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INSTITUTION OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

COUNTY OF FIFE.

Report by County Medical Officer for the Year 1937.

POPULATION.

The population of the County of Fife exclusive of the two large burghs of Dunfermline and Kirkcaldy is estimated to the middle of 1937 by the Registrar-General at 201,476, an increase of 4,040 on the population of 197,436 at the Census of 1931.

The population of the Landward Area is estimated at 101,991 ; that of the Small Burghs, twenty-three in number, at 99,485.

BIRTHS.

The births in 1937 allocated to the County exclusive of the large burghs numbered 3,368 (corrected for transfers), of which 1,717 were male and 1,651 were female. The birth rate per 1,000 estimated population was 16·7. Thus 104 boys were born to every 100 girls.

The illegitimate births were 173 (male 93, female 80), 5·1 per cent. of the total births.

In 1936 the births numbered 3,556 ; in 1935, 3,507 ; in 1934, 3,435 ; and in 1933, 3,448.

The births in the Landward Area in 1937 numbered 1,777 (corrected for transfers), equivalent to a birth rate of 17·3 per 1,000 estimated population.

The births in the Small Burghs were 1,591 equivalent to a birth rate of 16·0 per 1,000 estimated population.

MARRIAGES.

The marriages registered in the County excluding the large burghs were 1,258 in 1937, equivalent to a marriage rate of 6·2 per 1,000 estimated population. In 1936, the marriage rate was 5·8 ; in 1935, 6·2.

Of the total marriages, 588 took place in the Landward Area and 670 in the Small Burghs, the respective rates being 5·7 and 6·7 per 1,000 estimated population.

GENERAL MORTALITY.

The deaths, corrected for transfers, allocated to the County exclusive of large burghs, in 1937 were 2,559 (males 1,267, females 1,292), equivalent to a death rate of 12·7 per 1,000 estimated population. The death rate adjusted for age and sex distribution is also 12·7.

In 1937, there were 68 deaths more than in 1936 and in 1936, 97 more deaths than in 1935.

In 1937, the deaths in the Landward Area numbered 1,239 and in the Small Burghs 1,320, the respective death rates being 12·1 and 13·3 per 1,000 estimated population.

In 1936, the Landward deaths were 1,212 and the Small-Burgh deaths 1,279.

The annexed table summarises the causes of deaths in the County (Landward Area and Small Burghs). The most frequent causes of death in 1937 were:—Diseases of the circulatory system 623 (1936, 579); cerebral haemorrhage and other diseases of the nervous system 327 (1936, 325); cancer and malignant disease 294 (1936, 298); infectious and parasitic diseases 273 (1936, 195); diseases of the respiratory system 254 (1936, 315); congenital debility premature birth and malformations, etc., 148 (1936, 122); diseases of the digestive system 133 (1936, 145); and diseases of the genito-urinary system 106 (1936, 103).

MARRIAGES.

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CAUSES OF DEATH. LANDWARD AREA AND SMALL BURGHS, 1937.

CAUSE OF DEATH	All Ages			1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85—
	Both Sexes	Males	Females											
Infectious and Parasitic Diseases -	273	136	137	21	9	6	27	34	28	27	38	21	16	11
Cancer and Malignant Disease -	294	131	163	...	...	...	1	5	20	49	70	83	59	7
Diabetes Mellitus -	47	12	35	...	...	...	...	...	...	2	15	24	5	1
Other General Diseases: Chronic Poisonings	56	21	35	1	3	2	7	4	6	8	8	9	5	2
Cerebral Haemorrhage and Other Diseases of Nervous System -	327	149	178	8	3	2	4	1	6	27	59	99	88	26
Diseases of Circulatory System -	623	293	330	...	1	2	4	10	25	43	87	206	199	46
Diseases of Respiratory System -	254	140	114	40	2	2	8	12	12	17	27	52	51	18
Diseases of Digestive System -	133	70	63	7	1	4	8	4	7	21	21	33	16	1
Diseases of Genito-Urinary System -	106	67	39	...	2	...	3	2	5	10	22	35	23	4
Diseases of Pregnancy and Childbirth -	15	...	15	...	...	...	2	6	...	...	...	...	...	...
Diseases of Skin and Locomotor System -	20	17	3	4	2	2	3	1	...	1	1	6	...	...
Congenital Debility. Premature Birth, Malformations, etc. -	148	87	61	140	3	...	2	...	...	...	...	...	...	...
Senility -	105	48	57	...	...	...	...	...	...	...	...	...	58	38
Suicide -	14	11	3	...	...	...	...	...	3	2	3	4	...	...
Other Violence -	113	65	48	4	2	3	12	11	14	13	13	14	13	9
Ill-defined Causes -	31	20	11	...	...	...	...	1	1	7	8	10	2	2
All Causes -	2559	1267	1292	225	28	23	82	92	134	227	373	604	535	165
Percentage -	100.00	49.5	50.5	8.8	1.1	0.9	3.2	3.6	5.2	8.8	14.5	23.6	21.0	6.5

INFANTILE MORTALITY.

The deaths of infants under one year in the County exclusive of large burghs numbered 225 in 1938 (129 male, 96 female), equivalent to an infantile mortality rate of 67. In 1936, the rate was 69 and in 1935, 64—the lowest rate hitherto recorded for the County.

The deaths of infants in the Landward Area in 1937 were 124 (14 less than in 1936) and in the Small Burghs 101 (5 less than in 1936), the respective infantile mortality rates being 69·8 and 63·5 as compared with 70 and 66 in 1936.

The causes of infant deaths were:—Infectious and parasitic diseases 21 (whooping cough 9, influenza 6, cerebro-spinal fever 1, non-pulmonary tuberculosis 2, other infectious and parasitic diseases 3); other general diseases, chronic poisonings 1; diseases of the nervous system 8; diseases of the respiratory system 40 (bronchitis 8, pneumonia 28, other respiratory disease 4); diseases of digestive system 7 (diarrhoea 4, other digestive diseases 3); diseases of skin and locomotory system 4; congenital debility, premature birth, malformations, etc., 140; and violence 4.

PRINCIPAL EPIDEMIC DISEASES.

The deaths from these diseases in 1937 numbered 173 (male 84, female 89) equivalent to a death rate of 0·86 per 1,000 estimated population.

In 1936 the number of deaths from the principal epidemic diseases was 93 (male 49, female 44) the death rate being 0·46.

Deaths—Principal Epidemic Diseases, 1937.

<i>Disease.</i>	<i>Landward</i>	<i>Area.</i>	<i>Small</i>	<i>Burghs.</i>	<i>County.</i>
Typhoid Fever ...	1		—		1
Scarlet Fever ...	2		2		4
Whooping Cough ...	15		7		22
Diphtheria ...	2		5		7
Influenza ...	72		48		120
Cerebro Spinal Fever ...	3		3		6
Other Epidemic Diseases ...	6		7		13
Total ...	101		72		173

There was no death from measles during 1937 whereas in 1936 there were 12 deaths from that disease. The deaths from whooping cough in 1937 were 22 as compared with 16 in 1936. Of the deaths from whooping cough, 21 occurred at ages below five years. If children can be kept free of the infection of whooping cough and of measles for the first five years of life, the chance of death on contracting the infection later in life is greatly diminished.

Deaths from scarlet fever in 1937 numbered 4 as in 1936 as compared with 8 in 1935, 18 in 1934 and 22 in 1933.

Deaths from diphtheria in 1937 were 7, the same number as in 1936. Influenza was stated as the cause of 120 deaths as compared with 41 in 1936.

The number of deaths from the principal epidemic diseases varies according to the types of infections occurring during the year but the diseases in the main responsible for heavy mortality from these causes are influenza and, in respect of young children, whooping cough and measles.

DEATHS FROM TUBERCULOSIS.

The number of deaths from tuberculosis in 1937 was 88 (male 47, female 41), equivalent to a death rate of 0.44 per 1,000 estimated population. In 1936, the deaths were 91.

Of the deaths in 1937, 40 occurred in the Landward Area and 48 in the Small Burghs, the respective death rates being 0.36 and 0.49 per 1,000.

Of the total deaths from tuberculosis, 65 were caused by pulmonary tuberculosis (Landward 29, Small Burghs 36) and 23 by non-pulmonary tuberculosis (Landward 11, Small Burghs 12).

In 1937 the deaths in the Landward Area were three more than in 1936 and in the Small Burghs eight less.

DEATHS FROM CANCER.

The number of deaths from cancer (malignant disease) in 1937 was 294 (males 131, females 163), the death rate being 1.46 per 1,000 estimated population.

The deaths in the Landward Area were 142 and in the Small Burghs 152.

In 1936, the deaths from cancer were 298.

DEATHS FROM DISEASES OF RESPIRATORY SYSTEM.

These diseases accounted for 254 deaths (male 140, female 114) in 1937, the death rate being 1.26 per 1,000 estimated population.

There were 315 deaths from these diseases in 1936, the rate being 1.56 per 1,000.

Of the total deaths in 1937 from diseases of the respiratory system, 113 were attributed to bronchitis, 113 to pneumonia and 28 to other respiratory diseases.

The deaths in the Landward Area numbered 122 (bronchitis 53, pneumonia 57, other respiratory diseases 12), a death rate of 1.20 per 1,000. The number of deaths in the Small Burghs was 132 (bronchitis 60, pneumonia 56, other respiratory diseases 16), the death rate being 1.33.

DEATHS FROM DISEASES OF PREGNANCY AND CHILDBIRTH.

The women dying from these causes in 1937 numbered 15 (puerperal sepsis 3, other puerperal causes 12), the maternal mortality rate being 4.45 per 1,000 registered births.

The number of deaths from diseases of pregnancy and childbirth in 1936 was 22, the maternal death rate being 6·2.

The maternal death rate for the years 1930-36 (inclusive) was 6·35. That of the County Area for 1937 is the lowest rate yet recorded.

Of the total deaths in 1937, 10 occurred in the Landward Area (puerperal sepsis 3, other puerperal causes 7) and 5 only, from other puerperal causes, in the Small Burghs. The maternal mortality rate of the Landward Area was therefore 5·6 as compared with the rate of 3·1 in the Small Burghs.

Hitherto, the maternal death rate of Fife County has been in excess of that for Scotland. It is pleasing to note in the Small Burghs the decrease in maternal mortality towards a rate approaching that which should obtain in respect of a natural physiological function. On the other hand the rate of the Landward Area is approximately twice as heavy as it ought to be.

The maternal mortality appears to be slowly diminishing. It may be that the attention directed to the subject and the investigation of its causes in conjunction with the inquiries preferred to medical practitioners relative to the facts of their attendance upon pregnant and parturient women are proving fertile of thought and consideration for the expectant mother. The Local Authority may however have a long and costly furrow to plough in this respect.

Maternal Mortality 1930-37.

Year.	Landward.			Small Burghs.			County Area.		
	Births.	Deaths.	Rate.	Births.	Deaths.	Rate.	Births.	Deaths.	Rate.
1930	2090	19	9·1	1713	9	5·2	3803	28	7·4
1931	1935	15	7·7	1673	8	4·8	3608	23	6·4
1932	1981	12	6·1	1542	5	3·2	3523	17	4·9
1933	1959	11	5·6	1489	8	5·4	3448	19	5·5
1934	1847	15	8·1	1588	8	5·0	3435	23	6·7
1935	1966	12	6·1	1541	14	9·0	3507	26	7·4
1936	1958	8	4·1	1598	14	8·8	3556	22	6·2
1937	1777	10	5·6	1591	5	3·1	3368	15	4·4
1930-37	15,513	102	6·6	12,735	71	5·6	28,248	173	6·1

DEATHS FROM VIOLENCE.

Deaths from violence in 1937 numbered 127 (suicide 14, other violence 113), equivalent to a death rate of 0·63 per 1,000 estimated population. Of the total deaths, 76 were males and 51 were females.

The deaths in the Landward Area were 64 (suicide 3, other violence 61), and in the Small Burghs 63 (suicide 11, other violence 52).

In 1936, violent deaths numbered 134 ; in 1935, 138 ; in 1934, 144 ; and in 1933, 138.

SMALL BURGHS—VITAL RETURNS.

The more important figures for each of the twenty-three Small Burghs are set forth in the annexed table.

The population of the Small Burghs has been estimated by the Registrar-General to the middle of 1937 at 99,485.

The births in the Small Burghs in 1937 numbered 1,591 (a decrease of 7 compared with 1936) equivalent to a birth-rate of 16 per 1,000 estimated population. The natural increase of the population (the excess of births over deaths) was 271 in 1937 as compared with 319 in 1936 and 353 in 1935.

The marriages numbered 670, the marriage rate being 6·7 per 1,000 estimated population. In 1936, there were 643 marriages and in 1935, 654.

The deaths, corrected for transfers, numbered 1,320, the death rate being 13·3 per 1,000 estimated population. In 1936, there were 1,279 deaths; in 1935 there were 1,188 deaths.

Infant deaths numbered 101 (5 less than in 1936) the infantile mortality rate being 63·5. In 1936, the rate was 66; in 1935, 49·3.

The number of deaths from tuberculosis was 48 (pulmonary 36, non-pulmonary 12), the death rate being 0·48 per 1,000 (pulmonary 0·36, non-pulmonary 0·12).

The numbers of deaths in the Small Burghs from tuberculosis in recent years are as follows:—1930, 68 deaths; 1931, 56 deaths; 1932, 70 deaths; 1933, 54 deaths; 1934, 48 deaths; 1935, 45 deaths; 1936, 54 deaths.

Deaths from the principal epidemic diseases numbered 72 (24 more than in 1936), equivalent to a death rate of 0·72 per 1,000.

Deaths from cancer and malignant disease were 152, the rate per 1,000 estimated population being 1·53. In 1936, cancer deaths were 157; in 1935, 144; and in 1934, 164.

SMALL BURGHS—VITAL RETURNS, 1937.

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	1,222	16	4	31	2	—	—	2	6	—	—	1
Buckhaven	19,125	361	121	228	26	6	—	14	22	—	—	26
Burntisland	5,596	81	29	81	3	2	1	1	7	—	—	4
Cowdenbeath	12,392	215	78	139	13	9	2	11	11	—	1	21
Crail	1,034	7	12	22	—	—	—	—	3	—	—	3
Culross	539	7	20	8	2	—	—	—	—	—	—	3
Cupar	4,864	85	48	74	3	1	—	2	11	—	1	8
Elie-Earlsferry	965	5	5	22	—	—	—	1	5	—	—	2
Falkland	915	17	10	15	—	1	2	—	—	—	—	3
Inverkeithing	3,412	63	17	50	9	6	1	1	1	—	—	6
Kilrenny-Anstruther	3,322	43	13	46	2	1	—	3	13	—	—	2
Kinghorn	2,007	29	7	24	2	1	1	2	4	—	—	4
Ladybank	1,194	17	8	18	1	1	—	1	2	—	—	—
Leslie	2,683	44	17	37	6	1	1	4	3	—	1	4
Leven	8,167	149	59	111	11	3	—	14	11	—	—	12
Lochgelly	9,243	157	71	102	10	—	1	5	11	—	1	12
Markinch	2,216	30	26	30	2	—	1	—	3	—	—	3
Newburgh	2,271	36	13	30	3	—	1	—	—	—	1	2
Newport	3,157	26	13	47	—	1	1	—	12	—	—	2
Pittenweem	1,694	30	9	17	—	—	—	2	2	—	—	—
St Andrews	8,493	104	56	113	5	2	—	8	15	—	—	10
St Monance	1,701	22	4	25	—	—	1	—	3	—	—	1
Tayport	3,273	47	30	50	1	1	—	1	7	—	—	3
All Small Burghs	99,485	1,591	670	1,320	101	36	12	72	152	—	5	132

Deaths from puerperal causes were 5 (puerperal sepsis 0, other puerperal causes 5) equivalent to a maternal mortality of 3.1, a much more satisfactory rate than that obtaining in the Landward Area. The number of such deaths in 1936 was 14, the same number as in 1935.

Diseases of the respiratory system caused 132 deaths in 1937, as compared with 156 in 1936 and 114 in 1935. The death rate in 1937 from these causes was 1.33 per 1,000.

The several rates of the two most populous Small Burghs of the County are :—

Buckhaven-Methil :—Birth rate 18.9 ; marriage rate 6.3 ; death rate 11.9 ; infantile mortality rate 72 ; tuberculosis death rate 0.31 ; death rate from principal epidemic diseases 0.73. There was no maternal mortality.

Cowdenbeath :—Birth rate 17.3 ; marriage rate 6.3 ; death rate 11.2 ; infantile mortality rate 60 ; tuberculosis death rate 0.89 (pulmonary 0.73) ; death rate from principal epidemic diseases 0.89. There was one maternal death (from other puerperal causes).

NOTIFICATION OF INFECTIOUS DISEASES.

The number of persons in the Landward Area and Small Burghs notified as suffering from infectious diseases in 1937 was 2,012 of whom 1,412 or 70.2 per cent. were removed to hospital for treatment. In 1936 the number of persons so notified was 1,806 ; in 1935, 2,551 ; in 1934, 3,212 ; and in 1933, 3,649.

In 1937, the persons notified suffered from the following diseases :—Cerebro-spinal fever 18 ; undulant fever 1 ; diphtheria 314 ; dysentery 64 ; encephalitis lethargica 1 ; erysipelas 180 ; acute infective jaundice 2 ; ophthalmia neonatorum 87 ; pneumonia—acute influenzal 183 ; pneumonia—primary 297 ; pneumonia—not otherwise notifiable 33 ; acute poliomyelitis 3 ; puerperal fever 7 ; puerperal pyrexia 25 ; scarlet fever 589 ; pulmonary tuberculosis 83 ; non-pulmonary tuberculosis 120 ; typhoid fever 2 ; para-typhoid 3.

Of 589 persons suffering from scarlet fever, 570 or nearly 97 per cent. were removed to hospital and all but 3 of 314 persons notified as suffering from diphtheria. Of 513 persons suffering from pneumonia (primary, influenzal or other), 350 or slightly over 68 per cent. were admitted to hospital for treatment. Twenty-six of 32 women notified as suffering from puerperal sepsis and puerperal pyrexia were treated in hospital as were also 15 of 87 infants suffering from ophthalmia. The number of patients suffering from erysipelas treated in hospital was 44.

In 1937, there were 94 more notifications of scarlet fever than in 1936 but those of diphtheria were 40 less.

The notifications of the typhoid fevers, viz., 5, in 1937 were 7 less than in 1936.

PUBLIC HEALTH (AMENDMENT) ACT, 1925.

In accordance with the provisions of the Scheme adopted in terms of the above Act, 31 patients suffering from diabetes and resident in the landward area and small burghs of the County were supplied with Insulin at a cost of £75 9s 4d. Fourteen patients refunded the cost in whole or part. In addition, fifteen patients were furnished with certain articles of food as special diet at a cost of £62 14s 7d. Scales for the accurate weighing of food were supplied to certain patients at a cost of 9s 11d.

TUBERCULOSIS SCHEME.

The scheme covers the Civil County excluding the large burghs of Dunfermline and Kirkcaldy and is administered on lines described in former reports by the County Council as Public Health Local Authority.

Dr Lundie, Executive Tuberculosis Officer, undertakes the domiciliary visitation of all persons notified as suffering or intimated as suspected of suffering from tuberculosis and recommends treatment, institutional or other. His services are freely available to the private medical practitioner when the diagnosis of tuberculosis is in doubt. Supervision of the infected family is secured by home visitation in so far as is practicable and treatment of contacts by tuberculin inunction, etc., is given either in the home or in clinic. Throughout the County, the Health Visitor acts as tuberculosis nurse, visiting approximately monthly each infected household and reporting upon the condition of the patient or other occupant to the Tuberculosis Officer.

In 1937, the persons notified as suffering from tuberculosis throughout the Landward Area and Small Burghs numbered 203, of whom 83 were pulmonary and 120 non-pulmonary cases.

In 1936, the notified cases numbered 248, of which 111 were pulmonary and 137 non-pulmonary; in 1935, the notifications numbered 261, of which 105 were pulmonary and 156 non-pulmonary; and in 1934, there were 301 notifications of which 142 were pulmonary and 159 non-pulmonary.

Of the 203 new notifications for 1937, 101 (pulmonary 34; non-pulmonary 67) were from the Landward Area of the County, and 102 (pulmonary 49; non-pulmonary 53) were from the Small Burghs.

The patients admitted for treatment to Glenlomond Sanatorium from the Landward Area numbered 56, and from the Small Burghs 55.

The admission to Glenlomond Sanatorium of 162 patients from the following areas was arranged during the year :—

LANDWARD.—Cupar District, 9; Dunfermline District, 18; Kirkcaldy District, 27; St Andrews District, 2.

SMALL BURGHS.—Buckhaven-Methil, 7; Burntisland, 1; Cowdenbeath, 14; Crail, 2; Cupar, 4; Falkland, 1; Inverkeithing, 5; Kinghorn, 1; Ladybank, 1; Leven, 3; Lochgelly, 7; Markinch, 2; Newburgh, 1; Newport, 1; St Andrews, 3; Tayport, 2.

In addition, 9 patients were admitted from Kinross County and 42 patients from areas outwith the County of Fife.

DOMICILIARY TREATMENT.—During the year, additional nourishment was supplied to 64 patients at a cost of £181 7s 3d, or £2 16s 8d per patient. In 1936 the cost was £219 9s 7½d, and in 1935, £191 4s 7d.

The routine foods supplied to tuberculous patients in their homes are milk, oatmeal, farinaceous food, cod liver oil, butcher meat and, occasionally, butter and eggs.

LUPUS (TUBERCULOSIS OF THE SKIN).—Nine patients suffering from this condition were granted transport facilities to permit of their attendance at the Skin Department of Edinburgh Royal Infirmary for treatment. The expenditure amounted to £166 3s 2d or £18 9s 3d per patient. Of these patients, three received Lomholt Lamp treatment at the Infirmary, and the Local Authority contributed £22 1s towards the cost of this treatment.

SUPPLY OF DRUGS AND DRESSINGS, ETC.—Under the County Council Scheme for the provision of drugs and dressings, etc., to tuberculous patients, medical practitioners prescribed for 208 patients at a cost of £127 17s 1½d. The average cost per doctor was £3 4s 2d and the average cost per patient was 12s 3½d. The total cost of drugs, dressings, etc., in 1936 was £167 5s 3½d; in 1935, £205 9s 1d; and in 1934, £234 0s 8d.

In addition to Tuberculin Ointment supplied to School Clinics for the treatment of school children, Ointment was also supplied to 143 patients or their families. The total cost of Tuberculin Ointment for the year amounted to £23 13s 4d.

Report by Dr Alex. Lundie, Executive Tuberculosis Officer.

There has been a satisfactory decrease in the number of new cases of tuberculosis in Fife during the past year. There were 20 fewer new cases of pulmonary tuberculosis with a drop of 12 in the number of non-pulmonary cases, the figures for 1937 being Pulmonary 53, Non-Pulmonary 89, and for 1936 they were Pulmonary 73, Non-Pulmonary 101.

This is as it ought to be, and the death rate has also fallen by 2 this year notwithstanding the fact that the influenza epidemic of November and December 1936 was still prevalent in the early months of 1937. This is interesting in view of the fact that the Registrar-General reports that the death rate from all causes for the third year in succession has shown an increase. The rate for

1937, 13.9 per 1,000, is the highest on record since 1929. He attributes this to the prevalence of influenza in 1929 and 1937.

I ought here to state that I took pains to visit all pulmonary tuberculosis cases during the influenza epidemic and was surprised to find that no well established case of tuberculosis was found to have been exacerbated by influenza. At the same time several new cases were ushered in by what appeared to be an ordinary attack of influenza.

The total decrease of new cases of tuberculosis in the County in 1937 was 32. Last year the decrease was 17 and in 1935 it was 12. There was a decrease in the number of notifications of all forms of disease amounting to 45 less than in 1936. The number of notifications in 1937 was 203.

There were 83 new pulmonary notifications, 28 less than in 1936, and 120 new non-pulmonary notifications, 17 less than in 1936.

Cases examined before notification numbered 73. Of these, 44 were suspected by the private medical practitioner to have pulmonary tuberculosis. Diagnosis was not confirmed in 26 of these cases. It was confirmed in 8 cases and ten cases were still under observation. Of the remaining 29 cases reported as non-pulmonary tuberculosis, 20 were confirmed.

The number of families visited in 1937 was 2,414, being 116 less than in 1936.

The number of new pulmonary cases visited, including notified and unnotified, was 127, a decrease of 39 on the previous year: also 127 new non-pulmonary cases were visited, a decrease of 7 on 1936.

Visits paid to old pulmonary cases were 1,070, and old non-pulmonary cases 877, decreases of 24 and 112 respectively on the previous year, but the number of contact families visited was 213, an increase of 66 on the previous year. It pays well to give increased attention to contacts. The more closely they are kept under supervision the more seldom will a new case arise among them.

At the last day of the year, the number of new pulmonary cases in which diagnosis had been confirmed was 32 males over fifteen years of age and none under, while 1 female case under fifteen years and 20 female cases over fifteen years were confirmed: total—males 32, females 21. To these figures ought properly to be added as new cases 14 males and 12 females who died before they were notified. That makes total new cases—males 46, females 33. Of the non-pulmonary cases confirmed at that date, 39 males were under fifteen years of age and 8 males were over fifteen, while 29 females were under fifteen years and 13 females were over fifteen: total—males 47, females 42.

Age and Sex Incidence of New Pulmonary Cases.

0-5	5-10	10-15	15-25	25-35	35-45	45-65	65 up	Total.
M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
0 0	0 1	0 0	6 7	11 8	6 2	9 2	0 1	32 21

It is to be noted that there is a sharp rise in the number of new cases after the age of 15 has been reached.

Admission of New Cases to Glenlomond in 1937.

Pulmonary.				Diagnosis not Confirmed.			
Adults.		Children.		Adults.		Children.	
M.	F.	M.	F.	M.	F.	M.	F.
26	11	0	2	1	1	0	0
Non-Pulmonary.							
2	3	11	12	0	0	0	0

Admission of New Cases to Glenlomond in 1936.

Pulmonary.				Diagnosis not Confirmed.			
Adults.		Children.		Adults.		Children.	
M.	F.	M.	F.	M.	F.	M.	F.
27	16	7	2	3	2	0	0
Non-Pulmonary.							
1	1	7	4	0	0	0	1

Localisation of disease in 89 confirmed cases of non-pulmonary disease :—Abdomen 12, Spine 3, Bones and Joints 7, Superficial Glands 56, Hip-joint 3, Other Organs 8.

Deaths from Tuberculosis in 1937.

Pulmonary—					Male.	Female.	Total.
New Cases notified before Death	...	...	...	...	10	7	17
New Cases notified at or after Death	...	...	...	...	6	4	10
Old Cases notified	...	...	...	...	20	21	41
Non-Pulmonary—							
New Cases notified before Death	...	...	...	...	0	0	0
New Cases notified at or after Death	...	...	...	...	9	7	16
Old Cases notified	...	...	...	...	2	3	5
Total	...	...	...	...	47	42	89

Age and Sex Distribution of Cases who Died in 1937.

	0-5	5-10	10-15	15-25	25-35	35-45	45-65	65 up	Total.
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
Notified Cases	0 0	1 2	0 0	8 5	8 8	9 4	5 9	1 3	32 31
Unnotified Cases	4 6	0 1	1 0	2 1	1 2	0 0	5 2	1 0	14 12

Summary of Year's returns compared with those of 1936 :—

All forms of Tuberculosis	—45 less notifications.
Pulmonary	—28 less notifications.
Non-pulmonary	—17 less notifications.
Pulmonary cases confirmed	—20 less than in 1936.
Non-pulmonary cases confirmed	—12 less than in 1936.

Deaths in 1937 were 2 less than in 1936.

This year the number of fatal cases which were not notified during life reached an alarming figure. The number was 26, equal to nearly 30 per cent. of all deaths. One died after a long illness due to lupus and general debility, and had been attended by no doctor until about the day of her death. Pulmonary tuberculosis was certified in 6 cases, meningitis in 9, miliary tuberculosis in 4, abdominal in 4, and in other parts, 3. One of the last mentioned had bursitis and osteomyelitis due to tuberculosis. These figures speak for themselves and suggest the need for more exacting criteria being enforced before accepting a diagnosis of tuberculosis as a cause of death. A *post mortem* examination can give the only sure evidence and it ought to be done by a duly accredited pathologist.

Comparison of Fife with other Counties :—

In 1936, Fife showed the sixth equal lowest death rate for all forms of tuberculosis in Scotland, the lowest being 30 per 100,000. Fife was 45. Sutherland was 101 and Ross and Cromarty 104.

The large burghs in 1936 varied from Stirling, 42, to Port Glasgow, 123.

Compared with English Counties in 1935, Fife was fifth with 45 deaths. South Shields had 143 deaths.

An influx of new population from an area with a high tuberculosis death rate to a growing industrial area such as West Fife, might readily raise the death rate from tuberculosis in Fife for some time.

PREVENTION.—All the measures dealt with under the subsequent headings may be included as having a bearing upon the prevention of the spread of this disease, but apart from these measures which are connected with a notified case, there are cases of infection or of active disease detected from time to time in homes by health visitors as tuberculosis nurses and by the medical staff in Infant Welfare Centres or at School Medical Inspections. These are referred to the Executive Tuberculosis Officer for investigation and for his recommendation as to any necessary treatment, and an endeavour to discover the source of infection is made.

The rehousing of the working classes is probably now showing its influence in reducing the spread of tuberculosis. In this connection a movement has been begun to try to ensure provision of a separate room for the accommodation of every case of chronic pulmonary

tuberculosis whose sputum is infective, but who is otherwise well enough to stay at home. So far, little progress has been made.

Whenever a case is found to be infected with bovine tuberculosis the source of the milk supply is at once reported to the County Veterinary Inspector who thereupon inspects the cattle concerned, with a view to the elimination of any found to be tuberculous.

NOTIFICATION.—New cases are notified by medical practitioners, Area Medical Officers and Medical Officers of Institutions. In addition a strict scrutiny of the monthly death returns of Registrars is kept, and some unnotified fatal cases are detected in this way, whereupon the home conditions and the health of the inmates is subjected to the same investigation as if the case had been duly notified during life. Where there exists some doubt about a diagnosis of tuberculosis in any case, the services of the Executive Tuberculosis Officer are freely available to the medical practitioner, and in this way, encouragement is given to the earliest possible diagnosis of new cases. Nevertheless, some cases are well advanced even when seen for the first time by the general practitioner.

HOME TREATMENT.—This is undertaken by the patient's own medical attendant. In addition the case is periodically visited by the Executive Tuberculosis Officer, and once a month if possible by the health visitor as tuberculosis nurse. She reports any change in the condition of the patient or of the other occupants of the house to the Executive Tuberculosis Officer.

Additional nourishment in the form of milk, oatmeal, eggs, farinaceous food, and occasionally butter, cod live oil and butcher meat is supplied to necessitous cases.

Medical practitioners prescribe any necessary drugs and dressings for patients under the Scheme similar to that of the National Health Insurance Act whereby the County Council bear the cost.

INSTITUTIONAL TREATMENT is provided at Glenlomond Sanatorium.

DISPENSARY TREATMENT.—There are no dispensaries. Tuberculin treatment is given in school clinics or at home. The services of the Executive Tuberculosis Officer and of the health visitors in their capacity as tuberculosis nurses amounts to the provision of a travelling dispensary, which is peculiarly suited to the varied needs of a large county.

CONTACTS.—The contacts of every new case are examined as early as possible, and tuberculin tested when necessary. Every case found to be infected is given a course of treatment with tuberculin inunctions, either at home or at a clinic. Supervision of contacts and their adequate treatment by inunction is thereafter

maintained as long as is necessary by the Executive Tuberculosis Officer, as well as by the health visitor in her capacity as tuberculosis nurse.

DISINFECTION.—All sputum is recommended to be voided on paper and immediately burned. Sputum flasks are supplied when necessary. Disinfection is carried out by the Sanitary Inspector, as far as is reasonably practicable, whenever a house is vacated by a patient.

AFTER CARE.—There is no after care association but all pulmonary cases are visited periodically for at least five years and non-pulmonary cases for three years after becoming completely free from all evidence of active tuberculosis. The Executive Tuberculosis Officer examines such cases completely at every visit and at shorter intervals the tuberculosis nurse pays a visit and reports any matter of importance to the Executive Tuberculosis Officer.

I have much pleasure in acknowledging all the help received from Health Visitors, Area Medical Officers, Dr Krause and Dr Munro.

TREATMENT OF VENEREAL DISEASES.

The Scheme, framed under the provisions of the Public Health (Venereal Diseases) Regulations (Scotland), 1916, is administered by a Joint Committee representative of the County Council and each of the large burghs of Dunfermline and Kirkcaldy and thus obtains throughout the Civil County.

There is no treatment centre within the Eastern Division of the County, patients from this area attending the Public Health Institute, 55 Constitution Street, Dundee. In the Western County, two treatment centres are available: that in Kirkcaldy is within the premises of the Burgh Infectious Diseases Hospital and is administered by the Town Council on behalf of the County Joint Committee: that in Dunfermline, the Public Health Dispensary, Market Street, is directly supervised by the County Joint Committee.

Adverse comment on the site and nature of the premises of the Dunfermline Treatment Centre has been a feature of the Annual Report for many years past. It is satisfactory to report therefore that a site adjoining West Fife General Hospital has been acquired and that the plans for a new and commodious centre with entrance within the grounds of the Hospital have been generally approved. There is promise therefore of a new clinic consonant with the value and volume of the work that accrues in West Fife and at which patients will attend without the hesitation and reluctance that has been characteristic and natural to visitation of the present Centre in Market Street.

The cost of the provision of travelling facilities to treatment centres for necessitous patients during 1937 was £18 4s 7d as compared with £35 6s 3d in 1936.

KIRKCALDY CENTRE.—The new cases attending for treatment in 1937 numbered 279 (males 212, females 67), one more than in 1936. Of the new cases 60 suffered from syphilis, 133 from gonorrhoea, 2 from soft chancre, 25 from non-specific venereal infections and 59 showed no evidence of venereal infection.

The total number of cases dealt with during the year was 483 and the total attendances were 5,261 as compared with 6,662 in 1936.

The number of patients admitted for hospital treatment was 22, in-patient days totalling 142.

Defaulters, those ceasing to attend before completion of treatment, numbered 62 and 27 ceased attendance after completing treatment but before final test of cure. The number of patients transferred to other treatment centres was 56 and 110 were discharged after completion of treatment and observation. The number under treatment or observation at the end of the year was 165.

DUNDEE CENTRE.—The new cases attending for treatment at Dundee from Fife during 1937 numbered 34 (males 25, females 9). In 1936, new cases 58 and in 1935, 47. Of the new cases in 1937, 6 suffered from syphilis, 19 from gonorrhoea, 3 from other venereal diseases and 6 had no venereal disease.

The total attendances were 788 (males 400, females 388).

DUNFERMLINE CENTRE.—The work of this Centre is set forth in the subscribed Annual Report of Dr Graham Gumley, Medical Officer.

PUBLIC HEALTH DISPENSARY, DUNFERMLINE.

Report by Dr. Graham Gumley.

I have again the privilege to submit herewith a report of the services rendered, in giving effect to the provisions of the Venereal Diseases Act, at and from the Public Health Dispensary, Market Street, Dunfermline.

Premises and Equipment.—The relevant Act makes it obligatory upon the Local Authority to make provision for the clinical diagnosis of venereal disease, for the examination of pathological material in the elucidation of these infections, and for the free treatment of those in whom, by these means, disease is detected. The necessary essentials to the realization of these primary obligations in the western area of the County were founded in 1922, with the establishment and equipment of the present Dispensary as the

local centre of operations in the first orderly and comprehensive scheme for the combat of the venereal diseases.

The bulk of the equipment and the whole of the fixtures and furnishings are as originally provided when the Centre was established. The dampness and imperfect heating of the premises, together with the passage of time and the inevitability of wear and tear, have reduced a great number of the instruments to such a condition of general dilapidation that their useful life should now be pronounced extinct. The continued depreciation of these necessary articles of surgical equipment has been commented on from time to time and it was hoped that they might at least survive to see the closure of the Market Street premises. Toward the end of the year, however, it became increasingly evident that some replenishment was urgently necessary. Requisition was therefore made for the supply of these instruments, the list of requirements regarded as urgent being restricted to such as would not rapidly deteriorate to any appreciable extent in the present surroundings. These have now been received and their advent is welcomed with appreciation.

Fixtures and furnishings remain as hitherto. Nothing can be said in their favour and it would be a pity, at this juncture, to undertake any expense in refurnishing. At best it is hoped that they will be equal to the somewhat negative task of holding together until the premises are vacated.

The general unsuitability in site, size and condition of the present premises has called forth adverse comment in this report from year to year. The unsatisfactory nature of the Clinic is so well known to, and so amply recognised by, the Venereal Diseases Joint Committee that it is superfluous to reiterate the many faults. Suffice it to say that one contemplates with lively satisfaction the steady progress being made toward the provision of a well-situated, well-equipped and well-furnished clinic in replacement of premises which have, from a modest and more-or-less experimental inception, given good service for many years.

General.—Whilst we look in vain to the ancients for the origin of gonorrhoea and chancroid, and are appropriately ungrateful to Columbus for the gift of syphilis, it is well to appreciate, in the evaluation of progress made, that the scientific investigation and treatment of the venereal diseases, although super-posed upon four centuries of wonderfully accurate and painstaking clinical observation, is of comparatively recent origin.

The clinical study of the venereal diseases may be said to have been completed by the late Seventies. The course of the three major infections, their pathological ramifications, and, where occurring, hereditary manifestations were worked out to a point of practical completeness, while in the background of these more

particular ravages, their collective significance as a disruptive social influence, and the difficulties inherent to treatment were fully recognised.

During the last quarter of the century the organisms of gonorrhoea and of chancroid were identified and the essential unity of the respective infections conclusively proved. The mystery of syphilis, despite continuous and zealous search for the culprit—gravely impeded by inability to study the disease in animals—remained, at the close of the century, as the outstanding item on the debit side ; it was not long so.

Beginning in 1903, one important discovery followed another with a rapidity which is without parallel in the history of any disease. In that year Metchnikoff and Roux demonstrated that syphilis was inoculable in apes and opened up an entirely fresh field for further intensive research ; two years later, as a result of this new avenue of approach, Schaudinn and Hoffmann successfully ended their patient search for the causal organism of syphilis. In 1906 Wassermann applied the serum-complement re-action to the diagnosis of syphilis and developed, as a practical test for the disease, the particular technique which bears his name. In 1909 Ehrlich brought to a successful conclusion his researches into the treatment of the disease by organic compounds of arsenic, and the stage was set for an organised and well directed drive against the whole wasteful and devastating group of the venereal diseases.

Following investigation and recommendation by Royal Commission and Inter-Departmental Committee, the Venereal Diseases Act was placed, in 1917 and with commendable dispatch, on the Statute Book, and the concerted effort to minimize, so far as might be humanly possibly, the incidence and effects of these infections, was under way.

Not for two years has it been necessary to record an increase in the number of new patients. In the report for 1936, while expression was given to the satisfaction to be derived from a continued reduction in numbers, it was thought expedient " to temper " optimism with considerable reserve and to legislate for the continuance of these infections, in still formidable number, for many " years to come." The balanced factors of this counsel still operate ; there is no doubt whatever that, in the short term of twenty years which has passed since the introduction of legislation to deal with venereal disease, an enormous improvement has taken place and, while there is no room for complacency, there is every justification for continued optimism. The incidence and delayed consequences of both hereditary and acquired syphilis are enormously reduced and bid fair, in the course of a further twenty years, to become mere shadows of their former grisly selves. (There is no comparable progress in the case of gonorrhoea and, in the report for 1936, the

reasons for this obstinate prevalence were briefly set out.) While fluctuations, especially in local statistics, will occur from time to time, the increasing pressure of widespread education in matters of social hygiene together with improved methods and means of treatment will effect, in the course of time, a still further reduction.

It is in the last degree likely that venereal disease will ever be completely eradicated. The aim must be to treat, with the utmost promptitude and efficiency, the largest possible proportion of those who do become infected. The number of possible sources of infection to others must be thereby reduced and the destructive effects on the value of the individual as a social unit minimized or completely avoided. These objectives are slowly being achieved; even the static disabilities of former untreated gonorrhoea are becoming progressively less common.

While this stands to the credit of efficient treatment, it must be recognised that of primary importance is the wide-spread realization of the need for immediate adequate treatment. There can be no shadow of doubt that, without one single further contribution from medical science in the direction of improved methods, the almost complete abolition of venereal disease could be obtained by the successful and wide-spread instillation of knowledge and realization of the facts and implications of infection.

New Cases.—During the twelve months period under review there had recourse to the Clinic 211 persons, comprising 154 males and 57 females, an increase, on comparison with the figures for 1936, of 21 males and 10 females.

Of the total number there were found, after full investigation, 40 males and 28 females who were either free of all disease or who suffered from pathological conditions to which the venereal diseases stand in no causal relationship.

The remaining 114 males and 29 females were found to be infected with one or more of the varieties of venereal disease and, having regard to instances of double or multiple infection, yielded cases in the undernoted variety and numbers :—

Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Specific Venereal Infections.	Total.
Males	19	82	1	19	121
Females	15	20	0	0	35

The statistical requirements of the annual return to the Department of Health for Scotland take cognisance of every case of infection and, at the same time, take due note of the non-venereal; a distinction must therefore be made between the total number of

persons reporting—211—and the total number of *cases* dealt with—224. The under-noted percentage figures are calculated to the latter denominator.

Age.—The age grouping of new patients again shows that, while the work of the Clinic is directed more particularly to the medical care and ultimate benefit of those aged 20-34 years, there is a considerable need for similar service throughout the whole period 15-44 years, and a more limited, though no less useful field, extending toward the extremes of life mature and immature. The fall of the ages in the successive quinquennial periods is set out below :—

Sex.	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	Total.
Males	1	0	0	5	25	43	27	11	15	8	5	5	5	3	1	154
Females	3	4	2	6	12	9	10	6	3	0	1	0	1	0	0	57

The age groups below 20 years, yielding, as they do, no less than 21 patients, strike a somewhat incongruous figure in the drab disillusionment of a report on venereal disease, and it may be desirable to elicit the exact significance of their occurrence in such surroundings. Analysis of the results of examination of these younger patients is, happily, quite reassuring ; of the 6 males, 1 was found to be suffering from congenital syphilis and 1 from gonorrhoea, while 4 were found to be either entirely healthy or free of major infection ; of the 15 females, 1 was found to be infected by congenital syphilis and 3 by gonorrhoea, while the remainder were free of all venereal infection.

Route and Source of New Patients.—Whilst, as in previous years, the majority of patients elected voluntarily to seek treatment at the Clinic, others were variously recommended to attend ; 114 patients reported voluntarily ; 9 were recommended by Medical Officers of the Public Assistance Authority ; 2 by Area Medical Officers ; and 2 by the Medical Officer of Health, Dunfermline.

There has been a gratifying increase in the number recommended by neighbouring family practitioners—75 patients attended by this route as against 50 in the preceding year. The co-operation of the family doctor is welcomed with appreciation ; one feels that the activities of the Clinic enter into no semblance of competition with him and, by acknowledgment and exchange of confidential information, his continued help, in securing for his patients adequate facilities for treatment, has been assiduously cultivated.

There reported to the Clinic, 9 additional patients who had been seen at Treatment Centres elsewhere. These patients arrive armed

with a booklet (Form V.15) in which particulars of diagnosis and previous treatment have been entered. Should they leave the locality before cure is established, the V15 is returned to them with further particulars added and they are given precise written instructions as to where and when to report for completion of treatment. By this means the continuity of treatment is, so far as is possible, assured. During the year 13 patients were thus transferred, on removal elsewhere, to the care of other Treatment Centres. A similar international card (V44), embodying multi-lingual directions and an accepted convention of nomenclature, is available for seafarers.

Particulars of the localities whence new patients were recruited are set out in a statistical summary at the end of this report.

Cases of Syphilis.—These numbered 34 and comprise 15·17 per cent. of the whole; 3 cases were congenital in origin—at date of diagnosis, aged 12 years, 18 years, and 26 years respectively. The disease was latent, symptomless, and of accidental discovery in 1 case, and was actively destructive in 2—affecting the bony structure of the nose in 1 case and the eye in 1 case.

Of the acquired form of the disease there were 31 cases; in 5 cases diagnosis was established and treatment instituted whilst still in the primary stage of infection; in 8 cases the disease had already passed to the secondary stage before advice was sought while, in 18 cases, infection was of some standing, had lapsed into symptomless latency in 3 of these, and progressed to localisation of active disease in one or other organ in 15—in 5 the central nervous system was predominantly affected, in 3 the mouth and tongue, in 3 the heart and great vessels, in 2 the eyes, in 1 the liver, and in 1 the cranial bone. In only 3 cases of active tertiary disease could the occurrence of primary infection be accurately elicited as antecedent by 29, 30 and 30 years respectively. Failure to determine the date of infection in the remainder gives some indication of the stealth with which the virus of syphilis implants itself.

In the report for 1936 the innocent onset and long-continuing deception of the subsequent course of acquired syphilis were sketched in broad outline. The clinical material from the past year, despite the small numbers, again illustrates these essential characteristics; of 13 cases of recent origin 8 had passed, when first seen, to the secondary stage of generalised dissemination of the infection, while in only 5 was it possible to institute treatment in the earliest stage of the disease; in only 3 of 18 cases of old standing had the occurrence of primary infection made any lasting impression on observation and memory.

The lengthier duration and enhanced cost of treatment of the majority constitute part of the inevitable consequence of delay in seeking advice. Procrastination and hopeful expectancy are the

obstacles to progress of the individual and, further, are fraught with danger not only to the patient and his intimates, but also to the most casual of his associates and even, by indirect contact, to quite distant third parties. One case perfectly illustrates this latter danger—a particularly frank and straightforward lad presented with an undoubted syphilitic sore of the lip; the history as to possible exposure was entirely negative but he admitted, as a pardonable vice, the invariable evening ceremony of a “pint”. There can be little doubt that an infected and imperfectly cleansed beer glass was the most likely source of his infection.

Treatment of Syphilis.—Treatment of specific disease continues on lines identical to those which have been followed for some years past. There has been no notable advance in treatment during the year; fresh preparations of the standard therapeutic metals appear, with a flourish of trumpets, from time to time. Without doubt we owe a great deal to the research and enterprise of the many firms of manufacturing chemists but, nevertheless, the claims made on behalf of recent introductions require to be proved in practice by extensive and comparative trial. Adequate testing of these preparations in the field requires, for the establishment of a sound judgment, a much larger volume of clinical material than is available at the Dunfermline Centre and the guiding principle, in considering new therapeutic combinations, has been to await the results of investigation and the opinion of those who are in a position to carry out well-planned trials on an extensive scale.

The policy, in the circumstances, is a sound one—no false hopes or subsequent disappointments, no waste of time or energy, and no unjustifiable expenditure, only the ability to receive, with polite reserve, those admirable gentlemen whose unenviable mission it is to promote the sales of the latest therapeutic innovation.

The general scheme of anti-syphilitic treatment now in use has stood the test of practical application for some years. It provides, in cases of recent infection, for an intensive and sustained attack on the causal virus and, in the case of old-standing infection, for the adoption of a more cautious and variable tactical campaign.

The recently published recommendations of the League of Nations Committee of Experts established the methods and total dosage which might be accepted as providing, with safety and a minimum incidence of relapse, adequate treatment. In general terms it may be said that the practice of the Dunfermline Centre has anticipated these recommendations and aims at a scheme of treatment some 20 per cent. in excess of the efficient minimum recommended. Details of treatment given will be found in the statistical summary at the end of this report.

During the year patients made 1273 attendances for the purpose of receiving anti-syphilitic treatment at the hands of or under the

supervision of the Clinical Medical Officer, and, for dressing or other subsidiary treatment, 115 attendances.

There were discharged, as cured of syphilis, 24 cases, to the continued care of other Treatment Centres, 4 cases, and to the care of the family practitioner, 1 case.

Cases of Gonorrhoea.—Comprising 45·53 per cent. of the whole, there were 102 cases of gonococcal infection, 82 in males and 20 in females.

Gonorrhoea does not receive the public respect that is due to it and, while it is clearly the most common of the major venereal diseases, its exact frequency is not amenable to precise computation. The disease is, in contrast to syphilis, a straightforward inflammatory process of which the worst feature lies, not in any particular virulence of character, or duplicity of course, but in the unfortunately complicated local anatomy of that area in which it most frequently becomes implanted and where it appears to find its most favourable environment. The minute ramifications of the genito-urinary tract provide an admirable locus for the spread of infection, not only to neighbouring important structures, but into innumerable, small, localized, and comparatively inaccessible corners where infection may persist, with re-accession of activity from time to time, and consequent intermittent infectivity for an indefinite period.

The disease, therefore, and again in contrast to syphilis, tends to exert its destructive effects in the immediate locality of its portal of entry. In a proportion of cases, however, blood spread to distant sites may occur; thus poly-articular rheumatism and iritis are not uncommon complications, while endo- and pericarditis, pleurisy and even meningitis have been described from time to time. Despite the gravity of these possibilities, the worst feature of gonorrhoea is its tendency to perpetuate an infective state in the comparative absence of signs and symptoms; the complacency of the individual and the constant threat to others are thus assured. Further, while the infectivity of virulent syphilis yields rapidly to treatment, that of gonorrhoea does not and, unless treatment is persevered with until the date of cure, may persist for years. Indeed so much is this *the* critical fact that test of cure in gonorrhoea is essentially a test of freedom from infectivity.

Treatment of Gonorrhoea.—The routine treatment of this infection—rest, bland diet, physical and mental continence, irrigation, and vaccine—appears, in its broad principles, to be endowed with phenomenal longevity, and continues to give satisfactory results at least cost.

As in all spheres of therapeutics, however, there is a constant endeavour to obtain still better results. During recent years there has been adduced a considerable weight of evidence to suggest

that we may most hopefully look, for improved methods, towards those which depend upon the induction of artificial hyper-pyrexia. The gonococcus can resist, for a limited time, quite low atmospheric temperatures, thrives at blood heat, but rapidly succumbs "in vitro" to levels comparatively little above normal body temperature. By the use of the Kettering Hypertherm, an elaborately designed and controlled human oven, the induction and maintenance of such raised temperature levels has produced dramatic results in the living subject. The apparatus is so expensive as to be obviously limited in its application but, in the near future, it is possible that a similar objective may be obtained by means more simply applied and operated.

The use of specific anti-serum has also been recently introduced. There is, to date, a very limited literature on the subject but the most recent publication of which one is aware would appear to indicate that the method is at least imperfect and its general adoption, as yet, unjustified.

The sulphanilamides which have proved their worth in the treatment of a variety of infections were introduced some years ago with, *mirabile dictu*, quite modest initial claims on their behalf. During the year they have appeared in the new roll of anti-gonococcal agents.

As their cost is not excessive they have been tried out at the Dunfermline Centre. Hasty conclusions are never wise and are possibly least so in relation to the value of any particular line of treatment in this disease. From the experience gained, however, there can be little doubt that, while the drug does not provide, in all cases, the long awaited panacea, it can and does effect, in many, an almost dramatic result, and represents a contribution to therapeutics of undoubted value, possibly the most valuable single step which has ever been made.

During the year patients with gonorrhoea made 1375 attendances for treatment under supervision of the Clinical Medical Officer, and 4433 attendances for intermediate treatment and dressing at the hands of the Medical Orderly. Patients discharged after searching tests of cure numbered 61, while to the continued care of other Treatment Centres were transferred 9 further patients. Patients who had reached apparent cure with cessation of treatment but who failed to complete tests of cure numbered 12. In a further 7 cases default in attendance occurred before the completion of a satisfactory course of treatment.

Cases of Chancroid.—This infection, never at any time a large item, appears to be becoming steadily less frequent.

The infective process, saving the rare exception, remains comparatively localized and eminently accessible, tending to pursue a slow course of persistent indolence or contrariwise, to spread with

a destructive rapacity calling for rigorous measures. During the entire twelve months period only one case presented for treatment, representing the lowest proportion for many years—0.44 per cent.

The progressive shrinkage in this item appears to connote a genuine diminution in incidence as, while the operation of a rigid standard of precision in diagnosis will cut the annual return in half, many years have passed since the adoption of such a critical standard and still the figure declines.

Treatment.—Treatment is Spartan in its simplicity and application, consists in repeated cauterization and, so far, has never failed to produce a prompt improvement with steady progress to complete cure. The single case required to make only 7 attendances on the Clinical Medical Officer and 15 attendances for the purposes of dressing.

Non-Specific Venereal Infections.—The magnificence of title in this group of conditions conceals, in effect, the diagnostic garbageman of any clinic. Cases of this description numbered 19 and represent 4.48 per cent. of the whole; they comprised a variety of infective conditions acquired, in the main, as are the major venereal infections.

Superficial and limited in extent, their importance lies, for the most part, in their ability to mask a concomitant infection of grave significance, and, as soon as this possibility has been excluded, they are ready to go their various ways, rejoicing.

Treatment.—This is of the simplest and varies, according to the indications, from minor surgery to a practical demonstration of the virtues of soap and water. The results of treatment are consistently good and, more serious infections having been excluded, there are no sequelae.

Attendances under this head numbered 107 on the Clinical Medical Officer, and 183 for intermediate treatment and dressing.

Conditions other than Venereal Disease.—Patients found to be free of venereal disease in any form numbered 68—30.35 per cent. of the total for the year.

This group is composed very largely of those who, with a recent trespass weighing heavily on a fearful conscience, present for examination and observation. Included also are contacts brought in for examination, families of patients with old-standing syphilis and patients sent by family practitioners for the exclusion of venereal disease as an aetiological factor in a variety of general ailments. All such are fully investigated over a period, where necessary, in excess of the maximum incubation period of syphilis. For this purpose 298 attendances were made on the Clinical Medical Officer; there were of course no attendances save these.

Deserving particular mention are the cases of 4 former patients who, in addition to the knowledge that they had been discharged cured in years past, desired further tests in determination of their fitness for matrimony. One is neither unappreciative of foresight nor unsympathetic to anxiety and, in recognition of their voluntary assumption of what should be an invariable duty, the little effort to which one is put is willingly expended.

Pertinent and in parenthesis it is worthy of note that, during the past year, at least three large states—not under dictatorship—have introduced legislation to secure that satisfactory *tests of freedom from venereal disease* shall be carried out as a preliminary to matrimony. We, on the other hand, with magnificent loyalty to traditions of freedom and democracy, have introduced simultaneous legislation to establish, as adequate grounds for divorce, *the presence of communicable venereal disease* at the date of matrimony. Are wisdom and democracy really so incompatible?

The group is thus of a negative character and, while it involves a considerable expenditure of energy, the service rendered is a valuable one and, with particular respect to fitness for matrimony, could well be, and with immense profit, still further extended.

Hospital Accommodation.—The facilities available at the West Fife Infectious Diseases Hospital continue to be satisfactory. During the year it was found necessary to admit to hospital 9 patients.

Of the 4 male patients admitted, 1 case of complicated gonorrhoea, and 1 case of cerebral syphilis were discharged from hospital appropriately benefitted. There died in hospital, 1 case of cerebral syphilis, and 1 case of syphilis of the tongue complicated by secondary infection and cellulitis of the neck.

Of the 5 females admitted, 2 cases of gonorrhoea with pelvic complications, and 1 case of gonorrhoeal vulvo-vaginitis (aged 13 months) derived appropriate benefit before discharge. In 2 further cases of syphilis admission was secured for the carrying out of tests of cure.

The total number of bed-days was 243, and the average duration of stay 27 days.

Springfield Asylum.—As in former years, co-operation with this institution continues smoothly and satisfactorily. Cases are seen in consultation with the Medical Superintendent and, jointly, a selection is made of those patients in whom benefit may accrue to the exhibition of anti-specific treatment. The necessary drugs are sent on from the Clinic and the administration of treatment is then left to the care of the medical staff of the institution.

In submitting this report, I have again to express my appreciation of the valuable assistance rendered by the Medical and Nursing staffs of the West of Fife Infectious Diseases Hospital, and by Professor Tulloch and the staff of the Bacteriology Department,

University College, Dundee, and, to the Nurse and Medical Orderly of the Clinic, my thanks for their loyal co-operation throughout the year.

Particulars of New Cases.

	Persons reporting.		Syphilis.		Gonorrhoea.		Soft Sore.		Non-Specific V.D. Infections.		Conditions other than V.D.		Clinical Cases. (Total)		Routine Attendances.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
January ...	13	5	1	1	8	2	1	—	1	—	2	2	18	2	659	—
February ...	5	2	1	—	5	—	—	—	—	—	—	2	8	2	591	—
March ...	8	3	1	1	3	1	—	—	1	—	3	1	11	1	603	—
April ...	9	10	—	3	5	2	—	—	2	—	2	5	19	5	644	—
May ...	15	7	2	1	5	—	—	—	4	—	5	6	23	6	675	—
June ...	14	4	3	1	7	2	—	—	1	—	4	2	20	2	619	—
July ...	13	2	3	2	3	1	—	—	2	—	5	—	16	—	594	—
August ...	18	5	2	—	13	2	—	—	3	—	2	3	25	3	699	—
September ...	14	6	1	2	8	3	—	—	2	—	4	2	22	2	687	—
October ...	12	3	1	1	6	3	—	—	3	—	2	—	16	—	641	—
November ...	19	7	1	3	11	3	—	—	—	—	7	3	28	3	734	—
December ...	14	3	3	—	8	1	—	—	—	—	4	2	18	2	660	—
Total, 1937 ...	154	57	19	15	82	20	1	—	19	—	40	28	224	28	7806	—

Particulars of Injections Given and Specimens Examined.

			Arsenobenzol Compounds.	Bismuth, &c.	Vaccines &c.	Total Number of Specimens Examined.
January	...	...	56	68	43	79
February	...	...	56	82	35	69
March	...	...	54	107	38	96
April	...	...	79	64	21	75
May	...	...	68	40	27	95
June	...	...	47	24	32	107
July	...	...	33	26	14	38
August	...	...	40	33	41	104
September	...	...	58	46	58	100
October	...	...	45	46	88	84
November	...	...	66	81	54	129
December	...	...	53	73	49	119
Total, 1937	...	...	655	690	500	1095

Districts from which Patients Reported.

Aberdeen	...	1	Hill of Beath	...	2
Aberdour	...	1	Kirkcaldy	...	1
Bowhill	...	4	Kelty	...	14
Burntisland	...	3	Kinross	...	3
Carnock	...	1	Kincardine	...	1
Cardenden	...	7	Lochore	...	4
Cowdenbeath	...	18	Lochgelly	...	7
Crosshill	...	1	Lumphinnans	...	3
Culross	...	3	Milnathort	...	2
Charlestown	...	1	Newmills	...	1
Crossgates	...	2	Oakley	...	2
Dundee	...	1	Rosyth	...	23
Dunfermline	...	81	Torrie	...	1
Glencraig	...	4	Thornton	...	2
Glasgow	...	1	Valleyfield H.	...	1
Halbeath	...	1	Valleyfield L.	...	3
Inverkeithing	...	10	Springfield Asylum, Cupar	...	1

MATERNITY SERVICE AND CHILD WELFARE, ETC.

The scheme of maternity service and child welfare operates throughout the Landward Area and the twenty-three Small Burghs of the County comprising an estimated population of 201,476.

The executive staff includes Dr Krause, Deputy Medical Officer (Welfare), six Area Medical Officers, six whole-time dentists (each with a dental attendant), and twenty-three health visitors who also act as tuberculosis nurses and assistant inspectors of midwives.

The new Welfare Clinic within the Burgh of Buckhaven and Methil has now been opened. It provides accommodation, facilities

and apparatus for every branch of welfare work inclusive of orthopaedics, the clinical and remedial work now being carried through under appropriate and advantageous conditions.

The welfare needs of the Burgh of Tayport and surrounding Landward area have also been met by the provision of a new clinic entered from the playground of the Burgh Public School where the duties of the Medical Officer, dentist and nurse are carried through under much happier conditions than have hitherto obtained.

It is hoped that, during the current year, material progress will be made towards the provision of the new welfare centre for the Burgh of Cowdenbeath, this project having hung fire for the past year. A properly equipped centre is urgently required for this burgh, the existing accommodation being antiquated, unsatisfactory and ill-suited to the needs of the area and numbers in attendance.

The investigation of financial circumstances prior to authorisation of additional nourishment, admission to hospital or institution, the supply of medical or surgical appliances, spectacles, dentures, etc., is undertaken by the County Medical Officer, where the patient or relatives are not in a position to provide the cost.

ADDITIONAL NOURISHMENT.—During 1937, 373 applications were made by or on behalf of families under the Maternity Service and Child Welfare Scheme. Fifty-seven applications were refused. Grants were authorised to 69 expectant mothers, 84 nursing mothers and to 163 families for children under five years.

The routine grant to expectant and nursing mothers and to children is milk: the quantity supplied during 1937 was 2,349 gallons 2 pints. Almost as a routine, oatmeal is supplied to expectant and nursing mothers in addition to the milk ration. Cod liver oil (B. P.) and like preparations are not infrequently supplied for children.

In special cases and in particular circumstances, proprietary food preparations are granted: such cases are rare.

The cost of additional nourishment in 1937 was £254 9s 2½d as compared with £429 7s 9½d in 1936. In 1937, milk cost £220 17s 10d; oatmeal and farinaceous food, £26 10s 3½d; dried milk preparations, £2 16s 6d; and other foods, £4 4s 7d.

MATERNITY HOSPITALS—Kirkcaldy Maternity Hospital.—During 1937, there were 324 admissions (315 women, 9 infants). The recognised maintenance and treatment charges were paid in respect of 300 admissions. In 7 cases, the patients were in part necessitous; in 16 cases wholly necessitous. Fees paid totalled £922 17s 6d.

Dunfermline Maternity Hospital.—During 1937, admissions numbered 182 (174 women, 8 infants). The recognised fee was paid in respect of 169 admissions. Five women were partly and four wholly necessitous. The fees paid totalled £477 18s 11d.

After seventeen years of useful life, Davaar Maternity Home was closed on 15th November, 1937, patients being admitted to the new Maternity Hospital of the Burgh thereafter. The new hospital contains 35 beds, is admirably equipped for its purpose, and there is the intention of appointing a resident obstetrician.

On occasion in the past, demand for beds in the Davaar Home restricted admissions; the new hospital should amply meet requirements for some years at least unless the demand by women for institutional confinement diminishes.

The following figures illustrate the admissions to the Maternity Hospitals of Dunfermline and Kirkcaldy Burghs since 1931 when the welfare scheme of the County Council became operative within the Small Burghs. It should be noted, relative to the admissions to Kirkcaldy Maternity Hospital, that the new hospital was opened towards the close of 1935.

Year.	Dunfermline Maternity Hospital.	Kirkcaldy Maternity Hospital.	Total.
1931	125	100	225
1932	184	120	304
1933	166	119	285
1934	142	139	281
1935	172	160	332
1936	162	245	407
1937	182	324	506

MIDWIVES ACTS.—Eighty claims were submitted by medical practitioners for payment of fees in terms of the Midwives Acts, 1915 and 1927: of these 76, amounting to £106 11s 6d, were paid. Two claims were ultimately withdrawn: two were overdue and no payment was made. In addition, £2 2s was paid in respect of medical attendance on two necessitous patients in Kirkcaldy Maternity Hospital.

MIDWIFERY SERVICE.—Applications on behalf of women in necessitous circumstances for midwifery service numbered 48. Of these, 32 were granted, 1 was withdrawn and 16 were refused. Of the refusals, maternity benefit was payable in 12 cases; in 2 cases, the income was beyond the scale entitling to consideration; and two applications were subsequent to confinement.

The applications were made by midwives, doubtful of their fee, in 33 cases, by health visitors in 12 cases, and by relatives in two cases. One woman applied on her own behalf.

The applications were received from:—Cowdenbeath 15; GlenCraig-Lochore 10; Bowhill 6; Lochgelly 4; Methil 4; Lumphinnans 2; Crossgates 2; Inverkeithing 2; and 1 each from Kelty, Hill of Beath and Newmills.

During the five years 1933-37, the average annual cost of furnishing midwifery service to necessitous mothers has been £67. During 1937, the expenditure was £40 12s.

MATERNAL DEATHS.—With the co-operation of the medical practitioners in attendance, reports on the circumstances attendant upon twenty-three maternal deaths were furnished to the Department of Health for Scotland. Of these, 19 occurred in hospital, 3 at home and one in course of removal to hospital. The areas of usual residence of deceased were:—Cupar Area, 3; Anstruther Area, 1; St Andrews Area, 1; Kirkcaldy Area, 1; Wemyss Area, 2; Lochgelly Area, 9; Beath Area, 3; and Dunfermline Area, 3.

ORTHOPAEDIC SCHEME.—On 1st January, 1937, 21 patients, for whose maintenance the County Council had accepted liability, were under treatment in Princess Margaret Rose Hospital for Crippled Children, Fairmilehead, Edinburgh. During the year, 32 patients were admitted for the first time, while 13 patients were readmitted for further treatment. The cost to the County Council for the maintenance and treatment of these patients during the year was approximately £2,221 1s 6d. Contributions, varying in amount from 1s to 15s per week, were made by parents towards the cost of maintenance of their children in Fairmilehead Hospital. Twenty-four patients remained under treatment at 31st December, 1937.

The child noted in last year's Report as being under treatment in Challenger Lodge, the Children's Home of the Edinburgh Cripple and Invalid Children's Aid Society, remained in that Institution during 1937 at a cost to the County Council of £39.

MATERNITY SERVICES (SCOTLAND) ACT, 1937.—This Act was added to the Statute Book during the year because it has been apparent to those interested in the common weal that the sickness and death-rates associated with pregnancy and child birth are disproportionately high compared with those obtaining in other countries—even with those of England, and investigation has proved that all is not well with the domiciliary maternity service of Scotland.

The main purpose of the Maternity Services Act, 1937, is the improvement of the standard of the domiciliary midwifery of Scotland by ensuring competent nursing and medical attendance for the mother in her own home before, during and after parturition. The Act secures to women desirous of being confined in their own homes, who apply or on whose behalf application is made, the joint supervision of pregnancy and the lying-in period by a certified midwife and medical practitioner and also, at the discretion of the medical practitioner, the advice and counsel of an approved obstetrician.

A report on the provisions of the Act and outlining a scheme for submission to the medical and nursing organisations and to the Department of Health was submitted to the Public Health Committee on 22nd September, 1937.

Negotiations with the County Nursing Association and also with those Nursing Associations which have not affiliated to the County Nursing Association have taken place and, the differences between the British Medical Association and the central authority relative to the remuneration of the medical practitioners service having been composed for the time being, the draft Scheme for Fife County has been submitted to the Department of Health and to the several nursing and medical organisations for their information and observations.

NUTRITION.—The Advisory Committee on Nutrition completed its first report in March, 1937, and in July a Joint Memorandum was issued to Local Authorities by the Department of Health for Scotland and the Scottish Education Department directing attention to the value of the Committee's findings relative to public health work and more particularly that of maternity and child welfare.

In submitting the Memorandum for consideration by the Public Health Committee, the subscribed observations were added :—

“ I have read the First Report on Nutrition and agree with the recommendations made therein relative to the value of the ‘ protective ’ foods (milk, butter (and other milk products), green vegetables, fruit and eggs) and the benefits of a balanced dietary. The crux of the information in that report in regard to protective foods and balanced dietary has in considerable measure been available empirically hitherto and has been observed by this Department in so far that, in granting additional nourishment, the first and main food granted has been milk, other articles being added on occasion to meet vitamin deficiency.

“ The difficulty is that as the income of a household diminishes in amount, there is a progressive fall in the consumption per unit of such protective foods as milk, butter, cheese, eggs, green vegetables and fruit. All protective foods are dear or regarded as dear (with the exception of potatoes) by those on lowest steps of the income ladder. Even the humble herring, the fish of the best food value, is dear nowadays and with eggs and fruit at their present price, it is I think obviously impracticable for those with a family of young children on the lower income levels to include such foods in their weekly budget in sufficient amount.

“ Where the circumstances of the family were poor and needy, I have not limited nourishment granted in the case of expectant mothers to the last month or two of pregnancy but have granted additional food, if the financial circumstances of the woman warranted, as soon as we learned of the pregnancy.

“ In the early days of our Maternity Service and Child Welfare Scheme, the granting of additional nourishment was regarded as a temporary but ‘ present help in time of trouble ’ to tide over periods of emergency stress resulting from illness of parents or children,

undue expenditure (funerals, etc.) and unemployment. Latterly, however, grants of milk, etc., in respect of children have continued for one year, two years or even longer where it appeared in the interests of children to continue them, while the adverse financial circumstances persisted.

" Memorandum 47, 1937, of the Departments of Health and Education appears to mark a change of policy at least in so far as the Department of Health for Scotland is concerned.

" Paragraphs 6 and 7 of the Memorandum contain the following relative to Schemes of Maternity Service and Child Welfare :—'Where the health of mothers and children demands there should be no limitations as respects either the period or the quality. The arrangements made by each authority should enable sufficient milk or other food of equivalent nutritional value to be supplied for as long as it is required for the maintenance of health during pregnancy and while the mother is nursing her child. Similarly, whatever amount is considered necessary for the health of young children should be made available.'

" The Memorandum then refers to the supply of cooked meals to expectant and nursing mothers by Local Authorities and continues :—'The arrangements of Authorities should not be limited merely to the making good of deficiencies. They should aim at securing a proper level of good health.'

" If these suggestions are approved by the County Council and are to be carried into effective operation with benefit proportional to cost, it appears to me that some form of communal feeding would be necessary. I am not satisfied that the mothers of households to which additional nourishment is most commonly supplied have either the knowledge to spend judiciously in purchasing the articles of food which best and most economically meet the nutritional needs of the family or the art to cook the food once it has been bought. Generally, the children of the good mother are well nourished although the income may be that of bare subsistence level: probably she, herself, goes short to her ultimate detriment, and that of her offspring if she be pregnant or breast-feeding.

" I agree wholly with the opinion of the Advisory Committee on Nutrition that 'the . . . essential is that correct feeding is more important for expectant and nursing mothers and young children than for the other members of the community and the younger the child the more important it is that it should be properly fed, for the effects of a dietary deficiency during childhood or adolescence may persist throughout life.'

" If nutritional requirements to ensure good health are to be secured, this in my opinion will only be done by rendering compulsory for senior girls in schools practical and, as far as possible, individual teaching of domestic economy relative to food prices,

food values, and practical cookery with appliances of the nature which are installed on the average in every working-class house.

"If such teaching is given and simple cookery demonstrated with articles of food and cuts of meat, the price of which is given in every case (and it is futile teaching cookery apart from prices), even the dull-witted will absorb that the nutritional value of a cheap meal is as good as the most expensive and can be made as appetising.

"I am not aware of the extent of the teaching of domestic economy or cookery in our schools. In any case, 'Foods, Memorandum No. 47, 1937' should be considered by the Public Health Committee. The opinion of the Education Committee should also be obtained. Thereafter the question of joint consideration and action may arise."

In accordance with the latter recommendation, joint meetings of representatives of the Public Health and Education Committees have been held and there appears to be good prospect of definite progress being made relative to the sufficiency and efficiency of instruction in cookery given in day schools.

REPORT BY DR R. A. KRAUSE,

Deputy Medical Officer (Welfare).

The report on the work of the Area Medical Officers and the Health Visitors under the Maternity and Child Welfare Schemes is in two parts.

A. The work of the Health Visitors and Welfare Nurses under the following headings :—

- (1) Infant births and deaths.
- (2) Conditions of homes on first visit.
- (3) Breast feeding.
- (4) Pre-school children.
- (5) Home visitation figures.
- (6) Infant Protection.

(B) Other aspects of Welfare work, such as :—

- (a) Midwives Acts, 1915 and 1927.
- (b) Maternity and Child Welfare Centres.
- (c) Ultra Violet Ray Therapy.
- (d) Dental Treatment.
- (e) Eye refractions.
- (f) Mental defectives—Institution cases.
- (g) Orthopaedic cases.

A.

(1) Infant Births and Deaths.

The number of births notified in 1937 was 3,473 (1,790 males and 1,682 females). In one still-birth sex was unknown. The

number of births in 1936 was 3,683. There is a decrease of 152 boys and a decrease of 59 girls.

The distribution of births in the various districts was :—

Dunfermline Landward	...	...	...	...	513
Cowdenbeath and Lochgelly	...	...	...	...	1009
Kirkcaldy Landward	...	...	...	...	386
Wemyss	...	...	...	...	739
Cupar	...	...	...	...	364
St Andrews	...	...	...	...	268
Anstruther	...	...	...	...	194

There were 143 still births (Dunfermline 20, Cowdenbeath and Lochgelly 46, Kirkcaldy 23, Wemyss 29, Cupar 13, St Andrews 9, and Anstruther 3).

The number of premature births was 164 (Dunfermline 24, Cowdenbeath and Lochgelly 56, Kirkcaldy 15, Wemyss 49, Cupar 9, St Andrews 10, and Anstruther 1). The number of illegitimate births was 133 (Dunfermline 23, Cowdenbeath and Lochgelly 32, Kirkcaldy 14, Wemyss 31, Cupar 14, St Andrews 13, and Anstruther 6). The figure in 1936 was 143. The number of plural births was 43 (53 in 1936). There were also triplets, 2 in Wemyss and 2 in Cupar district.

In 2282 births, arrangements were made for the family doctor to attend and 958 were attended by certified midwives. There were five births unattended and in 21 the birth took place before the doctor or midwife arrived. The number of births taking place in Institutions was 207—Dunfermline 17, Cowdenbeath and Lochgelly 43, Kirkcaldy 5, Wemyss 93, Cupar 1, St Andrews 48.

The number of infant deaths reported was 211 (240 in 1936)—Dunfermline 40, Cowdenbeath and Lochgelly 70, Kirkcaldy 23, Wemyss 45, Cupar 15, St Andrews 13, and Anstruther 5. The many causes of death were prematurity, debility, etc., 119, respiratory disease 40, other diseases of digestive system 7, infectious diseases 12, and other diseases 33.

The death of a healthy baby by overlaying is specially referred to by one of the Health Visitors. She expresses the opinion that “these mothers who persist in sleeping with their infants require to be more severely reprimanded.”

(2) Conditions of ‘Home’ on First Visit.

The condition of the home is reported upon by the Health Visitor when she makes the ‘first visit’ to the mother and infant. There were 3,424 first home visits. In 244 the condition of the homes was stated to be indifferent (Dunfermline 7, Cowdenbeath and Lochgelly 42, Kirkcaldy 18, Wemyss 95, Cupar 29, St Andrews 37 and Anstruther 16). In 26 the condition was reported as “dirty”—Dunfermline 1, Cowdenbeath and Lochgelly 4, Kirkcaldy 3,

Wemyss 13, Cupar 3, St Andrews 1 and Anstruther 1. In the case of the other 3,154 homes the condition was considered as satisfactory.

The Health Visitors also reported on conditions of overcrowding, etc. The overcrowding here referred to is in relation to the family and not based upon any official standard. In Oakley, out of 43 births, six occurred in 'sub-lets,' 4 in overcrowded houses, 3 in condemned property and 7 in Institutions. In High Valleyfield there are still some sub-lets, *e.g.*, one family consisting of father, mother and five children live in the kitchen and another family of two adults and six children live in the other room. In Crossgates overcrowding is still very prevalent. In Kelty numerous houses are still badly overcrowded. This state of affairs will, however, to a great extent, be remedied after completion of the new housing scheme. In Cowdenbeath the condition of some of the houses is still very poor. A good many families live in sub-lets. "On the whole, however, considering the overcrowding in many and the lack of facilities especially for washing of clothes which has often to be done in the kitchen, the mothers manage very well." In Lumphinnans there is a great improvement in the homes—more attention is paid to fresh air and sunlight, but many more houses are still required. In Lochgelly the condition of the homes "are all satisfactory as far as they can be under existing conditions. The standard of living is always rising but it is still a fact that in the south-east end of the town, 65 per cent. of the babies were born in sub-let rooms." Overcrowding is still prevalent in Auchterderran district. "Out of 224 births, the nurse found that at the first visit 76 families were living in one room. In one case eight persons were living in one room, and in two cases 7 persons." In Burntisland the housing is improving steadily every year. In Markinch "the new housing conditions with hot and cold water are a great help to mothers with young children." In Kirkcaldy Landward there are "still a few dirty and untidy homes principally of the "cottar type, where the mother goes out milking or working on the farm." In another part of this area three mothers had to be cautioned and some improvement followed.

In Buckhaven "many young couples are still living in sub-let rooms." There is also a good deal of sub-letting in Methilhill. "Several of the younger mothers try to keep their homes tidy but have difficulties on account of the cramped conditions." In Upper Methil and "the new housing area the conditions remain good although there are a few families living in new houses who are not living up to their improved conditions. In Lower Methil there is still a considerable amount of sub-letting and in some places families are living in disused shops." "To young couples starting married life in one room it seems to have rather disastrous results on the habits of the young women. Many of them seem to lose all notion of method or orderliness and get into careless, slovenly

habits which are not easily eradicated later on." In Leven there is "an increase in the number of births taking place in Institutions (39) and this probably is mainly due to the lack of suitable accommodation."

(3) Breast Feeding, etc.

The Health Visitors report that at their 'first' visits there were 2617 babies who were breast-fed (75.3 per cent.). The number of bottle fed babies was 560. The following are the figures for breast feeding in the various districts—the figures for bottle and mixed feeding are given in brackets):—Dunfermline 390 (79 bottle, 10 mixed), Cowdenbeath and Lochgelly 787 (139 bottle, 21 mixed), Kirkcaldy 280 (66 bottle, 9 mixed), Wemyss 548 (136 bottle, 21 mixed), Cupar 274 (52 bottle, 14 mixed), St Andrews 205 (41 bottle, 9 mixed), and Anstruther 133 (47 bottle, 10 mixed).

Living in sub-let rooms is given as a possible reason why young mothers quickly change from breast to bottle feeding. Too often older women give their advice—and it is often taken in preference to that of the Health Visitor.

(4) Pre-School Children.

The work in connection with the Fife Orthopaedic Scheme has shown the advantage of getting children with defects as early as possible if the best results are to be obtained and to prevent, as far as possible, the development of the grosser forms of defect with their crippling effect—making the child later a social burden.

The school clinics are therefore also available for treatment of pre-school children—minor ailments such as impetigo, discharging ears, etc., can be attended to; also children suspected to have eye conditions can be examined more thoroughly and where necessary glasses are prescribed; dental conditions are also treated. If parents would make it a habit to bring their children periodically to the dental clinics, even when the child does not complain of toothache, more preventive dental treatment could be carried out and the children incidentally would suffer less pain and get to like to go to the dentist.

The mothers of all infants reaching the age of one year are informed about the immunisation of children against diphtheria, and particularly the greater relative need for such protection in the case of such young children. Where the mothers wish the inoculation to be done at the clinic, this is arranged for.

In dealing with pre-school children, mention must be made of the very successful Nursery School which has been started by Miss Paxton in Lower Methil. The Health Visitor, Nurse Kellock, reports "There can be no doubt that the Nursery School is a distinct asset to the community and since the opening of the one in this area, I have seen a marked improvement in the health of the children

privileged to attend it. After even a few weeks of good and regular meals, regular rest and play times, I have seen children transformed from lifeless, inert little mortals, into lively, happy little beings full of the 'joy of life.' The children have a freedom to romp and play and facilities for organised games which they cannot possibly have in the poor and cramped homes from which most of them come. They are also receiving valuable training in habits of cleanliness, self-help and mutual help too often neglected or for which they lack proper facilities in their own homes.

"In this area there is ample room for the extension of this work as there are still many mothers anxious to have their children admitted."

More such schools should be available throughout Fife and it is hoped that another one will be considered in the near future.

There is also an increasing need for Child Guidance Clinics. Whilst the Education Committee have recognised this need and agreed to the setting up of at least one such centre, various factors have prevented the establishment of such a clinic.

(5) Home Visitations.

The number of home visits by the Health Visitor under the Maternity and Child Welfare Schemes was 52,007—Dunfermline 8,456, Cowdenbeath and Lochgelly 13,371, Kirkcaldy 8,553, Wemyss 7,966, Cupar 5,412, St Andrews 5,479, Anstruther 2,770. The number of mothers and infants seen at these visits was 32,999. In addition 22,974 pre-school children were also seen.

The Health Visitors also gave advice to 3,737 expectant mothers and as Assistant Inspectors of Midwives 138 visits of inspection were made to the midwives in their areas.

The Health Visitors or Welfare Nurses also act as "Tuberculosis" Nurses and in connection with this aspect of their work 7,119 visits (2,947 pulmonary and 4,172 non-pulmonary) were paid to the cases on the tuberculosis register.

It will thus be seen that the Welfare Nurses made a grand total number of visits of 59,252 (61,378 in 1936).

(6) Infant Protection.

The number of infants on the Register (January, 1937) was 56. There were nine cases added during the year 1937, two left the district, three were returned to relatives, and twelve were over nine years of age. Three infants were legally adopted by guardians.

In accordance with the Children Act, 1908, the Health Visitors required to pay 185 home visits and at these visits 218 children were seen. Of these infants 9 were new cases and 'preliminary' reports were made. In one preliminary case in Dunfermline area,

the Visitor indicated that, whilst the guardian was a good mother and would treat the child with kindness, this woman suffered from angina pectoris and consequently was apt to take fainting 'turns' without warning. The Infant Protection Visitor therefore considered this was an unsuitable home for the case of boarded-out children. This was reported to the Public Assistance Officer and the child was subsequently removed to the care of his aunt.

Two children had accidents during the year. In one case (Cupar area) "the child pulled a basin of hot water on to herself and both arms were scalded." In the other case (Dunfermline area) "the child's face was burnt with cinders when something exploded in the fire near which she was sitting." Both children are now quite recovered and in neither case was the accident due to any negligence on the part of the guardian.

The following were outstanding cases reported upon by the "Visitors." In Lochgelly area one child had to be treated in the Royal Hospital for Sick Children for anterior poliomyelitis or infantile paralysis. The child was later reported as "progressing satisfactorily." In Wemyss area a case of overcrowding was reported. On further inquiry it was pointed out "that arrangement is by no means ideal but there are many families living in worse conditions. The people are doing their best to get a house." The case is being kept under observation. The home conditions were stated to be unsatisfactory in one case, involving two children (Dunfermline area) where the guardians live in a sub-let room. They state they are unable to get a house.

B.

(a) Midwives Acts, 1915 and 1927.

In 1937 there were 53 midwives practising in the various districts of Fife (Dunfermline 14, Cowdenbeath and Lochgelly 16, Kirkcaldy 6, Wemyss 4, Cupar 4, St Andrews 8, and Anstruther 1).

In 197 cases the midwives sent for medical assistance (212 in 1936)—Dunfermline 47, Cowdenbeath and Lochgelly 130, Kirkcaldy 2, Wemyss 10, and North-East Fife 8.

The following is an analysis of the conditions for which medical assistance was sent :—

Delayed labour and uterine inertia	...	...	51
Torn perineum	...	...	28
Abnormal labour	...	...	21
Inflamed and discharging eyes	...	...	14
Weakness :—			
(a) Mother	...	...	3
(b) Baby	...	...	9
Premature Births	...	...	9
Still births	...	...	9
Pain and puffiness, legs, etc.	...	...	9
Raised temperature	...	...	7
Jaundice	...	...	5
Adherent or retained placenta	...	...	5
Maternal haemorrhage :—			
(a) Ante-partum	...	...	4
(b) Post-partum	...	...	4
Miscellaneous (contracted pelvis, death of baby, spina bifida, macerated foetus, Collapse, baby— septic fingers, cleft palate, bleeding cord, club foot, mother—eclampsia, pains in breast, etc.			19
			<hr/> 197 <hr/>

The midwives sent in the following copy forms to the Public Health Department (Welfare) :—

Death	...	...	...	...	...	4
Still births	...	...	...	...	...	36
Laying out of dead body	...	...	...	...	...	22
Liability to be a source of infection	...	...	...	...	...	7
Artificial feeding	...	...	...	...	...	8
Failure to follow advice	...	...	...	...	...	1
						<hr/> 78 <hr/>

The total number of births for the County was 3,473. Midwives attended 958 of these (Dunfermline 140, Cowdenbeath and Lochgelly 695, Kirkcaldy 22, Wemyss 41, St Andrews 34, Cupar 17, and Anstruther 9). The figures for 1936 were 3,683 and 981 respectively. There were 5 confinements at which neither a doctor nor a midwife was in attendance and 207 occurred in Institutions. There were also 21 infants born before a doctor or a midwife arrived.

The number of deaths of infants taking place within ten days of birth was 103 and of these 21 occurred in the practice of midwives (Dunfermline district 5, Cowdenbeath and Lochgelly 16).

The following figures relate to a number of puerperal conditions occurring in the practice of midwives—total County figures in brackets :—

Ophthalmia Neonatorum	18	(88)
Puerperal Fever	3	(7)
Puerperal Pyrexia	5	(24)
Still-births	24	(143)

In none of the puerperal fever or pyrexia cases occurring in the practice of midwives was there a fatal ending.

Acting as Inspectors of Midwives, the Health Visitors made 126 periodic inspections.

During the past year a considerable number of inquiries were again made into cases attended by handywomen. In only one case, however, were we able to establish the fact that the handywoman was acting as an unqualified midwife. At the inquiry she quite definitely stated that she was in the habit of examining the cases and advising the doctors when they had to attend. This case was reported to the Procurator-Fiscal and subsequently when the woman appeared before the Sheriff, she pleaded guilty to four contraventions of the amended Sub-Section of the Midwives (Scotland) Act, 1915, and was fined 10s.

A number of minor inquiries were made regarding midwives but in only one outstanding case was it necessary to take extreme action. Arising out of a report received that temperature records had not been taken and on more careful investigation, it was found that some of the temperature records appeared to be deliberately falsified. In view of the seriousness of the charge, the case was reported to the Central Midwives Board who subsequently suspended the midwife for a period.

(b) **Maternity and Child Welfare Centres.**

The future of the Child Welfare Clinic in Cowdenbeath is still unsettled. The difficulty is to obtain a suitable site. It is very unfortunate that the building cannot be proceeded with at an early date as the inadequacy of this clinic is becoming daily more evident.

The progress of construction of the new clinic at Methil is proceeding albeit slowly. The new clinic at Tayport will be available shortly and will meet a clamant need in that district. At Blairhall and Auchtermuchty there is no further progress to report as regards new clinics. This simply means that child welfare clinic work in these places is in abeyance. At East Wemyss nothing further will be done meantime as there is no vacant accommodation in the school and any additional rooms would mean building. The present conditions are very unsatisfactory from the mothers' standpoint.

The work at the Maternity and Child Welfare Clinics has been continued satisfactorily especially when the conditions at many of the clinics are taken into consideration. The following are the figures for the number of new cases and total attendances made :—

Clinic.						New Cases.	Attendances.
<i>Dunfermline District—</i>							
Crossgates	...	...	...	...	...	96	456
Inverkeithing	...	...	...	...	...	52	88
Torryburn	...	...	...	...	...	39	64
<i>Cowdenbeath and Lochgelly District—</i>							
Auchterderran	...	...	...	...	...	182	518
Cowdenbeath	...	...	...	...	...	157	1109
Crosshill	...	...	...	...	...	313	875
Kelty	...	...	...	...	...	249	868
Lochgelly	...	...	...	...	...	229	1724
<i>Kirkcaldy District—</i>							
Burntisland	...	...	...	...	...	69	423
Denbeath (a)	...	...	...	...	...	107	899
do. (b)	...	...	...	...	...	99	712
East Wemyss	...	...	...	...	...	17	175
Kinghorn	...	...	...	...	...	25	453
Leven	...	...	...	...	...	132	1098
Thornton	...	...	...	...	...	30	393
<i>North-East Fife—</i>							
Anstruther	...	...	...	...	...	61	422
Cupar	...	...	...	...	...	195	756
Ladybank	...	...	...	...	...	53	191
Newburgh	...	...	...	...	...	59	599
St Andrews	...	...	...	...	...	162	1941
Tayport	...	...	...	...	...	40	237
						2,366	14,001

The figures for 1936 were 2,341 cases and 14,237 attendances.

Mothers coming to these clinics do so mainly for advice regarding the feeding of their babies. Of the new cases (2,366) 1,478 were 'feeding' cases and 1,476 were seen by the clinic doctor—but 66 children were referred to the general practitioners.

A further analysis of the cases shows that 1,282 of the new cases were infants under 12 months; 449 were children between 1 and 5 years. There were 441 'other' cases and 194 expectant mothers. All expectant mothers who refuse to see their own doctor are referred to the Maternity and Child Welfare Clinics by the Nurses (Midwives (Scotland) Act, 1915). Any children seen at these clinics and found to have some remediable defect, are referred to the treatment clinics or to their family doctor. Special facilities are available for the treatment of minor ailments (scabies, impetigo, otorrhoea, etc.), dental, eye, and orthopaedic conditions. The attention of the Public Health Committee has repeatedly been drawn to the need for orthoptic training—conservative treatment applied to children with squinting eyes. It is hoped that some arrangement will soon be made to undertake this form of treatment, especially for young children.

The value of immunisation against diphtheria is stressed to all mothers of infants who have reached the age of twelve months.

Wherever possible this advice is repeated to ensure that every mother is made aware of the protection that can be so provided.

(c) **Ultra-Violet Therapy.**

There are three clinics equipped with apparatus for ultra-violet radiation—Cowdenbeath, Lochgelly, and Leven. The number of cases treated was 148 (130 in 1936)—Cowdenbeath 25, Lochgelly 57, and Leven 66. Of the total number of cases, 11 were infants, 73 children 1-5 years, 60 school children and 7 'other' cases. The total attendances made numbered 3,063. In 65 of the children there was marked improvement, slight improvement was recorded in 30 and in 17 there was no improvement. Many cases, unfortunately, come only for a short period and then stay away although not officially discharged.

The types of cases treated include bronchitis, adenitis, surgical tuberculous conditions (glands, etc.), debility, rickets, alopecia, asthma, anaemia, etc., etc.

(d) **Dental Treatment.**

Arrangements are made whereby mothers and children under the Maternity and Child Welfare Schemes are given dental treatment at the School Clinics. This also applies to Public Assistance cases and members of the Police Force who are referred for dental treatment.

The total number of treatments given was 3,228. This figure does not include the number of dentures that were provided, namely, 131 (and 1 partial).

(a) **PRE-SCHOOL CHILDREN.**—The number of pre-school children treated at the dental clinics was 449 (West Fife 91, Cowdenbeath 128, Lochgelly 77, Markinch 40, Buckhaven 45, and North-East Fife 68). These children made 528 attendances and received 1,485 treatments, namely, 790 extractions under local anaesthesia, 365 extractions under general anaesthesia, and 330 dressings or fillings. The figures for 1936 were 356 children and 1,253 treatments.

(b) **NURSING AND EXPECTANT MOTHERS.**—The need for dental treatment of nursing and expectant mothers is obvious to any medical officer or health visitor dealing with such women. The policy of treating expectant and nursing mothers who are in necessitous circumstances has been extended to those who are semi-necessitous. This will meet a most important need and play a definite part in the future improvement in the health of the mothers. In an inspection of 40 mothers attending the Maternity and Child Welfare Clinics in Lochgelly and Methil, but not receiving any dental treatment, four were edentulous, four had less than ten teeth, and twelve less than twenty teeth. Fifteen of these had dentures (four both upper and lower). In the case of 27 of the mothers,

extraction treatment was necessary. Only in 20 cases was a limited amount of conservative (59 teeth) treatment possible.

During the past year 109 expectant or nursing mothers received dental treatment (West Fife 45, Cowdenbeath 19, Lochgelly 13, Markinch-Wemyss 7, Buckhaven 5, North-East Fife 20). The total number of treatments was 551.

(c) PUBLIC ASSISTANCE CASES.—There were 201 cases treated (West Fife 49, Cowdenbeath 80, Lochgelly 38, Markinch, etc., 6, Buckhaven 19, and North-East Fife 9). This is a decrease in the number of Public Assistance cases as compared with last year (249) but the same number of treatments were given (1,127). These treatments were made up of 674 extractions under local anaesthesia, 420 extractions under general anaesthesia, and 33 dressings and fillings. In addition public assistance cases were also supplied with dentures (104—57 upper and 47 lower).

(d) COUNTY POLICE.—The number of members of the County Police Force who applied for treatment under the County Scheme was 17 (17 in 1936). The dental treatments consisted of (1) extractions—20 under local anaesthesia and 40 under general anaesthesia; (2) conservative treatment—15; and (3) dentures—11 upper, 7 lower and 1 partial.

(e) Eye Refractions.

Pre-school children attending the Child Welfare Clinics and found to be suffering or suspected to be suffering from eye defects are referred to the School Eye Clinics for detailed examination by the Area Medical Officers and if necessary by the County Eye Specialists.

Adult Public Assistance cases sent by the Public Assistance Officers are also referred to the Area Medical Officers. Last year 46 such cases were examined at the Eye Clinics and of these 18 were referred to the Eye Specialist. Glasses were prescribed in 39 of the cases—11 receiving 'reading' and 'distance' glasses, and in 28 of the cases only one pair of glasses was recommended (either for 'distance' or for 'reading'). In some of these cases (10) glasses had already been prescribed at the Edinburgh Royal Infirmary or other Hospital but it was necessary for the medical staff to take the frame measurements.

(f) Mental Defectives—Institution Cases.

In 1937 eight children were notified as uneducable mental defectives (Beath 1, Lochgelly 3, Wemyss 1, Dunfermline Burgh 2, and Kirkcaldy Burgh 1).

Six uneducable children were admitted to the following Institutions for mental defectives :—

Larbert	...	...	...	...	...	2
St Joseph's, Rosewell	...	...	...	...	...	4

The question of finding additional accommodation for mental defectives, especially low-grade cases, was further explored and it is suggested that the accommodation which will become vacant at Thornton Infectious Diseases Hospital when the new additions at Cameron Bridge Infectious Diseases Hospital are built and become available, should be utilised for this purpose.

(g) **Orthopaedic Cases.**

Thirteen specialist clinics were held and sixty-five children below school age were examined by Mr W. A. Cochrane. This figure does not include the number of pre-school children who were re-examined. In the case of these sixty-five children, sixteen were recommended for hospital treatment, thirty-seven for clinic treatment and in twelve cases it was deemed advisable for the treatment to be carried out at home, or the child was to be kept under supervision.

Clinic treatment was carried out at the following clinics :—

Buckhaven	...	...	...	...	...	8-12
Lochgelly	...	...	...	...	...	7-17
Burntisland	...	...	...	...	...	0- 1
Dunfermline	...	...	...	...	...	3-10
Markinch	...	...	...	...	...	3- 2

The figures after each clinic are the number of pre-school children on the clinic roll at the beginning of the year and at the end of the year. The total number of pre-school children on the clinic roll had therefore increased from 21 to 42. The total attendances made by the pre-school children were 2942.

More detailed information regarding the work at the County Orthopaedic Clinics will be found in the School Report.

OPHTHALMIA NEONATORUM.

The number of cases of ophthalmia neonatorum notified was 88. The distribution of the cases was as follows :—

Dunfermline Landward	...	...	...	...	14
Cowdenbeath and Lochgelly	...	...	...	...	25
Kirkcaldy	...	...	...	...	9
Wemyss	...	...	...	...	31
Cupar	...	...	...	...	5
St Andrews	...	...	...	...	2
Anstruther	...	...	...	...	2

These cases involved the Health Visitors in over 380 visits of inquiry and supervision. Out of the 88 cases, 17 were removed to hospital for more intensive treatment.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

During the past year there were seven cases of puerperal sepsis (16 in 1936) and 24 cases of puerperal pyrexia (21 in 1936). The number of fatal cases was one and two respectively.

PNEUMONIA.

The number of cases that were notified was 297 (Dunfermline Landward 78 (62), Cowdenbeath and Lochgelly 102 (73), Kirkcaldy Landward 24 (14), Wemyss 63 (37), and North-East Fife 28 (8)). The figures in brackets are the numbers of cases placed in hospital.

The number of cases notified as influenzal pneumonia was 183 (123).

EXAMINATION AND CERTIFICATION OF BLIND PERSONS.

Report by Dr R. A. Krause, Deputy County Medical Officer.

The scheme (see Report 1936) of examining applicants for certification as "blind persons" under the Blind Persons Acts was continued. During the year 1937, the total number examined was 97 and included 26 re-examinations.

The examinations were carried out at the central clinics in Edinburgh (58), Dundee (17) and Cupar (1). The remaining number (21) were examined in their homes. In 59 cases the person was certified as "blind" and 38 men and women were certified "not blind." In the case of 12 certified "blind," treatment was recommended—5 medical, 5 surgical and 2 optical. Of 21 certified "not blind," treatment was recommended—6 medical, 7 surgical and 8 optical. One man was advised to stop smoking as it was aggravating his eye condition. Five persons were referred for the Wassermann Test—in four the result was negative and one was positive.

An analysis of the cases shows that there were twenty-nine cases in which the primary eye condition was cataract. In four of these cases the condition affected only one eye. The next commonest condition was myopia (16). There were ten cases in which inflammation of the eyes was the chief cause, and there were seven in which a superficial inflammation had damaged the cornea or surface covering of the eye. Industrial accidents were responsible for five cases. In the remainder there were various conditions (congenital, etc.).

EXAMINATION OF MORBID PRODUCTS.

The number of specimens submitted for examination by medical practitioners during 1937 was 363, viz., throat swabs 181 of which 34 were positive to diphtheria; 17 bloods of which 2 were positive to typhoid and 2 positive to abortus; and 165 sputa of which 21 were positive to tubercle bacilli. In addition, 80 specimens of sputum were sent for examination by the Tuberculosis Officer, of which 18 were positive.

HOUSING.

Accounts of housing activity are set forth in the area reports of Drs Fyfe and McGillivray for the Eastern and Western Divisions respectively of the County, as are also particulars of the renovation and extension of existing houses under the provisions of the Housing (Rural Workers) Acts, 1926 and 1931.

MEAT AND MILK SUPPLY.

The agreement which had been framed jointly by the County Council and the Town Councils of Dunfermline and Kirkcaldy, both large burghs, whereby three full-time veterinary inspectors were proposed to be appointed for the more frequent and thorough examination of dairy stock and methods and more effective and competent supervision of slaughter-houses and the meat supply, did not materialise in view of the passing of the Agriculture Act, 1937, of which Part IV. made provision for the establishment by the Government of a State Centralised Veterinary Service under the control of the Ministry of Agriculture and Fisheries.

Under Part IV. of the Agriculture Act, 1937, the County of Fife, inclusive of the large Burghs of Dunfermline and Kirkcaldy, becomes part of a "division," the administrative unit of the Government Veterinary Service, which is inclusive of the Counties of Kinross and Clackmannan, with headquarters at Cupar.

Certain of the duties formerly vested in the County Council and undertaken by their Veterinary Staff are now transferred to the Ministry of Agriculture and Fisheries, viz.:—(1) Veterinary inspection of dairy cattle; (2) the duties under the Tuberculosis Order inclusive of payment of compensation for the slaughter of infected cattle; (3) examination of dairy cattle by a veterinary surgeon where the Medical Officer of Health is of opinion that infectious disease is, or may be, caused by the milk or the milk has been found to contain tubercule bacilli; (4) the tuberculin testing and clinical examination of dairy herds under the Milk (Special Designations) Orders.

The County Council however continue responsible for the operation of the Milk and Dairies Acts and Statutory Orders concerning milk and also for inspection of meat.

Cleanliness in the production of milk continues to make headway and the improved construction of byres and dairy premises generally progresses steadily.

During 1937 the number of dairymen on the "Roll of Accredited Clean Milk Producers" diminished to 23 from 28 at the end of the previous year. The scheme has served an educative purpose and has materially contributed to the numbers producing designated milks.

The following excerpts from the Annual Report for 1937 of Mr R. G. Anderson, F.R.C.V.S., County Veterinary Inspector, illustrate the nature of his work and outlook thereon :—

I have the honour to herewith submit my report for the year 1937 as called for by the Department of Health for Scotland, under Section 4 (5) of the Milk and Dairies (Scotland) Act, 1914.

No administrative difficulties were encountered during the year.

Of outstanding interest, is the undoubted fact of a general keen appreciation of the value of tubercle-free herds.

While the nature of the milk producing herds in the County, being non-self supporting in Stock requirements, does not lend itself to a rapid or extensive establishment of tubercle-free herds, there is an active concern amongst owners of such self-supporting herds as do exist in the question of freeing their herds from Tuberculosis.

The interest of the owners of flying herds also is shown by a willingness to pay an extra price for cows which have passed a Tuberculin Test.

1. *Condition and Cleanliness of Cattle.*

The general condition of cows inspected was very good, departures from a high standard being noticeable in individual animals rather than in herds as a whole, and having a recognised individual cause. A temporary cause, affecting larger numbers, existed in poor turnip or hay crops or spells of bad weather.

Cleanliness. Evidence of greater attention to grooming and clipping of cows was marked and more care in methods of milk production was noticeable. A further increase in the use of milking machines was very noticeable.

(a) Nature of fodder and diet, as affecting the quality of the milk.

In no case could it be said, or were there reports to suggest, that milk had been deleteriously affected by the nature of the diet or the fodder.

(b) Number of Diseased Cows found—specify diseases.

Diseases of Udder—non-tuberculous.

Atrophy.	Mastitis and Non-Tuberculous Indurations.	Teat Eruptions.	Injuries.
982	265	6	33

Atrophies are cases in which there is a diminution in size of the quarter of an udder, due to loss of function, the result of injuries, mastitis or teat obstruction. Other diseases found were :—

Retained placental Membranes ...	...	...	...	14
Johnes Disease ...	...	...	...	9
Traumatic Indigestion ...	...	...	...	5
Actinomycosis ...	...	...	...	6
Lameness ...	...	...	...	12

Anthrax was reported to have occurred in 2 dairy premises.

(c) Disposal of Milk from Diseased Cows.

The milk from diseased cows is invariably discarded entirely from use for human consumption; it may be fed to calves or pigs after boiling.

2. Inspection of Cattle.

	Average Number of Cows.	Number of Cows Inspected.	Annual Frequency of Inspection.
(a) Registered Dairies	9,300	18,565	Twice annually.
(b) Exempted Premises	10	24	do.
Other Farms	8	35	
		<u>18,614</u>	

3. Bovine Tuberculosis.

Include notes on any steps taken to secure Tubercle-free milk supply, and also on any difficulties militating against the successful marketing of Certified and Tuberculin Tested Milk.

Steps taken have been to endeavour to impress upon owners the wisdom of breeding their own stock, open-air rearing for young stock, securing that young stock be tested and not brought into contact with untested cows.

The lack of custom for a high priced article is the chief and one may say the only factor militating against the production of Graded Milks.

Items of cost of production, necessitating a high selling price, are the charges for distribution and the upkeep of perishable utensils; these make "Certified" and "Tuberculin Tested" milk a luxury article, which a producer cannot hope to sell except in very favourable circumstances.

Tuberculosis Order 1925.

	Tuberculosis of Udder.	Tuberculous Emaciation.	Chronic Cough.	Total.
1935	22	7	36	65
1936	31	—	53	84
1937	22	—	25	47
Post Mortem Results.				
Advanced	11	—	19	30
Not Advanced	8	—	5	13
Destroyed by Owner	3	—	—	3
Not Affected	—	—	1	1
	<u>22</u>	<u>—</u>	<u>25</u>	<u>47</u>

Of the above, 7 cases occurred in farms, not registered as Dairies, Tuberculosis of Udder, 1. Chronic Cough, 6.

State

(a) Number of Cows found Tuberculous on Clinical examination of herds.

	Udder.	Emaciation.	Chronic Cough.	Total.
Clinical Examination	21	—	10	31
Reported by Veterinary Surgeons ...	1	—	5	6
Reported by Owners	—	—	10	10
	22	—	25	47

(b) Number of Cows found Tuberculous after the Tuberculin Test—1 Bull and 4 Cows were tested for purposes of aid to diagnosis and on reaction were destroyed under the Tuberculosis Order, 1925. All were classified as "Not advanced" cases of Tuberculosis on *post-mortem* examination.

(c) Total number of cows to which the Tuberculin Test was applied, under Section 22 of the Milk and Dairies (Scotland) Act 1914.

None.

The following information, under (a) (b) and (c) has been furnished :—

(a) Number of Dairies holding graded milk licences, in respect of Tubercle-free herds.

Certified (or Tuberculin Tested).

(I.) Name and Address of Dairy.	(II.) Average No. of Herd.	(III.) Estimated No. of Gallons produced per annum.
Lady Victoria Wemyss, Wemyss Castle, E. Wemyss	32	23,804
Wm. Lohoar, W. Balrymonth, St Andrews	64	55,000
Dr James Younger, Mount Melville, St Andrews	22	19,500
Lord Cochrane of Cults, Crawford Priory, Springfield—		
Model Dairy	40	105,000
Open-air Dairy—Gascoigne	50	
do. Hozier	65	
	Attested Herds.	
James W. Clement—		
1. Kilrenny Mill, Anstruther	40	33,000
2. East Pitkeirie Farm, Anstruther	37	26,500
Archibald Dryburgh, Kirklandhill, Methil	44	31,000

(b) Number of any other Dairies known to have Tubercle-free herds.

(I.) Name and Address of Dairy.	(II.) Average No. of Herd.	(III.) Estimated No. of Gallons produced per annum.
James Hamilton, Urquhart Farm, Dunfermline	93	72,000
Attested Herd.		
Andrew Shedden, Newton, East Wemyss	47	32,000
Wm. Kinninmonth, Orrock Farm, near Burntisland	21*	15,000
*Purchases from Attested Herds.		
Wm. Young, Craigencauld, Kinghorn	39*	26,000
*Purchases from Attested Herds.		
W. Anderson, Monturpie Farm, Largo	21	16,000

Two other farms having each a herd of 40 cows are in process of being Tuberculin Tested.

(c) A list of Dairies holding licences for the production of "Standard" Milk.

Name and Address.	Average Number of Herd.	Estimated number of Gallons Produced per annum.
W. Anderson, Monturpie Farm, Largo	21	16,000
John Black, Grangehill, Elie ...	20	15,000
Thos. D. Fraser, Grange, Elie ...	18	13,000
Richard Telford, Lathallan Home Farm, Colinsburgh	16	11,500

4. Miscellaneous—Furnish:—

(a) Notes on any samples taken for examination in terms of Section 21 of the Milk and Dairies (Scotland) Act 1914. A sample of milk from each of 4 cows was taken and examined, because of a report from another Local Authority that a bulk sample of milk from this farm had proved positive to biological test for Tubercle Bacilli.

The sample from one cow proved positive for Tubercle Bacilli to microscopical examination and the cow was condemned under the Tuberculosis Order 1925.

The other three samples from cows with abnormal udders were negative to a biological test.

(b) A statement of the extent to which Sections 13 and 14 of the Act are being complied with.

No action was required under Section 13.

No reports were received under Section 14.

Meat Inspection.

Condemnations.	Bovines.		Pigs.		Sheep.	
	Total.	Partial.	Total.	Partial.	Total.	Partial.
Buckhaven	52	33	8	10	5	2
Leven	4	7	—	—	—	—
Leslie	2	4	—	—	—	—
East Wemyss	1	—	—	—	—	—
Markinch	3	4	—	—	—	—
Cardenden	1	1	—	—	—	—
Inverkeithing	—	1	—	—	—	—
	63	50	8	10	5	2

Ninety-seven visits were paid to Slaughter-houses.

I have much pleasure in acknowledging the enthusiastic support given by the Slaughter-house Superintendents and in commending the efficiency of their work as Detention Officers.

In this respect the good work done by the District Sanitary Inspectors calls for special acknowledgment.

PORT SANITARY REGULATIONS (SCOTLAND) 1933.

The routine procedure for the visitation at the ports of the County of ships infected or suspected of being infected with diseases defined in the Regulations continues satisfactorily and has been described in past reports.

HOSPITAL FACILITIES.

Plans for the extension of Cameron Infectious Diseases Hospital by 126 beds were approved. The work is now in progress.

PUBLIC ASSISTANCE.

During 1937, the number of prescriptions issued by Parish Medical Officers to the sick poor was 8,652 at a cost to the County Council of £560 8s 5½d. The corresponding figures for 1936 were 10,569 prescriptions at a cost of £653 7s 11½d.

Western Division.

G. M. McGILLIVRAY, M.C., M.B., Ch.B., D.P.H.,

Deputy Medical Officer of Health.

The year in question has been a strenuous one for all public health officials in the Western Division of the County. With the ever increasing demands made year by year on the time of public health officials in the preparation and submission of innumerable reports and returns, much less time is now available for practical work out of doors. It is essential that the latter should have first call on the services of those employed in the work, but with so much office routine to attend to, it is becoming increasingly difficult to cope with the outside work. Sanitary officials in this area are already overburdened and there is a limit to the amount of work which they can overtake.

From a health point of view the year under review was, on the whole, quite favourable. The wave of influenza which swept the country towards the end of 1936 and the early part of 1937, left in its trail many cases of pneumonia. Dunfermline district was the first to suffer but there the epidemic had already spent itself by the end of 1936. Spreading quickly from West to East, the disease was at its height in Wemyss area about the middle of January, 1937. The type was severe in character and so widespread that scarcely a household escaped its ravages. At Leven there were four deaths in a single family as a result of the infection and over the Western Division of the County many deaths were recorded. As an indication of the widespread nature of the infection, enquiries revealed the fact that general practitioners throughout the area were inundated with calls for their services. In Bowhill-Cardenden area alone, 5,800 persons who were suffering from influenza were attended by doctors during the epidemic. This tends to show that the general public, not realising the manner of spread, are in need of education on this point as many suffer who might quite well escape. The rapidity of spread is always alarming, partly due to the short period of incubation and partly to the fact that the bulk of the population are susceptible. Unlike most other infectious diseases, one attack does not render a person immune. Insanitary conditions may be disregarded as a contributory agent. Influenza is almost entirely spread by human intercourse or personal infection and the population would do well to realise this and avoid all place of public meeting during an epidemic. Owing to the naturally susceptible condition of most individuals, they can best protect themselves and others by refraining from attending cinema shows and other public meeting places. Especially should they avoid homes in which the disease is known to exist. Protection of the individual can also be helped

by avoiding exposure to cold and fatigue and by wearing plenty of warm clothing. Should infection occur despite all precautions, they can best help themselves by going to bed as soon as the first symptoms appear and by staying there till clear of infection. By refusing to permit any visitors, they can greatly minimise the risk of infection to others.

MEDICAL SERVICES.

1. Infectious Diseases.—The incidence of infectious diseases was slightly greater than in 1936, there being 1,650 cases recorded as compared with 1,361 cases in 1936. Cases occurring within the different burghs have already been dealt with in the individual burgh reports submitted, with the exception of Leven and Burntisland, which will be dealt with under transferred services at the end of this report.

The following table indicates the distribution of the diseases in each area of the Western Division :—

(a) **West Fife Infectious Diseases Hospital.**—During the year 799 cases were admitted for treatment and the average duration of stay of patients in hospital was 37 days. There were 48 deaths. The average number of beds occupied during the year was 64, the highest 124 beds on 30th December, 1937, and the lowest, 25 beds, on 20th April 1937. There were twelve surgical operations under general or spinal anaesthesia and 51 of a minor nature were performed in the hospital in 1937.

(b) **Thornton Infectious Diseases Hospital.**—There were 514 admissions and 17 deaths in Thornton Infectious Diseases Hospital in 1937. The average duration of stay of patients in this hospital was 28 days and the average number of beds occupied was 28. The highest number of beds occupied was 50 on 23rd December, 1937 and the lowest 19 on 23rd April 1937. Seventy surgical operations were performed during the year, 12 being under general or spinal anaesthesia and 58 of a minor character.

(c) **Cameron Infectious Diseases Hospital.**—The number of cases admitted to this hospital in 1937 was 277 and there were 25 deaths. The average duration of stay of patients in hospital was 26 days and the average number of beds occupied was 18. The highest number of beds occupied was 28 on 23rd December, 1937, and the lowest 10 on 23rd April 1937. Seventy surgical operations were performed during the year, 12 being under general or spinal anaesthesia and 58 of a minor character.

(d) **Marathon Infectious Diseases Hospital.**—During the year there were 480 admissions and 17 deaths. The average duration of stay of patients in hospital was 26 days and the average number of beds occupied was 18. The highest number of beds occupied was 28 on 23rd December, 1937, and the lowest 10 on 23rd April 1937. Seventy surgical operations were performed during the year, 12 being under general or spinal anaesthesia and 58 of a minor character.

Disease.	Total Cases.	Burghs.	Dun-fermline Dist.	Beath Dist.	Lochgelly Dist.	Kirkcaldy Dist.	Wemyss Dist.	Non-Notifiable Pnumonia.	Removed to Hosp.	Treated at Home.
Scarlet Fever	489	216	74	12	84	62	41	—	474	15
Diphtheria	287	101	56	36	62	16	16	—	284	3
Erysipelas	151	56	21	15	36	8	15	—	38	113
Primary Pnumonia	269	90	72	13	64	9	21	—	188	81
Influenzal Pnumonia	155	57	51	16	13	5	13	—	109	46
Cerebro-spinal Fever	11	5	1	1	1	1	2	—	10	1
Typhoid Fever	1	1	—	—	—	—	—	—	1	—
Para Typhoid B. Fever	3	2	—	—	1	—	—	—	3	—
Dysentery	2	1	1	—	—	—	—	—	2	—
Infective Jaundice	2	—	—	—	—	2	—	—	1	1
Pnumonia (not otherwise notifiable)	33	—	—	—	—	—	—	33	33	—
Poliomylitis	1	—	—	—	1	—	—	—	—	1
Ophthalmia Neonatorum	79	30	12	10	10	5	12	—	14	65
Puerperal Fever	6	3	—	—	2	—	1	—	5	1
Puerperal Pyrexia	19	12	3	—	1	1	2	—	16	3
Pulmonary Tuberculosis	62	34	11	—	—	17	—	—	28	34
Non-Pulmonary Tuberculosis	80	34	14	—	—	32	—	—	23	57
Totals ...	1650	642	316	103	275	158	123	33	1229	421

During the year there was an increase in the number of cases recorded in comparison with the numbers notified in 1936 as follows :—Scarlet fever 179, erysipelas 22, acute primary pneumonia 14, influenzal pneumonia 109, and puerperal pyrexia 5. On the other hand there was a decrease in the number of cases notified under the following headings :—Diphtheria 5, typhoid fever 2, encephalitis lethargica 2, ophthalmia neonatorum 17, puerperal fever 9, pulmonary tuberculosis 15, and non-pulmonary tuberculosis 22. Of the 1,650 cases notified, 1,229 were removed to hospital for treatment and 421 were treated at home. The cases recorded within the individual burghs were as follows :—Buckhaven 176, Kinghorn 27, Cowdenbeath 144, Culross 10, Inverkeithing 35, Leslie 11, Markinch 23, Lochgelly 83, Leven 58, Burntisland 74. The total cases recorded in the ten burghs was 641, while in the landward area there were 1,009 cases.

2. Hospital and Ambulance Facilities.—There was no change with regard to the hospitals and ambulance facilities in the Western Division of the County in 1937.

(a) **West Fife Infectious Diseases Hospital.**—During the year, 799 cases were admitted for treatment and the average duration of stay of patients in hospital was 32 days. There were 48 deaths. The average number of beds occupied during the year was 64, the highest 144 beds on 30th December, 1937, and the lowest, 25 beds, on 20th April, 1937. There were twelve surgical operations under general or spinal anaesthesia and 51 operations of a minor nature were performed in the hospital in 1937.

(b) **Thornton Infectious Diseases Hospital.**—There were 514 admissions and 17 deaths in Thornton Infectious Diseases Hospital in 1937. The average duration of stay of patients in this hospital was $28\frac{1}{4}$ days and the average number of beds occupied was 28. The highest number of beds occupied was 78 on 6th December, 1937 and the lowest 19 on 23rd April, 1937. Seventy surgical operations were performed during the year, two being under general or spinal anaesthesia and 68 of a minor character.

(c) **Cameron Infectious Diseases Hospital.**—The number of cases admitted to this hospital in 1937 was 277 and there were 25 deaths. The average duration of stay of patients in hospital was 26 days and the average number of beds occupied was 18. The highest number of beds occupied was 38 on 13th December, 1937, and the lowest six on 2nd July, 1937. Nine operations were performed under general or spinal anaesthesia and 48 other operations of a minor nature were carried out.

(d) **Randolph Wemyss Memorial Hospital.**—During the year there were 486 admissions to this hospital which deals for the most part with surgical cases. There were 17 deaths and the average duration

of stay of patients in hospital was 15 days. There were 20 beds, on an average, occupied during the year, the highest 26 on 16th March and the lowest 11 on 1st May, 1937. Three hundred and eighty operations were performed under general or spinal anaesthesia and 25 minor operations were also carried out. The total number of patients seen in the out-patient department was 330 and the total attendances numbered 504 during the year.

(e) **Fosterton Smallpox Hospital.**—There was no occasion to use this hospital during 1937.

(f) **The Home and Hospital, Thornton.**—During the year there were 201 admissions to the hospital and 70 deaths occurred there. The average duration of stay of patients in the hospital was 123·4 days and the average number of occupied beds was 49. The highest number of occupied beds was 65 on 1st January, 1937, and the lowest 44 on 15th May, 1937. No surgical operations were performed during the year but the total attendances in the out-patient department numbered 12,941.

HOUSING.

The position with regard to overcrowding in the Western Division of the County at the end of 1937 was still acute. From the date of the 1935 Act survey to the end of the year, 158 cases involving 854 persons were relieved of overcrowding in fit houses. In addition, 20 cases of overcrowding were relieved from unfit houses which had already been condemned. The fit houses decrowded in that time as a result of the action taken by the County Council were as follows:—139 privately owned houses (8 of one apartment, 120 of two apartments, 10 of three apartments, and 1 of four apartments) and 18 Local Authority houses (3 of one apartment, 5 of two apartments and 10 of three apartments). Only 25 of the overcrowded families were rehoused in privately owned dwellings and the remainder were transferred to County Council houses. Six of the decrowded houses are again known to be overcrowded. One hundred and twenty-eight persons were rehoused by the Local Authority from the twenty unfit houses referred to above which were decrowded.

Although overcrowding is still acute in the Western Division of the County, it cannot be said that the Local Authority have taken no steps to alleviate the prevailing conditions. At the end of 1937 2,465 houses out of a total of 2,531 already provided by the County Council are situated in the Western Division. During the year 87 additional houses were completed in this area as follows:—Kennoway 24 (16 of three apartments and 8 of four apartments); Kelty 44 (28 of three apartments and 16 of four apartments); Limekilns 9 (all of four apartments); Milton of Balgonie 6 (4 of

three apartments and 2 of five apartments) ; Burntisland 4 of four apartments—Total 87.

The following 1,158 houses in addition were in course of erection during the year and many were nearing completion by the end of the year so that considerable progress in the process of decrowding should be possible in the Western Division in 1938 :—

Houses under Construction in 1937.

				Apartments.			Total.
				3.	4.	5.	
Parkneuk	...	...	...	20	12	4	36
Kelty	...	...	...	64	84	20	168
Limekilns	...	...	...	—	3	—	3
Comrie	...	...	...	16	20	4	40
Lochore	...	...	...	36	44	4	84
Crosshill	...	...	...	24	40	4	68
Kinglassie	...	...	...	—	36	8	44
High Valleyfield	...	...	...	24	32	12	68
Milton of Balgonie	...	...	...	4	12	—	16
Hill of Beath	...	...	...	16	16	8	40
Dundonald (Cardenden)	...	...	...	60	68	12	140
North Queensferry	...	...	...	22	4	2	28
Burntisland	...	...	...	—	4	—	4
Gray Park	...	...	...	—	8	—	8
Windygates	...	...	...	8	16	4	28
Blairhall	...	...	...	8	32	4	44
Coaltown of Balgonie	...	...	...	20	20	4	44
Rosie	...	...	...	48	52	12	112
North GlenCraig	...	...	...	32	36	12	80
Chapel	...	...	...	16	4	—	20
Thornton	...	...	...	4	32	4	40
Woodside	...	...	...	24	16	—	40
Totals	...	...	...	446	591	118	1155

Housing (Inspection of District) Regulations, 1928.—Under the above regulations 1,330 houses were inspected, bringing the total up to 11,013 since 1st January, 1931. Of the total inspected during the year 234 were regarded as being unfit in certain respects for habitation. Intimation was given in terms of Section 20 (1) of the Housing (Scotland) Act, 1925, requiring the provision of water closets to 29 houses and in three cases the requirements were complied with by the owners without assistance. In 106 houses water closets were provided during the year as part of the work undertaken in terms of the Housing (Rural Workers) Acts on representation being made to the owners by the Public Health Officials. In 59 other cases water closets were provided without

assistance as a result of representations made to the owners without formal intimation under Section 20 (1) of the 1925 Act.

One house of two apartments was erected during the year, the consent of the County Council having been given in terms of Section 111 of the 1925 Act. In terms of Section 40 (1) of the Housing and Town Planning Act, 1919, notice was given requiring the provision of a water supply to ten houses while in 30 cases a water supply was provided without formal notice as part of the work undertaken in terms of the Housing (Rural Workers) Acts for the renovation of the houses. In 11 other instances a water supply was provided without formal notice and without assistance, on representation being made by sanitary officials to the owners.

Under Section 14 (1) of the Housing (Scotland) Act, 1930, 104 Notices were served during the year calling for necessary repairs to make houses fit for habitation. Fourteen houses were rendered fit for habitation with assistance under the Housing (Rural Workers) Acts and two without such assistance following on notices served under Section 14 (1) of the 1930 Act. A demolition order was substituted for a notice under Section 14 (1) in the case of 11 houses in 1937 and 147 notices under Section 16 (1) of the 1930 Act were also served. Following on notices served under Section 16 (1), undertakings that the houses would not be used for human habitation were accepted by the Local Authority in seven cases; in 120 others demolition orders were made and in 3 instances closing orders were applied. Three houses were rendered fit for habitation with assistance under the Housing (Rural Workers) Acts during the year following on undertakings under Section 16 (2) and two others were made fit without such assistance. One hundred and four houses were rendered fit for human habitation under the Housing (Rural Workers) Acts at the instance of sanitary officials and without formal notice under the Housing (Scotland) Act, 1930, while 22 others were made fit for habitation without such assistance.

Houses Built by Unassisted Private Enterprise.—During the year the following houses were built without assistance in the Western Division of the County :—

With 3 apartments	...	...	9 houses
„ 4 apartments	...	...	12 „
„ 5 apartments	...	...	6 „
Total			27 houses

Housing of Agricultural Workers.—A detailed statement with regard to the housing conditions of farm servants in the Western Division of the County was given last year in my annual report and repetition is unnecessary. Their housing conditions on the whole

are quite satisfactory and the farm workers in this area are probably better off than in most other Counties in Scotland.

Plans dealt with during the Year.—(a) Under the Building Byelaws plans were examined and reported upon to the respective Area Committees as follows :—

(1) **DUNFERMLINE DISTRICT.**—Plans for the erection of 151 new houses (1 of one apartment, 67 of three apartments, 69 of four apartments, 13 of five apartments, and 1 of six apartments); for the renovation of 32 existing houses; the erection of 28 new buildings other than dwelling-houses and alterations to eight buildings not used for habitation.

The new buildings for purposes other than housing comprised garages, farm steadings and loose boxes, brickworks and kiln, engine shed and saw bench shed, a golf pavilion, greenhouses, a piggyery, two shops, a pattern store, motor show rooms and petrol pump, etc.

Of the old houses dealt with, one was for enlargement of a three apartment house by four additional rooms and 20 others for the addition of a bedroom as well as a modern bathroom. One house of four apartments destroyed by fire was rebuilt. Two new dormitories with duty rooms and an annex containing water closets and ablution rooms were added to St Teresa's Holiday Home, Aberlour.

(2) **LOCHGELLY AND BEATH AREA.**—Plans were reported on with regard to the erection of 222 new dwelling-houses (94 of three apartments, 104 of four apartments and 24 of five apartments), also for the renovation of three existing dwellings, the erection of seven new buildings for purposes other than housing and for alterations to six other buildings.

(3) **KIRKCALDY AREA.**—Plans were dealt with in respect of 207 new houses (88 of three apartments, 105 of four apartments and 14 of five apartments) while plans for the alteration of 29 dwellings and one other building and the erection of 17 new buildings for purposes other than housing were also reported upon.

(4) **WEMYSS AREA.**—Plans were examined and reported upon with regard to 221 new dwellings (78 of three apartments, 114 of four apartments and 29 of five apartments), alterations and additions to two dwelling-houses, the erection of six new buildings for purposes other than housing and alterations to three other buildings.

Thus in the Western Division, plans were dealt with under the County Building Byelaws in respect of 801 new houses, 58 new buildings for other than housing purposes, 66 existing houses which were for alterations and additions and 18 other buildings which were to be altered.

Plans under the Housing (Rural Workers) Acts, 1926-31.—Plans in addition to those indicated above under the Building Byelaws were examined and reported upon with regard to the proposed renovation and alteration of 314 houses in the Western Division of the County during the year as follows:—Dunfermline area 29 houses, Lochgelly and Beath area 37 houses, Kirkcaldy area 43 houses, and Wemyss area 205 houses. With one exception where existing accommodation was being cut down to form a bathroom and scullery, the houses were approved for grant under the County Scheme of Assistance. In many cases the plans were amended to meet modern requirements before they were recommended to the respective Local Committees for approval.

GENERAL SANITATION.

(1) **Water Supplies.**—The Western Division of the County is in the fortunate position of having an abundant supply of excellent water, far more than is required for their immediate or future needs. The sources of supply at Glendevon, Glenquey, Glenfarg and the Wemyss Water Trust Reservoirs are too well-known to require any further reference. A start has already been made with the Regional Water Supply Scheme whereby the Eastern part of the County will benefit from the surplus water available in the West.

(2) **Drainage System—Sewage Purification and Disposal.**—Matters relating to drainage and sewage disposal, etc., will be more fully dealt with by the Sanitary Inspectors of each district. The position is as detailed in my last report, no new drainage schemes having been undertaken during 1937. The drainage arrangements in Lochgelly District still remain unsatisfactory in that crude sewage from a population of approximately 30,000 is disposed of without previous treatment to the River Ore which is nothing more than a large open sewer at present.

(3) **Refuse Disposal.**—The disposal of refuse from the 29 Special Scavenging Districts in the Western Division of the County remains satisfactory. The bulk of the refuse is disposed of in dumps by the system of controlled tipping and the various coups were found to be well looked after during the year. In a few instances old quarries are utilised for dumping where it is impossible to restrict the depth of the dump. The quarries in use, however, are all well removed from habitation and there is not the same urgent need for tipping in shallow layers and finishing off with a layer of earth.

(4) **Rivers Pollution.**—The position with regard to the Rivers Ore and Leven remains unchanged. The grossly polluted state of both rivers is a distinct blot on the otherwise satisfactory conditions prevailing in the Western Division of the County.

FOOD SUPPLY.

(1) **Milk.**—The dairies registered in the Western Division of the County for milk production number 213 with accommodation for 5,621 cows. The premises, for the most part, are of good construction and are in conformity with the terms of the County Dairy Byelaws. Progress has been made with regard to the production of designated milk under the Special Designations Order 1936; an additional herd of 43 cows was licensed under the Order for T. T. milk in August, 1937, and two other producers applied in 1938 for T. T. licences. A herd of 110 cows was also established under the Tuberculosis (Attested Herds) Scheme and samples of milk taken periodically from the above dairies have shown exceptionally clean milk of fine quality.

In view of the difficulties encountered in building up a herd which is free from tuberculosis, it would be interesting to learn how many of the cows in ordinary dairy herds would pass the tuberculin test. The number of such animals must be relatively small compared to the actual number of animals yielding milk. Apart from a clinical examination by a veterinary surgeon, there is no supervision of such animals and no test with tuberculin is made. Only those animals with gross signs of disease are or can be detected during a clinical examination but there must be many other infected animals who are a source of danger not only to their kind but also to the human race. The present system of veterinary inspection of cattle is undoubtedly inadequate and unless progress is made, the question of stamping out tuberculosis from our dairy herds and cattle generally will never be attained. When dealing with an attested herd or a herd licensed under the Milk (Special Designations) Order, 1936, infected animals are undoubtedly detected before much damage can be done but here again there is a snag. Reactors are got rid of at once but the method of disposal is unsatisfactory. The animals are generally turned into the open market and find a ready sale to some unsuspecting dairyman in need of a good milch cow or to some butcher perhaps who buys the animal in good faith only to find the whole carcass diseased and unfit for human consumption. Part IV. of the Agricultural Act, 1937, relating to Diseases of Animals holds out some prospects of improvement with regard to the eradication of animal diseases especially tuberculosis as special payments may be made for the purpose of securing, as far as practicable, that herds will be free from tuberculosis. Hitherto the administration of the Tuberculosis Order has been haphazard and unsatisfactory, and without any uniformity of action so far as Local Authorities are concerned. Many Local Authorities never even dealt with the matter and had no veterinary inspectors. Under the Tuberculosis Order an animal must be in an advanced stage of tuberculosis before slaughter can be secured, thereby causing enormous damage by infecting other cattle. Under Section 22 of

the new Act, power is given to slaughter any animal affected or suspected of being affected with any diseases to which the section applies and presumably tuberculosis, as the most widespread of all animal diseases, will be included. This is a great advance and if rigidly administered, vast strides should be made in the eradication of bovine tuberculosis which is the chief animal disease so far as the health of the nation is concerned. Progress is bound to be slow but with a centralised veterinary service as now established under the 1937 Act, uniformity of action throughout the country will at last be possible. If properly administered, the scheme will be a costly one but it will be well worth the cost.

MILK (SPECIAL DESIGNATIONS) ORDER, 1936.—The following premises were licensed during the year under the above Order :—

Pasteuriser's Licence—

Buckhaven Co-operative Society, Ltd., Buckhaven.

Dealer's Licence—Pasteurised Milk—

Alloa Co-operative Society, Ltd., 17 Mar Street, Alloa. (Kincardine Branches).

John Peacock, Pierhead, North Queensferry.

Dunfermline Co-op. Society, Ltd., Church Street, Inverkeithing.

Dunfermline Co-op. Society, Ltd., Low Torrie Dairy Shop, Newmills.

Dunfermline Co-op. Society, Ltd., Aberdour Grocery Shop, Aberdour.

Dunfermline Co-op. Society, Ltd., Crossgates Grocery Shop, Crossgates.

Lochgelly Equitable Co-op. Society, Ltd., Dundonald Service Branch, Cardenden.

Lochgelly Equitable Co-op. Society, Ltd., Bowhill Bread Shop, Cardenden.

Lochgelly Equitable Co-op. Society, Ltd., Lochore Bread Shop, Lochore.

Lochgelly Equitable Co-op. Society, Ltd., Crosshill Service Branch, Lochore.

Lochgelly Equitable Co-op. Society, Ltd., Glencraig Service Branch, Lochore.

Lochgelly Equitable Co-op. Society, Ltd., West End Bread Shop, Lochgelly.

Lochgelly Equitable Co-op. Society, Ltd., Minto Street Bread Shop, Lochgelly.

Lochgelly Equitable Co-op. Society, Ltd., Bank Street Bread Shop, Lochgelly.

Lochgelly Equitable Co-op. Society, Ltd., Cross Bread Shop, Lochgelly.

Methil Co-op. Society, Ltd., 178 Wellesley Road, Methil.

Methil Co-op. Society, Ltd., Patterson Street, Aberhill, Methil.

Methil Co-op. Society, Ltd., Wall Street, Denbeath, Methil.
 Methil Co-op. Society, Ltd., High Street, Leven.
 Methil Co-op. Society, Ltd., 303 Wellesley Road, Methil.
 Methil Co-op. Society, Ltd., Broad Street, High Street, Methil.
 Buckhaven Co-op. Society, Ltd., Toll Park, Buckhaven.
 Buckhaven Co-op. Society, Ltd., 99 Randolph Street, Buckhaven.
 Buckhaven Co-op. Society, Ltd., Central Shop, Randolph Street, Buckhaven.

Cowdenbeath Co-op. Society, Ltd., Perth Road, Cowdenbeath.
 Cowdenbeath Co-op. Society, Ltd., Main Street, Lumphinnans.
 Cowdenbeath Co-op. Society, Ltd., Broad Street, Cowdenbeath.
 Reform Co-op. Society, Ltd., Durie Street, Leven.
 Reform Co-op. Society, Ltd., Scoonie Branch, Leven.
 Reform Co-op. Society, Ltd., Aberhill Branch, Methil.
 Reform Co-op. Society, Ltd., Largo Branch, Lower Largo.
 Dysart Co-op. Society, Ltd., Main Street, West Wemyss.
 Dysart Co-op. Society, Ltd., Branch Shop, Boreland, Dysart.
 A. B. Logan, 30 Baliol Street, Kinghorn.
 J. B. Gilmour, 8 High Street, Burntisland.
 Mrs Jessie Mudie, 20 Nethergate, Kinghorn.
 Burntisland Co-operative Society, Ltd., Burntisland.

Producer's Licence—Tuberculin Tested Milk—

Archibald Dryburgh, Methilhill Farm, by Leven.

Dealer's Licence—Tuberculin Tested Milk—

James Hamilton, jun., Urquhart, Dunfermline.

Producer's Licence—Certified Milk—

Lady Victoria Wemyss, Wemyss Castle, East Wemyss.

Dealer's Licence—Certified Milk—

John McLeod, 81 High Street, Inverkeithing.

David Carstairs, 101 Broad Street, Cowdenbeath.

(2) **Meat Supply.**—The slaughter-houses in the Western Division of the County remain as described in former reports, eight private and seven public slaughter-houses being under the supervision of the Sanitary Inspectors who act as Detention Officers. The following table shows the number of animals slaughtered and the weight in pounds of meat and offals condemned from 16th January, 1937, to 15th January, 1938 :—

Area.	Slaughter-house.	No. of Animals Slaughtered.			Pounds of Meat and Offals Condemned.
		Cattle.	Sheep.	Pigs.	
Dunfermline	Private (4)	329	896	86	2123
Kirkcaldy	Burntisland Public	478	776	360	2294
	Markinch Public	734	632	257	7787
	Leslie Public	461	394	142	4795
	Private (1)	98	196	46	248
Wemyss	Buckhaven Public	2523	1839	952	69,119
	Leven Public	1131	1848	402	22,530½
	Private (1)	206	325	57	2,227
Lochgelly and Beath	Lochgelly Public	838	661	620	2,652
	Cowdenbeath Public	1569	1621	1244	9,151
	Private (2)	433	526	49	2,666
	Totals	8800	9714	4215	125,592½

The amount of meat condemned, 56 tons 1 cwt. 40 lbs., is less than in the preceding year by 7 tons 7 cwt. 62 lbs. (16,526 lbs.). This may only be a coincidence but a scrutiny of the figures for the various slaughter-houses would tend to indicate that supervision and detection of unsound food is better in certain of the slaughter-houses than in others. Thus at Lochgelly Public Slaughter-house in which 838 cattle, 661 sheep and 620 pigs were slaughtered, the total amount of meat, etc., condemned was only 2,652 lbs. The two private slaughter-houses in the same area with less than half the number of animals slaughtered had slightly more meat condemned. Cowdenbeath Public Slaughter-house, with slightly more than double the number of animals slaughtered, had 9,151 lbs. of meat condemned. Yet if the latter is compared with, say, Leven Public Slaughter-house in which the supervision for the past few years has been excellent, the amount of meat condemned is relatively small. At Leven where 3,381 animals were slaughtered, there were 22,530½ lbs. of meat condemned; at Cowdenbeath with 4,434 animals slaughtered, the amount of meat condemned was only 9,151 lbs. Similarly in Kirkcaldy area the figures show wide variance for the different slaughter-houses, assuming that the animals slaughtered were of substantially the same type in each. The question of centralisation with a properly qualified full-time meat inspector as superintendent for each slaughter-house established in the County, offers the only safe solution to the problem. There can be no question that where such a person is employed the amount of meat condemned annually is always relatively much greater than where no such superintendent is employed.

During the year the following articles of food were condemned and seized as unfit for human consumption in the Western Division of the County in terms of Section 43 of the Public Health (Scotland) Act, 1897 :—

6 lbs. brisket beef.
 13 lbs. 7 ozs. cooked gammon.
 15 lbs. fruid salad.
 6 lbs. boiled mutton.
 1½ lbs. grape fruit.
 ¼ lb. tin cream.
 11 lbs. 3 ozs. boneless ham.
 6 lbs. lunch ham.
 10 lbs. tinned pears.
 3 lbs. tinned pineapple.
 1½ lbs. tinned salmon.
 6 lbs. corned beef.
 6 lbs. jellied veal.
 20 lbs. boiled gammon.
 16 lbs. rolled ham in tins (4 lbs.).
 11 ozs. milk in tin.
 1 gal. tin fruit salad.
 6 lbs. pressed pork.
 1 tin milk.
 11 ozs. tin oranges.
 3-1½ lb. tins of pineapple.
 1 tin pineapple slices.
 17 lbs. 3 ozs. cooked gammon.
 6 lbs. corned beef.
 13½ lbs. boneless cooked ham.
 10 lbs. ham.
 8 tins boneless meat (114 lbs. 12 ozs.).
 57 lbs. 5 ozs. boiled gammon.

PORT SANITARY ADMINISTRATION.

As in former years the ports of Burntisland and Methil were visited as occasion arose for the purpose of examining the crews and inspecting boats arriving from infected ports abroad. In no case were any of the scheduled infections found during these inspections, viz. :—Plague, cholera, yellow fever, typhus and smallpox. Neither fumigation nor deratisation of ships is undertaken at the above ports.

FACTORIES AND WORKSHOPS.

During the year 412 visits of inspection were made to factories and workshops in the landward part of the Western Division of the County. The premises were found to be clean and well maintained on the whole. In six instances want of cleanliness was observed

but the defects were remedied on written notice being given to the owners. In terms of Section 132 of the Factories and Workshops Act, 1901, a report on the administration of the Act has already been submitted to the Secretary of State, Home Office, London.

PUBLIC HEALTH SERVICES IN BURGHS.

I have already submitted a full report dealing with both transferred and non-transferred services in respect of the following burghs for which the County Medical Officer acts as Burgh Medical Officer :—Buckhaven, Cowdenbeath, Lochgelly, Inverkeithing, Culross, Kinghorn, Leslie and Markinch. The two remaining burghs in the Western Division of the County, Leven and Burntisland, have their own Medical Officers and the following is an account of the transferred services dealt with by the County Medical Staff in terms of the Local Government (Scotland) Act, 1929.

Leven Burgh (Transferred Services)—INFECTIOUS DISEASES.—During the year 58 cases were notified as follows :—Scarlet fever 21, diphtheria 6, erysipelas 3, pneumonia 8, influenzal pneumonia 7, ophthalmia neonatorum 8, tuberculosis 5 (pulmonary 3, non-pulmonary 2)—Total 58. This is a decrease of seven cases from the previous year and apart from pneumonia, both influenzal and acute primary, the incidence of disease was considerably less than in 1936. In the latter year only five cases of pneumonia were recorded as compared with 15 cases in 1937. Scarlet fever showed a decrease of 13 cases from the previous year. Thirty-nine cases were removed to hospital for treatment and the remainder were treated at home.

MILK AND DAIRIES.—There are three dairies registered for the production of Milk in Leven Burgh and the premises with accommodation for 68 cows are in conformity with the terms of the County Dairy Byelaws. A licence under the Milk (Special Designations) Order, 1936, was granted by the County Council to Leven Co-operative Society for the sale of pasteurised milk. Under the same Order certified milk produced at Wemyss Castle and Kilrenny Mill, Anstruther, was retailed in the burgh.

MEAT INSPECTION.—The slaughter-house, although somewhat antiquated and situated in a congested area surrounded by dwellings, was kept in a clean and satisfactory manner. During the year the superintendent left on securing another post but his successor has maintained the high standard of excellence with regard to cleanliness and supervision of the meat which was set by his predecessor. From the 16th January, 1937, to 15th January, 1938, the following animals were slaughtered in the public slaughter-house :—Cattle 1131, sheep 1848, pigs, 402, total 3381. During the same period 22,530½ lbs. of meat were condemned as unfit for human consumption.

RIVERS POLLUTION.—The question of pollution of the River Leven has already been referred to above in the general report.

VITAL EVENTS.—The population of Leven Burgh as estimated by the Registrar-General to the middle of 1937 was 8,167, an increase of 83 over the estimated figure for 1936. The natural increase in population for the whole year as shown by excess of births over deaths was 38.

During the year there were 149 births (corrected) and the birth-rate was 18·2 per 1,000 estimated population. The deaths (corrected) numbered 111 and the death-rate was 13·5 per 1,000 estimated population. Fifty-nine marriages were registered during the year and the marriage-rate was 7·2 per 1,000.

Eleven infants under the age of one year died in 1937 and the infantile mortality rate was 73 per 1,000 births. This figure is much more satisfactory than in 1936 when the infantile mortality rate was 118.

Respiratory diseases and cancer were the commonest causes of death in 1937.

Burntisland Burgh (Transferred Services).—During the year 74 cases of infectious diseases were notified within the burgh. This is 49 cases more than in 1936 and is accounted for by the greater incidence of scarlet fever. In 1936 there were only four cases of scarlet fever whereas in 1937 52 cases of this disease were recorded. No cases of scarlet fever occurred during the months of January, February and April. There was a single case in March, two in May, 7 in June, 15 in July, 2 in August, 6 in September, 12 in October, 4 in November and 3 in December. Otherwise the incidence of infectious diseases was low. The following cases were notified during the year:—Scarlet fever 52, diphtheria 3, erysipelas 3, pneumonia 6, infuenzal pneumonia 1, paratyphoid fever 1, dysentery 1, ophthalmia neonatorum 1, and non-pulmonary tuberculosis 6—Total 74. Sixty of the patients were removed to hospital and the remainder were treated at home.

MILK AND DAIRIES.—Two dairies are registered for the production of milk within the burgh, the byres having accommodation for 54 cows. The premises are satisfactory for the purpose and are kept in a clean, tidy condition. Under the Milk (Special Designations) Order, 1936, Burntisland Co-operative Society and J. B. Gilmour, 8 High Street, Burntisland, were granted a dealer's licence for the sale of pasteurised milk.

MEAT INSPECTION.—No changes were made in the slaughter-house during the year. From 16th January, 1937, to 15th January, 1938, 478 cattle, 776 sheep and 360 pigs were slaughtered and 2,294 lbs. of meat were condemned as unfit for human consumption,

VITAL EVENTS.—The population of Burntisland as estimated by the Registrar-General to the middle of 1937 was 5,596. This is an increase of 44 over the estimated figure for 1936. The corrected births recorded, however, were the same as the number of deaths (corrected) so that there was not a natural increase in the population for the year.

The births recorded numbered 81 (corrected figure) and the birth-rate was 14.4 per 1,000 estimated population. The deaths (corrected) for the year also numbered 81 and the death-rate was 14.4 per 1,000 estimated population.

The marriages recorded during the year numbered 29 and the marriage-rate was 5.1 per 1,000 estimated population. Three infants under the age of one year died in 1937 and the infantile mortality rate was 37.1 per 1,000 births. Last year the rate for infantile mortality at 37.5 was the lowest then recorded and the fact that this figure has again been reduced is ample testimony to the efficiency and care which the general practitioners and nurses take in dealing with maternity and child welfare work in the burgh.

Cancer with seven deaths and respiratory diseases with four deaths were the chief causes of mortality in 1937.

Eastern Division.

G. MATTHEW FYFE, M.B., Ch.B., D.P.H.,

Deputy Medical Officer of Health.

In the East of Fife, various factors combine to render the improvement of environmental conditions a slow process invariably attended by considerable cost. Nevertheless, although to the casual observer it may seem that little change for the better has taken place during the past decade, those better informed will agree that evidence of improvement abounds. Hundreds of families are now better housed than has ever been the case in the history of the County and public services of various types have been made available in many populous communities. On the whole, then, the Local Authority has every reason to be satisfied with what they have so far achieved; indeed, considering the difficulties with which they have had to contend, they have made noteworthy progress.

The outstanding difficulties confronting the County Council are those related to housing and to water supply.

The cost of erecting new houses is naturally reflected in the rents to be paid by tenants. Since building costs are high, the County Council, in spite of a scheme for rent rebates, have been reluctantly compelled either to refrain in the meantime from erecting houses or to sacrifice their natural inclination to provide houses architecturally in keeping with the neighbourhood in order to reduce costs to a minimum.

Assistance towards the erection of new houses is provided by the Government, the form of subsidy most favourable to the County Council being on the basis of a grant per person displaced from an unfit house. From the financial point of view, the system has its limitations and it has been found necessary for the County Council to act on the principle that new houses must be occupied to minimum capacity, that is to say that, for instance, a family eligible for a three-roomed house must total no less than three adults and one child under ten years of age. The outcome has been that families of smaller numbers cannot be offered a new house and since small families predominate in the East of Fife, there are many instances of houses condemned by the Local Authority continuing to be occupied. The difficulty, therefore, forms an obstruction to the relief of unsatisfactory housing conditions.

Although hundreds of rural cottages have been renovated for the most part with assistance under the Housing (Rural Workers) Acts, a great number remain in insanitary condition. Some of these are not now worth the cost of reconstruction, others are

owned by proprietors who apparently have no intention of effecting improvements if they can evade the obligation, and many are owned by proprietors who are quite unable to bear the costs involved. The situation as regards the first group may be improved by legislation recently introduced rendering grant available towards the erection of new houses to take the place of unfit farm cottages. As regards the second group, the Local Authority possess ample compulsory powers and are prepared to use them. The last group presents the greatest difficulty in that, while the Local Authority cannot expect people to spend money they do not possess, they have to consider the families compelled to live in defective houses. A remedy lies in the Local Authority themselves undertaking the necessary works of improvement and reclaiming the costs entailed as best they can. The principle has already been adopted in certain instances but for many good reasons, the practice must be followed with caution.

Many of these housing difficulties will become intensified as the survey of rural houses, rendered compulsory by the Government, proceeds and so far as can be foreseen the outcome, as things are, may be twofold. The first may be that the County Council will find it advisable to assume the ownership of a greater number of houses than is at present considered desirable and the second may be that the building programme for rural villages will have to be increased, it being more economical to build houses in groups than in single numbers, with the result that a further impulse will be given to the drift of landworkers to populous centres and a serious shortage of agricultural labour will ensue. In short, it is possible that, unless statutory measures are extended, an emergency of considerable economic importance will arise.

Until 1937, the improvement of housing conditions in many villages was a problem presenting extreme difficulty in that adequate water supplies were not available. During the year, however, the County Council approved of the general principle of a regional scheme of water supply and the first steps have already been taken towards the delivery of a wholesome supply in most of the villages concerned. A year or two may elapse before the scheme is even partly completed in the Eastern Division of the County but, except for the occurrence of unforeseen circumstances, the difficulty may now be regarded as within sight of solution.

The above considerations and others are dealt with in detail in the following report.

INFECTIOUS DISEASES.

A still further fall took place in the incidence of infectious diseases. The number of cases notified was 362 as compared with 445 in 1936. The following table shows the distribution of the cases among burghal and landward areas :—

Disease.	St Andrews District.	Anstruther District.	Cupar District.	Burghs.	Total.
Cerebro-Spinal Fever	1	—	4	2	7
Undulant Fever ...	—	—	—	1	1
Diphtheria ...	5	3	2	17	27
Dysentery ...	2	—	4	56	62
Encephalitis Lethargica	—	1	—	—	1
Erysipelas ...	3	—	11	15	29
Ophthalmia Neonatorum ...	—	1	1	6	8
Acute Influenzal Pneumonia ...	2	—	6	20	28
Acute Primary Pneumonia ...	1	2	8	17	28
Acute Poliomyelitis ...	—	—	—	2	2
Puerperal Fever ...	1	—	—	—	1
Puerperal Pyrexia ...	—	—	3	3	6
Scarlet Fever ...	6	14	30	50	100
Pulmonary Tuberculosis	2	—	4	15	21
Non-Pulmonary Tuberculosis ...	9	—	12	19	40
Typhoid Fever ...	—	—	1	—	1
	32	21	86	223	362

Scarlet Fever.—In proportion to the populations at risk, the incidence of Scarlet Fever was more or less uniformly distributed. There were 26 cases in St Andrews District, 32 cases in Anstruther District and 42 cases in Cupar District. Since 1932 when the disease first assumed epidemic proportions, reaching maximum prevalence in 1934, 1524 cases have been notified—706 in the landward areas and 818 in the Burghs. Fortunately, although several deaths occurred, the disease has remained of mild type and has shown no signs of increasing virulence.

During 1937, no deaths from Scarlet Fever occurred.

There have been two serious obstacles to effective control of the disease. The first has been difficulty in diagnosis occasioned by atypical manifestations of infection and the second has been carelessness or delay on the part of some parents in seeking medical advice when children were sharply ill or showing definite evidence of the ailment. Children who had been absent from school, and not attended by a doctor, have been found in classrooms desquamating or suffering from infection of the ear, nose or throat. These children gave rise to small outbreaks which need not have occurred.

Diphtheria.—As compared with 62 cases in 1936, only 27 cases were notified in 1937—10 in the landward area and 17 in the Burghs.

The disease appeared sporadically, there being no tendency towards epidemic prevalence in any locality. All the cases were treated in hospital. One death occurred.

While immunisation against diphtheria was carried out to a limited extent by family doctors, the Burgh of St Andrews was the only place in which a relatively large number of children were immunised. Mainly through the agency of the town's welfare organisation, children were referred to the City Fever Hospital where the Matron administered the necessary injection. During the year, 238 children were injected and 68 were re-tested after an interval. A considerable number of children received only one injection of alum precipitated toxoid and results on retesting were remarkably good. In view of unfavourable results found elsewhere, however, a minimum of two injections are now being given.

Dysentery.—Towards the end of September, a minor outbreak of dysentery occurred in the village of Balmerino. The infecting organism was found to be *B. dysenteriae Flexner*.

The first case fell ill on the 21st with sickness and vomiting and by the 30th other three members of the same family had fallen ill. Symptoms were characteristic, the outstanding feature being very frequent stools. A playmate in another family was also infected. In all, five cases occurred.

The cause of the outbreak was not found.

During the last few days of the year, an outbreak of dysentery occurred in the Burgh of St Andrews and its immediate neighbourhood. Ultimately, the number of cases assumed considerable proportions and the disease appeared sporadically in various localities in the County. It then became clear that the epidemic which affected some communities and left others untouched formed part of a nation wide outbreak. Investigation showed that the causative organism was *B. dysenteriae Sonne*. While evidence of contact infection was abundant, no source of infection was established for first cases. In the Burgh of St Andrews, the occurrence of cases was intensified through infection of two milk supplies. 123 cases were notified before the epidemic came to an end but it was estimated that fully three times as many people had been infected.

On the whole, symptoms were of mild type but several patients were seriously ill for a time. Two persons died but both had been suffering previously from serious ailments.

The epidemic was instructive in that it afforded an excellent illustration of the highly infectious nature of the disease and of the ease with which it could be conveyed through articles of food.

Interesting points emerged in the course of investigation of the two infected milk supplies.

One of the milk supplies was infected by a lad who presented very abnormal symptoms of the disease. He suffered from headache, pains of the back and nasal catarrh. There was no vomiting or

diarrhoea. Yet his stool was found to contain Sonne bacilli. Subsequent events provided a good object lesson in the reason and necessity for isolating milk workers, when ill, from contact with milk.

The other milk supply was infected in a round about way. A baker's boy who had acute diarrhoea but no marked symptoms otherwise, delivered bread at an isolated farm cottage occupied by a milker and her family. Within 48 hours, one of the children sickened. Later, the mother fell ill and continued to milk with the result that many customers were infected.

The necessity for preventing ailing dairy workers handling milk was again illustrated and, in addition, sound reason was advanced for the plea that bread should be sold in wrappers.

Infectious Diseases in Schools.—The schools were affected by the usual infectious diseases of childhood but none to a serious extent. Scarlet Fever was much less prevalent. Chickenpox appeared in several schools in February and March, and whooping cough in the autumn. During the spring months, there was an outbreak of German Measles in one or two schools, followed by Measles. Absentees from some schools were fairly numerous but on the whole, there was less absenteeism due to infectious diseases than has been the case for several years. The most common infectious disease affecting the school children was undoubtedly the common cold.

Headteachers notify the Public Health Department on the occurrence of cases of infectious diseases in classrooms in order that an opportunity may be afforded for taking early steps towards control of spread. In advising regarding preventive measures, emphasis is laid upon the superior value of sunlight, ventilation and cleanliness as compared with methods of disinfection.

HOSPITAL SERVICES.

The following tables describe the nature of the illness from which patients admitted to the four Infectious Diseases Hospitals were suffering and indicate the localities from which the patients came :—

Auchtermuchty Infectious Diseases Hospital.

	Scarlet Fever.	Diph- theria.	Pneu- monia.	Erysip- elas.	Meas- les.	Whoop- ing Cough.	Pleur- isy.	Bron- chitis.	Total.
Cupar Burgh ...	1	1	—	1	—	—	—	—	3
Falkland Burgh	5	—	1	—	—	—	—	—	6
Ladybank Burgh	2	—	—	—	—	—	—	—	2
Newburgh Burgh	3	—	—	—	—	—	—	—	3
Landward County	26	1	4	—	1	5	1	1	39
Total ...	37	2	5	1	1	5	1	1	53

St Andrews Infectious Diseases Hospital.

	Scarlet Fever.	Diph- theria.	Tonsil- litis.	Pneu- monia.	Cerebro Spinal Meningitis	Chicken pox.	Erysip- elas.	Dysen- tery.	Acute Polio- myelitis.	Total.
St Andrews Burgh ...	7	1	2	3	1	1	—	2	1	18
Cupar Burgh ...	—	—	—	—	—	—	1	—	—	1
Landward County...	4	—	—	—	—	—	—	—	—	4
Total ...	11	1	2	3	1	1	1	2	1	23

St Michael's Infectious Diseases Hospital.

	Scarlet Fever.	Diph- theria.	Dys- ent- ery.	Pneu- monia.	Ery- sip- elas.	Cere- bro-Sp. Menin- gitis.	Bron- chitis.	Meas- les.	Strep- tococcal Dermat- itis.	Influ- enza.	Oph. Neona- torum.	Ulcer- ative Stomat- itis.	Vinc- ents An- gina.	Cervic- al Aden- itis.	Total.
Anstruther Burgh ...	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1
Cupar Burgh ...	—	—	—	—	—	—	—	—	2	—	—	—	—	—	2
Ladybank Burgh ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Newport Burgh ...	8	2	—	—	1	—	1	—	2	1	—	—	—	—	15
St Andrews Burgh ...	2	1	—	1	—	—	—	1	—	—	—	—	—	—	5
Tayport Burgh ...	1	2	—	2	1	—	—	—	1	—	—	—	—	—	7
Landward County ...	12	—	4	7	3	1	1	2	1	1	2	1	1	3	39
Total ...	24	5	4	11	5	1	2	3	6	2	2	1	1	3	79

The average stay of patients in the fever hospitals was as follows :—

Auchtermuchty,	32 days.
Ovenstone,	34.86 days.
St Andrews,	15 days.
St Michael's,	20.33 days.

There were 11 deaths, 1 from Scarlet Fever, 8 from Pneumonia and 2 from Pulmonary Tuberculosis.

In all, 197 patients were admitted to the Infectious Diseases Hospitals, 106 from landward parts of the County and 91 from the burghs. In addition, 2 cases of Ophthalmia Neonatorum, 2 cases of Puerperal Pyrexia and 1 case of Puerperal Fever were treated in Thornton Infectious Diseases Hospital. Excluding Tuberculosis, of the 301 cases of infectious diseases notified, 169 or 66.4 per cent. were admitted to hospital for treatment.

The medical and nursing staffs of the hospitals carried out their responsible duties efficiently. So greatly and quickly do numbers of patients fluctuate that it is impossible to assess accurately the number of nurses who should be permanently employed in each hospital. There were times when duties were light and there were times when existing staffs could not cope with the work to be done. Fortunately, all of the hospitals were not busy at the same times so that it was possible to arrange temporary transferences of nursing staffs.

No alterations of importance were effected in any of the fever hospitals. Their future is still undetermined, no definite pronouncement having been made as to their continuance. The fact that a commencement has been made with the extension of Cameron Hospital may expedite consideration.

GENERAL SICKNESS.

From opportunities afforded of examining Medical Records compiled under the National Health Insurance Scheme and from scrutiny of prescriptions issued under the County Council Scheme for medical attendance on the sick poor, it would appear that improved trade conditions continued to be accompanied by a reduction in the amount of incapacitating sickness.

Groupings of diseases were as described in previous Reports, affections of the respiratory system continuing to hold first place. Rheumatic conditions would appear to be on the increase. There was no reduction in the incidence of diseases of the digestive system.

Illnesses of a chronic type seemed to be more prevalent. It must again be emphasised that the ailments from which the people suffer and which are the major causes of incapacity and loss of working days are of much greater importance from the point of view of the general public than are those which come under the

purview of the Local Authority. If as much effort, ingenuity and money were spent in the prevention of these ailments as is spent in the preparation of instruments of war, the lot of the people would be infinitely happier. As things are, progress must await the slow development of voluntary or ill paid efforts on the part of comparatively few medical and scientific workers.

The hospitals to which cases of ordinary illness were referred were the Infirmarys at Dundee, Edinburgh and Perth and the Cottage Hospitals at St Andrews and Cupar.

In St Andrews Cottage Hospital there are 29 beds for general sickness, 5 maternity beds and 1 maternity bed for necessitous cases. In Cupar Cottage Hospital, there are 23 general beds. 723 patients were admitted to these hospitals and 35 deaths occurred. The average duration of stay of patients in St Andrews Hospital was 15·21 days and in Cupar Hospital 27·22 days. 698 major and 506 minor operations were performed and 1961 out-patients made 4461 attendances for various purposes including X-ray examinations. Of recent years, these hospital figures have been on the increase. To both hospitals the public owe a very great debt.

AMBULANCE SERVICES.

The transport arrangements described in previous Reports again proved adequate. The motor ambulances at Auchtermuchty and St Michael's Hospitals, however, have now been long in service. The former vehicle is far from complying with modern standards.

WATER SUPPLIES.

The position in regard to the many water supplies of the East of Fife has been reviewed in previous reports. It is, therefore, perhaps unnecessary again to deal with the various adverse effects produced through absent or deficient water supplies or with the general unsatisfactory distribution of water supplies throughout the area. On the other hand, it may be informative to indicate the effect which inadequacy of water supply is having upon improvement of rural cottages.

Not infrequently, cases are encountered where water supplies introduced from wells into rural cottages renovated with or without grant under the Housing (Rural Workers) Acts have been of suspicious quality in that the lands in the neighbourhood of the wells are subject to contamination. All practical precautions are taken to prevent the water supplies becoming polluted but, at the best, the situation cannot be regarded as satisfactory from the Public Health point of view.

The costs which some proprietors are having to undertake in securing water supplies are great. Proprietors of several estates have been at great expense in finding water, digging wells and laying

pipes for miles to supply considerable groups of rural cottages. Only wealthy proprietors can bear such expense. As things are, there is little or no hope that cottages belonging to impoverished owners will be given a proper supply.

A comparatively small but sometimes important item of expense is frequently encountered in connection with the laying of water from a well to a row of cottages. It is not practicable to draw water from a well through a common supply pipe by means of rotary pumps in individual cottages. A pipe has to be led to each cottage separately—the greater number of cottages, the greater number of pipes. The arrangement is unavoidable under existing circumstances but is extravagant.

Occasionally wells, previously considered able to produce adequate water supplies, are found to dry up in the autumn. A case in point was afforded at Colluthie where the water supply introduced into renovated cottages was reputed to be abundant. Experience in the autumn of 1937 was to the contrary and the result was that the new sinks, tubs and water closets became for a time more of a menace than a help to domestic hygiene.

There are instances where insanitary housing conditions cannot be properly relieved on account of the absence of a reasonably available water supply. Easter Lumbennie provides an illustration. There, there are seven cottages all of which are in an entirely uninhabitable condition. The only available water supply lies at a low level and it would be an exceedingly difficult and costly matter to raise it to the cottages. The proprietor could not possibly bear the expense involved in providing a proper system of water supply in addition to the amount he will require to expend in renovating the cottages.

A striking illustration of the handicap which inadequacy of water supply places upon housing progress is afforded by the rural villages of Lindores, Glenburnie and Luthrie, to mention only three out of many. A few individual cottages have been reconditioned in these villages, but absence of water supply is deterring to a very serious extent the progress which should be made. These villages are beautifully situated and should be preserved. Unfortunately, it would seem that they must be allowed gradually to disappear.

Towards the end of the year, plans for the erection of a small cottage in the village of Strathkinness were submitted for approval. An adequate supply of wholesome water was not available and the proprietor was unable to afford the cost of finding and providing a water supply. He offered, however, to provide all the usual modern sanitary fitments on the understanding that he would take in a public supply if and when it became available. The Local Authority, not being in a position accurately to determine when

a public supply would become available, were not prepared to approve the proposal and were thereby reluctantly compelled to withhold permission for the erection of the house.

These illustrations are drawn from the year's experience and will perhaps serve to indicate how difficult it is to provide for the inhabitants of rural cottages those sanitary conveniences and domestic accessories which are commonplace to town dwellers because so frequently the water supply is either unavailable or if available, insufficient in quantity.

A further illustration of the inadequacy of water supplies is afforded by dairy premises. Water supply plays a very important part in a modern dairy where the proved advantage of individual drinking bowls render such fitments necessary and where the production of clean milk demands *inter alia* absolute cleanliness of utensils and the use of milk coolers. In almost 25 per cent. of the dairies in the East of Fife, it is estimated that the water supply available is insufficient in amount to meet these needs. For some, it will be impossible to secure a sufficient supply: for others, much expense will be involved if the premises are to survive.

The Local Authority are, of course, well aware of the relationship which water supply bears to housing and to industry and have been at pains to secure information regarding the effects which inadequacy of water supply have been producing in the County. As an outcome of their deliberations, early in 1937 they approved of the principle of a regional water supply and decided to proceed with a scheme. A commencement has been made with the first development and a pipe is in process of being laid down from Dunfermline District to a point near Markinch, a distance of 18 miles. This pipe, while augmenting the supply to Kirkcaldy District will be adequate to meet the needs of a regional pipe extending through the East of Fife, supplying on its way various villages, hamlets and cottages. Before the scheme, which was described in the Report for 1936, can be completed in its entirety, several years will elapse, but it is indeed satisfactory to know that a solution of the difficulties which have existed for so long in the East of Fife is at least within sight.

DRAINAGE.

While some villages have the advantage of having a public system of sewage disposal, many are dependant upon cesspools, percolating wells and old culverts or rubble drains for removing sewage from individual houses.

Eleven villages enjoy the privilege of being Special Drainage Districts but only four of them to the extent of having satisfactory means for sewage disposal. In the remainder, no proper or adequate arrangements of drainage exist.

Everyone would, of course, like to see every village equipped with a properly functioning system of sewage disposal but the costs of

supplying such public services are considerable and, since for many of the villages the necessity for introducing an adequate water supply claims prior attention, the Local Authority is naturally reluctant to embark upon additional schemes which will result in further calls on the ratepayers. In due course, however, the situation will require to be faced.

In the Report for the previous year, attention was directed to unsatisfactory drainage arrangements in the villages of Strathmiglo, St Michaels, Guardbridge and Balmullo.

In the interval, a scheme has been prepared for the improvement of drainage arrangements at Strathmiglo and, so far as is known, the work will shortly commence. A new public sewer was laid down throughout the entire length of the village of Guardbridge and crude sewage is discharged into open water well down the tidal estuary of the River Eden. The improvement thereby effected in the environment of the village has been considerable.

No change for the better took place at St Michaels where wells and cesspools are in more or less close proximity. Meanwhile, the number of houses in the village is being added to and although considerable costs will be entailed, the time for the construction of a drainage system is becoming more and more pressing.

The primitive conduit at Balmullo is still in use. Housing improvements are slowly taking place in the village and the need for a proper sewer becomes more obvious each year.

REFUSE DISPOSAL.

During the past few years, much improvement has taken place in the appearance and methods employed at the numerous refuse tips in the East of Fife. Surfaces are levelled and blinded with earth, layers are moderately shallow and precautions are taken against infestation with rats. On the whole, refuse tips do not present the same objectionable features which they showed in the past. There are, however, one or two old dumps which are still in use and which do not readily lend themselves to the practice of modern methods of refuse disposal. In these, working faces are deep with the result that they cannot be properly blinded. A serious danger attending dumps of this type is that of fire. When fire breaks out in a deep refuse dump, its control is a matter of great difficulty. It may burn itself out, but meanwhile, the atmosphere of the neighbourhood is polluted with a most offensive odour. Active measures entail exposure of the site of the fire by digging and flooding with water. Unfortunately, the majority of the unsatisfactory types of dumps in the area are not conveniently situated to any source of water supply sufficient in amount to be of service in controlling a fire so that should such a catastrophe

occur in any of these dumps a situation of considerable unpleasantness may arise and much expense may be involved in applying a remedy.

To obviate these risks, however, an endeavour is being made to construct a system of terracing for all deep faced dumps so that refuse can be deposited in layers no more than 5 ft. deep. In time, it is hoped that every rubbish tip in the County will be above criticism.

The question of organising a system of centralised dumping for Cupar District was under consideration. It would seem that the costs entailed would be slightly greater than those presently borne and that some difficulty may arise in acquiring a suitable central site. A final decision, however, has not yet been reached. It would certainly conduce towards improved methods if sufficient transport and labour were available to convey domestic and trade refuse to one central depot where proper methods of control could be employed.

HOUSING.

Progress in housing has achieved more by the renovation of old houses than by the erection of new houses or by the relief of overcrowding. Considerable leeway has yet to be made up in the East of Fife before the Local Authority provide sufficient houses to meet the needs of families who should be displaced from unfit or overcrowded houses. A serious deterrent to the fulfilment of the building programme, however, has been the rise in building costs and as the cost of erecting a house is reflected in the rent charged, the Local Authority have deemed it wise to proceed with caution. For this reason principally, although plans of housing schemes have been approved for several villages, a commencement has not yet been made with works of construction.

BUILDING BYELAWS.

The following Table describes progress in connection with the erection or alteration of buildings :—

Plans submitted.	Anstruther.	Cupar.	St Andrews.	Total.
Houses erected under Subsidy	42	34	20	96
Houses erected without Subsidy	6	6	11	23
Alterations and Improvements to Houses	28	15	9	52
Erection of huts, garages, business premises, piggery, chapel and mortuary ...	11	7	3	21
Improvements of halls, hotels, business premises, boiler-house, offices, etc.	5	6	3	14
Improvements to Dairies ...	3	1	—	4
Improvement of Water Supply	—	1	—	1
Plans Examined	52	34	22	108

Plans were approved for the erection by the Local Authority of 20 houses at Colinsburgh, 22 at Lower Largo, 10 at Newton of Falkland, 20 at Freuchie and 20 at Leuchars under the 1930-35 Housing Acts. Four houses were proposed to be erected at Gateside but the plans were withdrawn.

Plans for the erection of 23 houses under private enterprise were approved.

Plans for the alteration and improvement of 52 dwelling-houses were considered. For the most part, the new works consisted of the introduction of sanitary fitments, improvement of lighting and addition of rooms. All the plans were approved.

Plans for the erection of 21 huts, garages, business premises, piggery, hall, etc., were favourably considered.

Plans for the improvement of 14 halls, hotels, business premises, boiler-house, bakery, etc., were approved.

Alterations and additions to 4 dairy premises were permitted.

Plans were approved for the improvement of one water supply.

In all 108 plans affecting 211 premises were considered by the three Local Committees concerned.

HOUSING (INSPECTION OF DISTRICT) REGULATIONS (SCOTLAND) 1928.

All villages in which a reasonably adequate public water supply exists have been inspected at least once, some indeed several times. Official Representations have been considered by the Local Authority and in every case where alternative accommodation has been made available, the requisite Notices in terms of the Act of 1930 have been served. Where, however, requirements are concerned only with the improvement of existing houses, Notices calling for improvements are served irrespective of alternative accommodation being available. In those villages where sufficient water supply is not available and where the Local Authority do not at present contemplate building, improvement in housing conditions is achieved mainly by persuading proprietors to reconstruct their houses with financial assistance under the Housing (Rural Workers) Acts.

Since of recent years housing activities have been concentrated in villages, much but not all of the work of inspection has now been done. There remains, however, the large group of more or less isolated rural cottages attached to farms or scattered throughout the countryside. Attention is now being increasingly directed to their condition and appropriate action is being taken. The difficulties attending procedure against those cottages is greater than those affecting houses in villages but new legislation, which is pending, will do much to remove obstacles and in time, it is hoped, every rural cottage will be in a sound sanitary state and well equipped with modern conveniences.

344 houses were inspected :—Cupar District, 127 ; Anstruther District, 107 ; St Andrews District, 110. Since 1931, 5512 houses have been inspected.

280 houses were found to be in a state so dangerous or injurious to health as to be unfit for human habitation—Cupar District, 113 ; St Andrews District, 109 ; Anstruther District, 58.

Without recourse to official Notices under Section 20 (1) of the Housing (Scotland) Act, 1925, action was taken in connection with 176 houses in which there was insufficient water-closet accommodation. In 135 cases, owners complied with requirements with assistance under the Housing (Rural Workers) Acts. In 41 cases, requirements were met without such assistance.

Without formal Notices under Section 40 (1) of the Housing (Scotland) Act, 1919, water supply was introduced into 133 houses with assistance under the Housing (Rural Workers) Acts. Without such assistance, water supply was introduced into 37 houses.

19 Notices under Section 14 (1) of the Housing (Scotland) Act, 1930, were served :—Cupar District 16 ; St Andrews District 3.

16 houses concerning which Section 14 Notices had been served had been reconditioned by the end of the year, 14 with assistance under the Housing (Rural Workers) Acts and 2 without.

There are a number of houses concerning which Notices under Section 14 are long since time expired. No attempt has been made to carry out the alterations and improvements demanded by the Local Authority and the proprietors have shown no sign that they ever intend to comply with requirements : some of these houses have been acquired by the Local Authority and are to be reconditioned by them. As regards others, the Local Authority have decided themselves to carry out the works necessary and to reclaim costs from the proprietors in whatever manner seems best. The Property and Works Committee have been instructed to take the necessary steps.

In one instance, a Demolition Order was substituted for a Notice under Section 14 (1) at the request of the proprietor.

39 Notices were served under Section 16 (1) of the Housing (Scotland) Act, 1930. 5 of these resulted in undertakings being accepted that the houses would not be re-let until they had been rendered fit for habitation, and 29 in Demolition Orders. One house was reconditioned with assistance under the Housing (Rural Workers) Acts after an undertaking under Section 16 (2) had been accepted.

Without formal action under the Housing Acts, 168 houses were renovated—Cupar District, 116 ; St Andrews District, 36 ; Anstruther District, 16. In 121 cases, assistance under the Housing (Rural Workers) Acts was granted.

At the end of the year, the total amount of the work done under the Act of 1930 was as follows :—43 houses had been demolished, 26 houses had been closed, 59 houses had been reconditioned and 56 houses had been vacated but had not been demolished or reconstructed.

FARM SERVANTS' COTTAGES.

It is estimated that there are 2203 farm servants' cottages or their like in the East of Fife. A certain number of these are inspected annually and a steady increase has taken place in the number improved. During 1937, 184 cottages were inspected and 172 were found to be in a defective state. 114 cottages were renovated—102 with assistance under the Housing (Rural Workers) Acts.

Since 1932, the total number of rural cottages dealt with has been 1425. Action in connection with the improvement of 189 is pending and 778 have still to be inspected and the remainder are in a fit state or have been rendered so.

Improvement of houses occupied by farm workers is not only a matter pertaining to the requirements of the Housing Acts but is also becoming an economic necessity. Farm servants and their families are as desirous of living in properly equipped houses as anyone and many refuse employment on farms where cottages are not provided with internal sanitary fitments. The result is that farmers with unsatisfactory cottages are often finding themselves compelled to employ unsatisfactory workers.

There is, of course, little reason why the standard of housing for rural cottages should be any less than the standard laid down for houses in rural villages. It is often more difficult to undertake the renovation of a rural cottage because of the extra cost of conveying labour and material to outlying places but to compensate for this and other difficulties, the Government has in preparation a Bill to subsidise the erection of cottages at farms to take the place of cottages which are deemed to be unfit for habitation. It is proposed to give a grant of £160 towards the erection of a modern three-roomed cottage and £200 towards the erection of a cottage containing more than three rooms. Already, some proprietors are preparing plans for the erection of such houses in anticipation of the passing of the Act. Without doubt, the new legislation will give an impulse to improvement of the conditions under which so many farm workers are living and will have an effect in checking, to some extent, the disastrous tendency of the agricultural population to drift towards the towns.

Unfortunately, there are owners of farm cottages who are not prepared to provide for workers, houses of reasonable standard and who resist all persuasions and appeals. These proprietors are compelling the Local Authority to have increasing resort to the machinery of the Housing Acts in their consideration of reports

on farm cottages, instead of securing the desired result by informally acquainting owners of the defects of their properties. The situation arising is less conducive towards cordial collaboration between proprietors and officials because statutory measures once adopted must be carried to a conclusion.

That the Government are determined to secure improved housing conditions for agricultural workers is clear since, during the year, instructions were issued that in the course of the next five years all farm cottages must be inspected and reported upon if found to be in unfit condition. The work entailed is considerable but every endeavour will be made to complete the required survey, it being a matter of much national importance that agricultural workers should have every inducement to remain on the land.

HOUSING (RURAL WORKERS) ACTS, 1926-31.

77 plans for the reconditioning of 130 houses and for the improvement of 1 water supply were considered. Assistance under the County Scheme was granted in respect of 126 houses.

The number of houses approved for grant in the three Districts was as follows :—

Cupar District,	81
St Andrews District,	31
Anstruther District,	14
Total,	<hr/> 126 <hr/>

Towards the end of 1936, the County Scheme for Assistance under the Acts was revised and the maximum grant-in-aid available was reduced from £100 to £80. At first, the reduction led to a diminution in the number of applications for assistance but latterly, possibly to some extent as a result of enforcement of the powers contained in the Act of 1930, the number of applications has resumed normal proportions. A greater number of voluntary applications might perhaps be submitted if payment of the larger grant were resumed but there are no clear grounds for the suggestion that the reduction has acted as a serious deterrent to the reconstruction of defective houses.

The change has not been an entirely drastic one since the £100 grant is still available if bedroom or living room accommodation is increased by at least 110 square feet or if the works done are of an unusually extensive type. In a great many cases, proprietors have received the larger grant by adding rooms to their houses incidentally thereby materially assisting towards solution of the problem of overcrowding.

The Act expires in June of the present year and it is to be hoped that an extension will be authorised. No legislative measure has conferred greater benefit upon the community, particularly the

rural community, than the Act. If the assistance available under it were to be withdrawn, the difficulty of ensuring that decent houses are provided for agricultural workers would be greatly increased.

HOUSING REQUIREMENTS.

There are still a number of houses in the East of Fife which are unfit for human habitation. Surveys have been completed in all villages where water supplies are available and, so far as is known, all insanitary houses in them have been duly scheduled. In outlying areas and in villages which have no public water supplies, no systematic surveys have been made for the reason that essential items of improvement could not be effected even if the houses were condemned and the Local Authority would not be in a position to erect modern houses. At the same time, it has been found necessary to take action against individual houses in these localities so far have some of them deteriorated.

While a considerable part of the year's work was concerned with the inspection of houses in Burghs, time was found for the inspection of isolated cottages in various parts of the landward area and a complete survey was made of housing conditions in the villages of Largoward, Radernie, Lathones and Peat Inn where the following actions were taken under the Housing (Scotland) Act, 1930 :—

				Section 16.	Section 14.
Largoward	...	...	...	29	18
Radernie	...	...	...	12	4
Lathones	...	...	...	4	6
Peat Inn	...	...	...	14	12

For the village of Largoward, an augmented water supply was provided in the course of the year.

There is great need for the erection of new houses but the only place in which building was undertaken was Leuchars where at the end of the year 20 houses, 10 three-roomed and 10 four-roomed, were well on the way to completion.

Including these houses, the total number of houses built by the Local Authority is :—

Leuchars	...	...	...	...	22 houses.
Strathmiglo	...	...	...	...	28 „
Newton of Falkland	...	...	...	...	4 „
Pitlessie	...	...	...	...	8 „
Dunshelt	...	...	...	...	4 „
Kingskettle	...	...	...	...	6 „
Cupar Muir	...	...	...	...	4 „
					—
					76 „
					—

The total forms a relatively small proportion of the 265 houses which were approved by the County Council in 1935 under their five years' programme as necessary to replace unfit houses.

On the other hand, as was foreshadowed in the Report for 1936, the Local Authority have been seriously handicapped by the rise in building costs and have been compelled to proceed cautiously in view of the direct influence which increased costs have in increasing rentals.

That the need for new houses is recognised is clear from the fact that preparations are well in hand for the erection of the following number of houses :—

	Three-roomed.	Four-roomed.	Five-roomed.	Total.
Strathmiglo ...	16	8	—	24
Newton of Falkland	4	4	2	10
Kingskettle ...	8	10	2	20
Freuchie ...	8	10	2	20
Gateside ...	—	4	—	4
Colinsburgh ...	18	2	—	20
Lower Largo ...	18	4	—	22
Upper Largo ...	6	2	—	8
	78	44	6	128

Suitable sites have been secured for the erection of houses in the villages of Strathmiglo, Newton of Falkland, Kingskettle, Freuchie, Colinsburgh and Lower Largo. In Freuchie and in Colinsburgh new access roadways have been constructed and drainage and water supply services have been laid down.

For the village of Gateside, a site was secured and a public water supply was provided. The costs entailed in the proposed building scheme, however, caused the County Council to delay operations for the meantime.

At Upper Largo, difficulties were encountered in connection with the selection of a site. These were overcome but, at the end of the year, procedure was no further advanced than elsewhere.

On the whole, the situation cannot be regarded as satisfactory particularly since, owing to circumstances over which they have no control, the Local Authority have been compelled to suborn their concern for the welfare of the people to interests of a financial nature.

In the Report for 1936 reference was made to an experiment undertaken in the village of Dunshelt where, instead of erecting new houses, the Local Authority had acquired sufficient old properties with a view to reconstructing them to meet the village needs. Unfortunately, similar financial considerations have proved

an obstruction even allowing for the grant available to the Local Authority under the Housing (Rural Workers) Acts as amended by the Housing Act of 1935. It appears that proposals for the renovation of these old houses entail such costs that economic rents cannot be charged. It is not easy to understand the situation in view of the fact that so many private proprietors have successfully reconstructed old houses without encountering a like difficulty. Nevertheless, such would seem to be the position.

OVERCROWDING.

The survey of 1935 showed that at that time there were the following number of overcrowded houses.

	1-apt.	2-apt.	3-apt.	4-apt.	5-apt.	6-apt.	Total.
Cupar ...	33	382	118	9	1	—	543
St Andrews	26	215	82	6	2	1	332
Anstruther	7	112	34	4	—	—	157
	66	709	234	19	3	1	1032

It was estimated that, allowing for decanting operations, the following number of houses would require to be built to relieve overcrowding.

	3-apt.	4-apt.	5-apt.	Total.
Cupar ...	164	164	33	361
St Andrews	86	84	4	174
Anstruther	58	36	7	101
	308	284	44	636

During 1937, only 4 cases of overcrowding were relieved but provisional allocations were made in respect of the small housing scheme at Leuchars which was nearing completion. Nevertheless, the number of houses which the Local Authority have undertaken to build is not only less than the number required to remedy unfitness but is very much less than the total number required to remedy both unfitness and overcrowding. As has been pointed out, however, the Local Authority is in a position of disadvantage in that they have to deal with insanitary and overcrowded houses situated in outlying parts and in villages where no proper water supplies exist. In these localities, they cannot build modern houses and the suggestion that a model village might be built in suitable places has not been received with favour for various reasons.

There is one village, however, where immediate action could be taken. In Guardbridge, the housing problem is related solely to overcrowding, there being no unfit houses. The Guardbridge Paper Company are in process of erecting four three-roomed and four four-roomed houses. The extent to which these houses will

be made available to workers living under overcrowded conditions is not known, but, since 41 houses are estimated to be required to remedy overcrowding in the village, the effect produced will not be great. There is every reason then for the promotion of a housing scheme by the County Council. It is possible that difficulties in connection with water supply may arise, since the existing public supply is not sufficient in amount to meet demands in times of drought although just sufficient in times of normal summer weather. Nevertheless, the difficulties presented are not insurmountable, and should not stand in the way of the building of a reasonable number of houses.

ACCOMMODATION FOR SEASONAL WORKERS.

Intimations under the new Byelaws were received from the usual number of farmers and employers. Premises were inspected and indications were clear that those concerned were doing their best to comply with the new requirements although in some premises there was room for improvement.

The tendency for farmers to employ daily workers residing at a distance continues.

Proceedings were taken before the Sheriff in the case of one building where contraventions of the Byelaws were considered to have taken place. The contraventions took place in April and were in respect of failure to segregate the sexes, overcrowding, lack of proper lighting, cooking, washing and drying facilities, insufficient sanitary arrangements, lack of means of disposal of refuse, failure to exhibit copies of the Byelaws and to provide suitable emergency exits and fire buckets.

Nine persons occupied the building but the Sheriff took the view that only three, or at most four, could be described as "seasonal workers" within the meaning of the Byelaws. Since then, the Byelaws do not apply in cases where any less number than five workers of the same sex were employed, he felt justified in finding the farmer not guilty.

That the workers, whether they were "seasonable" or otherwise, were living under very unsatisfactory conditions indeed need not be emphasised and it is perhaps unfortunate that judgment went against the County Council on a technicality. On the other hand, after proceedings were instituted the farmer was at much pains in putting his premises in order so that a principal object of the prosecution was achieved.

FACTORIES AND WORKSHOPS.

298 visits of inspection were paid to factories, workshops and workplaces—factories 70, workshops 223 and workplaces 5. Eight written notices were issued calling for remedy of defects. Twenty-four infringements of the Public Health Acts were discovered.

These were mainly related to want of cleanliness and defective sanitary accommodation. None was of serious nature and suitable remedies were applied in all cases.

On the whole, the conditions under which people work are reasonably satisfactory. Premises are well lighted and ventilated and free from overcrowding. It cannot be claimed that any circumstances exist which menace the health of the workers.

It is anticipated that the new Factories Act which comes into force on 1st July, 1938, will add considerably to the work of the Public Health Officials in that more stringent and more frequent inspections will require to be undertaken, at least until it is found that the new requirements are complied with.

MEAT SUPPLY.

No new slaughterhouses were licensed during the year and all previous licences were renewed.

In the Eastern Division, there are the following number of slaughterhouses :—

Cupar District—1 Public Slaughterhouse in Cupar Burgh and 13 Private Slaughterhouses elsewhere.

St Andrews District—1 Public Slaughterhouse in St Andrews Burgh and 3 Private Slaughterhouses elsewhere.

Anstruther District—1 Public Slaughterhouse in Anstruther Burgh and 3 Private Slaughterhouses elsewhere.

Of these twenty-two slaughterhouses, nine, including the three public slaughterhouses, are licensed by Town Councils of Small Burghs.

It will perhaps be readily admitted that the number of slaughterhouses is much greater than can be subjected to full supervision so far as concerns inspection of the meat supply.

In only the Public Slaughterhouse at St Andrews is a proper system of meat inspection in force. There every carcase is inspected by a Veterinary Inspector before it is liberated for human consumption. In all the other slaughterhouses, meat inspection is in the hands of the Sanitary Inspectors. Considering the volume of other work which they have to accomplish, they carry out their duties as Detention Officers with remarkable efficiency. Nevertheless, it would be a much more satisfactory arrangement if the work of meat inspection were carried out entirely by Veterinary Surgeons who have special knowledge of the subject. As things are, a Veterinary Surgeon is called in only if the Sanitary Inspector has doubts or encounters difficulty.

A principal obstacle in the way of the enforcement of an improved scheme for meat inspection is the costs involved. The necessary expenses, however, would be greatly curtailed if slaughtering were more centralised.

Apart from the question of meat inspection, the reasons in favour of centralised slaughtering in each of the three Areas outweigh the reasons against. Except for the Public Slaughterhouses at Anstruther and St Andrews, all the slaughterhouses are neither designed nor equipped in a manner to meet modern requirements. Indeed, some of the premises are of very poor type and their closure would have been recommended several years ago but for the fact that the whole position is under review. For various reasons, the County Council have been slow in reaching a decision but, meanwhile, there have been several indications that other licensing authorities are awaiting a lead.

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

Slaughterhouse.	No. of Animals Slaughtered.				Lbs. of Meat condemned.
	Cattle.	Sheep.	Pigs.	Total.	
<i>Cupar District.</i>					
Public	857	1643	757	3257	12,313 $\frac{3}{4}$
Private	1022	33318	444	33455	8,022 $\frac{1}{2}$
<i>St Andrews District.</i>					
Public	1247	3278	390	4915	18,605
Private	211	488	48	747	712
<i>Anstruther District.</i>					
Public	777	1271	277	2325	11,766 $\frac{1}{4}$
Private	407	1401	240	2048	3,951
Total	4521	41399	2156	46747	55,370 $\frac{1}{2}$

As compared with the previous year, 5467 more animals were slaughtered but 3,294 $\frac{1}{4}$ less pounds of meat were seized as unfit for human consumption.

On the basis of the amount of meat condemned per head of *cattle* slaughtered, the following proportional amounts of meat have been condemned in the three Districts during the past four years :—

	1933	1934	1935	1936	1937
<i>Cupar District—</i>					
Public	4.5 lbs.	9.0 lbs.	11.9 lbs.	8.7 lbs.	14.3 lbs.
Private	3.0 lbs.	3.8 lbs.	6.1 lbs.	10.9 lbs.	7.8 lbs.
<i>St Andrews District—</i>					
Public	14.0 lbs.	12.5 lbs.	9.9 lbs.	16.6 lbs.	14.9 lbs.
Private	2.0 lbs.	1.8 lbs.	2.6 lbs.	3.3 lbs.	3.3 lbs.
<i>Anstruther District—</i>					
Public	10.0 lbs.	16.7 lbs.	22.1 lbs.	20.6 lbs.	15.1 lbs.
Private	3.9 lbs.	8.2 lbs.	13.8 lbs.	5.2 lbs.	9.7 lbs.

During these five years, for every head of cattle slaughtered, 13.4 pounds of meat as compared with 5.7 pounds of meat were condemned in public and private slaughterhouses respectively. It

would seem, therefore, that more than twice as many diseased cattle enter public slaughterhouses as enter private slaughterhouses. Such can hardly be the case. It would be fallacious to suggest that the private butchers who use public slaughterhouses purchase a poorer class of animal than those who use private slaughterhouses. Those competent to judge state that, although slight variations may exist from time to time, on the whole there is little difference in the class of animal slaughtered in the three areas. The difference, therefore, must be related to the system of meat inspection in force. It is certainly impossible for the Sanitary Inspectors with all their other duties, to maintain adequate supervision of the meat supply in the numerous slaughterhouses scattered throughout their districts.

MILK SUPPLY.

There are 144 registered dairy farms in the Landward Area and 22 in the Burghs—a total of 166 dairy farms. In addition there are 32 registered shops and milk stores. In the dairy farms there are approximately 2761 cows.

Visits of inspection were paid to dairy farms by the Sanitary Inspectors and on the whole evidence was clear that a gradual improvement is taking place in their structure, in the degree of cleanliness maintained and in milking methods.

A complete survey was made of the dairy farms in Cupar District. Sixty-three dairy premises were inspected. Of these, only ten were found to be fully in accordance with the requirements of the County Dairy Byelaws. Twelve suffered from defects which will be expensive to remedy and six were in such a state that it is doubtful if the costs involved in their improvement would be warranted. The remainder, while not up to standard, particularly as regards structural defects, readily lend themselves to improvement. A report on the situation is in course of preparation and each dairy farmer will be called upon to carry out the necessary works of alteration and improvement. The outcome may be that certain of the dairy farmers will discontinue business. Should such a happening take place, the incident will be regrettable but it is of much greater importance that milk freed from any danger of contamination should be available to the public from all sources.

The five dairy farms in the Burgh of Pittenweem have been under observation since 1931 and reports concerning them have regularly been submitted to the Local Authority. As a result of the action taken, four of them have been considerably improved. The amount of alterations still necessary are more or less of minor character and are to receive attention in the course of the present year. The fifth dairy remains in its original unsatisfactory state. In due course the Local Authority will have no option but to take steps towards its closure.

During the course of the year, a special inspection was made in respect of the five dairy farms in the Burgh of Anstruther. A report was submitted to the Local Authority giving details of the works of improvement which were deemed to be necessary in order that the premises might conform with the requirements of the Byelaws. Each dairyman was sent a list of the improvements necessary and was allowed a reasonable time in which to carry out the works. The period expires towards the end of the present summer.

No changes of note occurred in connection with the dairy premises from which quality milk is produced or sold. In view of the high standard of quality and cleanliness which must be maintained for these milks, visits of inspection were frequent and numerous samples were collected for analysis. Milk of this type can now be obtained from the following premises :—

<i>Producers.</i>	<i>Premises.</i>	<i>Grade of Milk.</i>
Lord Cochrane of Cults,	Culds Dairy Farms, Springfield.	Certified.
Wm. Lochoar	Wester Balrymonth, St Andrews	Certified.
Jas. Clement,	Kilrenny Mill, Anstruther.	Certified.
Jas. Younger,	Mount Melville, St Andrews.	Tuberculin Tested.
Messrs J. & A. Anderson,	Monturpie, Largo.	Standard.
J. Black,	Grange Hill, Elie.	Standard.
T. D. Fraser	The Grange, Elie	Standard.
R. Telford,	Lathallan Home Farm, Kilconquhar.	Standard.
<i>Retailers.</i>		
Miss Allison,	1 Rankeillor Street, Elie.	Standard.
J. F. Caldwell,	St Margaret's Dairy, Newport.	Certified.
John Robertson,	The Barony, Cupar	Certified.
Messrs W. & D. Smith,	Woodburn Dairy, St Andrews.	Certified.
William J. Braid,	140 Market Street, St Andrews.	Certified.
Richard T. Ramsay,	Elie & Earlsferry Dairy Co., Elie.	Certified.
Co-operative Society,	Guardbridge.	Pasteurised.
do.	Cupar.	Pasteurised.
do.	27 South Street, St Andrews.	Pasteurised.
do.	31 Market Street, St Andrews.	Pasteurised.
do.	Auchtermuchty.	Pasteurised.

On the whole, the above premises were maintained in very satisfactory state indeed and no evidence was found that the milk supply was being handled in any way conducive to risk of its contamination. It was not found necessary in any case to take disciplinary action under the Milk (Special Designations) Order (Scotland) 1936.

The outdoor herd at Culds Dairy Farms has now passed the experimental stage. 377 animals are kept and each one remains out of doors throughout the year, in good weather and in bad. In the Report for 1936, an indication was given of the effects of this method of dairying on the health and milk production of the cows. There is no reason to believe that circumstances continue to remain other than satisfactory.

No additions were made to the list of Accredited Clean Milk Producers which now totals 16. It is unlikely that numbers will increase for the reason that milk legislation is tending to encourage progressive dairy farmers to qualify for licences to produce designated milk. While, therefore, the Accredited Clean Milk Producers Scheme has served a useful purpose in educating dairy farmers in modern milking methods, it now suits their purposes better to apply directly for permission to sell one or other of the designated milks. Such farmers receive valuable advice from the County Organiser of the Edinburgh and East of Scotland College of Agriculture and every assistance is given them by the Public Health Officials.

There have been placed on the statute book two enactments of first importance to those concerned with the production of a safe milk supply. The Government, recognising that existing powers of control were largely ineffective, have issued the Agriculture Act, 1937, and the Tuberculosis Order of 1938 both of which are directed towards a purposeful supervision of dairy herds. Veterinary inspection of dairy herds has been transferred to Government Inspectors responsible only to the Ministry of Agriculture and Fisheries. A uniform system of inspection freed from risk of personal or financial influences has thereby been created and eradication of tuberculosis among dairy herds is at last a possibility. It is now necessary for a dairyman to notify to a Veterinary Inspector any cow which *appears* to be affected with tuberculosis and the Inspector has powers to arrange for the slaughter of the animal if he has grounds to believe or to suspect that it is affected. He has also powers to examine all the other animals in the herd. The new legislation will go far to remove the loopholes afforded by the Tuberculosis Order of 1925, which did not prevent infected milk reaching the public.

The small unregistered dairy still presents a problem in the administration of the Milk and Dairies (Scotland) Act, 1914. These dairies are exempt from the operation of the Act and of the Dairy Byelaws since the milk produced is declared to be sold only to employees of the dairymen and to neighbours. The structure of these premises and the methods of milking employed are, in the main, highly unsatisfactory and the milk in many cases is, to say the least, suspect. There does not appear to be any adequate reason why anyone, whether employee or neighbour, should be subjected to the risk of consuming milk derived from these premises. The time is now opportune for their abolition by statute.

Another unsatisfactory feature of the milk supply is that dirty milk can be sold to the public with impunity. Public Health Officials spend much time in advising dairymen in methods of clean milking and fortunately many dairymen show the utmost willingness to co-operate. Indeed, there are dairymen who would arouse

envy in the hearts of the best of housewives. But there are others who ignore advice and who refuse to believe that milk is a delicate medium naturally favourable to the growth of germs. These producers are a menace to the public. It is a penal offence to sell unwholesome food but no penalty falls upon the dairyman who sells unwholesome milk. There are those who would advocate pasteurisation of milk as a remedy but the process would not mend the habits of careless dairymen; to the contrary, it would tend to set a premium on dirty milk. It would be better if an example could be made of offenders. They are in a minority but they present a real danger.

OFFENSIVE TRADES.

The premises wherein offensive trades are carried out are (a) Damside Knackery, Cupar Muir, where slaughtering of horses, blood and bone boiling, tallow melting and manufacture of fish and bone meal is carried out, (b) the bone meal and manure manufacturing plant in Cupar Burgh and (c) the Kennels at Ceres where meat for hounds is prepared and cooked.

In none of the premises did anything of an objectionable nature arise. No complaints were lodged and no action was taken although visits of inspection were paid from time to time.

PORT SANITARY REGULATIONS (SCOTLAND), 1933.

Intimation of infected foreign ports is sent weekly to the Preventive Officer at Tayport who duly acquaints the Public Health Department of the pending arrival of vessels from any of the ports mentioned.

Seven vessels were boarded, all having come from infected ports on the north coast of Africa. No cases of infectious diseases were discovered. There were one or two cases of minor ailments which were referred to the Agents in order that medical advice might be obtained.

The crew's quarters were inspected and, where necessary, instructions were given for their cleansing.

RIVERS POLLUTION.

Frequent visits of inspection were paid to the settling lagoons at the Beet Sugar Factory, Cupar. On no occasion were objectionable features detected.

During the first week of December, the River Eden, as it passes through Cupar Burgh, was found to be polluted with an oily substance which smelt heavily of paraffin. The pollution was traced to a lade which adjoins the river west of the South Bridge. The lade was contaminated for its whole length to Damside Knackery. None of the employees at the Knackery were aware of anything

untoward having occurred. Eventually, however, it was discovered that a valve cock below an oil tank of some 2,500 gallons capacity had been broken and had fallen out with the result that several hundred gallons of crude oil had run to waste.

Under the circumstances, nothing could be done beyond having the drainage system at the Knackery flushed out with chloride of lime solution.

The pollution had apparently no injurious effect upon life in the river. No trout were destroyed and no complaints were received except from the Cupar Beet Sugar Works in which water pumped from the River Eden to the washers had been found to be contaminated. No harmful effect, however, was produced on the process of sugar refining. In about a week's time, all evidence of pollution had disappeared.

PUBLIC HEALTH SERVICES IN BURGHS.

Full reports regarding transferred and non-transferred public health services were transmitted to the Town Councils of the following Burghs: Anstruther, Newport, Pittenweem, St Andrews, St Monance, Elie and Earlsferry, Crail, Auchtermuchty and Tayport. It is not considered necessary to reproduce these in whole or in part.

The following paragraphs describe in brief activities in the remaining four Burghs in the Eastern Division so far as concerns services transferred under the Local Government (Scotland) Act, 1929.

Burgh of Cupar.

The population as estimated by the Registrar General, was 4864, an increase of 2 having been allowed.

The birth rate was 17·5 per thousand of population and the death rate was 15·2 per thousand of population as compared with rates of 16·9 and 16·7 respectively in 1936. The total number of births was 85—38 males and 47 females—and the total number of deaths was 74—39 males and 35 females.

The marriage rate was 9·9 per thousand of population.

The infantile mortality rate increased slightly to 35 per thousand births, three deaths of infants under one year of age having occurred.

There was one death among children in the 1-10 years age group.

Diseases of the heart and arteries continued to be the principal cause of death. 21 persons died of these diseases. 11 persons died of cancer, 7 from cerebral haemorrhage, 8 from diseases of the lungs and 6 from diseases of the digestive tract.

As regards infectious diseases, there was 1 death from Diphtheria, 1 from Influenza and 1 from Pulmonary Tuberculosis.

58 per cent. of the total number of deaths occurred among people of 65 years of age and over, the corresponding average figure for the Burghs in the East of Fife being 65 per cent.

A slight reduction occurred in the incidence of infectious diseases. 22 cases were notified as compared with 28 in 1936—Acute Primary Pneumonia 8, Erysipelas 3, Diphtheria 3, Undulant Fever 1, Scarlet Fever 1, Ophthalmia Neonatorum 2, Pulmonary Tuberculosis 3 and Non-Pulmonary Tuberculosis 1.

Nothing worthy of special comment arose in connection with any of the infectious ailments which occurred. The incidence was in conformity with the normal appearance of infectious diseases in a populous community except that no tendency towards epidemic outbreak of any particular disease occurred.

The following number of cases were removed to hospital for treatment:—Diphtheria 3, Erysipelas 2, Scarlet Fever 1, Ophthalmia Neonatorum 1 and Pulmonary Tuberculosis 2.

There are three dairy farms in the Burgh and three premises from which milk is sold by retail. The dairy farms do not conform with the requirements of the County Dairy Byelaws in several respects. In one, conditions are to be regarded as somewhat serious. The dairymen are to be advised regarding the works necessary to bring their premises up to standard and will be given an opportunity of effecting improvements.

The general standard of cleanliness shown in the dairy premises was satisfactory.

Certified Milk produced at Cults Dairy Farms is available in the Burgh. There is room, however, for a greatly increased consumption of this safe milk. Milk legislation is gradually tending towards the creation of a situation whereby only milk of designated type will be sold to the public unless it has been pasteurised.

Minor works of repair and replacement were effected at the Public Slaughterhouse. Attention has already been directed to the out-of-date condition of the building and to the need for improved facilities for slaughtering animals and cooling carcasses. It would serve a useful purpose if the County Council were to give a lead on the question of centralised slaughtering in Cupar District.

During the year, 857 cattle, 1643 sheep and 757 pigs were slaughtered and 12,313 $\frac{3}{4}$ pounds of meat were condemned as unfit for human consumption.

Burgh of Falkland.

The population of the Burgh, according to the estimate of the Registrar General, was 915, a decrease of 28 having been allowed.

The birth rate was 18·6 per thousand of population as compared with 18 per thousand of population in 1936. The death rate was 16·4 per thousand of population as compared with 12·7 per thousand in 1936.

17 births were registered—6 males and 11 females.

15 deaths were registered—7 males and 8 females. There were no deaths among infants under one year of age. One child in the 1-10 years age group died.

The chief causes of death were diseases of the heart and arteries. There were three deaths from Tuberculosis.

Fifty-three per cent. of the total number of deaths occurred among people of 65 years of age and over. The equivalent average percentage for all the Burghs in the East of Fife was 65.

Only 8 cases of infectious diseases were notified :—Scarlet Fever 5, Erysipelas 1, Influenzal Pneumonia 1, and Non-Pulmonary Tuberculosis 1. All the cases of Scarlet Fever and the case of Influenzal Pneumonia were removed to hospital for treatment.

It is, therefore, satisfactory to be able to report that the town has remained comparatively free from the ravages of infectious disease.

There are three dairy farms within the Burgh. These, in the main, are kept in clean condition but they suffer from various structural defects. The attention of the dairy farmers is to be drawn to these and they are to be asked to bring their premises up to the standard required under the County Building Byelaws. It cannot be said, however, that any evidence was detected that the milk supplied from these dairies was having an injurious effect upon the health of the consumers.

The single private Slaughterhouse in the Burgh was kept in very clean condition. Structurally, it falls short of modern requirements but it is quite a satisfactory place of its type.

During the year 63 cattle, 152 sheep and 4 pigs were slaughtered and 382 pounds of meat were condemned as unfit for human consumption.

Burgh of Ladybank.

According to the estimate of the Registrar General, the population of the Burgh was 1194, an increase of 21 having been allowed.

There were 17 births—9 males and 8 females—the corresponding birth rate being 14·2 per thousand of population. There were 18 deaths—6 males and 12 females—the corresponding death rate being 15·1 per thousand of population.

There was one death among infants under one year of age.

The principal causes of death were diseases of the heart and arteries (5), cerebral haemorrhage (2) and cancer (2). There was one death from influenza and one death from pulmonary tuberculosis.

Sixty-one per cent. of the total number of deaths occurred among persons of 65 years of age and over. The corresponding percentage for all the Burghs in the East of Fife was 65.

The low incidence of infectious diseases continued. Only 6 cases were notified—Acute Influenzal Pneumonia 2, Scarlet Fever 3 and Pulmonary Tuberculosis 1. It was remarkable that Scarlet Fever, once it had appeared in the Burgh, did not assume epidemic proportions. For many years, the Burgh had indeed been fortunate in being more or less free from infectious ailments.

There is one dairy farm and one dairy shop in the Burgh. The dairy farm suffers from various minor defects towards which the attention of the dairy farmer is to be directed. There were no indications that anything having an injurious effect upon the safety of the milk supply was occurring in the premises. The bulk of the milk supply is obtained from dairy farms situated in the landward part of the County. These are kept under supervision by the County Public Health Officials.

There is one private Slaughterhouse which is far from being of good type structurally or in design. A satisfactory degree of cleanliness was maintained, however, and the meat produced was inspected by the County Sanitary Inspector before liberation to the public.

During the year, 99 cattle, 142 sheep and 79 pigs were slaughtered and 520 pounds of meat were condemned as unfit for human consumption.

Burgh of Newburgh.

The population as estimated by the Registrar General was 2271, an increase of 43 having been allowed.

There were 36 births—17 males and 19 females—the corresponding birth rate being 15·8 per thousand of population.

30 deaths occurred—15 males and 15 females—the corresponding death rate being 13·1 per thousand of population.

There were three deaths among infants under one year of age, the infantile mortality rate being 83 per thousand births.

There was one death among children in the 1-10 years age group.

There were 13 marriages.

Seventy per cent. of the total number of deaths occurred among persons of 65 years of age and over. The average figure for all the Burghs in the East of Fife was 65 per cent.

The principal causes of death were diseases of the heart and arteries (13). There were 3 deaths from diseases of the lungs. No deaths were due to infectious diseases or to cancer.

A further reduction took place in the incidence of infectious diseases. The following number of cases were notified:—Acute Primary Pneumonia 2, Acute Influenzal Pneumonia 2, Erysipelas 2, Scarlet Fever 3 and Non-Pulmonary Tuberculosis 6—total 15.

One case of Primary Pneumonia and all the cases of Scarlet Fever were removed to hospital for treatment.

There are two dairy farms and three dairy shops in the Burgh. One of the dairy farms falls very far short of the requirements of the County Dairy Byelaws. The attention of the dairyman is to be directed to the situation and he will be given an opportunity of executing the necessary works of improvement. Otherwise, conditions affecting the sale of milk to the public were reasonably satisfactory.

No indications were obtained that the milk supply available was of inferior type. Nevertheless, it cannot be too strongly emphasised that if the public desire to consume a really safe milk supply they should purchase either Certified or Tuberculin Tested Milk. These are untreated milks which are produced under the cleanest possible conditions from herds which undergo regular testing to ensure that they are free from Tuberculosis.

At the end of the year, the new private slaughterhouse in the Burgh had not been completed. Others were working as previously. All are of defective type but were maintained in reasonably clean condition. It is perhaps unfortunate that the delay in consideration of the question of centralised slaughtering should have been so lengthy that no sustainable objections could be raised against the erection of the new slaughterhouse even although the building is of excellent type and is to be satisfactorily equipped.

During the year, 138 cattle, 32,120 sheep and 11 pigs were slaughtered and 1392 pounds of meat were condemned as unfit for human consumption.

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-Committees and to the Department of Health for Scotland. The following are brief excerpts from the reports of the Sanitary Inspectors.

DUNFERMLINE AREA—A. M. Thomson, Sanitary Inspector.

WATER SUPPLY.—The water supply in Dunfermline Area is derived principally from the Glenquey Burn and the River Devon, Perthshire.

As in former years, the supplies of certain neighbouring Authorities were augmented from this source, and this arrangement has continued to give satisfaction. During the year, the supply was satisfactory, and no complaints were received.

Extensions to water mains were made necessary by the commencement of various developments under the Council's building programme.

At Kincardine and Aberdour, private building operations rendered it necessary to lay 867 yards of 4-inch pipe and 30 yards of 2-inch pipe at each place respectively, in order to provide a supply of water to the houses in course of erection.

Statutory Notices in terms of Section 40 of the Housing, Town Planning, etc. (Scotland), Act, 1919, were served on the owners of a number of dwelling-houses at Comrie and Shiresmill and the work of installing inside water supply fitments is proceeding satisfactorily.

DRAINAGE AND SEWAGE DISPOSAL.—There are 10 Special Drainage Districts in the Area, viz. :—Aberdour, Blairhall, Charlestown, Crossford, Crossgates, Limekilns, North Queensferry, Saline, Tulliallan, and Valleyfield and Torryburn. The work of maintenance is carried out by District Officers working under my supervision.

Notices in terms of Section 120 of the Public Health (Scotland) Act, 1897, were served in respect of several houses in Comrie and Shiresmill, the owners of which had not taken advantage of the facilities made available by the extension of Blairhall Special Drainage District. In most instances, the requirements of the Notices have now been complied with, or arrangements have been made for the carrying out of the work. It may be that in one or two cases the County Council will require to carry out the work and recover the cost from the owners.

As has often been stated in these Reports, the sanitary conditions at Wellwood are very unsatisfactory indeed, the drainage arrange-

ments and method of sewage disposal being of the crudest. However, in view of impending litigation in connection with the proposed formation of a Special Drainage District in this area, perhaps the less said at the present juncture, the better, but I sincerely hope, in my next report, to be able to record substantial progress towards the abolition of the rather primitive condition prevailing in the village at the present time.

At Torryburn, where, as mentioned in last year's Report, a nuisance was occasionally caused by sewage being washed up on the foreshore, the outfall sewer was extended by approximately 300 yards, since when, no nuisance has been observed and no further complaints have been received.

In all other Districts the drainage systems continued to function satisfactorily.

The sewage effluent at Saline is treated by a modern and efficient filtration plant before being discharged into the Black Devon Burn. The effluents from other Districts are discharged into the River Forth without previous treatment, excepting that from Crossgates, which is connected up with Dunfermline Burgh Sewer. This sewer is provided with screening plant in the vicinity of North Queensferry, before discharging into the River.

SCAVENGING.—There are 9 Special Scavenging Districts in the Area. These are at Aberdour, Crossford, Crossgates, Halbeath, Limekilns and Charlestown, North Queensferry, Saline, Tulliallan and Valleyfield and Torryburn.

At Crossford, Halbeath and Saline, a twice weekly system of collection is in operation, and in the other Districts a daily service is provided.

The work of collecting and disposing of the refuse in all Districts is carried out by Contractors who are also responsible for the proper control of the coup and the cleaning of streets, surface water channels, gullies, etc. A considerable amount of time is spent in supervising the work of the Contractors and enforcing the proper fulfilment of conditions of contract.

I am not enamoured of the contract system of scavenging and in my opinion, it does not produce results which may be described as highly satisfactory. A change over to direct labour is, I think, long overdue, and with this in view, I prepared a scheme which involved the grouping together of four Special Districts and the purchase of a motor freighter which was to be worked with direct labour. It was intended that this should be the nucleus of a scheme to embrace all the Special Scavenging Districts in Dunfermline Area. I very much regret that the scheme was not approved, due, I think principally to the fact that it would have involved a slightly increased rate in certain Districts. The rates in some Scavenging Districts

are extremely low, but I am afraid that the ratepayers in these Districts will, in the not far distant future, require to be prepared to pay a higher price for this most necessary branch of the public services. There is ample room for improvement and this improvement cannot be procured without additional cost. The Department of Health are becoming increasingly insistent on a higher standard of cleansing and better control of refuse dumps, and I venture to predict that this will soon be enforced by legislation.

In all Districts, the refuse is disposed of by tipping on waste ground.

SANITARY CONVENIENCES.—In the villages of Wellwood, Donibristle, Fordell, Parkneuk, Milesmark, Gowkhall, Carnock, Cairneyhill, Hillend and St Davids, where drainage facilities are not available, pail privies or patent earth closets are in general use. Many of the houses in these villages, however, are scheduled as unfit and will be demolished when alternative accommodation has been provided.

As already mentioned, a Special Drainage District is to be formed at Wellwood, where the majority of the houses are owned by a Colliery Company, who for some considerable time, have had under consideration a scheme for reconstructing houses and providing them with modern sanitary conveniences when drainage facilities are available.

During the year, at the villages of Parkneuk, Milesmark, Cairneyhill and Hillend, modern sanitary fitments were installed in several houses which were previously provided with only pail privies. In the majority of these houses, extensive alterations were carried out with the aid of Grant under the Housing (Rural Workers) Acts.

WORKSHOPS AND FACTORIES.—Fifty-one visits of inspection were paid to factories and workshops. Contraventions observed were of a minor nature and were remedied by the occupiers of the premises when the customary intimation was made.

At Kincardine, part of a factory which has been disused for a few years, was reconditioned and installed with certain machinery for use in conjunction with another factory in Alloa. A complete new drainage system was laid and sufficient sanitary conveniences provided for the workers of each sex.

BURIAL GROUNDS.—At the burial grounds at Aberdour and Cairneyhill where Orders in Council are in force, four interments were carried out during the year. On each occasion the provisions of the Orders were observed.

An unusual situation arose in Cairneyhill where, in terms of the Closing Order, I had perforce to refuse burial on one occasion. In this case, the parents of the deceased were still alive, but a brother

was buried at Cairneyhill. As the Order makes no provision for the burial in the Churchyard of children whose parents are still alive, the interment could not be sanctioned and had to take place elsewhere. An occurrence such as this was apparently unforeseen when the Order was made but provision should be made for similar cases in any future Orders concerning the closure of Burial Grounds.

At Carnock, churchyard conditions are such that burials should now be restricted to certain individuals and proceedings for the closing of the churchyard as a burial ground have been instituted.

The other burial grounds in the Area continue to be conducted in a satisfactory manner.

HOUSING.—While what may be described as comparatively substantial progress towards the provision of new houses has been made during the year, one cannot review the present position with a great deal of composure or satisfaction. The progress referred to relates to the commencement of the erection of houses in certain districts, not, unfortunately to their completion. In some districts, notably Wellwood, Crossford, Saline, Crossgates, Kincardine and Hillend, commencement has not yet been made with the erection of any of the houses shown by the Survey to be required to abate overcrowding. At Wellwood, the delay is, of course, due to the lack of the necessary drainage facilities, and doubtless this applies to Hillend also, but at the other places mentioned, I confidently hoped to be able this year to report the commencement of work on at least a proportion of the houses required.

At Limekilns, twelve houses, the erection of which was commenced towards the end of 1936, were completed and are now occupied. At Parkneuk, 36 houses, also commenced during the year 1936, are not yet ready for occupation. The delay here was occasioned by circumstances outwith the control of the County Council.

During the year under review, plans were approved and work was commenced on the following schemes :—

High Valleyfield	68 houses
Comrie	40 „
North Queensferry	28 „
Blairhall	44 „

The erection of these houses is now progressing satisfactorily and many of them are nearing completion.

Plans were also approved for the erection of 48 houses at Halbeath and 4 at Aberdour, but by the end of the year, their erection had not been commenced.

HOUSING (RURAL WORKERS) ACTS, 1926 AND 1931.—19 sets of plans showing alterations and improvements to 23 dwelling-houses were submitted and approved during 1937. The total number of

houses renovated and modernised since the inception of the Council's Scheme of Assistance in terms of the Act was, up to the end of the year, 286.

CLEARANCE OR RE-DEVELOPMENT AREAS.—Twelve houses of the wooden bungalow type, situated at Parkneuk, have been represented as unfit. As the County Council are the owners of these, it was decided, in order to secure demolition under the Act, to pass a resolution declaring the area occupied by the twelve houses to be a Clearance Area, within the meaning of the Act of 1930.

OVERCROWDING.—It is now over two years since the survey of overcrowded houses, carried out in terms of the Housing (Scotland) Act, 1935, was completed. The survey revealed that, assuming a complete process of decanting could be carried out, 661 new houses were required for this area, in order to abate overcrowding and to replace unfit houses. Between the time of completion of the survey and end of 1937, a total of 260 Council houses had either been erected or were in course of erection. I should have been very pleased to have been in a position to chronicle better progress.

FOOD SUPPLY—MILK.—There are now, in Dunfermline Area, 75 Dairy Farms registered to accommodate 1,946 cows. At Drumcooper Farm, one dairy byre stalled to accommodate 30 cows together with appurtenant dairy wash-house and milk store were erected and registered during the year.

Following upon an outbreak of mammitis at a large registered dairy farm, the entire herd was disposed of. Subsequently the concrete floors of the byres were taken up and relaid and the premises were subjected to a very thorough cleansing and disinfection. A completely new herd has been built up and milk is now being produced under the Tuberculosis (Attested Herds) Scheme.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.—It is a peculiar fact, but nevertheless true, that a section of the public, whose interests one is endeavouring to protect, are prone to regard Sampling Officers as something undesirable or unnecessary. Remarks overheard from time to time in the execution of our duty, indicate that there appears to exist, in the minds of certain people, an impression that some form of persecution is being indulged in, and that sympathy requires to be extended to the supposedly unfortunate vendors. The public should clearly understand that Sampling Officers do not desire to "catch" vendors, that non-genuine samples cause them a great deal of extra work, and that no one is better pleased than they when samples are found to be genuine.

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS.—18 samples were taken in terms of the above Regulations. These consisted of the following:—Mince, 10; Sausage Meat, 1; Sausages, 7; and all were certified to be genuine.

FERTILISERS AND FEEDING STUFFS ACT, 1926.—In terms of the above Act samples of Bean Meal and Maize Meal were procured from a Mill near Charlestown. These were certified to be genuine.

SALE OF FOOD ORDER, 1921 ; MERCHANDISE MARKS ACT, 1926, AND ORDERS THEREUNDER ; PUBLIC HEALTH (IMPORTED FOOD) REGULATIONS AND AMENDING REGULATIONS.—The customary inspections of butchers' shops, grocers' and fruiterers' premises, etc., were carried out, particular attention being paid to labelling of articles specified in the various Orders, and minor contraventions were remedied when brought to the notice of the persons responsible.

The quantity of imported meat sold in the Area is small and the requirements with regard to labelling were observed.

STORAGE, ETC., OF FOOD FOR HUMAN CONSUMPTION.—There are no large foodstuffs manufacturies or stores in this Area.

In two instances, it was observed that ashes from bake houses were being deposited close to the bakery premises. These deposits were removed when the occupiers of the premises were requested to do so.

During an inspection of creamery premises, it was observed that part of the building, in which butter is prepared for sale, had direct communication with another part of the premises used for the storage of margarine. The requirements of Section 8 of the Food and Drugs Adulteration Act were brought to the notice of the proprietor with the result that the intervening door was boarded up so that the two sections of the premises have now no direct communication.

All bakehouses, none of which are large, were periodically inspected, and, considering the inadequacy of storage accommodation in many cases, a reasonably high standard of cleanliness is maintained.

The small shop situated in part of a dwelling-house continues in our midst. Many of these places are clean and well kept, but occasionally one encounters conditions which leave much to be desired.

Some vendors are obviously ignorant of the dangers of the house fly and no attempt is made to protect food stuffs from contamination by that pest. One observes shop windows in which confections and other edible material are exposed for sale, and in which flies appear to enjoy a veritable paradise. The house fly usually commences its life cycle in filth and is attracted by decaying organic matter throughout its short life. It alights on unprotected foodstuffs, carrying with it excrement and other filth on its feet and proboscis. If parents were fully cognisant of the revolting habits of the fly, they would ensure that they nor their children purchased sweets or any other edible material from premises in which the vendors obviously do not take the trouble to exterminate the flies or to adequately protect foodstuffs, etc., from contamination.

LOCHGELLY AREA—John S. E. Riddle, Sanitary Inspector.

WATER SUPPLIES.—Practically the whole of the Area is provided with an ample supply of good water from County Mains from Glenfarg or Glendevon Reservoirs. Some of the outlying farms, especially in Kinglassie Parish, are outwith the region served by the County mains but in nearly all cases there are gravitation supplies and one or two obtain a supply from Kirkcaldy Burgh main which passes through their farms.

The only group of houses in the Area not supplied from County mains are at Cluny Bridge. They are about half a mile from a main but as demolition orders have been served in respect of 12 out of the 18 houses here it is not likely that the main will be extended.

County mains were extended during the year to serve Housing Schemes at Dundonald, Lochore, Crosshill and Kinglassie.

All houses reconstructed under the Housing (Rural Workers) Acts are provided with inside water supplies.

A collecting tank was built and pipes laid to supply two farms in Kinglassie Parish.

DRAINAGE AND SEWAGE PURIFICATION.—The bulk of the population reside within the four Special Drainage Districts of Auchterderran, Lochore and Glencraig, Lumphinnans, and Kinglassie.

Outwith these districts two groups of houses have drainage facilities—one at Capledrae and the other adjoining Minto Colliery. At the others only waste and roof water has to be dealt with and this usually finds its way into a near hand ditch or into field drains. All houses, however, which have been newly erected or reconstructed have been provided with proper cesspools.

AUCHTERDERRAN SPECIAL DRAINAGE DISTRICT.—The extensive drainage system in this district has suffered in parts from underground workings and the main outfall is very flat. The sewers therefore require constant attention and portions have to be scraped and cleaned.

This the the only district with purification works but as reported last year these are at present out of order.

Four years ago, after a report by the County Engineer, the Local Committee recommended that considerable additions and extensions be carried out to meet the increase of sewage being dealt with but so far nothing has been done. It does not appear likely that Auchterderran will be linked up with the Thornton Scheme so I sincerely hope that the reconstruction of the works will be given early attention as new housing schemes greatly increase the amount of sewage to be dealt with and if overcrowding is to be abated, more and more houses will be required.

An extension of the sewers was carried out during the year to deal with the new Housing Scheme at Dundonald.

LOCHORE AND GLENCRAIG SPECIAL DRAINAGE DISTRICT.—There is an efficient system of sewers throughout this district but no purification works.

The main sewer, after it enters the ground taken off for the erection of works, is an open channel and the sewage passes over rough stones through four trenches before reaching the Fitty Burn. Solids are to a certain extent broken up but there is little or no purification.

At Lochore a considerable extension of 9-inch sewer was laid to serve the housing scheme in course of erection at Rosewell, and at North Glencraig a 7-inch sewer was laid from the main at the burnside through the Play Park to serve a housing scheme of 84 houses, the erection of which had just commenced.

The sewers have functioned satisfactorily. The only point giving trouble is where the sewer is reduced in size as it crosses the River Ore. This brings the storm overflow into action after a light rain and with another 152 new houses added it may bring the storm overflow into use too frequently.

LUMPHINNANS SPECIAL DRAINAGE DISTRICT.—With the exception of 20 houses at Zetland Place, the drainage from all the houses in this district is connected to main sewers. These sewers at a considerable distance from the village are connected to the Lochgelly Burgh Sewer.

A considerable portion of the main outfall which had suffered from underground workings was relaid two years ago and has given no trouble since.

KINGLASSIE SPECIAL DRAINAGE DISTRICT.—The position in this district is still the same—no proper system of sewers and what sewers there are discharge into the Lochty Burn quite near dwelling-houses.

I understand the provision of a sewage system here is bound up with the proposed sewer from Thornton to Leven which it would connect with. I think, however, that a proper system for the whole village, plans for which have been prepared, should be gone on with even if it had to be discharged into the Lochty Burn clear of the village until such time as it could be connected to the main sewer at Thornton.

At present any proprietors who wish to improve their property by the provision of water closets, etc., have to provide cesspools and if there was a proper system of sewers these could be done away with and other proprietors would be induced to bring their properties up to a modern standard.

New sewers were laid during the year to serve a further development of 44 houses in the County Housing Scheme.

The two main sewers taking the drainage from County houses, including those in course of erection, the public school and two or three private houses, discharge into septic tanks. The outfall from one of these tanks discharges into a ditch which joins the burn near the colliery and the other directly into the burn in front of a row of houses.

The rest of the sewers from the village join the Lochty Burn at different points.

SCAVENGING.—The four Special Scavenging Districts are similar in name and area to the Drainage Districts. These are also Special Lighting Districts under my charge and in three of them arrangements had to be made during the year for additional lighting in new streets and in the other the main street lighting was remodelled.

There is a population of over 18,000 in the four Special Districts and the work in all districts has increased greatly in recent years but has been overtaken without increase of staff. The arrangement and supervision of this work takes up a considerable portion of our time.

In two of the districts the scavenging work is carried out by direct labour and in all districts covered carts fitted with pneumatic tyres are in use.

As far as possible, controlled tipping is carried out at all the coups, the refuse being spread in layers of not more than four or five feet deep.

Outwith the Special Districts ashpits are in use which are emptied either by the owner or tenants and these appear to get fairly regular attention.

As mentioned in last Annual Report, Notices under Section 39 of the Public Health (Scotland) Act, 1897, were served on proprietors in Auchterderran, Lochore and Glencraig, and Lumphinnans Special Scavenging Districts calling for the repair of private streets. During the year the following work was carried out:—

Crosshill.—Roads adjoining Rosewell Rows belonging to the Wilsons & Clyde Coal Company remade by the Roads Department.

Lumphinnans.—Roads and footpaths belonging to the Fife Coal Company at Beveridge Place, Sligo Street, Mungall Street, and streets connecting same remade.

Auchterderran.—Road at rear of Double Block, Cardenden, remade and footpath laid in front. The roads serving Twelfth, Sixteenth, Seventeenth, Eighteenth, and Nineteenth Streets, and roads at ends of Twelfth to Sixteenth Streets have been resurfaced. Tarmacadam footpaths laid at Sixteenth, Seventeenth and Nineteenth Streets—all belonging to the Fife Coal Company.

Lochore.—Work of repairing the streets adjoining the Fife Coal Company's houses was commenced in October but was not completed at the end of the year.

I also reported in December on the condition of the two roads leading to the new Housing Scheme at Rosewell, Lochore, and it was agreed to serve Notices on the adjoining proprietors.

SANITARY CONVENIENCES.—Kinglassie is the only Special District where there are still a number of dry closets in use at the older houses but every year sees the number of these reduced and if a proper drainage system were provided I am satisfied that water closets and inside water supply would be provided to practically all the houses.

In Lumphinnans Special District all the houses are provided with inside water supply and water closets and in only a few cases does one closet serve two houses.

In Auchterderran, and Lochore and Glencraig Special Districts, a very few old houses have still dry closets but most of these houses are under demolition orders. All the other houses have inside water supplies and water closets to each house.

Of the houses outwith the Drainage Districts which still have dry closets, many are at the stage when it is doubtful if they are worth the expense which would be incurred to provide modern sanitary facilities.

Any reconstructions carried out are mainly with the purpose of providing good sculleries with modern conveniences. All houses reconstructed with a grant under the Housing (Rural Workers) Acts are provided with water supplies and water closets and in some cases with baths.

RIVERS POLLUTION.—As usual, a report was made on the disposal of pit water and effluent from coal washing plant. In one or two cases where water from coal washing plant was finding its way into any stream, the attention of the Coal Company concerned was called to the matter and steps taken to prevent any further pollution. In some cases the banks of settling ponds had to be heightened and where new ponds had been formed the effluent sometimes found its way into field drains but these soon choked up with silt.

During the year complaints were received from a Fishers' Association that the Lochty Burn was being polluted with washery effluent. Several visits at different times of the day were made to the colliery but difficulty was experienced in tracing the source of the pollution. It was ultimately discovered that some of the water was getting through the foot of the retaining bank and into field drains while some was travelling about 50 yards through a redd bing. A considerable amount of fine ashes were tipped on to the bank and this appears to have choked it as there has been no sign of pollution or any complaints since.

As mentioned in previous reports, the River Ore and its tributaries are polluted by crude sewage from the Special Districts and the Burgh of Lochgelly.

HOUSING.—I regret I cannot report an improvement in the housing conditions and work in connection with housing appears to be increasing even with the census finished nearly two years ago.

Only three new houses were occupied during the year. All were privately owned. One was occupied by the owner, and the other two were farm cottages built to replace condemned houses.

Plans were approved and work commenced on 140 houses at Dundonald and 80 at Glenraig, and work was in progress on 84 houses at Lochore, 68 at Crosshill and 44 at Kinglassie—a total of 416 houses, but no houses were occupied before the end of the year though some were nearing completion. At Lumphinnans, the worst overcrowded part of my district, no start has been made to erect additional houses but plans were in preparation at the end of the year for timber houses.

The housing problem appears to be getting worse and I feel sure that another census would reveal an increase of subletting in the Special Districts. Calls are received daily at the office and house from parties anxious to get accommodation, most of them tenants of sublet rooms. One can hardly believe that nine or ten years ago there were nearly 100 empty houses in Cardenden.

The taking of the Housing Census was in progress at the beginning of 1936 and during the two years 1936 and 1937 the total number of marriages registered in the district was 296. Of the total marriages registered possibly about 100 couples, where only the girl was resident in the district, would be taking up house elsewhere but against this number there are the men who were married outside the district and so not registered here but who work and will wish to reside in the district. So that for the two years since the census was taken there were between 250 and 300 newly married couples requiring houses. I wonder how many of them got a house of their own to start with and of those who had to go into a "room" how long will it be before they can get a house. Subtenants who call about houses tell me they have been anything up to eight years in sublet rooms.

A number of families have, of course, left the district but, even if they vacated a house, the number will be balanced by families who have come in from other places.

At the end of the year 56 condemned houses were still occupied and to replace these, abate the overcrowding as shown by the census figures and allow newly married couples to get houses, there will require to be a very considerable number of new houses erected.

During the year, Repair Notices in terms of Section 14 of the Housing (Scotland) Act, 1930, were served in respect of 31 houses,

only two of which have been repaired. With regard to eight of these houses, the owners applied for the substitution of a Demolition Order in place of the Repair Notice and this was granted.

Demolition Orders were served in respect of 62 houses including the eight mentioned above. After the service of a Section 16 Notice on one of two adjoining houses, an undertaking was accepted that the house would not be used for human occupation after the removal of the present tenant. At the end of the year only nine of these houses had been vacated.

A demolition order passed on a farm cottage in 1936 was cancelled to allow of the building being used as an implement shed. A new cottage was erected for the tenant.

HOUSING (RURAL WORKERS) ACTS, 1926-31.—The majority of farm servants' cottages have now been improved in this area with grants under the Act.

During the year 9 plans, submitted with applications for grants, were reported on. These covered 27 houses occupied by farm and other workers. In respect of one house occupied by the owner, the grant was not allowed but the improvements were carried out according to the plans.

The reconstruction of 14 houses was completed by the end of the year and with the exception of 9 houses the work on the others was in progress.

The improvements consisted of providing new or enlarging existing sculleries with inside water supplies, water closets, tubs, sinks and boilers, provision of larders and coal cellars, enlarging windows, renewing floors, strapping walls, overhauling roofs and generally bringing the houses up to a modern standard. The plans showed additional bedrooms to 10 houses and the provision of bathrooms with hot water systems to 21 houses.

The reconstruction of 3 houses approved in 1935 and 18 in 1936 were also completed during the year. Of these 21 houses, 9 had extra bedrooms provided and 8 had bathrooms in addition to sculleries, water supply, water closets, etc.

Of the 35 houses, the reconstruction of which was completed during the year, only in respect of 4 houses had Notices in terms of Section 14 of the Housing (Scotland) Act, 1930, been served.

Applications for grants were withdrawn in respect of three houses.

Two farm bothies were reconstructed and improved and provided with inside water supplies, etc.

FOOD SUPPLY—MILK.—As far as cubic space, lighting, ventilation and general structure, as required by the Dairy Byelaws, are concerned, nearly all the dairy premises are well up to the standard.

At 25 dairies drinking bowls are fitted in each stall in the dairy byres and 10 dairies have milking machines installed.

The limewashing of premises is regularly carried out and on the whole these are kept in a cleanly condition. The grooming of cows and the proper handling of the milk is receiving more attention but at some premises still more could be done.

No alterations on dairy premises were carried out during the year.

Two new certificates as dairymen and one as a purveyor of milk were issued. In each case it was merely a change of tenant.

There are 36 registered dairies—21 in Auchterderran Parish, 4 in Ballingry and 11 in Kinglassie. The total number of cows at last inspection was 901. Most of the dairymen retail their milk and in addition there are 14 Purveyors of milk retailing in the district.

Pasteurised milk is supplied by the Co-operative Societies and one or two milkmen are now bottling a small part of their milk but the bulk is still sold from cans.

WEMYSS AREA.—Robert J. Wigston, Sanitary Inspector.

WATER SUPPLIES—WEMYSS AREA.—As previously reported the water supply for the Wemyss Area is under the supervision and control of the Wemyss Water Trust, and the supply during the year was adequate for all requirements, domestic, industrial and agricultural.

KENNOWAY.—Kennoway, Bonnybank and Baintown are supplied from the Glenfarg Main by means of a water ram to two service tanks situated near Balgriebank Farm. Generally speaking the supply was satisfactory during the year, the additional storage tank which was erected overcoming the difficulty of inadequate storage previously complained of, but on two occasions I had complaints from Baintown about failure of the water supply, but upon investigation I found that the ram at Kennoway had temporarily been out of repair, which was promptly attended to.

SCOONIE PARISH.—The service for Scoonie Parish is chiefly from the Leven Burgh water supply, which has given every satisfaction.

BORELAND.—Boreland Special District is supplied direct from the Glenfarg scheme of the County Council of Fife.

DRAINAGE SYSTEMS—EAST WEMYSS, WEST WEMYSS, COALTOWN OF WEMYSS, ROSIE AND METHILHILL.—During the year considerable damage was done to several outfall sewers particularly during the storms in February. The outfall sewer from West Wemyss and Boreland was seriously damaged and were duly repaired at con-

siderable expense, while the outfall sewer from Rosie village and the Housing Scheme at Macduff Park was also seriously effected by the floods and owing to a defective pipe between the Railway and the Gas Works, the sewer was undermined and collapsed, necessitating the renewal of the sewer for a distance of from 16 to 20 yards.

All these sewers discharge direct into the Forth and no purification works are essential.

METHILHILL.—The drainage from Methilhill discharges direct into the river Leven but during the year alterations were made at the point of discharge, the pipe being taken across the river and carried further down stream.

KENNOWAY.—The Kennoway sewer as already reported discharges into the river Leven, and while one complaint was made regarding the flooding of one property in Kennoway, upon investigation no defect in the drain was discovered and it would appear that any obstruction must have been of a temporary nature.

SEWAGE PURIFICATION AND DISPOSAL.—As already stated in the above reports, there are no purification works, and sewers discharge direct either into the sea or into the River Leven.

SCAVENGING—EAST WEMYSS, WEST WEMYSS, COALTOWN OF WEMYSS, ROSIE AND METHILHILL.—The scavenging arrangements in the above Special Districts are as reported upon on previous occasions.

The refuse is now taken to the dump at Earlseat, which is kept in a satisfactory manner, being controlled in accordance with the regulations issued by the Department.

During the year a departure was made in that the East Wemyss Co-operative Society were asked to contribute towards the removal of their waste paper and clinker ashes from their ovens as trade refuse, and while the amount is not unreasonable, yet the precedent has been established that the Local Authority are not prepared to remove excessive amounts of trade refuse without payment.

KENNOWAY.—Kennoway refuse collection is carried out by contract, the refuse being used to fill up undulating and marshy ground at the Spats. The disposal here is also carried out on the principle of controlled tipping.

BORELAND.—The collection of refuse in this Special District is done by contract. By arrangement with Kirkcaldy Burgh the refuse is deposited at their tip near Gallatown.

STAR OF MARKINCH.—This village has not yet been formed into a special scavenging district but as it is definitely a rural area and the inhabitants seem to have little difficulty in disposing of the refuse

individually, no action has been taken to have it formed into a special scavenging district, and I have had no complaints of any nuisance from this source during the year.

SANITARY CONVENIENCES.—The work of providing sanitary conveniences within the Area has progressed satisfactorily with the exception of the Star of Markinch where there are no drainage facilities, but notwithstanding this handicap a considerable number of properties have been improved by the system of the septic tank treatment being put into force. In the other districts within the Area the installation of W. C.'s is being carried out in conjunction with further improvements to the properties which qualify for Grant under the Housing (Rural Workers) Acts. Improvements have been carried out under these Acts in respect of 18 houses.

During the year public conveniences for both sexes have been erected in the Special Districts of Methilhill and Kennoway.

Regarding ashpits the position is similar to that reported upon last year, the only area where there are ashpits in use being the Star of Markinch.

RIVERS POLLUTION—RIVER LEVEN.—Under the above heading the river Leven is still with us but the County Council are now tackling this question seriously, otherwise with the increasing number of Housing Schemes which discharge direct into the River Leven, it is difficult to visualise what the state of matters would be when the position is already desperate.

OFFENSIVE TRADES.—The Private Slaughter-house at East Wemyss, owned by the East Wemyss Co-operative Society Ltd., and the Oil Mills belonging to Messrs John Balfour & Co. Ltd., where manures and feeding stuffs are prepared, are the only premises which fall under the above heading. The premises in both cases are kept in a satisfactory manner.

HOUSING.—Regarding overcrowding of working class houses it is common knowledge that there is a very serious shortage within the area, but the scheme comprising 40 houses was completed at Kennoway which were all occupied by overcrowded families or families from condemned property.

At Macduff Park, East Wemyss, a scheme comprising 112 houses (12—5 Apartments, 52—4 Apartments and 48—3 Apartments) is in progress to relieve overcrowding and the re-housing of families from unfit property.

At Methilhill a start has been made with the erection of 108 houses also for the relief of overcrowding (36—3 Apartments, 56—4 Apartments, and 16—5 Apartments).

DEN BURN.—During the early Spring considerable flooding was caused by the Den Burn at The Square at East Wemyss, due to the

fact that owing to the change of currents, tremendous quantities of sea coal etc. were washed up at the mouth of the outlet pipe. To obviate this continual choking of the pipe it was extended a distance of 50 feet or thereby into the Forth, and since this work was completed, no flooding has taken place from that cause.

KIRKCALDY AREA—A. Stewart, Sanitary Inspector.

This report deals with the following parishes in Kirkcaldy Landward area :—Auchtertool, Burntisland, Dysart, Kinghorn, Kirkcaldy, Leslie and Markinch, and includes the transferred services in the burghs of Burntisland, Kinghorn, Leslie and Markinch in terms of the Local Government (Scotland) Act, 1929.

WATER SUPPLY.—The main sources of water supply for that part of Kirkcaldy District of Fife which comes under my jurisdiction are Glenfarg and the Wemyss Water Trust.

In the course of general inspections during the year, dwelling-houses without inside water supply were noted.

The only part of the area where there are no standwells in the street is the village of Thornton. All the houses here have an inside water supply. The other districts namely, Coaltown of Balgonie, Milton of Balgonie, Balcurvie and Woodside are to a certain extent supplied by standwells in the street. At Prinlaws where the supply used to be from standwells, there are now very few, owing to the introduction of inside water supply to the houses. During the year a number of houses at Woodside and Coaltown of Balgonie had inside water supply installed.

During the year the water supply was well maintained in all districts.

DRAINAGE.—There are four Special Drainage Districts in this area :—Thornton, Windygates and Balcurvie, Coaltown of Balgonie and Gray Park.

COALTOWN OF BALGONIE DRAINAGE.—The drainage system of this village is now working satisfactorily but as reported by me last year, the outlet is very unsatisfactory owing to the effluent from the septic tanks running openly into the rivers Leven and Lochty and in dry weather causing a disagreeable nuisance in the surrounding vicinity. I am afraid that during the summer of next year, the nuisance will be considerably increased at the river Leven end owing to the large number of new houses that will be occupied unless the proposed new sewer is hurried on before the dry weather comes.

MILTON OF BALGONIE DRAINAGE.—In this village there is no improvement in the drainage conditions. More houses have been built and the drainage led to septic tanks and from these to the river

Leven. None of the existing houses can be properly renovated and sanitary conveniences installed for lack of a proper drainage system and as this village is affected, the same as Coaltown was, I am of the opinion that steps should be taken more urgently by the responsible authorities to have a drainage system installed. Then the old houses which are fit for habitation could be brought up to the standard of houses to be found in other villages.

THORNTON DRAINAGE.—Conditions are similar to last year although not so much flooding has taken place. No extra houses have been added to the number of last year. During one wet spell, the pumps broke down but we were fortunate in getting them repaired before any serious trouble was experienced. The new drainage system recently laid, which will be connected up to the new main sewer when it is put in, has its outfall into the river Lochty.

WOODSIDE DRAINAGE.—The new drainage system was laid during the year, and as it connects up the whole village as well as the new housing scheme, some of the proprietors have had their septic tanks connected up and others have had W. C.'s and sculleries built. I expect that when the weather permits all of the houses in the village, with the exception of those condemned, will contain all the necessary sanitary conveniences. This new drainage system is laid with a run from south to north and along the Bighty burn to a septic tank.

WINDYGATES AND BALCURVIE DRAINAGE.—As stated by me on previous occasions, the conditions are far from satisfactory owing to the outlet being direct into the river Leven. There is at present a new housing scheme being built by the County Council but at the end of the year none were ready for occupation. When the whole scheme is finished and the houses occupied, I am afraid the nuisance will be greatly increased at the river Leven outfall.

GRAY PARK DRAINAGE.—During the year no trouble has been experienced here as I have watched for a recurrence of the trouble of last year, owing to the tanks becoming full of sludge. The tanks are examined periodically.

SCAVENGING.—There are six Special Scavenging Districts under my supervision. These are :—Thornton, Windygates and Balcurvie, Milton of Balgonie, Woodside, Gray Park and Coaltown of Balgonie.

The work of refuse collection is let by yearly contract and the contractors see that all ash bins are emptied at an early hour in the morning. At Gray Park the contractor also attends to the sweeping of the village.

In each case, the refuse is disposed of by tipping either on waste ground or into an old quarry.

At Thornton the depth of the face of the coup has been greatly decreased. I have it kept clean and tidy by a man who is constantly there. In each of the Special Districts, the scavenging has been of quite a satisfactory standard.

At Prinlaws, the cleansing of the village is undertaken by the proprietors, Messrs Fergus & Co.

At Binnend, Burntisland, where there are practically no tenants during the winter but where every house is filled during the summer, the scavenging is undertaken by the proprietors, The Whinnyhall Estate Company, who employ a man to look after the cleansing of the village.

MEADOWFIELD, BURNTISLAND.—The refuse from 20 houses belonging to Fife County Council is removed twice weekly by Burntisland Burgh who charge £1 per annum per house.

RIVERS POLLUTION.—With reference to the pollution of rivers in the district, I am pleased to state that during the year no complaints were received from those fishing in the rivers regarding coal washer water being allowed to run into them.

HOUSING.—I am sorry to report again that the district was for another year practically without a new house being occupied. During 1936 no houses were built by the County Council and in 1937, there were 8 at Burntisland, 8 at Gray Park, 28 at Windygates, 22 at Milton of Balgonie, and 44 at Coaltown of Balgonie, all nearly completed. At Chapel 20 houses are well on the way, and at Woodside, a start has been made with the erection of 40 houses allocated to that district, and also at Thornton a start has been made with the 40 houses for that district. At 31st December, 1937, there were only 9 of all the above houses occupied by families from overcrowded dwellings. This I consider to be a bad state of affairs—only 9 houses available in the district for over two years—when there has been such an outcry against overcrowding and subletting, both of which are greatly on the increase over all the district. In respect of subletting of rooms, I cannot see how it can be avoided as during the year many young people got married, and only rooms were available. In these rooms some of the young people have to reside for years. The family is always increasing; there is no place to keep pots, pans, brushes, and coals unless underneath the bed. As is sometimes the case, the house is one of 2 apartments, not overcrowded before the room was sublet, but now grossly overcrowded. I do not think this state of overcrowding will be overcome, until houses are built which will be suitable for all classes and according to the needs of the people in general.

HOUSING (RURAL WORKERS) ACTS, 1926-31.—Inspections of houses occupied by rural workers and others in the same economic position were carried out during the year. Plans were submitted in

terms of the County Scheme of Assistance in force under the above Acts for alterations and additions to 43 houses. The alterations carried out consisted of additions of sculleries, larders, coal cellars, the provision of bathrooms and inside water closets, increased lighting and ventilation, strapping and lathing of solid walls, replacing of brick or concrete floors with wooden floors and proper sub-floor ventilation, etc.

MILK AND DAIRIES (SCOTLAND) ACT, 1914.—There are 66 registered dairies in my area, 4 of these being in burghs viz. Kinghorn 1, Burntisland 2, and Leslie 1. The dairies are registered for 1714 cows. During the year, 3 dairies changed hands namely, Longloch, Orrock and Banchory. One new dairy at Cameron was built and registered for 40 cows, one was taken off register—no cows being kept.

At Bogleys, Mid Strathore and Mackie's Mill a provisional registration was withdrawn and full registration was granted after all the necessary repairs were done and the byres made to conform with the County Council Dairy Byelaws. Four registrations were granted for shops to retail milk.

ST ANDREWS AREA—R. Just, Sanitary Inspector.

WATER SUPPLY.—There are four Special Water Supply Districts, viz. :—Leuchars, Guardbridge, Dunino and Lathones.

LEUCHARS SPECIAL WATER DISTRICT.—The water supply for the Village of Leuchars is obtained from the "Lady Well" and is raised by mechanical aid to a reservoir from which it gravitates to the Village. There has been no scarcity of water, and throughout the year the pumping plant and works generally have been efficiently maintained. Owing to the increasing demand for water and to the number of hours necessary to keep the pumps working to maintain the supply an assistant was appointed to the Water Officer in November month. No complaints have been received throughout the year and an efficient supply of water has been maintained.

GUARDBRIDGE SPECIAL WATER DISTRICT.—Within the year under review there was an ample supply of water for Guardbridge, and unless for 4 days during the month of July there was a continuous overflow from the fountainhead. The situation, however, is not a satisfactory one and should a dry summer occur a shortage of water will certainly arise. The demand for water increases annually owing to the building of additional houses and to the introduction of sanitary fitments into existing houses. It seems that the solution of the water question at Guardbridge must await the introduction of the Regional Water Scheme. The reservoir, filterbeds and works generally have been maintained in a satisfactory condition throughout the year.

DUNINO SPECIAL WATER DISTRICT.—This water supply system has been described in previous reports. Owing to the normal rainfall the supply of water at fountainhead has been sufficient, but owing to the smallness of pipe lines and to corrosion there is lack of pressure and want of water during the day time at the higher places such as Woodend and Pittendriech Cottages. Otherwise, throughout the year this supply has been sufficient. Owing to the general increasing consumpt of water and for the reasons given above in a normal year this water supply is sufficient but in a dry year there is insufficient water for the requirements of the district.

LATHONES SPECIAL WATER DISTRICT.—This water supply has been sufficient throughout the year and regular attention has been given to scouring of pipes and maintenance generally.

DRAINAGE—GUARDBRIDGE SPECIAL DRAINAGE DISTRICT.—Reference was made in last year's Annual Report to the formation of a Special Drainage District for the Village of Guardbridge, and during the year the work of laying the new sewers was carried out. No complaints have been received since completion of the work and the new sewers are functioning satisfactorily. The sewers discharge well out into the water at the confluence of the Rivers Eden and Moutry thus obviating, as in former times, the contamination of the foreshore with resultant smells at low tide. A considerable improvement has, therefore, been effected by the formation of this Drainage District and by the introduction of an improved sewerage system.

LEUCHARS AND WORMIT SPECIAL DRAINAGE DISTRICTS.—In the Leuchars and Newton Park, Wormit, Special Drainage Districts no extensions have been carried out, and periodic inspections made throughout the year found the sewers to be satisfactorily maintained and in running order. Regular attention has been given to flushing of the sewers.

Reference has been made in previous reports to the need for drainage at Balmullo. There is a primitive drain running along the north side of the Cupar Road and discharging into burn. During recent years several of the householders have introduced sanitary fitments into their houses discharging into cesspools and thence to ditches or sumps. Chokages have occurred on the drain in Cupar Road, and owing to its defective construction to effect a satisfactory clearance is an almost impossible task.

At a meeting of the Local Committee held on 16th November, 1936, the question of the provision of a water supply and drainage scheme for Hotel and several houses at St Michaels was under consideration. Estimates of probable expenditure were submitted by the County Engineer, but owing to the high costs both schemes were deferred meantime. A water supply could be obtained from

the Leuchars Special District as the main water pipe now extends as far north as the Castle Farm Road. It is highly desirable that both a water supply and drainage scheme be provided for this Area.

MILK AND DAIRIES.—The dairy premises in the district are of a fairly good standard and are in close compliance with the regulations with few exceptions. Inspections are carried out from time to time and those premises have, on the whole, been maintained in a manner giving rise to no serious complaint.

A continual effort is made to improve the methods employed at the dairies for the production of a wholesome and clean milk supply for the public. Within the year under review a number of dairymen have introduced milking machines. It is gratifying to be able to record that applications in terms of the Milk (Special Designations) Order (Scotland), 1936, for a licence to sell designated milk are increasing.

Articles 4 to 14 of the Milk and Dairies (Scotland) Order, 1934, are being fairly well complied with in the District.

ANSTRUTHER AREA—J. Ross, Sanitary Inspector.

WATER SUPPLIES.—Quality and sufficiency.

There are three Special Water Districts in the Anstruther Area of the County of Fife. These are, Colinsburgh; Largo (including Upper and Lower Largo); and Largoward.

The position of those Districts with regard to quality and sufficiency of water supply is :—

COLINSBURGH.—With the exception of the complaint made in May last dealing with an acute shortage of water at the West End of the Village, and of the discovery of leakage in a domestic service pipe, there has been no other complaint lodged during the year. It will be remembered, in last year's Report, I furnished particulars of the cause of this complaint and also of its remedy.

The absence of any complaint regarding this supply must not be taken to indicate that everything connected with it is satisfactory. This is far from being so. For some time past it has been generally agreed that the condition of the distributing mains are not satisfactory and that they must be very badly corroded. In consequence of this their effective diameter is considerably reduced and they are not carrying their full quota of water. That this must be the case has been, I think, amply borne out by the cause for the reduced pressure with resultant shortage of supply that occurred in the West End of the Village last May. Further evidence, in support of the condition of the existing mains, has recently been obtained. By turning on the tap from the new 3-inch main recently laid along the

street at the site of the Housing Scheme the pressures from taps off the old mains in the vicinity is so adversely affected as to be practically negligible. The draw off from the houses in the Housing Scheme will be fairly considerable, and have a much greater effect on the existing mains than the result produced by one tap, so that the supply in other parts of the Village will, presumably, be quite inadequate. To overcome this condition, fortunately foreseen before actual condition revealed it, the County Engineer has submitted a report and estimate on the laying of new 4-inch mains throughout the Village, and the execution of this work will, it is hoped, be completed before the erection of the new houses at the Housing Scheme Site.

LARGO—Including Upper Largo and Lower Largo.—This District is supplied with its water from a reservoir a few miles distant, and which is fed by two burns. For some years past it has been stated that the capacity of the reservoir is not adequate to meet the demands made upon it during the summer months when the population of the Villages is very largely augmented by visitors.

It may be observed that :—

- (a) Delivery of water was inadequate to maintain the District during the past summer, since Leven Supply had to supplement it ;
- (b) that this was not the result of shortage of water, since the supply in the reservoir was, owing to rainfall, adequate, and
- (c) subsequent to scraping operations, on the water main leading to the break pressure tank, delivery had increased by only 28,800 gallons per day.

This margin is, in the opinion of the County Engineer, so near the mark that a new delivery pipe is desirable from the filters to the cross roads above Blindwells.

LARGOWARD.—Early in the year complaints were received regarding scarcity of water supply in some properties. This District has in the past suffered from lack of an adequate water supply, and intermittent shutting off of the supply in parts of the Village from time to time was resorted to so that each part might have its share of the water available. The arrangements were far from satisfactory. To overcome this disadvantage and to meet the need for a satisfactory source of supply, from point of view of storage and distribution, a new storage tank was provided and a new system of mains laid throughout the Village during the past year. The storage accommodation now provided is approximately estimated to be 300,000 gallons, and with the new system of distribution very considerable improvements have been effected. Since completion of this work the entire Village has an adequate supply of water, and properties which previously had an exceedingly poor and often quite a negligible supply now have a satisfactory supply. No complaints

were received during the period of the year subsequent to which the new system was in operation.

KILCONQUHAR.—The supply to this Village has, in previous reports, been fully described. No alterations have been made to it and no complaints were received regarding it during the year. The supply is so poor in pressure, however, that it cannot be introduced to sanitary fitments in the houses. It is unlikely that improvements will be made in the local supply since the district will presumably benefit by the Regional Water Scheme if, and when, it materialises.

BARNYARDS.—The supply to this hamlet has undergone no change in the past year. The nature of the supply has previously been commented upon.

CARNBEE.—In previous reports I referred to the very unsatisfactory condition of the supply to the school, school-house, and neighbouring properties. No improvement has been made during the year. The position has been the subject of much legal investigation but the supply has not benefited in any manner from these deliberations. Official complaint was first made to me on the 11th July, 1935, in a letter received from the Schoolmaster. In this letter he stated that the complaint was one of many years standing but had always hoped that something would be done about it. The Analyst in his report on a sample of this water drawn from a tap in the schoolhouse states 'the water contains an excessive amount of suspended matter a number of thread worms were also observed,' and that 'in my opinion the chemical analysis is unsatisfactory and in its present condition unfit for drinking and general domestic purposes.'

A scour valve was fitted to the main in the vicinity of the Schoolhouse towards the end of last year by the Joint Water Committee, but this, apart from permitting the excessive amount of sediment which might collect to be removed, will not materially have any influence on the quality of the supply.

The execution of the necessary measures to make this supply wholesome and fit for domestic use are long overdue, and steps should now be taken to have them carried out, and this complaint removed.

SEWAGE PURIFICATION AND DISPOSAL.—Methods and efficiency.

COLINSBURGH.—There is no system of purification of the sewage prior to its disposal in operation at this District. Disposal of the sewage is effected by its direct discharge, in its crude state, into a stream from a 12-inch outfall sewer at a point about 1,150 feet south of the main street in the Village. Arrangements have recently been completed for cleaning out this stream—a contractor's offer having been accepted for the work. This work has not been done

for the past few years. The system of disposal cannot be considered satisfactory, and, while no complaint has been made regarding it, the conditions will not be improved by the additional loads to be carried by the sewers from the houses in the Housing Scheme—all of which will be provided with modern sanitary fitments.

LARGO.—The sewers from Upper Largo connect with the sewers at the East End of Lower Largo and disposal is effected by direct discharge into the sea from various outfall sewers.

In July complaint was made about the insanitary conditions at the Harbour, Lower Largo, to the County Clerk. This complaint dealt with the objectionable stink from the harbour prevailing during sunshine, dull days, and at night when the tide was out; that it was so offensive as to cause doubts of it being entirely due to decaying seaweed; and that the effluent from the sewers, it was alleged, may contribute to it.

Consideration of the County Engineer's proposals for dealing with the unsatisfactory conditions at the foreshore from the Local Authority's sewer at Drum Park there, are meantime taking place. These proposals deal with extending this sewer in a south-easterly direction to a point further out into the sea where the outlet will be submerged at all tides.

SCAVENGING—Methods and Efficiency—Disposal of Refuse.

Methods and Efficiency.—There is only one Special Scavenging District in the Anstruther Area—Largo, which comprises, Lundin Links, Lundin Mill, Lower Largo and Upper Largo. A contract is entered into each year (15th May) for collection and disposal of household refuse. The collection is made daily by the contractor with his own motor vehicle. The system has worked satisfactorily throughout the year and no complaints were received regarding it.

Disposal of Refuse.—The refuse, subsequent to collection, is conveyed by the contractor's motor vehicle, to the refuse depot where it is deposited in layers. Papers, etc., are removed and burned; tins, etc., are beaten flat, or filled in with refuse; and the depot blinded over from time to time. Poisoned baits are put down upon occasion in order to prevent the depot becoming a harbour for vermin. There was no complaint lodged during the year regarding the depot or the system of disposal of the refuse.

RIVERS POLLUTION—Presence or absence, nature and sources.—If one excludes the small water course into which the sewage from the Village of Colinsburgh discharges there are no other water courses, in the area, which are subjected to pollution.

SCHOOLS.—In last year's Report further attention was directed to what I consider are defects in the Schools in the Area, in the hope that steps towards their remedy might be taken. Unfortunately

little or nothing has been done. Considering that for years past reference was made in my Annual Reports to these defects without any improvement one begins to wonder if there is any purpose to be served and objective to be reached in calling for these Annual Reports, or if they are not just so much more 'red tape.'

MISCELLANEOUS.—Any other matters calling for comment.

The position regarding R. Raeburn and his house in the Village of Largoward, reference to which was made in last year's Report, is just the same, both house and man, being in extremely filthy states. All efforts to improve matters by the Medical Officer, the Police, the Public Assistance Officers and myself have completely failed to make any lasting impression. Prolonged neglect of himself and his property has so robbed him of any power or character to effect improvements and sheer laziness prevails. The only solution is his removal to an Institution where he would be given attention, but all attempts to persuade him in this course have proved unsuccessful. His house is one, upon which a Section 16 Notice will ultimately be served—when the Largoward Housing Scheme is completed—and by that measure it may be possible to bring pressure upon him to remove to an Institution. At present, however, there appears, unfortunately, no steps which can be taken to improve conditions.

HOUSING.—Throughout the year 107 dwelling-houses were inspected in addition to numerous visits of inspection made to dwelling-houses undergoing reconstruction or repairs. Of these 107 dwelling-houses, many were in a state so dangerous or injurious to health as to be unfit for human habitation and the action taken respecting them is recorded in a subsequent part of this Report.

SUFFICIENCY OF WORKING-CLASS HOUSES.—The position regarding the sufficiency of working-class houses is in all respects practically similar to that recorded in the previous year's report.

HOUSING (RURAL WORKERS) ACTS, 1926-31.—It is to be regretted there occurred throughout the past year a very marked falling off in the number of applications dealt with in terms of these Acts—a situation which appears to result from the increased costs of building materials, etc. Last year plans involving 14 houses were submitted and approved. This is 52 less than the previous year when 66 plans received approval. Of these 14 houses, 9 have been completely reconditioned; 4 are in the tradesmen's hands; and the remaining one has not, so far, had anything done to it. This is due to the difficulty which the tenant has in obtaining alternative accommodation so that the works on the house, which are in this case fairly considerable, may be put in hand.

Houses reconditioned in terms of the Council's Scheme under these Acts are brought into line with modern standards. Internal

water supplies, and sanitary fitments comprising, usually, sinks, tubs, wash-boilers, and water closets are provided; wood floors, adequately under ventilated are required in all habitable apartments; glass areas of windows in habitable rooms to be equal, at least, to 1/10th the floor space of the apartment; dampness eliminated from walls, etc., ladders, press accommodation; coal stores, and ashpits are also required; and, in general the whole structure thoroughly overhauled—roofs, rhones, and conductors, repaired; masonry repointed; ground excavated to below floor levels, etc., etc.

That these improvements were, in previous years, comparatively costly will readily be understood, but, being now considerably more so, together with the Grant having been reduced from £100 to £80 unless certain defined conditions are met—increase in floor space of at least 110 square feet—and baths with hot water supplies laid on are now called for, it is not surprising that the improving of houses under these Acts should have suffered a check, and one which has, at present, every indication of continuing until costs of materials are more favourable.

When Local Authorities themselves, in some instances, have held up certain of their undertakings, until more favourable conditions prevail, it is not surprising that private individuals should be found following the same path. I do not suggest that such action by a Local Authority has resulted in it being followed by the individual. I do not believe such action to have had that result. The one is not the 'cause' and the other the 'effect' but rather both are 'effects' from the same 'cause'—the cause being increased costs of materials.

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 as fully described in former Reports, and no change has taken place in the year under review.

BALMBLAE, FALKLAND SPECIAL WATER DISTRICT.—The special service of water to the inhabitants of this area comprising thirty dwelling-houses is by a pipe connected to one street pillar well. The Town Council of Falkland who provide the supply are paid £8 per annum by the County Council.

KETTLE SPECIAL WATER DISTRICT.—The gravitation supply of water introduced into this Special District in the year 1908 and augmented in 1922, serves the needs of four villages, viz. :—Kettle, Kettlebridge, Balmalcolm and Newton of Falkland. The supply is abundant and is stored in an underground reservoir of 120,000 gallons capacity, located in the area " Balreavie Den " adjacent to the town of Falkland.

The whole of the works are in a good state of repair and no defects occurred during the year under review. The supply was plentiful and of good quality and on no occasion was it found necessary to restrict supply to consumers.

DUNSHELT SPECIAL WATER DISTRICT.—Reconditioning of dwelling-houses in this village goes on apace since it was provided with a new gravitation supply of water on July 2nd, 1932, and in every case, water supply and sanitary fitments are being installed.

The gravitation water supply to this village though unfiltered is pure and abundant and much appreciated by the inhabitants, while apart from minor repairs to the pillar wells, little trouble or expense has been experienced in maintenance.

Special Water Districts.

SPRINGFIELD, CUPAR MUIR AND CERES.—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 yet been agreed upon.

A regional scheme of furnishing an unfailing supply of water from Glendevon, by the County Council, is to be proceeded with which will provide a supply to Cupar Muir, Springfield and Ceres Villages, and will also augment many other schemes which may be affected during a spell of extreme drought.

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.

GATESIDE.—This village has now been included in the Special Water Supply District of Strathmiglo and new mains have been laid throughout the village. Improvements to existing dwelling-houses and provision of new houses may now be proceeded with, which formerly were impeded through want of a sufficiency of water supply.

Special Drainage Districts.

At present there are six Special Drainage Districts in Cupar Area, viz. :—Freuchie, Strathmiglo, Kingskettle, Springfield, Newton of Falkland and Balmblae. In one village only, however, is there a completed system of sewers and sewage purification works—Freuchie.

As noted in a former report, an instalment of a new system of sewerage carried out at Strathmiglo is now to become part of a completed sewage system which is to be carried out during the current year.

Kettle District was formed some years ago, but as yet there are no public sewers in the village.

In Newton of Falkland the conditions are similar to those in Kettle and we are still receiving complaints of offensive odours arising from the small stream into which the overflow of all private systems of sewage disposal is discharged. With the construction of new County Houses in the near future, this complaint is to be remedied by the provision of a branch sewer.

The conditions at Balmblae are unchanged and there is little hope of anything being done there as the County Council proposes to accommodate the families from the unfit houses, which comprise all but four of the total number in the village at Newton of Falkland. This proposal, however, should strengthen the claim for something being done at Newton of Falkland.

Springfield Special Drainage District was formed some years ago but in the absence of a gravitation water supply, relatively few of the houses in the village are equipped with modern sanitary fitments and the claim for a sewerage system is not justified at present.

The complete system at Freuchie continues to operate satisfactorily.

In Dunshelt village where rapid progress in reconditioning of houses is being made the need for a sewage system is now urgent as the only means of disposal of sewage meantime is by irrigation into the soil which fortunately is of a sandy nature.

Scavenging and Nuisances.

There are now nine Special Scavenging Districts in Cupar Area, viz. :—Strathmiglo ; Springfield ; Freuchie ; Newton of Falkland ; Kettle ; Balmblae ; Pitlessie ; Ceres and Den of Lindores. In the latter, owing to the low rateable value of the district, no arrangements have yet been made for the collection and removal of refuse, as the tentative offers for this work were equivalent to a rate of 2/9 in the £.

The work in Strathmiglo, Freuchie and Newton of Falkland is carried out by contract with the co-operation of the Local Scavenger, whereas the work is entirely done by contract in the villages of Kettle, Balmblae, Pitlessie, Springfield and Ceres.

With exception of minor complaints, the cleansing of these Special Districts under my supervision has been satisfactorily done, including attention paid to disposal of refuse in various tooms and general precautions taken to destroy vermin.

Seasonal Workers.

Under the new County Council Byelaws forty-one visits were made regarding housing conditions of potato workers, harvesters, fruit pickers, etc.

With three exceptions where farmers have specially constructed timber hutments, workers are accommodated in empty bothies, granaries and lofts.

When arrangements were made in accordance with Byelaws for workers' accommodation the conditions were both reasonable and comfortable for both sexes.

Most of the trouble given us is caused by the habits of the workers themselves and their view of the standard of cleanliness to be observed in keeping premises clean and orderly, also the latrines, but with these difficulties, we obtain much assistance from the foreman, who generally has charge of a squad.

Ten notices were sent to farmers, directing attention to inadequacy of premises for number of workers to be housed and for essential repairs to premises, consequently, fewer workers were sent and repairs asked for were generally complied with.

While difficulty is still experienced in getting farmers to realise their obligation to make premises allocated for accommodation of potato workers conform to Byelaws, much better results are now being obtained than formerly.

Dairies, Cowsheds and Milkshops.

At the beginning of the year there were 63 registered milk sellers on the register of dairies, 53 of which are cowkeepers in the County Area and 10 in the Burghs. Twenty-five persons are registered to sell sterilised milk in sealed bottles only and 2 to retail "Certified Milk" under the Milk (Special Designations) Order (Scotland), 1930.

Considerable improvement was made on many dairy premises, and it can be said that dairymen now indicate a much greater interest in systematic cleanliness, both as regards premises and stock in an effort to produce and forward to the public a clean milk supply.

Housing (Rural Workers) Acts, 1926 and 1931.

The following is a synopsis of the number of houses improved in terms of the Housing (Rural Workers) Act Scheme of grants since its commencement in 1928 :—

Year.	Received.	No. of Applications.			No. of Houses.
		Approved.	Disapproved.	Withdrawn.	
1928	11	7	4	—	15
1929	28	27	1	—	28
1930	29	26	3	—	72
1931	28	25	3	—	68
1932	42	39	3	—	81
1933	31	26	5	—	52
1934	63	58	5	—	97
1935	67	65	2	—	112
1936	58	54	4	—	103
1937	52	44	5	3	77
	409	371	35	3	705

From the above list of houses reconditioned it can be seen that the Housing (Rural Workers) Act Scheme is being widely taken advantage of by owners of property scattered throughout the area. The owners are quick to realise the value of this Scheme and the advisability of having their properties brought up to standard. The Scheme does not only allow of farm or rural cottage improvements but encompasses improvements to houses in the various villages provided the economic position of the occupant is on a parallel with that of an agricultural worker. While the County Council is pressing owners to modernise their property it is also bringing to their notice the terms of this grant scheme which allows, of course, the owner to carry out more extensive and complete improvements than he could otherwise have done had no grant been awaiting him.

Before improvements are started on some of the houses it would seem to an onlooker that it was hardly worth beginning to, but when the improvements are completed and the house provided with wood floors, plastered walls, additional lighting, together with internal sanitary fitments, the expenditure involved is indeed entirely justifiable.

Housing.

The total number of houses erected by the Local Authority in this area up till the end of the year for the re-housing of persons displaced from insanitary dwellings under the Housing (Scotland) Act, 1930, was 46. Of this number 16 three-apartment dwellings were completed in September of last year in the village of Strathmiglo, making a total of 28 in addition to the undernoted formerly completed in villages where there was available water supply and

drainage facilities, viz.:—Kingskettle—6; Dunshelt—4; Newton of Falkland—4; and Cupar Muir—4.

The demolition and closure of insanitary houses throughout the district has disposed of many cases of overcrowding and the elimination of the unfit dwelling is also having a beneficial effect on the question of houses without proper domestic and sanitary conveniences, as almost all the properties closed had inadequate water closet accommodation, and many of the dwellings had no sink or water supply inside.

Some laxity was observed by owners in clearing away properties dealt with by demolition orders, from which all the tenants had been displaced, but as a result of pressure, these houses have now been demolished, the remainder, having good sound walls and principally of the cottage type, were either entirely reconditioned by assistance of grant under the Housing (Rural Workers) Acts, 1926-31, by the owners themselves or, where owner failed to demolish or renovate, endeavour was made to find a purchaser to acquire the property at low value and carry out the work of restoring the dwellings to modern standard. By this means many well-built structures have been converted into modern cottage dwellings commanding good sites, nice gardens and relative privacy.

As mentioned in a former Report, 543 or 14·75 per cent. of the houses in the district were found to be overcrowded and 361 new houses were required as the minimum accommodation necessary to abate this evil.

Since large tracts of the area are without proper gravitation water supplies or suitable drainage, we were directed to confine our recommendations for new houses to the villages and districts where these exist. Acting on these lines the figures were scrutinised and the following set forth as the minimum requirements for the Villages and Special Water Districts—112 houses.

Beyond examining and reporting on type plans, sites and proposed lines of drainage, etc., there are, as yet, no houses built in fulfilment of the programme.

781	1	21	24	740	Total
19	0	0	0	19	Gowdbenburgh Burgh
5	0	0	0	5	Bentn Area
27	0	0	21	27	Ilke Area
27	0	0	21	27	Burghs in Dunfermline
74	0	0	74	74	Penicuik Burgh
13	0	0	13	13	Lochelly Burgh
81	0	0	81	81	Lochelly Area
88	0	0	88	88	Area
45	0	0	45	45	Burghs in Wemyss
97	0	0	97	97	Wemyss Area
12	0	0	12	12	Burghs in Kirkcaldy
75	0	0	75	75	Kirkcaldy Area
12	0	0	12	12	Area
75	0	0	75	75	Burghs in St Andrews
781	1	21	24	740	Total

Sale of Food and Drugs Acts.

Seven hundred and sixty-one samples were collected during 1937 by the County Sampling Officers, under my direction as Chief Sampling Officer, and analysed by the County Analyst. Of these, seven hundred and forty were official and twenty-one were test samples.

On analysis, twenty-four official samples and one test sample 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, 12 ; Skimmed Milk, 1 ; Mince, 4 ; Whisky, 4 ; Rum, 2 ; Sausagemeat, 1.

Of the vendors of the twenty-four adulterated official samples, twenty-one were fined in sums ranging from £2 to 10/-, involving in all a sum of £31 10/-. One vendor was found not guilty, while in two cases no proceedings were taken.

Two contraventions of Section 16 (5) of the Food and Drugs (Adulteration) Act, 1928, occurred. No proceedings were taken.

A contravention of Section 35 of the Food and Drugs (Adulteration) Act, 1928, occurred. The vendor was fined £1.

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	58	1	4	1	62
Burghs in Cupar Area	89	7	7	0	96
Anstruther Area ...	6	0	0	0	6
Burghs in Anstruther Area	67	0	0	0	67
St Andrews Area ...	4	0	0	0	4
Burghs in St Andrews Area	75	2	10	0	85
Kirkcaldy Area ...	12	2	0	0	12
Burghs in Kirkcaldy Area	97	5	0	0	97
Wemyss Area ...	45	0	0	0	45
Burghs in Wemyss Area	68	4	0	0	68
Lochgelly Area ...	81	0	0	0	81
Lochgelly Burgh ...	13	0	0	0	13
Dunfermline Area ...	74	1	0	0	74
Burghs in Dunfermline Area	27	2	0	0	27
Beath Area	5	0	0	0	5
Cowdenbeath Burgh	19	0	0	0	19
Total	740	24	21	1	761

Tables of Samples and Results of their Analyses.

CUPAR AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total
Sweet Milk ...	18	1	19
Acid, Tartaric, ...	1	—	1
Butter, Salt, ...	2	—	2
Cinnamon, ...	1	—	1
Coffee, ...	1	—	1
Currants, ...	1	—	1
Fat, Vegetable, ...	1	—	1
Flour ...	1	—	1
Ham, Loaf, ...	1	—	1
Margarine, ...	1	—	1
Mince, ...	3	—	3
Oil, Olive ...	1	—	1
Pepper, White, ...	2	—	2
Raisins ...	1	—	1
Rum, ...	1	—	1
Salad, Cream, ...	1	—	1
Salts, Liver, ...	1	—	1
Sausages, ...	7	—	7
Stomach Powder, Gregory's, ...	1	—	1
Sugar, ...	1	—	1
Tartar, Cream of, ...	2	—	2
Tea, ...	2	—	2
Whisky ...	5	—	5
Wine, Ruby ...	1	—	1
Total ...	57	1	58

The above-noted adulterated sample of Sweet Milk contained 3.02 per cent. of Fat and 8.13 per cent. of Non-Fatty Solids.

	TEST.		
	Gen.	Adult.	Total.
Butter, Fresh ...	1	—	1
Mince, ...	1	1	2
Whisky, ...	1	—	1
Total ...	3	1	4

AUCHTERMUCHTY BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Milk, Skimmed, ...	1	—	1
Total, ...	6	—	6

	TEST.		
	Gen.	Adult.	Total.
Sweet Milk, ...	1	—	1
Total, ...	1	—	1

CUPAR BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	16	—	16	Sweet Milk, ...	1	—	1
Milk, Certified,	1	—	1	Milk, Skimmed,	1	—	1
Milk, Skimmed,	3	—	3	Whisky, ...	4	—	4
Gin, ...	1	—	1				
Mince, ...	3	1	4				
Rum, ...	1	2	3				
Sausages, ...	2	—	2				
Whisky, ...	5	3	8				
Total, ...	32	6	38	Total, ...	6	—	6

FALKLAND BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5	Nil.			
Milk, Skimmed,	1	—	1				
Total, ...	6	—	6				

LADYBANK BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	11	—	11	Nil.			
Milk, Condensed,	1	—	1				
Butter, Fresh, ...	1	—	1				
Butter, Salt, ...	1	—	1				
Coffee, ...	1	—	1				
Honey, ...	1	—	1				
Margarine, ...	1	—	1				
Tomato Puree, ...	1	—	1				
Total, ...	18	—	18				

NEWBURGH BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	18	1	19	Nil.			
Butter, Salt, ...	1	—	1				
Oatmeal, ...	1	—	1				
Total, ...	20	1	21				

The above-noted adulterated sample of Sweet Milk contained 2.42 per cent. of Fat and 8.34 per cent. of Non-Fatty Solids.

ANSTRUTHER AREA.

LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	6	—	6
Total, ...	6	—	6

TEST.			
	Gen.	Adult.	Total.
Nil.			

ANSTRUTHER-KILRENNY BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	10	—	10
Farola, ...	1	—	1
Jam, Apricot, ...	1	—	1
Oatmeal, ...	1	—	1
Rice, Whole, ...	1	—	1
Sugar, ...	1	—	1
Sugar, Icing, ...	1	—	1
Tea, ...	2	—	2
Total, ...	18	—	18

TEST.			
	Gen.	Adult.	Total.
Nil.			

CRAIL BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	4	—	4
Chocolate, ...	1	—	1
Cocoa, ...	1	—	1
Creamola, ...	1	—	1
Oatmeal, ...	1	—	1
Oats, Porage, ...	1	—	1
Ovaltine, ...	1	—	1
Rice, Puffed, ...	1	—	1
Semolina, ...	1	—	1
Sugar, ...	1	—	1
Sugar, Icing, ...	1	—	1
Tea, ...	2	—	2
Total, ...	16	—	16

TEST.			
	Gen.	Adult.	Total.
Nil.			

ELIE AND EARLSFERRY BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	2	—	2	Nil.			
Creamola, ...	1	—	1				
Oatmeal, ...	1	—	1				
Sugar, ...	1	—	1				
Sugar, Icing, ...	1	—	1				
Tea, ...	1	—	1				
Wheat, Cream of	1	—	1				
Total, ...	8	—	8				

PITTENWEEM BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	7	—	7	Nil.			
Cornflour, ...	1	—	1				
Creamola, ...	2	—	2				
Mustard, ...	1	—	1				
Oatmeal, ...	2	—	2				
Rice, Whole, ...	2	—	2				
Semolina, ...	2	—	2				
Sugar, ...	2	—	2				
Tea, ...	2	—	2				
Total, ...	21	—	21				

ST MONANCE BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	4	—	4	Nil.			
Total, ...	4	—	4				

ST ANDREWS AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	1	—	1
Oatmeal, ...	1	—	1
Rice, Ground, ...	1	—	1
Rice, Whole, ...	1	—	1
Total, ...	4	—	4

TEST.
Gen. Adult. Total.

Nil.

NEWPORT BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	9	—	9
Flour, ...	2	—	2
Oatmeal, ...	1	—	1
Rice, Whole, ...	1	—	1
Sugar, ...	2	—	2
Total, ...	15	—	15

TEST.
Gen. Adult. Total.

Nil.

ST ANDREWS BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	27	1	28
Beer, ...	2	—	2
Cocoa, ...	1	—	1
Cornflour, ...	2	—	2
Flour, ...	1	—	1
Mince, ...	2	—	2
Oatmeal, ...	2	—	2
Rice, Ground, ...	2	—	2
Rice, Whole, ...	3	—	3
Sago, ...	1	—	1
Sausages, ...	2	—	2
Semolina, ...	1	—	1
Sugar, ...	3	—	3
Tartar, Cream of	1	—	1
Tea, ...	1	—	1
Whisky ...	3	1	4
Total, ...	54	2	56

TEST.
Gen. Adult. Total.

Beans, Baked, ...	1	—	1
Chocolate, Break-	—	—	—
fast ...	1	—	1
Flour, Cake, ...	1	—	1
Flour, S. R., ...	1	—	1
Peas, Green	—	—	—
Cooked, ...	1	—	1
Sauce, H. P. ...	1	—	1
Spice, Mixed ...	1	—	1
Sponge Mixture,	—	—	—
Lemon, ...	1	—	1
Syrup, Golden, ...	1	—	1
Tea, ...	1	—	1
Total, ...	10	—	10

The above-noted adulterated sample of Sweet Milk contained 3.07 per cent. of Fat and 8.13 per cent. of Non-Fatty Solids.

TAYPORT BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	4	—	4
Total, ...	4	—	4

TEST.
Gen. Adult. Total.

Nil.

KIRKCALDY AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	5	1	6
Butter, Fresh, ...	1	—	1
Butter, Salt, ...	1	—	1
Mince, ...	—	1	1
Pepper, White,	1	—	1
Sausages, ...	1	—	1
Tartar, Cream of	1	—	1
Total, ...	10	2	12

The above adulterated sample of Sweet Milk contained 2.41 per cent. of Fat and 9.05 per cent. of Non-Fatty Solids.

BURNTISLAND BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	30	3	33
Milk, Pasteurised,	5	—	5
Milk, Skimmed,	3	1	4
Beer, ...	2	—	2
Mince, ...	5	—	5
Whisky, ...	2	—	2
Total, ...	47	4	51

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

Fat	Non-Fatty
per cent.	Solids per cent.
2.82	8.56
2.60	8.67
2.74	8.52

The adulterated sample of Skimmed Milk contained 2.02 per cent. of Fat and 7.76 per cent. of Non-Fatty Solids.

KINGHORN BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Milk, Pasteurised,	4	—	4
Butter, Salt, ...	1	—	1
Margarine, ...	1	—	1
Sausages, ...	2	—	2
Total, ...	8	—	8

TEST.

Gen. Adult. Total.

Nil.

TEST.

Gen. Adult. Total.

Nil.

LESLIE BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	25	1	26
Milk, Pasteurised, ...	1	—	1
Mince, ...	1	—	1
Total, ...	27	1	28

The above-noted adulterated sample of Sweet Milk contained 2.77 per cent. of Fat and 8.51 per cent. of Non-Fatty Solids.

TEST.			
	Gen.	Adult.	Total.
Nil.			

MARKINCH BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Mince, ...	5	—	5
Total, ...	10	—	10

TEST.			
	Gen.	Adult.	Total.
Nil.			

BUCKHAVEN BURGH.

TEST.			
	Gen.	Adult.	Total.
Nil.			

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	9	—	9
Certified Milk, ...	1	—	1
Pasteurised Milk, ...	2	—	2
Butter, ...	1	—	1
Jam, Black Currant, ...	1	—	1
Mince, ...	4	2	6
Sausages, ...	6	—	6
Total, ...	24	2	26

WEMYSS AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	11	—	11
Certified Milk ...	1	—	1
Pasteurised Milk,	3	—	3
Beer, ...	2	—	2
Butter, ...	1	—	1
Cider, Gaymer's	2	—	2
Fat, Roast, ...	1	—	1
Meat, Potted, ...	1	—	1
Mince, ...	2	—	2
Powder, Baking,	1	—	1
Prunes, ...	1	—	1
Rice, Whole, ...	2	—	2
Rum, ...	1	—	1
Sauce, Fletcher's,	1	—	1
Sauce, H. P. ...	2	—	2
Sauce, Mac's, ...	1	—	1
Sauce, Tiger, ...	1	—	1
Sauce, Titbits			
Fruit, ...	1	—	1
Sausages, ...	2	—	2
Soda, Baking, ...	2	—	2
Whisky, ...	6	—	6
Total, ...	45	—	45

TEST.
Gen. Adult. Total.

Nil.

BUCKHAVEN BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	9	—	9
Certified Milk ...	1	—	1
Pasteurised Milk,	2	—	2
Butter, ...	1	—	1
Jam, Black			
Currant, ...	1	—	1
Mince, ...	4	2	6
Sausages, ...	6	—	6
Total, ...	24	2	26

TEST.

Gen. Adult. Total.

Nil.

LEVEN BURGH.

OFFICIAL.

TEST.

	Gen.	Adult.	Total.
Sweet Milk, ...	27	2	29
Tuberculin Tested			
Milk, ...	1	—	1
Pasteurised Milk, ...	2	—	2
Milk, Condensed, ...	2	—	2
Gin, ...	1	—	1
Pepper, White, ...	1	—	1
Sauce, Waverley, ...	1	—	1
Tea, ...	1	—	1
Vinegar, Malt, ...	1	—	1
Whisky ...	3	—	3
Total, ...	40	2	42

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

Fat per cent.	Non-Fatty Solids per cent.
2.75	8.95
2.12	9.00

Gen. Adult. Total.
Nil.

	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Butter, Salt, ...	1	—	1
Cornflour, ...	1	—	1
Margarine, ...	1	—	1
Oatmeal, ...	1	—	1
Peas, Tinned, ...	1	—	1
Tapioca, ...	1	—	1
Whisky, ...	2	—	2
Total, ...	13	—	13

	Gen.	Adult.	Total.
Sweet Milk, ...	42	—	42
Pasteurised Milk, ...	1	—	1
Skimmed Milk, ...	3	—	3
Butter, Salt, ...	7	—	7
Coffee, Ground, ...	1	—	1
Curd, Lemon, ...	1	—	1
Curries, ...	3	—	3
Flour, Plain, ...	1	—	1
Jam, Black, ...	1	—	1
Curant, ...	1	—	1
Jam, Strawberry, ...	2	—	2
Margarine, ...	2	—	2
Marmalade, ...	1	—	1
Mince, ...	3	—	3
Pepper, White, ...	2	—	2
Sausages, ...	3	—	3
Tartar, Cream of, ...	2	—	2
Tea, ...	2	—	2
Vinegar, ...	1	—	1
Vinegar, Malt, ...	1	—	1
Whisky, ...	2	—	2
Total, ...	81	—	81

	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Certified Milk, ...	1	—	1
Pasteurised Milk, ...	1	—	1
Mince, ...	1	—	1
Butter, ...	4	—	4
Total, ...	12	—	12

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

Fat per cent.	Non-Fatty Solids per cent.
2.64	8.83
3.67	8.99

	Gen.	Adult.	Total.
Sweet Milk, ...	7	—	7
Butter, Salt, ...	3	—	3
Margarine, ...	1	—	1
Rice, Whole, ...	1	—	1
Soda, Baking, ...	1	—	1
Total, ...	13	—	13

LOCHGELLY AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	42	—	42
Pasteurised Milk,	1	—	1
Skimmed Milk	3	—	3
Butter, Salt, ...	7	—	7
Coffee, Ground,	1	—	1
Curd, Lemon, ...	1	—	1
Currants, ...	3	—	3
Flour, Plain, ...	1	—	1
Jam, Black			
Currant, ...	1	—	1
Jam, Strawberry,	2	—	2
Margarine, ...	2	—	2
Marmalade, ...	1	—	1
Mince, ...	3	—	3
Pepper, White,	2	—	2
Sausages, ...	3	—	3
Tartar, Cream of	2	—	2
Tea, ...	2	—	2
Vinegar, ...	1	—	1
Vinegar, Malt ...	1	—	1
Whisky ...	2	—	2
Total, ...	81	—	81

TEST.
Gen. Adult. Total.
Nil.

LOCHGELLY BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk, ...	7	—	7
Butter, Salt, ...	3	—	3
Margarine, ...	1	—	1
Rice, Whole, ...	1	—	1
Soda, Baking, ...	1	—	1
Total, ...	13	—	13

TEST.
Gen. Adult. Total.
Nil.

DUNFERMLINE AREA.

LANDWARD.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	39	—	39		Nil.		
Pasteurised Milk, ...	9	—	9				
Skimmed Milk	1	—	1				
Butter, Salt, ...	1	—	1				
Lard, ...	1	—	1				
Margarine, ...	1	—	1				
Mince, ...	10	—	10				
Powder, Baking,	1	—	1				
Sausages, ...	7	—	7				
Sausagemeat, ...	—	1	1				
Tartar, Cream of	1	—	1				
Whisky, ...	2	—	2				
Total, ...	73	1	74				

CULROSS BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5		Nil.		
Butter, Salt, ...	1	—	1				
Cornflour, ...	1	—	1				
Margarine, ...	1	—	1				
Oatmeal, ...	1	—	1				
Peas, Tinned, ...	1	—	1				
Tapioca, ...	1	—	1				
Whisky, ...	2	—	2				
Total, ...	13	—	13				

INVERKEITHING BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk, ...	5	2	7		Nil.		
Certified Milk,	1	—	1				
Pasteurised Milk,	1	—	1				
Mince, ...	1	—	1				
Butter, ...	4	—	4				
Total, ...	12	2	14				

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

Fat	Non-Fatty
per cent.	Solids per cent.
2.64	8.53
3.67	8.09

BEATH AREA.

LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ...	5	—	5
Total, ...	5	—	5

TEST.			
	Gen.	Adult.	Total.
Nil.	—	—	—

COWDENBEATH BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	13	—	13
Mince, ...	5	—	5
Sausages, ...	1	—	1
Total, ...	19	—	19

TEST.			
	Gen.	Adult.	Total.
Nil.	—	—	—

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Butter, Salt, ...	1	—	1
Condensed Milk, ...	1	—	1
Margarine, ...	1	—	1
Butter, ...	1	—	1
Butter, Tinned, ...	1	—	1
Butter, ...	1	—	1
Butter, ...	1	—	1
Butter, ...	2	—	2
Total, ...	13	—	13

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk, ...	5	—	5
Certified Milk, ...	1	—	1
Condensed Milk, ...	1	—	1
Mince, ...	1	—	1
Butter, ...	4	—	4
Total, ...	12	—	12

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

per cent.	Fat	Non-Fatty Solids per cent.
2.64	—	8.53
2.67	—	8.09

FIFE COUNTY COUNCIL

ANNUAL REPORT

ON THE

Medical Inspection of School Children

For the Year ended

JULY 1937

BY

R. A. KRAUSE

M.D., D.Sc., D.P.H.

Deputy County Medical Officer (Welfare).

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I. (a) NUMBER OF SCHOOLS 162
(b) NUMBER OF CHILDREN ON REGISTER AND IN AVERAGE ATTENDANCE:—

Roll (Total) at September, 1936	46,346
Average weekly roll to 31st July, 1937	45,784·3
Average Attendance to 31st July, 1937	41,503·5
Percentage Attendance	90·65

II. HEATING, SANITATION, ETC., OF SCHOOLS.

HEATING OF SCHOOLS.—New heating systems were installed at the following schools during the past year :—

(1) St Andrews District—Flisk, Letham.

(2) Dunfermline District—Culross Temporary and Culross Geddes Schools.

In the report by the Area Medical Officer it was pointed out that the heating in Rathillet School was only fairly satisfactory. It is suggested that the type of anthracite used is responsible for the poor results.

In Carnbee Public School, the central heating has to be supplemented in the Headmaster's room during the cold weather.

In Moonzie, a coal fire is insufficient to warm this school which is cold and draughty.

In Wemyss Area, no complaints regarding heating have been made to the Area Medical Officer.

In Kirkcaldy Area, the heating in Preston School is reported to be very poor. In Kinghorn School, the Infant Room is stated to be inadequately heated, also the heating of the Science and Woodwork Rooms in Balcurvie School is unsatisfactory. In Burntisland H. G. School, the heating of Room No. 8 also No. 1 in the Primary Building and the heating of Rooms 13 and 14 in the Infant Department are all unsatisfactory. The installation of gas radiators in addition to the existing hot water pipes cannot be considered satisfactory because of smells and also there is no protection against the naked flame. No guard has been supplied although asked for.

In Lochgelly Area, the heating in the schools, on the whole, is considered satisfactory with the exception of Room 6 in Auchterderran South School, and in the case of Lochgelly H. G. in the rooms farthest away from the furnaces.

The Medical Officer also complained of the rooms used for medical inspection in Ballingry, Kinglassie and Lumphinnans Schools. These are heated by open fires from which the heat is adequate provided the fire has been on for some time. If, however, any non-routine cases have to be examined and for which a special visit is made, the lighting of a fire does not warm up the room

sufficiently for the carrying out of an examination in reasonable comfort. Supplementary heating of some form, electric or gas, is therefore suggested in these schools.

In the R. C. Schools in Lochore and Auchterderran, the ladies' staffrooms which are used for medical examination are inadequately heated. Here some supplementary form of heating is required in order to allow for a proper examination of children, particularly during the cold weather.

In Cowdenbeath Area, the medical inspection room in Beath Secondary School is quite unsuitable during cold weather and additional heating is here required. In Kelty Public School, inadequate heating is also complained of in respect of the whole of the Infant and Junior Departments, especially Rooms 1 and 4.

WATER SUPPLY.

Nothing to report.

LATRINES, ETC.

Sanitary improvements were carried out at the following schools:—Guardbridge, Kirkcaldy North, Methil, Kirkcaldy Primary. New drainage outlet to sewer was provided at Kennoway School and septic tank disconnected.

ALTERATIONS AND ADDITIONS.

At Oakfield, H. G. School, a gymnasium with spray baths was added also a Practical Room and Classroom.

At Freuchie Public School two classrooms were converted into a hall for gymnastic and recreation purposes.

At Buckhaven High School a gymnasium was made available by the conversion of an old hall. This much needed addition will allow more adequate physical education instruction to be given at this school as it will mean less use of the central hall in the old school proper.

In Kirkcaldy West School there were three additional new classrooms.

A new engineering workshop was acquired at Fife Mining School.

At Cowdenbeath Secondary School, underground workings necessitated the closing of the school for a time during which alterations were made to strengthen the present building.

Temporary huts at Kirkcaldy West School were removed and re-erected at Lochgelly H. G. School for a time, then dismantled and re-erected at Falkland. A new two-classroom hut was found necessary at Lochgelly South School. A hut in use at Glencraig

was removed and re-erected at the Fife Mining School and a new hut was erected at Guardbridge School.

Electric light was installed at the following schools :—Culross Temporary, Glencraig, Ceres, St Monance (Hall) and Burntisland (Gym.).

JUNIOR INSTRUCTION CENTRES.

In connection with the setting up of Junior Instruction Centres in various parts of the County, the following were established during the past year :—

(1) The I. O. R. Hall at Buckhaven was converted for use as a Junior Instruction Centre for Boys.

(2) In Kirkcaldy, Priory House was converted for use for boys in the Kirkcaldy Area.

(3) Huts were set up at Denbeath School and these are being used for the girls receiving instruction.

(4) At the Fife Mining School a hut has also been set up for the boys in the Cowdenbeath Area.

It should be mentioned that construction work at the new Dunfermline High School is in hand also additional accommodation at Tayport School.

CLINICS.

At Tayport, condemned property was taken over and is being gutted out and reconstructed for a new school and Child Welfare Clinic. This, although providing only a relatively small clinic, will allow for dental and minor ailments treatments to be carried out and also make it possible for Child Welfare Clinics to be held without interfering with classroom time-tables.

Building of the new clinic at Buckhaven is also progressing and should be available at the beginning of the new winter session. This clinic, when completed, will furnish clinic accommodation for the treatment of minor ailments and dental treatment for the Aberhill, Methil and St Agatha's R. C. Schools and eventually as a central clinic for orthopaedic and eye refraction work.

III. ORGANISATION AND ADMINISTRATION.

No change is to be recorded in the organisation or administration of Fife County School Medical Scheme. In the County the scheme is operated by six Area Medical Officers, one for each area—(1) North-East Fife, (2) Buckhaven and Wemyss, (3) Burntisland-Markinch, (4) Lochgelly, (5) Cowdenbeath-Kelty, and (6) West Fife. The medical staff of the two large burghs, Kirkcaldy and Dunfermline, are responsible for the medical inspection of the children in the

two burghs. In Dunfermline the treatment part of the work is in the hands of the Dunfermline Carnegie Trusts medical and dental staff.

Besides the Medical Officers, the work of inspection and treatment is carried out by 21 whole-time Welfare Nurses. In the rural districts, by arrangement with the Fife County Nursing Association, the District Nurses are responsible for the medical inspection at the school visits and where there are no clinics, any treatment required is carried out at the homes of the patients or of the nurses.

The County Area Medical Officers, during the school year, made 1147 visits for the purpose of school medical inspection (routine and non-routine). It was also found necessary to make 545 special visits.

In the two large burghs (Kirkcaldy and Dunfermline) the following ordinary and special visits were made :—

Kirkcaldy Burgh—198 ordinary ; 12 special.

Dunfermline Burgh—141 ordinary ; 0 special.

The Welfare (School and Health Visitor) Nurses, and also the District Nurses, paid 2488 visits to the schools in the County—Dunfermline Area, 339 ; Cowdenbeath and Lochgelly Areas, 500 ; Kirkcaldy Area, 273 ; Wemyss Area, 396 ; North-East Fife, 980. In Kirkcaldy Burgh 369 visits were made and in Dunfermline 67.

IV. PHYSICAL CONDITION OF THE SCHOOL CHILDREN.

Nurses' Inspections.

(a) <i>County</i> —No. of children inspected	...	...	17,599
No. of children re-inspected	...	...	23,514
Total	...	...	41,113

There were found at the first inspections made of the school children 4746 children with defects (head vermin 1403, impetigo 804, external eye diseases 259, nose and throat cases 177, otorrhoea 117, scabies 117, uncleanliness and neglect 135, and body vermin 7, etc.). In a large proportion of the cases, the defects were of a minor nature and in only 1152 was it necessary for the nurses to follow up and visit the homes. These 1152 cases were chiefly distributed as follows :—Head vermin 398, impetigo 191, scabies 91, otorrhoea 26, uncleanliness and neglect 67, external eye disease 41, nose and throat conditions 28, body vermin 2, etc. Besides these cases, follow-up visits were also required for eye refraction (256) and dental (12) cases, where the parents were taking no steps for the examination and treatment of the children.

The nurses made 2488 school visits for the inspection of the school children, and arising out of these inspections, 3094 home

visits were made for the purpose of following up those cases found to have definite defects or diseases conditions. The figures for the District Nurses, which are included in the above totals, are 869 school visits and 794 home visits.

(b) *Large Burghs*—No. of children inspected—

(i.) Kirkcaldy	...	...	3,543
(ii.) Dunfermline	...	...	3,610
No. of children re-inspected—			
(i.) Kirkcaldy	...	...	4,186
(ii.) Dunfermline	...	...	4,249
			<hr/> 15,588

The school visits made by the nurses of the Large Burghs were 436 (Kirkcaldy 369, Dunfermline 67). At the inspections 1186 children (Kirkcaldy 619, Dunfermline 467) were found with defects and of these 136 in Kirkcaldy required 89 home visits and in Dunfermline 17 required 19 home visits.

Medical Officers (Medical Inspections).

Number of Children examined and inspected by the Medical Officers (County and Large Burghs) :—

Entrant Infants	...	...	...	...	...	3,792
7 year olds	...	...	...	...	...	2,896
9 year olds	...	...	...	...	...	4,186
13 year olds	...	...	...	...	...	4,618
15 year olds	...	...	...	...	...	299
						<hr/> 15,791
Non-routines	...	...	...	...	...	5,079
Re-examinations	...	...	...	...	...	2,318
Special Class Children	...	...	...	...	...	119
Junior 15b Students	...	...	...	...	...	14
No. of children seen at Clinics otherwise than for treatment (Dunfermline excluded)	...	...	...	...	...	237
						<hr/> 23,558
Total No. Inspected by Medical Officers						<hr/> 23,558
Total No. Inspected 1935-36						<hr/> 25,678

The number of children belonging to the routine age groups and examined are distributed as follows:—(1) Kirkcaldy Burgh 2380; (2) Dunfermline Burgh 1615; (3) North-East Fife 1982; (4) Kirkcaldy District 1427; (5) Wemyss District 1703; (6) Cowdenbeath and Lochgelly District 2666; (7) Dunfermline Landward 1122, or a total of 12,895. This number does not include the 7 year old group. The defects found in these 12,895 children are as follows :—

Summary of Defects.

				<i>Routines.</i>	<i>Percent- ages.</i>	<i>Non- Routines.</i>
<i>Clothing—</i>						
Dirty	...	...	...	24	0.18	25
Insufficient	...	...	...	54	0.42	90
<i>Footgear—</i>						
Defective	...	...	...	247	1.9	332
Useless	...	...	...	88	0.68	50
Barefooted	...	...	...	—	—	69
<i>Cleanliness of Head and Body—</i>						
<i>Head—</i>						
Nits and dirty	...	...	...	775	6.0	187
Verminous	...	...	...	230	1.8	113
<i>Body—</i>						
Dirty (slight)	...	...	...	380	2.9	84
Very dirty	...	...	...	31	0.24	29
Verminous	...	...	...	1	0.007	—
<i>Condition of Skin—</i>						
<i>Head—</i>						
Ringworm	...	...	...	1	0.007	2
Impetigo	...	...	...	47	0.36	108
Other diseases	...	...	...	29	0.22	18
<i>Body—</i>						
Ringworm	...	...	...	5	0.03	8
Scabies	...	...	...	21	0.16	44
Impetigo	...	...	...	4	0.03	49
Other diseases	...	...	...	53	0.41	58
<i>Nutrition—</i>						
Below average	...	...	...	1359	10.5	253
Very bad	...	...	...	44	0.34	102
<i>Teeth—</i>						
1-4 decayed	...	...	...	6173	47.09	312
5 or more decayed	...	...	...	1858	14.4	126
Oral sepsis	...	...	...	889	6.8	67
<i>Nose—</i>						
Catarrh	...	...	...	38	0.29	19
Obstruction	...	...	...	252	1.95	95
Other diseases and defects	...	...	...	227	1.75	16
<i>Tonsils—</i>						
Slightly enlarged	...	...	...	2316	17.9	150
Markedly enlarged	...	...	...	567	4.3	188
<i>Lymphatic Glands—</i>						
<i>Cervical—</i>						
Slightly enlarged	...	...	...	8485	65.8	106
Markedly enlarged	...	...	...	221	1.7	70
<i>Submaxillary—</i>						
Slightly enlarged	...	...	...	5239	40.6	29
Markedly enlarged	...	...	...	52	0.4	10

				<i>Routines.</i>	<i>Percent- ages.</i>	<i>Non- Routines.</i>
<i>External Eye Disease—</i>						
Blepharitis ...	...	...	...	240	1.8	98
Conjunctivitis ...	...	...	...	14	0.108	35
Corneal opacities ...	...	...	...	13	0.10	11
Squints and other defects ...	...	...	...	299	2.3	153
Other diseases ...	...	...	...	36	0.28	33
<i>Visual Acuity (9,103)—</i>						
6/6 with one eye ...	...	...	...	8098	88.9	4656
6/9 to 6/12 do. ...	...	...	...	725	7.9	221
6/18 do. ...	...	...	...	275	3.02	194
Wearing glasses ...	...	...	...	298	3.2	119
<i>Ears—</i>						
Wax ...	...	...	...	1460	11.3	168
History of Otorrhoea ...	...	...	...	225	1.7	27
Otorrhoea ...	...	...	...	88	0.68	73
Other diseases and defects ...	...	...	...	135	1.05	20
<i>Hearing—</i>						
Slightly deaf ...	...	...	...	38	0.29	16
Markedly deaf ...	...	...	...	16	0.12	18
<i>Speech—</i>						
Defective articulation ...	...	...	...	138	1.07	59
History of stammering ...	...	...	...	17	0.13	8
Stammering ...	...	...	...	22	0.17	22
<i>Mental Condition—</i>						
Dull or Backward ...	...	...	...	122	0.94	38
Markedly do. ...	...	...	...	43	0.33	70
<i>Heart and Circulation—</i>						
Functional disease ...	...	...	...	29	0.22	12
Organic do. ...	...	...	...	24	0.18	31
Anaemia ...	...	...	...	21	0.16	12
<i>Lungs—</i>						
Bronchitis ...	...	...	...	101	0.78	55
Phthisis (Pre-tuberculosis) ...	...	...	...	39	0.3	8
(Susp. tuberculosis) ...	...	...	...	7	0.05	3
Other diseases ...	...	...	...	87	0.67	5
<i>Nervous System—</i>						
Chorea ...	...	...	...	2	0.01	6
Infantile paralysis ...	...	...	...	5	0.03	6
Epilepsy ...	...	...	...	2	0.01	4
Other diseases ...	...	...	...	6	0.04	3
<i>Tuberculosis (Non-pulmonary)</i> ...	...	...	...	29	0.22	27
<i>Rickets—</i>						
Slight ...	...	...	...	88	0.68	9
Marked ...	...	...	...	11	0.08	6

				<i>Routines.</i>	<i>Percent- ages.</i>	<i>Non- Routines.</i>
<i>Deformities—</i>						
Congenital ...	...	...	...	30	0.23	20
Acquired ...	...	...	...	96	0.74	33
<i>Infectious Diseases</i> ...						
...	...	...	...	17	0.13	12
<i>Contagious Diseases</i> ...						
...	...	...	...	3	0.02	62
<i>Other Diseases</i> ...						
...	...	...	...	28	0.21	56
<i>Other Defects</i> ...						
...	...	...	...	70	0.54	50
<i>Vaccination—</i>						
<i>Entrant Infants (3,792)—</i>						
Vaccinated ...	...	...	...	1588	41.8	—
Poorly marked ...	...	...	...	161	4.2	—
Not vaccinated ...	...	...	...	2043	53.8	—
<i>Other Age Groups (9,103)—</i>						
Vaccinated ...	...	...	...	2739	30.08	—
Poorly marked ...	...	...	...	1514	16.5	—
Not vaccinated ...	...	...	...	4850	53.2	—

At the medical inspections the medical officers refer cases to the parents for medical advice and treatment. The total number of such cases referred by the County Area Medical Officers was 2974. This figure was made up of the following conditions :—Dental 1631, Vision 252, Adenoids 147, Tonsils 253, Head Vermin 146, Body Vermin 3, Scabies 14, Head Ringworm 1, and Other Conditions 527. The Medical Officer for Kirkcaldy Burgh sent out 580 notices and in Dunfermline Burgh 381 notices were sent out.

The number of parents present at the medical inspection was as follows :—

(a) Entrant Infants (County)	...	...	...	1,177
" (Kirkcaldy)	...	...	...	572
" (Dunfermline)	...	...	...	284
(b) Other Routine Age Groups (County)	...	...	...	279
" " (Kirkcaldy)	...	...	...	435
" " (Dunfermline)	...	...	...	305
Total ...	...	...	...	<u>3,052</u>

The special classification, based on "the future capacity of the child to become a useful member of society," was continued as before (see Report for 1936). Handicapped children and dental defects were not included.

*Entrants—*3895 (1951 boys and 1944 girls).

Number with no defects ...	...	1152 boys ; 1236 girls
Number with wholly remedial defects ...	...	673 boys ; 622 girls
Number with partly remedial defects ...	...	98 boys ; 66 girls
Number with non-remediable defects ...	...	28 boys ; 20 girls

From the above figures it will be seen that 61·3 per cent. of entrants had no defect; 33·2 per cent. had wholly remediable defects (of these 85 per cent. had only one remediable defect), and 5·4 per cent. had partly remediable and non-remediable defects.

8-9 year olds—4262 (2133 boys and 2129 girls)—

Number with no defects	...	1444 boys; 1494 girls
Number with wholly remediable defects	... ..	482 boys; 464 girls
Number with partly remediable defects	... ..	168 boys; 141 girls
Number with non-remediable defects	... ..	39 boys; 30 girls

Here we see that 68·9 per cent. of the 8-9 year olds have no defects, 22·1 per cent. have wholly remediable defects, and 8·8 per cent. have partly and non-remediable defects.

12-13 year olds—4797 (2448 boys and 2349 girls)—

Number with no defects	...	1754 boys; 1679 girls
Number with wholly remediable defects	... ..	428 boys; 451 girls
Number with partly remediable defects	... ..	186 boys; 185 girls
Number with non-remediable defects	... ..	80 boys; 34 girls

Of these 12-13 year olds, 71·5 per cent. have no defects, 18·3 per cent. wholly remediable defects, and 10·1 per cent. partly and non-remediable defects.

In the case of the 15-16 year old group, only 102 boys and 140 girls were involved. The percentage figures are :—

No defects	... ..	68·1
Wholly remediable defects	... ..	16·1
Partly and non-remediable defects	... ..	15·7

These figures again show the gradual increase during school life in the percentage of children with partly and non-remediable conditions. Preventive measures as well as the earlier examination (in pre-school period) of the children and the extension of clinic treatment to pre-school children will play important roles in reducing these figures.

(A) Children Suffering Educationally because of Physical Defects.

(a) NORTH-EAST FIFE.—Dr MacLeod, Area Medical Officer, again mentions the need in Fife for a Convalescent Home or an Open Air Residential School for Children. In this connection she refers to the Children's Home (Aithernie) at Lundin Links. This Home is the result of private generosity and enterprise and is intended

primarily "to accommodate Fife children whose parents, through illness or for some other adequate reason, are unable to care for them." Children may also be received for holidays. Whilst this Home is meeting a definite want, it is hardly likely to be able to cope with more than a fraction of the children who would be benefited by residence in such a Home.

A new entrant was found to have very defective hearing—rendering him unfit for education in an ordinary school. As he lived within easy reach of Dundee, arrangements were made for his attendance at the Dundee Deaf School—a daily school. All other deaf children in this area are in residence in Institutions for the Deaf.

In this area there are nine educationally blind children under the age of sixteen. These children are kept under supervision of the Medical Officer and special arrangements are made at school to safeguard their sight as far as is possible. A more satisfactory arrangement would be the setting up of a Sight-Saving Class but the distances between the various cases does not make this feasible. A residential hostel for physical defectives—and which was planned by the old Education Authority—would meet the objection to travelling long distances but meanwhile financial exigencies, prevent the consideration of such a scheme.

Besides these cases there are also other four children with very defective vision but where there is no great danger of deterioration.

"In last year's Report reference was made to the case of a boy whose myopia had shown a marked increase on his transference to an Advanced Division Centre. The Headmaster was informed of the need for special care in this case, and no homework has been allowed during the past session, with the gratifying result that no further increase in the myopia has occurred."

(b) KIRKCALDY LANDWARD DISTRICT.—In the Burntisland-Markinch area the numbers of outstanding cases with physical defects were as follows:—Defective hearing—three boys and one girl; high myopia—two boys; epilepsy—one boy and one girl with the slight type (*petit mal*) and four boys and one girl with the "major" or more severe type; speech defects—forty-nine (stammering 10, other defects 39); cardiac conditions, three boys and eight girls; respiratory troubles—four boys and four girls; diabetes—two boys.

In the Lochgelly area, the number of outstanding cases was twelve (crippling conditions 8, cardiac disease 1, congenital eye condition 1, and epilepsy 2).

(c) DUNFERMLINE LANDWARD DISTRICT.—In Cowdenbeath Area there were seven outstanding cases (heart lesions 2, asthma and bronchitis 2, epilepsy 2, and defective vision 1).

In the West Fife Area the Medical Officer reports ten special physically defective children (cripple 1, heart lesions 4, deafness 2, educationally blind 1, otorrhoea 1, and tubercular frontal bone 1).

In the Burgh of Kirkcaldy, one girl was found to be suffering educationally because of defective eyesight and she was recommended for transference to the Sight-Saving Class in Kirkcaldy. One boy and one girl were recommended by the Ear, Nose and Throat Specialist to have special speech training.

In the Burgh of Dunfermline, four special cases are reported (cataract 1, severe corneal opacities 1, cardiac lesion 1, and cripple 1).

(B) Number of Children Suffering in their Education because of Mental Retardation.

(a) NORTH-EAST FIFE.—There is only one special class in this area, namely, the one at Cupar. Lack of classroom accommodation in other schools is responsible for this.

The Special Class at Cupar continues to do excellent work. Throughout the area there are at least fifty-three children whose intelligence quotient is below 70. A further fifty children were also examined during the year whose "quotient" figures were above 70.

(b) KIRKCALDY LANDWARD DISTRICT.—In the Burntisland-Markinch area thirty-two children were mentally tested throughout the year. The results obtained were as follows :—

Intelligence Quotient	40-49	2
"	50-59	1
"	60-69	5
"	70 upwards	24

In the Lochgelly Area four children were found to be suitable for special class instruction. The new Area Medical Officer was unable to undertake the examination of the others that were brought forward by the headmasters.

(c) DUNFERMLINE LANDWARD DISTRICT.—In the Cowdenbeath Area five children were found to require special class instruction.

In the West of Fife a large number of children (103) were reported as retarded. It was, however, suspected that the majority of these children would have intelligence quotients of 70 and over.

One of the peculiarities that has arisen following the decision of the Education Committee to set up "classes" for backward children and to include in these the higher grades of mental defectives (educational), is the fact that it seems to be more difficult for headmasters and teachers to bring forward only those cases coming within the category of special class cases. The only way to meet this difficulty will be for some sort of group test which can be applied every year to the children who have reached their eighth

year. Such a preliminary selection should precede the individual testing for the mental age, and it would eliminate the large number of examinations which the Medical Officer would have to carry out needlessly.

(d) In the Burgh of Kirkcaldy four boys and two girls required to be mentally tested.

(e) In the Burgh of Dunfermline five boys were recommended for transference to the Special Classes.

(C) Number and Condition of Children suitable for Institutional Treatment.

(a) NORTH-EAST FIFE.—In this area there are twelve children (mentally defective) who are suitable for institutional treatment. In only one case, however, did the parents agree to have the boy removed from home. A further eleven children may also be considered as possible institutional cases.

One mental defective, whose guardian has previously been advised to have the boy admitted to an Institution, got into trouble and was removed to the Leven Remand Home pending a vacancy in a suitable Institution.

(b) KIRKCALDY LANDWARD DISTRICT.—In the Buckhaven-Wemyss Area there was only one child admitted to an Institution for epileptics.

In the Burntisland-Markinch Area there were ten children suitable for institutional care (educationally deaf 1, mentally defective 8, and cripple 1).

In the Lochgelly Area one boy was recommended for admission to a deaf Institution.

(c) DUNFERMLINE LANDWARD DISTRICT.—In the Cowdenbeath Area one blind and one mental defective were reported as suitable for institutional care.

The Area Medical Officer for the West of Fife Area reported eight children as in need of institutional treatment.

(d) KIRKCALDY BURGH.—Two girls were recommended for transfer to an Institution for mental defectives.

(e) DUNFERMLINE BURGH.—Two boys and one girl were reported as suitable cases for institutional treatment.

(D) Number of Children who are Suffering in their Education because of Lack of (i) Nutrition and (ii) Clothing.

(a) NORTH-EAST FIFE.—(i) 95 boys and 38 girls were found to be suffering to a greater or lesser degree from malnutrition. Of

these fourteen boys and six girls received free meals (soup) ; two boys and two girls, soup and free milk ; twenty-four boys and ten girls free milk ; nineteen boys and five girls, Maltolene ; other supplementary feeding (cod liver oil, etc.) was given to a further ten children.

Through the generosity of Mrs Younger of Mount Melville, a daily supply of Grade A (T. T.) milk was again provided free for the children of the East and West Infant Schools, St Andrews, and was much appreciated.

(ii) The number of children examined for lack of boots and clothing—mainly following application by parents—was 194. This examination of applicants for boots and clothing, which requires no medical knowledge or training, still requires to be performed by the Area Medical Officers, who could be better employed doing work requiring more technical skill.

(b) KIRKCALDY LANDWARD AREA.—In Buckhaven-Wemyss Area the number of children examined under (i) was 39—all were recommended to have Maltolene. Some were also given ultra violet ray treatment.

The number of children examined under (ii.) for boots and clothing was 305 and is less than half the number examined last year.

Burntisland-Markinch Area.—(i) 61 boys and 61 girls were examined for under nourishment but a food supplement (milk and Maltolene) was recommended for 10 boys and 12 girls. (ii) Following applications by parents, 82 children were examined for boots and clothing. Nine were recommended for the supply of clothing, 17 for boots only and 52 for clothing and boots. In the case of four children no recommendations were made.

Lochgelly Area.—(i) Extra nourishment was granted to 12 boys and 17 girls (Maltolene 21, milk 5, Maltolene and milk 3). (ii) The total number of children examined was 1,038 (777 first examinations and 261 re-examinations). The total number of children granted boots or clothing was 952. The total number of special visits required for this purpose was 166, involving over 109 hours of working time.

(c) DUNFERMLINE LANDWARD DISTRICT.—Cowdenbeath Area.—(i) In two cases advice was given regarding diet. Remedial steps were taken by one family and in the other case application was made for a supply of milk in school. (ii) Thirty-one cases were noted at the medical inspection and reported to the parents. In 24 of these successful application was made for the provision of boots and clothing. Parents made application for clothing in 586 cases ; the necessary articles were recommended and granted.

(e) KIRKCALDY BURGH.—(i) “ During the year 113 children were considered to be suffering educationally by reason of lack of nourishment and free milk was recommended to be granted to 103 and free meals to 10 of these children.”

(ii) “ A considerable number of applications were received for boots and clothing and the following recommendations were made :— Boots 331 ; Clothing 285.”

(f) DUNFERMLINE BURGH.—(i) In the case of this Burgh the number of children recommended supplementary nourishment was 13. “ The extra nourishment took the form of either half a pint of milk given twice daily at school or in the case of McLean School (Special Classes) a mid-day meal.”

(ii) There were the usual applications for boots and clothing. The number of children for whom it was considered necessary to make a recommendation was :—

Boots only	...	...	...	37
Clothing only	...	...	...	7
Boots and Clothing	...	...	...	184

(E) Children Suspected to be Suffering from Neglect.

(a) NORTH-EAST FIFE.—There were three families involving eleven children reported to the Inspector of the Society for the Prevention of Cruelty to Children. “ Two of these families were dirty and ill-cared for. In each case an improvement has taken place but both families still require regular supervision. In the third case the mother, although herself unable to provide boots and clothing for the children, refused to make application to the appropriate Committee, and the three children accordingly went poorly clad and very ill shod. After the Inspector's visit an application form was completed and the necessary articles were supplied. The Inspector was also asked to re-visit four families (nine children) who had been previously under his supervision.”

(b) KIRKCALDY LANDWARD DISTRICT—Buckhaven-Leven Area.—One family (two boys and one girl) was reported to Mr Finlayson, R.S.S.P.C.C., by the headmaster of the school. This family, which has no mother, are being kept under supervision.

Burntisland-Markinch Area.—“ Six children were found to be grossly unclean and verminous ; the homes were visited by the nurse and improvement obtained. Four families (twelve children) have, in addition, been under the supervision of the Inspector of the R.S.S.P.C.C. for persistent uncleanliness and general neglect. No prosecutions were instituted in these cases and improvement was obtained in all.”

Lochgelly Area.—Members of two families in Cardenden where neglect had previously been suspected, were reviewed. The condition of these children on review, was satisfactory. The Health Visitor is to continue supervision. In another case where the girl had a verminous head, extensive impetigo of the head, and was fleabitten, the parents had several warnings from the medical staff. As no improvement was shown, the case was referred to Inspector Bell, R.S.S.P.C.C. Following a successful prosecution, the case will be kept under supervision. Special attention was also required for a boy where the leg was bruised and there was suspicion of strapping. Following warning, there has been no further trouble.

(c) DUNFERMLINE LANDWARD DISTRICT—Cowdenbeath Area.—There were two cases where repeated warnings and home visits were necessary by the Area Medical Officer and the School Nurse. Eventually the services of the Inspector of the Royal Society for the Prevention of Cruelty to Children were called upon. There was ultimate improvement in each home.

West Fife Area.—Six children required special attention by the medical staff. In Carnock School two girls were removed from their mother and boarded-out. In Hill of Beath two girls were “not properly fed at home and generally neglected.” The cases were referred to the Inspector, R.S.S.P.C.C., who warned the mother —“there has been a great improvement in their condition.” In Blairhall two boys were sent to school “unwashed and sores not properly attended to at home.” Here the mother was dead and a sister of 15 years was in charge of the home. Following upon a warning to the father by Mr Bell, Inspector, R.S.S.P.C.C., there has been an improvement in the condition of the boys.

(d) KIRKCALDY BURGH.—“Parental neglect was deemed to be responsible for two families (in both of which the mother is dead) suffering in their education, and the matter was reported to the local Inspector, R.S.S.P.C.C. One family (two boys and one girl) has been removed to Quarrier’s Homes but no action has yet been taken with regard to the other family in spite of a further complaint being lodged regarding the neglected and unclean condition of one of the boys. Appeals and remonstrances made to the father have been of no avail.”

(e) DUNFERMLINE BURGH.—“Eight children suffered because of neglect by their parents. In some of these cases it was necessary for Inspector Bell to visit, which he did, with satisfactory results. The remainder were dealt with by treatment at the clinics and by issue of extra nourishment at school. Two children of one family, seriously affected with scabies, had to be admitted to hospital for treatment.”

The medical staff wish to express their thanks to the two Inspectors of the Royal Scottish Society for the Prevention of Cruelty to Children, Messrs Bell (West Fife) and Finlayson (East Fife) who have continued to give their valuable help in these difficult cases.

(F) Children with Defective Vision.

INSPECTIONS FOR VISUAL ACUITY.

In the case of boys and girls of routine ages between 8 and 9 and 12 and 13, inspection of the visual acuity is carried out in order to determine those that have defective vision. Those with defective vision or suspected defective vision are referred to the Eye Clinics where they are more carefully and thoroughly examined by the Area Medical Officers. Special cases are referred to the Eye Specialist Clinics.

The numbers of children inspected by the medical staff and tested for visual acuity are given in the following paragraphs :—

(a) NORTH-EAST FIFE.—The number of children whose eyes were tested for visual acuity was 1969 (948 boys and 1021 girls). It was found necessary to refer 168 boys and 222 girls to the eye clinics for a fuller examination of the eyes, including refraction. The above numbers, however, also included re-examination cases. Some of these clinic cases were further referred to the Eye Specialist for special examination and recommendation. The number so referred was 112 (57 boys and 55 girls).

There was no case where the child's education was suffering and where the parents refused to have the eyes examined. During the session spectacles were provided for two children whose parents had previously refused to supply glasses.

(b) KIRKCALDY DISTRICT.—Buckhaven-Wemyss Area.—There were 1954 children inspected for visual acuity. Of these 136 were referred to the eye clinics and in the case of 69 it was deemed necessary to have them examined by the Eye Specialist. In the case of ten children the parents refused to agree to further examination. Of these, two went to the Royal Infirmary, Edinburgh. The remainder were visited by the Health Visitors and after the advantages of the County Scheme were explained, most of the others agreed to the examination at the school clinics.

Lochgelly Area.—The number of children inspected for visual acuity was 1174 and 122 were referred to the school eye clinics for further examination. Owing to change in medical staff, it was found impossible to examine 25 of the cases referred to the clinics. Of the clinic cases 43 were referred to the Eye Specialist clinics.

Burntisland-Markinch Area.—The total number of children whose eyesight was inspected was 1429 and 51 were referred to the

eye clinics. In the case of two children, the parents would not give their permission. In both these cases the eye defect did not seriously handicap their education and no further steps were taken. The number of children referred to the Eye Specialist was 29.

(c) DUNFERMLINE DISTRICT—Cowdenbeath Area.—There were 1493 children seen at routine examinations and also 37 non-routine cases. Of these 161 children were referred to the ordinary eye clinics and 42 to the Eye Specialist clinics. There were 7 cases where they refused to take advantage of the offer of examination. After interviews, three of the cases made their own arrangements. In three cases with slight visual defects, nothing further was done and one case was held over until next session.

Dunfermline Area.—The total number of children whose eyesight was inspected was 1084. Of these 84 were referred to the eye clinics and eventually 44 were sent to the Eye Specialist clinic. Three parents at first refused but two agreed after interview. The third promised to have the boy examined by his own doctor.

(d) KIRKCALDY BURGH.—The total number of children whose eyesight was inspected :—

Routine	...	...	...	...	...	2303
Non-routine	...	...	...	...	...	150
Re-examination	...	...	...	...	...	371

Of these 571 were referred to the eye clinics for further examination. Many of the vision cards sent home for parents' consent were not returned ; a small proportion of the children concerned were taken to their family doctors, Edinburgh Royal Infirmary, or to local opticians. Sixty-five boys and girls did not keep their appointments made for eye examination. Further, the parents of seven boys and eight girls returned the cards with a definite refusal in writing and the parents of 172 children ignored the repeated intimations to have their children's eyes examined either at the clinic or elsewhere. These cases have been followed up by the Health Visitors and some of the parents have eventually consented to the eye examination and to provide the necessary spectacles.

(e) DUNFERMLINE BURGH.—The number of routine cases inspected for visual acuity was 1536 ; 695 non-routines were also inspected. In all 131 were referred to the eye clinic and 17 were also sent to the Eye Specialist clinic. In only two cases were there refusals to have the eyes examined.

COLOUR VISION TESTING.

Arrangements were again made for the testing of children in the post-primary division of the schools for defects in their colour vision. For this purpose the Drever-Collins Group Test was used. The

following are the numbers of children group tested in the various areas and the numbers of children with some defect of colour vision :—

	No. Inspected.	No. with Defects.
Dunfermline Burgh	819 Boys and Girls.	21 Boys and Girls.
Cowdenbeath	256 Boys.	5 Boys.
West Fife	244 Boys ; 172 Girls.	4 Boys ; 1 Girl.
Lochgelly	244 Boys ; 239 Girls.	7 Boys ; 6 Girls.
Burntisland and Markinch ...	177 Boys ; 166 Girls.	5 Boys ; - Girls.

In Lochgelly individual testing with Stilling's colour tests was also made. Four boys and two girls showed colour vision defects—one boy—deuteranopia, two boys—deuteroanomaly, one boy—protanomaly, one girl—deuteroanomaly, one girl—slight blue defect.

In the North-East Fife, 299 boys and 310 girls were tested by Ishihara Plates. There was one boy with congenital total colour blindness ; 19 boys and 2 girls gave typical red-green blind responses ; 5 boys and no girls made 6 to 9 errors in their replies ; and 26 boys and 22 girls made 3 to 5 errors or had some difficulty with 3 to 5 plates at their first attempt.

SQUINTING (ORTHOPTIC TRAINING).

The work in connection with orthoptic training which was tried on a limited number of cases (7) by Dr Hyde, Area Medical Officer in Lochgelly Area, was continued. The number of attendances made by these cases at the clinic was 46. In addition to these cases, a large number of squinting cases have been fully examined on the synoptophore to distinguish cases of abnormal retinal correspondence, heterophoria, etc. With a view to making it possible for some of the cases to continue the treatment at home, a certain amount of simple instruments such as cheirosopes, amblyoscopes, etc., were provided and have proved of great assistance.

Unfortunately the appointment of Dr Hyde to another post brought this valuable work to a temporary end. It is hoped that a more definite scheme will become available and allow for the appointment of an orthoptic trainer.

Eye Clinics.

(a) County.

At the following school clinics facilities are provided for the more detailed examination of children with errors of refraction :—Torryburn, Dunfermline (Queen Anne School), Cowdenbeath (R. C. High), Kelty, Lochgelly, Auchterderran, Burntisland, Markinch, Buckhaven, Anstruther, St Andrews, Newburgh, Cupar and Ladybank. During the past school year 181 clinics were held by the Area Medical Officers and 807 children (376 boys and 431 girls).

were examined, (257 children were re-examined and there were 318 absentees). The chief refractive conditions found were :—

Hypermetropia	...	...	...	224
Myopia	...	...	...	42
Hypermetropic Astigmatism	...	...	...	282
Myopic Astigmatism	...	...	...	66
Mixed Astigmatism	...	...	...	36
Anisometropia	...	...	...	96
Irregular refraction	...	...	...	4

In 30 cases the eyes were found to be emmetropic and there were 2 cases with spasm of accommodation. The number of squints was 189 and there were 3 cases of nystagmus. There were also 27 cases of blepharitis and conjunctivitis, 16 cases of corneal nebulae, and 20 with other conditions (headaches 5, cataract 4, etc.).

(b) Large Burghs.

In the large burghs the number of eye clinics held was 35 (Kirkcaldy) and 41 (Dunfermline) and at these 132 and 162 children respectively were examined. There were 84 absentees.

The refractive and other conditions found were :—

	Kirkcaldy Burgh.	Dunfermline Burgh.
Hypermetropia	33	57
Myopia	13	31
Hypermetropic Astigmatism	61	41
Myopic Astigmatism	22	10
Mixed Astigmatism	1	11
Anisometropia	1	1
Squints	15	10
Corneal Ulcers and Nebulae	1	3
Other conditions	—	2

(c) Specialist Eye Clinics.

There are two Eye Consultants, Dr Allister M. MacGillivray, Dundee (Kirkcaldy Burgh, Wemyss and North-East Fife), and Dr Robert Sampson, Dunfermline (Dunfermline Burgh, Lochgelly, Cowdenbeath and West Fife), and specialist eye clinics are held at the more important school clinics in the large burghs and throughout the County. Thirty-nine clinics were held by these two consultants and 509 children were examined (County 410, Kirkcaldy 82, and Dunfermline 17). 219 of these cases were re-examined and there were 126 absentees.

The conditions seen by the Specialists were :—

Hypermetropia	...	...	...	109
Myopia	...	...	...	21
Hypermetropic Astigmatism	...	...	...	139
Myopic Astigmatism	...	...	...	114

Mixed Astigmatism	...	...	...	24
Anisometropia	...	...	...	48
Irregular refraction	...	...	...	4
Both eyes emmetropic	...	...	...	18
Spasm of Accommodation	...	...	...	3
Squints	...	...	...	167
Nystagmus, corneal ulcers and nebulae, blepharitis and conjunctivitis	...	...	...	31

There were also 35 other conditions seen (congenital cataract 6, ptosis 4, cataract 4, etc., etc.).

The following reports are by the Eye Specialists :—

Dr ALLISTER M. MACGILLIVRAY, M.D., D.O.M.S.

"I attended 21 clinics at the following centres :—Buckhaven, Markinch, North-East Fife, and Kirkcaldy Burgh. 291 cases were examined, of which 125 were re-examined. The following is a list of the various types of refractive error discovered :—

Hypermetropia	...	...	...	32
Myopia	...	...	...	14
Hypermetropic Astigmatism	...	...	...	89
Myopic Astigmatism	...	...	...	83
Mixed Astigmatism	...	...	...	15
Anisometropia	...	...	...	27

68 squints are included in the above list. Various other ocular conditions were examined and prescribed for.

"The special Sight-Saving class at Kirkcaldy continues to do good work, amply fulfilling its two fold purpose of providing a modified education for those children whose eyesight is very defective, and for those short-sighted children whose myopia would increase to an alarming extent were they educated in an ordinary school.

"I should like to take this opportunity of suggesting that improved test-type illumination might be provided at the various clinics.

"Better waiting-room accommodation at several of the clinics is highly desirable for patients waiting to be examined with their parents.

"The method of heating the clinic at Anstruther makes working here extremely unpleasant owing to the fumes from the gas radiators polluting the atmosphere.

"It should be a great advantage to the medical officers and the patients if these fumes could be eliminated.

"I wish to thank the full-time medical staff and the clinic nurses for their valuable assistance and co-operation during the past year."

Dr ROBERT SAMPSON, M.B., F.R.C.S.Ed., D.O.M.S. (R.C.P.S. Eng.).

"During the year 1936-37 I attended 18 clinics in Dunfermline and West Fife, examining 218 children and re-examining 94. 127 of these cases were hypermetropic in type and 38 myopic. The great majority of the myopes were referred on account of myopic astigmatism rather than on account of a high degree of simple myopia, the latter defect being relatively uncommon in this area.

"The bulk of my work concerns the hypermetropic type of child, of whom a considerable proportion have squint. I have drawn attention to this matter in previous reports, but the facilities for treatment of this defect in Fife remain quite inadequate. Since my last report a clinic for the orthoptic treatment of squint has been commenced at the Dunfermline and West Fife Hospital by means of a grant from the Carnegie Dunfermline Trust, but this clinic necessarily serves the needs of Dunfermline Burgh only. The results so far obtained justify further action by the Fife County Council along the same lines on behalf of the many other children in the District.

"I consider that there is need of the immediate appointment of an orthoptist to collect full information on those cases of squint at present attending school, so that a scheme may be drawn up which would most economically serve the area. This would enable us to select those cases who would be likely to benefit from orthoptic eye treatment, so that further efforts would be directed along profitable lines. Many of our children have been given preparatory treatment at our ordinary clinics, and many parents are disappointed that we are unable to take the further measures necessary to bring about final results. The matter, therefore, is now urgent.

"I need hardly point out that in a scattered community such as we serve, the only centres for treatment sufficiently near the children's homes are the school clinics. Whatever may be the position in large cities, therefore, in Fife we must do the work as a school service.

"I have to thank the Area Medical Officers and the Nursing Staff for their continued enthusiastic help."

(G) Number of Children in Whom Defects of the Ear, Nose, and Throat were Found.

There are at present no arrangements in the County of Fife whereby children with ear, nose and throat troubles can be referred direct to a specialist. Such cases are referred to the family doctor. Unfortunately many of the parents do nothing and it would be more satisfactory if an Ear, Nose and Throat Consultant were available whom the parents could consult at the local clinics. The need for such an appointment is more necessary now that speech therapy

forms a part of the Education Committee's School Scheme. In the Burgh of Kirkcaldy such an arrangement exists and at four clinics held throughout the year, 52 cases in all were referred to the Specialist.

(H) Number of Children with Crippling Ailments.

The Area Medical Officers in their reports on the work for the school year indicate that they have seen and kept under observation 311 cases (County 247, Kirkcaldy Burgh 18, Dunfermline Burgh 46). Of these 117 were old cases (1936—177). Of the new cases seen, those reported on by the County Medical Staff numbered 146 (13 severe rickets, 6 tuberculous lesions of bones and joints, 1 tuberculous lesions of spine, 21 poliomyelitis anterior acuta of crippling degree, 37 congenital deformities of crippling degree, 68 other crippling ailments. In the case of the two large burghs the total figures are Kirkcaldy 15 and Dunfermline 33 (new cases—Kirkcaldy 3, Dunfermline 13).

Orthopaedic Clinics.

Orthopaedic Specialist Cliniques were held at the following clinics :—

Buckhaven	...	...	...	...	2
Lochgelly	...	...	...	...	3
Dunfermline (for West Fife)	...	...	...	...	2
Cowdenbeath	...	...	...	...	1
Kirkcaldy (for Burntisland and Markinch District)	...	...	...	...	3
Cupar	...	...	...	...	2
					<hr/>
					13
					<hr/>

Mr W. A. Cochrane, Consultant Orthopaedic Surgeon, was present to see the cases and to give his recommendations as to treatment. In his unavoidable absence on several occasions, his place was taken by Mr Robert Stirling, Orthopaedic Surgeon. To both these gentlemen the medical staff wish to record their thanks for their courtesy and help.

At these clinics 279 children (131 boys and 148 girls) were seen. Of these 168 were new cases (65 pre-school and 103 school children). Particulars relating to the pre-school children are given in the report on the Maternity and Child Welfare Schemes. As regards the school children (new cases), thirty-seven were recommended for hospital treatment, fifty-one were referred to the school orthopaedic clinics and the remainder (15) were referred for supervision or domiciliary treatment. Extras such as metatarsal bars, raising or changing the heels, calipers, night and plaster splints were also recommended in thirty-two of these new cases. In twelve cases arrangements were made for the taking of radiographs.

Of the re-examination cases (111), ninety-one were of school age. Twenty-one of these were recommended to have hospital treatment, fifty-one were referred to the clinics, and nineteen were to be kept under supervision—two of the latter were considered as definitely cured. The parents of most of the children requiring hospital treatment made applications for the children to be treated at the Princess Margaret Rose Hospital for Cripple Children. The clinic cases were treated at one of the five clinics where orthopaedic treatment is carried out. The clinics and the number of attendances made are as follows :—

Buckhaven	...	1429	pre-school ;	3478	school
Lochgelly	...	891	"	2713	"
Burntisland	...	64	"	577	"
Dunfermline	...	409	"	350	"
Markinch	...	149	"	307	"

The total number of attendances is 10,367 (7,425 school and 2,942 pre-school children). The work of the clinic is in the hands of an orthopaedic nurse, a masseuse, and members of the gymnastic staff help both at Buckhaven and Lochgelly Clinics. The treatment includes massage, remedial exercises, electrical treatment, also radiation by infra-red and ultra violet rays lamps. Where necessary, adjustments are made to the calipers, night splints, and other orthopaedic apparatus.

The Orthopaedic Scheme in Fife which had been in contemplation for the past ten years was drawn up a few years ago with the guidance and help of Mr Cochrane, our Consultant Surgeon. The main aims of this scheme are to discover all cases with defects that may eventually cripple the children; to provide expert advice and guidance; to make arrangements for the treatment of the cases either at a central orthopaedic hospital or at a local clinic or even a certain number of cases at the home (domiciliary treatment).

Any new orthopaedic scheme must necessarily begin with a large percentage of cases requiring hospital treatment and in the 1936 report the percentage of cases requiring hospital treatment was as high as 69·4 per cent. The figures for clinic and supervision (and domiciliary treatment) being 19·4 and 11 respectively.

The comparable figures for the new cases (168) seen in 1937 are 47·9 (hospital), 34·7 (clinic) and 17·3 (supervision, etc.). Whilst a further drop in the percentage figure for hospital cases may be expected next year, it will certainly not show any marked difference and further big reductions need not be expected for some years to come. Further reductions would be expected more quickly if more clinic work could be overtaken. By this I mean more actual treatment per case. At present a large number of treatments are given. This is necessitated by the large number of cases at the

clinics requiring treatment and the reluctance of the staff to embark on a scheme of discrimination. By selecting certain types of cases and concentrating on these, it would no doubt be possible to demonstrate the greater value of a more complete and thorough scheme but such a scheme would meet with a considerable amount of criticism, especially by the parents of children who might be refused treatment.

A larger clinic staff would not only make it possible to increase the amount of time and treatment per case and so not only accelerate improvement in the cases but will also tend to prevent deterioration in the condition of the child—a state of affairs that is alas more frequent at present than should be the case. As pointed out in my memorandum last year, a more adequate staff would also be able to do more on the preventive side by propaganda and general education of the public.

It is therefore regrettable that the County Council were not able to increase the financial grant for the orthopaedic scheme and so allow the possibility of additional orthopaedic staff being appointed. The high percentage of cases requiring the more expensive type of treatment (in hospital) makes it impossible to expect any relief from that quarter.

In addition to the cases treated at the orthopaedic clinics there are also a number of "domiciliary" cases. These are mainly cases at a distance from clinics and therefore cannot be treated there. The number of such domiciliary cases was 45 (St Andrews area 13, Cupar area 15, Anstruther area 11, rest of Fife 6). Whilst a few of these cases were given massage and electrical treatment, the others could only be given supervision and in the case of four of them, "plasters" had to be applied. It will thus be seen that our present inadequate scheme makes it impossible to give much treatment and even the amount of supervision cannot be considered sufficient.

When we examine the 168 new cases seen by Mr Cochrane, it is seen that there is a large variety of conditions requiring attention. If we group them we find there are 26 cases in which faulty posture is the outstanding condition. In 52 cases the chief defect relates to the foot—*e.g.*, clubfoot (9), metatarsus varus (9), flat foot (9), clawfoot (10), etc.; deformities of lower extremity (apart from foot) accounted for 14, *e.g.*, knock knees (5), bow legs (9); paralytic conditions numbered 32—spastic paralysis (8), poliomyelitis (18), etc.; old fractures (8), wry neck (6), dislocation of hip or hips (7); and a miscellaneous group of conditions such as Erb-Duchenne paralysis, Sprengel shoulder, Osgood-Schlatter disease, pseudo-hypertrophic paralysis, keloid, etc., etc.

V. MENTALLY AND PHYSICALLY DEFECTIVE CHILDREN.

(a) Special Schools and Classes.

The following were the numbers of children on the Rolls of the various Special Classes in September, 1936 :—

Auchterderran East	...	...	...	...	...	17
Castlehill, Cupar	...	...	...	...	...	12
Crossgates	...	...	...	...	...	39
Culross	...	...	...	...	...	13
Denbeath	...	...	...	...	...	68
Eastbank, Kirkcaldy	...	...	...	...	...	69
Leslie East	...	...	...	...	...	11
Lochgelly East	...	...	...	...	...	18
McLean, Dunfermline	...	...	...	...	...	45
Myope Class, North School, Kirkcaldy	...	...	...	...	...	12

304

During the year, 30 children were admitted to these classes and 80 discharged.

In last year's report reference was made to the need for a group test to be given to children attending the ordinary school classes, such a test having for its object the detecting of children who are so backward that special arrangements should be considered for their education. Unfortunately on account of pressure of work in the Education Offices, it has been found impossible to proceed with the work. It is expected, however, that a beginning will be made shortly after the commencement of the new school year.

Class for Partially Sighted Children.

There is only one "Sight-Saving" class and this is situated in the North School, Kirkcaldy. Whilst the bulk of the children attending this class come from Kirkcaldy, a fair proportion is drawn from the landward districts of Kirkcaldy. The children admitted to this class are children in whom there is a defect of vision of such a nature that they are unable to benefit fully from the instruction in the ordinary classes. All these cases are examined by the Eye Specialists who must satisfy themselves that the cases they recommend for the Sight-Saving Class are children whose vision may more seriously deteriorate if not placed in such a special class. These children are in the main children of average ability, although a few may be educationally retarded and occasionally a very bright child may also be in the class. Children with defective vision in whom there is also definite mental defect are not placed in this class but in a special class for mental defectives and in such cases special arrangements are made to help them to overcome their visual defect.

As reported in the last report, a new teacher has taken charge of this class and I herewith append a short report on the work of her class. From this it will be seen that the blackboard facilities are limited and something should be done to remedy this definite lack of blackboard space. It is also unfortunate that owing to lack of a proper screen, full use of the Epidiascope was not possible. This is particularly a disadvantage to the older pupils for whom this means provides a bigger variety of education without the teacher requiring to laboriously draw out or write out in large writing on blackboards the various subjects which it is intended to present.

Repeated attempts have been made to try and establish another Sight-Saving Class—one for the West of Fife area—but to date the number (and spread) of cases suitable for such a class has been too small to be able to be collected conveniently at one centre.

Report by Mrs B. S. Chalmers, Class Teacher, Sight-Saving Class.

This class is attended by 12 children, 4 of whom come in from outlying districts. There are 8 girls and 4 boys in the class, their ages ranging from 7 to 14 years.

The work of this class is being well maintained and each child is making satisfactory progress. A record of the work of each section is kept. Every precaution is taken to preserve the vision of the pupils and all lettering, either in reading or writing, is kept large to avoid eye strain.

The amount of reading done each day is unavoidably curtailed owing to the small portion which can be printed on the blackboard. As I feel that the senior pupils are being deprived of the pleasure which sighted children derive from reading, it would be a great advantage if suitable books printed in a large and clear type could be obtained.

The children are exceptionally keen on Handwork. The work performed during the year consisted of mat-making, bead work, cane work and large knitting. The pupils showed clear evidence of careful application and a commendable degree of skill.

The Epidiascope was not used as freely as I would have wished owing to the room not being effectively darkened. I understand, however, that another room has been fitted with dark curtains, only the screen and the stand for the Epidiascope have not yet arrived.

It would be a further advantage if the classroom could be provided with another line of wall blackboards and a second movable blackboard. The wall blackboards and a few of the pupils' blackboards are in a very glossy condition at present and it is absolutely necessary to have these resurfaced in order to further save the vision of the pupils.

Speech Therapy.

The satisfactory results obtained by the speech therapists in Kirkcaldy and Dunfermline raised the question of such help being required in other areas of Fife. A survey was first instituted in Wemyss Area and later in Cowdenbeath-Lochgelly area. The number of children reported to have speech defects was as follows :—

		Stammering.	Faulty Articulation, Etc.
(1) Leven and Kennoway Schools (5) ...	...	15	53
Wemyss Schools (3) ...	...	3	12
Buckhaven Schools (6) ...	...	45	70
		—63	—135
(2) Cowdenbeath (6) ...	...	26	63
Kelty (4) ...	...	8	38
Crossgates (6) ...	...	8	40
Lochgelly (4) ...	...	14	34
Glencraig (4) ...	...	24	29
Auchterderran (5) ...	...	28	28
		—108	—232

Taking these figures into consideration, the County Education Committee agreed to appoint two additional speech therapists—one for Wemyss-Buckhaven area and the other for Cowdenbeath-Lochgelly area.

(b) Institution Cases.

In September, 1936, the following number of children from Fife were in various Institutions :—

Baldovan (M. D.) ...	...	2
Larbert (M. D.) ...	...	11
St Joseph's, Rosewell, Midlothian (M. D., R. C.) ...	...	4
Royal Blind Asylum, Edinburgh ...	...	8
Institution for Blind, Dundee ...	...	4
Donaldson's Hospital (Deaf), Edinburgh ...	...	14
Royal Institution for Deaf, Edinburgh ...	...	8
Institution for Deaf, Dundee ...	...	5
Lauder Road Home (Cripples), Edinburgh ...	...	1
St Vincent's School, Glasgow ...	...	1
Colony School, Bridge of Weir ...	...	1
		—59

During the year further 16 children were admitted and 14 discharged, and thus the total at the end of the session was 61.

Under the Blind Persons Act, 1920, the Education Committee was responsible for the training of persons at Edinburgh Royal Blind Asylum and at Dundee Blind Asylum. At September, 1936, there were two trainees in Edinburgh. No cases were admitted and none discharged during the session. There were no cases in Dundee at September, 1936, but one case was admitted during the session.

VI. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE OF CHILDREN.

(a) Physical Education.

The report on Physical Education by Mr A. C. W. George, Superintendent of Physical Education to Fife County, is given below. In connection with his report I wish to draw attention to his remarks on suitable foot-wear for children at the gymnastic lesson. In the section on Accidents it will be seen that a further increase in the number of accidents in gymnasia is recorded and that the chief cause (87·4 per cent.) of these accidents was the presence of splinters. In last year's report this matter was discussed in detail and it was shown that the quality and grain of the wood was an important contributing factor. There can be no doubt that if the children who cannot afford to bring suitable gymnastic shoes were supplied with them by the Authority, a considerable reduction in the number of such accidents would take place.

Report by the Superintendent of Physical Education.

GENERAL.—The publicity given by the Government's Physical Fitness Campaign has had a reflection upon the work carried on in our schools. While great progress appears to have been made in communities abroad, we, in our own way, are accomplishing a great deal. The crying need at the moment is for Playing Fields and this is a matter which does not seem to have been dealt with in a very satisfactory manner because of the lack of co-operation between the Local Authorities and the Education Committee. It is indeed tragic to think that in Cowdenbeath and Buckhaven there are practically no facilities for the games of our young men, of our young women and of our children. It should be realised, however, that in the areas mentioned it is of the utmost importance that the Education Committee as well as the Town Councils concerned should each provide the necessary facilities for games. The Education Committee is to be congratulated upon having made suitable provision for games when purchasing the site for the new Dunfermline High School. It is believed that the time has now arrived when a playing field will be considered a necessary adjunct to every school built in the future.

CLOTHING.—In order that the pupils may benefit from Physical Training it is very important that they should wear the minimum of clothing and that they should wear suitable foot-gear. The ideal dress for girls is blouse and shorts. This gives greater freedom of action and is much more comfortable than the gym-tunic. Dress for boys consists of shorts and singlet. The question of suitable footwear is one which has given rise to a considerable amount of

disquiet. In the interests of safety, pupils on no account should be permitted to participate in a Physical Training lesson while wearing outdoor leather-soled shoes or boots. As Physical Training is obligatory, the pupils must either wear rubber-soled shoes or soft slippers; if the pupils do not possess such foot-wear they must work without a protective covering. Many of the floors in our gymnasia are in a positively dangerous condition and the Education Committee sooner or later will have to face the question of providing suitable footwear for children whose parents are in necessitous circumstances.

The Teaching of Physical Education in Schools.

PRIMARY DEPARTMENTS.—There has been a general improvement in the standard of work and this is due to the increased time which is now given to Physical Training. It is rather surprising to discover that many class teachers have difficulty in carrying out team work satisfactorily.

It is again suggested that where no hall is available for Physical Training purposes, consideration should be given to the question of extending existing play-sheds.

POST-PRIMARY DEPARTMENTS.—The standard of work, on the whole, is good. The importance of posture training is fully realised and its result is seen in the bearing of the pupils.

Greater use is being made of spray baths but full advantage cannot be derived until the present method of having permanent divisions between the spray cubicles is departed from and until the spray system is altered.

GYMNASIUM EQUIPMENT.—The Education Committee set aside some £400 for the provision of additional gymnasium equipment. Modern beams displaced old and dangerous beams. Gymnasium mats were provided for many of the primary schools to the delight of the pupils and to the relief of the teachers concerned.

GYMNASIA.—Consideration is meantime being given to the provision of gymnasia necessary in consequence of the extension of school age. It should be realised, however, that gymnasia are required by the schools concerned at the present moment.

The use of gymnasia for anything other than Physical Training purposes is deprecated.

PLAYING FIELDS.—The whole position in regard to matters affecting playing fields is meantime being investigated by the County Council. It is hoped that a solution to this problem will be found which will be satisfactory to all.

(b) **Spray Baths in Schools.**

Schools.	No. of Children.	No. of Baths taken.
McLean Special Classes	33	425
King's Road Public School, Rosyth ...	256	1490
Park Road Public School, Rosyth ...	Nil.	—
Crossgates School (Ordinary Classes) ...	48	594
Crossgates School (Special Classes) ...	40	396
Cowdenbeath Secondary School	245	638
Cowdenbeath R. C. High School	100	750
Cowdenbeath Moss-side (Girls)	371	3050
Kirkcaldy High School	305	1448
Sinclairtown School, Kirkcaldy	No record.	373
Eastbank Special Classes, Kirkcaldy ...	120	975
Methilhill Public School	None given.	
Bell-Baxter School, Cupar	190	920
Newburgh H. G. School	90	1130
Waid Academy, Anstruther	159	1060
	<hr/> 1957	<hr/> 13,249

The above figures—1957 children and 13,249 baths—show an increase in the number of children but a diminution in the number of baths taken. The respective figures for 1936 were 1675 and 16,085. The relatively colder year may be responsible for the drop in the total number of baths. Considering the conditions under which these spray baths have to be given—inadequacy of numbers or unsuitable lay-out—the school staffs deserve great credit for the number of children they encourage to take this form of health-giving activity. As has been pointed out in previous reports, an inadequacy in the number of baths makes it impossible for any teacher to combine these ‘baths’ with the gymnastic lesson. There still seems to linger in the minds of the public that these baths are for cleansing purposes. Actually this should only be of secondary importance except where these baths are used after games and where mud has to be removed. The association of the spray baths with the gymnastic lesson, however, is primarily to increase the ‘tone’ or reactivity of the skin blood vessels—it also stimulates the metabolism or chemical changes in the body and so helps not only to produce a feeling of well-being but also makes a child keep fitter. Children taking these sprays—warm to cold—are less likely to be chilled after having taken a spray bath than they would after the usual slipper bath. The use of spray baths will therefore help to prepare the body not only to meet its daily requirements but also to meet any extra work it may be put to. It is for these reasons that I have always been a strong advocate for the introduction of spray baths in the schools and in association with the gymnastic lessons.

If, however, this is to be the policy of the Education Committee, it is essential that there should be an adequate number of spray baths available for each gymnasium. The minimum number to be considered at all adequate should be ten. A larger number, *e.g.*, fifteen, would, of course, allow a class of 30 boys or girls to be put through in a shorter time, but even with ten, the 'sprays' can be used in conjunction with the gymnastic lesson and allow plenty time for each activity. If for financial reasons it is considered that ten 'sprays' is too large a number to be placed in a school, then spray baths should be dispensed with, as a smaller number than ten, *e.g.*, 3-5, must be considered uneconomical in time and only for use as a side-show. Dissociated from the physical activities of the gymnastic lesson, its physiological value is very much reduced. There is also not the same interest taken in it by the staff or the pupils and consequently only occasional use is made of these spray baths.

VII. MOTHERCRAFT CLASSES.

These classes, taught by members of the Welfare Nurses' staff, were again held during the past school session. The classes held were as follows :—

(1) Kirkcaldy High School (Nurse Petrie).—Thursday, 9 a.m. to 2.40 p.m. In the five classes the number of pupils (aged 13-15 years) was 19 to 23. Nurse Petrie states that "the classes at above school are satisfactory; the ages of the groups are good. Some pupils continue their tuition for two years; the majority have at least one year."

(2) Viewforth School, Kirkcaldy (Nurse Petrie).—Monday, 9 a.m. to 12.45 p.m. In this school there are twelve classes, one group of six on Monday and the second group of six the following week. The numbers vary between 16 and 26 except in one class of five pupils. Nurse Petrie reports that "the one disadvantage at this school is the method of alternate week's tuition; it is only very bright pupils who return their work satisfactorily. Apart from this, the equipment and conditions which the pupils work under are all that are to be desired, although the numbers are at times rather large for the small kitchen."

(3) Queen Anne School, Dunfermline (Nurse Petrie).—Wednesday, 9 a.m. to 12.45 p.m. The classes (two) are held in a hut at Wothers Alley—"it serves the purpose well, as it is equipped with all the necessary requirements. The pupils show great interest in their work and as each class has almost two consecutive hours' tuition weekly, much work can be overtaken."

(4) Inverkeithing Public School (Nurse Petrie).—Tuesday, 2-15 to 3.45 p.m. There are two classes—one backward (pupils at different stages) and one ordinary. The numbers vary from 11 to 18. Nurse Petrie reports that "it is difficult to maintain perfect discipline

in a class where the pupils are at different stages of the work. On the whole the interest taken by the pupils in their work is very good and their practical work is also good."

(5) Lochgelly H. G. School (Nurse Petrie).—Monday, 2.30 to 3.10 p.m. "The pupils, although backward groups, show very keen interest in their practical work and it compares very favourably with that of the other pupils whose mental outlook is on a higher level. The equipment for this school is complete."

(6) Buckhaven High School (Nurse Simpson).—Thursday, 1.45 to 4 p.m. The number of pupils in the two classes varied from 15 to 25. Nurse Simpson has the class for two terms. "The girls in the main have been quite interested and attentive." "Better results could be obtained with smaller classes and if one had more equipment."

(7) Leven H. G. School (Nurse Bisset).—Tuesday, 9.45 to 12.35. Five classes of 18-21 pupils.

(8) Aberhill School (Nurse Kellock).—Friday, 9.30 a.m. to 1 p.m. Three classes of 11 to 22 pupils—average age $13\frac{1}{2}$ years. Nurse Kellock, while indicating that the girls on the whole made fairly satisfactory progress, feels "that with better facilities for practical work, the results would be much more satisfactory."

(9) Moss-side School, Cowdenbeath (Nurse Caithness).—Thursday, 9 a.m. to 12.50 p.m. There were five classes with 18 girls to begin with but the numbers "dwindled to nearly half owing to the girls leaving school." Nurse Caithness reports that "I find that the girls are keen and interested in the work (especially the practical work) if they have not had a previous term of the work." "I would not say that the girls are so efficient in the work that they require only one term, but I do find that during a second term they seem to lose interest. These girls also are more difficult to manage." The approaching leaving of school probably is the unsettling cause.

(10) Cowdenbeath R. C. High School (Nurse Robertson).—Monday, 9.15 a.m. to 12.5 p.m. Three classes and the numbers varied from 8 to 15. As much practical work as possible is given to these girls. "Now that an extra doll and bath are being provided, greater facilities will be given for this part of the teaching."

VIII. ARRANGEMENTS FOR FEEDING AND CLOTHING SCHOOL CHILDREN.

From the statement of expenditure on Meals and Clothing for the year ended 15th May, 1937, the amounts incurred are as follows:—

(1) Cost of Apparatus	...	...	...	£18	3	0
(2) Meals (Necessitous Cases)	...	...	...	135	5	3
(3) Boots and Clothing (Necessitous Cases)	...	...	...	1549	14	2
(4) Meals for Non-Necessitous Cases	...	...	...	1211	11	0
Total	...	...	...	£2914	13	5

Boots and Clothing.

The arrangements for the inspection of school children suffering from malnutrition or defective boots and clothing were the same as last year. During the past school session the following cases were found at inspection :—County 119, Kirkcaldy Burgh 21, Dunfermline Burgh 0.

The number of cases brought forward by the headmasters, teachers and parents were :—County 153, Kirkcaldy Burgh 92, Dunfermline Burgh 13—a total of 258.

Out of this total of 398 children, 108 (all County cases) were recommended to have special nourishment in the form of some malt preparation, 4 were given special nourishment and milk, 189 were given milk (County 73, Kirkcaldy 103, Dunfermline 13), and in 43 cases meals were provided (County 33, Kirkcaldy 10, Dunfermline 0).

In the case of boots and clothing, the majority of the cases (3326) were brought forward by the headmasters as applications made by the parents. Of these 2626 were in the County, 472 in the Burgh of Kirkcaldy, and 228 in the Burgh of Dunfermline. At medical inspection only 64 cases were found (County 56, Kirkcaldy 8) where the children were in need of boots and clothing. The recommendations of the medical staff were as follows :—239 were recommended for clothing only (County 205, Kirkcaldy 27, Dunfermline 7), 353 were recommended for boots only (County 243, Kirkcaldy 73, Dunfermline 37), and 2602 were indicated as requiring both boots and clothing (of these 2160 were from the County, 258 from Kirkcaldy Burgh and 184 from Dunfermline Burgh). Forty " Other " recommendations were made in respect of County cases.

It should also be mentioned that amongst school children, 133 were recommended to have spectacles (County 99, Kirkcaldy Burgh 34). Spectacles were also repaired in one case.

IX. ARRANGEMENTS FOR MEDICAL TREATMENT.

(a) Minor Ailments.

(a) NORTH-EAST FIFE.—The clinic arrangements are still inadequate in St Andrews. A temporary arrangement has been promised but so far nothing has been done. It seems that nothing is likely to be done until the new school is built to which a clinic is to be attached.

The new clinic in Tayport is under construction and it is expected that it will be available early in the new session.

(b) KIRKCALDY LANDWARD DISTRICT—Buckhaven-Leven.—The new clinic is well advanced in construction. Unexpected delays, however, have held up the progress of the work and it will be some time in the new school year before it will be available for use.

At East Wemyss nothing further has been done to improve the clinic facilities. As there is no surplus accommodation in the school, it will be necessary to build if the clinic accommodation is to be increased.

Burntisland-Markinch.—The clinic accommodation at Burntisland is unsatisfactory and it has been agreed to reconstruct the present premises. By the inclusion of a staff-room in the reconstruction, it is hoped to provide clinic rooms which will meet the immediate clinic requirements. Lack of building space or free accommodation in the school has prevented a more generous scheme being considered.

At Markinch the clinic is rather cramped for space. As the room has to be used by different members of the staff, it is obvious that there is no elasticity in the time-table arrangements. It is hoped that increased clinic facilities will be considered at an early date.

The clinic arrangements at Auchtermuchty have had to be cancelled owing to the difficulty of obtaining any suitable free accommodation. Meantime temporary arrangements for dental treatment have been made at Falkland School. A plan was suggested for increasing the clinic facilities by building against some of the present school buildings but is not likely to be agreed to by the Education Department.

Lochgelly Area.—The work of the general clinics is progressing satisfactorily. The Area Medical Officer, however, finds it impossible to attend regularly at these clinics owing to pressure of other work.

(c) **DUNFERMLINE LANDWARD AREA**—Cowdenbeath Area.—Whilst the two clinics can be considered as partially satisfactory, the extension of both clinics is a matter requiring early consideration.

West of Fife Area.—The clinic arrangements at Blairhall must still be considered unsatisfactory.

Clinics (County).

There were 2122 clinic visits made by the Welfare Nurses; 9801 new cases were treated and these made 44,928 attendances at the school clinics. The number of cases and the attendances for the various main conditions were as follows :—

	New Cases.	Attendances.
Head Vermin	16	58
Body Vermin	—	—
Ringworm (scalp)	2	18
Scabies	149	495
Uncleanliness or neglect	9	10
Impetigo Contagiosa	1322	7182

	New Cases.	Attendances.
Other skin conditions	216	1580
Otorrhoea	271	4852
Eye disease (external)	415	5509
Ear cases	189	607
Nose and throat cases	51	314
Cuts and bruises	2855	6470
Septic conditions	2789	8789
Accidents	188	565
Advisory Cases	165	173
Tuberculin inunction cases	95	3535
Other Cases	1069	4771
	<hr/> 9801	<hr/> 44,928
	<hr/>	<hr/>

The clinic figures for the school year 1936-7 show a decrease both in number of cases and of attendances. Scabies shows an increase and the figures are also up for cuts and bruises. Otorrhoea or "discharging ears" is down in number and so is impetigo contagiosa. The figure for head vermin cases is also reduced and ringworm of the scalp is only represented by two cases—the lowest figure yet attained since the Fife school clinics were established fourteen years ago.

A detailed analysis of the work carried out in the various clinics throughout the County of Fife is given in Appendix I.

The work of the orthopaedic clinics is given in an earlier part of the report.

(b) Dental Treatment.

County.

A notable advance in the dental scheme took place during the past year by the appointment of two additional dental officers. These appointments, which increase the whole-time dental staff to six area dentists, are to meet the increasing demands for the dental treatment of school children, of pre-school children, of nursing and expectant mothers, public assistance cases and of Police cases. They will probably meet these requirements for the next three or four years but it was acknowledged by the Committee that more dental officers would eventually require to be appointed.

Following on these new appointments it was found necessary to reallocate and rearrange the areas. The six areas with clinics are as follows :—

(1) WEST FIFE AREA.—This includes the clinics of Kelty, Crossgates, Inverkeithing, Torryburn and Blairhall. The landward area of Saline is also part of this area. The approximate school population is 5,200.

(2) COWDENBEATH-AUCHTERDERRAN AREA.—There are only two clinics, namely, Cowdenbeath and Auchterderran. It is also intended to set up a sub-clinic at Kinglassie School. The rural schools of Auchtertool and Chapel have also been allocated to this area. The school population is reckoned at 5,100.

(3) LOCHGELLY-BURNTISLAND AREA.—Here we have three clinics—Lochgelly, Crosshill and Burntisland. The school population is about 5,050.

(4) BUCKHAVEN-LEVEN AREA.—This area also includes the semi-rural area of Colinsburgh and there are two clinics—Buckhaven and Leven. Elie is a sub-clinic for Colinsburgh area. The approximate school population is 5,550.

(5) MARKINCH-WEMYSS-ANSTRUTHER AREA.—The clinics here are Markinch, Methilhill, East Wemyss and Anstruther. The school population is nearly 5,300.

(6) NORTH-EAST FIFE AREA.—This embraces the districts of St Andrews, Cupar, Newport, Newburgh, Ladybank and Falkland and there are clinics in each of these districts. The clinic for Newport district is, however, at Tayport. The school population is approximately 6,550.

The increasing and greater variety of treatment, called for at the clinics, in turn makes it necessary to consider a scheme of gradually making these clinics capable of meeting those requirements. In the West of Fife the dentist reports that "The Kelty clinic is totally inadequate for the amount of work done there. It is very small in size and poorly lighted. In addition there is no waiting-room for the children which is very inconvenient." She might also have added that there is no recovery room, which also can be very inconvenient. At Blairhall the facilities are also very poor, the clinic work here having to be carried out in the school cookery and laundry room.

In Cowdenbeath the clinic is also inadequate for the dental work that has to be done here and this applies especially to its use for the giving of general anæsthesia.

The Burntisland dental clinic is also too small for its purpose. A reconstruction of the clinic premises (general and dental) has been considered and approved.

At Markinch an extension of the clinic facilities is under consideration and if the suggestions are approved, it will mean improved facilities for the dental clinic also.

In Buckhaven area the dental treatment facilities are being increased when the new welfare clinic at Barrie Street, Methil, is opened. This clinic will provide facilities for treatment for the

children of Aberhill and Methil schools and reduce the amount of travelling. The pre-school children attending the Nursery School in Methil will also be treated at this new clinic.

The following figures indicate the total dental work carried out by the Area Dentists in the County of Fife.

During the school session of 1936-37, there were 20,750 school children inspected throughout Fife—these inspections necessitated 150 school visits. Of these, 1823 had sound teeth, or about 8·7 per cent.; 11,646 had 1-4 defective teeth; 5,295 had 5-8 defective; and 1986 had 9 or more defective teeth. The number of children referred to their parents as requiring dental treatment was 18,927 or 91·2 per cent. of the total inspected. The number of parents who indicated that they wished dental treatment carried out at the school clinics was 7,612 or 40·2 per cent. 11,197 indicated that they wished treatment by their "Own Dentist." Seventy-three refused to have treatment and 45 cards were not returned. In Lochgelly area 146 children were reinspected and of these 142 were referred for treatment—a further 42 children accepted treatment.

The treatment of school children is mainly carried out in the school dental clinics. In rural areas, however, treatment may be given in the school attended by the child. For this purpose 80 school visits were made and 1416 children received 3,382 treatments, 1817 extractions, 171 dressings, 1144 fillings, etc.).

The number of clinic sessions was 2,084—this includes 15 clinics for extractions under general anaesthesia. *The total number of children treated was 10,082 (making 17,037 attendances) and they received 43,363 treatments (4·3 per child).*

The attendances are made up as follows:—1,648 casual cases who received 3,219 treatments (1·9 per child) and 15,389 appointments, receiving 40,144 treatments (2·6 per child).

The number of treatments given in the various clinics are indicated in the following table:—

	Extractions.	Dressings, Fillings, Scalings, etc.	Total Dental Operations.
Cupar	656	955	1611
Tayport	405	464	869
St Andrews	551	805	1356
Anstruther	291	237	528
Newburgh	415	402	817
Ladybank	274	376	650
Auchtermuchty	156	171	327
Lochgelly	2065	1261	3326
Crosshill	1511	986	2497
Auchterderran	1311	1140	2451
Inverkeithing	867	998	1865
Burntisland	1046	1063	2109
Buckhaven	1364	1493	2857
Leven	1396	1562	2958
Markinch	951	675	1626
East Wemyss	539	213	752
Methilhill	678	298	976
Elie	111	120	231
Leslie	83	46	129
Cowdenbeath	2676	1859	4535
Kelty	1433	774	2207
Torryburn	1130	759	1889
Crossgates	1048	525	1573
Blairhall	539	378	917
Tulliallan	289	201	490
Kinglassie	272	120	392
	<hr/> 22,057 <hr/>	<hr/> 17,881 <hr/>	<hr/> 39,938 <hr/>

A further analysis of the figures submitted by the dental staff gives more detailed information of the work done. There were 676 extractions carried out without an anaesthetic—672 of these teeth were temporary and very easily removed. In the case of the teeth extracted with a local anaesthetic, 19,012 were temporary or milk teeth and 3866 were of the permanent set. The number of teeth extracted under a general anaesthetic was 320. The percentage of extractions to the total number of dental treatments is 55.5.

The analysis of the figures for conservative treatment in Fife is as follows :—The number of dressings was 3489 and 3160 of these were for permanent teeth. The total number of fillings inserted into teeth was 7904 (3364 “cement,” 3871 “amalgam,” and 669 “silicate” fillings). There again the greater number (5910) was for permanent teeth. The treatment of the teeth with silver nitrate has for its object the inhibition or holding up of dental disease but its effects cannot be lasting. This method of treatment is therefore much applied in the case of temporary teeth and requires to be repeated after certain intervals. There were 6545 such treatments given (4907 temporary and 1638 permanent teeth). Scaling of teeth or the removal of “tartar” was carried out in 1095 cases—practically all on permanent teeth. Besides the foregoing dental

operations, there were also other dental operations such as "regulation of badly placed teeth, etc.

Along with the school children, every encouragement is given for mothers to bring pre-school children to the dental clinics and during the past year 524 were treated at the school dental clinics.

Large Burghs (Kirkcaldy and Dunfermline).

KIRKCALDY.—During the past school year the number of children inspected was 1590. Of these 104 (or 6·5 per cent.) had sound teeth. The number referred for treatment was 1486 and 873 of these (58·7 per cent.) accepted school dental treatment. For the purposes of these inspections the number of school visits by the dentist was 10 and the clinic visits numbered 474. The total dental treatments was 10,505 and is made up as follows :—Extractions 2673, dressings 1324, fillings 1705, silver nitrate and scalings 3424, others 1379. The number of casual cases was 1165 and there were 2993 appointments. 272 appointments were not kept.

DUNFERMLINE.—The total number of treatments in Dunfermline Burgh was 13,210 and was made up as follows :—Extractions 3304, dressings 735, fillings 4257, silver nitrate 3533, scalings 1304, others 77. More detailed information is given in Dr Emslie Smith's Report to the Carnegie Dunfermline Trust.

X. ACCIDENTS IN SCHOOLS.

1. Minor Accidents.

Information regarding the number of accidents that occurred on school premises during the school year was received from practically all schools (157) with the exception of Foulford, Moss-green, Saline, Kinghorn and New Gilston. In one school, Dunino, there were no accidents.

The total number of accidents which required first-aid treatment was 12,655, showing a further increase over last year (10,206). Of these accidents, 2,422 occurred in gymnasias and places used for gymnastic purposes, 3,045 in classrooms, and 7,188 in the playground or outside the school buildings.

(a) **GYMNASIA.**—A further increase in the number of accidents in gymnasias has to be recorded (1,282 in 1935-6)—the figure 2,422 is nearly twice as great as that of 1935-6 (1,282). The chief cause of the accidents was "splinters"—the number being 2,119 or 87·4 per cent. of the total. The schools with outstanding number of splinter accidents were :—

Lumphinnans	...	...	...	...	...	480
St Leonard's, Dunfermline	...	...	...	...	...	436
Ballingry	...	...	...	...	...	210
Viewforth, Kirkcaldy	...	...	...	...	...	94
Glencraig	...	...	...	...	...	80
Leven H. G.	...	...	...	...	...	80
Lochore R. C.	...	...	...	...	...	78
Coaltown of Wemyss	...	...	...	...	...	65
Pittenweem	...	...	...	...	...	50
Townhill, Dunfermline	...	...	...	...	...	25

With the exception of Pittenweem, the names of these schools were in last year's list. Any reduction in numbers is simply due to planing of the floor but in a few years the number of splinters accidents will be up to its former heights. This is well shown in the case of Townhill School (1933—64, 1934, after planing—a few ; in 1935—130 ; in 1936—293 ; after further planing, 1937—25). As pointed out in last year's report the two main causes responsible for these splinter accidents are (1) central halls used as gymnasias, and (2) poor or unsuitable ' quality ' of wood.

The other accidents occurring in gymnasias were cuts and bruises 224, sickness 46 and others 33.

(b) CLASSROOMS.—In the classrooms the number of recorded accidents was 3045, an increase over last year's figure (2,466). Cuts (1,171) and bruises (188) form a big proportion of the cases. Sickness and fainting come next—934 ; burns 248, splinters 202 and other causes 302. The outstanding schools for cuts are Viewforth 147, Bell-Baxter 83, Kirkcaldy High 65, Leven H. G. 63, Aberhill 58, Auchterderran 54, Sinclairtown 50. In the case of sickness, Kirkcaldy has the highest number—141. Next come, Buckhaven High 60, Lochgelly South 51, Lochgelly H. G. 40, Commercial (Dunfermline) 42, Leven H. G. 31, and Lumphinnans 30.

(c) PLAYGROUNDS.—Here also an increase in the number of accidents is shown—7,188 (5,764 last year). Cuts (3,168) and bruises (3,139) form 87 per cent. of the total. The schools with outstanding numbers of such cases are :—

Sinclairtown	...	...	...	341	(227)		
Pathhead	...	...	...	231	(164)	(226)	(113)
Dysart	...	...	...	182			
Burntisland H. G.	...	...	...	174	(237)	(200)	(250)
Glencraig	...	...	...	165	(120)	(80)	(110)
Culross	...	...	...	143	(140)	(110)	(127)
Crossford-Cairneyhill	...	...	...	133			
Markinch	...	...	...	123	(123)		
Rosyth R. C.	...	...	...	122			
Leslie H. G.	...	...	...	120			
Lumphinnans	...	...	...	118			

For comparison the numbers in previous Reports are given in brackets (1936) (1935) (1934).

2. Major Accidents.

The number of major accidents recorded was 170. For convenience major accidents are defined as those requiring medical attention. Of these 15 were reported as having occurred in gymnasia, 28 in classrooms, 119 outside, and 8 as not known where they occurred. The schools with outstanding numbers of major accidents are:—Viewforth, Kirkcaldy 12, Burntisland H. G. 10, Sinclairtown 10, Dunfermline High 8, St Margaret's, Dunfermline 9, Leslie H. G. 7, Bell-Baxter 6, Aberhill 6, Denbeath 6, Markinch 6, and Inverkeithing 6.

XI. CHILDREN AND YOUNG PERSONS (SCOTLAND) ACT, 1932.

(a) Probation Cases.

The close co-operation between the probation officer, Mr Barrie, and the medical staff has been continued during the past year. In 1937 there were sixty-six cases of juvenile offenders referred to the medical officer for medical reports. In addition thirteen boys and girls were specially tested for their mental ages and intelligence quotients (I. Q.).

The following figures, which have been supplied to me by the courtesy of Mr Barrie, are of general interest and indicate certain points requiring further and fuller investigation.

During the past two years (1936 and 1937) the total number of cases dealt with by the probation officer in Fife was 2121. The bulk of these cases were trivial but in 186 the charges were considered more serious and these cases were more definitely investigated.

In 84 of the children (77 boys and 7 girls) a poor educational report was obtained. These however were not mentally tested. In 102 cases (88 boys and 14 girls) besides the special educational reports, mental testing was also carried out and the intelligence quotient obtained. The results were as follows:—

32 (25 boys—5 girls) or 31 per cent. had I. Q.=below 70.

55 (50 boys—5 girls) or 54 per cent. „ =70-100.

15 (11 boys—4 girls) or 14 per cent. „ =over 100.

From these figures it is evident that whatever has been the nature or the cause of the delinquency, one factor is common to a large percentage of the cases, namely, mental backwardness. This also applies to the 84 children for whom there were 'poor' educational reports but who were not mentally tested. It can be assumed that the majority of these were mentally backward. The fairly large percentage of low grade mentally backward children—17 per cent.

of the total (186) is also noteworthy. Regarding these latter it is suggested that more 'after-care' is necessary. This applies particularly to the County area where there are no voluntary 'after-care' Committees. In the two large Burghs—Kirkcaldy and Dunfermline—this work is being at present carried out by voluntary care Committees.

The large number of high grade backward or subnormal children indicates the need for more investigation into the needs of these children. For this purpose the setting up of Child Guidance Clinics is essential—clinics where parents and teachers can bring their problem cases for examination and advice. It is therefore regrettable that the setting up of such clinics has been held up in Fife, although the need for such clinics has been appreciated by the Education Committee. Not only will such clinics be helpful in giving necessary advice but can also be expected to be the means of preventing delinquency in a large number of the cases. There are a large number of psychological and psychiatric problems which require further study and investigation and for these the Child Guidance Clinics are necessary. Against the cost of such clinics must be put the possible saving in institutional costs for delinquents and there is also the reduction in mental anguish at home to be considered.

Another aspect requiring more attention is the type of instruction given to the backward pupils at school. This has certainly received the attention of the Director of Education and the Education Committee, but has sufficient progress been made to warrant more definite results? The setting up of Parent-Teacher Associations should also be helpful if they realise fully the extent of the problems in their respective areas and set out to study them and to suggest possible changes in curriculum as well as to bring home to the parents the fuller realisation of their duties to their children.

The following figures indicate the decision of the 'Juvenile' Courts of Fife as regards these 186 cases:—

84 cases—Poor Educational Reports.			
Placed in Approved Schools	...	...	20
Placed under care of 'fit' person	...	...	4
Otherwise dealt with	...	...	60
32 Cases—I. Q. below 70.			
Placed in Approved Schools	...	...	12
Otherwise dealt with	...	...	20
55 Cases—I. Q. 70-100.			
Placed in Approved Schools	...	...	16
Placed under care of 'fit' person	...	...	2
Otherwise dealt with	...	...	37
15 Cases—I. Q. over 100.			
Placed in Approved Schools	...	...	6
Otherwise dealt with	...	...	9

(b) Boarded-out Cases.

Arrangements have been made for a statutory medical examination twice yearly of all boarded-out children. The number of children seen by the medical staff was 27 and this necessitated 27 visits.

As a result of these examinations, two cases were referred to the family doctors of the guardian for removal of tonsils and adenoids. One child was taken by the guardian to Edinburgh Royal Infirmary for treatment to the ears—resulting hearing was good in both ears. One child was referred to the Eye Specialist but no glasses were ordered. These children were referred to the School Dentist for treatment. In one case, boarded-out by the Edinburgh Education Authority, glasses were supplied by that Committee. One case was mentally tested and found to be mentally defective—she has been placed in the Certified Institution at Blinkbonny, near Falkirk.

Year	1932-33	1933-34	1934-35	1935-36	1936-37	1937-38	1938-39	1939-40	1940-41	1941-42	1942-43	1943-44	1944-45	1945-46	1946-47	1947-48	1948-49	1949-50	1950-51	1951-52	1952-53	1953-54	1954-55	1955-56	1956-57	1957-58	1958-59	1959-60	1960-61	1961-62	1962-63	1963-64	1964-65	1965-66	1966-67	1967-68	1968-69	1969-70	1970-71	1971-72	1972-73	1973-74	1974-75	1975-76	1976-77	1977-78	1978-79	1979-80	1980-81	1981-82	1982-83	1983-84	1984-85	1985-86	1986-87	1987-88	1988-89	1989-90	1990-91	1991-92	1992-93	1993-94	1994-95	1995-96	1996-97	1997-98	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	2028-29	2029-30	2030-31	2031-32	2032-33	2033-34	2034-35	2035-36	2036-37	2037-38	2038-39	2039-40	2040-41	2041-42	2042-43	2043-44	2044-45	2045-46	2046-47	2047-48	2048-49	2049-50	2050-51	2051-52	2052-53	2053-54	2054-55	2055-56	2056-57	2057-58	2058-59	2059-60	2060-61	2061-62	2062-63	2063-64	2064-65	2065-66	2066-67	2067-68	2068-69	2069-70	2070-71	2071-72	2072-73	2073-74	2074-75	2075-76	2076-77	2077-78	2078-79	2079-80	2080-81	2081-82	2082-83	2083-84	2084-85	2085-86	2086-87	2087-88	2088-89	2089-90	2090-91	2091-92	2092-93	2093-94	2094-95	2095-96	2096-97	2097-98	2098-99	2099-00	2100-01	2101-02	2102-03	2103-04	2104-05	2105-06	2106-07	2107-08	2108-09	2109-10	2110-11	2111-12	2112-13	2113-14	2114-15	2115-16	2116-17	2117-18	2118-19	2119-20	2120-21	2121-22	2122-23	2123-24	2124-25	2125-26	2126-27	2127-28	2128-29	2129-30	2130-31	2131-32	2132-33	2133-34	2134-35	2135-36	2136-37	2137-38	2138-39	2139-40	2140-41	2141-42	2142-43	2143-44	2144-45	2145-46	2146-47	2147-48	2148-49	2149-50	2150-51	2151-52	2152-53	2153-54	2154-55	2155-56	2156-57	2157-58	2158-59	2159-60	2160-61	2161-62	2162-63	2163-64	2164-65	2165-66	2166-67	2167-68	2168-69	2169-70	2170-71	2171-72	2172-73	2173-74	2174-75	2175-76	2176-77	2177-78	2178-79	2179-80	2180-81	2181-82	2182-83	2183-84	2184-85	2185-86	2186-87	2187-88	2188-89	2189-90	2190-91	2191-92	2192-93	2193-94	2194-95	2195-96	2196-97	2197-98	2198-99	2199-00	2200-01	2201-02	2202-03	2203-04	2204-05	2205-06	2206-07	2207-08	2208-09	2209-10	2210-11	2211-12	2212-13	2213-14	2214-15	2215-16	2216-17	2217-18	2218-19	2219-20	2220-21	2221-22	2222-23	2223-24	2224-25	2225-26	2226-27	2227-28	2228-29	2229-30	2230-31	2231-32	2232-33	2233-34	2234-35	2235-36	2236-37	2237-38	2238-39	2239-40	2240-41	2241-42	2242-43	2243-44	2244-45	2245-46	2246-47	2247-48	2248-49	2249-50	2250-51	2251-52	2252-53	2253-54	2254-55	2255-56	2256-57	2257-58	2258-59	2259-60	2260-61	2261-62	2262-63	2263-64	2264-65	2265-66	2266-67	2267-68	2268-69	2269-70	2270-71	2271-72	2272-73	2273-74	2274-75	2275-76	2276-77	2277-78	2278-79	2279-80	2280-81	2281-82	2282-83	2283-84	2284-85	2285-86	2286-87	2287-88	2288-89	2289-90	2290-91	2291-92	2292-93	2293-94	2294-95	2295-96	2296-97	2297-98	2298-99	2299-00	2300-01	2301-02	2302-03	2303-04	2304-05	2305-06	2306-07	2307-08	2308-09	2309-10	2310-11	2311-12	2312-13	2313-14	2314-15	2315-16	2316-17	2317-18	2318-19	2319-20	2320-21	2321-22	2322-23	2323-24	2324-25	2325-26	2326-27	2327-28	2328-29	2329-30	2330-31	2331-32	2332-33	2333-34	2334-35	2335-36	2336-37	2337-38	2338-39	2339-40	2340-41	2341-42	2342-43	2343-44	2344-45	2345-46	2346-47	2347-48	2348-49	2349-50	2350-51	2351-52	2352-53	2353-54	2354-55	2355-56	2356-57	2357-58	2358-59	2359-60	2360-61	2361-62	2362-63	2363-64	2364-65	2365-66	2366-67	2367-68	2368-69	2369-70	2370-71	2371-72	2372-73	2373-74	2374-75	2375-76	2376-77	2377-78	2378-79	2379-80	2380-81	2381-82	2382-83	2383-84	2384-85	2385-86	2386-87	2387-88	2388-89	2389-90	2390-91	2391-92	2392-93	2393-94	2394-95	2395-96	2396-97	2397-98	2398-99	2399-00	2400-01	2401-02	2402-03	2403-04	2404-05	2405-06	2406-07	2407-08	2408-09	2409-10	2410-11	2411-12	2412-13	2413-14	2414-15	2415-16	2416-17	2417-18	2418-19	2419-20	2420-21	2421-22	2422-23	2423-24	2424-25	2425-26	2426-27	2427-28	2428-29	2429-30	2430-31	2431-32	2432-33	2433-34	2434-35	2435-36	2436-37	2437-38	2438-39	2439-40	2440-41	2441-42	2442-43	2443-44	2444-45	2445-46	2446-47	2447-48	2448-49	2449-50	2450-51	2451-52	2452-53	2453-54	2454-55	2455-56	2456-57	2457-58	2458-59	2459-60	2460-61	2461-62	2462-63	2463-64	2464-65	2465-66	2466-67	2467-68	2468-69	2469-70	2470-71	2471-72	2472-73	2473-74	2474-75	2475-76	2476-77	2477-78	2478-79	2479-80	2480-81	2481-82	2482-83	2483-84	2484-85	2485-86	2486-87	2487-88	2488-89	2489-90	2490-91	2491-92	2492-93	2493-94	2494-95	2495-96	2496-97	2497-98	2498-99	2499-00	2500-01	2501-02	2502-03	2503-04	2504-05	2505-06	2506-07	2507-08	2508-09	2509-10	2510-11	2511-12	2512-13	2513-14	2514-15	2515-16	2516-17	2517-18	2518-19	2519-20	2520-21	2521-22	2522-23	2523-24	2524-25	2525-26	2526-27	2527-28	2528-29	2529-30	2530-31	2531-32	2532-33	2533-34	2534-35	2535-36	2536-37	2537-38	2538-39	2539-40	2540-41	2541-42	2542-43	2543-44	2544-45	2545-46	2546-47	2547-48	2548-49	2549-50	2550-51	2551-52	2552-53	2553-54	2554-55	2555-56	2556-57	2557-58	2558-59	2559-60	2560-61	2561-62	2562-63	2563-64	2564-65	2565-66	2566-67	2567-68	2568-69	2569-70	2570-71	2571-72	2572-73	2573-74	2574-75	2575-76	2576-77	2577-78	2578-79	2579-80	2580-81	2581-82	2582-83	2583-84	2584-85	2585-86	2586-87	2587-88	2588-89	2589-90	2590-91	2591-92	2592-93	2593-94	2594-95	2595-96	2596-97	2597-98	2598-99	2599-00	2600-01	2601-02	2602-03	2603-04	2604-05	2605-06	2606-07	2607-08	2608-09	2609-10	2610-11	2611-12	2612-13	2613-14	2614-15	2615-16	2616-17	2617-18	2618-19	2619-20	2620-21	2621-22	2622-23	2623-24	2624-25	2625-26	2626-27	2627-28	2628-29	2629-30	2630-31	2631-32	2632-33	2633-34	2634-35	2635-36	2636-37	2637-38	2638-39	2639-40	2640-41	2641-42	2642-43	2643-44	2644-45	2645-46	2646-47	2647-48	2648-49	2649-50	2650-51	2651-52	2652-53	2653-54	2654-55	2655-56	2656-57	2657-58	2658-59	2659-60	2660-61	2661-62	2662-63	2663-64	2664-65	2665-66	2666-67	2667-68	2668-69	2669-70	2670-71	2671-72	2672-73	2673-74	2674-75	2675-76	2676-77	2677-78	2678-79	2679-80	2680-81	2681-82	2682-83	2683-84	2684-85	2685-86	2686-87	2687-88	2688-89	2689-90	2690-91	2691-92	2692-93	2693-94	2694-95	2695-96	2696-97	2697-98	2698-99	2699-00	2700-01	2701-02	2702-03	2703-04	2704-05	2705-06	2706-07	2707-08	2708-09	2709-10	2710-11	2711-12	2712-13	2713-14	2714-15	2715-16	2716-17	2717-18	2718-19	2719-20	2720-21	2721-22	2722-23	2723-24	2724-25	2725-26	2726-27	2727-28	2728-29	2729-30	2730-31	2731-32	2732-33	2733-34	2734-35	2735-36	2736-37	2737-38	2738-39	2739-40	2740-41	2741-42	2742-43	2743-44	2744-45	2745-46	2746-47	2747-48	2748-49	2749-50	2750-51	2751-52	2752-53	2753-54	2754-55	2755-56	2756-57	2757-58	2758-59	2759-60	2760-61	2761-62	2762-63	2763-64	2764-65	2765-66	2766-67	2767-68	2768-69	2769-70	2770-71	2771-72	2772-73	2773-74	2774-75	2775-76	2776-77	2777-78	2778-79	2779-80	2780-81	2781-82	2782-83	2783-84	2784-85	2785-86	2786-87	2787-88	2788-89	2789-90	2790-91	2791-92	2792-93	2793-94	2794-95	2795-96	2796-97	2797-98	2798-99	2799-00	2800-01	2801-02	2802-03	2803-04	2804-05	2805-06	2806-07	2807-08	2808-09	2809-10	2810-11	2811-12	2812-13	2813-14	2814-15	2815-16	2816-17	2817-18	2818-19	2819-20	2820-21	2821-22	2822-23	2823-24	2824-25	2825-26	2826-27	2827-28	2828-29	2829-30	2830-31	2831-32	2832-33	2833-34	2834-35	2835-36	2836-37	2837-38	2838-39	2839-40	2840-41	2841-42	2842-43	2843-44	2844-
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APPENDIX I.

TREATMENT (MINOR AILMENTS)

(a) Clinic Cases.

Condition.	Torryburn.	Blairhall.	Inverkeithing.	Crossgates.	Cowdenbeath.	Kelty.	Lochgelly.	Crosshill.	Auchtermerran.	Markinch.	Burntisland.	East Wemyss	Methilhill.	Buckhaven.	Leven.	Cupar.	Newburgh.	St Andrews.	Tayport.	Kirkcaldy Burgh.	Dunfermline Burgh.	Totals.
Clinic Visits ...	76	94	145	128	156	135	165	111	150	78	118	97	89	128	153	142	—	—	72	810	—	2847
Head Vermin ...	1	—	—	—	—	—	—	—	—	—	15	—	—	—	—	—	—	—	—	—	5	21
Body Vermin ...	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	8	10
Ringworm (Scalp) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	32	203
Scabies ...	3	—	2	1	3	42	17	28	11	—	2	8	3	4	13	3	—	—	4	22	—	—
Uncleanliness and Neglect	—	—	—	—	—	—	—	—	—	—	—	—	—	1	3	—	1	—	—	26	—	35
Impetigo Contagiosa	67	38	30	65	110	82	108	122	138	24	56	76	137	65	40	36	68	53	7	384	461	2167
Other Skin Conditions	7	4	9	10	32	5	40	19	—	11	13	—	12	17	16	1	1	—	16	105	561	879
Otorrhoea ...	5	10	11	13	31	3	28	18	8	2	11	30	17	27	47	7	—	—	3	88	93	452
Eye Disease (External)	14	29	27	20	19	12	13	35	27	29	44	12	58	20	34	10	11	—	—	134	184	732
Ear Cases ...	26	26	4	3	8	—	1	24	—	9	17	—	4	28	14	12	6	—	6	10	158	356
Nose and Throat Cases	21	21	5	2	—	1	—	1	—	2	7	—	—	—	—	—	8	—	3	8	145	204
Other Cases ...	23	79	106	78	121	25	154	220	—	36	89	20	2	6	37	30	30	—	8	2106	866	4036
Cuts and Bruises ...	150	277	60	345	29	159	638	360	62	53	169	213	92	90	51	49	61	—	6	113	979	3947
Septic Conditions ...	88	93	265	162	103	113	432	431	124	33	88	124	253	283	63	79	32	17	6	275	1159	4223
Accidents ...	19	—	8	4	5	—	1	3	4	23	31	—	—	4	7	32	25	18	4	1	—	189
Advisory Cases ...	—	—	13	10	34	—	25	—	3	11	22	—	—	25	8	10	4	—	—	72	—	237
Tuberculin Inunctions	—	—	4	14	—	15	36	19	—	—	—	—	1	—	6	—	—	—	—	—	—	95
Totals ...	403	577	544	727	495	457	1493	1282	377	233	564	483	579	570	340	260	252	88	67	3344	4651	17,786
Totals (1935-36)	299	642	736	676	434	590	1251	1326	388	216	708	644	758	625	411	258	—	—	194	3606	4987	18,749

APPENDIX. II.

Table showing number of cases of Infectious Diseases taken from Head Teachers' Attendance Returns during the Year 1937.

School Management Area.	Measles.	Scarlet Fever.	Diphtheria.	Mumps.	Whooping Cough.	Other Infectious or Contagious Diseases.	Totals.
CUPAR	9	24	—	415	83	247	778
ST ANDREWS	1	12	1	91	47	139	291
ANSTRUTHER	2	19	1	118	45	312	497
WEMYSS	116	78	42	306	63	775	1380
KIRKCALDY	16	299	44	209	274	593	1435
BEATH	4	93	76	533	558	903	2167
DUNFERMLINE	14	140	84	415	556	1115	2324
TOTALS	162	665	248	2087	1626	4084	8872

Carnegie Dunfermline Trust.

HARRY EMSLIE SMITH, M.D., Ch.B., D.T.M. and H., D.P.H.

ANNUAL REPORT

THE TREATMENT OF SCHOOL CHILDREN

DUNFERMLINE CLINICS

FOR YEAR ENDED 31st JULY, 1937.

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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HARRY EMSLIE SMITH,

M.D., Ch.B., D.T.M. & H., D.P.H.,

Administrative Medical Officer of the Carnegie Dunfermline Trust.

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.

Consulting Orthopaedic Surgeon.

W. A. COCHRANE, F.R.C.S.

Defective Speech Clinic.

MARGARET FLEMING.

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.

E. B. STENHOUSE.

Secretary.

M. C. McLAREN.

Clinic Attendants.

A. D. SMITH.

E. D. McLAREN.

J. FRASER.

A. BANKS.

	Old Burgh.	Rosyth.
Number of Schools ...	10	3
Accommodation Places ...	8614	
Number of Children—		
(1) Average No. on Register ...	5959	
(2) In Average Attendance ...	5408	

INTRODUCTION.

— The total number of school children who attended for treatment at the various clinics during the year ending 31st July, 1937, amounted to four thousand eight hundred and fifty-six. Thirty-one thousand and four treatments were given.

In addition to the above, three hundred and sixty infants and children of pre-school age were referred to the clinics. The number of treatments given was one thousand six hundred and ninety-one.

The figures are lower than the corresponding figures of last year, and this is to a large extent due to the poor attendance during the Influenza epidemic, which occurred in the winter months. From February to May there was a notable increase in the number of new cases, many of which were suffering from the after effects of Influenza.

There was a slight increase in the number of Ear, Nose, and Throat cases, particularly in the number of cases of Otitis Media.

No epidemics of eye disease were noted, and skin affections were fewer and less severe.

The work carried out at the Remedial Clinic shows a marked increase. This is to a large extent the result of the Orthopaedic Clinic which was recently added by the Carnegie Dunfermline Trustees to their existing clinics at Inglis Street.

Accounts of the year's work carried out by Miss Margaret Fleming in connection with the training of children who suffer from speech defects and of the work in the Dental Clinics are included in this Report.

ARRANGEMENTS FOR MEDICAL TREATMENT IN THE DUNFERMLINE CLINICS.

The various departments of the School Clinic have been described in earlier Reports:—

See Annual Report (1909)—General Clinic.

See Annual Report (1910)—General and Dental Clinics.

See Annual Report (1912)—Eye and Remedial Departments.

See Annual Report (1931)—Artificial Sunlight Clinic.

See Annual Report (1933)—Defective Speech Training.

See Annual Report (1936)—Orthopaedic Clinic.

Minor Ailments (General Clinics) 1936-37.

The following tables give the number of cases treated during the year at Dunfermline and Rosyth.

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	...			61	1020
Other Conditions	...			43	190
				104	1210
<i>Nose and Throat—</i>					
Nasal Conditions	...			25	109
Sore Throat	...			66	110
				91	219
<i>Eye—</i>					
Blepharitis	...			17	138
Styes	...			37	176
Conjunctivitis	...			29	128
Corneal Inflammation and Ulceration	...			1	32
Injuries	...			15	48
Errors of Refraction	...			2	2
Other Conditions	...			13	24
				114	548
<i>Skin (Head)—</i>					
Dirty	...			2	2
Ringworm	...			1	235
Impetigo	...			23	282
Other Conditions	...			14	156
				40	675
<i>Skin (Body)—</i>					
Body Vermin	...			—	—
Impetigo	...			219	1961
Scabies	...			18	185
Ringworm	...			5	27
Other Conditions	...			252	2601
				494	4774
<i>General—</i>					
Septic Sores	...			565	4765
Injuries	...			402	2234
Other Conditions	...			572	1108
Sunlight	...			205	2134
				1744	10,241
				2587	17,667

RETURN OF CASES TREATED.

				Rosyth Clinics.	
				No. of Cases.	No. of Attendances.
<i>Ear—</i>					
	Middle Ear Suppuration	...	...	32	400
	Other Conditions	...	...	44	159
				—	76
					559
<i>Nose and Throat—</i>					
	Nasal Conditions	...	...	18	54
	Sore Throat	...	...	36	51
				—	54
					105
<i>Eye—</i>					
	Blepharitis	...	...	22	155
	Styes	...	...	85	209
	Conjunctivitis	...	...	27	74
	Corneal Inflammation and Ulceration	...	...	—	—
	Injuries	...	...	3	4
	Errors of Refraction	...	...	—	—
	Other Conditions	...	...	4	5
				—	141
					447
<i>Skin (Head)—</i>					
	Dirty	...	...	3	7
	Ringworm	...	...	—	—
	Impetigo	...	...	19	126
	Other Conditions	...	...	9	66
				—	31
					199
<i>Skin (Body)—</i>					
	Body Vermin	...	...	—	—
	Impetigo	...	...	200	1014
	Scabies	...	...	14	57
	Ringworm	...	...	2	4
	Other Conditions	...	...	286	3880
				—	502
					4955
<i>General—</i>					
	Septic Sores	...	...	594	3886
	Injuries	...	...	577	2588
	Other Conditions	...	...	294	598
				—	1465
					7072
Totals—Rosyth Clinics				2269	13,337
Add—Inglis Street Clinic Totals				2587	17,667
Total No. of School Children				4856	31,004
Add—Children below school age				360	1,691
Grand Total				5216	32,695

DISEASES OF THE EAR, NOSE, AND THROAT.

The arrangements for the examination of cases were the same as in former years.

ATTENDANCES.—The total number of school children who attended at all of the Clinics in Dunfermline and Rosyth on account of Ear, Nose and Throat diseases was three hundred and twenty-five. This represents an increase of ten new cases. The increase is only of interest in view of the steady decrease noted in this class of case during the last three years. In addition to the above, twenty-eight children of pre-school age were treated.

The number of attendances for treatment amounted to :—

School Children	...	...	...	...	...	2,093
Children of pre-school age	...	...	...	...	...	153
						<hr/> 2,246 <hr/>

The following table shows the distribution of new cases :—

	Inglis St. Clinic.	Rosyth Clinics.	Pre-School Age.
Ear	104	76	19
Nose and Throat	91	54	9

There was a decrease in the number of attendances by school children and by children of pre-school age.

I. Affections of the Ear.

One hundred and eighty school children attended at Dunfermline and Rosyth Clinics on account of diseases of the ear.

OTITIS MEDIA.—Ninety-three cases of middle ear suppuration were treated during the year. This represents an increase of twenty cases as compared with last year.

The figures for the two types of the affection are :—

Acute Otitis Media	...	...	...	...	30
Chronic Otitis Media	...	...	...	...	63

The last two years' Reports showed a satisfactory decrease in the number of cases of ear affections. This year's figures show an increase of twelve cases of acute otitis media and eight cases of chronic otitis media.

INFLAMMATION OF THE EXTERNAL ACOUSTIC MEATUS.—There were only twenty cases of furunculosis of the external auditory canal—a decrease of thirteen from last year.

OTHER AFFECTIONS OF THE EAR.—These include :—Eleven cases of deafness from various causes. Several of them were of a temporary nature only. There were twenty cases of "earache." Most of them lasted for only a day or two. Sixteen cases of hard or excessive wax in the ear received treatment.

II. Affections of the Nose and Throat.

One hundred and forty-five new cases of diseases of the nose and throat were treated during the year. This is practically the same as last year.

The following table gives the number and distribution of the cases in the various groups :—

	Inglis St. Clinic.	King's Road Clinic.	Park Road Clinic.
<i>Nose—</i>			
Catarrh	6	3	4
Other Conditions ...	19	6	5
<i>Throat—</i>			
Acute Sore Throat ...	3	10	5
Other Conditions ...	63	13	8

NASAL AFFECTIONS.—The number of cases of nasal catarrh was practically the same as last year. Treatment by ultra-violet light proved of value in some of these cases. Other affections of the nose include cases of nasal obstruction from adenoids, enlarged turbinal bones and deflected septa. There were a few cases of epistaxis.

THROAT AFFECTIONS.—In regard to acute sore throats, this year seems to have been more healthy than last. In all of the clinics, only eighteen cases were seen, as compared with thirty-four last year. In the Rosyth clinics, the numbers were exactly half those of 1936.

TONSILS AND ADENOIDS.—Sixty-eight cases of morbid enlargement of the tonsils with or without adenoids were treated—an increase of sixteen as compared with last year. Twenty-nine of these were recommended for operation, and a considerable number have been operated on with good results.

CHILDREN OF PRE-SCHOOL AGE.—Twenty-eight cases of ear, nose and throat affections in infants and children of pre-school age were sent to the clinics during the year.

The following table shows the diseases from which they suffered :—

Middle Ear Suppuration	17
Other Affections of the Ear	2
Affections of the Nose	1
Affections of the Throat	8

It is satisfactory to note that there was a decrease of six cases of middle ear suppuration as compared with last year.

The total number of attendances of children of pre-school age was one hundred and fifty-three.

DEFECTIVE SPEECH CLINIC.

Report by Miss Margaret Fleming.

During the year the following cases were dealt with :—

Stammerers	...	...	...	...	...	22
Backward Speech and Minor Speech Defects	...	...	...	...	...	14
Cleft Palate	...	...	...	...	...	1
No. of Attendances	...	...	...	...	...	795

Session 1936-37 has nothing very sensational to report, but attendances have been well maintained and steady work done. As usual some very young children, suffering from backward speech or minor speech defects, have been sent each term from infant departments in the schools, and these, with few exceptions, have been quickly dealt with. Some of the young stammerers have made good cures and been discharged. Other fresh cases have come forward throughout the session and are making steady progress.

Again I should like to urge the parents and teachers of young children showing any trace of stammer to send them to the Clinic without delay, as the younger the child the younger the habit, and the greater the helpful influence of the parent on the child.

It is very satisfactory to note the continued progress of some of the early very bad cases,—boys, now just at the age when school life is most exacting of their time and nervous energy, who, with the help that has been given them at the Clinic, are earnestly trying to shoulder the responsibility of their own cure by attending the ordinary Music Institute Elocution Classes where they are doing more and more responsible work, and by keeping in touch with the Clinic during the Summer. This is as it should be, and it is good to note the steady growth of self-mastery and control from year to year. One sees assured success for them in the end. The cure of stammering and the building up of character must go hand in hand. In the case of the very young child it is the parent who must assume the responsibility, but for the old sufferer, it is very true that "the patient must minister unto himself," and unless there is the necessary grit and backbone in the individual, disappointment and lack of success must be the inevitable result.

MARGARET FLEMING.

REPORT BY DOUGLAS GUTHRIE, M.D., F.R.C.S., CONSULTING AURAL SURGEON.

The above Reports on the year's work of the Ear, Nose and Throat Clinic by Dr Emslie Smith and of the Defective Speech Clinic by Miss Margaret Fleming are so explicit and so detailed that they call for little commentary. The scope and importance of each of the Clinics are clearly demonstrated in the Reports.

OTITIS MEDIA—NEED FOR PROLONGED TREATMENT.—It will be observed that there has been a slight increase in the number of cases of middle ear suppuration. This was fairly general throughout the country during the early months of the year. In the course of my visits to the Clinic, I have been impressed more than ever by the need for persistent and continuous treatment of otitis, and I have noticed that the parents or guardians of the children are too apt to discontinue treatment as soon as the discharge ceases to be obvious. Even a slight discharge from the ear may be destructive and even dangerous, and for this reason, it is perhaps unfortunate that the term "running ear" is in frequent use. In many cases there is no "running," but merely a little suppuration, hidden from view, yet causing much damage to the organ of hearing. The latent nature of the malady should be explained to parents, because conservative treatment over a prolonged period is often followed by good results, and in children operation should seldom be necessary, except in cases showing mastoid complications.

INCREASE OF TONSIL AND ADENOID CASES.—Last year I ventured to state that the diminution in the number of operations for removal of adenoids and tonsils which was noted in 1936 might prove to be a temporary phase. This remark appears to have been justified, as the pendulum has again swung from non-operative to operative treatment. In our zeal to avoid the stigma of "too many tonsil operations," we are tempted to avoid operation altogether. Now we are steering the sensible middle course, and there is little ground for argument between the two extremist camps.

THE RELAXATION CURE OF STAMMERING.—It is interesting to note that Miss Fleming reports an increase in the number of young children referred to her Clinic on account of defective speech, and in this connection she wisely lays stress upon the need for co-operation on the part of the parents. The older child may do much to help himself. This does not mean that he should strain to speak correctly, as any strain or tension merely increase the difficulty. It implies rather that he should practise assiduously the arts of relaxation and of rhythmical movement, now taught to him in so interesting a manner in the Clinic. This is the basis of every successful method of curing stammering or any of the other defects of speech.

In conclusion, I should like to pay a tribute to the sympathetic and painstaking work of the nursing staff, as this is one of the chief reasons for any success which the Clinics may have achieved.

(Signed) DOUGLAS GUTHRIE, M.D., F.R.C.S.

EYE CLINIC.

During the year ending 31st July, 1937, two hundred and fifty-five school children attended the Clinics at Dunfermline and

Rosyth on account of affections of the eyes. The number of attendances was 995.

In addition to the above fifteen infants and children of pre-school age received treatment, and made thirty-six attendances.

There appears to have been a considerable improvement in the incidence of eye affections in children during the last two years. This year there were fifty-two fewer cases in school children, and there were no epidemics of conjunctivitis or other eye affections. The cases were more or less uniformly distributed throughout the year, and the bulk of them were of a mild character. The average number of treatments per case was only 3.9.

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
Blepharitis ...	7	17	5	17
Styes ...	—	37	34	51
Conjunctivitis ...	7	29	18	9
Injuries ...	—	15	1	2
Refractions and other Conditions ...	1	16	3	1
Total ...	15	114	61	80

BLEPHARITIS.—There was a decrease of twenty cases. This was to be expected in view of the marked decrease in the number of conjunctivitis cases in the previous year.

STYES.—Compared with last year there was a decrease of twenty-two cases in the numbers seen at Inglis Street Clinic ; but a slight increase at the Rosyth Clinics. Considering the general decrease in all eye affections, the number of cases of styes is rather high.

CONJUNCTIVITIS.—It is satisfactory to record that the decrease in the number of these cases noted last year still continues. This year's figures show a drop of twenty-eight cases in school children as compared with last year.

The number of cases of acute conjunctivitis at Dunfermline and Rosyth were fewer, and there were only four cases of phlyctenular conjunctivitis treated during the year.

OTHER CONDITIONS.—There was a slight increase in the number of cases of injury.

Defective Vision.

The routine examination of school children for errors of refraction is carried out by the School Medical Inspection Staff.

SKIN DISEASES.

The number of new cases of skin affection treated at all of the clinics during the year shows a small but satisfactory decrease. The decrease was noted both in Dunfermline and Rosyth.

The total number of new cases in school children amounted to one thousand and sixty-seven, a decrease of ninety-eight. The number of attendances was 10,603. The number of treatments per case was 9.9.

The cases this year were of a less severe type than those of last year.

The number of skin affections in infants and children of pre-school age also show a decrease. Only eighty-five were treated as compared with one hundred and nineteen in the previous year. Four hundred and forty-three treatments were given.

GROUP I.—IMPETIGO CONTAGIOSA.—In last year's Report a marked increase in the number and severity of cases of Impetigo was noted. This year the figures show a decided improvement. Four hundred and sixty-one school children attended the various clinics and received 3,383 treatments. This represents a decrease of eighty-nine new cases and 835 treatments.

There were forty-two cases of Impetigo of the head in school children, a decrease of nine as compared with last year.

The cases were more or less evenly distributed throughout the year. No particular periods of increased incidence or severity were noted, except perhaps during the month of November.

Fifty-five cases of impetigo in children of pre-school age attended. The total number of treatments was three hundred and ten. These figures represent a decrease of nineteen new cases and two hundred and thirty-nine treatments.

GROUP 2—RINGWORM OF THE HEAD AND BODY.—One case of Ringworm of the scalp remained under observation and treatment throughout the year. Seven cases of ringworm of the body were treated.

There were no cases in children of pre-school age.

GROUP 3—WARTS, CHILBLAINS AND CORNS.—The number of new cases was :—Warts 231, Chilblains 52, Corns 27. The number of cases of warts remained much the same as last year. There was a decrease in the Rosyth area, but an increase in the Old Burgh.

GROUP 4—ALL OTHER CONDITIONS :—

(1) VERMIN.—Only five cases of nits and pediculi of the head were sent for treatment at the clinics during the year. There seems to be an improvement in this respect within recent years ; although doubtless many cases are treated at home, as the result of inspection by the nurses in schools, and are not sent to the clinics.

(2) **MOLLUSUM CONTAGIOSA.**—Only twenty-two cases of this affection were treated during the year.

There has been a steady decrease in the number of these cases during the last four years. The figures are :—1934, 65 cases, 1935—40 cases, 1936—30 cases, 1937—22 cases.

The decrease is satisfactory, as the disease is a contagious one, and its prevention most desirable. Early recognition and treatment is therefore of importance, and to this end the co-operation of parents is essential ; particularly because the first sign of the affection—a small raised spot, often called a “ soft wart ”—is usually on some part of the body covered by the clothing.

(3) **SCABIES (32).**—There was a slight increase in these cases. As usual the disease affected several members of the same family.

OTHER CONDITIONS include cases of Seborrhoea, Dermatitis and Ichthyosis. The number of cases of Herpes was rather large.

CHILDREN OF PRE-SCHOOL AGE.—Eighty-five infants and children of pre-school age received treatment during the year.

The following table shows the diseases and the numbers treated :—

Impetigo	...	...	...	...	...	...	55
Scabies	...	...	...	...	...	...	4
Other Conditions	...	...	...	...	...	...	26

	...	...	...	...	...	...	85
	<hr/>

Defective Teeth.

THE FOLLOWING IS THE REPORT ON THE WORK OF THE SCHOOL DENTIST IN THE OLD BURGH :—

The work was carried out by Mr Weir and Mr Campbell jointly.

DENTAL EXAMINATION.

During the year the children attending the eight primary schools in Dunfermline were systematically inspected. The two secondary schools—Dunfermline High School and Queen Anne School—are still not systematically dealt with. The age groups examined extend from 5 years to 13 years. As in previous years, a few of 14 and 15 years are included in the 13-year group. The total number of children inspected was 2,993. This was three more than last year.

The following table shows the number of children examined in each group, together with the number of children whose dentitions were sound in the corresponding group :—

					No. Examined.	No. with Sound Dentition.
At	5 years	...	...	...	363	50
"	6	"	...	...	390	49
"	7	"	...	...	369	95
"	8	"	...	...	370	117
"	9	"	...	...	398	173
"	10	"	...	...	484	231
"	11	"	...	...	378	200
"	12	"	...	...	163	82
"	13	"	...	...	78	34
					<u>2993</u>	<u>1031</u>

These figures show that 34 per cent. of the children examined had sound teeth. This is 1 per cent. more than last year and 2 per cent. less than two years ago. The majority of these children are, however, attended to for the purpose of cleaning their teeth. Unfortunately the cleanliness of the teeth does not show much improvement. It is surprising that there are so many parents who apparently do not enforce on their children the daily practice of brushing the teeth. Undoubtedly the best time when this duty should be performed is at night just before retiring. It is a practice that soon develops into a habit.

The following figures show the general state of the teeth as disclosed by examination and the numbers accepting and refusing treatment :—

	1936-37.	Per cent.	1935-36. Per cent.
1. No. Examined	2,993	—	—
2. No. with Sound Dentition	1,031	34.48	33.14
3. No. requiring Treatment	1,962	65.52	66.86
4. No. in 3 accepting Treatment at Clinic	1,520	77.48	79.65
5. No. in 3 refusing Treatment at Clinic	442	22.52	21.76

There is a slight raise in the percentage of those refusing treatment. Theoretically this figure should increase. As the result of treatment the numbers with sound dentitions increase and consequently the number of refusals to the number requiring treatment should increase. A considerable number of the 22.52 per cent. refusals have treatment carried out privately.

In the following table the 2,993 children are classified according to the number of teeth in the mouth requiring attention :—

No. of Decayed Teeth.	No. of Children.		
	Boys.	Girls.	Total.
0	519	512	1031
1	261	260	521
2	214	229	443
3	108	122	230
4	127	132	259
5	47	55	102
6	72	76	148
7	28	26	54
8	28	28	56
More than 8	78	71	149
	<u>1,482</u>	<u>1,511</u>	<u>2,993</u>

DENTAL TREATMENT.

During the year 3,026 children attended the Clinic for treatment and made 4,392 attendances, an average of 1.4 attendances per child. This is a decrease of twenty-seven in the number of children attending, and an increase of one hundred and thirteen in the number of attendances made. 2,440 children attended as the result of the systematic inspection, and made 3,439 attendances. 586 children came as casual cases, and made 953 attendances. 129 of these casual cases were of pre-school age, while the remainder came from the High School and Queen Anne School.

The following figures show the treatment carried out throughout the year :—

					Temporary Teeth	Permanent Teeth
<i>Extractions—</i>						
Without Local Anaesthesia	...	...	...	...	857	2
With Local Anaesthesia	...	...	...	...	1221	400
<i>Fillings—</i>						
Cement	...	...	...	...	191	7
Amalgam	...	...	...	...	401	2165
Silicate	...	...	...	...	—	716
Root Fillings	...	...	...	...	3	59
Crowns	...	...	...	...	—	14
<i>Other Operations—</i>						
Silver Nitrate Treatment	...	...	...	...	2601	39
Dressings Inserted	...	...	...	...		534
Scaling and Cleaning	...	...	...	...		891
Minor Regulation Visits	...	...	...	...		26

The total amount of treatment carried out during the school year, together with a comparison of the corresponding figures for the previous year, was as follows :—

	1936-37.	1935-36.
Teeth Extracted	2,480	2,500
Fillings Inserted	3,542	3,363
Teeth treated with Silver Nitrate	2,640	2,814
Dressings Inserted	534	397
Scaling and Cleaning	891	975
Porcelain Crowns	14	7
Minor Regulation Visits	26	13

REPORTING ON THE WORK AS SCHOOL DENTIST IN ROSYTH, Mr RICHARD V. CAMPBELL STATES :—

DENTAL EXAMINATION.

As in former years the children attending the three primary school in Rosyth were inspected systematically. The total number of children examined was 863. The following figures show the number of children inspected attending the various schools :—

Park Road	...	...	...	...	...	...	330
King's Road	...	...	...	...	...	...	413
R. C. School	...	...	...	...	...	...	120
							<u>863</u>

In the following table, the 863 examined are classified according to the number of decayed teeth in the mouth :—

No. of Decayed Teeth.	No. of Children.
0	325
1	105
2	90
3	64
4	72
5	29
6	53
7	21
8	40
More than 8	64
	<hr/> 863

DENTAL TREATMENT.

Commencing in September, the age groups 6, 7, 8, 9, 10, 11, 12 and 13 underwent dental treatment.

During the year, 946 children attended the Clinic and made 1,690 attendances, an average of 1.8 attendances per child. 745 of the children treated came as the result of routine inspection and 201 children were treated as casual cases, of which 32 were of pre-school age.

The following figures show the treatment carried out throughout the year :—

	Temporary Teeth.	Permanent Teeth.
<i>Extractions—</i>		
Without Anaesthesia	344	1
With Local Anaesthesia	417	62
<i>Fillings—</i>		
Cement	37	—
Amalgam	155	501
Silicate	—	84
Root Fillings	—	11
<i>Other Operations—</i>		
Silver Nitrate	879	14
Dressings Inserted	23	178
Scaling and Cleaning	—	413
Porcelain Crowns Inserted	—	—
Minor Regulation Visits	—	5

The total amount of treatment throughout the school year was as follows :—

Teeth Extracted	824
Fillings Inserted	788
Teeth treated with Silver Nitrate	893
Dressings Inserted	201
Scalings and Cleaning	413
Minor Regulation Visits	5

DEFORMITIES AND OTHER CONDITIONS TREATED AT THE REMEDIAL CLINIC.

The records for the year ending 31st July, 1937, show an increase of sixteen new cases and three hundred and ninety-eight treatments as compared with the corresponding figures for the previous year. The recent opening of the Orthopaedic Clinic has contributed to this increase. The work was carried out on the lines detailed in previous reports in the Remedial Gymnasium at Inglis Street.

Children suffering from physical defects such as spinal curvatures, club foot, flat foot, paralysis, sprains and other injuries, as well as simple postural affections are eligible for admission to the clinic on the recommendation of their family doctor.

The treatment consists of massage and medical gymnastic exercises, which are given by the Senior Women Students of the Dunfermline College of Physical Training, who work under the supervision of Miss Owtram. Treatment by Faradic electricity and radiant heat is employed when necessary.

The Remedial Clinic is in close co-operation with the Orthopaedic Clinic, and suitable cases are seen from time to time by Mr Cochrane at the latter Clinic.

WORKING ARRANGEMENTS.—The Clinic is open from 4.30 to 5.30 p.m. on Mondays, Wednesdays and Fridays, throughout the College year.

On admission each case is medically examined, and treatment arranged according to the needs of the case.

Arrangements have been made for Artificial Sunlight treatment to be given on Monday afternoons to those children who would benefit by it, and who are attending the Remedial Clinic.

ATTENDANCES.—During the year one hundred and forty-five cases were admitted. The total attendances was 3,968, and the average number of treatments per case was approximately 27.3.

DEFECTS TREATED.—In the following table, the cases are grouped under the heading of their major defect only, although many had to be treated for other minor defects :—

	No. of Cases.
Postural Round Shoulders	10
Antero-Posterior Curvature of the Spine	30
Lateral Curvature of the Spine	2
Paralysis	17
Flat Foot	27
Club Foot	8
Sprains, Fractures and Injuries	19
Rickets and Debility	3
Other Conditions	29
	<hr/> 145 <hr/>

CURVATURE OF THE SPINE.—The cases of curvature of the spine are grouped as follows :—

KYPHOSIS (19 cases).—Of these, eight were due to debility and three to chest affections. Seven were cured or greatly improved, and two improved.

KYPHO-LORDOSIS (9 cases).—Of these four were due to debility and three to posture. Five were cured or greatly improved and three improved.

LORDOSIS (2 cases).—They both did well.

SCOLIOSIS (2 cases).—They remain under treatment.

POSTURAL ROUND SHOULDERS (10 cases).—These cases were for the most part children with round shoulders and poor posture, but without any, or with only a trivial amount of spinal curvature, which they could easily correct. They were admitted for preventive treatment. Seven of them were greatly improved or cured.

PARALYSIS (17 cases).—These cases include eight children suffering from the results of Infantile Paralysis, three from Birth Paralysis and one case of Pseudo-hypertrophic Muscular Dystrophy.

Eight of the cases were seen by the Orthopaedic Surgeon, and nine of them were noted as "greatly improved" at the end of the year.

FLAT FOOT (27 cases).—This is a decrease as compared with last year. In eighteen cases, debility was noted as the main or contributory cause of the defect.

Eight of the cases were discharged "cured" and seven noted as "greatly improved."

CLUB FOOT.—Eight cases were treated. Six of them were examined by the Orthopaedic Surgeon.

SPRAINS, FRACTURES AND INJURIES (19 cases).—This number is practically the same as last year, and is made up as follows :—Sprains 6, Fractures 5, Dislocations 1, Contusions and other Injuries 7.

As a rule these cases improve rapidly. Fourteen of them were discharged during the year.

RICKETS AND DEBILITY.—Only three cases were treated.

OTHER CONDITIONS.—This group includes cases of knock knee (6), hallux valgus (4), rheumatism (4), torticollis (3), asthma (3), webbed fingers, periostitis, arthritis, congenital dislocation of the hip, and others.

Thirty of the cases attending the Remedial Clinic were examined by the Orthopaedic Surgeon during the year, and recommendation made regarding their treatment. Three of them were admitted to Fairmilehead Hospital for further treatment.

ORTHOPAEDIC CLINIC.

This recently established Clinic for the examination and re-examination of cases requiring orthopaedic treatment has proved of great value and has fulfilled a need in connection with the work among children suffering from physical defects.

The Clinics are conducted by Mr W. A. Cochrane, Chief Surgeon of the Princess Margaret Rose Hospital, Fairmilehead, Edinburgh.

During the year ending 31st July, 1937, three Clinics were held at which twenty-eight cases were seen, and nineteen old cases re-examined, making a total of forty-seven examinations.

The following table shows the number of new cases and re-examinations classified under the heading of their more important defect :—

	No. of New Cases.	No. of Re-examinations.
Anterior Poliomyelitis	5	3
Other Paralysis	2	4
Knock Knee	4	1
Dislocations and other Joint Affections	4	2
Club Foot	3	3
Arthritis	3	4
Rickets	1	—
Fracture	1	—
Extra Cervical Rib	1	—
Periostitis	—	2
Congenital Deformity	1	—
Flat Foot	1	—
Pseudo-Hypertrophic Muscular Dystrophy	1	—
Webbed Fingers	1	—
	28	19
	==	==

Ten of the cases were recommended for admission to Fairmilehead Hospital. Of these, seven were admitted during the year under review, and five have undergone successful operations.

Treatment by splints or other orthopaedic methods was advised in the case of the other children who were seen at the Clinics.

A remarkable and most helpful feature of the Clinics was the very large number of family doctors who attended with their cases for the purpose of consultation with the Orthopaedic Surgeon.

Debility and Malnutrition.

In last year's Report it was noted that the number of cases of children referred to this Clinic on account of debility or malnutrition has for several years been decreasing. Last year's figure was one hundred and seven cases, this year there were only seventy-three. The decrease is all the more satisfactory when one considers that the winter epidemic of Influenza might have left a legacy of poor health.

The chief conditions found associated with debility in the cases examined were as follows :—

	No. of Cases.
Frequent Colds and attacks of Bronchitis or Asthma ...	10
Poor resistance to septic infection with frequent attacks of boils, sores, and styes	18
Unsatisfactory home conditions, irregular meals, lack of sleep, etc.	5
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	4
Rheumatism	2
Septic Tonsils and Otorrhoea	9
Rickets	4
Convalescent after Illness (mainly Influenza)	14
Other Conditions	7

Four of the cases were in children of pre-school age.

Malt Extract, Cod Liver Oil and Artificial Sunlight proved of value in the treatment of these cases.

Many of the children examined were transferred to Bandrum Country Home with excellent results.

Artificial Sunlight Clinic.

This Clinic was opened in January, 1931, and a full description of the accommodation and equipment was given in the Annual Report of that year.

The Clinic is open throughout the year, except during part of July and the month of August, but the bulk of the work is carried out in the Autumn, Winter and early Spring months.

Most of the cases were treated by weekly general body exposure to a long flame Carbon Arc lamp, but in several cases local applications of Ultra-Violet light from a Mercury Vapour Lamp were given. The length of exposure in each individual case was carefully regulated, as the value of treatment depends to a large extent on this.

WORKING HOURS.—The following working hours have been found most suitable—Boys, on Tuesdays at 11 a.m., Girls, on Thursdays at 11 a.m. Children living in Rosyth and other outlying districts, on Tuesday afternoons at 3 p.m. Children attending the Remedial Clinic, on Mondays at 4 p.m.

ATTENDANCES.—During the year, two hundred and sixty-seven children were treated, viz. :—

School Children—

Boys	...	...	...	...	...	...	...	118
Girls	...	...	...	...	...	...	...	87

Infants and Children under School Age—

Boys	...	...	...	...	...	...	...	28
Girls	...	...	...	...	...	...	...	34

The number of treatments given was two thousand six hundred and fifty-three, of which five hundred and nineteen were to children under school age. The average number of treatments per case was 9.9.

RESULTS.—As in former years the classification of results were based on (1) the degree of improvement in the morbid condition, (2) the general improvement noted in the child's health, and (3) information received from parents or guardians in regard to improvement in eating, sleeping and general well-being.

Weekly records of the weights of the children undergoing treatment were kept. These show very satisfactory increases.

The cases treated in school children are divided into the following groups :—

DEBILITY AND MALNUTRITION.—This group consists of children in poor general health or not thriving or normally gaining in weight and strength. Some were the result of previous illness, others were due to adverse home conditions. It also includes children classed as having a pre-disposition to tubercular disease, and children of a nervous temperament.

In this group, twenty-six girls and twenty-eight boys were treated. Eleven of the cases were discharged "cured" and twenty-six were noted as "greatly improved." Only five cases showed no improvement.

The results, as measured by the gain in weight of the children, were also encouraging. Fifty-four cases of Debility and Malnutrition were treated. Of these, twenty-six girls received an average of 14.2 treatments, and showed an average gain of 2.5 lbs. The twenty-eight boys received an average of 15.9 treatments and showed an average gain of 2.9 lbs.

CONVALESCENTS.—Eleven girls and eight boys, who were run down in health on account of recent infectious diseases, were sent for Artificial Sunlight treatment. More than half of these were children who had suffered from Influenza. Thirteen of them were discharged

"cured" or "greatly improved." The average number of treatments in the case of girls was 8.2, and the average gain was 3 lbs. In the case of boys, it was 6.1 treatments and 1.9 lbs. gain.

TUBERCULAR AFFECTIONS.—Fourteen cases of tubercular affections were treated. Of these twelve were suffering from tubercular affections of the glands (chiefly of the neck). It was considered advisable to treat these cases by short exposures over a prolonged period. Seven of the cases showed gains in weight from 4 to 8 lbs.

Two of the cases were treated by a Mercury Vapour Lamp.

BRONCHITIS.—There were fewer cases of Bronchitis as compared with last year. Four girls received on an average 8.2 treatments, and showed an average gain of 1.5 lbs. Seven boys received eleven treatments (average), and gained 2.7 lbs. average. Five of the cases were classed as "cured" or "greatly improved." Several were only under treatment for short periods.

FREQUENT COLDS.—Eight cases of children said to be subject to frequent attacks of colds were treated. The attendance of some of these was irregular, but in those who came for a reasonable length of time, the results were good.

NASAL CATARRH AND OTORRHOEA.—Four cases of Nasal Catarrh and ten cases of Otorrhoea were referred for treatment. Any improvement in these cases, as a result of exposure to Artificial Sunlight, seems to be due mainly to a general tonic effect. As most of the cases of Otorrhoea were also receiving other treatment, it is difficult to estimate the value of Sunlight.

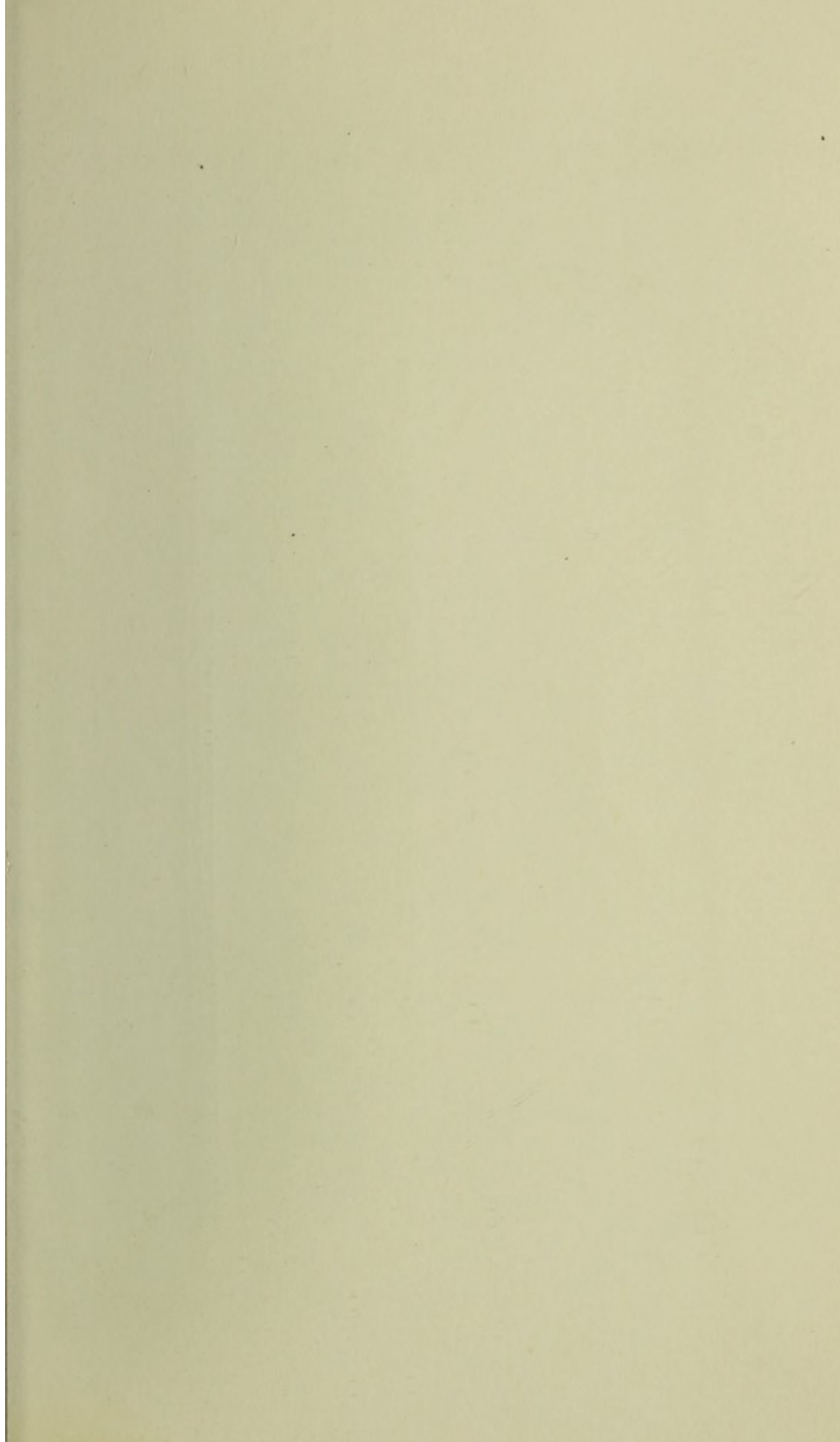
ASTHMA.—Only six cases were treated. Artificial Sunlight does not appear to be a cure for Asthma, but in the opinion of many of the cases themselves, considerable benefit is obtained in that the attacks seem less severe and less frequent.

OTHER AFFECTIONS.—These include cases of Boils (6), Septic Sores (19) and Impetigo (13). Artificial Sunlight and Ultra Violet light again proved of value in the treatment of these cases. There were five cases of Rickets, all of which showed satisfactory improvement.

INFANTS AND CHILDREN OF PRE-SCHOOL AGE.—Forty-four children were treated for various conditions such as debility, bronchitis, septic sores and impetigo. There were seven cases of Rickets.

CLINICAL LABORATORY.

During the year eighty-five laboratory examinations were carried out; of this seventy-nine were cultures in connection with the examination of swabs from the Ear, Nose and Throat.



"good" or "poorly improved." The average number of cases with the good type was 3.2 and the average gain was 3.5 lb. The good type was 1.5 lb. heavier and 1.5 lb. taller.

Therapeutic Advantages.—Patients with various conditions were treated. Of these cases, some were suffering from the effects of the disease, others from the effects of the treatment, and others from the effects of the disease and the treatment. It was considered advisable to treat these cases by short exposure and by short exposure and by short exposure and by short exposure.

Two of the cases were treated by a Mercury Vapor Lamp.

Observations.—There were fewer cases of Rheumatism in 1911 than in 1910. Four girls suffered on an average 3.4 times, and the average gain was 3.5 lb. The girls were 1.5 lb. heavier and 1.5 lb. taller. The average gain was 3.5 lb. The girls were 1.5 lb. heavier and 1.5 lb. taller. The average gain was 3.5 lb. The girls were 1.5 lb. heavier and 1.5 lb. taller.

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