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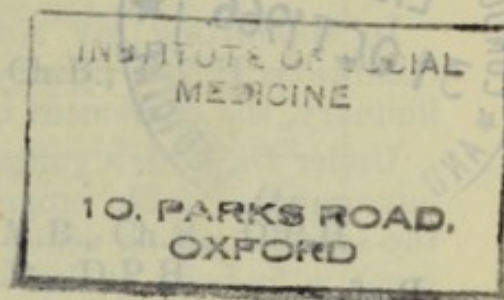
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COUNTY COUNCIL OF FIFE.



ANNUAL REPORT

ON THE

HEALTH AND SANITARY CONDITION
OF THE COUNTY AND DISTRICTS

DURING

1938

BY

G. MATTHEW FYFE,

M.B., Ch.B., D.P.H.

MEDICAL OFFICER OF HEALTH.

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PREFACE.

In submitting my Annual Report on the Health and Sanitary Conditions of the County during the year 1938, I record, as a preliminary, the retirement on 31st July of Dr. G. Pratt Yule.

Under Dr. Yule's guidance, the public health services of the County have made notable progress during the past quarter of a century and the sound basis on which many of the activities of the Health Department is founded is due to his foresight. To mention only one, it is but right to state that the high standard of housing which obtains in the County is due to his leadership, often in the face of difficulty.

Dr. Yule has left the services of the County but his achievements remain.

Brief though my term of office for the year was, it was a strenuous one, not only as an outcome of extended responsibilities but also as an outcome of the need for the immediate development of extensive precautions in defence of the public in the event of war. For their help in the large volume of work undertaken, I express my indebtedness to the medical, nursing, sanitary and clerical staff of the Department.

Population. The Registrar-General has estimated the population to the middle of 1938 at 201,603, excluding the large burghs of Dunfermline and Kirkcaldy. An estimated increase of 4,167 is thereby indicated on the census population of 1931. The statistical rates throughout the Report are based on this figure.

The population of the Landward Area is estimated at 101,766 and that of the twenty-three Small Burghs at 99,837.

Birth-rate. The number of births which occurred in the County (corrected for transfer) was 3,418, representing a birth rate of 17 per thousand of population. The Scottish birth rate was 17·7. 1,768 were males and 1,650 were females, corresponding to a ratio of 107 boys to every 100 girls.

There were 197 illegitimate births—5·75 per cent. of the total number of births.

Of the total births, 1,597 occurred in the Small Burghs, equivalent to a birth rate of 16 per thousand estimated population and 1,821 occurred in the Landward Area, equivalent to a birth rate of 17·9 per thousand estimated population.

Marriage-rate. 1,283 marriages were registered, the marriage rate being 6·4 per thousand of estimated population. The rate for Burghs was 7·3 and for the Landward Area 5·44 per 1,000.

General Death-rate. There were 2,276 deaths, representing a general death rate of 11·3 per thousand of estimated population as compared with a rate in Scotland as a whole of 12·6. The number of deaths was 283 less in 1938 than in 1937 whereby the gradual increase in the number of deaths which had occurred since 1935 has been offset.

LANDWARD AREA AND SMALL BURGHS, 1938.

All Ages.			1	1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85—
30th Sexes	Males	F'm'l's												
149	96	53	8	28	8	4	17	19	15	14	16	15	5	
302	134	168	..	..	..	..	2	1	12	45	72	108	49	13
35	8	27	..	..	..	..	..	..	3	3	12	10	6	1
73	28	45	4	3	4	4	8	3	4	11	11	14	5	2
348	152	196	8	2	1	2	7	6	8	27	53	114	99	21
562	273	289	..	1	1	1	4	5	18	40	94	160	179	59
216	132	84	31	13	2	2	4	9	18	14	35	41	36	11
107	61	46	13	5	1	5	2	3	8	16	12	23	15	4
91	60	31	..	..	1	1	4	6	8	8	19	23	16	5
13	..	13	..	..	..	..	2	8	3	..	..	..	..	..
13	7	6	..	..	..	2	1	..	..	1	5	1	3	..
117	65	52	116	..	1	..	..	..	..	..	..	12	..	..
101	41	60	..	..	..	..	..	..	..	..	..	53	53	36
14	10	4	..	..	..	..	1	3	2	4	2	1	1	..
97	70	27	..	3	1	2	11	12	15	6	10	17	10	..
38	25	13	1	1	..	..	..	..	1	4	12	12	6	1
2,276	1,162	1,114	186	56	20	23	63	75	115	193	353	551	483	158
100.0	51.0	49.0	8.1	2.5	0.9	1.0	2.8	3.3	5.1	8.5	15.5	24.2	21.2	6.9

1,198 deaths occurred in the Small Burghs, equivalent to a death rate of 12 per thousand of population and 1,078 occurred in the Landward Area, equivalent to a death rate of 10·6 per thousand of population.

**Infantile
Mortality
Rate.**

The number of deaths among infants under one year of age was 186, representing an infantile mortality rate of 54. This rate is the lowest ever recorded and reflects favourably on the work of all those associated in the supervision of the health of mothers and infants. The corresponding rate for Scotland was 70.

In the Small Burghs 89 infants died and in the Landward Area 97 infants died, the respective rates being 55·7 and 53·3 per 1,000 births. A notable reduction in the number of deaths in the Landward part of the County had therefore occurred.

**Maternal
Mortality
Rate:**

The Scottish Maternal Mortality Rate for the year was 4·9 per 1,000 births. In Fife, the Rate was 3·8 per 1,000 births. The fact is worthy of comment in that for the first time the County rate was less than the national rate. An even more notable feature attends the marked reduction which took place in the rate for the Landward Area as compared with that for the Small Burghs. In the former, the rate was 1·65 (3 deaths) per 1,000 births; in the latter it was 6·26 (10 deaths) per 1,000 births. Hitherto, the landward rate has been considerably in excess of the burghal rate.

The gradual decrease which has occurred in recent years in the number of maternal deaths in the County culminating in the unprecedented achievement of 1938 is highly satisfactory and may perhaps be related to the system under which maternal deaths are individually investigated although undoubtedly sulphonamide medication has been an important life-saving factor.

40 deaths occurred in the Landward Area and 33 deaths occurred in the Small Burghs, the respective death rates being 0·39 and 0·33 per 1,000.

Of the total deaths, 47 were caused by pulmonary tuberculosis (Landward 23, Small Burghs 24) and 26 by non-pulmonary tuberculosis (Landward 17, Small Burghs 9).

It will be seen that deaths from pulmonary tuberculosis were almost equal in number in burghal and in landward areas, but that deaths from non-pulmonary tuberculosis in the Landward County exceeded those in the Small Burghs. The relative rates per 1,000 of the latter was Burghal 0·09, Landward 0·17.

302 persons died from Cancer during 1938—134 males and 168 females. The corresponding death rate was 1·5 per 1,000 of estimated population as compared with 1·46 per 1,000 in 1937.

Cancer
Death
Rate.

In the Landward Area, the number of deaths was 136 and in the Small Burghs the number was 166.

Reference to the incidence of infectious diseases in 1938, however brief, would be incomplete without mention of the sulphonamide group of drugs. To German workers must be given the credit of having discovered that a particular dye had the property of counteracting streptococcal infections in man and in animals. Other investigators have thereby been stimulated and there is now available three groups of drugs, from the original prontosil to the more recent M & B.693 by means of which the course and outcome of many human infections have been altered. As a result of this chemical treatment, gonorrhoea, gonorrhoeal ophthalmia, pneumonia, erysipelas, puerperal fever, cerebro-spinal fever and scarlet fever have been brought within measures of control ranging from palliative to the dramatic. The drugs have been much in use throughout the County with beneficial result. The Public Health Department was fortunate in receiving a supply of M. & B.693 for trial prior to its being placed on the market and many patients benefited earlier than otherwise would have been the case.

Infectious
Diseases.

The number of cases of infectious diseases notified during the year was 2,625 as compared with 2,012 in 1937. Of these, 2,019 or 77 per cent. were removed to hospital.

The increased incidence was due principally to scarlet fever of which disease there were 1,108 cases as compared with 589 in 1937. The disease was of general distribution and its features were more of endemic than of epidemic character. Frequency was greatest in the landward part of Dunfermline District and in the Burghs of St. Andrews and Cowdenbeath. Fortunately, the mild nature of the infection was maintained and no deaths occurred.

An increase also occurred in the incidence of diphtheria, which claimed 427 cases as compared with 314 in 1937. Cases occurred

Public
Health
(Amend-
ment) Act
1925

sporadically and except for family infections nothing in the nature of an outbreak occurred. Nevertheless, there are grounds for assuming that the disease is taking an increasing hold on the community. It is in accordance with epidemiological experience that following on the epidemic of scarlet fever which commenced in 1932 there should be an increase in the number of cases of diphtheria but the increase in Fife has followed an intermittent but persistent course since 1934, possibly signifying a greater potential danger.

While the presence of the disease throughout the County will, of itself, have a certain immunising effect on the unprotected population, it also increases the carrier problem whereby the disease can be transmitted to susceptible persons by healthy people who have acquired immunity.

The situation is bound up with the question of artificial immunisation of the juvenile population a procedure which is in active operation so far as Scotland is concerned, in Aberdeenshire. In Fife, no comprehensive steps have been taken towards providing the children with this means of protection except in the case of the Burghs of Leslie and St. Monance and the Village of Leuchars wherein on one occasion each, the greater number of the school population was immunised. It is worthy of comment, however, that the practice to a limited extent has been regularly followed free of charge in St. Andrews since 1927.

There are great social and financial difficulties in the way of the prosecution of a campaign for the immunisation of the juvenile population and these may be brought to a head if the Government Evacuation Scheme comes into full operation under which thousands of children from urban areas will take up residence in the County and intermingle with its school population. It is most unlikely that the Town children will be immunised against diphtheria prior to their arrival, but in any case the procedure would not protect the County children unless they too were immunised. Alternatively, if the County children were immunised, the Town children would also require for their safety to be immunised. The problem, therefore, would appear to be one for combined consideration, by evacuating and receiving authorities and the Department of Health are naturally to be expected to give a lead in regard to the matter.

Detailed information in regard to infectious diseases will be found in the reports on the Eastern and Western divisions of the County.

In accordance with the provisions of the Scheme adopted in terms of the above Act, 38 patients suffering from diabetes and resident in the landward area and small burghs of the County were supplied with Insulin at a cost of £104 9s 10d. Thirteen patients refunded the cost in whole or part. In addition, nineteen patients were furnished with certain articles of food as special diet at a cost of £101 17s 0d.

In 1938, the persons notified as suffering from tuberculosis throughout the Landward Area and Small Burghs numbered 247, of whom 105 were pulmonary and 142 non-pulmonary cases. Tuberculosis.

In 1937, the notified cases numbered 203, of which 83 were pulmonary and 120 non-pulmonary; in 1936, the notifications numbered 248, of which 111 were pulmonary and 137 non-pulmonary; and in 1935 there were 261 notifications, of which 105 were pulmonary and 156 non-pulmonary.

Of the 247 notifications for 1938, 126 (pulmonary 46; non-pulmonary 80), were from the Landward Area of the County, and 121 (pulmonary 65; non-pulmonary 56), were from the Small Burghs.

The patients admitted for treatment to Glenlomond Sanatorium from the Landward Area numbered 54, and from the Small Burghs, 51.

The admission to Glenlomond Sanatorium of 153 patients from the following areas was arranged during the year:—

LANDWARD.—Cupar District, 6; Dunfermline District, 18; Kirkcaldy District, 28; St. Andrews District, 2.

SMALL BURGHS.—Buckhaven-Methil, 10; Burntisland, 2; Cupar, 2; Newburgh, 2; St. Andrews, 10; Tayport, 1; Pittenweem, 1; Falkland, 1; Auchtermuchty, 3; Inverkeithing, 3; Cowdenbeath, 5; Lochgelly, 6; Leven, 3; Kinghorn, 1; Anstruther, 1.

In addition, 6 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 75 patients at a cost of £211 9s 11d, or £2 16s 4½d per patient. In 1937 the cost was £181 7s 3d, and in 1936, £219 9s 7½d.

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).—Seven 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 £127 3s 2d or £18 3s 3d per patient. Of these patients, four received Lomholt Lamp Treatment at the Infirmary, and the Local Authority contributed £62 10s 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 157 patients at a cost of £105 14s 11d. The average cost per patient was 13s 6d and the average cost per doctor was £3 0s 5d. The total cost of drugs, dressings, etc., in 1937 was £127 17s 1½d; in 1936, £167 5s 3½d; and in 1935, £205 9s 1d.

In addition to Tuberculin Ointment supplied to School Clinics for the treatment of school children, Ointment was also supplied to 216

patients or their families. The total cost of tuberculin ointment for the year amounted to £35 8s 1d.

For further information in regard to tuberculosis reference should be made to the report of the Tuberculosis Officer.

Report by

ALEX. LUNDIE, B.Sc., M.B., Ch.B., D.P.H.

Last year there was an increase of 44 in the number of notifications of tuberculosis in Fife.

As usual not all of the cases notified were confirmed, but there was an increase of 34 over last year in the number of cases which were confirmed. Of these, 27 were pulmonary and 7 were non-pulmonary cases.

As regards notifications of pulmonary tuberculosis, the number last year was 105 as compared with 83 in 1937, an increase of 22. In 1938 non-pulmonary notifications were 142 and there were 120 in 1937, an increase of 22 ; total increase 44.

Once more a certain number of these notifications could not be confirmed, but of those confirmed, there were 40 males and 38 females with pulmonary, and 53 males and 43 females with non-pulmonary tuberculosis. That is there were 78 pulmonary and 96 non-pulmonary (total 174) new cases of tuberculosis confirmed in 1938. The total number notified was 247.

The number of cases which were examined by request before notification amounted to 85, an increase of 12 on the previous year. Sixty (60) were suspected of having pulmonary tuberculosis and this was confirmed in 15 cases, not confirmed in 30, while 3 remained under observation at the end of the year. The remaining 12 were found to have no pulmonary disease, but disease elsewhere.

Twenty-five (25) cases were suspected of being non-pulmonary tuberculosis. This was confirmed in 17, not confirmed in 7 and one remained under observation.

All confirmed cases were subsequently notified under their proper categories.

To these 174 new cases of tuberculosis, there ought properly to be added 22 more which were not notified but came to light after death, mainly when the registrar's monthly return was scrutinised. This would bring the number of new cases in 1938 up to 196. The corresponding number for 1937 was only 168. The increase for 1938 is therefore 28.

The cases that came to light after death numbered 22, 4 less than in 1937, which is so far satisfactory, but nevertheless too high. Seven (7) of these were attributed to pulmonary tuberculosis, surely all of them might have been diagnosed during life. There were also 2 of abdominal disease, 7 of meningitis and 5 of disease in other parts and 1 of miliary

osis. Some of these also might have been recognised unless the diagnosis is confirmed by post-mortem examination. A certain amount of doubt must be entertained.

The number of families visited last year was 2,353, being 61 less than in 1937, the difference being due to fewer visits to old non-pulmonary cases. There was an increased number of visits to all other categories, which is shown as follows:—New pulmonary 166, increase 39 ; new non-pulmonary 133, increase 6 ; old pulmonary 1,094—increase 24 ; old non-pulmonary 737, decrease 140 ; families of contacts 233, increase 10 ; total decrease 61. Each clinic was visited twice during the year. Every child examined at a clinic was also examined at home at least once. More information is usually gathered by visiting a family at home, than by prolonged enquiry in the unaccustomed surroundings of a clinic.

Age and Sex Distribution of New Pulmonary Cases.

0-5		5-10		10-15		15-25		25-35		35-45		45-65		65+		Total	
M. F.		M. F.		M. F.		M. F.		M. F.		M. F.		M. F.		M. F.		M. F.	
1	1	0	0	0	0	9	11	17	13	6	8	5	5	2	0	40	38
																	Total—78

Admission of New Cases to Glenlomond in 1938.

<i>Pulmonary.</i>				<i>Diagnosis not confirmed.</i>			
<i>Adults.</i>		<i>Children.</i>		<i>Adults.</i>		<i>Children.</i>	
<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
25	25	1	2	1	1	0	1
<i>Non-Pulmonary.</i>							
8	4	19	22	0	0	0	1

Non-pulmonary tuberculosis :—Localisation of disease in 96 confirmed cases : Abdomen—4 M., 7 F. ; Spine—0 M., 2 F. ; Bones and Joints—6 M., 3 F. ; Superfic Glands 38 M., 22 F. ; Hip-Joint—0 M., 4 F. ; Other Organs—5 M., 5 F. ; Total—53 M., 43 F.

Deaths from Tuberculosis in 1938.

<i>Pulmonary—</i>		<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
New cases notified before death	10	5	15	
New cases notified at or after death	6	1	7	
Old cases notified more than a year ago ..	19	10	29	
Total ..		35	16	51
<i>Non-Pulmonary—</i>				
New cases notified before death	3	1	4	
New cases notified at or after death	7	8	15	
Old cases notified more than a year ago ..	0	2	2	
Total ..		45	27	72

Age and Sex Distribution of Cases who Died in 1938.

		0-5		5-10		10-15		15-25		25-35		35-45		45-65		65+		Total.	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Notified	..	2	0	2	2	1	0	6	5	12	3	4	3	4	2	1	3	32	18
Unnotified	..	3	2	0	1	1	0	0	2	1	1	1	0	4	0	3	1	13	7

Summary of Year's Returns Compared with those of 1937.

All forms of Tuberculosis	..	..	+ 44 more notifications.
Pulmonary	..	..	+ 22 "
Non-pulmonary	..	..	+ 22 "
Pulmonary cases confirmed	..	..	+ 27 more than in 1937.
Non-pulmonary	"	..	+ 7 "
Deaths in 1938	..	..	- 17 less than in 1937.

The principal feature of the vital statistics for 1938 to be noted in the report of the Registrar-General for Scotland, is the very low death rate, amounting to 12·6 per 1,000—the lowest yet recorded for this country.

The deaths from all forms of tuberculosis were 3,431, 2,580 pulmonary and 851 non-pulmonary. This is 211 fewer deaths in the whole country from pulmonary tuberculosis and 21 less from the other forms of disease.

The tuberculosis death rate for Scotland in 1938 was 69 per 100,000, a reduction of 5 on that of 1937. Of these deaths 52 per 100,000 were due to pulmonary disease, a reduction of 4 on the rate in 1937. Each figure is the lowest ever reached in Scotland, with the exception of that in 1935, when the non-pulmonary figure fell to the same level.

The death rate in Fife fell from 44 per 100,000 in 1937 to 36 in 1938 for all forms of tuberculosis. This is the lowest figure ever reached. It may again show a rise for one or more years, owing to the prevalence of influenza in 1937, when there were 2,693 deaths from the disease alone compared with an average of 1,488 in 5 previous years. In 1938 this number fell to 396 and the incidence of the disease was also small. While influenza does not seem generally to aggravate old cases of pulmonary tuberculosis, it does appear to light up latent disease into activity which may sometimes remain undiscovered or unsuspected for several years. The increased number of new cases of pulmonary disease in 1938, is due partially to this cause, which may continue to show its effect for some time to come.

No departure from the usual routine has yet been made up to the present day. Measures may have been intensified but the same principles are still followed.

I have to acknowledge the honour of having been appointed to represent Fife County Council at the 24th Annual Conference of the National Association for the Prevention of Tuberculosis, which was held last July in London. It is always stimulating and profitable to attend these conferences, and this one was no exception to the rule, although there were discussions which were less profitable than had been anticipated from a perusal of the agenda.

The most important discussion took place on the second day. It related to the Family and Tuberculosis. The Discovery and Protection of Contacts in a Household.

The first speaker was Dr. G. T. Hebert, Tuberculosis Physician, St. Thomas's Hospital, London. He began with a note of disappointment and ended with a tone of hope, which was not, in my opinion, fully justified.

The first point he made in this address was, that it was usually difficult or impossible to trace the source of infection in any case of pulmonary tuberculosis. This is my own experience in Fife. Repeated and prolonged enquiries sometimes do reveal the source which had been long forgotten or deliberately concealed. Jessel's investigations in Lancashire were quoted to show that 15 secondary cases were discovered to every 100 primary cases, in an average period of 7 years, and these figures are supposed to be representative of other or at least of urban areas. In families where a case has already occurred, the number of such cases may safely be taken as 10 times higher. This may all be readily admitted, but I cannot agree with the disappointment expressed at the result of contact examination having fallen far short of expectations.

It was admitted at the outset that the majority of new cases had no family history. Therefore, contact examination could not possibly have led to the discovery, either early or late, of this large number, which constitutes the majority of new cases. This is a staggering fact, but it should not deter us from examining contacts.

The inherent difficulties pointed out by the speaker were three in number :—

First—many cases of incipient tuberculosis present few recognisable signs and symptoms, and for their discovery require a complete and careful examination, including X-ray examination and tuberculin testing. To this I would reply that it would be even better to discover the bare fact of infection long before it could be called incipient tuberculosis, or have reached such an advanced stage as to be demonstrable by X-rays. Then as regards tuberculin testing, even that is not nearly always necessary to convince the examiner that tuberculous infection has taken place. There are signs generally present from an early date and they may last throughout life or retrogress. When symptoms appear in addition to signs it is high time to be alarmed. Why not deal with the contact who has only signs and no symptoms? The signs I refer to are merely the chains of cervical lymph nodes felt in the posterior triangles, like small shot beneath the skin. They are easily overlooked. Then there are frequently telangiectases on the nape of the neck or even spreading over the shoulders. These are very suggestive and they may persist throughout life. Experience shows that these people usually react to tuberculin, but not all. Some have been reported to me as non-reactors, whom I found shortly afterwards to react very strongly.

What then are we to do or to think in such cases? They are not ill; they have no X-ray evidence of disease and they do not react to tuberculin. If they are young people, members of a family where tuberculosis has occurred, they have in all probability incurred the infection to a certain extent. They may weather it entirely, or carry it about for years ready to develop active disease as soon as they encounter adverse circumstances, or they may go down rapidly. The usual time for a second case to occur in a family, is about $3\frac{1}{2}$ years, and in that long time can nothing be done to protect the infected person? Extra nourishment may be prescribed, but it can do nothing but harm to a person who already is consuming all he can digest. Here Hebert's note of promise might be quoted, "What do we know of the resisting power of the patient either before or after he has contracted the disease?", and he remarks that if some quantitative measure of resistance could but be devised most of our difficulties would disappear. I cannot endorse this opinion. More than 30 years ago Sir Almroth Wright measured this resisting power by a factor which he called the opoonic Index. It is too cumbrous a technique to employ regularly and it involves a certain amount of personal error. Only in the hands of experts can it be of any value. If we do want to know the resisting power of the patient, generally we have only to listen carefully to what the mother or the school teacher says about it. Her story will only convince us that the patient's health is so erratic that she wants us to do something quickly about it. It won't cheer her to wait to see X-ray plates and tuberculin tests multiplied indefinitely and temperature charts extended without limit.

Second—Hebert's second difficulty is that the latent period between infection and manifest disease is long. That is an obvious advantage—not a difficulty. In $3\frac{1}{2}$ years something can be done. It usually requires less time than that to establish good health.

The third difficulty is very real. Tuberculosis is commonest at the age period of 15-25, and it is at that very period that young people are most difficult to be examined. Everyone who has been seriously engaged in the prevention of tuberculosis has encountered this difficulty frequently. For example, I called regularly for seven years to examine one particular contact, whose family history was very bad. He was never at home. I received plausible excuses, chilly receptions and more open rebuffs, but at last one day I found him waiting to be examined. It was too late. Fortunately, this is a rare experience.

In the Annual Report for 1936, I suggested how welcome I should make any offer of co-operation in the matter of the prevention of tuberculosis and here I would repeat that any practical contribution towards the solution of this difficulty would be most highly appreciated. I had already mooted this point in the Annual Report of 1934 and on both occasions I likened the struggle to a military engagement.

Dr. Rist of the French National Committee for the Prevention of Tuberculosis, described a scheme he devised to surmount this difficulty. He equipped a large railway carriage with a very modern fine X-ray apparatus. People in rural districts served by the railway are informed that the X-ray carriage will be at the railway station at a certain time on a certain day. Visiting nurses shepherd in suspected or sick people on that day. "It is very interesting to note how ignorant people in the rural districts are attracted by the idea that they are going to be X-rayed. The X-ray has still a certain glamour of mystery among our people—some people come there with sciatica or other diseases that have absolutely nothing to do with tuberculosis, but we do not mind—so we are able to examine, in a short time a great number of contacts at all stations, people who would never have come to have been X-rayed, if the railways had not sent this X-ray Car."

Before hearing of this delightful idea employed on strategic grounds by Dr. Rist, I sounded its possibilities as an aid to practical tactics. I refer to the use of mobile X-ray apparatus mentioned in the annual report of 1934. It seemed then too cumbrous and a report of its failure in the mountainous districts of Wales was later received without surprise. Even in our own country districts I fractured a back axle four times in the course of ordinary duty, carrying no passengers and no heavy apparatus.

There is now a lighter more modern apparatus which can be employed in the A.R.P. scheme, where mobility, speed and promptitude are vital. It must be always ready for action. How could it be kept ready better than by having it frequently in use, hoping even that its main purpose may never be demanded of it. I see here how a laudible and useful purpose might be served in the prevention of tuberculosis, by adopting Dr. Rist's idea and keeping this apparatus as fully employed as necessary in tuberculosis, orthopaedics, M.S. & C.W., ante-natal clinics and even in police work.

For my part I welcome every aid to diagnosis that money can provide, but pending the provision of such aids and councils of perfection, most people have to be content to employ to their utmost capacity and to keep in training for that purpose, the senses of sight, touch hearing and even smell. (There is a nurse who makes much of the odour of tuberculosis and others declare that the skin of the enteric fever patient has a diagnostic odour. It is certain that the skin of tuberculous patients sometimes has quite a characteristic odour resembling that of acetamide.)

Contact examination is in my opinion interesting, important and vastly useful as a means of saving many lives. If it were logically followed up, Hebert's third difficulty would vanish, and Rist's ingenious dodge for compelling them to come in from the highways and hedges, would to a great extent be unnecessary. It would apply only

to the unattached, unknown cases, lingering in hiding from medical aid.

The real problem of to-day rests in the question of how to tackle this majority of new cases that arise without any antecedent tuberculosis in the family. We could easily do it if we worked on an authoritarian basis, with public health as its sole objective.

The tuberculin testing of all children of school age at entrance and on leaving, would be repugnant and would meet serious opposition unless it were introduced with the utmost tact and received the full consent of parents. Rist's policy is the only alternative. It may intercept infections that were implanted at school age or later.

If all that I have suggested here is adopted, what are we to do with contacts, and with non-contacts who react to tuberculin, and may therefore be looked upon as equally liable to develop tuberculosis? We can immunise them without waiting to see what happens. Of all those whom I have so treated, only two have died. Both took acute miliary tuberculosis. The first attended a clinic to receive tuberculin inunctions three or four times then ceased to attend. She was followed up at home and scorned the treatment. The second was allowed to be treated at home. She was old enough to do it herself. She took ill with extreme suddenness also. When asked if she had faithfully carried out instructions, she made no reply beyond giving a rueful look.

There have been 17 fewer deaths in Fife this year, equal to a fall of 8 in the rate per 100,000, and the cost of immunisation has been about £35 8s 1d for the whole year, an increase of £5 on the previous year.

Venereal Diseases.

Arrangements in connection with the treatment of Venereal Diseases continued as formerly at the Centres in Dundee, Dunfermline and Kirkcaldy. The following are particulars in regard to work undertaken at the Dundee and Kirkcaldy Centres.

KIRKCALDY CENTRE.—The new cases attending for treatment in 1938 numbered 266 (males 182, females 84). Of the new cases 73 suffered from syphilis, 115 from gonorrhoea, 1 from soft chancre, 23 from non-specific venereal infections and 54 showed no evidence of venereal infection.

The total number of cases dealt with during the year was 469 and the total attendances were 3,901 as compared with 5,261 in 1937.

The number of patients admitted for hospital treatment was 31, in-patient days totalling 595.

Defaulters, those ceasing to attend before completion of treatment, numbered 64 and 42 ceased attendance after completing treatment but before final test of cure. The number of patients transferred to other treatment centres was 51 and 110 were discharged after com-

pletion of treatment and observation. The number under treatment or observation at the end of the year was 143.

DUNDEE CENTRE.—The new cases attending for treatment at Dundee from Fife during 1938 numbered 52 (males 33, females 19). In 1937, new cases 34 and in 1936, 58. Of the new cases in 1938, 13 suffered from syphilis, 26 from gonorrhoea, 4 from other venereal diseases and 9 had no venereal disease.

The total attendances were 859 (males 396, females 463).

As regards the Dunfermline Centre, reference should be made to the informative report prepared by the Clinical Medical Officer. It is satisfactory to be able to report that proposals in regard to the erection of a new modern clinic are now well in hand.

The cost of provision of travelling facilities to the treatment centres for necessitous cases during 1938 was £31 6s 3d as compared with £18 4s 7d in 1937.

Report by

G. A. H. GUMLEY, M.B., Ch.B., D.P.H., M.R.C.P.E.

I have again the duty and privilege herewith to submit, for the information of the Venereal Diseases Joint Committee, a record of the work carried out at the Public Health Dispensary, Dunfermline, together with a report on matters pertinent thereto. The figures subscribed refer to the calendar year 1938.

Premises and Equipment.

The occasion of this report has, in the past, presented a welcome annual opportunity for comprehensive criticism of the generally inadequate and inappropriate facilities—which are all that is available for the prosecution of anti-venereal measures in the western portion of the County, and which compare unfavourably with the arrangements obtaining in another part of the Committee's province.

Toward rectification of the very gross defects, arrangements have now, by slow process, reached such a stage of advancement that it is no longer necessary to reiterate the many deficiencies.

It will suffice to note that the passage of each year entails a further depreciation in fixture and furnishing, while the year just closed has emphasised, as never before, the defects inherent to the site.

This short wide street accommodates, in addition to the clinic premises, a public weigh-bridge, public service garage, public cleansing department, and a wholesale confectionery business, all of which engender a considerable amount of traffic and activity. In this far from quiet backwater the legitimate activities of the clinic have for years been carried on, greatly hampered by the complete inability to afford any tangible measure of privacy in access to those who have, at the same time, the unfortunate necessity and good sense to attend.

During the past year there has been added a further hazard by the establishment, in premises immediately adjoining, of an anti-gas training centre while, with considerably less excuse and no apparent necessity, a workmen's caravan has, on occasion, been permitted to take up its stance almost opposite the clinic entrance.

In such difficult circumstances and inappropriate surroundings the work has been carried out, with considerable success, for many years. It can be confidently anticipated that, with new premises situated, designed and equipped to the particular purpose, the volume of work will show a substantial increase, and the quality a still higher standard.

New Cases.

During the year there presented themselves for examination and advice, 217 persons; this total comprises 164 males and 53 females and, on comparison with those for the year 1937, the figures represent, in the case of males, an increase of 10, and, in the case of females, a decrease of 4. The net gain, although it constitutes the second successive increase, is equivalent to an advance of only 2·8 per cent. on the total for the previous year.

Of the total material there were found, after appropriate investigation, 44 males and 14 females who were either free from all disease, or who suffered from conditions in the causation of which no evidence could be adduced to incriminate any venereal disease.

The remaining cases—120 males and 39 females—were found to be infected with one or other form of venereal disease; having regard to double and multiple infection these patients yielded instances of venereal infection in the undernoted numbers and variety.

Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-specific Venereal Infections.	Total.
Male.	23	87	3	13	126
Female.	25	17	—	2	44
Total.	48	104	3	15	170

These figures bear relation to the number of persons reporting only when due regard is had to the occurrence of cases of multiple infection. They are abstracted in accordance with the requirements of the annual return to the Department of Health for Scotland, and they give a more accurate indication of the measure and fluctuation of case incidence than do the comparative uninformative figures of total patients reporting.

The sum total of non-venereal and infected gives a figure for *clinical cases*—228—arising out of the number of *persons reporting*—217. The percentage figures which follow are to the former denominator.

Age of New Patients.

The fall of the ages in the successive quinquennia is shown in the table immediately following :—

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	Total.
Males	2	0	2	5	32	47	26	15	8	9	12	2	2	2	164
Females	4	0	2	6	10	10	6	6	4	3	1	0	0	1	53

The age grouping gives again a clear indication of the breadth of application of anti-venereal measures, whether merely diagnostic and exclusive or actively remedial. No age group can be exonerated, *per se*, from the possibility of venereal infection.

The neo-natal and post-natal periods provide much material for suspicion and necessary exclusion of disease inherited or acquired in process of birth, while inherited disease which has escaped such detection is likely to show its presence, with unmistakable emphasis and gravity, in the young child or juvenile. The necessity for dealing with the acquired infections of the indiscreet arises with the close of the second decade and, thereafter, there is little relaxation until the middle thirties when there commences a gradual falling off on the ensuing ten years.

The bulk of the work is thus found throughout the period of maximum sexual activity but subsequently, and on to quite advanced age, the delayed consequences of long-standing and untreated disease continue to call for appropriate remedial measures.

Route and Source of New Cases.

As in former years the majority of patients have had recourse to the Clinic of their own volition : during the year under review 124 patients reported thus ; 12 were recommended by Medical Officers of the Public Assistance Authority, 1 by a County Area Medical Officer, and 1 by the Medical Officer of Health, Dunfermline. In addition, there were transferred, for continuance of observation, 12 cases in whom diagnostic investigation and/or treatment had been instituted elsewhere, while 6 cases were seen in the Fife District Asylum, Springfield.

There continues to be a considerable number—61—in whom the recommendation to attend has come from the family practitioner. The difficulties of treating adequately, in the course of general practice, the less elegant manifestations of venereal disease are not inconsiderable and for many years past one has endeavoured, so far as possible, to provide, for the simultaneous convenience of practitioner and patient, a reliable service of diagnosis and of treatment. This particular co-operative effort appears consistently to receive the goodwill of many

neighbouring practitioners and will, one believes, widen out very considerably when more appropriate facilities are available.

Details of the various localities from which new patients were recruited are set out in the statistical summary at the end of this report.

Cases of Syphilis.

New patients found on examination to be affected by syphilitic disease numbered 48 (21.05 per cent. of the whole) and show, in this figure, an increase of 41 per cent. on that for the corresponding subgroup of the preceding year.

CONGENITAL SYPHILIS.—Of the total number of cases of syphilis, 12 were of congenital origin; of these, 8 were females of ages at detection—6 weeks, 11 years, 12 years, 14 years, 20 years, 23 years, 25 years, and 32 years. Two of the cases were latent and showed no clinical evidence of active disease but in the remaining 6 cases there was obvious specific activity—in 3 cases the eyes were involved, in 2 cases the cranial bones (nose and palate), and in 1 case the central nervous system was gravely involved.

Amongst the latter six cases there had been, in the antecedent medical history of 2, respectively 2 years and 9 years previously, clear and unequivocal indications of disease which ought to have given rise at least to suspicion of an underlying specific aetiology. The opportunity was missed, however, and, in consequence of the delay, there had accumulated a greater degree of tissue destruction and a wider range of residual functional defect.

In the present very adequate state of medical knowledge it seems unaccountable that, in these two congenital cases, the early and very characteristic disturbances should have failed to focus attention and it is perhaps competent to speculate as to how far the present-day absence of the classical congenital facies contributes to such errors of omission. There is no complete text-book of medicine and certainly none of venereal disease which does not give an accurate and graphic description of the cranial and skeletal configuration of the congenital syphilitic, together with the other salient features so characteristic of the disease. So very graphic and arresting is the complete description that it is possible, in fixing the characteristic mental picture, to forget the outstanding fact that, at least in the present time, it is, on the one hand, rare indeed to find the complete picture and, on the other, not uncommon to find undoubted congenital syphilitics in whom the most striking feature is an entire absence of any suggestive general appearance or particular stigma.

One case of female congenital syphilis deserves mention: a girl of ten years developed a spinal cord paralysis subsequently (too subsequently) found to be due to congenital syphilis: the mother, aged 37, examined as a routine precaution, was found to be infected with

specific disease in a latent stage and, in turn, her mother aged 67, was found to show the scars of recently healed superficial ulcers of tertiary syphilis. It does not follow that this is an instance of third generation transmission of syphilitic disease but the sequence of events is at least suggestive of it.

Of the 4 male cases of congenital syphilis, 2 were latent and of accidental discovery and 2 were showing evidence of active disease—in both cases the eyes being the tissues involved.

ACQUIRED SYPHILIS.—There were 36 cases of acquired disease. In 4 of these cases diagnosis was established and treatment instituted while the disease was still in the early primary stage of infection; in a like number the infection had passed, before treatment was commenced, to the secondary stage of general dissemination, while in no less than 28 cases the disease had become firmly established in later stages.

In 9 of these the disease was in a latent stage with no marked local activity and no consequent symptoms but, none the less, slowly and insidiously exercising its destructive process in the tissues. In such cases one must be prepared to place reliance on the results of serological examination together with the personal history in relation to possibility of infection and occurrence, in years past, of signs and symptoms sufficiently clearly imprinted on memory as to provide a picture suggestive in itself. In some, the scar of the original primary lesion can be detected; in many there is neither residuum in memory nor local scar to assist and reliance must rest, perforce, entirely on the bacteriologist's report.

In the remaining 19 cases there were, in the presence of characteristic signs and symptoms, clear indications of the ultimate localised effects of the long-standing general infection—liver in one case, skeletal system in 3 cases, subcutaneous and muscular tissues in 2 cases, central nervous system, with or without psychical disturbances, in 11 cases, and joints in 2 cases.

The age averages in the three stages, early, intermediate latent, and late tertiary—respectively 24 years, 29 years and 49 years—are illuminating. At this late date in the history of organised treatment we have but a few young recently infected patients, an approximately equal number who are detected after infection has become firmly established but, more by accident than design, before delayed consequences have become manifest, and more than half the year's total who are not brought to diagnosis and treatment until tertiary lesions have become only too apparent. And the average age of this last and largest group is 49 years—an age when civil and domestic responsibilities are heaviest and industrial and economic usefulness at an optimum. At this age they are detached from productive effort, many never to recover full health and activity.

It is, of course, to be borne in mind that this unsatisfactory state of affairs is a legacy of the indifference and ignorance of a generation ago, and that the enormous progressive fall in the incidence of early syphilis which has been attained during twenty years will ensure, for a generation hence, that there will be a less burdensome sequel of disease in the middle-aged.

TREATMENT OF SYPHILIS.—The treatment of this disease has shown little substantial change in fundamentals for many years past and still embodies, in its pharmacopoeia, remedies which have been in use for centuries.

Iodides, arsenic, bismuth, and mercury are the mainstays and, while the many variations, chemical and physical, in their preparation provide a quite formidable array of therapeutic agents—whose price is usually proportionate to their pharmaceutical elegance—basic principles of treatment vary hardly at all. It is easy, but not wholly fair, to be mildly sarcastic in referring to products which, it cannot be denied, are the result of brilliant and painstaking research on the part of the organic chemist. These modern preparations are, many of them valuable indeed, and there is equal truth in the supposition that we are perhaps over-satiated and, while to our jaded therapeutic palates the advent of yet another immaculate recipe may make little immediate appeal, those which we have accepted—and which we now take for granted—must have represented, to the older clinician, an advance of providential magnitude and applicability.

While our basic drugs remain thus unchanged, we are now supplied with stable, sterile, convenient, and comparatively non-toxic preparations of them in wide variety, and, between various centres and over the past few years, the only significant variants are the methods of application and total dosage. The practice in this Clinic has been to make a vigorous and sustained attack on the disease throughout the first year of treatment, to intermit and vary in the second and subsequent years, if any, and to attain a final total dosage well in excess of the minimum effective standards laid down some years ago and now generally accepted. After such a full course of treatment the risk of clinical or serological relapse is slight indeed and, by administering, in a comparatively short period, the major portion of a considerable total dosage, the consequences of default in attendance are likely to be minimised.

During the year patients made 1,488 attendances for the purpose of receiving anti-syphilitic treatment under the supervision of the Clinical Medical Officer and, for dressing or other ancillary measures, 131 attendances. After full treatment, probationary observation, and tests of cure, there were discharged 19 patients, to the continued care of other centres 7 patients, and to the care of the family practitioner 1 further patient.

Cases of Gonorrhoea.

This infection is the old faithful of any venereal diseases clinic, bulks always greatest in annual statistics, and entails, as a rule, a disproportionately large expenditure of time and energy.

During the year there reported, suffering from this infection, 104 patients (45.61 per cent.) comprising 87 males and 17 females. The wide disparity in apparent incidence in the two sexes is especially and consistently present in this disease and, equally consistently, may be rejected as a wholly unreliable index of true relative incidence.

The recently implanted disease presents, in even the most inobservant male, so obviously as at once to command attention whereas, in the female, the symptoms and signs of its advent may be so slight and evanescent, and so obscured by very common and much less sinister phenomena, that the occurrence of infection may entirely escape notice. There can be little question that, for this reason alone, very large numbers of infected women are never brought to treatment, constitute an extensive reservoir of disease, and imply a constant threat to all those with whom they may come in contact. It is indeed fortunate that the unknown magnitude of this menace is not further enhanced by any marked ability, on the part of the gonococcus, to survive for a significant period in fomites.

TREATMENT OF GONORRHOEA.—This has been not only vastly improved but has, at the same time, become much simplified since the introduction, some two years ago, of the sulphanilamides.

In the report for 1937, with reference to these drugs, it was stated tentatively and with qualification that their advent "was possibly the most valuable single step which has ever been made."

Possibly in the mists of antiquity there was a time when gonorrhoea was ascribed, not without intuitive accuracy, to the evil eye and left, with primeval fatalism, untreated. If one excludes the first attempt, by whatever means, to treat this disease, it can now be claimed, with entire confidence, that the use of sulphanilamide drugs is quite the most valuable contribution to the therapeutics of gonorrhoea. Whereas formerly, the mainstay of treatment consisted in patient attendance and painstaking attention to detail, the strength of the attack on this infection is now vested in the intelligent application of these agents. By their use the period of frequent attendance is shortened, complications have become almost unknown, the problem of the chronic and resistant case is much simplified, and, by showing early and obvious beneficial results, the confidence of the patient in his ultimate cure is greatly fortified.

The enormous success which has attended their exhibition may well have further beneficent consequences. In the report for 1936, in part explanation of the persistent high incidence of gonorrhoea compared to the progressive decline in frequency of primary syphilis, there was

put forward, as one potent causal factor, the absence, in the treatment of gonorrhoea, of any drug—such as is available in syphilis—which will effectively and rapidly sterilise the lesions and remove from them the menace of communicability.

Sulphanilamide now provides, in a large percentage of cases of gonorrhoea, such a rapid disappearance from the discharges, of the infecting organism, that there can be little doubt that the communicability of the disease is brought under a very early and effective control; there is now, in a majority of cases, an absence of that long trying period of treatment during which the amelioration of symptoms and signs deceitfully outstrips the lessening of infectivity, and which, although effective in the long run, certainly did not, save in quite exceptional cases, minimise, at an early stage, the grave danger of transmission. There is, therefore, in the continued use of sulphanilamide and its congeners, a distinct hope for effective diminution in the incidence of this, so far, obstinately prevalent infection.

A danger which early became evident—the too ready availability of the drug—has been avoided by its addition to the Poisons Schedule. There was indeed, no doubt that patients who were supplied with sulphanilamide on open prescription not infrequently recorded their appreciation of its efficacy by failure to report back. To proceed by this method was a mistake of which rectification was not delayed. The drug is now supplied direct in quantity sufficient to maintain adequate dosage until the next occasion of clinic attendance and its use is preceded by a preliminary period of treatment by irrigation, alkaline diuretic, and vaccine. The drug is of such recent inception that the optimum time and method of application have not yet become stabilised, and it is more than possible that, with the more effective sulphanilamide combinations which are already available, it will be possible, in a majority of cases, to quell infectivity in a matter of days.

There is a reverse to the medal in that the drug is not without its disadvantages and may give rise to undesirable side-effects. These are usually of little consequence and it has been found that patients who are forewarned are, in the main, able and willing to endure minor discomforts for the sake of major benefits. Further, the use of the drug carries with it certain well-known risks but, having regard to the enormous quantities which are in daily use, the paucity of reports indicates a risk which is relatively insignificant and which should not be considered a deterrent to its use.

During the year patients with gonorrhoea made 1,586 attendances for supervision by the Clinical Medical Officer and 4,305 attendances for intermediate treatment and dressing at the hands of the Medical Orderly.

After adequate treatment, probationary observation, and tests of cure, there were discharged, free of infection, 76 patients; there were

discharged to the continued care of other treatment centres 8 further patients.

Those who failed to report back for observation and tests of cure but who had reached the stage of apparent cure after adequate treatment, numbered 13, while in a further 8 cases default in attendance occurred before a sufficient course of treatment had been completed.

With regard to default before completion of treatment, it can only be said that there is little excuse for such conduct and none whatever for its continued toleration. There is no good reason why such wanton disregard for elementary precautions and civil obligation should be permitted to continue. Unfortunately, there appears to be, in authoritative quarters and especially in political spheres, a revulsion to anything which even remotely suggests compulsion. To the mind of the writer complete individual freedom is, in many respects, incompatible with civilised life and thought. Indeed, compulsion, apparent or discreetly veiled, is the life-blood of communal existence, and a lack of it the law of the jungle.

Certainly it is difficult to appreciate the point of view of those who so enthusiastically eulogise what they are pleased to call a free country. From notification of birth to registration of death we are regulated—no doubt beneficially so—by what is essentially compulsion, and a little more of it in the right places would not come amiss.

Compulsory powers in some measure are necessary, work well in many progressive European countries, and there is no reason why their introduction here should be indefinitely delayed. The belief, widely held by those not in contact with the defaulter, that educational measures alone will solve the problem, indicates a singular lack of insight into his mentality, and a complete failure to appreciate the civil enormity of the offence.

Cases of Chancroid.

Instances of this infection continue to be infrequent. During the year there were 3 cases only, representing 1.31 per cent. of the whole. These soft sores may, at first sight, masquerade as rather formidable lesions with the threat of imminent gangrene or, more commonly, as chronic intractable ulcers of peculiarly obstinate character. Treatment by thorough cauterisation, repeated if necessary, is simple, readily applicable, and has, hitherto, brought satisfactory results. It has not been found necessary as yet, to have recourse to vaccine or sulphanilamide, although treatment by either of these means is credited with a high degree of efficiency. Fortunately, in the type of case indigenous to this area, complications are infrequent and sequelae non-existent.

During the year attendances for the purpose of diagnosis and treatment numbered 20, and for the purpose of interval dressing, 46.

Lympho-granuloma Inguinale.

This venereal infection has emerged, in recent years, from comparative obscurity and now occupies a position of some eminence. It is doubtful if this signifies any actual increase in frequency, and probable that the more numerous reports of its occurrence arise from recent vigilance. In most of the reported cases infection has occurred abroad, and it would appear that, as yet, the disease has failed to secure a foothold in this country. In any event, although one has been on the look-out for it, the disease has not been observed at this Clinic.

Non-Specific Venereal Infections.

These form a heterogenous group of infective conditions of variable appearance and bacteriology whose presence, in such exalted company as syphilis and gonorrhoea, tends to invest them with a pathological dignity to which they have little real claim. Although undoubtedly of infective character, many owe their existence as much to lack of elementary cleanliness as to any particular incidence of infection.

They require critical examination and continued observation in order to exclude more serious disease and, in addition, some measure of treatment directed toward prompt amelioration of the obvious minor infection. For these purposes the 15 cases (6.57 per cent. of the whole) made 73 attendances on the Clinical Medical Officer and 137 attendances for intermediate treatment and dressing.

Conditions other than Venereal Disease.

Patients found after adequate investigation to be free of any form of venereal disease numbered 58 and comprised 25.43 per cent. of the whole.

This group bulks always large in the annual figures and, in the absence of explanation, might reasonably lead to the conclusion that a significant proportion of the time, labour, and cost of operating the Clinic is fruitlessly dissipated. It is hardly necessary to emphasise that this is not so, and that a medical service of considerable value is represented by these cases.

They comprise (1) those who, having exposed themselves to risk of infection, report for examination and advice (2) those who, being recent contacts of proven cases, have reported in response to written advice, (3) wives or husbands and members of families in which venereal disease has occurred, and amongst whom it is desired to detect, without undue delay, any further cases of disease acquired or congenital, (4) those who have been recommended to attend by family practitioners with a view to the confirmation or exclusion of venereal disease in the aetiology of some general disability the nature of which suggests that possibility, (5) those who, for reasons unknown, even to themselves, have acquired the erroneous and fixed belief that they are infected with venereal disease.

All such cases require examination and observation over a period before final acquittal. For the purposes of this routine investigation these cases made 258 attendances at clinics under the supervision of the Clinical Medical Officer. There was, of course, no necessity for attendance at other times.

Hospital Cases.

For those cases in which particular indications warrant it, suitable accommodation and reasonable facilities are available at the West of Fife Infectious Diseases Hospital.

During the year it was found desirable to admit to hospital 4 patients. Of the 3 females admitted, 1 was a double infection of recent chancroid and old-standing complicated gonorrhoea, 1 a child contact of the first and infected with gonorrhoeal vulvo-vaginitis, and 1 a recent double infection with gonorrhoea and virulent secondary syphilis. One male case of complicated gonorrhoea was admitted.

The total number of bed-days was 179 and the average duration of stay 44.75 days.

Fife District Asylum.

For many years past there has existed, with this Institution, an energetic and useful liaison. Periodic visits are made to the Hospital and, from the usually considerable number of specific cases, there are selected those in whom a joint opinion agrees that anti-syphilitic treatment is likely to prove of benefit. The administration of treatment is left in the hands of the Medical Staff of the Institution, the necessary drugs having been sent on from the Clinic. This arrangement works well and examination in consultation with the Medical Superintendent secures that anti-specific treatment is neither fruitlessly expended nor unjustifiably withheld.

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 and ready help throughout the year.

Particulars of New Cases.

1938.	Persons reporting.		Syphilis.		Gonorrhoea.		Soft Sore.		Non-Specific V.D. infections.		Conditions other than V.D.		Total No. of "Clinical Cases."
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Jan.	19	5	—	2	14	3	—	—	2	—	4	1	26
Feb.	12	4	3	1	7	3	—	—	1	—	1	—	16
Mar.	15	9	1	6	7	1	—	—	1	—	6	2	24
April	12	3	2	1	5	—	—	—	1	1	5	1	16
May	19	4	4	2	8	2	—	—	2	—	6	—	24
June	10	4	1	3	4	—	—	—	1	—	4	1	14
July	9	6	2	5	7	2	—	—	1	—	1	1	19
August	13	6	1	1	6	3	1	—	1	—	4	3	20
September	15	5	3	1	5	2	1	—	—	—	6	3	21
October	14	3	4	2	10	—	—	—	—	—	1	1	18
November	16	3	1	1	10	—	—	—	2	1	3	1	19
December	10	1	1	—	4	1	1	—	1	—	3	—	11
Totals	164	53	23	25	87	17	3	—	13	2	44	14	228

Particulars of Injections Given.

Specimens Examined and Routine Attendances.

1938.	Arseno-benzol Compounds.	Bismuth, etc.	Vaccines, etc.	Specimens examined.	Routine attendances.
Jan.	41	78	44	163	789
Feb.	53	88	14	145	702
Mar.	63	104	9	129	718
April	42	64	21	139	681
May	68	67	48	149	745
June	51	63	26	145	654
July	37	50	6	113	612
August	44	71	9	87	631
Sept.	39	64	4	143	619
Oct.	58	74	11	108	623
Nov.	60	87	23	138	674
Dec.	60	109	15	62	596
Totals	616	919	230	1521	8044

Districts from which Patients Reported.

Aberdour	.. 1	Glencraig	.. 6	Plymouth	.. 1
Belfast	.. 1	Halbeath	.. 2	Rosyth	.. 16
Blairhall	.. 4	Hill of Beath	.. 1	Saline	.. 2
Bowhill	.. 2	Inverkeithing	11	Steelend	.. 1
Bristol	.. 1	Kirkcaldy	.. 2	So. Shields	.. 1
Carnock	.. 1	Kelty	.. 6	Springfield	..
Cardenden	.. 2	Kinross	.. 3	(F.D. Asylum)	.. 6
Coaltown of Balgonie	.. 1	Kincardine	.. 2	Valleyfield H.	.. 6
Cowdenbeath	.. 21	Kinglassie	.. 2	Valleyfield L.	.. 5
Crossgates	.. 2	Lochore	.. 1	Wellwood	.. 1
Crossford	.. 1	Limekilns	.. 1		
Dunfermline	.. 88	Lochgelly	.. 12		
Glasgow	.. 1	Lumphinnans	2		
		Markinch	.. 1		

No new matters of importance require to be recorded in regard to the administration and operation of the M. & C. W. Services. Preliminary negotiations and consultations in regard to the County Scheme under the Maternity Services (Scotland) Act, 1937, were continued and the Scheme will come into operation on 16th September of the current year.

Maternity
& Child
Welfare
Services.

The following information in regard to routine activities is submitted.

ADDITIONAL NOURISHMENT.—During 1938, 403 applications were made by or on behalf of families under the Maternity and Child Welfare Scheme. Forty-five applications were refused. Grants were authorised to 120 expectant mothers, 85 nursing mothers and to 198 families for children under five years of age.

The routine grant to expectant and nursing mothers and to children is milk: the quantity supplied during 1938 was approximately 3,845 gallons. In addition, oatmeal is supplied to expectant and nursing mothers along with milk. Cod Liver Oil (B.P.C.) is frequently supplied for children. Proprietary food preparations are occasionally granted in special circumstances.

The cost of additional nourishment in 1938 was £449 13s 10d as compared with £254 9s 2½d in 1937. In 1938, milk cost £395 15s 0d, oatmeal and farinaceous food, £37 10s 2½d, dried milk preparations, 11s 10d; and other foods £15 15s 11½d.

MATERNITY HOSPITALS.—*Kirkcaldy Maternity Hospital.*—During 1938, there were 334 admissions (330 women, 4 infants). Eighteen women were admitted as private patients. Of the remaining 316 patients, 297 paid the recognised maintenance and treatment charges; 9 were partly necessitous, 6 were wholly necessitous, while 4 cases were referred to the appropriate Department for collection of outstanding fees.

Dunfermline Maternity Hospital.—During 1938 admissions numbered 271 (262 women, 9 infants). The recognised fee was paid in respect of 237 admissions. Eleven women were partly and 16 wholly necessitous. Seven cases were referred to the appropriate Department for collection of outstanding fees.

The total number of patients admitted from the County to both Maternity Hospitals was 592 as compared with 506 admissions during 1937.

MIDWIVES ACTS.—In terms of the Midwives Acts, 185 claims were received. Five were subsequently withdrawn, payment being made privately to the doctors concerned. The remaining 180 claims involved sums totalling in all £251 17s 6d.

MIDWIFERY SERVICE.—Applications on behalf of women in necessitous circumstances for midwifery service numbered 71. Of these, 36 were approved and 35 refused. Of the refusals, Maternity Benefit

was payable in 25 cases ; in 3 cases the income was over the scale ; seven other cases were refused on various ground.

The applications were made by midwives, doubtful of their fee, in 32 cases, by health visitors in 29 cases and by relatives, etc., in 10 cases.

The applications were received from Cowdenbeath area, 21 ; Lochore-Glenraig-Cardenden area, 40 ; Inverkeithing, 1 ; Leven-Methil, 4 ; Milton of Balgonie, 3 ; and Cupar-Pitlessie area, 2.

During 1938, the expenditure on this service amounted to £47 9s as compared with £40 12s expended during 1937.

ORTHOPAEDIC SCHEME.—On 1st January 1938, 24 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, 50 patients were admitted for the first time, while 14 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 £2,814. Contributions, varying in amount from 2/- to 15/- per week, were made by parents towards the cost of maintenance of their children in Fairmilehead Hospital. 36 remained under treatment at 31st December 1938.

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 1938 at a cost to the County Council of £39.

Further details in regard to the Child Welfare Services are contained in the report by the Deputy Medical Officer (Welfare).

Morbid Products.

The number of specimens submitted for examination by medical practitioners during 1938 was 520, viz., throat swabs 302, of which 51 were positive to diphtheria ; 28 bloods, of which 4 were positive to abortus ; and 190 sputa, of which 28 were positive to tubercle bacilli. In addition, 115 specimens of sputum were sent for examination by the Tuberculosis Officer, of which 24 were positive.

Housing.

Accounts of housing activities are given in the Reports of the Deputy Medical Officers for the Eastern and Western Divisions of the County. Reasonably satisfactory progress is being made towards the removal of unsatisfactory housing conditions but many houses yet require to be built and much adjustment among owners of fit overcrowded houses yet remains to be effected before the housing conditions which the County Public Health Committee seek to see established become realised.

Food Supply.

The outstanding event of the year in connection with the control of the food supply was the transference of veterinary services to the Ministry of Agriculture and Fisheries. Veterinary inspection of dairy cattle and all that pertains to the supervision of the health of dairy

herds became the concern of Government Veterinary Officials. Closest co-operation has been maintained between the new officials and those of the County Public Health Department and the new arrangement has reacted entirely to the benefit of the public. The transference of duties took place on 1st April 1938, since when until the end of the year 79 animals were taken under the Tuberculosis Order as compared with an average of 65 for the three year period 1935-37. The greater vigilance with which supervision of dairy herds is now being undertaken is a source of much satisfaction.

Information in regard to supervision of the meat supply is contained in the Reports of the Deputy Medical Officers for the Eastern and Western Divisions. This opportunity is taken, however, of directing attention to the fact that a decision has not yet been reached on the question of centralisation of slaughtering. In the meantime several requests for information and guidance have been received from Town Councils who, dissatisfied with the condition of slaughterhouses within their areas are considering the erection of new premises.

During 1938, the number of prescriptions issued by Parish Medical Officers to the sick poor was 8,211 at a cost to the County Council of £579 12s 10½d. The corresponding figures for 1937 were 8,652 prescriptions at a cost of £560 8s 5½d. Public Assistance.

G. MATTHEW FYFE,
County Medical Officer.

August, 1939.

MEDICAL SERVICES.

1. INFECTIOUS DISEASES.—In 1938, there was an increase of 423 in the number of recorded cases of infectious diseases, as compared with the preceding year. This was mainly due to the greater incidence of Scarlet Fever and, to a less extent, Diphtheria. There were 387 more cases of Scarlet Fever and 92 of Diphtheria than in 1937. The greater incidence of Scarlet Fever was, for the most part, confined to the landward part of Dunfermline District and Cowdenbeath Burgh. In the former Area there was an increase of 201 cases, while in Cowdenbeath Burgh there were 79 more cases of Scarlet Fever than in the preceding year. At no time, however, did the disease assume epidemic form.

The following table shows the distribution of the diseases in the different areas of the Western Division:—

Western Division.

Report by

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

Senior Deputy Medical Officer of Health.

Owing to the increasing demands made on my time, and that of other public health officials, in dealing with the routine work of this area, only a brief summary of the year's work can be given.

To such an extent has office routine and Air Raid Precautions work developed, that work of a practical nature has frequently had to stand aside. In this respect, I would draw attention to the multiplicity of returns asked for by the Central Department, especially with regard to Housing matters. These are now asked for monthly, quarterly, half-yearly and annually, in diverse and often in complicated form, and, in a populous area like that under review, far too much, not only of my time, but also that of Sanitary Inspectors, is taken up in compiling "Returns," when it might be more usefully employed in dealing with the practical aspects of Public Health work. I am quite satisfied that no amount of such paper details can compensate for neglect of the practical essentials which should be undertaken, but which frequently have to be left undone in order that returns can be submitted within reasonable time. I would respectfully suggest, therefore, that the time of officials should not be taken up unduly in compiling statistics and that the many returns now asked for by the Department of Health should be drastically curtailed and simplified.

MEDICAL SERVICES.

1. **INFECTIOUS DISEASES.**—In 1938, there was an increase of 422 in the number of recorded cases of infectious diseases, as compared with the preceding year. This was mainly due to the greater incidence of Scarlet Fever and, to a less extent, Diphtheria. There were 387 more cases of Scarlet Fever and 92 of Diphtheria than in 1937. The greater incidence of Scarlet Fever was, for the most part, confined to the landward part of Dunfermline District and Cowdenbeath Burgh. In the former Area, there was an increase of 201 cases, while in Cowdenbeath Burgh, there were 79 more cases of Scarlet Fever than in the preceding year. At no time, however, did the disease assume epidemic form.

The following table shows the distribution of the diseases in the different areas of the Western Division :—

INFECTIOUS DISEASES—1938.

Disease.	Total Cases.	Burghs.	Dunferm- line District.	Lochgelly & Beath District.	Kirkcaldy District.	Wemyss District.	Removed to Hospital.	Treated at Home.
Scarlet Fever	876	344	275	178	68	21	851	25
Diphtheria	379	120	106	119	17	17	379	—
Erysipelas	149	60	28	40	10	11	48	101
Primary Pneumonia	322	131	61	67	22	41	244	78
Influenzal Pneumonia	51	31	19	7	—	—	54	3
Pneumonia (not otherwise notifiable)	1	1	—	—	—	—	1	—
Cerebro-Spinal Fever	9	3	2	1	—	3	9	—
Typhoid Fever	1	1	—	—	—	—	1	—
Para-Typhoid A	1	1	—	—	—	—	1	—
Para-Typhoid B	1	—	—	1	—	—	1	—
Dysentery	5	1	—	—	4	—	1	4
Malaria	1	—	—	1	—	—	—	1
Poliomyelitis	8	3	1	3	—	1	4	4
Puerperal Fever	10	2	3	2	—	3	9	1
Puerperal Pyrexia	17	7	5	3	1	1	16	1
Ophthalmia Neonatorum	72	25	14	20	5	8	9	63
Tuberculosis—Pulmonary	69	32	12	12	4	9	21	48
Tuberculosis—Non-pulmonary	94	38	19	22	5	10	29	65
Totals	2,072	790	545	476	136	125	1,678	394

2. HOSPITAL AND AMBULANCE FACILITIES.—The hospital and ambulance facilities remain as described in previous reports.

(a) *West Fife Infectious Diseases Hospital*.—During the year 1,503 cases were admitted for treatment and the average duration of stay of patients was 28 days. Thirty deaths occurred and the average number of beds occupied was 119 during 1938. The highest number occupied was 170 on the 17th of February and 4th of March, and the lowest number occupied was 68 on the 22nd August. There were eight operations under general or spinal anaesthesia and 39 other operations of a minor character.

(b) *Thornton Infectious Diseases Hospital*.—The number of cases admitted was 607 and nineteen deaths occurred. The average duration of stay of patients was 24 days and the average number of beds occupied was 56 during the year. The highest number of occupied beds was 63 on the 26th February, and the lowest number occupied was 23 on the 29th September. Six operations were performed under general or spinal anaesthesia and 33 other operations of a minor character.

(c) *Cameron Infectious Diseases Hospital*.—The admissions numbered 273 and there were 28 deaths. The average duration of stay of patients was 27 days; the average number of beds occupied was 21, the highest number being 46 on the 14th February, and the lowest, 7, on the 1st August. Six operations were performed under general or spinal anaesthesia and there were 26 other operations of a minor character.

(d) *Thornton Home and Hospital*.—In the hospital part of this institution there were 177 admissions and 63 deaths. The average duration of stay of patients was 122 days and the highest number of beds occupied was 56 on the 29th and 30th March, the lowest being 39 on the 31st December. No operations were performed. The number of attendances in the out-patient Department was 7,400.

(e) *Randolph Wemyss Memorial Hospital*.—During the year, 521 cases, mostly surgical, were admitted and 407 operations were performed under general or spinal anaesthesia. Fifty-two other operations of a minor character were undertaken. The average duration of stay of patients in hospital was 13·5 days and 14 deaths occurred. The average number of beds occupied during the year was 19·6, the highest number occupied being 27 on the 20th February, and the lowest number occupied was 7 on the 19th July.

(f) *Fosterton Smallpox Hospital* was not used during the year.

HOUSING.

During the year 986 new houses were erected in the Western Division of the County, as shown in the following tables :—

Kelty, 4th Development	..	..	..	212
Lochore, 4th Development	..	..	..	84
Valleyfield, 1st Development	..	..	..	46
Dundonald, 3rd Development	..	..	..	46
North Queensferry, 2nd Development	..	..	..	28
Rosie, 4th Development	..	..	..	112
Chapel, 1st Development	..	..	..	20
Woodside, 1st Development	..	..	..	40
Hill of Beath, 1st Development	..	..	..	40
Blairhall, 1st Development	..	..	..	44
Coaltown of Balgonie, 3rd Development	..	..	..	44
Kincardine, 3rd Development	..	..	..	4
Parkneuk, 1st Development	..	..	..	36
Crosshill, 2nd Development	..	..	..	68
Windygates, 4th Development	..	..	..	28
Comrie, 2nd Development	..	..	..	40
Kinglassie, 6th Development	..	..	..	44
Gray Park, 3rd Development	..	..	..	8
Limekilns, 2nd Development	..	..	..	12
Milton of Balgonie, 2nd Development	..	..	..	22
Burntisland, 2nd Development	..	..	..	8
Total	..	..	..	986

In addition, 468 houses were in process of erection, but many of these have already been completed and occupied. The houses under construction are as follows :—

Valleyfield	..	..	..	22
Dundonald	..	..	..	94
North Glencraig	..	..	..	80
Thornton	..	..	..	40
Halbeath	..	..	..	48
Methilhill	..	..	..	108
Lumphinnans	..	..	..	40
Wellwood (Tenders accepted)	..	..	..	36
Total	..	..	..	468

In order to ascertain the housing needs of this area for the period 1939-43, a re-survey was carried out just after the New Year and the results of this were submitted to the Department of Health and to the County Public Health Committee. A separate return (Housing Form 41) was completed and submitted for each special District or other populous place and, assuming that a complete process of decanting could be carried out in each of the places surveyed, it was found that the following houses would be required to relieve overcrowding and replace condemned unfit houses :—

Locality.	New Houses— Yet Required.						Surplus Houses after Decanting.					
	No. of Apartments.						No. of Apartments.					
	3	4	5	6	7	Total.	1	2	3	5	6	Total.
Aberdour ..	1	—	1	—	—	2	—	4	—	—	—	4
Crossgates, Donibristle and Fordell ..	75	51	12	—	—	138	—	65	—	—	—	65
N. Queensferry ..	7	15	—	—	—	22	—	25	—	—	1	26
Kingseat ..	5	3	1	—	—	9	—	8	—	—	—	8
Limekilns and Charlestown ..	1	6	1	—	—	8	—	6	—	—	—	6
Saline and Steelend ..	—	35	4	—	—	39	6	49	9	—	—	64
Torryburn and Newmills ..	18	15	2	—	—	35	7	22	—	—	—	29
High and Low Valleyfields ..	7	41	4	2	—	54	—	54	—	—	—	54
Wellwood ..	31	14	2	—	—	47	—	28	—	—	—	28
Milesmark and Parkneuk ..	5	5	—	—	—	10	—	—	—	—	—	0
Halbeath ..	13	8	1	—	—	22	—	10	—	—	—	10
Crossford and Cairneyhill ..	18	6	—	—	—	24	—	19	—	—	—	19
Hillend and St. Davids ..	5	1	—	—	—	6	—	3	—	—	—	3
Kincardine ..	—	20	5	—	—	25	1	26	3	—	—	30
Comrie, Oakley, Carnock and Gowkhill ..	—	10	—	—	—	10	—	—	—	—	—	0
Blairhall and Shiresmill ..	8	21	4	—	—	33	—	35	—	—	—	35
DUNFERMLINE AREA	194	251	37	2	—	484	14	354	12	—	1	381

Locality.	New Houses— Yet Required.						Surplus Houses after Decanting.					
	No. of Apartments.						No. of Apartments.					
	3	4	5	6	7	Total.	1	2	3	5	6	Total.
Lochore and Glencraig ..	147	142	28	2	—	319	—	124	—	—	—	124
Auchterderran ..	209	134	42	1	—	386	—	249	—	—	—	249
Lumphinnans ..	74	80	12	1	—	167	—	19	—	—	—	19
Kinglassie ..	7	7	1	1	—	16	—	3	—	—	—	3
Ballingry and Shank of Navty ..	—	2	—	—	—	2	—	—	—	—	—	0
Cluny Bridge and Greenhead, Cluny ..	6	1	1	—	—	8	1	3	—	—	—	4
Minto Cottages and Capledrae ..	3	2	1	—	—	6	5	6	—	—	—	11
Coalden and Cluny Square ..	—	4	1	—	—	5	—	4	—	—	—	4
LOCHGELLY AREA	446	372	86	5	—	909	6	408	—	—	—	414

Kelty ..	55	59	11	—	—	125	4	119	—	—	9	123
Hill of Beath ..	42	39	2	—	—	83	—	45	—	—	—	45
Lassodie ..	16	3	1	—	—	20	—	—	—	—	—	0
BEATH AREA ..	113	101	14	—	—	228	4	164	—	—	—	168

Methilhill ..	—	61	20	—	—	81	—	6	10	—	—	16
West Wemyss ..	8	14	4	—	—	26	—	—	—	—	—	0
Boreland ..	—	20	6	—	—	26	—	16	8	—	—	24
Coaltown of Wemyss ..	—	10	4	1	—	15	—	7	2	—	—	9
Kennoway ..	4	—	1	1	—	6	—	—	—	—	—	0
East Wemyss ..	18	26	2	—	—	46	—	23	—	—	—	23
Rosie ..	5	4	1	—	—	10	—	—	—	—	—	0
WEMYSS AREA ..	35	135	38	2	—	210	—	52	20	—	—	72

Locality.	New Houses— Yet Required.						Surplus Houses after Decanting.					
	No. of Apartments.						No. of Apartments.					
	3	4	5	6	7	Total.	1	2	3	5	6	Total.
Auchtertool ..	—	3	1	—	—	4	—	—	2	—	—	2
Milton of Balgonie ..	3	2	2	—	—	7	—	6	—	—	—	6
Woodside ..	1	—	—	—	—	1	—	3	—	—	—	3
Gray Park ..	—	—	—	—	—	0	—	—	—	—	—	0
Coaltown of Balgonie ..	6	7	—	—	—	13	—	9	—	—	—	9
Windygates and Balcurvie ..	2	13	3	1	—	19	—	11	—	—	—	11
Cameron Cottages, etc. ...	8	6	1	—	—	15	1	12	—	—	—	13
Thornton ..	5	30	3	1	1	40	2	19	—	—	—	21
Chapel ..	—	3	—	—	—	3	—	—	1	—	—	1
KIRKCALDY AREA	25	64	10	2	1	102	3	60	3	—	—	66

With regard to the figures given above for Wemyss Area, owing to a large scale programme of renovation and enlargement of houses by and belonging to Wemyss Coal Company, it has now been found that the figures given for East Wemyss, West Wemyss and Coaltown of Wemyss will be considerably altered, as the Coal Company have definitely promised to re-house many of the overcrowded families in their larger reconstructed dwellings in each of the above three villages. The requirements for these, assuming that a joint housing scheme, to meet the needs of West Wemyss and Coaltown of Wemyss, will be built, is as follows:—

Locality.	New Houses— Yet Required.					Surplus Houses after Decanting.			
	No. of Apartments.					No. of Apartments.			
	3	4	5	6	Total.	1	2	3	Total.
West Wemyss and Coaltown of Wemyss	—	22	6	1	29	—	—	4	4
East Wemyss	—	18	2	—	20	—	4	7	11
Rosie	2	4	1	—	7	—	—	—	0
Total	2	44	9	1	56	—	4	11	15

In submitting the statement of housing needs to the Public Health Committee, it was pointed out that surplus houses in one Special District could not be regarded as available to meet the needs of another, even in the same Area. It will be noted, in the figures given above, however, that the bulk of the surplus houses are comprised of dwellings of one or two apartments, but there can be no doubt that, though shown as surplus, they will, for the most part, be taken up by newly married and elderly couples for whom no provision has, so far, been made. There is, in most places to-day, a great dearth of the smaller type of house to meet the needs of normal development and the release of such houses will prove a god-send to many who have for years been deprived of a house of their own, or who have been condemned to live in a sub-let room, if bold enough to face marriage with all its responsibilities.

Housing Form No. 36, indicating the number of cases of overcrowding relieved as a result of action taken by the Local Authority and distinguishing between privately owned houses and Local Authority houses has already been submitted to the Department of Health. The cases of overcrowding relieved numbered 1,362 and the persons concerned numbered 7,651 from the date of the first survey in 1936, until the end of 1938. Three hundred and thirty-three families of the total cases relieved were housed in privately owned dwellings and the remainder by the Local Authority. In eleven cases where overcrowding had been relieved by the Local Authority, the houses had again become overcrowded.

Housing (Inspection of District) Regulations (Scotland) 1928, etc.

The annual return, showing the action taken by the County Council under the above Regulations, Part II. of the Housing (Scotland) Act, 1930, Section 20 of the Housing (Scotland) Act, 1925, and Section 125 of the Public Health (Scotland) Act, 1897 (Section 40 of the Housing, Town Planning, etc. (Scotland) Act, 1919), has already been submitted to the Department of Health. In the Western Division of the County, there are 959 cottar houses occupied by farm servants and 17,033

other houses occupied by members of the working classes. Of these, 311 cottar houses and 1,619 other dwellings were inspected during 1938; 109 of the cottar houses and 413 other dwellings were found to be in some respects unfit for habitation. In 83 of the cottar houses and in 287 others, there was not a proper supply of water introduced into the houses and 91 of the cottar houses and 303 other dwellings had not got water-closet accommodation.

Under Part II. of the 1930 Act, 45 Notices were served under Section 14, calling for the necessary repairs to unfit houses. Sixteen houses were actually renovated as a result of Section 14 Notices served in 1938 or in previous years. In seven instances, a Demolition Order was substituted for Notices previously served under Section 14. Under Section 16 of the 1930 Act, 116 notices were served; undertakings were accepted that the houses would not be used for human habitation in 25 cases where Section 16 Notices had been served and in 76 other cases Demolition Orders were applied, while in two cases Closing Orders were made.

As a result of informal action taken by members of the Public Health Staff, 38 cottar houses and 221 other houses were renovated without having recourse to the service of Statutory Notices.

As a result of intimations given to owners, under Section 20 (1) of the Housing (Scotland) Act, 1925, water-closets were provided for 12 houses, while, as a result of informal action taken by Public Health Officials, water-closets were provided for 28 cottar houses and 74 other dwellings.

As a result of Notices served under Section 125 of the Public Health (Scotland) Act, 1897 (Section 40 of the Housing Town Planning Act, 1919) a water supply was introduced into 3 houses. As a result of informal action by members of the Public Health Staff, a water supply was introduced into 32 cottar houses and to 57 other dwellings.

Houses Built by Unassisted Private Enterprise.

During the year, the following houses were built without state assistance in the Western Division of the County :—

With 3 apartments	..	9 houses
4	..	9 houses
" 6 "	..	1 house.
" 8 "	..	1 house
" 17 "	..	1 house
Total		.. 21 houses

Plans were examined and reported on to Local Sub-Committees as under, during the year :—

1. PLANS DEALT WITH UNDER BUILDING BYELAWS, and submitted to Local Committees, as follows :—

	New Houses. No. of Apartments.						Alterations and additions to existing Houses.	New Premises other than dwelling houses.	Alterations to existing premises other than dwellings
	2	3	4	5	6	Total.			
Dunfermline Area	—	5	11	1	1	18	21	40	9
Kirkcaldy	—	8	17	1	—	26	12	46	6
Wemyss	—	11	15	—	—	26	5	1	1
Lochgelly	1	24	22	4	—	51	6	12	8
Beath	—	—	—	—	—	—	1	1	1
Total	1	48	65	6	1	121	45	100	25

2. PLANS DEALT WITH UNDER HOUSING (RURAL WORKERS) ACTS and submitted to Local Committees as follows :—

Dunfermline Area	..	17 houses
Kirkcaldy Area	..	25 houses
Wemyss Area	..	26 houses
Lochgelly and 'Beath Area	..	41 houses
Total	..	109 houses

3. HOUSING (AGRICULTURAL POPULATION) (SCOTLAND) ACT, 1938.—An application was lodged along with plans for the erection of 2 three-apartment houses at Balgriebank Farm, Kennoway, under the above Act.

GENERAL SANITATION.

1. WATER SUPPLY.—As indicated in previous reports, the various sources of water available in the Western Division more than meet the needs of this area and steps have now been taken to make part of this available for the less fortunate districts of the Eastern Division of the County.

2. DRAINAGE SYSTEM AND SEWAGE PURIFICATION.—There have been no changes since my last report. The proposed Leven purification scheme will mitigate the unwholesome condition of that river to a certain extent, but will leave untouched the gross pollution occurring in its largest tributary—the River Ore—where crude sewage from a population of approximately 30,000 people is disposed of, without previous treatment.

3. REFUSE DISPOSAL from the 29 Special Scavenging Districts in this Area was on the lines indicated in former reports and calls for no special comments.

FOOD SUPPLY.

1. MILK.—As a result of the large number of applications received for licences to produce Standard Milk under the Milk (Special Designations) Orders (Scotland), 1936-38, a great deal of additional work has been added to the already overburdened Public Health Officials. However, it is work of first rate importance and one which should be carefully fostered in as much as a raising of the standard of cleanliness of milk is an added safeguard to the health of the community.

In order to comply with the prescribed conditions, the holder of a licence under the above Orders must, if he is to retain a licence granted for certified, tuberculin tested or standard milk, not only ensure that his cows are clinically sound and, for the first two grades, tuberculin free, but also see that his methods of production are such as to ensure freedom from filth and contamination. The frequent sampling entailed, to see that a proper standard of cleanliness is being maintained, has added enormously to the work of the Public Health Staff. Sufficient time is, therefore, not available to keep in close touch with all the ordinary producers, for which there is no standard of purity laid down. Some of these at least, supply milk which is far from clean. On occasion, test samples of the bulk raw milk, coming in from different farms, to a pasteurising establishment, have been submitted for bacteriological examination. Recently, of 22 samples thus tested, eight were obviously far from clean; some were actually so bad that, despite pasteurisation, I could not regard the milk as being either suitable or desirable as a food. When the bacteria count in fresh raw milk reaches the mark of half a million bacteria per millilitre, it is obvious that the methods of production are unsatisfactory and that little care is being taken by the producer to see that clean milk is being supplied to the consumer. When the bacteria count rises to two or three millions or more organisms the milk is obviously very filthy and unfit for human consumption. Of the samples referred to above and taken on delivery for pasteurisation, three samples gave a count of just over a million and a half bacteria per millilitre and one was actually over 3 million. Yet, no standard having been set for ordinary milk, the producer can continue to supply an article which obviously should not be permitted to be used as a food, especially where young children are concerned. It is quite impossible for the existing staff to be constantly present during milking hours at such premises, or to take samples for bacteriological examination from all producers of ordinary milk, yet it seems desirable that some standard of cleanliness and purity should be laid down for the ordinary producer, just as much as for those licensed to produce Certified, Tuberculin Tested and Standard Milk under the Milk (Special Designations) Orders. In fact, I consider that the bacterial standard laid down in the Orders for Tuberculin Tested and Standard Milk is not sufficiently strict. Repeated sampling of such milk shows that the careful producer has no difficulty in keeping the bacterial count

under 5,000 bacteria per millilitre, even in summer, yet the standard laid down in the Order for both Tuberculin Tested and Standard Milk is 200,000 bacteria per Millilitre.

The following table shows the producers' licences in operation under the Milk (Special Designations) Orders in the Western Division during 1938, but many additional licences, for the production of Standard Milk have since been granted in 1939 :—

Grade of Milk.	No. of licences in operation.	Total number cows in herds.	Estimated total production of milk in gallons per annum.
Certified	1	37	17,909
Tuberculin Tested	7	270	222,543
Standard	16	670	464,739

Two dealer's licences for the sale of Certified Milk were also granted in 1938, and 34 dealer's licences for the sale of pasteurised milk. Only one pasteuriser's licence was in operation during the year—Buckhaven Co-operative Society, Ltd.

There are 213 dairies registered for milk production in the Western Division of the County with approximately 5,621 cows.

2. MEAT.—The slaughterhouses in the Western Division of the County remain as indicated in former reports. Certain much needed improvements were effected at Lochgelly Public Slaughterhouse. The following table gives the number of animals slaughtered and the weight in lbs. of meat condemned from 16th January 1938 to 15th January 1939 :—

Return—Unsound Meat. 16th January 1938—15th January 1939.

Slaughterhouse.	Animals Slaughtered.			Lbs. of Meat condemned.
	Cattle.	Sheep.	Pigs.	
Buckhaven Public	1,944	1,800	740	63,375
Leven Public	1,077	1,837	382	40,471
Cowdenbeath Public	1,458	1,960	1,108	7,077
Lochgelly Public	822	878	619	13,562½
Markinch Public	741	623	248	6,997
Leslie Public	445	339	173	3,769½
Burntisland Public	496	929	337	3,901
Dunfermline Area (4 Private)	309	830	56	3,020
Beath Area (1 Private)	364	455	100	1,229
Wemyss Area (1 Private)	188	250	13	2,136
Kirkcaldy Area (1 Private)	99	187	38	461
Total	7,943	10,088	3,814	145,999

A scrutiny of the weight of meat condemned in relation to the number of animals slaughtered at the various slaughterhouses is instructive. Comment was made in my last report with regard to the relatively small amount of meat condemned at Lochgelly Public Slaughterhouse. This only amounted to 2,652 lbs. for 1937. In 1938, the weight of meat condemned was 13,562½ lbs.—a much more satisfactory figure. During the first four months of the year, before supervision was taken over by the County Staff (Mr. Riddle and Mr. Ferguson), the total weight of meat condemned was only 1,089½ lbs. Thereafter, for the remaining 8 months of the year, under County Supervision the weight of meat seized amounted to 12,473 lbs., i.e., more meat was condemned every month under the new regime than the total weight in the first 4 months, thus clearly indicating that much stricter supervision is now being maintained. With the daily slaughtering here, several hours a day must be spent at the slaughterhouse by Mr. Riddle or his assistant, Mr. Ferguson, and the time can ill be spared with other duties incessantly calling for their attention. The question of meat inspection is one of such importance, however, that priority must be given to it. Centralisation, with the appointment of a properly qualified meat inspector for each slaughterhouse, is long overdue. This course would relieve Sanitary Inspectors for other important duties, especially in connection with the milk supply which, meantime, can only be given scant attention, although it is one which, in view of its importance as a food, merits far greater consideration.

The total amount of meat condemned in 1938 was 20,406½ lbs. greater than in 1937, although the number of animals slaughtered was actually 884 less than in 1937. This, I think, shows that much closer inspection of the animals slaughtered is now being maintained. The meat condemned in 1938 totalled 65 tons, 3 cwts, 63 lbs., giving an increase of 9 tons, 2 cwts., 23 lbs. over that seized in 1937. The figures are now, on the whole, satisfactory but at Cowdenbeath Public Slaughterhouse, with a total of 4,526 animals slaughtered, the largest number dealt with at any of the slaughterhouses in this area, the relative weight of meat condemned (7,077 lbs.) is much too low. Leven Public Slaughterhouse, with only 3,296 animals slaughtered had 40,471 lbs. of meat seized. Adverse comment was made for several years with regard to the relatively small amount of meat condemned at Leven, viz., 1,220 lbs. in 1931, only 200 lbs. in 1932, 2,297 lbs. in 1933, 3,558 lbs. in 1934. It was then maintained that, owing to the fine type and quality of the animals slaughtered, full complement of bad meat was being seized, yet when a properly qualified full-time meat inspector was appointed in 1935, the amount of meat seized steadily increased year by year until it now stands at the respectable total of 40,471 lbs. Yet the quality and type of animal slaughtered at Leven now is in no way different from that slaughtered during the years 1931-34. I am satisfied, therefore, that with a full qualified meat

inspector at Cowdenbeath on whole-time duty, the amount of meat condemned would be nearer the region of 50,000—60,000 lbs. annually than the meagre return given above—7,077 lbs.

The following seizures of unsound food was made during the year under Section 49 of the Public Health (Scotland) Act, 1897 :—

Unsound Meat 1938.

Seizures under Section 49 of the Public Health (Scotland) Act, 1897.

1 tin corned beef	6 lbs.
1 cooked ham	12 lbs. 6 ozs.
4 rabbits.	
1 tin boneless ham	14 $\frac{3}{4}$ lbs.
1 tin tongue	6 lbs.
3 tins cooked ham	45 lbs.
3 tins veal and ham	15 lbs.
1 tin cooked gammon	16 lbs.
Cooked ham	24 $\frac{3}{4}$ lbs.
1 tin cooked gammon	10 lbs. 10 ozs.
1 tin cooked gammon	10 lbs. 10 ozs.
1 tin boiled ham	16 lbs. 8 ozs.
Filleted cod	84 lbs.
3 two-pound tins skimmed milk	6 lbs.
$\frac{1}{2}$ -lb. tin baked beans	$\frac{1}{2}$ lb.
2 one-pound tins raspberries	2 lbs.
1 tin corned beef	6 lbs.
Tinned tongue	8 lbs.
2 tins boneless ham	25 lbs. 5 ozs.
8 tins boneless ham	121 lbs. 1 oz.
Fresh butter	302 $\frac{1}{4}$ lbs.
Sweet Milk	463 gallons.
Double Cream	8 gallons.
Corned beef	6 $\frac{1}{2}$ lbs.
16 tins boneless ham	218 lbs. 11 ozs.

PORT SANITARY ADMINISTRATION.

The ports of Burntisland and Methil were visited as occasion demanded for the purpose of examining the crews of vessels arriving from infected ports abroad. In no case were any of the scheduled infections found during my visits.

FACTORIES ACT, 1937.

During the year, 459 visits of inspection were made to Factories in the Landward part of the Western Division and 14 written notices were issued to owners drawing attention to defects. Defects were actually found in 17 instances and 10 of these were remedied. The defects noted were :—

1. Want of cleanliness—8. All were remedied.
2. Defective or insufficient sanitary conveniences—8. Only one remedied.
3. Other offences—1, which was remedied.

PUBLIC HEALTH SERVICES IN BURGHS.

In all but two of the burghs in the Western Division of Fife County, the County Medical Officer is also Medical Officer of Health for the burghs. At Leven and Burntisland the County Medical Officer is responsible for transferred services only. In view of the greatly increased volume of work which the Public Health Department has been called upon to undertake, it has been decided to incorporate in this report a short résumé of the public health activities in burghs instead of issuing a separate report to each as in former years.

BUCKHAVEN BURGH (Full Public Health Service).

VITAL EVENTS.—The population of the burgh, as estimated by the Registrar-General to the middle of 1938 was 19,209. This is an increase of 84 in the estimated figure for 1937. There was a natural increase of population of 138 as indicated by excess of births over deaths during the year. The births in 1938 (corrected figure) numbered 371 (Males 197, Females 174) and there were 23 illegitimate births (included in the above figure.) The birth rate was 19·3 per 1,000 estimated population.

The deaths recorded (corrected figure) numbered 233 (Males 131, Females 102) and the death rate was 12·1 per 1,000 estimated population.

The marriages registered numbered 150 and the marriage rate was 7·8 per 1,000.

Twenty-six infants under the age of 1 year died and the infantile mortality rate was 70 per 1,000 births. This is a fairly satisfactory figure and two less than in 1937. Thirteen of the infant deaths were due to congenital debility, premature birth or malformations.

Heart disease accounted for 42 of the deaths and was the most frequent cause of mortality. Cerebral Haemorrhage, with 27 deaths, was the next most frequent cause. Cancer with 24 deaths and pneumonia with 21 deaths follow closely. Seventeen of the deaths were attributed solely to old age; 16 persons attained the age of 85 years or more at death, 35 were 75 years or more, 49 were 65 years or more and 34 were 55 years or more at death.

HOUSING—*Housing Form No. 36*, with regard to Housing (Reports on Overcrowding) Regulations (Scotland) 1937, has already been submitted to the Department of Health. Since the survey was made in 1936, until the end of 1938, 255 cases of overcrowding had been relieved and 1,447 persons had been dealt with. The houses in which

overcrowding was relieved, comprised 73 belonging to the Town Council and 182 to private owners. In no case have these houses become again overcrowded.

A re-survey was carried out towards the end of 1938, and, although there were 93 fewer sub-lets than when the 1936 survey was made, it was found that overcrowding is still severe throughout the burgh. The Town Council are fully alive to the position, however, and are pursuing an active building programme, which will ultimately abate the overcrowding and also meet the needs of those still living in unfit houses which have been condemned.

INFECTIOUS DISEASES.—During the year, 208 cases of Infectious Diseases were notified as follows:—Scarlet Fever 64, Diphtheria 34, Erysipelas 12, Cerebro Spinal Meningitis 1, Ophthalmia Neonatorum 11, Primary Pneumonia 58, Influenzal Pneumonia 5, Poliomyelitis 1, Pulmonary Tuberculosis 12, Non-pulmonary Tuberculosis 8, Puerperal Fever 1 and Puerperal Pyrexia 1. In 1937, the number of cases notified totalled 176 and the increase in 1938 was due to a slightly higher incidence of Scarlet Fever and acute Pneumonia. There were 22 more cases of the latter disease notified in 1937 and there was an increase of 17 in the number of cases of Scarlet Fever coming to my notice.

FACTORIES AND WORKSHOPS.—During the year, 378 visits of inspections were made to factories under the Factories Act, 1937. The premises were all found to be well kept and satisfactory.

COWDENBEATH BURGH (Full Medical Service).

VITAL EVENTS.—The population of the burgh, as estimated by the Registrar-General to the middle of 1938, was 12,440, an increase of 48 on the estimated figure for 1937. There was a natural increase of 80 in the population during 1938 as indicated by the excess of births over deaths.

The births registered (corrected figure) was 224 (Males 114, Females 110) and the birth rate was 18 per 1,000 estimated population. Sixteen illegitimate births were registered. The marriages registered number 100 and the marriage rate was 8 per 1,000 estimated population.

The deaths recorded numbered 144 (Males 77, Females 67) and the death rate was 11·6 per 1,000 estimated population. Twenty infants under the age of one year died and the infantile mortality rate was 89 per 1,000 births—a relatively high figure. Thirteen of the infant deaths were due to congenital debility, premature birth or malformations. In 1937, the infantile mortality rate was only 60 per 1,000 births.

The chief causes of death were as follows:—heart disease 25, cerebral haemorrhage 19, cancer, malignant disease 12, pneumonia 11, infant deaths, as indicated above 13. Five persons had attained the age of 85 years or more at death; 20 died between the ages of 75 years and

85 years ; 28 between the ages of 65 and 74 years ; 26 between the ages of 55 and 64 years ; 11 between the ages of 45 and 54 years ; 12 between the ages of 35 and 44 years ; and 20 under the age of 1 year.

INFECTIOUS DISEASES.—Two hundred and sixty-four (264) cases of infectious diseases were recorded in 1938. This is an increase of 120 on the 1937 figure and was mainly due to the greater incidence of Scarlet Fever and Diphtheria. Seventy-nine more cases of Scarlet Fever were notified and 24 of Diphtheria than in 1937.

The cases notified in 1938 were as follows :—Scarlet Fever 102, Diphtheria 53, Dysentery 1, Erysipelas 22, Ophthalmia Neonatorum 6, Acute Primary Pneumonia 35, Acute Influenzal Pneumonia 21, Poliomyelitis 1, Puerperal Pyrexia 3, Pulmonary Tuberculosis 5, Non-pulmonary Tuberculosis 15—total 264. Of these, 221 were removed to hospital for treatment and 43 were treated at home.

HOUSING.—A resurvey of the burgh, made in October 1938, revealed the fact that overcrowding is still acute, although this is much less marked than was the case when the first survey was undertaken in 1935. The recent survey showed 994 houses to be overcrowded as compared with 1,151 in 1935.

Three hundred and four of the overcrowded cases are regarded as serious ; sixty-eight sub-lets had removed between the dates of the 1935 survey and that carried out in October, 1938, while 157 cases of overcrowding had actually been remedied.

As a result of action taken by the Local Authority, 178 cases of overcrowding had actually been relieved concerning 1,020 persons from the date of the first survey until the end of 1938. Of the cases relieved, 168 were rehoused in privately owned dwellings.

There are a considerable number of houses within the burgh which have reached the stage when they can no longer be regarded as suitable or fit in all respects for habitable purpose, but until further progress has been made in building to meet the needs of overcrowding, they cannot be dealt with or scrapped at the present time. They will ultimately fall to be dealt with under Section 16 of the 1930 Act.

FACTORY ACT, 1937.—During the year, 144 visits of inspection were made to factories and workshops and the premises were, for the most part, found to be satisfactory and well kept. Three written notices were served with regard to lack of cleanliness and all were rectified.

CULROSS BURGH (Full Medical Service).

VITAL EVENTS.—The population of the burgh, as estimated by the Registrar-General to the middle of 1938, was 537. Five births were registered (Males 2, Females 3) and there were ten marriages. The deaths recorded in 1938 also numbered 5 (Males 2, Females 3) so that there was neither a natural increase nor a decrease in the population.

HOUSING.—The burgh of Culross is in the fortunate position of having no overcrowding problem and it may also be said that all unfit houses have already been dealt with.

INFECTIOUS DISEASES.—Twenty-one cases of infectious diseases were recorded in 1938 as follows :—Scarlet Fever 18, Puerperal Pyrexia 1, Ophthalmia Neonatorum 1, and Non-pulmonary Tuberculosis 1—total 21. Apart from the higher incidence of Scarlet Fever which was common to the whole of Dunfermline Area during the year, the health of the burgh was extremely good.

FACTORY ACT, 1937.—Four visits of Inspection were made under the Act and no defects were found.

INVERKEITHING BURGH (Full Medical Service).

VITAL EVENTS.—The population, as estimated by the Registrar-General, to the middle of 1938, was 3,472, an increase of 60 over last year's figure. The natural increase, as shown by excess of births over deaths, was only 9.

The births registered (corrected figure) for 1938 numbered 51 (M. 25, F. 26) and the birth rate was 14·3 per 1,000 estimated population. The deaths (corrected figure) numbered 42 (M. 24, F. 18) and the death rate was 12·0 per 1,000 estimated population. The Marriages registered numbered 18 and only one infant under the age of 1 year died, giving the low infantile mortality rate of 19·6 per 1,000 births.

The chief causes of death were as follows :—Heart Disease 9 ; Cancer, malignant disease, 8 ; Cerebral Haemorrhage, 4 ; Old Age 7.

INFECTIOUS DISEASES.—During the year 32 cases of infectious diseases were notified as follows :—Scarlet Fever 17, Diphtheria 3, Ophthalmia Neonatorum 1, Acute Primary Pneumonia 4, Acute Influenzal Pneumonia 2, Pulmonary Tuberculosis 2, and Non-pulmonary Tuberculosis 3—total 32. This is a decrease of 3 from the number notified in 1937. Twenty-six of the patients were removed to hospital for treatment and six were treated at Home.

HOUSING.—Sixteen new houses completed during the year were occupied by 14 families from overcrowded dwellings and 2 from unfit houses. Overcrowding is still prevalent in the burgh, although 64 cases, concerning 439 persons had been relieved of their overcrowded condition between the date of the 1935 survey and the end of 1938, by action taken by the Town Council. Eight of the 64 cases of overcrowding relieved were rehoused in privately owned dwellings. In five cases where overcrowding had been relieved, the houses have again become overcrowded.

FACTORY ACT, 1937.—During the year, 60 visits of inspection were made to factories in the burgh and all were found to be satisfactory and well kept.

KINGHORN BURGH (Full Medical Service).

VITAL EVENTS.—The population, as estimated by the Registrar-General to the middle of 1938, was 2,008, one more than in 1937. The deaths exceeded the births in 1938 by 5, so that there was a natural decrease in the population, instead of an increase.

Ten marriages were registered during the year and the marriage rate was 4·9 per 1,000 estimated population. The births numbered 17 (M. 10, F. 7) and the birth rate was 8·4 per 1,000 estimated population, a very low figure. The deaths registered number 22 (M. 12, F. 10) and the death rate was 10·9 per 1,000. Only one infant under the age of 1 year died in 1938, and the infantile mortality rate was 58·8 per 1,000 births.

The chief causes of death were as follows:—Heart Disease 5; Cerebral Haemorrhage 3; Cancer, malignant disease 4.

INFECTIOUS DISEASES.—Twenty-two cases of infectious diseases were notified as follows:—Scarlet Fever 13, Diphtheria 3, Cerebro-spinal Meningitis 1, Erysipelas 1, Influenzal Pneumonia 1, Pulmonary Tuberculosis 2, Non-pulmonary Tuberculosis 1—total 22. Of these, 19 were removed to hospital for treatment and 3 were treated at home.

HOUSING.—The thirty houses required to relieve overcrowding, which existed in the burgh, have now been practically completed and all will be ready for occupation by the end of May 1939. Twenty were completed and ready for occupation at the end of February and, so far as known, no further houses will be required for the relief of overcrowding.

The following plans were examined and reported on to the Town Council:—

1. 30 Council Houses (28 of four apartments flatted type and 2 five apartments cottage type).
2. The conversion of a house into a shop.
3. A bungalow—four apartments and garage (private owner).
4. A bungalow—four apartments (private owner).

FACTORY ACT, 1937.—Twenty-five visits of inspection were made to factories during the year and all were found to be clean and well kept.

LESLIE BURGH (Full Medical Service).

VITAL EVENTS.—The population of the burgh, as estimated by the Registrar-General to the middle of 1938, was 2,691, an increase of 8 over the estimated figure for 1937. There was actually a natural increase of 15 in the population for the year as shown by excess of births over deaths.

Eighteen marriages were registered and the marriage rate was 6·7 per 1,000 estimated population. The births registered numbered 51

(Males 26, Females 25) and the birth rate was 18·9 per 1,000 estimated population. The deaths recorded numbered 36 (Males 28, Females 8) and the death rate was 13·3 per 1,000. Four infants under the age of one year died in 1938 and the infantile mortality rate was 78·4 per 1,000 births, a figure which is still on the high side though much better than that for 1937, when the rate was 136.

The chief causes of death were as follows:—Heart Disease 7; Cerebral Haemorrhage 6; Cancer, malignant disease 5; Pneumonia 3; Bronchitis 3.

INFECTIOUS DISEASES.—Twenty cases of infectious diseases were notified during the year as follows:—Scarlet Fever 16; Diphtheria 3; Erysipelas 1—total 20. Of these, 19 were removed to hospital for treatment and one was treated at home.

HOUSING.—The question of overcrowding has already been largely met and only approximately 30 cases remained to be dealt with at the end of the year. So far, 89 cases of overcrowding had been relieved, concerning 451 persons, from the date of 1935 survey until the end of 1938, as a result of action taken by the Town Council. Seven of the cases relieved were rehoused in privately owned dwellings and in no case has a decrowded house again become overcrowded.

FACTORY ACT, 1937.—During the year, eleven visits of inspection were made to factories in the burgh and all were found to be clean and satisfactory.

MARKINCH BURGH (Full Medical Service).

VITAL EVENTS.—The population, as estimated by the Registrar-General, to the middle of 1938, was 2,226—an increase of 10 over the estimated figure for 1937. The natural increase of population as shown by excess of births over deaths for the year was 8.

There were 27 marriages registered in 1938 and the marriage rate was 12·1 per 1,000 estimated population. The corrected figure for births is given as 36 (Male 28, Female 8) and the birth rate was 16·1 per 1,000 estimated population. The deaths recorded numbered 28 (Male 13, Female 15) and the death rate was 12·5 per 1,000. Only one infant, under the age of one year, died and the infantile mortality rate was 27·7 per 1,000 births—a very satisfactory figure.

The chief causes of death were as follows:—Heart Disease 11; Violence 4; Cancer, malignant disease 3.

INFECTIOUS DISEASES.—During the year, 15 cases of infectious diseases were notified as follows:—Scarlet Fever 7, Diphtheria 3, Ophthalmia Neonatorum 2, Acute Primary Pneumonia 1, Typhoid Fever 1 and Non-pulmonary Tuberculosis 1—total 15. Of these, 12 were removed to hospital for treatment and 3 were treated at home.

HOUSING.—No new Council houses were erected in 1938, but the Local Authority already own 298 of the 661 houses within the burgh.

The Council have under consideration the question of erecting a further scheme of 14 houses, but the cases of known overcrowding total only 8. There is still a long waiting list of applicants for Council houses, but this is mainly composed of persons for whom there is no obligation to provide houses. The matter of building to meet the needs, apart from overcrowding, is one for the Town Council to consider, but, until such time as State assistance is forthcoming for this purpose, it would prove a costly experiment. All unfit houses within the burgh have already been dealt with and most have been replaced by new Council houses.

Since the 1935 Act Survey was completed, until the end of 1938, 43 cases of overcrowding, involving 245 persons, had been relieved as a result of the action taken by the Town Council. In only two of the cases were the overcrowded families rehoused in privately owned dwellings, 41 being provided with Council houses.

Factories Act, 1937.—During the year, 30 visits of inspection were made to factories and workshops within the burgh. All were found to be well kept and satisfactory.

BURNTISLAND BURGH (Transferred Services).

Vital Events.—The population of the burgh, as estimated by the Registrar-General to the middle of 1938, was 5,672, an increase of 76 over the estimated figure for 1937. The natural increase was only 31, as shown by excess of births over deaths.

There were 37 marriages registered in 1938 and the marriage rate was, therefore, 6.5 per 1,000 estimated population. The births in 1938 totalled 103 (Males 52, Females 51) (corrected figure) and the birth rate was 18.1 per 1,000 estimated population. There were 3 illegitimate births. The deaths recorded were 72 (Males 35, Females 37) (corrected figure), and the death rate was 12.6 per 1,000.

Only two infants under the age of 1 year died in 1938, which gives an infantile mortality rate of 19.4 per 1,000 births. This establishes a new low record for the infant death rate in the burgh, the previous lowest being 37.1 last year. It is a record of which the burgh may well be proud and all credit must be given to the excellent care bestowed by the medical practitioners and nurses on the mothers, during the ante-natal period and on the children after birth.

The chief causes of death were as follows:—Heart Disease 20 ; Cancer, malignant disease 10 ; Old Age 6 ; Diabetes 4.

Infectious Diseases.—During the year, 68 cases of infectious diseases, as follows, were notified to me :—Scarlet Fever 34, Diphtheria 7, Typhoid Fever 1, Erysipelas 8, Meningitis 1, Ophthalmia Neonatorum

1, Acute Primary Pneumonia 10, Puerperal Pyrexia 1, Pulmonary Tuberculosis 3, Non-pulmonary Tuberculosis 2—total 68.

Of these, 52 were removed to hospital for treatment and 16 were treated at home.

LEVEN BURGH (Transferred Services).

The population of the burgh, as estimated by the Registrar-General to the middle of 1938, was 8,201, an increase of 34 over the estimated figure for 1937. The natural increase as shown by excess of births over deaths was 26.

There were 63 marriages registered in 1938 and the marriage rate was 7.6 per 1,000 estimated population. There were 8 illegitimate births during the year or 6 per cent. of the total births which numbered 132 (Males 67, Females 65). The birth rate was 16.09 per 1,000 estimated population. The deaths numbered 106 and the death rate was 12.9 per 1,000. The chief causes of death were as follows :—Heart Disease 20 ; Cerebral Haemorrhage 19 ; Cancer, malignant disease 14 ; Pneumonia 7 ; Acute Nephritis 5 ; congenital debility, premature birth and malformation 6.

Nine infants under the age of 1 year died and the infantile mortality rate was, therefore, 68.1 per 1,000 births, a fairly satisfactory figure.

INFECTIOUS DISEASES.—Sixty-one cases of infectious diseases were notified in 1938, as follows :—Scarlet Fever 24, Diphtheria 10, Erysipelas 6, Ophthalmia Neonatorum 3, Acute Primary Pneumonia 8, Influenzal Pneumonia 1, Poliomyelitis 1, Puerperal Fever 1, Pulmonary Tuberculosis 4, Non-pulmonary Tuberculosis 3—total 61. Of these, 42 were removed to hospital for treatment and 19 were treated at home.

Eastern Division.

Report by

B. W. ANDERSON, M.A., M.D., D.P.H.

Deputy Medical Officer of Health.

An annual report that is composed mainly of statistics and tables is of less value than one freely interspersed with explanation and opinion. Reports in the past have happily avoided over-emphasis of the statistical side. It has been decided, however, that the annual report for 1938 shall be as brief as possible in view of the extra work that has devolved upon all members of the staff with the introduction of the Air Raid Precautions Scheme. Figures will, therefore, bulk a little more largely than before and comment must be restricted, but all necessary information will be given and any matter of importance brought to notice.

The outstanding matter remaining to be dealt with in the East of Fife is the provision of new housing accommodation for those people living in unfit and overcrowded houses. Unfortunately, in several areas, this must wait on the completion of the Regional Water Scheme. Work on this Scheme has been proceeding now for some time and there is every prospect that the lapse of a few years will see greatly improved housing conditions and increased prosperity in many areas of the eastern division of the County.

The only County Council houses to be completed during the year were those at Leuchars, while work was started on the Schemes at Upper Largo, Colinsburgh and Kingskettle. The outstanding feature of the year in housing was the introduction of the Housing (Agricultural Population) (Scotland) Act, 1938. Under this Act, a substantial grant is payable to anyone erecting a new house to replace an unfit house occupied by members of the agricultural population. The County Council Scheme of Assistance under the Act has already been extensively used and the Act has proved a valuable addition to the Housing (Rural Workers) Acts, which have done so much to better the conditions of persons living in rural areas.

INFECTIOUS DISEASES.

A considerable increase took place in the incidence of infectious diseases. The number of cases notified was 553 as compared with 362 in 1937. The following table shows the distribution of the cases among burghal and landward areas :—

Disease.	St. Andrews District.	Anstruther District.	Cupar District.	Burghs.	Total.
Continued Fever	—	—	—	2	2
Diphtheria	17	5	6	20	48
Dysentery	7	—	—	59	66
Erysipelas	2	2	6	18	28
Ophthalmia Neonatorum ..	—	4	3	5	12
Pneumonia, Acute Influenzal	1	—	4	5	10
Pneumonia, Acute Primary ..	8	1	21	24	54
Pneumonia not otherwise notifiable	1	—	1	1	3
Puerperal Fever	—	—	1	3	4
Puerperal Pyrexia	—	—	2	2	4
Scarlet Fever	17	17	32	166	232
Tuberculosis, Pulmonary ..	4	4	1	32	41
Tuberculosis, Non-pulmonary	—	5	19	19	43
Typhoid Fever	—	—	4	2	6
	57	38	100	358	553

The increased incidence of infectious diseases was largely due to the number of cases of Scarlet Fever increasing from 100 to 232. The bulk of these occurred in the Burghs, the Burgh chiefly affected being St. Andrews where a minor epidemic gave rise to 74 cases.

The number of cases of Diphtheria, Acute Primary Pneumonia and Pulmonary Tuberculosis was, in each case, practically doubled. The large number of cases of Acute Primary Pneumonia was due to the severe weather experienced early in the year. The cases of Diphtheria were fairly equally divided between landward and burghal areas and in no place were the numbers sufficient to give rise to any anxiety.

The increase in the number of cases of Diphtheria is, however, undesirable. Diphtheria is one of the preventable diseases, efficient active immunisation being easily carried out. At present, the only place where a child can be immunised against the disease on request is at the City Hospital, St. Andrews. Fairly good use is made of this service, but it could, with advantage, be used to a fuller extent and such facilities ought to be made available in all areas of the County. The people are now much less prejudiced against such treatment than they were, even a few years ago, and if the value of immunisation was brought sufficiently strongly to the notice of the population, it is almost certain that a good response would result and a large percentage of the children become immunised.

The high figure for dysentery was due to the St. Andrews epidemic which commenced towards the end of 1937 and to which reference was made in last year's report.

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.	German Measles.	Total.
Auchtermuchty Burgh ..	—	—	1	—	—	1
Cupar Burgh ..	11	5	1	—	1	18
Falkland Burgh ..	5	1	—	—	—	6
Newburgh Burgh ..	10	3	—	1	—	14
St. Andrews Area ..	—	—	1	—	—	1
Thornton Area ..	—	—	1	—	—	1
Landward County ..	23	7	2	—	—	32
Total ..	49	16	6	1	1	73

Ovenstone Infectious Diseases Hospital.

	Diph- theria.	Scarlet Fever.	Pneu- monia.	Croup.	Jaun- dice.	Total.
Crail Burgh ..	—	10	—	—	—	10
Kilrenny-Anstruther ..	—	2	—	—	—	2
Anstruther Easter ..	1	2	—	—	—	3
Anstruther Wester ..	—	1	—	—	—	1
Pittenweem Burgh ..	2	12	—	1	—	15
St. Monance Burgh ..	1	6	1	1	—	9
Elie and Earlsferry ..	—	1	1	—	—	2
Landward County ..	11	25	3	—	1	40
Total ..	15	59	5	2	1	82

WATER SUPPLIES.

The position in regard to water supplies in the County of Fife has been annually reviewed and there is little to add to what was said in the Report for 1937. The position in the landward area is unaltered and will remain so until such time as the regional water scheme is in operation. Unfortunately, a few years will elapse before a supply from this scheme is available. At present, several villages and many farms and farm servants' cottages are relying on supplies of water which are both doubtful in quality and uncertain in quantity.

In the affected areas, the lack of adequate and pure water supply is seriously hindering up efforts to improve conditions.

St. Michael's Infectious Diseases Hospital.

	Scarlet Fever.	Diphtheria.	Enteric Fever.	Dysentery.	Pneumonia.	Rheumatic Fever.	Erysipelas.	Measles.	Bronchiectasis.	Scabies.	Pertussis.	Streptococcal Throat Infection.	Total.
Newport Burgh	17	1	—	—	1	—	—	—	—	—	—	1	20
Tayport Burgh	7	—	—	—	4	—	1	1	—	—	—	—	13
Cupar Burgh	3	1	—	1	1	—	—	1	—	—	—	—	7
Newburgh Burgh	1	—	—	—	—	—	—	—	—	—	—	—	1
St. Andrews Burgh	11	—	—	1	—	—	—	—	—	—	—	—	12
Anstruther Burgh	—	—	—	—	1	—	—	—	—	—	—	1	2
Landward County	24	9	2	—	13	1	2	1	1	1	5	3	62
	63	11	2	2	20	1	3	3	1	1	5	5	117

St. Andrews Infectious Diseases Hospital.

	Scarlet Fever.	Diphtheria.	Scarlet Fever & Diphtheria.	Dysentery.	Diphtheria.	Carrier.	Tonsillitis.	Pneumonia.	Erysipelas.	Typhoid Fever.	Dysentery.	Total.
St. Andrews Burgh	55	2	1	—	—	1	3	2	1	1	1	67
Landward County	—	1	—	1	—	—	—	—	—	—	—	3
	55	3	1	1	1	1	3	2	1	1	2	70

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

Auchtermuchty	29 days.
Ovenstone	31 days.
St. Andrews	29·15 days.
St. Michael's	22 days.

There were 10 deaths, 7 from Pneumonia, 1 from Measles with Mastoiditis, 1 from Diphtheria and 1 from Scarlet Fever.

In all, 342 patients were admitted to the Infectious Diseases Hospitals, 137 from landward parts of the County and 205 from the burghs. In addition, 4 cases of Ophthalmia Neonatorum, 3 cases of Puerperal Fever and 2 cases of Puerperal Pyrexia were treated in Thornton Infectious Diseases Hospitals. Excluding Tuberculosis, of the 469 cases of infectious diseases notified, 322 or 68·6 per cent. were admitted to hospital for treatment.

The work at the Infectious Diseases Hospitals was carried out in the usual efficient manner by the medical and nursing staffs. The number of patients in an Infectious Diseases Hospital is liable to vary greatly from time to time. The busy periods in all the hospitals, fortunately, did not coincide and, as in former years, the nursing staff was transferred from one hospital to another as necessity demanded.

GENERAL SICKNESS.

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. 756 patients were admitted to these hospitals and 28 deaths occurred. The average duration of stay of patients in St. Andrews Hospital was 16·12 days and in Cupar Hospital 17·59 days. 672 major and 508 minor operations were performed and 2,436 out-patients made 4,729 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.

WATER SUPPLIES.

The position in regard to water supplies in the East of Fife has been annually reviewed and there is little to add to what was said in the Report for 1937. The position in the landward area is unaltered and will remain so until such time as the regional water scheme is in operation. Unfortunately, a few years will elapse before a supply from this scheme is available. At present, several villages and many farms and farm servants' cottages are relying on supplies that are both doubtful in quality and uncertain in quantity.

In the affected areas, the lack of an adequate and pure water supply is seriously holding up efforts to improve housing conditions.

The production of clean milk is largely dependent on an adequate supply of wholesome water. In a number of farms such a supply is not available. Not only have the occupants of such farms no chance of becoming producers of designated milk but the future existence of such premises as dairy farms is in doubt.

We can but look forward hopefully to the day when the regional water scheme will solve the present difficulties.

DRAINAGE.

The new drainage scheme for Strathmiglo was completed during the year. The work consisted of laying sewers throughout the village and in installing a system of grit chambers and sedimentation tanks.

The system is now in operation and giving satisfaction. The cost of such a scheme to the Strathmiglo ratepayers is high, but when its obvious advantages over the old methods are experienced, the cost will not be grudged.

The position elsewhere is unchanged and for many districts must continue so until an improved water supply is available.

HOUSING.

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	—	68	—	68
Houses erected without Subsidy	—	4	10	14
Alterations and Improvements to houses	16	15	12	43
Erection of garages, sanitary conveniences, sheds, business premises, stores, huts, piggery	14	13	2	29
Improvements to halls, Church, hotel	—	2	2	4
Improvements to Dairies	1	2	1	4
Plans examined	25	36	18	79

Plans were approved for the erection by the Local Authority of 20 houses at Kingskettle, 24 at Strathmiglo, 20 at Freuchie and 4 at Gateside.

Plans for the erection of 13 houses under private enterprise were approved. The erection of one wood house was not approved.

Plans for the alteration and improvement of 42 houses were approved. The alterations to one house were not approved. For the most part,

the new works consisted of the introduction of sanitary fittings, improvement of lighting and addition of rooms.

Plans for the erection of 29 garages, sanitary conveniences, sheds, business premises, etc., were approved.

Plans for the improvement of 4 halls, Church and hotel were favourably considered.

Plans for improvements to 4 dairies were approved.

In all, 79 plans affecting 162 premises were considered by the three Local Committees concerned.

Housing (Inspection of District) Regulations (Scotland), 1938.

The annual return showing the action taken by the County Council under the above Regulations, Part II. of the Housing (Scotland) Act, 1930, Section 20 of the Housing (Scotland) Act, 1925 and Section 125 of the Public Health (Scotland) Act, 1897 (Section 40 of the Housing, Town Planning, etc. (Scotland) Act, 1919), has already been submitted to the Department of Health.

In the Eastern Division of the County, there are 2,198 houses occupied by farm servants and 4,026 houses occupied by persons of the working classes other than farm servants.

458 houses were inspected :—303 farm servants' houses and 155 houses for other persons of the working classes. For Cupar District, 98 ; 40 : Anstruther, 100 ; 44 : St. Andrews, 105 ; 71.

302 houses were found to be in some respect unfit for human habitation. Cupar District, 50 ; St. Andrews District, 176 ; Anstruther District, 76.

During the year, 247 houses were found to be without a separate water-closet. As the result of informal action by the County Council, water-closets were provided in 82 instances.

Without formal Notices under Section 40 (1) of the Housing (Scotland) Act, 1919, water supply was introduced into 37 houses.

28 Notices under Section 14 (1) of the Housing (Scotland) Act were served.

25 houses concerning which Section 14 Notices had been served had been reconditioned by the end of the year.

There are still 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.

10 Notices were served under Section 16 (1) of the Housing (Scotland) Act, 1930. Five of these resulted in Undertakings being accepted that the houses would not be re-let until they had been rendered fit for human habitation and 5 in Demolition Orders.

Without formal action under the Housing Acts, 78 houses were renovated—Cupar District 22 ; St. Andrews District 37 ; Anstruther District 19.

Housing (Rural Workers) Act, 1926-38.

Sixty-five Plans for the reconditioning of 124 houses were considered. Assistance under the County Scheme for Assistance was granted in respect of 120 houses.

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

Cupar District	..	..	54
St. Andrews District	..	..	51
Anstruther District	..	..	15
Total	..	..	120

The Department of Health is now unwilling to allow for grant any plans for alterations which do not show the final accommodation to be at least three rooms, excluding scullery and bathroom, unless under special circumstances. During the year, a great majority of the plans submitted to the County Council were for the renovation of existing three-roomed houses or showed additional accommodation so that there was a minimum of three habitable rooms.

Housing (Agricultural Population) (Scotland) Act, 1938.

The above Act came into force during 1938 and was adopted by the County Council. Under the County Council Scheme, grant is payable for the erection of new houses for agricultural workers which are built to replace existing unfit rural houses. The grant payable is £160 for a three-roomed house and £200 for a four-roomed house. Although the Scheme only came into force towards the end of the year 8 applications were received before 31st December. These were as follows :—

Cupar District	..	..	4
St. Andrews District	..	..	1
Anstruther District	..	..	3
Total	..	..	8

Housing Requirements.

The problem of re-housing persons from unfit and overcrowded houses is, for a few villages in the East of Fife, nearing solution, while in others, notably Strathkinness, Kingsbarns and Springfield, literally nothing has been done. Again reference must be made to the cause—lack of water, and until such is available, the Local Authority is

unlikely to build new houses nor will proprietors renovate existing property. The Schemes at Colinsburgh, Lower Largo, Kingskettle and Freuchie were started in 1938 and, at the time of writing the report, are nearing completion. The problem in these districts will shortly be greatly lessened.

During the year, 20 houses were erected in Leuchars, 10 three-roomed and 10 four-roomed. All were occupied before the end of the year. No other houses were erected by the County Council in the Eastern Division of the County.

In order to ascertain the housing needs for the Eastern Division, a re-survey was carried out early in 1939 and the results were submitted to the Department of Health and to the Public Health Committee of the County Council. A separate Return was made for each village and, assuming that a complete process of decanting will be carried out, the following Table gives the number of houses required in each village and district of this area :—

Locality.	New Houses— Yet Required.						Surplus houses after Decanting.					
	No. of Apartments.						No. of Apartments.					
	3	4	5	6	7	Total.	1	2	3	5	6	Total.
Forgan ..	2	4	—	—	—	6	—	5	—	—	—	5
Balmullo ..	5	2	—	—	—	7	—	7	—	—	—	7
Guardbridge ..	16	18	2	—	—	36	3	—	—	—	—	3
Strathkinness ..	13	5	2	—	—	20	9	7	—	—	—	16
Kingsbarns ..	5	2	1	—	—	8	—	8	—	—	—	8
Leuchars ..	5	5	1	—	—	11	—	8	—	—	—	8
ST. ANDREWS AREA	46	36	6	—	—	88	12	35	—	—	—	47
Gateside ..	—	3	—	—	—	3	—	—	1	—	—	1
Ceres ..	12	2	—	—	—	14	2	12	—	—	—	14
Dairsie ..	1	2	—	—	—	3	—	3	—	—	—	3
Dunshalt ..	—	2	1	—	—	3	—	1	—	—	—	1
Freuchie ..	11	8	2	—	—	21	6	15	—	—	—	21
Gauldry ..	—	—	2	—	—	2	—	2	—	—	—	2
Kingskettle ..	11	8	2	—	—	21	1	18	—	—	—	19
Newton of Falkland	1	3	—	—	—	4	—	3	—	—	—	3
Pitlessie ..	1	3	—	—	—	4	1	3	—	—	—	4
Springfield ..	19	12	1	—	—	32	6	26	—	—	—	32
Strathmiglo ..	7	10	1	—	—	18	1	—	—	—	—	1
CRAIL AREA	63	53	9	—	—	125	17	83	1	—	—	101
Colinsburgh ..	4	1	—	—	—	5	—	—	1	—	—	1
Kilconquhar ..	9	1	—	—	—	10	—	—	—	—	—	—
Barnyards ..	8	—	—	—	—	8	—	—	—	—	—	—
Upper Largo ..	9	2	1	—	—	12	—	—	—	—	—	—
Lundin Links and Lower Largo ..	15	5	—	—	—	20	—	—	—	—	—	—
Largoward ..	26	1	—	—	—	27	—	—	—	—	—	—
ANSTRUTHER AREA	71	10	1	—	—	82	—	—	1	—	—	1

The figures shown for Strathkinness, Kingsbarns, Ceres, Dairsie, Gauldry and Springfield refer to overcrowding only. In each of these villages, water supply is inadequate and any building programme will have to await a water supply from the Regional Scheme. This will mean a lapse of three or four years before building can be undertaken by the County Council in these areas. As a result, no recent survey has been made of unfit houses and, when a survey is done, the housing requirements may be greater than shown in the above Table.

With regard to the figures for Largoward, this allows for the rehousing of persons from overcrowded and unfit houses in Radernie, Peat Inn and Lathones.

At present, there are under construction, 22 houses at Lower Largo, 20 houses at Colinsburgh, 20 houses at Kingskettle and 20 at Freuchie. According to the recent survey, when the Schemes in these three villages are completed, the problem of persons living in unfit and overcrowded houses will be largely remedied.

Overcrowding.

The Return made to the Department of Health for the year ended 31st December 1938 showed that from the date of the Survey of 1935 to the end of 1938, only 21 cases of overcrowding involving 133 persons had been relieved as a result of action by the Local Authority. Twenty of these cases occurred in privately owned houses and one in a Local Authority house. None were re-housed in privately owned houses.

MILK SUPPLY.

There are 153 registered dairies in the landward area and 22 in the Burghs—a total of 175 dairy farms. In addition, there are 32 registered shops and milk stores. In the dairy farms there are approximately 3,038 cows.

There is no doubt that the standard of dairy farming in Fife is on the up-grade. The improvement is shown both in the structure and cleanliness of premises, cleanliness of stock, and better methods of milk production. Much, however, still remains to be done. The bonus payable to producers of designated milks has done much to stimulate the production of clean milk. The work which has fallen on the Sanitary Inspectors as a result of the Milk (Special Designations) Orders (Scotland) 1936-38, necessary and valuable as the work is, has, however, had the effect of concentrating attention on the designated milk producers and has limited the number of visits paid to the farms producing ordinary milk. This has been unavoidable but is to be regretted, as personal contact of the Inspector of Medical Officer with the dairy farmer and discussion of different points remain all important in getting premises brought up to standard and methods improved.

The Veterinary Surgeons of the Ministry of Agriculture and Fisheries, however, inspect every dairy herd in the County twice annually and report to the Medical Officer of Health every animal giving milk likely to prove injurious on human consumption. The necessary action to stop the milk is then taken. The Ministry of Agriculture Veterinary Surgeons co-operate well with the Public Health Department and give much useful information, not the least of which is a report on all examinations carried out by them on designated herds. In addition, as a result of their supervision, it is becoming more difficult to sell milk from a tuberculous cow or to expose a tuberculous cow for sale.

It was hoped that a survey of the dairy farms in the St. Andrews and Anstruther Areas would be done in 1938. With the many other duties falling on the staff, this was not possible, but it remains a job that will have to be undertaken soon.

Mention has been made of the dairy farms in Pittenweem and Anstruther. The Pittenweem producers have been slow to carry out any alterations but, at the time of writing, two premises have been satisfactorily altered. Work is in progress at two others and, in one other dairy, farming is to be discontinued in November 1939.

As regards the dairies in Anstruther Burgh, one has ceased to produce milk and is now a retailer only, two have carried out alterations and in one case nothing has been done. The remaining producer and milk shops are satisfactory.

Application for licences to produce one or other of the designated milks continued to come in regularly. The dairy farmers, generally, are now fully alive to the advantages of being producers under the Scheme. Before a licence is granted, the farmer must in every case furnish a Veterinary Surgeon's certificate regarding the health of the herd and in applying for a licence to produce Tuberculin Tested or Certified Milk, a certificate to show every animal has passed the prescribed tuberculin test. In addition, the premises must conform with the Dairy Byelaws. Apparatus for efficient sterilisation of all vessels, etc., and for the cooling of milk must be installed and the milk must conform to certain defined standards of bacteriological purity.

Towards the end of the year, with a view to assisting and advising Local Authority Officials in their work under the Milk (Special Designations) Order, the Department of Health appointed a number of Milk Inspectors. We are indebted to the Milk Inspectors who have done the work in Fife, for their assistance and for the spirit of co-operation with which they have carried out their duties at all times. One of the objects of the Milk Inspectors' work is to get, as far as possible, a standard of uniformity for premises, etc., laid down for designated producers. With a view to helping this forward, meetings were held between Chief Officials of Counties and Large Burghs and the Department of Health Milk Inspectors at Stirling and Dundee. Agreement

was reached in the majority of points under discussion and the Department have now in view the production of new Model Dairy Byelaws based on the result of these discussions. It is unlikely that any major alteration will be required in the Fife Dairy Byelaws, but some change may occur in sections dealing with ventilation of byres, position of drains and size of grips.

The Department of Health has also in view the laying down of a new standard of bacteriological purity. At present, the standard sets no time at which the milk, after it leaves the cow, must be tested and it is easy to understand that a sample taken direct from the cooler in the dairy and put in an ice-chest will give a very different result from one allowed to stand in a bottle for twenty-four hours. Milk sampled from the cooler—that is some 10-15 minutes after it has left the cow—would have to be very dirty indeed not to pass the standard of 200,000 bacteria per millilitre laid down for Standard and Tuberculin Tested Milk. A new and much stricter standard is required and will be welcomed not only by officials and public but by the majority of producers. The conscientious dairy farmer, who is trying to produce clean milk, has no difficulty in getting a very much lower bacterial count than that required by the Order.

The following is a list of the producers and retailers of designated milks:—

Producers.	Premises.	Grade of Milk.
Lord Cochrane of Cults.	Culds Dairy Farms, Springfield.	Certified.
Wm. Lohoar.	Wester Balrymonth, St. Andrews.	Certified.
James Clement.	Kilrenny Mill, Anstruther.	Certified.
W. G. Braid.	St. Nicholas, St. Andrews.	Certified.
James Younger.	Mount Melville, St. Andrews.	Tuberculin Tested.
W. P. Mitchell.	Wester Balgarvie, Cupar.	Certified.
Messrs. J. & A. Anderson.	Monturpie, Largo.	Certified.
J. Black.	Grange Hill, Elie.	Standard.
T. D. Fraser.	The Grange, Elie.	Standard.
R. Telford.	Lathallan Home Farm, Kilconquhar.	Standard.
Andrew Cadzow.	Blacketyside Farm, Leven.	Standard.
James Whiteford.	Inch Farm, Pittenweem.	Standard.
Thomas Archer.	Kilconquhar Mill, Kilconquhar.	Standard.
George W. Lambie.	Nether Pratis, Leven.	Standard.
Robert Mitchell.	Caldside, St. Andrews.	Standard.
Retailers.		
Miss Allison.	1 Rankeillour 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.
W. J. Braid.	140 Market Street, St. Andrews.	Certified.
Richard T. Ramsay.	Elie & Earlsferry Dairy Co., Elie.	Certified.
Mrs. A. Duncan.	63 Bonnygate, Cupar.	Pasteurised.
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.

MEAT SUPPLY.

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. One new slaughterhouse was completed and put into use during the year. This slaughterhouse was entirely satisfactory. Since completion, further work of improvement, chiefly connected with paving of yards, has been done.

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

Slaughterhouses.	No. of Animals Slaughtered.				Lbs. of Meat condemned.
	Cattle.	Sheep.	Pigs.	Total.	
Cupar District—					
Public	833	1601	761	3195	8817
Private	950	44,089	477	45,516	5309
St. Andrews District—					
Public	1218	3283	470	4971	19,827
Private	209	470	36	715	1856
Anstruther District—					
Public	767	1146	291	2204	18,647½
Private	414	1381	259	2054	2942
	4391	51,970	2294	58,655	57,398½

As compared with the previous year, 11,908 more animals were slaughtered and 2,028 more pounds of meat were seized as unfit for human consumption.

The following Table shows the amount of meat condemned in each area in public and private slaughterhouses, per head of cattle slaughtered, for the past five years :—

	1934.	1935.	1936.	1937.	1938.
Cupar District—					
Public	9.0 lbs.	11.9 lbs.	8.7 lbs.	14.3 lbs.	10.5 lbs.
Private	3.8 lbs.	6.1 lbs.	10.9 lbs.	7.8 lbs.	5.5 lbs.
St. Andrews District—					
Public	12.5 lbs.	9.9 lbs.	16.6 lbs.	14.9 lbs.	16.3 lbs.
Private	1.8 lbs.	2.6 lbs.	3.3 lbs.	3.3 lbs.	8.8 lbs.
Anstruther District—					
Public	16.7 lbs.	22.1 lbs.	20.6 lbs.	15.1 lbs.	24.3 lbs.
Private	8.2 lbs.	13.8 lbs.	5.2 lbs.	9.7 lbs.	7.1 lbs.

During these five years, for every head of cattle slaughtered, 14·84 lbs. of meat as compared with 6·9 lbs. of meat were condemned in public and private slaughterhouses respectively. This is the best argument for centralisation. It is not a new one, but it does not lose value by repetition.

Previous reports have stressed the difficulty of adequate supervision by Detention Officers of all meat supplies when there are a number of private slaughterhouses in each area in addition to the public one. This applies particularly to the Cupar Area where there are in all 14 slaughterhouses to supervise—an almost impossible task to carry out efficiently even had the Detention Officer no duties other than meat inspection. As it is, he has many. A Centralised Slaughterhouse for the Cupar Area is urgently required and the slaughtering of any animal outside that forbidden.

As regards the St. Andrews Area and Anstruther Area, not only are there fewer private slaughterhouses but in each area there is a modern public slaughterhouse capable of dealing with all the work in the area. Slaughtering in these areas ought to be centralised in the respective public slaughterhouses. It might then be possible to have all meat inspection done by Veterinary Surgeons, as is the practice at present in St. Andrews public slaughterhouse.

FACTORIES AND WORKSHOPS.

302 visits of inspection were paid to factories, workshops and workplaces—factories 80, workshops and workplaces 222. One written notice was 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 ineffective drainage of floors. 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.

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.

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.

Twelve vessels were boarded, all having come from infected ports on the north coast of Africa. No cases of infectious diseases were dis-

covered. 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.

PUBLIC HEALTH SERVICES IN BURGHS.

In previous years, it has been the custom for the County Medical Officer of Health to give a full separate report for each Burgh of which he is also Medical Officer of Health. Owing to the greatly increased volume of work which has fallen on all members of the Department due to present A.R.P. activities, the Councils of each of these Burghs agreed that a short report should be included in the County Annual Report instead of writing and printing full separate reports. This concession on the part of the Councils has been very helpful. The Burghs concerned are Anstruther, Pittenweem, St. Andrews, St. Monance, Elie and Earlsferry, Crail, Tayport and Auchtermuchty.

Following on these is a brief report on the transferred services for the Burghs of Cupar, Falkland, Newburgh and Ladybank.

BURGH OF ANSTRUTHER.

Water Supply.

No complaints were received during the year and there is nothing new to report.

Drainage.

There is nothing new to report regarding the Burgh's system of sewage disposal. No complaints were lodged and no new works were undertaken.

Housing.

No new houses were built by the Local Authority during 1938 but sites were selected for 14 houses in Anstruther Easter and 6 in Anstruther Wester. There were 4 houses built by private enterprise.

Of the houses on which Demolition Orders have been passed, 12 are empty and not demolished, 2 are still occupied and 13 have been demolished.

Actual figures regarding the number of unfit houses in the Burgh are not available. There are still, however, a large number to be dealt with. When A.R.P. becomes less active, a re-survey of unfit houses will have to be undertaken. The census taken for evacuation purposes showed 67 cases of overcrowding. Of these, 28 are also unfit houses. All overcrowding in Local Authority houses has been dealt with. The present proposals to build 20 houses, while it will ease the situation, is

by no means enough to deal with all the cases of people living in overcrowded and unfit houses.

Infectious Diseases.

There was a slight increase in the incidence of infectious diseases. Thirteen cases were notified, viz., Scarlet Fever 5, Acute Primary Pneumonia 1, Undulant Fever 1, Pulmonary Tuberculosis 5, and Non-pulmonary Tuberculosis 1.

Milk Supply.

There are five dairy farms situated within the Burgh and two dairy shops. In last year's report, it was pointed out that four dairies within the Burgh suffered from various structural defects. The owner of one has ceased to produce and retails milk only. Two others have carried out some alterations, while in one case, nothing has yet been done. The two other dairy farms and the two dairy shops are quite satisfactory. Certified Milk produced at Kilrenny Mill Dairy and East Pitkeirrie Dairy is sold within the Burgh.

Meat Supply.

There is nothing new to add. The public slaughterhouse is modern and well equipped and a high standard of cleanliness is maintained. The Superintendent carries out his duties very efficiently. The inspection of meat is carried out by the County Sanitary Inspector who, in cases of difficulty or dispute, calls in a Veterinary Surgeon for the Ministry of Agriculture and Fisheries.

In the course of the year 767 cattle, 1,146 sheep and 291 pigs were slaughtered and 18,647½ lbs. of meat were condemned as unfit for human consumption.

The new cooling-hall is now completed and the slaughterhouse compares favourably with any of its type and size in the country. Were centralised slaughtering introduced, this slaughterhouse would be capable of dealing with all the work in the Anstruther Area.

Factories and Workshops Acts.

The names of 82 factories appeared on the register. Twenty-three visits of inspection were paid to these premises and fifteen written notices were served calling for improvement. Eight nuisances under the Public Health Acts were detected. These concerned want of cleanliness, inadequate ventilation, ineffective drainage of floors and insufficient sanitary conveniences. Satisfactory remedies were provided in all cases.

No serious objections can be taken to the conditions under which people are employed in the United Burghs so far as concerns Public Health requirements.

Statistical Comments.

The estimated population was 3,332, an increase of 10 having been allowed by the Registrar-General.

There were 45 births—23 males and 22 females—the corresponding birth rate being 13·5 per thousand of population.

Fourteen marriages were registered, the rate being 4·2 per thousand of population.

There were 45 deaths—21 males and 24 females—the rate being 13·5 per thousand of population.

There were two deaths in infants under one year. One death occurred from infectious diseases, that being from Tuberculosis.

The chief causes of death were cancer (11), cerebral haemorrhage (9), and heart disease (8).

Sixty-five per cent. of deaths occurred in persons over 65 years of age.

BURGH OF PITTENWEEM.

Water Supply.

There is no change to report with regard to the Burgh's water supply. No complaints of any type were received during the year. It was pointed out in last year's report that it was desirable that the filters be increased in number and that the storage of the clear water well should be augmented. No action has yet been taken with regard to this very necessary work.

Drainage.

The drainage system of the Burgh has worked satisfactorily and no complaints were received during the year.

Refuse Disposal.

Domestic and shop refuse is collected daily and a new covered dust cart has been purchased for this service. Tipping at Milton Road has now ceased. This tip was full and has now been covered up. A new refuse tip was started on the Grangemuir Road at the side of the Dreel Burn. No complaints have been received about this pit where the work is well conducted. The site, however, is not a good one. Nowadays, household and shop refuse consists of a very large amount of waste paper which has to be burned at the tip and, being close to a main road, paper and soot are blown across the road.

Nuisances.

Complaints of nuisance were infrequent and none were of a serious nature. Two chemical closets at the bathing pool continued to prove satisfactory and no nuisances arose in connection with them. The Town Council had under consideration several sites with a view to

acquiring one suitable for a new Cemetery. At present, they are negotiating for the purchase of land for this purpose.

Housing.

No new Representations were made to the Council regarding unfit houses during the year. No houses were demolished or repaired by the Council and no new houses were built either by the Local Authority or by private enterprise.

In all, the Council have built 100 houses and repaired 2.

At the end of the year, 45 houses had become decrowded as the result of action taken by the Local Authority from the date of the Survey of 1935.

	<i>No. of houses.</i>	<i>No. of Persons displaced.</i>
From date of survey to 31st December 1937	26	117
1st January to 31st December 1938	19	82
	—	—
	45	199
	—	—

The number of houses still overcrowded at the end of the year was 39, 10 of these being Council houses. It will be seen that the position as regards overcrowding had improved slightly during the year. The Council will, however, have to consider building a number of houses to remedy the overcrowding problem. There is still a number of unfit houses in the Burgh, but this is not large.

Infectious Diseases.

A slight decrease took place in the incidence of infectious diseases. The following number of cases was notified :—

Influenzal Pneumonia	1
Diphtheria	3
Scarlet Fever	12
Erysipelas	2
Non-pulmonary Tuberculosis	2
	—
Total	20
	—

It will be seen that the figures resemble very closely those for last year, Scarlet Fever again being responsible for the majority of notifications.

Milk Supply.

There are four dairy farms within the Burgh. The condition of most of these was unsatisfactory but at the time of writing improvements

have been carried out on two and work is in progress on a third. The fourth dairy is shortly to cease producing milk. Since the end of the year, a new dairy has started in Pittenweem where it is intended to produce one of the designated milks. Apart from the dairies within the Burgh, milk comes in from several dairy farms situated within the County and ample supplies of Certified Milk are available.

Factories and Workshops Act.

Sixty visits of inspection were paid to factories and workshops in the Burgh. No defects in terms of the Public Health Acts were found.

Statistical Comments.

The population as estimated by the Registrar-General was 1,703, an increase of 9 having been allowed.

There were 18 births, 4 male and 14 female—the corresponding birth rate being 10·6 per thousand of population as against 17·7 in 1937.

Eleven marriages were registered, the rate being 6·5 per thousand of population.

Twenty-one deaths occurred, 13 males and 8 females, the death rate being 12·33 per thousand of population.

No deaths in children under one year of age were registered.

One death occurred from infectious diseases—that being from Pulmonary Tuberculosis.

The chief causes of death were diseases of heart and blood vessels (5), cancer (3) and diseases of nervous system (4).

Fifty-seven per cent. of the total number of deaths occurred among people of 65 years of age and over.

BURGH OF ELIE.

Water Supply.

A new 6-inch main was installed in 1937. Pressure has since then been satisfactory and no complaints were received regarding lack of pressure. During the year, four new Bell's mechanical filters were installed below the lower reservoir and are working satisfactorily. Samples of water examined throughout the year showed it to be of good quality.

Nuisances.

There is nothing new to report. Nuisances are rare in this Burgh. It might be opportune to point out that a new burial ground is required and that the Council will shortly have to give this matter their consideration.

Drainage.

There is nothing new to report. All sewers go out beyond low water mark and there were no complaints of pollution of the foreshore.

Housing.

No new houses were built by the Local Authority during 1938 and no new houses were built by private enterprise. Of the 55 houses to which the attention of the Local Authority was drawn as they were considered to be unfit for human habitation, there still remain 21 to be dealt with. On 7 Undertakings have been granted and 23 have been satisfactorily reconstructed. In 4 cases, the Local Authority decided to delay action.

The last survey showed only one case of overcrowding in the Burgh and this is in an unfit house. Plans for the reconstruction of this dwelling were submitted but nothing was done as the cost was too high.

Infectious Diseases.

The incidence of infectious disease in the Burgh was again very low. There were reported during the year only two cases of Scarlet Fever and one case of Influenzal Pneumonia. All three cases were admitted to hospital for treatment.

Milk Supply.

No dairy farms are situated within the Burgh. An ample supply of quality milk is available. Certified Milk is retailed from the Elie and Earlsferry Dairy Company and from Monturpie Dairy Farm. Standard Milk is obtained from The Grange and Grangehill Dairy Farms.

Factories and Workshops Acts.

Ten visits of inspection were paid to the factories and workshops in the Burgh and six written notices were served calling attention to defects. Five defects in terms of the Public Health Acts were found. These were in connection with unsuitable sanitary arrangements. In all cases, suitable remedies were applied.

Statistical Comments.

According to the estimate of the Registrar-General, the population was 950, a further decrease of 15 having been allowed.

There were 5 births—all males—the birth rate being 5.3 per thousand of population as against 5.1 in 1937.

Five marriages took place, the rate being 5.3 per thousand of population.

There were 14 deaths—7 males and 7 females—the death rate being 14.6 per thousand of population.

There were no deaths in infants under one year of age. There was one death from infectious diseases—influenza.

The chief causes of death were cerebral haemorrhage (5) and heart disease (3).

Eighty-five per cent. of the deaths occurred in persons over the age of 65 years.

BURGH OF CRAIL.

Water Supply.

No complaints were received regarding the quality or quantity of the water supply. For a considerable time during the summer months, however, the new bore at Ribbonfield had to be used as an auxiliary supply to augment the normal supply of the reservoir.

Drainage.

There is no change to report and no complaints were received.

Housing.

Housing is no longer a serious problem in Crail. By reconstructing existing properties and by building new houses, the Council have largely solved the difficulty. Of the unfit houses which were brought to the notice of the Council, 31 have now been reconstructed and alterations are at present being carried out on eight. The remaining houses, for the greater part, are occupied by old people. There are 3 empty houses which are awaiting demolition and in 4 cases houses, which are fit for demolition only, are still occupied.

Recently, the Council purchased three houses with a view to renovating them and rehousing families from unfit properties. There are only 3 cases of overcrowding in the Burgh and for these are required one four-roomed and two three-roomed houses.

Infectious Diseases.

There was a considerable increase in the incidence of infectious diseases. The total number of cases notified was 12—Scarlet Fever 10 and Primary Pneumonia 2. As will be seen, the increase is almost entirely due to Scarlet Fever, but the number of cases was never such as to give rise to cause for anxiety.

Milk Supply.

There are no registered dairy farms within the Burgh. An excellent supply of designated milk is easily obtainable. Certified Milk from Kilrenny Mill, East Pitkierie and Primrose Dairy Farms and Standard Milk from Lathallan Home Farm is sold in the Burgh.

Meat Supply.

There is one private slaughterhouse in the town. This was visited regularly by the County Sanitary Inspector who is responsible for the detention of unsound meat. The premises were always found to be clean and conducted in a satisfactory manner.

During the year, 60 cattle, 108 sheep and 41 pigs were slaughtered and 334 pounds of meat were condemned and destroyed as unfit for human consumption.

Factories and Workshops Acts.

Eleven visits of inspection were paid to the factories and workshops in the Burgh, and three written notices were served calling attention to defects. In three instances, sanitary accommodation was found to be unsuitable. Satisfactory remedies were applied in all cases.

Statistical Comments.

The population was estimated by the Registrar-General to be 1,025, a further decrease of 9 having been allowed.

There were 23 births—11 males and 12 females—the birth rate being 22·4 per thousand of population as against 6·8 in 1937.

Six marriages were registered, the rate being 5·85 per thousand of population.

Thirteen deaths occurred—10 males and 3 females—the death rate being 12·7 per thousand of population.

There was one death in an infant under one year of age.

The chief causes of death were diseases of heart and blood vessels (7), cancer (2).

There were no deaths from infectious diseases.

Seventy-seven per cent. of the deaths occurred in persons over 65 years of age.

BURGH OF ST. MONANCE.

Water Supply.

Four new Bell's pressure filters were installed below the reservoir at Gilliston during the year and this has resulted in the Burgh receiving a water supply of satisfactory purity.

Drainage.

Alterations in the levels of the sewer in Station Road and Hope Place were carried out with satisfactory results. The sewer in the east shore still silts up for 30 yards in spite of the scour pipe, necessitating frequent flushing. Means of improving this are under consideration.

Refuse Disposal.

The town's refuse dump continued to be satisfactorily tended. A new covered motor van was acquired for removal of refuse.

Nuisances.

No serious nuisance was reported. Dumping on the fore-shore continues, but it is much less than in previous years. It does not seriously inconvenience any of the residents in the neighbourhood but it makes the foreshore unsightly and there is no excuse for the inhabitants continuing to dump ashes and refuse in that position. The

refuse cart calls daily and measures should be taken to ensure that the inhabitants in the region of the foreshore use it.

Housing.

Fifty-eight new houses were completed during 1938, making a total of 124 houses erected by the Local Authority since 1933. In October 1938, a survey of the overcrowding conditions showed 12 one-roomed, 28 two-roomed, 17 three-roomed and 2 four-roomed houses still overcrowded. Seventeen of these have been housed in the Local Authority Scheme and a further number of cases of overcrowding relieved by processes of decanting. The position with regard to overcrowding is, therefore, considerably improved, but there still remains a fairly large number of families to be re-housed.

Infectious Diseases.

There was a slight increase in the incidence of infectious diseases, but even then the number was small. Twelve cases were notified, viz:—

Scarlet Fever	6
Erysipelas	1
Diphtheria	1
Acute Influenzal Pneumonia	1
Pulmonary Tuberculosis	2
Non-pulmonary Tuberculosis	1

12

Factories and Workshops Acts.

Sixty visits of inspection were paid to factories and workshops in the Burgh. No cause for action was discovered nor was it found necessary to draw attention to defects in terms of the Public Health Acts.

Statistical Comments.

The estimated population was 1,671, a further decrease of 30 having been allowed.

There were 18 births—9 males and 9 females—the birth rate being 10·77 per thousand of population as compared with 12·9 in 1937.

Nine marriages were registered, an increase of 5 over the preceding year.

There were 35 deaths—19 males and 16 females—the death rate being 20·9 per thousand of population as compared with 14·6 in 1937.

There were 2 deaths in infants under one year of age.

The chief causes of death were heart disease (8), cerebral haemorrhage (5), cancer (3) and violence (2). Infectious diseases caused 2 deaths—one from Influenza and one from Tuberculosis.

Fifty-five per cent. of deaths occurred among persons between the ages of 65 and 84 and almost thirty per cent. of deaths were in the age group 75-84 years.

BURGH OF TAYPORT.

Water Supply.

Water supply is obtained from Dundee. It is plentiful and of excellent quality.

Drainage.

There was an addition to the public sewer in Craig Road. Apart from this, there is nothing to report and no complaints were received regarding the method of sewage disposal.

Nuisances.

Nuisances are not nowadays a big item in Public Health work. The few which occurred during the year were with one exception remedied without official action. In one case, a Notice was sent and the complaint was remedied.

Housing.

Little change has taken place in the position of housing in 1938. During the year, 4 two-roomed houses in Elizabeth Street and 2 four-roomed houses in Tay Street were completed and occupied. In all, the Local Authority have built 174 new houses. One house was built by private enterprise. No accurate figures are available as to the number of unfit houses. There are probably about 30 which can still be classed as unfit but a new survey is required and it is hoped that this will be undertaken during 1939.

The position regarding overcrowding has improved slightly. At the end of the year, 39 cases of overcrowding had been relieved—28 in privately owned houses and 11 in Local Authority houses—from the date of the survey in 1935. An overcrowding survey in 1939 showed that there were still in the Burgh some 70 cases of overcrowding. After decanting, it was estimated that 23 new houses would be required.

The Council proposes shortly to build 16 three-roomed houses in Tay Street and one block consisting of 2 three-roomed and 2 five-roomed houses in Glebe Crescent. When these are completed, the position should be eased considerably but there will still remain people in unfit houses to be re-housed.

Infectious Diseases.

A slight increase occurred in the incidence of infectious diseases chiefly due to a greater number of cases of Scarlet Fever. 24 cases were notified, viz. :—

Scarlet Fever	9
Primary Pneumonia	7
Erysipelas	1
Ophthalmia Neonatorum	1
Pulmonary Tuberculosis	2
Non-pulmonary Tuberculosis	4
	24

Milk Supply.

There are two dairy farms within the Burgh. Both are kept in clean condition but, in one, structural alterations are required. The bulk of the town's milk supply comes from dairies situated within the landward part of the County. These dairy farms are under the supervision of the County Sanitary Inspector and the herds are systematically inspected by the Veterinary Surgeons to the Ministry of Agriculture and Fisheries.

Meat Supply.

There is one private slaughterhouse within the Burgh. The premises are kept reasonably clean but they fall far short of modern requirements. As has been pointed out in previous reports, it is preferable that all meat consumed in the Burgh should pass through a modern centralised slaughterhouse. All animals killed are inspected by the County Sanitary Inspector.

During the year 170 cattle, 204 sheep and 7 pigs were slaughtered and 1,646 pounds of meat were seized and destroyed as unfit for human consumption.

Factories and Workshops Acts.

Eighteen visits of inspection were paid to factories and workshops in the Burgh. In three instances, unsuitable sanitary accommodation was found to exist, and steps were taken to remedy this.

Statistical Comments.

The population, according to the estimate of the Registrar-General, was 3,300, an increase of 27 having been allowed.

There were 49 births—31 male and 18 female—the birth rate being 14·85 as against 14·3 in 1937.

Twenty-one marriages took place, the rate being 6·4 per thousand of population.

Forty-five deaths occurred—21 males and 24 females—the death rate being 13·6 per thousand of population.

No deaths occurred in infants under one year of age.

The chief causes of death were heart disease (11), cancer (6), respiratory diseases (7), chronic nephritis (5) and cerebral haemorrhage (3). There were no deaths from infectious diseases.

Sixty per cent. of deaths occurred in persons of 65 years of age or over.

BURGH OF ST. ANDREWS.

Drainage.

During the year, an additional 361 yards of sewer pipe were laid down to meet the needs of private housing developments. No new sewers were laid for housing schemes.

There is no other change in the drainage system of the Burgh to report and no cause for complaint arose during the year.

Nuisances.

Nuisances do not form a large part of Public Health work. Complaints are comparatively infrequent and can almost always be dealt with without recourse to official action.

During the year, there were two complaints of a smell on the foreshore near the Step Rock and Bruce Embankment but this was due to decaying seaweed and not to sewage pollution.

There was a further complaint of a smell from sewage at Park Street. On inspection, there was no evidence of a nuisance.

The Town Council have introduced a Byelaw rendering any person liable to penalty who permits a dog on a lead to foul a footway. In spite of this, no improvement has resulted and streets and byways continued to be polluted by dogs as formerly. It would appear that dog owners have failed to co-operate with the Local Authority. A remedy might be found in prosecuting all persons found allowing dogs to pollute the footpaths while on a lead.

Refuse Disposal.

4,772 tons of house, trade and municipal refuse were disposed of during 1938, 4,300 tons having been collected from houses.

During the snow storm at the end of the year, 967 tons of snow were removed up to 31st December. Garden refuse is now collected on two afternoons a week and this system of dealing with garden refuse is proving a satisfactory one.

The dunes at the West Sands continue to be used as dumping ground and a fairly extensive car park has now been created as a result.

114 tons of waste paper from shops and houses was collected, providing a revenue of £70.

Water Supply.

The lowest level of water at the outlet tower at Cameron Reservoir was 17 ft. 4 in. in September. At the beginning of November, the Reservoir was full and in December it was overflowing. The work of pitching the banks which was started in 1937, has continued steadily and is doing much to prevent further erosion.

The average consumption of water per head of population was 71.52 gallons, 3.69 gallons more than 1937. The consumption was high, but at no time was there any fear of a water shortage.

Bacteriological samples of water were taken at regular intervals throughout the year. They showed that the usual high degree of purity was being maintained.

During the year, 2,097 yards of new water main were laid and 178 yards of existing main were renewed.

Infectious Diseases.

One hundred and sixty-eight cases of infectious diseases were notified as compared with 92 in 1937 :—

Scarlet Fever	..	..	..	74
Diphtheria	..	..	..	5
Erysipelas	..	..	..	2
Dysentery	..	..	..	59
Acute Primary Pneumonia	..	..	..	5
Puerperal Fever	..	..	..	2
Typhoid Fever	..	..	..	1
Undulant Fever,	..	..	..	1
Ophthalmia Neonatorum	..	..	..	1
Pulmonary Tuberculosis	..	..	..	16
Non-pulmonary Tuberculosis	..	..	..	2
Total				168

The increased incidence was due to two factors, viz., the continuation of the outbreak of Dysentery which occurred at the end of 1937 into the beginning of the following year and to a minor epidemic of Scarlet Fever which commenced in August and went on until November.

The outbreak of Dysentery was fully explained in the 1937 Report. Cases continued to occur until March 1938, 59 being notified, making a total of 115 notifications during the epidemic.

Cases of Scarlet Fever first appeared in August, the maximum occurrence being reached in October. Thereafter, the outbreak quickly subsided. All cases with the exception of two were admitted to hospital. The cases generally were of a mild nature and no fatality occurred. At no time was the number of cases sufficient to give rise to any anxiety.

Housing.

At the end of 1938, the number of houses provided by the Local Authority under the various enactments since 1919 was :—

One-roomed houses	.. .. .	4
Two-roomed houses	.. .. .	129
Three-roomed houses	.. .. .	332
Four-roomed houses	.. .. .	133
Five-roomed houses	.. .. .	30
Total	.. .. .	628

Plans for 84 municipal houses, Second Instalment of the Eleventh Development, were passed during the year. Plans for the construction of 15 private houses and for the alteration and improvement of 27 houses were reported upon. Plans for the alteration of 19 business premises and for the erection or alteration of 12 other buildings were approved by the Local Authority.

The construction of 16 houses which comprise part of the First Instalment of the Eleventh Development of the Town Council's housing programme was completed and all were occupied by families from unfit or overcrowded houses. These 16 houses were :—

- 8 three-roomed.
- 2 four-roomed.
- 6 five-roomed.

At the time of writing, the 82 houses of the Eleventh Development are now completed and occupied.

During the year, no Representations were made to the Town Council regarding unfit houses.

Since first the Town Council took action against insanitary houses in terms of the Housing Acts, 31 properties containing 78 houses have been demolished.

During the year, 3 houses were rendered fit after Notice under Section 14 (1), 5 houses were rendered fit after Undertakings under Section 16 (2) and one property—three houses, was demolished.

OVERCROWDING.—Overcrowding was relieved in 18 houses as a result of action taken by the Local Authority, 7 families from unfit houses and 11 families from municipal houses being decrowded. All these families were re-housed in Town Council houses.

HOUSING REQUIREMENTS.—Since the survey of 1935, the Town Council has built a large number of houses and the construction of another 84 houses as the Second Instalment of the Eleventh Development is now well under way. Great progress has been made with the re-housing of families in unfit and overcrowded houses. More houses will be required but, without a new survey, it is not possible to give accurate figures. As soon as other work of the Department permits, a re-survey of the town to get the number of families still living under overcrowded conditions will have to be undertaken.

In arriving at the number of houses required, allowance is not made for these families not being in unfit or overcrowded houses who are ordinary applicants for houses. The number of applicants is rising steadily as will be seen from the following figures extracted from the Housing Register :—

Two-roomed houses	...	138
Three-roomed houses	...	78
Four and five-roomed houses	...	21
		237

Existing legislation does not assist Local Authorities to build houses for the normal needs of the population. Conditions governing houses built under the 1930 and 1935 Housing Acts have been relaxed in so far as it is now permissible to re-let a certain percentage of such houses when they become vacant to ordinary applicants, but the number which will be so re-housed will be small and will not materially affect the large list of applicants. There is little hope of this problem being solved short of the introduction of new legislation.

City Fever Hospital.

Details of the cases admitted to the City Fever Hospital are already given in the County Report.

Maternity and Child Welfare Scheme.

Dr. Simpson, Executive Medical Officer, reports as follows on the year's work :—

" St. Andrews is fortunate in having facilities for a very complete health service. Children are seen regularly from birth to two years at the Child Welfare Centre and thereafter once or more times a year at the James Mackenzie Institute. The advantages to parents and children of this regular observation are great and the opportunity for research afforded by these complete records is unique.

" The Child Welfare Centre also has an Observation Nursery with accommodation for five resident babies.

" BIRTHS.—Notified to the Health Visitor as taking place in St. Andrews Burgh—96. Notified to the Health Visitor as taking place outside the Burgh but referred back to St. Andrews—4, total 100.

Illegitimate Births	...	4
Still Births	...	4

" Infantile Mortality.

Under 1 week	...	2 Prematurity.
1-4 weeks	...	1 Infantile convulsions.
4 weeks to 3 months	...	0
3-6 months	...	1 Acute gastro enteritis.

"Maternal Mortality.—1 was removed to hospital. A retained placenta due to uterine inertia : died from post partum shock. History of encephalitis lethargica in adolescence.

"Child Welfare Work.

No. of children on Child Welfare Register	246
Home visits under 1 year	1107
" over 1 year	344
Expectant Mothers visited by Nursing Association Nurse	452

"Ante-Natal Consultations.

No. of Cases	24
No. of visits	24

"Child Welfare Consultations.

No. of sessions Child Welfare Centre	99
" Mackenzie Institute	68
Average duration 2½ hours.	

"No. of infants and children attending :—

<i>Child Welfare Centre.</i>		<i>Mackenzie Institute.</i>	
Under 1½ year	173	2-5 years	189
1-2 years..	53	Over 5 years	314
2-5 years..	30		
Over 5 years	4		
	260		503

"No. of attendances :—

<i>Child Welfare Clinics.</i>		<i>Children's Clinics.</i> <i>(Mackenzie Institute)</i>	
Under 1 year	1013	2-5 years	330
1-2 years..	361	Over 5 years	350
2-5 years..	180		
Over 5 years	56		
	1610		680

Meat Supply.

The Public Slaughterhouse at Maryfield remains the only slaughterhouse in the Burgh.

All meat inspection in this slaughterhouse is carried out by a Veterinary Surgeon employed by the County Council.

During the year, 1,218 cattle, 3,283 sheep and 470 pigs were slaughtered, making a total of 4,971 animals as compared with 4,915 animals in 1937. 19,827 lbs. of meat were condemned and destroyed as unfit for human consumption as compared with 18,605 lbs. in 1937.

Milk Supply.

Only two dairy farms are situated within the town. Both were regularly inspected and were always found to be in clean condition. One of these has a Tuberculin Tested Herd and produces Certified Milk. The dairy farmers have been at pains to bring their premises up to the standard of modern requirements and both have been in possession of the Accredited Clean Milk Producer's Certificate granted by Fife County Council to dairymen whose milk is found consistently to comply with certain defined standards of purity.

The bulk of the town's milk supply, however, comes from dairy farms situated in the County, where supervision is maintained by the County Sanitary Inspector. An ample supply of quality milk is available.

A considerable quantity of quality milk is sold in the town. Certified Milk is available from four sources—Wester Balrymonth Dairy Farm, Mount Melville Dairy Farm, St. Nicholas Dairy Farm and Cults Dairy Farm, Springfield. Pasteurised milk can be had from the Co-operative Society shops in South Street and Market Street. There is a sufficiency of good dairymen and good dairy premises in the Burgh and in its neighbourhood to supply every household with tubercle free milk.

Factories and Workshops Acts.

Forty-one visits of inspection were paid to factories and workshops in the Burgh and no written notices were served on proprietors. No serious criticisms from the health point of view can be levelled against the conditions under which people are employed in the town.

Statistical Comments.

According to the estimate of the Registrar-General, a further decrease occurred in the population of the Burgh. In 1937 it was estimated at 8,493; in 1938 at 8,383. This figure does not include the population of St. Leonards School for Girls, which is slightly in excess of 500.

During the year, there were 92 births—43 males and 49 females—the birth rate being 10.97 per thousand of population as compared with 12.2 in 1937.

The number of marriages registered was 50, the rate being 5.9 per thousand of population.

Corrected for transfers, the number of deaths from all causes was 107—51 males and 56 females—the rate being 12.8 per thousand of population, the corresponding rate for the previous year being 13.4. The death rate exceeded the birth rate by 1.8 per thousand of population.

There were six deaths among infants under one year of age. The corresponding infantile mortality rate was 65 per 1,000 births. Of recent years, the rate has been consistently low.

There was one death among children in the 1-5 years of age group and no deaths among children in the 5-10 years of age group.

The following were the causes of death among the population :—

Tuberculosis of Respiratory system	4
Cancer, malignant disease	18
Cerebral haemorrhage, etc.	19
Other diseases of nervous system and sense organs	3
Heart disease	29
Other circulatory diseases	2
Bronchitis	2
Pneumonia (all forms)	6
Diarrhoea	1
Diseases of the liver, etc.	2
Tuberculosis (other forms)	3
Infectious diseases (other than T.B.)	—
Puerperal causes	2
Other general diseases	4
Digestive diseases	1
Acute and chronic nephritis	2
Other diseases of genito-urinary system	1
Congen. debil., prem. birth, malform., etc.	4
Violences	4
Total	107

63·6 per cent. of the people who died were 65 years of age and over. The principal cause of death, like that for the country as a whole, was diseases of the heart and arteries (29 per cent.).

The number of deaths from cancer increased to 16·8 per cent. of the total number of deaths.

BURGH OF AUCHTERMUCHTY.

Drainage and Water Supply.

There is nothing new to report with regard to the water supply and drainage of the Burgh. The gravitation water supply is both ample and satisfactory. No cause for complaint arose with regard to drainage during 1938.

Nuisances.

No serious nuisances arose, any that occurred being of a minor nature and being effectively dealt with without recourse to official action.

Housing.

Sixteen houses—8 of three apartments and 8 of four apartments—were completed and occupied on 31/3/38. A further eight houses are

in the course of erection. Of the 16 houses, 12 were used for re-housing persons from unfit houses and 4 for the re-housing of overcrowded families.

It is very satisfactory to be able to report progress with regard to the re-housing of those families living in unfit houses, but the position as regards overcrowding is substantially unaltered.

Fourteen houses were altered and rendered fit with the aid of grant obtained under the Housing (Rural Workers) Acts. Six others were renovated without assistance. A number are at present in the course of reconstruction. While housing conditions in the Burgh are steadily improving, much remains to be done.

During the year, four houses were demolished.

Infectious Diseases.

A slight increase occurred in the incidence of infectious diseases, six cases having been notified as compared with four in 1937. These were :—

Primary Pneumonia	..	2
Pulmonary Tuberculosis	..	2
Non-Pulmonary Tuberculosis	..	2
		—
		6
		—

Milk Supply.

There are no dairy farms within the Burgh, all milk retailed in the town being from farms situated in the landward part of the County. These dairy farms are under the supervision of the County Officials. There is one dairy shop and this was kept in satisfactory condition.

Meat Supply.

There is only one private slaughterhouse in the Burgh and this, on the whole, was kept in satisfactory condition. It is regularly visited by the County Sanitary Inspector who also acts as Detention Officer.

During the year 68 cattle, 129 sheep and 17 pigs were slaughtered and 208 pounds of meat were condemned and destroyed as unfit for human consumption.

Factories and Workshops Acts.

Fifty-six visits of inspection were paid to factories and workshops within the Burgh. In four instances want of cleanliness and ineffective drainage of floors were found to exist. Steps, however, were taken towards remedy.

Statistical Comments.

The population, according to the estimate of the Registrar General, was 1,224, an increase of 2 having been allowed.

There were 11 births—5 males and 6 females—the birth rate being 9 as compared with 13.9 in 1937.

Three marriages were registered, the rate being 2.45 per thousand of population.

Twenty deaths occurred—8 males and 12 females—the rate being 16.3 per thousand of population.

No deaths occurred in infants under one year of age.

There were no deaths due to infectious diseases.

The chief causes of death were heart disease (12), cancer (4).

Eighty per cent. of the deaths occurred among persons over the age of 65 years.

BURGH OF CUPAR.

The population, as estimated by the Registrar-General, was 5,004, an increase of 40 having been allowed.

The birth rate was 21.2 per thousand of population and the death rate was 8.2 per thousand of population as compared with rates of 17.5 and 15.2 respectively in 1937. The total number of births was 106—54 males and 52 females—and the total number of deaths was 41—13 males and 28 females.

The marriage rate was 8.6 per thousand of population.

There were two deaths in children under one year of age.

There were three deaths from infectious diseases—one from measles, one from diphtheria, and one from cerebro-spinal meningitis.

The chief causes of death were heart disease (12), cerebral haemorrhage (5) and cancer (4).

68.3 per cent. of deaths occurred among people of 65 years of age.

There was a considerable increase in the number of cases of infectious diseases notified during the year. This was chiefly accounted for by the prevalence of Scarlet Fever. 41 cases of infectious diseases in all were notified, made up as follows :—

Acute Primary Pneumonia	..	..	..	5
Erysipelas	..	..	..	4
Diphtheria	..	..	..	6
Scarlet Fever	..	..	..	16
Ophthalmia Neonatorum	..	..	..	2
Pulmonary Tuberculosis	..	..	..	2
Non-pulmonary Tuberculosis	..	..	..	2
Influenzal Pneumonia	..	..	..	1
Puerperal Pyrexia	..	..	..	2
Puerperal Fever	..	..	..	1
Total	..	..	..	41

During the year, there was a fairly severe epidemic of measles affecting school and pre-school children. Measles is not notifiable and the actual number of cases cannot be given. One death occurred.

There are three dairy farms in the Burgh and three dairy premises from which milk is sold retail. The general standard of cleanliness shown in premises was satisfactory. During the year, the dairymen were advised regarding certain works necessary to bring their premises up to standard.

There is no change to report with regard to the public slaughterhouse. The building is out of date and a new slaughterhouse is urgently required.

During the year 833 cattle, 1,601 sheep and 761 pigs were slaughtered and 8,817 pounds of meat were condemned and destroyed as unfit for human consumption.

BURGH OF FALKLAND.

The population of the Burgh, according to the estimate of the Registrar-General, was 900, a further decrease of 15 having been allowed.

The birth rate was 15.6 per thousand of population as compared with 18.6 per thousand of population in 1937. The death rate was 10.0 per thousand of population as compared with 16.4 per thousand of population in 1937.

14 births were registered—10 males and 4 females.

9 deaths were registered—4 males and 5 females. There was one death among infants under one year of age.

The chief causes of death were diseases of the heart and arteries (2), tuberculosis (1), respiratory disease (3) and cancer (2).

66 per cent. of the total number of deaths occurred among people of 65 years of age and over.

There were 9 marriages registered, the rate being 10 per thousand of population.

Only 6 cases of infectious diseases were notified :—Scarlet Fever 2, Influenzal Pneumonia 1, Diphtheria 1, Pulmonary Tuberculosis 1 and Non-pulmonary Tuberculosis 1.

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

There are three dairy farms within the Burgh. These are kept in the main in a satisfactory and clean condition. During the year, the farmers' attention was drawn to the various improvements which were considered necessary.

There is no change to report with regard to the private slaughter-house in the Burgh. It is kept in a very clean condition and is quite a satisfactory place of its type.

During the year, 61 cattle, 140 sheep and 13 pigs were slaughtered and 316 lbs. of meat were condemned as unfit for human consumption.

BURGH OF LADYBANK.

According to the Registrar-General, the population of the Burgh was 1,212, a further increase of 18 having been allowed.

There were 10 births—6 males and 4 females—the corresponding rate being 8.25 per thousand of population. There were 18 deaths—8 males and 10 females—the corresponding death rate being 14.85 per thousand of population.

There were no deaths among children under one year of age.

There were 10 marriages, the rate being 8.25 per thousand of population.

The principal causes of death were diseases of the heart and arteries (8) and cerebral haemorrhage (5).

There were two deaths from infectious diseases, one from Typhoid and one from Influenza.

72.2 per cent. of the total number of deaths occurred among persons of 65 years of age and over.

The incidence of infectious diseases was even lower than usual in 1938. Only three cases occurred, viz. :—Erysipelas 2, Typhoid Fever 1. The case of Typhoid died.

There is one dairy farm and one dairy shop in the Burgh. Certain improvements regarding lighting and ventilation are at present being carried out on the former. Both the premises are kept in a satisfactory manner.

There is no change to report with regard to the one private slaughter-house in the Burgh. The place is kept, on the whole, clean and well maintained, but it is structurally out of date.

During the year, 92 cattle, 128 sheep and 80 pigs were slaughtered and 302 lbs. of meat were condemned as unfit for human consumption.

BURGH OF NEWBURGH.

The population, as estimated by the Registrar-General, was 2,323, a further increase of 52 having been allowed.

There were 39 births—26 males and 13 females—the corresponding birth rate being 16.8 per thousand of population.

19 deaths occurred—6 males and 13 females—the corresponding death rate being 8.2 per thousand of population.

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

There were no deaths from infectious diseases.

There were 16 marriages, the rate being 6.9 per thousand of population.

52.6 per cent. of the total number of deaths occurred among persons of 65 years of age and over.

The principal causes of death were diseases of the heart and arteries (5) and cancer (7).

There was a slight increase in the incidence of infectious diseases during the year chiefly due to the prevalence of Scarlet Fever. The following was the number of cases notified :—

Acute Primary Pneumonia	2
Erysipelas	3
Scarlet Fever	11
Diphtheria	3
Ophthalmia Neonatorum	1
Pulmonary Tuberculosis	2
Non-pulmonary Tuberculosis	2
Total	24

There are two dairy farms and three dairy shops in the Burgh. One dairy farm which fell short of the County Dairy Byelaws carried out certain minor improvements. The condition in which the different premises were kept was reasonably satisfactory.

During the year, the new private slaughterhouse in the Burgh was completed. Since completion, however, works of improvement, chiefly in respect of paving yards, have been carried out. There is no change to report with regard to the other slaughterhouse.

During the year, 129 cattle, 25,875 sheep and 11 pigs were slaughtered and 971 lbs. of meat were condemned as unfit for human consumption.

REPORT BY R. A. KRAUSE, M.D., D.Sc., D.P.H.,

Deputy County Medical Officer (Welfare).

The report on the work carried out by the Area Medical Officers and the Health Visitors under the Maternity and Child Welfare Scheme is in two parts :—

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

- (1) Infant births and deaths.
- (2) Conditions of home 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) Miscellaneous.

A.

(1) Infant Births and Deaths.

The number of births notified in 1938 was 3,469 (1,812 males and 1,657 females). In 1937 the number of births was 3,473. There is an increase (22) in number of males and a decrease (25) in number of females born.

The distribution of births in the various districts was :—

Dunfermline Landward,	513
Cowdenbeath and Lochgelly	1027
Kirkcaldy Landward	404
Wemyss,	705
Cupar	361
St. Andrews	270
Anstruther	189

There were 153 stillbirths (Dunfermline 29, Cowdenbeath and Lochgelly 47, Kirkcaldy 18, Wemyss 26, Cupar 11, St. Andrews 11, and Anstruther 11).

The number of premature births was 177 (Dunfermline 42, Cowdenbeath and Lochgelly 63, Kirkcaldy 13, Wemyss 21, Cupar 19, St. Andrews 6, and Anstruther 13).

The number of illegitimate births was 143 (Dunfermline 26, Cowdenbeath and Lochgelly 37, Kirkcaldy 16, Wemyss 24, Cupar 19, St. Andrews 12, and Anstruther 9).

There were 42 plural births (43 in 1937).

Arrangements were made in 2,137 cases for the doctor to be in attendance at the confinement, and 949 were attended by midwives. In the case of 30 cases the birth took place before the arrival of the doctor or midwife. There were 353 births in Institutions (Dunfermline 33, Cowdenbeath and Lochgelly 111, Kirkcaldy 47, Wemyss 100, Cupar 10, St. Andrews 49 and Anstruther 3). This shows an increase of 146 births in Institutions over the preceding year.

The number of infant deaths reported was 161 (211 in 1937)—Dunfermline 23, Cowdenbeath and Lochgelly 51, Kirkcaldy 16, Wemyss 44, Cupar 10, St. Andrews 11, and Anstruther 6. The main causes of death were prematurity and debility, etc., 82, respiratory disease 31, diarrhoeal diseases 3, other diseases of the digestive system 8, infectious diseases 3, and other diseases 34.

Only once before, during the past eight years, has the figure for infant deaths been as low as 161, namely, in 1936. The figures for the other years have all been definitely above 200. There is a decrease in the figures for the various conditions responsible for the deaths. Similarly the decrease has taken place in all the districts although the figures for Cowdenbeath, Lochgelly and Cupar show the largest decrease.

(2) Conditions of "Home" on First Visit.

The Health Visitor, when making her first visit to the mother and baby, after notification of birth has been received, reports on the condition of the home. There were 3,433 "first" visits reported. In the case of 228 the condition of the house was stated to be indifferent (Dunfermline 8, Cowdenbeath and Lochgelly 42, Kirkcaldy 19, Wemyss 92, Cupar 22, St. Andrews 39, and Anstruther 6). There were 28 houses described as "dirty"—Cowdenbeath and Lochgelly 5, Kirkcaldy 5, Wemyss 11, Cupar 4, Anstruther 1, and St. Andrews 2). In the remaining 3,177 cases the condition of the home was considered satisfactory.

(3) Breast Feeding, etc.

On the occasion of the "first" visit, the Health Visitors report that 2,564 babies were breast fed (74.6 per cent.). There were 606 babies bottle fed. The distribution in the districts was as follows (number of bottle fed babies given in brackets):—Dunfermline 369 (94), Cowdenbeath and Lochgelly 791 (141), Kirkcaldy 303 (71), Wemyss 489 (165), Cupar 283 (49), St. Andrews 196 (49), and Anstruther 133 (37). There were 102 babies who were both breast and bottle fed.

(4) Pre-School Children.

The increasing opportunities given to mothers to bring their young children to clinics for advice or treatment is certain to lead to conditions in the general health of these children which must have important permanent results. Pre-school children can attend the minor ailments clinics and can there be treated for eye and ear conditions as well. Whilst they also attend the dental clinics, more use of these clinics at an earlier stage would accustom the children to visit the dentist, and if parents could make it a habit to bring their young children to the dentists for inspection, the children would not require any or only very little treatment and would be less afraid in consequence to visit the dentist. There are still too many parents who do not realise that the milk teeth require as much care as the permanent teeth—that a diseased milk tooth seriously injures the growth of the future permanent tooth long before it has erupted.

The attendance of many young children at the orthopaedic clinics is encouraging to the staff and should eventually lead to a very great reduction in the number and degree of crippling conditions. Another condition requiring attention is the child that squints and here again

the early taking in hand of such cases will definitely help to bring about a considerable reduction in the number of children with squint.

The Nursery School at Methil continues its most successful work with young children. Its success can be partly gauged by the large waiting list of about 100 children who cannot be admitted because of lack of accommodation. It was the intention of the Education Committee to set up one or more nursery classes in Lumphinnans School. Unfortunately to date this scheme is still in abeyance, much to the detriment of the children of the district served by this school.

(5) Home Visitations.

The number of home visits under the Maternity and Child Welfare Scheme made by the Health Visitors was 49,587—Dunfermline 10,036, Cowdenbeath and Lochgelly 12,310, Kirkcaldy 8,133, Wemyss 6,871, Cupar 5,070, St. Andrews 5,396, and Anstruther 1,773. The reduction in number of home visits compared with previous years is due to the amount of illness amongst the staff and the interruption in the work in consequence.

The number of mothers and infants seen at these visits was 31,060. In addition, 22,203 pre-school children were also seen.

As Assistant Inspectors of Midwives the Health Visitors made 126 visits of inspection. Under the Tuberculosis Scheme the Welfare Nurses also act as "Tuberculosis" Nurses and in carrying out this work they paid, 6,579 (2,692 pulmonary and 3,887 non-pulmonary cases) visits to the cases on the register.

Under these various schemes the Welfare Nurses made a grand total number of 56,294 visits (59,252 in 1937).

(6) Infant Protection.

The number of infants on the Infant Protection Register (January 1938) was 45. Fifteen cases were added to the list and three left the district, whilst three were returned to relatives and five reached the age of nine years. One infant was legally adopted by its guardian.

The Health Visitors act as Infant Protection Visitors and in this capacity made 178 visits and at these visits 200 children were seen and reports sent to the Central Office. Of the fifteen preliminary cases (cases seen for the first time and report), eleven guardians possessed no fireguards. These guardians all signed that they had been informed of their responsibility in this matter. One of these preliminary cases was kept under supervision by the "Visitor" as no doctor had been called to see the infant although suffering from whooping cough. The subsequent reports, however, were satisfactory.

The following were a number of outstanding cases. In the Anstruther Area the "atmosphere" in one home was reported as "undesirable" and the infant was removed by the mother and placed in the Fife Children's Home, Aithernie, Lundin Links. In the Cupar

Area it was reported that in one home, where other 3 children were boarded-out by the Education Committee, the guardian was rather old to manage so many children. It was subsequently reported that as the other children had been removed, the guardian was able to attend satisfactorily to the infant. In the Wemyss Area an unsatisfactory report on the home was received. It was later decided to allow the infant to remain as the guardians had transferred to the new houses. Later reports indicated that the child was being well cared for. An infant in the Lochgelly Area required treatment in the Royal Hospital for Sick Children, Edinburgh. She is being kept under supervision by the Area Medical Officer who states the infant is progressing satisfactorily.

B.

(a) Midwives Acts, 1915 and 1927.

There were 52 midwives practising in the various districts of Fife (Dunfermline 15, Cowdenbeath and Lochgelly 15, Kirkcaldy 3, Wemyss 4, Cupar 4, St. Andrews 9, and Anstruther 2).

The midwives sent for medical assistance in 218 cases (197 in 1937)—Dunfermline 47, Cowdenbeath and Lochgelly 136, Kirkcaldy 3, Wemyss 18, and North-East Fife 14.

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

Torn perineum	50
Delayed labour and uterine inertia	46
Abnormal labour	19
Inflamed and discharging eyes	16
Still-births	11
Premature births	10
Weakness :—	
(a) Mother	7
(b) Baby	4
Maternal haemorrhage :—	
(a) Ante-partum	4
(b) Post-partum	6
Pain and Puffiness, legs, etc.	6
Raised temperature	5
Jaundice	4
Adherent and retained placenta	4
Miscellaneous (Eclampsia, spina bifida (5), threatened abortion (2), melaena (2), rash on body, placenta praevia, cyanosis, fractured arm, hare-lip, etc.) ..	26

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

Deaths	2
Still-births	40
Laying out of dead body	18
Liability to be a source of infection	8
Artificial feeding	6
Failure to follow advice	1

75

The total number of births for the County was 3,469. Midwives attended 944 of these (Dunfermline 133, Cowdenbeath and Lochgelly 677, Kirkcaldy 30, Wemyss 45, St. Andrews 28, Cupar 24, and Anstruther 7). The figures for 1937 were 3,473 and 958 respectively. There was one confinement at which neither a doctor nor a midwife was present. 341 births took place in Institutions (207 in 1937) and 29 infants were born before a doctor or a midwife arrived.

The number of deaths taking place within ten days of birth was 83 (103 in 1937), and of these 11 occurred in the practice of a midwife (Cowdenbeath and Lochgelly 7, Dunfermline 2, Kirkcaldy 1, and Wemyss 1).

The figures relating to a number of puerperal conditions occurring in the practice of midwives is as follows (County figures in brackets) :—

Ophthalmia Neonatorum	24 (85)
Puerperal Fever	1 (13)
Puerperal Pyrexia	6 (21)
Still-births	30 (153)

There were no deaths amongst the cases of puerperal fever or pyrexia.

The Health Visitors acting as Inspectors of Midwives made 114 periodic inspections.

During the past year a number of inquiries and special reports were made regarding certain midwives. In one case a Medical Assistance Form was not filled up, where an infant (3 days old) was not looking well and although instructions had been given to the father to send for the doctor, the medical assistance form was not made out. The infant subsequently died and here again the midwife neglected to send a form of Notification of Death to the Central Office. The midwife was warned of her neglect to carry out the duties imposed by the Central Midwives Board, and she was advised to again carefully read through the rules of the Board.

In the case of another midwife, warning had to be sent also. Here she had advised the husband to send for the doctor, the woman having ante-natal haemorrhage, but no medical assistance form was made

ut nor sent to the Central Office. This midwife was also advised to refresh her memory regarding the rules of the Board.

Another midwife was advised to send in her notification forms more expeditiously as from information received, she was always inclined to be late in making her notifications.

It was reported regarding another midwife that she did not keep a record of the pulse nor the temperature. Also, in another case, she did not take steps to notify a medical practitioner that a case had watery eyes until her attention was drawn to the fact by the Health Visitor. Subsequently this midwife stated that she saw nothing wrong with the eye but only notified the case to the family doctor because she had been told that the Health Visitor had noticed the condition. Fortunately, the eye condition was slight. This midwife was also advised to carefully read over the rules of the Central Midwives Board.

Another midwife who has been reported on repeatedly, also had to be warned, as she had not sent notice to the Central Office that one of her mothers had been removed to hospital as a case of Puerperal fever.

Another midwife failed to notify a case of Ophthalmia Neonatorum. A warning was sent to this woman and instruction that it was her duty to notify to this office any case of discharging eyes, no matter how slight she may consider it to be.

Attention had also to be drawn to the death of a premature infant. Here the mother was too late in sending for the midwife, and the birth took place before the arrival of the midwife. One cannot help feeling that the delay by the mother in sending for the midwife probably contributed to the death of the infant which was one month premature. It is most unfortunate that some mothers wait too long before notifying the midwife or the doctor of their impending confinement, and it is certain that a good deal of trouble would be obviated if midwives were approached earlier than is the case with some mothers.

(b) Maternity and Child Welfare Centres.

The new Welfare Clinic at Methil has been completed and is now available for the mothers and children of the Buckhaven area. The improved facilities and more congenial conditions are very much appreciated by the mothers. It is hoped that not only will full use be made of the child welfare clinics but also that the ante-natal clinic will also be developed.

Arrangements are also being made for the reconstruction of the Welfare Clinic at Markinch.

Unfortunately, no further progress can be reported as regards the following clinics. Firstly, there is the old Welfare Clinic at Cowdenbeath. This building has served its purpose but cannot now be considered in any way as adequate for the local needs. In addition it is

uncomfortable and makeshift arrangements have been made to tide over conditions until the new clinic is built. Plans for a new clinic were drawn up but the site (next to Broad Street School) was turned down by the Government Department. Various attempts have been made to find another suitable site but to date there has been no suitable site found. The other Welfare Clinics about which nothing has been done are (a) *Auchtermuchty*, (b) *East Wemyss*, and (c) *Blairhall*. Another clinic which should be mentioned as not suitable for welfare work is the one at Inverkeithing. Whilst the actual accommodation might be considered passable for a limited number of cases, the approach to this clinic is by two sets of stairs and mothers with babies or young children find these stairs too big a climb to encourage them to pay visits to consult the doctor or the nurse.

Despite these unsatisfactory conditions, I must again report that the work in the Welfare Clinics in Fife must be considered good taking into consideration the difficulties the staff have to contend with. The following figures give the number of new cases and total attendances made :—

Clinic.	New Cases.	Attendances.
<i>Dunfermline District—</i>		
Crossgates	62	484
Inverkeithing	82	245
Torryburn	199/55	86
<i>Cowdenbeath and Lochgelly District—</i>		
Auchterderran	187	784
Cowdenbeath	225	2014
Crosshill	212	716
Kelty	330	960
Lochgelly	1150/196	1404
<i>Kirkcaldy District—</i>		
Burntisland	87	619
East Wemyss	52	203
Kinghorn	20	434
Leven	118	884
Methil	252	1831
Thornton	545/16	367
<i>North-East Fife—</i>		
Anstruther	57	475
Cupar	218	803
Ladybank	25	284
Newburgh	59	597
St. Andrews	170	2283
Tayport	647/118	539
	2,541	16,012

The figures for 1937 were 2,366 cases and 14,001 attendances.

Mothers visit these clinics chiefly for advice regarding the feeding of their infants. Of the new cases (2,541), 1,565 were "feeding cases and 1,578 were seen by the clinic doctor, who referred 40 cases to their family doctor.

Further, 1,351 of the new cases were infants under 12 months; and 474 were children between the ages of one and five years. In addition, there were 212 expectant mothers and 504 "other" cases. Children found to be suffering from some remediable condition are either referred to the family doctor or sent to the welfare clinic (general or special). The latter includes treatment of minor ailments, dental and eye or ear conditions. Increasing use is also being made of the orthopaedic scheme and it is hoped that in time this will lead to a marked reduction in the number of advanced crippling conditions. It is also hoped that we shall be able to do something definite for the squinting child and here the importance of getting the child as early as possible is of the utmost value. The staff also point out to the mothers the importance of having the young children immunised against diphtheria. A certain proportion of the mothers also avail themselves of the possibility of having this immunisation carried out at the local clinic.

During the past few years attempts have been made to establish separate ante-natal clinics. At two centres progress can be reported, namely, at Leven and at Lochgelly.

At the Leven Clinic seventeen expectant mothers were seen and they made 45 visits. As many of the cases came very late in pregnancy, they could only put in one or two attendances. Three cases had to be referred to their family doctors—they were cases of albuminuria, varicose veins and previous history of eclampsia. In view of the increasing attention paid to the ante-natal period and the larger number of expectant mothers making use of such a clinic, it will probably be necessary to consider the provision of more adequate accommodation in the Methil Clinic where cases will be examined in the future.

In the Lochgelly Area ante-natal clinic sessions are held in (1) the Auchterderran H.G. School Clinic and (2) the Lochgelly Welfare Clinic. There were 44 sessions held at which 87 expectant mothers attended and there was a total number of 252 attendances.

The establishment of a specialist obstetric service in Kirkcaldy, which will also be available, by arrangement, for cases in the Kirkcaldy District, should make for the success of these ante-natal clinics and reduce the necessity of periodic visitation to the ante-natal clinic at the Maternity Home in Kirkcaldy.

(c) Ultra-Violet Therapy.

Ultra-violet radiation (or artificial sunlight) is available to children and nursing or expectant mothers at the following clinics:—Lochgelly, Cowdenbeath and Methil. The type of apparatus available at the first two clinics is the mercury vapour lamp. In the case of the Methil Clinic it is carbon arc lamps. These latter replace the lamps which were in use in Leven. They are more powerful and permit of a larger number of cases being treated at one time. I must here indicate my apprecia-

tion of help and advice received from Dr. Aitken (Skin Department Royal Infirmary, Edinburgh) concerning the best type of arc lamps to be used for general radiation.

The conditions for which treatment was given were mainly general debility and anaemia, rickets, alopecia, myalgias, bronchitis, etc. Whilst most of the cases show improvement, there is quite a number of the cases where only a few attendances are made. Good results cannot be expected from short exposures nor from cases making only occasional visits to the clinic with long intervals in between.

The number of cases treated was 163 (148 in 1937)—Cowdenbeath 31, Lochgelly 48, and Methil 80. Of the total number of cases, 15 were infants, 63 children 1-5 years, 74 school children and 11 "other" cases. The total number of attendances was 3,095.

(d) **Miscellaneous.**

(1) Dental Treatment is available for pre-school children, expectant and nursing mothers, Public Assistance cases and Police staff. 28 pre-school children making 318 attendances had 610 extractions under local anaesthesia, 147 under general anaesthesia, and 194 other dental treatments—a total of 951 treatments.

There were 85 expectant or nursing mothers treated—these had 52 extractions (397 local and 125 general anaesthesia) and 16 other dental treatments. In addition 11 upper and 7 lower dentures were made and inserted. These treatments necessitated 243 attendances.

The number of Public Assistance cases treated was 163 (requiring 530 attendances) and 763 extractions were carried out (641 under local and 122 under general anaesthesia). Other 41 dental treatments were also made as well as 55 upper and 44 lower dentures. Three dentures required to be repaired.

There were 27 Policemen treated for defective teeth. The extractions numbered 88 and 12 upper and 8 lower dentures were inserted. One denture required to be repaired. In all, 97 attendances were made at the dental clinics.

The total number of dental treatments for these cases was 2,577 and in addition 137 dentures and 4 repairs were also made.

(2) During the year 1937-38 the number of children notified as uneducable was 17 (10 girls and 7 boys).

(3) During the past year 104 pre-school children attended for eye examinations and some of these were referred to the Eye Specialists.

There were 41 Public Assistance cases seen at the eye clinics and 17 of these were referred to the Eye Specialist for further examination. As a result of these examinations, 59 pairs of spectacles were ordered and supplied under the County Scheme.

(4) The number of cases of Ophthalmia Neonatorum was 85 (1937-38) and necessitated the nurses paying 266 visits to the homes of the

infants. In the case of puerperal fever and puerperal pyrexia there were 13 and 21 cases respectively and there were 14 visits in connection with these. Further, during this year 668 visits were paid by the Health Visitor to the homes of cases of primary pneumonia (376) and influenzal pneumonia (67).

Examination and Certification of Blind Persons.

The examination of persons claiming to be blind is effected through the medium of the regional clinics in Edinburgh and Dundee. Where a case, from infirmity or other cause, cannot be brought to one of the two clinics, arrangements are made for such cases to be examined by one of the Ophthalmologists (Dr. Allister MacGillivray, East Fife and Dr. Sampson, West Fife) at the person's home.

During the past year the total number of cases examined was 84. Forty-five were examined at the Edinburgh Regional Clinic, nine at the Dundee Clinic and thirty were examined at their own homes. The distribution of the cases as between the County and the two large burghs was as follows :—

County	59
Kirkcaldy Burgh	17
Dunfermline Burgh	8

The total number of 84 cases included 20 re-examinations. Of these 84 cases 50 (County 34, Kirkcaldy 10, Dunfermline 6) were certified as "Blind"; and 34 as "Not Blind" (County 25, Kirkcaldy 7, Dunfermline 2).

Treatment was recommended in 33 cases. Of those certified blind, six were advised to have medical treatment and nine were recommended to have surgical treatment (mainly for cataract). In those certified "Not Blind," five were recommended to have medical, six surgical and seven optical treatment. In two cases the advice to stop smoking was given.

Four cases (one blind and three not blind) were referred for the Wassermann Test. In three cases the result was negative and one was found to be positive.

When an analysis of the cases is made, it is found that in the 84 cases, the primary ocular disease was cataract (20), myopia (19), corneal ulcers (5), injury (4), retinitis pigmentosa (4), glaucoma (3), and miscellaneous (29). As complications and sequelae we find cataract (17) as outstanding, and choroido-retinal conditions (15) come next. The large number of cases with cataract (44 per cent.) either as primary condition or as a complication is, of course, due to the large number of persons over sixty who are eligible for certification as blind persons.

Sanitary Inspection Districts.

The Annual Report in respect of each sanitary inspection district has been submitted for the information of the local public health sub-committee and to the Department of Health for Scotland. The following are brief excerpts from the reports of the Sanitary Inspectors.

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

DRAINAGE AND SEWAGE DISPOSAL.—There are ten Special Drainage Districts in the Area, namely:—Aberdour, Blairhall, Charlestown Crossford, Crossgates, Kincardine, Limekilns, North Queensferry Saline, and Valleyfield and Torryburn. The inspection of the sewer in each District is carried out by resident District Officers under my supervision. Weekly reports on the condition of the sewers are submitted to me by the District Officers and defects are speedily dealt with.

At Aberdour, one of the outfall sewers was in danger of being damaged owing to the action of the sea in washing away some of the supports. New concrete piers were built under the sewer, thus making it secure. At North Queensferry also, the action of the sea caused damage to an outfall sewer, resulting in crude sewage being discharged on to the foreshore. This piping is encased in massive concrete, and the sea had washed away the concrete in places and damaged the jointing of the pipe. The jointing was renewed, and the concrete patched up where necessary.

Extensions to sewers were made at North Queensferry and Halbeath in order to provide drainage facilities to new housing schemes at these villages.

The effluent from every District, except Saline, is discharged into the River Forth or Forth Estuary. At Saline, there is a modern disposal plant which permits of a clear and innocuous effluent being discharged into the Black Devon burn.

Villages still without adequate sewage disposal systems are:—Wellwood, Cairneyhill, Hillend, Carnock, Gowkhall, Fordell, Parkneul Milesmark and St. Davids.

There are now prospects of a drainage system being provided at Wellwood in the near future, but in the case of the other villages mentioned, the extremely high drainage rate which would result from the provision of sewage systems, will debar these places from enjoying such facilities, unless a different system of rating is brought into being.

SCAVENGING.—There are ten Special Scavenging Districts in Dunfermline Area, namely:—Aberdour, Crossford, Crossgates, Halbeath, Kincardine, Limekilns and Charlestown, North Queensferry, Saline

Valleyfield and Torryburn, and Milesmark and Parkneuk, the last-mentioned District being formed during the year.

At Crossford, Halbeath and Saline, a twice-weekly system of refuse collection is in operation, and at Milesmark and Parkneuk, collection is carried out thrice weekly. In all other Districts, a daily service is in operation.

The work in all Districts is carried out by Contractors, and the method of disposal adopted in every case is that of controlled tipping.

New ash carts were provided during the year at Crossgates and Valleyfield, and a new body was provided to one of the carts at Aberlour.

A new Public Convenience for both sexes, and a Public Shelter were completed at Kincardine during the year. Public Conveniences are now provided at Aberdour, Charlestown, Crossgates, Kincardine, Limekilns, Torryburn, Valleyfield and North Queensferry. These are kept clean by the Scavenging Contractor. I would again call attention to the unnecessary expense incurred in repairing damage caused maliciously to these premises by certain sections of the communities. Attempts to open the locks, obviously with intent to steal the money inside, continue to be made from time to time, and in one case, the whole lock was removed and was never recovered. The miscreants are singularly difficult to catch, and in no instance have the culprits been found.

SANITARY CONVENIENCES.—In the villages of Wellwood, Donibristle, Fordell, Parkneuk, Gowkhall, Carnock, Cairneyhill, Hillend and St. Davids, sewage systems are not available, and pail privies or patent earth closets are in general use. At Donibristle, most of the houses are unfit, and will, in time, be demolished, and at Gowkhall, to a somewhat lesser extent, similar conditions prevail. At Wellwood, the provision of the long expected drainage system will permit of the abolition of all the privy middens there.

In the course of the year under review, modern sanitary conveniences were introduced into many houses hitherto without these, much of this work being carried out in conjunction with other improvements under the Housing (Rural Workers) Acts.

MISCELLANEOUS—Nuisances.—Twenty-five complaints were received during 1938 as compared with four for the previous year.

Intimations served in terms of Section 19 of the Act totalled 57, as compared with 41 last year, and in all cases these were successful in effecting abatement of the Nuisances.

Four Notices, in terms of Section 40 of the Public Health Act, were served on the occupiers of dwellinghouses which were found to be in a dirty condition.

HOUSING.—The following housing schemes were completed, and all the houses occupied during the year under review :—

Blairhall	..	..	..	44 houses.
Comrie	..	..	..	40 „
Parkneuk	..	..	..	36 „

At High Valleyfield, a scheme consisting of 68 houses had progressed sufficiently by the end of the year to permit of 42 being occupied. At North Queensferry, 20 out of a scheme of 28 houses were occupied by the end of the year, and at Halbeath, a scheme consisting of 48 houses was commenced towards the end of 1938.

FOOD SUPPLY—Milk.—There were, at the end of the year, 73 Registered Dairy Premises stalled to accommodate 1,923 cows.

Efforts are directed towards paying at least two visits of inspection per year to each farm, but in one or two cases more frequent visits are necessary. A total of 147 inspections were made.

Generally speaking, all registered premises conform to the requirements of the Council's Dairy Byelaws, and except in one or two notable instances, a fairly satisfactory standard of cleanliness is maintained. One must admit, however, that in quite a number of cases, the methods of production leave much to be desired. It will, no doubt, be understood that the Sanitary Inspector's influence in this matter is more or less limited to the instruction of those concerned. He cannot possibly be at every farm at the times of milking, and the rigorous enforcement of scrupulous methods is not possible, unless wholehearted co-operation on the part of the producer is available. It is not desired to elaborate on this point, but one is constrained to remark that much in the way of instruction and enlightenment is yet required, in order to convince certain producers and their employees, of the necessity for scrupulous care in every little detail.

At nine dairy farms, mechanical milking machines were installed, and at certain other farms, improvements to lighting, water supply, etc., were obtained.

There are five farms in the Area where milk is produced and sold in such small quantities as to render the premises exempt from the provisions of the Milk and Dairies Act, and the Dairy Byelaws. All five premises were inspected during the year. The number of cows kept in each is usually two or three.

BEATH AREA—C. A. Alexander, Sanitary Inspector.

DRAINAGE.—KELTY SPECIAL DRAINAGE DISTRICT.—This district covers the whole of Kelty. Adequate sewers are in existence, which drain towards the North-East corner of the district where Sewage Purification Works are situated. The sewer system is satisfactory, but the purification works are very badly damaged through subsidence. The sedimentation tanks are badly rented and the rotary sprinklers

are almost useless. The outfall sewer to the river is out of level and altogether matters are far from satisfactory. An attempt is made to retain most of the solids in the sewage, but it must be confessed that the effluent discharge into the river is causing grave pollution. The tanks are meantime being cleared out and some repairs will be carried out on the works costing about £200, and it is hoped that in consequence, some improvement in the effluent will be obtained.

SANITARY CONVENIENCES—KELTY.—No dry closets are in use in Kelty, and only a few common closets serving two or more families are in existence. These are being gradually reduced as property is improved. No house exists which has no water closet, and there are only one or two houses without indoor water supply or sink. These are in course of being considered.

HILL-OF-BEATH.—Every house in Hill-of-Beath has a separate water closet and no houses exist which have not a water supply and sink.

LASSODIE.—As mentioned in previous reports the village is in course of being evacuated.

LANDWARD.—Many cottar houses have been improved but there are still a few without water closets, water and sinks. These are either being closed or improved in the near future.

FOOD SUPPLY.—Inspection was made to dairies as other duties permitted, and it was found that there still exists a certain amount of careless methods in the production of milk.

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

DRAINAGE AND SEWAGE PURIFICATION.—There are four Special Drainage Districts, viz. :—Auchterderran, Lochore and Glencraig, Lumphinnans, and Kinglassie, and these districts contain the bulk of the population.

Outwith the Special Districts two groups of houses have water closets, the sewage being dealt with in septic tanks before being discharged into the adjoining streams. At the other groups of houses privy closets are still in use and the waste and rain water goes into field drains. Properly constructed septic tanks are constructed at all houses where water closets are provided.

AUCHTERDERRAN SPECIAL DRAINAGE DISTRICT.—This district has purification works and an extensive system of sewers, and owing to settlement from underground workings require a considerable amount of attention.

As mentioned in previous reports the County Engineer reported that considerable additions and improvements were required at the Purification Works to cope with the great increase of sewage owing to the additional houses which have been built in the district and by the

provision of baths, etc., to existing houses. Nothing, however, has yet been done.

In June I reported on the condition of certain sewers which had been affected by subsidence, and the County Engineer was instructed to report on same. Levels were taken at the parts in question but the report has not yet come to hand.

I had hoped that this district would be linked up with the River Leven Purification Scheme but this, I am afraid, is not intended.

LOCHORE AND GLENCRAIG SPECIAL DRAINAGE DISTRICT.—This district is provided with an efficient system of sewers but no purification works. The sewage after passing through open troughs goes into the Fitty Burn.

I reported that the main sewer where it crosses the River Ore was reduced in size and that, with the large number of new houses which drain into the sewer above this point, the storm overflow was in almost constant use. The County Engineer was instructed to report on the matter.

LUMPHINNANS SPECIAL DRAINAGE DISTRICT.—The main collecting sewer joins the outfall sewer at the north-east corner of the district. This outfall sewer extends a considerable distance and joins the Lochgelly Burgh Sewer.

As mentioned in previous reports a large portion of the outfall sewer had to be re-laid owing to subsidence. The system is at present working satisfactorily.

KINGLASSIE SPECIAL DRAINAGE DISTRICT.—This is still a drainage district without a proper system of drainage.

Certain sewers have been constructed in connection with the Housing Schemes and these discharge into septic tanks the outfall from which goes into the Lochty Burn. A new sewer connected to Housing Scheme sewers was laid at the Housing Scheme to serve some of the houses on the south side of the Main Street. Three connections to this sewer have since been made.

The sewage from private houses, which have sinks and water closets also ultimately finds its way into the burn after passing through septic tanks.

A number of houses have been provided with modern facilities recently and I believe still more would be done if proper means of drainage could be offered and the extra expense of building septic tanks avoided because where these are provided it is sometimes difficult to get a suitable outfall for the effluent.

SCAVENGING.—The Special Scavenging Districts are similar in name and area to the Drainage Districts and as already said contain most of the population. These are also Special Lighting Districts under the supervision of this Office.

The work in all the Districts has been and is still being increased by the erection of new houses and the formation of new streets.

The Districts are at present fairly well provided for in the way of refuse coups within a reasonable distance and at these controlled tipping is employed as far as possible.

Outwith the Special Districts ashpits are in use and these appear to be emptied at fairly regular intervals.

SANITARY CONVENIENCES.—As previously stated practically all the houses in the Special Drainage Districts with the exception of Kinglassie are each provided with a water closet and in only very few cases does one closet serve two houses.

In Kinglassie there are still a few pail closets in use but these are gradually being replaced by water closets and if a proper system of sewers were laid I do not think it would be long before every house had a water closet.

Where houses are being reconstructed either under the Housing (Rural Workers) Acts or otherwise all conveniences are provided and in addition eight houses throughout the district were provided with bathrooms during the year.

RIVERS POLLUTION.—The main pollution of the River Ore is sewage from the Special Districts and the Burgh of Lochgelly.

All collieries were inspected with regard to the disposal of the effluent from coal washing plant and waggon drip water. I reported that at three collieries there was evidence that some effluent was escaping from the settlement ponds. On the Coal Companies being notified steps were taken to have the matters remedied.

SCHOOLS.—There are ten schools all situated within the Special Districts. They are all well kept and during recent years the lavatory accommodation has been improved by the introduction of modern closets. At Lumphinnans School the boys' latrine was reconstructed and modern closets provided.

BURIALS.—Two burials were undertaken in terms of Section 69 of the Public Health (Scotland) Act, 1897, during the year—both were adults—in one case the body was unclaimed. The cost of burial amounted to £11 17s 6d.

HOUSING.—The Housing Schemes at Kinglassie, Lochore and Crosshill were practically completed by the end of the year as was also a part of the Dundonald Scheme.

The following new houses were occupied during the year :—

	3 apts.	4 apts.	5 apts.	Total.
Kinglassie	—	36	8	44
Crosshill	24	40	4	68
Lochore	24	36	4	64
Dundonald	13	26	—	39
Totals	61	138	16	215

Even with all the above new houses occupied there is still a great demand for houses especially at Lochore, Glencraig, Cardenden, and Lumphinnans, and as it has not yet been possible, either by new houses or decanting, to eliminate the sub-tenant the new married couple have still the same difficulty in getting a house of their own.

A scheme of 80 houses at North Glencraig was nearing completion at the end of the year but none of the houses were occupied and the erection of 40 timber houses at Lumphinnans had not been commenced.

Demolition Orders were made in respect of eleven houses. Thirty-two condemned houses were vacated but at the end of the year there were still thirty-nine occupied. Thirty-four families who removed from condemned houses were re-housed as follows:—In new county houses—21, in other county houses—3, and in privately-owned houses—10.

FOOD SUPPLY—MILK.—There are 38 registered dairymen, and 12 persons registered as Purveyors of Milk. Of the 38 producers 22 sell their milk wholesale. The number of cows at last inspection was 935.

One new dairy was added during the year. Plans were submitted and approved for the reconstruction at this farm of two buildings to give accommodation for a total of 42 cows. A new milk-house and dairy washhouse was also erected.

At another dairy farm the byres and steading were reconstructed. Two new byres fitted with all modern equipment and with accommodation for 64 cows were provided and a new milk house and dairy washhouse erected complete with bottling and washing plant. The existing herd was disposed of and a new herd of tuberculin tested cows installed.

WEMYSS AREA—Alex. M. Gough, Sanitary Inspector.

WATER SUPPLIES—KENNOWAY PARISH.—The village of Kennoway is supplied direct from the County's Glenfarg Main.

Bonnybank and Baintown which are over 100 feet higher than Kennoway are supplied by means of a water ram situated at Kennoway Burn which forces water from the Main to two service storage tanks near Balgriebank Farm. The supply during the year was satisfactory.

The storage tanks referred to consist of two old boilers set above ground level on brick piers. I suggest that a much more satisfactory method would have been to construct a concrete tank underground since the ground in the immediate vicinity is entirely in favour of such a scheme and the exclusion of daylight and the sun rays is the modern principle of water storage.

DRAINAGE SYSTEM.—There are seven Special Drainage Districts in Wemyss Area, viz. :—Boreland, West Wemyss, Coaltown of Wemyss, East Wemyss, Rosie, Methilhill and Kennoway. Each of these Districts has a complete drainage system and no trouble was experienced during

the year with the exception of flooding at New Road, Kennoway, during periods of excessive rainfall. Investigations proved that this section of the sewer had insufficient fall to carry off the storm water, with the result that the pipe became overloaded and discharged through the house drains of a low-lying property. A storm water overflow discharging into the Den Burn is to be provided on this section of the sewer and should prevent further flooding.

SEWAGE PURIFICATION AND DISPOSAL.—There are no purification or disposal works within the Area. The sewage from Boreland, West Wemyss, Coaltown of Wemyss, East Wemyss and Rosie discharge directly into the Forth, the outfalls, with the exception of two at East Wemyss, being at low water mark. These two pipes will require to be extended to prevent accumulations of sewage at the points of discharge during low water.

The Kennoway and Methilhill sewers discharge directly into the River Leven and add to the pollution of this river. It is hoped that the County Council will soon be in a position to carry out their proposals to provide a main sewer along the course of the river and discharging into the Forth well beyond low water mark at a point between Methil and Leven. The sewers from the populous districts which already discharge into the river would be connected to this main outfall.

SCAVENGING—WEST WEMYSS, COALTOWN OF WEMYSS, EAST WEMYSS, ROSIE AND METHILHILL.—The refuse from these districts is collected by Motor Lorry and conveyed to a Depot at Earlseat where a methodical reclamation and levelling of ground is being effected. Daily blinding of the fresh deposits of refuse is strictly enforced and the tip faces are kept at a maximum height of five feet. Strict attention is paid to the destruction of rats.

Numerous complaints were received regarding the heaps of street sweepings in the various villages and my recommendation to introduce the Bin Type Street Orderly Barrows with spare bins will, when carried, obviate any further complaints of this nature.

RIVERS POLLUTION—RIVER LEVEN.—The River Leven is still grossly polluted but as indicated in the reference to the sewage disposal from Kennoway and Methilhill it is hoped that the County Council will soon be in a position to carry out their proposals to provide a main outfall sewer along the course of the river and this is in conjunction with the elimination of trades waste should go a long way in restoring the River Leven to its natural state.

DEN BURN.—The Den Burn at East Wemyss was fouled on one occasion during the year with unsettled coal washing effluent from Wellsgreen Colliery. The matter was brought to the attention of the Management and the complaint was soon remedied by cleaning out the tanks in which the effluent from the coal washer is allowed to settle before being discharged into the stream.

OFFENSIVE TRADES.—The only trades under this heading are the Private Slaughterhouse at East Wemyss owned by the East Wemyss Co-operative Society and the Oil Mills at Leven belonging to Messrs. John Balfour & Company, where Manures and Feeding Stuffs are prepared. The Slaughterhouse at East Wemyss is in an unsatisfactory condition besides being out of date and unsuited for the work and the County Council are to be advised not to renew the licence. The premises at Leven are kept in a satisfactory manner and no complaint has been received regarding the work carried out there.

HOUSING—WEST WEMYSS.—Many of the houses in this village are in a poor state of repair and subsequent to visits of inspection 44 houses were dealt with under Section 16 of the Housing (Scotland) Act, 1930, while 4 were scheduled for Repair under Section 14 of the Act.

A considerable number of houses have been re-conditioned with assistance under the Housing (Rural Workers) Acts and 20 families were transferred to the County Houses at Rosie to enable the Wemyss Coal Company to proceed with a further programme of reconstruction. It is improbable that all families, especially those which require 4 apartment and 5 apartment houses, can be re-housed in the re-conditioned properties and provision will require to be made for such families.

COALTOWN OF WEMYSS.—Fifteen families were transferred from this village to the County Houses at Rosie to enable the Wemyss Coal Company, who own 90 per cent. of the property in the village, to speed up their reconstruction programme which, when completed, will make Coaltown of Wemyss a modern mining village. A number of four apartment and five apartment houses will also be required here since the property owners' proposals will not provide a sufficient number of houses of this size.

EAST WEMYSS.—Forty-eight of the houses in the new County Scheme comprising 112 houses which were completed at Rosie during the year were allocated to families from condemned properties or overcrowded families from East Wemyss. This allocation along with the reconstruction of existing houses did a great deal towards meeting the housing requirements of the village but a number of four apartment and five apartment houses are still required.

ROSIE.—A number of three apartment and four apartment houses are still required to relieve overcrowding here although the worst cases were re-housed in the twenty-nine houses at the new scheme which were allocated to families from Rosie.

METHILHILL.—A scheme comprising 108 houses is in progress at Ashgrove, Methilhill and these new houses should, if 100 per cent. decanting in existing property is attained, solve the overcrowding in the village and accommodate a number of overcrowded families and families living in condemned houses in the adjoining Rural District.

KENNOWAY.—This District is comparatively well served in housing accommodation and the few families requiring new houses will be housed as vacancies occur in the 79 houses owned by the County Council here. Provision is to be made at Methilhill for two of the larger families who require five apartment houses.

In addition to the houses of 3, 4 and 5 apartments which are still required to abate overcrowding in the Area a number of two apartment houses should be provided to meet the needs of old people ; married persons living with relatives in sub-lets or in lodgings ; persons desirous of getting married for whom accommodation is not likely to be available ; families of not more than three Adults living in condemned houses.

HOUSING (RURAL WORKERS) ACTS, 1926-38.—Great advantage is being taken of the scheme of financial assistance towards the reconditioning of houses under the above Acts, 112 houses being completed during the year while many more are in progress. A high standard of work is insisted upon for schemes of this nature the average actual cost per house being about £300.

HOUSING (AGRICULTURAL POPULATION) (SCOTLAND) ACT, 1938.—A scheme of financial assistance under the above Act in aid of the provision of new housing accommodation in replacement of unsatisfactory houses or other premises occupied by members of the agricultural population was introduced on the 17th November, but possibly owing to the date of its introduction no applications under the scheme had been received before the end of the year.

Many of the condemned houses in the villages are being left standing derelict and are becoming an eyesore to the public and a source of annoyance to adjoining proprietors. These houses are mostly in such a poor state of repair that it would not be economic, even with assistance under the Housing (Rural Workers) Acts scheme to recondition them and greater pressure will require to be brought to bear on the owners to have them demolished.

I suggest, that if the Housing (Agricultural Population) (Scotland) Act, 1938, scheme were extended to include such properties, many proprietors would take advantage of it, demolishing the condemned houses and building new houses in their place, especially where the sites fronted the Main Streets.

FOOD STUFFS—MILK.—Inspections were made at regular intervals of registered Dairies and exempted premises. The conditions were generally found to give every satisfaction. The reconstruction of the premises at Burnside of Letham Dairy were completed during the year and minor improvements with regard to ventilation, lighting and drainage were effected at Lochhead, Wellsgreen, Auchtermairnie and Kirklandhill Dairies.

KIRKCALDY AREA—Ian L. Goodfellow, Sanitary Inspector.

DRAINAGE SYSTEMS—THORNTON.—The drainage system here is far from satisfactory. The Purification Works are really not capable of dealing with the heavy load put upon them. The pumping engine worked satisfactorily and got us out of difficulties but, with the increase in the number of houses in the village, plus the new sanitary fittings being installed, I am afraid we may have difficulty in the future. We must hope, however, to be able to carry on until the long awaited day arrives when the new county sewer passes the village and the works cease to exist. Great credit is due to Mr. Cameron, the Drainage Officer, for the most satisfactory way he has carried out his duties. The works not only need attention by day but, when there is a heavy rain storm, by night too. The year we are now in will see the retirement of this official and I therefore take this opportunity to record my personal appreciation of all he has done for Thornton Drainage.

I trust that before very long we will see a start to this County sewer but if this is not to be, then the whole Thornton system will have to be fully gone into and remedies sought.

MILTON OF BALGONIE.—The drainage from properties here passes on mainly to cesspools ; some have proper outlets while others, unfortunately, have not. One householder experienced great difficulty in getting rid of the cesspool effluent. The County Engineer was called in but until the proper sewers are laid, I am afraid the trouble will not be remedied. The Engineer had the village surveyed and levelled during the year and the sewers all planned. Tanks will, of course, be necessary until the long awaited County Sewer comes this way.

WINDYGATES AND BALCURVIE.—The sewage system here is unsatisfactory and cannot really be put right until the new sewer is installed. Effluent is discharged into the river and nuisance is unavoidable. This is a large village both of privately owned and County Council houses. The Local Authority are well aware of conditions here but it would be a waste of public money to execute works which would be of no use when the new sewer is installed.

SEWAGE PURIFICATIONS AND DISPOSALS.—The effluents from the works or tanks in these seven Special Drainage Districts pass on, in the case of the first five, to the River Leven or its branches. The Auchtertool tanks are not yet in action, and the effluent from the tank on the Little Raith scheme is piped down and discharges into a burn. All these outfalls are kept under supervision.

It is obvious that satisfactory means of drainage for the greater part of my area depends upon the installation of the proposed County Sewer, but until it is installed, we will have to carefully look after our existing schemes and make the most of them.

CAMPING.—The coastal area between Kinghorn and Burntisland was again used for camping and was frequently visited.

The huts on the site at the Sandhills are used practically every week-end from the Spring to the Autumn holidays, as well as during the holidays of Trades Weeks. At this latter time the camp was filled almost beyond its capacity and anything from 100 to 150 tents were pitched on ground adjoining the public highway. The Company which runs the camp did their best to keep the site clean, and tidied up the litter spread about. Additional privy accommodation was provided during the year and this helped somewhat to improve conditions.

The site at Greenmount was also used by a large number of people although they had no authority to camp there. The matter was taken up with the Owners who agreed to close up the entrance gate. This has been done and Greenmount, I am pleased to say, is no longer used as a camping site.

The sooner we have bylaws which will cover this subject the better, and then, and only then, will we see camping sites properly controlled.

ST. ANDREWS AREA—R. Just, Sanitary Inspector.

SCHOOLS.—There are ten schools in the area which are all of good construction. These premises are under the charge of the Education Authority's officials, and as a result of the attention given to them no complaints were received.

Within the year water closets and urinal were substituted for the former dry closets at Kingsbarns School. The necessary drainage work was carried out a few years ago but the introduction of W.C's was delayed until a suitable supply of water was obtainable.

MILK AND DAIRIES.—On the whole, the structural conditions of the dairies in the District are of a fairly high standard and the premises comply with the Regulations with few exceptions. The persons engaged in the work are the principal factors in the production of clean milk, and it is pleasing to note that the methods employed at the dairies continue to improve.

There are, in the District, two dairymen with licenses to produce Certified Milk and three dairymen with licenses to produce Standard Milk.

MILK AND DAIRIES ACT.—Alterations effected on dairy premises during the year included an additional byre at Cairnsmill and improvements to byres at Scooniehill Farm.

ANSTRUTHER AREA—W. Falconer, Sanitary Inspector.

DRAINAGE AND SEWAGE DISPOSAL.—There are three Special Drainage Districts in the Area, namely:—Colinsburgh, Upper Largo and Lower Largo.

The effluent from Upper and Lower Largo is discharged into the Forth Estuary without previous treatment. As mentioned in last

year's report, pollution of part of the foreshore at Lower Largo was being caused by effluent from one of the outfall sewers. A proposal to have this outfall extended is now receiving consideration.

No alterations were carried out to the system at Colinsburgh where the effluent is discharged into a stream.

In last year's report, mention was made regarding nuisance caused by effluent from an outfall sewer from Lundin Links where the system is privately owned. It has been suggested that this system should be taken over by the County Council who would require to carry out any necessary improvements. This proposal is receiving consideration.

SCAVENGING.—It will be appreciated that the public themselves can do much to lessen the work of the scavengers. Much of the material put out for removal could be disposed of in the gardens or burned, and if this were done, the cost of scavenging in the District might be appreciably reduced. The public do not appear to realise this, and while grumbles may be, and are, heard regarding increasing taxation, no effort is made to reduce the work which the Local Authority is expected to carry out.

SANITARY CONVENIENCES.—Pail privies are in general use in villages in this Area where modern sewage systems are not available. Many of the houses in these villages are rapidly reaching the stage when the County Council will require to take action under the Housing (Scotland) Act, 1930, and serve Demolition Orders in respect of these houses.

Due to the inadequacy of the water supply in certain areas in the District, it is not feasible to call for the introduction of water closets into houses, which are structurally in good condition.

RIVERS POLLUTION.—No complaints were received during the year regarding the pollution of streams. The sewage from Colinsburgh village is discharged into a small stream without previous treatment. While no complaints were received, the question of providing some form of purification works for this village should be kept in mind especially after the Housing Scheme is completed and occupied.

HOUSING—OVERCROWDING.—As mentioned in previous reports, the overcrowding problem in this Area is not acute.

Towards the end of the year a commencement was made with the erection of 22 houses at Lower Largo and 20 houses at Colinsburgh. These schemes, when completed, will practically eliminate overcrowding in these districts. The provision of houses at Upper Largo and Largoward is still under consideration.

FOOD SUPPLY—MILK.—In this Area there are 75 registered Dairies with accommodation for approximately 1,110 cows.

During the year improvements were carried out to several dairies in the District. In most instances, these were occasioned by the dairymen desiring to produce a Special Designated Milk and

being required to instal a steriliser, steam chest, etc., also to carry out any necessary improvements to the premises before the desired certificates could be issued.

There are still several farms where the premises do not conform to the Dairy Byelaws. These are gradually being improved and in every case where the premises change hands, any improvements required must be carried out before registration is granted.

CUPAR AREA—George Mark, Sanitary Inspector.

WATER SUPPLY.—Special Water Supply Districts include the following villages :—Pitlessie, Strathmiglo, Balmbrae, Falkland, Newton of Falkland, Kettlebridge, Kingskettle, Balmalcolm, Dunshelt, Springfield, Cupar Muir and Ceres. Each village has good schemes of supply except Springfield, Cupar Muir and Ceres, where as yet no specific scheme of water supply has been decided upon. There is, however, the possibility of a Regional Scheme embracing not only these three villages but others.

SPECIAL DRAINAGE DISTRICT.—At present there are six Special Drainage Districts in Cupar Area, viz. :—Freuchie, Strathmiglo, Kingskettle, Springfield, Newton of Falkland and Balmbrae. Only at two villages, however, is there a complete system of sewers and sewage purification works—Freuchie and Strathmiglo.

Kingskettle District was formed some years ago, but as yet there is no proper system of sewers.

In Newton of Falkland conditions are similar to those in Kingskettle.

Springfield Special Drainage District was similarly formed some years ago, but owing to the absence of a gravitation water supply a proper system of sewers has not been proceeded with.

In Dunshelt owing to the increase in the number of houses which have had modern sanitary appliances installed and the continued progress in this respect it is now evident that a proper system of sewers and sewage disposal works is necessary. The only means of sewage disposal available meantime is by combined septic tank and irrigation. Fortunately, the sub-soil is of a sandy nature.

Drainage facilities of other villages and populous places remain unchanged.

The number of premises dealt with in connection with the renovation or improvement of drainage systems involved the application of the smoke test on 113 occasions and defects connected with the drainage of 69 houses have been remedied.

SCAVENGING AND NUISANCES.—There are ten Special Scavenging Districts, viz. :—Strathmiglo, Springfield, Freuchie, Newton of Falkland, Kingskettle, Balmbrae, Pitlessie, Gauldry, Ceres and Den of Lindores.

A systematic collection of refuse is made at all these villages with the exception of Den of Lindores where it was found that owing to the low rateable value of this area the resultant rate was prohibitive.

Systematic inspections were also carried out for the removal or abatement of nuisances. In this respect 321 nuisances were dealt with during the year. These consisted of defective and choked drains, defective water supplies, foul ditches, accumulations of manure, defective ashpits and privies, etc. In all cases either verbal warning or written notice under Section 19 of the Public Health Act had the desired result. In no instance was it found necessary to resort to legal proceedings.

DAIRIES, COWSHEDS AND MILK SHOPS.—At the beginning of the year there were 63 registered milk sellers on the register, 53 of which are cowkeepers in the County Area and 10 in the Burghs.

Improvements continue to be made on dairy premises but there is still a fair percentage which do not comply in all respects with the Dairy Byelaws.

Sale of Food and Drugs Acts.

Five hundred and four samples were collected during 1938 by the County Sampling Officers, under my direction as Chief Sampling Officer, and analysed by the County Analyst. Of these, four hundred and forty-nine were official and fifty-five were test samples.

On analysis, twenty-five official samples were found not to be of the nature and substance of the article demanded. The nature and number of the adulterated official samples were :—Sweet Milk, 15 ; Mince, 8 ; sausages, 2.

Of the vendors of the twenty-five adulterated official samples, fourteen were fined in sums ranging from £1 to £3, involving in all a sum of £23. In three cases the charges were withdrawn. No proceedings were taken in three cases. One vendor was found not guilty and in four cases warnings were given.

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	51	4	2	—	53
Burghs in Cupar Area	46	1	2	—	48
Anstruther Area ..	10	—	—	—	10
Burghs in Anstruther Area	27	2	—	—	27
St. Andrews Area ..	—	—	17	—	17
Burghs in St. Andrews Area	71	2	30	—	101
Kirkcaldy Area	—	—	—	—	—
Burghs in Kirkcaldy Area	38	2	—	—	38
Wemyss Area	10	—	—	—	10
Burghs in Wemyss Area	32	5	—	—	32
Lochgelly Area	52	5	2	—	54
Lochgelly Burgh	29	1	—	—	29
Dunfermline Area	61	3	—	—	61
Burghs in Dunfermline Area	16	—	2	—	18
Howdenbeath Area	—	—	—	—	—
Howdenbeath Burgh	6	—	—	—	6
Total	449	25	55	—	504

Tables of Samples and Results of their Analyses.

CUPAR AREA.

LANDWARD.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	26	2	28	Sweet Milk ..	2	—	2
Beer ..	1	—	1				
Butter ..	1	—	1				
Cocoa ..	1	—	1				
Lemon Curd ..	1	—	1				
Margarine ..	2	—	2				
Mince ..	2	2	4				
Oil, Castor ..	1	—	1				
Orange Drinks ..	2	—	2				
Pepper, White ..	1	—	1				
Raisins, Muscatel	1	—	1				
Rennet ..	1	—	1				
Sausages ..	4	—	4				
Sweets ..	2	—	2				
Whisky ..	1	—	1				
Total ..	47	4	51	Total ..	2	—	2

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

Fat	Non-Fatty
per cent.	Solids per cent.
2.88	8.76
2.71	8.77

AUCHTERMUCHTY BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	2	1	3	Sweet Milk ..	1	—	1
Mince ..	2	—	2				
Oatmeal ..	1	—	1				
Peel, Musted ..	1	—	1				
Rice, Ground ..	1	—	1				
Sausages ..	3	—	3				
Spirits, Diluted ..	1	—	1				
Sugar ..	1	—	1				
Tapioca ..	1	—	1				
Tea ..	1	—	1				
Total ..	14	1	15	Total ..	1	—	1

The above-noted adulterated sample of Sweet Milk contained 2.85 per cent. of Fat and 8.71 per cent. of Non-Fatty Solids.

CUPAR BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	11	—	11	Butter ..	1	—	1
Milk, Skimmed ..	2	—	2				
Lince ..	1	—	1				
Sausages ..	2	—	2				
Total ..	16	—	16	Total ..	1	—	1

FALKLAND BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	4	—	4				
Milk, Skimmed ..	1	—	1	Nil.			
Lince ..	1	—	1				
Sausages ..	1	—	1				
Total ..	7	—	7				

LADYBANK BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	2	—	2	Nil.			
Total ..	2	—	2				

NEWBURGH BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Jelly, Apple ..	1	—	1	Nil.			
Margarine ..	1	—	1				
Minced meat ..	1	—	1				
Tea ..	1	—	1				
Whisky ..	2	—	2				
Total ..	6	—	6				

ANSTRUTHER AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	3	—	3
Creamola ..	1	—	1
Custard Powder	1	—	1
Pudding, Eiffel Tower ..	1	—	1
Rice ..	1	—	1
Sugar Icing ..	1	—	1
Tea ..	2	—	2
Total ..	10	—	10

TEST.
Gen. Adult. Total
Nil.

ANSTRUTHER-KILRENNY BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	6	—	6
Grapenuts ..	1	—	1
Powder, Baking	1	—	1
Sausages ..	3	—	3
Sugar ..	1	—	1
Tea ..	1	—	1
Total ..	13	—	13

TEST.
Gen. Adult. Total
Nil.

CRAIL BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	4	—	4
Farola ..	1	—	1
Rice, Whole ..	1	—	1
Sugar, Icing ..	1	—	1
Tea ..	1	—	1
Total ..	8	—	8

TEST.
Gen. Adult. Total
Nil.

ELIE AND EARLSFERRY BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	1	—	1
Total ..	1	—	1

TEST.
Gen. Adult. Total
Nil.

PITTENWEEM BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	3	1	4
Total ..	3	1	4

The above-noted adulterated sample of Sweet Milk contained 2.43 per cent. of Fat and 8.55 per cent. of Non-Fatty Solids.

ST. MONANCE BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	—	1	1
Total ..	—	1	1

The above-noted adulterated sample of Sweet Milk contained 2.85 per cent. of Fat and 7.98 per cent. of Non-Fatty Solids.

TEST.		
Gen.	Adult.	Total.
Nil.	—	—

TEST.		
Gen.	Adult.	Total.
Nil.	—	—

ST. ANDREWS AREA.

LANDWARD.

OFFICIAL.
Gen. Adult. Total.
Nil.

TEST.
Gen. Adult. Total.

Cornflour	1	—	1
Creamola	1	—	1
Flour	1	—	1
Ketchup, Tomato	1	—	1
Mustard	1	—	1
Oatmeal	1	—	1
Peas, Green	2	—	2
Pepper	1	—	1
Pudding, Milk	1	—	1
Rice, Ground	1	—	1
Rice, Whole	2	—	2
Semolina	1	—	1
Spice, Mixed	1	—	1
Syrup	1	—	1
Tea	1	—	1
Total	17	—	17

NEWPORT BURGH.

OFFICIAL.
Gen. Adult. Total.

TEST.
Gen. Adult. Total.

Sweet Milk	9	—	9
Barley, Pot	1	—	1
Farola	1	—	1
Rice, Whole	1	—	1
Sugar	1	—	1
Tea	1	—	1
Total	14	—	14

Beans, Baked	1	—	1
Sauce, Tomato	1	—	1
Spaghetti	1	—	1
Syrup	1	—	1
Total	4	—	4

ELIE AND EARLSFERRY BURGH.

OFFICIAL.
Gen. Adult. Total.

TEST.
Gen. Adult. Total.

Sweet Milk	1	—	1
Total	1	—	1

Nil.	—	—	—
------	---	---	---

ST. ANDREWS BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	14	2	16	Butter ..	2	—	2
Cinnamon, Ground ..	1	—	1	Cocoa ..	2	—	2
Cocoa ..	1	—	1	Coffee ..	2	—	2
Cornflour ..	1	—	1	Custard ..	1	—	1
Flour ..	1	—	1	Flour, Cake ..	2	—	2
Mince ..	2	—	2	Flour, S.R. ..	2	—	2
Oatmeal ..	2	—	2	Jam, B. Currant ..	1	—	1
Pepper ..	1	—	1	Margarine ..	2	—	2
Rice, Ground ..	2	—	2	Mustard ..	1	—	1
Rice, Whole ..	2	—	2	Pepper ..	2	—	2
Sausages ..	2	—	2	Sauce, H.P. ..	1	—	1
Tea ..	1	—	1	Soup, Kidney ..	1	—	1
				Syrup ..	1	—	1
				Tea ..	2	—	2
				Trifle ..	1	—	1
Total ..	30	2	32	Total ..	23	—	23

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

Fat per cent.	Non-Fatty Solids per cent.
2.44	8.54
2.76	6.96

TAYPORT BURGH.

	OFFICIAL.				TEST.		
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	6	—	6	Butter ..	3	—	3
Flour ..	1	—	1				
Oatmeal ..	3	—	3				
Pepper ..	1	—	1				
Rice, Ground ..	4	—	4				
Rice, Whole ..	4	—	4				
Semolina ..	1	—	1				
Sugar ..	4	—	4				
Tea ..	1	—	1				
Total ..	25	—	25	Total ..	3	—	3

The above-noted adulterated samples of Sweet Milk contained 2.88 per cent. of Fat and 8.54 per cent. of Non-Fatty Solids.

KIRKCALDY AREA.

BURNTISLAND BURGH.

		OFFICIAL.		
		Gen.	Adult.	Total.
Sweet Milk	..	4	—	4
Ginger, Preserved		1	—	1
Mince ..	..	2	1	3
Pudding Mixture		1	—	1
Sausages	..	6	—	6
Tea ..	..	1	—	1
Vinegar Malt	..	1	—	1
Total	..	16	1	17

TEST.
Gen. Adult. Total.
Nil.

KINGHORN BURGH.

		OFFICIAL.		
		Gen.	Adult.	Total.
Sweet Milk	..	3	—	3
Mince ..	..	1	—	1
Sausages	..	4	—	4
Total	..	8	—	8

TEST.
Gen. Adult. Total
Nil.

LESLIE BURGH.

		OFFICIAL.		
		Gen.	Adult.	Total.
Sweet Milk	..	5	—	5
Total	..	5	—	5

TEST.
Gen. Adult. Total
Nil.

MARKINCH BURGH.

		OFFICIAL.		
		Gen.	Adult.	Total.
Sweet Milk	..	3	1	4
Mince ..	..	1	—	1
Sausages	..	3	—	3
Total	..	7	1	8

TEST.
Gen. Adult. Total
Nil.

The above-noted adulterated sample of Sweet Milk contained 2.86 per cent. of Fat and 8.54 per cent. of Non-Fatty Solids.

WEMYSS AREA.

LANDWARD.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	8	—	8
Sausages ..	2	—	2
Total ..	10	—	10

TEST.		
Gen.	Adult.	Total.
Nil.		

BUCKHAVEN BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	3	—	3
Mince ..	6	2	8
Sausages ..	7	1	8
Total ..	16	3	19

TEST.		
Gen.	Adult.	Total.
Nil.		

LEVEN BURGH.

	OFFICIAL.		
	Gen.	Adult.	Total.
Sweet Milk ..	8	—	8
Mince ..	2	2	4
Sausages ..	1	—	1
Total ..	11	2	13

TEST.		
Gen.	Adult.	Total.
Nil.		

LOCHGELLY AREA.

LANDWARD.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ..	30	4	34
Pasteurised Milk ..	1	—	1
Butter, Salt ..	3	—	3
Currants ..	2	—	2
Jam, B. Currant ..	1	—	1
Jam, Strawberry ..	1	—	1
Marmalade, Lime ..	1	—	1
Mince ..	1	1	2
Pepper, White ..	3	—	3
Soda, Baking ..	1	—	1
Tea ..	3	—	3
Total ..	47	5	52

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

	Fat per cent.	Non-Fatty Solids per cent.
2.60	8.78	
4.04	8.16	
2.60	8.91	
2.54	8.58	

TEST.			
	Gen.	Adult.	Total.
Sweet Milk ..	2	—	2
Total ..	2	—	2

LOCHGELLY BURGH.

OFFICIAL.			
	Gen.	Adult.	Total.
Sweet Milk ..	10	—	10
Butter, Salt ..	4	—	4
Coffee ..	1	—	1
Currants ..	1	—	1
Flour, Plain ..	1	—	1
Ginger, Ground ..	1	—	1
Jam, B. Currant ..	2	—	2
Margarine ..	1	—	1
Mince ..	1	—	1
Sausages ..	1	1	2
Soda, Baking ..	1	—	1
Tea ..	3	—	3
Vinegar ..	1	—	1
Total ..	28	1	29

TEST.			
	Gen.	Adult.	Total.
Nil.	—	—	—
Total ..	—	—	—

DUNFERMLINE AREA.

LANDWARD.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	28	3	31	Nil.			
Pasteurised Milk	9	—	9				
Acid, Tartaric ..	1	—	1				
Butter ..	2	—	2				
Margarine ..	1	—	1				
Mince ..	5	—	5				
Peas ..	1	—	1				
Powder, Gregory	1	—	1				
Rum ..	1	—	1				
Sausages ..	2	—	2				
Whisky ..	6	—	6				
Wine, Fruit ..	1	—	1				
Total ..	58	3	61				

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

Fat per cent.	Non-Fatty Solids per cent.
2.84	8.52
2.82	8.51
2.37	8.57

CULROSS BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	2	—	2	Nil.			
Butter ..	1	—	1				
Pepper, Black ..	1	—	1				
Whisky ..	1	—	1				
Total ..	5	—	5				

INVERKEITHING BURGH.

OFFICIAL.				TEST.			
	Gen.	Adult.	Total.		Gen.	Adult.	Total.
Sweet Milk ..	7	—	7	Sweet Milk ..	2	—	2
Certified Milk ..	1	—	1				
Pasteurised Milk	1	—	1				
Mince ..	1	—	1				
Sausages ..	1	—	1				
Total ..	11	—	11	Total ..	2	—	2

BEATH AREA.

LANDWARD.

OFFICIAL.				TEST.			
		Gen. Adult. Total.				Gen. Adult. Total.	
		Nil.				Nil.	
COWDENBEATH BURGH.							
OFFICIAL.				TEST.			
		Gen. Adult. Total.				Gen. Adult. Total.	
Mince ..	..	6	—	6		Nil.	
Total	..	6	—	6			

Fat				Fat			
per cent.		per cent.		per cent.		per cent.	
87.8		87.8		87.8		87.8	
81.4		81.4		81.4		81.4	
80.2		80.2		80.2		80.2	
85.2		85.2		85.2		85.2	

CULROSS BURGH.

ORIGINAL.		TEST.	
Gen.	Adult.	Gen.	Adult.
Total.	Total.	Total.	Total.
2	—	2	—
1	—	1	—
1	—	1	—
1	—	1	—
5	—	5	—

INVERKEITHING BURGH.

OFFICIAL.				TEST.			
Gen.		Adult.		Gen.		Adult.	
Total.		Total.		Total.		Total.	
7		—		7		—	
Sweet Milk				Sweet Milk			
1		—		1		—	
Gordified Milk				Gordified Milk			
1		—		1		—	
Pasturised Milk				Pasturised Milk			
1		—		1		—	
Mince ..				Mince ..			
1		—		1		—	
Sausages				Sausages			
1		—		1		—	
11		—		11		—	

FIFE COUNTY COUNCIL.

ANNUAL REPORT

ON THE

Medical Inspection of School Children

For the Year ended

JULY 1938

BY

R. A. KRAUSE

M.D., D.Sc., D.P.H.,

Deputy County Medical Officer (Welfare).

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- (a) **NUMBER OF SCHOOLS** 160 + Eastbank
 (b) **NUMBER OF CHILDREN ON REGISTER AND IN
 AVERAGE ATTENDANCE:—**

Roll (Total) at September 1937	.. ..	45,240
Average weekly roll to 31st July 1938	.. ..	44,632·6
Average attendance to 31st July 1938	.. ..	40,332·7
Percentage attendance	.. ..	90·36

II. HEATING, SANITATION, ETC., OF SCHOOLS.

HEATING OF SCHOOLS.—North-East Fife—Pitlessie Public School.—The Area Medical Officer reports school never feels comfortably warm and “I am unable to strip children properly for medical examination.” In Strathkinness Public School the Medical Officer states that “the heating here seems to me most unsatisfactory but no complaint has been made by the Headmaster.” Complaint is also made about the insufficient heating in the following clinics:—(1) Castlehill Public School; (2) Ladybank Public School; (3) Newburgh H.G. School—in winter seldom warm until late afternoon; (4) Anstruther—an independent heating should be installed here.

Wemyss Area.—The medical inspection room in Buckhaven High School is inadequate. An electric radiator should be available in the clinic.

Burntisland-Markinch Area.—Heating of rooms 13 and 14 (infants) in Burntisland H.G. School, and of room 1 is defective. In the Episcopal School one of the rooms (No. 5) is inadequately heated. In Balcurnie School the science room (in separate building) is very poorly heated, and even with added electric radiators is still unsatisfactory.

Lochgelly Area.—The one end of Ballingry School has unsatisfactory heating.

Beath Area.—Heating in general is good but occasional trouble in N.E. and N.W. corner rooms of Beath R.C. High School.

In Beath Secondary School the heating is inadequate on the north front. Complaints have been made of lack of adequate heating in room 10 of Kelty Public School.

There were no specific complaints as to inadequate heating in the schools of the Burghs of Kirkcaldy and Dunfermline.

Latrines, etc.

At Lumphinnans School the latrines have been renewed. At Auchterderran South and Balcurnie Schools they have also been renewed. At Auchterderran H.G. School new wash-hand basins have been fitted up in the boys' and girls' cloakrooms. At St. Agatha's R.C. School, the latrines have been remodelled in the old school. At Thornton School the boys' latrines have been brought up to date and at Kirk-

caldy West School the latrines for the Infants. At Largoward in addition to new latrines, new shelters have also been provided for both the boys and girls.

Additions and Alterations.

The additions and alterations at Tayport Public School are practically completed. At Oakley R.C. School a new staffroom has been provided. In Kirkcaldy, at Viewforth School, two huts had to be erected as temporary accommodation for the part which was destroyed by fire. In the new part it is intended to include a new gymnasium and spray baths as the present central hall is not satisfactory for physical education work.

The work at the new High School in Dunfermline has made good progress and should be ready for opening next session.

Clinics.

The new clinic at Barrie Street, Buckhaven, has been opened and provides accommodation for the treatment of minor ailments, orthopaedic and ultra-violet rays therapy and dental conditions. In addition it will provide better facilities for the Child Welfare work.

At Burntisland H.G. School the clinic has been remodelled and provides better facilities for treatment, especially of dental conditions.

The conversion of the large Board Room, in the Markinch County Offices, for clinic purposes is to be commenced shortly.

Playgrounds.

Improvements have been made in the following playgrounds:—Kirkcaldy West, Kirkcaldy North, St. Marie's R.C., Pittenweem Wormit, Auchterderran H.G., Kelty, McLean (Dunfermline), Beath (R.C. Primary), Foulford, Milesmark, Kincardine-on-Forth, Saline Carnock, Kingskettle, Auchtermuchty, Tayport H.G., Balcurvie and East Wemyss Schools.

III. ORGANISATION AND ADMINISTRATION.

There is no change to be recorded.

During the past school year the County Area Medical Officers made 1,140 visits for medical inspection purposes (routine or non-routine). In addition, 654 special visits were paid.

In the two large burghs (Kirkcaldy and Dunfermline) the following visits were made:—

Kirkcaldy Burgh— 189 ordinary ; 13 special.

Dunfermline Burgh— 165 do. 0 do.

The Welfare or School Nurses (including District Nurses) paid 2,224 visits to the schools in the County—Dunfermline Area, 380 ; Cowden-

eath and Lochgelly Areas 394 ; Kirkcaldy Area 225 ; Wemyss Area 43 ; North-East Fife 882. In Kirkcaldy Burgh these visits numbered 76 and in Dunfermline 67.

IV. PHYSICAL CONDITION OF THE SCHOOL CHILDREN.

Nurses' Inspections.

(a) <i>County</i> —No. of children inspected ..	16,941
No. of children re-inspected ..	22,284
Total ..	39,225

At the first inspections 4,149 children were found with defects (head vermin 1,347, impetigo 638, external eye diseases 264, nose and throat cases 170, otorrhoea 84, scabies 135, uncleanliness and neglect 61, and body vermin 13, etc.). Out of these cases with defects it was found necessary in 1,341 cases for the Nurses to follow up and visit the homes.

These 1,341 cases were chiefly distributed as follows :—Head vermin 15, impetigo 207, scabies 102, otorrhoea 20, uncleanliness and neglect 9, external eye disease 38, nose and throat conditions 42, body vermin 1, etc. Besides these cases, follow-up visits were also required for eye refraction (203) and dental (4) cases, where the parents were taking no steps for the examination and treatment of the children.

The nurses made 2,224 school visits for the inspection of the school children, and arising out of these inspections, 3,021 home visits were made for the purpose of following up those cases found to have definite defects or diseases. The figures for the District Nurses, which are included in the above totals, are 951 school visits and 1,317 home visits.

(b) *Large Burghs*—No. of children inspected :—

(i) Kirkcaldy ..	2,869
(ii) Dunfermline ..	3,530
No. of children re-inspected—	
(i) Kirkcaldy ..	6,364
(ii) Dunfermline ..	4,627
	17,390

The school visits made by the nurses of the Large Burghs were 443 (Kirkcaldy 376, Dunfermline 67). At the inspections, 944 children (Kirkcaldy 448, Dunfermline 496) were found with defects and of these 14 in Kirkcaldy required 85 home visits and in Dunfermline 24 required 21 home visits.

Medical Officers (Medical Inspection).

Number of Children examined and inspected by the Medical Officers (County and Large Burghs) :—

Entrant Infants	..	..	..	..	4,056
7 year olds	..	..	..	..	2,052
9 year olds	..	..	..	..	3,840
13 year olds	..	..	..	..	3,968
15 year olds	..	..	..	..	187
Total (Routine Age Groups)					14,103
Non-routines	..	..	..	..	4,396
Re-examinations	..	..	..	..	2,268
Special Class Children	..	..	..	..	100
Junior 15b Students	..	..	..	..	20
No. of children seen at Clinics otherwise than for treatment (Dunfermline excluded)	..	..	..	..	275
Total No. Inspected by Medical Officers					21,162
Total No. Inspected 1936-37					23,558

The number of children belonging to the routine age groups and examined are distributed as follows :—(1) Kirkcaldy Burgh 2,069 ; (2) Dunfermline Burgh 1,550 ; (3) North-East Fife 1,260 ; (4) Kirkcaldy District 1,401 ; (5) Wemyss District 1,634 ; (6) Cowdenbeath and Lochgelly Districts 3,036 ; (7) Dunfermline Landward District 1,101 or a total of 12,051. This number does not include the 7 year old group. The defects found in these 12,051 children are as follows :—

Summary of Defects.

			Per-	Non-
			Routines.	Routine
<i>Clothing—</i>				
Dirty	..	13	0.107	21
Insufficient	..	59	0.48	70
<i>Footgear—</i>				
Defective	..	254	2.1	105
Useless	..	103	0.85	26
Barefooted	..	—	—	—
<i>Cleanliness of Head and Body—</i>				
Head—Nits and dirty	..	900	7.4	205
Verminous	..	236	1.9	148
Body—Dirty (slight)	..	431	3.5	63
Very dirty	..	20	0.16	15
Verminous..	..	—	—	1

				<i>Per-</i> <i>Routines.</i>	<i>Non-</i> <i>centages.</i>	<i>Routines.</i>
<i>Condition of Skin :—</i>						
<i>Head</i> —Ringworm	..	..	—	—		4
Impetigo	..	..	39	0.32		85
Other diseases	..	..	31	0.25		15
<i>Body</i> —Ringworm	..	..	2	0.016		8
Scabies	..	..	33	0.27		38
Impetigo	..	..	5	0.041		35
Other diseases	..	..	58	0.48		56
<i>Nutrition—</i>						
Below average	..	..	1275	10.5		230
Very bad	..	..	141	1.1		76
<i>Teeth—</i>						
1-4 decayed	..	..	6185	51.3		258
5 or more decayed	..	..	1705	14.1		127
Oral sepsis	..	..	787	6.5		57
<i>Nose—</i>						
Catarrh	..	..	188	1.5		16
Obstruction	..	..	198	1.6		102
Other diseases and defects	..	..	161	1.3		20
<i>Tonsils—</i>						
Slightly enlarged	..	..	2529	20.9		135
Markedly do.	..	..	577	4.7		182
<i>Lymphatic Glands—</i>						
<i>Cervical—</i>						
Slightly enlarged	..	..	6874	57.04		184
Markedly do.	..	..	291	2.4		69
<i>Submaxillary—</i>						
Slightly enlarged	..	..	5504	41.9		44
Markedly do.	..	..	47	0.39		18
<i>External Eye Disease—</i>						
Blepharitis	..	..	311	2.5		69
Conjunctivitis	..	..	50	0.41		26
Corneal opacities	..	..	9	0.074		11
Squints and other defects	..	..	308	2.5		135
Other diseases	..	..	39	0.32		27
<i>Visual Acuity—(7995).</i>						(4396)
6/6 with one eye	..	..	7031	87.9		4016
6/9 to 6/12 do.	..	..	684	8.5		204
6/18 do.	..	..	272	3.4		171
Wearing glasses	..	..	308	3.8		92

			Per- Routines.	centages.	Non- Routines
<i>Ears—</i>					
Wax	..	..	1347	11.17	108
History of Otorrhoea	..	..	243	2.01	18
Otorrhoea	..	..	86	0.71	55
Other diseases and defects	..	..	177	1.4	13
<i>Hearing—</i>					
Slightly deaf (both ears)	..	..	77	0.63	35
Markedly deaf (both ears)	..	..	22	0.18	24
<i>Speech—</i>					
Defective articulation	..	..	165	1.3	54
History of Stammering	..	..	14	0.116	6
Stammering	..	..	37	0.307	23
<i>Mental Condition—</i>					
Dull or backward	..	..	175	1.4	59
Markedly do.	..	..	59	0.48	86
<i>Heart and Circulation—</i>					
Functional disease	..	..	39	0.32	5
Organic do.	..	..	32	0.26	23
Anaemia	..	..	38	0.31	21
<i>Lungs—</i>					
Bronchitis	..	..	76	0.63	33
Phthisis (Pre-tuber)	..	..	30	0.24	7
(Susp. tuber)	..	..	8	0.066	3
Other diseases	..	..	83	0.68	12
<i>Nervous System—</i>					
Chorea	..	..	1	0.008	4
Infantile paralysis	..	..	1	0.008	8
Epilepsy	..	..	4	0.033	2
<i>Tuberculosis (Non-Pulmonary)</i>	..	..	23	0.19	36
<i>Rickets—</i>					
Slight	..	..	94	0.78	17
Marked	..	..	1	0.008	5
<i>Deformities—</i>					
Congenital	..	..	29	0.24	20
Acquired	..	..	79	0.65	49
<i>Infectious Diseases</i>	..	..	25	0.207	18
<i>Contagious Diseases</i>	..	..	50	0.41	49
<i>Other Diseases</i>	..	..	70	0.58	48
<i>Other Defects</i>	..	..	82	0.68	19

Vaccination—**Entrant Infants—(4056)**

Vaccinated	1184	29.19
Poorly marked	210	5.17
Not vaccinated	2662	65.6

Other Age Groups—(7995)

Vaccinated	2116	26.4
Poorly marked	1318	16.4
Not vaccinated	4561	57.02

At the medical inspections, the Medical Officers refer cases to the parents for medical advice and treatment. The total number of such cases (routine age groups) referred by the County Area Medical Officers was 2,492. This figure was made up of the following conditions:—Dental 1,116, vision 262, adenoids 133, tonsils 247, head vermin 130, scabies 24, other conditions 580. 1,297 notices were also sent out in respect of non-routine cases.

The Medical Officer for Kirkcaldy Burgh sent out 938 notices (614 routine and 324 for non-routines) and in Dunfermline Burgh 501 notices (357 routine and 144 non-routine) were sent out.

The number of parents present at the medical inspection was as follows:—

(a) Entrant Infants (County)	1,367
do. (Kirkcaldy)	513
do. (Dunfermline)	292
(b) Other Routine Age Groups (County)	189
do. (Kirkcaldy)	410
do. (Dunfermline)	304
Total	3,075

(a) DEFECTIVE VISION.**Inspections for Visual Acuity.**

During the past school year, 7,014 children (North-East Fife Area 1,314; Buckhaven-Wemyss Area 1,312; Lochgelly Area 1,100; Burntisland-Markinch Area 1,351; Cowdenbeath Area 1,350; and, West Fife Area 787) were inspected for visual acuity. Of these, 1,059 were referred to the school eye clinics and 314 had eventually to be recommended for eye examination by the Eye Specialists.

Following examination and advice as to need for spectacles given by the medical staff, it was found that in 22 cases the parents refused to take any steps. Seven cases are being kept under supervision. In

12 of the cases the parents, following repeated interviews, have steadfastly refused to supply glasses. As the eye condition was such that no adverse educational report was obtained for these cases, they were held over meantime. Another case, following interview, eventually agreed to have the spectacles supplied. One boy left the district and nothing further could be done. Another case eventually decided to seek advice at the Royal Infirmary, Edinburgh.

In the Burgh of Kirkcaldy, the total number of children whose eyesight was inspected was approximately 2,577. Of these, 2,072 belonged to the routine age groups. Of these routine cases 141 were referred, along with other 32 non-routines and 230 re-examinations, to the Eye Clinics where they were examined either by the School Medical Officer or the Eye Specialist (83).

In the Burgh of Dunfermline, 2,095 children had their vision tested and of these 124 were examined at the Eye Clinic and 38 were referred to the Eye Specialist.

In Kirkcaldy in the case of 12 children the Eye Cards were returned with a definite refusal. These, along with 156 boys and girls whose parents had repeatedly ignored intimations for the examination, were visited by the Health Visitors and following these visits, a number of the parents agreed to have the eye examinations carried out.

In Dunfermline, following the examinations, there were three refusals. The cases are, however, being kept under observation.

Colour Vision Testing.

In the County of Fife 2,336 children were group-tested for defective colour vision.

In the North-East of Fife 23 boys and 1 girl were found to have more than five errors with the Ishihara Test and in these a greater or lesser degree of red-green colour blindness was present.

In the Buckhaven-Wemyss Area, although 340 children were tested, there was no failure recorded in the group tests.

In the remainder of the County, in which 845 boys and 696 girls were involved, 21 boys and 3 girls were referred for individual testing, Stilling's Colour Test or the Ishihara Test being used for this purpose. As a result of these further tests it is reported that 14 boys were defective in their red-green colour vision and one was partially colour blind.

EYE CLINICS.

(a) County.

At the following 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 205 clinics were held by the Area Medical Officers and 944 children (414 boys and 530 girls) were examined, 342 children were re-examined and there were 276 absentees. The chief refractive conditions found were :—

Hypermetropia	228
Myopia	52
Hypermetropic Astigmatism	329
Myopic Astigmatism	86
Mixed Astigmatism	49
Anisometropia	92
Irregular refraction	2

In 38 cases the eyes were found to be emmetropic and there were 2 cases with spasm of accommodation. The number of squints was 230 and there were 7 cases of nystagmus. There were also 26 cases of blepharitis and conjunctivitis, 14 cases of corneal nebulae, 2 of corneal ulcers and 26 with other conditions (headaches 8, etc.).

(b) Large Burghs.

In the large burghs, the number of eye clinics held was 21 (Kirkcaldy) and 42 (Dunfermline), and at these 98 and 86 children respectively were examined. In Dunfermline 74 cases were re-examined. There were 48 absentees (Kirkcaldy). The refractive and other conditions found were :—

	Kirkcaldy.	Dunfermline.
Hypermetropia	29	22
Myopia	7	16
Hypermetropic Astigmatism	42	16
Myopic Astigmatism	9	21
Mixed do.	5	2
Anisometropia	3	—
Squints	19	11
Corneal ulcers and <i>nebulae</i>	—	1
Other Conditions (emmetropia 6, etc.)	1	9

(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 in the County. Forty-three clinics were held by these consultants and 599 children were examined (County 459, Kirkcaldy 102, and Dunfermline 38). 296 of these cases were re-examined and there were 156 absentees.

The conditions seen by the Specialists were :—

Hypermetropia	94
Myopia	37
Hypermetropic Astigmatism	190
Myopic Astigmatism	129
Mixed do.	26
Anisometropia	52
Irregular refraction	4
Both eyes emmetropic	15
Spasm of Accommodation	5
Squints	169
Nystagmus, corneal ulcers and nebulae, blepharitis and conjunctivitis	48

There were also 47 other conditions seen (cataract 5, congenital cataract 5, optic atrophy 3, etc., etc.).

The following reports are by the Eye Specialists :—

Dr. ALLISTER M. MACGILLIVRAY, M.D., D.O.M.S. (R.C.P.S.Eng.), F.R.S.E.

“ I attended 23 clinics at the following centres :—Buckhaven, Markinch, North-East Fife and Kirkcaldy Burgh, and 355 cases were examined, of which 181 cases were re-examinations. The following is a list of the various types of refractive error discovered :—

Hypermetropia	26
Myopia	19
Hypermetropic astigmatism	116
Myopic astigmatism	97
Mixed astigmatism	18
Anisometropia	33

“ Included in the above list are 75 cases of squint. Various other abnormalities were discovered, including corneal ulcers, conjunctivitis, corneal opacities, and interstitial keratitis.

“ I should like to take this opportunity of expressing my appreciation of the new eye clinic at Buckhaven. The facilities provided there for the ocular examination of school children are eminently satisfactory and the premises extremely comfortable. It is my earnest hope that some time in the near future the other eye clinics in my district may be brought up to date in a similar manner.

“ My best thanks are due to the full-time medical staff and the clinic nurses for their valuable assistance rendered at the various clinics.”

Dr. ROBERT SAMPSON, M.B., F.R.C.S.Ed., D.O.M.S.

“ I have pleasure in submitting my Report on the School Specialist Eye Clinics which I have attended during the past year.

"In all, twenty clinics were held in the West Fife and Dunfermline area, and 359 examinations were made, of which 115 were re-examinations. The refractive errors found were very largely of the hypermetropic type, and associated with this fact the incidence of convergent squint was very considerable. This is a problem to which I have drawn attention in previous Reports, and, since no orthoptic scheme has yet been instituted, no improvement can be recorded. I trust that the present profligate waste of children's eyesight and medical effort will shortly be arrested by the appointment of a trained orthoptist by the County Council.

"During the year both the Area Medical Officers and the Nursing Staff have given me most valued assistance.

"Accommodation at the various Clinics is now greatly improved except in Dunfermline, where the room in Queen Anne School is quite inadequate for eye work. I suggest that consideration should be given to the possibility of providing a good central ophthalmic clinic for Dunfermline Burgh and District."

(b) 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, 340 cases with crippling ailments (County 305, Kirkcaldy Burgh 19, Dunfermline Burgh 16). Of these, 232 were old cases (1936-7—117). Of the new cases seen, those reported on by the County Medical Staff numbered 99 (10 severe rickets, 2 tuberculous lesions of bones and joints, 1 tuberculous lesion of spine, 7 poliomyelitis anterior acuta of crippling degree, 27 congenital deformities of crippling degree, and 52 other crippling ailments). In the case of the two large burghs, the figures for new cases are—Kirkcaldy 2, Dunfermline 7.

Orthopaedic Clinics.

Under the County Orthopaedic Scheme in Fife, children with postural defects or any crippling condition are referred by the medical staff to the orthopaedic clinics for supervision and treatment. Orthopaedic clinics have been set up at the following school and welfare clinics:—Buckhaven, Lochgelly, Dunfermline (Queen Anne School), Burntisland, Markinch and Crossgates. In the case of the first two, the orthopaedic clinics were specially built and are used solely for the treatment of children with crippling ailments. In the other clinics, the rooms for this purpose are also used for other forms of treatment. There is need for more orthopaedic clinics but lack of staff has prevented the setting up of more such centres.

When found necessary, arrangements were made for the children to be seen by the Orthopaedic Surgeon, Mr. W. A. Cochrane, at the various clinics. During 1938, fourteen specialist clinics were held:—

Lochgelly	..	..	..	..	3
Buckhaven	..	..	..	..	3
Dunfermline	..	..	..	..	2
Cupar	..	..	..	..	3
Cowdenbeath	..	..	..	..	1
Kirkcaldy	..	..	..	..	1
Anstruther	..	..	..	..	1

At these clinics 391 children were seen by the Specialist who advised the parents regarding further treatment, either at the Cripple Hospital at Fairmilehead or at one of the clinics. Some cases, especially those in the North-East of Fife, require to be treated at home (domiciliary cases) as there are no clinics available. Lack of time prevents the orthopaedic nurse from giving these cases adequate attention. The appointment of another orthopaedic nurse would help materially towards more time being given to treatment at clinics and also at the homes of the domiciliary cases. Of the 391 children, 84 were new cases of school age. About forty were recommended for hospital treatment and the others referred to the clinics for treatment or observation.

The treatment carried out at the various clinics consisted of remedial exercises and massage, as well as electrical treatment. Where necessary, cases are also given artificial sunlight or infra-red radiation treatment. Simple plaster splints are made and supervised to note need for readjustments.

The number of school children on the treatment roll of the various clinics was 124 at the beginning of the year and increased to 172 at the end. Actually there were 79 new cases but a number of children (16) were discharged or left the district. The number of treatments given to school children at the various clinics was as follows :—

Buckhaven	..	..	..	..	3,309
Lochgelly	..	..	..	..	2,617
Dunfermline	..	..	..	..	620
Burntisland	..	..	..	..	408
Crossgates	..	..	..	..	395
Markinch	..	..	..	..	310
Total	..	..	..	..	7,659

The clinic treatment was in the hands of the orthopaedic nurse assisted by a masseuse and members of the gymnastic staff (time given equivalent to that of one whole-time staff member). The latter help only at the two large orthopaedic clinics, Buckhaven and Lochgelly.

A general analysis of the cases (546) seen and treated at the various clinics in Fife during the past three years will be of interest and is as follows :—

	<i>Under 5 years.</i>	<i>5-15 years.</i>	<i>Over 15</i>
(a) Congenital Deformities	31	40	5
(b) Poliomyelitis	9	40	4
(c) Other forms of muscular paralysis ..	12	52	11
(d) Rickets	35	23	11
(e) Tuberculosis (spine, hip joint and other bones or joints)	1	10	2
(f) Arthritis ("Rheumatism")	4	5	2
(g) Injuries (including amputations) ..	2	31	4
(h) Other	35	156	21
	129	357	60

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 1937 :—

Auchterderran East	16
Castlehill, Cupar	18
Crossgates	24
Culross	8
Denbeath	52
Eastbank, Kirkcaldy	55
Leslie East	9
Lochgelly East	18
McLean, Dunfermline	33
Myope Class, North School, Kirkcaldy	12
	245

During the year, 55 children were admitted to these classes and 57 discharged.

(b) Institution Cases.

In September 1937 the following number of children from Fife were in various institutions :—

Baldovan (M.D.)	1
Larbert (M.D.)	12
St. Joseph's, Rosewell, Midlothian (M.D., R.C.)	4
Waverley Park Home, Kirkintilloch (M.D.)	—
Royal Blind Asylum, Edinburgh	10
Institution for Blind, Dundee	1
Donaldson's Hospital (Deaf), Edinburgh	16
Royal Institution for Deaf, Edinburgh	7
Institution for Deaf, Dundee	3
East Park Home for Infirm Children, Glasgow	—
Lauder Road Home (Cripples), Edinburgh	1
St. Vincent's School, Glasgow	2
Colony School, Bridge-of-Weir	4
	61

During the year further 7 children were admitted and 9 discharged, and thus the total at the end of the session was 59.

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 1937 there were two trainees in Edinburgh. There was also one at Dundee and during the session another was admitted.

VI. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE OF CHILDREN.

The supervision and arrangements relating to physical education are being carried out efficiently by Mr. A. C. W. George and his report on physical education is appended.

From this, it will be noted specially, in view of the general interest in physical fitness, that the teachers in the County of Fife are particularly interested and keen on the work of physical education. Evidence of this is seen in the fact that a large number of them have attended the special training classes arranged by Mr. George.

The provision of gymnastic shoes is also stressed and as pointed out in the Annual Report last year, such provision would go far to reduce the large number of "splinter" accidents that take place yearly.

The need for spray baths is also emphasised, and again it must be pointed out that the introduction of an adequate number of spray baths (10 or more) per gymnasium ought to be considered additional apparatus, as they are to form part of the class work.

(a) Physical Education.**Report by the Superintendent of Physical Education.**

GENERAL.—It is gratifying to report that the Education Committee has now decided to open, as playing spaces, some of the playgrounds. It is realised by those who have really studied the problem of the use of playgrounds as playing spaces that it is necessary to have play leaders. This fact was known to the Committee and in consequence, it has been decided to employ a limited number of people specially suited to work of that nature. It is hoped that no obstacles will be placed in the way of giving effect to the scheme next session.

The Education Committee has now recognised the excellent work being done by Youth Organisations by urging Schools' Management Committees to grant the use of school premises free of charge. This is indeed a generous and a helpful gesture. Only those who are intimately connected with the work of such Organisations appreciate the extent to which their scope has been limited by the lack of suitable meeting places.

It is a matter of regret, however, that the Education Committee could not see its way to establish evening playcentres. While it is true that these would cost money to run, it is equally true to say that money spent in this way would be to the ultimate benefit of the children concerned. If evening playcentres are desirable for the children of Aberdeen or Edinburgh, they are equally, if not more, desirable for children living in the industrial parts of Fife.

One of the most interesting experiments yet carried out was the running of training courses for leaders and potential leaders of youth organisations. It is hoped that similar courses will be held in the future.

Training classes for teachers were successfully held in various parts of the County. There was an attendance of 261. Having regard to the statements which have been made with reference to the lack of leaders for Keep-Fit work, as far as Fife is concerned, the supply now is greatly in excess of the demand.

The time has now arisen when the Education Committee will have to face the question of providing gymnastic shoes for children whose parents are in needy circumstances. The shoes, if bought in large quantities, could be had at relatively small cost.

Teaching of Physical Education in Schools.

PRIMARY DEPARTMENTS.—The progress which has been made is in large measure due to the interest and enthusiasm of class teachers. The happy relationship existing between class teachers and advisory teachers is well worthy of mention. It must be admitted, however, that until there is a form of specialisation in our primary departments, a really high standard will not be attained. Some teachers find con-

siderable difficulty in carrying out team work. Rather than strive to overcome difficulties which, in fact, are more apparent than real, they seek ways and means of avoiding its use.

POST-PRIMARY DEPARTMENTS.—The standard of work on the whole is good. Greater effort should be made to inculcate in the pupils good postural habits. As an experiment, special posture training classes have been held in one of our post-primary schools. The results have more than justified the time devoted to this special work. It is hoped that before long similar classes will be established in every school in which there is a post-primary department.

GYMNASIA.—The application of hippo oil to gymnasium floors is indeed wise. Where this is done, care must be taken to see that floor is used for gymnastic purposes only, otherwise the money so spent is in reality wasted. It is noted with satisfaction that the number of gymnasiums or school halls being used for social functions has greatly diminished.

The gymnasiums at the new Dunfermline High School are rapidly nearing completion. The reconstruction of Tayport H.G. School has at last been accomplished and the new gymnasium is proving a source of enjoyment, as well as an inestimable boon to the pupils.

Reference has been made to the proposed expenditure in connection with the building of the new gymnasiums. It should be understood that the need for such special accommodation has always been present but it is only in consequence of the pressure exerted by the Government and the Scottish Education Department that steps are now being taken to improve matters. It is again emphasised that the climate of this country does not lend itself to outdoor physical training. Added to this is the fact that the type of work now being done demands indoor facilities.

It is recommended that wooden or corrugated iron huts (gymnasiums) should be provided at Auchterderran East and Auchterderran R.S. Schools. These, of course, are in addition to requirements at present being dealt with by the Education Committee.

PLAYGROUNDS.—While the Education Committee has done everything in its power to improve the condition of playgrounds, its efforts have been greatly hampered by the lack of money. The suggestion is once more put forward that the Education Committee should consider the conditions of the playgrounds throughout the County and should place schools in a certain order of priority, irrespective of the area in which the schools are situated. A playground "Five Year Plan" would be a very definite step in the right direction.

PLAYING FIELDS.—The situation in regard to playing fields remains obscure. There is an urgent need for playing fields for use both during and after school hours. So far, nothing has been done to improve matters.

SWIMMING.—Instruction in swimming during school hours has been carried out in Kirkcaldy and Wemyss Areas. Great progress has been made and an extension of the scheme to other parts of the County is desirable. Where there are satisfactory facilities for instruction in swimming, every pupil should be given an opportunity of learning. With a sea-board such as there is in Fife, this is imperative.

SCHOOL CAMPS.—It is noted, with great pleasure, that the Education Committee has decided to give a substantial grant to the Fife Holiday Camp Scheme for Necessitous School Children. Never could money be spent to better advantage than striving to build up the health of the children.

(b) **Spray Baths in Schools.**

Schools.	No. of Children.	No. of Baths taken.
rosyth (King's Road)	67	2683 (approx)
do. (Park Road)	58	398
McLean P.S. (Special Classes)	26	184
Crossgates (Ordinary Classes)	40	437
do. (Special Classes)	28	363
Cowdenbeath Public	42	191
beath R.C. High	95	1432
loss-side School, Cowdenbeath	218	2947
Kirkcaldy (Eastbank Special School)	67	905
Kirkcaldy High	70	1640
inclairtown, Kirkcaldy	23	23
lethilhill	Nil.	Nil.
instruther—Waid Academy	151	1020
upar, Bell-Baxter	No record.	4961
Jewburgh H.G. School	85	1441
	970	18,622

The figure for the number of spray baths given during the school session 1937-38 shows an increase over the past two years. Unfortunately, only approximate figures can be given and the actual number of sprays given exceeds the total indicated above. Unfortunately also, the number of children taking spray baths cannot be given for Bell-Baxter School, Cupar, as the record for this was lost.

Apart from the Special Classes, the noticeable feature about the figures indicated is the big variation in the number of spray baths given at different schools. The explanation of this is that the giving of these spray baths is dependent upon the supervision of certain members of the staff and the enthusiasm of teachers interested in this aspect of physical training. The highest figures are mainly obtained in schools where use is made of spray baths after games.

I must therefore again point out that spray baths are, only to a limited extent, being used as a part of our physical education scheme. The reason for this is undoubtedly the fact that the various schools

are only supplied with a limited number of spray baths' fittings. The uneconomical use of a limited number of spray baths has been pointed out repeatedly in previous School Medical Reports. It is the small number of spray baths which makes it impossible for the gym teacher to use the spray baths as part of the physical education apparatus and it is left, therefore, to the more enthusiastic teachers and pupils to utilise this form of physical education apparatus as best as they can. It will be appreciated that if in the gymnasia only three or four sets of wall bars were available, the exercises requiring this type of apparatus could not be carried out as class work. These are comparable to the spray baths and will illustrate why a limited number of sprays for class work is useless.

The attention of the Education Committee must be drawn particularly to the spray bath equipment in the following schools. Two years ago, at the request of the Schools Sub-Committee, inquiries were made and a report sent in on the question of additional spray baths for Kirkcaldy High School. It will be remembered that there was some vacant accommodation (old Staff Room) which was not being used and which, at a relatively small cost, could be adapted and fitted up with spray baths for the use of the boys. The Education Committee agreed to this being done but to date, no additional spray baths have been placed in this school.

In Cowdenbeath Public School, the spray baths are used in a building which is cold and draughty and in which I could not advise children to be given spray baths in cold and windy weather. If the partitions were raised to the roof, the draughts and cold winds could be excluded and the place made reasonably comfortable for children taking spray baths.

In Buckhaven High School, a set of four spray baths was introduced in the new hall which was made available for gymnastic purposes for this school. Previous to the introduction of these spray baths it was pointed out that the number would be insufficient. Experience has again shown that these spray baths are insufficient for the purpose and also that the type introduced must be considered unsatisfactory.

In conclusion, I must again repeat what I have said in previous reports. The Education Committee, in considering the question of spray baths accommodation, must aim at a system which allows at least ten or twelve children being capable of participating in the spray baths at one time. This is essential for class instruction and if the maximum number is to be put through in a relatively short time—to fifteen minutes. If, for financial reasons, it is found impossible to provide such a system, it would be better to close down the spray baths altogether.

VII. MOTHERCRAFT CLASSES.

These classes, which are taught by members of the Welfare Nursing staff, were held in the following schools :—(1) Kirkcaldy High—Nurse Petrie ; (2) Viewforth—Nurse Petrie ; (3) Queen Anne, Dunfermline—Nurse Petrie ; (4) Inverkeithing—Nurse Petrie ; (5) Lochgelly H.G.—Nurse Petrie ; (6) Buckhaven High—Nurse Simpson ; (7) Leven H.G.—Nurse Bisset ; (8) Aberhill—Nurse Kellock ; (9) Moss-side, Cowdenbeath—Nurse Beath ; (10) Beath R.C. High—Nurse Robertson.

Considering the inadequate arrangements in most of the schools for the teaching of this important subject, the efforts of the nurses meet with a remarkable amount of success. The arrangement, whereby senior girls from Denbeath School go for a period of a fortnight to help the staff at the Methil Nursery School, must be considered one of the most practical means of giving young girls an opportunity of helping to handle young children.

VIII. ARRANGEMENTS FOR FEEDING AND CLOTHING SCHOOL CHILDREN.

From the statement of expenditure on Meals and Clothing for the year ended 15th May 1938, the amounts incurred are as follows :—

(1) Cost of Apparatus	£40	10	0
(2) Meals (Necessitous Cases) .. .	145	16	3½
(3) Boots and Clothing (Necessitous Cases) ..	840	4	11½
(4) Meals for Non-necessitous Cases .. .	1311	10	1
Total .. .	£2338	1	4

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 79, Kirkcaldy Burgh 85, Dunfermline Burgh 0.

The number of cases brought forward by the headmasters, teachers and parents were :—County 104, Kirkcaldy Burgh 117, Dunfermline Burgh 10—a total of 221.

Out of this total of 385 children, 132 (95 County, 37 Kirkcaldy) were recommended to have special nourishment in the form of some malt preparation, 4 County cases were given special nourishment and milk, 33 were given milk (County 63, Kirkcaldy 163, Dunfermline 7) and 25 cases meals were provided (County 20, Kirkcaldy 2, Dunfermline 1). In one County case there was no recommendation.

In the case of boots and clothing, the majority of the cases (2367) were brought forward by the headmasters as applications made by the

parents. Of these, 1,909 were in the County, 269 in the Burgh of Kirkcaldy, and 189 in the Burgh of Dunfermline. At medical inspection only 39 cases were found (County 28, Kirkcaldy 10, Dunfermline 1) where the children were in need of boots and clothing. The recommendations of the medical staff were as follows :—

County—Clothing only, 153 ; boots only 157 ; boots and clothing 1,589.

Kirkcaldy Burgh—Clothing 211, boots 258.

Dunfermline Burgh—Clothing only 8 ; boots only 19 ; boots and clothing 163.

Eighteen " Other " recommendations were made in respect of County cases and in four cases there was no recommendation.

It should also be mentioned that amongst school children, 117 were recommended to have spectacles (County 93, Kirkcaldy Burgh 2, Dunfermline Burgh 3).

IX. ARRANGEMENTS FOR MEDICAL TREATMENT.

(a) Minor Ailments.

(a) NORTH-EAST FIFE.—Clinic arrangements in St. Andrews are still, unfortunately, insufficient and inadequate. Temporary accommodation was promised but nothing so far has been done.

The reconstructed clinic beside Tayport School was completed and is serving a very useful purpose both for the school children and for mothers who wish to consult the Nurse regarding their infants.

(b) KIRKCALDY LANDWARD DISTRICT.—Buckhaven-Leven. The new Child Welfare Clinic at Methil was opened and there is now available for the area surrounding it treatment for minor ailments of school and pre-school children ; dental treatment for school and pre-school children as well as expectant and nursing mothers ; orthopaedic treatment for children of all ages coming under the Fife County Orthopaedic Scheme. In addition, arrangements are being made to start an ante-natal clinic and so help to curtail unnecessary travelling to Kirkcaldy where an ante-natal clinic is held in connection with the Maternity Home.

At East Wemyss the clinic arrangements are still unsatisfactory.

Burntisland and Markinch.—At Burntisland a reconstruction of the old clinic has been carried out. Whilst this will mean an improvement in the general clinic facilities, the main advantage will be that a properly furnished dental clinic is now available and this will go far to meet the dental requirements for which there has always been a definite demand in this Burgh.

At Markinch it is planned to make available new clinic accommodation.

Unfortunately, nothing has been done at Auchtermuchty and the temporary arrangement for dental treatment at Falkland School has been continued.

(c) DUNFERMLINE LANDWARD DISTRICT.—Whilst the school clinic at Cowdenbeath can be considered satisfactory, it is only partially so as the increasing demands for various kinds of treatment are impossible to be met as the accommodation is inadequate for such increase. This applies particularly to the need for orthopaedic clinic accommodation and accommodation for speech therapy which ought to be centralised, if at all possible.

As regards the Welfare Clinic, this building, whilst it has served a useful purpose, is now becoming defective in various ways. Heating is definitely insufficient. The roofs are leaking and water pipes and other fittings are definitely defective. Apart from these defects, however, the accommodation is inadequate to overtake the increasing volume of work which this clinic has to meet.

West of Fife Area.—The clinic arrangements at Blairhall are still unsatisfactory and so far no alternative arrangements can be considered.

Clinics (County).

There were 2,088 clinic visits made by the Welfare Nurses ; 10,716 new cases were treated and these made 45,801 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	..	..	32	360
Body Vermin	..	..	—	—
Ringworm (scalp)	..	..	9	50
Scabies	..	..	119	517
Uncleanliness or Neglect	..	..	2	11
Impetigo Contagiosa	..	..	1417	7506
Other Skin Conditions	..	..	332	2411
Otorrhoea	..	..	284	4953
Eye Disease (external)	..	..	459	5077
Ear Cases	..	..	259	966
Nose and Throat Cases	..	..	103	655
Cuts and Bruises	..	..	3039	6552
Septic Conditions	..	..	3204	10,068
Other Cases	..	..	1039	3999
Tuberculin injections	..	..	28	1540
Accidents	..	..	157	409
Advisory Cases	..	..	233	727
Total	..	..	10,716	45,801

(b) Dental Treatment. County.

The following figures indicate the total dental work carried out by the six Area Dentists in the County of Fife.

During the school session of 1937-38, there were 17,343 school children inspected throughout Fife. Of these, 1,886 had sound teeth,

or about 10·8 per cent.; 10,068 had 1·4 defective teeth (58·05 per cent.); 4,048 had 5·8 defective (23·3 per cent.); and 1,341 had 9 or more defective teeth (7·7 per cent.). The number of children referred to their parents as requiring dental treatment was 15,457 or 89·1 per cent. of the total inspected. The number of parents who indicated that they wished dental treatment carried out at the school clinics was 7,681 or 44·2 per cent. 7,586 indicated that they wished treatment by their "Own Dentist"; 161 refused to have treatment and 29 cards were not returned. 558 children were re-inspected and of these, 544 were referred for treatment. Only 146 accepted treatment.

The County Staff visited 155 schools for the purpose of inspection, and made 46 school visits (country schools) to carry out treatment. The number of children treated at the schools was 895 and these received 1,896 treatments (1,356 extractions, 540 dressings, fillings, etc.). The School Dentists made 2,282 visits to the school clinics—this includes 34 clinics for extractions under a general anaesthesia. The total number of children treated was 9,008 and they received 39,133 treatments (4·3 per child). These 9,008 children made 13,690 clinic attendances. Of these, 1,183 were casuals and 12,507 appointments. The number of treatments given in the various clinics are indicated in the following table:—

	Extractions.	Dressings, Fillings & Scalings, etc.	Total Dental Operations.
Cupar	641	442	1083
Tayport	317	88	405
St. Andrews	646	359	1005
Anstruther	509	304	813
Newburgh	361	114	475
Ladybank	188	139	327
Falkland (Auchtermuchty)	302	104	406
Lochgelly	1732	1489	3221
Crosshill	1106	893	1999
Auchterderran	1278	683	1961
Kinglassie	365	92	457
Inverkeithing	700	596	1296
Burntisland	956	790	1746
Buckhaven	850	1543	2393
Methil	443	1061	1504
Leven	988	1927	2915
Markinch	882	497	1379
East Wemyss	729	301	1030
Methilhill	833	326	1159
Elie	92	288	380
Leslie	335	64	399
Cowdenbeath	2595	1418	4013
Kelty	1504	770	2274
Torryburn	1027	717	1744
Crossgates	1040	630	1670
Blairhall	523	298	821
Tulliallan	209	153	362
	<u>21,151</u>	<u>16,086</u>	<u>37,237</u>

A further analysis of the figures submitted by the dental staff gives more detailed information of the work done. There were 141 extractions carried out without an anaesthetic—137 of these teeth were temporary and very easily removed. In the case of the teeth extracted with a local anaesthetic, 18,029 were temporary or milk teeth and 3,313 were of the permanent set. The number of teeth extracted under a general anaesthetic was 1,024. The percentage of extractions to the total number of dental treatments is 56·8.

The analysis of the figures for conservative treatment in Fife is as follows :—The number of dressings was 2,929, and 2,710 of these were for permanent teeth. The total number of fillings inserted into teeth was 4,555 (1,871 "Cement," 2,243 "Amalgam," and 441 "Silicate" fillings). Here again the greater number (3,499) 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 7,690 such treatments given (6,661 temporary and 1,029 permanent teeth). Scaling of teeth or the removal of "tar-tar" was carried out in 1,262 cases—practically all on permanent teeth. Besides the foregoing dental operations, there were also 190 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, 384 were treated at the school dental clinics (452 attendances).

LARGE BURGHS (KIRKCALDY AND DUNFERMLINE).

During the past school year, the number of children inspected was 1,545 (Kirkcaldy) and 3,855 (Dunfermline). In the former burgh the number with sound teeth was 98 (6·4 per cent.) and in the latter 1,468 (38·08 per cent.). The number referred for treatment was 1,447 and 2,387 respectively. In Kirkcaldy, 854 or 55·2 per cent. accepted school dental treatment. For the purpose of these inspections the number of school visits by the dentist was 7 and the clinic visits number 495.

The total number of dental treatments in Kirkcaldy was 7,867 and was made up as follows :—2,933 extractions, 1,009 dressings, 1,365 fillings, 864 silver nitrate and scalings, and 1,696 others. The number of attendances by casual cases was 1,095 and there were 4,033 appointments.

The figures for Dunfermline are :—Total treatments 12,159—extractions 3,111; conservative treatments 9,048 (dressings 643, silver nitrate and scalings 4,649, fillings 3,708, and others 48).

X. ACCIDENTS IN SCHOOLS.

1. Minor Accidents.

The total number of minor accidents requiring first-aid treatment was 11,276 a decrease on the previous total (12,655). Of these accidents, 1,304 occurred in gymnasia (2,422 in 1937), 2,665 in classrooms (3,045 in 1937), and 7,307 in the playground or outside the school buildings (7,188 in 1937).

(a) GYMNASIA.—The majority (72 per cent.) of the accidents occurring in gymnasia was children receiving splinters from the floors. This is, however, the lowest recorded number of this type of accident and no doubt the result of the efforts made to improve the condition of the floors. Unfortunately, as most of this effort is in the nature of planing the wood, an increasing crop of splinter accidents may again be expected in future years. The schools chiefly affected with "splinter" accidents were :—Lochgelly South 120, Ballingry 119, Pittenweem 75, Coaltown of Wemyss 66, Townhill 58, and Glencraig 55.

The other types of accidents occurring in gymnasia were cuts and bruises 206, sickness 40, and other 51.

(b) CLASSROOMS.—The number of accidents occurring in classrooms was 2,665. It was made up of cuts and bruises 1,372, splinters 202, burns 169, sickness 694, and others 212. These, with the exception of splinters and other causes, show a reduction on the previous year's figures. In 1937 the number of burns was 248 and that for sickness and fainting 934.

(c) PLAYGROUNDS.—The total number of accidents in playgrounds was 7,307 (an increase on last year). Cuts and bruises accounted for 6,333 accidents (or 86 per cent.). The schools with outstanding numbers of such cases are :—Sinclairtown 321; Pathhead 231; Dysart 182; Burntisland H.G. 174; Glencraig 165; Culross 143; Markinch 123; St. Leonard's 122; Leslie H.G. 120; Lumphinnans 118, and Strathmiglo 110. The high figures for these schools have been reported upon in previous school reports. The figures for Sinclairtown relate chiefly to the playground of the Infant School and is in part accounted for by the fact that the staff are keen on first-aid work. But there is no doubt that the uneven surfaces and the worn steps at the entrances to the school are mainly responsible for the big number of accidents.

2. Major Accidents.

The total number of major accidents was 178, an increase over last year (170).

XI. CHILDREN AND YOUNG PERSONS (SCOTLAND) ACT, 1937.

(a) Probation Cases.

During the year 1938 sixty-two cases were referred by the Probation Officer, Mr. Barrie, to the medical staff for medical reports.

In last year's report figures were presented giving an analysis of the cases from the intelligence standpoint. These figures covered a period of two years (1936 and 1937) and the relative large percentage (31) of markedly backward cases (below 70 I.Q.) was commented upon.

During the past year 596 cases were dealt with (553 males; 43 females). The bulk of the offences were theft (360) and malicious mischief (161); the remainder (75) came under charges of assault, indecent offences, road offences and other offences. Of the total number of cases 216 (or 36 per cent.) required fuller investigations and in these the mental age and educational progress in school were inquired into. When analysing the resulting figures it is found that, according to the intelligence quotients, the following groups were obtained:—

- (a) 110—130 I.Q.— 5 (2·3 per cent.).
- (b) 90—110 „ —134 (62 per cent.).
- (c) 70— 90 „ — 73 (33·7 per cent.).
- (d) 70 and below—4 (1·8 per cent.).

The distribution of these cases according to the intelligence quotients is quite different from last year. It can meantime, however, be assumed that the present figures are more likely to approximate with those that will be obtained in the future. Last year's figures must be considered as peculiar and due to the fact that the large number of low-grade mentally backward cases had accumulated over a number of years. These cases are now under supervision or have been referred for institutional treatment. Unfortunately, lack of appropriate institutional accommodation is preventing adequate treatment and training being applied and the arrangements made for such cases can only be considered as makeshift and unsatisfactory.

The foregoing figures were made available by Mr. Barrie between whom and the medical staff there is close co-operation. In addition to the cases referred to the Area Medical Officers for examination and report, arrangements have also been made whereby, when found necessary, a Medical Officer is available at premises beside the "Court" to examine any cases to be sent to approved schools for the presence of any contagious or infectious condition.

(b) Boarded-out Cases.

The statutory medical examination of all boarded-out children was continued. The number of children medically examined was 39 and this necessitated 27 visits. As a result of these examinations, two children were referred for dental treatment; one was referred to the Dundee Royal Infirmary to have the tonsils removed; two children were referred to the Eye Clinic and glasses were supplied in each case. In addition advice had to be given to the guardian in connection with two cases suffering from enuresis; in a case of "nettle rash" advice was given as to diet. One child was stated to have a "weak heart" but no evidence as to this could be found by the examining doctor.

In three of the boarded-out cases the home was found unsatisfactory. The children were subsequently removed to another guardian. A boy boarded-out by Edinburgh was found to be begging at doors for "pieces" and saying he was hungry. On examination the boy was found to be undersized but with an abnormally large abdomen. Following report to Edinburgh, it was agreed to have the boy removed to hospital for more detailed examination. Two other boys were charged with stealing money from school. One of the boys was placed in an "Approved" School and as he was receiving orthopaedic treatment, the attention of the authorities was drawn to the need for further treatment.

When analysing the resulting figures it is found that, according to intelligence quotients, the following groupings were obtained:—

(a) 140-150 I.Q. (2.3 per cent.)
 (b) 110-139 I.Q. (62 per cent.)
 (c) 70-109 I.Q. (33.7 per cent.)
 (d) 70 and below (1.8 per cent.)

The distribution of these cases according to the intelligence quotients is quite different from last year. It can be seen, however, that the present figures are more likely to approximate with those that will be obtained in the future. Last year's figures must be considered as peculiar and due to the fact that the largest number of low grade mentally backward cases had accumulated over a number of years. These cases are now under supervision or having been referred for institutional treatment. Unfortunately, lack of appropriate institutional accommodation is preventing adequate treatment and training being applied and the arrangements made for such cases can only be considered as makeshift and unsatisfactory.

The foregoing figures were made available by Mr. Barrie between whom and the medical staff there is close co-operation. In addition to the cases referred to the Area Medical Officers for examination and report, arrangements have also been made whereby, when found necessary, a Medical Officer is available at premises beside the "Court" to examine any cases to be sent to approved schools for the presence of any contagious or infectious condition. It is felt that this will be of great assistance in the future.

(b) Boarded-out Cases.

The statutory medical examination of all boarded-out children was continued. The number of children medically examined was 39 and the necessitated 27 visits. As a result of these examinations, two children were referred for dental treatment; one was referred to the Dundee Royal Infirmary to have the tonsils removed; two children were referred to the Eye Clinic and glasses were supplied in each case. In addition advice had to be given to the guardian in connection with two cases suffering from eczema; in a case of "nettle rash" advice was given as to diet. One child was stated to have a "weak heart" but no evidence as to this could be found by the examining doctor.

APPENDIX I.

TREATMENT (MINOR AILMENTS).

(a) CLINIC CASES.

Condition.	Torryburn.	Blairhall.	Inverkeithing.	Crossgates.	Cowdenbeath.	Kelty.	Lochgelly.	Crosshill.	Auchterderran.	Markinch.	Burntisland.	East Wemyss.	Methilhill.	Buckhaven.	Methil.	Leven.	Cupar.	Newburgh.	Ladybank.	St. Andrews.	Tayport.	Kirkcaldy Burgh.	Dunfermline Burgh.	Totals
Clinic Visits	62	93	137	127	150	129	164	114	139	86	89	99	98	119	49	142	124	13	27	—	80	755	—	2,796
Head Vermin	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	40
Body Vermin	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	13
Ringworm (scalp)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	161
Scabies	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3
Uncleanliness and Neglect	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2,314
Impetigo Contagiosa	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1,012
Other skin conditions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	443
Otorrhoea	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	788
Eye disease (external)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	360
Ear Cases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	82
Nose and Throat Cases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	332
Other Cases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2,946
Cuts and bruises	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4,254
Septic conditions	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5,207
Accidents	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	161
Advisory Cases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	285
Tuberculin injections	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	28
Totals	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	18,347
Totals (1936-37)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	17,786

APPENDIX I.

APPENDIX I.

TREATMENT (MINOR AILMENTS).

(b) CLINIC ATTENDANCES.

	Torryburn.	Blairhall.	Inverkeithing.	Crossgates.	Cowdenbeath.	Kelty.	Lochelly.	Crosshill.	Auchterderran.	Markinch.	Burntisland.	East Wemyss.	Methilhill.	Buckhaven.	Methil.	Leven.	Cupar.	Newburgh.	Ladybank.	St. Andrews.	Tayport.	Kirkcaldy Burgh.	Dunfermline Burgh.	Totals.
Home Treatments	337	—	—	—	—	—	—	—	—	—	107	9	—	—	—	—	23	—	4	56	40	3	—	579
Head Vermin	30	—	—	—	—	—	—	—	—	—	110	—	—	—	—	—	—	—	—	—	—	1	12	153
Body Vermin	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	222	279
Ringworm (scalp)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	131	285	933
Scabies	—	137	22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	—	—
Uncleanliness and Neglect	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Impetigo Contagiosa	314	66	255	892	527	512	511	554	696	177	218	236	786	327	230	338	562	3	—	221	80	1926	3451	12,882
Other Skin Conditions	19	—	47	427	575	145	153	357	—	141	176	2	66	31	41	72	—	4	4	—	142	624	5834	8,860
Otorrhoea	109	151	405	464	220	395	356	401	264	50	180	451	408	236	156	485	200	—	—	22	—	1556	797	7,306
Eye disease (external)	136	185	887	689	127	289	183	446	205	51	228	62	739	349	66	159	208	—	—	65	—	589	799	6,462
Ear Cases	159	74	194	39	4	—	9	84	9	49	80	16	12	27	—	71	69	8	7	30	25	30	331	1,327
Nose and Throat Cases	7	174	36	28	—	302	520	488	—	10	18	1	—	—	—	5	37	12	—	—	25	10	679	1,344
Other Cases	311	537	413	563	140	166	520	488	6	160	359	148	—	—	—	90	3	3	24	—	35	2294	2599	8,890
Cuts and bruises	414	622	265	459	26	625	754	868	95	399	410	392	261	230	8	108	193	104	26	65	222	416	4502	11,464
Septic Conditions	272	395	955	620	436	488	775	958	500	273	247	361	1030	1323	29	251	770	87	8	161	116	2941	9424	22,420
Accidents	60	4	4	10	7	—	—	—	9	85	37	—	1	6	24	20	96	6	14	—	26	7	—	—
Advisory Cases	17	—	14	13	408	39	—	—	19	10	51	—	—	11	18	19	41	18	11	—	6	58	—	—
Tuberculin injections	—	—	—	389	17	334	—	92	497	—	—	—	28	32	77	92	—	—	—	—	—	—	—	—
Totals	1848	2345	3497	4593	2574	3332	3285	4262	2418	1405	2126	1669	3331	2581	691	1771	2179	245	94	564	687	10,591	28,935	85,023
Totals (1936-37)	1822	3024	4312	3942	2056	2896	4963	3952	2631	1138	2039	1484	2850	3212	—	2103	1648	337	—	698	631	12,176	28,870	86,834

APPENDIX II.

Table showing number of cases of Infectious Diseases taken from Head Teachers' attendance returns during the year 1938.

School Management Areas.	Measles.	Scarlet Fever.	Diphtheria.	Mumps.	Whooping Cough.	Other Infectious or Contagious Diseases.	Totals.
CUPAR	554	51	7	124	94	138	968
ST. ANDREWS	473	68	25	148	185	299	1198
ANSTRUTHER	145	37	1	9	81	111	384
WEMYSS	160	79	50	45	117	528	979
KIRKCALDY	567	250	23	237	117	522	1716
BEATH	446	202	102	84	26	644	1504
DUNFERMLINE	426	488	140	106	48	679	1887
TOTALS	2771	1175	348	753	668	2921	8636

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

IN

DUNFERMLINE CLINICS

FOR YEAR ENDED 31ST JULY, 1938.

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.,

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.

ROBERT WEIR, L.D.S., R.C.S., Ed.

MADELEINE G. LESLIE, 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	7854	
Number of Children—		
(1) Average No. on Register	5831	
(2) In Average Attendance	5289	

INTRODUCTION.

The total number of school children who attended for treatment at the various Clinics during the year ending 31st July 1938 amounted to five thousand three hundred and thirty-eight. Thirty-one thousand one hundred and seventy-nine treatments were given.

In addition four hundred and forty-six children of pre-school age were referred to the Clinics. The number of treatments given was two thousand two hundred and two.

These figures represent an increase of five hundred and sixty-eight new cases and five hundred and eighty-six attendances as compared with last year.

The work carried out at the Orthopaedic, Remedial and Sunlight Clinics all show an increase.

Miss Margaret Fleming's report on the training of children who suffer from speech defects and the reports of the Dental Surgeons on the year's work of the Dental Clinics are included.

ARRANGEMENTS FOR MEDICAL TREATMENT IN THE DUNFERMLINE CLINICS.

The various departments of the School Clinics 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) 1937-38.

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.	
Middle Ear Suppuration	..	41	496	
Other Conditions	..	51	210	
		—	92	706
<i>Eye and Throat—</i>				
Nasal Conditions	..	40	112	
Sore Throat	..	101	143	
		—	141	255
<i>Eye—</i>				
Blepharitis	..	21	154	
Styes	..	39	126	
Conjunctivitis	..	23	105	
Corneal Inflammation and Ulceration		—	—	
Injuries	..	5	10	
Errors of Refraction	..	1	1	
Other Conditions	..	19	94	
		—	108	490
<i>Skin (Head)—</i>				
Dirty	..	3	5	
Ringworm	..	2	222	
Impetigo	..	24	284	
Other Conditions	..	15	90	
		—	44	601
<i>Skin (Body)—</i>				
Body Vermin	..	—	—	
Impetigo	..	224	1800	
Scabies	..	19	274	
Ringworm	..	—	—	
Other Conditions	..	252	2001	
		—	495	4075
<i>General—</i>				
Septic Sores	..	588	5046	
Injuries	..	351	1731	
Other Conditions	..	660	1637	
Sunlight	..	216	2244	
		—	1815	10,658
		—	2695	16,785

RETURN OF CASES TREATED.

<i>Ear—</i>		Rosyth Clinics.	
		No. of Cases.	No. of Attendances.
Middle Ear Suppuration ..	..	23	301
Other Conditions ..	..	31	121
		54	422
<i>Nose and Throat—</i>			
Nasal Conditions ..	..	11	158
Sore Throat ..	..	71	266
		82	424
<i>Eye—</i>			
Blepharitis ..	..	14	81
Styes ..	..	70	145
Conjunctivitis ..	..	27	62
Corneal Inflammation and Ulceration		—	—
Injuries ..	..	6	8
Errors of Refraction ..	..	2	2
Other Conditions ..	..	11	11
		130	309
<i>Skin (Head)—</i>			
Dirty ..	..	4	7
Ringworm ..	..	—	—
Impetigo ..	..	29	157
Other Conditions ..	..	9	25
		42	169
<i>Skin (Body)—</i>			
Body Vermin ..	..	—	—
Impetigo ..	..	234	1210
Scabies ..	..	2	11
Ringworm ..	..	—	—
Other Conditions ..	..	317	3718
		553	4929
<i>General—</i>			
Septic Sores ..	..	708	4378
Injuries ..	..	644	2771
Other Conditions ..	..	430	962
		1782	8111
Totals—Rosyth Clinics ..	..	2643	14,300
Add—Inglis Street Clinic Totals ..	..	2695	16,700
Total No. of School Children ..	..	5338	31,100
Add—Children below school age ..	..	446	2200
Grand Total ..		5784	33,300

DISEASES OF THE EAR, NOSE AND THROAT.

As in former years children suffering from affections of the Ear, Nose and Throat were examined and treated at all of the Clinics. Those requiring more detailed examination were referred to the Inglis Street Clinic.

The Consulting Aural Surgeon attended at Inglis Street usually on the second Monday of each month during school terms.

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 affections was three hundred and sixty-nine. This amounts to an increase of forty-four new cases as compared with last year. The increase was in the number of Nose and Throat affections. There was actually a decrease of thirty-four new cases of affections of the Ear.

In addition to the above, there were thirty-nine cases of Ear, Nose and Throat affections in children of pre-school age—an increase of eleven.

The number of attendances for treatment amounted to :—

School Children	1807
Children of pre-school age	169
	1976

The following table shows the distribution of new cases :—

	Inglis Street Clinic.	Rosyth Clinics.	Pre-School Age.
Ear	92	54	32
Nose and Throat	141	82	7

I. Affections of the Ear.

One hundred and forty-six school children attended at Dunfermline and Rosyth Clinics on account of diseases of the ear. This represents a decrease of thirty-four cases as compared with last year. The decrease was noted at all of the clinics in Dunfermline and Rosyth. In this connection it is interesting to note that during the last two years the number of nose and throat cases attending the Clinics has been comparatively small.

OTITIS MEDIA.—Only sixty-four cases of otitis media were treated during the year. This represents a decrease of twenty-nine as compared with last year.

The figures for the two types of the affection are :—

Acute Otitis Media	23
Chronic Otitis Media	41

The marked fall in the number of cases of Middle Ear Suppuration is very satisfactory, particularly as the decrease occurred at practically all of the Clinics and in both types of the disease. That the year has been a healthy one in respect of Middle Ear Suppuration is shown in the number of treatments which was only seven hundred and ninety seven as compared with one thousand four hundred and twenty in 1937.

There were twenty-two fewer cases of Chronic Otitis Media than last year. Most of the cases were of a somewhat mild type, although several were complicated by Furunculosis and Impetigo. Debility was a cause of recurrence in some. A good many of these were treated by Artificial Sunlight or a visit to Bandrum Country Home.

INFLAMMATION OF THE EXTERNAL ACOUSTIC MEATUS.—Twenty three cases of furunculosis of the external auditory canal were treated. Several of these were complicated by Impetigo about the external ear and were more severe than usual. The total number of cases is about the same as last year.

OTHER AFFECTIONS OF THE EAR.—These include cases of deafness and earache, most of which were of a temporary nature. There were eleven cases of hard wax and foreign bodies in the ear. None of these were of a severe nature.

II. Affections of the Nose and Throat.

Two hundred and twenty-three new cases of diseases of the nose and throat in school children were treated during the year. This represents an increase of seventy-eight new cases over last year.

The following table gives the nature and distribution of the cases in the various groups :—

	Inglis Street Clinic.	King's Road Clinic.	Park Road Clinic.
<i>Nose—</i>			
Catarrh	11	2	1
Other Conditions ..	29	5	3
<i>Throat—</i>			
Acute Sore Throat	12	12	5
Other Conditions ..	89	35	19

NASAL AFFECTIONS.—There was only a trivial increase in the number of these cases which were of the usual type. There was however, a marked increase in the number of treatments of cases of Nasal Catarrh.

THROAT AFFECTIONS.—An outstanding feature of the year's work was the very marked increase in the number of cases of throat affections.

ACUTE SORE THROAT.—Twenty-nine of these cases were treated as compared with eighteen last year. Many of them were cases of acutely inflamed septic tonsils. . . .

TONSILS AND ADENOIDS.—One hundred and six cases of enlarged tonsils with or without adenoids were treated. This represents an increase of thirty-eight as compared with last year. Last year's figures also showed an increase of sixteen cases over those of the previous year. There was an increase in the number of cases recommended for operation.

CHILDREN OF PRE-SCHOOL AGE.—Thirty-nine 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	21
Other Affections of the Ear	11
Affections of the Nose	1
Affections of the Throat	6

There was an increase of four cases of Middle Ear Suppuration and of nine other affections of the ear.

The total number of attendances of children of pre-school age was one hundred and fifty-six.

DEFECTIVE SPEECH CLINIC.

Report by Miss Margaret Fleming.

During the year the following cases were dealt with :—

Stammerers	14
Backward Speech and Minor Speech Defects	22
Cleft Palate	2
No. of Attendances	797

The number of children attending the Clinic has just been about the same as last year. Stammering cases have been fewer, but the number of children sent in with marked difficulties in articulation has increased. The teachers in the School Infant Departments avail themselves of the help the Clinic offers, and it is good to see the interest taken by the parents. Some of these children are quite unintelligible when they first come, but with parents attending at the Clinic throughout their lessons and carrying on the good work at home, quick progress is made.

Of the two cleft palate cases, one attended and made good progress until a change of school prevented her from continuing. The other who came into the Clinic in January has already greatly improved the quality and distinctness of her speech.

Regarding the cases attending for treatment for stammering, three of these have also been attending and doing good work in the ordinary elocution classes at the Music Institute. Three others have made

utch good progress as to warrant their discharge, and two of them are going on to the elocution classes where they will still be under observation.

One would like to see greater personal interest being shown by parents of the older stammerers. One realises the difficulty of regular forenoon visits at the Clinic for the average mother, but sufficient attendance to enable her to take an intelligent interest in the treatment and the home practice it entails would be of tremendous value. The testing time is not at the beginning of the cure, when interests are fresh and progress is quick, but later when novelty has worn off and it is a case of encouraging and fostering a young habit until it is strong enough to oust the old. It is then that the parent must see to the daily practice being maintained, and every careless relapse into old ways kindly but firmly checked. So often one finds it is left entirely to the young pupil's own responsibility as to whether he practises or not. It is not to be wondered at—youth being what it is—that progress in the later stage sometimes hangs fire, and disappointing set-backs occur. It was interesting to hear it said by a lad—one of the earliest stammering cases treated at the Clinic, now in a steady job and proud to show off his speech without a trace of stammer—"I could have got over it sooner, but when you're young you're careless." It is just this carelessness of youth that is the greatest bar to speedier recovery, and here the kindly sympathetic firmness of the adult is well nigh essential.

MARGARET FLEMING.

REPORT BY DOUGLAS GUTHRIE, M.D., F.R.C.S., CONSULTING AURAL SURGEON.

No one who has visited the Inglis Street Clinic at regular intervals during the year, as I have done, could fail to be impressed by the satisfactory results achieved there in the treatment of diseases of the ear, nose and throat. The success which attends the regular and thorough conservative treatment of such affections is very striking. This is especially noteworthy in affections of the ear, which respond so favourably to systematic treatment.

FEWER CASES OF EAR SUPPURATION.—The most obvious fact which is shown by the figures of Dr. Emslie Smith's report is that the number of nose and throat affections has risen, as compared with the previous year, while the number of ear affections has fallen. The diminution of ear cases concerns entirely cases of middle ear suppuration, and of those, the decrease chiefly concerns chronic cases—the chronic "running ear"—which is such a common disease of childhood.

This smaller incidence of chronic otitis is partly a tribute to the work of the clinic, because efficient treatment during the acute stage goes far to prevent chronicity. Partly, however, the smaller number of cases of chronic otitis is due to influences still imperfectly understood.

such as absence of epidemic influenza, climatic conditions, improved nutrition. The effect of nutrition is probably more far reaching than we imagine at present, and the influence of vitamins upon infections of the ears, nose and throat is a subject well worthy of further investigation.

INCREASE OF TONSIL AND ADENOID CASES.—As regards the increase of nose and throat affections, and especially of cases of enlargement and infection of tonsils and adenoids, this corresponds to a general increase which has been noted in other clinics throughout the country. It is difficult to say why increase of tonsil and adenoid cases should be accompanied by decrease of ear suppuration. This observation, which has been previously made, appears to receive confirmation from the figures of the present report. Very probably, however, the increase of tonsil and adenoid cases is the result of a reaction from the phase of non-operative treatment to which I referred in last year's report. Not every case requires operation, and the selection of suitable cases demands careful judgment. There is hardly an operation which yields such excellent results in cases which have been carefully examined and watched and in which, eventually, operative treatment has been advised.

THE "SPEECH" CLINIC.—Miss Fleming's report shows very conclusively how effectively disorders of speech may be treated. This clinic was a pioneer effort which has proved very successful and which has received the approval and co-operation of parents, of medical men and of teachers.

(Signed) DOUGLAS GUTHRIE, M.D., F.R.C.S.

EYE CLINIC.

In last year's report it was noted that there had been a considerable improvement in the incidence of eye affections in school children during the previous two years. The figures for the year under review show that this improvement has continued, although to a less extent. There were no epidemic of eye diseases, and the bulk of the cases were of a mild character. The average number of treatments per case was only 3.3.

Two hundred and thirty-eight new cases in school children were treated at the Clinics in Dunfermline and Rosyth. The number of attendances was seven hundred and ninety-nine.

In addition to the above, sixteen infants and children of pre-school age received treatment and made forty-six attendances.

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.	Park Road School Age.
Blepharitis,	4	21	8	6
Styes,	7	39	33	37
Conjunctivitis,	4	23	11	16
Injuries,	—	5	4	2
Refractions and Other Conditions,	1	20	7	6
Total,	16	108	63	67

BLEPHARITIS.—The number of cases remained much the same as last year.

STYES.—As compared with last year there was a decrease of thirteen cases in school children, but an increase of seven in children of pre-school age. The greatest decrease was in Park Road School.

CONJUNCTIVITIS.—There was a slight decrease in these cases. Only three cases of Phlyctenular Conjunctivitis were treated.

OTHER CONDITIONS.—These were of the usual type.

Defective Vision.

The routine examination of school children for errors of refraction is carried out by the School Medical Inspection Staff. Several cases were examined during the year in connection with the work of the Clinics.

SKIN DISEASES.

The number of new cases of skin affections in school children treated at all of the Clinics amounted to one thousand one hundred and thirty four. This represents an increase of sixty-seven over last year's figures. There were nine thousand eight hundred and four attendances. The average number of treatments per case was 7.7.

The number of new cases in infants and children of pre-school age was one hundred and eight, and the number of treatments six hundred and thirteen. These figures represent an increase of twenty-three new cases and one hundred and seventy treatments.

GROUP I.—IMPETIGO CONTAGIOSA.—This is by far the most common skin affection of children. Its prevalence varies a good deal from time to time, but the numbers treated in each of the last three years have been greater than in any since 1931.

In the year under review, five hundred and eleven new cases in school children were treated—an increase of fifty over last year. The number of attendances was 3451.

In addition to the above, seventy-two children of pre-school age were sent for treatment—an increase of seventeen over last year. The attendances were 439.

Not only was the number of cases of primary impetigo greater, but it was also noted that the disease occurred as a complication in other affections.

There was a slight increase in the number of cases of impetigo of the head. This is always a more severe type of the disease, and is often associated with vermin.

The disease was most prevalent in the months of September, October and November.

It is not always easy to explain an increase of this affection. Many factors enter into the problem ; but it is a disease spread by contact, and early recognition and treatment is perhaps the most effective measure in controlling its spread. In this the help of parents and teachers is of great importance. They are in a position to recognise the first signs and to have early treatment carried out. Many do so with commendable promptitude, but it would be well if more parents recognised the familiar crusts and scabs as a warning, for the disease has an adverse influence on a child's health in many ways.

GROUP 2.—RINGWORM OF THE HEAD AND BODY.—It is satisfactory to record that only two cases of ringworm of the scalp were treated and that there were no cases of ringworm of the body. One of the cases has been under treatment and observation for some time.

GROUP 3.—WARTS, CHILBLAINS AND CORNS.—The number of new cases was :—Warts 203, Chilblains 44, Corns 29. It is interesting to note the considerable decrease in the number of cases of warts, particularly in the Old Burgh. The cases themselves were less severe than usual with the result that 1143 fewer dressings had to be given than last year. It may be recalled that a few years ago the number of cases of warts in school children was exceptionally high.

GROUP 4.—ALL OTHER CONDITIONS :—

(1) VERMIN.—Only seven cases of nits and pediculi of the head were sent for treatment during the year. This is much the same as last year.

(2) MOLLUSCUM CONTAGIOSA.—Twenty-one cases were treated. In last year's report it was noted that there had been a steady decrease in the number of these cases during the last four years. This year's figure shows a decrease of one.

(3) SCABIES.—There was a decrease of eleven of these cases as compared with last year. The number treated was twenty-one.

CHILDREN OF PRE-SCHOOL AGE.—One hundred and eight infants and children of pre-school age were referred to the Clinics for treatment—an increase of twenty-three. Impetigo accounted for the greatest increase.

The following table shows the diseases and the numbers treated :—

Impetigo	7
Scabies	3
Other Conditions	10
	10

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 Miss Leslie jointly.

DENTAL EXAMINATION.

The eight primary schools in Dunfermline, as in former years, were systematically inspected. The two secondary schools are still not dealt with. All the children in the primary schools, whose ages extend usually from 5 years to 12 years, were examined. The children in the Special School attached to McLean School accounted for several children who were in higher age groups, namely, from 13 years to 15 years. For the purposes of this report, however, these have all been included in the 13-year group.

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,	316	45
" 6 "	370	125
" 7 "	386	165
" 8 "	348	153
" 9 "	373	187
" 10 "	390	201
" 11 "	463	253
" 12 "	176	90
" 13 "	75	37
	2897	1256

These figures show that 43 per cent. of the children examined have sound teeth. This is a very definite increase from last year. As in previous years, these children are brought to the clinic for prophylactic treatment. The teeth are cleaned and any suspicious fissures in the molars are cut out and filled. This latter operation is done in those mouths where it is seen, from the number of fillings already present that the teeth are susceptible to caries.

The following figures show the general state of the teeth as disclosed by examination, and the numbers accepting and refusing treatment :—

	1937-38.	Per cent.	1936-37.
No. Examined,	2,897	—	—
No. with Sound Dentition, ..	1,256	43·03	34·48
No. requiring Treatment, ..	1,641	56·97	66·86
No. in 3 accepting Treatment at Clinic, ..	1,193	72·7	77·48
No. in 3 refusing Treatment at Clinic, ..	448	27·3	21·76

The actual number of children refusing treatment is practically the same as last year—448 in place of 442. The number of those requiring treatment has, however, fallen, and so the percentage of refusals seems higher. As pointed out above, the whole of the 2,897 children examined, less the number refusing (448), are brought to the Clinic for treatment.

In the following table the 2897 children are classified according to the number of decayed teeth in the mouth which require attention :—

No. of Decayed Teeth.	No. of Children.		
	Boys.	Girls.	Total.
0	640	616	1,256
1	264	248	512
2	230	231	461
3	115	119	234
4	81	75	156
5	25	41	66
6	31	30	61
7	15	13	28
8	12	19	31
More than 8	44	48	92
	1,457	1,440	2,897

DENTAL TREATMENT.

During the year 2,676 children attended the Clinic for treatment and made 4,316 attendances, an average of 1·6 attendances per child. This is a decrease of three hundred and fifty in the number of children attending, and a decrease of eighty-six in the number of attendances made. 2,175 children attended as the result of the systematic inspection and made 3,338 attendances. 501 children attended as casual cases and made 978 attendances. 135 of these casual cases were children of pre-school age, while the remainder came from the secondary schools—High and Queen Anne.

The following figures show the treatment carried out throughout the school year :—

			Temporary Teeth.	Permanent Teeth.
<i>Extractions—</i>				
Without Local Anaesthesia,	..	..	657	—
With Local Anaesthesia,	..	..	1207	380
<i>Fillings—</i>				
Cement,	..	..	137	33
Amalgam,	..	..	164	1783
Silicate,	..	..	—	596
Root Fillings,	..	..	—	33
Crowns,	..	..	—	11
<i>Other Operations—</i>				
Silver Nitrate Treatment,	..	..	2527	68
Dressings Inserted,	..	..	—	529
Scaling and Cleaning,	..	..	—	1061
Minor Regulation Visits,	..	..	—	13

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 :—

	1937-38.	1936-37.
Teeth Extracted,	2144	2480
Fillings Inserted,	2746	3542
Porcelain Crowns,	11	14
Teeth Treated with Silver Nitrate,	2595	2640
Dressings Inserted,	529	534
Scaling and Cleaning,	1061	891
Minor Regulation Visits,	13	26

REPORTING ON THE WORK AS SCHOOL DENTIST IN ROSYTH MISS LESLIE STATES :—

DENTAL EXAMINATION.

Commencing in September the following schools were inspected systematically :—King's Road, Park Road and the Roman Catholic Schools. The age groups examined were from 6 years to 13 years inclusive in the first two schools stated, and from 5 years to 13 years in the last named. It is now intended to extend examination and treatment to 5-year old children in all three schools. It has been observed that dental decay is more extensive among the children examined at Rosyth than among those of similar age groups attending the clinic at Dunfermline. This condition is probably due to the maritime occupation of many of the parents involving continuous migration.

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	11	4
" 6 "	105	11
" 7 "	150	15
" 8 "	147	35
" 9 "	173	42
" 10 "	150	51
" 11 "	145	32
" 12 "	65	22
" 13 "	12	—
	958	212

These figures show that 22·13 per cent. of the children examined had sound dentitions.

The following figures show the general condition of the teeth as ascertained by examination; also the number accepting and refusing treatment:—

	No. Examined	Per cent.
No. Examined	958	—
No. with Sound Dentition	212	22·13
No. requiring Treatment	746	77·87
No. in 3 accepting Treatment at Clinic	661	88·61
No. in 3 refusing Treatment at Clinic	85	11·39

As mentioned before these figures show that a much higher percentage require dental treatment compared with the Dunfermline schools. It is hoped, however, that in spite of the more temporary nature of residence of the bulk of the population, to improve this state of affairs. It is interesting to note that the percentage refusing treatment is only about half that in the Burgh, i.e. 11·39 per cent. as compared with 22·52 per cent.

In the following table the 958 children are classified according to the number of decayed teeth in the mouth:—

No. of Decayed Teeth.	No. of Children.		
	Boys.	Girls.	Total.
0	124	88	212
1	94	76	170
2	103	78	181
3	73	63	136
4	41	54	95
5	29	39	68
6	22	19	41
7	10	5	15
8	5	5	10
More than 8	13	17	30
	514	444	958

DENTAL TREATMENT.

During the year 945 children attended the clinics, making 159 attendances, showing an average of 1.7 attendances per child. The figures include 791 children who attended as the result of systematic inspection, and 154 who attended as casual cases. These casual cases were drawn from King's Road School and from children of pre-school age. 160 attendances were made by the pupils from King's Road, and 43 attendances by the children of pre-school age.

The following figures show the treatment carried out throughout the year :—

	Temporary Teeth.	Permanent Teeth.
<i>Extractions—</i>		
Without Local Anaesthesia, ..	246	—
With Local Anaesthesia, ..	601	120
<i>Fillings—</i>		
Cement,	2	9
Amalgam,	87	795
Silicate,	—	101
Root Fillings,	—	4
Porcelain Crowns,	—	1
<i>Other Operations—</i>		
Silver Nitrate, Treatment, ..	598	51
Dressings inserted,		114
Scaling and Cleaning,		397

The total amount of treatment throughout the school year was follows :—

Teeth Extracted,	9
Fillings Inserted,	9
Teeth treated with Silver Nitrate,	6
Dressings Inserted,	114
Scalings and Cleaning,	397

DEFORMITIES AND OTHER CONDITIONS TREATED AT THE REMEDIAL CLINIC.

The Remedial Clinic was one of the first clinics established by the Carnegie Dunfermline Trustees, and it is satisfactory to find that it still continues to fulfil the useful purpose of providing treatment by massage and remedial gymnastics to children suffering from physical defects.

The records for the last two years show an increasing activity in the work of the clinic. This is to a considerable extent the result of the recent opening of the Orthopaedic Clinic, as these two clinics are closely associated.

The treatment by massage and medical gymnastics, radiant heat and Faradic electricity, is given by the Senior Women Students of the Dunfermline College of Physical Training, who work under the

supervision of Miss Owtram. On admission each case is examined and a course of exercises arranged according to the particular requirements of the case.

In addition to the treatment of physical defects, another branch of the work consists in the correction of cases of faulty posture which might result in subsequent deformity.

Suitable cases attending the Clinic are from time to time seen by Mr. W. A. Cochrane, Surgeon in charge of the Orthopaedic Clinic, and most of the cases of local children on discharge from Fairmilehead Orthopaedic Hospital are sent to attend the Remedial Clinic for further treatment.

WORKING ARRANGEMENTS.—The Clinic is open from 4.30 to 5.30 p.m. on Mondays, Wednesdays and Fridays, throughout the College year.

Cases are eligible for admission only on the recommendation of their own family doctor.

Artificial Sunlight is given on Mondays to those children who would benefit by it and who are attending the Remedial Clinic.

ATTENDANCES.—During the year one hundred and fifty-six cases were admitted. The total attendances was 4024. This represents an increase of eleven new cases and fifty-six attendances. The average number of treatments per case was approximately 25.8.

DEFECTS TREATED.—In the following table the cases are grouped under the headings of their major defect only, although many had to be treated for other minor defects also :—

	No. of Cases.
Postural Round Shoulders	12
Antero-Posterior Curvature of the Spine	24
Lateral Curvature of the Spine	5
Paralysis	17
Flat Foot	32
Club Foot	6
Sprains, Fractures and Injuries	25
Rickets and Debility	5
Other Conditions	30
	156

CURVATURE OF THE SPINE.—The cases are grouped as follows :—

ROUND SHOULDERS (12 cases).—These cases were for the most part children whose parents had noticed that they were becoming round shouldered and whose general posture was poor, but who did not show any spinal curvature, or only a trivial amount which they could easily correct. They were admitted for preventive treatment. General debility or debility following an illness was a cause in many of the cases, and Artificial Sunlight and other general treatment was of

value in dealing with them. The results were good. Nine of them were noted as cured or greatly improved.

KYPHOSIS (13 cases).—Of these, eight were considered due to continued bad posture and debility. Four of them were due to asthma. Three of them were discharged cured, and five showed great improvement.

KYPHO-LORDOSIS (7 cases).—This is usually a more severe type of antero-posterior curvature and more difficult to treat, but the majority showed satisfactory improvement.

LORDOSIS (4 cases).—These did well.

SCOLIOSIS (5 cases).—Four of these cases were of simple postural type due to debility.

PARALYSIS (17 cases).—There were six cases of Infantile Paralysis, four of Post-Diphtheretic Paralysis, three of Birth Paralysis and two of Spastic Paraplegia.

Eight of these children were examined by the Orthopaedic Surgeon and three of them were seen a second time.

Most of the more serious cases of Paralysis require very long continued treatment to get the best results. As usual the Post-Diphtheretic cases did well.

FLAT FOOT (32 cases).—This is an increase of five cases as compared with last year. Debility was again noted as a very common factor in the causation of the trouble. The results were satisfactory. Twelve of the cases were noted as cured or greatly improved during the year.

CLUB FOOT.—Six cases were treated during the year. Of these four were seen by the Orthopaedic Surgeon and two underwent successful operations. Several of these cases of club foot have attended the clinic for long periods, as it is advisable to keep them under observation during the years of active growth.

SPRAINS, FRACTURES AND INJURIES (25 cases).—Of these, six were fractures, three dislocations, and the others, cases of sprains, contusions and synovitis.

Most of the cases were discharged during the year.

RICKETS.—Four cases of rickets with curvature of the tibiae were treated.

OTHER CONDITIONS.—This group includes cases of Knock Knee, Hallux Valgus (4), Debility (4), Rheumatism (3), Torticollis, Hammer Toe (2), Asthma, Webbed Fingers, Congenital dislocation of the Hip, and Periostitis.

Nine of the cases attending the Remedial Clinic were admitted to Fairmilehead Hospital, and on seven of them successful operations were performed during the year.

ORTHOPAEDIC CLINIC.

These clinics are conducted by Mr. W. A. Cochrane, Chief Surgeon the Princess Margaret Rose Hospital, Fairmilehead. They provide the examination and treatment of children suffering from physical defects, who require orthopaedic care in addition to what can be done for them by massage and other methods at the Remedial Clinic.

They also provide opportunity for consultations regarding the needs of particular cases between the family doctors and the Orthopaedic Surgeon. This advantage has been freely made use of and has greatly facilitated the work.

The clinics were first started in December 1935, and their history has been one of steady development.

The outstanding feature of this year's work was the remarkable increase in the number of cases. Three clinics were held. At these thirty-three cases were examined, and thirty-four old cases re-examined, making a total of sixty-seven examinations. Last year the total number of examinations was forty-seven.

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.
Infantile Paralysis	1	3
Other Paralysis	2	2
Pseudo-Hypertrophic Muscular Dystrophy	1	1
Flat Foot and Hallux Valgus	3	5
Club Foot	1	5
Hammer Toe	3	1
Bow Legs and Knock Knee	4	4
Coxa Vara	1	0
Dislocations	1	1
Arthritis	0	1
Osteomyelitis	1	1
Fractures	1	2
Spinal Curvature	4	0
Tubercular affection of Joints	4	7
Tubercular affection of Spine	1	1
Torticollis	3	0
Deformity	2	0

Sixteen of the cases were admitted to Fairmilehead Hospital, and five to another Hospital during the year, where successful surgical treatment was carried out.

Treatment by various orthopaedic methods was advised in the case of the other children who were seen at the clinics.

The link between the Remedial and Orthopaedic Clinics is a close one. Of the cases examined at the Orthopaedic Clinics, thirty-four of them were already attending or were referred to the Remedial Clinic for massage and treatment by other physical methods.

Debility and Malnutrition.

This Clinic was started for the examination of children who appear to be unduly run down in health. The number of these cases has been decreasing in recent years, and although there was a slight increase this year as compared with last, the numbers are still comparatively small.

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	15
Poor resistance to septic infection with frequent attacks of boils, sores and septic skin affections	29
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	10
Rheumatism	7
Septic Tonsils and Otorrhoea	8
Rickets	4
Convalescent after recent illness	18
Intestinal Worms	2
Other Conditions	14

Malt Extract, Cod Liver Oil and Artificial Sunlight proved of great value in the treatment of these cases. Many of them were transferred to Bandrum Country Home, where the open air life, abundance of food and rest, worked wonders in restoring them to better health.

Artificial Sunlight Clinic.

This Clinic remains open throughout the year, except during the month of August and part of July.

Most of the treatment is by a weekly general exposure of the body to a long flame Carbon Arc lamp, but local applications from a Mercaptan Vapour lamp are given in suitable cases.

No hard and fast rules can be laid down for the length of exposure. Many factors enter into the question, the age, the type of child, the susceptibility of the skin to sunburn and tanning, to mention only a few. Individuals vary greatly in their reaction to Ultra Violet light, but in general it may be said that children do best on small or moderate doses, and that overdosage, as sometimes happens in indiscriminate sun bathing, is harmful.

WORKING HOURS.—The "Sunlight" Clinic is open at the following hours—Boys, on Tuesdays at 11 a.m., Girls, on Thursdays at 11 a.m. Children living in Rosyth and other outlying districts, on Tuesdays afternoons at 3 p.m. Children attending the Remedial Clinic, on Mondays at 4 p.m.

ATTENDANCES.—During the year, two hundred and seventy-eight children were treated, viz.:—

<i>School Children—</i>					
Boys	..	..	..	..	126
Girls	..	..	..	..	90
<i>Infants and Children under School Age—</i>					
Boys	..	..	..	..	31
Girls	..	..	..	..	31
					278

The number of treatments given was two thousand eight hundred and forty, of which five hundred and ninety-six were to children under school age. The average number of treatments per case was 10·2.

RESULTS.—Experience in the working of this Clinic leaves no doubt on one's mind as to the value of Artificial Sunlight given in suitable doses in the treatment of children suffering from many forms of debility. All cases do not respond equally, but the gain in weight and improvement in eating, sleeping and general health is in a large number of cases most marked. This improvement is often an important factor in the clearing up of some underlying morbid condition.

Weekly records of the weights of the children were kept, and the results classified on the lines of former years.

The cases treated in school children are divided into the following groups:—

DEBILITY AND MALNUTRITION.—This group consists of children in poor general health, who are not thriving or normally gaining in weight and strength from various causes, such as previous illness, adverse home conditions, unhygienic surroundings, etc. It also includes children classed as having a pre-disposition to tubercular disease and children of a nervous temperament.

In this group twenty girls and thirty-six boys were treated. Twelve cases were discharged "cured" and twenty-six were noted as "greatly improved." Only eight cases showed no improvement.

The results as measured by the gain in weight were also encouraging. Exclusive of the cases of children convalescent from recent illness, whose recovery might be expected, fourteen girls suffering from debility and malnutrition received an average of 14·2 treatments, and gained an average of 3·14 lbs., and twenty-four boys, similarly affected, received an average of 14·12 treatments, and showed an average gain of 2·62 lbs.

CONVALESCENTS.—Eleven boys and three girls, who were run down in health on account of recent illness, were sent for treatment. They did well, more than half of them being discharged cured.

TUBERCULAR AFFECTIONS.—Fourteen cases of Tubercular affections were treated. Of these eleven were suffering from affections of the glands (chiefly of the neck), and some of them with discharging tubercular sinuses. Seven of the cases showed gains of from 3 to 8 lbs. in weight.

Some of these cases have been under treatment for a long period. Exposure to a Mercury Vapour lamp was used in several of the cases.

BRONCHITIS.—Many of these cases were of the frequently recurring type. Thirteen boys received on an average 12.61 treatments, and showed an average gain of 2.08 lbs. Seven girls received an average of 10.71 treatments, with an average gain of 2.42 lbs. Artificial Sunlight appears to be very effective in this class of case, and practically all of the cases treated responded well. Thirteen of them were noted as "cured" or "greatly improved." Several had only been under treatment for short periods.

FREQUENT COLDS.—Six of these cases were treated. The results in those who attended long enough were encouraging, and the gains in weight satisfactory.

ASTHMA (7 cases).—It is not easy to assess the value of Sunlight in Asthma. It does not cure the affection, but several of the cases had been previously treated and returned, time and again, convinced that their attacks were less frequent and severe when they remained under treatment.

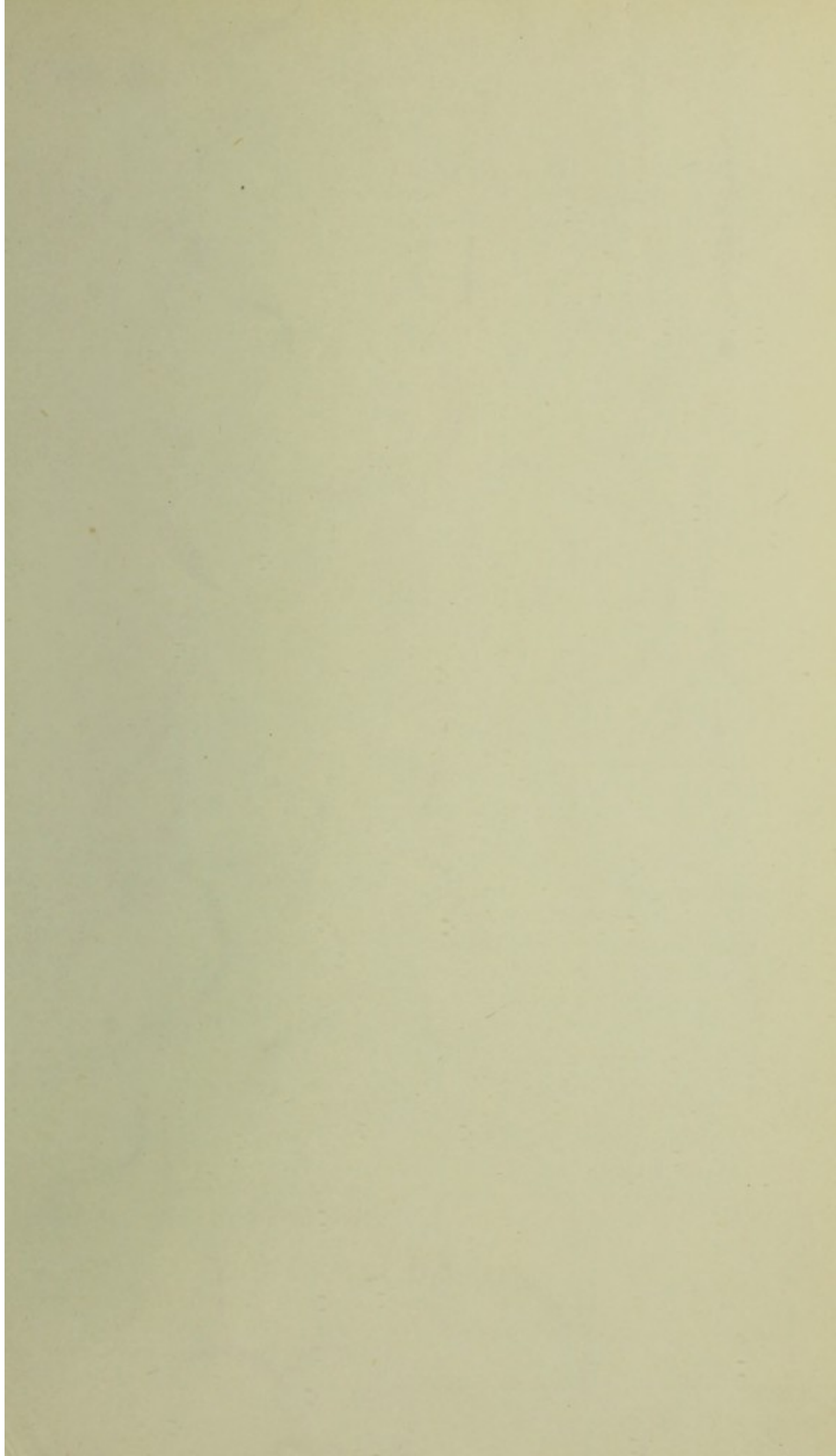
SEPTIC CONDITIONS.—Sunlight and Ultra Violet light has given good results in the treatment of Boils (9 cases), Septic Sores (17 cases) and Impetigo (16 cases). The cases of Septic Sores and Impetigo treated were for the most part those in which the condition was not improving satisfactorily by ordinary methods. Debility was frequently present as a cause or effect of the trouble. Under Ultra Violet or Sunlight, the septic conditions rapidly cleared up in practically all of the cases. The increase in weight of these cases is of interest:—

		Average No. of Treatments.	Average Gain in weight.
<i>Septic Sores</i> —			
Girls—7	.. .. .	9.43	1.28 lbs.
Boys—10	.. .. .	8.7	2 lbs.
<i>Impetigo</i> —			
Girls—11	.. .. .	7.54	2 lbs.
Boys—5	.. .. .	5.4	1.2 lbs.

INFANTS AND CHILDREN OF PRE-SCHOOL AGE.—Thirty-one boys and thirty-one girls were treated for various affections such as debility, colds and bronchitis, sores and impetigo. There were eight cases of Rickets.

CLINICAL LABORATORY.

During the year, one hundred and fifty laboratory examinations were carried out in connection with the work of the Clinics and Bandrum. Of these, one hundred and twenty-seven were cultures in connection with the examination of swabs from ear, nose and throat cases.



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