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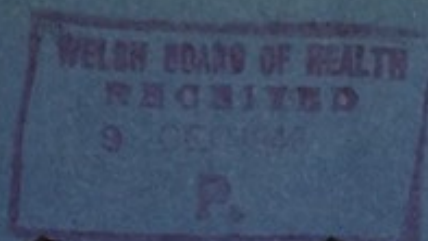
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Glamorgan County Council.



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# REPORT

OF THE

## Medical Officer of Health

FOR THE YEAR 1945.

A. R. CULLEY, M.D., B.Ch. (Wales), B.Sc., M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.,  
MEDICAL OFFICER OF HEALTH.



# Glamorgan County Council.

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CARDIFF :

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# Glamorgan County Council.

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*To the Chairman and Members of the Public Health and Housing Committee.*

MR. CHAIRMAN, COUNTY ALDERMAN MRS. F. ROSE DAVIES, AND GENTLEMEN,

ANNUAL REPORT, 1945.

I have the honour to present to you my fourth annual report. It has been a difficult year in the sense that although hostilities had ceased progress could not be made as quickly as one would wish, due partly to the difficulty in carrying out even a minimal building programme on which the improvement of services depends to a great extent.

The vital statistics of the County for the year, given more fully in the body of the report, are as follows: The death rate has slightly increased from 12·3 per 1,000 in 1944 to 12·9 in 1945, whereas the birth rate dropped slightly from 19·4 to 18·1 per 1,000. The infantile mortality rate increased from 48 per 1,000, the lowest ever recorded for the County, to 58 per 1,000 in 1945, but on the other hand there was an improvement in the maternal mortality rate, the figures being 4·67, 3·59, and 3·21 per 1,000 in 1943, 1944, and 1945 respectively, and the stillbirth rate was reduced from 38·54 per 1,000 (live and still) births in 1944 to 33·35 in 1945. The stillbirth rate for England and Wales in 1945 was 0·46 per 1,000 population. The number of deaths from tuberculosis in 1944 was 565 and in 1945, 508. Cancer deaths increased from 1,104 in 1944 to 1,209 in 1945, which is a rate of 1·873 per 1,000; the provisional rate for England and Wales being 1·933.

The County hospitals had a busy year marked by an increase of difficulty in staffing on the nursing side, but an easing of the position in respect of the medical staff. The decrease in the birth rate and a growing tendency for mothers to go into maternity units for confinement resulted in a reduction in the number of confinements attended by County midwives, who did good work. The transport difficulties experienced by the midwives during the war were not so marked during the year.

In order to keep the midwifery staff complement filled a County Pupil Midwifery Training School was inaugurated, and the first results of the examinations were very good.

During the year the Hospital Survey Report of South Wales and Monmouthshire was belatedly published.

The tuberculosis after-care schemes, details of which are in the report, continued their beneficial work. The number of biological milk samples examined again increased, and the results show an increase in the number of samples containing tubercle bacilli.

I received every assistance and co-operation from my colleagues in the district authorities and am grateful to them. The medical, dental, and nursing staffs have accomplished a good year's work.

Dr. Evan Thomas has fulfilled his function as Deputy County Medical Officer efficiently, and has been a great help, as have the administrative staff of the department.

I respectfully express my sincere thanks for the obvious desire of all the members of the Public Health and Housing Committee to encourage any provision in the County which will enhance the health of the public.

I remain,

Your obedient servant,

**A. R. CULLEY,**

*County Medical Officer.*

October, 1946.

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## VITAL STATISTICS, 1945.

The following table gives the birth rate, death rate, and infant mortality rate for England and Wales and the Administrative County of Glamorgan for the year 1945, and, for the purpose of comparison, similar statistics for the years 1944 and 1924 are given.

	Birth Rate.			Death Rate.			Infant Mortality Rate.		
	1945	1944	1924	1945	1944	1924	1945	1944	1924
England and Wales .. .. .	16.1	17.6	18.8	11.4	11.6	12.2	46	46	75
Administrative County of Glamorgan ..	18.1	19.4	23.1	12.9	12.3	10.9	58	48	77
Total Urban Districts .. .. .	18.2	19.2	23.4	13.3	12.7	11.0	59	50	77
Total Rural Districts .. .. .	17.8	20.0	22.0	12.0	11.1	10.4	53	44	76
<b>URBAN DISTRICTS :—</b>									
Aberdare .. .. .	15.6	17.3	19.1	15.2	15.3	11.3	46	36	85
Barry Borough .. .. .	20.3	20.3	21.8	13.8	12.6	11.7	55	46	66
Bridgend .. .. .	17.4	21.7	21.5	11.5	13.0	11.2	35	28	54
Caerphilly .. .. .	21.1	22.5	26.7	14.1	11.6	11.5	68	48	83
Cowbridge Borough .. .. .	20.7	17.4	24.4	10.8	5.5	16.6	80	91	36
Gelligaer .. .. .	20.7	21.8	25.7	12.6	12.1	10.6	94	68	97
Glyncorrgw .. .. .	22.8	23.6	29.5	12.3	11.3	9.6	64	56	52
Lluchwr .. .. .	16.3	18.7	20.1	12.6	11.2	10.3	62	41	95
Maesteg .. .. .	19.4	19.1	25.1	14.3	13.5	9.7	55	88	65
Mountain Ash .. .. .	19.2	19.4	24.8	12.6	13.3	11.1	57	52	74
Neath Borough .. .. .	16.0	18.2	21.6	12.6	12.2	11.4	47	34	63
Ogmore and Garw .. .. .	19.4	19.3	25.5	11.7	10.8	9.5	44	61	59
Penarth .. .. .	14.3	18.1	19.4	13.1	14.6	11.6	31	22	70
Pontypridd .. .. .	18.3	20.2	24.9	13.3	13.1	11.6	83	51	92
Porthcawl .. .. .	16.2	17.2	13.9	14.8	14.4	12.7	37	48	106
Port Talbot Borough .. .. .	17.5	19.5	23.0	12.6	11.9	10.9	62	43	79
Rhondda .. .. .	17.9	17.4	23.6	13.4	12.6	11.0	53	51	78
<b>RURAL DISTRICTS :—</b>									
Cardiff .. .. .	16.4	17.8	18.2	10.8	10.8	9.2	35	38	45
Cowbridge .. .. .	21.7	24.6	23.8	12.9	10.3	12.8	53	36	48
Gower .. .. .	15.2	16.0	19.5	10.7	10.9	10.9	37	57	80
Llantrisant and Llantwit Fardre ..	21.7	24.0	27.8	14.2	11.8	11.6	68	60	87
Neath .. .. .	16.6	20.3	22.8	11.5	10.6	9.8	55	32	80
Penybont .. .. .	19.1	21.0	22.6	12.3	10.2	8.9	46	44	55
Pontardawe .. .. .	15.8	17.7	20.3	12.3	12.7	11.2	68	47	91

## POPULATION.

It will be noted that the estimate of the Registrar-General places the population of the County at 697,780 and this, except for the year 1943, is the lowest figure since 1913. It is too early to calculate with any certainty what the post-war trend will be, but it must be noted that the excess of births over deaths in 1945 is approximately 1,400 lower than in 1944, and 400 less than 1943 when the population was estimated to be 697,300. It must also be noted that the experience in the past has been that the Registrar-General's estimate as shown by census years, has tended to be rather higher than the actual population.

Year	Population	Excess of Births over Deaths	Year	Population	Excess of Births over Deaths
1893	521,872	10,012	1929	809,200	4,582
1903	631,398	13,137	1930	809,200	4,921
1913	791,208	14,363	1931	766,141 (Census)	3,670
1914	802,752	14,047	1932	763,000	3,482
1915	777,430	12,266	1933	758,160	2,504
1916	752,619	11,485	1934	751,650	3,579
1917	766,990	10,236	1935	743,800	3,015
1918 *Swansea Extension	740,254	8,866	1936	731,350	2,358
1919	795,924	9,828	1937	714,200	1,714
1920	827,639	14,128	1938	708,500	1,982
1921	814,717 (Census)	14,015	1939	709,500	1,746
1922 *Cardiff Extension	838,064	10,006	1940	716,400	2,077
1923	827,900	10,656	1941	740,310	2,595
1924	839,500	10,294	1942	714,400	4,422
1925	843,400	8,898	1943	697,300	4,125
1926	843,100	8,213	1944	704,540	5,043
1927	837,000	5,366	1945	697,780	3,621
1928	812,200	5,748			

## EXTRACTS FROM VITAL STATISTICS.

The following is a short extract from the Vital Statistics of the year 1945:—

<i>Live Births :</i>	<i>Total.</i>	<i>Male.</i>	<i>Female.</i>	
Legitimate .. ..	11,795	6,133	5,662	} Birth rate per 1,000 of population, 18.1
Illegitimate .. ..	848	473	375	
<i>Stillbirths</i> .. ..	436	263	173	} Rate per 1,000 total (live and still) births, 33.35, or 0.62 per 1,000 population.
<i>Deaths</i> .. ..	9,022	5,056	3,966	
<i>Deaths from Puerperal Causes :</i>		<i>Deaths.</i>		
Puerperal and Post Abort: Sepsis		5		0.38
Other Maternal Causes .. ..		37		2.83
Total .. ..		42		3.21
<i>Death rate of Infants under one year of age :</i>				
All infants per 1,000 live births .. ..				58
Legitimate infants per 1,000 legitimate live births .. ..				56
Illegitimate infants per 1,000 illegitimate live births .. ..				84
<i>Deaths from Certain Causes :</i>				
Cancer (all ages) .. ..				1,209
Measles (all ages) .. ..				17
Whooping Cough (all ages) .. ..				14
Diarrhoea (under 2 years of age) .. ..				73



## MILK PRODUCTION.

The results of sampling of milk produced under licence of the County Council as the Authority under the Milk (Special Designations) Regulations, 1936-1938, is shown in the following table :—

Grade	1944		1945	
	% Satisfactory	% Unsatisfactory	% Satisfactory	% Unsatisfactory
Tuberculin tested ..	68	32	75	25
Accredited .. ..	69	31	71	29

These results show some improvement as far as the production of tuberculin-tested milk is concerned, but the results for the accredited grade show very little difference from the previous year.

Regular sampling was carried out and the Committee adhered to former practice that if a producer yielded three consecutive unsatisfactory samples his licence was revoked. This means that if the producer wishes to renew his licence he must be resampled and provide evidence that he can reach the appropriate standard for the grade. This usually means the loss of subsidy over one or two months.

Again, the probable causes for failure to produce milk of adequate standard were failure to use regularly the steam sterilisation apparatus on which the Committee insist, and shortage of labour. It was noted that too often there was lack of supervision of milk production technique, and that young employees were left to carry on with an almost certain deterioration of the supplies.

The Government scheme for specifying areas in which only certain grades of milk can be retailed unless heat-treated, is still in abeyance, although in March, 1945, as a preliminary to this the Ministry of Food decided to grant subsidies to retailers and wholesalers in respect of milk heat-treated by them. Claimants must have been authorised to apply heat-treatment to milk by the Ministry of Food, and all the milk for which the allowance is claimed shall have been subjected to heat-treatment at the premises mentioned in the authority. If the claimant sells any raw milk by retail his sales must be restricted to tuberculin-tested or accredited grades. The Ministry of Food requested that the Council, as the Food and Drugs Authority, should sample milk from these authorised persons, and this was done. In this manner the Ministry of Food ensures as far as possible that heat-treatment is efficiently performed.

The Committee's scheme for the increased biological sampling of milk has been continued, backed by the co-operation of the local authorities. As pointed out previously, because of the time which must elapse before the results are forthcoming, there is an inevitable delay before action can be taken on a positive sample, but in spite of this the continued distribution of tubercle infected milk to the public is prevented sooner than would otherwise be possible. The real solution and best preventive procedure, difficult though these may be of achievement, would be efficient heat-treatment of all milk.

During the year 410 samples were biologically examined, and of these 16 or 3.9 per cent were found to contain tubercle bacilli, as compared with 2.8 per cent of the samples examined last year.

## CARDIFF AND COUNTY PUBLIC HEALTH LABORATORY.

The work of the Cardiff and County Public Health Laboratory, as expressed by the number of specimens examined, shows a decrease from the year 1944. The staffing position, however, was such that at times it was exceedingly difficult to maintain the laboratory service, and it is a cause for satisfaction that this was done without any curtailment. One need feel no dismay at the lower figure of specimens examined, which was due mainly to the reduction in the number of diphtheria swabs. The number of venereal disease specimens sent in for diagnosis showed an increase.

The following table gives an account of the work done at the Laboratory during the year 1945 for the Administrative County :—

Description of Specimens or Samples.	Total No. examined	Results		Percentage of Positive Results
		Positive	Negative	
<i>Bacteriological Examinations :—</i>				
Water Supplies .. .. .	897	—	—	—
Milks for Tubercle Bacilli .. .. .	410	16	394	3·9
Milks for General Examination .. .. .	2,520	—	—	—
Milk for Enteric, etc. .. .. .	12	—	—	—
Water for Enteric, etc. .. .. .	2	—	—	—
Sputa for Tubercle Bacilli .. .. .	31	} 5	44	10·2
Urine for Tubercle Bacilli .. .. .	17			
Faeces for Tubercle Bacilli .. .. .	1			
C.S.F. ? T.B. .. .. .	7	7	—	100·0
Pus and Pleural Fluid ? T.B. .. .. .	57	—	—	—
Diphtheria .. .. .	7,283	1,266	6,017	17·4
Haemolytic Streptococci .. .. .	1,670	—	—	—
Ringworm .. .. .	18	—	—	—
Sera for Enteric .. .. .	61	} 39	171	18·6
Faeces for Enteric .. .. .	107			
Urine for Enteric .. .. .	42			
Faeces for Dysentery .. .. .	812	130	682	15·85
Faeces for Food Poisoning .. .. .	8	5	3	62·5
Brucella Abortus .. .. .	7	—	—	—
Food for Enteric .. .. .	13	—	—	—
For Wassermann Reaction .. .. .	3,576	404	3,172	11·3
For Gonococcal Complement Fixation .. .. .	752	91	661	12·1
For Gonococci .. .. .	1,183	351	832	29·7
Ophthalmia .. .. .	25	—	—	—
For Spirochaeta Pallida .. .. .	27	17	10	63·0
Cerebro Spinal Fluid .. .. .	82	—	—	—
Meningococci .. .. .	8	8	—	100·0
Rodents for Plague .. .. .	64	—	—	—
Other Examinations .. .. .	75	—	—	—
<i>Chemical Examinations. :—</i>				
Fertilizers and Feeding Stuffs .. .. .	78	—	—	—
Food and Drugs Acts Samples .. .. .	1,753	—	—	—
Water Supplies .. .. .	176	—	—	—
River Waters .. .. .	62	—	—	—
Sewage and Sewage Effluents .. .. .	300	—	—	—
Trade Effluents .. .. .	15	—	—	—
Milk and Milk Products .. .. .	743	—	—	—
Urine Analyses .. .. .	—	—	—	—
Other Examinations .. .. .	15	—	—	—
<b>Total .. .. .</b>	<b>22,909</b>	<b>—</b>	<b>—</b>	<b>—</b>

## FOOD AND DRUGS ACT, 1938.

During the year 980 samples were examined and of these 66 or 6·7 per cent were found to be unsatisfactory. Of this number 637 were formal milk samples, of which 34 or 5·3 per cent were found to be adulterated or not up to the required standard.

The number of formal samples found to be adulterated or unsatisfactory is less than that found in 1944, when the figure was 7·7 per cent.

It is gratifying also to find that the number of formal milk samples which fell below the standards required under the Food and Drugs Act was less than in 1944, when the figure was 6·6 per cent. This is an important matter, as artificial infant feeding when cows' milk is the medium used depends on the utilisation of a milk supply which is of the legal standard.

The following table represents in detail the work carried out by the Public Analyst and it indicates the varying types of samples collected and examined. Most food and drug analyses are involved processes and, therefore, it will be appreciated that the amount of work done indicates a large amount of detailed chemical work:—

Article. (1)	Number examined.			No. adulterated or otherwise giving rise to irregularity.		
	Formal. (2)	Informal. (3)	Total. (4)	Formal. (5)	Informal. (6)	Total. (7)
Milk .. .. .	637	—	637	34	—	34
Almond Substitute .. .. .	1	—	1	—	—	—
Apricots .. .. .	1	—	1	—	—	—
Arrowroot .. .. .	1	—	1	—	—	—
Baked Beans .. .. .	4	—	4	—	—	—
Baking Powder .. .. .	9	—	9	4	—	4
Barley .. .. .	5	—	5	—	—	—
Barley Flake .. .. .	4	—	4	1	—	1
Beer .. .. .	3	—	3	—	—	—
Bi-Carbonate of Soda .. .. .	3	—	3	—	—	—
Blancmange Powder .. .. .	3	—	3	—	—	—
Bun Flour .. .. .	12	—	12	2	—	2
Butter .. .. .	35	—	35	2	—	2
Cake Flour .. .. .	14	—	14	2	—	2
Cake Mixture .. .. .	5	—	5	2	—	2
Cake—plain .. .. .	1	—	1	—	—	—
Castor Oil .. .. .	—	1	1	—	—	—
Cereals—mixed .. .. .	3	—	3	—	—	—
Cheese .. .. .	6	—	6	—	—	—
Chocolate Spread .. .. .	1	—	1	—	—	—
Chopped Ham .. .. .	1	—	1	—	—	—
Cocoa .. .. .	3	—	3	—	—	—
Coffee .. .. .	8	—	8	—	—	—
Condensed Milk .. .. .	1	—	1	—	—	—
Cooking Fat .. .. .	1	—	1	—	—	—
Cordial .. .. .	1	1	2	1	—	1
Currants .. .. .	1	—	1	—	—	—
Curry Powder .. .. .	4	—	4	—	—	—
Custard Powder .. .. .	3	—	3	—	—	—

Article. (1)	Number examined.			No. adulterated or otherwise giving rise to irregularity.		
	Formal. (2)	Informal. (3)	Total. (4)	Formal. (5)	Informal. (6)	Total. (7)
Dessert Mould .. .. .	5	—	5	—	—	—
Dried Peas .. .. .	1	—	1	—	—	—
Egg Substitute .. .. .	5	—	5	3	—	3
Epsom Salts .. .. .	1	—	1	—	—	—
Fish Dressing .. .. .	1	—	1	—	—	—
Fish Paste .. .. .	2	—	2	—	—	—
Gelatine .. .. .	2	—	2	—	—	—
Golden Rising Powder .. .. .	9	—	9	—	—	—
Gravy Browning .. .. .	3	—	3	1	—	1
Gravy Powder .. .. .	1	—	1	1	—	1
Ground Ginger .. .. .	1	—	1	—	—	—
Hops—dried .. .. .	1	—	1	—	—	—
Ice-Cream .. .. .	2	—	2	—	—	—
Infant Food.. .. .	1	—	1	—	—	—
Jam .. .. .	1	—	1	—	—	—
Koray Tablets .. .. .	1	1	2	—	—	—
Kako Flour .. .. .	1	—	1	1	—	1
Lard .. .. .	28	—	28	—	—	—
Lifo Seltzer .. .. .	1	—	1	—	—	—
Macaroni .. .. .	3	—	3	—	—	—
Mackerel—canned .. .. .	1	—	1	—	—	—
Malted Food .. .. .	6	—	6	—	—	—
Malted Soya Cream .. .. .	3	—	3	—	—	—
Margarine .. .. .	36	—	36	4	—	4
Meat Juice .. .. .	—	1	1	—	—	—
Meat Paste .. .. .	—	3	3	—	—	—
Mushroom Ketchup .. .. .	—	1	1	—	—	—
Oatmeal .. .. .	3	—	3	—	—	—
Pea Meal .. .. .	2	—	2	—	—	—
Pepper .. .. .	3	—	3	—	—	—
Powdered Beverages.. .. .	—	1	1	—	—	—
Pudding Mixture .. .. .	15	—	15	4	—	4
Puff Pastry .. .. .	1	—	1	—	—	—
Raisins .. .. .	3	—	3	—	—	—
Rice .. .. .	3	—	3	—	—	—
Rolled Oats .. .. .	3	—	3	—	—	—
Saccharin Tablets .. .. .	1	—	1	—	—	—
Salt .. .. .	1	—	1	—	—	—
Sauce .. .. .	2	—	2	1	—	1
Sausage .. .. .	2	—	2	—	—	—
Savoury Food .. .. .	1	—	1	—	—	—
Self-Raising Flour .. .. .	5	—	5	—	—	—
Semolina .. .. .	11	—	11	1	—	1
Soup .. .. .	2	—	2	—	—	—
Soygetti .. .. .	2	—	2	—	—	—
Soya Flour .. .. .	4	—	4	—	—	—
Spaghetti .. .. .	1	—	1	—	—	—
Sponge Mixture .. .. .	8	—	8	1	—	1
Stuffing .. .. .	3	—	3	—	—	—
Tea .. .. .	5	—	5	—	—	—

Article. (1)	Number examined.			No. adulterated or otherwise giving rise to irregularity.		
	Formal. (2)	Informal. (3)	Total. (4)	Formal. (5)	Informal. (6)	Total. (7)
Tincture of Iodine .. .. .	—	—	—	—	—	—
Tinned Salmon .. .. .	—	—	—	—	—	—
Tonic .. .. .	—	—	—	—	—	—
Vinegar .. .. .	9	—	9	—	—	—
Wine .. .. .	1	—	1	—	—	—
Yorkshire Pudding Mixture .. .. .	1	—	1	1	—	1
Zinc Ointment .. .. .	1	—	1	—	—	—
Total .. .. .	980	9	989	66	—	66

### HOSPITALS.

The total admissions to the County hospitals during the year were 12,495 which compares very favourably with 1944, when, although the hospitals were receiving large numbers of Service men, there were only 600 more. These figures show the tremendous volume of work accomplished at these hospitals. The medical and nursing staff were hard pressed to deal with the number of patients mentioned above, and the demand for in-patient treatment was such that our waiting lists grew considerably. As indicated previously, it seems that people realise now more than ever before that whilst medicine is an art it requires scientific backing. The modern developments in medicine demand more and more that illness requires a complicated investigation, and that hit-or-miss tactics do not give the best results. This very often requires an admission to hospital so that the necessary detailed investigations can be made. It is likely that future discoveries, whilst relieving hospitals in certain respects, will also demand increased facilities and accommodation, and before the inhabitants of the County are served an extension of hospital accommodation will be necessary. During the year the South Wales and Monmouthshire Hospital Survey Report was published, and this indicated that West Glamorgan Hospital, Mid-Glamorgan Hospital, and the new hospital at Church Village would probably become area hospitals if the scheme outlined ever comes to fruition.

The number of maternity admissions was a little less than in 1944, due in the main to a limitation imposed by a realisation of the dangers of working maternity units beyond their powers.

#### WEST GLAMORGAN COUNTY HOSPITAL.

The total of 5,672 admissions, including babies born in the hospital, shows a slight increase over 1944, and was attained by the continual use of the annexe at Crythan Park School, which is a definite help in relieving the pressure on the main hospital. The maternity admissions reached a total of 1,263, which is the highest figure ever reached at the hospital, and even so, many mothers had to be refused admission. The ground floor of the new maternity unit has not yet been completed, the construction being carried on under great difficulties because of the shortage of materials and labour. However, when this unit is ready it will be felt that all the difficulties have been worth while, and a modern unit will be provided for the mothers of that part of the County.

The out-patient department is used to the full ; over 19,000 attendances being made.

The pathological laboratory, reasonably well equipped, is under the constant supervision of a visiting pathologist. The full-time services of an experienced laboratory technician are available.

By an arrangement with the E.M.S. Service a plastic surgeon held sessions at the hospital during the year.

The new Pupil Midwives Training School, which consists of two parts (Part I—institutional midwifery, and Part II—domiciliary midwifery) added more work as the Part I work and teaching is carried out at this hospital. This training is well launched and should prove most efficient.

#### MID-GLAMORGAN COUNTY HOSPITAL.

Miss M. T. John, the Matron of this hospital, retired during the year; Miss M. A. Dyer succeeding her in the appointment.

The admissions to the hospital totalled 3,986; 773 being to the maternity department. The latter figure is rather less than in 1944, but this was brought about by administrative action to prevent the unit undergoing a strain which could only impair its efficient working.

Again this year, having no real out-patient department, the out-patient treatment has been carried out under adverse conditions. In spite of this over 14,000 attendances were made. An out-patient department is urgently required.

There was occasional difficulty in obtaining all the consultant assistance required, but towards the end of the year this position was eased.

#### LLWYNYPIA HOSPITAL.

There were 2,837 admissions to this hospital, which for the number of beds available, represents a good turnover of beds. The maternity admissions amounted to 510. Owing to the small number of maternity beds a deal of skill is required in selecting for admission those mothers in the greatest need of confinement in hospital, and this places a great responsibility on the medical staff. This position will be relieved soon as during the year "Glyncornel," a substantial house near the hospital, became available to the Council, and the work of adapting it to a maternity unit of approximately 30 beds was commenced. The method of working will be to admit as far as possible normal or near-normal cases into "Glyncornel," the complicated cases going direct into Llwynypia. There is no doubt that this new unit is going to be of great assistance in the maternity work of the area.

Over 9,000 attendances were made at the out-patient department by over 5,000 patients. The use of this department in an efficient manner largely contributes to the high number of patients treated as in-patients, as it releases beds earlier than would otherwise be possible.

#### CHURCH VILLAGE (EAST GLAMORGAN) HOSPITAL.

At the end of the year the Royal Air Force was still in possession of this hospital, but it was evident that within months the hospital would pass back into the control of the Council.

## GENERAL.

The recruitment of women to the training schools of the hospitals has been inadequate, all the hospitals having less student nurses than allowed for in their establishments. During the war there was always a waiting list, but now recruits come forward in occasional ones and twos only. There has also been a shortage of senior nursing staff, particularly staff nurses, because as soon as nurses qualified many of them were transferred to other hospitals by the Ministry of Labour and National Service. Thus we have been losing nurses at both ends—too few entrants and depletion of our normal source of staff nurses.

The General Nursing Council has determined that all training hospitals must have a preliminary training school by June, 1947. This matter has been considered, and a plan has been approved in principle for one central preliminary training school to serve the three County hospitals.

There is much to be done to improve the hospital facilities of the inhabitants, but so much of this is dependant on new buildings as every inch of space in the hospitals is fully used. It is likely that it will be some time before the extensive hospital building programmes approved in principle by the appropriate committees will commence.

The need for extended pathological services to the hospitals has been considered by the appropriate committees, and it was agreed that there should be a pathological laboratory at each hospital, with one or more technicians in each, and that they should be controlled by a full-time pathologist to the County hospital service.

The following tables show (a) the accommodation and record of cases treated at the County hospitals and institutions during the year 1945; (b) a record of admissions to maternity departments since 1930; and (c) a summary of the returns submitted by the Medical Superintendents of the County hospitals in respect of the year 1945:—

## (a) ACCOMMODATION AND RECORD OF CASES TREATED DURING THE YEAR 1945.

Institution.	No. of Beds (Normal).	No. of Patients admitted (including infants born in hospital).	No. discharged (including infants born in hospital).	No. of Patients in Institution on 31st December, 1945.	Total No. of Deaths.	No. of Surgical Operations performed.	MATERNITY CASES.						No. of Infant Deaths (under 1 year).
							Beds available.	Cases admitted.	No. of Live Births.	No. of Still Births.	No. of Maternal Deaths.		
Mid-Glamorgan County Hospital	278	3,986	3,757	294	205	1,019	42	773	715	31	5	11	
Llwynypia Hospital ..	172	2,837	2,715	132	156	1,510	22	510	486	48	9	48	
West Glamorgan County Hospital	242	5,672	5,423	274	297	2,970	50	1,263	964	39	3	48	
Central Homes, Pontypridd	191	1,816	1,445	284	369	—	10	304	315	12	—	27	
Penmaen Institution ..	23	146	136	22	10	—	—	—	—	—	—	—	
Pontardawe Institution	44	94	78	51	21	1	1	11	9	—	—	—	
Totals ..	950	14,551	13,554	1,057	1,058	5,500	125	2,861	2,489	130	17	134	

## (b) RECORD OF ADMISSIONS TO MATERNITY DEPARTMENTS OF COUNTY HOSPITALS AND INSTITUTIONS.

Institution.	Number of Cases admitted to Maternity Wards.													Total No. of Cases admitted.			
	1930*	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942		1943	1944	1945
Mid-Glamorgan County	26	54	79	136	185	277	304	287	279	339	364	565	703	818	833	773	6,022
Llwynypia ..	71	107	177	228	282	317	265	312	418	509	516	521	549	494	587	510	5,863
West Glamorgan County	39	61	40	66	119	187	352	432	536	583	731	862	1,069	1,056	1,219	1,263	8,615
Pontardawe ..	3	6	3	5	3	6	6	2	5	2	4	4	5	10	8	9	81
Pontypridd ..	26	33	36	39	65	38	22	24	33	54	75	153	170	271	321	304	1,664
Totals ..	165	261	335	474	654	825	949	1,057	1,271	1,487	1,690	2,105	2,496	2,649	2,968	2,859	22,245

\* From 1st April, 1930.



## (c) SUMMARY OF MEDICAL SUPERINTENDENTS' RETURNS, 1945.

	West Glamorgan County Hospital.	Llwynypia Hospital.	Mid-Glamorgan County Hospital.
<b>(1) Accommodation and beds occupied on 31st December, 1945 :—</b>			
(i) Beds (excluding E.M.S.) .. .. .	242	172	278
(ii) E.M.S. beds .. .. .	160	40	100
(iii) Beds occupied (excluding E.M.S.) .. .. .	240	129	262
(iv) E.M.S. beds occupied .. .. .	34	3	32
(v) Service cases in hospital on 31st December, 1945 ..	6	3	16
<b>(2) Statistics, 1945.</b>			
(i) Admissions (including infants born in hospital) .. ..	5,672	2,837	3,986
(ii) No. of Service cases included in 2 (i) .. .. .	319	37	533
(iii) No. of deaths .. .. .	297	156	205
(iv) No. of discharges (including infants born in hospital) ..	5,423	2,715	3,757
(v) Duration of stay in hospital of patients shown in 2 (iii) and (iv)—			
(a) Under four weeks .. .. .	4,724	2,344	3,670
(b) Four weeks and under thirteen weeks .. .. .	866	438	250
(c) Thirteen weeks or more .. .. .	130	94	42
(vi) No. of chronic sick cases in hospital on 31st December, 1945	39	—	90
<b>(3) Staff.</b>			
(i) No. of Resident Medical Staff .. .. .	5	4	4
(ii) No. of Visiting Staff—			
(a) Visiting at regular intervals .. .. .	9	3	2
(b) When services required .. .. .	2	1	9
(iii) Number of—			
(a) Trained nurses .. .. .	49	34	31
(b) Probationer nurses .. .. .	68	47	36
(c) Assistant nurses .. .. .	1	—	13
(d) Male nurses .. .. .	2	3	—
(e) Male attendants .. .. .	—	—	—
<b>(4) Main Categories of Work.</b>			
General Medicine .. .. .	All Categories.	All Categories except Pathology.	All Categories except Pathology.
General Surgery .. .. .			
Orthopaedic .. .. .			
Gynaecological .. .. .			
Dental .. .. .			
X-rays .. .. .			
Massage .. .. .			
Ear, Nose, and Throat .. .. .			
Maternity .. .. .			
Diseases of Skin .. .. .			
Ophthalmic .. .. .			
Children .. .. .			
Urology .. .. .			
Pathology .. .. .			

	West Glamorgan County Hospital.	Llwynypia Hospital.	Mid-Glamorgan County Hospital.
<b>(5) No. of Surgical Operations.</b>			
By—			
(i) Resident Staff :			
Major .. .. .	757	645	363
Minor .. .. .	1,781	723	395
(ii) Consultant Staff :			
Major .. .. .	291	142	261
Minor .. .. .	141	—	—
No. of abdominal sections included in— (i) .. .. .	351	435	187
(ii) .. .. .	55	—	101
<b>(6) Malignant Disease.</b>			
No. of cases treated .. .. .	129	49	48
<b>(7) Maternity Department.</b>			
(i) No. of maternity beds (included in (1) (i)) .. .. .	50	22	42
(ii) Cases admitted during 1945—			
(a) Normal .. .. .	937	327	576
(b) Complicated .. .. .	326	183	197
(iii) Cases delivered by—			
(a) Doctors .. .. .	61	70	50
(b) Midwives .. .. .	929	346	655
(iv) Live births .. .. .	964	486	715
(v) Stillbirths .. .. .	39	48	31
(vi) Maternal deaths .. .. .	3	9	5
(vii) Cases of Puerperal pyrexia .. .. .	—	—	—
(viii) Infant deaths (under one year) .. .. .	48	48	11
<i>Ante-natal Clinic.</i>			
(i) No. of expectant mothers seen .. .. .	915	341	840
(ii) Attendances .. .. .	8,356	929	1,140
<b>(8) Out-patient Department.</b>			
(i) No. of persons seen .. .. .	5,346	5,273	4,802
(ii) No. of attendances .. .. .	19,869	9,787	14,013

## HOUSING.

District.	By Local Authority.				By private enterprise, Building Societies, etc.		
	Number of Permanent and Temporary Houses.				Number of houses completed and occupied during the year 1945.	Number partly completed during the year 1945.	Number for which plans were passed but not commenced during the year 1945.
	Completed and occupied during the year 1945.	Partly completed during the year 1945.	Sanctioned but not commenced	Total completed and occupied since 1918.			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	
Aberdare .. .. .	—	—	188	*538	—	—	1
Barry Borough .. .. .	—	100	54	1,181	—	21	13
Bridgend .. .. .	—	50	50	141	1	*7	2
Caerphilly .. .. .	—	44	116	696	—	—	2
Cowbridge Borough .. .. .	—	—	—	12	—	—	*1
Gelligaer .. .. .	—	104	46	468	—	—	—
Glyncorrwg .. .. .	—	—	—	282	—	—	—
Llwchwr .. .. .	—	—	68	763	—	—	1
Maesteg .. .. .	—	—	100	180	—	1	—
Mountain Ash .. .. .	—	—	18	241	—	—	—
Neath Borough .. .. .	—	—	50	823	—	—	—
Ogmore and Garw .. .. .	—	20	30	210	—	—	—
Penarth .. .. .	—	—	—	129	—	—	12
Pontypridd .. .. .	—	—	179	606	—	—	—
Porthcawl .. .. .	—	—	50	—	—	4	12
Port Talbot Borough .. .. .	—	14	—	1,199	—	—	103
Rhondda .. .. .	—	110	156	285	—	15	—
Cardiff Rural .. .. .	—	—	70	333	6	24	74
Cowbridge Rural .. .. .	—	—	—	587	2	3	32
Gower .. .. .	—	—	—	70	2	—	16
Llantrisant & Llantwit Fardre .. .. .	—	—	176	854	—	12	66
Neath Rural .. .. .	—	—	120	800	—	—	5
Penybont .. .. .	—	16	10	786	—	—	—
Pontardawe .. .. .	—	—	—	992	—	—	4
TOTALS .. .. .	—	458	1,481	12,176	11	87	344

\* Including Flats.

One of the major domestic problems facing this County, as elsewhere, is the urgent need of good housing accommodation for the people. Following the war years, during which house building almost reached a standstill, the present position is difficult. Not only is it a matter of a limited number of new houses built, but also, even repair work on old houses has been at a minimum and many are now becoming dilapidated. The picture of serious housing shortage is common to all areas of the County and calls for resolute action by all connected with the problem. A house is much more than a building; it is the environment in which human beings spend a substantial portion of their lives; it is the nest of the family, and a good house is the focal point of family activity; it can assist to build up a moral character or an immoral character, and it is an intimate part of most persons lives. No country can afford to neglect good housing from its various angles.

Hence, in spite of great obstacles and difficulties the figures given in the above table gives one a sense of encouragement; there is a slight movement and activity which it is hoped will grow into a torrent.

In 1944 there were 26 houses completed and eight houses partly completed by local authorities—these houses being houses for rural workers. In 1945, whilst no houses were completed there were 458 partly completed and 1,481 sanctioned for building. Private enterprise partly completed 15 houses in 1944; in 1945 87 houses were being built but not completed.

An important milestone in housing was passed during this year. The Minister of Health published Circular 64/44, which was based on the Report of Rural Housing, prepared by the Rural Housing Sub-Committee of the Central Housing Advisory Committee. As a result of this circular a conference of representatives of all the rural district councils and the county councils was called, when it was resolved "that a Joint County Committee for the County of Glamorgan, consisting of representatives of the County Council and of the Rural District Councils in the County of Glamorgan be established on the lines recommended in the Third Report of the Rural Housing Sub-Committee of the Central Housing Advisory Committee, commonly known as the Hobhouse Report." It was further decided that the constitution of the Joint Committee should be seven County Council representatives and three representatives from each Rural District Council (21).

The immediate function of this joint committee was to draw up a considered standard of housing and correlate and encourage a survey of houses, classified into categories, and it will meet from time to time to discuss matters of common interest relating to housing.

This joint committee can be an important body, bringing the County Council into far more intimate touch with housing than anything else up to the present, including the County Council position in housing legislation. It can give life to County Council interest in this very important matter.

#### TREATMENT OF VENEREAL DISEASE.

The arrangements for the treatment of persons suffering from venereal diseases have been continued as hitherto, e.g. clinics controlled by the Council at Pontypridd, Port Talbot and Barry are held regularly ; in addition, arrangements are made with the Cardiff Royal Infirmary and the Swansea General Hospital for treatment at these hospitals, to serve the extreme ends of the Administrative County.

Once again, as judged by the attendances at the clinics, there seems to be no alarming increase in the number of new cases.

*New Cases attending County Clinics  
during recent years.*

	<i>Syphilis.</i>	<i>Gonorrhoea.</i>
1943 ..	206	363
1944 ..	209	412
1945 ..	186	469

After the last war (1914-18) there was a great increase in clinic attendance, which so far has not occurred this time, but it may be a little early to come to any final decision as to the immediate future.

The number of non venereal cases attending is still increasing. This is probably due to the amount of propaganda locally and nationally, and is something to be pleased about. It is all to the good if members of the public are not only aware of the availability of treatment if they should become infected, but are also prepared to visit the clinics to satisfy themselves that they are not infected should there be any doubt in their minds. The number of persons who attended and were found not to be suffering from venereal diseases is as follows :—

1942 ..	270
1943 ..	567
1944 ..	617
1945 ..	715

It will be of interest if some extracts of reports made to me by your Venereal Diseases Officers—Dr. B. A. Thomas and Dr. W. K. Bernfeld—be given in this report.

*Dr. W. K. Bernfeld (Pontypridd Clinic).*

"A comparison with the figures obtained in 1944 shows a slight increase of early syphilis cases and a considerable increase in gonorrhoea.

Over 1,000 Wassermann reactions, 500 Gonococcal complementation tests, and well over 700 microscopical examinations for Gonococci were carried out at the Cardiff and County Laboratory.

Co-operation with private doctors, clinics, etc., was sought and given, and 374 letters and reports were written.

One hundred and thirty-nine patients were seen at Central Homes, Pontypridd: 78 were non-venereal and 61 treated as in-patients (34 syphilis and 27 gonorrhoea). Approximately 53,000,000 units of penicillin were used.

Gonorrhoea treated with penicillin gave the following results: acute cases—81 examined after treatment and found negative; 12 cases not seen after treatment; six had repeated doses of penicillin; four cases were positive after treatment."

*Dr. B. A. Thomas (Barry and Port Talbot Clinics).*

"In both male and female clinics, the year of 1945 saw an increase in the completely new cases, which includes mostly patients living in Glamorgan. Proportionately, the female increase was greater. A marked reduction has again occurred in transferred cases corresponding with the slackening of shipping at Barry and Port Talbot. The relative proportions of syphilis and gonorrhoea remain about the same.

Penicillin became available about the middle of the year, and has been used since in all cases of gonorrhoea, and in early syphilis.

As regards results of treatment of gonorrhoea, success has been uniform, except in two complicated cases which required subsequent double dosage before cure.

As regards the treatment of syphilis with penicillin, cases at Barry were referred to the Central Homes, Pontypridd, and those at Port Talbot to the West Glamorgan Hospital, Neath. In-patient treatment was given for eight days, and the results as far as they can be assessed at present, appear to be satisfactory. One course of arsenic and bismuth is given at the clinics in conjunction with penicillin.

The level of defaulters remains about the same.

*Regulation 33B.*—Greater difficulty is being experienced in eliciting from patients the names of their contacts. Accordingly I have been able to notify few names on Form 1. Nevertheless the visiting of Form 1 patients by our nurses has been successful in bringing to the clinic several sources of venereal disease.

The total visits made by patients during the year reached a new low figure. This is explained by the few attendances required by patients receiving penicillin therapy. It should be noted, however, that a patient receiving penicillin for gonorrhoea attends five times in one day, the Ministry requiring that they shall only be recorded as one attendance."

From these extracts it will be noted that penicillin is being fully used in the clinics. A new single injection technique is being introduced to reduce from five visits a day in gonorrhoeal cases to one visit only. Arrangements were made for syphilis cases to be admitted free of cost to Central Homes and West Glamorgan Hospital for penicillin treatment, the Venereal Diseases Officers carrying out the treatment or supervising it. In addition to penicillin these patients also receive arsenic and bismuth treatment at the clinics.

#### REGULATION 33B.

This regulation prescribes that if a person is nominated by two patients as the source of their infection, then that person can be followed up and be compelled to undergo examination by a specialist venereal diseases officer, and receive treatment if necessary. However, we do not wait for these two notifications but act on the first, the visit being an advisory one. This latter action usually results in the case voluntarily seeking treatment. In one case during the year, following a double notification, the person would not undertake treatment and resort to the courts became inevitable. This action was successfully undertaken by the County legal department.

In the County the Committee felt that 33B work and defaulter visits would best be performed by our nurses, who have no connection with the V.D. Clinics, and hence could not be associated by those noting a visit to houses or factories, as having anything to do with such diseases. It is hoped to extend the amount of visiting of defaulters from treatment not under the 33B machinery.

The results of the operation of this regulation in 1944 and 1945 were as follows :—

	1944.		1945.	
	Male.	Female.	Male.	Female.
(1) Total number in respect of whom Form 1 was received ..	4	82	4	53
(2) Number in (1) in which attempts were made outside the scope of the Regulation to persuade the contact to be examined before the latter had been named on a second Form 1 .. ..	1	41	1	40
(3) Number of those in (1) in respect of whom a second Form 1 were received .. .. .	—	7	—	6
(4) Number in (3) who were—				
(a) Found .. .. .	—	7	—	5
(b) Examined after persuasion .. .. .	—	4	—	2
(c) Served with Form 2 .. .. .	—	3	—	2
(d) Examined after service with Form 2 .. .. .	—	3	—	2
(e) Prosecuted .. .. .	—	—	—	1

The comparative figures for new cases coming under clinic treatment are shown below :—

Year	Syphilis	Soft Chancre	Gonorrhoea	Cases other than Venereal	Total
1927	408	10	819	190	1,427
1928	425	11	893	173	1,502
1929	376	11	990	216	1,593
1930	410	4	1,038	262	1,714
1931	413	6	937	205	1,561
1932	361	7	736	197	1,301
1933	383	1	924	197	1,505
1934	384	5	889	210	1,488
1935	282	2	594	201	1,079
1936	202	1	668	174	1,045
1937	167	5	589	291	1,052
1938	174	7	535	276	992
1939	127	3	502	228	860
1940	106	6	397	193	702
1941	141	5	407	231	784
1942	189	11	421	270	891
1943	206	6	363	567	1,142
1944	209	9	412	617	1,247
1945	186	8	469	715	1,378

*Age Incidence of New Cases attending the Clinics.*

The Committee have asked that the age incidence of new cases attending the clinics should be given in my quarterly reports. The figures for the year are given below :—

AGE INCIDENCE OF NEW CASES EXPRESSED IN PERCENTAGES.

(MALE AND FEMALE SEPARATELY.)

Age (years).	Males % (approx.)	Females % (approx.)
0—10	0·7	1·8
10—15	—	—
15—20	3·9	21·3
20—25	19·8	33·3
25—30	23·0	14·4
30—35	23·0	13·8
35—40	6·8	5·6
40—45	9·6	2·5
45—50	3·6	2·5
50+	9·3	3·1

In the following tables information relating to the examination and treatment of patients undertaken at the Clinics at Pontypridd, Port Talbot, and Barry is given.

## PATIENTS TREATED AT CLINICS, 1945.

	PONTYPRIDD.												
	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	
New cases .. .. .	32	35	67	—	—	—	110	67	177	257	166	423	667
Patients discharged after completion of treatment	—	—	—	—	—	—	42	21	63	255	161	416	479
Patients who ceased to attend Clinic before completion of treatment .. .. .	19	13	32	—	—	—	30	5	35	1	—	1	68
Total number of attendances of patients at the Clinic	1,521	1,410	2,931	—	—	—	582	315	897	597	366	963	4,791

	PORT TALBOT.												
	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	
New cases .. .. .	16	22	38	3	2	5	103	30	133	14	36	50	226
Patients discharged after completion of treatment	9	4	13	4	2	6	51	24	75	14	36	50	144
Patients who ceased to attend Clinic before completion of treatment .. .. .	7	5	12	—	—	—	42	8	50	—	—	—	62
Total number of attendances of patients at the Clinic ..	613	925	1,538	12	5	17	769	283	1,052	31	51	82	2,689

	BARRY.												
	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	
New cases .. .. .	12	15	27	2	—	2	52	13	65	16	21	37	131
Patients discharged after completion of treatment	4	4	8	1	—	1	22	13	35	16	21	37	81
Patients who ceased to attend Clinic before completion of treatment .. .. .	5	6	11	—	—	—	12	3	15	—	—	—	26
Total number of attendances of patients at the Clinic ..	485	378	863	11	—	11	319	193	512	34	39	73	1,459

The following tables give information relating to the examination and treatment of patients residing in the Administrative County of Glamorgan undertaken at the Cardiff Royal Infirmary and the Swansea General and Eye Hospital.



## CARDIFF ROYAL INFIRMARY.

	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases .. .. .	15	15	30	1	—	1	34	20	54	104	35	139	224
Patients discharged after completion of treatment	1	1	2	—	—	—	8	14	22	85	43	128	152
Patients who ceased to attend Clinic before completion of treatment .. .. .	12	13	25	—	—	—	19	12	31	—	—	—	56
Total number of attendances of patients at the Clinic ..	473	702	1,175	4	—	4	307	170	477	240	205	445	2,101
Aggregate number of "In-patient days" .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—

## SWANSEA GENERAL AND EYE HOSPITAL.

	Syphilis.			Soft Chancre.			Gonorrhoea.			Cases other than Venereal or Undiagnosed Cases.			Total.
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	
New cases .. .. .	10	14	24	—	—	—	33	7	40	48	18	66	130
Patients discharged after completion of treatment	10	4	14	—	—	—	19	5	24	51	23	74	112
Patients who ceased to attend Clinic before completion of treatment .. .. .	12	18	30	—	—	—	11	2	13	—	—	—	43
Total number of attendances of patients at the Clinic ..	472	520	992	—	—	—	736	636	1,372	128	78	206	2,570
Aggregate number of "In-patient days" .. .. .	88	28	116	—	—	—	4	72	76	—	—	—	192

## MATERNITY AND CHILD WELFARE.

In the Administrative County the District Councils are the Maternity and Child Welfare Authorities. During 1945 these Authorities operated 130 Infant Welfare Centres, 76 Ante natal Clinics, and 30 Post natal Centres. These figures show an increase on 1944 of 14 Infant Welfare Centres, seven Ante natal Clinics, and three Post natal Centres. The number of nurseries dropped from 30 to 13 owing to the fact that most of these nurseries were provided for the children of women engaged in war industries, and were no longer essential.

Many of the Maternity and Child Welfare Authorities for certain of their treatment work rely on the County Council, e.g. orthopaedics, refraction, and dentistry. This relationship is obviously necessary as many of the authorities are not large and could not carry the burden of extensive treatment facilities.

The special food supplements—orange juice, cod liver oil, and vitamin tablets—supplied through the Ministry of Food are taken up by mothers, but not to the extent that they should be. The beneficial effect of these protective foods during the war has been very marked, and the scheme will probably be continued with great advantage into the post war years.

The care of illegitimate children and premature infants is part of the function of maternity and child welfare authorities. The institutional care of premature infants should, under present circumstances, be part of our hospital arrangements, but the lack of facilities at the hospitals makes it impossible to do more than is being done. There should be units for the care of premature infants with special facilities and first class staffing, which it has not been possible to arrange.

The future of maternity and child welfare work is not clear, but it now appears likely that the County Council will eventually become responsible for this service.

#### COUNTY MIDWIFERY SERVICE.

The County Council is the local supervising authority under the Midwives' Acts, 1902-36, for the Administrative County, excluding the Rhondda and Aberdare Urban District areas.

The staff engaged in the year 1945 was a superintendent supervisor, three assistant supervisors, and 120 full time salaried domiciliary midwives. Including the County midwives, the total number of midwives in the Administrative County who notified their intention to practise in this period was 189.

The County midwives, acting as midwives or maternity nurses, attended 5,304 mothers during the year. Thus, it will be noted, out of a total of 12,643 births in the County, the Council's services were involved, through County midwives and County hospitals and institutions, in 8,163, i.e. in 65 per cent. These figures are approximate in that multiple pregnancies are not taken into account.

It is not easy to state accurately the number of confinements occurring in institutions, etc., as opposed to those occurring in the patients' homes. As near as can be ascertained, the position in 1945 can be said to be as follows:—

Domiciliary births	.. .. .	6,479
County hospitals and institutions	.. .. .	2,859
Other hospitals in Administrative County	.. .. .	324
Nursing homes	.. .. .	628
Nursing homes and hospitals outside Administrative County	.. .. .	2,353
Per cent of births in institutions, etc.	.. .. .	49 per cent.
Per cent of domiciliary births	.. .. .	51 per cent.

The operation of the Midwives' Act, 1936, laid a duty on the Committee to make adequate midwifery provision for the mothers in their area. This was done by establishing a full time salaried service, and a large number of County midwives are therefore midwives who were practising as independent midwives in 1936. Thus a number of midwives in the Council service are now well over 50 years of age. This fact is important when the nature of the work is considered. It is a responsible profession and calls must be answered at any time of the day or night, whatever the weather and wherever the house of the mother is situated. The outcome of this is an inevitable one, namely, there is a fairly high rate of illness amongst the staff. When this fact is taken into account, together with the off duty times and holiday periods laid down by the Midwives' Salaries Committee (which are necessary to the well being of the midwifery staff) it is plainly seen that an increased staff is required, and cannot as previously be based entirely on the numbers of confinements per nurse. The years of service devoted by the large proportion of those engaged, means that they are well experienced, and the year's work has been carried out effectively.

The supervisory staff made 1,288 inspectoral visits to the midwives. These visits are regarded equally as helpful to the midwives concerned as purely inspectoral.

Transport in emergencies was easier than in 1944 and more use had to be made of hiring for non-emergency work than ever before, to permit of the implementation of the off duty conditions which necessitates the midwives covering more ground when acting as reliefs to each other, which is inevitable. Midwifery bags and maternity outfits were still in short supply, but somehow or other we have struggled on, and look forward to easier conditions.

One of the greatest problems arising in the administration of the County midwifery service was the extreme difficulty in finding houses or even rooms for new midwives. On retirement from the service the retiring midwife who owns or rents her house continues to live in it and the new midwife cannot find a house and often even fails to obtain reasonable rooms. Existence in rooms for single midwives is difficult; sterilising of instruments, telephone calls at night and callers during the day soon make her unpopular in the house. Her ante natal work becomes more difficult to accomplish, and she soon desires to give up her post. Help from housing authorities rarely eventuates and it seems that the only way of really tackling this problem is the provision of houses which will always be available to the County midwives practising in the area. A report was made to the Committee, and the matter was under consideration at the end of the year.

The Committee gave further consideration to the scale of charges to be made to patients for the services of County midwives, and decided that the previous practice of not counting the new born infant in the divisor, to find the income per head of family, should cease, and now the new arrival is taken into account. It was also decided that where the fee for the midwife was not to be recovered in full, no recovery should be made by the Council in respect of the doctors' fee under the Midwives' Act, 1918.

It is interesting that in 1944 no charge was made for the services of midwives in 19 per cent of the cases, and in 1945 in 26 per cent.

#### TRAINING OF MIDWIVES.

This year saw the opening of a Training School for Midwives. The training is divided into two parts, Part I being training in a maternity unit or hospital, and Part II comprising the training of pupils in the conduct and practise of domiciliary midwifery. In the County scheme Part I training was arranged in the West Glamorgan County Hospital, which provides ample facilities for such training. Part II training was provided by an arrangement with the Neath Nursing Association whereby the pupil midwives live in the Association's hostel and work with their midwives, and with certain County midwives surrounding the Neath area. The Part II midwifery tutor is jointly appointed, but her salary is paid by the County Council. The arrangements made are working satisfactorily. The Neath Nursing Association gave every assistance to the project as did the Neath Borough Council and the Neath Rural District Council in permitting the pupil midwives to work in their maternity and child welfare clinics.

As in previous years the Committee permitted a short post graduate course for the County midwives. This took the form of three lectures. All midwives in the County were invited and the course was held in the County Hall. The lectures given were :—

- (a) Breast feeding. (Dr. Arthur Watkins.)
- (b) The use of drugs in midwifery. (Dr. Melbourne Thomas.)
- (c) Prevention of disease. (County Medical Officer.)

Again an essay competition was organised and three prizes awarded for the best entries.

The Committee agreed during the year to the principle of providing the midwives with sphygmomanometers (blood pressure reading apparatus), and a beginning will be made by purchasing sufficient to carry out training in the use of the apparatus in district areas, and eventually the number will be increased until each midwife is supplied with one. The purpose is to help midwives to pick out, at the earliest possible moment, patients with impending toxæmic conditions who should be examined by their doctors, and brought under early treatment.

## SENDING FOR MEDICAL AID.

Although the number of occasions on which medical aid was sought by the midwives was less than in 1944, actually the percentage of such calls was higher than in that year. It is interesting to consider under what conditions help was required and compare this with the year 1944. Comparison shows that :—

- (a) Albuminuria (toxaemia) : 166 calls in 1944 ; 67 calls in 1945.  
 (b) Ante partum haemorrhage increased 74 to 106.  
 (c) Placenta praevia decreased : 15 in 1944 and 5 in 1945, but some of these cases may have been included in (b) and partly account for the increase.  
 (d) Abortions rather less : 1944, 207, and 1945, 178.

The number of occasions on which medical aid was sought in 1945 (Midwives' Act, 1918) was 2,738. The reasons for such help were as follows :—

(1) <i>Relating to Mother.</i>		(d) Placental abnormalities ..	84
(i) Ante-natal.		(e) Post partum haemorrhage	64
(a) Albuminuria .. ..	67	(f) Puerperal pyrexia .. ..	118
(b) Eclampsia .. .. .	1	(g) Breast conditions .. ..	21
(c) Ante partum haemorrhage	106	(h) Miscellaneous .. .. .	93
(d) Abortions .. .. .	178	(2) <i>Relating to Infant.</i>	
(e) Miscellaneous .. .. .	170	(a) Neo natal distress .. ..	—
(ii) Natal.		(b) Asphyxia .. .. .	20
(a) Placenta praevia .. ..	5	(c) Malformations .. .. .	35
(b) Prolonged and 2nd stage labour	604	(d) Eye conditions .. .. .	151
(c) Abnormal presentation ..	191	(e) Prematurity .. .. .	65
(d) Miscellaneous .. .. .	103	(f) Skin conditions .. .. .	33
(iii) Post Natal.		(g) Miscellaneous .. .. .	96
(a) Post-natal convulsions ..	—		
(b) Albuminuria .. .. .	1	Total .. .. .	2,738
(c) Ruptured perineum .. ..	532		

The following work has been undertaken by your Officers on your behalf as a Local Supervising Authority during the year :—

Number of inspections of County midwives .. .. .	1,171
Number of inspections of independent midwives .. .. .	117
Number of inspections of midwives of nursing associations .. .. .	51
Total number of inspections .. .. .	1,339

The following table shows the operation of the County Midwifery Service for the year ended 31st December, 1945 :—

Cases attended.			Fees.		
As midwife.	As maternity Nurse.	Total.	Full fee paid to Midwife.	On investigation of family circumstances.	
				Whole or part fee charged.	No charge made.
4,755	*549	5,304	3,423 or 64%	516 or 10%	1,365 or 26%

\* Includes 247 abortion cases.

## SUPERVISION OF NURSING HOMES.

Thirty nine inspections were made during the year of the 10 nursing homes registered under Section 187 of the Public Health Act, 1936.

Two new nursing homes were registered during the year.

## NURSES' ACTS, 1943 AND 1945.

These Acts make provision for :—

- (a) The enrolment of assistant nurses for the sick ;
- (b) The restriction of the use of the name or title of nurse ; and
- (c) The regulation of agencies for the supply of nurses for the sick.

The County Council under the Acts becomes the authority for licensing nursing agencies in the Administrative County, and the Public Health and Housing Committee laid down conditions under which licences would be granted to applicants. Some of the conditions were of a temporary nature requiring revision at an early date.

One application only was received. This, however, was too late for consideration before the first meeting in the new year.

## BLIND PERSONS ACTS, 1920 AND 1938.

At the 31st March there were registered in the Administrative County 1,393 blind persons. Of this total nearly 80 per cent are 50 years of age and over. During the year ended 31st March, there were registered 134 new cases, and of these more than 90 per cent fell in the same age group. There were no children below the age of five on the register, and between the ages of five and 16 years the register shows that there are 18 cases, the bulk of whom are receiving education at the Authority's residential school for the blind at Bridgend.

The following table shows details of ages of registered blind persons, the ages at which they became blind, together with similar details for cases registered during the year :—

## REGISTRATION OF BLIND PERSONS—AGE PERIODS.

0-1.	1-5.	5-16.	16-21.	21-40.	40-50.	50-65.	65-70.	70+	Unknown.	Total.
—	—	18	17	139	142	331	157	588	1	1,393

## AGES AT WHICH BLINDNESS OCCURRED—AGE PERIODS.

0-1.	1-5.	5-10.	10-20.	20-30.	30-40.	40-50.	50-60.	60-70.	70+	Unknown.	Total.
143	34	31	76	76	111	162	203	253	249	55	1,393

## BLIND PERSONS REGISTERED AS NEW CASES—AGE PERIODS.

0-1.	1-5.	5-16.	16-21.	21-40.	40-50.	50-65.	65-70.	70+	Unknown.	Total.
—	—	1	2	3	4	26	19	79	—	134

## NEW CASES (AGES AT WHICH BLINDNESS OCCURRED)—AGE PERIODS.

0-1.	1-5.	5-10.	10-20.	20-30.	30-40.	40-50.	50-60.	60-70.	70+	Unknown.	Total.
—	—	—	3	2	3	8	13	30	71	4	134

An analysis of the figures reveals that the bulk of new cases registered are those whose sight has diminished by reason of age, to such an extent as to make them blind within the meaning of the Blind Persons Acts. It is most satisfactory to note that blindness from birth is practically non-existent at the present time, and the value of the public health preventive measures employed in this connection is apparent.

In view of the elderly nature of the cases on the register, it will be seen that much of the work under these Acts deals with the provision of domiciliary assistance to the class known as "unemployable," and an average number of 930 blind persons and their dependents are assisted annually, the expenditure on such allowances amounting to approximately £53,500 during the year.

The unemployable group receive periodic social and instructional visits from the Council's home visiting staff (composed of one whole-time blind visitor and five school nurses, who devote four-elevenths of their time to the work) which is at the present time below its normal numerical strength. It is proposed shortly to increase the visiting staff by preparing four more nurses for the Home Teachers' Examination of the College of Teachers of the Blind.

## PREVENTION OF BLINDNESS AND PROVISION OF TREATMENT.

In spite of the difficulties due to shortage of medical and other staff arising out of the war, an effective treatment service has been maintained in relation to the prevention of blindness and the restoration of sight by operative treatment at the hospitals at Neath, Llwynypia, and Bridgend.

## TRAINING AND EMPLOYMENT OF BLIND PERSONS.

## DISABLED PERSONS (EMPLOYMENT) ACT, 1944.

Before the advent of the Disabled Persons (Employment) Act, 1944, the duty of training all suitable blind persons devolved upon the local education authority, while the provision of employment in workshops or otherwise was a duty of the County Council imposed under the Authority's scheme for the welfare of blind persons.

In Glamorgan no workshops have been provided, but wherever possible full use has been made of the facilities already available in the voluntary institutions at Pontypridd and Llwynypia in the Administrative County and in the contiguous county boroughs of Cardiff, Swansea, and Merthyr. These services have been made available by the annual payment of considerable sums to help to meet the deficits on working which inevitably occur in workshops engaging blind persons. The payment of certain fixed sums has been laid down by the Minister of Health in his schemes made under the Local Government Act, 1929, and in addition, the Council has borne out of the rates from time to time considerable additional payments to keep the workshops solvent. These payments have involved the inspection of workshops and their accounting.

In the course of its welfare of the blind administration since the passing of the Blind Persons Act, 1920, the Authority has adopted the policy of the municipalisation of workshops. Protracted negotiations over a number of years failed to reveal a satisfactory basis for implementing the policy, owing to the lack of agreement between institutions as to their particular use in the general scheme, the prospect of loss of voluntary contributions, etc., and finally the outbreak of war caused the matter to remain in abeyance.

Since the passing of the Disabled Persons (Employment) Act, 1944, the position regarding training and employment of blind persons has changed. Under this Act the Minister of Labour and National Service has a general responsibility for the provision of facilities for the employment under special conditions for severely disabled persons who are unable to secure employment under ordinary conditions, and in spite of the special handicap of blindness, it is held by both the Ministers of Health and Labour and National Service that provision for the blind should be part of the general problem of providing sheltered employment for the disabled.

It has been stated by the appropriate Government department, however, that except as indicated above, no alterations are being made in the arrangements for the welfare of the blind, and local authorities will continue to have the duty of promoting the welfare of the blind by the provision of employment or otherwise, and that they will still have the duty of ensuring by inspection that the services to which they contribute are efficiently provided.

Future procedure for employment in workshops, therefore, seems to be somewhat obscure with the responsibility for promoting the welfare of blind workers in relation to employment being divided between two authorities.

It was established that it was the intention of the Minister of Labour and National Service to take over responsibility for the employment of the blind. By the end of the year under review, the Minister of Labour and National Service had not outlined or made known his proposals.

#### TRAINING OF BLIND PERSONS.

In contrast to the above, following conferences between the Minister of Labour and National Service, and the Minister for Education, the position with regard to the training of blind persons has been clearly defined as follows :—

“In view of the general power conferred upon Local Education Authorities under Section 42 of the Education Act, 1944, in relation to handicapped pupils, it is generally speaking desirable in the opinion of the Minister of Education that the further education of handicapped pupils, including the blind, should be given in an atmosphere of training and education suitable to their ages. Consequently it has been approved that so far as the training of the younger blind is concerned, i.e. those who have become blind between the ages of 16 and 21, shall rest with the Minister of Education and Local Education Authorities—this instruction to take effect as from the 1st April, 1946 ; the training of the older blind persons, excepting those who have become blind before the age of 21, to be the responsibility of the Minister of Labour and National Service. There are certain exceptions to the above rules to meet the needs of specific cases.”

Arising out of this position, the only local approved training school for the adolescent blind is the Education Committee's school at Bridgend, and the voluntary institutions are no longer recognised by the Ministry of Education for this purpose, so that future practice will be that blind persons under 21 years of age will receive training in the cultural atmosphere of the Bridgend Blind School at the cost of the Education Committee, whilst the older blind suitable for training will be trained by the Ministry of Labour at one of the voluntary institutions.

At the present time, in the absence of any definite scheme, the Ministry of Labour and National Service asks local education authorities to arrange for the training of blind persons over 21 at similar costs to those formerly approved by the Board of Education.

#### EMPLOYMENT OF THE BLIND IN WAR INDUSTRY.

Certain blind persons falling in two classes, viz. those formerly classified as unemployable and those who were trained and employed in blind crafts, sought and obtained employment in war factories during the war. The incentive to do this may have been twofold :—

- (a) A patriotic desire to help in the war effort.
- (b) A desire to participate in the high wages paid for such work.

At the conclusion of hostilities these blind persons were among the first to become redundant. The former workshop employees were anxious to return to their old employment and were reabsorbed as soon as possible; in the meantime they received statutory unemployment insurance benefit with no supplementation from the County Council. The previously known unemployable class were also advised that they should seek unemployment insurance benefit, but in most cases they were anxious to return to their former status, and did so by establishing a title to National Health Disablement Benefit and the non-contributory old age pension which they enjoyed before. This made the way clear for the Council to pay domiciliary assistance as before. Prior to the establishment of these titles, the Council refused to augment unemployment benefit on the ground that if any hardship existed augmentation of standard benefit should be obtained through the Assistance Board as is done by sighted persons.

#### DEFINITION OF BLINDNESS.

Registration as a blind person under the Blind Persons Acts is dependent on the decision of a doctor with special experience in ophthalmology that the person is "so blind as to be unable to perform any work for which eyesight is essential."

The recent employment of certified blind men at work usually performed by sighted persons may suggest the need for a revision of definition of blindness, and the need may be accentuated by the wider scope in the definition of disablement under the Disabled Persons (Employment) Act as follows :—

"A disabled person under the Act, is a person, who on account of injury, disease, or congenital deformity is substantially handicapped in getting or keeping suitable employment or work."

This definition seems wide enough to cover the registered blind under the Blind Persons Acts, and those whose sight is sufficiently poor to allow of their being regarded as substantially handicapped.



## STATISTICAL TABLES.

The following miscellaneous statistical tables are inserted for purposes of comparison :—

## BIRTHS.

	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Administrative County .. ..	16.0	15.4	15.3	15.4	15.6	16.3	16.7	18.2	18.4	19.4	18.1
England and Wales .. ..	14.7	14.8	14.9	15.1	15.0	14.6	14.2	15.8	16.5	17.6	16.1
Illegitimate birth-rate per 1,000 births—											
Administrative County .. ..	—	—	—	32	30	29	35	34	44	49	67
England and Wales .. ..	—	—	—	42	42	43	53	54	63	72	92

## DEATH RATE.

	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Administrative County .. ..	12.0	12.2	12.9	12.6	13.1	13.4	12.9	12.1	12.4	12.3	12.9
England and Wales .. ..	11.7	12.1	12.4	11.6	12.1	14.3	13.2	11.6	12.1	11.6	11.4

## INFANT MORTALITY.

Year.	Deaths under one year per 1,000 Births.		Year.	Deaths under one year per 1,000 Births.	
	Glamorgan	England and Wales.		Glamorgan.	England and Wales.
1904.	176	146	1930.	69	60
1914.	112	105	1931.	77	66
1916.	94	91	1932.	72	65
1917.	94	96	1933.	79	64
1918.	95	97	1934.	65	59
1919.	95	89	1935.	64	57
1920.	90	80	1936.	63	59
1921.	93	83	1937.	65	58
1922.	90	77	1938.	60	53
1923.	75	69	1939.	60	50
1924.	77	75	1940.	65	55
1925.	83	75	1941.	67	59
1926.	76	70	1942.	55	49
1927.	86	69	1943.	56	49
1928.	75	65	1944.	48	46
1929.	80	74	1945.	58	46

## SCARLET FEVER.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Cases .. ..	3,586	1,841	2,219	3,859	3,629	1,948	1,693	1,282	1,530	1,855	1,972	1,571
Attack-rate per 1,000 ..	4.77	2.47	3.03	5.40	5.12	2.74	2.36	1.73	2.14	2.66	2.80	2.25
Hospital Cases .. ..	2,489	1,358	1,387	1,697	2,182	1,406	999	830	1,160	1,440	1,356	1,100
Deaths .. ..	22	11	11	7	16	10	5	4	2	3	2	3
Death-rate per 1,000 ..	0.03	0.01	0.01	0.01	0.02	0.01	0.01	0.01	0.003	0.004	0.003	0.004
England and Wales—												
Death-rate per 1,000	0.02	0.01	0.01	0.01	0.01	0.01	0.00	0.00	0.00	0.00	0.00	0.00

There was a decrease in the notifications of scarlet fever. The disease appears to have been fairly mild. There were three deaths out of a total of 1,571 notified cases.

## DIPHTHERIA (INCLUDING MEMBRANOUS CROUP).

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Cases .. ..	1,463	1,300	1,133	1,463	2,017	1,958	2,572	2,182	1,373	1,049	776	546
Attack-rate per 1,000 ..	1.95	1.75	1.55	2.05	2.85	2.75	3.59	2.95	1.92	1.50	1.10	0.78
Hospital cases .. ..	1,229	1,078	919	1,074	1,659	1,716	2,436	1,938	1,309	1,013	779	618
Deaths .. ..	129	83	53	49	64	62	98	83	48	24	29	17
Death-rate per 1,000 ..	0.17	0.11	0.07	0.07	0.09	0.09	0.14	0.11	0.07	0.03	0.04	0.02
England and Wales—												
Death-rate per 1,000	0.10	0.08	0.07	0.07	0.07	0.05	0.06	0.07	0.05	0.03	0.02	0.02

It will be noted that in 1945 there was a marked decrease in the number of persons suffering from diphtheria, and there were only 17 deaths—both figures being a new low record for the Administrative County. Throughout the country similar reductions were recorded, and taking into account all the facts, both in this country and Europe, one can hardly escape the conclusion that diphtheria immunisation is the operative factor.

In most districts of the County the district councils and their officers have put in a substantial amount of work in carrying out the immunisation campaign—often in the face of parental apathy and occasionally frank opposition.

The position at the end of the year 1945 was as follows:—

Percentage who had received immunising injections:

- (a) Under five years of age .. 55.7.
- (b) Over five years of age .. 83.4.

One would like to see an increase in the under five years group. The County Council have assisted the campaign by permitting the use of its schools for the work of immunisation, and the medical and nursing staff have been asked to encourage parents to seek protection for their children.

## MEASLES.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Deaths .. ..	30	42	9	41	14	22	18	46	6	23	3	17
Death-rate per 1,000 ..	0.04	0.06	0.01	0.06	0.02	0.03	0.03	0.06	0.01	0.03	0.004	0.02
England and Wales.—												
Death-rate per 1,000	0.09	0.03	0.07	0.02	0.04	0.01	0.02	0.03	0.01	0.02	0.01	0.02

There were about 7,000 notified cases of measles during the year, but in the last quarter the numbers had dropped considerably and normal conditions were returning. Seventeen deaths occurred, which provides a new position as far as can be traced, which is that 1945 produced as many deaths from measles as diphtheria, due of course, to the low diphtheria death rate.

## WHOOPIING COUGH.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Deaths .. ..	18	29	55	29	26	27	13	46	15	20	24	14
Death-rate per 1,000 ..	0.02	0.04	0.07	0.04	0.04	0.04	0.02	0.06	0.02	0.03	0.03	0.02
England and Wales—												
Death-rate per 1,000	0.05	0.04	0.05	0.04	0.03	0.03	0.02	0.06	0.02	0.03	0.03	0.02

## ENTERIC FEVER (INCLUDING PARATYPHOID).

Year.	Administrative County of Glamorgan.				England and Wales.
	Cases.	Attack-rate per 1,000.	Deaths.	Death-rate per 1,000.	Death-rate per 1,000.
1899.	1,487	2.41	215	0.34	0.19
1904.	825	1.27	194	0.39	0.23
1914.	110	0.14	28	0.03	0.05
1927.	23	0.03	4	0.005	0.01
1928.	24	0.03	2	0.002	0.01
1929.	19	0.02	2	0.002	0.01
1930.	33	0.04	3	0.004	0.01
1931.	20	0.03	4	0.005	0.01
1932.	7	0.01	1	0.001	0.01
1933.	15	0.02	1	0.001	0.01
1934.	11	0.01	2	0.002	0.00
1935.	21	0.03	2	0.003	0.00
1936.	38	0.05	4	0.005	0.00
1937.	37	0.05	4	0.006	0.00
1938.	10	0.01	1	0.001	0.00
1939.	41	0.06	1	0.001	0.00
1940.	15	0.02	1	0.001	0.00
1941.	66	0.09	4	0.005	0.00
1942.	12	0.02	—	—	0.00
1943.	12	0.02	—	—	0.00
1944.	2	0.002	1	0.002	0.00
1945.	10	0.01	—	0.00	0.00

## DIARRHOEA AND ENTERITIS (INFANTS UNDER 2 YEARS).

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Deaths .. .. .	48	54	53	37	36	40	51	55	65	56	49	73
Death-rate per 1,000 births	3.9	4.5	4.7	3.38	3.30	3.59	4.29	4.33	4.91	4.37	3.58	5.77
England and Wales—												
Death-rate per 1,000 births	5.5	5.7	5.9	5.8	5.5	4.6	4.6	5.1	5.20	5.30	4.8	5.60

The death rate from diarrhoea and enteritis in children under two years of age was the highest since the year 1933. There has been for the latter part of the war an increase, generally, of intestinal infections of vague origin among the population. No organism has been traced nor any virus identified. No age group appears to have escaped, but apparently its effects on very young life is, as one would expect, more dangerous. The position is being watched very closely and with some anxiety, particularly in relation to maternity units and nurseries.

## TUBERCULOSIS.

TABLE I.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.	
Cases notified—													
Phthisis .. .. .	1,055	868	838	828	842	844	975	933	934	991	1,186	1010	
Other Tuberculous diseases	412	315	314	320	345	310	332	355	322	356	284	283	
Deaths—													
Phthisis .. .. .	594	536	503	513	491	469	477	492	447	468	454	416	
Other Tuberculous diseases	135	128	107	106	105	83	119	107	94	105	111	92	
Case Mortality per cent—													
Phthisis .. .. .	56.3	61.7	60.2	61.9	58.3	55.7	48.9	52.7	47.9	47.2	38.2	41.2	
Other Tuberculous diseases	32.8	40.6	34.1	33.1	30.4	26.8	35.8	30.1	29.2	29.4	39.1	32.5	
Death-rate per 1,000.	Administrative County—												
	Phthisis.. .. .	0.79	0.72	0.69	0.72	0.69	0.66	0.67	0.66	0.63	0.67	0.64	0.60
	Other Tuberculous diseases	0.18	0.17	0.15	0.15	0.15	0.12	0.17	0.14	0.13	0.15	0.16	0.13
	Urban Districts—												
	Phthisis.. .. .	0.82	0.77	0.75	0.75	0.73	0.74	0.70	0.71	0.68	0.74	0.68	0.64
	Other Tuberculous diseases	0.20	0.17	0.15	0.15	0.16	0.14	0.18	0.15	0.13	0.15	0.15	0.15
	Rural Districts—												
	Phthisis.. .. .	0.68	0.56	0.50	0.63	0.59	0.42	0.57	0.54	0.48	0.49	0.55	0.49
	Other Tuberculous diseases	0.12	0.18	0.13	0.13	0.10	0.05	0.12	0.12	0.12	0.14	0.18	0.09
	England and Wales—												
	Phthisis .. .. .	0.63	0.60	0.58	0.58	0.53	0.53	0.58	0.60	0.54	0.56	0.52	0.52
	Other Tuberculous diseases	0.13	0.11	0.11	0.11	0.10	0.10	0.11	0.12	0.11	0.11	0.10	0.10

TABLE II.—NOTIFICATION OF TUBERCULOSIS.

Year.	Number of Notifications.			Rate per 1,000 population.		
	Pulmonary.	Non-pulmonary.	Total.	Pulmonary.	Non-pulmonary.	Total.
1944	1,186	284	1,470	1.68	0.40	2.08
1945	1,010	283	1,293	1.45	0.41	1.86

TABLE III.—NOTIFICATIONS OF NON-PULMONARY TUBERCULOSIS.

Year.	Rate per 1,000 population.
1938	0.48
1939	0.44
1940	0.46
1941	0.48
1942	0.45
1943	0.51
1944	0.40
1945	0.41

Non-pulmonary tuberculosis accounted for 92 deaths in 1945 and 111 in 1944.

TABLE IV.—DEATH RATES PER 1,000—TUBERCULOSIS—YEAR 1945.

Area.	Pulmonary.	Non-pulmonary.	All forms.
Glamorgan .. ..	0.60	0.13	0.73
Wales and Monmouthshire	0.59	0.12	0.71
England and Wales ..	0.52	0.10	0.62

Consideration of the above tables brings out the following points:—

- (a) Notifications of pulmonary tuberculosis were slightly less than in 1944.
- (b) Notifications of non-pulmonary tuberculosis were almost the same as in 1944, which was the lowest ever recorded in the County.
- (c) The death rate for pulmonary tuberculosis was lower than any recorded before, although only slightly.
- (d) The death rates of pulmonary and non-pulmonary tuberculosis in England and Wales is less than Glamorgan (Administrative).
- (e) The pulmonary tuberculosis death rate in England and Wales shows no improvement over 1944, but is almost equal to the death rate for England and Wales in 1938, the pre-war year, whereas in the County the rate for 1945 is lower.

The above picture is encouraging bearing in mind the fact that the mass radiography arrangements made by the Welsh National Memorial Association, whereby cases are diagnosed earlier than previously, have brought to light more cases than would otherwise have been detected. Again, owing to shortage of

nurses and domestic staff the Welsh National Memorial Association have been unable to utilise to the full the beds provided by the Association. The peak figure of persons being on the waiting list was 838, the average for the year was 775. These facts, together with some of the distressing housing conditions and overcrowding indicates that too rosy a picture should not be envisaged.

From the non-pulmonary tuberculosis aspect, that proportion due to bovine tuberculosis could be eradicated, if only we have the will to accomplish it.

TREATMENT OF PULMONARY TUBERCULOSIS : (1) MEMO. 266/T ; (2) COMMITTEE'S AFTER-CARE SCHEME.

The administration of the Government's scheme which came into operation on the 1st August, 1943, was pursued during the year, and the following statistical information is of interest :—

	Pulmonary.	Non-pulmonary.	Total.
Notified cases of tuberculosis on Register at January, 1945 .. .. .	6,938	3,292	10,230

	1943.	1944.	1945.	Total.
No. of patients who applied for assistance under Memo. 266/T. ..	814	646	606	2,066*
No. granted assistance since inception of scheme on 1st August, 1943	465	444	375	1,284*
No. receiving allowances on 31st December .. .. .	303	380	428	—
No. of cases assisted by Public Assistance Committee before scheme came into operation .. .. .	150	—	—	150
No. of Public Assistance cases transferred to the scheme .. ..	16	30	20	66

\* Includes after-care cases.

Details showing reasons for cases ceasing to receive assistance :—

	1943.	1944.	1945.	Total.
Recommended work .. .. .	25	124	156	305
Deceased .. .. .	17	48	51	116
Not conforming to treatment .. .. .	12	15	31	58
Left area .. .. .	2	12	12	26
Still unfit for work after receiving allowances for statutory period	31	72	89	192
Non-dependents admitted to hospital in receipt of N.H.I. .. ..	61	110	139	310
Other reasons .. .. .	—	—	35	35

## Payments made during 1945 :—

	Total.	Maintenance.	Discretionary.	Special.	After-care.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1st quarter—Jan.—March ..	7,226 19 0	6,784 11 5	230 13 0	110 18 11	100 15 8
2nd quarter—April—June ..	6,135 16 5	5,780 11 11	197 10 3	99 14 4	57 19 11
3rd quarter—July—Sept. ..	7,422 9 9	6,916 15 1	249 17 7	140 12 0	115 5 1
4th quarter—Oct.—Dec. ..	6,508 12 7	6,078 11 4	215 10 10	114 7 9	100 2 8
Total .. ..	27,293 17 9*	25,560 9 9	893 11 8	465 13 0	374 3 4

\* This compares with a total expenditure of £25,108 3s. 5d. in the year 1944.

Travelling expenses granted to enable relatives to visit patients :

Year.	Government Scheme.	After-care Scheme.
	£ s. d.	£ s. d.
1944 ..	184 3 6	7 8 4
1945 ..	210 11 5	118 13 10

The inadequacy of the scheme, which was apparently a war-time measure designed to get patients under treatment in the very early stages of the disease so that they could be treated at the proper time and rendered fit to return to employment, has been severely criticised by local authorities and the general public.

The scheme is limited in that it does not provide for the chronic pulmonary case or the patient suffering from non-pulmonary tuberculosis. This leads to refusals of assistance which are not readily understood by the patients.

The scheme provides for the payment of allowances to eligible applicants in all cases for a period of six months after completing institutional treatment and for two further periods of six months provided the requisite progress towards return to employment is made. Where no such progress is made either my department or the Tuberculosis Officer has the unenviable task of informing the patient of the reason for the withdrawal of allowances.

It is doubtful whether the scale rates are high enough to relieve the breadwinner patient of anxiety for his family whilst he is absent from work, and the rate of 25/- per week for the non-dependent member of a parents' or other relative's household, appears to be inadequate (except for an adolescent). The rates for dependent children do not compare favourable with Assistance Board and the Social Welfare Committee's rates.

The Tuberculosis Officer on whom rests the responsibility for deciding from the clinical picture whether the patient is a suitable case for assistance under the scheme, is now burdened with a great deal of additional administrative work, which includes correspondence on queries raised by local authorities.

Although the Government scheme has the limitations noted above, it has a significant value inasmuch as it concedes the point that assistance must be given to a person entering hospital if he has dependents. In addition it assists him in making his decision to cease employment in order to undergo treatment after being diagnosed, and this leads to active treatment at an earlier stage of the disease with a consequently better chance of recovery.

The administration of the scheme as it stands has been efficiently organised and runs smoothly. It was stated in last year's report that after a further 12 month's working it was thought that the results of the scheme in terms of improved health and ability to return to work would become evident.

An analysis of the statistics given indicates that of the total number of cases assisted since the inception of the scheme in August, 1943, who have ceased to receive assistance by the end of the year under review, 305 patients or approximately 25 per cent have been rendered fit to resume work. The results in 310 other cases (non-dependents) who ceased to receive assistance on account of their admission to hospital or sanatorium are not yet evident.

Only 2 per cent of cases assisted have died whilst 15 per cent have been declared as unfit for work after receiving allowances for the statutory period. 4·5 per cent of cases have become out of scope owing to their failure to conform to the treatment recommended, e.g. taking their own discharge from institutional treatment against medical advice.

#### RE-EMPLOYMENT AFTER TREATMENT—DISABLED PERSONS (EMPLOYMENT) ACT, 1944.

The majority of persons restored to working capacity under this scheme are not fit for more than light work.

As mentioned previously in this report the above Act is designed to facilitate the employment of severely disabled persons who are unable to secure employment under ordinary conditions.

The Act is administered by the Minister of Labour and National Service, but at the end of the year covered by this report, there was no evidence available in my department of much activity in placing tuberculous subjects, who have come under this scheme, in suitable employment. Perhaps it is too early to expect results in view of the responsibility of the Minister in placing normal healthy persons, such as ex-servicemen and redundant war workers in suitable employment.

#### NATIONAL INSURANCE ACT.

There is some concern amongst those connected with the administration of this scheme as to the effect of this Act on the treatment of pulmonary tuberculosis in so far as the incentive to undergo treatment may be lessened by the award of similar benefits to the tuberculous as to other sick persons who may have a better chance of returning to the original employment. Unless there is provided some means of supplementation of ordinary sickness rates, it seems likely that a considerable number of tuberculous subjects would be worse off financially than if they were provided for under Memo. 266/T, because of the permissible additions to the scale rates for rent and dependents plus the discretionary and special payments for insurances, hire purchase, education, domestic help, and travelling facilities.

However, it is possible that any such deficiencies may be remedied in future legislation.



## AFTER-CARE.

The administration of the After-care Scheme which came into operation on 1st August, 1944, has been continued during the year. This scheme is limited in its scope as indicated in the next paragraph and, unfortunately, does not make provision for giving any maintenance allowances to persons outside the scope of the Government scheme.

The scheme gives power to provide bedsteads and bedding to enable patients to sleep apart, outdoor shelters, clothing, extra nourishment, assistance in obtaining alternative housing accommodation, home helps, etc. Assistance is given according to an income scale.

The provision of beds and bedding to effect segregation is at the present time hampered by the necessity for patients to obtain priority permits and dockets before they are able to purchase these articles; and it is often further hampered by the lack of sufficient housing accommodation, but it is satisfactory to note that housing authorities usually give high priority in their allocation schemes to inadequately housed families in which there is a tuberculous subject.

The arrangements for providing clothing for persons to be admitted to institutional treatment are often hindered by the lack of sufficient clothing coupons, and application has to be made to the Board of Trade for additional coupons.

During the year expenditure totalling £492 17s. 2d. was incurred.

## MATERNAL MORTALITY.

## PUERPERAL SEPSIS.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Deaths .. .. .	48	37	29	17	15	15	14	14	14	19	20	5
Death-rate per 1,000 births	3.88	3.10	3.57	1.55	1.37	1.35	1.18	1.10	1.07	1.43	1.41	0.38
England and Wales—												
Death-rate per 1,000 births	2.03	1.68	1.40	0.97	0.89	0.77	0.52	0.48	0.42	0.73	0.59	0.49

## OTHER MATERNAL CAUSES.

	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.
Deaths .. .. .	52	47	35	36	50	43	37	36	32	43	31	37
Death-rate per 1,000 births	4.20	3.94	3.10	3.29	4.58	3.86	3.11	2.83	2.45	3.24	2.18	2.83
England and Wales—												
Death-rate per 1,000 births	2.57	2.42	2.41	2.26	2.19	2.16	1.64	1.75	1.59	1.56	1.34	1.30

The rates for 1943, 1944, and 1945 are worked out on "live and still births" and not on "live" births as previously.

The maternal mortality rate in 1944 was 3.59 per 1,000 live and still births, and in 1945 was 3.21. The lowest figure recorded up to 1945 was in 1942 when the rate was 3.52 and hence 1945 is the lowest rate recorded at any time. However, this is not anything like good enough—the maternal mortality rate for England and Wales in 1945 was 1.79 and that for Glamorgan 3.21. The death rate from puerperal sepsis dropped to less than a quarter of that noted in 1944, but deaths from other maternal causes increased.

It appears that the factors which will bring about further improvement are :—

- (a) Higher standard of nutrition of mothers.
- (b) More complete ante-natal care by ante-natal clinics, practitioners, and midwives.
- (c) Education of mothers in the value of ante-natal supervision.
- (d) A raised standard of midwifery by all practising it.
- (e) Provision of hospital beds for all mothers where necessary.
- (f) Facilities for emergency treatment in the home should necessity arise.
- (g) A closer link between obstetric personnel in hospital and in ante-natal clinics.

#### CANCER.

The number of persons dying from cancer reached a higher figure than ever before—1,209. The death rate per 1,000 population for 1944 was 1.56 and in 1945 was 1.73, and for the same years the rates for England and Wales were 1.89 and 1.93 respectively. The incidence of cancer deaths in England and Wales has increased every year since at least 1936, and it is thought that although earlier diagnosis is resulting in reduced mortality, this is concealed by a simultaneous increase in ascertainment through better facilities for diagnosis and treatment. In Glamorgan, however, the incidence over recent years has increased, and it is very much doubted whether there was any improvement in diagnosis or treatment sufficient to conceal a reduced mortality. More facilities for early diagnosis and better treatment are certainly needed in South Wales as a whole, and at the end of the year it was decided to meet in conference the other County Councils of South Wales and Monmouthshire, and also those county boroughs therein to take joint action in this important matter.

The cancer deaths in the County are over double those from tuberculosis.

#### SITES OF CANCER IN PERSONS DYING FROM THE DISEASE.

Site.	1943.	1944.	1945.
Buccal Cavity	123	136	140
Oesophagus and Uterus } .. .. .			
Stomach and Duodenum .. .. .	295	277	281
Breast .. .. .	90	88	97
Other Sites .. .. .	572	603	691
Total .. .. .	1,080	1,104	1,209

## SANITARY CIRCUMSTANCES OF THE AREA.

## PREVENTION OF POLLUTION OF RIVERS AND STREAMS.

Most of the rivers are heavily polluted by sewerage, coal, and occasionally trade effluents. Some townships have quite an inadequate sewerage scheme to serve the population and several had prepared plans for new sewage works, but with the onset of war all schemes had to be set aside. Coal mines in the Glamorgan valleys contribute substantially to the pollution of the rivers in their course down to the channel.

## (a) Visits of inspection.

The visits paid during the year were as follows :—

Sewage disposal works	..	..	166
River water samples	..	..	62
Industrial	..	..	15
<b>Total</b>	..	..	<b>243</b>

## (b) Analyses of samples.

Sewage effluents	..	..	..	145
------------------	----	----	----	-----

Character of Crude Sewage.	Character of Effluent after Purification.		
	Efficient.	Fairly Efficient.	Inefficient.
Strong .. .. .	4	3	2
Moderate .. .. .	6	16	7
Weak .. .. .	43	42	22

The results of these analyses are forwarded to the District Medical Officers of Health concerned.

*Sampling and Visits in Relation to Milk Production.*

Visits made to Tuberculin-tested Farms	..	..	..	..	..	..	352
Visits made to Accredited Farms	..	..	..	..	..	..	962
Total number of milk samples taken	..	..	..	..	..	..	673
Samples of milk taken under Regulation 55G	..	..	..	..	..	..	89

*Water Supplies.*

Bacteriological examinations on behalf of district councils and county council	897
Chemical examinations on behalf of district councils and county council	176

## GENERAL.

The year 1945 was a year of no spectacular surprises, but rather one of certain gains and certain losses as will be noted in the previous pages.

Some infections such as measles increased but not unexpectedly ; diphtheria reached its lowest level. Skin conditions such as scabies still were all too evident, and ringworm seemed a little commoner than usual. A comment has already been made on a persistent and vague gastro-intestinal infection appearing here and there. Cerebro-spinal fever was less frequent, 49 cases being notified in 1945 as against 62 in 1944, and 96 in 1943.

At the request of the Ministry of Health all possible steps were taken in anticipation of a major epidemic during the winter months. The Fighting Services in the County were contacted to obtain medical assistance ; the Women's Voluntary Services agreed to arrange domestic help in the homes, the British Red Cross Society and the Order of St. John of Jerusalem were prepared to help with home nursing, and the Education Committee by providing hot meals from school canteens to homes where because of illness meals could not be prepared. Fortunately, however, no major epidemic appeared, although there was a small increase in the influenza deaths.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE COUNTY  
OF GLAMORGAN DURING THE YEAR 1945.

Causes of Death.	0-1 year		1-5 years		5-15 years		15-45 years		45-65 years		65 years and upward		All ages		Totals
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Typhoid and Paratyphoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	2	—	—	1	1	1	1	—	—	—	1	—	5	2	7
Scarlet Fever	—	—	—	—	1	2	—	—	—	—	—	—	1	2	3
Whooping Cough	5	6	—	3	—	—	—	—	—	—	—	—	5	9	14
Diphtheria	—	—	2	7	5	2	—	—	1	—	—	—	8	9	17
Tuberculosis of respiratory system	1	—	3	1	3	6	141	133	78	33	11	6	237	179	416
Other Forms of Tuberculosis	2	6	6	7	12	13	12	23	3	3	3	2	38	54	92
Syphilitic Diseases	1	2	—	—	—	1	4	—	28	—	5	5	38	8	46
Influenza	—	3	2	—	2	—	5	—	16	9	20	16	45	28	73
Measles	4	2	6	4	—	—	—	1	—	—	—	—	10	7	17
Ac. Polio-myel. and Polio-enceph.	—	—	—	1	1	—	—	—	—	—	—	—	1	1	2
Acute Inf. Encephalitis	—	—	—	—	—	—	—	3	—	2	1	1	1	6	7
Cancer of Buc. Cav. and Oesoph. (M) Uterus (F)	—	—	—	1	—	—	—	11	21	49	40	18	61	79	140
Cancer of Stomach and Duodenum	—	—	—	—	—	—	9	6	80	36	79	71	168	113	281
Cancer of Breast	—	—	—	—	—	—	—	14	1	43	—	39	1	96	97
Cancer of all other sites	—	1	—	—	—	3	24	26	190	123	182	142	396	295	691
Diabetes	—	—	—	—	1	—	5	6	5	29	15	33	26	68	94
Intra-Cranial Vascular Lesions	1	—	—	—	—	—	5	4	103	123	344	344	453	471	924
Heart Disease	—	—	—	—	6	3	68	73	355	215	809	743	1,238	1,034	2,272
Other Diseases of Circ. System	—	—	—	—	—	—	2	5	21	15	77	59	100	79	179
Bronchitis	24	18	2	2	—	2	14	10	152	46	238	126	430	204	634
Pneumonia	71	47	15	13	1	2	24	12	45	10	63	46	219	130	349
Other Respiratory Diseases	—	—	3	3	1	—	26	13	116	9	60	19	206	44	250
Ulcer of Stomach or Duodenum	1	—	—	—	—	—	12	—	25	6	7	4	45	10	55
Diarrhoea, under two years	41	28	3	1	—	—	—	—	—	—	—	—	44	29	73
Appendicitis	—	—	2	—	3	4	13	7	3	10	6	1	27	22	49
Other Digestive Diseases	4	7	2	3	1	2	5	17	24	25	29	38	65	92	157
Nephritis	—	—	—	—	4	4	15	27	60	37	61	62	140	130	270
Puerperal and Post-Abort: Sepsis	—	—	—	—	—	—	—	5	—	—	—	—	—	5	5
Other Maternal Causes	—	—	—	—	—	—	—	37	—	—	—	—	—	37	37
Premature Birth	93	73	—	—	—	—	—	—	—	—	—	—	93	73	166
Con. Mal. Birth Inj. Infant Dis.	131	73	3	3	2	2	7	2	—	2	—	—	143	82	225
Suicide	—	—	—	—	—	—	4	1	6	5	11	3	21	9	30
Road Traffic Accidents	—	1	6	7	12	3	23	3	13	—	3	2	57	16	73
Other Violent Causes	11	8	17	12	13	4	64	6	55	4	28	24	188	58	246
All Other Causes	37	23	10	10	15	10	53	55	81	79	350	308	546	485	1,031
All Causes	429	298	82	79	84	64	536	500	1,482	913	2,443	2,112	5,056	3,966	9,022



1945.  
NOTIFICATION OF INFECTIOUS DISEASES.

	SMALLPOX.			SCARLET FEVER.			DIPHTHERIA. (Includes Mem. Group.)			ENTERIC FEVER.		PARA- TYPHOID.		ERYSIPELAS.		PULMONARY TUBERCULOSIS		NON- PULMONARY TUBERCULOSIS		PUERPERAL PYEMIA.		Ophthalmia Neonatorum	PNEUMONIA.		MEASLES		WHOPPING COUGH		Epidemiology Lethargica	Dysentery.	Cerebro-Spinal Fever	Malaria	Acute Folliculitis	Membranous Group.	
	Cases	Rate	Hos- pital	Cases	Rate	Hos- pital	Cases	Rate	Hos- pital	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate		Rate per 1,000 Live Births	Cases	Rate	Cases	Rate	Cases							Rate
Administrative County	—	—	—	1571	2.25	1100	546	0.78	618	2	0.003	8	0.01	137	0.20	1010	1.45	283	0.41	93	0.13	52	763	1.09	5963	8.55	497	0.71	1	95	49	5	17	—	
Urban Districts	—	—	—	1195	2.32	889	387	0.75	461	1	0.002	8	0.02	118	0.23	778	1.51	190	0.37	83	0.16	41	636	1.24	4614	8.97	325	0.63	—	39	40	—	9	—	
Rural Districts	—	—	—	376	2.05	261	159	0.87	157	1	0.005	—	—	19	0.10	232	1.27	93	0.51	10	0.05	11	127	0.69	1349	7.37	172	0.94	1	56	9	5	8	—	
<b>URBAN.</b>																																			
Aberdare	—	—	—	69	1.77	26	10	0.26	10	—	—	2	0.05	11	0.28	61	1.57	15	0.39	5	8.25	4	58	1.49	117	3.01	10	0.26	—	13	4	—	—	—	
Barry Borough	—	—	—	85	2.33	76	35	0.96	35	—	—	—	—	5	0.14	52	1.43	15	0.41	3	4.05	4	15	0.41	178	4.88	6	0.16	—	1	1	—	2	—	
Bridgend	—	—	—	25	2.15	20	1	0.09	1	—	—	—	—	2	0.17	13	1.12	14	1.21	1	4.93	2	1	0.09	13	1.12	—	—	—	1	—	—	4	—	
Caerphilly	—	—	—	89	2.77	16	41	1.27	58	—	—	—	—	14	0.44	51	1.89	16	0.50	2	0.06	2	65	2.02	902	28.05	54	1.68	—	—	2	—	1	—	
Cowbridge Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	40.00	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Gellizaer	—	—	—	107	2.98	34	35	0.98	35	—	—	—	—	5	0.14	50	1.39	15	0.42	4	5.99	4	7	0.20	630	18.11	45	1.25	—	—	2	—	—	—	
Glyncorrwg	—	—	—	2	0.22	—	26	2.91	15	—	—	—	—	4	0.45	17	1.90	5	0.56	—	—	—	21	2.35	—	—	—	—	—	—	—	—	—	—	
Llwechr	—	—	—	34	1.38	32	3	0.12	3	—	—	—	—	8	0.32	29	1.18	6	0.24	3	7.48	1	5	2.20	279	11.32	51	2.07	—	2	1	—	—	—	
Maesteg	—	—	—	33	1.47	18	12	0.54	23	—	—	—	—	6	0.27	31	1.38	18	0.80	1	0.04	1	24	1.07	434	19.37	10	0.45	—	2	7	—	—	—	
Mountain Ash	—	—	—	83	2.56	71	21	0.65	44	—	—	1	0.03	7	0.22	63	1.95	8	0.25	15	24.19	—	59	1.82	175	5.41	25	0.77	—	—	1	—	—	—	
Neath Borough	—	—	—	72	2.45	46	32	1.09	32	—	—	—	—	4	0.14	69	2.35	17	0.58	4	8.49	—	1	0.03	31	1.05	7	0.24	—	1	—	—	—	—	
Ogmore and Garw	—	—	—	72	3.06	54	12	0.51	12	1	0.04	—	—	11	0.47	33	1.40	11	0.47	3	6.55	—	72	3.06	216	9.17	35	1.49	—	14	4	—	2	—	
Penarth	—	—	—	11	0.70	8	2	0.13	2	—	—	—	—	—	—	11	0.70	3	0.19	—	1	120	7.68	106	6.79	6	0.38	—	1	7	—	—	—		
Pontypridd	—	—	—	73	1.92	72	26	0.68	26	—	—	2	0.05	8	0.21	53	1.39	5	0.13	12	17.24	14	10	0.26	304	8.00	10	0.26	—	3	3	—	—	—	
Port Talbot Borough	—	—	—	24	2.84	19	2	0.24	2	—	—	—	—	—	—	7	0.83	6	0.71	1	7.30	—	—	—	22	2.60	13	1.54	—	—	—	—	—	—	
Port Talbot Borough	—	—	—	104	2.71	90	86	2.24	86	—	—	1	0.03	4	0.10	91	2.37	11	0.29	4	5.94	2	—	—	137	3.56	5	0.13	—	—	3	—	—	—	
Rhondda	—	—	—	312	2.68	257	43	0.37	77	—	—	2	0.02	29	0.28	147	1.26	25	0.21	24	11.54	6	178	1.53	1050	9.01	48	0.41	—	2	4	—	—	—	
<b>RURAL.</b>																																			
Cardiff	—	—	—	76	2.19	65	16	0.46	16	—	—	—	—	3	0.09	37	1.07	12	0.35	1	0.03	2	8	0.23	312	9.00	9	0.26	1	40	—	—	2	—	
Cowbridge	—	—	—	12	0.98	10	6	0.49	6	1	0.08	—	—	2	0.16	17	1.36	6	0.49	2	7.52	1	6	0.49	23	1.88	11	0.90	—	11	1	—	—	—	
Gower	—	—	—	9	0.84	8	1	0.09	1	—	—	—	—	1	0.09	8	0.75	5	0.47	—	—	1	0.09	10	0.94	31	2.91	—	3	—	—	—	—		
Llantrisant and Llan- twst Fardre	—	—	—	42	1.83	—	9	0.39	9	—	—	—	—	—	—	20	0.87	6	0.26	4	8.02	5	26	1.13	299	13.03	10	0.44	—	1	1	—	2	—	
Neath	—	—	—	105	2.76	93	58	1.50	58	—	—	—	—	7	0.18	72	1.82	25	0.63	—	2	54	1.37	304	7.66	24	0.61	—	1	—	1	—	—		
Penybont	—	—	—	58	1.93	35	17	0.56	16	—	—	—	—	3	0.10	39	1.28	27	0.88	—	—	9	0.29	29	0.95	2	0.07	—	—	1	4	3	—		
Pontardawe	—	—	—	69	2.12	50	51	1.57	50	—	—	—	—	3	0.09	39	1.20	12	0.40	3	5.83	1	23	0.71	372	11.44	85	2.61	—	—	6	—	1	—	

Figures in columns showing admissions to hospital in respect of Diphtheria cases occasionally show a greater figure than the number of cases notified due to an altered diagnosis after admission.

CLASSIFICATION OF SPECIES

No.	Date	Locality	Sex	Age	Length	Wing	Tail	Culmen	Tarsus	Middle toe	Hind toe	Total length	Measurements	
													Wing	Tail
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
11	11	11	11	11	11	11	11	11	11	11	11	11	11	11
12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
13	13	13	13	13	13	13	13	13	13	13	13	13	13	13
14	14	14	14	14	14	14	14	14	14	14	14	14	14	14
15	15	15	15	15	15	15	15	15	15	15	15	15	15	15
16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
17	17	17	17	17	17	17	17	17	17	17	17	17	17	17
18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
19	19	19	19	19	19	19	19	19	19	19	19	19	19	19
20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
21	21	21	21	21	21	21	21	21	21	21	21	21	21	21
22	22	22	22	22	22	22	22	22	22	22	22	22	22	22
23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
24	24	24	24	24	24	24	24	24	24	24	24	24	24	24
25	25	25	25	25	25	25	25	25	25	25	25	25	25	25
26	26	26	26	26	26	26	26	26	26	26	26	26	26	26
27	27	27	27	27	27	27	27	27	27	27	27	27	27	27
28	28	28	28	28	28	28	28	28	28	28	28	28	28	28
29	29	29	29	29	29	29	29	29	29	29	29	29	29	29
30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
31	31	31	31	31	31	31	31	31	31	31	31	31	31	31
32	32	32	32	32	32	32	32	32	32	32	32	32	32	32
33	33	33	33	33	33	33	33	33	33	33	33	33	33	33
34	34	34	34	34	34	34	34	34	34	34	34	34	34	34
35	35	35	35	35	35	35	35	35	35	35	35	35	35	35
36	36	36	36	36	36	36	36	36	36	36	36	36	36	36
37	37	37	37	37	37	37	37	37	37	37	37	37	37	37
38	38	38	38	38	38	38	38	38	38	38	38	38	38	38
39	39	39	39	39	39	39	39	39	39	39	39	39	39	39
40	40	40	40	40	40	40	40	40	40	40	40	40	40	40
41	41	41	41	41	41	41	41	41	41	41	41	41	41	41
42	42	42	42	42	42	42	42	42	42	42	42	42	42	42
43	43	43	43	43	43	43	43	43	43	43	43	43	43	43
44	44	44	44	44	44	44	44	44	44	44	44	44	44	44
45	45	45	45	45	45	45	45	45	45	45	45	45	45	45
46	46	46	46	46	46	46	46	46	46	46	46	46	46	46
47	47	47	47	47	47	47	47	47	47	47	47	47	47	47
48	48	48	48	48	48	48	48	48	48	48	48	48	48	48
49	49	49	49	49	49	49	49	49	49	49	49	49	49	49
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50

This table contains detailed measurements for 50 specimens, including sex, age, and various body dimensions such as length, wing, tail, culmen, tarsus, and toe lengths. The data is organized in a grid format for easy reference.

# VITA

CAUSE OF DEATH		POPULATION						RATE PER 1,000 LIVE BIRTHS		RATE PER 1,000 LIVE & STILL BIRTHS		
Intra-Cran. Vasc. Lesions	Heart Disease	Other Diseases	Influenza	Tuberculosis of Respiratory System.	Tuberculosis. Other forms	Respiratory Diseases	Suicide and other Violence	Infantile Mortality	Diarrhoea, etc. (under 2 years)	Puerperal and Post-Abort: Sepsis.	Other Maternal Causes	
924	2,272	0-08	0-52	0-10	..	..	46	5-60	0-49	1-30	England and Wales.	
707	1,751	10-10	0-60	0-13	1-77	0-50	58	5-77	0-38	2-83	Administrative County.	
217	521	10-11	0-64	0-15	1-85	0-53	59	6-50	0-41	2-88	Urban Districts.	
		0-09	0-49	0-09	1-54	0-41	53	3-69	0-30	2-69	Rural Districts.	
<b>URBAN.</b>												
88	177	0-33	0-44	0-03	1-70	0-46	46	6-60	—	3-21	Aberdare.	
56	132	0-16	0-77	0-16	1-70	0-63	55	4-05	—	3-91	Barry Borough.	
16	46	—	0-60	0-17	0-95	0-26	35	—	—	4-55	Bridgend.	
36	109	0-16	0-78	0-12	1-59	0-53	68	4-43	—	—	Caerphilly.	
—	4	—	—	—	—	0-83	80	—	—	—	Cowbridge Borough.	
45	113	0-08	0-61	0-14	1-89	0-61	94	12-13	—	3-91	Gelligaer.	
11	21	0-22	0-67	0-34	2-01	0-67	64	19-61	—	—	Glyncorrwg.	
29	73	0-08	0-57	0-16	1-91	0-49	62	4-99	2-42	4-84	Llwchwr.	
29	93	0-04	0-80	0-18	2-46	0-62	55	6-91	—	4-37	Maesteg.	
46	94	—	0-68	0-12	1-92	0-62	57	9-68	—	7-78	Mountain Ash.	
31	88	0-10	0-75	0-17	1-40	0-51	47	2-12	—	2-05	Neath Borough.	
18	73	—	0-38	0-13	1-66	0-38	44	—	—	—	Ogmore and Garw.	
31	56	0-19	0-32	0-06	0-83	0-51	31	4-48	—	4-27	Penarth.	
59	128	0-03	0-71	0-11	2-24	0-63	83	5-75	—	2-74	Pontypridd.	
13	28	0-12	0-59	0-24	2-13	0-59	37	—	7-25	—	Porthcawl.	
39	108	0-26	0-91	0-21	1-43	0-68	62	5-94	—	—	Port Talbot Borough.	
160	408	0-06	0-56	0-16	2-23	0-44	53	8-17	0-93	2-78	Rhondda.	
<b>RURAL.</b>												
46	109	0-06	0-26	0-03	0-78	0-35	35	3-51	—	1-71	Cardiff.	
9	29	—	0-24	—	2-20	0-73	53	3-76	—	—	Cowbridge.	
11	21	0-47	0-09	0-19	1-12	0-37	37	—	—	5-88	Gower.	
32	69	0-09	0-61	0-13	1-48	0-52	68	6-01	—	—	Llantrisant and Llantwit Far	
43	105	0-10	0-53	0-13	1-87	0-35	55	4-57	—	1-49	Neath.	
31	96	0-07	0-65	0-10	1-61	0-36	46	5-14	166	9-95	Penybont.	
45	92	0-03	0-65	0-09	1-81	0-40	68	—	—	—	Pontardawe.	



VITAL STATISTICS, ETC., 1945.

	POPULATION		BIRTHS			DEATHS				CAUSES OF DEATH AT ALL AGES																										
	Census, 1931	Estimated 1945	Males	Females	Total	Stillbirths	Males	Females	Total	Under one year	System and Peritoneal Fevers	Cerebro-Spinal Fever	Scarlet Fever	Whooping Cough	Diphtheria	Tuberculosis of Respiratory System	Other Forms of Tuberculosis	Syphilitic Diseases	Influenza	Measles	Acute Poliomyelitis and Polio-Enceph.	Acute Inf. zoonosis	Cancer of B. cavity and Cervix (F)	Cancer of Uterus (F)	Cancer of Esophagus and Stomach and Pancreas	Cancer of Breast	Cancer of all Other Sites	Diabetes	Intra-Cran. Vasc. Lesions	Heart Disease	Other Diseases of Circ. System	Bronchitis	Pneumonia	Other Respiratory Diseases	Ulcer of Stomach or Duodenum	Diarrhoea (under 2 years)
England and Wales	708,223	897,780	6,608	6,037	12,645	436	5,056	3,968	9,022	227	7	7	3	14	15	416	82	46	73	17	12	2	140	281	97	691	94	924	2,272	179	634	349	250	55	22	
Administrative County	885,508	1,144,931	4,521	4,470	8,991	339	3,843	2,970	6,812	555	6	6	2	11	14	317	89	34	57	12	5	1	103	163	211	70	72	2,077	179	504	264	183	38	17		
Urban Districts	180,715	183,190	1,685	1,567	3,252	97	1,213	987	2,200	172	1	1	1	3	3	89	12	12	16	5	1	1	37	70	27	187	22	217	51	130	85	67	17	61	12	
URBAN.																																				
Aberdare	48,246	38,930	303	303	606	17	344	247	591	28	—	—	—	—	—	17	1	3	13	—	—	—	10	20	4	39	2	88	177	4	31	19	16	3	4	
Barry Borough	38,891	36,440	396	344	740	28	297	398	595	41	—	—	—	—	—	28	6	3	6	—	—	—	4	18	9	39	5	56	132	8	30	25	7	—	3	
Bridgend	10,029	11,650	105	98	203	17	69	65	134	7	—	—	—	—	—	25	2	4	4	—	—	—	8	4	2	16	4	16	46	3	3	8	—	1	—	
Casphilly	35,768	32,160	355	323	678	21	252	209	452	46	—	—	—	—	—	25	4	7	5	—	—	—	8	11	5	22	36	109	14	27	15	9	3	3		
Cowbridge Borough	1,018	1,207	15	10	25	2	7	6	13	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Gelligarr	41,943	35,900	381	381	762	24	281	173	454	70	—	—	—	—	—	22	5	3	3	—	—	—	6	11	11	1	27	4	45	113	4	39	26	9	—	
Glyncorrwg	10,203	8,848	105	99	204	4	64	46	110	13	—	—	—	—	—	14	4	1	2	—	—	—	7	4	4	5	3	11	21	2	5	3	8	8	2	5
Llanidloes	26,628	24,640	202	199	401	12	173	137	310	25	—	—	—	—	—	22	2	2	2	—	—	—	6	6	6	5	3	11	21	2	5	3	8	8	2	5
Mansel	25,570	22,410	222	212	434	24	192	129	321	24	—	—	—	—	—	18	4	1	1	—	—	—	3	6	12	6	31	88	9	9	21	18	8	3	—	
Mountain Ash	36,386	32,370	332	288	620	23	223	166	409	35	—	—	—	—	—	22	5	3	9	—	—	—	7	12	6	32	4	29	53	2	28	16	11	2	2	
North Borough	33,340	29,400	247	224	471	16	200	171	371	22	—	—	—	—	—	9	3	1	1	—	—	—	6	12	5	27	4	46	94	4	23	17	16	5	2	
Opnose and Garw	26,981	23,560	243	215	458	17	159	117	276	20	—	—	—	—	—	5	5	3	3	—	—	—	4	5	3	18	31	56	12	5	6	2	1	1		
Pennarth	17,719	15,620	121	102	223	11	103	102	205	7	—	—	—	—	—	27	4	2	1	—	—	—	5	17	1	3	8	56	128	13	40	31	14	1	4	
Pontypridd	42,717	38,020	382	314	696	33	289	217	506	59	—	—	—	—	—	37	8	2	1	—	—	—	4	10	2	22	3	58	28	2	6	3	9	1	—	
Port Talbot Borough	6,447	8,455	68	71	139	1	63	62	125	5	—	—	—	—	—	4	35	8	1	—	—	—	3	3	8	15	6	46	2	39	108	8	27	23	5	4
Rhondda	141,346	116,480	1,099	981	2,080	76	887	672	1,559	110	—	—	—	—	—	65	19	7	7	—	—	—	17	38	16	106	15	169	408	36	169	96	55	7	17	
RURAL.																																				
Cardiff	29,056	34,660	308	268	576	14	210	164	374	20	—	—	—	—	—	9	1	4	2	—	—	—	5	11	11	31	3	46	109	15	11	13	3	4	2	
Cowbridge	10,813	12,270	140	126	266	5	69	69	138	14	—	—	—	—	—	3	3	1	—	—	—	—	4	4	2	2	14	1	9	29	5	16	10	1	1	
Gower	9,676	10,670	86	76	162	8	64	50	114	6	—	—	—	—	—	1	1	1	—	—	—	—	3	5	2	11	1	11	21	2	8	2	—	—	—	
Llantrisant and Lishtwit Parde	25,909	22,950	240	259	499	21	176	151	327	34	—	—	—	—	—	14	3	2	2	—	—	—	6	6	5	3	4	32	69	5	17	9	8	1	3	
Neath	39,783	39,560	330	326	656	17	247	207	454	36	—	—	—	—	—	21	5	2	4	—	—	—	4	13	1	26	4	43	105	11	37	19	18	5	3	
Trynhodd	29,209	30,520	310	274	584	19	200	174	374	27	—	—	—	—	—	20	3	2	2	—	—	—	4	14	3	39	1	31	96	3	10	20	10	2	3	
Pontcysyllte	36,569	32,520	274	241	515	13	227	172	399	35	—	—	—	—	—	21	3	1	1	—	—	—	6	4	5	41	5	45	92	9	22	12	25	3	—	

VITAL STATISTICS, ETC., 1945.

OF DEATH AT ALL AGES																		DEATH-RATE PER 1,000 POPULATION												RATE PER 1,000 LIVE BIRTHS		RATE PER 1,000 LIVE & STILL BIRTHS							
Intra-Cran. Vasc. Lesions	Heart Disease	Other Diseases of Circ. System	Bronchitis	Pneumonia	Other Respiratory Diseases	Ulc. of Stomach or Intestine	Diarrhoea (under 2 years)	Appendicitis	Other Digestive Diseases	Nephritis	Puerperal and Postnatal Septic	Other Maternal Causes	Premature Births	Con. Mal. Birth Def. Infant Dis.	Suicide	Road Traffic Accidents	Other Violent Causes	All Other Causes	All Causes	Birth-rate	Death-rate	Typhoid and Paratyphoid Fever	Small Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Tuberculosis of Respiratory System	Tuberculosis Other forms	Respiratory Diseases	Suicide and other Violence	Infantile Mortality	Scarlet, etc (under 2 years)	Puerperal and Postnatal Septic	Other Maternal Causes	England and Wales, Administrative County, Urban Districts, Rural Districts.	Urban.	Rural.
924	2,272	179	634	349	280	55	78	48	157	270	5	37	166	225	30	23	246	1,031	9,622	16.1	11.4	0.02	0.02	0.02	0.02	0.02	0.08	0.52	0.10	0.17	1.77	0.50	46	5.60	0.49	1.30	England and Wales.		
707	1,751	128	504	284	183	38	81	60	110	183	4	28	127	167	24	55	108	8,822	18.2	12.9	0.02	0.02	0.02	0.02	0.02	0.10	0.60	0.13	0.60	0.15	1.85	0.33	58	8.77	0.38	2.83	Administrative County.		
217	521	51	130	85	67	17	12	9	47	87	1	9	39	58	6	18	51	2,503	17.8	12.9	0.03	0.03	0.02	0.02	0.02	0.09	0.49	0.09	0.49	0.09	1.54	0.41	53	6.50	0.41	2.88	Urban Districts.		
88	177	4	31	19	16	3	4	4	6	15	—	2	9	7	1	10	29	891	15.6	15.2	—	—	—	—	—	0.33	0.44	0.03	1.70	0.46	46	6.60	—	3.21	Aberdare.				
56	132	8	30	25	7	—	3	3	6	13	—	3	10	12	2	19	51	803	20.3	18.8	0.03	—	—	—	—	0.16	0.77	0.16	1.70	0.63	35	4.05	—	3.91	Barry Borough.				
16	46	3	8	8	—	1	—	1	8	3	—	3	11	11	—	64	452	21.1	14.1	—	—	—	—	—	0.12	—	—	0.17	0.85	0.26	35	—	—	4.55	Brigend.				
36	109	14	27	15	9	—	3	3	8	18	—	17	17	2	—	2	13	207	10.8	—	—	—	—	—	—	0.16	0.78	0.12	1.59	0.53	68	4.43	—	—	Casphilly.				
45	113	4	39	20	9	—	9	12	6	13	—	12	27	2	—	18	454	20.7	12.6	—	—	—	—	—	0.06	—	0.08	—	0.08	0.61	0.14	1.89	0.81	94	12.13	—	3.91	Cowbridge Borough.	
29	73	5	21	18	8	—	3	3	3	13	—	10	16	4	—	10	49	371	16.0	12.6	—	—	—	—	—	0.08	0.57	0.16	1.81	0.46	62	4.99	—	4.37	Gelligarr.				
46	84	4	29	17	16	—	6	6	7	6	—	10	57	10	—	10	49	409	19.2	12.5	—	—	—	—	—	0.22	0.67	0.34	2.01	0.67	64	19.41	—	—	4.37	Glyncegwrwg.			
31	88	9	21	14	8	—	1	1	1	11	—	8	10	4	—	4	9	26	321	19.4	14.3	—	—	—	—	0.04	—	0.09	0.04	0.80	0.18	2.46	0.42	57	9.88	—	4.84	Llewelwr.	
18	73	2	23	8	8	—	1	1	1	4	—	8	10	1	—	3	3	28	208	14.3	13.1	—	—	—	—	0.03	—	0.08	0.12	1.92	0.82	57	9.88	—	4.84	Maesteg.			
59	128	13	40	31	14	—	1	4	1	8	—	10	10	3	—	6	28	208	14.3	13.1	—	—	—	—	—	0.19	0.32	0.06	0.83	0.51	31	4.48	—	2.05	Mountain Ash.				
13	28	2	8	3	3	—	1	1	1	3	—	8	10	1	—	3	3	28	208	14.3	13.1	—	—	—	—	0.12	0.39	0.24	2.13	0.59	37	—	—	7.25	Neath Borough.				
39	108	8	27	23	5	—	4	4	6	21	—	16	16	1	—	10	16	48	483	17.5	12.6	—	—	—	—	0.10	0.26	0.91	0.21	1.43	0.68	62	5.94	—	2.74	Queen and Garw.			
160	408	36	169	36	55	—	7	17	36	48	—	6	31	27	—	7	37	161	1,359	17.9	13.4	—	—	—	—	0.42	0.02	—	0.10	0.26	0.91	0.21	1.43	0.68	62	5.94	—	2.74	Port Talbot Borough.
46	109	15	11	13	3	—	2	2	6	9	—	1	8	6	—	—	2	42	374	18.4	10.8	—	—	—	—	0.43	—	—	0.06	0.26	0.03	0.78	0.35	35	3.51	—	1.71	Cardiff.	
9	28	5	16	10	1	—	1	3	4	7	—	1	4	—	—	2	27	158	21.7	12.9	—	—	—	—	—	0.09	0.09	0.09	0.19	1.12	0.37	37	—	—	5.88	Cowbridge.			
11	21	2	8	2	2	—	—	—	3	3	—	1	3	—	—	3	16	114	15.2	10.7	—	—	—	—	0.04	—	0.09	0.09	0.61	0.13	1.48	0.52	68	6.61	—	—	Gower.		
32	89	5	17	9	8	—	1	1	5	13	—	10	13	1	—	11	51	454	18.6	11.5	—	—	—	—	0.03	—	0.03	0.10	0.33	0.13	1.87	0.35	55	4.57	—	1.49	Llantrisant and Llantwit Fardre.		
43	105	11	37	19	18	—	3	3	13	15	—	1	5	1	—	9	44	374	19.1	12.3	—	—	—	—	—	0.03	0.07	0.65	0.10	1.41	0.36	46	5.14	—	1.66	Naith.			
31	86	3	18	26	10	—	—	—	6	26	—	1	6	2	—	1	9	44	374	19.1	12.3	—	—	—	—	0.03	0.07	0.65	0.10	1.41	0.36	46	5.14	—	1.66	Ponybont.			
43	92	9	22	12	25	—	—	—	8	14	—	—	3	15	3	—	10	41	399	15.9	12.3	—	—	—	—	0.03	0.03	—	0.03	0.65	0.09	1.81	0.40	63	—	—	—	Pontardawe.	





