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# COUNTY COUNCIL OF FIFE.



INSTITUTE OF SOCIAL  
MEDICINE

10, PARKS ROAD,  
OXFORD

## ANNUAL REPORT

ON THE

HEALTH AND SANITARY CONDITION  
OF THE COUNTY AND DISTRICTS

DURING

1932

BY

**G. PRATT YULE,**

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

MEDICAL OFFICER OF HEALTH.

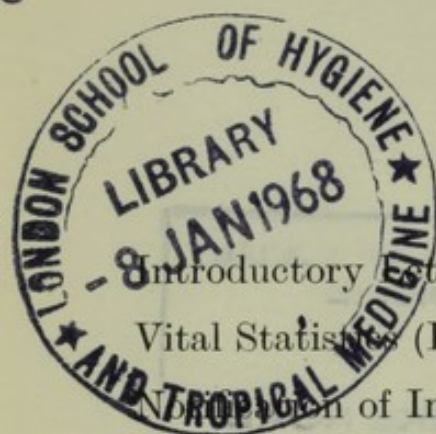
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**To the County Council of the County of Fife.**

MY LORD, LADIES AND GENTLEMEN,

I have the honour to submit the Report of the County Public Health Department for the year 1932.

The Report incorporates that on the Medical Inspection of School Children for the year ending July 1932. There are also included excerpts from the annual reports of the County Sanitary Inspectors.

The low incidence of infectious diseases for many years past has been commented on in former reports. The freedom of the County in this respect was broken in the last two months of 1932 by the heavy prevalence of scarlet fever.

The birth-rate of the Landward Area and the Small Burghs was 17·7 per 1,000, of an estimated population of 198,792 ; the birth-rate for the similar area of Scotland was 18·0 per 1,000.

The death-rate of the Landward Area of Small Burghs was 12·0 per 1,000 : that for Scotland was 13·1 per 1,000.

The infantile mortality rate of the Landward Area and Small Burghs was 80, as compared with 73 in 1931. The infantile mortality rate of Landward Area and Small Burghs of Scotland was 72. Thus, our figure is adverse : the set-back may be temporary.

In every branch of public health activity, 1932 proved a busy year and the staff was fully employed in its multifarious duties. I desire to thank my colleagues in the department for their hearty co-operation and competent service.

I have the honour to be,

My Lord, Ladies and Gentlemen,

Your obedient Servant,

G. PRATT YULE,

*County Medical Officer.*

July, 1933.

Public Health Department,  
Cupar, Fife.



# STAFF.

---

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## COUNTY OF FIFE.

### Report of County Medical Officer for the Year 1932.

#### CENSUS 1931.

The final report on the Fourteenth Decennial Census taken on 26th April 1931, returns the population of the County of Fife as 276,368 (males 134,515, females 141,853) a decrease of 16,557 or 5·7 per cent. compared with the population at the Census of 1921.

The Census of 1931 records the first decrease in population of the County since the first official Census was taken in 1801, when the population was 93,743.

Of the total population of the County, 173,280 or 62·7 per cent. were enumerated in Burghs—inclusive of 94,348 or 34·1 per cent. in the twenty-two Small Burghs and 78,932 or 28·6 per cent. in the two Large Burghs of Dunfermline and Kirkcaldy—while 103,088 or 37·3 per cent. were enumerated in the Landward Area of the County.

Only seven Burghs showed intercensal increases of population, of which the largest were 980 or 5·9 per cent. in Buckhaven, 449 or 10·8 per cent. in Cupar, and 379 or 23·5 per cent. in Markinch.

For District Council purposes under the Local Government Act, 1929, the Landward Area was at the Census date divided in four districts, the former Local Government districts, viz., Kirkcaldy District with a population of 43,323, Dunfermline District with a population of 30,696, Cupar District with a population of 14,807, and St. Andrews District with a population of 14,262. Each District showed a decrease compared with the population in 1921.



There are sixty parishes in the County, of which thirteen showed increases and forty-seven decreases of population. While the growth of certain parishes in the industrial areas, although for the present arrested, has within recent decades been very great, rural depopulation, over a longer interval, has also been remarkable in other areas. There are sixteen parishes in the County in which the loss of population from the maximum attained at any Census now exceeds 40 per cent. In nine of these Parishes the loss exceeds 50 per cent.

As the area of the County is 323,012 acres, the average number of persons to each 100 acres is 86. In the Landward area, the density or average number of persons per 100 acres is 34, being 68 in Kirkcaldy District, 52 in Dunfermline District and 16 in each of the Districts of Cupar and St. Andrews.

Of the total population of 276,368, there are 134,515 males and 141,853 females, a ratio of 105·5 females to every 100 males. For Census purposes the population aged 14 years and upwards is arranged in thirty-two orders of occupations. The more important changes in the principal occupation groups in the County are increases of 17 per cent. in the numbers engaged in commercial occupations and in personal service occupations and a heavy decrease of 31 per cent. in makers of textile goods, dress, etc., one of 26 per cent. in the number of metal workers, one of 19 per cent. in the number of persons in mining and quarrying occupations and one of 18 per cent. in workers in wood and furniture. Among the smaller groups each occupying less than 2,000 persons, a large proportionate increase of 56 per cent. is observed in the number of paper and cardboard workers and a decrease of 37 per cent. in the number engaged in Public Administration and Defence. Of the more important principal orders, mining and quarrying is the largest occupation group in the County returning 24,006 persons, of whom 23,584 are males—constituting 26·5 per cent. of the total occupied male population. This group employs 5,628 fewer than in 1921. Commercial occupations including commercial, finance and insurance occupations (excluding clerks) occupies 12,386 persons (males 7,606, females 4,780), being 1,792 more than at the previous Census. Personal service occupations engage 11,509 persons (males 1,990, females 9,519), being 1,714 more than in 1921. The females constitute 30·1 per cent. of the occupied female population and 6,995 of them are domestic servants—879 more than in 1921.

In agricultural occupations there are 8,685 persons (males 7,553, females 1,132), being 720 fewer than in 1921. Those returned as farmers number 1,227, being 159 fewer. Farm servants number 4,786, a decrease of 918 compared with 1921.

Workers in transport and communication include 8,413 persons, of whom 2,043 are railway transport workers and 3,595 road transport workers. Railway transport workers are 21 per cent. less but road transport workers are 27 per cent. more than in 1921.



The group Other and Undefined workers numbers 8,049 and includes unskilled workers generally.

Textile workers, 6,148 persons, differ little from the 1921 figure, but metal workers exhibit the same heavy decline as in other industrial centres. Metal workers number 6,044 as against 8,131 in 1921. There are large decreases in Foundry, Smith and Skilled Forge workers, Erectors, Fitters and Engineers but Motor Mechanics, numbering 506, are 200 more and Plumbers numbering 540, show a moderate increase on the 1921 Census figure. Professional occupations (excluding clerks), 4,667 persons, are 226 more than in 1921. Of the total number, 2,029—of whom 1,476 are females—are Teachers (including Music Teachers); and 555 are Nurses (sick).

The number of houses in occupation of private households in the County was 67,727 with a population of 270,030, the average number of persons to each private house being 3·99. At the Census of 1921 there were 63,373 houses in occupation by private households with a population of 282,218, giving an average of 4·45 persons to each house. Since 1921, the number of occupied private houses has increased by 4,354 and the average number of persons per house is less by 0·46. In the Landward Area, the average number of persons per house is 4·21 (Kirkcaldy District 4·66, Dunfermline District 4·31, St. Andrews District 3·59 and Cupar District 3·56). In the Small Burghs this rate is 3·92 but varies in the individual Burghs from 4·50 in Buckhaven and in Lochgelly to 3·28 in Falkland.

Throughout the County, houses of one room are 756 or 19·6 per cent. fewer than in 1921 and two-roomed houses 1,078 or 4 per cent. fewer; but three-roomed houses have increased by 4,459 or 28·1 per cent., four-roomed houses by 1,141 or 15·4 per cent. and five-roomed houses by 531 or 17·6 per cent.

Of 3,102 one-roomed in the County, 2,153 or 4·6 per cent. were enumerated in the Landward Area (1,115) and Small Burghs (1,038) being 4·7 per cent. and 4·4 per cent. respectively of the total houses in these areas. In the Landward Area the percentage of one-roomed houses varies from 6·7 in St. Andrews District to 2·9 in Kirkcaldy District and in the Small Burghs from 10·7 in Cowdenbeath, 7·7 in Leslie, 7·4 in Newburgh to 0·9 in Leven.

Two-roomed houses form 42·5 per cent. of the total houses in the Landward Area, varying from 45·5 per cent. in Dunfermline District to 36·8 in St. Andrews District. In the Small Burghs the proportion of two-roomed houses is 35·8 per cent. varying from 56·3 in Lochgelly, 55·2 in Cowdenbeath and 46·9 in Leslie to 9·3 in Newport.

In the Landward Area, 2·6 per cent. of the population live in one-roomed houses and in the Small Burghs 2·9 per cent.



As an indication of housing conditions, the percentage of the population living more than two persons per room in the Landward Area is 38·3 (varying from 46·2 in Kirkcaldy District to 23·3 in each of the Districts of Cupar and St. Andrews). In the Small Burghs this percentage is 29·5 (varying from 49·2 in Lochgelly, 47·8 in Cowdenbeath and 40·3 in Buckhaven to 4·6 in Elie-Earlsferry and 5·6 in Newport).

The number of persons enumerated in one-room sub-lets throughout the entire County was 3,974.

## POPULATION.

The population of the County of Fife, exclusive of the large burghs of Dunfermline and Kirkcaldy, is estimated to the middle of 1932 by the Registrar General at 198,792, an increase of 1,356 compared with 197,436 at the Census of 1931. The estimated population of the Landward Area is 103,457, an increase of 369 compared with the Census figure of 103,088. The population of the Small Burghs, twenty-two in number, is estimated at 95,335, an increase of 987 on the Census figure of 94,348.

## BIRTHS.

During 1932, there were registered within the County of Fife, exclusive of the large burghs of Dunfermline and Kirkcaldy, 3,523 births (corrected) of which 232 were illegitimate. The birth rate per 1,000 of estimated population was 17·7. The illegitimate births were 6·6 per cent. of the total births. In 1931 the total births numbered 3,608 of which 246 were illegitimate; the birth-rate was 18·3 per 1,000.

The number of births in the Landward Area was 1,981 (corrected) of which 144 were illegitimate; the Landward birth rate was 19·1 per 1,000 estimated population, the illegitimate births being 7·3 per cent. of the total births.

The number of births in the Small Burghs was 1,542 of which 51 were illegitimate; the birth-rate was 16·2 per 1,000 estimated population, the illegitimate births being 5·7 per cent. of the total births.

In 1931, the births in the Landward Area numbered 1,935, the birth-rate being 18·9, and in the Small Burghs 1,673, the birth-rate being 17·7.

In 1913, there were 2,883 births in the Landward Area as compared with 1,981 in 1932.

## MARRIAGES.

The number of marriages registered within the County exclusive of the large burghs of Dunfermline and Kirkcaldy was 1,172—Landward Area 581, Small Burghs 591.



The respective rates were 5.9, 5.6 and 6.2 per 1,000 estimated population.

### GENERAL MORTALITY.

The number of deaths corrected for transfers, allocated to the County exclusive of the large Burghs, was 2,378, the death rate being 12.0 per 1,000 estimated population (11.9 when adjusted for age and sex distribution).

The deaths in the Landward Area numbered 1,200 and in the Small Burghs 1,178, the respective death rates being 11.6 and 12.4 per 1,000 estimated population.

In 1931, there were 2,405 deaths in the Landward Area and Small Burghs, the death rate being 12.2 (12.1 when adjusted for age and sex distribution).

A summary of the causes of death in the Landward Area and Small Burghs during 1932 is set forth in the attached table. The cause of death attributed most frequently was Disease of Circulatory System, 425 deaths, of which heart disease was responsible for 363. Of 345 deaths attributed to Diseases of Nervous System, cerebral haemorrhage caused 257. Infectious and Parasitic Diseases caused 294 deaths and Cancer and other Malignant Disease 284 deaths. Diseases of the Respiratory System were much less prevalent in 1932, the number of deaths being 253 in 1932 as compared with 315 in 1931. Diseases of the Digestive System were attributed as the cause of 151 deaths, and Congenital Debility, Premature Birth and Malformations as the cause of 146.

The proportion of all deaths occurring during the first year of life was 11.9 per cent.



# CAUSES OF DEATH. LANDWARD AREA AND SMALL BURGHS, 1932.

Cause of Death.	All Ages.			—1	1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85—
	Both Sexes	Males	F'm's												
Infectious and Parasitic Diseases, ..	294	129	165	42	54	20	12	32	33	28	26	14	18	10	5
Cancer and Malignant Disease ..	284	118	166	..	..	..	..	4	6	16	48	73	83	51	3
Diabetes Mellitus ..	24	16	8	..	..	..	..	..	1	3	2	6	7	5	..
Other General Diseases : Chronic Poisonings ..	64	23	41	3	5	2	..	3	6	8	9	12	12	4	..
Cerebral Haemorrhage and Other Diseases of Nervous System, ..	345	157	188	13	10	1	1	7	4	8	24	44	117	91	25
Diseases of Circulatory System, ..	425	129	226	1	..	..	1	3	5	17	33	78	130	120	37
Diseases of Respiratory System, ..	253	145	108	49	21	2	1	12	9	17	10	24	52	43	13
Diseases of Digestive System, ..	151	80	71	24	12	5	..	2	9	12	12	24	27	17	7
Diseases of Genito-urinary System, ..	94	55	39	2	2	2	..	1	3	10	6	15	28	20	5
Diseases of Pregnancy and Childbirth, ..	17	..	17	..	..	..	..	2	10	5	..	..	..	..	..
Diseases of Skin and Locomotor System, ..	23	13	10	2	..	1	4	..	2	2	3	..	6	2	..
Congenital Debility, Premature Birth, Malformations, etc., ..	146	84	62	143	2	..	..	1	..	..	..	..	..	..	..
Senility, ..	99	42	57	..	..	..	..	..	..	..	..	..	11	56	32
Suicide, ..	18	14	4	..	..	..	..	..	3	6	5	4	..	..	..
Other Violence, ..	101	81	20	3	9	8	3	19	12	10	9	9	8	9	2
Ill-defined Causes, ..	40	22	18	..	..	..	1	..	..	..	5	8	14	9	3
All Causes ..	2,378	1,170	1,208	282	115	41	23	86	103	142	192	312	513	437	132
Percentage ..	100.0	49.2	50.8	11.9	4.8	1.7	1.0	3.6	4.3	6.0	8.1	13.1	21.6	18.4	5.5



## INFANTILE MORTALITY.

The deaths of children under one year of age in 1932 in the Landward Area and Small Burghs numbered 282 (male 160, female 122), equivalent to an infantile mortality of 80 as compared with 262 deaths and a rate of 73 in 1931.

The deaths of infants in the Landward Area were 171, equivalent to an infantile mortality of 86 as compared with 143 infant deaths and an infantile mortality of 74 in 1931 and 132 deaths and a mortality rate of 63 in 1930. The infantile mortality rate of 1932 is the highest since 1927.

There were 111 deaths of infants in the Small Burghs, the infantile mortality rate being 72. In 1931 there were 119 infant deaths, the rate being 71—the same as in 1930.

Deaths of infants in the Landward Area and Small Burghs in 1932 were attributed to the following causes :—Measles 8 ; whooping cough 14 ; influenza 5 ; cerebro-spinal fever 7 ; tuberculosis 4 ; other epidemic infections and parasitic diseases 4 ; diseases of nervous system 13 ; diseases of respiratory system 49 (bronchitis 10, pneumonia 37) ; diseases of digestive system 24 (diarrhoea 21) ; congenital debility, premature birth, malformations, etc., 143 ; and other defined causes 11 ; total 282.

Thus the diseases of early infancy included under the heading of congenital debility, premature birth and malformations are by far the most common causes of death under one year of age and accounted for 50·7 per cent. of the infantile mortality in 1932. The great majority of such deaths occur during the first weeks of life. Although the factors are indefinite and, in measure, conjectural, the lack of viability of the infant permits the inference that, apart from accidents of childbirth, the defect is inherent in the mother and has its origin in her conditions of life or in faults within her control. Whatever the cause, the opinion may be ventured that until adolescent women acquire some knowledge of biology and of the conditions of life to be observed during pregnancy and there is reasonable nursing and medical supervision of the ante-natal period (of which there is practically none so far under the County Council), there is not likely to be any satisfactory diminution in the loss of lives under this category.

The next most frequent cause of infantile mortality was diseases of the respiratory system, almost entirely pneumonia and bronchitis, accounting for 17·4 per cent. As measles and whooping cough were prevalent during 1932, the lung complications and sequelae of these diseases doubtless swelled the deaths from bronchitis and pneumonia.



Infectious and other epidemic diseases inclusive of tuberculosis were responsible for 14·9 per cent. of the total infant deaths. Of 42 deaths from these causes 22 resulted from measles and whooping cough, these diseases relative to their prevalence proving serious factors in the determination of the rate of infantile mortality.

Of 24 infant deaths, 8·5 per cent. of the total, 21 were caused by diarrhoea and enteritis—an increase of 10 on the number recorded in 1931.

### PRINCIPAL EPIDEMIC DISEASES.

The deaths from these diseases numbered 150 in 1932, being 14 more than in 1931. Of the total, 60 resulted from measles and whooping cough and 54 from influenza, these being the chief factors in the mortality from infectious diseases.

In 1931, there were 20 deaths from measles and whooping cough and 65 from influenza. The numbers of deaths from scarlet fever, diphtheria and cerebro-spinal fever were slightly in excess of those of 1932.

The death-rate from the principal epidemic diseases is distinctly higher in the Landward Area than in the Small Burghs owing to the heavier mortality from measles, whooping cough and cerebro-spinal fever although the deaths in burghs from influenza exceeded those in the Landward Area by 10.

#### Deaths—Principal Epidemic Diseases, 1932.

Disease.	Landward Area.	Small Burghs.	Total.
Measles, .. .. .	24	12	36
Whooping Cough, .. .. .	20	4	24
Scarlet Fever, .. .. .	3	3	6
Diphtheria, .. .. .	5	6	11
Influenza, .. .. .	22	32	54
Cerebro-Spinal Fever, .. .. .	9	2	11
Other Epidemic Diseases, .. .. .	6	2	8
Total, .. .. .	89	61	150
Rate per 1,000 Estimated Population,	0·86	0·64	0·75

### DEATHS FROM TUBERCULOSIS.

The number of deaths from pulmonary and non-pulmonary tuberculosis in the Landward Area and Small Burghs in 1932 was 128, equivalent to a death-rate of 0·64 per 1,000 estimated population. The number of deaths in the Landward Area was 58 and in the Small Burghs 70, equivalent to death-rates of 0·56 and 0·73 per 1,000 respectively.



**Deaths from Tuberculosis, 1932—Landward and Small Burghs.**

Area.	All Tuberculosis.		Pulmonary.		Non-Pulmonary.	
	Number	Rate per 1,000	Number	Rate per 1,000	Number	Rate per 1,000
Landward and Small Burghs, ..	128	0.64	91	0.46	37	0.18
Landward, ..	58	0.56	40	0.39	18	0.17
Small Burghs, ..	70	0.73	51	0.53	19	0.20

The number of deaths from all tuberculosis in the combined district of Landward Area and Small Burghs for the last three years shows a slight increase:—1930, 119 deaths; 1931, 121 deaths; 1932, 128 deaths. During these years, the deaths from all tuberculosis in the Landward Area have numbered 164 as compared with 204 in the Small Burghs, showing a heavier incidence of the disease in the Burghs. For the years noted and the combined Landward and Burgh district the deaths from pulmonary and non-pulmonary tuberculosis were 265 and 103 respectively.

The numbers and age distribution of the deaths in 1932 from pulmonary or respiratory tuberculosis and other forms of tuberculous disease occurring in the Landward Area and Small Burghs is shown below:—

**Deaths from Tuberculosis, 1932.**

Tuberculosis.	Under 5 years.	5-15	15-25	25-35	35-45	45-55	55 and over.	Total.
Pulmonary ..	2	3	24	26	7	12	7	91
Other Tb. Dis.	14	7	6	2	5	1	2	37
Total ..	16	10	30	28	12	13	9	128

The tabular statement illustrates that tuberculosis kills at the most important and valuable period of life.

**DEATHS FROM CANCER.**

The deaths from cancer and malignant disease were 284 (males 118, females 166) in 1932 in the Landward Area and Small Burghs, equivalent to a death-rate of 1.43 per 1,000 estimated population.

The number of deaths in the Landward Area was 140 and in the Small Burghs 144, the death-rates being 1.35 and 1.51 per 1,000 respectively.

The deaths attributed to cancer and malignant disease are increasing slowly but steadily year by year. In 1930, there were 262 deaths; in 1931, 282 deaths; and in 1932, 284 deaths in the Landward Area and Burghs.



### DEATHS FROM RESPIRATORY DISEASES.

The number of deaths from diseases of the respiratory system in the Landward Area and Small Burghs in 1932 was 253—bronchitis 101, pneumonia 121 and other respiratory diseases 31.

The mortality rate was 1·27 per 1,000.

The number of deaths from these diseases in the Landward Area was 144 and in the Small Burghs 109, equivalent to mortality rates of 1·4 and 1·14 per 1,000 population respectively.

In 1931 the deaths from respiratory diseases numbered 315, being 62 more than in 1932.

As noted in former reports, these diseases exact their toll at the extremes of life when the individual is most susceptible to infection. Thus, in 1932, there were 70 deaths of children under two years of age and 132 deaths at ages beyond fifty-five years.

### DISEASES OF PREGNANCY AND CHILDBIRTH.

There were 17 deaths from these causes in the Landward Area and Small Burghs, 7 from puerperal sepsis and 10 from other puerperal causes, the death-rate being 0·08 per 1,000. The deaths in the Landward Area numbered 12 (puerperal sepsis 6, other puerperal causes 6) and in the Small Burghs 5 (puerperal sepsis 1, other puerperal causes 4), the mortality rates being Landward Area 0·12 and Small Burghs 0·05 per 1,000.

The Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations (Scotland), 1929 came of force on 1st October 1929. In the interval, investigation has been made of the circumstances of death of any woman dying during pregnancy or within a month of childbirth, the reports obtained being sent to the Scottish Department of Health. The attention directed to the subject and the special care assured to women developing pyrexia (fever) by admission to hospital appear to have had beneficial results as the deaths attributed to puerperal causes are diminishing :—1930, 28 deaths ; 1931, 23 deaths and 1932, 17 deaths.

### DEATHS FROM VIOLENCE.

Violent deaths numbered 119 (suicide 18, other violence 101) equivalent to a death-rate of 0·60 per 1,000. There were 55 deaths from violence in the Landward Area and 64 in the Small Burghs, the rates per 1,000 being 0·53 and 0·67 respectively.

The numbers of deaths from these causes in the Landward Area and Small Burghs were 143 in 1930 and 135 in 1931.

### SMALL BURGHS.

The more important figures relative to the Small Burghs are set forth in the annexed tabular summary.



## SMALL BURGHS—VITAL RETURNS, 1932.

BURGH.	Population (estimated)	Births (corrected)	Mar'ges (registered)	Deaths (corrected)	Infant Deaths	Tuber. Deaths		Deaths from Prin. Epi- demic Dis.	Deaths from Cancer	Deaths from Puer- peral Sepsis.	Deaths from Other Puer- peral Causes	Deaths from Respira- tory Diseases
						Pulm.	Non-Pul					
Auchtermuchty	1,224	18	5	19	1	1	..	2	2	..	..	1
Buckhaven	17,813	367	118	190	37	10	..	15	21	..	1	25
Burntisland	5,433	66	21	72	7	3	1	2	8	..	..	6
Cowdenbeath	12,841	254	90	150	20	4	5	9	17	..	2	13
Crail	1,054	8	8	29	..	3	1	..	4	..	..	1
Culross	505	8	13	3	..	..	..	1	1	..	..	..
Cupar	4,749	81	34	49	3	1	..	1	3	..	..	6
Elie-Earlscerry	984	4	6	25	..	1	1	..	5	..	..	2
Falkland	777	12	5	14	3	..	..	1	2	..	..	1
Inverkeithing	3,254	49	8	40	4	2	..	2	5	..	..	7
Kinghorn	1,913	33	7	28	1	2	1	2	2	..	..	3
Kilrenny-Anstruther	3,269	43	15	49	3	2	1	1	8	..	..	5
Ladybank	1,164	17	6	16	2	1	1	..	2	..	..	..
Leslie	2,498	40	12	34	4	1	..	4	6	..	..	3
Leven	7,457	112	54	92	5	2	3	8	16	..	..	8
Lochgelly	9,373	175	83	93	8	6	4	4	8	..	1	11
Markinch	2,086	40	19	23	3	2	..	3	2	..	..	..
Newburgh	2,183	38	12	38	1	..	..	1	1	..	..	3
Newport	3,302	21	16	46	1	..	..	..	8	..	..	..
Pittenweem	1,655	20	4	18	1	2	..	..	2	..	..	3
S <sup>t</sup> . Andrews	8,551	93	37	110	3	5	1	5	17	1	..	7
Tayport	3,250	43	18	40	4	3	..	..	4	..	..	4
All Small Burghs	95,335	1,542	591	1,178	111	51	19	61	144	1	4	109



The births (corrected) in the twenty-two Small Burghs in 1932 numbered 1542, equivalent to a birth-rate of 16·2. In 1931, there were 1,673 births and in 1930, 1713 births.

There were 591 marriages as compared with 505 in 1931 and 568 in 1930. The marriage rate in 1932 was 6·2 per 1,000. The number of deaths was 1,178 (corrected for transfers), the death-rate being 12·4 per 1,000. The deaths in 1931 numbered 1,163; in 1930, 1,151. The natural increase of population in the Small Burghs in 1932 was 364, as compared with 510 in 1931 and 562 in 1930.

The infantile mortality rate (deaths of infants under one year of age per 1,000 births) was 72. Infant deaths in 1931 numbered 119 and 121 in 1930.

The death-rate from all tuberculosis was 0·73 per 1,000; that from pulmonary tuberculosis was 0·53, the non-pulmonary or other tuberculosis death-rate being 0·2.

The number of deaths from cancer (144) was 2 less than in 1931 and those from puerperal causes were 3 less than in 1931 and 4 less than in 1930.

Deaths from respiratory diseases were 109 in 1932, a decrease of 53 on the number in 1931.

The populations of the great majority of the burghs of Fife are so small that rates derived from them are not reliable.

For the larger burghs, the infantile mortality rate (the ratio of infant deaths per 1,000 births) serves as an indication of the trend. The more populous burghs with the higher infantile mortality rates were:—Burntisland 106; Buckhaven 101; Tayport 93; Inverkeithing 81. On the other hand St. Andrews, Leven and Lochgelly had rates of 32, 45 and 46 respectively.

The higher tuberculosis death-rates were:—Lochgelly 1·07; Markinch 0·96; Tayport 0·92; and Burntisland 0·74 per 1,000.

The death-rates of Leven (1·07) and Buckhaven (0·84) from the principal epidemic diseases were heavier than the rate (0·64) obtaining in the Small Burghs as a whole.

### NOTIFICATION OF INFECTIOUS DISEASES.

The number of persons in the Landward Area and Small Burghs notified in 1932 as suffering from notifiable infectious diseases was 3,895, of whom 1,657 or 42·5 per cent. were removed for hospital treatment. In 1931, the number of persons notified was 2,724, of whom 1,070 (39·3 per cent.) were admitted to hospital; in 1930 there were 3,398 notifications, 1,435 patients (42·2 per cent.) being removed to hospital.



The patients notified in 1932 comprised :—typhoid or paratyphoid fevers 3, scarlet fever 1,119, diphtheria 205, erysipelas 167, puerperal fever 18, puerperal pyrexia 26, ophthalmia neonatorum 122, infective jaundice 1, malaria 1, dysentery 9, infantile paralysis 1, encephalitis lethargica 9, acute primary pneumonia 269, acute influenzal pneumonia 74, pulmonary tuberculosis 196, non-pulmonary tuberculosis 230, cerebro-spinal meningitis 6, and chickenpox 1,439.

Excluding chickenpox, the number of patients notified was 2,456 an increase of 649 as compared with 1931.

With the exception of scarlet fever and tuberculosis, the infectious diseases most frequently notified were during 1932 fewer than in 1931.

Reference was made in the Annual Report of 1931 to the low incidence of the common infectious diseases. In November 1932, the incidence of scarlet fever increased and this infection assumed epidemic proportions in Kirkcaldy District, mainly in the mining township of Bowhill. A constant watch was maintained on schools and milk supplies but neither agency was responsible for the spread of infection which found its nidus in the susceptibility of the population to the disease.

The opinion that the notification of chickenpox was a useless expense to the local authority was stated in last year's Report and has been expressed more than once in the past. The Regulations made by the Scottish Department of Health requiring notification of the disease were not renewed for 1933.

The closure in part or whole of any school with a view to the limitation or prevention of the spread of infectious diseases was not necessary in 1932.

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

Under the scheme in force in terms of the above Act throughout the Landward Area and Small Burghs, 25 patients suffering from diabetes were supplied with insulin at a cost of approximately £90 13s 4d to the County Council. 6 patients refunded the cost in whole or part.

Food furnished as special diet to diabetic patients involved the additional amount of £31 9s 1d.

### **TUBERCULOSIS SCHEME.**

The County Council as County Public Health Authority administers the scheme throughout the Landward Area and Small Burghs with Dr. Alex. Lundie in the capacity of Executive Tuberculosis Officer and the Health Visitors as Tuberculosis Nurses. The organisation of the Scheme has been described in former reports.



During 1932, the number of persons notified as suffering from tuberculosis in the Landward Area was 224 (pulmonary 96, non-pulmonary 128), and in the Small Burghs 202 (pulmonary 100, non-pulmonary 102), the total for the County Council area being 426 (pulmonary 196, non-pulmonary 230).

The following statement shows for recent years the notifications of both forms of tuberculosis in the Landward Area and in the Small Burghs :—

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
1929	72	100	172	75	68	143
1930	77	88	165	104	79	183
1931	81	88	169	77	85	162
1932	96	128	224	100	102	202

Compared with 1931, there has been a marked increase in the numbers of cases notified both in the Landward Area and in the Small Burghs, but particularly in the Landward Area. The steady decline in the numbers notified as suffering from the disease observable within recent years has not continued and, as noted on a preceding page, there has been a halt in the annual decrease in number of tuberculosis deaths recorded during the same period.

The admission to Glenlomond Sanatorium of 212 patients was arranged during the year from the following areas :—

*Landward.*—Kirkcaldy District 38 ; Dunfermline District 27 ; St. Andrews District 9 ; Cupar District 9.

*Burghal.*—St. Andrews 6 ; Lochgelly 11 ; Burntisland 6 ; Falkland 2 ; Crail 1 ; Kilrenny 2 ; Tayport 3 ; Culross 1 ; Cowdenbeath 13 ; Kinghorn 6 ; Newport 2 ; Newburgh 5 ; Leven 2 ; Cupar 6 ; Inverkeithing 4 ; Methil 15.

In addition 8 patients were admitted from Kinross County and 36 from areas outwith the County of Fife.

*Domiciliary Treatment.*—During the year additional nourishment was supplied to 151 patients at a total cost of £317 16s 2½d or £2 2s 1½d per patient.

The usual articles of food supplied to patients are milk, oatmeal, eggs and butcher meat. Occasionally, in a case where the patient's digestion is poor, farinaceous food is given instead of oatmeal. During the winter months cod liver oil and malt are granted to numerous patients who, during the summer months, can manage without help.



Within reasonable limits no attempt is made to regulate the supply of additional nourishment on the basis of family or personal income. The granting of additional nourishment largely depends on the severity of the case and as most of the patients who receive food under the County Tuberculosis Scheme come under the pulmonary category and are constantly requiring good and regular food to maintain their strength, grants have often to be continued for long periods.

*Lupus*.—Eleven patients suffering from Lupus or Tuberculosis of the Skin were granted travelling facilities to enable them to attend Edinburgh Royal Infirmary for treatment. The total cost was £112 9s 10d or £10 4s 6d per patient.

It is very satisfactory to note that one or two cases who have been attending the Infirmary for some years have shown a decided improvement with the result that during the better weather they have not required to attend so often. One patient removed to England after the disease had become quiescent as the result of the treatment afforded him at Edinburgh Royal Infirmary, and another patient attended so irregularly that the cost involved was not proportionate to the benefit derived and it was decided to discontinue the travelling facilities granted to her.

The question of treating patients suffering from lupus at Glenlomond Sanatorium and at the various Light Clinics in the County, has been considered. Transport facilities are, however, not suitable, Edinburgh proving the most convenient centre for those areas of the County where lupus is most common.

Under the Scheme of the County Tuberculosis Authority for the supply of drugs and dressings to tuberculosis patients, 56 medical practitioners prescribed for 333 patients at a cost of £257 17s 8d. The average cost per patient was 15s 6d and the average cost per doctor £4 12s 2d.

### **Report by Dr. Lundie, Executive Tuberculosis Officer on work done during 1932.**

In 1932, there were 426 new notifications of tuberculosis received. These included 198 cases of pulmonary and 228 of non-pulmonary disease. In addition to these, 30 new cases were examined prior to notification.

The number of homes visited during the year was 2,086. This included 203 visits to new pulmonary cases and 217 to new non-pulmonary cases, either after or before notification; 875 pulmonary and 706 non-pulmonary cases were revisited; and 85 special visits were made to examine contacts who had not been examined previously.



### Examinations made during the Year 1932.

New Cases.		Old Cases Revisited.		Contacts.	Homes visited.
Pul.	Non-Pul.	Pul.	Non-Pul.		
203	217	875	706	85	2,086

There were only 30 cases examined prior to notification last year.

### Cases examined prior to Notification.

	Tuberculous	Non-Tuberculous	Still under Observation	Total
Pulmonary ..	4	20	5	29
Non-Pulmonary ..	1	1	0	1

Among the 198 pulmonary notifications the diagnosis was verified in 132 cases. It was definitely rejected in 44 cases. The remaining cases comprise those in which the diagnosis was changed from pulmonary to non-pulmonary disease or who have left the district—22 in number. 37 cases died of those notified during the year. The new cases remaining on the register thus amount to 128, 18 more than in 1931.

### Notified Cases (Pulmonary) Total 198.

Removed from Register.				Still on Register.			Total.
Non-Tuberculous		Died 1932	Removed from district or transferred to non-pulmonary category.	Sputum Examination.			
Home	San.			T.B. Pres.	T.B. not f'nd.	Not. Exam.	
23	21	37	26	40	22	29	198

Only 16 diagnoses out of the 228 notifications of non-pulmonary tuberculosis have not been confirmed. Details of these cases are given below. 20 deaths occurred in this series.



### Notified Cases (Non-Pulmonary).

Localisation of Disease.	No. of cases seen.	Admitted to Glenlomond.	Diagnosis not confirmed.
Superficial Glands .. ..	120	18	6
Abdomen .. .. .	58	6	3
Spine .. .. .	12	4	3
Hip-Joint .. .. .	2	1	0
Other bones and joints ..	17	5	3
Lupus .. .. .	3	0	0
Other parts .. .. .	16	0	1
<b>Total .. .. .</b>	<b>228</b>	<b>34</b>	<b>16</b>

As regards the deaths of new pulmonary cases during the year, it is to be observed that there were 14 fewer than in the previous year, but the number occurring within six months of notification is still high. In the non-pulmonary series 20 deaths were recorded during the year: 17 occurred within one month of notification, 10 of which were due to meningitis. The other deaths were due to abdominal tuberculosis (8 cases) and spinal disease (2 cases). The majority of the cases notified were glandular infections and many of them were not severe.

### Deaths (New Cases).

	Notified after Death.	Notified before death,					Total.
		1-7 days	1 mth.	2 mths.	3-6 mths.	6-12 mths.	
Pulmonary,	0	3	9	0	20	5	37
Non-Pulmonary,	4	6	7	0	3	0	20

An enquiry into the age grouping of new cases reveals that the largest number of new pulmonary cases occurred between the ages of 15 and 25. This does not throw any light upon the time when infection first occurred, it merely indicates the date of the first serious breakdown. The number of cases is too small to afford a basis of statistical value, but observations in other places confirm the belief that the incidence of young adult tuberculosis is too high. This was one of the important subjects discussed at the Conference of the National Association for the prevention of Tuberculosis which it was my privilege to attend last July.



### Age Groups of 132 Accepted Pulmonary Cases, 1932.

Under 5	5-10	10-15	15-25	25-35	35-45	45-65	65 up	Total
0	5	8	38	32	22	24	3	132

The following statement shows the deaths occurring in new cases according to age groups. Among the pulmonary cases the rate was high in the 15-25 group and even up to the age of 45. In non-pulmonary cases, a high mortality was observed only in the first group.

### Age Groups of deaths of cases notified in 1932.

	U'd'r 5	5-10	10-15	15-25	25-35	35-45	45-65	65 up	Total.
Pulmonary	0	0	2	13	8	8	6	0	37
Non-Pulmonary	15	1	0	0	1	1	2	0	20

Reference to the returns of previous years shows that there has been a steady increase since 1929 in the number of notifications of pulmonary tuberculosis in the Landward Area, with an increase in the Burghal Areas for the last year, making the latter figure 4 less than in 1930 but 23 more than in 1931.

Undue stress should not be put on these figures as they are not a true criterion of the number of new cases actually arising. Many of them are usually found each year to be non-tuberculous.

*Pulmonary Tuberculosis.*—The new cases provisionally accepted as pulmonary tuberculosis in 1931 numbered 161. This year they number 132.

12 patients who came to Fife already suffering from tuberculosis or were found soon after arrival to have it are not included, as they returned to their own districts.

*Non-Pulmonary Tuberculosis.*—There were in 1932, 40 more notifications of non-pulmonary in the Landward Area and 17 more in the Burghal Area than in 1931. Some of these cases were found among the contacts of patients suffering from pulmonary tuberculosis. Many others had minimal glandular infections observed during the course of some minor illness and a few were discovered by surgeons at abdominal operations.

*Contacts.*—In this connection it is observed that parents are usually willing and eager to have all the family examined after a case of pulmonary tuberculosis has occurred. Indifference is seldom met with and when an infected contact is discovered it has never been difficult to arrange for further supervision or even Sanatorium treatment for the patient.



*Early Notification.*—A disquieting feature to be remarked in the returns is the number of deaths occurring within a short time of notification and the large proportion of young adults among them. See Tables. This is not peculiar either to the past year or to this locality and concentrated efforts are being made to deal with this problem. The increase in notifications last year has not affected this figure. Earlier notification is more important.

Early infections of children who have been in contact with cases of pulmonary tuberculosis are frequently found and the treatment of such cases in the Sanatorium is highly satisfactory. Parents sometimes do not realise the nature of such ailments and are glad to have them dealt with while they are still amenable to treatment, but they are frequently slow to remember previous minor symptoms when pulmonary disease has appeared in later life.

Several patients sent to Glenlomond have been found there to be infected with bovine tuberculosis. In these cases efforts have been made to trace the source of infection. While the ideal of compulsory provision of tubercle free milk remains unachieved, it is satisfactory to know that practical difficulties are being overcome.

*Housing.*—The widespread improvements in the housing of the working classes cannot but effect a reduction in the incidence of tuberculosis, although it is too early yet to assess their influence in that respect. The new houses are a vast improvement upon the old ones being better situated, ventilated, lighted and furnished with modern conveniences and these factors react upon the people who occupy them.

*Occupation.*—As regards the occupational incidence of pulmonary tuberculosis, no new facts have emerged.

*Diet.*—Diet by reason of its unsuitability may produce a lowered vitality and thus become a contributory factor in the causation of tuberculosis. A good mixed diet need not be more expensive than one that is less troublesome to prepare. The accessory food factors which are prescribed as vitamin concentrates to debilitated people, are all to be found in ordinary foods such as fresh milk, butter, fruit, vegetables, herring and meat. Few people can afford expensive preparations to reinforce a diet which is defective.

*Work and Recreation.*—Work and recreation are cited as factors contributing to the incidence of tuberculosis, the latter particularly in the case of young adults. For those who are fortunate enough to enjoy a day's hard work, strenuous athletic recreation would seem to be too exhausting. Yet it is willingly undertaken for its own sake. Gardening would appear to be more restful, to be interesting and sporting enough for those who can understand it and it would provide the family larder



with the fresh vegetables so often lacking where they are so much required. The new housing schemes provide opportunities for this healthy recreation and many are now busily engaged in it to their own great advantage.

Overwork has once been complained of. A mother attributed her son's breakdown in health to his having performed "time and a half" duties for a long time.

*Other Diseases—The influence of other diseases upon the incidence of tuberculosis.*—The pulmonary complications of influenza sometimes are with difficulty to be distinguished from tuberculosis, but apart from that, the debilitating nature of the disease itself undoubtedly may contribute to the breakdown of an already infected subject who has hitherto appeared to be in good health. It follows that more notifications and more cases of tuberculosis will be observed after influenza has been epidemic, as it was during the latter part of the year. Measles plays the same role in childhood.

I have pleasure in acknowledging the invaluable help received from the County Health Visitors.

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

The Scheme embraces the whole County, the Joint Committee administering the work throughout the County with the exception of the Treatment Centre in the Burgh of Kirkcaldy which is undertaken by the Town Council on behalf of the Joint Committee.

The work continues on the lines set forth in former Annual Reports.

Educational propaganda, with a view to prevention, was renewed during the winter in co-operation with the Scottish Branch of the British Social Hygiene Council. This took the routine form of public lectures illustrated by cinematograph films, the attendance being satisfactory. There is no doubt of the beneficial results following upon such educational work and this appears to be proved by the numbers visiting the clinics to ensure that infection has not been contracted after exposure to the risk of it.

I again desire to emphasise the inadequacy and unsuitability of the premises in Market Street, Dunfermline, for the work undertaken therein in respect of the western area of the County. The standard of competence of the medical work of the Dunfermline Centre is excellent but the situation of the premises and the publicity ensured by treatment therein militates against attendance and tends to drive patients elsewhere. The adverse factors minimising the efficiency of this Centre have been pointed out and admitted for several years—a sufficient interval to warrant action being taken for the provision in the immediate future of more adequate accommodation on some more appropriate site.



Recently the question of payment for persons from Fife attending the Centre maintained in Edinburgh Royal Infirmary by the Town Council of the City has again been raised.

The Centres of Fife County received at their initiation the approval of the Scottish Board of Health. Prior to the inauguration of the treatment of venereal diseases in the County, the debt to Edinburgh was recognised and discharged.

When the Public Health (Venereal Diseases) Regulations came of force during the Great War, the Government Grant in aid of the costs of treatment of venereal diseases by local authorities was raised from the routine 50 per cent. to 75 per cent. to ensure that any and every patient appearing at a centre should be treated without question as to recovery of the expense involved, no matter the district of his residence. Any other contention negatives the understanding on which treatment centres were established.

The Fife Joint Committee should turn a deaf ear to the pleadings of Edinburgh and of the South-Eastern Counties of Scotland, of whom the latter, for reasons of economy, have adopted Edinburgh Royal Infirmary as their Treatment Centre in preference to establishing centres of their own.

The cost of the railway travelling facilities granted during 1932 to necessitous patients who otherwise would not have been in a position to attend for treatment was £11 17s 6d as compared with £14 7s 1d in 1931 and £24 9s 11d in 1930.

**KIRKCALDY CENTRE.**—The facilities provided at The Dispensary, Dunnikier Road, Kirkcaldy, are in charge of Dr. G. W. McIntosh, Burgh Medical Officer, with Dr. Annie Fulton as Medical Officer for women and children. The appointment of Dr. Fulton has obviously ensured the confidence of female patients judging from the larger numbers of women attending and their more regular and frequent attendance.

In his Annual Report Dr. McIntosh records that 483 patients, of whom 274 were new cases, were treated in 1932. Of 274 new patients (male 169, female 105), 163 suffered from venereal disease (syphilis 65, gonorrhoea 79, soft chancre 1, and non-specific venereal infections 18); 111 patients showed conditions other than venereal. New cases of congenital syphilis numbered 20. The number of attendances of patients infected with venereal disease was 5,279 and 1,542 doses of arsenobenzol compounds were administered.

The aggregate in-patient days was 167 as compared with 404 in 1931.

Defaulters numbered 58, the lowest recorded so far for the Centre. The number of patients discharged cured was 111.



Of the infected cases under treatment, 88 were resident in Kirkcaldy, 65 in other areas of Fife, 2 in Scotland outwith Fife and 8 outwith Scotland.

The number of examinations of material from patients suspected of venereal disease was 1,287, 370 by the staff of the Centre and 917 by University College, Dundee.

**DUNDEE CENTRE.**—The Public Health Institute, 55 Constitution Road, Dundee, meets adequately the requirements of the eastern third of the County.

Dr. Averill, Medical Officer, records 47 new cases (males 31, females 16) from Fife during 1932 in contrast to 31 in 1931 and 51 in 1930.

The addresses given by patients were :—Cupar 13, St. Andrews 18, Tayport 7, Newport 2, Leuchars 2, and five other villages each 1. The conditions necessitating attendance were :—syphilis 13 (males 8, females 5), gonorrhoea 28 (males 17, females 11), other venereal diseases 3 males, no venereal disease 3 males.

The total attendances were :—706 (male 418, female 288); the number of salvarsan and bismuth doses administered was 143 and 163 respectively.

**DUNFERMLINE CENTRE.**—Dr. Graham Gumley, Medical Officer, and who also serves as Area Medical Officer, furnishes the following report for 1932 :—

I have the honour to submit to you a report of the work carried out at the Dunfermline Centre for the Treatment of Venereal Diseases. The report covers the period January 1st to December 31st, 1932.

*New Cases.*—During the year 223 persons sought the assistance of the clinic; of these, 150 were males and 73 were females. These figures show a decrease of 10 males and an increase of 12 females on comparison with the figures of 1931.

Of the total number :—

64 were recommended by medical practitioners.

127 were unrecommended.

4 were transferred from other treatment centres.

13 were recommended by Parish Authorities.

5 were seen at Springfield Asylum.

1 was recommended by a Health Visitor.

5 were recommended by the Medical Officer of Dunfermline Burgh.

4 were recommended by County Area Medical Officers.

*Source of Cases.*—A separate table shows the number of cases recruited from the various areas within and outwith the County.



*Incidence of Disease in New Patients.*—In order to correspond with the annual return made to the Department of Health for Scotland, separate clinical infections in the same patient, *e.g.*, syphilis and gonorrhoea, are recorded as individual “clinical infections.” The 223 new persons yielded 232 clinical infections. As this latter figure records the material we have dealt with, the incidence of disease has been recorded as a percentage calculated from this denominator, thus :—

36·21 suffered from gonorrhoea alone.

27·59 suffered from syphilis alone.

2·59 suffered from soft chancre alone.

6·46 suffered from minor non-specific venereal infections.

27·15 suffered from non-venereal conditions or were proved to be entirely healthy.

Most of cases of gonorrhoea seek advice within a few days of the onset of signs of infection. They are therefore brought under treatment early and the results of continued treatment are most satisfactory. The majority of such cases run, without complication, to rapid amelioration of symptoms and early cure, but all are kept under observation for a minimum period of four months. A searching test of cure is then carried out and if satisfactory those patients are then discharged with the positive assurance that cure is complete.

The other group of cases which present themselves later and those which develop complications require a longer period of treatment.

*Default.*—It is in these latter groups that defaulters occur and it is our experience that “once a defaulter always a defaulter” is only too true. We have no power to compel a patient to attend until cured so that a defaulter continues for an indefinite period as a source of infection to others.

The problem of the venereal defaulter is one which will require to be tackled in no uncertain manner and one feels that nothing is to be gained by delaying the necessary legislation.

*Syphilis.*—With regard to the cases of syphilis it is still a lamentable fact that only too many of our new cases are in the latent and tertiary stages of the disease so that, before cure is accomplished, treatment has to be prolonged over a period of years. Only a few cases of primary and secondary syphilis come to us; their rapid progress under treatment is one of the most satisfying aspects of our work.

One feels that here the remedy lies in broadcast knowledge. Mere notification cannot surmount the obstacle of total concealment of infection. If the secondary school boy can be taught biology he can be taught something of the dangers which may await him in his rapidly approaching adolescence. A simple explanation of the venereal diseases will do the adolescent more good than many an alleged “modern novel.”



*Prevention.*—The large percentage of cases of non-venereal infection is a matter for congratulation as this number represents persons who have come for overhaul and exclusion of venereal disease, or persons who have come for prophylactic treatment after exposure to infection. We have definitely encouraged this—it is futile in our work to take up any moral viewpoint—we must prevent infection where we are given the opportunity to do so.

*Hospital Cases.*—The number of cases admitted to Hospital was 14, being three less than in the year 1931. Of these, 11 were males and 3 females. The total number of days in hospital was 219, the average stay thus being 15·6 days. The corresponding figures for 1931 were 551 days and 32·7 days respectively.

The ability to secure, for certain cases, adequate rest and nursing care, is of great assistance.

*Premises and Equipment.*—The clinic premises and equipment represent the minimum necessary for the work to be carried on, and in this work something more than the necessary minimum is to be aimed at.

It is impossible for patients to make an unobtrusive entry to the premises. These are cramped, dingy and badly lit—a dismal retreat for the unfortunate young patient in need of assistance. The expenditure of any considerable sum on the premises is not desirable as the outstanding fault is the situation—this can only be characterised as definitely bad. To the numerous passers-by in the main thoroughfare, any person entering Market Street is almost certainly going to the Venereal Diseases Clinic.

*Springfield Asylum.*—Periodic visits have been made to this institution. Cases have been seen there in collaboration with the Medical Superintendent, and those considered likely to benefit have been put under treatment.

*Combination Home and Hospital, Dunfermline.*—At the request of the House Committee the weekly visits to this institution have been discontinued.

In submitting this report I wish to express my appreciation of the valuable assistance rendered by the Medical and Nursing staff of the West Fife Infectious Diseases Hospital and to the Nurse and Medical Orderly at the Centre my indebtedness for their constant co-operation throughout the year.

Tables showing the work of each month, treatment given and source of cases, are appended.



## Statistics 1932.

New Cases.	Persons reporting.		Syphilis.		Gonorrhoea.		Soft Chancre.		Non-Specific V.D. Infections.		Conditions other than V.D.		Number of Clinical Cases.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
January	..	15	7	2	6	1	..	..	2	..	4	1	23
February	..	10	10	1	6	1	..	..	2	..	5	3	20
March	..	16	5	3	1	1	1	..	1	..	2	3	21
April	..	16	6	1	4	1	1	..	1	1	5	..	22
May	..	15	7	3	0	4	..	..	1	..	6	3	23
June	..	13	2	4	1	1	..	..	1	..	2	..	15
July	..	11	6	1	2	2	2	..	2	..	..	2	19
August	..	11	9	3	2	2	..	..	1	..	3	5	20
September	..	14	6	2	2	1	2	..	1	..	3	3	20
October	..	13	7	6	3	1	..	..	1	..	5	3	23
November	..	8	8	2	6	1	..	..	1	..	4	1	18
December	..	8	0	3	0	0	..	..	..	..	..	..	8
Total	..	150	73	31	33	16	6	..	14	1	39	24	232



## Record of Injections given and Specimens Examined.

1932.	Arseno- benzol Compounds.	Bismuth Etc.	Sodium- Thiosulphate Etc.	Total number of Specimens examined.
January .. ..	101	158	49	117
February .. ..	107	180	40	122
March .. ..	69	137	30	143
April .. ..	84	145	19	113
May .. ..	137	154	23	135
June .. ..	117	142	14	116
July .. ..	81	101	16	66
August .. ..	93	117	17	129
September .. ..	81	132	16	127
October .. ..	90	158	19	120
November .. ..	86	154	20	132
December .. ..	86	148	18	82
	1132	1726	281	1402

Numbers of patients in the various districts from which they were recruited :—

Alva .. ..	1	Inverkeithing .. ..	9
Blairhall .. ..	1	Kingseat .. ..	2
Crosshill .. ..	2	Kelty .. ..	8
Cupar .. ..	3	Kinross .. ..	7
Cupar (Springfield) .. ..	5	Lumphinnans .. ..	3
Cowdenbeath .. ..	27	Lochgelly .. ..	10
Crossford .. ..	1	Lochore .. ..	6
Cardenden .. ..	2	Lassodie .. ..	1
Cairneyhill .. ..	1	North Quenesferry .. ..	1
Dunfermline .. ..	84	Newmills .. ..	4
Edinburgh .. ..	1	North Fleet .. ..	1
East Wemyss .. ..	1	Oakley .. ..	1
Gillingham .. ..	1	Plymouth .. ..	1
Glasgow .. ..	2	Rosyth .. ..	18
Glencraig .. ..	5	Steelend .. ..	2
Halbeath .. ..	3	Valleyfield .. ..	3
Hill of Beath .. ..	4	Wellwood .. ..	2

*Total Attendances.*—The total attendances at the clinic during the year were 9,366, a decrease of 182 on the figures for last year.



## MATERNITY SERVICE AND CHILD WELFARE SCHEME.

The preventive welfare work associated with maternity and pre-school childlife is undertaken by the County Council throughout the Landward Area and, as a transferred service under the Local Government Act, 1929, in the 22 Small Burghs within the County. The population of the combined districts is 198,792. The immediate supervision is the care of Dr. R. A. Krause, whose report for 1932 is subscribed. Associated with Dr. Krause are six whole-time Area Medical Officers, four whole-time Dentists and the Health Visitors, the combined staff being responsible for the duties under the schemes of Maternity and Child Welfare and Medical Inspection and Treatment of School Children.

Dr. Doris Williams, Kirkcaldy Area, intimated on 12th August her resignation as from 15th October 1932. Dr. Jas. L. Chisholm, Wemyss Area, on 11th October gave notice of resignation as from 22nd December 1932. Dr. John Comrie replaced Dr. Chisholm on 27th February 1933. The vacancy in the Kirkcaldy area has not yet been filled, with resulting neglect and disorganisation of the welfare work in this important district during the last nine months.

The Maternity and Child Welfare Scheme continues to develop in detail on the general lines formerly described. The authorisation of additional nourishment and of the admission of women to maternity hospitals is undertaken by the County Medical Officer.

Since the establishment shortly after the end of the War of Maternity Homes in the large Burghs of Kirkcaldy and Dunfermline, the County Council has had the advantage of these institutions on a "user" basis. Both institutions, originally established as maternity homes, became perforce maternity hospitals owing to the absence of any such provision within the County and have long outgrown their original purpose and function. New and enlarged premises, consonant with the proved and obvious need for further accommodation are essential for both Large Burghs, which serve exceedingly well as centres for the populous mining-industrial western half of the Landward County and the Small Burghs therein.

Appropriate maternity hospital provision for the needs and the accidents of pregnancy and labour is under active consideration by the Town Councils of Dunfermline and Kirkcaldy and, doubtless, the facilities extended hitherto to the County Council will be continued in future with like beneficial result and the same happy co-operation on the part of the Medical Officers concerned.

The growth of the call by expectant mothers for the facilities, care, comfort and competent medical and nursing supervision during lying-in of the Maternity Hospitals of the two Large Burghs has been extraordinarily rapid and may be accepted as an accurate index of the just value of the services rendered during the last twelve years.



Pari passu with the increase in the yearly admissions from the Burghal Districts, those of the Landward Area have grown. And of 672 admissions to the Maternity Homes of Dunfermline and Kirkcaldy during 1932, 304 were from the adjoining Landward areas whence there is, compared with the Large Burghs themselves, the additional handicap involved by the travelling necessary to reach the hospital.

*Additional Nourishment.*—This is furnished to necessitous expectant and nursing mothers and children under five years of age where, on the reports submitted by the Welfare Nurse and Local Public Assistance Officer, such assistance is found necessary to tide mothers and young children over periods of distress, illness, etc. The extra nourishment granted usually takes the form of milk and oatmeal but in special circumstances Cod Liver Oil and Malt, Emulsion, etc., are supplied.

During 1932 the following grants were approved:—Expectant mothers 80, Nursing mothers 132, children under five years of age, 256 and where mothers and young children generally would benefit 33; 501 in all. 175 applications for assistance were refused.

The expenditure on additional nourishment during the year amounted to £391 16s 3½d.

### MATERNITY HOMES.

**KIRKCALDY MATERNITY HOME.**—During 1932, 120 women were admitted to the Home, an increase of 20 over the number admitted during 1931. Of the 120 women, 96 were paying cases, i.e., either private patients or those who paid the modified fee of £2 on admission and 1s daily during residence, 11 were partly necessitous and 10 were wholly necessitous, while in three cases the County Clerk was asked to recover the fee due.

**DAVAAR MATERNITY HOME.**—184 patients (181 women and 3 infants) were treated in the Home during the year, as against 125 women admitted during 1931. Of these, 143 were paying patients 19 women were necessitous and 14 partly necessitous, while 8 cases were referred to the County Clerk in order that the fees due might be recovered.

Thus, during 1932, the total admissions to Kirkcaldy Maternity Home and Davaar Maternity Home numbered 304 and the amount contributed by these patients towards their maintenance and treatment was £737 14s, leaving a balance of £1,078 19s 2d to be met by the County Council.

**MIDWIVES ACTS.**—During 1932, 142 claims were received from medical practitioners in terms of Section 22 of the Midwives (Scotland) Act, 1915. Three claims were disallowed. The total amount involved was £17 3s 3d.



**ORTHOPAEDIC TREATMENT.**—Patients suffering from conditions rendering orthopaedic treatment necessary are admitted to the Douglas House Home for Crippled Children, Edinburgh, from time to time and advantage is also being taken of the facilities for treatment now available at the Fairmilehead Hospital for Crippled Children, Edinburgh.

**INFANT LIFE PROTECTION.**—By arrangement with the Chief Public Assistance Officer, the County Council Health Visitors have, in the past, been kept informed of every infant registered under the Children Act 1908, Part I. of which provides for infant life protection. Thus, the Health Visitor has been responsible for the active supervision and reporting quarterly (and more often in particular cases) on the nursing and maintenance of children falling within the provisions of this part of the Act of 1908. In view of the nature of her duties, no more appropriate officer could have been found for the work.

The Children and Young Persons (Scotland) Act 1932, came of effect on 1st January 1933, Part V. of which makes provision for Infant Life Protection and amends in various particulars Part I. of the Children Act 1908. It is the duty of the County Council to enforce the provisions of the Act of 1932, in the Landward Area and Small Burghs and the Infant Protection Visitor has now to be satisfied of the health and well-being of the children.

The provisions of the new Act were generally advertised; the Health Visitors and Midwives practising within the County were advised of its terms which were also, through the good offices of Miss Carnegie, Superintendent of the County Nursing Association, brought to the notice of all District Association nurses.

The number of children on the Register at 31st December 1932 was 67. During the period 16th May to 31st December 1932, the number of notices received from persons undertaking the care of children for reward was 18; there was 1 death; 8 children were removed from the care of guardians; 4 were removed on guardians leaving the area and 4 on attaining the age of seven: no children were removed from guardians on account of improper keeping.

## **MATERNITY AND CHILD WELFARE.**

**Report by Dr. R. A. KRAUSE, Deputy Medical Officer (Welfare).**

In the year 1932 a few changes took place in the medical personnel of the six areas. In Dunfermline District—Cowdenbeath Burgh and Kelty—the appointment of Dr. Lundie as Executive Tuberculosis Officer created a vacancy which was filled by Dr. John Thomson. In Kirkcaldy District it was found necessary to make Dr. Nisbet responsible for the work under the Maternity and Child Welfare Scheme in Burntisland-Markinch District as well as in his own (Lochgelly,



etc.). In consequence of this change, Dr. Doris Williams was given the school work in the Auchterderran District. Unfortunately, Dr. Nisbet's sudden death caused a new vacancy and Dr. Thomson was transferred to this area and his post was filled by the appointment of Dr. G. A. H. Gumley. All these changes have definitely affected the work under the Maternity and Child Welfare Scheme and retarded the progress we had been able to make last year. In the late autumn another vacancy was created by the resignation of Dr. Williams. To date this post has not been filled, and the work of the Area Medical Officer in this area has been practically suspended. The increasing demands made on the Area Medical Officers' time by additional duties has made it impossible to bring about a redistribution of the other officers' work, so as to be able to overtake the work in this area. They are not even overtaking all the work that has been allocated to them in their own areas.

In the year 1932 the following number of births was reported to the office:—1,964 boys and 1,776 girls, an increase of 61 in the total number of births. A decrease has to be recorded in the number of cases not notified in accordance with the provisions laid down by the Notification of Births Act, 1907. The number of non-notified cases was distributed as follows:—(a) Dunfermline 8; (b) Kirkcaldy 30; (c) Cupar 9; and (d) St. Andrews 11; or a total of 58 as against 101 last year.

#### MATERNITY AND CHILD WELFARE

Report by Dr. R. A. KRAUSE, Deputy Medical Officer (Welfare).

In the year 1932 a few changes took place in the medical personnel of the six areas. In Dunfermline District—(a) Dr. Thomson resigned his appointment of the Junior Medical Officer, and Dr. Thomson was appointed in his place. In Kirkcaldy District—(a) Dr. Thomson resigned his appointment of the Junior Medical Officer, and Dr. Thomson was appointed in his place. In Cupar District—(a) Dr. Thomson resigned his appointment of the Junior Medical Officer, and Dr. Thomson was appointed in his place. In St. Andrews District—(a) Dr. Thomson resigned his appointment of the Junior Medical Officer, and Dr. Thomson was appointed in his place.



	Births.		Still.	Pre-mature.	Illegitimate.
	Boys.	Girls.			
<i>Dunfermline District.</i>					
Landward ..	328	279	26	25	45
Culross ..	4	4	..	..	..
Inverkeithing ..	39	23	5	6	2
Cowdenbeath ..	146	144	15	10	15
Totals ..	517	450	46	41	62
<i>Kirkcaldy District</i>					
Landward ..	511	517	57	46	56
Lochgelly Burgh	97	88	2	2	6
Buckhaven ..	199	184	14	25	17
Leven ..	64	56	1	5	5
Markinch ..	29	18	2	1	1
Leslie ..	37	24	2	1	2
Burntisland ..	32	31	4	3	6
Kinghorn ..	16	16	1	1	1
Totals ..	985	934	83	84	94
<i>Cupar District.</i>					
Landward ..	103	106	6	3	4
Cupar Burgh ..	50	36	1	2	2
Auchtermuchty	7	11	..	..	2
Ladybank ..	10	6	..	2	..
Newburgh ..	20	14	..	1	1
Falkland ..	8	2	..	..	..
Totals ..	198	175	7	8	9
<i>St. Andrews District.</i>					
Landward ..	149	117	14	17	11
St. Andrews Burgh	46	45	3	5	1
Anstruther ..	11	5	1	3	1
Elie ..	4	3	..	1	1
Pittenweem ..	11	22	4	1	3
Crail ..	1	8	..	..	1
Tayport ..	31	10	1	1	1
Newport ..	11	7	..	..	1
Totals ..	264	217	23	28	20



In the table opposite, the distribution of births in the various districts is given, also the number of still-births, premature and illegitimate cases. The number of plural births was 55 (Dunfermline 14, Kirkcaldy 27, Cupar 2 and St. Andrews 12). Whilst the number of births attended by a doctor was 2,606 and by midwives 1,103, in the case of 29 the birth was unattended by a doctor or a midwife. Two births took place in an institution.

The number of infant deaths reported was 254 as against 242 last year. (Dunfermline 65, Kirkcaldy 155, Cupar 15 and St. Andrews 19). In the case of 124, death was due to prematurity or debility, 59 to respiratory diseases, 10 to infectious diseases, 21 to diseases of the digestive tract (7 diarrhoeal conditions), and other diseases or conditions 40. Whilst prematurity and debility was the cause of the death of the majority of the cases in most of the areas, in Glencraig, out of 30 infant deaths, 13 were due to bronchitis and pneumonia. Of the illegitimate babies, 13 were reported dead or still-born—in only one was there a strong suspicion that the death was due to inefficient attention as neither the doctor nor the midwife was notified of the onset of labour.

There were 159 still-births. Prematurity and difficult labour are given as the most frequent causes. Albuminuria of the mother during pregnancy is also a fairly frequent cause. Three of the cases were anencephalic. The number of cases also varies—in Glencraig there were 22, whilst in the adjacent district of Lumphinnans there were only 2. In the same districts the numbers of premature cases were 16 and nil respectively. The same causes are stated to account for most of the premature births, as in the case of still-births.

The condition of the homes at the first visit by the Health Visitors was found to be generally satisfactory. In 323 cases the condition of the homes was indifferent, whilst in 37 it was dirty (Kirkcaldy 24, Dunfermline 4, St. Andrews 6 and Cupar 3). Attention is again directed to the unsatisfactory conditions of many cottar and ploughmen's houses. In Anstruther district the majority of the cottar houses are described as "poor (mostly two-roomed) and many are damp, dark and have smoking chimneys." A number have no washing house, and in some cases the dry closets are badly kept. In Tayport district, five farm cottages are stated to require improvement.

The houses in the fishing burghs are mostly two-roomed with two box beds in each room. Fortunately most of the houses are scrupulously clean and sanitary conveniences modern. Over-crowding is not general and where the family is large one or more of the children sleep with their grandparents.



In the West, housing conditions vary. In Glencraig there is a good deal of sub-letting and overcrowding—this is likely to continue with present working conditions and high rents. In Cardenden overcrowding is prevalent. In some instances there are ten persons in two rooms. In summer the dust and fumes from the “bing” deprived toddlers of much fresh air. In Lumphinnans district more new houses have been built and there is not much overcrowding. In Kelty, of all the births (170) twenty-eight occurred in sub-let rooms. There was, however, no case of very bad overcrowding. In the Burgh of Cowdenbeath, there were nine outstanding cases where conditions were unsatisfactory. Several others could also be remarked upon but there was nothing specially objectionable about them and the surroundings not unhealthy to the infants. In the southern area of Cowdenbeath there is a good deal of overcrowding and complaints of dampness. Further, a great many of the houses are suffering from subsidence due to underground workings.

In Burntisland there is still a shortage of houses and some people are living in furnished rooms. A few condemned houses are still occupied. The same applies to Leslie, but, on the whole, overcrowding is not prevalent.

In Buckhaven district, housing conditions generally are good except in the old part of the burgh. In the lower area of Methil district, there is a gradual change for the worse recently. Better class families seem to be moving away and a poorer type of people taking their place and there is a great deal of overcrowding, sometimes as many as seven per two rooms.

The Health Visitors find at their “First” visit, that 77·8 per cent. of the mothers breast feed their babies. The figures for the different areas is as follows :—Dunfermline 759 (133 bottle, 19 mixed), Kirkcaldy 1,503 (234 bottle, 77 mixed), St. Andrews 386 (58 bottle, 13 mixed) Cupar 264 (61 bottle, 8 mixed). Generally speaking a large number of the mothers continue breast feeding for the first three months throughout the County, and the proportion still doing so at the end of the sixth month, is about 30 per cent. In Thornton district the percentage of mothers nursing their babies at the first visit of the Health Visitor is as high as 94 per cent. ; at the end of two months there were still 73 per cent. of the mothers breast feeding, and at the end of six months this figure was 41 per cent.

The importance of regular feeding has to be emphasised. According to the Cowdenbeath Health Visitor there tends to be more irregularity with the breast fed babies. Here, whenever the baby is cross it is given the breast for a minute or two to appease it for the time being, whereas if the infant is on the bottle, it takes a little more trouble to make up a bottle feed.



Another fault which is quite common even with mothers who are nursing their babies well, is a tendency to give solids at an early age. Many mothers think that the infant is not getting enough and it requires for this purpose, some nourishment in solid form, usually a biscuit or two.

In the West of Fife, the need for earlier visitation of midwife cases is pointed out. Many midwives seem to be unaware that lactation may not develop for a number of days, and even in some cases for a considerable time. Artificial feeding is apt to be immediately resorted to, where with some continued patience breast feeding would have been established. The suggestion is made that lectures on infant feeding might be given to the midwives.

In Cowdenbeath burgh, the poor physique of the mother in 27 cases necessitated weaning before the end of the first three months. The young mother is not so anxious to persevere in breast feeding as the older woman, who has three or more children.

In Lumphinnans district whilst the majority of the infants are breast fed, some of the mothers were anxious to bottle feed the babies. They, however, continued when the difficulties of bottle feeding were pointed out to them. Here the Health Visitor advises, where necessary, that any supplemental feeding be carried out by spoon feeding, as she finds that the baby is not so apt to go off the breast.

In Buckhaven and Wemyss District the majority of the mothers breast feed their babies. There is a tendency with some to continue nursing too long, particularly if the child is upset with teething. In this district, on the advice of the Area Medical Officer, a number of mothers have been advised to use Lactogol where the quantity of milk was insufficient. In no case where it has been used has the mother failed to continue nursing. Here, as in other parts of Fife, the mothers are advised to use cow's milk where artificial feeding has to be employed, partly or wholly. Further, where possible, mothers who have to get cow's milk are advised to get certified milk in preference to ordinary milk. Unfortunately, the extra cost prevents its general use in many districts.

In the North East of Fife breast feeding is general in the landward areas. Repeated visits are, however, necessary to encourage the continuation of mother nursing. Among the farm workers where the mother does milking, the baby is bottle fed on cow's milk. In the fishing villages breast feeding is carried out so long as the district nurse is in attendance, but is discontinued soon after her visits cease. The Health Visitor usually finds on her third visit (about sixth week after birth of infant) that the baby is getting two bottle feeds per day—usually on the advice of the granny—the excuse being “that the mother's milk is hungry.” It is pointed out to the mothers that so long as the infant is gaining sufficient in weight, no supplemental feeding



is necessary and no change to artificial feeding should be resorted to without consulting the family doctor. The mother is also advised regarding her own diet and care of breasts with the result that a number of mothers have continued breast feeding their babies until 9 months or thereabouts. On the whole, the feeding of infants in the country districts is satisfactory to begin with. It is the later feeding which leaves much to be desired as the additional feeding usually takes the form of bread or biscuit in milk.

In their reports the nurses again point out the need for more attention and time for visiting of toddlers as well as the older pre-school children. In many cases where there is a baby the toddler is left to look after himself. It is, for this reason, unfortunate that at the various new housing schemes throughout the County some provision was not made for small recreation gardens where the toddlers and the younger children could play and be safe from the dangers of fast moving traffic on the roads.

In order that some fuller knowledge could be obtained regarding the diet of toddlers, the Health Visitors made inquiries into the diet of about twenty cases in each district. Unfortunately a great deal of the information is of little value as it is based on what the mothers told the nurse was being given, and there is a strong suspicion that in many cases mothers, knowing what the nurses wanted, gave information which they thought would please them. Nevertheless, some interesting information has been obtained. Whilst there are unexpected variations, yet, on the whole, certain facts seem to stand out. Irregularity of meals, anything that's going (or as is usually stated "he gets the round of the table or house") and the small quantity of milk he gets are repeatedly commented upon by the various nurses. The mother who has a baby usually gives it all her attention and she "finds no time" to prepare special meals for the toddler, and for this reason a temporary loss in weight is often seen after the infant is weaned. The toddler gets his meals from the general table with odd pieces or sweets when he cries and so irregularity of meals may become established. It is the same cause that tends to substitute the giving of tea instead of milk, with the result that in many cases the child does not know and does not care for the taste of milk. When the daily diet consists mainly of a "piece" of bread with margarine or jam, a "fry" of some kind of meat (bacon, kippers, sausages, etc.) as well as cakes and cheap sweets, we understand why such children are undernourished. It is not lack of quantity but of quality that is wrong with the diets. The addition of milk (even skimmed milk), some butter, a little cod liver oil, fresh vegetables and fruit would overcome this difficulty. This is seen in those homes (many of them poor) where the children are given porridge with milk in the morning or evening and vegetable soups at dinner time. The children in such homes are generally well nourished. Whilst in some cases the financial stringency plays a part, experience



shows that the inexperience as well as the want of interest of mothers in these matters, plays an even greater part. Shortage of money is bad enough, but mis-spending is more serious in that it can be obviated by forethought and careful planning. More attention is therefore being directed by the nurses to this important matter.

Even in the country the nurses report that with the worse financial condition, less fruit and also less milk are used. Here "skim" milk is very often the only milk used, the whole milk being required to make butter. A certain amount of tinned milk is used for sweetening tea and to make sweet puddings. On the whole, however, less tinned milk is used here than in some of the mining districts. The early additional feeding (referred to under infant feeding) and excess of carbohydrate in the second half of the first year, make the country toddler a poorer specimen than the urban toddler of the same age.

In one thing the toddler has the advantage over the infant—as is pointed out by the Methil Health Visitor—the fact that the toddler can run out of doors and so gets the advantage of fresh air and sunshine often makes him thrive better than his baby brother or sister who, for lack of a proper place outside or time of the mother, has to be kept indoors and so away from the sun and fresh air. This again indicates the crying need for proper places in some of the urban districts where babies could be left in safety and out in the open air.

Regarding the clothing of the "Toddler," most of the nurses report that he is sufficiently well clad, although a few report that the "clothing is poor—and in some cases insufficient." In Buckhaven district one of the nurses points out that although the majority of toddlers are well clad, there is a disinclination of mothers to provide woollen under-clothing, as this form of clothing tends to shrink. One must remember the conditions under which the children live and play, and how much sooner their clothing becomes soiled than that of the more fortunately situated child.

In the agricultural area the underclothing of children is, in some cases, very poor. The vest being of a cotton material, extra jerseys are worn to supplement the warmth of the under garments. Amongst the fishing population, the mothers, mostly all excellent knitters, clothe their children warmly and sensibly. A few were found who inclined to overclothe their children, but they are usually found to be willing to take advice. In the opinion of the nurse, the reason for the over clothing is the fact that the fathers require to wear so much when at the fishing.

Whilst the clothing of the young children may be considered on the whole, satisfactory, the foot-wear is very often inadequate, especially in the winter.



The Health Visitors, during the year 1932, made 51,317 home visits. At these they saw 3,624 expectant mothers, 35,131 infants and nursing mothers, and 23,918 children (1-5 years). Besides the foregoing, 174 midwifery inspection visits were made, as well as 7,476 tuberculosis visits (3,343 pulmonary and 4,133 non-pulmonary). This gives a total of 58,967 domiciliary visits.

### Infant Protection.

In last year's report it was shown that, in accordance with the Children Act, 1908, Part I (Section 2 (2)), the Health Visitors were appointed as "Infant Protection Visitors." In April 1931 when this aspect of Child Welfare work was commenced, there were 51 "Infants" on the register. At the commencement of 1932 the number was 57.

#### Summary of Work of Infant Protection Visitors, 1932.

	Dun-ferml'ne	Kirk-caldy.	Cupar.	St. Andr's.	Total.
No. of Children on Register,					
April, 1932 .. ..	18	27	12	..	57
Added during 1932, ..	7	6	14	1	28
Removed from District ..	3	..	3	..	6
Returned to Relatives ..	1	1	5	..	7
No. now over 7 years ..	..	6	1	..	7
Preliminary Reports ..	6	6	12	1	25
,, (no fireguards) ..	6	6	8	1	21
Quarterly Reports, ..	74	109	51	4	238
Visits paid .. ..	80	115	63	5	263

Every infant put on the Register is notified to the Infant Protection Visitor, who visits the home of the infant, and makes a preliminary report. Twenty-five preliminary reports necessitating 22 home visits were made by the Health Visitors. Thereafter quarterly visits are paid to the homes of the infants—the number of such home visits was 206. In the case of the preliminary visits, one guardian was found unsatisfactory in Dunfermline District and the infant was removed. As a result of the quarterly reports, one guardian in Kirkealdy district was reported to be suffering from tuberculosis (the child was removed). There were also two cases of overcrowding and one where the guardian was regarded as unsatisfactory. In the former, the cases were reported to the Sanitary Inspector and in the latter the guardian is being kept under supervision. In Cupar District the Infant Protection Visitor reported that she was doubtful of one of the homes where three children were boarded out, as mental defectives were also boarded there. Subsequent reports, however, showed that the children were being very well cared for and the nurse was satisfied.



### Midwives Acts, 1915 and 1927.

The numbers of certified midwives practising in the Burghs and Landward Areas of Fife during 1932 were—Dunfermline 23; Kirkcaldy 20; Cupar 5; and St. Andrews 7.

The number of emergencies to which Medical practitioners were called was 214 as against 230 in 1931. In the following table an analysis of the cases for which medical assistance was sent is given.

	Dun-ferml'e.	Kirk-caldy.	Cupar.	St. Andr's.	Total.
Delayed labour and Uterine Inertia .. ..	27	19	1	..	47
Abnormal labour .. ..	7	12	..	1	20
Torn perineum .. ..	11	14	..	3	28
Maternal haemorrhage :—					
(a) Ante partum .. ..	1	4	..	..	5
(b) Post partum .. ..	1	3	..	1	5
Contracted pelvis and faulty passages .. ..	2	..	..	..	2
Pain and puffiness, legs, etc.	2	1	..	1	4
Weakness :—					
(a) Mother .. ..	1	4	..	..	5
(b) Baby .. ..	1	3	..	..	4
Premature births .. ..	3	4	..	..	7
Still births .. ..	5	9	..	..	14
Inflamed and discharging eyes	18	11	..	1	30
Jaundice .. ..	2	1	..	..	3
Deformities and malformations .. ..	2	2	..	..	4
Raised temperature, .. ..	3	3	..	..	6
Placenta praevia .. ..	..	1	..	..	1
Adherent or retained placenta .. ..	..	3	..	..	3
Albuminuria .. ..	3	..	..	..	3
Abortion .. ..	..	2	..	..	2
Miscellaneous (threatened abortion, fits, suspected twins, miscarriage, etc.)..	11	10	..	..	21
Totals .. ..	100	106	1	7	214

There was a total of 3,740 births in Fife and, of these, 1,103 were attended by midwives. In the case of ten confinements neither a doctor nor a midwife was present. There were 93 deaths of infants (within ten days of birth) and 22 occurred in the practice of midwives. Further, the following figures indicate the number of conditions occurring in the practice of midwives during 1932. The figures in brackets are the totals for the County. Ophthalmia neonatorum 40 (122); puerperal fever 3 (18)—there were no deaths (3); puerperal pyrexia 4 (26) of which 1 died (6); and still-births 27 (159).



The Health Visitors visit and carry out periodic inspections of the midwives. The number of such visits was 173. Whilst a number of apparent irregularities had to be investigated, in none of these was it necessary to report any case to the Central Midwives' Board, but a few midwives had to be warned.

The attendance of one or two handywomen at confinements without a doctor being present again engaged our attention, but insufficient evidence made a prosecution impossible.

### **Ophthalmia Neonatorum.**

The number of ophthalmia neonatorum cases notified during the year was 122 (Kirkcaldy 62 ; Dunfermline 47 ; Cupar 6 ; and St. Andrews 7), an increase of 40 on last year's figure. Forty occurred in the practice of midwives. The number of cases which it was deemed advisable to remove to hospital was 9.

### **Puerperal Fever and Puerperal Pyrexia.**

The number of cases notified as puerperal fever was 18, and of puerperal pyrexia 26. Of these, three cases of puerperal fever died and two of puerperal pyrexia. The numbers of cases removed to Hospital were 14 puerperal fever and 17 puerperal pyrexia.

### **Pneumonia.**

The Health Visitors made 554 visits to 344 notified pneumonia cases with a view to reporting to the responsible Medical Officer the need for hospital treatment. Of the 344 cases 140 were treated in hospital and the remainder at home. Whilst 282 of the patients recovered, 62 died.

The numbers of infants and children notified as suffering from this condition were—Infants 36, pre-school children 78 and children of school age 71. The remainder (159) were adults.

### **Maternity and Child Welfare Centres.**

There were no outstanding changes in the establishment of Child Welfare Clinics. The impossible conditions at Lochgelly East School necessitated arrangements being made for new quarters. These were eventually found in the old Drill Hall. Here, two dressing rooms at the rear of the Hall have been taken over and by having a communicating door inserted, it has been made possible to use one of the rooms for the weighing of the babies, and the other for the consultations by the Clinic Doctor. Whilst this arrangement has improved the conditions under which the staff had to work, it still leaves a lot to be desired. It has not relieved the congestion of work at the School Clinic, and the clashing of various treatment clinics makes any further progress impossible there.



The Health Visitor reports—"The Lumphinnans mothers do not attend the Child Welfare Clinic at Lochgelly nearly so well as they used to. They say it is cold and not so comfortable as the one in Cowdenbeath. Those who do attend come at least once a month to have the babies weighed and ask advice about feeding, teething, clothing, etc. Where there are a great many new babies, it is an advantage having a Clinic, as otherwise we would not see the mothers and babies as often as we would like." It also gives the nurse more time to visit the homes of the really "needy" cases.

The state of affairs at the Denbeath Child Welfare Clinic is every bit as bad as at Lochgelly. Here a shop and back room are available. The former is used as the waiting room—it is inadequately heated and in cold wet weather is so uninviting that very few mothers have the courage to come even when anxious to see the clinic doctor or nurse. The back room which is small and is used for weighing and consultation is also inadequately heated, and in cold weather, it would be positively dangerous to undress any infant or child for examination purposes. Until the accommodation at this clinic is improved "the work will never be as satisfactorily performed as it should be." The arrangement of having two clinics weekly—Tuesdays for the mothers of Buckhaven, Denbeath and Methilhill, and Fridays for those of Methil and Innerleven—allows the doctor to see special cases twice a week. "No serious work on infant feeding in very difficult cases can be carried out unless one sees the cases at least twice a week."

At Kelty the need for increased accommodation is to be met by two adjacent staff rooms being converted for clinic use.

At Burntisland School Clinic the only improvement which could be carried out at present was the sub-division of the large clinic room, so allowing a room to be available for consultation work.

At Crosshill Clinic further accommodation is also urgently required. So far none has been found, but it is hoped that it will be possible to make some temporary arrangement which will help to meet the need here for more clinic rooms to carry on the work adequately.

There is also need for better arrangements for clinic work at Tayport. Meantime the laundry and cooking room is used for this purpose.

At Anstruther there has been no clinic for Child Welfare Work. Accommodation for clinic rooms is, however, to be found in the old technical school, which is to be gutted out and partly reconstructed for offices.



**Maternity and Child Welfare Clinics.**  
**New Cases and Total Attendances, 1931.**

Clinic.	Expect't Mothers.	Infants under 12 mths.	Children 1-5 yrs.	Other Cases.	Total Attend'es.
<i>Kirkcaldy Area—</i>					
Auchterderran	9	82	21	7	409
Burntisland ..	..	27	11	5	318
Crosshill ..	18	133	80	40	684
Denbeath ..	2	262	27	9	2,157
East Wemyss ..	..	15	3	..	82
Kinghorn ..	..	48	12	3	1,035
Leven ..	2	68	20	7	984
Lochgelly ..	17	132	136	38	1,524
Markinch ..	..	36	15	2	162
Methilhill ..	..	3	1	..	39
Thornton ..	..	35	4	2	346
<i>Dunfermline Area—</i>					
Crossgates ..	..	43	14	3	381
Cowdenbeath	10	182	23	22	1,611
Inverkeithing	..	6	9	2	50
Kelty ..	17	58	21	96	601
Torryburn ..	5	29	13	6	84
<i>North-East Fife—</i>					
St. Andrews ..	40	120	5	..	2,102
Tayport ..	1	13	14	12	153
Newburgh ..	3	9	15	13	265
Totals ..	124	1,301	444	267	12,987

When the table regarding Maternity and Child Welfare Clinics is examined, it will be seen that most of the work is done at the old-established clinics such as Cowdenbeath, Denbeath, Leven, Lochgelly and St. Andrews. There are others such as Auchterderran, Burntisland, Crosshill, Kelty, etc., where the attendances are highly satisfactory considering the recent establishment of these clinics, and the unfortunate frequency of staff changes we have had.

Whilst a large proportion of the work at these clinics is the weighing of babies and giving advice regarding their feeding, a considerable number of expectant mothers also come for advice. Mothers are also encouraged to bring the toddler and older pre-school children.

The large clinics meet once weekly, but in the case of the others it is fortnightly, and in the case of the smaller ones, once monthly. In order to give increased facilities, arrangements have also been made, whereby a nurse can bring a mother with her baby or pre-school child, to the doctor at one of the schools in the district. More frequent clinics would undoubtedly give a more effective service, but at present it is impossible to arrange for this because the staff is inadequate for the purpose. While the majority of cases coming to the clinics are feeding and nutrition



cases, children suffering from rickets, eczema, gastro-enteritis, pyloric stenosis (several very marked cases), asthma and scabies, were also brought for advice.

Expectant mothers who come to the clinics are advised regarding proper feeding, clothing and personal hygiene. They are also advised to make early arrangements with a doctor or midwife. Where clinic facilities are not available the home is visited and the above advice given. In some areas urines are tested by the staff.

In St. Andrews the Child Welfare work is not carried out at one but at two different clinics. Firstly there is the Child Welfare Centre which is held twice weekly, at which mothers attend with their babies (206). The average attendance is very satisfactory and works out at 14.7 per clinic and giving a total of 1,555 attendances. A small number of toddlers and pre-school children (61) is also included in the total attendances. The cases are almost entirely dietetic and come for advice on feeding and hygiene.

The other centre is the Clinical Institute (James Mackenzie Institute). Here pre-school children (as well as school children) are seen. The average attendance here works out at 6 or 7 per clinic and the total attendances were 370, made up of 310 children.

Clinics for ante-natal cases are held at the Institute, each general practitioner having a night per month when he sees midwives' cases among his patients. The midwife of the St. Andrews Nursing and Child Welfare Association is usually in attendance. Whilst the Health Visitor does not usually attend these ante-natal clinics, she keeps in close touch with the work. In the case of women who have not engaged a midwife and where the Health Visitor becomes aware of their condition, she visits the home and advises that they should see a doctor at once.

### Ultra-Violet Ray Therapy.

#### Treatments at Ultra-Violet Ray Clinics.

Clinic.	Children.	Adults.	Attendances.
Cowdenbeath .. ..	39	1	1,044
Leven .. ..	84	6	1,353
Lochgelly .. ..	70	7	1,817
Total .. ..	193	14	4,214

The three centres at which treatment by Ultra-Violet Rays is carried out, namely (1) Cowdenbeath; (2) Lochgelly; (3) Leven, are still being used for this purpose. Owing to the large amount of time



required by the nurses for other work—Child Welfare Work, School Work and Clinic Work—it has been necessary to reduce the number of hours at these clinics and particularly in the case of Lochgelly and Cowdenbeath. The result has been that the total number of attendances has dropped from 5,716 to 4,214.

The main types of cases treated were general debility, rickets, cervical glands of the neck, abdominal glands, as well as a large number of others such as malnutrition, psoriasis, lupus, eczema, anaemia, chilblains, mastoid sinus, osteomyelitis, dactylitis, coeliac disease, marasmus, infantilism. Whilst definite improvement has resulted in a considerable number of cases who have attended regularly, it has to be recorded that quite a number of children definitely in need of this treatment, did not fully benefit because the parents were unable to bring them regularly. In quite a number of cases they cease attending whenever improvement begins to show itself, even although they have not been discharged by the Area Medical Officer.

Of those receiving treatment, fifteen were infants (Cowdenbeath 6, Leven 6, Lochgelly 3). The number of pre-school children was 96 (Cowdenbeath 16, Leven 48, Lochgelly 32); school children 82 (Cowdenbeath 17, Leven 30, Lochgelly 35). Other cases (adults) treated, numbered 12. The number showing marked improvement was 42 (Cowdenbeath 3, Leven 27, Lochgelly 12); slight improvement 44 (Cowdenbeath 12, Leven 15, Lochgelly 17). Six showed no improvement. Of these, one died and one was sent to the Sanatorium.

### Dental Treatment.

The total number of *pre-school* children treated at the school dental clinics was 116 treated as casuals (North-East Fife 22, Cowdenbeath and West Fife 46, Lochgelly-Burntisland-Inverkeithing 39, Buckhaven-Leven 9), as well as 26 appointments (North-East Fife 14, Cowdenbeath and West Fife 2, Lochgelly 10). The latter, although a small number, is encouraging in that the parents themselves are showing an interest in dental hygiene.

A considerable amount of educational propaganda will be necessary to make the parents realise the importance of early inspection of children regarding the condition of their teeth. Unfortunately, lack of time, so far, has prevented the dentist from giving talks to the mothers at the Child Welfare Clinics. It is hoped, however, that time will be found for this rather important piece of hygiene propaganda. Another difficulty, however, is that with the present staff it would be impossible to cope with an increase in such dental work, as, at present, the staff are unable to overtake the work in their areas.



During the year 1932, 17 expectant mothers and nursing mothers were treated. These are necessitous or semi-necessitous cases referred by the Area Medical Officers or the Health Visitors to the dentist, where the opinion is held that the woman's condition as an expectant or nursing mother would be affected by dental sepsis, etc.

Arrangements have also been made for the treatment of necessitous Public Assistance cases by the School Dentist. This work is carried out by the dentist after school hours. Forty-eight (23 men and 25 women) such cases were treated. Two had to be treated at their homes whilst the remainder made 64 attendances at the Clinics. There were 395 teeth extracted under general anaesthesia and 56 under local anaesthesia. Two fillings were inserted and one case had to be X-rayed. Besides the extraction work, eleven lower and eleven and a half upper dentures were made and inserted.

Besides the Public Assistance cases, a number (8) of the Police Staff were treated and special arrangements made whereby dental treatment and the supply of dentures are given to members of the Police Force. These cases made 52 attendances at the Clinics and the dentists had to call at two homes. There were 15 teeth extracted under general anaesthesia and 76 under local anaesthesia, and six fillings were inserted. Besides the foregoing, 7 lower and 7 upper dentures were supplied. Appointments were made for at least other three cases, but the patients put in no appearance.

### **Eye Refractions.**

Pre-school children, necessitous nursing mothers, and Public Assistance cases requiring to have their eyes examined are, by arrangement, examined at one of the School Clinics by the Area Medical Officer. If necessary, difficult cases are seen by one of the County Eye Specialists. During the past year, 74 cases were refracted at the request of the Public Assistance Committee and 74 persons (61 children and 13 adults) supplied with glasses.

### **Mental Defectives—Institution Cases.**

The past year has been one in which we have been mainly concerned in finding institutional accommodation for mentally defective children. After making inquiries at Dundee, it was found that the only institution that offered us prospects of accommodation in the near future was Larbert Institution for Mental Defectives. Unfortunately difficulties have arisen at Larbert which prevented the Medical Superintendent there from implementing his promise to find us the necessary accommodation for a limited number of cases. It was pointed out by the Superintendent of Larbert Institution that he had already a large number of nursing cases and therefore could not promise to take in any more in the near future.



The following number of cases were in Institutions, placed there by the County of Fife :—

- (1) By the Public Assistance Committee—41.
- (2) By the Education Committee—8.

There were at least twenty further Public Assistance cases and four Education Cases requiring to be dealt with. These figures of 61 and 12 make a total of 73. There was also a large number of adult cases at Springfield, as well as six children, who ought to be placed in a different environment. There is also quite a number of cases in the two large burghs waiting for admission to an institution. It seems, therefore, that our previous estimate of 120 cases for the County and further 46 for the two burghs, would not be an over-estimate. If, therefore, an institution could be started in the County of Fife, it would not only be justified but would also form the nucleus of a larger institution, as no doubt arrangements might also be made for cases from other areas (*e.g.*, from Dundee City, etc.).

The setting-up of such an Institution could be considered even although meantime some of our cases were placed in Larbert Institution. It would not necessarily mean the establishment of a complete scheme with all the different units, but could be begun by the acquisition of a big house in the country with sufficient ground, and there, to begin with, low-grade, difficult and nursing cases could be placed. Later, two small pavilions for twenty-five cases each, one for boys and one for girls, could be so built as to allow for their subsequent extension for fifty cases each. When these units had been constructed the house could be evacuated except for administrative and staff residence purposes, and we could then consider the removal of our other cases from outside institutions to the one in Fife. This could be done gradually. Later, when it was found necessary, further units could be built, or extensions made and so make provision, after about ten years, for all the institutional needs of Fife, and any other County or Burgh which cared to send cases to such an institution.

At the end of the year we had a definite promise that Larbert would be able to take cases in the near future but such cases only to be definitely educable.

### **Orthopaedic Treatment.**

The care and cure of cripple children has been increasingly engaging the attention of my staff.

In the past we have been very much hampered in obtaining reliable information as to the condition and possibility of improvement by a recognised authority. In the fairly large number of cases of cripple children that exist in Fife, part of the difficulty is due to the fact that there is a considerable amount of expense entailed by the parents when asked to take a child across to Edinburgh, as in quite a number of cases



special arrangements have to be made for the transport of the child. If, therefore, some arrangement could be made whereby a number of clinics could be held at different centres, this particular difficulty would be very much reduced and parents would be more willing to bring their children forward for early and, if necessary, repeated examination. Further, it seems that a large number of the practitioners have also taken up a very conservative attitude to what might be done for cripple children, and here again, if they were informed that a surgeon of the standing of Mr. Cochrane, a recognised Orthopaedic specialist, was to be in the district they would be more likely to bring forward cases, however slight or however incurable the cases appeared to be.

The scheme which I would suggest should be brought to the attention of the Public Health Committee is as follows :—

An arrangement should be made whereby Mr. Cochrane be asked to come to one of our school clinic centres once every month. The centres would be selected according to the number of cases requiring to be seen by the specialist, the fee to be paid would be similar to that paid to the eye specialist, namely, a three-guinea fee for a two hours' session or a four-guinea fee for a three hours' session. The cost of such a scheme would be in the neighbourhood of 30 to 35 guineas.

The scheme could be worked along much the same lines as our eye and ear, nose and throat schemes, the Area Medical Officers notifying me of the cases in their areas. I would then be able to arrange as to which clinic would be selected for the cases to be seen by Mr. Cochrane. Besides this, the practitioners in the area in which the clinic is situated would also be notified as to the date, time and place of the visit so that if they wished to bring forward any of their own cases, they could do so. In connection with this it might be necessary to consider whether private cases, where the people were able and willing to pay a specialist fee, could not be seen at this clinic. This money could be made available towards meeting the cost of the Orthopaedic Scheme.

The scheme as above outlined would make use of a Welfare nurse for the purpose of keeping the cases under observation and passing on any information and advice to the parents which Mr. Cochrane would like given; this nurse could watch over whatever treatment had been ordered until the next opportunity for Mr. Cochrane's re-examination.

By direct contact with Mr. Cochrane and the discussion there would be regarding particular cases, the staff would obtain a large amount of valuable information which would be of the utmost value to them in dealing with other possible slight cases.



The above scheme which I have suggested is one which can be arranged for, independent of any voluntary Care Committee which may be established for the after-care work in connection with cripple children. If such voluntary committee were established, I see no reason why there should not be some relation between their committee and our scheme so that any after-care work which our Health Visitors were not able to overtake could be overtaken by the voluntary body. There is also this point, that the voluntary committee might be able to obtain funds which might be of very definite help towards the supplying of special apparatus or the provision of special treatment such as massage, where the parents were not in a position to meet the cost of such apparatus or treatment.

### **EXAMINATION AND CERTIFICATION OF BLIND PERSONS.**

**Report by Dr. R. A. KRAUSE, Deputy Medical Officer (Welfare).**

On 29th December 1931 a meeting attended by representatives of the County of Fife and the two large burghs—Kirkcaldy and Dunfermline—decided on future arrangements for the certification of blindness. The following were the proposals agreed to :—

(1) Examinations were to be conducted by means of clinic sessions wherever practicable, *i.e.*, except in special cases (*e.g.*, bedridden applicants). This arrangement would continue at least until all the existing "blind" had been examined. After that it might be possible to arrange for examinations to be conducted at the school clinics, when school children were being examined. This, however, would depend on circumstances, and it is quite likely that the clinic sessions would continue to be held whenever necessary or convenient.

(2) Clinic sessions were to be held at the school clinics most convenient to the cases to be reviewed, *i.e.* at Kirkcaldy, Dunfermline, Cowdenbeath, Buckhaven, etc.

(3) The examining surgeons were to be Dr. C. Graham, Edinburgh Clinic, Dr. Allister MacGillivray, Dundee Clinic, with the assistance of Dr. Sampson, Ophthalmic Surgeon, Dunfermline.

(4) The fees proposed were three guineas per session (of 2 hours) for each Surgeon, made up of two guineas for the actual work and one guinea for travelling time lost. Later it was decided to allow for a session of three hours, for which a fee of four guineas was to be paid. Travelling expenses were to be paid in addition.

(5) The administrative arrangements are :—

(a) Dr. Krause, Fife County, will be responsible for arranging the sessions and *for calling the applicants for examination.*



- (b) Each Chief Public Assistance Officer will furnish Dr. Krause with particulars of the persons to be examined and will send to him copies in duplicate of the medical, etc., certificate form completed in respect of Part I (Registration particulars) for each person.
  - (c) Dr. Krause, in consultation with the Medical Officers of Health of the two Burghs, will arrange the order of examination of applicants.
  - (d) On a session being arranged, the Fife Outdoor Society will be furnished with a list of the applicants called for examination together with one of the partially completed medical, etc., certificate forms for each applicant. The Society may in their discretion arrange for a guide for the applicant to the Clinic Centre. It is not proposed meantime to pay the expenses of applicants.
  - (e) A Home Teacher of the Society will attend each clinic session and receive the forms from the Surgeons after examination. The Society may extract such information as they require for registration purposes from the forms, *i.e.*, Part I and the decision as to blindness, and shall as soon as possible send the forms to Dr. Krause.
  - (f) Dr. Krause will have the duplicate form retained by him in respect of County cases duly completed and filed, and will then send the original to the Edinburgh or Dundee Clinic. The Burgh forms after having been marked off by him will be sent to the Medical Officers of Health who will also complete and file the duplicate and send on the original to the appropriate Clinic.
- Note.*—No exact division of the County as between the Clinics has yet been made, but probably Dunfermline and District and South-West Fife (excluding Kirkcaldy and District) will be regarded as in the Edinburgh area, and the remainder in Dundee area.
- (g) Dr. Krause and the Medical Officers of Health will send intimation of the clinic decisions in their respective cases to their Public Assistance Officers and to the Fife Society for record purposes, *i.e.*, certificates to Pension Officers and for wireless licences.
  - (h) Dr. Krause and the Medical Officers of Health will arrange for action being taken on the recommendations (if any) of the examining Surgeons.
  - (i) The Society will as a routine measure intimate the clinic decisions to the Pension Officer in cases of *claimants* to blind pensions.



The purpose of the aforementioned arrangements is indicated in a Joint Memorandum issued by the Department of Health for Scotland and the Scottish Education Department. It is, in the main, for the express purpose of obtaining "uniformity in the standard of certification of blindness." A standard is indicated and "certain principles that should govern determination of the question whether a person is, or is not, blind" suggested. Further, a form of medical certificate has been drawn up for use at the Clinics.

The uniformity in classification should not only be applied to the "adult blind" but also to children with such defective vision as brings them within the scope of the Education of Blind and Deaf Mute Children (Scotland) Act, 1890, and where special education is provided.

The memorandum also refers to the "follow-up" action to be taken by Local Authorities on the medical certificate, and states that "in giving effect to any recommendations by the Ophthalmic Surgeons, Local Authorities will no doubt utilise the services of the voluntary agencies operating in their area." The use and range of the Wassermann Test in connection with "blind" examinations is also indicated.

During the year 1932 only "adult blind" were examined. The number arranged for was 197 (County 125 and Large Burghs 72), of whom 10 were absent. There were 181 first examinations and the re-examinations numbered 6. Of those seen by the Ophthalmic Surgeons, 133 (County 83 and Large Burghs 50) were certified as "blind," and those certified as "not blind" numbered 52 (County 33 and Large Burghs 19), while in two cases opinion was deferred.

An analysis of the findings of the Eye Specialists regarding cause, time of onset, etc., has not been attempted this year. It is hoped, however, to be able to do so next year when the larger number of cases will justify such an analysis being carried out.

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

The number of specimens submitted for examination by medical practitioners from persons resident within the County during 1932 was 58 as compared with 277 in 1931 and 220 in 1930. In addition 51 specimens of sputum were sent for investigation by the Tuberculosis Officer of which 10 were positive.

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



**Morbid Products, 1932.****Fife County.**

Nature of Specimen.	Positive	Negative	Total.
Throat Swabs for Diphtheria .. ..	5	99	104
Blood for Typhoid Fever .. ..	..	17	17
Sputum for Tuberculosis .. ..	17	120	137
Total .. ..	22	236	258

**BUILDING BYELAWS.**

The plans examined and reported upon in respect of the Landward Area of the County comprised proposals to build 337 new houses, the provision of 5 houses by conversion from existing premises and alterations and extension to 46 existing houses. Plans for the erection of buildings for purposes other than housing and for alterations and extensions of existing buildings involved 73 premises. Details are furnished under the District Reports.

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

The number of houses approved for renovation and extension, etc., in terms of this Act was 174 as compared with 202 in 1931. In 1932, the cottages dealt with and approved in the several Landward Areas of the County were :—Dunfermline 26, Kirkcaldy 51, Cupar 81, Anstruther 8, and St. Andrews 8. In all, applications in respect of 6 cottages were disapproved where the work proposed was reported as insufficient to justify the grant being given or where the building was of such a nature or construction as to be deemed unworthy.

**HOUSING.**

The building programme regarded as essential to meet the minimum housing requirements of the Landward Area of the County at the beginning of 1931 and comprising 950 houses was set forth in some detail in the Annual Report for 1931.

Housing absorbed much of the time of the Public Health Department in 1932. The number of houses inspected during 1932 totalled 2,837, of which 770 were regarded as in such a condition as to be unfit for habitation.



On representation by the officers of the Department, and without the issue of statutory notices, 183 houses were rendered habitable. The number of houses furnished with water supply, water-carriage fitments, etc., is detailed in the District Reports.

The extent to which housing has been provided by the Landward Local Authorities of the County is subscribed. In Kirkcaldy District 1,282 houses had been built by 31st December 1932, of which 174 were completed in 1932. Of this total, 244 were built under the 1919 Act (Addison Scheme), 1,034 under the 1924 Act and 4 under the Act of 1930.

During 1932, two additional instalments of housing were begun in Kirkcaldy District comprising 98 houses, viz., 50 at Thornton and 48 at East Wemyss.

At 31st December, 1932, the number of houses built and building by the Local Authority in Dunfermline District was 258, under the Acts of 1919, 1924 and 1930. Of these, 238 had been completed by December 1932, 158 under the Act of 1919 and 80 (at Kelty) under the Acts of 1924 and 1930. At Aberdour, 20 houses under the latter Acts were completed early in 1933 but the allocation for grant-earning purposes to the Acts of 1924 or 1930 had not been decided.

During 1932, the building of two further instalments of housing comprising 94 houses (Kelty 76, Limekilns 18) was begun.

In Cupar and St. Andrews Districts apart from 6 houses built for roadmen by Cupar District Committee not a single house had been built by the Local Authority by the end of 1932. During 1932, the building of a first instalment of 12 houses was authorised for the village of Strathmiglo and these are now in the course of construction. Sites have now been approved in certain other villages in both Districts and, possibly, now that a start has been made, the need for progress will be recognised.

### MILK SUPPLY.

Steady progress towards a higher standard in the production and handling of milk continues and several dairies whose structural requirements were not in accord with the provisions of the Dairy Regulations were improved and renovated.

During the year the licence fees under the Milk (Special Designations) Order, 1930, were reduced but as noted in former Annual Reports, the amount of milk produced under the Order within the County is small in volume, a result attributable in some measure to the unsatisfactory provisions of the Order.

The following excerpts from the Annual Report of Mr. R. G. Anderson, F.R.C.V.S., County Veterinary Inspector, for 1932 are submitted for information :—



All registered dairies and the premises of surplus milk sellers have been inspected twice during the year. A number of visits additional to a bi-annual inspection has been made on receipt of reports by owners or Veterinary Surgeons of suspected cases of Tuberculosis, or in connection with positive reports on milk samples submitted to biological examination. A number of visits have also been paid to non-dairying farms on report of suspected cases of Tuberculosis. The two dairies attached to the Fife Joint Asylum are included in the number of dairies in Cupar District.

#### Registered Dairies—

In Kirkcaldy District	..	..	..	..	..	115
In Dunfermline District	..	..	..	..	..	77
In St. Andrews District	..	..	..	..	..	80
In Cupar District	..	..	..	..	..	57
In 22 Burghs	..	..	..	..	..	49
Total	..	..	..	..	..	378

There are no dairies with cows in the Burghs of Markinch, or Elie and Earlsferry.

#### Surplus Milk Sellers—

In Kirkcaldy District	..	..	..	..	..	4
In Dunfermline District	..	..	..	..	..	1
In St. Andrews District	..	..	..	..	..	2
In Cupar District	..	..	..	..	..	2
						9

Total Premises (including 378 Registered Dairies) .. .. 387

#### Dairies Visited and Cows Inspected.

District.	Dairies.	Cows.
Kirkcaldy .. .. .	234	5862
Dunfermline .. .. .	164	4093
St. Andrews .. .. .	166	3080
Cupar .. .. .	131	1976
Burghs .. .. .	108	1455
Surplus Milk Sellers .. .. .	10	28
	813	16,494
Other Farms .. .. .	19	95
Totals .. .. .	832	16,589

#### Condemned under Tuberculosis Order 1925.

District.	Tuberculosis of Udder.	Chronic Cough.	Giving T.B. Milk.	Tuberculous Emaciation.	Total.
Kirkcaldy ..	14	4+1	..	..	19
Dunfermline ..	7	7	..	1	15
St. Andrews ..	7	10	..	..	17
Cupar ..	..	2	..	..	2
Burghs ..	2	6	..	..	8
Other Farms	5	9+1	1	1	17
	35	40	1	2	78



Two cases shown above as +1 were dealt with by private Veterinary Surgeons during my summer vacation.

The general condition of the cows in the herds inspected has been noted as very good. A few exceptions were no doubt due to poverty of the owners, or an incomplete knowledge of food values. Cleanliness of cows has also been noted as good, and is of a fairly high standard in well-managed herds, which are in the majority. Consistent defects refer to neglect of details especially with regard to untrimmed and uncleansed tails. Clipping of thighs, flanks and udders is more generally practised, though a conservative element, which professes regard for appearances, is difficult to persuade.

As in all these cases of unclipped cows, the cows are found to be dirty and ungroomed, it being impossible to groom unclipped animals, the conclusion is that there are people who regard a cow thickly coated with manure as more pleasurable to look at, than a cow trimmed and clean. In such cases a few days are given to put things right, or have the milk stopped from sale.

It is indeed a strange fact that some owners, who profess "not to like the look of" cows trimmed and neat, seem to forget entirely the purity of milk aspect of the matter, and require to be reminded that the production of clean milk is the sole object of the cow's existence and the owner's first duty.

The more general use of covering lids for collecting pails is noticeable and prevents much accidental contamination of the milk in transit to the milk house.

Milking machines are also noticeably on the increase with reported satisfactory results.

Premises have generally been found to be clean, though greater attention could be paid to splashed walls, occasional choking of drains, and accumulations of the remains of food at the front of the stalls.

Attention is drawn to such neglect and to failure to muck out byres before milking—very few cases of this.

In no case has the nature of the fodder and diet been regarded as detrimentally affecting the milk.

Diseased cows, apart from those noted as Tuberculous, have been found as follows :—

#### Diseases of the Udder.

Teats.	Injuries.	Atrophy.	Mammitis.	Non-tubercular Induration.
10	25	1063	82	140

Regarding Atrophy and Non-Tubercular Induration the numbers no doubt in a fair percentage of cases apply to the same individual animals seen twice during the year. Such cases are usually the result of preceding attacks of Mammitis, and injuries mostly to the teats



(treads, etc.). A few cases have been discovered in heifers which proved blind of one or more quarters after the first calving.

Reverting to cases of Tuberculosis of the Udder, it has been noted as remarkable that a proportion have only shown symptoms (and lesions on post-mortem examination) in atrophied quarters and in two cases only in the small amount of udder tissue, related to a supernumerary teat.

Remarkable also is the occurrence of Tuberculosis of the Udder in cows on which a post-mortem showed very few and slight lesions elsewhere in the body—in one case a small Locus in a bronchial gland, and in another, no naked eye lesion discoverable.

Apart from the Lungs and Udder (chiefly) and the Liver, Kidneys and Brain (slightly) the Tubercle bacillus would seem in cattle to find non-vital tissues a suitable habitat. This is evidenced in the gross and widely-spread lesions on the Pleurae and Peritoneum found on post-mortem in well-conditioned and even healthy looking animals.

The 10 cases of disease of the teats refer to an outbreak of infectious teat ulcers, in which case the owner was fined for failure to report the existence of "bleeding or suppurating sores on the teats."

Other diseases found to exist, included "retained placental membranes, probably due to abortion, milk fever, lameness (in some cases sore feet due to walking on freshly-gritted and tarred roads), Johne's Disease, Actinomycosis, injuries to the digestive tract due to swallowing nails, etc., producing Traumatic Pericarditis—in one case the nail had penetrated the spleen—and Ringworm. One case of Anthrax was reported on a dairy farm.

The above represent findings on inspection, and cannot be taken as the actual incidence of the diseases mentioned, consequently numbers of each case is not given.

Milk is invariably discarded from cows suffering from Mammitis sore teats, and diseases noticeably affecting the health of the animal. It may be used for calves and pigs or the cow may be put to suckle calves. Both are dangerous practices as the condition may be Tuberculous and communicable through the milk or by infection from co-habitation. Such cows should be milked and the milk either thrown out or boiled.

*An account taken of any steps to secure a tubercle-free milk supply.*

Owners who breed their own Stock are advised to have them tuberculin tested. Owners to breed their own Stock rather than purchase cows. Those who must purchase to do so from known tubercle-free sources, or at least to purchase young rather than old animals. The urgent purchase of odd cows to maintain contract milk supplies frequently means the purchase of as cheap a cow as the market offers. This is often an old cow which one condemns on the first thereafter visit of inspection. Dairies which are customarily recruited in this



manner continue to reappear as infected premises, sometimes twice within one year.

An order to prohibit the exposure for sale in markets on the sale of recognised dealers, of cows over ten years of age would assist in the prevention of much disease, as such cows are a dangerous source of infection to others in the market and in their new abode. As the seller of such a cow may have a suspicion of disease in his motive for selling and the buyer looks to cheapness rather than value or concern for the quality of his milk, no special sympathy is demanded for an aggrieved party by the action of such an order.

*A List of Dairies holding "graded" milk licences in respect of—*

**Tubercle Free Herds.**

**"CERTIFIED."**

Name and Address.	Average number of herd in milk.	Estimated number of Gallons produced per annum.
Wm. Lohoar, West Balrymonth, St.		
Andrews .. .. .	50	45,000
Lord Cochrane of Cults, Hospital Mill, Springfield .. .. .	28	26,319
GRADE "A" T.T.		
Lady Victoria Wemyss, Wemyss Castle, E. Wemyss .. .. .	22	17,872

A note of the number of any other dairies known to have tubercle-free herds—

Dairies.	Animals.	Gallons.
*2	42	30,000

\* 1 herd stated to be regularly tested.

\* 1 herd from which reactors are removed and to apply for a "Certified" Licence.

No difficulty is reported by producers to exist in the marketing of their "Graded" milk.

The expenses of distribution and consequent dearer price of the milk are a reason for the unwillingness on the part of other producers to proceed with the testing of their herds and the production of graded milks.

**GRADE "A" MILK.**

Name and Address.	Average number of Cows.	Estimated number of Gallons produced per annum.
Messrs. R. & W. Anderson, Lawhill Mains Dairy, Monturpie, Largo .. .. .	21	15,000
John Black, Grangehill, Elie .. .. .	20	14,800
Mrs. Brunton, Grange Farm, Elie .. .. .	19	14,000
Jas. Clement, Kilrenny Mill, Anstruther .. .. .	40	32,000



*Notes on any samples taken for examination in terms of Section 21 of the Act of 1914.*

A sample taken was reported by the Chief Veterinary Officer, Edinburgh, as positive for Tubercle bacilli.

A visit to the farm discovered a young cow with a very slight induration of one quarter of the udder. A milk sample from this quarter was Positive for Tubercle bacilli to microscopic examination and the cow was dealt with under the Tuberculosis Order 1925.

*A statement of the extent to which Sections 13 and 14 of the Milk and Dairies (Scotland) Act 1914 are being complied with.*

Section 13 refers to the exclusion from Sale, etc., of the milk of cows suffering from Tuberculous emaciation, Tuberculosis of the Udder, or from any sore on the teats accompanied by suppuration or bleeding, or from any disease liable to infect or contaminate the milk, or from any cow which is giving Tuberculous Milk. Section 14 imposes the duty of reporting such cows to the Local Authority in writing.

One owner as stated was prosecuted and fined for failure to report cases of bleeding sore teats.

One owner was fined for failure to report a case of indurated udder which proved to be Tuberculous. This prosecution was made under the Tuberculosis Order 1925.

Owners are being furnished with a copy of Advisory Leaflet No. 72 of the Ministry of Agriculture and Fisheries "Tuberculosis in Farm Stock."

### **RIVERS POLLUTION.**

Reference was made in the Annual Report for 1931 to the inquiry by the Scottish Advisory Committee on Rivers Pollution Prevention into the condition of the Rivers Leven and Ore and there was set forth therein a report generally covering the conditions of pollution of both rivers for the information of the Committee prior to giving oral evidence before its members.

The Third Report of the Scottish Advisory Committee on the Rivers Leven and Ore was published on 11th April, 1933.

The Committee dealt with the sources and extent of the pollution of the two rivers as comprising three distinct zones, viz. :—Zone 1, The River Leven before the confluence of the Ore. Zone 2, The River Ore. And Zone 3, The River Leven after the confluence of the Ore.

The general conclusions of the Committee were as follows :—

"The administration of the Rivers Pollution Prevention Acts in the area traversed by these rivers and their tributaries, at least so far as they are polluted, is now, since the passing of the Local Government (Scotland) Act, 1929, vested entirely in the County Council of



“ Fife, and with that Council rests the responsibility of taking such  
 “ measures as may be necessary and practicable to this end. We  
 “ believe that the owners of the various industrial concerns from which  
 “ pollution enters the rivers would be willing to co-operate with the  
 “ local authority so far as they can do so consistently with the financial  
 “ exigencies of their respective businesses. In every case the represen-  
 “ tatives of these companies, when giving evidence before us, ac-  
 “ knowledged the responsibility of manufacturers under the Rivers  
 “ Pollution Prevention Acts, and indicated the willingness of their  
 “ respective companies to do all that was reasonably practicable to  
 “ discharge their responsibility.

“ As regards sewage pollution the County Council as local authority  
 “ under the Rivers Pollution Prevention Acts have a duty to see that  
 “ the Town Councils, who under the Public Health Acts, are responsible  
 “ for the drainage of their respective burghs, use the best practicable and  
 “ available means to render their sewage harmless before being dis-  
 “ charged into the rivers. As local authority under the Public Health  
 “ Acts, the County Council are themselves responsible for the pollutions  
 “ by sewage from the landward area. We look to them to set their  
 “ house in order and in this connection we would refer to our recom-  
 “ mendations in paragraphs 44 (regarding joint works for Lochgelly  
 “ burgh and Glencraig and Lochore and Lumphinnans special drainage  
 “ districts) and 53 (regarding a sewer to the sea). Further, it would in  
 “ our view be a distinct advantage if arrangements could be made for  
 “ the sewage from Leven burgh—at least that at present discharged  
 “ into the main current of the stream at the west side of the burgh—  
 “ being led into the regional sewer suggested.

“ We further recommend that before the County Council proceed to  
 “ put the regional sewer scheme into execution they should approach  
 “ the industrialists concerned to see whether the latter desire that the  
 “ sewer on the Leven should be constructed of such dimensions that  
 “ it would be capable of receiving the trade wastes from the paper mills  
 “ (see paragraphs 75 and 76), the bleachfields (see paragraph 86), and  
 “ the distillery (see paragraph 97). Should such facilities not be  
 “ desired for the reception of any waste-waters, it will be for the  
 “ County Council as local authority under the Rivers Pollution Preven-  
 “ tion Acts to call on the industrialist concerned to adopt the best  
 “ practicable and available means to render the effluent harmless  
 “ before discharge to the stream.

“ At the present time the greater part of the water abstracted from  
 “ the river for industrial purposes is not returned to the river until  
 “ night and the general effect of the proposed diversion of all polluting  
 “ trade-waste waters to a sewer would be little more than to make the  
 “ future night- and day-flow of the river approximate to the present  
 “ day-flow. In this connection, it may be said that during the course



“ of our inquiry we received no evidence to show that the day-flow was  
 “ ever reduced to an undue level. We are advised that any re-arrange-  
 “ ment or provision that might be necessary in view of the diversion to  
 “ the sewer of the relatively small amount of trade-waste waters at  
 “ present discharged to the river during the day would be of so little  
 “ moment as to present no appreciable obstacle to the proposed scheme.  
 “ The regulation of the volume of flow from Loch Leven to the river is,  
 “ under the Act passed in 1827, a matter for the River Leven Trustees,  
 “ who include amongst others, the proprietors of the mills, bleach-  
 “ fields, manufactories and other works on the river.

“ While we recommend the construction of an intercepting sewer  
 “ for the Leven and the Ore as far as Thornton, we doubt if such a  
 “ measure would be practicable in the case of the Ore above Thornton.  
 “ In the first place, there is the difficulty arising from subsidence due  
 “ to underground workings. In the second place, as pit water is at  
 “ present excluded from the operation of the Rivers Pollution Preven-  
 “ tion Acts any sewer scheme would normally be framed to provide for  
 “ only coal washings, which would be to touch but the fringe of the  
 “ problem. And in any case it is doubtful if coal washings could be  
 “ definitely discharged through a sewer without sooner or later causing  
 “ blockages through the settlement and accumulation of the coal  
 “ dust. We therefore recommend that the County Council should  
 “ forthwith call upon the coal owners to take adequate measures for  
 “ the prevention of pollution by coal dust.

“ We would also suggest that the County Council should appoint a  
 “ qualified River Inspector whose duty it would be to inspect syste-  
 “ matically all potential sources of pollution and to report to the County  
 “ Council the results of such inspections. Such an appointment would  
 “ have the further advantage that the inspector would be able to afford  
 “ guidance and advice to industrialists in the management of their  
 “ purification works.

“ Though the Rivers Leven and Ore are at present two of the worst  
 “ polluted rivers in Scotland, we believe that if effect is given to the  
 “ recommendation in this report, and if in particular the works con-  
 “ structed are properly controlled, efficiently maintained, and ade-  
 “ quately supervised, the Leven and the Ore can be rendered and kept  
 “ comparatively, if not entirely, clean.”

### **HOSPITAL FACILITIES.**

A summary of the hospital facilities provided by the local authority and otherwise available in the County exclusive of the two Large Burghs was given in the Annual Report for 1930.

There is no material change in the position since then.



**Infectious Diseases Hospitals :—**The alterations and extension of the Joint West Fife Hospital, Dunfermline, were completed in the course of 1932. In addition to the enlargement of the administrative block, a cubicle block of twenty-four rooms, each furnishing bed-space for two patients, is now in occupation. The extended accommodation for staff and patients covers requirements excellently and should meet the needs in observation bed-space for many years.

Owing to the prevalence of scarlet fever during the later months of 1932, the accommodation of the County Council Infectious Diseases Hospitals in the Districts of Kirkcaldy, Cupar, and St. Andrews was taxed to the utmost with the result that serious overcrowding occurred firstly in Thornton and Cameron Fever Hospitals and latterly in those of the Eastern Districts of Cupar and St. Andrews to which patients had to be deflected, viz., Auchtermuchty, St. Michael's, Ovenstone and St. Andrews Hospitals. The overcrowding resulted solely from the heavy incidence of scarlet fever in the District of Kirkcaldy. At Thornton Hospital there was no undue pressure on the ward-space other than that reserved for scarlet fever: in the other hospitals referred to, practically the entire bed-space was devoted to the treatment of scarlet fever. The position was seriously complicated by the prevalence of double infections, numerous scarlet fever patients developing German measles, whooping cough or chicken pox while in hospital. And in all the County Council Hospitals, observation isolation accommodation is either entirely lacking or altogether insufficient for practical purposes.

In a report dated 16th October 1931 to the Property and Works Committee of the County Council, reference was made to the additional population (15,000) for which fever-hospital provision had to be made in Kirkcaldy District consequent upon the provisions of the Local Government Act 1929, and an increase in the bed accommodation available in Kirkcaldy District was recommended. The question under consideration by the Property and Works Committee was the extension of Thornton Hospital. The opinion was urged that fifty additional beds, preferably of the observation cubicle pavilion type should be provided for the needs of the District and that the additional administrative requirements consequent thereupon, such as additional bedrooms for nursing and domestic staff, enlarged kitchen and kitchen offices, appropriate dining-room accommodation for maids and housing for the male employees, should also be met.

With its larger population and more industrialised area Kirkcaldy District, with 50 additional beds, would fall considerably short of the standard of bed accommodation provided for Dunfermline District at the West Fife Joint Infectious Diseases Hospital. At present there are 82 beds for Kirkcaldy District whereas Dunfermline has 127.



No action has yet been taken on the recommendations made in the report above referred to. The last six months have illustrated and enforced the importance of the opinion expressed in 1931.

In a report of 10th December, 1931, received from the Department of Health for Scotland on a Survey of Fife Hospitals and suggesting a scheme of hospital co-ordination for the Civil County, there occurs the statement that "all things considered, we see no option but to recommend that the place for the main county infectious diseases provision and for a central hospital is the site of Thornton Infectious Diseases Hospital."

There are two infectious diseases hospitals owned by the County Council in Kirkcaldy District, within approximately seven miles of each other, viz., Thornton—60 beds and Cameron—22 beds. Probably the opinion of the Scottish Department already quoted was determined by the fact that Thornton is the larger hospital. Other factors should be considered and, in Fife, the most important of these is the site of the coal measures likely to continue longest in working—the main determinant hitherto of the location of population. Further thought should be given to the question whether Thornton or Cameron is to be the centralised hospital of the area.

**Maternity Hospitals.**—At the close of 1932, no great progress fell to be recorded in regard to maternity hospital accommodation. The question of the provision of a joint institution for the Dunfermline area within the grounds of the West Fife Hospital still hung fire, and relative to central portion of the County, nothing had been defined in respect of arrangements with Kirkcaldy Town Council for the continued use of the Maternity accommodation they provide.

**Combination Home and Hospital, Thornton.**—The hospital portion of these premises is built on modern lines but it is difficult to persuade medical cases for whom hospital beds cannot be found elsewhere to enter the institution. The name of the institution has been altered but its repute as a Poorhouse continues.

The provision for maternity cases is satisfactory. There is no special ward for children and they prove a disturbing factor on the female side of the hospital.

The male and female rooms for the isolation of those admitted in a contagious condition are entirely unsatisfactory and require additional window space and general renovation. The admissions to the Hospital during 1932 numbered 164.

**Hospital Accommodation for Medical Cases.**—Surgical conditions are well catered for throughout the County and there appears to be sufficient beds for surgical purposes. On the other hand the position in respect of beds for medical cases is exactly the reverse and seems likely to continue until the County Council resolve to remedy the deficiency under the provisions of the Local Government Act, 1929.



### **SICK POOR—MEDICAL CARE.**

The treatment of the sick poor continues on the same lines as prior to the operation of the Local Government Act, 1929. The Fife Branch of the British Medical Association desire to have the work placed on a capitation-fee basis similar to that of National Insurance. It may be that the investigation recommended in the report of the Economy Committee on Local Expenditure will furnish a solution of the question.

### **MENTAL DEFICIENCY.**

It is difficult and sometimes impossible to secure admission to certified institutions of children suffering from mental deficiency—particularly the type of case requiring constant attention and nursing.

Consideration of the question of the provision to be made for mental deficiency has again been under discussion by a Sub-Committee of the Public Health Committee.

Under the provisions of the Mental Deficiency and Lunacy Act, 1913 (Section 30 (1)), a Local Authority—that is the County Council or Town Council of a large burgh—may, either alone or in combination with another local authority, provide institutional accommodation for their mental defectives either by establishing an institution or by contracting with the authority of an existing institution. Whichever procedure is adopted, the approval of the General Board of Control and of the Secretary of State is required.

The only institution of any size not owned by a local authority is the Royal Scottish National Institution, Larbert. This institution has made provision for mentally deficient children chargeable to local authorities for many years. The Sub-Committee on mental deficiency decided to approach the Larbert Authority with a view to exploring the possibility of obtaining a lien on a certain number of beds as thereby an interval would be afforded in present economic conditions for the further investigation of permanent accommodation within the County for Fife cases.

As the only neighbouring local authority without institutional accommodation is Dundee, the question of co-operation in the provision of an institution for the treatment of mental defectives was discussed with representatives of Dundee Town Council in an informal and tentative way. It emerged from the provisional figures submitted that the need of each local authority meant something like 100 beds and that the requirements of each Authority indicated the desirability of co-operation. If a joint institution were established, initial cost would be shared, each authority paying the actual maintenance cost of inmates from their district. If joint action resulted, the procedure indicated was to obtain premises, preferably a mansion house with sufficient ground, and begin in a small way, erecting pavilions in extension as requirements proved necessary.



The recommendations of the Sub-Committee on the Institutional treatment of Mental Defectives (5th April 1932) were :—

“(1) That an endeavour be made to secure, say, 75 beds, at the Larbert Institution on the understanding that an arrangement made may be terminated on one year's notice.

“(2) That inquiries be continued as to the possibility of a joint arrangement being made between the County Council and the Town Council of Dundee for the provision of a Central Institution ; and

“(3) That the views of the two large Burghs in the County on the subject be obtained.”

In 1932, there were in certified institutions outwith Fife at the cost of Fife County Council 54 mental defectives, the maintenance cost per annum being £3,330 12s. During the five years 1927-31 there came to notice 81 children suffering from mental deficiency of which the number in need of institutional treatment might reasonably be estimated at 60. An estimate on the same basis of the mentally deficient in the large Burghs of Dunfermline and Kirkcaldy gives 45 cases. The total cases of mental deficiency in the County would appear therefore to be about 160.

As the treatment of mental deficiency is a subject of much economic importance to the County, the findings of the Sub-Committee appointed to deal with the subject should not be lost sight of and the whole question should be kept under constant review.



# Kirkcaldy and Dunfermline Districts.

**Dr. G. M. McGILLIVRAY, Deputy Medical Officer.**

Towards the end of the year the former Landward Districts of Kirkcaldy and Dunfermline were divided into four areas and matters relating to these are now dealt with by Local Area Committees. The areas as now constituted are as follows :—

(1) **Dunfermline Area** which is composed of the parishes of Tulliallan, Saline, Carnock, Culross, Torryburn, Dunfermline, Inverkeithing, Dalgety and Aberdour.

(2) **Lochgelly Area** which includes the parishes of Beath, Ballingry, Auchterderran and Kinglassie.

(3) **Kirkcaldy Area** which includes the parishes of Leslie, Markinch, Kirkcaldy and Dysart, Kinghorn, Auchtertool and Burntisland.

(4) **Wemyss Area** which includes the parishes of Kennoway, Scoonie and Wemyss.

In view of the sub-division of the old Landward Districts it is considered that a single report to cover the whole Western Division of the County should be submitted instead of a separate report for each of the four areas as was formerly done for the Districts of Kirkcaldy and Dunfermline. Subject matter will, however, be grouped as far as possible under the headings of Kirkcaldy and Dunfermline Districts as existing prior to the sub-division in terms of the Local Government (Scotland) Act, 1929. An account of the transferred services in small burghs will be included at the end of this report.

During the year the health of the Western Division of Fife County was satisfactory and no new influences of a dangerous or injurious nature came to my notice. In Dunfermline District two matters were referred to in my last report, viz., a smell nuisance in the Culross-Torryburn area and a dust nuisance arising from a stone crusher at Prestonhill Quarry, Inverkeithing. With regard to the latter, no adequate steps were taken during the year by the owners of the quarry to abate the dust nuisance. It was reported in June that the quarry had been permanently closed down but complaints about the amount of dust entering the houses at Preston Crescent, Inverkeithing, were again received in August. On making enquiries it was found that the quarry only stopped work during the month of June and work as usual has been in progress ever since. As a notice under Section 20 of the Public Health (Scotland) Act, 1897, had already been served on the owners calling upon them to abate the nuisance, a further recommendation was submitted to the County Council on 25th August urging that action should be taken under this notice but the nuisance continued unabated at the end of the year.



With regard to the smell arising from the Grangemouth Oil refineries which, from time to time, caused serious annoyance and discomfort to the inhabitants of the Culross-Torryburn Area, the matter was taken up by Dr. Wylam, Chief Inspector for Scotland under the Alkali, etc., Works Regulation Act. As a result of the investigations carried out by Dr. Wylam, he was able to trace the objectionable odours to the escape of unburnt oil gases from the factory.

These gases contain 5,200 parts per million of Sulphuretted Hydrogen which, in itself, is a very obnoxious gas and also acts as a medium for carrying other offensive gases. The mixture of different gases gives a peculiarly nauseating smell and this is carried by favourable winds to the area above noted.

Although the sulphuretted hydrogen could be removed by scrubbing the gases with Caustic Soda solution, this process would prove an expensive one and would, at the same time, remove valuable products which the Company could ill afford to lose. It was ascertained that the escape of unburnt gases was taking place from the glands of compressors and the numerous valves and joints of the cracking plant in the factory. In view of the fact that the gases are under a pressure of approximately 70 lbs. per square inch, it is a very difficult matter to render the plant absolutely gas tight. The Company have tried out various types of gland packing and have now obtained one which is much superior to that previously in use. By the use of this new packing and by exerting rigorous supervision of the entire plant, the management hope to greatly reduce, if not entirely eliminate, the escape of unburnt gases from the cracking plant.

The Company responsible appear to be anxious to abolish all smell and have taken the steps above mentioned to prevent the escape of raw gas from the plant. They have, in addition, laid a new effluent pipe line from the works to below water level at Avonmouth and have also provided an oil separator and a settling pond with pumps to pump from the settling pond. The former effluent is now cut off and collected in the settling pond between tides; the oily matter is separated and the aqueous part is pumped to the outfall at the mouth of the Avon immediately after high tide. This ensures that all objectionable matter is carried out with the falling tide and cannot be deposited on the banks of the river as formerly.

The precautions taken have greatly improved matters and with further research it may be possible to devise means which will effectively prevent the escape of raw gas from the plant and thus entirely eliminate the smell which has so long been a source of annoyance to the inhabitants of the Culross-Torryburn Area.

Reference was made in my Kirkcaldy District Report for 1931 to a nuisance arising from a burning bing at the Randolph Colliery. I inspected this bing at various times during the year and although parts



were smouldering from time to time the steps taken by Fife Coal Company ultimately succeeded in subduing the fire and no nuisance could now be said to exist.

At Bowhill Colliery complaints were received during the year regarding smoke and fumes from the bing which burned fiercely for some time. The Coal Company agreed to form a new bing at some distance and made a tram road to carry the redd to the new site. Although still smouldering the old bing is now practically burnt out and the nuisance is abated.

### WATER SUPPLIES.

The various water supplies for both Districts were fully detailed in my last report and need not be again described. The care and maintenance of the different water supplies is under the charge of Mr. Hodge, County Engineer. The following work was carried out during the year under his supervision :—

**Dunfermline District.**—Repairs were carried out to the overflow sill at Glendevon reservoir and the waste water channel at Glenquey reservoir was also repaired. The landslip at Glenquey reservoir was also cleared. A new 6-inch pipe was laid from Inverkeithing to Hillend Village, a distance of approximately 2,284 yards, to replace an old 4-inch pipe.

New water mains were laid at Kelty, Aberdour and Limekilns to link up the new housing schemes with existing mains and at Crossford Village the mains were extended to give off a supply to new houses erected by private enterprise.

**Kirkcaldy District.**—At Thornton a new 4-inch main was laid from the Main Street along Station Road to the Combination Home. The supply to the high points at Dunnikier was found to be inadequate and to save the expense of laying a duplicate main, the trade supply to the Railway Depot at Thornton was restricted to a night supply only.

The question of providing an adequate supply at High Binn, Burntisland, was also gone into. This is a private supply and the matter is meantime under consideration.

The new housing scheme at Burntisland was linked up with the existing water main.

During the year new County Waterworks Byelaws were issued and forms were printed to prevent the waste of water from defective fittings. A considerable number of houses were provided with an inside water supply in place of the outside supply previously existing.

### DRAINAGE SYSTEM.

There are 14 special drainage Districts in Kirkcaldy Area and 11 in Dunfermline Area. These are as detailed in my 1931 report and need not be repeated here. Supervision of these drainage districts is carried out by the respective Sanitary Inspectors.



In Dunfermline District extensions of the drainage systems were necessary at Kelty, Aberdour and Limekilns to link up with the new housing schemes. An arrangement has now been come to whereby Crossgates Area, including Hill of Beath and Halbeath, drainage will be connected to the Dunfermline Burgh Sewer at Touch but the work has not yet been commenced. An extension of the outfall sewer at Kincardine to link up with the new houses built by the Forrestry Commission at Tulliallan was also approved but the work was not commenced at the end of the year.

Drainage schemes for Carnock, Cairneyhill and Hillend Villages were under consideration during the year but were deferred for further consideration. The provision of a drainage scheme for Wellwood Village was again under consideration but the matter remains in statu quo. Many of the houses here are already provided with inside water supply and sanitary conveniences and the proposed scheme, whereby a connection could be got with the Townhill branch of Dunfermline Burgh Sewer, would solve the drainage difficulty here.

In Kirkcaldy District a new sewer was laid from Strathore Road, Thornton, to the purification works in order to prevent flooding at the existing housing scheme and to link up with the fifty new houses being erected here.

At Little Raith a scheme was completed in order to divert the septic tank effluent from the road side ditch to a ditch in the moor. The nuisance complained of from the presence of sewage in the road ditch has thus been effectively dealt with.

During the year surveys were made and reports submitted by the County Engineer for drainage schemes at Rosie and Boreland. The necessary work in connection with these has now been completed and the outfall sewer in both schemes is taken to low water mark on the Firth of Forth.

Drainage schemes were also prepared by the County Engineer in respect of the drainage from Coaltown of Balgonie and Milton of Balgonie showing how they could be linked up to a joint purification works but nothing has yet been done. Reports were also submitted in connection with Thornton purification works which are meantime unsatisfactory and in connection with proposed schemes at Windygates and Balcurvie, Kennoway, Methilhill and Kinglassie. The work in respect of the Kennoway drainage scheme was commenced during the year but at the other places the matter remains in abeyance.

During the year a Sub-Committee was appointed by the County Council to obtain information regarding areas in the County where water and drainage services ought to be provided. In this connection, in place of having separate purification works at Thornton, Milton and Coaltown



of Balgonie, Kennoway and Windygates and Methilhill, an alternative scheme, whereby an outfall sewer down the Rivers Ore and Leven with outfall to the Firth of Forth at Leven, was put forward. This would take all domestic sewage from the places above mentioned but an additional report was submitted dealing with the trade effluents which discharge to the River Leven and showing how an outfall sewer could be taken down the River Leven from Walkerton, Leslie, to join the Ore outfall and discharge into the sea at Leven. A Regional Sewer scheme as suggested above would entirely eliminate pollution of the rivers from trade effluent and domestic sewage but it will be necessary for the owners of the industries concerned to co-operate in the work and bear part of the cost if this scheme is to materialise.

### SEWAGE PURIFICATION AND DISPOSAL.

The purification and disposal of sewage in certain of the special Drainage Districts in Dunfermline and Kirkcaldy Areas are unsatisfactory at the present time. In Dunfermline District the sewage from Tulliallan, Torryburn and Valleyfield, Charlestown, Limekilns, North Queensferry and Aberdour is disposed of in a satisfactory manner, being run direct by sewers to the Firth of Forth. The sewers are taken down the shore and discharge below low water mark and although subject to tidal action there has been no complaint about any of these. Crossford drainage has been linked up with the old outfall sewer from Dunfermline Burgh and is also satisfactory, all sewage being run into the Forth at Charlestown.

The purification works at Saline, which also deal with sewage from Steelend Village, continue to function in a satisfactory manner and the effluent passes to Saline burn.

The purification works at Blairhall Village are, as mentioned in my last report, too small for the purpose but the County Engineer has submitted a report dealing with the extension of the percolating filters, etc., and it is to be hoped that the work will be put in hand at an early date.

At Crossgates the purification works are very unsatisfactory but as noted above an arrangement has now been come to whereby all drainage from Hill of Beath, Crossgates and Halbeath, is to be linked up with Dunfermline Burgh Sewer. New drainage arrangements for disposal of sewage from Wellwood Village, which are meantime unsatisfactory, have already been referred to under drainage.

The sewage disposal works at Kelty are still functioning although affected by mineral workings underground.

In Kirkcaldy District very few of the special Drainage Districts are provided with proper means of purification for the sewage. The purification works for Auchterderran function fairly satisfactorily but tend to become flooded by the River Ore during periods of heavy rain. The



works are situated at the side of the river and are low lying so that when the river is in spate the effluent has not got free egress. The area comprising Lochore and Glencraig has no proper means of treating the sewage which is discharged in a crude state to the Ore. Lumphinnans Special Drainage District combines with Lochgelly Burgh and discharges all sewage in a crude state to the River Ore. At Kinglassie, apart from a septic tank for the new housing scheme and a few private houses with small cesspools all of which discharge their effluent to the Lochty Burn, there is no drainage scheme for the Village.

Thornton sewage works are almost useless and have been referred to under drainage. The septic tank for Little Raith Housing Scheme continues to act quite satisfactorily and with the change noted above for disposal of the effluent, there need be no further cause for anxiety here.

The villages of Coaltown of Balgonie and Milton of Balgonie are without proper drainage ; sewage from the new housing scheme at the former is treated by septic tank prior to discharge to the River Leven. Windygates and Balcurvie District, which has a proper drainage scheme, has no means for treating the sewage which is run in a crude state to the Leven. Methilhill is in a similar position. As already noted a start has been made at Kennoway with the new drainage scheme but no treatment of the sewage is to be carried out prior to discharge to the River Leven. As already noted, schemes have been completed at Rosie and Boreland whereby all sewage is run direct to the Firth of Forth, both having outfalls to low water mark. Drainage from West Wemyss and East Wemyss is disposed of in a similar and satisfactory manner.

### **RIVERS POLLUTION.**

Reference has already been made to gross pollution of the Rivers Ore and Leven in previous reports. The nature of the pollution is too well known to need repetition and the matter is fully set out in the Third Report of the Scottish Advisory Committee on Rivers Pollution Prevention now issued.

Pollution by means of coal washing, from the collieries is, with two exceptions, being effectively dealt with by means of settling ponds. In the case of the Julian Pit at Balgonie and the Wellsgreen Pit at Rosie, gross pollution is taking place due to the amount of fine coal dust being discharged direct to the streams without any proper means of settlement. Samples of water taken from both sources were submitted to the County Analyst for report and he states that the amounts of suspended solids consisting almost entirely of finely divided coal are excessive and greatly in excess of the standards laid down by the Royal Commission on Sewage Disposal and are sufficient to render the river water unusable for other purposes. Action should be taken by the County Council to enforce the provision of settling ponds as has been done at the other collieries.



### OFFENSIVE TRADES.

No offensive trades are carried on within the Western Division of Fife County.

### HOUSING AND TOWN PLANNING.

During the year, 1,915 dwelling houses were inspected within Dunfermline and Kirkcaldy Districts. Of these 601 were considered to be unfit for human habitation on account of defects of varied character, such as damp, internal walls, lack of proper light and ventilation, defective roofs, rhones and chimneyheads, stone and brick floors for living apartments and lack of inside water supply and modern sanitary fitments. Of the 601 unfit houses noted above, 137 were rendered fit for habitation on representation being made to the owners by the health officials and without the service of a statutory notice. In seventy-one others, the work of renovation was pending at the end of 1932.

No notices were served under Section 40 (1) of the Housing, Town Planning, etc. (Scotland) Act, 1919, in respect of providing dwelling houses with a water supply but an inside water supply was introduced to 35 houses and in 89 others the work is pending. This result followed a direct representation to the owners by the health officials. Similarly 41 houses were provided with water-closets without the service of notices under Section 20 (1) of the Housing (Scotland) Act, 1925, and 92 cases were still pending at the end of the year.

Nine notices were served in terms of Section 14 (1) of the Housing (Scotland) Act 1930 and 83 notices were served in terms of Section 16 (1) of the same Act in the Western Division of the County during 1932. Of the latter group two were rendered fit for habitation and an undertaking was given in respect of 27 others that they would not be used for human habitation until rendered fit. Demolition Orders under Section 16 (3) were made in respect of 27 and in 27 others action was pending at the end of the year.

Kirkcaldy and Dunfermline areas are in a much more satisfactory condition than the other districts of Fife as far as housing is concerned. The active house building policy pursued by the late District Committees in Kirkcaldy and Dunfermline made the housing programme of the County Council much easier than it would otherwise have been. The following brief summary indicates the number of houses built in each district under the various housing Acts up to 31st December 1932.

#### Kirkcaldy District—

1919 Act—				Total.
<i>Thornton</i>	..	4-roomed cottages	..	18
	..	3-roomed cottages	..	8
				26
<i>Glencraig</i>	..	3-roomed cottages	..	32
	..	3-flatted type..	..	28
				60



<i>Cardenden</i>	..	5-roomed cottages	..	..	6	
(Balgreggie		4-roomed cottages	..	..	32	
Scheme)	..	3-roomed cottages	..	..	20	58
<i>Dundonald</i>	..	5-roomed cottages	..	..	6	
		4-roomed cottages	..	..	24	
		3-roomed cottages	..	..	22	52
<i>East Wemyss</i>	..	4-roomed cottages	..	..	30	
		3-roomed cottages	..	..	12	42
<i>Roadmen's Houses—</i>						
Markinch	..	3-apartment houses	..	..	2	
Star	..	3-apartment houses	..	..	2	
Cadham	..	3-apartment houses	..	..	2	6
		Total	..	..	244	
<b>1924 Act—</b>						
<i>Lumphinnans</i>		3-roomed cottages	..	..	48	
		3-roomed flats	..	..	84	
		2-roomed flats	..	..	8	140
<i>East Wemyss</i>	..	5-roomed cottage	..	..	1	
		3-roomed cottages	..	..	10	11
<i>Windygates</i>	..	3-roomed cottages	..	..	26	
		3-roomed flats	..	..	40	66
<i>Thornton</i>	..	3-roomed cottages	..	..	33	
		3-roomed flats	..	..	104	
		2-roomed flats	..	..	8	145
<i>Methilhill</i>	..	3-roomed cottages	..	..	26	
		3-roomed flats	..	..	72	98
<i>Lochore</i>	..	3-roomed cottages	..	..	36	
		3-roomed flats	..	..	60	96
<i>Crosshill</i>	..	3-roomed cottages	..	..	12	
		3-roomed flats	..	..	48	60
<i>Glencraig</i>	..	3-roomed cottages	..	..	6	
		3-roomed flats	..	..	24	30



<i>Kinglassie</i>	..	3-roomed cottages	..	..	12	
		3-roomed flats	..	..	44	
					—	56
<i>Kennoway</i>	..	3-roomed cottages	..	..	14	
		3-roomed flats	..	..	24	
					—	38
<i>Coaltown of Balgonie</i>	..	3-roomed flats	..	..	12	
	..	2-roomed flats	..	..	8	
					—	20
<i>Little Raith</i>	..	3-roomed cottages	..	..	8	
		3-roomed flats	..	..	40	
					—	48
<i>Woodend (Cardenden)</i>	..	3-roomed cottages	..	..	18	
	..	3-roomed flats	..	..	60	
					—	78
<i>Dundonald (Cardenden)</i>	..	3-roomed cottages	..	..	14	
	..	3-roomed flats	..	..	36	
					—	50
<i>Burntisland</i>	..	3-roomed flats	..	..	12	
		2-roomed flats	..	..	8	
					—	20
<i>Boreland</i>	..	3-roomed cottages	..	..	6	
		3-roomed flats	..	..	48	
					—	54
<i>Roadmen's Houses</i>						
(Throughout District)	..	3-apartment houses	..	..	24	24
					—	
		Total	..	..	1,034	

**1930 Act.—**

<i>Lumphinnans</i>	3-roomed flats.	Total ..	4
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The houses completed during 1932 and included in the above list were as follows :—

					Total.
<i>Thornton</i> ..	3-roomed flats ..	..	12	—	20
	2-roomed flats ..	..	8		
<i>Kennoway</i> ..	3-roomed cottages ..	..	4	—	20
	3-roomed flats ..	..	16		
<i>Coaltown of Balgonie</i> ..	3-roomed flats ..	..	12	—	20
	2-roomed flats ..	..	8		



<i>Crosshill</i> ..	3-roomed cottages ..	12	60
	3-roomed flats ..	48	
		<hr/>	
<i>Boreland</i> ..	3-roomed cottages ..	6	54
	3-roomed flats ..	48	
		<hr/>	
Total ..		174	

A start was also made on the following schemes during 1932 but the houses were not completed on 31st December, 1932 :—

			Total.
<i>Thornton</i> ..	3-roomed cottages ..	12	50
	3-roomed flats ..	30	
	2-roomed flats ..	8	
		<hr/>	
<i>East Wemyss</i> ..	3-roomed flats ..	40	48
	2-roomed flats ..	8	
		<hr/>	
Total ..		98	

\* In Dunfermline District the houses built under the various housing Acts were as follows :—

<b>1919 Act.</b>			Total.
<i>Valleyfield</i> ..	4-roomed cottages ..	6	24
	3-roomed cottages ..	18	
		<hr/>	
<i>Kelty</i> ..	4-roomed cottages ..	20	60
	3-roomed cottages ..	20	
	3-roomed flats ..	20	
		<hr/>	
<i>Crossgates</i> ..	4-roomed cottages ..	6	46
	3-roomed cottages ..	28	
	3-roomed flats ..	12	
		<hr/>	
<i>Blairhall</i> ..	4-roomed cottages ..	2	16
	3-roomed cottages ..	14	
		<hr/>	
<i>Parkneuk Huts</i>	3-roomed wooden bungalows ..	4	12
	2-roomed wooden bungalows ..	8	
		<hr/>	
1919 Act Total ..		158	



1924 and 1930 Acts.				Total.
<i>Kelty</i>	..	3-roomed flats	..	80
		(65 allocated to 1930 Act and 15 to 1924 Act.)		
<i>Aberdour</i>	..	4-roomed flats	..	4
		3-roomed flats	..	16
				20
		(The allocation to the 1924 and 1930 Acts not yet decided on.)		
			Total	100

Twenty of the 80 houses at Kelty were finished and occupied in December 1931; the remaining 60 were all completed and occupied during 1932.

The following schemes were commenced during the year but the houses were not complete at 31st December, 1932 :—

<i>Limekilns</i>	..	3-roomed cottages	..	2
		3-roomed flats	..	16
				18
<i>Kelty</i>	..	3-roomed flats	..	76
				76
			Total	94

It will be seen from the above summary of houses built that Kirkcaldy District has 1,282 new houses and 98 others were in the course of erection at the end of 1932. Dunfermline District was less favourably placed with 258 houses and 94 others in the course of erection. In Dunfermline District there are still many houses unfit for habitation which should be replaced by new dwellings. Kelty, which was previously one of the worst areas as regards housing, is now well provided for and when the present scheme is complete, there should be no further need for additional houses here.

During the year considerable time was spent on making a housing survey of Dunfermline District and as a result of these inspections reports were submitted to the County Council showing that there were in the areas covered 257 houses so defective that they were unfit for human habitation. The unfit houses were situated as follows :—

Kincardine	..	..	..	..	32
Limekilns	..	..	..	..	27
Charlestown	..	..	..	..	3
North Queensferry	..	..	..	..	25
Crossford	..	..	..	..	12
Crossgates	..	..	..	..	26
Fordell	..	..	..	..	19
Torryburn and Newmills	..	..	..	..	12
Carnock and Oakley Area	..	..	..	..	101



With the exception of Limekilns, where a start was made in August to erect 18 new houses, nothing was done during the year to replace defective housing at the other places mentioned.

At Lassodie Village and Fairfield, Lassodie, a difficulty arose towards the end of 1931 with regard to housing as Messrs. Spowart & Company, Coal Owners, gave up their mineral lease and closed down the pit. The terms of their lease made it imperative that the entire ground should be cleared of all buildings by 15th November 1931. After protracted negotiations between the County Council, Messrs. Thomas Spowart & Company and the Trustees of the Dewar Trust, a satisfactory agreement was come to whereby the County Council took over 60 houses (35 at Fairfield and 25 at New Row, Lassodie) to house the people remaining here. The tenants are being grouped into the houses taken over by the County Council to enable the remaining dwellings to be demolished by Messrs. Spowart & Company, Coal Owners.

With regard to overcrowding, there is no evidence that this exists to any extent in Dunfermline District. In Kirkcaldy District, with the exception of Lumphinnans and Bowhill-Cardenden Area, there is also little evidence of overcrowding and generally speaking there is sufficient working-class houses in this area. At Lumphinnans and Bowhill, sub-letting is very prevalent, there being 134 sub-let houses at the former village and 73 at the latter. The sub-let houses, many of which have only 2 living apartments, all contain at least two families. The question of sub-letting has, however, already been fully reported to the Department of Health, as well as to the County Council.

### Building Byelaws.

During the year the following plans were submitted to the Medical Officer for examination and report :—

**Dunfermline District.**—The plans examined comprised proposals to erect 223 new dwellings (198 of 3 apartments, 18 of 4 apartments and 7 of 5 or more apartments) and to alter or extend 4 existing dwellings. The houses approved for purposes of subsidy under the Housing Acts numbered 209. Plans examined in respect of premises for other than housing purposes involved the erection of 12 new buildings and alterations to 5 existing buildings. A plan submitted in respect of a wooder hut to be used as a dwelling was rejected as unsuitable for the purpose. Four different plans relating to the lay-out of Limekilns Housing Scheme were also examined and reported upon, while plans dealing with the sub-division of an 8 apartment house into 3 dwellings (2 of 3 apartments and 1 of 4 apartments) were also dealt with.

**Kirkcaldy District.**—The plans examined and reported upon comprised proposals to erect 71 new dwellings (8 of 2 apartments and 63 of 3 apartments) and to alter or extend 11 existing dwellings. Fifty-four houses were approved for purposes of subsidy under the various



**Housing Acts.** Plans examined in respect of premises for other than housing purposes involved the erection of 31 new buildings and alterations to 8 existing buildings. Plans were also reported upon showing the conversion of a shop into a dwellinghouse and the conversion of offices for use as a dwelling. Plans dealing with Kennoway and Rosie drainage schemes were also examined and reported upon.

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

Plans submitted in terms of the County Scheme of Assistance under the above Act were examined and reported upon as follows :—

**Dunfermline District.**—Plans in respect of 27 houses were examined and 26 were finally recommended for approval after, in some cases, they had been amended to meet the conditions pertaining to grant under the Act. In one instance the proposals were unsatisfactory and the plan was disapproved.

**Kirkcaldy District.**—Plans were submitted in respect of proposals to alter and add to 51 houses in this area during the year and after being amended where necessary all were finally approved for purposes of grant under the Housing (Rural Workers) Act, 1926.

### **FOOD SUPPLY.**

**Milk.**—The number of registered dairies with the approximate number of cows kept within Dunfermline and Kirkcaldy Districts, including the small burghs, is as follows :—

*Dunfermline District*—85 dairies and 1859 cows.

*Kirkcaldy District*—128 dairies and 2932 cows.

Considerable improvement has been noted in the standard of cleanliness of dairies throughout the Western Division and with a few exceptions the premises and cows are kept in a fairly satisfactory condition. During the year a number of the dairies, which were not up to standard in terms of the County Dairy Byelaws, were renovated. Structural alterations where necessary were carried out and the standard of lighting and ventilation, etc., was improved. There are still a few dairies in need of improvement in order to comply in all respects with the dairy byelaws but these are gradually being renovated and it is hoped that, very soon, there will be no licensed premises that do not conform to the regulations.

There were no outbreaks of disease attributable to milk during the year and the standard of cleanliness and methods of handling are, on the whole, quite satisfactory. There has been no change in the area as far as milk grading is concerned and only one dairy—Wemyss Castle—produces a graded milk, viz., Grade "A" tuberculin tested milk. A few retailers have taken up the sale of certified milk but this is obtained from approved herds outwith the area. Several large firms collect milk in bulk and pasteurise this, selling the milk in bottles as pasteurised.



**Meat.**—Meat inspection is carried out by the respective Sanitary Inspectors who act as detention officers. The slaughterhouses are reasonably well kept and definite hours for the slaughter of animals have been fixed in each case. The slaughterhouses are as stated in my last report, but I should not care to say that meat inspection in my area is yet perfect. There is still far too great a discrepancy between the number of animals slaughtered and the amount of meat condemned in certain of the slaughterhouses. It will be noted from the tabular statement which follows showing the number of animals slaughtered, those wholly or partially condemned and the weight in lbs. of condemned meat that out of a total of 1040 cattle slaughtered in Leven Public Slaughterhouse there was no meat condemned. I understand, however, that a certain number of bad livers were actually condemned and destroyed forthwith but no record of the number or weight in lbs. was kept. At Markinch Public Slaughterhouse one animal was wholly condemned and one was partially condemned during the year, but there is no record of any bad livers having been seized. In view of the prevalence of liver fluke and liver abscess in cattle as indicated by the number found in other slaughterhouses I think it is unlikely that all of the cattle slaughtered here were healthy in this respect. The system of meat inspection at present in operation is undoubtedly unsatisfactory in certain respects owing to the fact that only a comparatively small number of the animals can be inspected. In view of the many duties that have to be carried out by Sanitary Inspectors it is impossible for them to inspect every animal slaughtered and where, as in some cases, several slaughterhouses have to be supervised by one Detention Officer, in addition to his other duties, there is always the danger that meat unfit for consumption may be passed on to the consumer. With so many slaughterhouses scattered over a wide area, it would be impossible for one full-time officer to cope with the work if appointed and the only satisfactory solution appears to be the provision of one or more large public slaughterhouses to meet the need of the area and having in charge of each, a capable full-time officer with the necessary qualifications and training in meat inspection.

The following table shows the number of animals slaughtered and the weight in pounds of meat condemned in the slaughterhouses in Dunfermline and Kirkcaldy Districts during the year :—



## Dunfermline District.

Area.	Class of Animal.	No. of Animals.			Weight in lbs. of condemned Meat and Offal.
		Slaughtered	Wholly Condemned	Partially Condemned	
Dunfermline (3 private slaughter houses) ..	Sheep	442	—	—	—
	Pigs	6	—	—	—
	Cattle	194	1	3	1043
Inverkeithing Burgh (2 private slaughterhouses)	Cattle	252	1	11	895
	Sheep	590	—	—	—
	Pigs	80	—	2	22
Beath Area (1 private slaughter house) ..	Cattle	331	2	96	2588
	Sheep	516	—	3	18
	Pigs	94	—	—	—
Cowdenbeath Burgh (Public Slaughterhouse)	Cattle	1558	8	173	8026
	Sheep	561	—	3	45
	Pigs	903	—	—	—



## Kirkcaldy District.

Area.	Class of Animal.	No. of Animals.			Weight in lbs. of condemned Meat and Offal.
		Slaughtered	Wholly Condemned.	Partially Condemned.	
Leven Burgh (Public Slaughterhouse) ..	Cattle	1040	—	—	—
	Sheep	1626	1	—	60
	Pigs	269	1	—	140
East Wemyss (Private Slaughterhouse) ..	Cattle	208	—	123	1845
	Sheep	242	—	—	—
	Pigs	52	—	—	—
Buckhaven Burgh (Public Slaughterhouse)	Cattle	1714	12	291	29,347
	Sheep	2269	2	6	20
	Pigs	763	1	4	312
	Calves	65	—	1	136
Cardenden (Private Slaughterhouse) ..	Cattle	57	—	24	399
	Sheep	60	—	3	6
	Pigs	9	—	1	5
Lochgelly Burgh (Public Slaughterhouse) ..	Cattle	739	3	200	4869
	Sheep	902	—	—	—
	Pigs	408	—	1	2
	Calves	10	—	—	—
Markinch (Public Slaughterhouse) ..	Cattle	708	1	1	1164
	Sheep	794	—	—	—
	Pigs	220	—	—	—
Kinghorn Burgh (Private Slaughterhouse) ..	Cattle	92	—	42	367
	Sheep	182	—	—	—
	Pigs	30	—	—	—
Leslie Burgh (Public Slaughterhouse) ..	Cattle	419	1	14	1005
	Sheep	381	—	—	—
	Pigs	87	—	—	—
Burntisland Burgh (Public Slaughterhouse)	Cattle	479	1	6	1400
	Sheep	907	—	—	—
	Pigs	172	—	2	40

All slaughterhouses in the area are licensed by the responsible Local Authority and there have been no unauthorised premises used for this purpose during the year. Provisions relating to unsound food, etc. under Section 43 of the Public Health (Scotland) Act, 1897, the Public Health (Meat) Regulations (Scotland) 1932 and the Public Health (Preservatives, etc., in Food) Regulations were duly observed during the year and reference to these will be found in reports submitted by



individual Sanitary Inspectors. These, as authorised sampling officers, also refer in their reports to the supervision of the food supply under the Food and Drugs (Adulteration) Act, 1928, the Imported Food Regulations and the Public Health (Preservatives, etc., in Food) Regulations and repetition is unnecessary. The sanitary condition of all premises where foods are prepared, stored or exposed for sale, in Kirkcaldy and Dunfermline Areas is satisfactory.

## MEDICAL SERVICES.

### Infectious Diseases.

During the year 1,332 cases of Infectious Diseases were notified in Kirkcaldy Landward Area and 672 cases were notified in Dunfermline Landward Area. The cases notified in each district were as follows :—

**Kirkcaldy Area.**—Scarlet Fever 438, Diphtheria 73, Erysipelas 46, Puerperal Fever 6, Ophthalmia Neonatorum 37, Chickenpox 490, Acute Primary Pneumonia 100, Acute Influenzal Pneumonia 20, Pulmonary Tuberculosis 45, Non-pulmonary Tuberculosis 64, Puerperal Pyrexia 12, Infective Jaundice 1 and Cerebro-Spinal Meningitis 2.

**Dunfermline Area.**—Typhoid Fever 1, Scarlet Fever 138, Diphtheria 40, Erysipelas 29, Puerperal Fever 5, Ophthalmia Neonatorum 28, Chickenpox 286, Acute Primary Pneumonia 53, Acute Influenzal Pneumonia 17, Pulmonary Tuberculosis 24, Non-pulmonary Tuberculosis 45, Puerperal Pyrexia 3, Dysentery 1 and Cerebro-Spinal Meningitis 2.

The number of cases removed to hospital from Kirkcaldy District was 627 and from Dunfermline District 231. All others were treated at home.

The incidence of Scarlet Fever in Kirkcaldy District during the year was considerably greater than in the preceding year, there being 311 more cases recorded in 1932 than in 1931. The number of diphtheria cases recorded was, however, 44 less than in 1931. Scarlet Fever was general over the western and eastern parts of Kirkcaldy District during the year but very few cases were recorded in the intervening parishes of Auchtertool, Kirkcaldy, Markinch and Leslie. The greatest number of cases occurred in the Bowhill-Kinglassie Area where 10 cases occurred in August, 30 in September, 29 in October, 31 in November and 48 in December. Other areas involved were Lochore, Glencraig and Lumphinnans in the west and the Wemyss-Methilhill area in the east but the disease did not assume epidemic form during the year. The schools and milk supplies, etc., were frequently investigated in order to ascertain the cause of spread but in neither case could any fault be found. The incidence of scarlet fever, however, has been extremely low in the areas indicated for a considerable number of years and it is not surprising that the infection became fairly general in a population where there was practically no immunity to this disease.



In Dunfermline District the incidence of scarlet fever remained low during the year and there was only one case more recorded in 1932 than in 1931. Diphtheria showed a decrease of 26 cases from the number notified in 1931.

Where the home conditions were unfavourable or nursing care was indicated in cases of pneumonia and in pneumonia following influenza whooping cough and measles, removal to hospital was undertaken. Arrangements for the supply of Diphtheria Antitoxin are as recorded in my last report and no artificial immunisation against Diphtheria and Scarlet Fever was carried out during the year.

School closure to prevent the spread of infectious diseases was considered to be unnecessary during the year.

### **HOSPITAL AND AMBULANCE FACILITIES.**

The hospital facilities remain as detailed in my last report. In Kirkcaldy District, the accommodation available in the Infectious Diseases Hospitals at Cameron and Thornton was fully taxed during the last quarter of the year. At Cameron Hospital (22 beds) there were 320 admissions during the year and the average daily number of patients was 27. The highest number at any one time was 54 and this was reached on two occasions—November 15th and December 27th. The lowest number recorded was 6 on the 18th May. At Thornton Infectious Diseases Hospital the number of admissions during the year was 738 and the average daily number of patients was 64.4. The highest number in hospital at any time was 107 on the 25th December and the lowest number was 32 on the 27th August. 55 surgical operations were performed under general or spinal anaesthesia at Thornton Infectious Diseases Hospital and 5 additional minor operations were carried out. No operative interference was found necessary at Cameron Hospital during the year.

The Smallpox Hospital at Fosterton, Thornton was not required during the year but it is kept in a state fit for the reception of cases at a moment's notice. A serious defect in the water supply to this hospital was reported during the year but the matter had not been attended to at 31st December 1932.

Thornton Infectious Diseases Hospital has been referred to in previous reports as being unsatisfactory in its present state owing to lack of proper accommodation in the administrative block and the small size of the kitchen and offices. Nothing was done during the year to improve matters here.

### **Dunfermline.**

The West Fife Infectious Diseases Hospital is now complete and up to date. The alterations and additions mentioned in previous reports were completed and the new wing was opened for the reception of cases in June although the enlarged administrative block was in occupation throughout the year.



There were 821 cases admitted to the West Fife Infectious Diseases Hospital during the year and the daily average of patients was 76. The highest number in hospital at any one time was 96 on the 15th March and the lowest number was 51 on the 10th September. Four operations under general or spinal anaesthesia were performed and 13 minor operations were also carried out. The nursing staff has been increased by five to a total of 26 in order to undertake the duties in the new cubicle block and a Benham insulated food trolley has been provided for the kitchen service to this new ward.

The ambulance facilities remain as detailed in my last report. The ambulance in use at Cameron Hospital is old and untrustworthy and should be replaced by a modern vehicle.

### PORT SANITARY ADMINISTRATION.

There are four small ports in this area, two in Kirkealdy District—Leithil and Burntisland—and two in Dunfermline District—Inverkeithing and St. David's. None of these are regarded as approved ports and deratisation of ships is not undertaken. There is nothing outstanding to report in connection with port sanitary administration during the year.

The following is an account of the transferred services in the Small Burghs in the Western Division of Fife County :—

#### (1) Burghs in Dunfermline Area.

##### COWDENBEATH BURGH.

*Infectious Diseases.*—During the year 324 cases of infectious diseases were recorded, a decrease of 26 from the number notified during 1931. The cases coming to notice were as follows :—Scarlet Fever 63, Diphtheria 18, Erysipelas 13, Ophthalmia Neonatorum 18, Chickenpox 141, Acute Primary Pneumonia 24, Acute Influenzal Pneumonia 7, Pulmonary Tuberculosis 15, Non-pulmonary Tuberculosis 24 and Cerebro-spinal Meningitis 1. Apart from an increase of 35 in the number of scarlet fever cases recorded, the incidence of infectious diseases was fairly normal and there is nothing of any importance in this connection.

*Milk and Dairies (Scotland) Act, 1914.*—The bulk of the milk consumed within the Burgh is produced in licenced premises situated within the Landward Area. There are two small dairies registered for a total of 15 cows within the Burgh and these are kept in a fairly clean and satisfactory manner.

*Meat Inspection.*—The public slaughterhouse is the property of the Town Council and it is well kept and satisfactory for the purpose. Details of the number of animals slaughtered and of the number wholly or partially condemned with the total weight in pounds of meat condemned are given in the text of the report for the Landward Area and need not be repeated.



*Vital Events.*—The population of the Burgh as estimated by the Registrar-General to the middle of 1932 was 12,841. The corrected births for 1932 was 254 (males 127, females 127). This is 35 less than in 1931 and is equivalent to a birth-rate of 19·8 per 1,000 estimated population. In 1931 the birth-rate was 22·7. There were 18 illegitimate births (males 11, females 7) or 7 per cent. of the total births. The marriages in 1932 numbered 90 and the marriage-rate was 7·1 per 1,000 estimated population. In 1931 there were only 63 marriages and the marriage-rate was then 4·9.

The deaths numbered 150 (males 82, females 68) equivalent to a corrected and adjusted death-rate of 11·7 per 1,000 estimated population. In 1931 the deaths numbered 145. The death-rate for all tuberculosis was 0·70 per 1,000 and that for pulmonary tuberculosis was 0·31 per 1,000. In 1931 the corresponding figures were 1·18 and 1·02 per 1,000.

The infantile mortality rate for 1932 was 79 per 1,000 births, a much more satisfactory figure than was recorded in 1931 when the infantile mortality rate was 114 per 1,000.

The natural increase of population as shown by the excess of births over deaths was 104.

### INVERKEITHING BURGH.

The number of cases of infectious diseases notified during the year was 56. This is an increase of 25 over the number recorded in 1931 and is accounted for by the greater incidence of scarlet fever, which showed an increase of 21 cases over the number notified in 1931. The cases notified during 1932 were as follows:—Scarlet Fever 34, Diphtheria 4, Erysipelas 3, Ophthalmia Neonatorum 2, Chickenpox 3, Acute Primary Pneumonia 2, Acute Influenzal Pneumonia 1, Pulmonary Tuberculosis 4 and Non-pulmonary Tuberculosis 3.

School closure was unnecessary in the burgh for the prevention of the spread of infectious disease during 1932.

*Milk and Dairies (Scotland) Act, 1914.*—There are 3 dairies registered within the Burgh for the production of milk and the premises are registered for 21 cows. Milk carts from the surrounding Landward Area supply the bulk of the milk used in the Burgh. The dairy premises and milk vans are all maintained in a clean and satisfactory condition.

*Meat Inspection.*—There are two private slaughterhouses in the Burgh as noted in my last report. These are well kept and supervision during slaughtering is satisfactory as the detention officer is always in attendance when slaughtering is in progress. Reference to the number of animals slaughtered and the number totally or partially condemned with the weight in pounds of meat condemned will be found in the tabular statement given under the Landward Area.



*Vital Events.*—The population of the Burgh as estimated by the Registrar-General to the middle of 1932 is 3,254. The corrected births for 1932 was 49 (males 30, females 19), which is equivalent to a birth-rate of 15 per 1,000 estimated population. There were four illegitimate births or 8 per cent. of the total births. The marriages in 1932 numbered 8. Deaths in the Burgh during 1932 numbered 40 (males 22, females 18) equivalent to a corrected and adjusted death-rate of 12·3 per 1,000 estimated population. Four children under the age of one year died during 1932, the infantile mortality rate being 81·6 per 1,000 births, which is a fairly satisfactory figure.

The natural increase of population as shown by excess of births over deaths was 9 during 1932.

### **CULROSS BURGH.**

During the year 16 cases of infectious diseases were notified within the Burgh. These were as follows :—Scarlet Fever 4, Diphtheria 1, Erysipelas 1, Chickenpox 8, Acute Influenzal Pneumonia 1 and Pulmonary Tuberculosis 1. The incidence of disease was low during the year and needs no comment.

*Milk and Dairies (Scotland) Act 1914.*—There is only one dairy within the Burgh registered for 12 cows and the premises are well kept and satisfactory for the purpose.

*Meat Inspection.*—The private slaughterhouse is satisfactory and the detention officer is always in attendance when slaughtering is in progress. Reference to the animals slaughtered and the meat condemned is included in the general report for the Landward Area.

*Vital Events.*—The population as estimated to the middle of 1932 by the Registrar-General was 505. The corrected number of births was 8 (males 4, females 4) and is equivalent to a birth-rate of 15·84 per 1,000. There were no illegitimate births. The marriages in 1932 numbered 13 and the marriage-rate was 25·7 per 1,000, a figure which is relatively high. There were 3 deaths (males 2, females 1), equivalent to a corrected and adjusted death-rate of 5·94 per 1,000. There were no deaths due to tuberculosis in 1932.

The infantile mortality rate in 1932 was nil, no deaths of infants under one year of age being recorded.

The natural increase of population as shown by excess of births over deaths was 1.

### **(2) Kirkcaldy District Burghs.**

#### **LESLIE BURGH.**

There were 53 cases of infectious diseases notified within the Burgh during 1932. This is an increase of 43 cases over the number notified in 1931 and 32 less than in 1930. Scarlet Fever showed an increase of



40 cases over the preceding year, most of the patients being notified during the months of February, March, April, May and June. As a considerable number of the cases coming to notice were school children attending the infant and junior classes, these divisions were inspected on three occasions during that period. At the first inspection on February 19th, no suspicious cases were detected but on the second examination on 7th June, a pupil was found with profuse desquamation and another with sore throat, slight rash and typical scarlet tongue. These were excluded along with another pupil, with a crusted and discharging nose, who had just returned to school after being in hospital with scarlet fever. The latter was considered to be a possible source of infection and exclusion from school was considered necessary. On a subsequent visit to the school a fortnight later, all the pupils appeared to be quite well and no further cases occurred.

The cases of infectious diseases recorded during the year were as follows:—Scarlet Fever 43, Diphtheria 1, Erysipelas 1, Chickenpox 2, Encephalitis 3, Acute Primary Pneumonia 2 and Pulmonary Tuberculosis 1.

*Milk and Dairies (Scotland) Act, 1914.*—There is only one dairy within the Burgh and the premises are registered for 20 cows. The animals and byres are well kept but the latter fall short, in certain respects, of the standard laid down in the County Dairy Byelaws.

*Meat Inspection.*—Reference will be found to the number of animals slaughtered and the weight in pounds of meat condemned in the public slaughterhouse under the tabular statement given for the Landward Area. The premises are satisfactory as to structure and are well kept.

*Vital Events.*—The population of the Burgh as estimated by the Registrar-General to the middle of 1932 was 2,498. The corrected number of births was 40 (males 28, females 12) and is equivalent to a birth-rate of 16·0 per 1,000 population. There was one illegitimate birth. The marriages in 1932 numbered 12 and the marriage-rate was 4·8 per 1,000. There were 34 deaths (males 11, females 23) during the year and the corrected and adjusted death-rate was 13·6 per 1,000 estimated population. Only one death due to tuberculosis (pulmonary type) was recorded.

The infantile mortality rate in 1932 was 100, there being four deaths recorded of children under the age of one year.

The natural increase of population as shown by the excess of births over deaths was 6.

### MARKINCH BURGH.

There were 41 cases of infectious diseases notified in 1932 as follows:—Scarlet Fever 17, Diphtheria 2, Erysipelas 2, Ophthalmia Neonatorum 1 and Chickenpox 19. The number of cases notified in 1931 was 15



and in 1930 there were 58 cases recorded. Scarlet fever shows an increase of 11 cases over the number notified in 1931 and there were also 18 more cases of chickenpox notified than in the preceding year. The incidence of disease was otherwise low and school closure was unnecessary during the year for the prevention of the spread of infection.

*Milk and Dairies (Scotland) Act, 1914.*—All milk consumed in the Burgh is produced in licensed premises within the Landward Area, there being no dairy premises in the Burgh.

*Meat Inspection.*—The public slaughterhouse though belonging to the Burgh is situated in the Landward Area. The building is quite suitable for the purpose and it is kept in a clean and satisfactory manner. Reference has already been made to the question of meat inspection here and a list of the animals slaughtered and the weight in pounds of condemned meat will be found in the report for the Landward Area.

*Vital Events.*—The population as estimated to the middle of 1932 by the Registrar-General was 2,086. The corrected number of births was 40 (males 26, females 14) and the birth-rate was 19·1 per 1,000 estimated population. No illegitimate births were recorded during the year.

The marriages in 1932 numbered 19 and the marriage-rate was 9·1 per 1,000. There were 23 deaths and the corrected and adjusted death-rate was 11·0 per 1,000. Two deaths were recorded as being due to tuberculosis and both were of the pulmonary type, the equivalent death-rate for this disease being 0·96 per 1,000.

The infantile mortality rate was 75 in 1932 and the natural increase of population as shown by excess of births over deaths was 17.

### **BURNTISLAND BURGH.**

During the year 154 cases of infectious diseases were brought to notice within the Burgh. This is an increase of 103 over the number recorded in 1931. The greater incidence of scarlet fever and chickenpox mainly accounts for the increase, there being 36 more cases of scarlet fever and 52 more of chickenpox than in 1931. Six cases of bacillary dysentery and 1 of malaria were recorded and tuberculosis showed an increase of 9 cases (6 pulmonary and 3 non-pulmonary) over the number notified in the preceding year.

The individual diseases notified in the Burgh during 1932 were as follows:—Scarlet fever 53, diphtheria 4, erysipelas 1, ophthalmia neonatorum 1, chickenpox 68, acute primary pneumonia 8, malaria 1, pulmonary tuberculosis 7, non-pulmonary tuberculosis 4, bacillary dysentery 6 and cerebro-spinal meningitis 1.

*Milk and Dairies (Scotland) Act, 1914.*—There are two dairy premises within the Burgh licensed for milk production and the number of cows for which the premises are registered is 54. Both dairies are well kept and satisfactory for the purpose.



*Meat Inspection.*—Reference has been made to the public slaughter-house in previous reports. This is a modern structure and it is always kept in an excellent manner. The system of meat inspection remained unchanged during the year and is open to question as the bulk of the animals slaughtered were never inspected owing to the other duties of the Sanitary Inspector as detention officer, making it impossible for him to be constantly in attendance during the slaughter of animals. This matter was, however, gone into and towards the end of the year, it appeared likely that the old system in force prior to the change-over would be reverted to at an early date.

A record of the number of animals slaughtered and the weight in pounds of meat condemned during the year will be found under the appropriate heading in the County Report.

*Vital Events.*—The population as estimated to the middle of 1932 by the Registrar-General was 5,433. The corrected number of births was 66 (males 33, females 33) and the birth-rate was 12·1 per 1,000 estimated population. There were 8 illegitimate births during the year or 12·1 per cent. of the total births.

The marriages in 1932 numbered 21 and the marriage-rate was only 3·8 per 1,000. This figure is very low and may tend to indicate that the state of industry in the Burgh was not in a flourishing condition during the year as it is generally found that the marriage-rate fluctuates with the state of trade and is lowest during periods of depression.

There were 72 deaths in 1932 (males 31, females 41) and the corrected and adjusted death-rate was 13·2 per 1,000. Four deaths from tuberculosis were recorded (pulmonary 3, non-pulmonary 1) and the death-rate for all tuberculosis was 0·75 per 1,000. The death-rate for pulmonary tuberculosis was 0·55 per 1,000.

The infantile mortality rate was 106 per 1,000 births, a relatively high figure.

During the year there were 6 more deaths than births recorded and there was thus a natural decrease in the population.

### KINGHORN BURGH.

53 cases of infectious diseases were recorded within the Burgh during 1932. These were as follows :—Scarlet fever 4, erysipelas 4, puerperal fever 1, chickenpox 25, acute primary pneumonia 5, acute influenzal pneumonia 2, pulmonary tuberculosis 8, non-pulmonary tuberculosis 3 and puerperal pyrexia 1. The incidence of disease was fairly normal apart from an increase of 10 in the number of cases of tuberculosis recorded. There were 7 more cases of pulmonary tuberculosis and 3 more of the non-pulmonary type notified than in 1931. Chickenpox also showed an increase of 10 cases over that notified in the previous year.



*Milk and Dairies (Scotland) Act, 1914.*—There is only one dairy within the Burgh and the premises are registered for 10 cows. The structure is satisfactory for dairy purposes and it is well kept. The bulk of the milk sold in the Burgh is produced in the Landward Area.

*Meat Inspection.*—The private slaughterhouse is as reported in previous years and there have been no changes to record. An account of the animals slaughtered and the amount of meat condemned is given in the Landward Area report.

*Vital Events.*—The population of Kinghorn Burgh as estimated by the Registrar-General to the middle of 1932 is 1913. The corrected births is given as 33 (16 males, 17 females) which is equivalent to a birth-rate of 17.2 per 1,000 estimated population. Only one illegitimate birth was recorded. There were 28 deaths (males 15, females 13) in the Burgh during 1932, equivalent to a corrected and adjusted death-rate of 14.6 per 1,000 estimated population.

Only one infant under the age of one year died in 1932, the infantile mortality rate being 30.3 per 1,000 births. This satisfactory result reflects great credit on the good work that is being done in the Burgh by the Doctor and the Health Visitor.

The natural increase of population as shown by excess of births over deaths was 5 during 1932.

### LEVEN BURGH.

During the year 88 cases of infectious diseases were notified within the Burgh of Leven as follows:—Typhoid fever 1, scarlet fever 42, diphtheria 4, erysipelas 2, ophthalmia 11, chickenpox 4, acute influenzal pneumonia 1, pulmonary tuberculosis 4, non-pulmonary tuberculosis 9 and puerperal pyrexia 1.

Scarlet fever showed an increase of 33 cases over the number recorded in the previous year but otherwise the incidence of disease was lower than in 1931.

School closure for the prevention of the spread of infection was considered to be unnecessary during the year.

*Milk and Dairies (Scotland) Act, 1914.*—There is only one licensed dairy within the Burgh and this is satisfactory for the purpose. As in other Burghs the bulk of the milk consumed is derived from licensed premises in the Landward Area.

*Meat Inspection.*—The public slaughterhouse is as described in previous reports and as reference has already been made to the system of meat inspection in the report for the Landward Area, repetition is unnecessary.

*Vital Events.*—The population of the Burgh as estimated to the middle of 1932 by the Registrar-General was 7,457. The corrected



number of births was 112 (males 62, females 50) and the birth-rate was 15 per 1,000 estimated population. There were 5 illegitimate births or 4·4 per cent. of the total births.

The marriages in 1932 numbered 54 and the marriage-rate was 7·2 per 1,000. There were 92 deaths in 1932 (males 44, females 48) and the corrected and adjusted death-rate was 12·3 per 1,000. The death-rate for all tuberculosis was 0·67 per 1,000 and that for pulmonary tuberculosis was 0·26 per 1,000.

The infantile mortality rate for 1932 was 44·6 per 1,000 births, a figure which is very satisfactory.

The natural increase of population as shown by the excess of births over deaths was 20.

### BUCKHAVEN BURGH.

In 1932 there were 249 cases of infectious diseases notified within the burgh of Buckhaven and Methil. These were as follows:—Scarlet fever 118, diphtheria 19, erysipelas 16, puerperal fever 4, ophthalmia neonatorum 8, chickenpox 36, encephalitis lethargica 2, acute primary pneumonia 9, pulmonary tuberculosis 13, non-pulmonary tuberculosis 12, puerperal pyrexia 4, and acute influenzal pneumonia 8.

In 1931, 361 cases of infectious diseases were recorded but 210 of these were chickenpox whereas in 1932 only 36 patients were notified as suffering from this disease.

As in many other Burghs the incidence of scarlet fever was considerably increased during 1932, and 118 cases were brought to notice in contrast to 27 in 1931. Cases of tuberculosis notified in 1932 were 15 less than in 1931 (10 pulmonary and 5 non-pulmonary).

School closure was unnecessary for the prevention of the spread of infectious diseases during the year.

*Milk and Dairies (Scotland) Act, 1914.*—There are two dairies registered for milk production within the Burgh and these are registered for 59 cows (Denbeath Dairy 16 cows, Kirklandhill Dairy 43 cows). The premises in both instances have been brought up to standard in terms of the County Dairy Byelaws and an additional byre for 8 cows was licensed at Denbeath Dairy during the year. Pasteurised milk is sold by Buckhaven Co-operative Society who obtain milk in bulk from dairies in the Landward Area and treat it in their plant at their premises in Buckhaven, in accordance with the terms of the Milk (Special Designations) Order 1930. Grade A. T.T. milk is also sold in the Burgh. This is supplied by Wemyss Castle Dairy in the Landward Area.

*Meat Inspection.*—The public slaughterhouse is as described in previous reports. The structure is modern and satisfactory in every way while meat inspection here, to judge by the amounts of meat condemned annually, is also on a satisfactory basis. A record of the number of animals slaughtered and the amount of meat condemned will be found in the report for the Landward Area.



*Vital Events.*—The population as estimated by the Registrar-General to the middle of 1932 was 17,813. The corrected number of births for 1932 was 376 (males 195, females 172) equivalent to a birth-rate of 20·6 per 1,000 estimated population. There were 19 illegitimate births (males 9, females 10) or 5·1 per cent. of the total births.

The marriages in 1932 numbered 118, and the marriage-rate was 6·6 per 1,000 estimated population.

The deaths numbered 190 (males 106, females 84) equivalent to a corrected and adjusted death-rate of 10·7 per 1,000. The death-rate for all tuberculosis was 0·56 per 1,000 and that for pulmonary tuberculosis was also 0·56 per 1,000.

The infantile mortality rate for 1932 was 101 per 1,000 births. This figure is relatively high. The total number of children dying under one year of age was 37, and in 16 of these the cause of death was given as congenital debility, prematurity or malformation. Properly instituted ante-natal clinics would tend to a decrease in the number of infant deaths due to the causes above noted as in many instances, the death of the child can be traced to lack of proper care and treatment of the expectant mother. By proper ante-natal care and hospital treatment, if need be, the life of the mother could be more fully safeguarded and the lives of at least some of the children might be saved.

The natural increase of population as shown by excess of births over deaths for 1932 was 177.

### LOCHGELLY BURGH.

The number of cases of infectious diseases recorded within the Burgh of Lochgelly in 1932 was 283. This is an increase of 151 over the number notified in 1931 and is accounted for by an increase of 49 cases of scarlet fever and 119 cases of chickenpox. In 1931 only 5 cases of scarlet fever were notified whereas in 1932 there were 54 cases brought to notice. 144 cases of chickenpox were recorded in 1932 in contrast to 25 in 1931. The incidence of infectious diseases was otherwise fairly normal and school closure for the prevention of the spread of infection was unnecessary during the year.

The cases of infectious diseases notified during the year were as follows :—Scarlet fever 54, diphtheria 8, erysipelas 14, ophthalmia neonatorum 3, chickenpox 144, encephalitis lethargica 1, acute primary pneumonia 22, acute influenzal pneumonia 5, pulmonary tuberculosis 9 and non-pulmonary tuberculosis 23.

*Milk and Dairies (Scotland) Act, 1914.*—There is only one dairy registered for 24 cows within the Burgh of Lochgelly. The premises are satisfactory for the purpose and are kept in a clean and tidy condition. Pasteurised milk is sold in the Burgh but the milk is not treated here as it is all supplied by Dunfermline Co-operative Society whose



pasteurising plant is situated in Dunfermline Burgh. As in other burghs the bulk of the milk used is obtained from licensed dairy premises within the Landward Area of the County.

*Meat Inspection.*—The public slaughterhouse which is the property of the Town Council is a fairly modern and complete structure. It is quite well kept and satisfactory for the purpose. Details regarding the number of animals slaughtered and the weight in pounds of meat condemned during the year are given under Meat Inspection in the report for the Landward Area.

*Vital Events.*—The population of the Burgh as estimated by the Registrar-General to the middle of 1932 was 9,373. The figure for corrected births in 1932 was 175 (males 89, females 86), equivalent to a birth-rate 18·6 per 1,000 estimated population. There were 6 illegitimate births or 3·4 per cent. of the total births. The marriages in 1932 numbered 83 and the marriage-rate was 8·8 per 1,000 estimated population. The deaths numbered 93 (males 47, females 46), equivalent to a corrected and adjusted death-rate of 9·9 per 1,000 of the population. The total number of children dying under one year of age was 8 and the infantile mortality rate for 1932 was 45·7 per 1,000 births. This figure is most satisfactory and the lowest of which I have record. Unfortunately last year returns were not made for the small burghs by the Registrar-General and comparison with 1931 cannot be made but in 1929 the corresponding figure was 96. This low rate of 45·7, though perhaps not entirely due to the measures adopted in connection with the Maternity and Child Welfare Scheme in force, must in large part be attributed to this source and it reflects great credit on the Health Visitors and on the valuable work which they are undertaking in this direction within the Burgh.

The natural increase of population as shown by the excess of births over deaths was 82 during 1932.



# Cupar and St. Andrews Districts.

**Dr. G. MATTHEW FYFE, Deputy Medical Officer.**

The great national advances which have been made during the past quarter century in the eradication of disease-producing influences must be manifest even to the most unobservant. Bad housing conditions have been subjected to vigorous onslaughts. Environmental pollutions are gradually being overcome. The purity of the food supply is being safeguarded with increasing vigilance. The medical services are keeping close observation on the health of the rising generation. Public services have insured that none need want food or clothing or lack medical attention. The result has been an increased expectation of life and an increased capacity for work on the part of the population as a whole.

From time to time, however, an irregular beat is perceptible in the steady rhythm of the public pulse; upsetting factors and incidents manifest themselves as evidence that the nation has still a long road to travel on the way to health. For instance, a recent Government pronouncement showed that during the year 1932 the number of recruits for the army rejected on medical grounds rose from 335 to 370 per 1,000 and that the number of men discharged on medical grounds within six months of enlistment had increased, the indication being that more than one-third of the men who comprise the main mass of the population are physically defective.

Even although allowance is made for the harmful influences of industrial depression on the health of the community, it is difficult to account for situations such as these. They cause one to wonder whether or not the methods of present day public health administration are becoming obsolete, misdirected or inadequate to cope with modern conditions of life, and to consider whether the time has not come for a critical examination of national administrative schemes in the light of their relation to known deficiencies in the nation's health.

The problem is, however, national and not yet the immediate concern of members of Local and Special Committees whose time, so ungrudgingly given, is fully occupied in attending to the requirements of existing legislation. As will be seen from the following paragraphs the work of the Local Committees in the East of Fife during the year under review has been strenuous and attended by much success in removing influences injurious to the health of the people. Time, however, was found for special investigations, among the more notable



of which was an enquiry into means of providing water supplies and drainage systems for certain populous areas where these public services were deficient or lacking. The housing requirements of the Districts received full consideration and several building schemes were decided upon. Many other needs and problems were studied and, with due regard to present day needs for economy, no opportunity was lost of improving or of assisting others to improve, living conditions.

### INFECTIOUS DISEASES.

A slight increase occurred in the incidence of infectious diseases due mainly to an increase in the numbers of cases of chickenpox, pneumonia and pulmonary tuberculosis. None of the infectious diseases however, assumed epidemic proportions, although a small outbreak of scarlet fever occurred in Cellardyke. The principal epidemic disease was chickenpox, the distribution of which was not confined to any particular locality. Diphtheria was markedly quiescent only 7 cases occurring.

218 cases of infectious diseases were notified in the Landward Area as compared with 180 in 1931. The following table describes their incidence in the three Districts :—

District.	St. Andrews.	Anstruther.	Cupar.	Total.
Enteric Fever ..	—	—	1	1
Scarlet Fever ..	3	15	28	46
Diphtheria ..	2	3	2	7
Erysipelas ..	6	3	6	15
Puerperal Fever ..	1	—	—	1
Ophthalmia Neonatorum	4	2	4	10
Chickenpox ..	17	13	34	64
Encephalitis Lethargica ..	—	2	—	2
Acute Primary Pneumonia ..	4	1	13	18
Acute Influenzal Pneumonia, ..	2	2	3	7
Pulmonary Tuberculosis	9	4	14	27
Non-pulmonary Tuberculosis ..	5	2	12	19
Puerperal Pyrexia ..	—	1	—	1
	35	48	117	218



In addition the following number of cases were notified in Burghs :—

Scarlet Fever	..	..	..	..	65
Diphtheria	..	..	..	..	24
Erysipelas	..	..	..	..	20
Puerperal Fever	..	..	..	..	1
Ophthalmia Neonatorum	..	..	..	..	3
Chickenpox	..	..	..	..	144
Dysentery	..	..	..	..	2
Infantile Paralysis	..	..	..	..	1
Encephalitis Lethargica	..	..	..	..	1
Acute Primary Pneumonia	..	..	..	..	22
Acute Influenzal Pneumonia	..	..	..	..	5
Pulmonary Tuberculosis	..	..	..	..	38
Non-pulmonary Tuberculosis	..	..	..	..	24
Puerperal Pyrexia	..	..	..	..	4
Total					354

The total number of persons notified as suffering from infectious diseases in the East of Fife was therefore 572.

The epidemic of measles which originated in Cupar District in October 1931 and affected some 500 children spread eastwards and invaded the coast burghs. Before it terminated in July, about 253 children had been infected in St. Andrews and Anstruther Districts. Fortunately, the disease was of mild character throughout. Only two deaths resulted.

An outbreak of influenza of moderate dimensions occurred in the spring of the year. No information is available as to the number of persons affected. Although one or two of the schools were seriously involved a greater number of adults than children fell ill. The symptoms were of the usual catarrhal nature, most frequently located in the respiratory tract and accompanied by headache. A considerable degree of muscular weakness ensued during convalescence. The outbreak came to an end in March and on the whole was of mild type. It was not comparable to the pandemic of 1918. Twelve persons died as a result of infection.

So far as infectious diseases were concerned the year was on the whole a quiet one and the majority of the young population remained comparatively free from those infections which lead to ailment and disability in after life. This fortunate state of affairs has prevailed for some years now and it is to be hoped that it will continue.

Mortality from infectious diseases was low. In addition to those who died from measles and influenza, deaths were due to the following infectious diseases,—scarlet fever 1, diphtheria 1, tuberculosis 42, pneumonia 23, puerperal sepsis 1.



*Immunisation against Diphtheria.*—One of the most notable advances of recent years in the prevention of infectious diseases has been that of inoculation against diphtheria. It has been definitely established that by three injections under the skin at weekly intervals of minute doses of the toxins of the germs of diphtheria, it is possible to prevent persons acquiring infection. The process is practically painless and in children is followed by no ill effects. In adults a brief period of malaise sometimes follows. Full immunity develops two or three months after the injections.

Some few years have elapsed since last diphtheria was prevalent in the East of Fife. In 1921 most of the inland burghs were infected and in 1928 an outbreak occurred in St. Andrews. The majority of the juvenile population must, therefore, be in a susceptible state and liable to contract infection. Since an epidemic of diphtheria is invariably attended by deaths and permanent disabilities it is a matter of importance that the public should be made aware of the facts that diphtheria is a preventable disease and that a serious responsibility rests upon parents whose children become infected. Parents should take an opportunity of consulting their family doctors regarding immunisation. In medical literature there is abundant evidence of its efficacy. Unfortunately, facilities in the County for the immunisation of susceptible persons are, so far, restricted. In St. Andrews Fever Hospital immunisation is carried out free of charge and during the past six years some 200 children have attended for the necessary inoculations and although several of them have been exposed to infection none have acquired the disease. At Ovenstone Fever Hospital similar arrangements are being made.

Apart from the relation which the process bears to the health of the community, immunisation is an advisable undertaking from the point of view of public expenditure. For instance, the average cost incurred by the County Council for the treatment of a case of diphtheria in the Fever Hospital at St. Andrews is £12 17s 9d. It costs only 2s 5d to prevent a person acquiring the disease. In other words, treatment of one case of diphtheria in St. Andrews costs as much money as would immunise approximately 100 persons.

### HOSPITAL ACCOMMODATION.

The following is an account of the work done in the four infectious diseases Hospitals :—

*St. Andrews City Fever Hospital.*—Forty patients were admitted for treatment :—



				<i>Burghal.</i>	<i>Landward.</i>
Scarlet Fever .. .. .	..	..	..	7	6
Diphtheria .. .. .	..	..	..	5	3
Scarlet Fever and Diphtheria .. .. .	..	..	..	1	—
Pneumonia .. .. .	..	..	..	6	1
Erysipelas .. .. .	..	..	..	1	—
Poliomyelitis .. .. .	..	..	..	1	—
Chickenpox .. .. .	..	..	..	1	—
Whooping Cough .. .. .	..	..	..	1	—
Toxic Influenza .. .. .	..	..	..	1	—
Observation .. .. .	..	..	..	4	2
Total ..				28	12

The average duration of stay of patients was 21·65 days.

Two deaths occurred, one from scarlet fever and diphtheria and the other from laryngeal diphtheria. The first was in hospital for a week and the second for two hours.

Several of the patients admitted were seriously ill and for some time gave cause for anxiety.

78 patients attended for out-patient treatment. 196 attendances were recorded. As regards the scheme for immunisation against diphtheria the Matron, who herself carries out the work, reported 35 children were immunised against diphtheria as compared with 41 in 1931. Two of these were referred by a private practitioner and four from the Child Welfare Centre, where notices have been posted. The remainder came to the hospital voluntarily as relations or friends of patients. Mothers were very grateful to receive information regarding immunisation against the disease and expressed surprise that they had not been told of it by their family doctors. In no case did a mother refuse to have her children immunised and very willingly brought them at regular intervals. With the exception of one child from Cellardyke, all the children came from St. Andrews. Forty-three children who had been immunised previously were re-tested and only one was found still to be susceptible."

*Ovenstone Infectious Diseases Hospital.*—Sixty patients were admitted for treatment :—

				<i>Burghal.</i>	<i>Landward.</i>
Scarlet Fever .. .. .	..	..	..	37	16
Diphtheria .. .. .	..	..	..	4	3
Total ..				41	19

Of the burghal patients ten came from the West of Fife, two from rail, twenty-two from Anstruther, five from Pittenweem and two from Elie.

The average duration of stay of patients was 32 days.

One death occurred from endocarditis after scarlet fever.



One or two of the cases of scarlet fever were very seriously ill and demanded great care on the part of the medical and nursing staff.

*St. Michael's Infectious Diseases Hospital.*—Forty-four patients were admitted for treatment :—

	Burghal.	Landward.
Scarlet Fever .. .. .	12	8
Diphtheria .. .. .	2	3
Pneumonia .. .. .	1	4
Erysipelas .. .. .	—	3
Influenzal Meningismus, .. .. .	—	1
Measles .. .. .	—	3
Scabies .. .. .	6	—
Impetigo .. .. .	1	—
Total .. .. .	22	22

The burghal patients came from Newport and Tayport—eight from the former and fourteen from the latter.

The average duration of stay of patients was 29 days.

There were no deaths.

The great devotion to duty displayed by the Matron over a long period of years unfortunately resulted in a breakdown in her health and she was given sick leave for an indefinite period. Many patients have cause to be grateful for her skilled administrations and it is to be hoped that she will have a speedy return to health.

*Auchtermuchty Infectious Diseases Hospital.*—Seventy-three patients were admitted for treatment :—

	Burghal.	Landward.
Enteric Fever .. .. .	—	1
Scarlet Fever .. .. .	31	21
Diphtheria .. .. .	8	1
Pneumonia .. .. .	2	3
Measles .. .. .	2	2
Erysipelas .. .. .	—	1
Erythema Iris .. .. .	—	1
Total .. .. .	43	30

Of the burghal patients eighteen came from the West of Fife. Seven of them were suffering from scarlet fever and one from pneumonia. The latter case and seven of the scarlet fever cases were also suffering from chickenpox. Of the other burghal patients nine came from Cupar, eight from Falkland, four from Ladybank, one from Auchtermuchty and three from Newburgh.

One child was sent to Perth Infirmary for a mastoid operation.

The average duration of stay of patients was 35 days.

No deaths occurred.



None of the fever hospitals are of satisfactory type. According to floor space the largest of them should contain no more than 17 beds and the smallest no more than 10. The result is that even under mild epidemic conditions overcrowding is difficult to avoid. St. Andrews Hospital lacks storage accommodation and has insufficient arrangements for the observation of suspected cases. Ovenstone Hospital is planned on similar lines and has no observation ward whatsoever. St. Michael's Hospital is not well built. It has a dangerously inadequate water supply and a primitive drainage system. Auchtermuchty Hospital is a mansion house ill adapted for the purpose.

All four hospitals are required, however, and will have to continue in use until such time as the difficult problem of hospital accommodation throughout the County is solved.

The Memorial Cottage Hospital in St. Andrews and the Adamson Cottage Hospital in Cupar are the only two institutions in the East of Fife for the treatment of general sickness. The first contains 34 general beds and 4 maternity beds and the second 17 general beds. 604 patients were admitted to these hospitals and 22 deaths occurred. The average duration of stay of patients in the Memorial Cottage Hospital was 11·5 days and in the Adamson Cottage Hospital was 16 days. 719 surgical operations were performed. 409 persons were seen in the out-patient departments. Accommodation in the St. Andrews Hospital was adequate but that in the Hospital at Cupar showed signs of being overtaxed on occasion.

*Ambulance Services.*—Arrangements for the conveyance of patients to the fever hospitals were much disjointed by an exchange of motor ambulances between St. Michael's Hospital and Cameron Hospital. Soon the ancient model which St. Michael's Hospital received became totally incapacitated and the Cameron Hospital ambulance was called upon to serve the greater part of the East of Fife since the horse-drawn ambulance at Ovenstone was also out of commission. St. Andrews Burgh and its immediate vicinity were sufficiently tended by the horse-drawn ambulance kept at the hospital. The motor ambulance at Auchtermuchty is fighting a losing battle against age and dilapidation. A journey in it is a memorable adventure to the healthy. It must be an ordeal to the sick.

## WATER SUPPLIES.

When the history of the past hundred years comes to be written the expensive water supplies of many of the Counties of Scotland will be a subject of comment if not of wonderment. In each County tens of thousands of pounds have been spent and thousands are still being spent annually by towns, small burghs, villages and hamlets in order to create and maintain individual supplies. It is fitting that localities



should preserve their independence but many encounter great difficulty in providing for themselves sufficiently adequately. This township has built a reservoir but cannot afford an up-to-date purification plant; that village is overwhelmed by the estimated cost of a new water main to take the place of an old, frequently scraped, encrusted pipe; this burgh is developing beyond the capacity of its reservoir and views the cost of extension with misgiving. And so it goes on each year multiplying problems and increasing difficulties.

If the total cost incurred in the East of Fife for the provision of water supplies were calculated and if the total annual expenditure was defined, there can be little doubt but that the sums would be found to be enormous and certainly much in excess of the amount which would require to be paid if one or more big schemes of co-operation were in existence. In years to come this aspect of the problem of water supplies will doubtless receive consideration with the probable result that individual local authorities will find it expedient in the interests of their rate-payers to combine in securing a common source of supply. Opportunities of linking up areas have presented themselves in the past and have been ignored. Opportunities, however, still exist and it would be well if some comprehensive scheme were outlined as a guide to future developments and as a safeguard against the day when small communities will protest against the constant expenditure, vigilance and struggle which is entailed in the maintenance of their water supplies. The first step towards that end is the cultivation of trust and understanding between local authorities.

In the East of Fife 12 small burghs have their own particular arrangements, 4 of these participating in two individual joint schemes. In the landward part there are 15 separate special water districts—Kettle, Strathmiglo, Pitlessie, Balmblae, Newton of Falkland, Springfield, Cupar Muir, Dunshalt, Elie, Earlsferry and St. Monance, Guardbridge, Leuchars, Lathones, Upper and Lower Largo, Largoward, Dunino; in addition there are at least 8 notable private systems of supply—Luthrie, Lethan, Gateside, Freuchie, Chance Inn, Glenduckie, Wester Friarton, Kilconquhar. Each of these localities possess their own schemes of water supplies—some of excellent modern type, others of doubtful efficiency and restricted utility. In one or two Districts the scheme has progressed no further than the definition of its boundaries.

There are many populous areas which still depend upon wells for their water supplies and many of the wells are suspected of being contaminated.

Since no community can hope to maintain its place as a flourishing residential or industrial centre unless it has a plentiful and pure water supply the importance and urgency of the problems arising in these latter areas will be manifest.



The County Council, however, are having due regard for their responsibilities and numerous reports by the County Water Engineer have been under consideration during the year. Surveys were completed and reports were submitted regarding the augmentation of the water supplies of the following places :—Lower and Upper Largo, Largoward, Balmbrae, Gateside, Dunbog School, Logie School, Leuchars and St. Michael's Hospital. The following new schemes for water supplies were also investigated and described :—Ceres, Springfield, Cupar Muir, Lathones, Strathkinness, Kilconquhar, Kingsbarns and Boarhills.

One of the more important undertakings of the year was the provision of a water supply for the village of Lathones. A new storage tank of about 1,200 gallons capacity was erected and a distribution pipe some 1,100 yards in length was laid down. Branch openings were made so that connections might readily be laid on to houses. The improvement was highly necessary since previously the water supply was drawn from an open roadside ditch which was open to much pollution.

Determined efforts were made to find a suitable water supply for the village of Ceres, the future development of which as an attractive place of resort is seriously handicapped by lack of sufficient water. Several proposals have been investigated. Sites for a reservoir were inspected in the Glassy How, on the Kame Burn below Kame Bridge and on the Craigrothie Burn below Muirhead Farm. Estimated costs, however, were found to be high. A proposal to dispense with a reservoir and to filter water led direct from one or other of the Burns was also considered but again it was found that a high rate of assessment would be necessary. A suggestion was made that the County Council might co-operate with the Town Council of Cupar and obtain leave to tap the water main from Clatto reservoir but no definite understanding was reached. An alternative scheme to pump water from Kame Burn in Glassy How by means of a ram or hydrostat was brought forward by the County Engineer. The estimated water rate for the undertaking was approximately 5s per £. It was then thought that a sufficient supply might be obtained from springs in Freeland's Hill. Accordingly Mr. Jas. K. Allan from the Scottish Office of H.M. Geological Survey Department inspected the hill and, finding that the underlying geological formation normally acted as a large reservoir, suggested that a trial bore should be sunk in a field on the north side of the Whitehill farm road. The work was carried out at a cost of £50 but unfortunately the resulting supply was insufficient to meet requirements. Had success attended the experiment the rate for the completed scheme, as estimated, would have been 3s 9d per £. The matter is still under consideration and it is to be hoped that a satisfactory solution to the difficulty will be obtained since the provision of a water supply at reasonable cost stands between decadence and progress for the village.



Much consideration was given to a water supply for the villages of Springfield and Cupar Muir. Negotiations between the County Council and the Town Council of Cupar regarding a supply from the Cupar Main having been terminated in respect of the former village a proposal was made that trial bores should be sunk at specified sites. The Local Committee are favourably inclined to the suggestion. Both villages are much in need of housing improvements so that much depends upon a successful issue.

Largoward suffers from a scarcity of supply, especially at high points in the village, between the hours of 8 a.m. and 3 p.m. daily. The fault is due to the small diameter of the distribution pipe. When preparations were being made for the new water supply to Lathones, proposals were raised for a combined water supply to the two villages and for the laying down of a new four-inch main in Largoward. Local opinion, however, vetoed the suggestions and the matter is still in abeyance.

During the summer drought the water supply to Upper and Lower Largo gave rise to concern. The capacity of the reservoir fell from 4,560,000 gallons to 630,000 gallons and the supply had to be cut off during the night until rain began to fill up the reservoir during the second week of October. As an alternative to the proposed erection of an additional reservoir in Balhousie Den an examination of the ground below the existing reservoir was made and a series of springs were located on the north side of Largo Law above Auchendownie Farm. A foot below the surface cool spring water was obtained rising out of the rock. These springs were found to give a flow of about 45 gallons per minute, an amount sufficient of itself, if maintained, to supply the needs of villages without recourse to the existing reservoir. A scheme was therefore formulated for the collection of the flow from the springs into a tank connected with the existing storage tank at Blindwells. Discussions are at present proceeding with the proprietor. Through the arrangement the additional demands made upon the supply during the summer months would be more than met.

The possibility of obtaining a water supply for Kingsbarns and Boarhills either from bores sunk locally or through a pipe led from Cameron Reservoir, the source of supply to St. Andrews, was under consideration. No great progress has been made however.

Similar proposals were also investigated in connection with the village of Strathkinness, also, so far, without definite result.

Three suggestions were considered in connection with the provision of a water supply for Kilconquhar and Barnyards. It was thought that the Elie and Earlsferry and St. Monance Water Supply Committee might permit a pipe to be led from their main which passes through Kilconquhar. It is not clear, however, that the amount of water available in Gillingshall Reservoir provides sufficient margin for the purpose, so that no great headway has been made in this direction.



The County Water Engineer reported on a scheme to draw off water from the Gibliston Burn at Kellie Mill. The third proposal was to utilise the water from a spring near the head of the valley at the north-west edge of Kilbrackmont Knock. No decision has been reached regarding the proposals. It is a matter of importance that a solution should be found if the villages are to be preserved. They are situated in close proximity to Elie and with that Burgh occupy a strategical position in a large area of coast land which lends itself admirably to the development of holiday resorts. Any scheme for water supply to the village should therefore be related to future as well as to present requirements.

In addition to these major schemes water supplies to many individual properties were investigated, following on complaints or in connection with the improvement of housing conditions. In all cases defects, when discovered, were made good by proprietors.

In order to prevent waste, undue consumption, misuse or contamination of water supplied by the County Council, *Bye-laws* were issued during the year. Every person desiring to introduce a supply of water from a source under the control of the County Council must intimate the fact to the County Engineer. Fittings must be tested and stamped at an approved testing station. Other important regulations and conditions are specified all of which are designed to control the use of the public water supplies.

### **DRAINAGE.**

There are nine Special Drainage Districts in the East of Fife :—Newton of Falkland, Balmblae, Kettle, Freuchie, Leuchars, Newton Park (Wormit), Colinsburgh, Largo, St. Monance. In three of these, however, the formation of the District has proceeded no further than definition on paper—Newton of Falkland, Balmblae and Kettle. There is room for improvement in the County system of sewage disposal. Too many populous areas have no modern drainage facilities but depend upon cesspools which yearly increase in number. It is not an uncommon sight to find side streets and open spaces used as a means for decanting domestic slops. Progress is bound to be retarded until systems of sewage disposal are laid down.

Strathmiglo affords a distressing example of the result of absence of drainage facilities. The water supply which was recently laid down has naturally been followed by an increased use of water for domestic purposes. Means for disposal of waste water are, however, to a large extent lacking with the result that garden grounds are made use of and in some instances areas of sewage saturated earth adjoin dwelling-houses. It frequently occurs, too, that the lanes leading down from the higher parts of the village act as channels for the passage of milky slop



water which finds its way along an open gutter in the main street. During a housing inspection the sanitary officials met with vigorous protests from many householders regarding the conditions which obtained.

Many other villages, however, are in need of drainage systems. Among them are Springfield, Dunshalt, Cupar Muir, Ceres, Dairsie, Balmblae, Newton of Falkland, Kettle, Pitlessie, Boarhills, Kingsbarns, Kilconquhar and Barnyards. Engineering and financial difficulties act as a deterrent to remedial measures. Nevertheless, until the problem is solved, the villages cannot keep pace with the trend of modern housing and industrial developments.

As was mentioned in the Report for 1931 the road side ditch at Strathkinness which carries off soil water from 25 houses in the village frequently gives rise to offensive conditions, especially during the summer months. Towards the end of the year, however, a commencement was made to pipe in the ditch and it is now highly probable that no further grounds for complaint will arise.

### **WATER SUPPLY AND DRAINAGE SCHEMES SUB-COMMITTEES.**

The Water Supply and Drainage Schemes Sub-Committees issued their report during the year. The need in 16 villages in the East of Fife for water and drainage services was indicated and recommendations were made that the necessary works be carried out. The estimated costs of the undertakings in each village was stated and the probable rate per £ specified. The value of the work of the Committee cannot be regarded too highly and it is to be hoped that their proposals will receive approval and that a commencement will soon be made to improve the environmental conditions of the villages on the lines suggested. A very great deal depends upon a successful outcome of their lengthy and well-informed deliberations and it is of interest to note that if all the water supply and drainage undertakings proposed by them for the whole County were completed a contribution equivalent to a rate of only 2½d per £ would be required from the County Council in order to ease the burden placed on local ratepayers.

### **DRAINAGE AND WATER SUPPLIES FOR SCHOOLS.**

During the year an enquiry was made into the need for water carriage sanitary fitments in schools situated in areas where no public gravitation water supply or drainage schemes were in existence. It was ascertained that there were 26 schools with undesirable sanitary arrangements. In 12 of these, however, there were less than 50 children on the roll and it was thought that action might be delayed in the meantime in connection with these. On the other hand it was considered that improvements could be effected in the majority of the remaining 14 schools at reasonable cost and that the expense which would be



incurred would be warranted not only on public health grounds but also by the fact that the institutions concerned were educational and, to an important extent, concerned with the development in the minds of future citizens of standards of satisfactory living conditions. After due consideration and enquiry it was decided to introduce modern sanitary fitments at Strathkinness and Balmullo Schools. In the meantime a commencement was made to erect wash-down closets at Strathmiglo School.

### DISPOSAL OF REFUSE.

The manurial value of the trade and domestic refuse of the communities in the East of Fife is decreasing with the disappearance of the privy pail. To-day its average value is only  $2\frac{1}{2}$  per cent. The material is therefore of service for agricultural purposes only to assist in breaking up heavy soil. For the most part, however, the soil in the East of Fife is light. For these reasons farmers are not now so anxious to carry away the large quantities of refuse which once they did with the result that disposal of refuse is becoming increasingly a problem.

In many places great difficulty is encountered in attempts to obtain a site for dumping. Proprietors object to having refuse tips on their lands chiefly because they become rat-infested and are most unsightly. Their objections cannot be wondered at. While there are some well-kept dumps in the landward part of the County, there are others which merit all the criticisms levelled against them and serve only to increase the determination of proprietors to have no such offensive accumulations on their property.

If the principles of modern controlled dumping were followed there would be an end to the opposition of landowners. Already there are on record several instances of proprietors offering land to local authorities for purposes of refuse disposal, after having witnessed the effect of modern methods on the appearances and sanitary state of refuse tips and having realised the value of the process as a means of land reclamation.

Another difficulty which arises in connection with the disposal of refuse is the great number of dumps which exist. Every Burgh and Special District and many villages have each a tip for themselves, the distance separating communities in some instances barely exceeding a mile. It would be an economical proposition for such areas to combine for purposes of refuse collection and disposal. Ultimately there would be a definite saving of public money and means would be afforded for the employment of an attendant at the common dump to regulate tipping and conceal causes of offence.



In the meantime, however, there is urgent need for an improvement of the condition of one or two of the existing dumps if for no other reason than this, that if legislation were to be brought in defining standards for dumping, these would require to be closed down as offences contrary to the regulations, thereby placing the communities concerned in a decidedly awkward position.

## HOUSING.

### *Building Bye-laws.*

The following Table describes progress in connection with the erection and alteration of buildings in the three Districts :—

Plans Submitted.	Anstruther.	Cupar.	St. Andrews.	Total.
Houses to be erected under subsidy .. .. .	6	15	21	42
Houses to be erected without subsidy .. .. .	2	1	—	3
Alteration and improvement of houses .. .. .	14	13	14	41
Erection of halls, garages, hutments, business premises, etc.	3	5	11	19
Provisions of sanitary conveniences in schools .. .. .	—	1	2	3
Improvement of Dairies .. .. .	5	4	1	10
Plans Examined .. .. .	27	28	32	87

Plans were considered for the reection of 42 houses under Government subsidy. The number included two housing schemes—Strathmiglo 12 houses and Leuchars 12 houses. Only one failed to receive approval, that for the erection of a two-roomed house in a congested area. Plans for the erection of three non-subsidy houses were considered. One of them for a timber three-apartment house in Cupar District was not approved. Plans for the improvement of 41 dwellinghouses were passed. The alterations consisted of the provision of additional rooms introduction of sanitary fitments and of the general reconstruction of defective dwellinghouses. Proposals for the erection or re-conditioning of 19 halls, garages, hutments and business premises were submitted. All but two received approval. Water carriage sanitary fitments were introduced into three schools—Strathmiglo, Strathkinness and Balmullo. The structural improvement of 10 dairy premises received sanction. In all, 87 plans affecting 118 buildings were considered by the three Committees concerned.

### *Housing (Inspection of District) Regulations (Scotland) 1928.*

The survey files issued to the sanitary inspectors towards the close of 1931 have enabled them to compile records of uniform nature. Systematic inspections of housing conditions in populous areas have been made



and detailed reports are being submitted to the Local Authority. While a great number of people are still residing under bad housing conditions, there can be no doubt but that a gradual improvement is taking place, due largely to the facilities provided under the Housing (Rural Workers) Act 1926, and to the example set by houses renovated under this Act. There is still much need and scope, however, for increased utilisation of the benefits obtainable under the Act.

922 houses were inspected—Cupar District 657, St. Andrews District 179, Anstruther District 86. 169 houses were found to be in a state so dangerous or injurious to health that they were unfit for human habitation—Cupar District 111, St. Andrews District 26, Anstruther District 32.

Without the service of a Notice under Section 20 (1) of the Housing (Scotland) Act 1925, action was taken in connection with 130 houses in which there was insufficient water closet accommodation. In 58 cases owners complied with requirements and 72 cases are still pending.

Without the service of Notices under Section 40 (1) of the Housing, Town Planning, etc. (Scotland) Act 1919, action was taken in connection with 110 houses which had not adequate water supply. In 44 cases requirements were complied with by owners and 66 cases are still pending.

While only one statutory Notice under Section 14 (1) of the Housing (Scotland) Act 1930, was issued pressure was brought to bear upon the proprietors of 57 houses with the result that 46 houses were rendered fit for human habitation, some of them with assistance under the Housing (Rural Workers) Act 1926. Without Notice in terms of Section 16 (1) of the Housing (Scotland) Act 1930, three houses were closed, undertakings being given that they would not be used for human habitation.

The defects found were of the usual nature obtaining in old rural cottages—dampness, lack of light and ventilation, lack of adequate sanitary fitments and water supply, structural dilapidation and lack of maintenance and repair.

Overcrowding is not marked in the District. The exact number of overcrowded houses is not known but it is estimated that the figure does not exceed 100. The greater part of the district was surveyed during the year and the number of overcrowded houses discovered was 65, in very few of which was the degree of overcrowding really serious.

#### *Housing (Rural Workers) Act 1926.*

53 plans for the reconditioning of 102 dwelling-houses were considered. Assistance under the County scheme was granted in respect of 97 of these. There is a marked contrast between the advantage taken of the generous terms of the Act in Cupar District and that taken in the other two Districts. 81 cottages were approved for renovation in Cupar District and only 8 each in St. Andrews and Anstruther Districts.



In considering applications submitted under the County Scheme for assistance, the Committees have always kept in view one of the principal requirements of the Act—that after reconditioning has been completed each house must be in all respects fit for human habitation. For that reason they have set and maintained a high standard of house reconstruction. They have insisted upon the introduction of sanitary fittings ; the removal of causes of dampness ; satisfactory lighting and ventilation of rooms ; facilities for washing and drying clothes and adequate press and storage accommodation. There are perhaps some who think that too much is demanded but since the Act requires the expenditure of public money for the benefit of a selected section of the population, it is right that grants should be conditional on observance of all the factors which experience has shown to be essential to proper modern housing conditions. From the official point of view the Committees ask for no more than is reasonably necessary. Were they to ask for less reconditioned houses could not be regarded as entirely fit for habitation.

Of all the Housing Acts the Housing (Rural Workers) Act 1926 is the most generous and helpful in the terms of financial assistance which it provides. Not only is a maximum grant of £100 available for the renovation of a house but loans can be obtained along with the grant up to 90 per cent. of the total cost incurred. Under these conditions it is surprising that no greater claims are made on the County Scheme. The majority of rural cottages are so substantially built that, if reconditioned and equipped along modern lines, they will have a life far in excess of many of the state-aided houses which are now being erected.

#### *Housing Requirements of the East of Fife.*

In the Report for 1930 it was shown that 246 houses were required to meet the needs of the East of Fife—Cupar District 132, St. Andrews and Anstruther Districts 114. During 1931 negotiations were commenced for the erection of 12 houses at Strathmiglo and for the acquiring of building sites at Newton of Falkland, Dunshalt, Kingskettle, Pitlessie, Springfield, Cupar Muir, Leuchars and Guardbridge. At the end of 1932 the erection of the houses at Strathmiglo was nearing completion. Sites had been obtained in Newton of Falkland, Pitlessie, Cupar Muir and Leuchars and negotiations were nearing successful termination in respect of the sites in the villages of Dunshalt and Kettlebridge. No progress was made regarding a site at Springfield and the difficulties encountered regarding a site at Guardbridge were so great that during the present year the County Council decided to increase the number of houses to be erected at Leuchars to 12 and to give the Guardbridge Paper Company a subsidy towards the erection of houses in Guardbridge. The following table describes the present position in regard to the progress of housing schemes.



Locality.	Number of houses to be built.	Remarks.
Newton of Falkland ..	8	Nearing completion.
Dunshalt ..	4	Not commenced.
Strathmiglo ..	12	Nearing completion.
Kingskettle ..	4	Not commenced.
Pitlessie ..	6	Not commenced.
Springfield ..	8	Not commenced.
Cupar Muir ..	4	Not commenced.
Leuchars ..	12	Not commenced.
Total ..	58	

In order that detailed information might be available regarding housing conditions and in order that reliable data might be secured for future action towards the improvement of houses a housing survey was undertaken in 9 villages. The following statement describes briefly housing conditions in each of the villages.

Locality.	Houses which could not be repaired at reasonable cost.	No. of Occupants.	Houses which could be repaired at reasonable cost.
Newton of Falkland ..	12	30	9
Dunshalt ..	9	29	12
Strathmiglo ..	41	129	45
Kingskettle ..	12	27	5
Pitlessie ..	13	33	19
Springfield ..	18	64	30
Cupar Muir ..	9	32	4
Guardbridge ..	1	1	—
Leuchars ..	30	75	10
Total ..	145	420	134

Detailed reports were submitted to the Committees concerned indicating the defects which obtained in each house mentioned. Information was also supplied regarding the degree of overcrowding and sub-letting which existed and regarding the industrial prospects of each village.

In St. Andrews District the following additional information was supplied by the Sanitary Inspector.



Locality.	Houses which could not be repaired at reasonable cost.	No. of Occupants.	Houses which could be repaired at reasonable cost.
Strathkinness ..	16	51	13
Denhead .. ..	6	15	2
Kincaple .. ..	4	5	13
Kingsbarns .. ..	9	26	9
Boarhills .. ..	6	7	12
Total ..	41	104	49

So far as Anstruther District is concerned the following information was derived largely from a rapid housing survey made by the Sanitary Inspector :—

Locality.	Houses which could not be repaired at reasonable cost.	No. of Occupants.	Houses which could be repaired at reasonable cost.
Kilconquhar ..	17	58	19
Barnyards .. ..	15	52	16
Arncroach .. ..	17	33	11
Colinsburgh ..	17	52	12
Upper and Lower Largo and Lundin Links ..	16	43	20
Largoward .. ..	13	36	22
Total ..	95	274	100

It will be clear that the housing programme defined by the County Council which allows for the erection of 46 houses in Cupar District and 12 houses in St. Andrews District, excluding the houses to be erected at Guardbridge under subsidy from the Local Authority is insufficient to meet the needs of the eastern division of the County. Not only has no scheme been defined for the improvement of housing conditions in many villages but in several of those villages for which a scheme is under way the number of uninhabitable houses is much in excess of the number of houses to be built.

There are two chief difficulties in the way of the adoption of a comprehensive policy of housing improvement in the East of Fife. The first is the fact that an appreciable number of the persons inhabiting seriously defective houses are pensioners or poorly paid workers neither of whom could possibly afford the rentals required for state aided houses. It is not thought that a process of decanting would meet with much success but an opportunity for verification will probably be afforded when the houses which are to be erected in Cupar and St. Andrews Districts to take the place of uninhabitable houses come to



are allotted. The housing schemes defined are the first to be undertaken in the East of Fife and much will be learned from them. It may perhaps prove to have been a wise policy for the County Council to have decided to venture cautiously in determining the number of houses to be erected. The second difficulty is more or less peculiar to St. Andrews and Anstruther Districts and is related to the absence of water supplies and drainage facilities in the majority of the villages. As has been stated in the relevant section of this report investigations are proceeding with a view to providing these public services. In the absence of such facilities and in view of the difficulty or inadvisability of utilising existing sources of supply it would probably be injudicious for the County Council to embark on housing schemes in many of the villages mentioned until such time as a decision has been reached regarding water supplies and drainage. There are, however, villages where obstacles are not insurmountable.

Scattered throughout the villages of the East of Fife are many derelict houses, the walls of which, in spite of neglect and the ravages of time, are still secure. They impart an appearance of decadence and decay to the neighbourhood. It would be well worth considering whether some of these should not be purchased by the County Council with a view to their reconstruction. It is quite probable that it would prove to be a less expensive matter to utilise these old properties than to build new houses. Certainly the finished products would be more lasting than present day subsidy houses are likely to be and they would be much more in keeping with the amenity of the localities.

### **FACTORIES AND WORKSHOPS.**

The following number of visits of inspection were paid in the East of Fife—factories 68, workshops 224, workplaces 5. These visits are referable to the landward part of the County only. Inspection of industrial premises in burghs is a matter which concerns Town Councils. Written notices were served requiring remedy of defects. 31 nuisances under the Public Health Acts were detected. These were related to such matters as want of cleanliness, want of ventilation and insufficient sanitary accommodation. In all but two instances satisfactory remedies were applied. On the whole the conditions under which the industrial workers carry on their occupations are reasonably good. Many of the workshops, indeed, are in a more hygienic state than are the defective houses from which quite a few of the employees come.

### **MEAT SUPPLY.**

Supervision of the meat supply is largely in the hands of the District Sanitary Inspectors, all of whom have been appointed Detention Officers. In St. Andrews Public Slaughterhouse alone meat inspection is carried out by a Veterinary Inspector employed by the County.



Council. In the case of all other slaughterhouses the Sanitary Inspector if they meet with difficulty are empowered to seek the advice of veterinary inspectors. Measures for safeguarding the meat supply have been much improved by the curtailment of hours for slaughter which took place in 1931 with the co-operation of Town Councils. During the year under review further curtailment of hours was effected in one or two slaughterhouses.

There are 23 licensed slaughterhouses in the East of Fife, Cupar District—1 public and 14 private, St. Andrews District—1 public and 3 private, Anstruther District—1 public and 3 private. 12 of these are situated in Burghs and 11 in the County. The number of private slaughterhouses, especially in Cupar District, is undoubtedly too great. Under the circumstances, it is impossible for the Sanitary Inspector to maintain adequate supervision of the meat slaughtered in view of their other duties. In Cupar District, for instance, there is almost room for the employment of a whole-time meat inspector if the terms of the Regulations were to be fully enforced.

It will probably be a long time before centralisation of slaughtering is effected. Nevertheless some progress was made in that direction in St. Andrews and Anstruther Districts. During the year the three slaughterhouses in Strathkinness and Elie were closed and the slaughtering of animals was diverted to the public abattoirs at St. Andrews and Anstruther. The large area of Cupar District and the fact that the Public Slaughterhouse at Cupar is unsatisfactory even for present purposes will militate against any such similar arrangements in the area.

Several of the slaughterhouses are admittedly of unsuitable structure. It would be a hardship on the butchers, however, to close these since other arrangements could not readily be made. As things are they are surprisingly well kept and little exception can be taken to the methods employed.

On the other hand, there are one or two slaughterhouses of excellent design. The new Public Slaughterhouses at Anstruther and St. Andrews for instance are at present the most modern of their type in Scotland.

Twenty-four applications for licences to slaughter or stun animals were submitted. All were granted. The licences are valid only in the landward part of the County. Licensing of slaughter-men in burgh areas is in the hands of the Town Councils.

Three applications for certificates for the sale of meat from vendors were considered. Permission was given in each case but in two of the registration was conditional on a water supply and a drainage system being introduced into the storage premises.

The following table shows the number of animals slaughtered and the weight, in pounds, of meat condemned and destroyed as unfit for human consumption :—



Slaughterhouses.	Cattle.	Sheep.	Pigs.	Total.	Lbs. of Meat condemned.
<i>Cupar District.</i>					
Public .. ..	734	1,654	583	2,962	2,950
Private .. ..	1,040	41,320	414	42,774	1,147 $\frac{3}{4}$
<i>St. Andrews District.</i>					
Public .. ..	867	3,462	332	4,661	4,803
Private .. ..	312	624	66	1,002	307
<i>Anstruther District.</i>					
Public .. ..	724	1,248	186	2,158	6,819
Private .. ..	421	1,206	243	1,870	2,138
Total .. ..	4,098	49,514	1,824	55,427	18,164 $\frac{3}{4}$

One of the anomalies arising out of the operation of the Local Government (Scotland) Act, 1929, has been the division of the control exercised over slaughterhouses in small burghs. Licensing of premises is the sole concern of Town Councils but the duties pertaining to meat inspection have been transferred to the County Council. Conflicts of interests are thereby inevitable. Fortunately the Town Councils in the East of Fife have displayed the greatest willingness to co-operate with the County Council officials in carrying out their duties but it would have been better if the regulation of slaughterhouses and the inspection of the meat supply had been placed under the care of one local authority either County or Burghal.

From time to time a question of slaughtering of pigs in unlicensed premises arises and it might be of service if a brief explanation of the situation were given.

The position in regard to the slaughter of pigs is precisely the same as in regard to cattle and sheep, swine being included in the definition of "cattle" in the Public Health (Scotland) Act, 1897. Under that Act no person carrying on the business of a slaughterer of cattle may use any premises as a slaughterhouse without a licence from the Local Authority and the fact that cattle have been taken into unlicensed premises for purposes of slaughter constitutes an offence.

The Public Health (Meat) Regulations (Scotland) 1932 define that no bovine intended for sale for human consumption may be slaughtered in any place other than a public or private slaughterhouse but pigs are not included in the definition of "bovine" in these regulations. Nevertheless, if anyone receives the carcass of a pig for sale for human consumption he must, under the regulations, inform the Meat Inspector.

If then, a person slaughters pigs as a business to whatsoever extent, he must be in possession of a licence from the Local Authority. On the other hand, there is nothing to prevent a farmer from slaughtering a pig at his farm for his own consumption. Should he sell a carcass to a butcher, however, the butcher must take steps to have it inspected.



Should he, however, make a practice of slaughtering pigs and selling the carcasses in this manner he would be regarded as having established a business and would therefore require to have his premises licensed.

### **OFFENSIVE TRADES.**

Slaughtering of horses, blood and bone boiling, tallow melting and the manufacture of fish meal and bone meal continued to be carried out in the premises at Damside, Cupar Muir. No complaints were received regarding offensive odours emanating from the works. Visits of inspection were made from time to time and no cause for interference with the conduct of the business was found.

The bone meal and manure manufacturing business at Cupar gave no cause for enquiry.

No criticisms were necessary regarding the methods employed in the preparation of meat as food for hounds at the Kennels at Ceres.

### **MILK SUPPLY.**

There are 148 registered dairy farms in the Landward Area and 34 in Burghal Areas, a total of 182 dairy farms. In addition there are 39 registered dairy shops and milk stores. The number of cows in the registered dairy farms totalled 2,714.

With the help of the Sanitary Inspectors, a systematic survey of all the dairy premises in St. Andrews and Anstruther Districts was completed during the year. A detailed report was drawn up and submitted to the local Public Health Committee describing the particulars in which individual premises were at variance with the requirements of the County Dairy Bye-laws. The Committee instructed that the defects should be made known to the dairy farmers concerned with the request that improvements be effected. Lest hardship be inflicted, however, it was advised that alterations be called for gradually. Accordingly, letters were sent to all the dairymen concerned and already considerable alterations have taken place in many premises. It is hoped that an opportunity will be afforded during the present year of conducting a similar survey in Cupar District.

The County Veterinary Inspector, so far as circumstances allowed, inspected all the dairy cattle twice during the year, taking action as occasion arose in accordance with statutory requirements. On the whole the standard of health of the dairy herds was good and no occasions calling for special comment arose.

Two farms were reconditioned into dairy premises and extensive alterations were carried out in 8 other dairy farms.

Applications for registration were submitted in respect of 7 dairy farms and 5 dairy shops and milk stores. Subject to the remedy of



certain minor defects all were approved. In addition several exchanges of tenancy occurred during the year necessitating re-registration of premises.

One of the difficulties which embarrass the administration of the enactments which control the milk supply is the presence of unregistered dairy premises. Under the Milk and Dairies (Scotland) Act, 1914, persons who sell milk in small quantities, and for their own consumption, to employees or to neighbours are exempted from registration unless it can be definitely held that a trade is being carried on. Unfortunately, the term "neighbour" can bear an elastic interpretation. In one small burgh four such unregistered producers were discovered, all alleged to be disposing of milk to employees and neighbours. On investigation, however, it was ascertained that everyone in the burgh who desired milk in the afternoon or evening during the winter months obtained their supply from one or other of these dairies since there was only one door-to-door delivery during the day from neighbouring registered dairy farms. Steps were taken to secure the registration of two of these unregistered premises and to have them modernised. The proprietors of the other two gave undertakings to confine their business to employees. It is known that there are several other such premises in the East of Fife but it is difficult to obtain sufficient proof that privileges are being exceeded. Invariably it is the case that dairies of this type are of very unsuitable structure. A low standard of cleanliness is maintained and milking methods are most unsatisfactory. The animals too are commonly unhealthy. It is impossible that clean milk can be produced from these dairies and wherever they are found they always give rise to a considerable degree of anxiety. Every endeavour is made to persuade owners to improve their premises but results are seldom encouraging. There is undoubtedly cause for some tightening of the milk and dairies legislation in connection with dairies which at present are not legally subject to strict supervision.

Another difficulty encountered in connection with the supervision of the milk supply is the element of distrust and suspicion which dairy farmers entertain towards officials. The spirit was probably engendered by the radical changes in dairy construction and methods following on the enforcement of the Milk and Dairies (Scotland) Act, 1914, but now that the majority of dairy farms have been reconditioned there is no need for any harsh feelings provided a dairy farmer is honestly doing his best to observe the conditions which the law has laid down for the proper conduct of his work. The officials never lose an opportunity of helping any dairy farmer whom they know to be making a genuine endeavour to produce clean, good quality milk. Indeed, there are not a few dairy farmers who have reason to be grateful to officials for their advice and action in times when their livelihood was seriously threatened. Dairy farmers should recognise that they



and the officials have one common object in view, namely, an increased consumption of milk by the general public and that that object can be achieved only if a safe, pure milk of good quality is produced.

The number of dairy premises licensed to sell milk under special designations was increased by one dairy farm and one dairy shop but there are clear indications that at least two other dairy farms will be added to the list during the present year. The total number of premises now registered under the Milk (Special Designations) Order (Scotland) 1930 is as follows :—

	<i>Premises.</i>	<i>Grade of Milk.</i>
<i>Producers—</i>		
Lord Cochrane.	Hospital Mill, Springfield.	Certified.
Wm. Lohoar.	Wester Balrymonth, St. Andrews.	Certified.
Mrs. Younger.	Mount Melville, St. Andrews.	Certified.
Jas. Clement.	Kilrenny Mill, Anstruther.	Grade A.
Messrs. J. & A. Anderson.	Monturpie, Largo.	Grade A.
J. Black.	Grangehill, Elie.	Grade A.
Mrs. Brunton.	The Grange, Elie.	Grade A.
<i>Retailers—</i>		
John Robertson.	The Barony, Cupar.	Certified.
Jas. Martin,	Woodburn Dairy, St. Andrews.	Certified.
Mrs. McBryde.	The Bay Tea Room, St. Andrews.	Certified.
E. Dobie.	Elie & Earlsferry Dairy Co., Elie.	Certified.
S. S. Melville.	55 High Street, Elie.	Certified.
Miss Allison.	1 Rankeillor Street, Elie.	Grade A.

It is highly satisfactory that there are so many sources from which graded milk can be obtained but it will be noticed that the preponderating number exists in Anstruther District. In the Burgh of Elie alone fully 85 per cent. of the total amount of milk consumed comes from graded dairy farms. Producers in the other Districts, however, are extending their trade and the milk is now sold daily in Newport. In order to demonstrate their confidence in the superior quality of graded milk the County Council made enquiries into the possibility of all Infectious Diseases Hospitals in the County being supplied with Certified Milk. It was found practicable, however, to supply only one hospital, St. Michael's Fever Hospital, and instructions were given accordingly. The Child Welfare Centre and the Fever Hospital at St. Andrews have been supplied with Certified Milk for several years.

One of the anomalies of the Milk and Dairies legislation is that while it is a permissible offence to sell milk deficient in butter fat, after the fault of the cow, no cognisance is taken of dirty milk, however contaminated it may be with filth and germs. A scheme propounded by the Edinburgh and East of Scotland College of Agriculture for the preparation of a list of Accredited Milk Producers was therefore all the more welcomed. It was proposed that samples of milk should be examined bacteriologically at regular intervals and that the following standards should be attained before a producer's name could be placed on the list—bacterial count not exceeding 250,000 organisms per c.c.



oliform bacilli absent from 1/100 c.c., butter fat content not less than .0 per cent. The scheme was entirely of voluntary nature and to be conducted under the auspices of the County Public Health Committee. As framed, the proposed scheme is liable to various criticisms particularly in regard to its title, which is apt to be confused with existing statutory designations, and to the comparatively low standard of purity of milk set. None of the objections, however, are outwith the possibility of satisfactory adjustment and it is to be hoped that the County Council who now have the matter under consideration will approve of the scheme. The arrangement would lead to collaboration between producers, the trained staff of the College and the Public Health officials and would certainly result in an improvement in the average methods employed in the production of milk and in the purity of the milk supply as a whole.

### **ACCOMMODATION OF SEASONAL WORKERS.**

The national industrial situation and the development of transport facilities has had an influence upon the employment of seasonal workers. Farmers are showing an increasing tendency to convey unemployed daily workers from distant populous centres rather than to accommodate workers in premises over a period of time. It remains to be seen whether or not the practice will continue. Experiences in all cases have not so far been fortunate since it has happened that many daily workers have proved themselves unable to stand the strain of a day's work in the fields.

Only seven premises in the East of Fife were known to have accommodated seasonal workers during the year. While arrangements in the majority were in accordance with the requirements of the Bye-laws, in one or two instances they were unsatisfactory in certain respects. On the whole, however, an improvement has taken place.

Difficulty is still being experienced regarding notifications of arrival. Frequently these are delivered concomitantly with the arrival of workers with the result that no time is afforded for inspection of premises prior to occupation. The blame rests most commonly with potato merchants who give farmers intimation of their intentions at very short notice.

New Byelaws were under consideration during the year. They are of a much more comprehensive and exacting nature than those which are at present in force in one or two County Districts. The public health officials were not able to view favourably some of the requirements which the Department of Health desired to have included, for the reason that compliance would, in their view, be unduly hard upon those farmers who house seasonal workers in the solidly built two-roomed cottages which characterise the landward part of the County. To call for emergency exits in case of fire, for instance, seems to be extravagant. The matter is still in abeyance.



## PUBLIC HEALTH SERVICES IN BURGHS.

The following brief account is submitted of public health activities in burghs in so far as they are the concern of the County Public Health Department. The County Medical Officers act in respect of services which were not transferred under the Local Government (Scotland) Act, 1929, in the Burghs of Auchtermuchty, Crail, Elie and Earlsferry, Anstruther-Kilrenny, Pittenweem and St. Andrews. These services were the subjects of special reports to the Town Councils concerned.

### BURGH OF AUCHTERMUCHTY.

According to the estimate of the Registrar-General, the population was 1,224. The birth-rate was 14·7 per 1,000 of population as compared with 15·7 per 1,000 in 1931. The death rate was 15·5 per 1,000 as compared with 15·7 in 1931. There was one death among infant under one year of age. Diseases of the heart and arteries were the chief causes of death. Infectious diseases was second and cancer third.

Only four cases of infectious diseases were notified—scarlet fever 1, acute influenzal pneumonia 1, pulmonary tuberculosis 1, non-pulmonary tuberculosis 1. In the early weeks of the year there was a small outbreak of measles among the school population. In February an epidemic of influenza occurred resulting in two deaths. On the whole however, the type of influenza was mild in character.

The milk supply is drawn from sources for the most part outwith the Burgh boundaries but there is one registered dairy farm and one dairy shop in the Burgh. The dairy animals were inspected by the County Veterinary Inspector and the dairy premises were kept under observation by the Health Officials. From time to time samples of milk were collected for analysis. In general, the milk supply of the Burgh gave rise to no cause for anxiety. So far as is known very little graded milk is consumed in the Burgh although a Certified Dairy Farm is not far distant.

In order that the Detention Officer might have an opportunity of inspecting the carcasses of animals slaughtered in the one private slaughterhouse in the Burgh and in the other situated outside the Burgh hours of slaughter were restricted to two afternoons per week in the winter time and to three afternoons per week in the summer time.

During the year, in these slaughterhouses, 282 cattle, 395 sheep and 113 pigs were slaughtered and 30 lbs. of meat were condemned and destroyed as unfit for human consumption. The slaughterhouse premises, although they do not comply with modern requirements in several respects, were kept in a clean state.



### BURGH OF CRAIL.

The population in 1932 was estimated at 1,054. The birth-rate was 7.6 per 1,000 of population as compared with 17 per 1,000 in 1931. The death rate was 27.5 per 1,000 as compared with a rate of 18.9 in the previous year. No deaths occurred among infants or children under 10 years of age. 69 per cent. of the total number of deaths occurred among people of 65 years of age and over. The chief cause of death was diseases of the heart and arteries. Cancer and tuberculosis together occupied second place.

The incidence of infectious diseases was low. Only 19 cases were notified—scarlet fever 2, erysipelas 5, chickenpox 7, acute primary pneumonia 3, pulmonary tuberculosis 2. The cases of scarlet fever and one of the cases of tuberculosis were removed for institutional treatment. The others were treated at home. All made uneventful recoveries. Unfortunately one of the cases of tuberculosis notified during the year and three others notified in previous years died. Otherwise no deaths were due to any of the infectious diseases.

The milk supply of the Burgh is drawn largely from dairy farms situated in the neighbouring landward part of the County. There are, however, four dairy farms in the Burgh. Two of these were registered during the year under the Milk and Dairies (Scotland) Act, 1914, and one has been satisfactorily altered and improved. The other two dairy farms are not registered. One of them falls short of the requirements of the County Dairy Bye-laws, which set the standard of construction and methods for the whole County, in a few particulars but readily lends itself to improvement. For various good reasons, however, the proprietor has not seen his way to undertake the necessary alterations. The other dairy farm is so defective that the milk supply produced from it cannot be regarded as safe.

Unfortunately, there are loop holes in the law which permit of the existence of these unlicensed premises and it is perhaps fortunate that the milk from them is consumed by only a limited number of the population.

There is no public slaughterhouse in the Burgh. The single private slaughterhouse continued to be kept in a satisfactorily clean and orderly manner. 61 cattle, 163 sheep and 40 pigs were slaughtered and 256 lbs. of meat were condemned and destroyed as unfit for human food. Carcases were inspected by the County Detention Officer, who is empowered to seize and destroy any meat which he finds to be unfit for human consumption. In cases of difficulty or doubt he obtained the advice of a Veterinary Surgeon. There was every indication that this source of the Burgh's meat supply was well protected. Meat entering the Burgh from other sources was subjected to similar supervision.



### BURGH OF CUPAR.

The population was estimated to be 4,749. The birth-rate was 17 per 1,000 of population, and the death rate 10·3 per 1,000. The corresponding figures for the previous year were 15·1 and 16·7. A further increase occurred in the infantile mortality rate which has risen from 15 per 1,000 births to 37 per 1,000 births since 1930. Since, however, numbers are small no great emphasis can be placed on the occurrence. Diseases of the heart and arteries were by far and away the chief causes of death. Other diseases claimed no preponderance of numbers. Infectious diseases, including tuberculosis, caused three deaths. There were six deaths from catarrhal diseases of the lungs. 63 per cent. of the total number of deaths occurred among people of 65 years of age and over.

Except for an outbreak of chickenpox and for an increase in the number of cases of tuberculosis, the incidence of infectious diseases was negligible. The following numbers of cases were notified:—scarlet fever 6, erysipelas 1, ophthalmia neonatorum 1, chickenpox 81, acute primary pneumonia 1, acute influenzal pneumonia 1, pulmonary tuberculosis 4, non-pulmonary tuberculosis 8, making a total of 103. All the cases of scarlet fever, 2 of the cases of pulmonary tuberculosis and 3 of the cases of non-pulmonary tuberculosis were removed to hospital for treatment. The other cases were treated at home.

In the early months of the year there was a small outbreak of measles and a more extensive outbreak of influenza. One death occurred from each of these diseases, which, in the majority of cases, ran a mild course.

No adverse circumstances arose regarding the safety of the milk supply. The five registered dairy premises were kept in a clean state. One or two of them are in need of alterations and improvements since they are not in keeping with the requirements of the County Dairy Bye-laws. No action has yet been taken regarding the matter, however, since a survey of all the dairy premises in Cupar District is to be undertaken after which all the proprietors of defective premises will be approached.

One of the dairy farms is licensed to retail Certified Milk supplied from Lord Cochrane's Dairy Farm at Springfield. The care which is taken in the production of this type of milk insures its freedom from contamination with dirt and germs of disease and warrants a much greater consumption than is prevalent in the Burgh. It is slightly more costly than ordinary milk but the increased expenditure is justified by the security afforded.

The Burgh draws its meat supply from the Public Slaughterhouse. The premises do not compare favourably with the other public slaughterhouses in the East of Fife but a reasonably satisfactory standard of cleanliness was maintained. The structure and condition of the premises is a matter which concerns the Town Council, but since the safeguarding of the meat supply lies within the province of the County Council, any



factor which can be regarded as having an injurious influence on the supply must be taken into consideration. During the year 734 cattle, 1,654 sheep and 583 pigs were slaughtered. 2,950 lbs. of meat were condemned and destroyed as unfit for human consumption.

### **BURGH OF ELIE AND EARLSFERRY.**

The population was estimated at 984 by the Registrar-General. The birth-rate was only 4 per 1,000 of population as compared with 12.4 in 1931. The death rate rose from 18.6 per 1,000 of population in 1931 to 25.4 in 1932. There were no deaths among infants. Diseases of the heart and arteries and cancer were the chief causes of death. Eighty per cent. of the total number of deaths occurred among people of 55 years of age and over. No figures are available but there are reasonable grounds for assuming that the mean age of the population is higher than that which obtains in most of the other burghs. The high death rate can therefore be regarded as the outcome of the normal termination of healthy lives and not as an indication of the effect of injurious influences on the wellbeing of the community.

The incidence of infectious diseases was very low—diphtheria 2, chickenpox 2, acute primary pneumonia 1 and pulmonary tuberculosis 1. The cases of diphtheria were treated in hospital. The other cases were treated at home.

Unfortunately one of the cases of diphtheria died a few hours after admission to hospital. The case of tuberculosis also died as did another case of the same disease notified in a previous year.

There are no dairy farms within the Burgh. One dairy shop and one grocer's shop are licensed to sell Certified Milk. Another grocer's shop applied for and obtained a licence to sell Grade A Milk.

The Burgh occupied an enviable position as regards its milk supply. Nowhere else in the County is such a large quantity of designated milk per head of population consumed. There can be little doubt but that this state of affairs is an important factor in the continued low incidence of infectious diseases in the Burgh, since the standard of cleanliness and method required of the dairymen goes a long way towards preventing contamination of the milk supply with the germs of ordinary catarrhal illness apart from those of the notifiable infectious diseases.

At the end of the year the Town Council decided not to renew the licence for the Burgh private slaughterhouse the unsatisfactory nature of which was described in the report for the previous year. A change of tenancy took place and the present occupant uses the slaughterhouse only as a store, slaughtering taking place in premises licensed by the County Council at Colinsburgh. The remainder of the Burgh's meat supply is slaughtered in the Public Abattoir at Anstruther, where efficient methods of meat inspection are in force.



### BURGH OF FALKLAND.

The population was estimated at 777. The birth-rate was 15·4 per 1,000 of population. In 1931 it was 9·1. The death rate was 18 per 1,000 of population. The corresponding figure for the previous year was 11·7. The death rate, therefore continues to be in excess of the birth rate. Three infants under one year of age died, representing an infantile mortality rate of 250 per 1,000 births. Of the 14 persons who died, 8 were of 65 years of age or over.

An increase, but not a serious one, occurred in the incidence of infectious diseases. The following number of cases were notified:—scarlet fever 5, diphtheria 1, erysipelas 1, acute primary pneumonia 1, pulmonary tuberculosis 2. All the cases were removed for institutional treatment and no person died as a result of infection. The epidemic of influenza which swept the County in February did not leave Falkland unaffected. A considerable number of people fell ill and one died.

Nothing worthy of mention arose in connection with the Burgh milk supply. The registered premises situated within the Burgh were kept in a satisfactorily clean condition. The structural defects from which one or two of them suffer will be made the subject of special investigation and the dairymen will be asked to co-operate in an endeavour to improve conditions in accordance with the requirements of the County Dairy Bye-laws.

No special comments are necessary in connection with the meat supply. The one private slaughterhouse was visited at frequent intervals and was always found to be well conducted. Carcases of animals were subjected to inspection before reaching the public. 64 cattle, 115 sheep and 20 pigs were slaughtered. It was found necessary to condemn as unfit for human consumption only 43 lbs. of meat.

### UNITED BURGH OF ANSTRUTHER-KILRENNY.

The population as estimated to the middle of the year was 3,269. The birth-rate was 13·1 per 1,000 of population and the death rate 14·9. The rates for 1931 were 12·9 and 9·4 per 1,000 of population. The infantile mortality rate was 69·8 per 1,000 births, an increase on the rate for the previous year. The principal causes of death in order were diseases of the heart and arteries, cancer, pneumonia and tuberculosis. Seventy-seven per cent. of the total number of deaths occurred among people of 55 years of age and over, a satisfactory indication of the general health of the town.

An outbreak of scarlet fever among children in Cellardyke increased the incidence of infectious diseases. Otherwise normal conditions prevailed. The following number of cases of infectious diseases were notified—scarlet fever 24, diphtheria 4, ophthalmia neonatorum 1, chickenpox 3, acute primary pneumonia 1, pulmonary tuberculosis 4, non-pulmonary tuberculosis 2, puerperal pyrexia 2, making a total of 41 cases.



With one exception the cases of scarlet fever were removed to hospital for treatment. The diphtheria cases were also removed to hospital. Two of the cases of tuberculosis were treated at home; the others were removed. One of the cases of puerperal pyrexia was accommodated in King's Cross Hospital, Dundee.

One of the cases of tuberculosis died as did two others notified in previous years. Otherwise no deaths were due to infectious diseases excepting influenza which claimed one victim.

There are seven registered dairy farms and one registered dairy shop in the United Burgh. There is also one unregistered dairy farm. Many of the dairy farms fall short of the requirements of the County Dairy Bye-laws which are now applicable. The dairymen are to be informed of the defects which obtain and will be given an opportunity of bringing their premises up-to-date.

Kilrenny Mill Dairy Farm at which Grade A milk is produced was further improved during the year. Samples of milk were collected for analysis and were found to comply with requirements. The Burgh is fortunate in having a Grade A Farm so close at hand from which milk of a guaranteed standard of purity and quality can be obtained. There is no reason, however, why other neighbouring dairy farms should not be improved and similarly licensed. It would be to the advantage of many more householders to take in milk of this type, especially since it costs no more than ordinary milk.

The public slaughterhouse was kept under supervision. A satisfactory standard of cleanliness was maintained by the Superintendent. The accommodation in the building is more than sufficient to meet requirements and the design of the premises generally has been described as a model of its type.

During the year 724 cattle, 1,248 sheep and 186 pigs were slaughtered. 3,819 lbs. of meat were condemned and destroyed as unfit for human food.

### **BURGH OF LADYBANK.**

According to the estimate of the Registrar-General the population was 1,164. The birth-rate was increased from 11·3 per 1,000 of population in 1931 to 14·6 per 1,000 in 1932. A slight fall occurred in the death rate—13·7 per 1,000 as compared with 14·8 per 1,000 as compared with 14·8 per 1,000 in 1931. Only 16 deaths occurred in the Burgh but these were distributed throughout the age periods and were not so markedly related to the terminal years of life as is usually the case. Only 44 per cent. of the total number of deaths occurred among persons of 65 years of age and over. Four infants and children under the age of 10 years died. The principal cause of death was cerebral haemorrhage. There were two deaths from tuberculosis.



Infectious diseases were not prevalent. Only six cases were notified, viz.:—scarlet fever 1, diphtheria 3, pulmonary tuberculosis 1, non-pulmonary tuberculosis 1. The cases of scarlet fever and diphtheria were removed to hospital. The cases of tuberculosis were treated at home.

No untoward circumstances arose in connection with the milk supply. The dairy farm situated in the Burgh and all others from which milk is sold in the Burgh were kept under observation. Premises were not in all cases up to the required standards of construction but a reasonably good standard of cleanliness was maintained. A certificate of registration was granted during the year in respect of a milk store situated in the Burgh.

The private slaughterhouse was visited at least twice weekly and carcases were inspected. 100 cattle, 140 sheep and 50 pigs were slaughtered. 221 lbs. of meat were condemned as unfit for human consumption.

### BURGH OF NEWBURGH.

The estimated population was 2,183. The birth-rate was 17·4 per 1,000 of population and the death rate was also 17·4 per 1,000. The infantile mortality rate fell from 81 per 1,000 births in 1931 to 26 per 1,000 births in 1932. Diseases of the heart and arteries claimed 24 of the 38 people who died. Sixty-three of the total deaths occurred among people of 65 years of age and over. On the whole the vital statistics of the Burgh indicate that the population is long-lived and not afflicted with serious illness.

Twenty-five cases of infectious diseases were notified—diphtheria 3, erysipelas 4, ophthalmia neonatorum 1, chickenpox 2, dysentery 2, acute primary pneumonia 3, pulmonary tuberculosis 5, non-pulmonary tuberculosis 5. The three cases of diphtheria and four of the cases of pulmonary tuberculosis were removed to hospital for treatment. The remaining 18 cases were treated at home. The influenza epidemic of the early months of the year visited the Burgh. While the manifestations of the disease were in the main of mild character, one person died as a result of the infection.

A satisfactory degree of cleanliness was maintained in the two registered dairy farms. The greater proportion of the milk supply in the Burgh, however, comes from the County District in the premises in which no evidence of contamination of milk was discovered. Application was made for a certificate of registration in respect of a milk store. After certain alterations had been carried out the certificate was granted. So far as is known the consumption of graded milk in the Burgh is very small. Milk forms such an important article of diet especially for invalids, children and mothers, that it is greatly in the interests of householders that the milk they obtain should be of pure



quality. Graded milk must conform to certain standards of purity and quality so that there is every inducement for an increased consumption.

With the co-operation of the Town Council a solution was found to the problem in connection with the supervision of the meat supply occasioned by the prolonged hours during which slaughtering was carried on. Hours of slaughtering were curtailed to definite periods during certain days of the week and allowance was made for unexpected trade demands by arranging that butchers should notify the Detention Officer of intention to slaughter on days other than those specified. By these arrangements the Detention Officer was given a reasonable opportunity of inspecting carcasses before removal from the slaughter-houses. During the year under review 161 cattle, 40,103 sheep and 62 pigs were slaughtered. 232 $\frac{3}{4}$  lbs. of meat were condemned as unsound.

### BURGH OF NEWPORT.

According to the estimate of the Registrar-General the population was 3,302. The birth-rate was 6.4 per 1,000 of population and the death rate was 13.9 per 1,000. While the death rate remained constant, the birth rate was lower than that of the previous year. One death occurred among infants under 1 year of age, otherwise all the deaths occurred among persons of 35 years of age and over. Diseases of the heart and arteries and cancer remained the two chief causes of death. 80 per cent. of the total number of deaths occurred among people of 65 years of age and over. No less than 21 persons out of a total of 46 were over 75 years of age when they died.

A slight increase occurred in the incidence of infectious diseases. 20 cases were notified, viz.—scarlet fever 6, diphtheria 1, erysipelas 4, chickenpox 6, pulmonary tuberculosis 1, non-pulmonary tuberculosis 2. All the cases of scarlet fever, the case of diphtheria, the case of pulmonary tuberculosis, one of the cases of erysipelas and one of the cases of non-pulmonary tuberculosis were removed for institutional treatment. All the cases made satisfactory recoveries and no deaths were due to any infectious disease.

The three dairy farms and the two dairy shops in the Burgh were visited periodically. A high degree of cleanliness was maintained in them all. The question of alteration of certain of the premises is being taken up with the dairymen in order that the hygienic standards defined by the County Dairy Bye-laws may be attained. Inspection of dairy cattle is now a matter which concerns the County Veterinary Inspector who visits dairy farms twice yearly for the purpose. During the year the sale of certified milk was extended to the Burgh from Hospital Mill Dairy Farm, Springfield. That progress should have been made in this direction is highly satisfactory. It is a remarkable fact that in spite of the inducements afforded by the nature of the population of Newport that no local dairyman has so far attempted to produce graded milk.



The private slaughterhouse in the Burgh was kept under constant supervision by the Detention Officer who is empowered to invite the opinion of Mr. Spruell, M.R.C.V.S., Dundee, in cases of difficulty. No circumstances having an injurious influence on the meat supply arose. 104 cattle, 312 sheep and 32 pigs were slaughtered. 122 lbs. of meat were condemned as unfit for human consumption.

### **BURGH OF PITTENWEEM.**

The estimated population of the year was 1,655. There were 20 births representing a birth-rate per 1,000 population of 12·08. 18 deaths occurred representing a death rate of 10·8 per 1,000 of population. One death occurred among infants under one year of age. The chief causes of death were diseases of the heart and blood vessels, tuberculosis, cancer and catarrhal diseases of the lungs. A proportionately large number of the persons who died were in the prime of life.

Except for the occurrence of 8 cases of chickenpox, the incidence of infectious diseases remained low. The other diseases were scarlet fever 5, puerperal fever 1, pulmonary tuberculosis 2, and non-pulmonary tuberculosis 1. All the cases of scarlet fever and of tuberculosis were removed to hospital for treatment. The case of puerperal fever was treated at home. Two persons suffering from tuberculosis of the lungs died. Otherwise, no deaths occurred from any of the infectious diseases.

During the early months of the year a mild epidemic of measles occurred among the school children. Some 30 children were affected but no complications of a serious nature arose and all the children made satisfactory recoveries. The outbreak formed part of a wave of infection which started in Cupar District and swept coastwards along the principal 'bus routes.

The County Council who are now responsible for the supervision of the byres and dairy herds in the Burgh, having considered a detailed report on all the dairy premises in Anstruther District instructed their sanitary officials to acquaint the dairy farmers with the defects from which their premises suffered and to advise them that steps towards improvement should be made year by year. The arrangement will be set in motion in the spring of the present year when the cows are out at grass. It is probable that one or two of the dairies in Pittenweem will be costly to recondition if not beyond hope of improvement. Nevertheless, every opportunity will be taken to help the dairy farmers so far as is in keeping with the safety of the town's milk supply.

There are no slaughterhouses in the Burgh. The meat supply is drawn from the Public Abattoir at Anstruther where, in modern premises, strict supervision is maintained over the quality of the meat removed for human consumption.



## BURGH OF ST. ANDREWS.

Allowing for the extensions of the Burgh boundaries the estimated population was 8,551. The birth-rate was 10·9 per 1,000 of population as compared with 11·5 of 1931. The death rate was 12·9 per 1,000 of population, a figure which was equal to that of the previous year. The infantile mortality rate was 32 per 1,000 births, the lowest recorded since 1921. There was only one death among children in the 1-5 years of age group. Diseases of the heart and blood-vessels accounted for 34 per cent. of the total deaths; cancer for 16 per cent.; respiratory diseases for 6 per cent.; and tuberculosis for 5 per cent. 60 per cent. of the deaths from all causes occurred among people over 65 years of age.

The following number of cases of infectious diseases were notified :—

Scarlet Fever	..	..	..	..	8
Diphtheria	..	..	..	..	10
Erysipelas	..	..	..	..	2
Chickenpox	..	..	..	..	35
Infantile Paralysis	..	..	..	..	1
Acute Primary Pneumonia	..	..	..	..	10
Acute Influenzal Pneumonia	..	..	..	..	3
Pulmonary Tuberculosis	..	..	..	..	12
Non-pulmonary Tuberculosis	..	..	..	..	2
Puerperal Pyrexia	..	..	..	..	2
					—
					85
					—

A slight increase in the incidence of infectious diseases occurred, due largely to chickenpox. None of the other notifiable diseases assumed epidemic proportions. In January there was an outbreak of measles, part of a wave of infection which spread to the coast from Cupar District. The outbreak was confined to children of school age and was of mild character.

Eleven deaths resulted from infectious diseases, viz. :—scarlet fever 1, diphtheria 1, influenza 3, tuberculosis 6, puerperal fever 1.

Forty-five patients were treated in hospitals or institutions, the average duration of stay of 40 patients in the City Fever Hospital being 21·7 days.

Thirty-five children were immunised against diphtheria in the City Fever Hospital as compared with 41 in 1931.

There are four registered dairy farms and five registered dairy shops in the Burgh. The farm premises were inspected and found to comply reasonably well with the requirements of the County Dairy Bye-laws. The animals were examined by the County Veterinary Inspector. With one exception the dairy shops were of good construction and sufficiently equipped. From time to time, samples of milk were collected



for analysis and all were found to comply with the legal standard of quality. The average butter fat content of 27 samples was 3.47 per cent., the necessary amount being 3 per cent.

Certified Milk continued to be supplied to the town from Wester Balrymonth Dairy Farm and Hospital Mill Dairy Farm, both of which are licensed for the purpose.

The outstanding event in the safeguarding of the Burgh meat supply was the closing of the unsatisfactory slaughterhouse in South Bridge Street and the opening of the new slaughterhouse at Maryfield in October. The new building is considered to be one of the most up-to-date in Scotland.

Mr. Peter Young, M.R.C.V.S., has been appointed Meat Inspector and Detention Officer. He attends the slaughterhouse daily and inspects all animals before removal.

The Superintendent, who is responsible for the conduct of the business and cleanliness of the premises, resides in a house adjoining the premises.

During the year 4,661 animals were slaughtered—814 cattle, 5 calves, 3,462 sheep and 332 pigs—as compared with 3,714 in 1931 4,803 lbs. of meat as compared with 3,163 lbs. in the previous year were condemned and destroyed as unfit for human consumption.

### BURGH OF TAYPORT.

The population was estimated at 3,250. The birth-rate was 13.2 per 1,000. In 1931 it was 16.4 per 1,000. The death rate was 12.3 per 1,000, the corresponding figure for the previous year being 14.1 per 1,000. The infantile mortality rate was 93 per 1,000 births. Since the Mother and Child Welfare Clinic was organised a steady decline has taken place in the number of infant deaths, and there can be little doubt but that the work of the clinic has contributed towards the improvement. Diseases of the circulatory system and diseases of the lungs were the two chief causes of death. 50 per cent. of the total number of deaths occurred among people of 65 years of age and over.

Eighteen cases of infectious diseases were notified :—scarlet fever 1, erysipelas 3, encephalitis lethargica 1, acute primary pneumonia 2, pulmonary tuberculosis 3, non-pulmonary tuberculosis 2. The cases of scarlet fever, encephalitis lethargica, one case of acute primary pneumonia and two cases of pulmonary tuberculosis were removed to hospital. The remaining seven cases were treated at home. Throughout the year, therefore, the incidence of tuberculosis remained low and on no occasion gave cause for anxiety. Three persons died from tuberculosis, otherwise no deaths were due to infectious diseases.

The structural condition of the dairy premises and the methods employed by the milkers were inspected from time to time. Reasonable



satisfactory standards were found to obtain. Examination of dairy animals was carried out by the County Veterinary Inspector who visits the herds twice yearly. As was pointed out in the Report for the previous year a considerable quantity of condensed milk is consumed in the Burgh in place of fresh milk and it is noticeable that practically no graded milk is sold. Trade depression has doubtless a bearing on this unfortunate state of affairs.

Visits of inspection were paid to the private slaughterhouse by the Detention Officer at least twice weekly and every endeavour was made to inspect carcasses before they were removed. The arrangement worked satisfactorily and no justifiable cause for complaint arose. 208 cattle, 312 sheep and 34 pigs were slaughtered; 185 lbs. of meat were condemned as unsound.

Regular attention has been given to the cleaning out of the filters and the reservoir with clean washed sand. The reservoir was cleaned out in September and maintenance repairs have been attended to throughout the year and this year as last in May, steps have been taken to improve the water supply for the District. The water supply for the scattered rural area of Dumfries is obtained from hillside springs and lochs and flows eastwards, supplying the various farms and other places en route. Owing to the dry summer there was considerable water during parts of August and September with resultant lack of pressure in places, but by taking advantage of every available spring, however small, a constant supply of water was maintained.

Lathones Special Water District. Reference was made in the Annual Report for 1931 to the unsatisfactory condition of the water supply to the houses of Lathones, which was obtained from a roadside ditch. It is gratifying to be able to report that a gratifying supply of water has now been provided. The work comprised the provision of a collecting tank on the higher ground at Lathones and the laying of a 2-inch cement asbestos pipe down to the Manse with a branch pipe to Lathones Farm about 100 yards in length. The work was satisfactory and completed in April this year.

Within the year under review, new private water supplies have been provided or existing water supplies improved at St. John's Farm, Black Farm, Lathones Farm, Borthwick, and Tongues, of Lathones Farm. St. Andrew's water supply has not been improved in detail at present.

**Scavenging.** There are two Special Scavenging Districts, one at Gairdrie and one at Lathones. In each case street sweeping is carried out by a scavenging contractor, and the ash-pit method for the removal of household refuse is effected by a cart passing through the village three days a week. The refuse is thereafter deposited at a dump.



## Sanitary Inspection Districts.

The Annual Report in respect of each sanitary inspection district has been submitted for the information of the local public health sub-committee and to the Department of Health for Scotland. The following are brief excerpts from the reports of the Sanitary Inspectors :

### ST. ANDREWS AREA—Robt. Just, Sanitary Inspector.

#### Water Supply.

**GUARDBRIDGE SPECIAL WATER DISTRICT.**—This supply which is obtained from the higher ground at Balmullo, after filtration, flows by gravitation to the village. Owing to the very dry summer difficulty was experienced in maintaining the supply towards the latter part of September and every effort had to be made to conserve every available source of supply.

Regular attention has been given to the cleaning out of the filters, and the resurfacing with clean washed sand. The reservoir was cleaned out in September and maintenance repairs have been attended to throughout the year.

**DUNINO SPECIAL WATER DISTRICT.**—The water supply for the scattered rural area of Dunino is obtained from hillside springs at Chesters, and flows eastwards, supplying the various farms and other places en route. Owing to the dry summer there was a scarcity of water during parts of August and September with a resultant lack of pressure in places, but by taking advantage of every available spring—however small—a constant supply of water was maintained.

**LATHONES SPECIAL WATER DISTRICT.**—Reference was made in the Annual Report for 1931 to the unsatisfactory condition of the water supply to the hamlet of Lathones, which was obtained from a roadside ditch. It is gratifying to be able to report that a gravitation supply of water has now been provided. The work comprised the provision of a collecting tank on the higher ground at Higham, and the laying of a 2-inch cement asbestos pipe down to the Manse with a branch pipe to Lathones Farm about 1,100 yards in length. The work was satisfactorily completed in April of this year.

Within the year under review, new private water supplies have been provided or existing water supplies improved at St. Fort Home Farm, Flass Farm, Peikie Farm, Boarhills, and Tongues of Clatto Farm St. Andrews.

#### Scavenging.

There are two Special Scavenging Districts, one at Guardbridge and one at Leuchars. In each case, street sweeping is carried out by a scavenging contractor, and the "ashbin-method" for the removal of household refuse is effected by a cart passing through the village three days a week. The refuse is thereafter deposited at a dump.



Householders would greatly assist those engaged in connection with refuse collection by burning in the domestic fireplace all combustible refuse and papers.

Every effort is made to carry out the special precautions recommended by the Department of Health to be observed in the dumping of refuse, but the difficulty experienced is to provide the necessary labour, etc., in a small rating area without increasing the scavenging rate.

All refuse in the smaller villages or more rural parts of the District is deposited in ashpits and is either applied to garden ground or removed by neighbouring farmers.

### **Dairies.**

A survey has been made of the Dairy premises in the District and reports submitted to the Local Authority, special notice having been taken where the premises were not in accordance with the requirements of the Bye-laws.

Intimation has been given to Dairymen where their premises were in need of improvement. The existing byres and cowsheds may not, in all respects, comply in full as yet with the new Bye-laws but, as opportunity occurs, such as change of occupancy and applications for new registration made, they are being improved. In most cases these byres complied with the old regulations and one cannot be just too drastic in making them conform with the requirements now in force. Taking them all over, they may be looked upon as in a satisfactory state so far as cleanliness and other essentials are concerned.

## **CUPAR AREA—Marshall Gorrie, Sanitary Inspector.**

### **Public Water Supply Schemes.**

The Special Water Supply Districts include the following villages:—Pitlessie, Strathmiglo, Balmbrae, Falkland, Newton of Falkland, Kettlebridge, Kingskettle, Balmalcolm, Dunshelt, Springfield, Cupar Muir and Ceres, all of which have good schemes of supply except the latter three villages where, as yet, no specific scheme of water supply has been decided upon.

**PITLESSIE SPECIAL WATER DISTRICT.**—The water supply of this District is collected from springs in catchment area on the hillside above Pitlessie, thereafter the water is conveyed by a two-inch pipe to an open reservoir or pond with a capacity of approximately 50,000 gallons. The water is filtered in the open sand filter and conveyed by gravitation to the village.

The supply has been plentiful and of good quality and on no occasion was it found necessary to curtail the supply to the village. The cost involved in maintenance of these works is comparatively low and consists mostly of repairs to pillar wells, burst pipes and supplies of sand or filter, etc.



The whole of these water works are in a good order and receive good attention from the water officer, both in the resurfacing of the filter with sand, scouring of the mains, and general orderliness of the several works.

**STRATHMIGLO SPECIAL WATER DISTRICT.**—The village of Strathmiglo is the largest in Cupar Area and has a good gravitation water supply. The source of the supply is "Glenvale"  $3\frac{1}{2}$  miles distant from the village and the works include intake storage tank of 3,475 gallons capacity, two sand filters and auxiliary storage reservoir of 25,900 gallons capacity for filtered water.

10 new connections were made to the water mains during the year, making 110 connections in all since the scheme was introduced eight years ago.

**BALMBLAE, FALKLAND, SPECIAL WATER DISTRICT.**—The special service of water to the inhabitants of this area comprising thirty or so dwellinghouses is by a pipe of small dimensions connected to the street pillar well. For this privilege the Town Council of Falkland, who provide the supply, are paid £8 per annum by the County Council.

In view of the present system of supply being inconvenient and repeatedly complained of by the inhabitants the County Council have been urged to lay down a 2-inch water main to enable a connection being obtained for individual dwellinghouses.

The County Engineer, Mr. Hodge, has had this matter in hand, but conditions remain as reported last year.

While the houses in this area are all more or less in a defective condition and assessable rentals very low there is little hope of improving their condition by partial reconstruction or reconditioning by means of financial assistance granted to owners under the Housing (Rural Workers) Act, 1926, until an adequate sewage and water supply scheme is available.

**DUNSHELT SPECIAL WATER DISTRICT.**—The long protracted question of an improved and adequate water supply for the village of Dunshelt was solved this year by the County Council forming the village into a Special Water District and employing an Engineer to carry out a new scheme of water supply whereby larger mains were laid to allow of all premises having an independent connection thereto, the legal difficulties connected with the ownership of the existing source of supply "Marle Pit" having been satisfactorily adjusted.

The new supply to the village is from this same source, the only capital expense incurred being the cleansing out of this small loch, repairing its banks and providing a new chamber for drawing-off water to the village. The cost of the scheme, including the laying down of new steel bitumen-lined pipes throughout the village, was approximately £2,000.



Since inauguration of the new scheme of water supply, improvements to dwellinghouses were numerous, grants towards same being obtained from the County Council under the Housing (Rural Workers) Act, 1926.

Thirty-seven connections have been made to the new water supply mains since water was formally turned on to the village on 2nd July, 1932.

### **Springfield, Cupar Muir and Ceres Special Water Districts.**

The question of procuring a supply of water for the villages of Springfield, Cupar Muir and Ceres still occupies the minds of the County Council and their engineer, and while various schemes of supply have been put forward, no definite decision has been finally agreed upon yet in any case.

For Springfield, a gravitation supply, obtained from Clatto Loch, the property of Cupar Town Council, estimated to cost £1,420, with annual rate of £485, was duly considered, but delay advocated until possibility of procuring a supply by means of a bore had been investigated, as such a supply if obtained at sufficient gradient might prove much more economical to the ratepayers than by purchasing water from Cupar Town Council's Scheme.

The same decision has been decided upon so far as provision of a water supply to Cupar Muir village is concerned, as supply from Clatto Loch would cost alternate schemes £950 or £650 with annual rate of £122 or £98.

A gravitation scheme of supply for the village of Ceres was put forward by the County Engineer at a public meeting held in the village when the scheme and its cost was explained to the ratepayers attending. As estimated cost of £20,240 was considered much too high to warrant provision of water supply by this means being adopted meantime, and delay determined on, until Engineer had investigated if a supply could not be obtained by means of a bore. On County Council authorising this investigation, a bore was put down but attempt to find water sufficient for village supply proved futile.

### **Water Supplies other than Special Water Districts.**

**FREUCHIE.**—This large village has a gravitation water supply which is owned and managed by the villagers privately. The underground storage tanks, water mains, etc., are all attended to by the local water officer and received good attention. No shortage of supply was reported to me during the year under review.

### **Special Drainage Districts, etc.**

At present there are five Special Drainage Districts in Cupar Area of this County, and of these, only in one village, Freuchie, is there a sewerage system. In the villages of Springfield, Kettle, Newton of



Falkland and Balmblae there is no modern system of water disposal although in the case of Springfield and Newton of Falkland, the need for such a system is not acute at present. In the villages of Kettle and Balmblae, however, the need for a sewerage system is very evident, as in the former, Kettle, while no serious nuisance is yet evident, the want of sewers is considerably retarding the reconditioning of dwellinghouses and the condition of sanitary fitments. In the case of Balmblae an open burn in front of the dwellinghouses, being the only available means for the disposal of household water is almost continuously in such a more or less filthy and objectionable state as to be a menace to the health of the inhabitants. The County Engineer has taken levels in this area for a sewer, but so far none has been provided.

### **Seasonal Workers.**

Eight intimations of arrival of seasonal workers were received and dealt with during the year, most cases being Irish workers employed in potato lifting and dressing, etc.

On notice being sent to the farmer directing attention to the requirements of the Bye-laws, the number of workers notified by the potato merchant was cut down, thus placing the premises outwith the scope of the Regulations.

In other cases where arrangements had been made for accommodation of seasonal workers, the Regulations were reasonably conformed to.

### **Slaughterhouses.**

There are 20 licensed slaughterhouses in Cupar Area, 12 licensed by Town Councils, viz. :—Cupar 6, Ladybank 1, Newburgh 3, Falkland 1, Auchtermuchty 1, and 8 by the County viz. :—Ceres 1, Kettle 2, Auchtermuchty 1, Freuchie 1, Strathmiglo 1, and Cupar Muir 2.

In facilitating arrangements for systematic inspection of meat the days and hours of slaughter were readjusted with Town Councils having licensed slaughterhouses within their areas and with butchers in order to avert any inconvenience to carrying on of trade and at the same time sufficiently to protect the public meat supply.

In most cases arrangements made worked satisfactorily during the cooler months of the year but during summer, deviation was allowed in consequence of the difficulties arising both in the sales and in maintaining of freshness in the meat.

In such circumstances all cases of Emergency Slaughter were duly notified prior to slaughtering taking place.

Under the Slaughter of Animals (Scotland) Act, 1928, slaughterers holding licences to kill obtained renewal of their licences and supervision exercised when visiting to see that none but these holding licences were allowed to slaughter. In no instances was any offender found.



In one instance a slaughterer found killing sheep otherwise but with the mechanical killer was reported and offender warned, his excuse being verified that the pistol was temporarily out of order.

### **ANSTRUTHER AREA—John Ross, Sanitary Inspector.**

#### **Water Supplies—Quality and Sufficiency.**

In the Area there are four Special Water Districts—Colinsburgh, Largo, Largoward, and St. Monans.

**LARGO.**—The capacity of the reservoir for Largo is 4,560,000 gallons. On 8th July the reservoir was full but from this date the water level fell continuously until 29th September when the maximum depth of fall below the Top Sill Level was reached. This was 13 feet 7·5 inches below T. S. L.

At a depth of 13 feet 0 inches below T.S.L. the reservoir's capacity is 390,000 gallons and at a depth of 14 feet 0 inches below the T.S.L. its capacity is reduced to 574,000 gallons, so that at the depth of 13 feet 7·5 inches the reservoir's capacity is approximately 630,000 gallons, equivalent approximately to 13·8 per cent. of its capacity when full.

Naturally considerable anxiety was felt and economies in the use of water were advocated in the Local Press.

In the interest of economy of supply the washing of sand for the filters was suspended for a period.

After 29th September the water level in the reservoir rose rapidly until on the 19th October it was 10 $\frac{3}{4}$  inches below T.S.L. when a depth of 1 inch of water was flowing through the sluice at this point.

It is abundantly clear, therefore, that the supply of water at present available for the District is quite inadequate to meet its demands during a dry summer and that measures to deal with the situation are urgent.

Efforts to augment the supply from an alternative source are being made and at present there is under consideration a scheme for collecting the water from a series of springs on the north side of Largo Law. I understand the water from those springs has been shown by chemical analysis and bacteriological examination to be of good quality and sufficiently wholesome to allow of dispensing entirely with filtration. If the supply of water from the springs is found to be reasonably constant in volume and adequate to supplement the present supply the District will be fortunate in having these springs in comparatively close proximity to its existing supply.

**LARGOWARD.**—In order to give a satisfactory supply the two-inch main should be replaced by a four-inch main. The side branches supply properties at the lower levels and with an increased pressure in the four-inch main, the side branches will probably give an adequate supply



for some time. The four-inch main will be a steel tube with a bituminous lining which will not be subject to corrosion and which will adequately meet the increased demands.

The report continues to deal with the probable costs of the scheme projected and also with the cost to the Special Water District which the scheme would entail if spread over a period of 30 years. In consideration of the low figure of the rateable value of the District, the scheme, on this account and also as the majority in the District were in favour of its postponement, has been meantime abandoned. It was indicated that a rate of 5s per £ would be required to meet the estimated annual expenditure.

When times are more normal and the augmenting of the present water supply would not inflict so great a hardship on the district the question might again be given consideration.

### **Scavenging.**

Disposal of the refuse, from the Largo District, is effected by tipping it in the refuse depot which is situated at a distance of about 500 feet from the public road. The methods of disposal are not satisfactory. The present tipping ground is exhausted and it is therefore a favourable opportunity to undertake a different system of disposal in the new ground which it is hoped to acquire at an early date.

In the St. Monance Special Scavenging District the systems of collection and disposal of refuse are identical to that adopted in Largo District. A report on the unsatisfactory condition of the St. Monance dump was submitted by me in April 1931. This report was considered by the Local Sub-Committee on 5th May 1931, when it was agreed to recommend to the District Council that steps be taken to find a new site and to close down the existing dump. A new site has not so far been found. The fact that St. Monance was shortly to be constituted a Burgh caused the acquiring of an alternative site to be delayed. An alternative site is, however, much to be desired.

### **Sanitary Conveniences, etc., used in common.**

In last year's report reference was made to one populous place (St. Monance) where it was known that at least 43 houses were without a water supply despite the fact that water and drainage facilities have been available in St. Monance for many years. Housing matters generally have been in abeyance in St. Monance for some time back, a condition arising from the fact that St. Monance was soon to be constituted a Burgh. St. Monance is now a Burgh and further reference to this regrettable aspect will, doubtless, be a matter for early remedial measures being adopted to cope with the situation.



**KIRKCALDY AREA—Andrew Stewart, Sanitary Inspector.****Drainage.**

There is no proper drainage system at Coaltown of Balgonie and the conditions there are still very unsatisfactory and are a source of nuisance as the sewage runs into an open ditch and enters the lade in a crude state. During the year I had this ditch cleaned out and a proper waterway made.

The septic tank that was provided for the twenty new houses built by the Fife County Council and the drain that was laid from the tank to the river has proved adequate. As stated in my last report a large number of houses in this village could be brought up to a modern standard if drainage was introduced throughout.

No proper drainage system exists in Milton of Balgonie and most of the houses are provided with dry closets. During the year meetings were held with a view to having a drainage system laid down in the village and it was suggested that it be connected up to the main sewer which is to be laid down the river side to the sea. It has also been suggested to build some houses by the County Council in the village and it seems that if this scheme goes on, the drainage scheme will also go on.

**THORNTON DRAINAGE.**—The South Purification Works as reported last year are quite inadequate for the work required, and if new drainage is put in the reconstruction of the filter beds or other means of disposing of the sewage will have to be considered.

As reported by me last year there is still no improvement regarding the unsatisfactory method of disposing of sewage in Windygates and Balcurvie District. If further building schemes are gone on with in this district the filter beds which were in use some years ago will require to be put into working order again, or the problem may be better solved if the suggested large sewer from Thornton to the sea at Leven is gone on with. At present the sewage enters the River Leven in its crude state.

The installation of sinks and water closets in 41 houses in Prinlaws Village was completed during the year. There are still a number of houses requiring sinks, etc., installed, but it is hoped that these will be completed at an early date.

**Nuisances.**

About the end of July a complaint was made regarding the condition of a burn on the Burgh of Cowdenbeath boundary. On inspection I found that the burn was nothing but an open sewer caused by sewers being broken by the underground workings of the collieries in the vicinity. The case was reported to the County Council and dealt with by the Public Health Committee. Eventually the burn was cleaned out by the Burgh of Cowdenbeath.



## Pollution of Rivers.

Owing to the excessive amount of washer water that is allowed to enter the River Ore from the Julian Pit, I have again kept a close watch on the conditions at various times of the year. All the washer water from the Pit is now run down a ditch by the side of the L. N.E. Railway from Thornton to Leven for a distance of nearly 400 yards before it goes into the river. On several occasions I have taken samples of the water both before going into the river and also the river water below where the ditch enters the river. Some of the samples were very bad with silt. As I mentioned in last year's report, the Balgonie Coal Company should be made to put in settling ponds the same as at other collieries in the County. I am of the opinion that until this is done there will be no abatement of the nuisance.

### WEMYSS AREA—R. J. Wigston, Sanitary Inspector.

#### Water Supply.

Kennoway, Bonnybank and Baintown are supplied from the Glenfarg Main at Kennoway Den, the water being forced by water-ram situated in Kennoway Den to a storage tank in a field on Balgreybank Farm, but during the year I had complaints from residents in Baintown that on several occasions the water supply failed and at other times the water was discoloured, sometimes with a reddish tint and other times it was almost the colour of milk. I am taking up the matter with the County Water Engineer, for on completion of the new sewer to Kennoway with the necessary addition of water closets, sculleries and bathrooms, this supply will require careful attention.

#### Drainage.

The drainage system of Kennoway is now being improved by the laying of the new sewer to serve that area, which, when completed, will be of untold benefit to that community and it is hoped that the system of dry closets now in use will soon be a thing of the past.

#### Scavenging.

EAST, WEST AND COALTOWN OF WEMYSS.—The scavenging arrangements in the above Special Districts are satisfactory in that all the refuse is collected by motor lorry and disposed of at the one depot situated on the north of the L. N.-E. Railway, Methil Branch. During the year the depot has given rather serious trouble, not only on account of children making a playground of the place, but it cannot be doubted that there is danger of fire breaking out, from spontaneous combustion, indeed I had to take action in January of last year to prevent fire reaching the railway by trenching round the depot and filling it up with clay.



During the year Mr. Crookes, Chief Inspector of Cleansing from the Department examined the depot and was of opinion that it ought to be cleaned up and abandoned as early as possible and this matter is at present receiving the careful consideration of the Committee.

**METHILHILL.**—The refuse from Methilhill is now also taken to the depot at East Wemyss pending the decision of the Committee regarding other methods of refuse disposal.

**KENNOWAY.**—The refuse from this district is being used to reclaim marshy ground and is done by contract.

### Nuisances.

During the year the most serious complaint received related to the smoke and fumes from a burning bing at Muiredge Colliery, but upon investigation, I found that the officials were doing everything possible to confine the area by covering the surface with loam, but once a bing has got thoroughly heated it is almost an impossibility to have the fire extinguished and provided that no additional redd is being deposited on the bing the fire should be allowed to burn out.

Another serious complaint was that caused by the Fife Coal Company discharging the effluent from their coal washer at Wellsgreen Pit direct to the Den Burn. The rush of water was the means of washing down material from the refuse depot, which was then deposited on the banks of the stream where it passes through the Special district, and moreover coal dust, etc., was also deposited on the banks which when dried by the sun gave off an offensive odour. On the instruction of the Committee the stream was thoroughly cleaned out at that point, but the practice is still being continued by the Fife Coal Company of allowing the effluent to be deposited direct into the burn without any pretence at treatment.

### Housing.

**OVERCROWDING.**—Regarding overcrowding, I do not know if much has been done in connection with this matter and I must again state that in my opinion the system of house-letting is not quite satisfactory and in order to get over the difficulty of rehousing people who are living in condemned houses or unfit houses, or who are living in overcrowded conditions, a list of occupiers of such property should be scrutinised before the new houses are let, as failing some method it is problematical when condemned property can be demolished.

### Slaughterhouses.

There are two slaughterhouses within the Wemyss Area, one at East Wemyss which is the property of, and is used exclusively by, the East Wemyss Co-operative Society; the other public slaughterhouse is in Leven Burgh. Both abattoirs are kept in a satisfactory manner.



Regarding the returns of condemned meat at Leven Slaughterhouse, I have to point out that it has not been the custom previously to keep a record of fluky livers as these were just destroyed forthwith but arrangements have now been made for a record to be kept of everything which is condemned.

### **LOCHGELLY AREA—J. S. E. Riddle, Sanitary Inspector.**

#### **Drainage and Sewage Disposal.**

**AUCHTERDERRAN SPECIAL DRAINAGE DISTRICT** (Population 6,917).—The sewage works, which are situated at the side of the River Ore, are doing their work fairly well but owing to being partly below the level of the river are apt to be flooded when the river rises.

**LOCHORE AND GLENCRAIG SPECIAL DRAINAGE DISTRICT** (Population 6,974).—The main and outfall sewer were laid in this district eleven years ago. Ground was taken off for purification works but these have not been gone on with.

The outfall sewer discharges the sewerage into four channels in the sloping ground between the sewer and the Fitty Burn. Here the sewage falls over large stones, which breaks up the solids and enters the burn by two outlets. The channels were cleaned out during the summer. The sewers have been running satisfactorily and have given little or no trouble. The sewers are attended to by members of the Scavenging staff.

A new Institute is to be built at Lochore and as a six-inch sewer passes through the site a diversion will be necessary. It is proposed to put in a nine-inch pipe which will take the drainage from the Institute also.

**LUMPHINNANS SPECIAL DRAINAGE DISTRICT** (Population 2,599).—Ten years ago new main sewers were put in. These discharged into a 20-inch sewer which in turn joined a burn receiving water from Lumphinnans Colliery. The following year the outfall was extended to join up with the Lochgelly Burgh Sewer which discharges into the Ore at West Colquhally Farm.

New sewers were also laid to serve the Housing Schemes at Viewfield and Brucefield.

All the drainage from the Special District joins the Burgh sewer with the exception of that from twenty houses at Zetland Place, the School house and Janitor's house. Zetland Place is on low ground on the south side of the village and cannot be drained by the main sewer. The sewage from these houses discharges into a cesspool with an overflow into a ditch.

A portion of the 20-inch outfall where it adjoins the railway has subsided but is still, however, able to take all the flow. The manholes on this portion receive special attention.

The drainage system has given no trouble during the year.



**KINGLASSIE SPECIAL DRAINAGE DISTRICT** (Population 1,546).—There is only a short length of public sewer in this district. This sewer was put in to serve the Housing Scheme. It discharges into a septic tank, the effluent from which joins a ditch leading to the Lochty Burn.

In March a complaint was made as to the state of the ditch and after I had reported on the matter it was agreed to have the ditch cleaned out from the outfall of the septic tank to the Lochty Burn, a distance of about 350 yards. The cost of cleaning the ditch was £15.

Plans were prepared for a new sewage system for this District some time ago but the question of proceeding with the work has been held in abeyance meantime.

There are several private drains in the village. These in most cases discharge into a cesspool the overflow from which eventually reaches the burn. There are still several privy closets in the village but those can not be got rid of until a proper drainage system is provided.

I hope that ere long a start will be made to provide an efficient sewage system for this District and so allow for the provision of modern conveniences.

#### **Scavenging.**

The Special Scavenging Districts are similar in name, area and population to the Drainage Districts. A considerable amount of time and work is involved in the superintending and organisation of the work in these large Special Scavenging, Lighting and Drainage Districts.

At the small groups of houses outwith the Special Districts ashpits are in use for the disposal of refuse and these are either emptied by the landlord or tenant. Only at South Walkerton have I had to complain as to the state of the ashpits. It would be a great help in the disposal of household refuse if occupiers would either use covered bins or keep their boxes under cover, also if paper was either burned or tied up in bundles.

**AUCHTERDERRAN SPECIAL SCAVENGING DISTRICT.**—In this district the work is carried out by direct labour—two carters and two scavengers being employed on the work.

The refuse is removed from all parts of the district at least thrice weekly by covered carts.

The District covers a wide area and two coups are in use. At one coup an old quarry is being filled up and at the other ground which has been lowered by subsidence is being made up. The quarry is quite dry but deep. At the other coup there is a considerable amount of water, almost a small loch, but a large area of ground has already been reclaimed and if the outfall burn were cleaned out the water level could be much lower.

A new urinal was erected at Dundonald at a cost of £74 17s 5d.



As mentioned in my previous reports I have pressed the Fife Coal Company to repair the private streets adjoining their houses within the District. While a number of streets have been repaired, a considerable amount still requires to be done. At the end of the year I reported that the roadway leading from the Round House, Bowhill, to Wellsgreen Farm, was in a very muddy state and required to be made up, surfaced and channelled.

**LUMPHINNANS SPECIAL SCAVENGING DISTRICT.**—The Fife Coal Company made a short portion of new street from the Main Street to the top of Mungall Street and closed up the roadway in front of the east side of Nivingstone Place from Sligo Street to Mungall Street. The ground to the west of the new street and at the rear of Nivingstone Place, where some old houses have been demolished, was all cleaned up and covered with ashes. The new street is only surfaced with ashes and at its junction with the main street is too high. A crossing would require to be made over the pavement here. The private streets are again getting badly holed and the channelling requires re-setting.

Notices were served under Section 39 of the Public Health (Scotland) Act, 1897, in respect of the roadway from Main Street to top of Sligo Street but so far nothing has been done to repair it.

### **Sanitary Conveniences.**

As pointed out in my previous Reports, practically all the houses in the Special Drainage Districts, with the exception of Kinglassie are provided with inside water supply and water closets, and in nearly every case is a water closet provided for each house. In the few cases where there are common closets, there is one for two tenants.

The want of a proper drainage system in Kinglassie prevents the introduction of these conveniences to all the houses requiring same.

### **Schools.**

In February I made a special report on the sanitary conveniences. Three different types of closets are in use. The automatic open trough closet, the automatic closet with a basin in each compartment which discharges into a large pipe trapped at the end, and the modern closet. Some of the schools are provided with all modern closets, some have some modern closets and some of the older type and some have all the older type of closets. All were, however, very well kept. The provision of modern closets to all the schools is being carried out as circumstances permit.

### **Housing.**

The housing question in this area is still a difficult one.

Throughout all the populous centres there is still far too much subletting, and this is aggravated by the large number of unemployed



The majority of the sub-tenants are unemployed or widows with young families who are unable to obtain houses owing to lack of means and want of houses.

In Cardenden, Lumphinnans and Kinglassie there are no habitable houses vacant. In Lochore and Glencraig there are a few empty houses but as they all belong to the Coal Companies they are only let to men who are in employment.

A housing inspection made in Cardenden in May showed that there were then 73 sub-let houses with 74 sub-tenants. Of the 74 sub-tenants 30 were married sons or daughters and 10 were otherwise related to the tenant. 33 of the sub-tenants were unemployed.

In October a complete census of Lumphinnans village was taken when it was ascertained that out of 447 houses, 128 were sub-let. There were 138 sub-tenants of whom 72 were unemployed, 22 widows and 12 old age pensioners. Only 30 sub-tenants were working and of the families of sub-tenants only 9 were working. Taking tenants and sub-tenants the census showed that 220 families were living in single apartments.

There are very few houses in this area, especially within the special districts, which could be closed as uninhabitable, and closure in most cases only means more sub-letting. In the same way it is almost impossible to deal with overcrowding for if the party is unemployed it is nearly impossible for them to obtain other accommodation.

I mentioned in my last report that I hoped additional houses would be built at Cardenden, Lumphinnans and Kinglassie but at the end of the year the matter was still under consideration.

## **DUNFERMLINE AREA—W. Davison, Sanitary Inspector.**

### **Water Supplies.**

A considerable number of dwelling-houses were provided with inside water supply fitments in lieu of outside supplies, during the year, thus maintaining the steady progress recorded for the past year or two. Many of these were houses occupied by rural workers, the work of introducing water being done in conjunction with extensive other improvements under the Housing (Rural Workers) Act. At Crossford, which village was formed into a Special Drainage District in 1930, most of the houses have now been provided with inside water supply fitments, the work on 45 of these having been executed during the year under review.

### **Drainage and Sewage Disposal.**

At Saline, Blairhall and Crossgates, sewage disposal works are provided. Saline Special District includes the village of Steelend. The sewage is conveyed to Purification Works situated north-west



of the village and the effluent discharged into Saline burn. These works continue to function satisfactorily, the maintenance costs are low and the effluent shows a high degree of purification. The works at Blairhall, as previously reported, are inadequate to deal efficiently with the increased flow of sewage. Considerable maintenance charges are being incurred in keeping the present distributors in operation and it is hoped that the improvement on these works already recommended, will be put in hand shortly.

At Crossgates, the Purification Works remain as previously reported. On taking over charge of the Drainage Districts, I put into operation here an improvised method of distribution by the employment of perforated corrugated iron sheets which effected an improvement but the installation here is very unsatisfactory. An arrangement has now been completed for connecting the drainage from the Crossgates Area with the Dunfermline Burgh main sewer at Touch and the matter of extending the boundaries of the Special Drainage District and proceeding with the work is presently under consideration.

Extensions to the drainage systems at Aberdour and Limekilns were made in the course of the year. These were rendered necessary by the erection, by the County Council, of 20 new houses at Aberdour and 18 at Limekilns. At Aberdour, 115 yards, and at Limekilns, 197 yards of 6-inch fireclay pipe sewer were laid and connected up to the existing systems. The extension of an outfall sewer in Tulliallan District was recommended and approved but the work has not yet been proceeded with.

Suitable drainage schemes for Carnock, Cairneyhill and Hillend villages were under consideration and it was agreed that these be deferred meantime. At Oakley the proposed erection of 60 new houses, mentioned elsewhere in this Report, will permit of all the houses in Oakley Rows being demolished. The existing houses are without proper drainage.

The customary attention was given to houses found to be without means of drainage or where the drainage was found to be insufficient. At Crossford, which was formed into a Special Drainage District during 1930, many of the owners of houses having failed to provide drainage and connect up to the public sewer, Notices were served calling for the provision of sufficient means of drainage and their connection to the public sewer, all in terms of Section 120 of the Public Health (Scotland) Act 1897. At the close of the year only a few properties were still unprovided with proper drainage facilities and the delay with these is due to the financial circumstances of the owners. Many other houses, etc., throughout the district were provided with means of drainage or had defective drains made good. Much of this work was done together with other improvements under the Housing (Rural Workers) Act.



### Scavenging.

There are six Special Scavenging Districts in the Dunfermline Area, namely, Aberdour, Crossgates, Limekilns and Charlestown, North Queensferry, Tulliallan, and Valleyfield and Torryburn. In each of these, a system of daily refuse collection is in operation. This is necessary because of the lack of provision for storage of refuse at most of the houses in these districts, necessitating the keeping of the ash bin or box either outside, exposed, or within the dwellinghouse itself. The work is done by contractors who undertake to collect the refuse, scavenge the streets, clean out road surface water gullies, etc., for an inclusive sum per annum. Periodical inspections of each district were made and where breaches of contract were detected, the matter was immediately taken up with the contractors.

The refuse from these Districts is disposed of by tipping. At Aberdour, Crossgates, Tulliallan and Valleyfield, waste ground is being reclaimed and converted into arable land. At Charlestown and North Queensferry, disused quarries are in process of being filled up and the completion of these operations will enhance the amenity of these sites. The above method of disposal has the advantage of being less costly than others. Inspections of some of the "tooms" in the area were carried out by the Chief Inspector of Cleansing, Department of Health for Scotland, who expressed his satisfaction and approval of the methods employed to eliminate nuisance from smells and fire. Constant attention is also given to the extermination of rats.

### Sanitary Conveniences, etc., used in common.

In all Special Drainage Districts, water closets are provided and, with few exceptions, there is one to each house. In other villages and populous places, dry closets and ash-pits or privy middens are in use, these serving two or not more than three tenants. At Fordell there are 55 dry closets each serving one tenant only. At Oakley 19 dry closets serve two tenants and 9 serve three tenants each. At Wellwood there are 40 privies each serving two tenants, and at Milesmark, 6 privies, each serving three tenants.

### Schools.

Periodical visits of inspection were made to the 25 schools in the area. The continued use of drinking cups at some schools is undesirable and whenever possible these should be replaced by fountains, thus reducing to a minimum the risk of infection or contagion from this source. With one exception, all schools in the area are provided with modern individual water closets. I have previously reported on the existence of obsolete trough closets at the old school, Tulliallan, and these are now being replaced by modern conveniences.



### Housing.

The year under review was marked by ceaseless activity as regard housing. The amount of work in this direction is reflected in the number of dwellinghouses, namely, 370, inspected in terms of the Housing (Inspection of District) Regulations. Exhaustive surveys of the housing conditions in each of the following villages were carried out in order to ascertain the number of houses not reasonably fit for human habitation :—Gowkhall, Carnock, Oakley, Comrie, Crossford Crossgates, Fordell, Limekilns, Charlestown, North Queensferry Kincardine, Torryburn and Newmills. The number of occupied houses found to be unfit was 272 and if new houses were erected at the various places to replace all those unfit, there would be, in my opinion under existing industrial conditions, a sufficiency of habitable working class houses in the area.

The district most urgently in need of new houses is Oakley, comprising the villages of Gowkhall, Carnock, Comrie and Oakley, where there are 101 houses unfit for habitation. The Council have decided to proceed with the erection of 60 houses at Oakley at which village alone there are 65 unfit houses. Additional houses will still be required to replace houses reported as unfit at Gowkhall, Carnock and Comrie Villages.

### Housing (Rural Workers) Acts, 1926 and 1931.

The survey of houses occupied by agricultural and other rural workers was continued throughout the year, when 56 inspections of this type of dwellinghouse were made. Where improvements were deemed necessary, a copy of the Council's Scheme of Assistance was sent to the owner together with an explanatory letter which also detailed the defects and improvements necessary to render the house in all respects reasonably habitable. Every effort was made to bring the provisions of the Act and Scheme to the notice of such owners and to persuade them to take advantage of the Scheme of Assistance adopted by the County Council. As a result of these efforts, 18 sets of plans for the improvement of 29 rural dwellinghouses were lodged and approved during 1932, bringing the total number of houses so improved up to 155. The improvements effected consisted of provision of sculleries with inside W.Cs., larders, coal houses, inside water supply with sink and tubs, etc., together with necessary drainage, provision of additional sleeping accommodation, more adequate means of lighting and ventilation, strapping and lathing of solid walls, heightening of ceilings, etc. While criticism of this Act has been forthcoming from certain authorities, there is, in my opinion, no doubt that the operations of the Act and Scheme have provided many agricultural and other workers with houses infinitely superior and more conducive of a higher standard of health than those to which they have been accustomed. No one will assert, of course, that these improved houses are equal to new ones.



out in the absence of any incentive to private enterprise to build new houses for this class of worker and the inability of Local Authorities to do so, the provisions of the Act have made possible what is, in my opinion, the next best thing. At any rate, much satisfaction is usually expressed by the occupiers of houses which have been improved under the Scheme and it is satisfactory to note that Grants towards the cost of such work are to continue.

### **Overcrowding.**

The number of cases of overcrowding dealt with during the year is 1. This shows an increase over the numbers reported for the past year or two, but does not, always, indicate a shortage of houses. The overcrowding was, in nearly every case, due to sub-letting of parts of dwellinghouses by the occupiers and reflects rather the depth of the depression being experienced in the Coal Industry. The occupiers of these houses are either without employment or earning wages which are inadequate to provide bare necessities and as a means of augmenting the income, sub-letting is resorted to. The sub-tenants too, are usually unemployed or in pecuniary difficulties and the sum paid to the occupier for accommodation has rarely been found to exceed two or three shillings per week. In this way, it is argued, both occupier and sub-tenant benefit but the injury to health arising from overcrowding is usually overlooked and action by the Local Authority becomes necessary. Each case, when encountered, was dealt with and, except for one or two which are still in hand, abatement of the overcrowding was secured.

### **Milk.**

The provision of proper sanitary accommodation for the use of persons employed in and about dairy farms is desirable and where rivers are known to be in use and drainage outfall is available, endeavours are made to obtain the provision of water closets together with the necessary drainage arrangements. Most of the dairy farm houses in this area have now been provided with modern sanitary accommodation and a number also with bathrooms. Simultaneously, under the Housing (Rural Workers) Act, 51 cottar houses at registered dairy farms have been provided with inside water closets and modern drainage arrangements.

### **Meat.**

**Regulation of Food Order, 1921, Merchandise Marks Act, 1926 and Orders-in-Council Relative to Marking of Imported Foodstuffs, etc.**

All butchers' shops and numerous retail vans, also fruit and other shops in the area, were inspected from time to time in order to ascertain how far the provisions of the above were being given effect to. It was



found that only an infinitesimal quantity of imported beef and mutton was on sale and that where this was the case, the requirements of the Order were being attended to. Imported fruit and other products affected by the Orders-in-Council under the Merchandise Marks Act were generally found to be labelled correctly, showing the country of origin. These matters continue to have my attention.

### BEATH AREA—C. A. Alexander, Sanitary Inspector.

#### Water Supply.

Many houses still exist without inside supplies. Those in Kelty are being rapidly demolished owing to Housing activities. In Lassodie where street taps are in existence, the position is changing almost daily. Two years ago nearly 200 houses were occupied; to-day the figure is round about 60.

#### Drainage.

KELTY SPECIAL DRAINAGE DISTRICT.—The sewers throughout the district have functioned satisfactorily. Regular inspection and flushing is carried out all the year round.

The Cantsdam area is not linked up with the sewers leading to the Purification Works. A scheme was considered in 1930, but, owing to many properties in this district having been earmarked for early closure, the scheme was held up.

The Purification Works, consisting of sludge precipitating tanks and percolating filter beds, continue to function fairly satisfactorily. These works have been to some extent damaged by mineral subsidence with a consequential injurious effect on their efficiency. If no further subsidence occurs, we believe the works will function for some time yet. The discharge to the river Ore appears to be satisfactory. At any rate, it is free from solids, and a large amount of fine solids in suspension. We had an analysis made and here is the result:—

#### Description—

Clear liquid—some fine suspended matter—odour nil.

Oxygen absorbed in 4 hours, .. ..	0.72 pts. per 100,0
Nitrogen as free and saline ammonia, .. ..	0.28 „ „
Nitrogen as albuminoid ammonia, .. ..	0.162 „ „
Nitrates and Nitrites, .. ..	0.76 „ „
Suspended matter, .. ..	4.2 „ „
Volatile matter, .. ..	2.8 „ „
Ash, .. ..	1.4 „ „

The condition of these works has been specially brought to the notice of the County Council, with a suggestion that the outfall might be improved.

An extension to the sewer system was necessary for a Housing Scheme of 76 houses.



### Scavenging.

**HILL-OF-BEATH.**—The work here is carried out by the Fife Coal Company, who make their own arrangements for removal and disposal of refuse. We have complained regarding the collection of refuse in an open cart, and have offered the Company a suitable cart at a cheap rate. We think the Fife Coal Company should be compelled to provide a suitable cart. Disposal here is by tipping. Street cleansing is carried out by the Fife Coal Company's own men.

### Housing.

**LASSODIE.**—This village, comprised of three distinct sections, Old Row, New Row and Fairfield, is to be abandoned.

As was indicated last year, the mineral lease in which the houses were involved, was determined by the tenants at 15th May. The village had to be cleared and wiped out by 15th November. An arrangement was made with the owners and superiors on the terms of securing tenancy for a period of years. We believe this will work satisfactorily.

**HILL-OF-BEATH.**—The position here is much as before, and is very obscure. We believe that Hill-of-Beath will eventually become another Lassodie. At the moment there is no work near the village and a large number of its inhabitants are unemployed. The houses, with the exception of a few blocks are not suitable for various reasons for habitation, and we would like to see a gradual clearance of the worst blocks.

Reverting to Hill-of-Beath, we should report that the houses known as West Row have been under consideration. These houses, numbering about 40, are, owing to the manner in which they have been built, a source of worry and nuisance to the owners and ourselves. It has been agreed that they be closed at the earliest possible moment.

Overcrowding exists here to some extent, but we are unable to take any action at the moment.

### Slaughterhouses.

The only two slaughterhouses in the area are :—

*Burgh of Cowdenbeath*—Public—Watson Street, Cowdenbeath.

*Kelty Co-operative Society*—Private—Cocklaw Street, Kelty.

Cowdenbeath scheme is under the control of a full-time Superintendent who keeps the premises in a highly satisfactory condition. He supervises all the slaughtering, observes that the provisions of the Slaughter of Animals Act are carried out, and assists the Detention Officer in the inspection of meat. The hours of slaughtering are fixed and there is never any difficulty in ensuring that every ounce of meat is inspected.



In Kelty, although a private slaughterhouse, inspection is very easy. The premises at all times are well kept and we have had no cause to complain on any point. The Society's staff have become highly interested in meat inspection, and this fact, coupled with regular hours for slaughtering, makes our duties very easy and interesting. We visit Kelty each day for slaughtering, viz.:—Mondays, Tuesdays, and Thursdays, and see everything that is killed.

### Rivers Pollution.

From time to time we had occasion to make inspections of the various points where possible pollution of streams might occur. We found the Gordon and Aitken Collieries taking the necessary steps to prevent pollution from coal washings. The Foulford Colliery was also preventing pollution, although at this colliery they have a bad habit of using a pipe with direct access to the stream. At the west end of Cowdenbeath a difficult situation exists, and we are afraid not much can be done to remedy matters in the meantime. Hill-of-Beath washery is now closed down, and this will help matters to some extent.

Sewage pollution of the streams has been greatly reduced through the new purification works, completed for the Burgh of Cowdenbeath. These works were put in operation in August.



## Sale of Food and Drugs Acts.

During 1932, nine hundred and sixty-nine samples of food and drugs were taken by the County Sampling Officers, under my direction as Chief Sampling Officer, and analysed by the County Analyst. Of these, nine hundred and nineteen were official samples and fifty were test samples. On analysis, forty-four 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, 15; whisky, 5; mince, 13; sausagemeat, 1; sausages, 6; sausageroll, 2; rice, 1; and beer, 1.

Of the vendors of the forty-four adulterated official samples, twenty-five were fined in sums varying from 10s to £5, a total of £60; six cases were dropped on payment of expenses varying from £1 10s to £3, a sum of £13 10s in all; in one case no proceedings were taken; eight vendors were warned; one vendor was found not guilty; in one case the Diet was deserted and in the case of two whisky samples found adulterated it was held that there was no prejudice and therefore no contravention.

Proceedings were taken in regard to a contravention of the Sale of Food Order, 1921; the accused was fined.

The following table sets forth the work undertaken under the Acts by the Sampling Officers:—

Area.	Official Samples.		Test Samples.		Total.
	Total Samples.	Adulterated Samples.	Total Samples.	Adulterated Samples.	
Cupar Area .. ..	42	2	11	1	53
Burghs in Cupar Area ..	135	8	4	—	139
St. Andrews Area ..	22	1	—	—	22
Burghs in St. Andrews Area ..	86	1	1	—	87
Anstruther Area ..	32	—	—	—	32
Burghs in Anstruther Area	74	1	—	—	74
Kirkcaldy Area ..	21	2	—	—	21
Burghs in Kirkcaldy Area	100	5	1	—	101
Wemyss Area ..	60	—	—	—	60
Burghs in Wemyss Area	48	6	—	—	48
Lochgelly Area ..	109	2	—	—	109
Burghs in Lochgelly Area	29	—	—	—	29
Dunfermline Area ..	110	10	—	—	110
Burghs in Dunfermline Area ..	21	3	—	—	21
Beath Area .. ..	10	—	19	4	29
Burghs in Beath Area ..	20	3	14	—	34
Total .. ..	919	44	50	5	969



## Tables of Samples and Results of their Analyses.

## CUPAR AREA.

## LANDWARD.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	17	1	18	Sweet Milk, ..	4	1	5
Skimmed Milk, ..	1	..	1	Butter, Fresh, ..	2	..	2
Beef, Brisket, ..	1	..	1	Cheese, ..	1	..	1
Butter, Salt, ..	2	..	2	Cream, ..	1	..	1
Cornflour, ..	1	..	1	Magnesia, Bismu-			
Currants, ..	1	..	1	thated, ..	2	..	2
Figs, Dried, ..	1	..	1				
Haggis, ..	1	..	1				
Magnesia, Bismu-							
thated, ..	1	..	1				
Margarine, ..	1	..	1				
Mince, ..	1	1	2				
Oil, Castor ..	1	..	1				
Oil, Olive, ..	1	..	1				
Peas, Green, ..	1	..	1				
Salts, Epsom, ..	1	..	1				
Sausages, ..	2	..	2				
Sausagemeat, ..	1	..	1				
Soda, Baking, ..	1	..	1				
Tartar, Cream of	1	..	1				
Tea, ..	1	..	1				
Veal, Ham and							
Tongue, ..	1	..	1				
Vinegar, ..	1	..	1				
Total, ..	40	2	42	Total, ..	10	1	11

The above noted adulterated sample of Sweet Milk contained 2.70 per cent. of Fat and 8.66 per cent. of Non-Fatty Solids.

The adulterated sample of Sweet Milk was deficient in milk fat to the extent of 0.24 per cent.

## AUCHTERMUCHTY BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	8	..	8	Cream, ..	1	..	1
Condensed Milk,							
Full Cream, ..	1	..	1				
Arrowroot, ..	1	..	1				
Beer, ..	1	..	1				
Beer, Draught, ..	2	..	2				
Cinnamon, Ground,	1	..	1				
Coffee, ..	1	..	1				
Dripping, ..	2	..	2				
Ginger, Ground,	1	..	1				
Rum, ..	1	..	1				
Sausages, ..	1	..	1				
Sausages, Beef, ..	1	..	1				
Tomatoes, Peeled,	1	..	1				
Whisky, ..	1	1	2				
Total, ..	23	1	24	Total, ..	1	..	1



## CUPAR BURGH.

## OFFICIAL.

	Gen.	Adult.	Total.
Sweet Milk, ..	12	..	12
Skimmed Milk, ..	3	..	3
Barley, ..	1	..	1
Borax, ..	1	..	1
Egg Substitute, ..	1	..	1
Ginger, Ground, ..	1	..	1
Jam, Raspberry	2	..	2
Mince, ..	1	2	3
Sausages ..	4	2	6
Sausageroll, ..	..	2	2
Squash, Orange, ..	1	..	1
Sugar, Barley, ..	1	..	1
Wine, Orange, ..	1	..	1
Total, ..	29	6	35

## TEST.

	Gen.	Adult.	Total.
Sweet Milk, ..	1	..	1
Total, ..	1	..	1

## FALKLAND BURGH.

## OFFICIAL.

	Gen.	Adult.	Total.
Sweet Milk, ..	7	..	7
Beer, ..	1	..	1
Butter, ..	1	..	1
Cheese, ..	1	..	1
Cocoa, ..	1	..	1
Margarine, ..	1	..	1
Mince, ..	1	..	1
Mustard, ..	1	..	1
Peas, Green, ..	1	..	1
Rum, Diluted, ..	1	..	1
Sausages, ..	1	..	1
Spinach, ..	1	..	1
Tea, ..	1	..	1
Whisky, Diluted, ..	1	..	1
Total, ..	20	..	20

## TEST.

	Gen.	Adult.	Total.
Shredded Wheat, ..	1	..	1
Total, ..	1	..	1

## LADYBANK BURGH.

## OFFICIAL.

	Gen.	Adult.	Total.
Sweet Milk, ..	17	..	17
Arrowroot, ..	1	..	1
Butter, Salt, ..	2	..	2
Cocoa, ..	1	..	1
Cream, ..	1	..	1
Jelly, Table, ..	1	..	1
Margarine, ..	2	..	2
Mustard, ..	1	..	1
Pickles, ..	1	..	1
Sausages, ..	1	..	1
Tapioca, Seed Pearl, ..	1	..	1
Tea, ..	1	..	1
Vinegar, ..	1	..	1
Total, ..	31	..	31

## TEST.

	Gen.	Adult.	Total.
Chicken Broth Cubes, ..	1	..	1
Total, ..	1	..	1



## NEWBURGH BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	10	..	10
Aberdeen Roll, ..	1	..	1
Beef, Pressed, ..	1	..	1
Cheese, ..	1	..	1
Honey, ..	1	..	1
Jam, ..	1	..	1
Mince, ..	2	..	2
Pineapple, Tinned,	1	..	1
Powder, Gravy,	1	..	1
Salts, Liver, ..	1	..	1
Sausages, ..	1	1	2
Sweets, ..	1	..	1
Wine, Ginger, ..	1	..	1
Wine, Fruit, ..	1	..	1
Total, ..	24	1	25

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Sweet Milk, ..	..	..	..
Stewed Milk, ..	..	..	..
Barley, ..	..	..	..
Horax, ..	..	..	..
For Substances, ..	..	..	..
Ginger, Ground, ..	..	..	..
Jam, Raspberry, ..	..	..	..
Mince, ..	..	..	..
Sausages, ..	..	..	..
Sausage-roll, ..	..	..	..
Squash, Orange, ..	..	..	..
Sugar, Barley, ..	..	..	..
Wine, Orange, ..	..	..	..
Total, ..	29	8	35

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	7	..	7
Beer, ..	1	..	1
Butter, ..	1	..	1
Cheese, ..	1	..	1
Cocon, ..	1	..	1
Margarine, ..	1	..	1
Mince, ..	1	..	1
Mustard, ..	1	..	1
Peas, Green, ..	1	..	1
Ram, Diluted, ..	1	..	1
Sausages, ..	1	..	1
Spinach, ..	1	..	1
Tea, ..	1	..	1
Whisky, Diluted, ..	1	..	1
Total, ..	20	..	20

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	17	..	17
Arrowroot, ..	1	..	1
Butter, Salt, ..	2	..	2
Cocon, ..	1	..	1
Cocon, ..	1	..	1
Jelly, Table, ..	1	..	1
Margarine, ..	2	..	2
Mustard, ..	1	..	1
Pickles, ..	1	..	1
Sausages, ..	1	..	1
Tapioea, Seed Pearl, ..	1	..	1
Tea, ..	1	..	1
Wine, ..	1	..	1
Total, ..	31	..	31

OFFICIAL.			
	Gen.	Adult.	Total.
Chicken Broth, ..	17	..	17
Cubes, ..	1	..	1
Arrowroot, ..	2	..	2
Beer, ..	1	..	1
Butter, ..	1	..	1
Cocon, ..	1	..	1
Cheese, ..	1	..	1
Coffee, ..	1	..	1
Dried, ..	1	..	1
Ginger, Ground, ..	1	..	1
Ram, ..	1	..	1
Sausages, ..	1	..	1
Sausage-roll, ..	1	..	1
Total, ..	31	..	31

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	17	..	17
Arrowroot, ..	1	..	1
Butter, Salt, ..	2	..	2
Cocon, ..	1	..	1
Cocon, ..	1	..	1
Jelly, Table, ..	1	..	1
Margarine, ..	2	..	2
Mustard, ..	1	..	1
Pickles, ..	1	..	1
Sausages, ..	1	..	1
Tapioea, Seed Pearl, ..	1	..	1
Tea, ..	1	..	1
Wine, ..	1	..	1
Total, ..	31	..	31



## ST. ANDREWS AREA.

## LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	1	..	1
Barley, ..	1	..	1
Cake Mixture, ..	1	..	1
Cinnamon, ..	1	..	1
Cocoa, ..	1	..	1
Cornflour, ..	2	..	2
Creamola, ..	1	..	1
Milk Pudding, ..	1	..	1
Eiffel Tower, ..	1	..	1
Oats, Porage, ..	1	..	1
Pepper, White, ..	2	..	2
Powder, Baking, ..	1	..	1
Rice, Ground, ..	1	..	1
Rice, Whole, ..	2	1	3
Semolina, ..	1	..	1
Sugar, ..	2	..	2
Tea, ..	2	..	2
Total, ..	21	1	22

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Total, ..	..	..	..

## NEWPORT BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	9	..	9
Cocoa, ..	1	..	1
Ketchup, Tomato, ..	1	..	1
Mince, ..	1	..	1
Rice, Ground, ..	1	..	1
Rice, Whole, ..	1	..	1
Sauce, H.P., ..	1	..	1
Sausages, ..	2	..	2
Sugar, ..	1	..	1
Tea, ..	1	..	1
Total, ..	19	..	19

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Total, ..	..	..	..



## ST. ANDREWS BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	27	..	27	Butter, ..	1	..	1
Cinnamon, ..	1	..	1				
Cinnamon, Ground	1	..	1				
Cocoa, ..	1	..	1				
Dripping, ..	1	..	1				
Farola, ..	1	..	1				
Margarine, ..	1	..	1				
Mince, ..	2	..	2				
Oatmeal, ..	1	..	1				
Pepper, Black, ..	1	..	1				
Pudding, Oatmeal,	1	..	1				
Rice, Ground, ..	2	..	2				
Rice, Whole, ..	2	..	2				
Sausages, ..	4	1	5				
Sausage, Sliced,	1	..	1				
Sugar, ..	1	..	1				
Swiss Roll, ..	1	..	1				
Suet, Atora Beef,	1	..	1				
Tartar, Cream of	1	..	1				
Tea, ..	1	..	1				
Total, ..	52	1	53	Total, ..	1	..	1

## TAYPORT BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	6	..	6	Nil.			
Cornflour, ..	1	..	1				
Oatmeal, ..	1	..	1				
Rice, Ground, ..	1	..	1				
Rice, Whole, ..	2	..	2				
Sugar, ..	2	..	2				
Tea, ..	1	..	1				
Total, ..	14	..	14				



## ANSTRUTHER AREA.

## LANDWARD.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	6	..	6	Nil.			
Barley, Pearl, ..	1	..	1				
Butter, Salt, ..	1	..	1				
Cocoa, ..	3	..	3				
Cornflour, ..	1	..	1				
Farola, ..	1	..	1				
Frape-nuts, ..	1	..	1				
Kellog's Corn, ..	1	..	1				
Krusto, ..	1	..	1				
Oatmeal, ..	2	..	2				
Oats, Porage, ..	1	..	1				
Pudding, ..	1	..	1				
Rice, ..	3	..	3				
Rice, Ground, ..	1	..	1				
Semolina, ..	1	..	1				
Sugar, ..	4	..	4				
Tea, ..	3	..	3				
Total, ..	32	..	32				

## CRAIL BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	5	..	5	Nil.			
Chocolate, ..	1	..	1				
Cornflour, ..	1	..	1				
Creamola, ..	1	..	1				
Lard, ..	1	..	1				
Rice, Ground, ..	1	..	1				
Semolina, ..	1	..	1				
Sausages, ..	1	..	1				
Total, ..	12	..	12				

## ELIE AND EARLSFERRY BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Butter, Salt, ..	1	..	1	Nil.			
Cornflour, ..	2	..	2				
Margarine, ..	1	..	1				
Rice, Ground, ..	1	..	1				
Rice, Whole, ..	1	..	1				
Sausages, ..	1	1	2				
Sausagemeat, ..	1	..	1				
Sugar, ..	1	..	1				
Tea, ..	2	..	2				
Total, ..	11	1	12				



## ANSTRUTHER-KILRENNY BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	5	..	5	Nil.	..	..	..
Butter, Salt, ..	3	..	3	..	..	..	..
Cocoa, ..	2	..	2	..	..	..	..
Cornflour, ..	2	..	2	..	..	..	..
Krusto, ..	1	..	1	..	..	..	..
Margarine, ..	1	..	1	..	..	..	..
Mince, ..	1	..	1	..	..	..	..
Mustard, ..	1	..	1	..	..	..	..
Oatmeal, ..	1	..	1	..	..	..	..
Oats, Scott's				..	..	..	..
Porage, ..	1	..	1	..	..	..	..
Pepper, Black, ..	1	..	1	..	..	..	..
Rice, Ground, ..	2	..	2	..	..	..	..
Rice, Whole, ..	2	..	2	..	..	..	..
Sugar, ..	2	..	2	..	..	..	..
Tea, ..	2	..	2	..	..	..	..
Total, ..	27	..	27	..	..	..	..

## PITTENWEEM BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	5	..	5	Nil.	..	..	..
Barley, Pearl, ..	1	..	1	..	..	..	..
Butter, Salt, ..	1	..	1	..	..	..	..
Cocoa, Bournville, ..	1	..	1	..	..	..	..
Cornflour, ..	1	..	1	..	..	..	..
Honey, British				..	..	..	..
Empire, ..	1	..	1	..	..	..	..
Jam, Black Currant, ..	1	..	1	..	..	..	..
Milk Pudding				..	..	..	..
Mixture, ..	1	..	1	..	..	..	..
Mincemeat, ..				..	..	..	..
Robertson's, ..	1	..	1	..	..	..	..
Oatmeal, ..	1	..	1	..	..	..	..
Pepper, Black, ..	1	..	1	..	..	..	..
Rice, Whole, ..	1	..	1	..	..	..	..
Sausages, ..	1	..	1	..	..	..	..
Semola, ..	1	..	1	..	..	..	..
Semolina, ..	1	..	1	..	..	..	..
Sugar, ..	2	..	2	..	..	..	..
Tea, ..	2	..	2	..	..	..	..
Total, ..	23	..	23	..	..	..	..



## KIRKCALDY AREA.

## LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	8	..	8
Butter, Salt, ..	3	..	3
Beer, Draught, ..	2	1	3
Jelly, Plum, ..	1	..	1
Lentils, ..	1	..	1
Margarine, ..	1	..	1
Mince, ..	..	1	1
Peas, Green, ..	1	..	1
Sausages, ..	2	..	2
Total, ..	19	2	21

TEST.			
	Gen.	Adult.	Total.
	Nil.	..	..
The above noted adulterated samples of Sweet Milk contained the following:-			
	Non-Fatty	Fat.	
	Solids per cent.	per cent.	
	8.79	3.65	
	8.51	2.85	

## BURNTISLAND BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	32	1	33
Mince, ..	2	..	2
Total, ..	34	1	35

TEST.			
	Gen.	Adult.	Total.
	Nil.	..	..
The above noted adulterated sample of Sweet Milk contained 3.55 per cent. of Fat and 8.01 per cent. of Non-Fatty Solids.			

The above noted adulterated sample of Sweet Milk contained 3.35 per cent. of Fat and 7.96 per cent. of Non-Fatty solids.

## KINGHORN BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	3	..	3
Butter, Fresh, ..	1	..	1
Butter, Salt, ..	1	..	1
Mince, ..	2	1	3
Sausages, ..	1	..	1
Total, ..	8	1	9

TEST.			
	Gen.	Adult.	Total.
	Nil.	..	..



## LESLIE BURGH.

OFFICIAL.				
		Gen.	Adult.	Total.
Sweet Milk, ..	40	2		42
Skimmed Milk, ..	1	..		1
Mince, ..	1	..		1
Total, ..	42	2		44

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

Fat. per cent.	Non-Fatty Solids per cent.
2.65	8.79
2.85	8.51

TEST.			
	Gen.	Adult.	Total
Nil.			

## MARKINCH BURGH.

OFFICIAL.				
		Gen.	Adult.	Total.
Sweet Milk, ..	10	1		11
Mince, ..	1	..		1
Total, ..	11	1		12

The above noted adulterated sample of Sweet Milk contained 3.55 per cent. of Fat and 8.01 per cent. of Non-Fatty Solids.

TEST.			
	Gen.	Adult.	Total
White Pepper, ..	1	..	1
Total, ..	1	..	1



# WEMYSS AREA. LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	27	..	27
Butter, Danish, ..	6	..	6
Coffee and Chicory Essence, ..	1	..	1
Lard, ..	2	..	2
Margarine, ..	4	..	4
Mince, ..	3	..	3
Relish, Yorkshire,	1	..	1
Sauce, H.P., ..	2	..	2
Sauce, Robin Hood,	1	..	1
Sauce, S.P., ..	1	..	1
Sausages, Beef, ..	2	..	2
Sausages, Pork, ..	2	..	2
Sausagemeat, ..	1	..	1
Soda, Baking, ..	4	..	4
Tartar, Cream of	1	..	1
Vinegar, Lemon,	1	..	1
Vinegar, Malt, ..	1	..	1
Total, ..	60	..	60

## LEVEN BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	12	2	14
Total, ..	12	2	14

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

Fat.	Non-Fatty
per cent.	Solids per cent.
2.74	8.82
3.06	8.14

## BUCKHAVEN BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ..	8	..	8
Butter, Salt, ..	3	..	3
Cheese, ..	1	..	1
Mince, ..	3	2	5
Pepper, White, ..	4	..	4
Sausages, Beef, ..	1	..	1
Sausages, Steak,	5	..	5
Soda, Baking, ..	1	..	1
Tea, ..	2	..	2
Whisky, ..	2	2	4
Total, ..	30	4	34

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Skimmed Milk, ..	..	..	..
Acid, Tartaric, ..	..	..	..
Buttermilk, ..	..	..	..
Butter, Salt, ..	..	..	..
Cocoa, ..	..	..	..
Coffee, ..	..	..	..
Curants, ..	..	..	..
Ginger, Ground, ..	..	..	..
Jam, Raspberry, ..	..	..	..
Lard, ..	..	..	..
Margarine, ..	..	..	..
Mince, ..	..	..	..
Oil, Compound, ..	..	..	..
Tea, Green, ..	..	..	..
Pepper, White, ..	..	..	..
Flour, Mustard, ..	..	..	..
Soda, Baking, ..	..	..	..
Tartar, Cream of	..	..	..
Tea, ..	..	..	..
Vinegar, Malt, ..	..	..	..
Whisky, ..	..	..	..

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Skimmed Milk, ..	..	..	..
Acid, Tartaric, ..	..	..	..
Buttermilk, ..	..	..	..
Butter, Salt, ..	..	..	..
Cocoa, ..	..	..	..
Coffee, ..	..	..	..
Curants, ..	..	..	..
Ginger, Ground, ..	..	..	..
Jam, Raspberry, ..	..	..	..
Lard, ..	..	..	..
Margarine, ..	..	..	..
Mince, ..	..	..	..
Oil, Compound, ..	..	..	..
Tea, Green, ..	..	..	..
Pepper, White, ..	..	..	..
Flour, Mustard, ..	..	..	..
Soda, Baking, ..	..	..	..
Tartar, Cream of	..	..	..
Tea, ..	..	..	..
Vinegar, Malt, ..	..	..	..
Whisky, ..	..	..	..

TEST.			
	Gen.	Adult.	Total.
Nil.	..	..	..
Skimmed Milk, ..	..	..	..
Acid, Tartaric, ..	..	..	..
Buttermilk, ..	..	..	..
Butter, Salt, ..	..	..	..
Cocoa, ..	..	..	..
Coffee, ..	..	..	..
Curants, ..	..	..	..
Ginger, Ground, ..	..	..	..
Jam, Raspberry, ..	..	..	..
Lard, ..	..	..	..
Margarine, ..	..	..	..
Mince, ..	..	..	..
Oil, Compound, ..	..	..	..
Tea, Green, ..	..	..	..
Pepper, White, ..	..	..	..
Flour, Mustard, ..	..	..	..
Soda, Baking, ..	..	..	..
Tartar, Cream of	..	..	..
Tea, ..	..	..	..
Vinegar, Malt, ..	..	..	..
Whisky, ..	..	..	..



# LOCHGELLY AREA. LANDWARD.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	62	2	64		Nil.		
Skimmed Milk, ..	4	..	4				
Acid, Tartaric, ..	1	..	1				
Buttermilk, ..	1	..	1				
Butter, Salt, ..	6	..	6				
Cocoa, ..	2	..	2				
Coffee, ..	1	..	1				
Currants, ..	3	..	3				
Ginger, Ground, ..	1	..	1				
Jam, Raspberry, ..	1	..	1				
Lard, ..	2	..	2				
Margarine, ..	1	..	1				
Mince, ..	4	..	4				
Oil, Camphorated ..	1	..	1				
Peas, Green, ..	1	..	1				
Pepper, White, ..	3	..	3				
Powder, Custard, ..	1	..	1				
Soda, Baking, ..	1	..	1				
Tartar, Cream of ..	4	..	4				
Tea, ..	3	..	3				
Vinegar, Malt, ..	2	..	2				
Whisky, ..	2	..	2				
Total, ..	107	2	109				

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

Fat. per cent.	Non-Fatty Solids per cent.
2.52	8.33
2.76	8.51

## LOCHGELLY BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ..	11	..	11		Nil.		
Certified Milk, ..	1	..	1				
Butter, ..	2	..	2				
Egg Powder Sub- stitute, ..	1	..	1				
Lard, ..	1	..	1				
Margarine, ..	2	..	2				
Mustard, ..	1	..	1				
Pepper, Black, ..	1	..	1				
Pepper, White, ..	1	..	1				
Pickles, ..	1	..	1				
Semolina, ..	1	..	1				
Sugar, ..	1	..	1				
Tapioca, ..	1	..	1				
Tartar, Cream of ..	1	..	1				
Vinegar, White Malt, ..	1	..	1				
Whisky, ..	2	..	2				
Total,, ..	29	..	29				



## DUNFERMLINE AREA.

## LANDWARD.

	OFFICIAL.			TEST.		
	Gen.	Adult.	Total.	Gen.	Adult.	Total.
Sweet Milk, ..	72	3	75	Nil.		
Butter, Salt, ..	2	..	2			
Mince, ...	11	5	16			
Sausages, ..	4	..	4			
Sausagemeat, ..	1	1	2			
Whisky, ..	6	1	7			
Wine, Black Currant, ..	1	..	1			
Wine, Ginger, ..	1	..	1			
Wine, Fruit, ..	1	..	1			
Wine, Raspberry, ..	1	..	1			
Total, ..	100	10	110			

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

Fat. per cent.	Non-Fatty Solids per cent.
1.84	8.96
2.82	8.53
2.92	8.77

## CULROSS BURGH.

	OFFICIAL.			TEST.		
	Gen.	Adult.	Total.	Gen.	Adult.	Total.
Sweet Milk, ..	1	1	2	Nil.		
Butter, Fresh, ..	1	..	1			
Jam, Strawberry, ..	1	..	1			
Peas, Green, ..	1	..	1			
Sausages, ..	2	..	2			
Vinegar, Malt, ..	1	..	1			
Total, ..	7	1	8			

## INVERKEITHING BURGH.

	OFFICIAL.			TEST.		
	Gen.	Adult.	Total.	Gen.	Adult.	Total.
Sweet Milk, ..	10	2	12	Nil.		
Mince, ..	1	..	1			
Total, ..	11	2	13			

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

Fat. per cent.	Non-Fatty Solids per cent.
2.86	8.60
2.45	8.85



## BEATH AREA.

## LANDWARD.

OFFICIAL.				
		Gen.	Adult.	Total.
Sweet Milk,	..	7	..	7
Mince, ..	..	1	..	1
Sausagemeat	..	1	..	1
Whisky,	..	1	..	1
Total,	..	10	..	10

TEST.				
		Gen.	Adult.	Total.
Butter,	..	2	..	2
Margarine,	..	1	1	2
Mince, ..	..	8	2	10
Sausages,	..	4	1	5
Total,	..	15	4	19

## COWDENBEATH BURGH.

OFFICIAL.				
		Gen.	Adult.	Total.
Sweet Milk,	..	12	..	12
Margarine,	..	1	..	1
Mince, ..	..	3	1	4
Sausages,	..	1	1	2
Whisky,	..	..	1	1
Total,	..	17	3	20

TEST.				
		Gen.	Adult.	Total.
Sweet Milk,	..	8	..	8
Mince, ..	..	3	..	3
Sausages,	..	3	..	3
Total,	..	14	..	14

## INVERKEITHING BURGH.

OFFICIAL.				
		Gen.	Adult.	Total.
Sweet Milk,	..	10	2	12
Mince, ..	..	1	..	1
Total,	..	11	2	13

TEST.				
		Gen.	Adult.	Total.
Sweet Milk,	..	10	2	12
Mince, ..	..	1	..	1
Total,	..	11	2	13

The above noted adulterated samples of Sweet Milk contained the follow-

Non-Fatty Solids per cent.	Fat per cent.
8.60	2.86
8.85	2.45



# Fife County Council.

## School Medical Inspection

1931-32

## ANNUAL REPORT

BY

R. A. KRAUSE,

DEPUTY COUNTY MEDICAL OFFICER (WELFARE).



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**I.—(a) NUMBER OF SCHOOLS.**

Primary Schools .. .. .	103
Primary Schools, with Advanced Division (1-2 years course) ..	32
Primary Schools with Advanced Division (3 years course) ..	16
Advanced Division Schools (3 years course) .. .. .	3
Secondary Schools .. .. .	8
<b>Total .. .. .</b>	<b>162</b>

**(b) NUMBER OF CHILDREN ON REGISTER AND IN AVERAGE ATTENDANCE.**

	Fife County.	Dunfermline Burgh.	Kirkcaldy Burgh.
Primary .. .. .	39,872	4,820	5,988
Advanced Division .. .. .	5,121	817	700
Intermediate and Secondary ..	5,159	858	1,080
<b>Total .. .. .</b>	<b>50,152</b>	<b>6,495</b>	<b>7,768</b>
Roll (Total) as at September 1931 .. .. .	..	..	50,161
Average weekly roll to 31st July 1932 .. .. .	..	..	50,152
Average Attendance to 31st July 1932 .. .. .	..	..	45,429
Percentage Attendance .. .. .	..	..	90.58

**II. SANITARY CONDITIONS OF SCHOOLS.**

**HEATING OF SCHOOLS.**—Repeated complaints regarding the insufficiency of the heating arrangements were made by the Area Medical Officer in the case of Collessie, Abdie and Dairsie Schools. In the case of Collessie temperature readings as low as 40°F. were recorded. In the case of Abdie several as low as 42 °and even one as low as 34°F. were reported. It was suggested that paraffin stoves be supplied. A complaint was also made on behalf of the parents of children attending Crail Public School. On inquiry it was found that the main complaint was in connection with the large infant room which faces East. A useful suggestion was made by the local practitioner that the children from the country district should in winter be allowed to have admission to a warm room at midday, also a warm midday meal would be beneficial. New heating schemes were introduced into the following schools :—Milesmark, Mossgreen, Crail, Ceres and Kirkcaldy East Infant Schools.



**WATER SUPPLY.**—A complaint was again made by the Area Medical Officer regarding the school water supply at Moonzie which, being near the roadway, was liable to be contaminated. Inadequacy of water supply was also reported on in the case of Dunbog and New Gilston Schools. In the former the supply is unsatisfactory and sometimes water is only available for an hour or so. In the case of New Gilston the water tank was too small. An extra tank was added during the course of the session.

**LATRINES.**—Overflow from a choked drain was reported by the Area Medical Officer during the winter in the case of Oakley Public School, and the boiler room was flooded. Improved sanitary arrangements were made in the following schools :—Ceres (new septic tank and drainage), Oakley (improvement to drainage). New latrines were completed at the following schools :—Markinch Senior School, Bell Baxter School (Cupar), Waid Academy (Anstruther), and Strathmiglo Public School.

**CLINICS.**—The Area Medical Officer complained of the inconvenience of the Lochgelly School Clinic because of lack of accommodation. Plans for a new central clinic were drawn up but for financial reasons not gone on with.

At Buckhaven School Clinic complaints having repeatedly been made as to the disturbance to the classes by children and parents passing along the passages to the clinic, it was decided to make a new entrance to the waiting-room opening directly on to the playground. By closing the inner end of the waiting room direct communication with the school premises is avoided.

**MISCELLANEOUS.**—A special report on the condition of Strathmiglo School was asked. The Area Medical Officer concluded by stating that “the school as a whole was unsatisfactory in heating, lighting, and general arrangement of the rooms which were also dingy and depressing. I cannot say that the general health of the children appears to have suffered, *but eye strain is frequent amongst them.* I should recommend that the sanitary conveniences for pupils and staff be brought up to date without delay, and that the school be re-planned as early as is possible.”

**ALTERATIONS AND NEW ADDITIONS** were made at the following schools :—Markinch, Bell Baxter (Cupar), Waid Academy (Anstruther), Boarhills and Ceres. At Aberhill Public School a new manual room was added and an army hut erected at Madras College, St. Andrews. At Auchtermuchty accommodation for a Science Room, Manual room and dining-hall was provided in a church. Electric light was introduced into Springfield and Coaltown of Balgonie Schools.



With a view to improving the surface of a number of playgrounds, the following were laid in concrete :—Dunduff, McLean, Ceres, Falkland, Auchterderran H.G., Lochore R.C., Crosshill, Kirkforthar and Leslie H.G. Schools. At Strathmiglo additional playground space was provided.

### III. ORGANISATION AND ADMINISTRATION.

There has been no outstanding change in the re-organisation in the County since last year. A minor change has to be recorded, namely, the areas of St. Andrews and Cupar were amalgamated and placed under the charge of one Area Medical Officer. There are therefore six Area Medical Officers each responsible for one of the following areas :—(1) St. Andrews and Cupar ; (2) Buckhaven ; (3) Kirkcaldy Landward (Burntisland and Markinch) ; (4) Kirkcaldy Landward (Lochgelly, etc.) ; (5) Cowdenbeath Burgh and Dunfermline Landward (Kelty) ; (6) Dunfermline Landward (West Fife).

The work of School Medical Inspection in the two large Burghs, Kirkcaldy and Dunfermline, is carried out by the staff of the Burgh Medical Officers.

In last year's report it was indicated that each Area Medical Officer besides the work under the Maternity and Child Welfare Scheme, is responsible for the work under the School Medical Scheme. In carrying out their work the Area Medical Officers paid 1,273 visits to the schools for the purpose of medical inspection and re-examination. They also made 157 special visits (special inquiries, etc.). In the two large Burghs (Kirkcaldy and Dunfermline) the local medical staff paid 444 ordinary and 15 special visits to the schools.

The Welfare Nurses, who act as School Nurses as well as Health Visitors, along with the District Nurses who in the country districts perform the duties of school nurses, paid 2,442 visits to the schools in the County (Dunfermline Area, 522 ; Kirkcaldy Area, 908 ; North-East Fife, 1,012). At these visits 41,071 children were inspected and re-inspected (Dunfermline Area, 12,021 ; Kirkcaldy area, 20,833, and North-East Fife, 8,217). Of these children there were 3,285 who required following up and this necessitated 3,604 home visits. In the case of Kirkcaldy Burgh the staff made 331 school visits. At these 3,661 children were inspected and re-inspected and of these 181 required to be followed up by 189 home visits. There are no figures available for Dunfermline Burgh.



**TABLE I.—CASES SEEN AT FIRST INSPECTIONS BY NURSES.**

Conditions.	Dun'line Area (L'ward).	Kirkcaldy Area (L'ward).	North- East Fife.	Kirkcaldy Burgh.	Totals.
Head Vermin ..	582	1,610	261	320	2,773
Body Vermin ..	38	53	16	17	124
Ringworm (Scalp)	6	22	6	1	35
Scabies ..	33	69	17	24	143
Uncleanliness or Neglect ..	32	131	120	165	448
Impetigo Con- tagiosa ..	365	532	128	127	1,152
Other Skin Con- ditions ..	79	51	78	22	230
Otorrhoea ..	70	163	17	38	288
Eye Diseases (ex- ternal) ..	186	344	36	108	674
Ear Cases ..	84	34	27	9	154
Nose and Throat Cases ..	142	158	103	2	405
Other Cases ..	972	708	157	94	1,931
Accidents ..	50	24	32	2	108
Advisory Cases ..	43	246	14	22	325
Totals ..	2,682	4,145	1,012	951	8,790

In Table I. the number of conditions found at the first inspection is shown. There is very little change in the figures from last year. Whilst the number of cases of ringworm of the scalp is still lower, the number of cases of scabies has increased more than twofold. Increases in the number of cases (mainly of slight degree) of uncleanliness and neglect and of head vermin show how important it is for the periodic visitation of the welfare nurses to the schools to be maintained. Owing to the increase of duties and the taking over of new districts the school visitations have been curtailed and this has resulted in the above indicated increases.



# **TOTAL NUMBER OF CHILDREN EXAMINED AND INSPECTED BY MEDICAL STAFF.**

	K'caldy Burgh.	D'line Burgh.	K'caldy Land- ward.	D'line Land- ward.	North- East Fife.	Totals.
Entrant Infants ..	957	580	1,848	817	798	5,000
7 year olds ..	721	380	1,130	811	437	3,479
9 year olds ..	784	505	1,722	799	811	4,621
13 year olds ..	640	441	984	824	353	3,242
15 year olds ..	57	97	50	29	40	273
Non-Routines ..	580	1,481	2,128	1,312	1,201	6,702
Totals ..	3,739	3,484	7,862	4,592	3,640	23,317
Re-examinations ..	932	..	1,527	1,213	829	4,501
Special Class Chil- dren ..	..	37	67	61	..	165
Junior 15b Students ..	..	2	1	5	4	12
Number of children seen at Clinics otherwise than for treatment ..	22	..	246	43	14	325
Totals ..	954	39	1,841	1,322	847	5,003
No. of children in- spected and re- inspected by :—						
(a) Whole-time nur- ses ..	6,661	..	19,322	9,893	1,415	37,291
(b) District Nurses ..	..	..	1,511	2,128	6,902	10,541
Totals ..	6,661	..	20,833	12,021	8,317	47,832
Grand Total	11,354	3,523	30,536	17,935	12,804	76,152

## **IV. PHYSICAL CONDITION OF THE SCHOOL CHILDREN.**

The findings of the staff at the School Medical Inspections do not show any marked differences from those obtained last year. The total figures, as summarised, will be found in Appendix III. Despite the financial stringency in the Country there is no outstanding increase in defective clothing or boots. The same is seen as regards nutrition. The number of outstanding cases of malnutrition is much the same as last year. If there is any reduction in the nutrition of the school children, it can only be relatively slight and is spread over the whole community. It is unfortunate that it has again been impossible,



because of insufficient clerical staff, to average the heights and weights obtained by the school staffs. These figures, while not scientifically accurate, do give us a rough but nevertheless useful index of changes in height and weight over a span of years. They can also be used for comparison purposes between areas.

An improvement is to be recorded as regards general cleanliness, and a smaller number of cases of the grosser type have had to be brought before the Medical Officers by the Nurses for the purpose of issuing warnings. Regarding skin conditions, the reduction in the number of ringworm cases is maintained. Whilst the number of cases of impetigo seen by the nurses at their school visits remains up, the immediate attention these cases receive has the effect of keeping down the number of marked cases seen by the Medical Officers. The number of cases of scabies has more than doubled. The percentage of children with defective teeth is about 72. This figure is lower than that found by the dental officers who, however, have the assistance of a mirror and probe to help them at their inspections. The figures for defective hearing apply to those children where both sides were affected. There were 192 children in whom the hearing was only affected on one side—107 right and 85 left. In 23 of these the defect was markedly so (10 right, 13 left). The other conditions do not call for any particular comment.

The figures regarding the number of entrant infants fully vaccinated (1,866) gives the lowest percentage (37) yet recorded at School Medical Inspections in Fife during the past thirteen years. Similarly the percentage for unvaccinated children (52) is the highest. The figure for children with poorly marked vaccination marks is practically 10 per cent.

The following information is based upon the reports of the Area Medical Officers on their findings at the medical inspection during the school session. Unfortunately we sustained a severe loss by the sudden death of Dr. Nisbet, one of the Area Medical Officers (Lochgelly District). This loss of a keen and sympathetic officer deprived me of valuable information regarding his area. Also, staff changes in Cowdenbeath area rather upset the work there. I therefore decided to amalgamate the available figures in the whole of the Kirkcaldy and Dunfermline landward areas.

#### **(A) Children Suffering Educationally because of Physical Defects.**

The children notified under this heading are those who are suffering from some physical defect which acts as a handicap to their educational progress and because of which it might be better if the child were placed in a special class. The number of such cases reported for the different areas was as follows :—



(a) NORTH-EAST FIFE.—Dr. MacLeod reports “A certain number of children still suffer in their education as a result of rheumatism, bronchitis, etc., who would benefit from a sojourn at a residential open air school or at a Convalescent Home. Amongst the cases reported last year was one of severe rickets (reported as needing institutional care). He is now, however, in attendance at the local county school and reported to be making good progress.

“Three cases of extreme absolute deafness were admitted during the past year to an institution (ages four, five and six years). The six-year-old child had been previously normal, his deafness being the result of an attack of meningitis at five years. A fourth case is a child of three years.”

It is not generally known that it is of the utmost importance in the case of normal intelligent deaf children that they should receive special education at as early an age as possible. By so doing he may learn to vocalise, but, as important is also, the fact that he can thus be taught to acquire knowledge of even a limited vocabulary. Normal hearing children acquire this automatically when they hear their relations speaking to them. The deaf child is deprived of this advantage and therefore starts schooling with a distinct handicap. Should the parents decide to apply to the Education Committee for the early admission to an Institution for the Deaf, it is hoped the request will be favourably entertained.

An educationally blind child was discovered. By the transfer of his child to relatives in Kirkcaldy, it is possible for him to receive instruction under more suitable conditions. Other border line cases mentioned in last year's report are being kept under observation and brought forward for periodic re-examination by the Eye Specialist.

(b) KIRKCALDY LANDWARD.—In addition to the children mentioned in last year's report, there were the following cases brought under supervision :—3 boys with marked crippling defects, 1 boy and 3 girls who are frequently absent because of a marked bronchitic condition, 3 boys with definite stammering defect, 3 congenital and 9 organic heart conditions, 3 markedly deaf (2 girls and 1 boy), and 3 educationally blind children (2 girls and 1 boy), as well as a bleeder, two epileptic cases and others.

(c) DUNFERMLINE LANDWARD.—Here the number of new cases coming under observation is as follows :—Crippling condition 4 ; Cardiac 2 ; Chest 4 ; Deafness 1 ; and Educationally blind 3.

(d) KIRKCALDY BURGH.—“Two boys were found to be suffering educationally because of physical defect, and one boy and two girls because of visual defect.”

(e) DUNFERMLINE BURGH.—*Nil.*



**(B) Number of Children suffering in their Education because of Mental Retardation.**

(a) NORTH-EAST FIFE.—“The mental survey of the area is not yet complete, but it is believed that there are about 65 children in the district who are suffering in their education by reason of mental defect or extreme mental backwardness, and who would benefit from special school instruction.” Arrangements are being made to start a special class for mentally retarded children in Cupar and the immediate surrounding district, at the beginning of the next session.

(b) KIRKCALDY LANDWARD.—In this area there were 18 cases reported as so mentally retarded to be transferred from ordinary to Special Classes.

(c) DUNFERMLINE LANDWARD.—Nine cases of marked mental retardation were reported upon.

(d) KIRKCALDY BURGH.—“Sixteen boys and ten girls were examined because of mental defect, and of them eight boys and four girls were recommended to be transferred to Special Classes at the North School.” “One girl (a Mongol aged 7 years) who has not yet been to school, was examined and considered incapable of benefitting from education, even in the Special Classes. Her parents were therefore advised not to send her to school at present.”

(e) DUNFERMLINE BURGH.—“Special Reports were submitted on eleven children with mental defects for whom special class education is desirable.”

**(C) Number and Condition of Children suitable for Institutional Treatment.**

(a) NORTH-EAST FIFE.—“In addition to those already in Institutions, 15 children are known who are either now in need of Institutional treatment, or are likely to require such treatment in the future.”

(b) KIRKCALDY LANDWARD.—Fifteen children were reported as being suitable cases for admission to an institution. They were all cases of mental deficiency.

(c) DUNFERMLINE LANDWARD.—Seven cases were stated to be Institution cases.

(d) KIRKCALDY BURGH.—One case was considered to be suitable for Institutional treatment owing to infantile paralysis. He was sent to Edinburgh for operative treatment. Another case was recommended for admission to a Blind Institution. His low mental development however, prevented his case being considered for such an Institution.

(e) DUNFERMLINE BURGH.—*Nil.*



**(D) Number of Children who are suffering in their Education because of lack of (i) Nutrition and (ii) Clothing.**

(a) NORTH-EAST FIFE.—(i) Thirty-eight boys and eighteen girls were brought forward because they were thought to suffer in their education because of malnutrition. Of the total 17 boys and 6 girls received a malt preparation at school; in the case of 16 boys and 6 girls, the parents or guardians were advised to provide extra nourishment at home. The District Nurses provided cod liver oil and malt to be taken at school in the case of two boys and 4 girls. One girl received cod liver oil under the Tuberculosis Scheme. In the case of only one girl was milk provided at school by the School Management Committee. Several children were given milk in Castlehill and Kirkgate Schools between April and June of this year, a supply being provided by a private donor.

(ii) No children were found to be suffering in their education because of lack of clothing. One girl was found to be definitely underclad however. This was remedied after a visit by the nurse. "Two children were found to suffer educationally as a result of defective foot-gear. This was reported to the Clerk to the School Management Committee and boots were provided to the children."

(b) KIRKCALDY LANDWARD.—(i) In Buckhaven District "a great many children showing signs of slight malnutrition rather than lack of nourishment were found. In this area 130 children received a malt preparation during the session. Nearly all of these have shown signs of improvement and the teachers are almost unanimous in reporting improvement in the scholastic ability of such children. I feel that in many cases had not the special malt preparation been given the children would have fallen to a lower level of nourishment and would probably have been recommended milk or other feeding at school."

In the other part of the area about 105 pupils were given special malt preparation. Nineteen cases were put on a supply of milk (one pint daily) on school days.

In Lochgelly-Glencraig District 42 children were put on a daily ration of one pint of milk. This was given on school days only. These cases all showed definite improvement as a result of the special feeding.

In connection with malnourishment the Buckhaven Area Medical Officer made a special investigation. He reports "I made a special investigation in my schools during April. A class to class inspection was carried out and any child lacking nourishment or referred to me by the teacher or nurse was picked out and more carefully examined later." In the special report it was shown that "in my area some 433 children were found with signs of malnutrition and it was recommended that a daily ration of milk would do much to improve the physique of these children." The same officer in co-operation with the Area Medical



Officer in Lochgelly District carried out an investigation in Glencraig and Crosshill Schools and he reports "There I found 77 children (Glencraig) and 39 (Crosshill) showing signs of malnutrition. It is interesting to note in this connection that unemployment did not play as big a part as one would expect, the number of malnourished children whose fathers were unemployed being only slightly greater than those whose fathers were employed. With a large family, a father employed is not much better off than when on the Dole."

(ii) In Buckhaven district no children were found to suffer from lack of clothing. Several cases were found to have insufficient clothing for the time of year but matters were remedied after a home visit by the nurse.

In Burntisland-Markinch District three cases were found where clothing had to be supplied by the School Management Committee.

In Lochgelly district at least 57 cases were referred to the Medical Officer by the Headmasters. In only four cases was no additional clothing certified as necessary.

(c) DUNFERMLINE DISTRICT.—(i) In Cowdenbeath District several cases were seen where nutrition was certainly below par but in no case was there any evidence to prove that the child was suffering in its education.

In the West of Fife District four boys and six girls were supplied with milk at school and 16 boys and 18 girls were given special malt preparation. All these children have definitely improved physically with the exception of three children who were under observation for tuberculosis and have since gone to the Sanatorium.

(ii) In Cowdenbeath District one boy and a girl were found attending school with inadequate foot-gear. This was, however, remedied when representations were made to the parents. No child suffering educationally because of lack of clothing was seen by the Area Medical Officer.

In West of Fife District no children were found suffering in the education because of lack of clothing. Two boys who were suffering from lack of boots had these supplied later on by the parents after they had been refused by the School Management Committee.

(d) KIRKCALDY BURGH.—(i) Three boys and one girl were found to be suffering in their education because of lack of nutrition. These were advised to attend the Dispensary where suitable arrangements were made as to supplying them with additional nourishment. A family (three girls) was reported by the Attendance Officer as not being looked after and there was no food in the house. On inquiry it was found that the children were quite well nourished and were being fed in a satisfactory manner.



(ii) Applications for clothing were received from the parents of 42 boys and 32 girls. One or more articles of clothing were recommended to be supplied in the case of 34 boys and 22 girls.

(e) DUNFERMLINE BURGH.—(i) and (ii) No children were found to be really suffering in their education because of lack of nutrition or clothing. The homes of children requiring nourishment or clothing were visited. Nourishment was obtained through the Carnegie Clinic or the Public Assistance authorities. The latter also provided clothing and foot-gear. The clothing of four, the foot-gear of 27 and the state of nutrition of 24 children required immediate attention and improvement was noted in all cases.

### **(E) Children Suspected to be Suffering from Neglect.**

During the past year a number of cases where the children were being neglected were again dealt with by the Medical Staff. In North-East Life District four such families required the attention of the Area Medical Officer and the Inspector of the R.S.S.P.C.C. One case was eventually transferred to a Convalescent Home where it is hoped that its condition will definitely improve. In another case the child was supplied with extra nourishment at school. She has improved greatly in appearance but will require further treatment next session. In a third case the attendance of the boy has been very unsatisfactory and he has been absent frequently without a medical certificate. In this case the parents were warned at Court and it is hoped that an improved attendance will result. The fourth case is an old standing one which has been under observation for a considerable number of years, both by the Medical Officer and the Inspector of the R.S.S.P.C.C. In Buckhaven District no new cases of neglect have arisen and the old cases are constantly kept under supervision and all have shown some improvement. There was one case of technical neglect where twin girls were suffering from large tonsils and adenoids along with otorrhoea but for which condition nothing was being done. A warning letter had the necessary effect and adequate treatment was carried out.

In Burntisland-Markinch District four families required supervision or neglect. In one case the Sanitary Inspector had to be called in and in another the Inspector for the Prevention of Cruelty to Children. In all these cases a definite improvement eventually resulted.

In Lochgelly District there were several families requiring the attention of the Medical Officer and the Inspector of the R.S.S.P.C.C. Some improvement has here also resulted from constant supervision.

In Cowdenbeath District one family caused some trouble to the staff and the R.S.S.P.C.C. Inspector had to be called in. Whilst an improvement took place it is too early to state whether it is likely to be permanent.



In the West of Fife there were three families requiring the repeat attention of the Area Medical Officer and the assistance of the Inspector of the R.S.S.P.C.C. was requested. In two of the families prosecution followed.

In Kirkcaldy Burgh three children were suffering from neglect. They were all found to be suffering from scabies and one girl from head vermin. Steps having been taken to ensure that these children attend the School Clinic, no further measures were found to be necessary.

**(F) Total Number of Children whose visual acuity was Inspected (Routine and Non-Routine Cases) and the number found with Defective Vision.**

(a) NORTH-EAST FIFE.—The Area Medical Officer reports that 8 boys and 1,016 girls were inspected and as a result of this inspection 142 boys and 177 girls were referred to the Eye Clinics for a more thorough examination and it was found that 116 boys and girls had to be referred to the Specialist for his special opinion. In no cases did the parents persistently refuse to have the eyes examined, except in regard to one or two children whose vision was normal but who had complained of eye symptoms. On visiting the homes the nurses found that the children had never complained of any symptoms. Probably a desire for glasses had caused these children to consult the doctor.

(b) KIRKCALDY DISTRICT.—In Buckhaven District 1,536 children were inspected at routine examination and 173 at Non-Routine. Of these 141 were referred for examination at the Eye Clinic. Subsequently 50 of these had to be referred to the Eye Specialist for his opinion. The number of children whose parents refused examination was seven. Three of these have had their eyes tested privately and are now wearing glasses. The other four will be seen again next session and inquiry made as to whether examination has been carried out.

In this district the Area Medical Officer carried out colour vision tests of 235 boys and 75 girls. These were all in the Advanced Division. Five boys were found with complete colour blindness for green and red and one case was found with partial colour blindness. No colour defect was found amongst the girls examined.

In Burntisland-Markinch District 1,411 boys and girls were inspected at routine and non-routine examinations. Of these 95 boys and 12 girls were referred to the Eye Clinic for more detailed examination and 24 cases were referred to the Eye Specialist. Only in one case did the parents refuse, after repeated notification, to have the child examined at the clinic, the explanation given being the difficulty the mother has of going with the child to the Eye Clinic. A young family and the distance from a bus were given as reasons. She has, however, promised to send the child with a neighbour to the Eye Clinic.



Over one thousand children were examined in Lochgelly District and considerable number of these were referred to the Eye Clinics. In Bowdenbeath District 959 children were inspected and 98 were referred to the Eye Clinic. None of the parents refused to have the children examined. Twelve children were referred to the Eye Specialist.

In West Fife 1,230 children had their eye-sight tested and 148 were referred for further examination at the Eye Clinic. Of these 25 were placed before the Eye Specialist for his opinion. Two parents refused, but after being interviewed they both agreed to the examination being carried out. A number of boys in this district were examined for colour vision and one boy was found to have defective colour vision.

In Kirkcaldy Burgh the total number of children whose eye-sight was inspected was 1,271 boys and 1,293 girls. Of these 271 boys and 47 girls were referred for examination at the Eye Clinic. In the case of 10 boys and 14 girls the parents refused in writing, after repeated intimations, to have the children examined. Home visits were carried out and the parents advised of the advantage of an early examination and treatment. In many other cases the parents promised to have their children's eyes attended to but failed to fill up the necessary cards. In other cases the children were taken to the Family Doctor or to an optician who prescribed glasses.

The number of children inspected for their vision in Dunfermlineburgh was 1,425 routine and 1,481 non-routine cases. Parents who refused where the visual defect was marked allowed the examination after persuasion.



TABLE II.—EYE CASES EXAMINED BY SCHOOL MEDICAL OFFICERS.

	Dunfermline District.	Kirkcaldy District.	North-East Fife.	Kirkcaldy Burgh.	Dunfermline Burgh.	Totals.
Cliniques held ..	54	54	26	34	40	208
No. of cases examined ..	315	409	192	165	216	1,297
No. of those re-examined ..	28	48	1	8	48	133
Hypermetropia ..	147	177	71	50	111	556
Myopia ..	25	34	9	16	40	124
Hypermetropia Astigmatism ..	62	134	47	65	52	360
Myopia Astigmatism ..	16	32	16	18	4	86
Mixed Astigmatism ..	10	10	6	11	5	42
Anisometropia ..	1	11	36	1	2	51
Both Eyes Emmetropic ..	12	4	4	3	..	23
Spasm of accommodation ..	1	..	6	7	..	14
Irregular Refraction ..	..	..	1	..	..	1
No. with squints ..	52	136	50	38	28	304
Nystagmus ..	2	4	1	1	4	12
Corneal Ulcers ..	3	3	..	..	..	6
Corneal Nebulae ..	5	15	6	3	3	32
Bleph. and Conjunctivitis ..	24	10	6	8	5	53
Other Conditions ..	3	2	5	2	..	12



TABLE III.—OPHTHALMIC EXAMINATIONS OF FIFESHIRE SCHOOL CHILDREN UNDER THE FIFE COUNTY COUNCIL BY SPECIALIST.

No. of Cliniques	County.		Kirkcaldy Burgh.		Dunfermline Burgh.		Totals.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
No. of Eye cases Examined ..	108	124	23	25	7	5	138	154
No. of these Re-examined ..	12	18	7	6	4	3	23	27
No. Absent ..	17	15	1	3	..	..	18	18
Hypermetropia ..	26	29	2	..	2	1	30	30
Myopia ..	18	19	4	3	1	2	23	24
Hyper. Astigmatism ..	25	20	9	10	..	..	34	30
Myopia ..	21	28	1	7	..	..	22	35
Mixed ..	4	7	4	3	1	1	9	11
Anisometropia ..	11	10	1	..	1	1	13	11
Both eyes Emmetropic	1	5	..	..	..	..	1	5
Spasm of Accommodation ..	3	1	1	..	..	..	4	1
Irregular refraction ..	2	2	..	..	..	..	2	2
Squints ..	18	14	3	3	..	..	21	17
Nystagmus ..	4	5	..	..	..	..	4	5
Corneal ulcers ..	3	5	..	..	..	..	3	5
Corneal nebulæ ..	7	13	3	1	1	..	11	14
Bleph. and Conjunct. ..	1	3	..	..	..	..	1	3
Educationally Blind ..	6	5	1	2	..	..	7	7
Other conditions ..	9	7	1	3	5	..	15	10



(g) **Number of Cases of Children in whom defects of the Ear, Nose and Throat were found.**

No Specialists Clinics were arranged for. The various changes in the staff in the districts as already mentioned were largely responsible for this. The number of cases found by the Medical Officers and referred to the General Practitioners or treated at the Clinic still remain relatively high. Eighty cases were found at routine inspections and 90 were brought before the medical officers at non-routine inspections. In Lochgelly district six cases were treated with anti-virus (produced by the Glaxo Company). In two of these cases, after four weeks treatment, the otorrhoea was apparently cured. In the other four there were definite signs of the condition improving, the discharge becoming watery and scanty in amount and entirely free from smell. This form of treatment is to be applied in other districts with a view to determining whether this form of treatment is really as useful as it appeared in these cases.

(h) **Number of Children with Crippling Ailments.**

From the following table it will be seen that the staff found thirty new cases and there were ninety-nine old cases from last year being kept under supervision. The total figure probably should be higher but owing to the death of Dr. Nisbet, we were not able to get complete and correct figures for his district.

TABLE IV.—CRIPPLING AILMENTS (New Cases).

District	Severe Rickets	Tuberculosis—Lesions of Bones and Joints	Tuberculosis—Lesions of Spine	Poliomyelitis Anterior Acute of Crippling Degree	Congenital Deformities of Crippling Degree	Other Crippling Ailments	Totals
Kirkcaldy District ..	..	2	..	3	..	1	6
Dunfermline District ..	..	..	..	2	4	9	15
North-East Fife ..	..	..	..	..	..	1	1
Kirkcaldy Burgh ..	..	..	1	1	..	..	2
Dunfermline Burgh ..	1	1	..	2	1	1	6
Totals ..	1	3	1	8	5	12	30
Old Cases ..	12	9	5	25	21	27	99

**V. SPECIAL SCHOOLS AND CLASSES.**

There is nothing new to report under this heading. The only changes have been in some of the staff of the special schools and the Committee again agreed to send three more teachers for training as teachers of mental defectives to the Glasgow Centre.



As a result of certain difficulties it has been decided that next session the special classes at Rosyth should be transferred to the Centre at Dunfermline and in order to find the necessary accommodation the special classes at Pittencrieff are to be transferred to McLean School where there will be sufficient accommodation to house the four special classes.

TABLE V.—(a) MENTALLY AND PHYSICALLY DEFECTIVE CHILDREN IN SPECIAL CLASSES.

Class.	Number on Roll Sept. 1931.	Number Ad- mitted.	Number Dis- charged.	Number on Roll July 1932.
Cowdenbeath, etc., District :				
(a) Crossgates P.S. — 4 Special Classes ..	48	7	5	50
(b) Lochgelly East P.S. — 1 Class .. ..	16	6	8	14
Kirkcaldy District :—				
(a) North School — 3 Special Classes ..	46	8	3	51
(b) Myopic Class — East School, Kirkcaldy ..	10	3	3	10
(c) Auchterderran East P.S. —1 Class .. ..	17	2	2	17
Wemyss and Leven District :				
(a) Methilhill P.S. — 3 Special Classes ..	63	13	17	59
Dunfermline District :—				
(a) McLean P.S. — 2 Special Classes ..	28	11	7	32
(b) Park Road, Rosyth — 1 Special Class ..	11	..	2	9
Markinch District :—				
(a) Leslie East P.S. — 1 Class .. ..	8	13	7	14
Torryburn District :—				
(a) Culross P.S.—1 Class	14	..	1	13
Totals .. ..	261	63	55	269



TABLE V.—(b) MENTALLY AND PHYSICALLY DEFECTIVE CHILDREN  
IN INSTITUTIONS AND HOMES.

Institutions.	Number on Roll Sept. 1931.	Number Ad- mitted.	Number Dis- charged.	Number on Roll July 1932.
Baldovan (M.D.) .. ..	6	..	1	5
Larbert (M.D.) .. ..	4	..	..	4
Rosewell Institution, Mid- lothian (M.D.), (R.C.) ..	1	..	..	1
Waverley Park Home, Kirk- intilloch (M.D.) .. ..	..	2	..	2
Royal Blind Asylum, Edin- burgh .. ..	11	1	5	7
Donaldson's Hospital, Edin- burgh (Deaf) .. ..	15	2	2	15
Edinburgh Institution (Deaf)	6	4	1	9
Dundee Institution (Deaf)	4	2	..	6
Dundee Institution (Blind)	6	..	1	5
St. Vincent School, Glasgow (Blind and Deaf) .. ..	1	..	1	..
East Park Home for Infirm Children, Glasgow .. ..	2	..	1	1
Lauder Road Home, Edin- burgh (Cripples) .. ..	2	2	..	4
Under Blind Persons' Act, 1920— Royal Blind Asylum- Edinburgh .. ..	10	3	1	12
Totals .. ..	68	16	13	71

## VI. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE OF CHILDREN.

In last year's report it was indicated that as a result of an extensive inquiry a number of improvements were urgently required if Physical Education was to play its part in the school life of the children. The appointment of Mr. A. W. George as Supervisor of Physical Education has paved the way for these improvements to be effected. During the past winter Mr. George has had to devote the greater part of his time making a survey of the various aspects of physical education. When his report is carefully read it will be seen that he has been able to cover a considerable amount of ground.

In his report he refers to the importance of the gymnasium floor and makes certain recommendations. The second one refers to the wearing of "gymnastic shoes or suitable footgear." In certain areas the parents have enough difficulty to supply ordinary boots and it would be a definite boon if "special" shoes were kept at the school for gymnastic purposes.



The Staffing arrangements were also inquired into and definite changes which will bring about a more equitable distribution of staff are under consideration.

He also refers to the importance of organised games, the need for more "playing" fields and play-centres. His suggestion that "schools could be opened for two hours on certain evenings during the winter months and leaders secured" is worth careful consideration. It must also be pointed out that the District Councils of the County Council ought to consider the provision of ground for recreation purposes wherever a new building scheme is contemplated. By this means the increasing dangers of fast moving traffic to children playing on the highways would be considerably reduced.

### Report by the Superintendent of Physical Training.

In order to secure information relative to the standard of physical training, staffing arrangements and requirements, and the difficulties with which teachers had to contend a survey of the County was completed. Many facts came to light and some of these will be dealt with in this report.

The conditions under which the gymnastic training of the pupils was carried on are as follows :—

#### *Group A (Good).*

##### *Schools.*

Gymnasia, .. ..	30
Central Hall, .. ..	44
Hut, .. ..	1
Private Hall, .. ..	1
	—
	76
	—

#### *Group B (Fair).*

##### *Schools.*

Classroom (spare),	26
--------------------	----

#### *Group C (Poor).*

##### *Schools.*

Corridor (narrow), .. ..	3
No Provision, .. ..	56
Hall, .. ..	1
	—
	60
	—

Included in Group C are 11 medium-sized schools, two very large schools and 4 Higher Grade Schools.

If any huts are available, these could be used to advantage by Oakeld and Tayport H.G. Schools and also by Foulford and Abbotshall schools.



Greater care should be taken of gymnasias floors. Apart from the economical aspect which is well worth consideration, the floor is the most used and most valuable piece of apparatus in a gymnasium. To prevent serious injury to pupils through splinters entering their bodies, it is of the utmost importance that the surface of the floor should be preserved. In view of this it is recommended that :—

(a) A gymnasium should not be used for any purpose other than a gymnastic lesson unless the floor is covered with sail cloth or some other substitute.

(b) All pupils taking part in a gymnastic lesson wear gymnastic shoes or other suitable footgear.

A central hall in use as a gymnasium presents a very difficult problem. Some schools endeavour to preserve the centre by insisting on pupils keeping to the sides of the hall. The provision of a linoleum strip might be a feasible solution.

A planing machine, purchased by Aberdeen Education Committee, proved of service in keeping the floors in good condition.

It is not necessary nor desirable to have the gymnasium in a separate building. In secondary schools, separate dressing rooms for boys and girls have been provided. By combining the two a much more useful size of dressing room would have been evolved. This also applied to spray baths.

Through the generosity of the Dunfermline Education Authority, gymnastic equipment is much more modern and plentiful in the West than in the East side of the County. Having regard to actual requirements, many of the gymnasias are over-equipped and it would be economical as well as advantageous to transfer some of the surplus apparatus. This could be done without lowering the standard of the training in these schools and would lead to an advancement in the work in less fortunate schools where the beams are unwieldy and unsafe. It is considered desirable that all schools in which there are two or more post-qualifying classes should be provided with gymnastic apparatus.

It is hoped that some day every village school will have a gymnasium and a certain amount of apparatus for use during and after school hours. Some playgrounds are not in a suitable nor a safe condition for physical training or games. As playgrounds form the only "open spaces" in many villages and towns, it is considered desirable that, in the interests of the children, during the summer months, these playgrounds should be open for a specific period each evening. If provision for this is to be made, it might be possible for Town or District Councils to share in improving conditions.

The staffing arrangements required to be revised. In primary schools the visits to classes varied from once a week to once in six weeks. In some schools post-qualifying classes were being taken by class teacher



while specialist teachers were being confined to primary classes. This was the reverse of what should have been and did not lend itself to the best results being obtained nor to the best use being made of apparatus.

Regarding the teaching of physical training in primary schools, the lack of a uniform scheme in common with the fact that the instruction was not always systematic did not lead to efficiency. The time devoted to the subject varied and still varies considerably. The recommendations, at present awaiting consideration, if approved, will put an end to an unsatisfactory state of affairs.

In Advanced Division and Secondary departments, owing to the absence of schemes of work, the standard of training, in many cases, was not as good as it should have been. Team work, one of the most important developments in physical education, was not being used to advantage. The value of posture training as an essential part of the work was being overlooked. Some of the classes were receiving neither gymnastic training nor games. In two schools, post-qualifying and post-intermediate classes were receiving two hours of physical training and games per week. In comparison with other schools, the ordinary class work was not affected by the fact that two hours per week were given to physical training.

Organised games are of equal importance to all pupils whether attending rural schools or town schools. Apart from the obvious health value, physical education, through organised games, is the one "school subject" which inculcated in a very simple way the spirit of justice, loyalty and co-operation. While it cannot be denied that games taking place outwith school hours serve a useful purpose, they can never take the place of games carried on as part of the curriculum. In the former, only a selected few are engaged, while in the latter every child, weak or strong, skilled or unskilled, takes part.

In the course of the survey it was found that 118 schools had playing fields or open spaces at their disposal, but it was noted with regret that 50 of the schools concerned were not using these places. In some cases boys were taking part in games while girls were being denied the same privilege. Cases were observed where the games were not receiving adequate supervision. It is the part played by the teacher which makes the games period have a moral and an educational value.

There are 18 villages in which children are without facilities for games during or after school hours. In these places suitable playing fields would be of service to the community as well as to pupils. Local Committees might be asked to approach the National Playing Fields Association or the Carnegie United Kingdom Trust for financial assistance. Subject to certain conditions a grant equal to one-sixth of the total outlay is given.



Playing fields are urgently required in Cowdenbeath, Buckhaven and Methil. It is not a question of one football pitch being provided in each place but rather a question of securing sufficient ground in each area to enable several pitches to be available. In connection with public playing fields, it should be noted that in industrial areas it is sometimes difficult for children to get the use of grounds even during school hours.

There is no doubt that the money meantime devoted to the provision and upkeep of games equipment could be spent more economically and much more advantageously if all equipment were purchased by the Education Committee instead of by individual schools.

In conclusion, a plea is put forward for the provision of play-centres. If schools could be opened for two hours on certain evenings during the winter months, and "leaders" secured, not only would the children be removed from the dangers of the streets, but they would be able to play and to work in the warmth and brightness of the schools.

TABLE VI.—SPRAY BATHS IN SCHOOLS.

(a) NUMBER OF ATTENDANCES.

School.	Term I.	Term II.	Term III.	Total.	1931.
Park Road P.S., Rosyth ..	40	14	53	107	179
Crossgates P.S., Ordinary Classes .. ..	289	157	205	651	584
Crossgates P.S., Special Classes .. ..	125	95	110	330	451
Kirkcaldy North School (Special Classes) ..	62	51	83	196	110
Kirkcaldy High School ..	689	365	..	1,054	2,000
Methilhill P.S. (Special Classes) .. ..	181	233	191	605	313
Methilhill P.S. (Ordinary Classes) .. ..	189	127	185	501	531
Moss-side P.S. .. ..	..	..	..	..	..
Totals .. ..	1,575	1,042	827	3,444	4,168

(b) NUMBER OF CHILDREN.

Park Road P.S., Rosyth .. ..	107
Crossgates P.S. (Ordinary Classes) .. ..	71
Crossgates P.S. (Special Classes), .. ..	44
Kirkcaldy North School (Special Classes) .. ..	17
Kirkcaldy High School, .. ..	213
Methilhill P.S. (Special Classes) .. ..	60
Methilhill P.S. (Ordinary Classes) .. ..	195
Moss-side P.S. .. ..	..
Totals .. ..	707



There has been a slight reduction in the number of children taking pray Baths as compared to the previous years. A larger number could be interested in this if it could be arranged for the "bathing" to take place in school hours.

The transfer of the special classes from Pittencrieff Public School to McLean Public School necessitated new arrangements being made for the provision of bathing facilities for the children of the special classes. The Carnegie Dunfermline Trust were approached and kindly agreed to grant bathing facilities for the children at Baldridgeburn Institute on condition that satisfactory arrangements were made for their attendance and supervision.

## VII. MOTHERCRAFT CLASSES.

These classes were continued again this past year at various selected centres and were, with one exception, held with one of the County whole-time nurses in charge.

In order to carry out the work as efficiently as possible here, it was decided that two nurses should be responsible for these classes, one in the West and one in the East, the total time for this purpose being the full time of one nurse. The two nurses chosen were Nurse A. M. O. Wilson and Nurse M. M. Petrie. Nurse Wilson was in charge of this work during the summer session of 1931.

In order to cut down the travelling time and to include as many schools as possible, it was thought advisable for Nurse Wilson to take over the classes in Viewforth and High School, Kirkcaldy, as well as the advanced divisions of Aberhill, Denbeath and Leven Public Schools. In consequence of this change the classes of which Nurse Wilson was in charge at Moss-side School were handed over to Nurse Petrie who, along with these, also started mothercraft classes in Queen Anne School, Dunfermline, Inverkeithing Public and Lochgelly H.G. Schools. To begin with she also had a class in Auchterderran H.G. School but the time spent in travelling and the fact that one of the teachers in the Advanced Division was able to take over the teaching of the mothercraft classes made it advisable for Nurse Petrie's services in this school to be discontinued.

Along with the classes already mentioned, Nurse Petrie also made arrangements to take over the classes in the R.C. High School, Cowdenbeath. Unfortunately, owing to various difficulties, the classes in this school were not held regularly and finally had to be discontinued. It is hoped, however, that with the new Headmaster, new arrangements will be able to be made.

The syllabus which had been drawn up at the beginning of the year was found to be rather ambitious and as a result of the experience gained, it has been drastically overhauled and a new syllabus drawn up in which the practical instruction will be considerably increased.



## VIII. ARRANGEMENTS FOR FEEDING SCHOOL CHILDREN.

### Statement of Expenditure on Meals and Clothing for the year ended 15th May, 1932.

Apparatus, .. .. .	£19 : 19 : 7
Meals, .. .. .	270 : 15 : 8
Boots and Clothing, .. .. .	5622 : 1 : 0
Expenditure on Meals—Non-necessitous,.. .. .	1211 : 7 : 7
Total, .. .. .	£7124 : 3 : 11

## IX. ARRANGEMENTS FOR MEDICAL TREATMENT.

### (a) Minor Ailments.

(a) ST. ANDREWS AND CUPAR DISTRICT.—The Cupar Clinic is still used by the Headmaster, but it is hoped that with the school re-arrangements following upon the completion of the new Bell-Baxter School the clinic rooms will be available for school clinic purposes.

The St. Andrews Clinic is too small for a centre of this size and has no proper waiting room.

In Anstruther there is no clinic an old staffroom being used for medical and dental work. It is hoped that a proper clinic is to be provided in the near future.

(b) KIRKCALDY DISTRICT (LANDWARD).—For the Buckhaven and Leven area, Dr. Chisholm reports, “The general clinics run in my area continue to serve a useful function. The number of cases of impetigo, I think, is extremely small for the number and type of school population. I have seen very few cases of anything like a severe kind. The impetigo cases are caught early and treated so that the incidence of contagion is small and absenteeism reduced to a minimum. The general cleanliness of the children is good and steadily improving. Mothers are encouraged to come to the clinics to see the doctor about anything and many mothers have availed themselves of this opportunity. “A new method of treatment of otorrhoea has been carried out in my area, namely, instillation of Antivirin. As this has only been during the summer term, it is yet too early to decide its value. So far the results have been good, though not so good as was at first anticipated, many of the cases which first responded to the treatment subsequently relapsing.” “Ionisation was carried out in five cases before we commenced the Antivirin treatment. I got no satisfactory results. One case that completely dried up relapsed a month or two later. The other cases showed some improvement in that the discharge was lessened. All the cases were long standing ones in which other forms of treatment had been tried without success.”



Burntisland Clinic is reported upon by the Area Medical Officer as being poorly lit and artificial lighting often having to be resorted to. 'There is no waiting-room other than a stone corridor and in winter it is not too comfortable.' The Clinic is well attended by the school children.

The drawback about Markinch Clinic is the fact that it is practically only attended by children from the local school. The children from the surrounding schools rarely come because of the bus fare.

The Lochgelly Clinic consists of one room which has to be used for a general clinic, for dental and artificial sun-ray treatment, as an eye clinic and for medical inspections and consultations. Apart from a congestion of apparatus it is impossible to timetable freely and the consequence is that the staff cannot carry out their work as efficiently as one should like, especially in an area of the size and importance this Clinic has to serve.

(d) DUNFERMLINE DISTRICT (LANDWARD).—In Beath Area, the Area Medical Officer reports that the amount of time devoted to the general clinics (2) is adequate.

The West of Fife Area has three clinics which are sufficient for the purpose, generally speaking, with the exception of Saline-Wellwood section. The Area Medical Officer reports that "the majority of the cases treated at the school clinics were impetigo, otorrhoea, blepharitis and septic sores. These all improved or cleared up under treatment. There was an increase in the number of scabies cases. This is partly due, I think, to overcrowding and sub-letting in Valleyfield area."

TABLE VII.—TOTAL CLINIC TREATMENTS (FIFE COUNTY).

Condition.	Total.	
	Cases.	Attendances.
Clinics Visited . . . . .	1,468	
Head Vermin . . . . .	34	152
Body Vermin . . . . .	..	..
Ringworm (Scalp) . . . . .	21	808
Scabies . . . . .	55	271
Uncleanliness or Neglect . . . . .	12	23
Impetigo Contagiosa . . . . .	1,152	8,943
Other Skin Conditions . . . . .	121	1,390
Otorrhoea . . . . .	417	9,378
Eye Disease (Ext.) . . . . .	652	8,695
Ear Cases . . . . .	296	1,147
Nose and Throat Cases . . . . .	40	547
Other Cases . . . . .	6,532	21,270
Accidents . . . . .	163	444
Advisory Cases . . . . .	252	147
Totals . . . . .	9,747	53,215



The total number of cases treated and the total number of attendances made in the Clinics in Fife (County) is given in Table VII. Whilst the number of cases treated has increased, the number of attendances made is very slightly less than last year.

In Appendix II. the figures are given as to the number of cases (*a*) and attendances made (*b*) at the various school clinics in the County of Fife and also in the two large Burghs (Dunfermline and Kirkcaldy). In Dunfermline treatment is carried out by the medical staff of the Carnegie Dunfermline Trust in two clinics—the central clinic at Inglis Street for the school children of the old Burgh, the Rosyth school clinics for the children in Rosyth or new Burgh area. In Kirkcaldy the Clinics (4) are under the charge of the Burgh Medical Staff.

The number of cases and attendances are totalled for each clinic and below this figure is given the total for the previous year. From these tables (*a* and *b*) will be seen that the total number of cases treated and the number of attendances made have increased when compared with the previous year's figures.

#### (b) Dental Treatment.

In last year's report it was pointed out that owing to the vacancy, created by the resignation of one of the dental attendants, not being filled, the Area Dentist for the North-East of Fife is definitely handicapped. The filling of this post was postponed again and again for various trivial reasons and the work of the dentist affected accordingly. As it is important that County Councillors should understand how a dental attendant helps the dentist to do more dental work—experience has shown a 50 per cent. increase—the duties of a dental attendant are here recapitulated :—(*a*) clerical ; (*b*) nursing ; (*c*) dental :—

(*a*) The attendant is responsible for the writing and despatching of lists and appointments for treatment, the writing of individual accounts and receipts when payment is received, and the forwarding of lists of non-payment cases to the Head Teachers of the schools ; the writing out of inspection cards and the keeping of a record of these, as well as arranging and filing of all dental cards. She also assists in the compilation of the figures for the monthly, term and yearly reports. When dental inspections are carried out, the dentists' time is materially saved by the attendant doing the clerical work at these inspections. This procedure allows a quicker handling of the cases and inspection time in consequence is very materially cut down.

(*b*) The dental attendants assist the dentists by bringing in the children, and attending to them after they have received dental treatment, and if the case happens to be very upset, even to take the child back to its home. She is also responsible to the dentist for watching that no case leaves the clinic where there is considerable amount of



bleeding. In the case of treatment at schools where there is no waiting-room the dental attendant, of course, goes to the class rooms and brings the children to the dentist.

(c) She is responsible for the arranging and cleaning of the various dental instruments and for the general cleanliness of the dental cabinets and cupboards, etc. Whilst treatment is going on, she must sterilise and clean the instruments, and if time permits also help in the mixing and preparation of filling materials. If the four dental attendants were dispensed with and the present amount of work continued, their places would have to be overtaken by two whole-time dentists. In other words, the dental attendant saves the dentists' time and so increases the actual dental work carried out by 50 per cent.

In the County of Fife the total number of children inspected by the dentists was 14,599; in the Burghs of Kirkcaldy 2,585, and Dunfermline 4,475. The number of children found to have sound teeth was (a) County—2,225 (15·2 per cent.); Kirkcaldy—515 (19·9 per cent.) and Dunfermline 1,418 (31·6 per cent.).

TABLE VIII.—DENTAL INSPECTIONS IN FIFE COUNTY AND THE TWO LARGE BURGHS.

	Dunfermline.	Kirkcaldy.	County.	Totals.
No. of children inspected ..	4,475	2,885	14,599	21,959
No. with sound teeth	1,418	515	2,225	4,158
No. with 1-4 Defective teeth ..	2,065	1,420	8,896	12,381
No. with 5-8 Defective teeth ..	657	105	2,972	3,734
No. with 9, etc., Defective teeth ..	335	545	406	1,286
No. referred for treatment .. ..	3,163	1,983	11,347	16,493

As a result of the inspection, the following numbers were referred to their parents for treatment:—(a) County—11,347 (77 per cent.); Kirkcaldy—1,983 (76·6 per cent.); and Dunfermline—3,163 (70·6 per cent.). Of the cases which were referred to the parents 5,224 (46 per cent.) accepted treatment. This is the average for the County (variations being recorded between 10 and 80 per cent.). In the Burgh of Kirkcaldy the acceptances were 59·7 per cent. and in the Burgh of Dunfermline 79 per cent. The more frequently clinics are open in an area the larger the number of acceptances.

The figures of the number of children treated, the attendances made, and the main types of dental operations carried out are given in Table IX. The County Clinics are kept separate from those of the two large burghs, Kirkcaldy and Dunfermline.



TABLE IX.—DENTAL CLINICS.

	Casuals	Appoint-ments	Attend-ances	Treatments.			
				Extract-ions	Dress-ings, etc.	Fillings	Total
Cupar ..	50	278	590	452	109	431	992
Tayport ..	69	176	451	427	67	207	701
St. Andrews	110	284	610	576	126	324	1,026
Anstruther ..	27	140	279	178	65	194	437
Newburgh ..	62	154	428	364	65	247	676
Ladybank ..	—	37	39	42	14	21	77
Lochgelly ..	341	245	740	1,090	414	161	1,665
Crosshill ..	241	265	598	1,091	453	103	1,647
Auchterderran	198	403	758	1,376	594	163	2,133
Inverkeithing	148	265	534	898	384	145	1,427
Burntisland ..	223	672	1,352	1,788	431	659	2,878
Buckhaven ..	127	681	1,389	2,212	363	547	3,122
Leven ..	96	442	907	937	265	455	1,657
Markinch ..	53	124	318	404	139	211	754
East Wemyss	22	147	369	324	174	201	699
Methilhill ..	59	133	401	439	116	140	695
Elie ..	2	74	103	156	29	50	235
Cowdenbeath	421	364	1,357	2,053	243	243	2,539
Kelty ..	192	265	705	1,048	103	124	1,275
Torryburn ..	135	248	652	846	148	215	1,209
Crossgates ..	163	162	458	621	57	81	759
Blairhall ..	76	145	382	438	77	114	629
Tulliallan ..	66	58	195	243	48	57	348
Totals ..	2,881	5,762	13,615	18,003	4,484	5,093	27,580
Country Schools	89	722	873	1,164	228	130	1,522
Grand Totals	2,970	6,484	14,488	19,167	4,712	5,223	29,102
Dunfermline							
Burgh ..	713	3,190	6,255	4,919	5,035	3,900	13,854
Kirkcaldy							
Burgh ..	1,741	2,744	4,485	5,440	1,062	967	7,466

Pre-school children are also treated at the school clinics and the number during the past year has increased to 115 (35). In the burgh Kirkcaldy 87 pre-school children were treated. In Dunfermline pre-school children were also treated but no figures are available. In addition to these, 51 adult cases were also treated in the County.



TABLE X.—ANALYSIS OF DENTAL OPERATIONS CARRIED OUT  
IN FIFE COUNTY AND THE TWO LARGE BURGHs.

	Dunfermline Burgh (C.T.).	Kirkealdy Burgh.	County Areas.	Total.
No. of Extractions (No Anaesthetic)	1,817	113	1,912	3,842
No. of Extractions (Local Anaesthetic)	3,102	4,087	15,648	22,837
No. of Extractions (General Anaes- thetic .. ..)	—	1,240	1,605	2,845
No. of Dressings ..	439	763	973	2,175
No. of Ag. N.O. <sub>3</sub> ..	3,094	50	3,030	6,174
No. of Scalings ..	1,454	196	588	2,238
No. of Fillings (Cement) ..	267	502	1,814	2,583
No. of Fillings (Amalgam) ..	3,047	303	2,960	6,310
No. of Fillings (Silicate) ..	586	162	449	1,197
No. of Others ..	48	53	123	224
Total Dental Opera- tions .. ..	13,854	7,469	29,102	50,425

In Table X. an analysis of the Dental operations carried out in the clinics of the County of Fife and the two large Burghs is given. From this Table it is seen to what extent conservative treatment has been developed in the Burgh of Dunfermline, where dental treatment has been long established and the public educated in its value to the children.

During the past year there were several cases of continued bleeding after dental extractions. Fortunately, these cases are not of frequent occurrence, in fact, the two cases reported to this office last year were the first that had been reported during the past three or four years. This, when it is remembered that there were 20,000 extractions annually, shows how infrequent these cases are. Though infrequent, however, they give rise to considerable alarm to the parents and in order that our dental scheme should include means of meeting such an emergency the following circular was sent to all the Health Visitors, and, through the superintendent of the Fife County Nursing Association, to all the District Nurses :—

“Occasionally a case occurs where a child has continued bleeding after dental extraction. Whilst these cases are not frequent they give rise to considerable alarm to the parents and it may occur that your attention may be called to such a case and you ought to reassure the parents in all such cases as the condition is never fatal. After such



“ a case is brought to your notice, it is important that you should be able to give the parents definite instructions as to what should be done and with this in view, the enclosed printed instructions will be of use to you. You will note also that where the bleeding, despite treatment, tends to continue, you ought to take early steps to get into touch with the Area Dentist or the Area Medical Officer, the addresses of whom are appended.

“ Should there be any points not quite clear, please let me know.”

A printed form of general instructions for the treatment of these cases was also issued, indicating what steps the nurse should take. The styptic which the nurses were to keep was powdered alum. This was decided upon as it would keep better and be more easily handled than some of the other styptics, although reference is also made to the use of pure tannic acid and oil of turpentine.

Apart from these instructions, a printed circular was also sent to the headmasters of the schools in order that they would know what steps to take should a case of continued bleeding after dental operation be brought to their attention. It is hoped that by these measures delay will be avoided in handling the cases and, if necessary, bringing them to the notice of the responsible Area Dentist.

## X. ACCIDENTS IN SCHOOLS.

The arrangement in Fife whereby some dressings are supplied to schools for first-aid cases is a great success judged by the increasing demand for the necessary material. An analysis of the kinds of accidents reported is of interest.

In 65 schools there were about 141 accidents which required the attention of a doctor. These accidents resulted in fractures of bone (leg, arm, collar bone, etc.), severe cuts on head, etc., necessitating stitches, excessive bleeding of nose, bad sprains, dislocations, sickness and motor accidents (5). Most of these accidents occurred at the intervals. There were a few, however, in school, such as cuts to finger or arm (through glass door) or at drill (6), or fingers crushed in door (3).

The great bulk of the accidents occurring in school are of a minor character. In the case of 154 schools that sent in reports there were over 5,900 accidents and more than 5,600 required first-aid attention. Cuts and bruises form the bulk of these. The rough condition of the playground is stated by the head teachers of the following schools to be the cause of most of the bruises:—Balmullo, Boarhills, Cowdenbeath R.C. School, Foulford, Lassodie, Lochgelly West, North Queensferry, Steelend and Thornton. In 137 cases there were splinters from bad wooden floors. Most of these are got at drill by children in stocking soles. In the case of Auchterderran South, Glencraig, Lochgelly South and Lumphinnans, the headmasters make particular reference to the bad condition of the hall or corridor floors.







**APPENDIX I.**  
**Summary of School Work done by the District Nurses for the Fife Education Committee, 1931-32.**

District.	Name of Nurse.	School Visits.	Children Inspected & re-inspected.	Home Visits.	Follow-up Cases.	Home Treatment.
Anstruther	M. B. Connachie	91	1,099	73	35	75
Boarhills	I. Cameron	30	490	14	16	37
Broomhall	Margaret Fisher	34	536	15	43	4
Burntisland	M. Forbes	51	1,511	146	123	267
Cameron	I. K. Spence	40	102	10	5	—
Ceres	M. Farquhar	40	212	76	—	45
Crail	M. J. A. Smith	30	531	73	8	26
Culross	J. Barbour	92	759	119	134	207
Culter	Marjorie Stewart	38	201	158	45	—
Cupar	D. Gerrard	82	461	44	24	227
Dairsie	I. K. Fraser	25	61	24	16	—
Elie	Dinwoodie	35	317	20	—	—
Falkland	M. S. Willis	27	248	26	20	31
Ladybank	I. McBride	59	151	28	43	13
Largo	F. A. M. Anderson	35	336	5	2	2
Leuchars	B. Sharpe	40	441	39	68	21
Luthrie	C. A. Moffat	43	68	9	1	1
Monimail	M. McDougal	36	187	40	10	97
Newburgh	E. Campbell	40	668	101	43	126
Newport	A. Hayes	41	122	35	28	—
North of Fife	M. McPherson	48	355	43	58	24
Pittenweem	E. Stewart	41	145	15	7	—
St. Andrews	M. Campbell	40	169	57	32	393
Strathkinness	J. A. Andrew	34	224	97	40	280
Strathmiglo	A. Calligan	30	214	53	22	—
Tulliallan	C. P. Robertson	39	833	65	52	59
Totals		1,141	10,441	1,385	875	1,935

*Note.*—Under Home Treatments are included only those cases treated by the District Nurse at her or the patients' homes. Treatments in recognised clinics are not included.



## APPENDIX II.

## TREATMENT (MINOR AILMENTS).

## (a) CLINIC CASES.

Condition.	Torryburn.	Blairhall	Inverkeithing.	Crossgates	Beath.	Kelty	Lochgelly	Crosshill	Auchterderran.	Burntisland.	Markinch.	East Wemyss.	Methilhill.	Buckhaven.	Leven.	Kirkcaldy Burgh.	Dunfermline Burgh.	Totals.
Clinics Visited ..	89	101	131	142	112	108	168	115	119	102	101	57	92	123	159	598	..	2,317
Head Vermin ..	..	7	..	..	..	..	..	..	9	15	2	..	..	..	1	10	..	44
Body Vermin ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ringworm (Scalp)	..	..	3	..	..	1	4	4	..	..	3	..	..	1	3	1	3	25
Scabies ..	1	3	2	..	7	11	8	4	2	6	..	..	..	1	10	34	38	127
Uncleanliness or Neglect ..	..	..	..	..	..	..	..	..	4	..	1	..	..	..	7	172	..	184
Impetigo Con- tagiosa ..	100	29	47	58	71	52	127	156	129	74	16	78	90	50	71	565	403	2,116
Other Skin Con- ditions ..	16	7	..	11	30	..	19	15	2	10	6	..	10	4	6	35	505	676
Otorrhoea ..	10	19	17	10	30	15	47	36	25	10	11	22	46	47	72	159	88	664
Eye Diseases (Ext.)	19	26	41	34	60	7	72	63	22	23	51	30	66	49	89	288	320	1,260
Ear Cases ..	7	3	3	6	99	28	3	25	6	3	19	2	..	51	39	72	124	490
Nose and Throat Cases ..	2	22	1	1	7	2	..	..	1	2	2	..	..	..	..	17	226	283
Other Cases ..	74	131	957	972	236	565	1106	522	237	400	120	252	232	531	256	2,204	2,661	11,456
Accidents ..	..	4	8	5	15	8	..	..	..	24	90	2	..	4	3	5	..	168
Advisory ..	..	..	5	23	78	25	..	..	..	19	6	..	..	92	4	43	..	295
Totals ..	231	251	1084	1120	633	714	1386	825	437	586	327	386	444	830	561	3,605	4,368	17,788
Totals (1930-31)	246	341	951	939	716	792	1,005	915	528	252	155	425	505	1,155	403	2,138	3,748	15,214



## APPENDIX II.

## TREATMENT (MINOR AILMENTS).

## (b) CLINIC ATTENDANCES.

Condition.	Torryburn.	Blairhall.	Inverkeithing.	Crossgates.	Beath.	Kelty.	Lochgelly.	Crosshill.	Auchterderreen.	Burntisland.	Markinch.	East Wemyss.	Methilhill.	Buckhaven.	Leven.	Kirkcaldy.	Dunfermline.	Totals
Home Treatments	207	12	..	..	..	..	79	..	5	267	..	10	..	..	18	31	..	429
Head Vermin	..	17	..	..	..	..	..	..	29	99	..	..	..	..	3	39	..	191
Body Vermin	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ringworm (Scalp)	19	..	..	..	..	..	..	205	..	396	16	..	..	34	48	12	217	1,037
Scabies	24	18	20	..	15	22	80	10	6	26	8	..	..	6	36	199	381	851
Uncleanliness or Neglect	..	..	..	..	..	..	..	..	5	..	2	..	..	..	16	570	..	593
Impetigo	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Con- tagiosa	1,027	194	570	857	326	478	1,095	715	869	266	152	470	1,041	351	522	2,446	2,617	13,996
Other Skin Con- ditions	231	133	..	427	128	..	99	164	48	19	70	..	48	11	12	339	6,528	8,257
Otorrhoea	157	264	798	348	622	546	632	594	707	297	296	452	1,040	1,664	970	2,801	2,566	14,754
Eye Disease (Ext.)	686	319	604	878	728	28	823	618	433	167	211	303	1,312	864	721	1,913	1,872	12,480
Ear Cases	140	42	27	211	184	94	14	38	18	3	35	4	..	51	286	207	592	1,946
Nose and Throat Cases	2	287	62	2	15	164	..	..	4	7	4	..	..	..	..	21	1,406	1,974
Other Cases	925	843	3,369	3,148	1,073	2,220	1,366	1,094	1,382	1,320	372	1,151	1,260	1,250	832	8,898	11,984	42,487
Accidents	68	42	11	5	15	12	..	..	1	24	236	2	..	5	6	19	..	446
Advisory Cases	..	..	..	23	78	16	..	..	..	19	7	..	..	..	4	43	..	190
Totals	3,279	2,163	5,495	5,899	3,184	3,592	4,149	3,438	3,502	2,643	1,413	2,382	4,701	4,236	3,456	17,507	28,163	99,202
Totals (1930-31)	2,168	1,883	5,043	5,495	5,675	4,540	3,819	4,178	4,228	1,655	861	2,514	3,270	5,432	2,950	13,769	28,927	96,407



## APPENDIX III.

Defects found at Routine and Special Examinations during Session 1931-1932.

	Dunfer- line Burgh.	Kirkcaldy Burgh.	Dunf'line Landward.	Kirkcaldy Landward	North East Fife.	Percent- ages.	Totals.	Non- Routines.
No. of Children	1,623	2,438	2,469	4,604	2,002	..	13,136	6,756
<i>Clothing—</i>								
Dirty ..	5	..	10	14	6	0.26	35	32
Insufficient ..	..	..	..	71	1	0.54	72	80
<i>Footgear—</i>								
Defective ..	49	111	65	120	21	2.7	366	129
Useless ..	5	18	32	31	11	0.73	97	64
Barefooted ..	3	..	5	47	..	0.41	55	83
<i>Cleanliness of Head and Body—</i>								
<i>Head—</i>								
Nits and Dirty ..	76	321	154	357	224	8.6	1,132	236
Verminous ..	..	87	70	135	110	3.06	402	21
<i>Body—</i>								
Slightly Dirty ..	189	84	157	320	282	7.8	1,032	43
Very Dirty ..	5	3	48	303	23	2.9	382	..
Verminous ..	..	..	..	76	1	0.58	77	19
<i>Condition of Skin—</i>								
<i>Head—</i>								
Ringworm ..	..	..	..	2	1	0.022	3	11
Impetigo ..	..	..	25	92	5	0.93	122	239
Other Diseases ..	2	..	8	16	3	0.22	29	79
<i>Body—</i>								
Ringworm ..	1	..	..	1	1	0.022	3	14
Scabies ..	4	2	1	42	2	0.38	51	66
Impetigo ..	..	1	1	5	..	0.053	7	12
Other Diseases ..	3	7	16	31	25	0.62	82	287



## APPENDIX III.—Continued.

	Dunfer- line Burgh.	Kirkcaldy Burgh.	Dunf'line Landward.	Kirkcaldy Landward.	North East Fife.	Percent- ages.	Totals.	Non- Routines.
<i>Nutrition—</i>								
Below Average ..	81	221	173	464	313	9.5	1,252	364
Very bad ..	8	1	3	179	10	1.5	201	95
<i>Teeth—</i>								
1-4 decayed ..	638	1,439	1,280	2,280	1,043	50.8	6,680	560
5 or more decayed ..	188	239	439	866	417	16.3	2,149	140
Oral Sepsis ..	66	81	23	326	216	5.4	712	43
<i>Nose—</i>								
Catarrh ..	..	4	7	75	1	0.66	87	22
Obstruction ..	2	1	42	202	58	2.3	305	104
Other Diseases and Defects ..	2	49	9	29	3	0.7	92	18
<i>Tonsils—</i>								
Slightly enlarged ..	289	478	455	670	610	19.04	2,502	331
Markedly enlarged ..	64	63	292	460	216	8.3	1,095	345
<i>Lymphatic Glands—</i>								
<i>Cervical—</i>								
Slightly enlarged	609	131	1,645	3,325	1,722	56.5	7,432	496
Markedly enlarged	9	6	117	137	26	2.2	295	126
<i>Submaxillary—</i>								
Slightly enlarged ..	92	977	922	1,684	1,765	41.4	5,440	81
Markedly enlarged	..	2	21	38	9	0.53	70	13
<i>External Eye Disease—</i>								
Blepharitis ..	17	70	47	208	62	3.07	404	266
Conjunctivitis ..	..	5	1	79	2	0.66	87	54
Corneal opacities ..	1	4	8	3	9	0.19	25	10
Squints and other Defects ..	25	75	47	147	87	2.9	381	222
Other Diseases ..	5	8	3	28	16	0.45	60	73



## APPENDIX III.—Continued.

	Dunfer- line Burgh.	Kirkcaldy Burgh.	Dunf'line Landward.	Kirkcaldy Landward.	North East Fife.	Percent- ages.	Totals.	Non- Routines.
<i>Visual Acuity—</i>								
6/6 with one eye ..	871	1,156	42	2,247	1,053	82.9	6,745	5,929
6/9 to 6/12 do.	127	252	148	350	101	12.02	978	409
6/18 do.	45	71	75	142	50	4.7	383	332
Wearing Glasses ..	58	30	42	239	40	3.8	309	164
<i>Ears—</i>								
Wax ..	78	203	176	345	38	6.3	840	134
History of Otorrhoea ..	6	11	21	108	15	1.2	161	90
Otorrhoea ..	3	8	26	39	14	0.68	90	125
Other Diseases and Defects ..	1	2	5	32	..	0.304	40	25
<i>Hearing—</i>								
Slightly deaf ..	2	..	3	79	21	0.71	105	14
Markedly deaf ..	..	..	..	8	3	0.08	11	26
<i>Speech—</i>								
Defective Articulation	13	44	18	52	33	01.2	160	42
History of Stammering	7	2	1	41	2	0.40	53	15
Stammering ..	3	2	1	7	7	0.15	20	14
<i>Mental Condition—</i>								
Dull or Backward ..	18	11	8	117	58	1.6	212	66
Markedly Backward	1	2	7	59	19	0.66	88	42
<i>Heart and Circulation—</i>								
Functional Disease	..	3	26	18	3	0.38	50	8
Organic ..	2	7	13	19	7	0.36	48	44
Anaemia ..	5	86	9	69	74	1.8	243	45
<i>Lungs—</i>								
Bronchitis ..	4	4	34	39	62	1.08	143	30
Phthisis—								
Pre-tuber., ..	26	49	8	14	35	1.0	132	38
Susp. tuber., ..	..	..	..	2	9	0.08	11	6
Other Diseases ..	3	..	4	17	..	0.18	24	9



## APPENDIX III.—Continued.

	Dunfer- line Burgh.	Kirkcaldy Burgh.	Dun'line Landward.	Kirkcaldy Landward.	North East Fife.	Percent- ages.	Totals.	Non- Routines.
<i>Nervous System—</i>								
Chorea ..	1	..	1	9	..	0.08	11	10
Infantile Paralysis ..	4	..	1	2	..	0.053	7	6
Epilepsy ..	..	..	..	..	3	0.022	3	5
Other Diseases ..	..	..	8	1	7	0.12	16	7
<i>Tuberculosis (Non-Pul- monary)—</i>								
<i>Rickets—</i>								
Slight ..	..	4	2	18	1	0.19	25	39
Marked ..	29	15	10	40	17	0.84	111	30
<i>Deformities—</i>								
Congenital ..	..	3	..	1	..	0.03	4	1
Acquired ..	3	3	6	8	6	0.19	26	16
<i>Infectious Diseases—</i>								
<i>Contagious Diseases—</i>								
Other Diseases ..	3	6	2	11	10	0.24	32	26
Other Defects ..	2	..	2	20	..	0.18	24	12
<i>Vaccination—</i>								
<i>Entrant Infants—</i>								
Vaccinated ..	..	..	6	8	..	0.10	14	7
Poorly marked ..	..	5	16	12	37	0.53	70	..
Not vaccinated ..	2	5	22	5	8	0.31	42	..
<i>Other Age Groups—</i>								
Vaccinated ..	266	376	313	416	495	37.3	1866	..
Poorly marked ..	47	96	50	247	55	9.9	495	..
Not vaccinated ..	267	485	454	1,185	248	52.7	2,639	..
<i>Other Age Groups—</i>								
Vaccinated ..	663	595	564	637	292	33.8	2,751	..
Poorly marked ..	30	207	135	628	591	19.5	1,591	..
Not vaccinated ..	350	679	953	1,491	321	46.6	3,794	..



# Carnegie Dunfermline Trust.

## ANNUAL REPORT

ON

### THE TREATMENT OF SCHOOL CHILDREN

IN

### DUNFERMLINE CLINICS

FOR YEAR ENDED 31ST JULY 1932.

BY

HARRY EMSLIE SMITH,

M.D., Ch.B., D.T.M. & H., D.P.H.

Administrative Medical Officer of the Carnegie Dunfermline Trust.



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## STAFF ENGAGED IN THE SCHOOL TREATMENT SERVICE :—

*Administrative Medical Officer.*

HARRY EMSLIE SMITH, M.D., Ch.B., D.T.M. and H., D.P.H.

*Consulting Aural Surgeon.*

DOUGLAS GUTHRIE, M.D., F.R.C.S.

*Dentists.*

RICHARD V. P. CAMPBELL, H.D.D., L.D.S., R.C.S., Ed.

ROBERT WEIR, L.D.S., R.C.S., Ed.

*Nurses.*

A. E. BENNET.

C. TEMPLEMAN.

*Clerical Staff.*

W. O. HALL.

M. McLAREN.

*Clinic Attendants.*

A. D. SMITH.

E. D. McLAREN.

J. FRASER.

	Old Burgh.	Rosyth.
Number of Schools	10	3
Accommodation Places	8520	
Number of Children :—		
(1) Average No. on Register	6397	
(2) In Average Attendance	5803	



## **INTRODUCTION.**

During the year under report, several changes in the Staff engaged in the School Treatment Service of the Carnegie Dunfermline Trust took place.

Dr. Alister Mackenzie, Chief Medical Officer of the Trust, was transferred to Glasgow along with the men students of the College of Hygiene and Physical Education. Dr. Jean Meiklejohn was transferred to the staff of the Dunfermline College, now solely devoted to the training of women students.

Dr. H. Emslie Smith was appointed Administrative Medical Officer to the Trust.

In consequence of these changes, a considerable amount of rearrangement had to be made in order that the work of the Clinic might be carried on with the least possible upset.

The figures for the year from 31st July 1931 to 1st August 1932 show an increase of nine hundred and thirteen new cases, and over a thousand seven hundred and seventy-four attendances among children of School age as compared with last year. There was also an increase in the number of children of pre-School age.

Owing to the increasing number of children accompanied by parents attending the more recently opened Clinic at Park Road, it was found necessary to arrange for the Medical Officer to visit the Clinic once a week.

The Dental Clinics were not affected by the changes in the Staff.

It is gratifying to note that there has been an outstanding increase in the number of children attending the Remedial Clinic. With one exception, the number of cases treated during the year was more than double that of any since the year 1914. The causes of this remarkable increase are discussed in the section relating to this Clinic.

The Artificial Sunlight Clinic was open throughout the year, and continues to serve the useful purpose for which it was instituted in January 1931.

## **ARRANGEMENTS FOR MEDICAL TREATMENT IN THE DUNFERMLINE CLINICS.**

The various departments of the School Clinic have been described in earlier Reports.

See Fourth Annual Report (1909)—General Clinic.

See Fifth Annual Report (1910)—General and Dental Clinics.



See Sixth Annual Report (1911-12)—Eye and Remedial Departments.

Under arrangement with the Fife Education Authority, the Carnegie Dunfermline Trustees took over the treatment of Rosyth school children as from September 1926, in which month they opened a General Clinic at King's Road School, and also provided Dental treatment. In June 1929 the Trustees opened a General Clinic at Park Road School. The figures for treatment at Rosyth are shown separately in the following pages :—

### A—Minor Ailments (General Clinics), 1931-32.

During the year, 4661 children of school age attended the General Clinics (Inglis Street and Rosyth), and the total attendances of these clinics amounted to 30,701, being an increase over last year of 913 cases and 1774 attendances.

Any child returning after a month's unprescribed absence was considered to be a new case, as were children returning after any interval with a different defect.

#### RETURN OF CASES TREATED.

		Inglis Street Clinic.	
		No. of Cases.	No. of Attendances
<i>Ear—</i>			
Middle Ear Suppuration .. ..	57	1909	
Other Conditions .. ..	66	320	
	123	2229	
<i>Nose and Throat—</i>			
Nasal Conditions .. ..	36	173	
Sore Throat .. ..	78	194	
	114	367	
<i>Eye—</i>			
Blepharitis .. ..	53	474	
Styes .. ..	35	203	
Conjunctivitis .. ..	33	330	
Corneal Inflammation and Ulceration .. ..	6	89	
Injuries .. ..	9	24	
Errors of Refraction .. ..	10	14	
Other Conditions .. ..	10	24	
	156	1158	
<i>Skin (Head)—</i>			
Dirty .. ..	—	—	
Ringworm .. ..	3	217	
Impetigo .. ..	23	247	
Other Conditions .. ..	20	131	
	46	595	



*Skin (Body)—*

Body Vermin .. .. .	—	—
Impetigo .. .. .	187	1394
Scabies .. .. .	28	315
Ringworm .. .. .	3	38
Other Conditions .. .. .	213	1851
	— 431 —	358

*General—*

Septic Sores .. .. .	484	3708
Injuries .. .. .	259	1492
Other Conditions .. .. .	513	1136
Sunlight .. .. .	308	3538
	— 1564 —	981
	2434	1781

## RETURN OF CASES TREATED.

## Rosyth Clinics.

<i>Ear—</i>	No. of Cases.	No. of Attendances.	
Middle Ear Suppuration .. .. .	31	657	
Other Conditions .. .. .	58	272	
	— 89 —		9
<i>Nose and Throat—</i>			
Nasal Conditions .. .. .	25	413	
Sore Throat .. .. .	87	626	
	— 112 —		109
<i>Eye—</i>			
Blepharitis .. .. .	51	390	
Styes .. .. .	68	193	
Conjunctivitis .. .. .	32	109	
Corneal Inflammation and Ulcera- tion .. .. .	—	—	
Injuries .. .. .	6	11	
Errors of Refraction .. .. .	—	—	
Other Conditions .. .. .	7	11	
	— 164 —		14
<i>Skin (Head)—</i>			
Dirty .. .. .	1	1	
Ringworm .. .. .	—	—	
Impetigo .. .. .	21	131	
Other Conditions .. .. .	9	88	
	— 31 —		20



<i>Clin (Body)</i> —					
Body Vermin	..	..	..	—	—
Impetigo	..	..	..	172	845
Scabies	..	..	..	10	66
Ringworm	..	..	..	5	33
Other Conditions	..	..	..	254	4386
				441	5330
<i>General</i> —					
Septic Sores	..	..	..	687	2362
Injuries	..	..	..	426	1565
Other Conditions	..	..	..	277	721
				1390	4648
Totals—Rosyth Clinics	..	..	..	2227	12,880
Add—Inglis Street Clinic Totals	..	..	..	2434	17,821
„ Children below school age	..	..	..	219	1295
				4880	31,996

### DISEASES OF THE EAR, NOSE AND THROAT.

Cases suffering from affections of the Ear, Nose and Throat were examined and treated at all the Clinics throughout the year. As the facilities for detailed examination at the Rosyth Clinics are somewhat limited, cases which required more thorough investigation were referred to Inglis Street. All new cases were in the first instance referred to their own Family Doctor.

The total number of school children who attended at Dunfermline and Rosyth for diseases of the Ear, Nose and Throat was four hundred and thirty-eight, an increase of fifty-four cases as compared with last year. The increase occurred both at Inglis Street and at Rosyth.

In addition to the above, seventeen cases among children of pre-school age were treated, as compared with nine last year.

The distribution of new cases was as follows :—

	Inglis St. Clinic.	Rosyth Clinics.	Pre-School Age.
Ear .. ..	123	89	14
Nose and Throat ..	114	112	3

#### I. Affections of the Ear.

The total number of school children attending on account of diseases of the ear was two hundred and twelve, an increase of thirty-nine cases over last year.

OTITIS MEDIA.—Eighty-eight cases of Middle Ear Suppuration were treated. The bulk of these were cases of Chronic Otitis Media, many of whom had suffered from long standing perforations of the drum, with recurrent attacks of earache and running ears.



The year's work again demonstrated the need of early and thorough treatment in this class of case. Children with perforate drums are apt to suffer from relapses. Ordinary slight colds or sore throats lead to trouble in a damaged ear, and the oftener this occurs the more difficult it is to bring about a cure.

**RESULTS.**—The best results were obtained by local treatment. Ultra-Violet light was used in some of the cases, and although its effect was of value, it can never be a substitute for systematic dressing.

**INFLAMMATION OF THE EXTERNAL MEATUS.**—Fifty-eight cases were treated. This group includes cases of Furunculosis, Eczema and Inflammation of the skin of the External Acoustic Meatus. The number of cases of this description seen during the year was relatively large. Pain was usually a marked feature, and some of the cases were severe.

## II. Affections of the Nose and Throat.

Two hundred and twenty-six cases of diseases of the Nose and Throat attended during the year, an increase of fifteen over last year. Of the sixty-one were cases of affections of the nose, and one hundred and sixty-five of the throat.

In regard to the throat conditions, only twenty-two cases of acute sore throats were met with. The majority were at King's Road Clinic.

**TONSILS AND ADENOIDS.**—Ninety-four cases of morbid enlargement of the Tonsils and Adenoids were treated. Wherever possible, conservative methods were adopted, and the results obtained were good. In this connection, mention might be made of the satisfactory results obtained by the use of Artificial Sunlight. Diseased tonsils are almost invariably accompanied by some enlargement of the neck glands, and even after the removal of the tonsil, the glands not infrequently remain enlarged for a long time. Artificial Sunlight has proved of great use in bringing about the absorption of these glandular enlargements. In twenty-five cases, removal of the tonsils or adenoids was advised. The operations were arranged for in consultation with the patient's own Family Doctors.

**PRE-SCHOOL CHILDREN.**—In addition to the above, there were also treated fourteen cases of affections of the ear, one of the nose and two of the throat in infants and children of pre-school age.

### REPORT BY DOUGLAS GUTHRIE, M.D., F.R.C.S., CONSULTING AURAL SURGEON.

As in previous years the great majority of the cases referred to me for an opinion were suffering from (a) Chronic Middle Ear Suppuration, or (b) Enlarged or Septic Tonsils and Adenoids.



**AURAL SUPPURATION—THE IMPORTANCE OF THOROUGH TREATMENT.**—In my last report I pointed out the necessity for the early recognition and treatment of all cases of earache and of "running ear" in children with a view to reducing the number of chronic cases which present so difficult a problem at every Clinic.

The term "chronic" is justified if the discharge has persisted for two months. Success in the treatment of this class of case is proportionate to the thoroughness and persistence with which it is carried out. Regular attendance at the Clinic, and the intelligent co-operation of the parents are essential factors in the success of the treatment. Persistent and repeated removal of the accumulated discharge by syringing or mopping (preferably the latter) will accomplish much more than the mere pouring in of peroxide of hydrogen drops, which must be regarded as a mere adjunct to the ritual of cleaning. In long-standing cases with large perforations, we have seen excellent results follow the application of 1 per cent. iodine and boric acid powder, provided a satisfactory pattern of powder blower is used.

**THE TONSIL-ADENOID DISEASE.**—It cannot be too strongly stated that the mere presence of enlarged adenoids or tonsils does not justify their removal by operation. Every child has slight enlargement of these structures at some period of its existence, usually between the ages of four and six years, and in many cases a history of earache, deafness, repeated colds, sore throat, or indistinct speech renders operation advisable. Fortunately, the "wholesale" removal of adenoids and tonsils is no longer practised, and an enlightened opinion has considerably reduced the number of operations within the past few years. Whatever the reason, the number of tonsil cases has diminished at all clinics and hospitals throughout the country; but whether this is due to more careful discrimination in selecting cases for operation or to an actual lessening of the entire number of cases, it is difficult to say.

**TREATMENT OF CATARRHS BY ULTRA-VIOLET RADIATION.**—Although the wave of enthusiasm for "Sunlight" treatment has now passed its zenith, this treatment undoubtedly yields excellent results in the nasal catarrh of childhood. Dr. Emslie Smith has already noted in his report the fact that enlarged glands in the neck diminish in size. Nasal discharge disappears under the treatment and the general condition of the patient greatly improves.

(Signed) DOUGLAS GUTHRIE, M.D., F.R.C.S.

### **EYE CLINIC.**

The year which ended on 31st July 1932 was a healthy one in regard to eye affections, and the work at the Eye Clinics in both Dunfermline and Rosyth was correspondingly light. There were no epidemics of eye diseases among school children, and the majority of the cases treated were of a mild character.



Three hundred and twenty school children attended the Eye Clinics at Dunfermline and Rosyth. This represents an increase of forty-eight cases over last year's figures. The number of attendances was 1,872 and the average number of treatments per case was 5.8.

In addition to the above, nine children of pre-school age were treated. The following table shows the distribution of the cases and the main classes of defects treated :—

	Dunfermline.		Rosyth.	
	Pre-School Children.	School Children.	King's Road Children of School Age	Park Road Children of School Age
Blepharitis .. ..	3	53	13	38
Styes .. ..	2	35	32	36
Conjunctivitis .. ..	2	33	14	18
Injuries .. ..	1	9	2	4
Refractions and other conditions .. ..	1	26	1	6
Total .. ..	9	156	62	102

**BLEPHARITIS.**—One hundred and seven cases were seen. This is an increase of thirty-one over last year. The largest numbers occurred during the months of October, December and February.

It was again noted that there were comparatively few cases of severe chronic Blepharitis, and it is hoped that the improvement in this respect is at least to some extent due to the practice, which has now been carried out for several years, of examining the eyes of all chronic or relapsing cases of Blepharitis and of prescribing suitable glasses to correct any error of refraction which might set up eye strain, and thus aggravate the condition.

**CONJUNCTIVITIS.**—Sixty-seven cases of all types of Conjunctivitis were treated, an increase over last year's figures. The cases were distributed more or less evenly throughout the year with a slight increase during the months of October and March. This is usual in this type of eye affection, and is probably due to dust.

There were nine cases of Phlyctenular Conjunctivitis but only three or four were of a severe character. All the other cases were of Acute Conjunctivitis and responded well to treatment.

**STYES.**—There was a slight increase in the number of cases of Styes and as usual many of the cases were among debilitated children.

**OTHER CONDITIONS.**—Forty other cases, including injuries and foreign bodies in the eye and corneal ulcers, were treated. None of them require special comment.

### B.—Defective Vision.

The routine examination of school children for errors of refraction is now carried out by the School Medical Inspection Staff.

Several cases were, however, examined at the Clinic in connection with treatment for other defects.



## SKIN DISEASES.

During the year ended 31st July 1932, the number of new cases of skin diseases treated at all Clinics was 1,011. The total number of treatments was 10,130, giving an average of 10·02 treatments per case.

Compared with the previous year, the figures for all the Clinics show an increase of 119 new cases and of 2,844 treatments. In the Inglis Street Clinic, there was a drop of 34 new cases, and in the Rosyth Clinics, an increase of 153. The greatest increase was at Park Road Clinic.

Children of pre-school age are treated at the Clinic on the recommendation of their family doctor. There was a slight increase in the number of these children as compared with last year. Most of the cases were suffering from Impetigo or from infantile types of eczema.

Of the affections for which treatment was sought, the following groups may be considered :—

**GROUP 1—IMPETIGO CONTAGIOSA.**—As usual, Impetigo accounts for the largest number of cases of skin diseases among children attending the Clinic. Four hundred and forty-seven cases were treated. There was a decrease of forty-nine cases from Schools in the Old Burgh, and an increase from Schools in the Rosyth area. The number of children of pre-school age treated remained about the same as last year.

Impetigo is still far too prevalent among school children. The disease is highly infectious, and this fact is perhaps not as fully appreciated as it might be. When cases come under treatment early, they can as a rule be cured with little difficulty. Otherwise the infection is apt to spread rapidly, and a considerable loss of school time results. More important still is the effect of a well-established attack of Impetigo on a child's health. It is a common clinical experience to find children anaemic, with enlarged glands, and generally unfit as an after-result of this disease. Debility is certainly a predisposing cause of Impetigo, and as such requires consideration, but it is in early recognition and treatment that the best hope lies of combating the disease in Schools. The co-operation of parents and teachers is all important in any crusade against Impetigo.

During the year several cases were sent to Bandrum to recuperate from their debility after attacks of Impetigo and septic sores.

**GROUP 2—RINGWORM OF THE HEAD AND BODY.**—Eight cases of Ringworm of the body and four of the scalp were treated during the year, a decrease of two cases as compared with last year. Cases of ringworm of the scalp are always most difficult to cure. Improved results were obtained by making use of Ultra-Violet light through a Wood's filter for the detection of individual bundles of infected hairs, and by the use of cocoanut oil as a basis for the ointments to be rubbed on.

The cases of Ringworm of the body as usual responded well to ordinary treatment.



GROUP 3—VERMIN OF THE HEAD AND BODY.—It is satisfactory to record that no cases of body vermin and only two cases of Nits and Pediculi of the head were treated at the Clinics during the year. While this does not mean that there are no cases of vermin in the School population, it does indicate that the heads of the school children are very much cleaner now than was the case some years ago. This happy state is no doubt due to the care exercised in School Medical Inspection and to the custom of cutting children's hair.

GROUP 4—WARTS, CHILBLAINS AND CORNS.—Two hundred and eighty-nine cases were treated during the year. This represents an increase of one hundred and twenty-five cases over last year. Over 75 per cent. of this group were cases of Warts. Attention was drawn in last year's Report, to the very marked increase in the number of children suffering from Warts. It is evident from the above figures that this increase has continued.

The bulk of the cases were seen in the Rosyth Clinics. The figures for the General Clinic at Inglis Street were about normal, or only slightly higher.

In one of the Rosyth Schools there was what almost amounted to a small epidemic of Warts during the months of September, October, November and February. Seventy cases in all were treated, and it is interesting to note with reference to the question of contagion that the vast bulk of the cases came from only two or three classrooms. Thorough disinfection of the washing basins of these rooms was carried out, and the hand-towels were withdrawn, but it is probable that the energetic search for and treatment of the affected cases played a greater part in checking the spread of the disease than did the mere disinfection of articles handled by the children.

One is apt to regard "Warts" as a trivial complaint, but when they appear in such vast numbers and on so many children, the disease assumes a character of more importance.

#### GROUP 5—ALL OTHER CONDITIONS :—

(1) MOLLUSCUM CONTAGIOSUM.—Only twenty-two cases of Molluscum Contagiosum were sent for treatment. This represents a fall of twenty-four cases as compared with last year. Many of the cases were multiple and some rather severe.

(2) SCABIES.—Eighteen cases were treated as compared with twenty-eight last year. Some of these were in members of the same family. Several were very severe. One or two of the cases were found to be suffering from a sulphur dermatitis due to too lavish use of ointment at home. It is gratifying to note that the fall in the number of Molluscum and Scabies cases corresponds to a year in which full School Medical Inspection was carried out.



Other conditions include cases of Herpes, Eczema, Alopecia, Seborrhoea, Ichthyosis and Pityriasis. Several cases of Infantile Dermatitis were treated. In some of these, good results were obtained by the careful use of Artificial Sunlight.

One or two case of Urticaria following wasp stings were seen. One case was particularly severe. The patient, a boy, was stung on the back of the neck. Two hours later, a most intense urticarial eruption developed all over the whole of the trunk and head, and to a less extent on the limbs. The skin was of a brilliant red with swollen blotchy elevations. The eyes were red and congested. There were no general symptoms. The acute stage soon passed off, but an urticarial condition of the skin remained for several days, and even after 16 days, slight wheals could be produced by rubbing the skin. The boy was afterwards sent to Bandrum.

### C.—Defective Teeth.

#### THE FOLLOWING IS THE REPORT ON THE WORK OF THE SCHOOL DENTIST IN THE OLD BURGH :—

The work is carried out by Mr. Weir and Mr. Campbell jointly.

#### DENTAL EXAMINATION.

As in the previous year, the age groups examined extended from 5 to 13 years. The total number of children examined was 3234. This was 86 more than last year. The number of children in the 12 and 13 year-old groups still remains small for the same reason as stated in last year's report.

The following table shows the number of children examined in each group, and the numbers with sound dentitions at each age :—

					No. Examined.	No. with Sound Dentition.
At	5 years	..	..	..	394	31
„	6 „	..	..	..	397	68
„	7 „	..	..	..	407	91
„	8 „	..	..	..	402	127
„	9 „	..	..	..	429	148
„	10 „	..	..	..	476	208
„	11 „	..	..	..	495	219
„	12 „	..	..	..	174	91
„	13 „	..	..	..	60	19
					<hr/> 3,234	<hr/> 1,002

This gives a percentage of 30·9 of the children examined having sound dentitions.

The following figures show the general state of the teeth as disclosed by the examination, and the numbers accepting and refusing treatment :—



	1931-32.	Per cent.	1930-31 per cent.
1. Examined .. ..	3,234	—	—
2. With Sound Dentition .. ..	1,002	30.98	30.90
3. Requiring Treatment .. ..	2,232	69.01	69.09
4. No. in 3 accepting Treatment at Clinic .. ..	1,748	78.31	77.02
5. No. in 3 refusing Treatment at Clinic	484	21.68	22.97

The percentage of those accepting treatment remains about the same as previous years. This year it is 1.29 per cent. more than last year. It means that roughly speaking, 20 out of every 100 children who are offered treatment refuse it.

In the following table the 3234 children examined are classified according to the number of decayed teeth in the mouth :—

No. of Decayed Teeth.	No. of Children.		
	Boys.	Girls.	Total.
0 .. ..	527	475	1,002
1 .. ..	306	318	624
2 .. ..	258	233	491
3 .. ..	114	137	251
4 .. ..	122	105	227
5 .. ..	55	60	115
6 .. ..	76	82	158
7 .. ..	45	34	79
8 .. ..	26	26	52
More than 8 .. ..	111	124	235
	<u>1,640</u>	<u>1,594</u>	<u>3,234</u>

#### DENTAL TREATMENT.

During the year 2916 children attended the Clinic and made 4098 attendances—an average of 1.44 attendances per child. This is an increase of 134 in the number of children attending the Clinic and a decrease of 10 in the number of attendances made. 2456 children attended the Clinic as the result of the systematic inspection and 460 children were treated as casual cases.

The following figures show the treatment carried out throughout the year :—

	Temporary Teeth.	Permanent Teeth.
<i>Extractions—</i>		
Without Local Anaesthesia .. ..	1,408	—
With Local Anaesthesia .. ..	1,564	429
<i>Fillings—</i>		
Cement .. ..	221	7
Amalgam .. ..	553	2,033
Silicate .. ..	—	528
Root Fillings .. ..	6	40
<i>Other Operations—</i>		
Silver Nitrate Treatment .. ..	2,517	17
Dressings Inserted .. ..	—	263
Sealing and Cleaning .. ..	—	977
Porcelain Crowns .. ..	—	8
Minor Regulation Visits .. ..	—	6



The total amount of treatment throughout the school year was as follows :—

	1931-32	1930-31.
Teeth Extracted .. .. .	3,401	3,324
Fillings Inserted .. .. .	3,388	3,646
Teeth Treated with Silver Nitrate ..	2,534	1,974
Dressings Inserted .. .. .	263	316
Scaling and Cleaning .. .. .	977	674
Porcelain Crowns .. .. .	8	1
Minor Regulation Visits .. .. .	6	14

### REPORTING ON THE WORK AS SCHOOL DENTIST IN ROSYTH, Mr. RICHARD CAMPBELL STATES :—

Commencing in September, the age groups 8, 9, 10, 11, 12 and 13 underwent systematic dental examination.

#### DENTAL TREATMENT.

During the year, 987 children attended the Clinic, and made 1444 attendances, an average of almost 1·5 attendances per child. 779 of the children treated came as the result of routine inspection and 209 children were treated as casual cases.

The following figures show the treatment carried out throughout the year :—

	Temporary Teeth.	Permanent Teeth.
<i>Extractions—</i>		
Without Anaesthesia .. .. .	402	7
With Local Anaesthesia .. .. .	933	176
<i>Fillings—</i>		
Cement .. .. .	39	—
Amalgam .. .. .	112	349
Silicate .. .. .	—	58
Root Fillings .. .. .	—	2
<i>Other Operations—</i>		
Silver Nitrate Treatment .. .. .	551	9
Dressings Inserted .. .. .	5	171
Scaling and Cleaning .. .. .	—	477
Porcelain Crowns Inserted .. .. .	—	—
Minor Regulation Visits .. .. .	—	29

The total amount of treatment throughout the school year was as follows :—

Teeth Extracted .. .. .	1,518
Fillings Inserted .. .. .	560
Teeth treated with Silver Nitrate .. .. .	560
Dressings Inserted .. .. .	176
Scaling and Cleaning .. .. .	477
Minor Regulation Visits .. .. .	29

#### D.—Operations.

Cases requiring operative measures are not dealt with at the School Clinic. They are referred to the family doctor for the necessary treatment.



### **E.—Deformities and Other Conditions treated at the Remedial Clinic.**

Recent annual returns have recorded a tale of such lean years that it is a pleasure to turn to a brighter page in the history of this Clinic. The year which ended in June 1932 may be regarded as one of the most successful since a Remedial Clinic was first opened in Dunfermline.

The most outstanding feature of the work during the year is the enormous increase in the number of new cases attending for treatment. Not only is the number the largest, but, with only one exception it is more than double that of any since the year 1914.

Many factors have contributed to this remarkable increase—Cases have been sent by Family Doctors to the Clinic for treatment in far greater numbers than in former years. Parents and teachers also have contributed more than ever.

The Clinic derives its cases to a very large extent from the work of the Medical Inspection staff in the Schools. The marked increase in numbers is certainly a tribute to the efficiency with which that work has been carried on throughout the year.

It will be noted that the opening of the Massage Department at the Dunfermline and West Fife Hospital has had no adverse influence on the working of the Clinic. Indeed there seems to be grounds for believing that it has had the opposite effect; possibly from a wider appreciation of the benefits to be derived from remedial methods of treatment.

To whatever causes the increase may be due, it is a satisfaction that the Clinic is more fully fulfilling its purpose.

**WORKING ARRANGEMENTS.**—Cases suffering from physical defects or from the results of injuries such as fractures and sprains, as well as children who show a tendency to acquire habits of faulty posture are all eligible; but no cases are admitted without a recommendation from their own Family Doctor. The co-operation of the Family Doctor is a most valuable asset in treatment by remedial methods, and in regard to this, the Clinic has been fortunate throughout the year.

The Clinic is open on Monday, Wednesday and Friday from 4.30 p.m., and is held in the large Medical Gymnasium in the Inglis Street Clinic. The Gymnasium is well equipped for treatment by Massage and Remedial Exercises.

During the year a Neron Vitalux lamp was installed, and has proved of great service in the treatment of certain classes of case.

**STAFF.**—It is a fortunate circumstance that the recent changes in the Dunfermline College of Hygiene and Physical Education have left this Clinic unaffected. Miss Drummond, the Principal of the College, has given most generous support, and her helpful interest in the Clinic has largely contributed to the success of the year's work.



The Senior Women Students of the College, as in the past, provided the skilled assistance which is so essentially a part of Remedial treatment. Their work was carried out under the expert supervision of Miss Whyte and Miss Armstrong.

Great praise is due to the Staff, one and all. With such large numbers attending at each session, the work has been extremely heavy and has called for considerable physical endurance, yet it was carried out with cheerful thoroughness and loyalty, the memory of which is a pleasure to recall.

ATTENDANCES.—During the year under report, 181 cases were admitted. This is an increase of 92 cases over last year's figures.

The total attendances was 5556, as compared with 2616 last year—an increase of 2940 treatments. The average number of treatments per case was 30.69.

In addition to those who remained under treatment, 29 new cases were admitted during the first month alone.

These figures give some idea of the extent of the work carried out at the Clinic for the benefit of Dunfermline children—they also show that the Clinic has been able to cope with the increased work thrown upon it.

It should be noted that many of the patients were found to be suffering from more than one defect and were treated accordingly.

DEFECTS TREATED.—The following table shows the main classes of defects and the number of cases in each class.

Defects.				No. of Cases	
Antero-Posterior Curvature of the Spine	..	..	..	..	19
Lateral Curvature of the Spine	..	..	..	..	11
Paralysis	..	..	..	..	17
Flat Foot	..	..	..	..	36
Club Foot	..	..	..	..	6
Sprains, Fractures and Injuries	..	..	..	..	56
Rickets and Debility	..	..	..	..	16
Other Conditions	..	..	..	..	20
					181

In regard to the 19 cases of Antero-Posterior Curvature of the Spine, 5 were cases of Kyphosis and 4 of Kypho-Lordosis. Of these, seven were the result of marked debility. Five were due to bad posture and one to rheumatism. Of the eleven cases of Lateral Curvature, three were due to debility and six to habits of faulty posture. One was a case of Scoliosis due to an extra half vertebra, and one the result of debility from an affection of the heart.

The results obtained from the treatment of all cases of curvature of the spine have been satisfactory. Seven of the cases were discharged cured. Nine showed very marked improvement, and of the others, only two cases failed to show some improvement consistent with the time they had been under treatment.



**PARALYSIS.**—Seventeen cases were treated. Nine were cases of Infantile Paralysis, two of Paralysis from birth, and two were the result of Diphtheria infection.

The treatment of paralysis is always prolonged. This is particularly so in Infantile Paralysis where not only are the nerves paralysed, but the whole limb or limbs become stunted in growth. In such a case, although a cure cannot be expected, much can be done to help the defect. In order to obtain the best results, treatment must be continued almost throughout the child's growing years.

By the end of the year, one case of diphtheretic paralysis was cured and six other cases showed very marked improvement.

**FLAT FOOT.**—Of the thirty-six cases of flat foot, twenty-one were due to debility. Debility probably plays an even more important role in the causation of flat foot than these figures would indicate. It is common clinical experience to find that children who are run down in health suffer from flat feet. Possibly this youthful affection is a predisposing cause of some of the painful foot conditions from which many suffers.

By treatment it is usually not difficult to improve the condition but a flat-footed type of walk is readily acquired, and that is by no means easy to correct. It soon becomes a habit and habits are difficult to change.

Nine of the cases were discharged cured during the year and five showed very great improvement. Most of the others had been under treatment for only a short time.

**CLUB FOOT.**—Only six cases of Club Foot were treated. No special remarks are called for.

**SPRAINS, FRACTURES AND INJURIES.**—In all, fifty-six cases, due to various kinds of injury, were treated during the year. Of these, there were twenty-four sprains, sixteen fractures or dislocations, seven cases of contusion and nine cases of Synovitis.

The results obtained in recent traumatic cases were practically always good. Most of the cases were only under treatment for a short time before being discharged "cured." One case of an enormous haematoma, and two of displaced semilunar cartilages of the knee were treated with very satisfactory results.

**RICKETS AND DEBILITY.**—Twelve cases of Rickets and four Debility underwent courses of general strengthening treatment. Rickets cases respond well to Massage methods, and some striking results were obtained.

**OTHER CONDITIONS.**—Nine cases of deformity of the chest were treated. This is a more common affection of children than is usually supposed. The constant coughing during an attack of Whooping Cough is a severe strain on the immature bones of a child's chest wall, and few children recover from a severe attack of the disease without showing



at least some temporary bending of the ribs. In children with a wicket tendency, the deformity is too often permanent. In early cases, the results obtained by remedial methods are satisfactory and might well be more often employed.

Two cases of Fibrositis of Rheumatic origin were treated by massage and heat.

Other conditions treated include cases of Asthma, Contracted tendons, Torticollis, Tubercular disease of joints, Valvular disease of the heart and Stammering.

During the year several cases were referred to their Family Doctors, and operations performed with good results.

Heat applied by the Neron Vitalux lamp proved of great service, particularly in cases of pain from injury, Infantile Paralysis and Fibrositis.

### F.—Debility and Malnutrition.

Two hundred and nineteen cases of Debility or Malnutrition were examined during the year, an increase of twenty-six over last year. Of this number one hundred and forty-five attended schools in Dunfermline and seventy-four attended schools in Rosyth.

Most of the cases first came under observation while under-going treatment for other defects, and were referred to this Clinic for fuller investigation.

In every case attempts were made to discover the cause of the child's condition, and as far as possible to rectify it, but when one reflects that the causes of debility include such widely different conditions as 'hereditary weakness,' 'insufficient food,' 'unsatisfactory homes,' 'overwork,' 'want of sleep' and 'disease,' it will be understood that to rectify the defect was by no means an easy matter in all cases.

Debilitated children react badly to ordinary trivial affections, no immunity appears to be established, and repeated attacks serve but to increase the debility. Many examples of this type were met with during the year, and it is fortunate for them that the resources of Banlrum Country Home were available and freely used.

The chief conditions found to be associated with debility in the cases seen may be grouped as follows :—

	No. of Cases.
Frequent colds and attacks of Bronchitis or Asthma ..	33
Poor resistance to septic processes with frequent attacks of boils, septic sores and Styes .. .. .	25
Insufficient or unsuitable food. (Tea and bread often bulked largely in the diet of these cases) .. ..	25
Tuberculosis, either of the nature of a pre-disposition to tubercular disease or in the form of affected glands of the abdomen, thorax or neck .. .. .	25
Rheumatism with or without affection of the heart and anaemia .. .. .	12
Septic Tonsils .. .. .	12
Rickets .. .. .	7
Intestinal Worms .. .. .	4



Of the remaining cases, some were attributed to errors in diet, perhaps particularly in respect of the Vitamin elements. Certainly a large number were due to unsatisfactory home conditions and all that that implies in the way of irregular meals, lack of sleep and unhygienic surroundings.

Some seventeen of the cases were convalescents from recent illnesses which had reduced the child's strength to an unusual degree.

In regard to the means of treatment available, by far the most important was residence at Bandrum Country Home. In many cases the main problem was to remove the child from conditions in which recovery seemed almost hopeless and to give it the best chance to build up its bodily strength and recover from its negative phase of immunity. Bandrum, with its cheerful healthy surroundings, open-air life, and abundant food and rest, provided the solution. Seventy-seven of the cases from this Clinic alone were transferred there during the year.

Residence at Bandrum also provided opportunities for the Matron and Staff to study the peculiarities of individual cases, and to give advice to parents concerning their children's health.

Artificial Sunlight proved of great service in the treatment of certain types of debilitated children, and Chemical Food, Malt or Cod Liver Oil were given with good results to others, particularly those suffering from Vitamin defects and poor resistance to catarrhal and septic conditions.

### **G.—Artificial Sunlight Clinic.**

This Clinic was opened in January 1931. In the Annual Report for that year, an account was given in some detail of the accommodation, equipment and general working of the Clinic during the first six months of its existence.

During the year under review, only minor alterations were made. The equipment remained much the same and gave satisfactory service.

The year's work has provided experience of great value in regard to the efficacy and use of this comparatively new form of treatment. Many factors have to be taken into account in connection with its administration. Each case must be considered by itself. This is particularly true with regard to the length and frequency of exposure. Children vary much in their reaction to Ultra-Violet Light. Some derive benefit from quite long exposures, but in others the dose must be greatly reduced. Certainly the indiscriminate use of Artificial Sunlight must lead to disappointing results. The rule of examining every case before prescribing the next dose was adhered to, and it is believed that much of the success of the year's work has depended on this.



ATTENDANCE.—The attendance throughout the year was most regular and there was no falling off in the number of parents who accompanied their children, or in their appreciation of the benefits derived from the treatment. In this connection, it is of interest to note that out of 130 children treated last year, almost 30 per cent. were brought back by their parents this year for a further course. The bulk of these were children suffering from Debility, Glandular enlargements and Rickets.

During the year, three hundred and eight children were treated for various affections. Of these, one hundred and sixty-two were boys, one hundred and twelve girls, and thirty-four infants and children under school age. Three thousand five hundred and thirty-eight treatments were given.

RESULTS.—As in the former year, the classification of results obtained has been based (1) on the degree of improvement in the morbid condition on account of which the child attended; (2) on the observation of a general improvement in the child's health; and (3) on information received from parents and guardians concerning the child's improvement in vitality, appetite, sleeping, etc.

On these standards the results of the year's work are summarised as follows:—

	Per Cent.
1. Cases showing no change .. .. .	16.23
2. Improved .. .. .	19.16
3. Greatly Improved .. .. .	41.56
4. Cured .. .. .	23

As only cases likely to benefit by a course of Artificial Sunlight were treated, the figure for those showing "no change" appears rather large. It must be remembered, however, that many of these cases had received only one or two exposures before the end of the year under report.

DEBILITY AND MALNUTRITION.—Under this head are grouped children who were not thriving, or who were not normally gaining weight and strength, children convalescent after acute illness, or suffering from the results of defective hygienic conditions, and those with a predisposition to tubercular affections.

Sixty boys, fifty-five girls and twelve infants and children of pre-school age were treated. Sixteen of these were grouped as having a tubercular predisposition. Several had been previously treated in sanatoria.

At the end of the year, ten children were discharged cured. Sixty were classed as "Greatly Improved," and thirty-six as "Improved."

An increase in appetite, improvement in general vitality and in sleeping and a better colour were marked features of the improvement in health which most of the children showed.



Records of the weight of children attending for treatment were kept. Eighty-two of the children suffering from "Debility" showed an increase in weight, the largest increase being that of a boy who gained 8 lbs. in 20 weeks. It was again noted that the obvious gain in health did not always correspond with a commensurate gain in weight.

**ADENITIS.**—Children frequently suffer from enlargement of the glands, particularly about the neck. Many of these start as a result of septic conditions about the head, teeth and tonsils. Others are of tubercular nature. The results obtained in the treatment of these cases by Artificial Sunlight have been most satisfactory. Twenty-eight cases of simple enlargement were treated. Of these, seven were discharged cured, nine greatly improved and four improved. Of cases of tubercular glands, twenty-five were treated. Six were cured, twelve greatly improved and four improved. In a few of these cases, operation were performed by the Family Doctors. Treatment in most tubercular Adenitis cases has to extend over a long period, but the results appear to compensate for the trouble involved. Several of the cases have attended last year.

**BRONCHITIS AND FREQUENT COLDS.**—Twenty-six children were treated. In estimating the effect of Sunlight on this type of case reliance has to be placed on the reports received from parents or guardians. These reports leave little doubt as to its value in warding off colds and keeping the child free from bronchial complications.

**RICKETS.**—Twenty-two cases of rickets were treated, eleven being among Infants and Pre-School children. The results of Sunlight on Rickets are now thoroughly well established. All the cases treated improved, and in some the improvement was most marked.

**SEPTIC CONDITIONS.**—Very satisfactory results have been obtained by the use of Artificial Sunlight in the treatment of septic conditions such as boils, etc. Children suffering from such affections are almost always run down in health, and the general tonic effect of Sunlight often produces a marked improvement. During the year, a few cases were treated by Ultra-Violet Rays locally applied. The results were encouraging.

**WARTS AND CHILBLAINS.**—Nine cases of Warts were treated. Six were cured, and three showed considerable improvement. The results were encouraging. Cases affected by numerous small multiple warts cleared up in a very short time. Those suffering from large single warts also did well, but took longer. One interesting case of Warts about the eye-lids, in such a situation as to render local treatment risky, did well on general body exposure. The results obtained in cases of chilblains were on the whole disappointing.



Several cases of Otorrhoea were treated, but as they were also having other treatment, it is difficult to estimate the amount of good the sunlight did them.

Other conditions included cases of affections of the Nose and Throat, Rheumatism, Nerve affections and Skin Diseases. Some of the cases of skin affections undoubtedly derived great benefit, but the numbers treated were small, and no general conclusions can be drawn.

In general it may be said that while Artificial Sunlight is of undoubted value in many cases, it is not a suitable form of treatment for all.



