

[Report 1963] / Medical Officer of Health, Carmarthenshire County Council.

Contributors

Carmarthenshire (Wales). County Council. no2003000265

Publication/Creation

1963

Persistent URL

<https://wellcomecollection.org/works/k22tzm7q>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

Carmarthenshire County Council

Annual Report

OF THE

County Medical Officer
of Health

For the Year 1963

CARMARTHEN :

Printed by The Journal Co. Ltd., 18, King Street.

CONTENTS

	<i>Page</i>
Introduction	4
Committee	6
Public Health Officers	6
Statistics :	
Population	12
Births	12
Infant Mortality	13
Neo-natal Deaths	14
Perinatal Mortality	14
Maternal Mortality	15
Deaths	15
Causes of Death for Age Groups	16
Chief Causes of Death	17
Infant Deaths from Infectious Diseases	17
Cancer Mortality	18
Administration	19
Joint Use of Staff	20
Voluntary Organisations	20
Domiciliary Health Services :	
Elderly Sick and Infirm	21
Care of Mothers and Young Children :	
Expectant and Nursing Mothers	22
Personal Record Cards	22
Haemoglobin Tests	22
Unmarried Mothers and their Children	23
Child Welfare	24
Clinic Accommodation	26
Medical Treatment of Infants	26
Premature Infants	28
Infants at Risk of Handicapping Conditions	29
Ruth Griffiths Test	32
Phenylketonuria	32
Ophthalmia Neonatorum	33
Welfare Foods	33
Dental Care	34
Gynaecological Clinic	35
Family Planning Clinic	36
Nurseries and Child Minders	36
Nursing Homes	36
Domiciliary Midwifery	36
Maternity Flying Squads	38
Exfoliative Cytology	38
Hospital Provision for Maternity Cases	38
Gas and Air Analgesia	39
Pethidine	40
Trichloroethylene	40
Refresher Courses for Midwives	40
Pupil Midwives	41
Puerperal Pyrexia	41
Supervision of Midwives	41

	<i>Page</i>
Health Visiting	41
Student Health Visitors	42
Refresher Courses	42
Home Nursing	43
District Training	43
Refresher Courses	44
Prevention of Break-up of Families	44
Vaccination and Immunisation	44
Smallpox Vaccination	44
Diphtheria, Whooping Cough and Tetanus Immunisation	45
BCG Vaccination	46
Poliomyelitis Vaccination	47
County Ambulance Service	48
Service on Repayment	49
Radio Control	51
Prevention of Illness, Care and After-Care	52
Tuberculosis	52
Malignant Disease	53
Chiropody	53
Travelling Expenses of Relatives	54
Home Help Service	55
Health Education	57
Mental Health Service	57
Staffing	57
Training Centres	57
Residential Homes	58
Mental Illness	58
Mental Subnormality	58
Community Care	59
Llanelly Training Centres	61
Home Teaching	63
Communicable Diseases	63
Acute Poliomyelitis	63
Laboratory Services	64
Venereal Diseases	64
Tuberculosis	65
County Welfare Services	67
Blind Persons	67
Epileptics and Spastics	70
Milk Control	70
Food and Drugs	70
Sanitary Circumstances	77
Table—Vital Statistics, 1963	78

CONTENTS

	<i>Page</i>
Introduction	4
Committee	6
Public Health Officers	6
Statistics :	
Population	12
Births	12
Infant Mortality	13
Neo-natal Deaths	14
Perinatal Mortality	14
Maternal Mortality	15
Deaths	15
Causes of Death for Age Groups	16
Chief Causes of Death	17
Infant Deaths from Infectious Diseases	17
Cancer Mortality	18
Administration	19
Joint Use of Staff	20
Voluntary Organisations	20
Domiciliary Health Services :	
Elderly Sick and Infirm	21
Care of Mothers and Young Children :	
Expectant and Nursing Mothers	22
Personal Record Cards	22
Haemoglobin Tests	22
Unmarried Mothers and their Children	23
Child Welfare	24
Clinic Accommodation	26
Medical Treatment of Infants	26
Premature Infants	28
Infants at Risk of Handicapping Conditions	29
Ruth Griffiths Test	32
Phenylketonuria	32
Ophthalmia Neonatorum	33
Welfare Foods	33
Dental Care	34
Gynaecological Clinic	35
Family Planning Clinic	36
Nurseries and Child Minders	36
Nursing Homes	36
Domiciliary Midwifery	36
Maternity Flying Squads	38
Exfoliative Cytology	38
Hospital Provision for Maternity Cases	38
Gas and Air Analgesia	39
Pethidine	40
Trichloroethylene	40
Refresher Courses for Midwives	40
Pupil Midwives	41
Puerperal Pyrexia	41
Supervision of Midwives	41

	<i>Page</i>
Health Visiting	41
Student Health Visitors	42
Refresher Courses	42
Home Nursing	43
District Training	43
Refresher Courses	44
Prevention of Break-up of Families	44
Vaccination and Immunisation	44
Smallpox Vaccination	44
Diphtheria, Whooping Cough and Tetanus Immunisation	45
BCG Vaccination	46
Poliomyelitis Vaccination	47
County Ambulance Service	48
Service on Repayment	49
Radio Control	51
Prevention of Illness, Care and After-Care	52
Tuberculosis	52
Malignant Disease	53
Chiropody	53
Travelling Expenses of Relatives	54
Home Help Service	55
Health Education	57
Mental Health Service	57
Staffing	57
Training Centres	57
Residential Homes	58
Mental Illness	58
Mental Subnormality	58
Community Care	59
Llanelly Training Centres	61
Home Teaching	63
Communicable Diseases	63
Acute Poliomyelitis	63
Laboratory Services	64
Venereal Diseases	64
Tuberculosis	65
County Welfare Services	67
Blind Persons	67
Epileptics and Spastics	70
Milk Control	70
Food and Drugs	70
Sanitary Circumstances	77
Table—Vital Statistics, 1963	78

INTRODUCTION

The year was uneventful with no major epidemics and no anxieties about possible epidemics such as occurred in 1962 in connection with smallpox outbreaks in other parts of the country.

Survey of the county statistics shows that there is scope for improvement in some fields. Infant mortality increased from 26.87 in 1962 to 28.03 in 1963; the figure for England and Wales in 1963 was 20.09 and for Wales alone 23.00. The neonatal death rate increased from 17.50 in 1962 to 19.37 in 1963. There was also an increase in the perinatal death rate from 35.47 to 42.95.

The Birthday Trust Fund published its report on Perinatal Mortality during the year and if its recommendations are implemented there should be an improvement in the relative statistics.

Another depressing figure I have to give is the number of deaths from lung cancer which increased from 52 in 1962 to 72 in 1963 an increase of 20 or about 40%. However, a cheerful note, new cases of respiratory tuberculosis fell from 90 in 1962 to 69 in 1963.

The picture of district maternity work is changing and few midwives now carry out the recommended number of deliveries. The changing pattern is mainly due to the continued increase in hospital deliveries; during the last ten years hospital deliveries have increased from 61% to 80% of the total births in this County.

The chiropody service is developing and Old Age Pensioners' Associations are taking full advantage of grants made by the Committee. The number of cases shows an increase of 400 i.e. 17%—home attendances as well as clinic attendances increased.

The activities of the home help service remained about the same, the service being used mostly for the chronic sick and elderly. The minimum charge I feel has been a factor in stabilising the service. During the year the service was extended to the preparation of homes for the reception of discharged hospital cases who live alone.

The Mental Welfare Officers have settled into their work and have justified their appointment. They have good liaison with the consultants who speak well of their community supervision. As the good relationship with the Psychiatrists develops one feels that the case load will increase and maybe in the future we may have to consider an additional appointment. In any case to make the picture complete we will need a Psychiatric Social Worker and a Medical Officer to take a vested interest in Mental Health.

The Training Centre at Llanelly continues satisfactorily and the pupils are very happy. It has now been finally decided to build at Heol Goffa, Llanelly, a new training centre with a special care unit and a

residential home for juniors. I hope that it will be ready in late 1964 or early 1965. We are still looking for premises or ground to build premises in Llanelly for an adult training centre and a residential home for adults. These projects are due to open in 1968/69 and 1971/72.

Nationally there has been an increase in the incidence of venereal disease especially amongst teenagers. However, I am glad to say that the figures for Carmarthenshire do not show such a trend. New patients attending the clinics fell from 71 cases in 1962 to 59 cases in 1963. The method of tracing contacts is not as efficient as it should be, but this is a matter that will have to be settled nationally.

There is greater liaison between the general medical practitioners and local authority services and I hope sometime in 1964 to attach health visitors, district nurses and district midwives to practices where it is feasible. I expect there will be many obstacles and teething troubles in the new development but with toleration on both sides a new era of liaison between the two services will come about.

A new feature of preventive medicine is the introduction of a register of all children at risk. After a period of time it is hoped that a pattern will show whether defects in children are associated with pre-natal conditions. I appreciate the co-operation of all consultants concerned in drawing up a classification of children at risk.

I am grateful for the support and help of the Chairman and members of the Health and Public Health Committee and I must record my appreciation of the help and assistance I received from the professional, administrative, and clerical staff of the County Health Department.

D. G. G. JONES,

County Medical Officer of Health.

HEALTH AND PUBLIC HEALTH COMMITTEE, 1963

Chairman: Alderman S. J. E. Samuel.

Vice-Chairman: Alderman Evan Bevan.

Aldermen :

Emrys Aubrey	Haydn Lewis.
Frank Davies.	W. H. Mathias, O.B.E.
Thomas Davies.	Mrs. C. R. Rees.
Mrs. Loti Rees Hughes.	D. J. Stone.
W. Douglas-Hughes.	G. R. Thomas (<i>ex-officio</i>).
D. J. Jones (<i>ex-officio</i>).	S. O. Thomas.
Edgar Lewis.	T. J. Williams.

Councillors :

C. J. Burgess.	James James.
W. I. Daniel.	Josiah Jones.
G. V. Davies.	Mrs. M. Joseph.
J. H. Davies.	Sidney Lewis.
W. J. Davies.	Dr. H. D. Llewellyn.
L. Dennis.	John Morgan.
D. Arthur Evans.	William Morris.
G. P. Evans.	J. D. Phelps.
Idris Evans.	W. J. Phillips (Abergwili).
Thomas Evans.	D. C. Thomas.
T. E. Evans.	S. I. Thomas.
Austin Griffiths.	A. T. Wilkins.
W. Harry.	G. O. Williams.
S. T. Hughes.	John Williams.

PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL

County Medical Officer of Health and Principal School Medical Officer:

D. G. G. Jones, M.B., B.S., D.P.H.

Deputy County Medical Officer of Health and Deputy Principal School Medical Officer :

M. G. Danaher, M.B., B.Ch., B.A.O., L.M., D.P.H.

Senior Administrative Officer:

W. C. Thomas, M.B.E.

Principal Dental Officer :

W. E. T. Llewelyn, L.D.S., R.C.S.

Chief Nursing Officer :

Miss I. John, S.R.N., S.C.M., H.V.Cert.

Organiser of Home Helps :

Miss Joan M. Crossman.

County Ambulance Officer :

G. B. Evans.

Assistant Medical Officers :

Elizabeth T. Davies-Humphreys, M.R.C.S., L.R.C.P.
 D. O. Davies, M.R.C.S., L.R.C.P.
 J. G. E. Collins, M.R.C.S., L.R.C.P., D.P.H.
 C. I. Morgan, M.R.C.S., L.R.C.P.
 E. Lynette Davies, B.Sc., M.B., B.Ch., D.R.C.O.G.
 Anna Ll. Davies, B.Sc., M.B., B.Ch. (Commenced 1st May).
 *E. H. Beynon-Hopkins, M.R.C.S., L.R.C.P., D.P.H. (part-time).
 *Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (part-time).
 Iris A. Jenkin Lloyd, M.R.C.S., L.R.C.P., D.P.H. (part-time).
 A. Nest M. Crane, B.Sc., M.B., B.S., D.C.H., (part-time).
 Audrey A. Jones, M.B., Ch.B., (part-time).

* Divisional Medical Officer of Health.

Assistant Dental Officers :

J. L. T. Davies, L.D.S., R.C.S.
 D. L. Walters, L.D.S., R.C.S.
 T. J. Thomas, L.D.S., R.C.S.

Medical Officer of Gynaecological Clinic :

J. Gwendoline Madel, M.R.C.S., L.R.C.P.

Senior Nursing Officer :

Miss R. E. Morris, S.R.N., S.C.M., H.V.Cert.

Senior Orthopaedic Sister :

Miss E. R. Buckley, M.C.S.P.

Assistant Orthopaedic Sister :

Mrs. O. Turner Evans, M.C.S.P.

Speech Therapist :

Mrs. R. M. Morgan, L.C.S.T.

Assistant Organisers of Home Helps :

Mrs. E. J. Griffiths.
 Miss M. M. Y. Hughes (Commenced 1st April).

Mental Welfare Officers:

H. Lewis.
 W. O. Williams.
 Miss R. E. Lewis.
 A. J. Bennett (Commenced 27th March).

Acting Mental Welfare Officers :

D. T. Longhurst.
 *J. A. D. Hopkins.
 *D. G. Jones.
 *D. A. John.
 *Esmor Evans.
 *D. J. Lewis.
 *J. I. Stephens.
 *J. G. Jones.

* Also County Welfare Officers.

Supervisor Llanelly Training Centre and Home Teacher for Mentally Subnormal :

Mrs. M. A. Lewis.

Assistant Supervisors and Home Teachers for Mentally Subnormal :

Mrs. J. M. Jones.
 D. E. Ambrose.
 Mrs. M. Woodliffe.
 Miss P. Davies.
 Miss M. Y. Jones.
 Miss L. A. Jones (Commenced 1st August).

Home Teachers and Visitors for the Blind :

Miss S. M. Tidmarsh.
 Mrs. A. Davies.
 Miss Myra Thomas.

County Analyst :

D. C. Jenkins, M.Sc., D.I.C., F.R.I.C.

Inspectors under Food and Drugs Acts :

Chief Inspector—D. R. Watkins.
 Deputy Chief Inspector—E. G. Nicholls.

Educational Psychologist :

C. B. E. James, Ph.D., B.A., B.Ed., A.B.Ps.S.

Consultants available for County Health Services

Pathologist :

D. F. Davies, M.D., M.R.C.P.

Bacteriologist under the Medical Research Council :

H. D. S. Morgan, M.R.C.S., L.R.C.P., Dip. Bact.

Chest Physicians :

J. T. Jones, B.Sc., M.B., B.Ch.
 D. B. Ll. Morgan, M.D.

Assistant Chest Physicians :

J. Williams, B.Sc., M.B., B.Ch.
Bronwen N. Davies, B.Sc., M.B., B.Ch.

Medical Officer of V.D. Clinic :

D. E. Thomas, M.B., B.S.

Obstetricians :

J. R. E. James, B.Sc., M.B., F.R.C.S., F.R.C.O.G.
Rhys M. Williams, M.B., B.S., M.R.C.O.G.

Orthopaedic Surgeons :

G. D. Rowley, B.Sc., M.Ch.
R. L. Rees, F.R.C.S.

Ophthalmic Surgeons :

G. S. Forrester, M.B., Ch.B., D.O.M.S., Llanelly.
A. Philipp, L.R.C.P., L.R.C.S., L.R.F.P.S., D.O.M.S., Llanelly.
R. E. Packer, M.B., B.Ch., D.O.M.S., Llanelly.

Ear, Nose and Throat Surgeons :

T. I. Williams, F.R.C.S., Llanelly.
S. Morgan, B.Sc., F.R.C.S., Carmarthen.

Plastic Surgeons :

Eric W. Peet, F.R.C.S., Oxford.
Emlyn Lewis, F.R.C.S., Chepstow.

Paediatricians:

R. T. Jenkins, B.Sc., M.B., Ch.B., M.R.C.P., D.C.H., Swansea.
K. R. Keay, M.D., M.R.C.P., D.C.H., Carmarthen.

Geriatricians:

J. C. Davies, M.B., B.S., M.R.C.P.
T. F. MacCarthy, B.Sc, M.D., M.R.C.P.

Dermatologist :

D. Leighton Rees, M.D., M.R.C.P., Swansea.

Orthodontist :

R. E. Rix, M.R.C.S., L.R.C.P., F.D.S., R.C.S., D.D.O., R.F.P.S.,
London.

Dental Surgeons :

J. R. Gibson, F.D.S., Chepstow.
E. J. R. Morgan, M.B., F.D.S., R.C.S.

Hon. Consultant Psychiatrist :

John Farr, M.B., B.S., D.P.M.

Psychiatrists :

E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M.
N. J. C. McGill, M.B., B.S., D.P.M.

Child Psychiatrist :

J. McDonald, M.A., M.B., Ch.B., D.P.M.

NURSING

District.	Name.	Qualifications.
Whole-time Health Visitors :		
Amman Valley	M. G. Evans	S.R.N., S.C.M., H.V.Cert.
Ammanford	A. Howells	S.R.N., S.C.M., H.V.Cert.
Bancyfelin	E. N. E. Davies	S.R.N., H.V.Cert.
Burry Port	G. M. Burford	S.R.N., S.C.M., H.V.Cert.
Carmarthen Borough	G. I. Evans	S.R.N., S.C.M., H.V.Cert.
	D. Evans Murray	S.R.N., S.C.M., H.V.Cert.
Cynwyl Elfed	N. G. E. Baker	S.R.N., S.C.M., H.V.Cert.
Felinfoel	E. M. Jones	S.R.N., S.C.M., H.V.Cert.
Llandeilo	C. M. Bailey	S.R.N., S.C.M., H.V.Cert.
Llandovery	J. Jones	S.R.N., S.C.M., H.V.Cert.
Llandybie	M. M. Davies	S.R.N., H.V.Cert.
Llanelly Borough	D. C. Insley	S.R.N., S.C.M., H.V.Cert.
	C. Jones	S.R.N., S.C.M., H.V.Cert.
	M. E. Jones	S.R.N., S.C.M., H.V.Cert.
	E. M. Perrott	S.R.N., S.C.M., H.V.Cert.
	R. M. Walters	S.R.N., S.C.M., H.V.Cert.
Llangendeirne	M. E. Thomas	S.R.N., S.C.M., H.V.Cert.
Llangennech	E. Edwards	S.R.N., S.C.M., H.V.Cert.
Nantgaredig	E. Evans	S.R.N., S.C.M., H.V.Cert.
Pencader	D. R. J. Edwards	S.R.N., H.V.Cert.
St. Clears	M. E. E. Davies	S.R.N., S.C.M., H.V.Cert.
Trimsaran	G. M. Williams	S.R.N., S.C.M., H.V.Cert.
Tumble	E. J. M. Jones	S.R.N., S.C.M., H.V.Cert.
Whitland	M. E. Morris	S.R.N., S.C.M., H.V.Cert.
District Nurse/Midwives :		
Ammanford Town	M. E. E. Davies	S.R.N., S.C.M.
Betws	S. E. James	S.R.N., S.C.M., Tb. Cert.
Saron	G. Edwards	S.R.N., S.C.M.
Tycroes	E. J. Davies	S.R.N., S.C.M.
Brynamman	A. James	S.R.N., S.C.M.
Caeo	S. Jenkins	S.C.M., S.E.N.
Cilycwm	E. G. Cox	S.C.M.
Cwmamman	V. Sharp	S.R.N., S.C.M.
Glanamman and Garnant	S. Jones	S.R.N., S.C.M.
Cynwyl Elfed	E. Thomas	S.R.N., S.C.M.
Dafen	E. M. Thomas	S.R.N., S.C.M., Tb.Cert.
Drefach	E. A. Jones	S.R.N., S.C.M.
Felinfoel	A. R. Harries	S.R.N., S.C.M.
Ferryside	E. D. A. Edwards	S.R.N., S.C.M.
Gorslas	B. M. Rees	S.R.N., S.C.M.
Kidwelly	R. H. Davies	S.R.N., S.C.M.
Laugharne	E. John	S.C.M., S.E.N.
Llandeilo	S. A. M. Rees	S.R.N., S.C.M.
Llandeilo (South)	E. A. Davies	S.R.N., S.C.M.
Llandovery	M. M. Ladd	S.R.N., S.C.M.
Llandybie	L. Thomas	S.R.N., S.C.M.
Llanfihangel-Aberbythich	A. M. Pugh	S.R.N., S.C.M.
Llanfynydd and Llangathen	M. C. Thomas	S.R.N., S.C.M.
Llangadog	H. Harry	S.R.N., S.C.M.
Llangennech	G. M. Aubrey	S.R.N., S.C.M.
	M. Lloyd	S.R.N., S.C.M.
Llansadwrn and Llanwrda	D. E. Davies	S.C.M., S.E.N.
Llansawel	M. L. Angel	S.R.N., S.C.M.
Llanybyther	D. Thomas	S.R.N., S.C.M.
Llwynhendy	M. E. Richards	S.R.N., S.C.M.
Meidrim and Trelech	(Vacancy)	
Nantgaredig	E. M. M. Richards	S.R.N., S.C.M.
Newcastle Emlyn	S. E. V. Jones	S.R.N., S.C.M.

District.	Name.	Qualifications.
Pencader	S. J. Jones	S.R.N., S.C.M.
Penygroes	L. M. Davies	S.R.N., S.C.M.
Pontyates	A. M. Hughes	S.R.N., S.C.M.
Pontyberem	M. B. Harries	S.R.N., S.C.M.
Pwll, Sandy and Furnace	(Vacancy)	
St. Clears	S. H. Griffiths	S.R.N., S.C.M.
Talley	(Vacancy)	
Trimsaran	E. M. Thomas	S.R.N., S.C.M.
Tumble	H. E. A. Ratford	S.R.N., S.C.M., S.R.F.N.
Velindre	G. R. Luke	S.R.N., S.C.M.
Whitland	R. E. Hopkins	S.R.N., S.C.M.
District Nurses :		
Burry Port	M. J. Davies	S.R.N., S.C.M.
Carmarthen	M. O. Davies	S.R.N., S.C.M.
	E. M. Husband	S.R.N.,
	H. Jones	S.R.N.
	E. G. Thomas	S.R.N., S.C.M.
Llanboidy	E. M. Adams	S.R.N.
Llanelly	H. Bushell	S.R.N.
	M. Griffiths	S.E.N.
	E. J. Somers	S.R.N., S.C.M.
	J. B. Tasker	S.R.N.
Whole-time Midwives :		
Burry Port	O. G. Thomas	S.R.N., S.C.M.
Carmarthen	E. M. James	S.R.N., S.C.M.
	D. M. Jones	S.R.N., S.C.M.
	M. D. Jones	S.R.N., S.C.M.
	M. J. Thomas	S.R.N., S.C.M.
Llanelly	M. David Griffiths	S.R.N., S.C.M.
	A. E. James	S.R.N., S.C.M.
	K. Y. Perrott	S.C.M.
	A. H. Williams	S.R.N., S.C.M.
Pembrey	M. E. Thomas	S.R.N., S.C.M.
Relief District Midwife :		
Carmarthen	(Vacancy)	
Relief District Nurse/Midwives :		
Group 1	P. G. Tiley	S.R.N., S.C.M.
Group 3 }	(3 Vacancies).	
Group 4 }		
Group 5		H. M. Jones .. .. .	S.R.N., S.C.M.
Group 6	K. J. Pryce	S.R.N., S.C.M.
Group 7	M. Branch	S.R.N., S.C.M.
Group 8	(Vacancy)	
Group 9	(Vacancy).	
Group 10	S. A. N. Price	S.R.N., S.C.M.

STATISTICS

Area : 588,472 acres.

Population—Census 1961: 167,736 (Provisional).

Estimated by Registrar General for 1963 : 166,560.

Product of a penny rate for general purposes : £16,921

Rateable Value for general purposes : £4,230,112.

In superficial area (588,472 acres) the County of Carmarthen is the largest of the Welsh Counties. Its length from the upper waters of the River Towy to the Pembrokeshire border is 50 miles. Its breadth from the River Teify on the Cardiganshire border to the River Loughor is 35 miles. Something like three-quarters of the area is agricultural, the chief industries apart from agriculture, being Forestry, Stone Quarrying and Milk Processing. The remainder of the County (the south eastern part) is industrial, the chief industries being Coal Mining, Iron and Steel Rolling, Tinsplate and Hollow Ware. During the years since the last war, miscellaneous light industries have been introduced, the chief amongst them being Light Precision Engineering and Chemical Manufacture.

Live Births :

			Male	Female	Total
Legitimate	..	..	1176	1155	2331
Illegitimate	..	..	46	49	95
Totals	..	..	1222	1204	2426

Rate per 1,000 of estimated population : 14.57.

The following table shews the number of live births registered and the birth rates during the past five years :—

Year	Urban		Rural		Admin. County		England and Wales
	No. Reg.	Rate.	No. Reg.	Rate.	No. Reg.	Rate.	Rate.
1959	833	12.32	1505	14.89	2338	13.86	16.5
1960	906	13.44	1500	14.87	2406	14.30	17.1
1961	854	12.89	1471	14.63	2325	13.94	17.4
1962	947	14.27	1509	14.98	2456	14.70	18.0
1963	931	14.10	1495	14.87	2426	14.57	18.2

Illegitimate Live Births :

Illegitimate live births per cent of total live births : 3.92.

Still Births :

	Male	Female	Total
	28	37	65

Rate per 1,000 (Live and Still) Births : 26.09.

Total Live and Still Births : 2,491.

Infant Mortality

There were 68 deaths of infants under one year old during the year; an infant mortality rate of 28.03 per 1,000 live births. This compares with a rate of 26.87 for 1962. For England and Wales for 1963, the rate was 20.9, but the rate for Wales only was 23.0.

A classification of 1963 deaths in the County is as follows :—

	Males	Females	Total	Rate
Legitimate ..	32	30	62	26.59
Illegitimate ..	4	2	6	63.16
Totals ..	36	32	68	28.03

The causes of death were :—

	Male	Female	Total
Pneumonia	5	4	9
Congenital malformations ..	7	12	19
Gastritis, enteritis and diarrhoea ..	1	1	2
Bronchitis	—	—	—
Accidents	—	2	2
Other defined and ill-defined diseases ..	21	13	34
Other infective-parasitic disease ...	1	—	1
Other heart disease	1	—	1
Totals	36	32	68

Infant mortality in the County for the last six years is summarised in the following table :—

Year	Legitimate		Illegitimate		Total		England and Wales	Wales only
	No.	Rate	No.	Rate	No.	Rate	Rate	Rate
1958	84	36.09	1	14.93	85	35.51	22.6	26.6
1959	54	23.98	2	23.26	56	23.95	22.0	24.0
1960	61	26.14	1	13.89	62	25.77	21.9	25.0
1961	46	20.48	1	12.66	47	20.22	21.4	22.0
1962	64	27.15	2	20.41	66	26.87	21.4	23.0
1963	62	26.59	6	63.16	68	28.03	20.9	23.0

Neo-Natal Deaths

47 infants under four weeks old died (neo-natal deaths) during the year, a mortality rate of 19.37 per 1,000 live births. This figure was 43 for the previous year, a mortality rate of 17.50.

An analysis of the neo-natal deaths in the County during 1963 is as follows :—

			M.	F.	Total	Rate
Legitimate	..	..	22	19	41	17.59
Illegitimate	..	..	4	2	6	63.16
Totals	..	..	26	21	47	19.37

Neo-natal deaths in the County for the last five years are summarised in the following table :—

Year	Legitimate		Illegitimate		Total		England and Wales
	No.	Rate	No.	Rate	No.	Rate	Rate
1959	40	17.76	1	11.63	41	17.54	15.8
1960	50	21.42	1	13.89	51	21.20	15.6
1961	31	13.80	—	—	31	13.33	15.5
1962	42	17.81	1	10.20	43	17.50	15.1
1963	41	17.59	6	63.16	47	19.37	14.2

Early Neo-natal Mortality (Deaths under one week)

			M.	F.	Total	Rate
Legitimate	..	..	19	17	36	15.44
Illegitimate	..	..	4	2	6	63.16
Totals	..	..	23	19	42	17.31

Perinatal Mortality (Still Births and deaths under one week)

			M.	F.	Total	Rate per 1000 total live and still births
Legitimate	..	..	45	52	97	40.55
Illegitimate	..	..	6	4	10	101.01
Total	..	..	51	56	107	42.95

Maternal Mortality

Maternal Mortality covers the number of deaths in which pregnancy or childbirth was the primary cause of death. Two such cases occurred in this county during 1963. The figures for the last six years were as follows :—

Year	Maternal Deaths.	Total Births.	Rate per 1,000 total Births.	Rate for England and Wales.
1958 ..	1 ..	2444 ..	0.4 ..	0.43
1959 ..	— ..	2396 ..	— ..	0.38
1960 ..	1 ..	2455 ..	0.4 ..	0.39
1961 ..	1 ..	2379 ..	0.4 ..	0.33
1962 ..	1 ..	2509 ..	0.4 ..	0.35
1963 ..	2 ..	2491 ..	0.8 ..	0.28

Although all abortions are included in the classification of maternal mortality, a truer picture of maternal mortality in the area is obtained by the exclusion of such cases. Maternal deaths in the county for the last six years not due to abortion are summarised in the following table :—

Year	Total Maternal Deaths excluding Abortions.	Rate per 1,000 total Births.
1958 ..	— ..	—
1959 ..	— ..	—
1960 ..	1 ..	0.4
1961 ..	1 ..	0.4
1962 ..	— ..	—
1963 ..	2 ..	0.8

All deaths due to pregnancy are specially investigated by the Consultant Obstetrician concerned. The County Medical Officer of Health adds his comments to the report which is then passed to the Regional Assessor who submits his findings to the Principal Medical Officer of the Welsh Board of Health.

Total Deaths

Male	Female	Total
1283 ..	1107 ..	2390

Death Rate per 1,000 of estimated population : 14.35.

The following table gives a comparison of the total number of deaths and death rates during the past five years :—

Year	Urban		Rural		Admin. County		Rate for Eng. & Wales
	Deaths.	Crude D.R.	Deaths.	Crude D.R.	Deaths.	Crude D.R.	
1959 ..	944	13.96	1219	12.06	2163	12.82	11.6
1960 ..	1036	15.37	1270	12.59	2306	13.71	11.5
1961 ..	1025	15.47	1215	12.09	2240	13.43	12.0
1962 ..	979	14.75	1302	12.92	2281	13.65	11.9
1963 ..	1088	16.48	1302	12.95	2390	14.35	12.2

The following table gives the causes of death in 1963 at specified ages :—

Cause of Death.	All Ages.	Under 4 weeks	4 weeks and under 1 year	1 and under 5 years.	5 and under 15 years.	15 and under 45 years.	45 and under 65 years.	65 and under 75 years	75 year and over
All Causes—Males	1283	26	10	2	7	59	428	358	393
Females	1107	21	11	3	3	28	207	276	558
Total	2390	47	21	5	10	87	635	634	951
1. Tuberculosis, respiratory	8	—	—	—	—	—	4	3	1
2. Tuberculosis, other	2	—	—	—	—	1	1	—	—
3. Syphilitic Disease	2	—	—	—	—	—	1	—	1
4. Diphtheria	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	—	—	—	—	—	—	—	—
6. Meningococcal infections	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis	—	—	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases	3	—	1	—	—	1	—	1	—
0. Malignant neoplasm, stomach	71	—	—	—	—	5	23	20	23
1. Malignant neoplasm, lung, bronchus	72	—	—	—	—	2	35	29	6
2. Malignant neoplasm, breast	33	—	—	—	—	1	19	5	8
3. Malignant neoplasm, uterus	13	—	—	—	—	—	5	7	1
4. Other malignant and lymphatic neoplasms	167	—	—	—	1	6	66	47	47
5. Leukaemia, aleukaemia	9	—	—	—	1	—	2	4	2
6. Diabetes	12	—	—	—	—	—	1	2	9
7. Vascular lesions of nervous system	365	—	—	—	—	2	60	120	183
8. Coronary disease, angina	514	—	—	—	—	14	193	146	161
9. Hypertension with heart disease	54	—	—	—	—	—	7	17	30
0. Other heart disease	311	—	1	—	—	6	50	58	196
1. Other circulatory disease	109	—	—	—	—	4	14	19	72
2. Influenza	3	—	—	—	—	—	—	1	2
3. Pneumonia	63	3	6	1	—	5	7	14	27
4. Bronchitis	114	—	—	—	1	1	22	40	50
5. Other diseases of respiratory system	72	—	—	—	—	—	34	22	16
6. Ulcer of stomach and duodenum	14	—	—	—	—	—	6	5	3
7. Gastritis, enteritis and diarrhoea	13	—	2	—	—	1	2	6	2
8. Nephritis and nephrosis	16	—	—	—	—	4	6	4	2
9. Hyperplasia of prostate	9	—	—	—	—	—	1	4	4
0. Pregnancy, childbirth, abortion	2	—	—	—	—	2	—	—	—
1. Congenital malformations	24	12	7	—	—	4	1	—	—
2. Other defined and ill-defined diseases	209	32	2	2	1	12	50	40	70
3. Motor vehicle accidents	16	—	—	1	3	4	6	2	—
4. All other accidents	70	—	2	1	3	5	11	14	34
5. Suicide	19	—	—	—	—	7	7	4	1
6. Homicide and operations of war	1	—	—	—	—	—	1	—	—
Total	2390	47	21	5	10	87	635	634	951

Chief Causes of Death

The chief causes of death during 1963 and the rates per 1,000 population compared with previous years were :—

Cause of Death	1959		1960		1961		1962		1963	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Heart and other Circulatory Disease ..	803	4.76	924	5.49	925	5.55	928	5.56	988	5.93
Cancer ..	347	2.10	348	2.07	335	2.01	349	2.09	356	2.14
Vascular Lesions of Brain	361	2.14	358	2.13	274	1.64	363	2.17	365	2.19
Pneumonia ..	63	0.37	68	0.40	70	0.42	71	0.43	63	0.38
Bronchitis ..	84	0.50	79	0.47	110	0.66	111	0.66	114	0.68
Other diseases of respiratory system ..	82	0.49	89	0.53	78	0.47	76	0.45	72	0.43
Motor Vehicle accidents ..	—	—	—	—	—	—	—	—	16	0.10
All other accidents ..	—	—	—	—	—	—	—	—	70	0.42

Deaths from the above causes for 1963 constitute 85.52% of the total deaths.

The number of deaths of persons 65 years of age and over was 1,585 or 66.32% of the total deaths in 1963.

951, or 39.79% of the total deaths were over 75 years of age.

Deaths from Infectious Diseases (up to 5 years of age) :

Pneumonia	10
Gastritis, Enteritis and Diarrhoea ..	2
Influenza	—
Measles	—
Whooping Cough	—
Diphtheria	—
Tuberculosis (all forms)	—
Other Infective and Parasitic Diseases ..	1
Meningococcal Infections	—

Cancer

The death rates per 1,000 population for the last five years have been :—

Year	No. of Deaths	Rate	Rate for England and Wales	
1959	347	2.1	2.1	2.1
1960	348	2.1	2.1	2.1
1961	335	2.0	2.2	2.2
1962	349	2.1	2.2	2.2
1963	356	2.1	2.2	2.2

A classification of the causes of death from Cancer during 1963 is as follows :—

Site of Cancer		Age Periods							Total	Grand Total
		0—	1—	5—	15—	45—	65—	75—		
Stomach	M.	—	—	—	3	12	11	11	37	71
	F.	—	—	—	2	11	9	12	34	
Lung, Bronchus	M.	—	—	—	2	30	27	4	63	72
	F.	—	—	—	—	5	2	2	9	
Breast	M.	—	—	—	—	1	—	—	1	33
	F.	—	—	—	1	18	5	8	32	
Uterus	M.	—	—	—	—	—	—	—	—	13
	F.	—	—	—	—	5	7	1	13	
Others	M.	—	—	1	5	34	26	29	95	167
	F.	—	—	—	1	32	21	18	72	
TOTALS	M.	—	—	1	10	77	64	44	196	356
	F.	—	—	—	4	71	44	41	160	

ADMINISTRATION

The County Health Services (apart from the School Health Service which is outside the scope of this report) are administered by the Health and Public Health Committee. This Committee have appointed seven Sub-Committees to assist in the administration of certain services, viz.:—

- (i) **Ambulance Transport Sub-Committee**, to supervise the administration and organisation of the County Ambulance Service and to make recommendations for the improvement of the Service. The Sub-Committee comprise representatives of the Authority, the West Wales Hospital Management Committee, the Women's Voluntary Services, and the Ambulance employees.
- (ii) **Care and After-Care Sub-Committee**, to exercise the functions relating to the Prevention of Illness, Care and After-Care. The Health and Public Health Committee have power to co-opt on the Sub-Committee persons who are interested in after-care work, provided that not more than one-third of the members of the Sub-Committee are co-opted members. The Sub-Committee have full powers, subject to any directions or restrictions imposed by the Health and Public Health Committee, and in an emergency the Chairman or Vice-Chairman of the Sub-Committee has full power to make temporary arrangements under the Scheme.
- (iii) **Mental Health Sub-Committee**, to undertake the functions for the development of the Mental Health Service. The Health and Public Health Committee have power to co-opt on the Sub-Committee two members of the County Education Committee and other persons who are experienced or interested in Mental Health work, provided that at least two-thirds of the members of the Sub-Committee are members of the Authority.
- (iv) **Three District Nursing Appointments Sub-Committees**, for the Carmarthen, Llanelly and Llandeilo areas, respectively, to make appointments to vacancies for nursing staff. The Sub-Committees which include the senior member of the County Council representing the area in which the vacancy occurs have full powers. If the appointment is to a district in which a District Nursing Association functions, representatives of the County Nursing Association and District Nursing Association concerned are also included.
- (v) **Home Help Service Sub-Committee**, to consider and make recommendations in unusual and difficult cases requiring home help assistance.

There is no divisional health organisation in the County. The County does not lend itself to divisional administration, although the School Health Service is partly decentralised for the area of the Llanelly Educational Divisional Executive.

There are no formal joint "administrative" arrangements with other Local Health Authorities, but arrangements have been made with the Glamorgan, Pembrokeshire and Cardiganshire Authorities for Ambulance Services along the border areas. Arrangements have also been made with the Glamorgan Authority for Home Nursing and Midwifery Services in the Cwmllynfell and Garnswllt areas and with the Pembrokeshire Authority in the Clynderwen and Whitland areas.

JOINT USE OF STAFF

During the year, one general medical practitioner, who attained retiring age, was replaced as Medical Officer of an Infant Welfare Centre. This leaves one Infant Welfare Centre only in the County staffed by a general medical practitioner. It is the aim of the Authority to staff all Centres by Assistant Medical Officers.

The infectious disease cases at the West Wales Isolation Hospital are under the medical care of the County Medical Officer of Health.

When required, the Orthopaedic Sisters of the Authority treat hospital orthopaedic in-patients.

The arrangements of the Authority for a Mental Health Service provide for the joint use of staff with the Regional Hospital Board.

The Physician Superintendent of St. David's Hospital is the Honorary Consultant Psychiatrist to the Authority.

The Consultant Chest Physicians of the Regional Hospital Board undertake for the Authority all possible duties in connection with the prevention and after-care of tuberculosis.

Consultant Orthopaedic Surgeons (Mr. G. Rowley and Mr. R. L. Rees) under the Regional Hospital Board also attend the County Orthopaedic Clinics.

The services of the Geriatricians appointed for the Glantawe Hospital Management Committee area and West Wales Hospital Management Committee area are also available for the welfare service of the Authority.

The County Medical Officer of Health attends the meetings of the Hospital Management Committees for Glantawe and South West Wales as well as the Carmarthenshire Executive Council.

Students from the three nurse training schools in the County spend one day, usually during the third year of training, accompanying domiciliary nurses, midwives and health visitors on their home visits, and also visit a clinic. Talks are given to the students by the Authority's Senior Nursing Staff.

VOLUNTARY ORGANISATIONS

The oldest voluntary organisations in the County with which the Health Authority are working are the County Nursing Association, the District Nursing Associations, and the Ladies' Committees of Infant Welfare Centres. The Authority owe much to these early pioneers in voluntary social work.

Although the voluntary effort of Voluntary Ladies' Committees of some of the Infant Welfare Centres continues to be very active, the general trend shows signs of waning interest.

The voluntary activities of the Women's Voluntary Services and the British Red Cross Society, continue to flourish. The first two organisations are ever ready to assist by arranging escorts for patients without regard to distance or short notice of requirements. Particular reference must be made to the work of the County Branch of the Women's Voluntary Services in connection with the tremendous amount of work undertaken by them in maintaining the Hospital Car Service. Members of the Women's Voluntary Services, Voluntary Ladies' Committee of Infant Welfare Centres and private individuals give very valuable service by distributing National Welfare Foods. It is, however, being found that as the older members give up the work of distribution of National Welfare Foods increasing difficulty is being experienced in replacing them.

All these voluntary organisations co-operate from time to time in connection with the Home Help Service, and the Women's Voluntary Services also kindly allow the use of their Llanelly Office as a Home Help Information Bureau two afternoons each week.

The British Red Cross Society, St. John's Priory for Wales and various Old Peoples' Associations provide a chiropody service for which they receive grants from the Authority.

Valuable assistance and co-operation are obtained from the St. David's Diocesan Moral Welfare Committee in the care and rehabilitation of unmarried mothers and their children.

A good deal of assistance is also rendered by the Inspectors of the National Society for the Prevention of Cruelty to Children, but their work relating to problem families and neglected children is now undertaken through the Children's Officer.

DOMICILIARY HEALTH SERVICES—ELDERLY SICK AND INFIRM

The facilities for the care of the elderly and infirm in the County are much enhanced by the fact that both the South West Wales and the Glantawe Hospital Management Committees have Consultant Geriatricians. Their services are available in an advisory capacity to the County Welfare Services as well as to general medical practitioners and, in view of the increasing number of elderly people in the community, the advantages of having consultants specialising in the ills of the aged and their rehabilitation is evident.

Foremost among the agencies available for the care of the aged and infirm are the nursing and health visiting services provided by the authority. The district nurse is quite often more than a nurse and a little less than a relative, and this status enables her to bring considerable influence to bear on the family as a whole for the welfare of the patient.

Health visitors are sometimes asked to provide reports on the social conditions of patients with particular reference to the extent to which they can be nursed at home with the assistance of either relatives or neighbours. Health visitors also deal with special enquiries in connection with the elderly infirm and keep them under casual supervision following discharge from hospital.

One health visitor made regular visits to Bryntirion Hospital and then passed on to health visitors information and requests for information in regard to patients from their individual districts. The Almoners at Bryntirion Hospital and West Wales General Hospital also worked in close liaison with the Organiser of Home Helps.

The number of chronic sick and aged persons assisted under the home help service still account for over 90% of the total cases assisted during the year. The home help service plays a vital part in keeping these patients in their own homes or returning them to their homes as soon as possible.

2149 patients over 65 years of age were attended by home nurses during the year.

In spite of the statutory assistance available, the need for voluntary workers in connection with the care of the aged remains an acute problem.

CARE OF MOTHERS AND YOUNG CHILDREN

Expectant and Nursing Mothers

Ante-Natal Clinics—Owing to low attendances, one weekly session was discontinued at the Llanelly Clinic as from the 10th June, and one fortnightly session was discontinued at Ammanford as from the 20th June. At the end of the year nine Ante-natal clinics were maintained by the Authority and twelve and thirteen sessions were held on alternate weeks. A list of the clinics and information as to attendances made during the year are as follows:—

Clinic	Sessions weekly	Medical Officer	Attendances		Average total attendance per session
			Ante-Natal	Post-Natal	
Ammanford ..	{ One *	C. I. Morgan ..	311	—	4.94
Llanelly ..	Two	C. I. Morgan ..	614	14	.56
Llangennech ..	One	C. I. Morgan ..	172	4	4.94
Kidwelly ..	One	C. I. Morgan ..	172	6	3.49
Burry Port ..	One	Davies-Humphreys ..	400	108	9.96
Cross Hands ..	Two	Davies-Humphreys ..	589	72	6.74
Pontyates ..	Two	M. G. Danaher ..	588	14	5.90
Llwynhendy ..	One	E. L. Davies ..	285	56	6.69
Amman Valley Hospital ..	One	E. L. Davies ..	334	10	6.75
	One	John Davies ..	1358	—	27.71

* A Special post-natal session is held fortnightly at the Ammanford Clinic.

1,324 cases made 4,935 attendances at the Clinics during the year, viz:—

Ante-Natal .. 1,106 cases, 4,651 attendances.
Post-Natal .. 218 cases, 284 attendances.

Cases for specialist opinion are referred to clinics at the West Wales General Hospital, Carmarthen, the Llanelly Hospital, and the Amman Valley Hospital, Glanamman.

Blood specimens are taken at all the Authority's clinics, and the blood groups and Rhesus Agglutinins are made known to midwives and general medical practitioners.

Many general medical practitioners hold their own ante-natal clinics and they were reminded during the year that provided routine work so allowed, domiciliary midwives could attend such sessions.

Maternity Outfits.—Maternity outfits are supplied by the Authority free of charge through the domiciliary midwives to all patients confined at home.

Personal Record Cards—The personal record cards again proved their value in the care of the patient. The majority of the staff of hospitals and general practitioners co-operated in their use.

Haemoglobin.—Tallquist Haemoglobin charts have been issued to all midwives to enable them to estimate the haemoglobin of every maternity patient booked, and to refer as soon as possible to the general practitioners all cases of anaemia. Unfortunately, few expectant mothers book midwives in the early months of pregnancy.

Care of Unmarried Mothers and their Children

Under the Authority's arrangements, unmarried mothers can be admitted to the following hostels :—

Northlands, Cardiff.
 St. Martin's Home, Hereford.
 Cwmdonkin Shelter, Swansea.
 56, Stanwell Road, Penarth.

Particulars of admissions and discharges during 1963 are given in the following table :—

Hostel.	Admissions.	Discharges.	In Residence on the 31st December.
Northlands, Cardiff	8	8	1
St. Martin's Home, Hereford ..	1	1	1
Cwmdonkin Shelter, Swansea ..	3	4	—
56, Stanwell Road, Penarth ..	2	2	—

Special circumstances sometimes preclude admission of unmarried mothers from Carmarthenshire to one of the four Hostels. Three such cases were admitted to Mount Hope, Bristol, and one case to the Convent of the Good Shepherd, Chepstow. One of the cases admitted to Mount Hope and the case admitted to the Convent of the Good Shepherd were discharged before the end of the year leaving two still at Mount Hope at the end of the year.

18 unmarried mothers in all were admitted to Hostels under the Authority's arrangements as compared with 13 for 1962. This means that it was necessary for less than 19% of the unmarried mothers in the County to take advantage of the facilities available under the Authority's arrangements. The majority of them were confined at home or at a local Hospital.

Moral Welfare Workers act as escorts for the unmarried mothers when they are admitted to or, discharged from hostels under the Authority's arrangements.

Close co-operation is maintained with the St. David's Diocesan Moral Welfare Committee in the care of unmarried mothers generally. The Committee assist the unmarried mothers in every way possible, and, if necessary, arrange for the adoption of the infants.

Child Welfare.

38 Centres were being maintained by the Authority at the end of the year.

A list of the centres, and other information for 1963, is as follows:—

Centre	Where held	Day held	Attendances	Avg. attendances
Ammanford ..	Child Welfare Clinic, High Street, Ammanford.	Tuesday	1744	32.91
Brechfa ..	Church Hall, Brechfa	Thursday	150	6.52
Brynamman ..	The Clinic, Brynamman	Tuesday	407	16.28
Burry Port ..	Memorial Hall, Burry Port	Tuesday	1038	41.52
Carmarthen Borough.	The Clinic, Pond Street, Carmarthen.	Monday	1120	20.36
Carmarthen Rural.	The Clinic, Pond Street, Carmarthen.	Wednesday	530	21.20
Cwmamman ..	Bethesda Chapel Vestry, Glanamman.	Wednesday	627	26.12
Felinfoel ..	Ysgol-y-Babanod, Felinfoel	Thursday	879	35.16
Ferryside ..	Ex-R.A.F. Camp, Ferryside	Tuesday	346	13.84
Furnace ..	Saron Vestry, Furnace	Wednesday	188	7.23
Gorslas ..	Public Hall, Cross Hands	Tuesday	524	20.96
Kidwelly ..	Trinity Methodist Church, Kidwelly.	Tuesday	540	21.60
Laugharne ..	The Clinic, Laugharne	Tuesday	526	20.23
Llandeilo ..	Church Hall, Llandeilo	Wednesday	278	11.12
Llandoverly ..	The Clinic, Llandoverly.	Tuesday	389	14.96
Llandybie ..	Assembly Rooms, Memorial Hall, Llandybie.	Thursday	431	17.24
Llanelly Borough.	Brynmair, Llanelly	Mon. and Fri.	3562	23.91
Llangadog ..	Y.M.C.A. Hall, Llangadog	Friday	317	24.38
Llangennech ..	Salem Chapel Vestry, Llangennech	Tuesday	544	22.67
Llanstephan ..	Memorial Hall, Llanstephan	Wednesday	345	13.27
Llanybyther	Victory Hall, Llanybyther	Monday	368	16.73
Llwynhendy ..	The Clinic, Llwynhendy. .	Tuesday	1078	41.46
Meidrim ..	Church Hall, Meidrim	Thursday	241	18.54

Centre	Where held	Day held	Attendances	Avg. attendances
Newcastle Emlyn.	The Court House, Newcastle Emlyn.	Tuesday	332	15.81
Pencader	Tabernacle Vestry, Pencader	Thursday	337	13.48
Pendine	The Institute, Llanmiloe, Pendine.	Wednesday	450	17.31
Penygroes	Congregational Chapel Vestry, Penygroes.	Tuesday	902	34.69
Ponthenry	Welfare Hall, Ponthenry	Wednesday	455	18.96
Pontyates	Welfare Hall, Pontyates	Wednesday	489	19.56
Pontyberem	Public Hall, Pontyberem	Wednesday	699	29.12
Pumpsaint	Coronation Hall, Pumpsaint	Thursday	31	3.44
Pwll	Salem Chapel Vestry, Pwll	Wednesday	490	20.42
St. Clears	Old Penuel Vestry, St. Clears	Tuesday	381	14.65
Trimsaran	Workmen's Institute, Trimsaran	Tuesday	434	17.36
Tumble	Welfare Hall, Tumble	Tuesday	428	15.85
Velindre	Red Dragon Hall, Velindre, Llandyssul.	Thursday	466	21.18
Whitland	Memorial Hall, Whitland	Friday	631	26.29
Ystradowen	The County Primary School, Ystradowen.	Wednesday	357	13.73

All centres are held fortnightly except as follows :—

- Llanelly—Three sessions weekly.
- Carmarthen Borough—One session weekly.
- Ammanford—One session weekly.
- Llangadog—One session every four weeks.
- Meidrim—One session every four weeks.
- Pumpsaint—One session every six weeks.

Number of Children who attended centres:—

Born 1963	..	..	..	..	1547
Born 1962	..	..	..	..	1336
Born 1961-58	..	..	..	..	1315
					<u>4198</u>

Number of children attending centres at the end of the year:—

Under 1 year of age	..	..	..	1468
Between 1 and 5 years of age	..	..	..	2294
				<u>3762</u>

Clinic Accommodation

Building work on the small clinic at Llanybyther was nearing completion at the end of the year. It is hoped to commence sessions there early in 1964.

Medical Treatment of Infants

All arrangements for the medical treatment of school children are available for those under school age, but infants are now generally referred by the Medical Officers of Infant Welfare Centres directly to the family doctors for treatment. The following is a summary of the treatment facilities available for infants under the Authority during 1963 :—

Ear, Nose and Throat Defects.—Under arrangements made with the Llanelly Hospital, the County Medical Officer of Health directed parents to take their children to attend for specialist examination, attendances being made at the Out-patient Departments. Specialist examinations at the other Hospitals were arranged by the Hospitals. The names of children found to require in-patient treatment were placed by the specialists on the Hospital waiting lists, and the arrangements for admission were made by the Hospitals.

Eye Defects.—Specialist examinations were carried out at three Centres, viz.:—

- (i) CARMARTHEN.—At the West Wales General Hospital. Arrangements for the attendance of cases were made by the County Medical Officer of Health.
- (ii) LLANELLY.—At Brynmair Clinic. Arrangements for the attendance of cases were made by the Hospital Authorities.
- (iii) GLANAMMAN.—At the Amman Valley Hospital. Arrangements for the attendance of cases were made by the Hospital Authorities.

Plastic Surgery.—The following is the number of cases known to have been treated by plastic surgery during the year:—

<i>Defect</i>	<i>No of cases</i>	<i>Hospital</i>
Cleft Lip	2	St Lawrence Hospital, Chepstow.
Cleft Palate	2	do.
Beak Nose	1	do.

Three cases of miscellaneous defects were examined by the Plastic Surgeon at the West Wales Hospital.

Orthopaedic Treatment.—The work of the County Orthopaedic Clinics continued as in past years. The Regional Hospital Board bear the cost of the services of the Consultant Orthopaedic Surgeons: Mr. Gordon Rowley, who paid monthly visits to the County Clinics, and Mr. R. L. Rees, who held a clinic monthly at Carmarthen. Children requiring in-patient treatment are admitted to Gorseinon, Morrision, Swansea and West Wales General Hospitals. Cases requiring X-ray or special examinations attend at the Out-Patient Departments of the Hospitals.

Eighteen Orthopaedic Clinics were functioning in the County on the 31st December, 1963. 2,498 cases were being attended to for all Authorities, viz.:—

County Education Committee	1324
County Health Committee	1147
West Wales Hospital Management Committee ..	11
Glantawe Hospital Management Committee ..	16

An analysis of the cases of the Health Committee and the Hospital Management Committees according to diagnosis is as follows:—

	Health Committee	Hospital Management Committees	Total
Paralysis :			
Infantile	—	15	15
Spastic	4	1	5
Obstetrical	—	—	—
Other	—	—	—
Congenital Deformities	59	7	66
Infective Conditions of Bones and Joints	—	2	2
Non-infective conditions of Bones and Joints :			
Rickets	—	—	—
Other	—	1	1
Static or Postural Defects	1062	—	1062
Traumatic Deformities	—	1	1
Multiple Defects	—	—	—
Miscellaneous	22	—	22
Totals	1147	27	1174

A summary of the work undertaken for these cases under the orthopaedic arrangements is given in the following table :—

	Health Committee	Hospital Management Committees	Total
Number of individual cases under Scheme on 1st January, 1963	914	27	941
Number of new cases during the year ..	458	2	460
Number of individual cases dealt with during the year	1372	29	1401
Number of cases withdrawn from Scheme	225	2	227
Number of cases under the Scheme on the 31st December, 1963	1147	27	1174
Total number of attendances made at the clinics	4580	73	4653
Number of individual cases received remedial exercises by Sisters	2	1	3
Number of individual cases massaged by Sisters	—	1	1
Number of home visits by Sisters	348	68	416
Number of cases examined by visiting Orthopaedic Surgeons	110	10	120
Number of cases recommended in-patient hospital treatment by Surgeons ..	6	—	6

Six children under school age were admitted to Hospitals for orthopaedic treatment during the year.

Premature Infants

Premature infants are those notified as having a birth weight of $5\frac{1}{2}$ lbs. or less, irrespective of the period of gestation. Premature Baby Outfits, which include cots complete with bassinette, mattresses, rubber sheeting, blankets, Cestra Premature Baby Outfits, Belcroy Feeders, pipettes, layettes, etc., etc., are available to midwives during normal office hours at the County Health Department, and at any time of the day or night under arrangements with the West Wales Isolation Hospital.

162 premature infants were notified during 1963 and further information is as follows :—

(a) Number born at home or in a Nursing Home	..	31
(i) Nursed entirely at home or in Nursing Home	..	21
*(ii) Transferred to Hospital	.. ..	10
(iii) Died within first twenty-four hours	.. ..	2
(iv) Died in one to seven days	.. ..	1
(v) Others who died within first twenty-eight days	..	—
(vi) Survived at end of twenty-eight days	.. ..	18
 (b) Born in Hospital	.. ..	131
(i) Died within first twenty-four hours	.. ..	10
(ii) Died in one to seven days	.. ..	6
(iii) Others who died within first twenty-eight days	..	—
(iv) Survived at end of twenty-eight days	.. ..	115

* of the 10 transferred to Hospital :—

Died within first twenty-four hours	.. ..	3
Died in one to seven days	.. ..	1
Others who died within first twenty-eight days	..	—
Survived at end of twenty-eight days	.. ..	6

It will be seen that in all, 23 premature infants (or 14.20%) died within the first twenty-eight days. Of that number, death was due to prematurity or directly associated causes in respect of 19 infants. 13 of these infants were born at Hospitals and 6 at home. Three of the infants born at home were transferred to and died at Hospital, and 1 died in an Ambulance on the way to Hospital. Malformation and definite pathological conditions were responsible for the death of the other 4 infants.

During the year, a small premature baby unit was established at the Paediatric Ward of the West Wales General Hospital, Glangwili. This is gratifying as the nearest premature baby unit was at Neath General Hospital.

A Portable Oxygenaire Incubator is held at the Carmarthen Ambulance Station and it is readily available for the transfer of premature infants to hospital.

Infant at Risk of Handicapping Conditions.

Over the last thirty years infant mortality in Carmarthenshire has declined from 81.6 per thousand births in 1933 to 28.03 per thousand births in 1963. The corresponding rate for England and Wales were 64 in 1933 and 20.9 in 1963. Infants now survive who, years ago, because of immaturity, malformation, birth injury or disease died early in infancy. The survival of these weaker infants has posed problems in child health, the main one being the need to ensure that the benefits of medical science are applied to those infants at the optimum time, that is, when the chance of success is best. It is not sufficient for treatment to be commenced when a defect has become established, much more can be done if the risk is detected early.

Certain conditions predispose an infant to a risk of handicap although it must be stressed that a handicap does not necessarily follow such unfavourable conditions. There is however sufficient evidence to suggest an association which is more than casual between the following five main categories of conditions and handicaps:—

- (1). An unfavourable family history e.g. deafness and congenital malformations.
- (2). Pre-natal conditions e.g. rubella, hypertension and blood group incompatibilities.
- (3). Perinatal conditions e.g. birth asphyxia, prematurity and congenital malformations.
- (4). Post Natal conditions e.g. acute infections and convulsions
- (5). A symptomatic group where developmental progress is retarded or abnormal.

In order to detect infants "at risk" at the earliest possible date a system of notification was introduced in Carmarthenshire in July, 1963. The basis of the system is the notification of birth form and a list of at risk conditions, each condition having a code number, which has been circulated to all hospitals, general medical practitioners, midwives and health visitors.

When one of the "at risk" conditions is present the doctor or midwife attending the birth enters the appropriate code number in the space provided on the notification of birth form. An "at risk" register is maintained by the County Medical Officer of Health and steps are taken to review the progress of each infant and initiate such investigations and treatment as appear to be necessary. The follow-up is conducted by the general medical practitioner or with his approval by an assistant medical officer. Between July and the end of December 1963 347 at risk infants were notified and the conditions giving rise to notification were as follows:—

	Notified by			Total
	Midwife	Maternity Hospital	Health Visitor	
Family History				
1. Deafness	2	1	1	4
2. Visual Handicap	—	—	—	—
3. Cerebral Palsy	—	—	—	—
4. Epilepsy	3	1	—	4
5. Congenital Malformations	2	—	—	2
6. Mental Disorder	—	5	1	6
7. Repeated dead conceptions	—	3	—	3
8. Other conditions	3	—	—	3
Pre-Natal Conditions				
9. Toxaemia of Late Pregnancy	9	70	—	79
10. Hyperemesis	—	—	—	—
11. Rubella or other virus infection	—	—	—	—
12. Toxoplasmosis	—	—	—	—
13. Primary Hypertension or Hypertension secondary to Nephritis	2	11	—	13
14. Uterine Haemorrhage	—	7	—	7
15. Diabetes	—	1	—	1
16. Multiple pregnancy	4	11	—	15
17. Hydramnios	3	2	—	5
18. Threatened Abortion	3	—	—	3
19. Blood Group Incompatibilities	2	11	—	13
20. Major Surgery	—	—	—	—
21. Drug Therapy	—	—	—	—
22. X-rays early in pregnancy	—	—	—	—
23. Positive W.R.	—	—	—	—
24. Other Conditions	—	16	—	16
Peri-Natal Conditions				
25. Malpresentation	6	8	—	14
26. Birth asphyxia	10	12	—	22
27. Prolonged or difficult labour	9	5	—	14
28. Premature Birth	12	34	—	46
29. Precipitated Labour	6	9	—	15
30. Foetal Distress	1	3	—	4
31. Forceps Delivery	4	43	—	47
32. Postmaturity	11	34	—	45
33. Neonatal Jaundice	2	4	—	6
34. Congenital Malformation	2	3	—	5
35. Caesarean Section	6	40	—	46
36. Low birth weight in relation to Gestation Period	4	9	—	13
37. Other Conditions	3	43	—	46
Post-Natal Conditions				
38. Convulsions	—	—	—	—
39. Cyanotic attacks	—	—	—	—
40. Meningitis or encephalitis	—	—	—	—
41. Acute specific infections	—	1	—	1
42. Cerebral palsy	—	—	—	—
43. Eye infections	—	1	—	1
44. Otitis Media	—	—	—	—
45. Difficulties in sucking or swallowing	—	—	—	—
46. Other Conditions	1	5	—	6
Symptomatic				
47. Mother's suspicion of abnormality	—	—	—	—
48. Delayed Speech	—	—	—	—
49. Delayed motor development	—	—	—	—
50. Other	—	—	—	—

148 of these cases were examined by Medical practitioners before the end of the year and the majority of them had not at that time exhibited any abnormality of development. They will of course be reviewed again to assess progress. In nine infants each with a defect as follows the necessary specialist investigations were initiated:—

- Mongolism.
- Talipes Equino Varus.
- Congenital Laryngeal stridor.
- Bowing of tibia.
- Infantile Eczema.
- Cephalhaematoma.
- Cleft Lip and Palate.
- Ventricular septal defect.
- Cyst upper lobe left lung.

Four infants were removed from the "at risk" register before the end of the year as they were making normal progress.

Ruth Griffiths Tests.—Premature infants and those suffering from haemolytic disease of the newborn generally receive paediatric supervision immediately following birth in addition to which specialised tests, known as the Ruth Griffiths hearing tests and mental development scales, are performed to assess their hearing acuity and intelligence. These tests which are performed by an assistant Medical Officer specially trained in the work are generally started at the age of six months and if necessary repeated at intervals until the infant is two years of age.

Several such infants were referred by the Consultant Paediatricians at Morriston and West Wales General Hospitals for assessment and the results are reported back to him.

The following is a summary of the results of the assessments carried out during the year:—

Condition	No. of cases Assessed	Hearing			General Intelligence Quotient				
		Normal	Doubtful	Defective	Under 25%	25—50%	50—75%	75—100%	100+%
Prematurity	22	22	—	—	—	—	—	12	10
Haemolytic Disease of the new-born	13	12	1	—	—	—	1	8	4
Delayed milestones	4	4	—	—	—	—	3	1	—
Other Conditions	9	8	1	—	—	1	1	3	4
Totals	48	46	2	—	—	1	5	24	18

Phenylketonuria.—Tests are made during the fifth or sixth week of life of every infant to assist in the early diagnosis of Phenylketonuria. These tests are carried out by the health visitors during their home visits and should any infant show a positive re-action to the tests, the child is referred to the Paediatrician for further tests.

Two cases showing doubtful results to phenistix tests were found during the year but on further investigations at the Pathological Laboratory it was confirmed that these cases were negative.

A confirmed case found in 1962 and put on a special diet by the Consultant Paediatrician left the County early in 1963 before it was possible to undertake a special development assessment.

Ophthalmia Neonatorum

One case was notified during the year. The notifications for the last five years were as follows :—

Year	Cases		
	Notified	Treated	
		At Home	In Hospital
1959	1	1	—
1960	3	3	—
1961	—	—	—
1962	—	—	—
1963	1	1	—

Vision was unimpaired in the notified case.

Every case reported to have “discharging eyes” however slight and whether or not notified as ophthalmia neonatorum is kept under special observation until the condition is cleared up. Swabs and smears are taken in each case, and the Laboratory results are made known to the general practitioner, midwife and health visitor.

Welfare Foods

The arrangements for the distribution of Welfare Foods continued to operate satisfactorily. At the end of the year, distribution was being undertaken at 46 Centres as follows:—

- 2 Centres staffed by whole-time employees
- 5 At the Offices of County District Authorities
- 20 At Infant Welfare Centres
- 19 Voluntary Centres

The Welfare Foods are delivered from the Ministry Depots to a Central Stores in Carmarthen and all the Centres, with the exception of Llanelly, receive their supplies by van from the Central Stores. Llanelly Centre receives deliveries direct from Ministry Depots. Experience has shown that these arrangements work satisfactorily.

Tribute must be paid to the continued co-operation and assistance of voluntary workers in this invaluable, if routine work. Unfortunately it is now being found that when a distributor discontinues her service at a Centre it is becoming increasingly difficult to find a replacement.

During the period 30th December 1962, — 28th December, 1963, Welfare Foods as follows were issued to parents at Centres:—

National Dried Milk	..	55,017 Tins.
Cod Liver Oil	.. ..	3,105 Bottles.
Orange Juice	.. ..	26,410 Bottles.
“ A ” and “ D ” Tablets	..	1,950 Packets.

The figures do not include issues to Hospitals and Institutions from Ministry Depots.

The following table shows the average distribution per week during the four quarters of 1963 :—

Period	30/12/62 to 30/3/63	31/3/63 to 29 /6/63	30/6/63 to 28/9/63	29/9/63 to 28/12/63
National Dried Milk (Tins)	1076	1027	1061	1069
Cod Liver Oil (Bottles) ..	75	49	47	68
Orange Juice (Bottles) ..	450	550	547	484
Vitamin “ A ” and “ D ” Tablets (Packets) ..	40	38	35	38

The annual distribution of National Dried Milk showed a very slight increase (0.70%) as compared with 1962 but for Orange Juice there was an increase of 9.05%. Cod Liver Oil and Vitamin Tablets showed a decrease of 4.96% and 8.54% respectively on the distribution for 1962.

At the majority of Infant Welfare Centres in the County, special brand baby foods are also available for sale to parents who have been advised to obtain a particular food for an infant by the Medical Officer in charge of the Centre. This work is also carried out by voluntary workers or health visitors, except at the Llanelly Infant Welfare Centre where a clerk from the Health Department attends for the purpose. At the Centres where the special brand of foods are not available, the health visitors hold vouchers issued by some firms to enable parents to purchase “ clinic packs ” of the food at reduced prices.

Dental Treatment

The Principal Dental Officer has submitted the following report on the dental treatment during the year of expectant and nursing mothers and young children:—

During the past year 43 expectant and nursing mothers were referred for dental treatment as compared with 94 in 1963. 42 of the patients referred required treatment.

26 children under the age of 5 were also referred and treated under the arrangements of the Committee and 22 were made dentally fit.

The majority of the cases were referred by the medical officers in charge of the ante-natal clinics held in the County. Some of the cases were referred by the patients own private practitioners who hold their own ante-natal clinics.

All the cases referred were treated as priority patients and were seen as soon as possible so avoiding having to wait as is the case, usually, with private dental practitioners.

All the treatment carried out including the provision of dentures is free of charge to the patient.

A summary of the cases is as follows:—

Brought forward from 1962	49
New cases requiring treatment	42
Actually treated	64
Treatment completed	37
Discontinued before full treatment completed	22
Refused treatment	14
Not completed at end of year	18
Awaiting treatment at end of year	13

A summary of the cases treated is given below:—

	Expectant and Nursing Mothers	Children under 5 years of age
Dentures provided	49	—
Teeth extracted	308	23
Teeth filled	55	11
Scalings and gum treatment	9	—
Other treatment	—	—
Treatment under a general anaesthetic	41	12
Attendances for treatment	262	32

Gynaecological Clinic

This Clinic was held at Llanelly monthly for married women requiring advice on birth control on medical grounds. Dr. J. Gwendoline Madel, Swansea, is the Medical Officer of the Clinic.

69 cases were seen at the Clinic during 1963 (22 new cases and 47 old cases) and they made 73 attendances.

Family Planning Clinic

Clinics are held at Carmarthen and Ammanford under the auspices of the Family Planning Association. The Association have been allowed the use of the Pond Street Clinic, Carmarthen, and the Clinic, High Street, Ammanford, and the equipment at the Clinics is available to them. Weekly sessions are held at Carmarthen and fortnightly sessions at Ammanford. Advice is given to married women in regard to spacing of children, and also to those unable to have children. The County Council also make a grant annually to the funds of the Carmarthenshire Branch.

NURSERIES AND CHILD MINDERS

The Authority authorised the registration of premises in Llanelly as a Nursery under the Nurseries and Child Minders Regulation Act 1948. An application for registration as a child minder was also granted at the beginning of the year.

Regular visits are made by the County Medical Officer of Health and Deputy County Medical Officer of Health to ensure that the conditions laid down by the Authority are adhered to strictly.

NURSING HOMES

There are no registered nursing homes in the County.

MIDWIFERY SERVICE

The establishment of Whole Time County Council Midwives at the end of the year was 10, viz:—

Llanelly Borough	..	..	..	..	4
Carmarthen Combined District	..	..	..	..	4
Burry Port and Pembrey	..	..	..	..	2
Relief District Midwife (Carmarthen area)	..	..	..	..	1
(Also undertakes general nursing when necessary)					

There was little difference in the staffing position as compared with the previous year. With a full scale reorganisation of nursing districts with particular stress on employment of whole-time midwives in areas where it would be practicable, the midwifery staffing position should not cause undue concern. The continued increase in hospital births reduced the work of the domiciliary midwives whose time now for the most part is taken up with puerperium nursing of early hospital discharges. This is not a particularly rewarding task for qualified midwives and if an acute shortage of midwives ever arises general nurses could be used for maternity nursing work.

115 Midwives notified their intention to practise in the County during 1963, viz.:—

	As Midwives
Domiciliary Midwives	72
Institution Midwives	43

7 of the Domiciliary Midwives were in private practice but cases attended by them were those attended while undertaking relief duties for the Authority.

Cases attended by the midwives in the County during the year were as follows :—

	Domiciliary Cases				Totals	Cases in Institutions
	Doctor not booked		Doctor booked			
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child		
County Council midwives (including district nurse/midwives employed directly by the Authority) ..	7	27	62	281	377	—
District nurse / midwives (under Nursing Associations) ..	5	13	21	58	97	—
Midwives employed by Hospital Management Committees ..	—	—	—	1	1	1902
Private midwives* ..	—	—	—	—	—	—
Totals ..	12	40	83	340	475	1902
* Cases taken while relieving for : County Council and included in table above.	—	—	2	3	5	—

The above table does not, however, give a complete picture of the cases attended by domiciliary midwives. 1337 patients delivered at hospitals were discharged before the tenth day and the domiciliary midwives undertook the care of the patients until the tenth day.

The table shows the number of patients delivered by midwives in the County irrespective of the home address of the patient which was in some cases outside the County and does not include patients normally residing in the County who were delivered in hospitals outside the area. The number of maternity patients is shown and not the number of babies delivered.

Of the 475 patients delivered at home, five patients were delivered of twins, and 14 sets of twins were delivered in hospital where 1902 patients were confined.

The number of patients delivered in the County at hospitals showed an increase and was, in fact, the highest number delivered at hospital since the National Health Service Act came into operation. The number of hospital and home deliveries during the past four years are given below:—

	Total No. of patients delivered by Midwives	No. delivered at Hospital	No. delivered at Home
1960	2327	1722 (or 74.00%)	605 (or 26.00%)
1961	2253	1669 (or 74.08%)	584 (or 25.92%)
1962	2380	1795 (or 75.42%)	585 (or 24.58%)
1963	2377	1902 (or 80.02%)	475 (or 19.98%)

2,479 maternity patients who normally resided within the County were notified as having been attended by midwives during 1963, either within or without the County. Of that number 2005 (or 80.88%) were delivered at hospital and 474 (or 19.12%) were delivered at home.

It is disappointing to have to state that even after fifteen years of free medical services under the National Health Service Act, many expectant mothers are still not consulting their family doctors early in pregnancy. It has been found that there is a high incidence of iron deficiency anaemia late in pregnancy and that the condition can be avoided by medical care in the early months. Early diagnosis is essential and mothers should consult their doctors as early as possible in pregnancy.

Maternity Flying Squads

The County is covered for maternity emergencies by flying squads at Morryston Hospital and West Wales General Hospital and the arrangements are working well. The primary object of the flying squad is to ensure safe transit of maternity patients requiring treatment to a fully equipped maternity unit rather than carrying out the treatment at home.

Exfoliative Cytology

A pilot scheme for Exfoliative Cytology has been in operation at the West Wales General Hospital since March 1963. At present it is confined to routine gynaecological patients at the hospital and extension of the scheme will have to await a decision on national policy in the matter.

A similar pilot scheme is in operation at the Llanelly General Hospital.

Hospital Provision for Maternity Cases

For that part of the County in the area of the South West Wales Hospital Management Committee, all maternity patients requiring admission to hospital on social grounds are admitted without question. The Glantawe Hospital Management Committee request information as to home conditions before authorising the hospital admission of social cases but so far as is known all applications are granted despite a high percentage of applications for hospital admission on medical grounds,

Prior to the early discharge of maternity patients in the area of the South West Wales Hospital Management Committee, the hospital concerned makes enquiries as to the home conditions.

Now that the minimum lying-in period is ten days, the amount of nursing care by domiciliary midwives following the discharge of patients confined at hospital is much reduced. Ideally all cases confined at hospital should be retained until the tenth day but unfortunately the number of beds available does not permit this. Plans are in hand to increase the number of maternity beds in the area but pending this, the practice of discharging patients before the tenth day will have to continue. In fact, with the expected increase in the number of births, the position will become more acute and will necessitate even earlier discharges. This calls for the highest degree of co-operation between the hospitals, the general practitioners and the local health authority.

Gas/Air Analgesia

All the midwives employed under the arrangements of the Authority are qualified to administer gas/air analgesia. All district midwives, district nurse/midwives and relief district nurse/midwives are supplied with Minnitt's Gas/Air apparatus. Six private midwives, who are occasionally employed on relief, are also qualified to administer gas/air analgesia.

Gas/Air analgesia was administered by domiciliary midwives during the year as follows :—

	When Doctor was not present	When Doctor was present	Total
County Council midwives (including district nurse/midwives employed directly by the Authority)	148	29	177
District nurse midwives under Nursing Associations	33	15	48
*Private midwives	—	—	—
Totals	181	44	225

*Gas/Air Analgesia administered by private midwives while relieving County Council midwives or district nurse/midwives have been included in appropriate column.

Pethidine

Pethidine was also administered by domiciliary midwives to a number of cases as will be seen from the following table :—

	When Doctor was not present	When Doctor was present	Total
County Council midwives (including district nurse/midwives employed directly by the Authority)	198	42	240
District nurse/midwives under Nursing Associations	31	14	45
*Private midwives	—	—	—
Totals	229	56	285

*Pethidine administered by private midwives while relieving County Council midwives or district nurse/midwives have been included in the appropriate column.

Trichloroethylene

Fourteen trichloroethylene apparatus are available for midwives. Midwives have been divided into groups and one apparatus is allocated to each group—the machine is held by a selected midwife in each group except when it is in actual use by one of the other midwives.

Trichloroethylene was administered in domiciliary cases during the year as follows :—

	When Doctor was not present	When Doctor was present	Total
County Council midwives (including district nurse/midwives employed directly by the Authority)	72	20	92
District nurse/midwives under Nursing Associations	25	5	30
*Private midwives	—	—	—
Totals	97	25	122

* Trichloroethylene administered by private midwives while relieving County Council midwives or district nurse/midwives have been included in the appropriate column.

Refresher Courses

Provision is made by the Authority for Refresher Courses. Ten midwives attended courses approved for the purpose of Rule G.I. of the Central Midwives Board Rules.

One midwife attended a Parentcraft Refresher Course,

Pupil Midwives

No arrangements have been made by the Authority for the training of pupil midwives.

Puerperal Pyrexia

There were six cases of Puerperal Pyrexia notified during the year. All six cases were confined and treated at hospital.

Supervision of Midwives

The non-medical supervision of midwives is undertaken by the Chief Nursing Officer who is also responsible for the supervision of the work of home nursing and health visiting. A Senior Nursing Officer assists her in midwifery and home nursing duties.

407 visits of supervision were made during the year as follows :—

District Nurse/Midwives	..	..	159	visits
County Council Midwives	..	..	48	„
Independent Midwives	..	..	8	„
Hospital Midwives	..	..	10	„

Special visits of investigation were as follows :—

Puerperal Pyrexia	..	..	..	23	visits
Infant eye conditions	..	..	..	144	„
Maternal Deaths	..	..	..	2	„
Others	..	..	..	13	„

HEALTH VISITING

During the year, the Authority re-organised the health visiting districts so that three district nurse/midwife/health visitors could be relieved of their health visiting duties. At the end of the year, the establishment comprised 24 whole-time health visitor/school nurses.

The duties of health visitors include the care of mothers and young children, tuberculosis visiting, and the care of the family in general. Health visitors are required to work closely with general medical practitioners and progress is being made in this matter. In a County area, the difficulties involved are not easy of solution but at the end of the year, active consideration was being given to the best means of providing the doctors with a more satisfactory and satisfying service through the health visitors.

During the year the health visitors made home visits to infants up to 5 years of age as follows :—

Born	No. of "FIRST" Annual Visits						Total number of revisits to all infants
	1963	1962	1961	1960	1959	1958	
No. of infants	2280	2302	2288	2247	2180	1358	31,217

4059 visits were made to adult patients and an analysis is given below. The table does not show the actual number of **individual** patients visited as some have had to be included under more than one heading, e.g. a patient over 65 years of age discharged from hospital would be included under both headings.

	Number of Cases	Total Re-Visits
Mentally disordered	20	62
Over 65 years of age	402	830
Discharged from Hospital (Excluding Mental Hospital)	209	318
Ante-Natal	205	167
Tuberculous Households	663	715
Other Infectious Diseases	16	31
Not already included above	188	338

In addition to the visits to infants and adults shown above, health visitors made 5200 "no access" visits i.e. visits to homes but found the patients or mothers and infants not at home.

2090 sessions were attended by health visitors at Local Health Authority Clinics.

Student Health Visitors

No student health visitors were appointed during the year.

Refresher Courses

A limited number of health visitors are authorised to attend Refresher Courses each year; three attended during 1962.

HOME NURSING

The establishment for home nursing at the end of the year was as follows:—

Whole-time district nurses	10
District Nurse/Midwives	44
Relief District Nurse Midwives	10

In addition, the relief district midwife in the Carmarthen area undertakes home nursing duties as necessary.

The three combined posts of district nurse/midwife/health visitor were re-designated during the year as district nurse/midwife when the health visiting duties in the districts were transferred to whole-time health visitors.

I must once more record appreciation of the co-operation received from the County Nursing Association and District Nursing Associations

4,208 home nursing cases were attended during 1963 and 104,523 home visits were made by district nurses. A classification of the cases is as follows:—

	No.	Percentage of Total
Medical	3230	76.76
Surgical	828	19.68
Infectious Diseases	—	—
Tuberculosis	41	0.97
Maternal Complications	41	0.97
Others	68	1.62

990 of the cases received more than 24 visits each during the year.

The age distribution of the cases attended during the year was as follows:—

	No.	Percentage of Total
Under 5 years	169	4.02
5 years and up to 65 years	1890	44.91
65 years and over	2149	51.07

There was a slight increase in the number of cases attended as compared with 1962 but the home visits by district nurses were 104,523 as compared with 111,297 for 1962. The number of patients over 65 showed an increase from 2,005 in 1962 to 2,149 in 1963 and these patients accounted for over one-half of the total patients attended to during the year.

District Training

The Authority decided to second up to six district nurses a year for district training. The nurses are paid by the training authority a training allowance in accordance with the Nurses and Midwives Whitley Council scale. The difference between the training allowance and their ordinary salary is paid by the Health and Public Health Committee. The course covers a period of three months.

Two nurses attended a district training course at Bristol during 1963.

In general, there was little change in the pattern of Home Nursing as compared with 1962.

No special provision is made for the home nursing of sick children,

Refresher Courses

Provision is made by the Authority for a limited number of district nurses to attend refresher courses. During the year, two district nurses attended such courses.

PREVENTION OF BREAK-UP OF FAMILIES

Particular attention is paid by health visitors to problem families and regular visits are paid by them. In addition to this, special visits are paid by Senior Nursing Staff as often as it is considered necessary.

In 1950, the Children's Officer was, in this County, designated to co-ordinate all activities for dealing with children neglected or ill-treated in their homes. Bi-monthly meetings are held of a Co-ordinating Committee consisting of the Deputy County Medical Officer of Health, Senior Nursing Officers, Organiser of Home Helps, Boarding-Out Officers, Education Welfare Officers, Probation Officers, representatives of the National Assistance Board, the Local Inspectors of the National Society for the Prevention of Cruelty to Children, and the Children's Officer.

Cases are specially considered at the meetings and decisions are reached as to the best action to be taken. Unnecessary overlapping of visits is prevented in this way.

The Authority have also agreed to the provision of home helps in cases where it is considered necessary by the Co-ordinating Committee.

VACCINATION AND IMMUNISATION

The arrangements of the Authority for vaccination against smallpox and poliomyelitis and immunisation against diphtheria, whooping cough and tetanus provide for the work to be undertaken by General Medical Practitioners, Medical Officers of Infant Welfare Centres, and Medical Officers of Health. The majority of General Medical Practitioners co-operate in the arrangements.

Propaganda through personal contact with the parents is undertaken at the Infant Welfare Centres and by the health visitors at their home visits.

Smallpox Vaccination

As indicated in the report for last year the optimum age for vaccination against smallpox is now considered to be between one and two years of age. Previously parents were encouraged to have their infants vaccinated before the age of six months. As a result of this change of policy, the number of children under two years of age vaccinated during 1963 was low—a large number of this group having had their vaccinations during 1962 when 1459 children were vaccinated before reaching age of one year.

Records in respect of 274 successful vaccinations undertaken during 1963 were received during the year, the ages of the cases being as follows:—

Under 1 year old	..	..	..	155
Age 1 year	..	..	..	73
Age 2—4 years	..	..	..	9
Age 5—14 years	..	..	..	9
Age 15 years and over	..	..	..	28
Total	..	..	..	274

Records in respect of 72 re-vaccinations were also received.

It is not possible at present to assess accurately the vaccination state of children under 2 years of age but taking into consideration the number of children vaccinated under the age of one year in 1962, it is estimated that about 60% of this age group have been protected.

Diphtheria, Whooping Cough and Tetanus Immunisation

Whenever possible, the immunisation of young children against diphtheria, whooping cough and tetanus is by means of a triple antigen (a course of three injections giving simultaneous protection against the three diseases).

Supplies of the triple antigen, and single antigen if required, are provided free of charge to infant welfare centres and general medical practitioners.

The following is a summary of the immunisation carried out during the year:—

Type of Prophylactic used	Children born in years:					Total
	1963	1962	1959-1961	1954-1958	1949-1953	
Diphtheria only	18	11	8	11	3	51
Whooping Cough only ..	—	2	15	2	—	19
Diphtheria/Whooping Cough Combined	—	—	—	—	—	—
Triple Antigen Diph/Wh.C./Tetanus ..	547	731	123	25	2	1428
Diphtheria/Tetanus	—	—	10	7	1	18
Tetanus only	—	—	19	17	6	42
Quadrilin (Diphtheria/Whooping Cough/Tetanus/Poliomyelitis)	27	47	3	2	—	79
Whooping Cough/Tetanus	5	2	3	1	—	11

The total number of children immunised during the year against each disease is as follows:—

Disease	Born in years:					Total
	1963	1962	1959-1961	1954-1958	1949-1953	
Diphtheria	592	789	144	45	6	1576
Whooping Cough	579	782	144	30	2	1537
Tetanus	579	780	158	52	9	1578

1,570 children under 5 years of age (13.42%) were immunised against diphtheria during 1963 as compared with 1,595 (13.63%) during 1962 and 2,018 (17.86%) during 1961.

The arrangements of the Authority provide for "boosting" doses of prophylactic to be given at five yearly intervals. These "boosters" may be given following sessions for medical inspection at schools or, where the numbers are sufficiently large, special sessions are arranged but it has not been possible to arrange "booster" sessions in recent years owing to the heavy demand for vaccination against poliomyelitis. 142 children received "booster" injections against diphtheria.

The following table gives the diphtheria immunisation state of the children in the County at the end of the year :—

No. of Children under 5 years of age	No. Immunised	%	No. of children 5—14 years of age	No. Immunised	%
11700	5959	50.93	22600	15194	67.21

Of the 15,194 immunised children between 5 and 14 years of age, 4,058 (26.71%) were immunised or received "booster" injections in the last five years.

BCG Vaccination

The arrangements of the Authority provide for the BCG vaccination of the following groups:—

- (1). School children of 13 years of age and over.
- (2). Pupils of independent schools of 13 years of age and over.
- (3). Students attending further educational establishments.

The following is a summary of the work carried out during 1963:—

	School Children	Pupils attending independent schools	Students
(1). No. eligible	445	—	—
(2). No. of (1) skin tested ..	386 (86.74%)	—	—
(3). No. of (2) who were:—			
(a) found to be negative ..	325 (84.20%)	—	—
(b) found to be positive ..	42 (10.88%)	—	—
(c) Failed to attend for reading of skin test	19 (4.92%)	—	—
(4). (a) Had BCG vaccination ..	319 (82.64%)	—	—
(b) Refused vaccination after having skin test	6	—	—

Child Contacts of Tuberculosis.—The BCG vaccination of child contacts of tuberculous patients is the responsibility of the Chest Physicians. 199 children were skin tested by them during the year of whom 47 (23.62%) proved positive. Of the 141 who proved negative 123 were successfully vaccinated.

Vaccination Against Poliomyelitis

Changes of policy since 1956 as to the number of doses required for satisfactory vaccination and also changes in the intervals between doses resulted in the picture of the vaccination state in the County gradually becoming confused and uncertain.

It was accordingly decided early in 1963, to offer complete vaccination for all children by means of Sabin (oral) vaccine irrespective of their vaccination state. The response was most satisfactory. 18,131 children and young persons born in the years 1943-1960, the great majority of whom were school children, received three doses of oral vaccine during the year. This represents 68% of the school population. There were no untoward reactions.

The total number of vaccinations undertaken during the year was as follows:—

	Number of persons who have received	
	2 injections of Salk vaccine	3 doses of oral vaccine
Children born 1963	4	208
Children born 1962	40	802
Children born 1961	27	308
Children and young persons born in years 1943-1960	55	18,131
Young persons born in years 1933-1942..	14	84
Others	22	95
TOTAL	162	19,628

Number of persons given third injection of salk	480
Number of persons given fourth injection of Salk	104
Number of persons given a reinforcing dose of oral vaccine after 3 Salk doses or 3 oral doses or 2 Salk doses plus 2 Oral doses	481

COUNTY AMBULANCE SERVICE

The arrangements of the Authority provide for :—

- (a) A 24 hours service at nine ambulance stations.
- (b) Five "sitting case" ambulances, all dual purpose vehicles, stationed at Llanelly, Carmarthen, Ammanford, Llandeilo and Tumble, respectively.
- (c) A Hospital Car Service for the conveyance of "sitting cases" arranged by the Women's Voluntary Services.
- (d) An Ambulance Control Centre under the County Ambulance Officer undertaking the operational control of the Service and co-ordinating all requests for ambulance transport.

The ambulance stations providing a 24 hours service are as follows:—

Station	Number of Ambulances	Whole-time Drivers	Attendants
Llanelly ..	2‡	6	Two whole-time and Volunteers
Carmarthen ..	2*	5	Two whole-time and Volunteers
Glanamman ..	1	2	Volunteers
Ammanford ..	1	2	Volunteers
Trimsaran ..	1	2	Volunteers
Tumble ..	2*	3	Volunteers
Llandeilo ..	1	2	Volunteers
Llandovery ..	1	2	Volunteers
Whitland ..	1	2	Volunteers

* 1 Ambulance only on 24 hours service.

‡ 1 Ambulance only between midnight and 8 a.m.

The maintenance and repair of ambulances continued to be undertaken at local garages. The maintenance arrangements are as follows:—

- (a) Inspection and lubrication every 2,000 miles.
- (b) Maintenance service every 6,000 miles.

Complete overhauls, according to the performance of each vehicle are undertaken as required.

The ambulance fleet now consists of:—

- 12 petrol driven dual purpose ambulances.
- 5 diesel driven dual purpose ambulances.
- Reserves : 4 petrol driven ambulances.

The following is a comparison of the average fuel consumption of the petrol and diesel driven vehicles:—

- Petrol driven ambulances, 14.32 miles per gallon.
- Diesel driven ambulances, 22.96 miles per gallon.

There was an increase in the demand for transport during the year, the average number of patients conveyed per month being 5,492 as compared with 5,017 during 1962 (an increase of 9.47%).

The total mileage for all vehicles increased, being 581,192 miles as compared with 539,915 miles in 1962 (an increase of 7.65%).

Arrangements were made for 42 patients to travel by train and the estimated mileage involved was 9,917

A comparison of the mileages for each quarter of the last five years is given in the following table :—

	1959	1960	1961	1962	1963
March Quarter ..	136,357	138,605	135,102	142,311	138,544
June Quarter ..	140,238	135,880	142,915	137,091	144,969
September Quarter ..	134,078	142,988	141,058	130,783	143,955
December Quarter ..	131,601	142,372	134,896	129,730	153,724
Totals ..	542,274	559,845	553,971	539,915	581,192

The average number of trips per month for 1963 was 1,419 as compared with 1,331 for 1962, an increase of 6.61%.

Ambulance Service on Repayment

The National Health Service (Amendment) Act, 1957 empowers Local Health Authorities to provide ambulances on a repayment basis, in circumstances in which there is no duty under the arrangements made for the provision of an ambulance service in accordance with the National Health Service Act, 1946. These are permissive powers and the Act does not alter in any way the duty of the Authority under the Act of 1946. The standard of that service should not be impaired and no part of the cost of arrangements under the 1957 Act should fall on the rates and the exchequer.

The Authority have agreed to provide, on request, a reserve ambulance (if available) to standby at sports or other public meetings, provided :

- (i) that an ambulance service driver who was off duty was prepared voluntarily to act as driver of the vehicle for the period required;
- (ii) that the organisers of the meeting remunerated the driver for his services in addition to the charge made by the Authority for the use of the ambulance;
- (iii) that the County Ambulance Officer had the right to withdraw the vehicle at any time at short notice.

Four requests were received during the year for an ambulance on a repayment basis.

In the case of individual patients requiring ambulance transport on repayment, the County Medical Officer of Health is authorised to provide the service only where he considers the medical grounds are sufficiently strong. Six cases were conveyed during the year.

The following table summarises monthly the work of the Ambulance Service for the year 1963, with comparable average monthly figures for the previous year.

Month	TRIPS				PATIENTS				MILEAGE						
	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total
January ..	860	148	226	18	1252	2518	484	1245	96	4343	20971	8477	7844	881	38173
February ..	910	184	208	12	1314	2649	587	1271	72	4579	22071	11370	7598	753	41792
March ..	1105	282	244	23	1654	3863	1010	1700	127	6700	29456	17603	10220	1300	58579
April ..	873	195	204	14	1286	2753	614	1321	82	4770	21852	12220	8441	730	43243
May ..	879	196	219	60	1354	2883	728	1491	625	5727	22478	13732	8766	2286	47262
June ..	1052	264	259	45	1620	3055	902	1673	446	6076	26229	15089	10998	2148	54464
July ..	838	226	229	57	1350	2454	802	1224	573	5053	21282	15004	7599	2485	46370
August ..	1038	260	246	13	1557	3103	854	1534	76	5567	25825	15743	9166	790	51524
September ..	861	199	231	53	1344	2693	668	1510	574	5445	22024	13023	8972	2042	46061
October ..	847	231	211	60	1349	3012	808	1379	599	5798	22983	14248	8579	2393	48203
November ..	1087	279	271	58	1695	3766	941	1745	566	7018	29431	17738	10525	2379	60073
December ..	807	206	196	48	1257	2471	583	1295	475	4824	21740	13438	8115	2155	45448
Total ..	11157	2670	2744	461	17032	35220	8981	17388	4311	65900	286342	167685	106823	20342	581192
Average per month for 1963 ..	929	229	228	38	1419	2935	748	1449	359	5492	23861	13973	8901	1695	48432
Average per month for 1962 ..	883	203	231	13	1331	2749	739	1458	69	5017	23091	11637	9348	915	44992

The following table shows the origin of requests received for ambulance transport during the year :—

Origin	Stretcher Cases		Sitting Cases		Total	
	No. of calls	% of total calls received	No. of calls	% of total calls received	No. of calls	%
Medical Practitioners ..	3148	9.00	9776	27.96	12924	36.96
Hospitals	1358	3.88	18961	54.22	20319	58.10
Nurse/Midwives ..	17	.05	206	.59	223	.64
Clinics	33	.09	348	.99	381	1.09
Police	132	.38	98	.28	230	.66
Welfare Officers ..	14	.04	27	.08	41	.12
Ministry of Pensions	263	.75	587	1.68	850	2.43
Totals ..	4965	14.20	30,003	85.80	34,986	100.00

Of the 30,003 requests for the conveyance of “sitting” patients 15,528 were conveyed by ambulances.

The proportion of calls received from the various sources are roughly equivalent to that for previous years, and indicate a continued heavy demand from hospitals. There is room for assessing more realistically the transport need of out-patients attending hospital clinics.

Radio Control of Ambulances

The radio control of ambulances continued to function satisfactorily and enabled the service to deal more expeditiously with emergency cases and ensured a more efficient use of the ambulances.

The following is a comparison of miles per patient conveyed by ambulance for the last five years :—

Year	Miles per patient
1959	9.22
1960	8.97
1961	9.19
1962	7.71
1963	7.47

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The arrangements for this Service in the County cover :—

- (a) Tuberculous patients and their families.
- (b) Patients suffering from malignant disease, and their families.
- (c) The provision of sick room and nursing requisites required by patients being nursed at home.

The Health and Public Health Committee have appointed a Care and After-Care Sub-Committee to exercise the functions of the Authority under the arrangements.

Home Nursing and Home Helps are provided when necessary under the County arrangements for those services. Care and after-care of patients suffering from mental illness or mental defect forms part of the Authority's arrangements for a Mental Health Service.

Tuberculosis

The work of the Authority is directed to the physical and social well-being of the tuberculous patient and the welfare of his family. In practice, it has been found that the needs of patients and their families are confined to the following :—

- (a) The loan of beds and bedding where necessary to enable a patient to be segregated. No issues were made during the year, but five sets were on loan at the end of the year.
- (b) The loan of sleeping-out shelters in those cases where adequate segregation cannot otherwise be arranged. One shelter was being used by a patient at the end of 1963.
- (c) Assistance to obtain suitable housing accommodation in co-operation with Local Housing Authorities.
- (d) Home Help Assistance.
- (e) Nursing requisites:—In addition to the normal sick room requisites, special beds and bedding have been issued to severely paralysed persons. In the main, they are persons who have undergone prolonged hospital treatment following spinal injuries and can be nursed at home provided special equipment is available. 7 sets of equipment were on loan at the end of the year.
- (f) Assistance towards the cost of travelling expenses of relatives to visit patients in Hospitals and Sanatoria. No applications were received from relatives of tuberculous patients.
- (g) BCG vaccination of child contacts. Details will be found in the section devoted to Vaccination and Immunisation.
- (h) Occupational Therapy.

Co-ordination of the care and after-care work, and the diagnostic and treatment services for the tuberculous patient, is achieved by personal contact between the officers of the Authority and the Chest Physicians and by interchange of reports and recommendations,

Malignant Disease

The Care and After-Care Service of the Authority for tuberculosis applies where appropriate to cases of malignant disease, but the demand for such assistance has been almost entirely for sick-room requisites and home help. The only other assistance granted has been the provision of bedding in necessitous cases, but no application for bedding was received during 1963.

Chiropody

The arrangements of the Authority for the prevention of illness include provision for a chiropody service for the elderly, the physically handicapped and expectant mothers.

It had been the intention of the Authority to employ full-time chiropodists but efforts to recruit chiropodists qualified as required were unsuccessful. All voluntary organisations were encouraged by way of grants to develop their own chiropody service. Branches of the Old Age Pensioners Association were particularly active. The organisations participating in the arrangements are as follows:—

<i>Organisation</i>	<i>Number of Clinics</i>
Old Age Pensioners Association	23
Old People's Welfare Committees	1
British Red Cross Society	9
St. John's Ambulance Service	2

Two additional organisations restrict their arrangements to the treatment of house-bound patients.

Most of the County is now covered by voluntary organisations, the only part not served being the rural areas north of Carmarthen, north of Llandeilo (except Llandovery), St. Clears, Pendine, Llanddarog, Trimsaran, Felinfoel and Dafen.

The classification of the patients treated up to the end of the year were as follows:—

<i>Classification</i>	<i>Cases</i>	<i>Clinic Attendances</i>	<i>Home Treatment</i>
Elderly	2677	8405	3134
Handicapped	44	62	130
Expectant and nursing mothers	11	35	—
Totals	2732	8502	3264

The following is a summary of the conditions treated:—

Bunions	259	Callosities	5153
Corns	9836	Ingrowing Nails	744
Nail trimming	10097	Miscellaneous Conditions	195

At the end of the year, the Authority appointed a female part-time chiropodist whose services are to be utilized in areas not already served by voluntary organisations. The possibility of establishing County Council clinics at Newcastle Emlyn and Llanybyther were under consideration at the end of the year.

Travelling Expenses of Relatives

Assistance is granted by the Authority in necessitous cases towards the cost of the travelling expenses of relatives visiting long-stay patients in Hospitals and Sanatoria. 29 applications were granted during the year.

Assistance is granted for visits to Hospitals and Sanatoria which are not less than 40 miles from the residence of the applicant, and is subject to the following conditions :—

- (a) That there is urgent reason for the visit because of the patient's serious condition, or that the visit would in medical opinion do the patient good and aid response to treatment.
- (b) That because of the length of the journey the relatives concerned are unable to afford it from their own resources without substantial hardship.
- (c) That subject to (a) above, the assistance is restricted to one relative every month or two relatives every two months, unless a senior member of the Medical Staff of the Hospital certifies that more frequent visits are essential on account of the patient's serious condition.

Venereal Disease

No information was received during the year as to cases of venereal disease or their contacts who needed following-up.

HOME HELP SERVICE

Home help assistance continued to be provided on the same lines as for previous years; assistance being limited to the amount needed for the essential duties of the household. The problem of the other needs of patients—particularly the aged and chronic sick, some of whom reside alone, still remains unsolved. The extent to which assistance was necessarily limited will be seen from the following table showing the authorised assistance during the last normal week of 1963 :—

Weekly Assistance	No. of Cases
6 hours and under	336
Over 6 hours and up to 9 hours ..	112
Over 9 hours and up to 12 hours ..	118
Over 12 hours and up to 15 hours ..	18
Over 15 hours and up to 18 hours ..	10
Over 18 hours	—

Payment for assistance depends on the financial circumstances of the household and the contribution is assessed in accordance with the County Council Scale. No patient is allowed assistance free of charge under the present scale; a minimum charge has been fixed at 2/6 per week for up to four hours assistance and 5/- per week for over four hours assistance. Where the patient is entitled to a National Assistance Allowance, the Board make a special allowance to cover the minimum charges.

924 cases received home help assistance during 1963, as compared with 959 cases during 1962. The 924 cases include 12 patients for whom a second period of assistance was provided during the year. The number of individual families who received assistance during 1963 was therefore 912.

The 924 cases for 1963 were:—

Over 65 years of age	653
Under 65:	
Chronic Sick and Tuberculous ..	190
Mentally Disordered	8
Maternity	47
Others	26
	—
Total	924
	—

The number of cases assisted during the year showed a slight decrease from 959 for 1962 to 924 for 1963. The number of chronic sick cases, however, remained constant; for both years, it was over 90%.

The home help service in its present form is restricted to essential domestic duties but this caters only for part of the needs of the elderly chronic sick. There is a wide field for voluntary effort for the patients who are housebound and reside alone or with another aged person.

Tribute must again be paid to those home helps who assist patients voluntarily for many hours over and above their paid duty but the best help that can sometimes be given is to encourage patients to fend for themselves. There is sometimes a tendency to leave everything to the home help even to the organisation of the home with the inevitable loss of interest in its running by the patient.

594 cases were being assisted on the 31st December, 1963, as compared with 599 at the end of 1962. Of the 594 cases, 538 (or 90.57%) were "long term" cases, i.e., those who had been receiving assistance for more than three months. An analysis of the period of assistance is given in the following table :—

Period of Assistance	No. of Cases
Less than one month	21
One to two months	15
Two months to three months	20
Three months to four months	14
Four months to five months	12
Five months to six months	14
Six months to twelve months	79
Over twelve months	419
<hr/>	<hr/>
Total	594
	<hr/>

The age distribution of the 594 cases was as follows :—

	No. of Cases
30 years of age and under	4
Over 30 years of age and up to 40	15
Over 40 years of age and up to 50	21
Over 50 years of age and up to 60	52
Over 60 years of age and up to 65	62
Over 65 years of age and up to 70	90
Over 70 years of age and up to 75	128
Over 75 years of age and up to 80	118
Over 80 years of age and up to 85	79
Over 85 years of age and up to 90	19
Over 90 years of age	6
<hr/>	<hr/>
Total	594
	<hr/>

350 of the cases (or 58.92%) were over 70 years of age, and 502 of the cases (or 84.51%) were over 60 years of age.

On the 1st January, 1963, 323 home helps were available for duty. 121 new home helps were enrolled during the year and 126 resigned. On the 31st December, 318 were available for duty. Service given in the last normal week of the year was equivalent in terms of whole-time employment to 99.5 home helps.

No arrangements were made for training home helps during the year.

HEALTH EDUCATION

Health Education is undertaken through personal contact with parents and others, by Medical Officers, health visitors, district nurses and midwives. As an aid to the staff in this work, pamphlets on relevant topics, including the prevention of accidents in the home, are distributed from time to time.

MENTAL HEALTH SERVICE

The arrangements of the Authority provide for:—

- (1) The employment of such staff as may be necessary from time to time to ensure that the services provided are effectively performed and developed and for the training of staff.
- (2) The maintenance of close links with the Psychiatrists and other members of the staff of hospitals, and general medical practitioners and making suitable joint appointments with hospital authorities.
- (3) Co-operation with
 - (a) other local authorities and when necessary making mutual arrangements for the provision of services,
 - (b) The Ministry of Labour, particularly in connection with their rehabilitation services, and
 - (c) voluntary organisations for the care and welfare of the mentally disordered in the County.
- (4) The establishment of junior and adult training centres and residential homes, for all types of mentally disordered patient not requiring hospital treatment, a holiday home and day centres, social clubs, and such other activities as may be desirable to assist in the rehabilitation of mentally disordered patients.
- (5) The community care of persons in their own homes by mental welfare officers.

Staffing

Three full-time Mental Welfare Officers (two males and one female) were employed by the authority at the beginning of the year and a fourth (male) commenced duties on the 27th March following an intensive course of practical training. One full-time and seven part-time officers were also employed as Acting Mental Welfare Officers.

Training Centres

Improvised premises continue to be used for the training centre at Llanelly (children and adult females at Ann Street and adult males at Biddulph Street).

The acquisition of a site at Heol Goffa, Llanelly for new premises for a Junior Training Centre and Residential Home for children was in an advanced stage at the end of the year.

Efforts were also being made to earmark a suitable site for an Adult Training Centre at Llanelly.

There is no progress to report in connection with the building of new Training Centres, although towards the end of the year some progress was evident in connection with the acquisition of sites.

However an extension of training facilities was made possible by the rental from the Education Committee of premises at Biddulph Street, Llanelly, formerly used as a Central Kitchen and its adaptation as a temporary Adult Training Centre. The premises were opened on the 16th July as a branch of the Ann Street Training Centre and fifteen male adults were immediately transferred to Biddulph Street thus releasing much needed accommodation at Ann Street for children on the waiting list.

Residential Homes

The establishment of residential homes is not envisaged in the immediate future, but provision is made for them in the development plans of the authority.

Mental illness—Admissions to Hospitals

The acting mental welfare officers arranged for the admission of patients as follows:—

Compulsory admission for observation	7
Compulsory admission for treatment	30
Emergency Cases	134
Informal	50

Mental Subnormality

12 Mentally subnormal patients (3 males and 9 females) were brought to the notice of the Health Authority during the year; 10 of them (2 boys and 8 girls) were reported by the Education Committee. These 12 cases were dealt with as follows:—

	M.	F.	Total
Admitted to Hospitals	—	1	1
Placed on Waiting List for admission to suitable Hospitals	1	—	1
Placed under guardianship	—	—	—
Placed in Community Care	2	6	8
Action Pending	—	2	2
Found not to be Subnormal	—	—	—
Died	—	—	—
Totals	3	9	12

In addition to the new case mentioned above as admitted to hospital five mentally subnormal patients who had been reported in previous years were admitted during the year.

The total number of subnormal patients at hospitals at the end of the year was as follows:—

	Males	Females	Total
Under 16 years of age	8	15	23
16 years of age and over	40	54	94
Total	48	69	117

There were seven patients on the urgent list and one on the non-urgent list for admission to hospital.

Short-term care was arranged at psychiatric hospitals for seven patients.

Community Care

The retention of mentally handicapped persons in the community is a primary duty of the local health authority and community care plays an increasingly important part in the mental health service.

The following table indicates the number of cases under community care at the end of the year:—

Llanelly Training Centre for the Mentally Subnormal

The following report has been received from the Supervisor of the Training Centre:—

At the end of the year the number attending the Centre was 54; 8 children under 9; 3 between 9 and 11 years; 16 between 11 and 16 years; 15 adult females and 12 adult males. Attendance continued to be very good.

The advantages of having additional separate premises for the adult males were appreciated. It was found that both groups of pupils were easily supervised and became more amenable to discipline. More freedom could be allowed during play times in both buildings. The adapted building at Biddulph Street has proved to be quite comfortable and has provided ample space for all activities including outdoor games—the green patch at the back of the building being invaluable for playing cricket and football.

Most of the ground in front of the building was made into a garden where the pupils successfully grew potatoes and other vegetables as well as some flowers.

Carpentry, stool-weaving, mop and link mat making, basketry, rugmaking, painting and other crafts were successfully carried on at Biddulph Street.

Towards the end of the year a kiln was acquired and a start was made on the craft of pottery. The younger group of boys showed interest immediately and it is hoped to develop this craft as it offered such a good medium for training in the use of hands. It gives also a wonderful opportunity for self expression.

Although the pupils think of the Biddulph Street Centre as a workshop, some pre-reading activity and number work is still carried out with good results in some cases.

During the year a billiards table was brought to the Centre from Penlan Home, Carmarthen. This has been most valuable and has given the pupils a great deal of enjoyment. It has been a boon for recreation on wet days.

At the Ann Street Centre the work has proceeded as usual, and the pupils seem very happy. With the additional space available, more activities were possible and more time given to musical movements, percussion band and drama.

During the year it became possible to form an additional group at Ann Street, making a total of four—an infants' or admission group, two intermediate groups (selected according to specific ability—not age), and a group of adult females.

The younger children worked well at many crafts and showed progress, especially in basketry, sewing and art. A good deal of work was also done in pre-reading activity—recognition and value of number etc., some children learned to recognise letters and numbers and two of the adult females made strides in actual reading. The adult females also showed progress in recognising the value of numbers and money, writing and telling the time.

The girls are very fond of their cookery lessons and have improved in turning out cakes, tarts and scones, whilst learning some of the fundamental processes of cooking, such as pastry, cake and sponge making.

A washing machine and spin-dryer were transferred to the Centre when the Bigyn Children's Home was closed, and a rotary clothes line was erected on the fenced-in flat roof of the Centre. The upstairs bathroom was converted into a small laundry where the laundry work for the Centre—towels, overalls etc., could be carried out. Thus another form of domestic training was started for the older girls.

During the summer a large sand-pit was provided by the Llanelly Branch of the National Society for Mentally Handicapped children. This gave the younger children hours of pleasure and enjoyment in the open-air.

In June staff and pupils went on the Annual outing to the seaside—to Port Eynon where everyone had an enjoyable time. The children behaved very well.

The Centre had more than its usual share of festivities at Christmas.

Firstly the members of the Ladies' Guild of the English Congregational Church, Carmarthen invited all the pupils, staff and parents to a party at Carmarthen. The children were taken by special bus to Carmarthen where they were given a wonderful welcome, tea, gifts from Father Christmas and games to play. During this party the Mayor of Carmarthen, on behalf of the Llanelly Branch of the Society for Mentally Handicapped children presented a tape-recorder for use in the Training Centre.

The Branch also provided the money for the gifts given at our own Christmas party which was also a great success.

Lastly, the members of the British Railways Staff Association again gave the Children a bumper party when each pupil was given a generous present and during which a sum of £38 was handed over to be used for the welfare of the pupils. Another tape-recorder was purchased (for use at the Biddulph Street Centre) with the bulk of the money and the rest was deposited in the Trustee Savings Bank for future needs.

It is gratifying to note that more organisations are becoming interested in the welfare of sub-normal children and this is very much appreciated by the staff of the Centre as well as by the pupils.

M. A. LEWIS.

Home Teaching

Seven mentally subnormal persons who cannot attend the Centre are still being visited periodically at their homes for tuition.

COMMUNICABLE DISEASES

The following table summarises the notifications of infectious diseases received during 1963 :—

Disease	No. of cases notified
Scarlet Fever	31
Whooping Cough	4
Diphtheria	—
Measles	1257
Pneumonia	54
Meningococcal Infection	—
Acute Poliomyelitis :	
Paralytic	—
Non-Paralytic	—
Acute Encephalitis :	
Infective	—
Post-infectious	—
Dysentery	235
Ophthalmia Neonatorum	1
Puerperal Pyrexia	6
Typhoid Fever	—
Para-typhoid	—
Food Poisoning	—
Erysipelas	2

It will be noted that for the sixteenth year in succession, no case of diphtheria was notified.

Acute Poliomyelitis

No case of acute poliomyelitis was notified in 1963 as compared with three cases in the previous year.

Vaccination against poliomyelitis was introduced in 1956 and there have been only 10 cases (7 of which were children) of acute poliomyelitis in the County in the following seven years. None of these patients had been vaccinated.

Between 1951 and the introduction of vaccination in 1956, 104 cases of acute poliomyelitis occurred as follows:—

Year	Number of Cases		Total
	Children under 15 years of age	Others	
1951	31	6	37
1952	17	12	29
1953	9	5	14
1954	2	1	3
1955	11	8	19
1956	—	2	2
TOTAL	70	34	104

LABORATORY SERVICES

The Public Health Laboratory at Carmarthen, which is controlled by the Medical Research Council, is available for the examination of bacteriological specimens in connection with the County Health Services. The services rendered by the Laboratory are particularly valuable in the control of epidemics, and full co-operation is maintained between the staff of the Laboratory and the Health Department.

VENEREAL DISEASES

Carmarthenshire cases are treated at the Venereal Diseases Clinics at Mount Pleasant Hospital, Swansea, and Llanelly Hospital. 59 new patients from the County attended during the year as follows :—

	Syphilis	Gonor- rhoea	Non-V.D. and other conditions	Total
Swansea Clinic	—	9	23	32
Llanelly Clinic	6	1	20	27
Total	6	10	43	59

Total attendances of patients during the year :—

Swansea Clinic	152
Llanelly Clinic	476
Total	628

The following table gives the number of cases dealt with for the first time during each of the last five years :—

Year	Acquired and Congenital Syphilis			Gonorrhoea			Other conditions
	M.	F.	T.	M.	F.	T.	T.
1959 ..	1	1	2	18	2	20	69
1960 ..	1	—	1	12	—	12	77
1961 ..	6	—	6	20	—	20	62
1962 ..	3	—	3	15	2	17	51
1963 ..	5	1	6	10	—	10	43

Additional information as to treatment which has been available in past years is no longer provided in detail by the Centres. The return from Llanelly Centre, however, shows that treatment was completed in all cases of Gonorrhoea and other conditions.

TUBERCULOSIS

Two Chest Physicians each with an Assistant Chest Physician cover the County. The Physicians of Pembrokeshire and Swansea also attend Carmarthenshire cases along the borders of the County.

The number of new cases reported by formal notification or otherwise and the case rates per 1,000 population during the past five years are as follows :—

Year	No. of Respiratory cases		Case rate	No. of Non-Respiratory cases		Case rate
1959 ..	95	..	0.56	25	..	.15
1960 ..	115	..	0.68	16	..	.10
1961 ..	96	..	0.58	19	..	.11
1962 ..	90	..	0.54	12	..	.07
1963 ..	69	..	0.41	25	..	.15

The mortality figures for the same five years are as follows :—

Year	Deaths from Respiratory T.B.		Death Rate per 1,000 population	Deaths from Non-Respiratory T.B.		Death Rate per 1,000 population
1959 ..	13	..	.08	4	..	.02
1960 ..	13	..	.08	2	..	.01
1961 ..	9	..	.05	—	..	—
1962 ..	10	..	.06	1	..	.006
1963 ..	8	..	.05	2	..	.01

The following table shows the age distribution of all new cases notified during 1963 :—

Age Periods	Respiratory		Non-Respiratory		Total
	M.	F.	M.	F.	
0—1 ..	—	—	1	—	1
1—5 ..	1	1	—	—	2
5—15 ..	4	3	—	—	7
15—25 ..	9	4	—	—	13
25—35 ..	2	5	—	2	9
35—45 ..	4	1	2	6	13
45—55 ..	10	6	1	4	21
55—65 ..	8	2	—	2	12
65+ ..	7	2	1	6	16
Total ..	45	24	5	20	
Grand Totals	69		25		94

The following table shows the deaths from Tuberculosis classified into the various age groups for the year 1963 :—

Age Periods	Deaths from Tuberculosis			
	Respiratory		Non-Respiratory	
	M.	F.	M.	F.
0—1 ..	—	—	—	—
1—5 ..	—	—	—	—
5—15 ..	—	—	—	—
15—45 ..	—	—	—	1
45—65 ..	3	1	—	1
65+ ..	2	2	—	—
Totals ..	5	3	—	2
Grand Totals ..	8		2	

Examinations at Chest Clinics

During the year, 3,485 new cases, including 566 contacts, were examined. Of these 73 were diagnosed as definitely tuberculous and 3,216 as non-tuberculous. 196 cases were not finally diagnosed.

Register of Cases

The following table summarises for the year the Register of Tuberculosis cases in the County :—

	Resp.		Non-Resp.		Totals		Grand Total	Rate per 1,000 population
	M.	F.	M.	F.	M.	F.		
Cases on Register 1/1/63	484	353	36	89	520	442	962	5.76
Notified Cases, 1963 ..	39	20	5	19	44	39	83	0.50
Inward Transfers	6	4	—	1	6	5	11	0.06
Total New cases	45	24	5	20	50	44	94	0.56
Withdrawn:—								
Recovered ..	47	79	8	9	55	88	43	—
Left Area ..	10	7	2	—	12	7	19	—
Change of Diagnosis ..	1	—	—	—	1	—	1	—
Deaths:—								
Tuberculosis ..	5	3	—	2	5	5	10	—
Other causes ..	18	6	4	—	22	6	28	—
On Register, 1/1/64 ..	448	282	27	98	475	380	855	5.13

COUNTY WELFARE SERVICES

Under the National Assistance Act, 1948, the County Council were given power to make arrangements for promoting the welfare (but excluding financial assistance or medical treatment) of persons who are blind, deaf or dumb, aged and others who are substantially and permanently handicapped. The County Welfare Committee was appointed to undertake the Council's functions under the Act.

Blind Persons

There is no change to report in the arrangements for the care and welfare of blind persons, and the Carmarthenshire Blind Society continued to act as agents of the County Council. Medical examination and certification of cases is arranged by the County Medical Officer of Health, and specialist examination, when necessary, is undertaken at the Ophthalmic Clinics of the Welsh Hospital Board at Carmarthen and Llanelly. If a patient is unable to travel, a domiciliary visit is made by the Ophthalmologist.

During 1963, 56 new cases (21 males and 35 females) were certified blind. The following table shows their age distribution and the principal causes of blindness:—

Age at Registration	Primary Ocular Disease								Total		Grand Total
	Cataract		Glaucoma		Retrolental Fibroplasia		Other				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
0—4	—	—	—	—	—	—	—	—	—	—	—
5—15	—	—	—	—	—	—	—	—	—	—	—
16—20	—	—	—	—	—	—	—	—	—	—	—
21—29	—	—	—	—	—	—	—	—	—	—	—
30—39	—	—	—	—	—	—	—	—	—	—	—
40—49	—	1	—	—	—	—	2	1	2	2	4
50—59	—	—	—	—	—	—	1	—	1	—	1
60—69	—	1	—	1	—	—	2	2	2	4	6
70—79	3	4	—	5	—	—	4	4	7	13	20
80 and over	6	6	1	3	—	—	2	7	9	16	25
Totals	9	12	1	9	—	—	11	14	21	35	56

At the end of the year there were 525 blind persons on the register and their age distribution was as follows:—

Age Group	M.	F.	Total
0—4 ..	—	—	—
5—15 ..	2	3	5
16—20 ..	1	1	2
21—29 ..	5	1	6
30—39 ..	11	4	15
40—49 ..	16	19	35
50—59 ..	20	16	36
60—69 ..	30	54	84
70—79 ..	62	113	175
80 and over ..	54	113	167
Totals ..	201	324	525

234 persons (80 males and 154 females) became blind when over 65 years of age. 43 (15 males and 28 females) became blind under the age of 12 months

Partially Sighted

18 persons (9 males and 9 females) were found to be partially sighted during the year. Their age distribution and the principal causes of partial sight are as follows:—

Age at Registration	Primary Ocular Disease								Total	Grand Total	
	Cataract		Glaucoma		Retrolental Fibroplasia		Other				
	M.	F.	M.	F.	M.	F.	M.	F.			
0—4	—	—	—	—	—	—	—	—	—	—	
5—15	—	—	—	—	—	—	—	—	—	—	
16—20	—	—	—	—	—	—	—	—	—	—	
21—49	—	—	—	—	—	—	3	1	3	1	4
50—64	1	—	—	—	—	—	—	1	1	1	2
65 and over	3	3	—	2	—	—	2	2	5	7	12
Totals	4	3	—	2	—	—	5	4	9	9	18

There were 84 partially sighted persons on the register at the end of the year. Their age distribution is as follows:—

Age Group	M.	F.	Total
0—4 ..	—	1	1
5—15 ..	1	3	4
16—20 ..	1	2	3
21—49 ..	11	5	16
50—64 ..	6	6	12
65 and over ..	18	30	48
Totals	37	47	84

Employment of blind persons

At the end of the year, 20 males and 2 females were in employment, 8 of them in workshops for the blind, one as a homemaker and 13 (including 1 female) variously engaged in open employment.

Three male blind persons were in training for employment at the end of the year. One male who had undergone training was unemployed at the end of the year.

Subject to training, one male was capable of work in sheltered employment and two males in open employment. 5 males were considered capable of work in open employment without training.

Follow-up of Registered Blind and Partially Sighted Persons

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which Section F. 1 of Form B.D.8 recommends :—				
(a) No treatment	6	3	—	22
(b) Treatment (medical surgical or optical)	22	9	—	12
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	5	1	—	2

Ophthalmia Neonatorum :

- (i) Total number of cases notified during the year—One
- (ii) Number of cases in which :—
- | | | |
|--|---|-----|
| (a) Vision lost | } | Nil |
| (b) Vision impaired | | |
| (c) Treatment continued at end of year | | |

Epileptics and Spastics

There are no arrangements catering for the special welfare needs of adults suffering from Epilepsy or Cerebral Palsy. The County Welfare Committee, however, bear the maintenance fees in respect of four epileptics at Homes for Epileptics, one old poliomyelitis case at a home for Cripples, and seven Cripples at the Coomb Cheshire Home.

MILK CONTROL

No animals have been slaughtered under the Tuberculosis Order 1938, during the past five years.

Under The Milk (Special Designation) Regulations, 1960, the granting of producers licences is the responsibility of the Ministry of Agriculture, Fisheries and Food. Dealers licences are the responsibility of the County Council as the Food and Drugs Authority.

Under the Milk and Dairies Regulations, 1959, responsibility for the registration of dairy farms and of persons carrying on the trade of dairy farmer falls on the Ministry of Agriculture, Fisheries and Food. Local Authorities retain responsibility for dairies which are not dairy farms and of dairymen who are not dairy farmers, and for the enforcement of the regulations relating to diseases communicable to man.

FOOD AND DRUGS

The duty of the County Council under the Food and Drugs Act, 1955, to ensure that food sold for human consumption is of good quality and wholesome is an important part of the comprehensive public services which are essential to good health. The following is the report of the Chief Inspector of Food and Drugs for the year :—

Total number of samples submitted to the Public Analyst for analysis	979
Informal samples of milk tested for compositional quality by officers of this department	738
Alcoholic spirits tested by officers of this department ..	17
Milk samples sent for bacteriological or biological examination to the Public Health Laboratory ..	992
	—
Total number	2726
	—

MILK SAMPLES

Number of samples submitted	670
Certified genuine in Fat and Non-fatty-solids content ..	476
Deficient in Non-Fatty-solids but otherwise genuine ..	120
Containing Added Water	17
Containing Added Water and also deficient in Fat ..	2
Deficient in Fat	29
Deficient in both Fat and Non-fatty-solids	24
Unsatisfactory due to bottles not being in a thorough state of cleanliness	2

Included in the above total are 22 "Appeal to Cow" samples of milk, of which 16 were genuine and 6 were certified to be deficient in fat and/or non-fatty-solids,

Milk Samples certified to contain Added Water

Of the 19 samples certified to contain added water, 18 were samples of milk supplied wholesale to creameries and one was a sample of milk sold retail in the county.

Legal proceedings under Section 2, Food and Drugs Act, 1955, were taken against four milk producer-wholesalers in respect of nine milk samples certified to contain added water and the fines and costs imposed were as follows:—

<i>Percentage Added Water</i>	<i>Fines & Costs imposed</i>	<i>Percentage Added Water</i>	<i>Fines & Costs imposed</i>
1. 9.2% } 11.7% } 16.4% } 18.3% }	£29	3. 7.1% } 3.3% }	£10.
2. 8.3% } 4.7% }		4. 8.3%		£6/10/0.

The amounts of added water in the remaining ten samples were small and it was decided not to take legal action against the suppliers but to issue warnings.

Milk Samples reported deficient in Fat

The deficiencies in fat were not such as to warrant legal action.

The suppliers of all the samples reported to be deficient in fat and/or non-fatty-solids were notified of the deficiencies and instructed to make every effort to improve the quality of the milk.

Milk bottles not in a thorough state of cleanliness

A bottle of milk, the subject of a complaint by a private purchaser, was found to be unsatisfactory on account of the fact that there was a small insect adhering to the inside of the bottle. The bottle had been opened on the previous day and could have been contaminated after opening. It was, therefore, considered to be unwise to take proceedings against the dairy company concerned.

Another bottle of milk, with particles of dirt on the inside of it, was brought to the department by a householder. The contamination appeared to be due to the failure of the bottle washing machine at the dairy concerned to remove all the hardened dirt adhering to the inside of the bottle. The contamination was not unduly serious and the proprietors of the dairy were let off with a severe warning on this occasion.

Informal samples of Milk taken at schools and other establishments and tested at this office by the Food and Drugs Officers.

Number of samples tested	738
Genuine in Fat and Non-fatty-solids content	678
Deficient in Fat	16
Deficient in Non-fatty-solids	42
Deficient in both Fat and Non-fatty-solids	2

The unsatisfactory samples were followed up, where necessary, by taking formal samples for analysis by the Public Analyst,

MISCELLANEOUS ARTICLES OF FOOD AND DRUGS

The samples procured and submitted to the Public Analyst comprised the following:—

Description of article	Number of Samples	Number reported Unsatisfactory
Ice Cream, Dairy Ice Cream	46	2
Soft Drinks, Fruit Juice, etc	39	1
Butter	34	—
Canned Meat Products, Meat Paste, etc ..	23	—
Condensed Milk	21	3
Sausages	21	3
Fruit Preserves	16	—
Butter Confectionery	11	1
Analgesic Tablets	9	—
Canned Vegetables, Soups	8	1
Malt Vinegar	8	—
Milk Pudding	6	—
Cooking Fat	5	—
Cake and Sponge Mixtures	5	—
Cooked Cockles	5	1
Sandwich Spreads	5	—
Almond Marzipan	5	3
Non-brewed Condiment	5	2
Fish Paste, Fish Cakes	4	1
Cream	4	—
Margarine	3	—
Tea, Coffee	3	—
Sugar	3	—
Ground Almonds	3	—
Sweetening Tablets	2	—
Foot Ointment	2	2
Fruit Sauce	2	—
Pickled Vegetables	2	—
Dried Fruit	2	1
Bread	2	1
Milk Chocolate	1	1
Alcoholic Spirit	1	1
Turkey	1	1
Olive Oil	1	—
Cough Syrup	1	—
	<hr/>	<hr/>
	309	25
	<hr/>	<hr/>

Particulars relating to the Unsatisfactory Samples

<i>Description of Article</i>	<i>Nature of deficiency or irregularity</i>
Evaporated Milk (3)	2.5%, 2.7%, 0.9% deficient in fat.
Pork Sausages.	2.9% deficient in Meat.
Sausages (2)	Presence of preservative not declared.
Cooked Cockles in Vinegar	The solution was found to be non-brewed condiment and not vinegar.
Apple Flakes.	Unsatisfactory in texture.
Foot Ointment (2)	Results of analysis were at variance with the declaration of ingredients on jar.
Hazelnut Milk	Small caterpillar of Ephestia moth found in one bar in a packet of four.
Bread	Patch of brown dough in a white loaf.
Non-brewed Condiment (2)	2% & 9% deficient in Acetic Acid.
Ice Cream (2)	8% & 26% deficient in fat.
Lemonade	Slight contamination with particles of a dark substance.
Dairy Butter Toffees.	The fat was not entirely butter-fat.
Whisky.	Contained 6.3% excess water.
Canned Tomatoes.	Grub found in the tomatoes. Also contained 200 parts/million of tin.
Almond Marzipan (3)	4%, 10% & 4% deficient in Ground Almonds.
Salmon Spread.	Slight decomposition of the fish.
Turkey.	Some rancidity in the fat.

Legal action under Section 2, Food and Drugs Act, 1955 was taken in respect of the sample of Whisky certified to contain 6.3% excess water. The magistrates imposed a fine of £7 together with £3/5/0 costs on the seller.

Tests were also carried out by officers of the department on 17 informal samples of alcoholic spirits purchased at licensed premises and all the samples were found to be genuine.

The Hazelnut Milk Chocolate and the tin of Peeled Tomatoes were brought to the department by private purchasers but because of domestic and personal reasons, the complainants did not wish to be involved in legal proceedings.

The jar of Salmon Spread was brought to the department by a private individual as being suspect because his little boy had been sick after eating some of it. Nothing toxic was found in the sample and the Public Analyst remarked that the incipient decomposition might have developed after the jar had been opened. In the circumstances, it was considered inadvisable to take legal action.

The Turkey had been roasted and partly consumed by the purchaser, who complained that meat from parts of the bird had a bitter taste. The Public Analyst remarked that the rancidity could have originated either in the turkey fat or in the fat introduced in the process of cooking. The lean meat was in good condition.

The deficiencies or irregularities in the remaining twenty samples were brought to the notice of the manufacturers or suppliers, and after giving consideration to their explanations and observations, it was decided not to take legal action in respect of any of these samples.

A sample of sugar was submitted to the Public Analyst following a complaint by a private purchaser that a grub had been found on the outside of the wrapper in the folded part of the paper. The sugar in the packet showed no signs of contamination and on examination was not found to have been affected in any way.

Unsatisfactory articles of Food examined in this department and not submitted to the Public Analyst.

Legal proceedings were taken in respect of the following unsatisfactory articles of food brought to the notice of the department by private purchasers:—

<i>Article</i>	<i>Nature of Irregularity</i>	<i>Legislation involved</i>	<i>Fines imposed</i>
Meat Pies	Mouldy	Section 2, Food and Drugs Act.	£25
Meat Pies	Mouldy	Section 2 Food and Drugs Act.	£25
Chopped Ham	Contained piece of plastic	Section 2 Food and Drugs Act.	£50
Ham	Infested with maggots	Section 2 Food and Drugs Act.	£30

The following articles of food, alleged to contain extraneous matter, were also brought to the notice of the department by private purchasers:—

<i>Article</i>	<i>Extraneous matter</i>
Fish Cakes	Bits of fish bone.
Fish Cakes	Small piece of metal
Loaf of Bread	Piece of string.
Loaf of Bread	Small dead spider.
Sponge Cake	Dead wasp.
Canned Tomatoes	Small grub.

After carrying out investigations it was considered, having regard to all the circumstances, unwise to institute legal proceedings in respect of these articles.

THE MILK (SPECIAL DESIGNATION) REGULATIONS, 1960-1963

During the year 161 samples of milk were taken for examination from milk-dealers to whom licences had been issued under the above Regulations by the County Council as the Food and Drugs Authority for the whole County. The result of the tests carried out on these samples at the Public Health Laboratory were as follows:—

Pasteurised Milk

Satisfied both Phosphatase test for adequacy of heat treatment and Methylene Blue test for keeping quality, etc.	..	..	..	..	108
Failed Phosphatase test but satisfied Methylene Blue test	..	..	..	..	5
Failed Methylene Blue test but satisfied Phosphatase test	..	..	..	..	2
					<hr/> 115

Tuberculin Tested (Raw) Milk

Satisfied the Methylene Blue test	..	..	..	..	25
Failed Methylene Blue test	..	..	..	..	9
					<hr/> 34

Sterilised Milk

Number of samples taken	..	..	..	..	12
The twelve samples were satisfactory under the prescribed test.					

MILK IN SCHOOLS SCHEME

Details of the results of the bacteriological tests carried out on 742 samples of milk taken at schools in the county are as follows:—

Pasteurised Milk

Satisfied both Phosphatase and Methylene Blue tests	..	..	..	..	321
Failed Phosphatase test but satisfied Methylene Blue test	..	..	..	..	14
Failed Methylene Blue test but satisfied Phosphatase test	..	..	..	..	12
Satisfied Phosphatase test but Methylene Blue test void as temperature exceeded 70°F	..	..	..	..	23
					<hr/> 370

Tuberculin Tested (Raw) Milk

Satisfied Methylene Blue test	..	..	..	..	320
Failed Methylene Blue test	..	..	..	..	31
Test void	..	..	..	..	21
					<hr/> 372

Milk samples taken at Children's Homes, Hospitals, etc.

The results of the bacteriological tests are summarised as follows:—

	<i>Satis- factory</i>	<i>Unsatis- factory</i>	<i>Test Void</i>	<i>Total</i>
Pasteurised Milk ..	37	—	—	37
Tuberculin Tested (Raw) Milk	17	3	2	22
	<hr/>	<hr/>	<hr/>	<hr/>
	54	3	2	59
	<hr/>	<hr/>	<hr/>	<hr/>

Milk samples sent for Guinea Pig inoculation

Thirty samples of milk taken at the farms of producers supplying milk to schools and other establishments were sent to the Public Health Laboratory for examination for tuberculosis and other infections.

Twenty-eight samples were reported to be free from infection whereas the tests could not be completed on the remaining two samples as the guinea-pigs died of intercurrent infection not due to the milk.

D. R. WATKINS,

Chief Inspector.

SANITARY CIRCUMSTANCES

At the time of the completion of this report only the District Medical Officers of Health for Llandovery Borough and Cwmamman Urban Council had submitted reports on the sanitary circumstances of county districts. Neither authority have any developments to report.

VITAL STATISTICS, 1963

Name of District	Estimated Population for 1963	Live Births		Deaths registered in District		Transferable Deaths		Deaths under 1 year		Area of District in Acres	Census 1961 Total population at all ages
		No.	Rate per 1,000 Population	No.	Rate per 1,000 Population	Outward	Inward	No.	Rate per 1,000 Live Births		
URBAN :											
Llanelli	29510	414	14.03	495	16.77	209	50	14	33.81	2069	29994
Carmarthen	12900	167	12.95	220	17.05	407	21	5	29.94	5160	13249
Llandeilo	1880	30	15.96	45	23.94	1	28	1	33.33	311	1906
Llandovery	1990	25	12.56	30	15.08	10	9	—	—	1266	1898
Kidwelly	2870	40	13.94	53	18.47	—	22	1	25.00	2854	2879
Newcastle Emlyn	610	9	14.75	13	21.31	—	5	—	—	208	648
Ammanford	6200	86	13.87	81	13.06	4	33	1	11.63	951	6264
Burry Port	5860	106	18.09	92	15.70	1	38	3	28.30	1374	5671
Cwmmaman	4200	54	12.86	59	14.05	4	20	1	18.52	756	4272
Total	66020	931	14.10	1088	16.48	636	226	26	27.93	14949	66781
RURAL :											
Llanelli	40350	651	16.13	499	12.37	32	172	15	23.04	51367	40230
Carmarthen	27840	400	14.37	358	12.86	8	128	14	35.00	202733	28004
Llandeilo	24150	345	14.29	301	12.46	7	100	11	31.88	236581	24494
Newcastle Emlyn	8200	99	12.07	144	17.56	14	47	2	20.20	82842	8227
Total	100540	1495	14.87	1302	12.95	61	447	42	28.09	573523	100955
Whole County	166560	2426	14.57	2390	14.35	697	673	68	28.03	588472	167736
England and Wales	—	—	18.2	—	12.2	—	—	—	20.9	—	—