths ...	298	19	82	361	200	161

#### PRINCIPAL RATES PER 1000 OF ESTIMATED POPULATION.

	Uncorrected	Corrected for Transfers	Corrected for Transfers and adjusted for Age and Sex Distribution
Birth-rate ...	17.8	18.4	...
Illegitimate Birth-rate per 100 Total Births ...	...	6.1	...
Marriage-rate ...	4.4	...	...
Death-rate—All Causes ...	8.2	9.9	10.8
Do. All Tuberculosis ...	...	0.60	...
Do. Tuberculosis of Respiratory System ...	...	0.27	...
Do. Principal Epidemic Diseases ...	...	0.60	...
Infantile Mortality Rate (Deaths under One Year per 1000 Births) ...	...	80	...

#### CAUSES OF DEATH (CORRECTED FOR TRANSFERS)

CAUSES OF DEATH	All Ages			AGE												
	Both Sexes	M	F	-1	1-5	10-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85 up		
Measles ...	9	6	3	...	9	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	1	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Whooping-Cough ...	6	2	4	4	1	1	...	...	...	...	...	...	...	...	...	...
Diphtheria ...	3	1	2	1	1	1	...	...	...	...	...	...	...	...	...	...
Influenza ...	5	4	1	...	...	...	1	...	...	...	1	3	...	...	...	...
Other Epidemic Diseases ...	1	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Tuberculosis of Respiratory System ...	10	8	2	...	...	...	...	4	3	2	...	1	...	...	...	...
Tuberculous Meningitis ...	5	4	1	2	2	...	...	...	1	...	...	...	...	...	...	...
Tuberculosis of Intestines & Peritoneum ...	3	2	1	...	...	...	...	1	1	1	...	...	...	...	...	...
Other Tuberculous Disease ...	4	1	3	...	...	...	1	1	1	...	1	...	...	...	...	...
Malignant Tumours ...	30	15	15	...	...	1	...	...	...	11	7	5	5	1	...	...
Rheumatic Fever ...	2	2	...	...	...	...	...	1	...	...	...	...	...	...	...	...
Meningitis (not Cer. Spin. or Tuberc.) ...	5	1	4	3	1	...	1	...	...	...	...	...	...	...	...	...
Apoplexy ...	39	17	22	...	...	...	...	...	2	2	5	18	9	3	...	...
Heart Disease ...	38	19	19	...	...	1	...	1	3	...	3	11	8	9	2	...
Diseases of Arteries ...	3	2	1	...	...	...	...	...	...	...	1	1	1	...	...	...
Bronchitis ...	21	15	6	3	1	...	...	...	1	1	1	8	6	...	...	...
Pneumonia (all forms) ...	20	12	8	3	6	1	...	1	...	2	...	2	4	...	...	...
Other Diseases of Respiratory System ...	6	2	4	...	...	...	...	1	...	1	2	1	1	...	...	...
Diarrhoea and Enteritis (under 2 years) ...	3	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant) ...	4	2	2	...	...	...	...	...	1	...	1	2	...	...	...	...
Nephritis, Acute and Chronic ...	8	5	3	...	1	...	...	...	2	...	3	1	1	...	...	...
Puerperal Sepsis ...	1	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...
Other Dis. & Acc. of Preg. & Parturit'n ...	3	...	3	...	...	...	...	2	1	...	...	...	...	...	...	...
Dis. of Early Infancy & Malformations ...	30	19	11	30	...	...	...	...	...	...	...	...	...	...	...	...
Suicide ...	4	4	...	...	...	...	...	1	1	1	1	...	...	...	...	...
Other Violent Deaths ...	23	18	5	2	4	1	1	3	2	3	1	1	1	4	...	...
Other Defined Diseases ...	65	29	36	3	2	2	1	1	7	1	6	8	16	9	9	...
Causes Ill-defined or Unknown ...	9	6	3	...	...	...	...	...	...	1	2	2	4	...	...	...
ALL CAUSES ...	361	200	161	54	28	8	4	10	22	19	34	45	69	53	15	...



# **I.—Return of Cases of INFECTIOUS DISEASE notified, &c., during the year ending 31st December, 1928**

Population, Census 1921—44,569; Population estimated to middle of 1928—44,607

COUNTY OF FIFE

DISTRICT OF KIRKCALDY

DISEASE	NUMBER OF CASES COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH									
	At all Ages	At Age—Years							Cases removed to Hospital	Cases not removed to Hospital
		Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards		
A.—DISEASES SPECIFIED IN THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889										
Scarlet Fever or Scarlatina	229	2	50	141	29	7	...	...	226	3
Diphtheria and Membranous Croup ... ..	103	...	23	64	8	8	...	...	102	1
Erysipelas ... ..	29	...	1	...	2	7	17	2	2	27
Puerperal Fever ... ..	8	...	...	...	3	5	...	...	2	6
Total ... ..	369	2	74	205	42	27	17	2	332	37
B.—DISEASES NOTIFIABLE IN TERMS OF REGULATIONS MADE UNDER SECTION 78 OF THE PUBLIC HEALTH (SCOTLAND) ACT, 1897										
Ophthalmia Neonatorum ...	13	13	...	...	...	...	...	...	...	13
Chickenpox ... ..	186	16	90	78	1	1	...	...	...	186
Infective Jaundice ... ..	1	...	...	...	...	...	1	...	...	1
Acute Primary Pneumonia	91	7	26	17	17	14	7	3	20	71
Acute Influenzal Pneumonia	6	...	2	...	1	2	1	...	1	5
Pulmonary Tuberculosis ...	27	1	1	6	9	8	1	1	11	16
Non-Pulmonary Tuberculosis	48	3	13	21	6	5	...	...	12	36
Total of A and B	741	42	206	327	76	57	27	6	376	365
C.—DISEASES TO WHICH THE PROVISIONS OF THE INFECTIOUS DISEASE (NOTIFICATION) ACT HAVE BEEN EXTENDED BY THE LOCAL AUTHORITY										
Cerebro-Spinal Meningitis	2	...	2	...	...	...	...	...	1	1
D.—NOTIFIED UNDER LOCAL PROVISIONS, NOT UNDER THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889.										
Nil.										

*Name of Hospital or Hospitals in which Cases were treated—*

Kirkcaldy District Joint Infectious Diseases Hospital.

Kirkcaldy Cottage Hospital.

Glenlomond Sanatorium.

Royal Hospital for Sick Children, Edinburgh.



# **II.—Return of Cases of DEATHS registered during the year ending 31st December, 1928.**

DISTRICT OF KIRKCALDY.

Population, Census 1921—44,569; Population estimated to middle of 1928—44,607

	Numbers Registered in District	Transfers		Corrected Number		
		Out	In	Both Sexes	Males	Females
Total Births (including Illegitimate) ...	982	39	67	1010	537	473
Illegitimate Births ...	59	8	12	63	35	28
Marriages ...	203	...	...	...	...	...
Deaths ...	478	93	112	497	270	227

## PRINCIPAL RATES PER 1000 OF ESTIMATED POPULATION.

	Uncorrected	Corrected for Transfers	Corrected for Transfers and adjusted for Age and Sex Distribution
Birth-rate ...	22.0	22.6	...
Illegitimate Birth-rate per 100 Total Births ...	...	6.2	...
Marriage-rate ...	4.6	...	...
Death-rate—All Causes ...	10.7	11.1	12.3
Do. All Tuberculosis ...	...	0.69	...
Do. Tuberculosis of Respiratory System ...	...	0.34	...
Do. Principal Epidemic Diseases ...	...	0.96	...
Infantile Mortality Rate (Deaths under One Year per 1000 Births) ...	...	93	...

## CAUSES OF DEATH (CORRECTED FOR TRANSFERS)

CAUSES OF DEATH	All Ages			AGE													
	Both Sexes	M	F	-1	1-5	10-15	25-35	45-55	65-75	85 up							
Measles ...	7	5	2	3	3	1	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	3	1	2	...	2	...	1	...	...	...	...	...	...	...	...	...	...
Whooping-Cough ...	11	3	8	7	4	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria ...	8	5	3	1	2	5	...	...	...	...	...	...	...	...	...	...	...
Influenza ...	7	5	2	...	...	...	1	1	2	3	...	...	...	...	...	...	...
Encephalitis Lethargica ...	1	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Meningitis ...	2	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Other Epidemic Diseases ...	2	2	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...
Tuberculosis of Respiratory System...	15	8	7	...	...	1	5	4	1	3	...	1	...	...	...	...	...
Tuberculous Meningitis ...	8	4	4	2	3	2	1	...	...	...	...	...	...	...	...	...	...
Tuberculosis of Intestines & Peritoneum	5	1	4	...	2	...	2	1	...	...	...	...	...	...	...	...	...
Other Tuberculous Disease ...	3	1	2	...	...	2	...	1	...	...	...	...	...	...	...	...	...
Malignant Tumours ...	37	21	16	...	...	...	1	4	5	14	11	1	1	...	...	...	...
Rheumatic Fever ...	1	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Meningitis (not Cer. Spin. or Tuberc.)	2	2	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...
Apoplexy ...	33	16	17	...	...	...	...	1	3	8	13	6	2	...	...	...	...
Heart Disease ...	60	31	29	1	...	2	1	1	2	8	10	18	17	...	...	...	...
Diseases of Arteries ...	12	9	3	...	...	...	...	...	2	6	3	1	...	...	...	...	...
Bronchitis ...	29	18	11	5	3	1	...	1	...	2	4	5	6	2	...	...	...
Pneumonia (all forms) ...	38	20	18	11	13	2	1	1	1	2	...	5	1	...	...	...	...
Other Diseases of Respiratory System	6	3	3	...	...	...	2	...	...	1	1	1	1	...	...	...	...
Diarrhoea and Enteritis (under 2 years)	14	7	7	14	...	...	...	...	...	...	...	...	...	...	...	...	...
Appendicitis ...	4	1	3	...	1	1	...	1	1	...	...	...	...	...	...	...	...
All Diseases of Liver (not Malignant)	2	2	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...
Nephritis, Acute and Chronic ...	22	9	13	...	1	3	1	1	4	4	5	3	...	...	...	...	...
Puerperal Sepsis ...	3	...	3	...	...	2	...	1	...	...	...	...	...	...	...	...	...
Other Dis. & Acc. of Preg. & Parturit'n	5	...	5	...	...	2	3	...	...	...	...	...	...	...	...	...	...
Dis. of Early Infancy & Malformations	39	21	18	39	...	...	...	...	...	...	...	...	...	...	...	...	...
Suicide ...	3	3	...	...	...	...	1	1	...	1	...	...	...	...	...	...	...
Other Violent Deaths ..	24	21	3	1	4	...	7	3	1	3	4	...	1	...	...	...	...
Other Defined Diseases ...	85	44	41	8	4	2	2	6	4	3	9	8	10	20	9	...	...
Causes Ill-defined or Unknown ...	6	4	2	...	1	...	1	...	...	...	1	3	...	...	...	...	...
ALL CAUSES ...	497	270	227	94	43	15	6	33	26	20	43	57	82	62	16	...	...



**I.—Return of Cases of INFECTIOUS DISEASE notified, &c.,  
during the year ending 31st December, 1928**

Population, Census 1921—15,201 ; Population estimated to middle of 1928—14,509

COUNTY OF FIFE.

DISTRICT OF ST ANDREWS.

NUMBER OF CASES COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH											
DISEASE	At all Ages	At Age—Years							Cases removed to Hospital	Cases not removed to Hospital	
		Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards			
<b>A—DISEASES SPECIFIED IN THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889</b>											
Scarlet Fever or Scarlatina	56	...	9	31	9	6	1	...	55	1	
Diphtheria and Membranous	...	...	...	...	...	...	...	...	...	...	
Croup	26	...	3	11	7	4	1	...	25	1	
Erysipelas	3	...	...	...	...	...	2	1	...	3	
Puerperal Fever	1	...	...	...	1	...	...	...	...	1	
Total	86	...	12	42	17	10	4	1	80	6	
<b>B—DISEASES NOTIFIABLE IN TERMS OF REGULATIONS MADE UNDER SECTION 78 OF THE PUBLIC HEALTH (SCOTLAND) ACT, 1897</b>											
Ophthalmia Neonatorum	1	1	...	...	...	...	...	...	...	1	
Chickenpox	64	3	10	49	1	1	...	...	...	64	
Infantile Paralysis	2	...	2	...	...	...	...	...	...	2	
Acute Primary Pneumonia	11	2	1	3	2	2	...	1	...	11	
Pulmonary Tuberculosis	8	...	...	2	2	3	1	...	3	5	
Non-Pulmonary Tuberculosis	11	...	3	4	2	1	1	...	2	9	
Total of A and B	183	6	28	100	24	17	6	2	85	98	
<b>C—DISEASES TO WHICH THE PROVISIONS OF THE INFECTIOUS DISEASE (NOTIFICATION) ACT HAVE BEEN EXTENDED BY THE LOCAL AUTHORITY</b>											
<i>Nil.</i>											
<b>D—NOTIFIED UNDER LOCAL PROVISIONS, NOT UNDER THE INFECTIOUS DISEASE (NOTIFICATION) ACT, 1889</b>											
<i>Nil.</i>											

*Name of Hospital or Hospitals in which Cases were treated—*

Ovenstone Joint Infectious Diseases Hospital.

St Michaels Joint Infectious Diseases Hospital.

Glenlomond Sanatorium.



## II.—Return of Cases of DEATHS registered during the year ending 31st December, 1928

### DISTRICT OF ST ANDREWS.

Population, Census 1921—15,201. Population estimated to middle of 1928—14,509.

	Numbers Registered in District	Transfers		Corrected Number		
		Out	In	Both Sexes	Males	Females
Total Births (including Illegitimate) ... ..	214	20	32	226	116	110
Illegitimate Births ... ..	19	2	5	22	8	14
Marriages ... ..	77	...	...	...	...	...
Deaths ... ..	150	12	35	173	90	83

#### PRINCIPAL RATES PER 1000 OF ESTIMATED POPULATION.

	Uncorrected	Corrected for Transfers	Corrected for Transfers and adjusted for Age and Sex Distribution
Birth-rate ... ..	14.7	15.6	...
Illegitimate Birth-rate per 100 Total Births ... ..	...	9.7	...
Marriage-rate ... ..	5.3	...	...
Death-rate—All Causes ... ..	10.3	11.9	10.2
Do. All Tuberculosis ... ..	...	0.48	...
Do. Tuberculosis of Respiratory System ... ..	...	0.28	...
Do. Principal Epidemic Diseases ... ..	...	0.34	...
Infantile Mortality Rate (Deaths under One Year per 1000 Births ... ..)	...	31.0	...

#### CAUSES OF DEATH (CORRECTED FOR TRANSFERS)

CAUSES OF DEATH	All Ages			AGE														85 up
	Both Sexes	M	F	-1	1-	5-	10	15	25	35	45	55	65	75				
Measles ... ..	1	...	1	...	1	...	...	...	...	...	...	...	...	...	...			
Scarlet Fever ... ..	1	1	...	...	...	...	...	...	1	...	...	...	...	...	...			
Diphtheria ... ..	3	1	2	...	1	2	...	...	...	...	...	...	...	...	...			
Influenza ... ..	1	...	1	...	...	...	...	...	...	...	...	...	1	...	...			
Other Epidemic Diseases ... ..	1	1	...	...	...	...	...	...	...	...	...	...	1	...	...			
Tuberculosis of Respiratory System ... ..	4	3	1	...	...	...	...	...	...	4	...	...	...	...	...			
Tuberculous Meningitis ... ..	2	1	1	...	1	...	1	...	...	...	...	...	...	...	...			
Tuberculosis of Intestines & Peritoneum ... ..	1	1	...	...	1	...	...	...	...	...	...	...	...	...	...			
Malignant Tumours ... ..	26	9	17	...	...	...	...	...	1	1	4	5	10	5	...			
Meningitis (not Cer. Spin. or Tuberc.) ... ..	1	...	1	...	...	...	1	...	...	...	...	...	...	...	...			
Apoplexy ... ..	24	14	10	...	...	...	...	...	1	1	3	3	10	5	1			
Heart Disease ... ..	27	14	13	...	...	...	...	...	...	...	3	4	9	9	2			
Diseases of Arteries ... ..	1	...	1	...	...	...	...	...	...	...	...	1	...	...	...			
Bronchitis ... ..	4	2	2	...	...	...	...	...	...	...	...	...	2	2	...			
Pneumonia (all forms) ... ..	4	3	1	...	...	...	...	...	...	...	...	1	3	...	...			
Other Diseases of Respiratory System ... ..	3	1	2	...	...	1	...	...	...	...	...	...	1	...	1			
All Diseases of Liver (not Malignant) ... ..	1	...	1	...	...	...	...	...	...	...	...	...	1	...	...			
Nephritis, Acute and Chronic ... ..	4	2	2	...	...	...	...	...	...	2	...	1	...	...	1			
Dis. of Early Infancy, and Malformations ... ..	7	7	...	7	...	...	...	...	...	...	...	...	...	...	...			
Suicide ... ..	2	2	...	...	...	...	...	1	1	...	...	...	...	...	...			
Other Violent Deaths ... ..	9	6	3	...	1	...	...	1	1	...	2	2	1	...	1			
Other Defined Diseases ... ..	45	22	23	...	1	1	...	...	3	...	3	5	7	17	8			
Causes Ill-defined or Unknown ... ..	1	...	1	...	...	...	...	...	...	...	...	...	...	1	...			
ALL CAUSES ... ..	173	90	83	7	6	4	2	2	8	8	15	22	46	39	14			



