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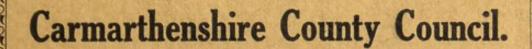
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# Annual Report

OF THE

# COUNTY MEDICAL OFFICER OF HEALTH

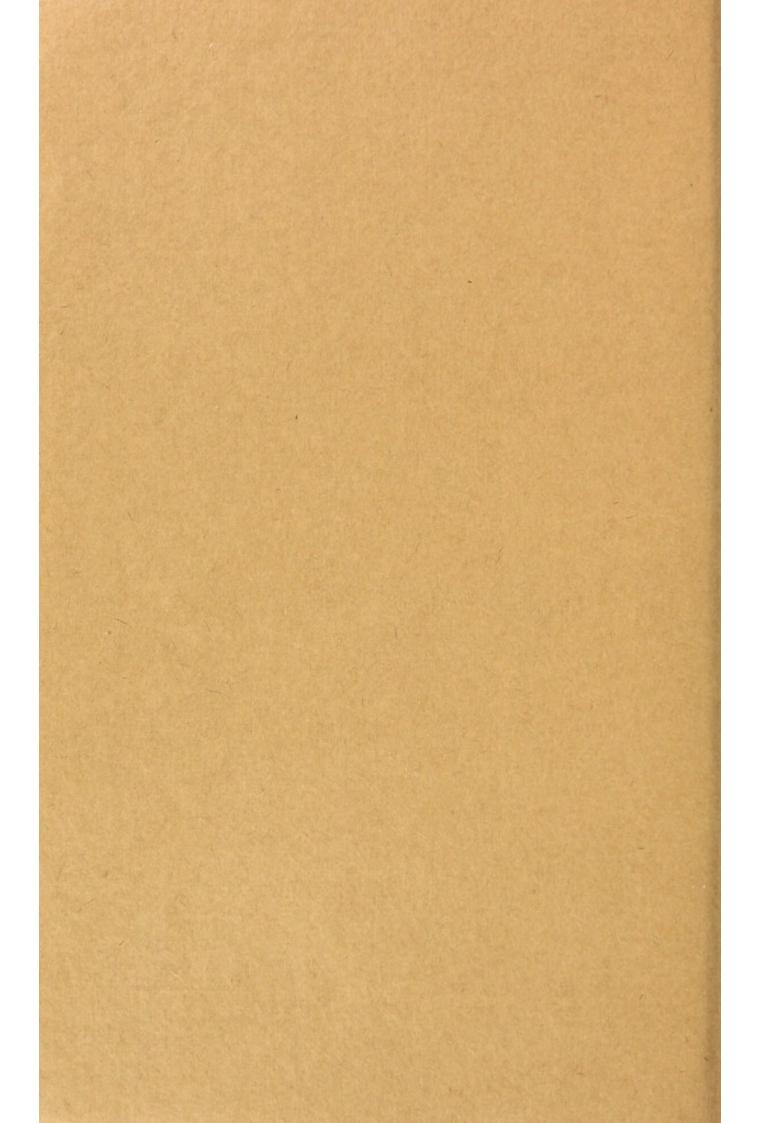
FOR

THE YEAR 1925

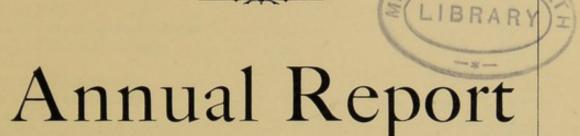
BY

# D. ARTHUR HUCHES, D.P.H. (LOND.)

CARMARTHEN:
PRINTED BY W. SPURRELL & SON
1926.



# Carmarthenshire County Council.



OF THE

## COUNTY MEDICAL OFFICER OF HEALTH

FOR

THE YEAR 1925

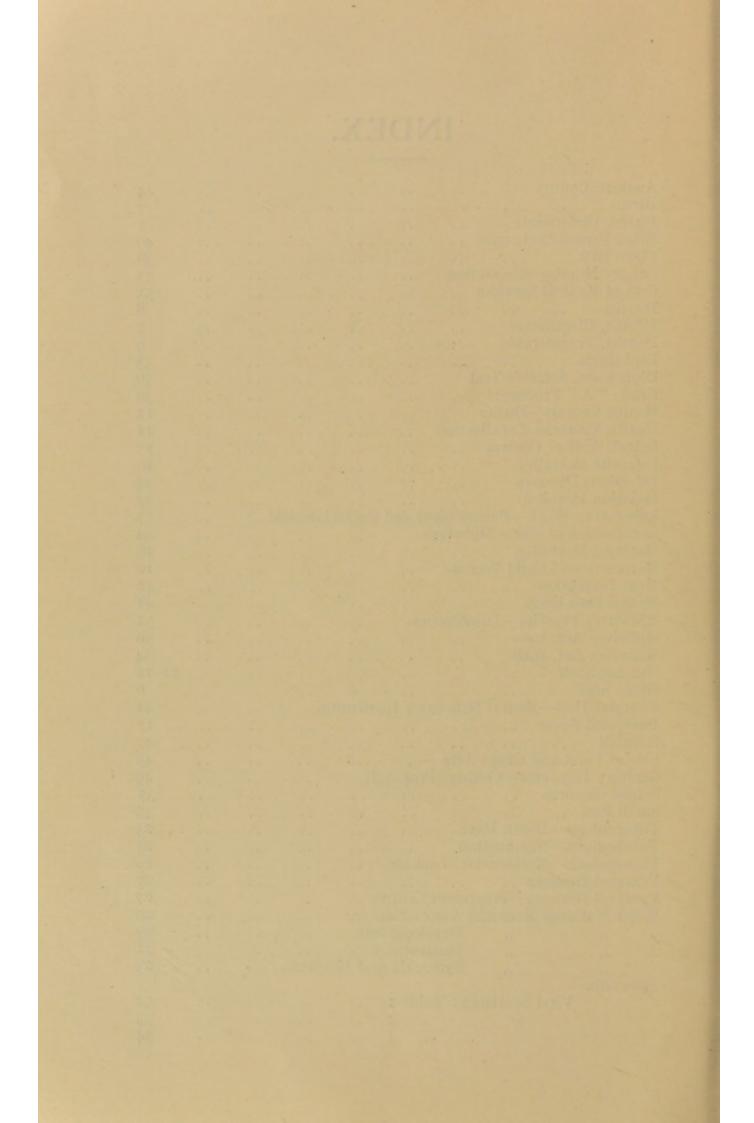
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### Public Health Department, County Offices, Carmarthen.

September, 1926.

# To the Chairman and Members of the Carmarthenshire County Council.

My Lord, Ladies and Gentlemen,

I have the honour to present herewith the Annual Report on the health of the Administrative County of Carmarthen for the year 1925.

This Report, in accordance with instructions, has to partake of the nature of a survey report, to be rendered normally quinquenially in contradistinction to the "ordinary" or "interim" reports.

The Report for 1920, according to the Ministry's circular relating to the contents and arrangements of the Annual Reports of the Medical Officers of Health, was regarded as the first of the series, and this constitutes the second.

A Survey Report resolves itself into

I. The compilation of comparison tables of statistics relating to the five years under consideration, viz., 1921, 1922, 1923, 1924, and 1925.

This can only give the face value of things. This in itself shows improvement and progress, but it falls short of expressing all the progress, inasmuch as a lot of spade work in connection with schemes not yet crystallized (indeed, had it not been for the economic stress they would have long ere this been realized) is not shown; besides the amount of propaganda work done, with its far-reaching benefits, is impossible to express in terms of figures or in terms of money or manufactured goods in an industrial sense.

2. Interpretation of figures and the use of the pen. For many years past I have strongly maintained and advocated that the rôle of the public health staff must partake more and more of public educators. Esoteric knowledge, i.e., religiously confining knowledge to its particular department, is an idea of the past and the order of the present, and more and more so in the future will have to be "Exoteric," that is, the liberal diffusion of all knowledges. A French philosopher truly remarked that "we learn to live when life is nigh well spent." Our great need is to learn how to live, and that from as early life as possible, to attain that ideal expressed by Browning when he said in effect that we should live until we fall like ripe fruit into earth's lap, and not be plucked immaturely and harshly unto death.

How many lives annually are prematurely and harshly taken away or rendered partially or wholly ineffective through want of knowledge?

Money spent wisely on propaganda work must necessarily bring a good substantial return sooner or later.

Public Health work or the practice of Sanitary Science covers a very wide field of work. It embraces almost every department of Science and Art, and especially I would respectfully submit moral and spiritual forces.

There is a place for all in the kingdom of Preventive Medicine, and indeed, until we realize this, and secure the co-operation of all, we shall not attain that standard of health, physique, and mental capacity indispensable to national efficiency and international obligations.

With these introductory remarks I would ask your kind perusal of the figures and observations hereinafter submitted.

I have the honour to be, my Lord, Ladies and Gentlemen, Your obedient Servant,

> D. A. HUGHES, County Medical Officer.

### PUBLIC HEALTH DEPARTMENT.

### OFFICE STAFF.

County Medical	Officer	 	 	Dr. D. A. Hughes.
Senior Clerk		 	 	Ivor A. Evans.
Junior Clerk		 	 	Emrys Evans.

The Senior Clerk was transferred to this department on the appointment of the 1st M.O.H. for the County. The Junior Clerk was appointed in February, 1922.

### GENERAL STATISTICS.

### POPULATION.

	1921.	1922.	1923.	1924.	1925.
Total Urban Total Rural	 73,872 102,795	74,864 103,879	75,660 104,400	76,650 104,900	76,930 105,000
Whole County	 176,667	178,743	180,060	181,550	181,930

Census 1911 .. .. .. 160,430 do. 1921 .. .. .. 175,069

an increase of 14,639, but since 1921, although an increase is recorded, the rate of the annual increase is appreciably being reduced, as already forecasted, on the ground of the continual reduction in the birth rate over such a prolonged period, bringing about the number of persons hitherto in the age period of the lowest mortality (15 to 31 years of age) nearer to the period of the highest mortality (45 years of age and over), with the inevitable result shortly of increased death rate, and this factor with the much diminished birth rate will tell very appreciably on the population—its diminutior!

### BIRTH RATE.

### No. of Nett Births:

Urban .. .. 1473 = 19.1 per 1000 population.

Rural .. .. 2068 = 19.6 ,,

Whole County .. 3541 = 19.4 ,, ,

England and Wales = 18.3 ,,

# TABLE OF COMPARISON FOR THE 5 YEARS UNDER SURVEY.

Districts.	13150	1921.	1922.	1923.	1924.	1925.
Urban		24.6	21.2	21.3	19.7	19.1
Rural		23.2	21.0	20.6	20.7	19.6
Whole County		23.8	21.1	20.9	20.3	19.4
England and Wales		22.4	20.6	19.7	18.8	19.4

Here you note the progressive reduction substantiating my remarks under population. Besides, this reduction applies consecutively to many years immediately before the period under consideration.

### ILLEGITIMATE BIRTHS.

		1921.	1922.	1923.	1924.	1925.
Urban Rural	::	 63	36 107	52 85	58 76	37 75
Whole Co	unty	 174	143	137	134	112

# COMPARISON TABLE OF DEATH RATES BETWEEN LEGITIMATE AND ILLEGITIMATE CHILDREN PER 1000 BIRTHS.

		1921.	1922.	1923.	1924.	1925.
Legitimate Illegitimate	::	96.8 149.4	72.I 160.8	69.7 124.0	81.6 97.0	78.7 107.1

### ILLEGITIMATE DEATHS.

INCIDENCE.—The figures show a progressive reduction, but I question whether there has been a commensurate improvement in morals judging by other figures, but comparison in the death rates is arresting, and I cannot refrain from remarking that there is some laxity in the regulations governing the adoption of these children. I have had occasion, from time to time, to report questionable upbringing of these innocents to the notice of the Inspector of the N.S.P.C.C.

At the present moment I am enquiring into a case where the foster parents live under conditions which would be a travesty on the word "home" in the higher sense (moral). Apart from this the home is simply a zinc shed. The foster father is in receipt of 15/- a week parish relief, plus 7/6 a week Health Insurance relief.

I submit that such laxity in the care of these little ones is, to say the least of it, unchristian, and I respectfully submit that they should be handed over to proper institutions—creches!

### DEATHS.

### No. of Nett Deaths:

Urban .. . . 874 = 11.3 per 1000 population. Rural .. . 1366 = 13.0 ,, ,,

Whole County .. 2240 = 12.3 ,,

England and Wales = 12.2 ,,

# TABLE OF COMPARISON FOR THE 5 YEARS UNDER SURVEY.

Districts.	1921.	1922.	1923.	1924.	1925.
Urban	 11.7	11.8	10.9	11.6	11.3
Rural	 13.4	12.5	12.0	13.6	13.0
	 12.7	12.2	11.5	12.8	12.3
England and Wales	 12.1	12.9	11.6	12.2	12.2

### DEATH RATE.

Here again you will note a progressive reduction, and this has co-existed with diminishing birth rate over many years, but it will not be supposed that this necessarily causes the other, but rather it is the average age of a population that governs the death rate—the lower the mean age of the living the lower should be the death rate, and by inference it is the death rate that really controls the birth rate, because the lower it is, the more chance is there of there being a large proportion of persons at child-bearing period, and here I must reiterate in effect my remarks of last year, more especially with view to impress upon the minds of members of the various Health Authorities (custodians of the Public Health) to remove that sense of complacency or satisfaction expressed by members of various Public Health Authorities on the low death rate prevailing. I would disabuse members of this, and advise them that the factor that should govern their action is the incidence or prevalence of preventable diseases—Tuberculosis, Diphtheria, Scarlet Fever, Typhoid, and Infant Mortality rate, &c.

### TRANSFERABLE DEATHS.

Urban Districts.	Outward Transfers.	Inward Transfers.	Rural Districts.	Outward Transfers.	Inward Transfers.
Llanelly	86 2 - - - 2	17 6 7 5 8 4 11 11 3	Llanelly Carmarthen Llandilo Fawr Llandovery Newcastle Emlyn Whitland Llanybyther	9 6 11	38 24 23 3 6 6 3
The second	124	72		29	103

### INFANTILE MORTALITY.

It has been estimated, taking country and town together, approximately that 80% of all infants are born free from disease. From the moment of birth, and indeed from its conception, an infant is acutely sensitive and impressionable to its immediate surroundings.

Under the prevailing state of things (ignorance more particularly in the upbringing of infants), there is an unnecessary high death rate among infants under one year of age per 1000 born—known as Infant Mortality rate. Under a reasonable state of things it is maintained that this rate should not exceed 30 per 1000 births. In this County the ratio for the period under observation, and before you will note, is distressingly high, especially where one considers the low birth rate and the co-existent low general death rate, as a high death rate following a high birth rate would reasonably suggest an excessive Infantile Mortality rate.

The death rate of infants constitutes the most sensitive index of physical welfare and of the effect of sanitary government. This particular death rate for the first year carries with it deferred deaths until within the immediate next few years, and the maining of a large proportion of children possibly for advanced life.

Infantile Mortality is naturally higher among the poor than the better social class.

In 1911 the Infantile Mortality in England and Wales of

All Classes was		 	130 per	1000	births.
Unskilled Workers		 	152	"	,,
Intermediate Class		 	106	,,	,, ,
Higher and Upper Cla	asses	 	76	,,	,,

It will be inferred from this that the great need is Health Propaganda and, of course, the provision of practical amenities of life. This will be dealt with later.

### INFANTILE MORTALITY.

District.	No. of Births.	No. of Deaths under 1 year	Rate per 1000 Births
URBAN.			
Llanelly	795	68	85.5
O 13	165	14	84.8
Llandilo	29	I	34-4
Llandovery	31	1	32.2
Kidwelly	64	9	140.6
AT 11 TO 1	7	_	_
Ammanford	139	3	21.5
Burry Port	139	13	93.5
Commonwood	104	6	57.6
RURAL.	1473	115	78.0
Llanelly	771	70	90.7
Carmarthen	484	30	61.9
Llandilo Fawr	485	34	70.1
Llandovery	122	7	57-3
Newcastle Emlyn	80	5	62.5
Whitland	71	12	169.0
Llanybyther	55	9	163.6
	2068	167	80.7
Urban Districts	1473	115	78.0
Rural Districts	2068	167	80.7
Whole County	3541	282	79.6

Estimated as per the Returns of the Registrar General.

# TABLE OF COMPARISON FOR THE WHOLE COUNTY FOR THE 5 YEARS UNDER CONSIDERATION.

1921.	1922.	1923.	1924.	1925
92.8	75.2	71.7	82.4	79.6

### \*MATERNITY AND CHILD WELFARE ACT, 1918.

# CLINICAL DEPARTMENT OF THE PUBLIC HEALTH SERVICE.

The first in order of actual imporatnce and value is that devoted to Maternity and Child Welfare.

This service resolves itself into:

- i. Health Visitation by a staff of Nurses.
- ii. Infant Welfare Centres in various places.

### I. NURSING STAFF—HOME VISITATION.

In 1921 the personnel consisted of 7 Whole-time Nurses, *i.e.*, Nurses devoting the whole of their working hours to Health Visitation and School Medical Inspection work.

24 Part-time Nurses—doing Health Visitation and School Medical Inspection work in addition to their primary duty of Village Nursing.

I Independent Nurse—Private Nurse not attached to any particular Association doing Part-time work in addition to her private work.

During the period under consideration the staff has been increased

by 2 Whole-timers and I Part-timer.

This does not represent much material increase, but I can vouch for the fact that the standard of the Nurses' service has advanced very considerably, thanks to the propaganda work instituted in their particular line.

Advantage is being taken of the post graduate courses, so to speak, established for the purpose, known as Winter and Summer Schools.

### DUTIES OF HEALTH VISITORS.

The duties under the above Act are to visit, in due course, the home where a birth has been notified, and to minister to the wants of mother and infant.

To continue doing so once a month for the first year, quarterly in the second year, and twice a year during the 3rd, 4th, and 5th years, when the child automatically comes within the provisions of the Education Act. Needless to say that defective infants and inexperienced, ignorant, and careless mothers call for more frequent visits.

The nature and amount of the work carried on will be gathered from

the table giving the summary of visits carried out.

In addition to this the Nurse is encouraged, using every tact possible, to get into touch with expectant mothers at the earliest stage possible, with view to making observations and tendering advice.

Each Health Visitor is equipped with an outfit to test urine, which

provision is most useful and indeed essential.

### LOCALISATION OF HEALTH VISITORS.

### WHOLE-TIME HEALTH VISITORS.

District.				Nurse.
Amman Valley, (Cwmamman			Nurse	R. A. Roberts
Amman Valley, (Ammanford		 	 ,,	M. Matthews.
Kidwelly		 	 "	E. Davies.
Burry Port		 	 ,,	M. Jones.
Llanelly Rural		 	 "	E. A. Stephens.
Tumble and Po	ntyberem	 	 ,,	E. Davies.
St. Clears		 	 11	A. T. Williams.
Pencader		 	 **	M. Jones.
Carmarthen Ru	ıral	 	 "	H. E. Davies.

### PART-TIME HEALTH VISITORS.

The primary duty of these Nurses is Village Nursing, and as such are employed by the County Nursing Association, which body under contract have undertaken to perform the duties as previously specified.

	Dist	rict.					Nurse.	
	Drefach			 	I	Vurse	E. Sprague.	
	Llanddarog			 		"	M. H. Davies.	
	Llangendeirn	e		 		,,	M. E. Williams.	
*	Llandebie			 		"	E. Thomas.	
	Abergwili			 		"	S. Jenkins.	
	Nantgaredig			 		2.2	A. I. Thomas.	
	Llangathen			 		,,	E. A. Olley.	
	Llanfihangel	Aberby	thich	 		,,	A. Rees.	
	Llandilo			 		22	B. R. Jones.	
	Llansawel			 		,,	A. Watkins.	
	Talley .			 		"	M. J. Phillips.	
	Llanfynydd			 		"	C. M. Griffiths	
	Liandovery			 		"	E. A. Hazzelby.	
	Cilycwm			 		,,	M. J. Morris.	
	Caio			 		23	E. A. Rees.	
	Llangadock			 		,,	G. M. Jones.	
	Llansadwrn a	and Lla	nwrda			,,	M. Buckley.	
	Newcastle Er	nlyn		 		,,,	R. Mace.	
	Henllan			 		,,	A. L. Henry.	
	Ferryside			 		,,	K. Emmanuel.	
	Llanstephan			 		11	F. J. Healey.	
	Llangunnor			 		"	K. E. Critchley	
	Dyffryn Taf	(Clynde	rwen)	 		22	M. J. John.	
	Whitland			 		1)	M. Davies.	
	Llandilo Nor	th War	d	 		,,	E. E. Edwards.	

<sup>\*</sup> Nurse Thomas, Llandebie, works independently of any Nursing Association, and is paid capitation fees in respect of Health Visitation and a fixed sum for each school assigned to her.

### 2. INFANT WELFARE CENTRES.

There has been no actual increase in the number of these institutions in the period under consideration, except that a new Contributory Centre for a part of this County bordering on Cardiganshire, negotiated during the period, has since crystallized, which I include in the subjoined table. Here again the quality of the work carried on, and the appreciation of the proper function of these institutions by mothers generally is most gratifying. At the outset the inducement to attend was more particularly that of the gathering together of women over a cup of tea, but now the greater proportion of the mothers are most anxious to learn the science of mothercraft, and are beginning to realize the insidiousness (working secretly) of diseases, and eager to adopt any preventive measures.

### COUNTY COUNCIL CENTRES.

Location.	Medical Officer in charge.	Nurse Superintendent in Charge.	Days and Hours of Session.
Ammanford I.W.C. Church Room, Ammanford.	Dr. E. Inman, Garsdale, Ammanford.	Nurse M. Matthews, Eryl, Llandebie,	Tuesday, 4—6 p.m.
Brynamman I.W.C. St. Catherine's Church Room, Brynamman.	Dr. R. Jones, Argoed, Brynamman.	Nurse R. A. Roberts, Grove Cottage, Garnant.	Tuesday, 4—6 p.m.
Burry Port I.W.C., Y.M.C.A. Buildings, Burry Port.	Dr. L. Edwards, Snowdon Hse., Burry Port.	Nurse M. Jones, Llwynwhilwg, Llanelly.	Tuesday, 2.30—4.30 p.m.
Cwmamman I.W.C. The Council Infant School, Garnant.	Dr. T. H. Rhys, Brondeg, Glanamman.	Nurse R. A. Roberts, Grove Cottage, Garnant.	Wednesday, 3—6 p.m.
Llandovery I.W.C., Church Hall, Llandovery.	Dr. T. Morgan, Violet Cottage, Llandovery.	*Nurse E. A. Hazzelby, Neuadd, Llandovery.	Tuesday, 2.30—5 p.m.
Llwynhendy I.W.C., Tabernacle Chapel Vestry, Llwynhendy.	Dr. B. D. Hughes, Tireithin, Llwynhendy.	Nurse E. A. Stephens, Brynmor, Llwynhendy.	Wednesday, 3—5 p.m.
Pwll I.W.C., Salem Chapel Vestry, Pwll, Llanelly.	Dr. T. R. Davies, Avenue Villa, Llanelly.	Nurse M. Jones, Llwynwhilwg, Llanelly.	Wednesday, 2.30—4.30 p.m.
Furnace I.W.C., Ainon Vestry, Furnace, Llanelly.	Dr. G. V. Davies, Avenue Villa, Llanelly.	Nurse M. Jones, Llwynwhilwg, Llanelly.	Wednesday, 3—5 p.m.

\*Part-time Nurse.

### CONTRIBUTORY CENTRES.

The Contributory Centres are supported by Joint Authorities.

- I. Pontardulais Centre—. Established under the Swansea Rural District Council (Glamorganshire), and used by us for the convenience of residents in the Hendy part of the same town situated in this County.
- 2. Cwmllynfell Centre.—Established under the Pontardawe Rural District Council (Glamorganshire), and used by us for the convenience of residents in the Quarter Bach district in this County.
- 3. Henllan Centre.—Joint Institution (Cardiganshire and Carmarthenshire).

During the period under consideration, two appointments have stood in relief, around which much talk has centred, but nothing done, but I have great hopes that both appointments will be made in the near future. I refer to the appointments of an Inspector of Midwives and a Whole-time Assistant Medical Officer in charge of the Infant Welfare Centres in place of the present part-time system.

MATERNITY AND CHILD WELFARE WORK FOR THE YEAR 1925.

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Home Conditions	Bad Repair.		4-0	15	~00	26	6	3	78
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.edhi	Premature B		64	ни	0 10	9	11	1	17
luent	No. of Subsect Visits.		1384	6961	696	947	742	398	9209
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rict.		ted at	p	:	::		:	: :	:
		WHOLE-TIME NURSES located at	Amman Valley No. 1, Garnant Amman Valley No. 2, Ammanford	:	: :	:	: :	: :	:
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MATERNITY AND CHILD WELFARE WORK FOR THE YEAR 1925.—continued.

The Table hereunder shows the work done by the respective Health Visitors.

8 91 9
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58
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ro3
12
35
205
34
7
1666
872
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raj
Total

1. Appointment of Inspector of Midwives, to include in her duties the inspection of our Whole-time and Part-time Nurses.

This and the working of our Infant Welfare Centres have been repeatedly adversely reported upon by the Ministry. As things are it is quite impossible to improve upon them. Apart from the raising of the standard of the work that would necessarily result from proper supervision, we have to be content with a system of checking that puts a premium on false returns, assuming a person felt so disposed. It simply consists of making a mechanical return of the number of hours put in, irrespective of the quality of the work and other factors bearing on it, and if this be found to be short of the specified hours contracted for the grant to the respective Nursing Association is withheld, cauising repeated friction and unpleasantness.

The only satisfactory and profitable way of checking this work would be by a good regular systematic inspection by a capable woman, having particular regard for raising the standard of the Nursing service.

I reiterate that this can only be done through the medium of an Inspector over the Nursing service. This is the only County where no such appointment exists.

2. Whole-time Assistant Medical Officer in charge of the Infant Welfare Centres in lieu of the present employment of eight Part-time General Practitioners.

### I again submit:

- Infant Welfare work has been highly specialised by to-day indeed it behoves the ordinary practitioner to undergo a special course of training to do the work efficiently.
- ii. Under the present Part-time system General Practitioners are liable to be called away or unable to attend the sessions through emergency cases occurring in their practices.
- iii. A Whole-time Assistant would be wholly under your control, and would form a closer attachment to the administrative machinery.
- iv. From a money standpoint as well, the employment of an Assistant M.O.H. would be more economical, as has been amply demonstrated.

The Ministry are most importunate and insistent on this point.

In justice to myself I feel I must say that this protracted putting things off has militated much against true progress in Maternity and Child Welfare work.

### MATERNAL MORTALITY.

### DEATHS IN CHILDBIRTH.

These are classified under two headings:

I. Those due to Puerperal Sepsis, i.e., the various communicable septic affections liable to occur as a direct result of childbirth.

No. of cases		Urban Districts Rural Districts	 Nil 3	
- 11	,,	Whole County	 3	.84 per 1000 births.
2. Those due to a No. of cases	in the	ts and complication Urban Districts Rural Districts	 3 9	
, ,	,,	Whole County	 12	3.38 per 1000 births.

### COMPARISON TABLE FOR THE PAST 5 YEARS.

	-	1921.	1922.	1923.	1924.	1925
Puerperal Sepsis Accidents and		1.66	.26	-79	1.62	.84
Complications		5.69	3.44	4.20	4.34	3.38
All Causes		7-35	3.70	5.05	5.96	4.23

Amongst the factors of causation stress is laid on:

- (a) Domestic Uncleanliness—used in a comprehensive sense, involving general insanitation—overcrowding, deficient water supply, lack of effective lighting and ventilation, etc., undesirable at all times, but especially so at the time of confinement.
- (b) Need of ante-natal supervision, and there is no doubt that many a life has been lost on this account.

### PUERPERAL FEVER.

No. of cases notified on the Weekly Return:

URBAN DISTRICTS:

Ammanford .. 2 cases.

RURAL DISTRICTS:

Llanelly .. 4 ,, Llandilo-fawr .. I ,,

7

No. of Deaths.

URBAN DISTRICTS:

Ammanford .. Nil

RURAL DISTRICTS:

Llanelly .. I

Llandilo-fawr .. 2 (I case not notified on Weekly Card

### COMPARISON TABLE FOR THE LAST 5 YEARS.

Districts.	1921.	1922.	1923.	1924.	1925.	
Urban Rural		3 3	4 2	5 5	3 4	2 5
Whole County		6	6	10	7	7

Realising the danger of the spread of this disease, through the medium of the Nurse Midwife in charge, these cases are reported specially and at once (apart from notifying them on the Weekly Notification Cards), whereupon the under-mentioned directions are forthwith sent to the Nurse Midwife in charge, following a telegram advising her to cease attending on her cases except the infected one.

Instructions to be carried out on the occurrence of Puerperal Fever in a Nurse Midwife's Practice.

- I. The Nurse Midwife to at once give up attendance on all the cases on her list, excepting the Puerperal Case notified in her practice.
- Until the recovery or otherwise of this case the Nurse Midwife must on no account take on fresh cases.
  - 3. After the completion of the case she must:
    - (a) Disinfect her clothing (in the absence of a proper disinfector) by the ordinary process of thorough washing, as prescribed by the Central Midwives Board, Rule E. 6.
    - (b) Take out the lining of the bag, together with all the contents, boil every article that will stand boiling, and thoroughly cleanse all other articles with a solution of "Lysol" or "Cyllin" (one teaspoonful to a pint of water).
    - (c) Take repeated hot baths, and disinfect her person, giving the finger nails and hair special attention.
- 4. These instructions to be faithfully carried out, and reported to the County Medical Officer, whereupon enquiries would be instituted with view to authorising resumption of duties or otherwise.

Neglect to follow these instructions might lead to the Nurse Midwife's suspension, and to her being reported to the Central Midwives Board.

### TUBERCULOSIS.

The General Tuberculosis Scheme established in 1912 has not realized its expectations. The battle with this scourge still continues, and the enemy is still vigorous. I cannot refrain form reiterating in effect that the curative side of the problem has been carried out too much at the expense of overlooking the preventive side of the question, that the direct methods (curative) are quite subordinate in their value to the general hygienic improvements and possibilities coming within the scope of the Public Health Authorities, especially the segregation of developed cases, housing problem, educational propaganda, etc.

In England and Wales 50,000 died from all forms of Tuberculosis in 1912 as against 41,000 in 1925. I submit that this reduction is almost entirely attributable to "preventive means," as no "specific" cure has yet been discovered. The discovery of a specific cure would make an epoch in the history of this disease, and it was appropos of this that one eagerly welcomed Spahlinger's claims, and sought to give the treatment at least a trial, and especially now that the experts representing the Welsh National Memorial Association, who went to Geneva to inquire into the rationale of the treatment reported, and that in my opinion favourably, inasmuch as they stated that the treatment was not empirical (experiment without science), but on the contrary, that the treatment "is based on scientific lines, and with the aid of a most ingenious equipment." Apart from this, I am alive to the fact of the possibilities of revelation, and that the profoundest theories in Science, and the most subtle speculations of men of genius in regard to causes of things are often overthrown by a few simple discoveries—discoveries which are at first despised as much as the Gospel is.

Notwithstanding all that has been said against the proposal I still

maintain Spahlinger's treatment should be given a fair trial.

### LEAKAGE IN NOTIFICATION.

Early diagnosis and notification with view to ensure early treatment is of the utmost importance. It is a statutory duty on the part of every General Practitioner to notify within 48 hours every case that comes to his knowledge.

The history of Tuberculosis suggests that the number of cases

notified should be at least twice that of the number of deaths.

Taking this as a basis there was a leakage in the number of cases notified in

1921	 	 	205
1922	 	 	125
1923	 .,	 	121
1924	 	 	140
1925	 	 	93

At one time the number of deaths greatly exceeded the number of cases notified, but since then not only have the notifications exceeded the deaths but they are substantially approximating the actual—a leakage of 93 as compared with 205 in 1921.

The Health Visitor is a most useful agent in the service.

Directly a case is notified, the Health Visitor for that particular area is advised to visit the home, and to complete a special form—Form T. I. (Wales)—a copy of which is forthwith sent to the Tuberculosis Officer, and the particulars recorded on the card are accordingly dealt with in due course—contacts advised to see the Tuberculosis Officer as soon as possible.

Structural and insanitary defects are reported to the local Medical

Officer of Health for the necessary action.

Cases of necessity and want are reported privately to local charities.

The prevention, eradication, and in particular the provision of Institutional Treatment—Dispensaries, Sanatoria, and Hospitals has been entrusted to The King Edward VII. Welsh National Memorial Association.

### WELSH NATIONAL MEMORIAL ASSOCIATION.

Developments during the 5 years under consideration.

### I. INCREASE IN PERSONNEL.

During the last five years the Medical Staff employed by the Association has been increased from 29 in 1921 to 41 in 1926. The Honorary Consultant Staff has also been increased during the same period from 14 to 30.

### 2. IMPORTANT EQUIPMENT ACQUIRED.

X-Ray Plants.—X-ray plants have been installed at the following Institutions:—

Cymla Hospital, Neath. Adelina Patti Hospital, Craig-y-nos. Kensington Hospital, St. Bride's. Meadowslea Hospital, Flintshire. Brynseion Hospital, Carnarvon.

These plants consist of high tension transformers, a combined couch and screen, and Coolidge Tubes. The installation of these plants has added greatly to the facilities for diagnosis (Potter-Bucky Diaphragms being also supplied in some cases), and treatment at the disposal of the Association, indirectly by making diagnosis more precise, and directly by rendering possible the wider application of artificial pneumothorax and other operative measures for pulmonary disease—methods of treatment which depend very largely for their success on radiological work.

An X-ray Technician has also been appointed, who is responsible

for the plants in question.

Light Treatment.—At the Glan Ely Hospital, near Cardiff, a new and complete department for actino-therapy has been inaugurated and equipped with Finsen Reyn apparatus for the treatment of lupus, as well as carbon-arc and Mercury vapour installations. This department treats not only in-patients at the Hospital, but has also developed a large out-patient Department, to which cases are sent from the whole of South Wales.

### 3. NEW INSTITUTIONS AND ADDITIONS.

The following new institutions and additions have been provided:—

	No. of Beds.	Cases Treated.
Machynlleth Hospital, Montgomeryshire	 30	
Sealyham Hospital, Pembrokeshire	 30	Male and female
Adelina Patti Hospital, Craig-y-nos	 104	pulmonary cases.
Cefn Mably Hospital, near Cardiff	 IIO	
Meadowslea Hospital, Flintshire (addition)	 25	
Kensington Hospital, St. Bride's, Pem.	 100	Surgical tuberculosis in children.

Additions have also been made in the form of a Recreation Hall and Chapel, and a Concert Hall at the South Wales Sanatorium, and a new Nurses' Home both at the North Wales Sanatorium and the Meadowslea Hospital.

### 4. EDUCATION.

Provision for providing education for the children resident in the Association's Institutions has been made as follows:—

	No. of Children	Teachers Employed
South Wales Sanatorium, Talgarth	 58	2
West Wales Sanatorium, Llanybyther, Carms	 28	I
North Wales Sanatorium, Llangwyfan, near Denbigh	 70	3
Penhesgyn Open Air Home, Anglesey	 16	I
Glan Ely Hospital, near Cardiff	 70	3
Kensington Hospital, St. Bride's, Pembrokeshire	 90	3

In connection with the Association's Educational Campaign an additional lecturer has been appointed.

### 5. SURGICAL AFTER-CARE.

In connection with the after-care of surgical tuberculosis, a scheme has been put into operation, and organised in the three principal surgical centres, viz., the North Wales Sanatorium, Glan Ely Hospital, near Cardiff, and the Kensington Hospital, St. Bride's, whereby a systematic programme of visits at definite intervals to selected centres is made by the three surgeons in charge of the Institutions named, supported in the case of North Wales by the two Consulting Surgeons, Sir Robert Jones and Mr. A. Rocyn Jones.

### 6. CARE COMMITTEES.

New Care Committees have been established in the following areas:—Anglesey, Carnarvonshire, Merionethshire, Breconshire, Monmouthshire.

### 7. CENTRAL LABORATORY.

A Central Laboratory has been established for purposes of research (working in close collaboration with the Department of Tuberculosis at the University), and also for carrying out for the Association any special investigations which may be required. This is in addition to the ordinary routine clinical laboratory work, which is carried out for the Association by the Cardiff and County Public Health Laboratory and the Monmouthshire Laboratory, Newport.

### Institutions.

### TUBERCULOSIS DISPENSARIES.

These serve as a Centre for diagnosis and observation, the sufferer being treated at home during the time, and sent in due course to the institution providing the treatment appropriate to the individual case.

Names and location and hours of attendance as hereunder:

Llanelly Mondays 10.30 a.m. to I p.m. . . Thursdays 10.30 a.m. to 2 p.m. Do. Saturdays 9.30 a.m. to I p.m. Carmarthen .. 2.30 p.m. to 4 p.m. Ammanford .. Mondays 4.15 p.m. to 5 p.m. Mondays Llandilo Second Friday in the month; Llandovery . . 2.30 p.m. to 4 p.m. Whitland .. First Friday in the month; 2.30 p.m. to 4 p.m.

Staff.—Senior Tuberculosis Physician (Whole-time), Dr. Howell M. Williams, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. One Whole-time Nurse, whose duties are to attend to the Doctor at the Dispensary and do Home Visiting.

Dr. Williams also sees patients at their homes by arrangement with

the General Practitioners.

Number examined for the first tin	ne				
including Contacts		 684 as	against	542 ir	1924
Number found to be Tuberculous		 230	,,	216	,,
Number of Contacts examined		 212		77	
Number of Contacts found to be					
Tuberculous		 42	,	25	,,

Here you will note the increased number of contacts examined. Herein lies the explanation of the improvement in the matter of the leakage of the cases notified as compared with the deaths registered hereinbefore mentioned.

Form of Treatment recommended:

		Pulmonary.	Non-Pulmonary.
Domiciliary	 	171	 37
Institutional	 	85	 II
Hospital	 	63	 30
Sanatoria	 	76	 Nil

	a in a second	No. of Beds		la mare
Institution.	Pulmon- ary.	Non-Pul- monary.	Total.	Cases Treated.
Sanatoria.				and the state of t
The South Wales Sanatorium, Talgarth	304	-	304	Male Patients.
The North Wales Sana- torium, Llangwyfan	92	142	234	Pulmonary Female Pa tients, Surgical Tuber culosis in Men, Women and Children.
The West Wales, Sanatorium, Llanybyther	58	-	58	Women and Children Pul monary Cases.
The Penhesgyn Open-air Home, Menai Bridge	16	-	16	Female Children Pulmon ary Cases.
HOSPITALS.				
The Glan Ely Hospital, Fairwater, nr. Cardiff	92	92	184	Men, Women, and Child ren Pulmonary and Sur- gical Cases.
Beechwood Hospital, New- port	47	-	47	Male Pulmonary Cases Closed June 2nd, 1924.
Pontsarn Hospital, Mer- thyr Tydfil	38	-	38	)
Cymla Hospital, Neath	46	-	46	
Tregaron Hospital, Tre- garon	. 32		32	
Meadowslea Hospital, Penyffordd	54	-	54	
Brynseion Hospital, Car- narvon	38	-	38	Male and Female Pul- monary Cases.
Llangefni Hospital, Llan- gefni	22	-	22	
Adelina Patti Hospital, Craig-y-Nos	104	-	104	
Sealyham Hospital, Wolf's Castle	30	-	30	The latest the second
Machynlleth Hospital, Machynlleth	30	-	30	
Kensington Hospital, St. Brides	-	100	100	Surgical Cases in Children.
Cefn Mably Hospital	110	-	110	Male and Female Pul- monary Cases. Opened June 2nd, 1924.
	1113	334	1447	

FARM COLONIES, OPEN-AIR SCHOOLS, ETC.

Training Colony.—The Mansion House, Pontywal, for cases requiring re-training combined with treatment.

Amount of grant paid by the County Council to the Welsh National Memorial Association during the year 1925 = basis, 96 per cent.,  $1\frac{1}{3}d$ . rate, less 5 per cent. on assessable value = £3325 16s. 8d.

### NOTIFICATION OF TUBERCULOSIS.

Pulmonary	 	Male	 	126
Do.	 	Female	 	118
Non-Pulmonary	 	Male	 	31
Do.	 	Female	 	42
				-
				317

### DEATHS FROM TUBERCULOSIS.

		onary culosis.		ercular ingitis.	Other forms of Tuberculosis.		All forms of Tuberculosis.		
DISTRICTS.	No. of Deaths,	Rate per 1000 Popula- tion,	No. of Deaths.	Rate per 1000 popula- tion.	No. of Deaths,	Rate per 1000 popula- tion,	No. of Deaths.	Rate per 1000 popula- tion.	
Urban Rural	 53	.68		.000	2I 29	.27	74 131	.96 1,24	
Whole County	 154	.84	1	.005	50	.27	205	1.12	

Name of District.	Pulmonary Tuberculosis.	Tubercular Meningitis.	Other 1 orms.	All forms of Tuberculosis.
URBAN.			- Labor Sa	
Llanelly Carmarthen Llandilo Llandovery Kidwelly Newcastle Emlyn Ammanford Burry Port Cwmamman	 32 3 1 8 1 3 2 3		7 3 — 3 1 2 1 4	39 6 - 1 11 2 5 3 7
RURAL.	53		21	74
Llanelly Carmarthen Llandilo Fawr Llandovery Newcastle Emlyn Whitland Llanybyther	 40 27 13 7 6 — 8		10 9 4 - 2 1 3	50 36 17 7 8 2
	101	I	29	131
Whole County	 154	1	50	205

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912.

SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM THE 4th JANUARY, 1925, TO THE 2nd JANUARY, 1926.

RM C. all Noti- of cases fed.	Sana- toria,	84 32 14 11	141
Notifications on Form C. Additional Noti- fications of cases notified.	Poor Law Institu- tions	1111	1
NOTIFICATIONS ON FORM B. Cases discovered at School Medical Inspections whether or not previously notified.	Total.	H 4 7	01
FICATION FORM B. scovered a cal Inspect or not pre notified.	10-15	нан	4
NOTIFICATIONS OF FORM B.  ses discovered at Schedical Inspections tether or not previous notified.	5-10 10-15	1101	5
NO7 Cases Me wheth	Under 5	1141	н
	Total.	126 118 31 42	317
u eu	65 and upwards	40 0	6
NOTIFICATIONS ON FORM A.  first time during the year and which have never been previously notified in the Area.	20—25 25—35 35—45 45—55 55—65 upwards	∞ 4   H	13
hich have	45—55	18	30
NOTIFICATIONS ON FORM A. e first time during the year and wh previously notified in the Area.	35—45	20 20 1	41
NS ON 1 ng the ye ified in th	25—35	17 20 1	42
TCATIO	20—25	23 84 8	63
NOTIF the first t previo	15—20	16 17 7	47
ified for	5—10 10—15 15—20	6 13 4	26
NOTI Cases notified for the first prev		9 6 6 7	29
1398	0—1	9999	15
	1-0	н     н	64
	Age Periods.	†Pulmonary: Males *Non-Pulmonary: Males	Total

<sup>†</sup> Pulmonary Tuberculosis is defined as affecting the Lungs. \* Non-Pulmonary Tuberculosis is defined as affecting parts other than the Lungs.

# SUPPLEMENTAL RETURN.

NEW cases of Tuberculosis coming to the knowledge of the Medical Officer of Health or Chief (Administrative) Tuberculosis Officer during the period from the 4th January, 1925, to the 2nd January, 1926, OTHERWISE than by notification of Form A or Form B, under the Public Health (Tuberculosis) Regulations, 1912.

Total Cases.	116 44 3	33
	1 1 1	4
1—5 5—10 10—15 15—20 20—25 25—35 35—45 45—55 55—65 65 and upwards	9911	4
45—55	+   +	2
35—45	1   5	9
25—35	4 0	7
20—25	++	2
15—20	0   1	3
10—15	1111	1
5—10	=	I
1—5	1100	4
1-0	1111	1
	::::	
Age Periods.	Pulmonary: Males Females Non-Pulmonary: Males	Total

### VENEREAL DISEASES.

This class of disease comprises Syphilis and Gonorrhoea.

Both are easily preventable through the application of a little knowledge. When one considers the cost in terms of money and the suffering caused both mental and physical, one is apt to question why this knowledge is not diffused generally. The argument re the pros and cons of this proposal is almost threadbare, but my experience, extending over some years now, and the continued unabated prevalence, tending rather to the increase, taking all figures into consideration, compels me now to advise that we should extend our educational propaganda regarding sex matters and sex diseases, which hitherto only aimed at establishing moral and intellectual sanctions, to include instruction as to how to prevent. The objection that this would tend to indulgence would be tantamount almost to saying that the provision of lifebuoys on board a ship tends to make people throw themselves overboard. The knowledge of how to prevent, coupled with perseverance with education in self restraint should, in time, entirely abolish these diseases. Why it should be wrong to destroy a micro-organism before admission, and then attack it after admission into the system, is beyond one's com-

The only figures available as to the prevalence of these diseases are those obtained from the Treatment Centre Authorities, but these do not give anything like a correct return of the number of cases contracted, as the more well-to-do secure private treatment, in order to avoid any

publicity.

Quite successful campaigns have been conducted by way of propaganda work. I felt, in view of my previous remarks, we might suspend our activity for a while, pending the consideration of propaganda on

"how to prevent."

Judging by the figures at our disposal, given in a comparative table form since 1919, indulgence does not appear to have lessened—bodily appetite stronger than moral conviction!

### EDUCATIONAL PROPAGANDA.

The assistance of the British Social Hygiene Council was enlisted by way of engaging one of their lecturers, with the aid of films approved by the Ministry of Health. £100 was voted for this work, £93 10s. 10d. was expended, and £26 2s. 11d. was recovered in collections at the various meetings.

### TREATMENT CENTRE.

The curative treatment, in conjunction with Swansea, Glamorganshire, Breconshire, Pembrokeshire, and Cardiganshire, is contracted for with the Swansea General Hospital.

### SERVICES RENDERED AT THE TREATMENT CENTRE.

### A.—OUT-PATIENT DEPARTMENT.

Number of Cases that attended for the first time.

distriction annimals and	1919	1920	1921	1922	1923	1924	1925
Syphilis	83	57	42	50	33	49	52
Soft Chancre	4	4	3 48	3	I	2	-
Gonorrhoea	28	40	48	30	43	36	52
Other Cases, i.e., cases who had laid themselves open to infection, and who had come to be tested as to whether the disease was					ALL DE		
still active	23	- 27	13	11	6	18	18
Total	138	128	106	94	83	105	122

Number of attendances of all Patients .. .. 1256 Number of Doses of Salvarsan Substitutes .. . . 588

### The Arsenobenzol compounds used:

Galyl	 	 0.10	(Inf	ants)
Sulpharsenol		 0.36		0.6
Stabilarsan	 	 0.15		0.6
Neo-Kharsivan		 0.3		0.9

Males.—10 primary injections of Neo-Kharsivan weekly. Hydrarg c Creta, gr. ii. daily for three months.

Neo-Kharsivan doses-0.45, 0.6, 0.75, then 0.9.

Females.—0.3, 0.45, 0.45, 0.6, then 0.75.

Iodo Bismuth (Bismuth intramuscularly in resistant cases). Potass. Iodid in old Tertiary cases.

Gonorrhoea.—Discharge examined—deep urethral films after massage—provocative vaccine. Silver Nitrate. Use of sounds. Urethroscopy.

Standard—no Gonococci after three tests at intervals of one month.

### B.—IN-PATIENT DEPARTMENT.

Aggregate number of "In-patient days" of all patients

Number of doses of Arsenobenzol compounds given ... 6

To decide the question of cessation of treatment for Syphilis, Wassermann reaction is applied at the end of each course, and then at intervals of three months for two years.

### EXAMINATIONS OF PATHOLOGICAL MATERIAL.

Specimens examined by the Pathologist at the Treatment Centre during the year.

	For Detection of						
	Spirochetes.	Gonococci.	Other Organisms.	Wassermann Reaction.			
a) Cases attending the Treatment Centre	3	47	-	134			
(b) General Practitioners' Cases	_	9		124			
A STATE OF THE PARTY OF THE PAR	3	56	_	258			

### COST.

The Treatment Centre serves in common the needs of the several authorities mentioned.

Hereunder a Statement of Account based on a new Agreement re the apportionment of the cost of running the Centre between the various Contracting Authorities.

Cardiganshire have refused to sign the Agreement. Pending settlement the cost incurred in respect of Cardiganshire has been apportioned pro rata between the others.

-11 10 1010		Propo standing drugs, dre	g cha	arges,				Direct	Cha	rges.						
Authority.	No. of New Cases.	based on ber of ne- during from th areas, of 25 ch	w pa the e va Mini	tients year rious imum	Main In-p	tena of atier			ologi umin ions.	a-	be	seno enzol pour		То	tal.	
		£	S	d	£	s	d	£	s	d	£	s	d	£	s	d
Swansea	676	1567	13	9	95	14	0	564	7	6	397	0	0	2624	15	3
Carmarthen	123	285	4	10	70	2	6	75	8	0	96	3	9	526	19	I
Pembroke	25	57	19	6	18	3	0	15	14	0	. 13	II	7	105	8	I
Brecon	25	57	19	6	29	19	6	II	5	6	13	5	6	112	10	0
Cardigan	25	57	19	6	34	2	0	II	19	6	6	II	0	IIO	12	0
Glamorgan	178	412	15	10	123	9	6	109	6	6	96	10	9	742	2	7
Total	1052	2439	12	11	371	10	6	788	i	0	623	2	7	4222	7	0

The above account relates to the year ended 31st March in each year.

### COMPARATIVE TABLE OF COST FOR PAST 5 YEARS.

1921—1922	1922—1923	1923—1924	1924—1925	1925—1926
£ s d	£ s d	£ s d	£ s d 529 9 4	£ s d
253 18 6	214 14 0	412 5 I		550 13 6

# PAYMENT OF TRAVELLING EXPENSES TO AND FROM THE TREATMENT CENTRE.—Form V. 12.

This provision is becoming more known, with the result that the amount paid on this account was £31 18s. 9d. as compared with £6 5s. 5d. the year before, and about the same amount the previous years. Careful investigation is made in respect of each application to prevent abuse.

### MIDWIVES ACT, 1902-18.

122 Notifications of intention to practise within the County (Form VIII.) were received during the year.

84 of these were qualified by examination—holding the C.M.B. Certificate.

38 allowed to practice by virtue of their having been in practice

— prior to July 31st, 1901, known as "Bona-Fides" as compared with previous years thus:—

	1921	1922	1923	1924	1925
Bona Fide	62 64	71 61	72 56	77 45	8 <sub>4</sub> 38
Total	126	132	128	122	122

You will note a progressive decrease in the number of Bona-Fides, as is naturally expected—all these women being now well advanced in years, really too old for the work, but allowed to carry on on sufferance there being such a dearth independent of them. 7 of these women attended no cases at all on account of old age or ill health most probably. I woman, "By Exam.," did not attend a single case.

The total number that actually practiced during the year was 114. This number is totally inadequate to meet the needs of the County, with a population of 181,930, and an area of 588,472 acres—the largest

county in area in Wales!	0
ANALYSIS OF RETURNS OF CASES ATTENDED.	
Number of Births in the County during the year Number of cases attended by—	3541
(a) "By Exam." midwives as: i. Maternity Nurses (i.e. attendance where a	
Doctor is engaged)	208
ii. Midwives (No Doctor engaged)	2012
(b) "Bona Fide" Midwives as:	2220
i. Maternity Nurses ii. Midwives	68 <sub>7</sub>
	690

Total number of cases attended by registered Midwives	2910
Number attended by irregular casual women with or without a	
	631
Number of Still-births in the practice of "By Exams."	131
Number of Still-births in the practice of "Bona Fides"	46
The average number of Still-births is about 3 to every 100 live bi	rths.
Midwives "By Exam." shew a percentage of 5.9.	
Midwives "Bona Fide" shew a percentage of 6.6.	

A high still-birth rate is commonly associated with a high Maternal Mortality rate and Infant Death rate.

Number of cases notified as having sent for Medical Aid:

### DISTRIBUTION OF THE PRACTICE.

### "By Examination" Midwives:

5 attended a number of cases varying from 140 to 100 each. Independent Midwives practising on their own. Not employed by a Nursing Association.)

3 attended between 100 and 75 cases.

### "BONA FIDE" MIDWIVES:

I attended over 100 cases.

```
i ,, between 100 and 75 cases.
2 ,, 75 ,, 50 ,,
6 ,, 50 ,, 25 ,,
9 ,, 25 ,, 10 ,,
7 ,, under 10 cases.
7 ,, no cases at all.
```

These figures shew the records of a total of 106 practising Midwives. The discrepancy between this figure and that of 122 as having notified to practice, is accounted for by women acting temporarily as locums, the cases credited to Midwives they act for.

I reiterate that apart from being employed at a Nursing Home or by a District Nursing Association, and the very few that have attended over 100 cases, the others cannot be said to have earned anything like a living wage. One is tempted to ask what inducement is there to obtain the C.M.B. Certificate apart from its serving as a supplemental source of income.

### LOCALISATION OF THE NURSE MIDWIVES.

### URBAN DISTRICTS.

		By Exam.	Bona-fide.
Llanelly		 16	3
Carmarthen		 2	I
Llandilo		 I	1
Llandovery		 4 (I)*	1
Kidwelly		 1*	_
Newcastle Em	lyn	 1*	
Ammanford		 I	3
Burry Port		 3	I
Cwmamman		 I	2
		30	12

### RURAL DISTRICTS.

LLANEL	LY RURAL.			CARMAI	RTHEN	RURAL.		
	By Exam.		Bona- fide.			Ву		Bona.
Tumble	1*		nuc.	100 1 000 1		Exam.		fide.
Pontyberem	1*		I	Ferryside		1*		_
Llangennech				Llanstephan		1*		I
Pontardulais				Laugharne		1		_
D 11			_	Abergwili		1*		-
			2	Llangendeirne		1*		_
Bynea				Drefach		1*		1
Felinfoel			I	Bankyfelin		_		1
Dafen			I	Cefneithyn		1*		_
Trimsaran	—		2	Llangunnor		1*		_
Tycroes	I		3	Llanddarog		1*		_
Pontyeates	I		-	Cross Hands		I		1
Loughor	I	* *	-	Cross Traines				-
	_		-			10		2
	12		10			10		3
LLANDILO-	FAWR RUR	AL.				-		
Bettws	т		-	LLANDO	OVERY	RURAL.		
Llansawel	1*			Cilycwm		1*		-
12 22				Llangadock		1*		_
				Llanwrda		1*		_
Llanfynydd		**	I	Pumpsaint		1*		_
Llandebie	2		I	Farmers		Î		
Cefnbrynbrain	I			Rhandirmwyn		ī		
Dryslwyn	1*		-	Ruandimwyn				
Llanfihangel						6		
Aberbythich	1*		-			0		
Nantgaredig	I*		I					
Brynamman	2		2	NEWCASTL	e Ear	www Prop		
Saron	I		2	NEWCASIL	E EML	YN KUK	Ale	
Manordilo	1*		-	Llandyssul		2		-
Penygroes	I			Henllan		2(1)*		I
Penybank	I		-	Pencader				I
between (Amma	nford					_		-
and Tycroes).						4		2
			-	The State of the S				
	16		7	THE RESERVE OF THE PARTY OF THE				
WHITLAN	D RURAL.			LLANYB	YTHER	RURAL.		
				Llanybyther		-		I
Whitland	1*		-	Llanllwni				I
Login	,		I	Lampeter (Nurs	e's			-
Henllan Amgoed			1	Residence)		1		-
Clynderwen	1*		-	rtosidentee)			1000	
	-		-			1		2
	-2							

<sup>\*</sup> Asterisk denotes Nurse in the employ of the Local District Nursing Association.

### COUNTY NURSING ASSOCIATION.

The provision of Nurses generally, as is well aware, was first instituted by the Queen Victoria's Jubilee Institute, functioning in South Wales through the medium of the South Wales Nursing Association, and we shall always owe this body a deep sense of gratitude for having initiated such a boon and a blessing.

The South Wales Nursing Association ceased to exist as a body after having arranged that each County should function on its own responsibility—with its own rules and constitution and managing its own finance! This took place in April, 1922.

The statutory obligations under Maternity and Child Welfare and School Medical Inspection have enabled several of the poorer districts to form Associations through our employing their Nurse as a part-timer, and paying a remuneration of £60 a year in respect of such service. In 1925 we altogether employed as part-timers 26 of these Nurses.

The County Nursing Association also serves as the medium through which Nurses are trained for services in this County for a minimum period of three years under a signed declaration with regard to non-ful-fillment of same; the County Council contributing £60 a year towards the training of 2 Nurses a year.

The undermentioned represents the work covered by the County Nursing Association:

Year.	No. of Associations.	No. of Nurses.	No. of New Associations. formed.	No. of Associations abandoned.	Nurses placed in Training.
1921	25	5 Queens* 4 Trained† 16 Village‡	I	Nil	6
1922	27	5 Queen's 6 Trained 16 Village	4	(insufficient funds)	1,
1923	26	5 Queen's 5 Trained 16 Village —	Nil	(insufficient funds)	0
1924	30	8 Queen's 5 Trained 18 Village — 31	4	0	3
1925	32	9 Queen's 7 Trained 18 Village — 34	2	0	2

#### COUNTY NURSING ASSOCIATION (continued).

Year.	No. of Associations.	No. of Nurses.	No. of New Associations formed.	No. of Associations abandoned.	Nurses placed in Training.
1926 (time of writing this report)	34	Oueen's 6 Trained 20 Village -	3	0	I

- \* Queen's Nurse Nurse who has undergone a minimum of three years training at a General Hospital plus training in special subjects.
- † TRAINED NURSE Nurse who has undergone a minimum of three years training at a General Hospital.
- † VILLAGE NURSE Nurse who has undergone training at a recognised Hospital for a period of from 12 to 18 months.

# MIDWIVES ACT, 1918.

FEES PAID TO MEDICAL PRACTITIONERS FOR SERVICES RENDERED.

It behoves me to explain here again that the Act requires, amongst other things, a Midwife in any emergency (Section 14) to call in a registered Medical Practitioner, and requires the Supervising Authority (the County Council) in such case to pay the Practitioner's fee according to a scale fixed by the Ministry, which amount the Supervising Authority are empowered to recover unless it is shewn to their satisfaction that the patient or her husband or such other person is unable, by reason of poverty, to pay such fee.

Hereunder a Statement of Account since the Act was put into operation:

For the finance	cial year ended—		ments octors S	3.			mou	ered.
- 0- 0-0-0	31st March, 1920	 85	I	o.		60	7	6
Do.	31st March, 1921	 367	4	0		177	7	0
Do.	31st March, 1922	 487	9	6		451	5	6
Do.	31st March, 1923	 408	16	6		257	10	0
Do.	31st March, 1924	 373	5	0		321	19	II
Do.	31st March, 1925	 289	4	0		164	12	0
Do.	31st March, 1926	 369	4	I		209	I	9
		£2380	4	I	£	1642	3	8

#### INFECTIOUS DISEASES.

Hereunder a table of the incidence of the more prevalent types of these diseases for the past five years, together with their respective case mortality. To control the spread of these diseases the provision of an Isolation Hospital is absolutely essential for the first outcrop of cases.

Common Types.		1921.		1922.		1923	3.	1924.		1925.	
		No, of Cases,	No. of Deaths.	No. of Cases.	No. of Deaths						
Small Pox		_	_	_	_	_	_	-	_	_	
Scarlet Fever		435	6	326	I	342	5	387	5	313	. 3
Diphtheria		454	35	303	16	241	17	291	20	352	31
Typhoid Fever Encephalitis		15	3	8	3	23	4	19	.5	12	1
Lethargica Acute Poliom-	• •	4	2	3	2	4	4	5	1	7	5
yelitis		2	I	3	I	1	-	2	-	I	-

#### SMALL POX.

Notwithstanding the "No Cases" recorded in this County for many years, the disease is now widely prevalent, and is increasing slowly but surely. 78 cases occurred in London in 1922 with 24 deaths, and 578 cases in Glasgow, with 125 deaths in 1920.

I respectfully submit that the wholesale exemptions from vaccination, with the result that the inherited and acquired immunity conferred by vaccination (artificial immunization) is progressively wearing out so to speak, a virulent outbreak might occur at any time and at any place, and then, and only then shall we as custodians of the Public Health be rudely awakened to a sense of guilt (criminal) through not having made provision for the first few cases, and thus save a wide-spread epidemic. The most temporary arrangements for Isolation could not be put up until the time when it would have been most useful is past, and belated accommodation would have to be on a far larger scale. Why these points do not appeal to the economic sense, to say the least of it, of those in authority surpasses my comprehension apart from the humane considerations.

Here again propaganda work is urgently needed to reinstate the authority of vaccination (to make it compulsory), and to counteract the misleading and mischievious propaganda of those misguided enthusiasts—anti-vaccinationists!

#### DIPHTHERIA.

The continued high incidence of this disease is characteristic of this County. It is ever with us, more or less. During the five years under consideration we have had several protracted outbreaks in various

places.

In 1921 a prolonged outbreak in the village of Caio was stamped out after considerable trouble, when a most interesting "carrier" was discovered in a girl of 18 years, living and serving in a shop where it was the custom for several of the school children from remote distances from the School to partake of their mid-day meal. A bacillus of a virulent type was discovered in a rash on the face of the carrier, accompanied with Rhinitis (affection of the lining of the nose). The premises were placed out of bounds, and the carrier placed under treatment, whereupon, in due time, the outbreak cleared up.

In an issue of the British Medical Journal since this discovery a very protracted epidemic was traced conclusively to an obstinate case

of Impetigo (infectious scabby rash) in a mother's scalp.

These cases serve to prove that lesions other than throat affections can harbour this particular germ.

PENYGROES AND BRYNAMMAN OUTBREAKS-1921-22.

Both these outbreaks were attributed to infection carried either by contact with infected persons or convalescents being allowed to mix too early with other children, and allowed, most likely, to frequent places of meeting—cinemas for instance—before ascertaining that their throats were free from infection.

In the absence of Isolation Hospitals the whole question resolves itself into discipline—control of the movements of children, which rests with the parents or guardians, and bacteriological examination discipline, which provides that no children from an infected home shall be allowed to return to school until a Bacteriological examination reveals two

consecutive negative swabs at an interval of a fortnight.

In 1923 an outbreak occurred in Cardiff within a particular Milk Walk, which derived its milk from a particular dairy farm in this County. I questioned the idea that Diphtheria may be a cow disease, transmissible to human beings, and my experience in connection with "carriers" of late suggested the possibility of one of the persons taking part in the production being a "carrier," so I had all the persons in one particular farm examined (throat swabs), and a milkmaid was found to have true diphtheria germs in her throat. This germ was afterwards examined as to its pathogenicity, that is, whether innocent or active in the matter of producing the particular disease, and it proved to be markedly virulent.

The "carrier" was at once advised not to take any further part whatsoever in the production of the milk until certified free from in-

fection. No cases have since been reported.

I regard this as a most interesting, instructive, and practical discovery. It shows the susceptibility of milk to catch and breed infection, and it makes one ask how many people, from time to time, have been similarly infected, and how many cases have been due to this cause.

#### DIPHTHERIA—SCHICK'S TEST.

In one of my Quarterly Reports in the year 1921, in view of the repeated and protracted outbreaks of Diphtheria, in fact the disease is always more or less with us, I then reported to the effect that it behoved us, especially in view of our being handicapped through lack of Isolation Hospital accommodation, and even in the event of our having accommodation, to adopt a recognised test for immunity, known as Schick's Test, and in the event of a positive reaction, to induce by injection active immunity.

This proposal was adversely commented upon by one in higher authority that professed to know, and I did not press the matter further.

In the light of to-day the idea of producing immunity to Diphtheria is regarded as valuable, and as practical as the injection of vaccine in

the prevention of Typhoid Fever.

Schick's Test is of great value in detecting those who are immune and those who are susceptible during an epidemic. This would be particularly useful in School outbreaks. It is now being used extensively to determine whether or not a nurse or attendant is immune from Diphtheria.

It consists of injecting into the skin as near the surface as possible a quantity of Diphtheria Toxin. A successful injection produces a round, white spot. It shows that there is no anti-toxin in the blood to neutralize the poison injected, but if there is anti-toxin present no effects will be possible.

A positive Schick's Test, therefore, indicates an absence of antitoxin and a susceptibility to Diphtheria. A negative Schick on the other hand indicates the presence of anti-toxin and an immunity to Diphtheria. The positive cases would indicate treatment by injection to render them immune.

#### SCHOOL CLOSURE ON ACCOUNT OF INFECTIOUS DISEASES.

Schools closed by the Education Authority under Article 45 (b)—Nil.

# SCHOOLS CLOSED BY THE LOCAL SANITARY AUTHORITIES (Article 57).

School.	Infectious Disease.	Period of Closure.
Golden Grove C. of E. Ffairfach Council Capel Cynfab C. of E. Penygaer Council Rhandirmwyn C. of E. Pembrey Council (Infts.)	" Specific Colds" Measles Whooping Cough Measles do. do.	19th Jan.—3oth Jan. 16th July—31st July 7th Sept.—25th Sept 2nd Nov. 16th Nov 2nd Nov.—27th Nov 26th Nov.—18th Dec.

Where the attendance falls below 60% on account of an epedimic, the grant is secured under the Elementary Education Provisional Code, 1922—Amending Regulations, No. 2, 1924.

#### ISOLATION HOSPITAL.

After the withdrawal of Llanelly Borough from the Llwyncwtta Scheme (providing for 92 beds with a resident Medical Officer in charge, and a proposed fully equipped Bacteriological Laboratory, etc.), things hanged fire until 1925, when the 1925 Act came into force providing easier facilities to deal with the question. Advantage was taken of it and an order was sought.

Previous to the period to which this report relates, our zeal for the moment cooled down until stimulated to action by the Ministry, whereupon several of the local authorities moved jointly and approached the County Council with a view to proceeding under the Isolation Hospital Acts, 1893 and 1901.

At the time of writing this report (1926), two separate Draft Orders, upon application by the County Council, have been submitted by the Ministry specific to our County.

1. For the treatment of Small Pox for the whole County.

2. For the treatment of Infectious Diseases other than Small Pox for the whole County, exclusive of Llanelly Borough.

# LABORATORY WORK.

All our Pathological and Bacteriological work is carried out at the

Beck Laboratory, Swansea.

An efficiently equipped laboratory is of direct and essential assistance in the diagnosis, treatment, and spread of disease-indeed, clinical observation, physical examination, and the detection of bacteria and

other abnormal substances in the tissues and body fluids form a trio of means by which a modern physician establishes his diagnosis and bases his treatment, and neglect of any one of the three may lead to loss of reputation to the physician, death to the patient, and widespread disease amongst the people.

The returns, therefore, for money expended in this department are

so far-reaching that it is impossible to estimate their value.

We have in the above Laboratory an ideally equipped Institution, under the direction of a whole-time expert of high standing, Dr. Sladden.

The number of examinations made in 1925 was 283.

A high proportion of this work was in connection with Diphtheria, of which a total of 17 Positive findings were made, a further slight diminution on previous years' findings.

Two milk samples, tested by inoculation, proved to contain live Tubercle bacilli. Relatively little milk analysis has been made for the

County Authority.

Another case of Encephalitis Lethargica was found during the year. Enteric fevers and intestinal infections have not been prominent so far as the Laboratory is concerned.

#### SUMMARY.

Throat Swabs		 		 260
Nasal Swabs		 		 3
Sputums		 		 6
Excreta for Typhoid		 		 I
Milk, Bacterial Coun		 		 9
Milk, for Tubercle B	acilli	 		 2
Cerebro-spinal Fluid	s:			
Tuberculous Menin		 		 I
Encephalitis Letha	argica	 		 I
			Total	283

#### CLEAN MILK.

# PROPAGANDA WORK.

The Milk and Dairies (Amendment) Act, 1922, is primarily an effort to secure Clean Milk.

On representation the Agricultural Education Committee contributed £50 towards availing the medium of the Bath and West Agricultural Society Show, held in Swansea in 1923, with view to rousing public opinion, and to diffuse knowledge of the requirements of the above Act to provide facilities for education and instruction in the production and distribution of graded milk.

Similar advantage was taken of the Royal Welsh Show held in

Carmarthen in August, 1925.

Local propaganda work has been conducted throughout the farming districts, and many of the larger producers of milk were personally interviewed with view to persuading them to qualify for the Grade "A" designation requirements, and thus set an example to the smaller producers.

Under the auspices of the Farmers' Union a lecture, illustrated by lantern slides, was delivered at St. Clears by Dr. Stenhouse Williams

of the Reading University. The meeting was well attended, advantage having been taken to hold the meeting on the evening of the Christmas Show day.

To avoid any irregular charges on the part of the Veterinary Surgeons employed, the undermentioned scale of fees was adopted:

# MILK AND DAIRIES (AMENDMENT) ACT, 1922. THE MILK (SPECIAL DESIGNATION) ORDERS THEREUNDER.

# SCALE OF VETERINARY INSPECTORS' FEES.

(I) CLINICAL EXAMINATION FOR GRADE "A" MILK.

Each head of Cattle	е			//	 2/-
Minimum Charge					 21/-
Mileage, per mile					 9d. each way.
Supplying and Inse	rting	Identi	ficatio	n Disc	 6d. each.

(2) CERTIFIED AND GRADE "A" (TUBERCULIN TESTED) MILK.

For testing each head				 8/-
Minimum Charge				 £3 3 s.
Supplying and Inserting	Identi	fication	n Disc	 6d. each.

The Ministry of Health's Regulations for Testing provide that these Tests must be personally made by the appointed Veterinary Inspector in their entirety.

They involve continuous attendance on the animals tested for a period of not less than 27 hours, which in some cases may extend to 30 hours and over. Two records of temperature must be made before and one record at the time of injection; time taken, 6 hours. After injection the first temperature must be taken at the 6th hour, and thereafter at the 9th, 12th, 15th, 18th, and 21st hours.

The tuberculin tests must be two Subcutaneous and Ophthalmic.

The latter may require an examination at the 45th hour.

Notwithstanding the efforts mentioned, and numerous personal talks with people interested, we have only succeeded in persuading the undermentioned to take out "Grade A" licences:—

#### "GRADE A" PRODUCERS.

\*Griffith Griffiths, Talygarn, Llangadock.
†Herbert Jones, Cillefwr Farm, Nr. Carmarthen.
John Davies, Cwmgwen Farm, Pencader.
James Jones, Parcnewydd, Llanwrda.
David Evans, Tynlone Farm, Llangadock.
David Davies, Uwchgwili Farm, Nr. Carmarthen.
Thomas Campbell Davies, Penygraig, Llanegwad.
Frederick G. Phillips, Moor Farm, Whitland.

<sup>\*</sup> Retired during the year 1924. Left the County.

<sup>†</sup> Did not renew the licence during 1925 owing to the question of fees.

The propaganda work necessarily appealed to all, but it has fallen

short of putting the same into practice.

The obstacle lies in the capital outlay, involving structural alterations, equipment, sterilization plant, water supply, and especially the fees incurred on account of the cost incurred over the clinical examination of the herd by the Veterinary Surgeon every three months (a herd of 30 cows at the rate mentioned—£3 per quarter or £12 a year, plus £1 is. od. for special interim visits in respect of a fresh cow having been admitted into the herd).

I submit that no person can produce clean milk habitually and regu-

larly without proper facilities, conveniences, and appliances.

Things are greatly improving in respect of these points, and if only the obstacle of the Veterinary Surgeons' Fees could be removed (paid for by one of the Authorities, or better still the Exchequer!), "Grade A" producers would quickly multiply.

# BLIND PERSONS ACT, 1920.

The Carmarthenshire Blind Society was established on the 18th March of this year, constituting an amalgamation of the two previous authorities dealing with this problem—the Carmarthenshire Blind Relief Society and the Carmarthenshire Association for the Blind, and their operations are confined solely to our administrative area.

This Society was requested by the Ministry of Health to submit a full and comprehensive report to the County Council dealing with the welfare of the Blind. This was done, when it was resolved ,after full

consideration, to make a grant of £500, to be allocated thus:

the second secon	N	S	d	
I. Grant to Society (to meet part cost of travelling,				
printing, postages, etc		0	0	
2. Workshop Employees (2 at £18 each)	36	0	0	
3. Homeworkers (5 at £18 per annum)		0	0	
4. Home Teachers (2 at £78 per annum—To be appointed				
by the County Council)				
5. Unemployables	200	0	0	
			_	
	£500	0	0	-

provided, that grants under headings Nos. 4 and 5 be paid as from 1st January, 1926, and the others as from 1st April, 1925.

Hereunder a resume of the work to be carried out.

#### NUMBER OF BLIND ON THE REGISTER.

Ages.	0-5.	5-10	10-13	13-16	16-18	18-21	21-30	30-40	40-50	50-60	60-70	70 and upwards	Total
Male Female	 I 2	3	1 3		<u>-</u>		7 7	7 12	13	25 18	21 34	49 72	127
Total	 3	4	4	1	4	1	14	19	20	43	55	121	289

The County Council have accordingly made provision for the various branches of work amongst the Blind, the total number registered being

289.

Of this number a large portion are of the unemployable class, and will be regularly visited and cheered by the two Home Teachers and Welfare Visitors who are about to be appointed. These people will be taught to read embossed type, and pastime occupations, such as string bags, wool mats, chair caning, etc., and it is anticipated that they will greatly benefit.

A sum of £200 has also been voted to relieve necessitous cases. This sum does not permit of more than small weekly grants, there being so many of our adult blind in poor circumstances. Weekly allowances varying from 1/- to 5/- have been granted, and there are still some who

are on the waiting list.

All Home Workers are now working under the Home Workers Scheme, and are receiving a weekly augmentation of wages from the Swansea & South Wales Institution for the Blind, which Institution supervises the work, and to whom the County Council pay grants equal to those paid by the Ministry of Health.

The County Council are also paying on a grant for grant basis to the Swansea & South Wales Institution for the Blind for those from the County who are being trained or employed in the Institution at Swansea.

Arrangements are being made to assist in the prevention of blindness, and to put into operation that part of the Public Health Act, 1925, which provides for this.

# MENTAL DEFICIENCY ACT, 1913.

# PANTGLAS HALL CERTIFIED INSTITUTION.

This Institution was opened on the 1st January, 1924. It is run by the joint action of the three counties—Pembrokeshire, Cardiganshire, and Carmarthenshire.

It was certified at the outset for the reception of 50 female patients, and those to be of the high-grade type, with view, ultimately, to be extended for all grades of both sexes.

The 50 places are allocated between the three counties on the basis

of population which works out thus:

24 Carmarthenshire.

15 Pembrokeshire.

II Cardiganshire.

50

The staff comprises:

I Superintendent Matron,

I Charge Nurse,

3 Nurses,

I Seamstress,

2 Maids,

I Cook.

I Laundress, and a

Part-time Medical Officer (Dr. W. A. T. Lloyd, Llandilo).

It has, since March, 1926, been sanctioned by the Board of Control to adapt the place for the accommodation of another 20 patients, and at the time of writing this report the places are ready for occupation.

At this stage in the development of this Institution I deem it advisable to subjoin the Superintendent Matron's (Miss M. C. Treharne-Jones) report, in order to show the conduct and function served by the Institution.

The number of admissions during the year ended 31st March, 1926, was: Feeble-minded—6, Imbeciles—2.

Of these 8 defectives, 3 were notified by the Carmarthenshire County Council, 3 by the Pembrokeshire County Council, and 2 by the Cardiganshire County Council.

No. of Discharges .. Nil.

No. of Deaths .. Nil.

No. of Transfers .. Nil.

Total number of names on the Institution Register on the 31st March, 1926, was 50.

Under 16 .. .. 14 Over 16 .. .. 36

of these

3 women are high grade.

33 ,, low ,,
— children high ,,
14 children low ,,

of these

3 women are Epileptics.1 child is Epileptic.1 ,, is a Cot case.

The Cot case is a cripple, and requires constant care and attention. Of the 50 Mental Defectives 26 were admitted from Carmarthenshire, 18 from Pembrokeshire, and 6 from Cardiganshire.

All the girls in this Institution, with the exception of three, are engaged in some occupation or another. In these three cases it was found that it was impossible to teach them anything.

#### CHILDREN.

The children are between the ages of 7 and 16 years. They attend school from 9.30 a.m. to 11.45 a.m., and from 2 p.m. to 4 p.m. They are taught under the "Montessories" system. Some of the subjects are reading, writing, sewing, weaving, rug making, basket making, drilling, singing, dancing, etc. They also go for long walks for Nature lessons. These have very much improved, especially in personal cleanliness, as can be seen by the patients' visitors book.

#### ADULTS.

The adults are trained, according to their mental capacity, in cooking, laundry work, house cleaning, laying the tables, washing dishes, cleaning cutlery, cleaning vegetables, making beds, and serving meals. In the afternoon they are taught rug making, basket making, sewing, darning, knitting, crocheting and mending. In the evening they have singing, drilling, dancing, and games. Music and all kinds of rhythm being a great factor in their tuition.

# LAUNDRY.

The Laundress has five girls at present at the laundry. These girls are quite interested in their work. All the laundry for the Institution is done at the Institution laundry.

The number of Articles washed, ironed, and aired during the year,

36,611.

#### KITCHEN.

The cook has two girls in the kitchen, one girl is 18 years of age, who has very much improved, and is of great assistance to the cook. The other is just over 16 years, and out of school, she is improving, and shows intelligent interest in her work. The kitchen girls are taught how to cook meat, vegetables, and puddings, also how to knead and bake bread. All the bread for the use of the patients and staff is made at the Institution. There are also two girls in the scullery, who wash up and clean vegetables.

#### SEWING ROOM.

The Sewing Maid has only two girls in the Sewing Room. These girls have improved very much, both are able to use a treadle machine, and sew all plain work, also count the articles to and from the laundry. Both these girls are only 18 years of age.

During the year ending March 31st, 1926, the following Articles

were made in the Sewing Room :-

Patients.	405 Carried Forward.
42 Dresses.	31 Best Dresses.
59 Pinafores.	104 Pillow Cases.
33 Knickers.	73 Mattress Covers.
48 Chemises.	60 Bedstead Covers.
67 Nightgowns.	5 Curtains.
24 Combinations.	I Mantleborder.
go Squares.	10 Staff's Uniform Dresses.
14 Coats.	48 ,, ,, Aprons.
14 Skirts.	14 ,, ,, Belts.
14 Blouses.	18 ,, ,, Caps.
405	769 Total amount made.
The total number of Artic	eles mended during the same period:
Household Linen and Patie Stockings	
	T-1-1
	Total 1543

#### LEAVE OF ABSENCE.

During the year four patients were granted leave on licence for six months. At the expiration of that period three were granted a further licence for 12 months. Also six patients were allowed to go home for one month's holidays, and in each case the parents were highly pleased with the great improvement shown in their daughters after even a short stay at the Institution.

# GENERAL HEALTH.

The general health of the patients has undoubtedly improved during the year, all having gained in weight since admission.

The total number of days in the sick ward with minor ailments—203.

Gastritis	 	I	Colitis	 I
Bursitis	 	I	Abscess in axilla	 2
Lumbago	 	1	Tonsilitis	 I
Blepharitis	 	I	Injury to Buttock	 I
Hemorrhage		I	Herpes	 I
Enilanar	 	I	The state of the s	

#### ENTERTAINMENTS.

Several concerts were held during the winter months, which were greatly enjoyed and very much appreciated by the patients and staff. We should like to give special thanks to Mr. D. Haddon Jones of Llanelly for organising these concerts, and to the artists who took part, and who have so unselfishly sacrified their time and pleasure for the benefit of those who are not so fortunately situated as themselves. We also wish to thank several of our friends who have assisted by their kind and generous donations.

I feel that these concerts play a great part in the training of the defectives, apart from the enjoyment derived therefrom, and that it is a great tuition to the patients to come in contact with the outside world, to teach them decorum and good general behaviour, and also to bring the Institution more to the notice of the general public.

These concerts broke the monotony of the long winter evenings at the Institution, which is keenly felt by the staff, especially those members whose homes are not in the vicinity, being that the Institution is so very isolated.

#### RELIGIOUS SERVICES.

The Rev. Daven Jones of Llanfynydd has held several services during the year, but not so many as we should have liked owing to ill health. His services have always been very much appreciated by the patients and staff.

# COUNTY ANALYST.

Summary of work done during the year.

# THE PUBLIC HEALTH (MILK AND CREAM) REGULATIONS, 1912 AND 1917.

By these Acts a definite restriction is placed on the use of preservatives by producers, retailers, and others concerned in the Milk and Cream trade; no preservative is to be added to milk in any case, and no preservative is to be added to cream which is not sold as preserved cream.

The addition to cream of any other preservative than those mentioned is prohibited.

The object of these regulations in regard to cream is to secure that preserved cream, sold in compliance with the Regulations, should be distinguished at all stages of sale from cream to which no preservative has been added.

This distinction is important in the interests of the public generally, and particularly in the interests of infants and mothers.

No samples were submitted for examination under these Regulations

during the year.

#### FOOD AND DRUGS.

I. Of 202 samples of milk 167 were fully equal to the required minimum, and II were just on limit or slightly under for fat and non-fatty solids. Io were badly curdled (fat 2.9 to 3.0 %).

The following samples of milk were condemned:

Added water .. .. .. . . . . . . , , Deficient in fat and added water .. I ,,

Total 14 ,, (6.93 % of the whole.)

2. Of 8 samples of butter 6 were free from boric acid, and 2 contained small amounts not exceeding 0.08. The samples were satisfactory as regards quality, and contained no excess of water or foreign fats.

3. Sample of Cream was satisfactory, and contained small amount

of boric acid, 0.07 %.

4. The remaining samples of Food and Drugs were of satisfactory quality.

# WATER ANALYSIS. (Domestic Supply.)

One sample was examined, and was of satisfactory purity, both chemical and bacteriological, but it had a solvent action on lead dissolving 0.26 parts per 100,000.

Effluents—10 samples were examined, with results as under:

Trimsaran Colliery:			Suspended Matter		
Sample No. 1			26	parts per	100,000
Sample No 2		4.	313.0	. ,,	,,
Carway Colliery			trace	(0.5)	,,
Tumble No. 1 Colliery			887.0	,,	,,
Glynhebog Colliery			244.0	,,	,,,
Pentremawr Colliery			1378.0	,, .	,,
Ponthenry Colliery			276.0	,,	,,
S. R. Colliery, Cross H	lands		130.0	,,	,,
New Dynant Colliery			39:0	,,	,,
Gwendraeth Colliery			12.0	,,	,,
No free mineral acid or po	oisono	us me	etals we	re present	

# SALE OF FOOD AND DRUGS ACT.

This work is carried out by the Inspectors of Weights and Measures The County, for this purpose, is divided into 3 divisions—Eastern, Western, and Carmarthen Borough Council. The last mentioned administer these Acts independently.

# EASTERN DIVISION.

Table shewing the number of samples taken, number genuine, number deficient, number of prosecutions and convictions, and the amount of fines and costs for the year ended 31st December, 1925.

No, of Samples taken,	No. Genuine.	No. Deficient.	No. of Prosecutions.	No. of Convictions.	Amount of Fines.	Amount of Costs.
*107	100	7	4	4	£ s d 1 10 5	£ s d 4 9 6

\* Milk-100. Butter-7.

Table shewing administrative action regarding samples reported not to be genuine, for the year ended 31st December, 1925.

Nam of Articl		Identi- fying No.	Nature of Deficiency.	What Action taken.	Fines.	Costs.
					£sd	£sd
Milk		2	41% added water	Vendor informed	_	_
,,		3	14% ,,	Proceedings taken	I 10 0	0 17 6
***		17	8% ,, and			
	2000	2000	10% fat deficiency	Proceedings taken	-	I I 6
.,,		26	10% added water	90	_	I I 6
,,		33	4%	Vendor informed	_	_
,,		34	6% ,,	Proceedings taken	_	1 9 0
"		35	4%	Vendor informed	_	

Nos. 26, 33, 34, 35 were milk from the same farm, No. 26 taken from retailer, and Nos. 33, 34, and 35 on delivery to retailer.

JOHN JONES, Inspector.

# WESTERN DIVISION.

Report of samples taken during the year ended 31st December, 1925.

No, of Samples taken	No. Genuine	No. Adult- erated	Nature of Adulteration.	Action taken.	Fines.
2	2	-	-	-	
				_	
		1000		The second second	
1	1	_			_
1	1	_	_	_	_
I	I	-	_	_	-
I	I	-	S 255 - 10 1 10	-	-
104	97	7	10% deficient in fat	Cautioned	_
			" "	33	-
			" "	. ,,	_
			11% added water	Proceedings	£3 10 0
			20% deficient in fat		Dismissed
				Cautioned	-
			10% ,,	))	-
	Samples taken  2 1 6 1 1 1 1	Samples taken Genuine  2 2 1 1 6 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1	Samples taken   No. Genuine   Adulterated	Samples taken   So. Genuine   Adulterated   Nature of Adulteration.	No.   Adulterated   Nature of Adulteration.   Action taken.

#### CARMARTHEN BOROUGH.

Thirty-one samples of foods were taken during the year, made up as follows:

New Milk	 		15
Preserved Cream	 		6
Condensed Milk	 		4
Blanc Mange	 		2
Minced Meat	 		2
Shredded Meat	 		I
Welsh Oatmeal	 		I
			_
	Tota	al	31

Not so many complaints were made during the year as formerly, and the quality appears to have improved. One case of insufficient labelling was detected, the matter was inquired into, and it appeared to have been an oversight. All other commodities required by law to label were in strict conformity.

RAINFALL

For the 5 years covered by this report.

		1921	1922	1923	1924	1925
January		6.23	5.21	3.51	5.86	5.87
February		0.30	4.37	8.96	0.57	11.26
March		4.50	3.45	2.41	2.73	1.81
April		1.62	3.96	3.29	3.98	4.52
May		2.42	2.20	3.30	3.86	8.44
June		0.06	1.60	1.19	3.64	0.03
July		2.98	6.73	2.93	5.68	3.32
August		6.02	5.20	6.16	5.67	6.78
September		2.48	4.85	4.93	6 63	4.89
October		3.19	1.94	7.90	6.34	9.67
November		4.19	2.65	5.63	3.40	4.68
December		4.17	5.92	5.80	9.26	6.11
	i	38.16	48.08	56.01	57.62	67.38

The average fall per year for the last five years = 53.45 inches.

These figures are of value in estimating the yield of a proposed Water Supply. The sources of water supply are varied, each has its own peculiar characteristics, but all are derived from the same source, and descend to us in the form of rain, dew, mist, hail, and snow.

Rain is estimated in inches; that is, the fall of an inch of rain implies that on any given area, say a square yard of surface, rain has fallen equal to an inch in depth.

Records are kept at three different places in the County—Carmarthen, Llanelly Borough, and at Llynyfan (the source of the Llanelly Rural Water Supply), and the average of the three records works out for each month and year as above.

It will interest many to know that a fall of one inch on an acre of ground gives 22,623 gallons, but a knowledge of the number of inches of annual rainfall on a given area is an uncertain guide as to the amount of the fall that would be available for utilization for water supply—a part is lost by evaporation, part retained in the soil, part absorbed by vegetation, and part may flow underground, to supply springs at a distance, but from observations made the amount available is approximately determined by taking the average fall of the three driest consecutive summers.

### MEAT INSPECTION.

Course of Instruction for Sanitary Inspectors desirous of qualifying as Inspectors of Meat and other foods.

# REGULATIONS AND ORDERS No. 2231 (REGULATIONS FOR TECHNICAL SCHOOLS, &c.), 1918.

The communicableness of disease through the consumption of diseased meat has long been established by the profession. This at last resulted in the appointment of a Departmental Committee to consider and report upon the legislative and administrative measures necessary to secure adequate protection for the health of the people.

The report adversely comments on the amount of meat placed on the market without having been inspected, and recommends, realising the dearth of expert Inspectors, the training of lay Inspectors (i.e., the training of a qualified Sanitary Inspector) for obtaining the Meat In-

spector's Certificate.

The only grant available for the establishment of such a class is that provided under Technical Schools provisions, and I would strongly urge, in the interest of the Public Health, your earnest consideration of the undermentioned scheme.

# COURSE OF TRAINING DIVIDED INTO TWO PARTS.

Part I.—Consists of Lectures and Demonstrations.

We have in the Llanelly Abattoir the necessary facilities for demonstration purposes, which has been approved. This place is under the direct supervision of Mr. J. Campbell Hill, Veterinary Surgeon, who is an expert of high standing on

Meat and Foodstuffs.

Mr. Hill, who is an able lecturer, approved by the Royal Sanitary Institute, is prepared to undertake to deliver the lectures. There is a convenient Hall for this purpose in Murray Street, Llanelly, with the dimensions 38ft. by 18ft. by oft.

The classes to be held once weekly for 12 consecutive weeks,

on a day to be fixed to time-table, thus:

2.0-3.30 p.m.—Practical demonstrations at the Public Abattoir, Llanelly.

3.45-4.30 p.m.—Lectures on Sanitary Law, Orders, and Regulations, etc., at the Lecture Hall.

Part II.—Will begin on completion of Part I.

The classes to be arranged by the Royal Sanitary Institute in London, and to be held daily, the course covering a period of two weeks.

# PROPOSED CONDITIONS OF AWARD OF SCHOLARSHIPS.

Candidates must hold the Inspector of Nuisances Certificate of the Royal Sanitary Institute or the Certificate of the Sanitary Inspectors Examination Board.

No charges to be made for tuition.

Expenses allowed thus:

Under Part I.—Train fare to Llanelly. The fares to be refunded at the end of this course, subject to a satisfactory certificate by the Instructor as to conduct and progress.

Under Part II.—Train fare to London. An allowance of £2 2s. per week for the two weeks' course in London, subject to the candidate sitting the examination. These expenses to be paid after the examination.

#### ESTIMATE OF COST BASED ON TEN STUDENTS.

	£	S	d
Return Railways fares to Llanelly, calculated on an average of 6s. return fare	36	0	0
Return fares to London, taking Carmarthen as a Centre.			
$f_{2}/14/0 \times 10$	27	0	0
$f_2/14/0 \times 10$	42	0	0
Fee to Royal Sanitary Institute for Instruction in London	30	0	0
Fee to Mr. J. Campbell Hill, Llanelly, inclusive of use of Abat-			
toir and Lecture Room	30	0	0
	165	0	0

This was submitted to the Education Committee.

Notwithstanding an enquiry letter from the Board of Education respecting this proposal, no action was taken.

# PROPOSAL OF A WHOLE-TIME SANITARY INSPECTOR FOR THE COUNTY.

This proposal was submitted at the December meeting, 1924, explaining that I considered it long overdue, and that I would have brought the matter on long before; but I refrained from doing so, having regard to the economy cry enjoined upon us, notwithstanding a deep conviction on my part that economy exercised at the expense of inaction in health questions spelt false economy, and that the question of the rate of incidence of disease and questions of prevention against disease should tower over rates and taxes, and that my knowledge of the existing state of things compelled me to run the gauntlet.

I advocated the proposal on the undermentioned grounds:

 I was the only whole-time specialized Medical Officer in the Public Health Department, and that I was considerably

TABLE I.

		Birt	Births Nett.	Deaths R	Deaths Registered in District.	Transferable Deaths.	de Deaths.	Deaths 1	Deaths under 1 year of age.		Census, 1921.
Name of District.	Estimated Population	,			,	Outward.	Inward.				
		No.	Rate per 1000 Population.	No.	Rate per 1000 Population.	Of non-residents registered in District.	Of Residents not registered in District.	No.	Rate per 1000 Nett Births.	Area of Dis- trict in Acres.	Total Popula- tion at all ages
URBAN.											
Llanelly	39090	795	20.3	452	7.1.7		1.	89	24 00	ogoc	26504
:		165	16.7	711	11.8	86	9	14	0.4.8	5160	10011
:	2053	29	1.4.1	36	17.5	2	7	н	34.4	304	2102
:	1975	31	15.6	31	15.6	1	5	н	32.2	1266	1932
Newcastle Emlyn		04	19.2	48	14.4	1	80	6	140.6	2854	3181
		7	0.0	13	15.9	1	4	1	1	208	851
•••		139	18.2	72	9.4	7	II	3	21.5	944	6984
		139	21.4	63		1	II	13	93.5	1374	5932
Cwinamman	5092	104	18.2	42	7.3	-	3	9	57.6	750	5304
RURAL.	76930	1473	1.61	874	11.3	124	72	115	78.0	14929	728o1
Therefore											
		771	21.1	441	12.1	6	38	70	2.06	49960	34235
:	24420	404	19.8	341	13.9	9	24	30	6.19	160037	24367
	22700	485	21.3	268	8.11	II	23	34	70.1	104559	21779
Newcootlo Emlin		122	17.9	100	14.7	1	3	7	57.3	132153	6984
	0174	90	12.9	80	12.9	I	9	2	62.5	43830	6295
:	5057	71	14.2	80	17.0		9	12	0.691	43992	5100
riamy by their	3407	55	1.01	50	14.6	I	3	6	163.6	39012	3508
	105000	2068	19.6	1366	13.0	29	103	167	80.7	573543	102268
Urban Area	. 76930	1473	1.61	874	11.3	124	72	115	78.0	14929	728oI
Kural Area	. 105000	2068	9.61	1366	13.0	29	103	167	80.7	573543	102268
Whole County	. 181930	3541	19.4	2240	12.3	153	175	282	9.62	588472	175069
		-					The same of	-			

TABLE II.

Cases of Infectious Diseases "Notified" during the Year on the Weekly Returns and "Case Mortality."

	1000						1000	-		-				Tuber	ruloris.				uster.	Onlith			monta		nterv.		o Spinal	*Wh	ooping	B00 5-0	en Pox.	Encey	halitis		Polio-		orman.
Name of District.	Smal	Pex.	Souriet	Fever.	Dipht	heria.	Typhoid	Pever.	Pumper	al Pever	Etys	ment.	Pulm	coary.	Other		Deaths from Tuber-	-50.0	DELITE.	opata	SATISMI.		Ferms)	Dyse	nony.	100	TEL.	Co	uga.	-Cinca	en rux.	Leuna	il general.	шуч	DIFFED.	E ANDRE	ortuna.
	No. of Cases.	No. of Draths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases,	No. of Deaths	No. of Cases.	No. of Beaths.	No. of Cases.	No. of	culcsis.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No of Cases.	No. of Deaths.	No. of Cases.	No. of Daaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
URBAN.	-																																				
Carmarthen Llandilo			71 1 1		118 11 2	4 2	1				4 3		73 13	32	25 3 2	3	39	12.12	8	3	::	58 I 7	43 8 4		::		::		7 2			4	3	::			11 2
Kidwelly Newcastle Emlyn			1 23 1 4		4		1				2 2		11	8 1 3	4	3 1 2	1 2 5	34				16	4 3				::	3		30	::				::		-
Burry Port Cwmamman			54 8		21	2			-:-	11		-	6	3	2	4	3 7	12		1:	::	5	5 2	::	::		::	1.		::		::		::	::	11	-
Total .	-		164		184	10	3		2		22		212	33	40	22	74	36	9	4		98	70				**	3	11	30		4	3				16
RURAL						luca.	100		100														1														
Llandovery			99 34 11 2 1 2	2	97 13 42  3 1	3 3	7 1		4	3	3 5		76 24 14 1  3 10	40 47 13 7 6	26 8 5 	9 4  2 1 3	50 35 17 7 8 1	6 1	4  1 	1		21 6 11 5  1 8	28 20 13 7 4 6		::		::		7 5 1 1 			1 2	1 1	I		::	8 10 7 2 2 2 2
Total .			149	2	168	21	9	1	5	3	20		128	101	30	=9	130	7	6	3		52	78						14			3	2	1			33
Urban Area - Rural Area -			164 149		184	10	3 9		2 5	3	22	12	112	53	40 30	21 29	74	35	9 6	4 3	::	98 52	70 78					3	11	30	**	4 3	3 2	1			16 33
Whole County .			313	3	352	31	12	1	7	3	42		240	154	70	50	204	43	15	7		150	148			14		3	25	30		7	5	1			49

<sup>\*</sup> Not compulsorily notifiable by Statute.

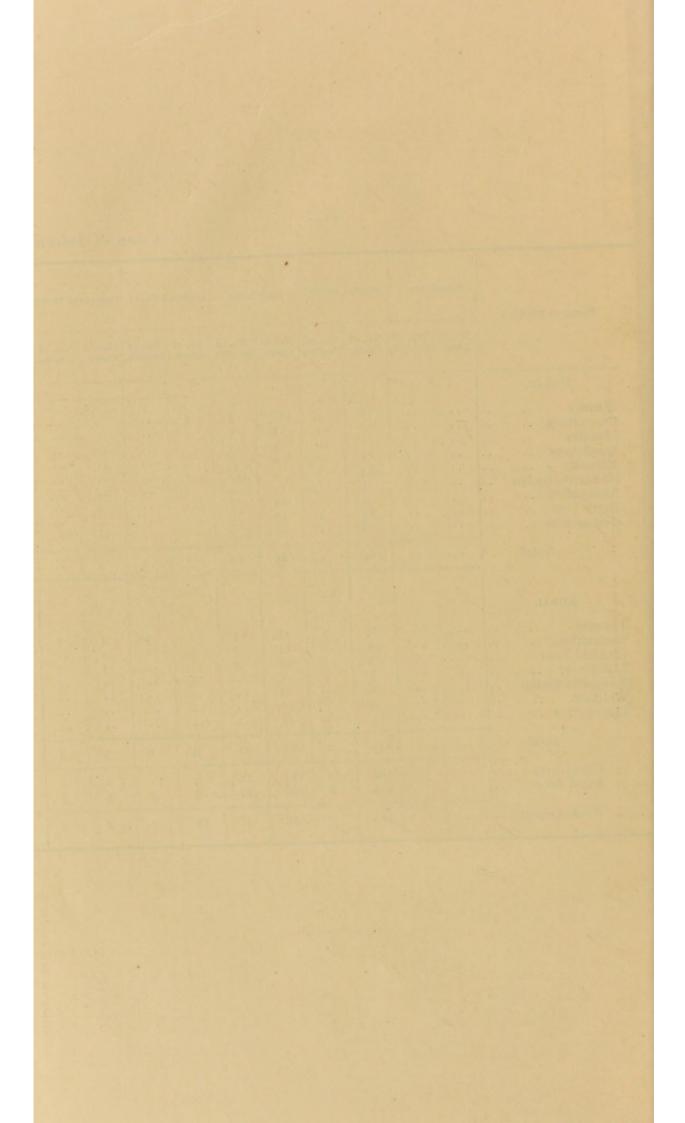


TABLE III.

Causes of Death at different Periods of Life during the Year 1925.

	CAUSES OF DEATH.	елтн.			All Ages	Under 1 year.	r and under 2 years.	2 and under 5 years.	s and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and under 75 years.	75 and upwards.
	All Courses		Males Females	::	1611	158	25	39	40 41	46	107	252	200	202
	All Causes	0	Total	:	2240	282	50	71	81	104	248	509	424	471
i	Enteric Fever	:	:		I	:	:	:	:	:	I	:	:	1
ci	Small Pox	:	:		:	:	:	:	:	:	:	:	:	1
ė.	Measles	: :	:		15	03	4	7	:		н	:	:	1
+ 16	Whooping Cough	: :	: :	: :	25 00	: 21	: 0	ns en	: +	: :	: :	: :	: :	1 1
9	Diphtheria			:	31	:	. 61	13	91	:		:	:	1
7.	Influenza	:	:	:	46	3	:	:	H	64	7	11	14	11
œ	Encephalitis Lethargica	:			2	:	:	:	**	I	3		1	1
6	Meningoeoccal Meningitis	: :	:		н	н	:	:	:		:		:	1
IO.	Tuberculosis of Respiratory System	u		**	154	н	н	64 1	1	34	99	34	7	64
II.	Other Luberchious Diseases	:			20	2	64	7	7	13	0	000	4	1
12	Cancer, Mangnant Disease	:			204	:	:	-	: '		13	900	02	40
14.0	Diabetes	: :			11	:	:	:	+	200	0 +	2 4		۱ ،
15.	Hemorrhage		: :	: :	146	: :		: :	: :		4 01	37	5.4	62
16.	Heart Disease	:			365	:		: :	. 20	IO	29	III	123	87
17.	Arterio-Sclerosis	:	:	:	49	:	:	:	:	:	:	91	21	30
18.	Bronchitis				124	14	03	:	:		4	23	27	53
19.	Pneumonia (all forms)				148	38	1.5	00	4	2	14	22	18	24
20.	Ulcer of Stomach or Duodenum		: :	: :	23	: :	: :	e :	1	: *	4 -	0 4	6	0
22	Diarrhoea, &c	:		:	47	22	. v	4	: :	:	+ +	+ 50	. 4	9
23.	Appendicitis and Typhillitis				17	:	:	3	6	61	4	. 60	- 61	1
24.	Cirrhosis of Liver	:		:	+	:		:		:	:	3	н	1
25.	Acute and Chronic Nephritis	:	:		84	:	:	64	2	63	14	28	91	17
20.	Fuerperal Sepsis	:			60	:				63	н		:	1
27.	Other accidents and Diseases of Pregnancy and Parturition	regnancy ar	d Parturiti	uo	12	:			:	co	6	:	:	1
20.	Congenital Debility and Malformation, Fremature Birth	tion, Frema	ture Birtin		0II	114	:	н	н	:	: '	:	:	1
29.	Other Deaths from William	:			64	:	:	:	:	m	9	II	н	I
30.	Other Deaths from Violence	:	:	:	74	6,43	на	6	II	6;	200	13	6	н
200		:	:		394	8	0	0	CT	11	33	10	47	137
-	COMPANY OF STREET	:	:		707	:	:		:	-	24	0	c.	



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