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MONMOUTHSHIRE COUNTY COUNCIL.

PUBLIC HEALTH REPORT

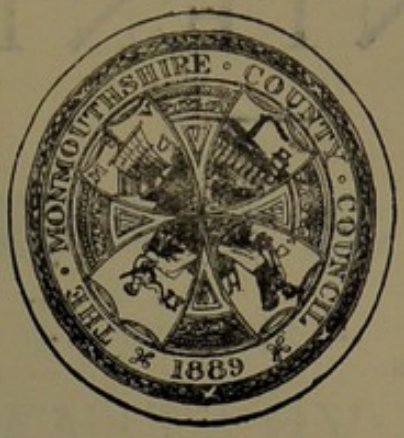
FOR THE YEAR 1922.

D. ROCYN JONES,

C.B.E., M.B., D.P.H.,

County Medical Officer.

THE COUNTY HALL,
NEWPORT, MON.
1st SEPTEMBER, 1923.



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CONTENTS.

REVIEW

OF THE

GENERAL SANITARY CONDITIONS

OF THE

COUNTY OF MONMOUTH

FOR THE YEAR 1922.

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SCOPE OF THE REPORT.

Under the Sanitary Officers Order, 1922, County Medical Officers of Health have been relieved of the obligation to include in their Annual Reports a digest of Reports made by Medical Officers of Health for the various Urban and Rural Districts within the County.

The Annual Reports for the year 1922, of the District Medical Officers of Health are the second of the series of " Ordinary " Reports. Reports of a full and detailed character, known as " Survey " Reports being required by the Ministry of Health at intervals of not less than 5 years, the Annual Reports for 1919 and 1920 constituting the first of the " Survey " Reports.

The County Annual Report has for the year 1922, been arranged in accordance with the requirements of the Minister of Health as set out in a Circular dated 20th January, 1923.

GENERAL STATISTICS.

Area (acres) 345,048.

Population (1921 Census) 358,436.

Do. (Estimated 1922) 369,205.

Number of structurally separate dwellings occupied, 66,925.

Number of private families, 75,898.

Rateable value, £1,733,983.

Sum represented by a penny rate, £6,662.

CENSUS, 1921.

The 1921 Census Returns for the County of Monmouthshire, recently published, bring to light some very interesting figures.

The increase in the population of the Administrative County since the last Census is 46,408 or 14·9 per cent. of the 1911 figure.

The Urban Districts showing the most marked increases in population during the inter-censal period are:—

Bedwellty	8,541	or 37·9 per cent.
Mynyddislwyn	4,920	or 49·3 per cent.
Ebbw Vale	4,480	or 15·8 per cent.
Abercarn	3,677	or 22·4 per cent.
Bedwas and Machen	3,551	or 7·2 per cent.
Abertillery	3,390	or 9·6 per cent.
Risca	2,596	or 18·3 per cent.
Abersychan	2,431	or 9·9 per cent.
Chepstow	2,095	or 68·7 per cent.

The Rural District showing the most marked increase is that of St. Mellons with 2,140 or 22·8 per cent.

No significant decreases were recorded, the greatest diminution of population being a loss of 60 persons in the Borough of Monmouth, representing 1·1 per cent. of the 1911 population.

Taking the figure for the whole of the Administrative County, the increase is accounted for by the excess of births over deaths, the emigrations being in excess of the immigrations.

The average number of persons per acre for the whole County (including the County Borough of Newport) is 1·3; in the Urban and Rural portions of the County the densities are 4·0 and 0·2 respectively. The highest density among the Urban Districts in the Administrative County is that of Pontypool, 29·8, and the lowest that of Monmouth Borough, 1·0

The figures relating to Housing will be found under that heading later in this Report.

VITAL STATISTICS.

BIRTHS:—The total number of births registered in the Administrative County during 1922, was 8,805, made up as follows:—

	Legitimate		Illegitimate		Total		Grand Total
	Male	Female	Male	Female	Male	Female	
Urban Districts ...	3816	3832	148	126	3964	3958	7,922
Rural Districts ...	419	435	16	13	435	448	883
Total	4235	4267	164	139	4399	4406	8,805

In 1921, there were 10,312 births; in 1920, 10,779 births; in 1919, 8,487 births; in 1918, 8,948 births; in 1917, 8,402 births; in 1916, 8,848 births; in 1915, 10,194 births; and in 1914, 9,455 births. The birth rate for 1922 is 23·8 per 1,000 persons living. In 1921, the rate was 28·3; in 1920, 29·2; in 1919, 22·9; in 1918, 24·8; in 1917, 23·1; in 1916, 25·7; in 1915, 28·59; in 1914, 30·2.

For the Urban Districts of the County the birth rate was 24·6 per 1,000 for 1922, and for the Rural Districts 18·8, compared with 29·5 and 20·4 respectively for 1921, and 29·8 and 24·5 for 1920.

There is a decrease in the birth rate as compared with that of last year.

The number of births of illegitimate children was 303, which gives a rate of 34·4 per 1,000 of the total births and ·8 per 1,000 of population. Last year the number was 329, equal to 31·9 per 1,000 births and ·9 per 1,000 population. For the year 1920, the figures were 364, equal to 33·8 per 1,000 births, and ·99 per 1,000 population.

The birth rate for England and Wales is 20·6.

DEATHS:—The total number of deaths registered in the Administrative County, as shown in the Registrar-General's table, was 4,238, as compared with 4,107 in 1921, 4,379 in 1920, 4,171 in 1919, 4,943 in 1918, 3,822 in 1917, 4,979 in 1916, 5,063 in 1915, 4,356 in 1914, and 4,272 in 1913.

The general death rate, calculated upon the estimated population of 369,205 works out at 11·4 per 1,000 living. In 1921 the rate was 11·3; in 1920, 11·9; in 1919, 11·7; in 1918, 15·3; in 1917, 11·7; in 1916, 12·9; in 1915, 15·3; in 1914, 12·8; and in 1913, 13·05. For the Urban Districts the rate for 1922, was 11·4, and for the Rural Districts, 11·9.

The death rate for the year is ·1 above the lowest on record.

The death rate for England and Wales is 12·9.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE COUNTY.

Causes of Death.	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.
All Causes	4238	735	211	146	154	235	537	966	1254
Enteric Fever	5	...	...	...	2	...	1	2	...
Small Pox	...	...	...	...	...	...	...	...	...
Measles	12	2	6	4	...	...	...	...	...
Scarlet Fever	7	2	2	1	1	1	...	...	...
Whooping Cough ...	63	21	28	13	1	...	...	...	...
Diphtheria	41	3	3	14	20	1	...	...	...
Influenza	297	19	20	13	7	16	58	76	88
Encephalitis Lethargica ...	5	...	1	1	1	1	...	...	1
Meningococcal Meningitis	...	...	...	...	...	...	...	...	...
Tuberculosis of the Respiratory System ..	253	3	3	2	7	74	102	58	4
Other Tuberculous Diseases	67	5	7	12	15	12	11	2	3
Cancer, Malignant Disease	308	...	...	...	...	6	29	142	131
Rheumatic Fever ...	29	...	...	...	12	4	8	5	...
Diabetes	34	...	...	...	3	4	6	12	9
Cerebral Hæmorrhage, etc.	238	...	...	...	...	...	7	80	151
Heart Disease ...	423	...	1	1	9	20	55	154	183
Arterio-sclerosis ...	52	...	...	...	...	...	...	18	34
Bronchitis ...	391	64	15	4	5	4	21	78	200
Pneumonia (all forms) ...	408	112	83	33	9	16	38	64	53
Other Respiratory Diseases	79	4	...	6	3	4	15	24	23
Ulcer of Stomach or Duodenum ...	18	...	...	...	...	1	7	8	2
Diarrhœa, etc.	76	35	7	7	2	3	5	5	12
Appendicitis and Typhlitis	23	1	...	...	5	5	10	2	...
Cirrhosis of Liver ...	14	...	...	...	...	...	1	11	2
Acute and Chronic Nephritis	71	1	...	1	3	5	13	31	17
Puerperal Sepsis ...	14	...	...	...	...	2	11	1	...
Parturition, apart from Puerperal Fever ...	33	...	...	...	...	10	22	1	...
Congenital Debility, etc. ...	324	317	1	...	2	3	...	1	...
Violence, apart from Suicide	166	7	15	17	19	19	38	37	14
Suicide	25	...	...	...	...	...	10	12	3
Other Defined Diseases ...	749	138	17	16	28	23	69	137	321
Causes ill-defined or unknown...	13	1	2	1	...	1	...	5	3

With the exception of the big increase in the number of deaths from Influenza, the reports of the District Medical Officers of Health do not show that there was any unusual or excessive mortality during the year.

INFANTILE MORTALITY:—The total number of deaths under one year of age throughout the Administrative County was 735; 679 in the Urban Districts, and 56 in the Rural Districts.

The rate per 1,000 births was 83·5, which is 8·0 lower than last year's rate.

In the Urban Districts the rate was 85·7 per 1,000 births, and in the Rural Districts 63·4 per 1,000 births.

In 1921 the Infantile Mortality rate was 91·5; in 1920, 87·9; in 1919, 88·0; in 1918, 97·6; in 1917, 84·3; in 1916, 88·4; in 1915, 128·5; in 1914, 106; in 1913, 115; in 1912, 105; in 1911, 149; in 1910, 112; in 1909, 104; in 1908, 142 per 1,000 births.

The rate for England and Wales is 77·0.

The Infantile Mortality Rate has fallen appreciably from last year's figure, and is the lowest recorded for the County. It is again above the rate for England and Wales, but it is still around the comparatively low mark which has been general since the County Maternity and Child Welfare Scheme came into existence. The average rate for the 25 years, 1891-1915, is 137·4. The average for the seven years, 1916-1922, is 88·7.

The number of deaths of illegitimate children under one year of age was 45, or 5·1 per 1,000 of all births, and 148·5 per 1,000 of illegitimate births. Last year the number of deaths was 61, or 5·9 per 1,000 of all births, and 185·4 per 1,000 of illegitimate births.

The measures used within the County for purposes of reduction of Infantile Mortality are fully dealt with in the Report upon Maternity and Child Welfare for the year 1922, which has already been published and presented to the Council.

Number of deaths occurring during certain age periods in children under one year of age:—

	Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 1 month	1—3 months	3—6 months	6—9 months	9—12 months	Total under 1 year
Urban Districts	199	52	30	26	307	115	79	86	97	684
Rural Districts	15	6	6	3	30	8	6	7	5	56
	214	58	36	29	337	123	85	93	102	740

N.B.—The figures in the foregoing table were supplied by the District Medical Officers of Health.

CAUSES OF DEATH OF CHILDREN UNDER ONE YEAR OF AGE.

Causes of Death.	No. of Deaths.			Rate per 1000 Births—Administrative County.
	Urban Districts.	Rural Districts.	Administrative County.	
Infectious Diseases ...	28	...	28	3·2
Diarrhœal Diseases ...	33	2	35	4·0
Wasting Diseases ...	282	35	317	36·0
Respiratory Diseases ...	172	8	180	20·4
Tubercular Diseases ...	8	...	8	·9
Other Causes	156	11	167	19·0
Totals ...	679	56	735	83·5

MATERNAL MORTALITY:—The number of women dying in, or in consequence of childbirth during the year was 47, 14 from Puerperal Fever, and 33 from other causes. This is equal to a rate of ·5 per hundred births.

NOTIFIABLE DISEASES.

The following is a summary of the weekly notifications received during the year from the Local Medical Officers, arranged under the respective headings for each Urban and Rural District:—

DISTRICTS	Estimated Population, 1922 for estimating Notification rate	Smallpox and Cholera.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Pneumonia.	Pulmonary Tuberculosis	Other Tubercular Diseases.	Erysipelas.	Puerperal Fever.	Cerebro Spinal Fever.	Acute Poliomyelitis.	Encephalitis Lethargica.	Ophthalmia Neonatorum.	Dysentery	Malaria.
URBAN.																
Abercarn	20,840	...	23	11	3	2	4	...	1	1	...	...	...	2	...	1
Abergavenny (Borough) ...	9,118	...	7	2	...	...	5	4	2	...	...	...	...	1	...	...
Abersychan	28,090	...	43	13	...	...	10	5	2	...	...	...	1	...	...	...
Abertillery	40 170	...	109	56	14	61	68	22	4	1	...	...	...	23	...	1
Bedwas and Machen ...	8,804	...	18	16	...	18	29	6	1	1	1	...	1	3	...	...
Bedwellty	32,340	...	100	68	1	2	23	13	9	...	...	...	...	2	...	...
Blaenavon	12,880	...	16	8	...	9	6	3	1	...	...	...	...	3	...	...
Caerleon	2,325	...	1	...	4	2	2	...	...	...	...	..	..	1	...	...
Chepstow	5,214	..	30	12	...	8	2	...	...	...	...	...	...	1	...	...
Ebbw Vale	36,830	...	166	19	2	18	84	21	12	1	...	...	2	4	...	...
Llanfrechfa Upper ...	4,854	...	9	1	...	4	1	4	1	...	...	...	1	...	...	...
Llantarnam	7,659	...	5	4	...	6	1	2	2	...	...	...	...	2	...	...
Monmouth (Borough) ...	5,172	...	34	2	...	...	1	...	...	1	...	...	...	...	...	...
Mynyddislwyn	15,410	...	79	24	...	...	3	2	1	1	...	...	...	...	...	...
Nantyglo and Blaina ...	17,010	...	18	3	1	134	25	...	5	...	...	...	...	11	...	...
Panteg	11,310	...	31	4	...	...	3	1	...	...	...	...	...	1	...	...
Pontypool	7,141	...	4	5	1	...	5	...	...	...	...	...	...	1	...	...
Rhymney	12,120	...	106	5	...	25	17	3	...	...	...	...	...	...	...	...
Risca	17,290	...	32	38	...	1	7	5	1	...	...	...	1	1	...	...
Tredegar	26,070	...	101	61	4	99	67	27	12	4	...	1	1	...	...	...
Usk	1,472	...	1	1	...	3	...	1	1	...	...	...	...	1	...	...
Totals ...	322,119	...	933	353	30	392	363	119	55	10	1	1	7	57	...	2
RURAL.																
Abergavenny	9,313	...	4	4	...	...	5	3	1	...	...	...	...	...	...	...
Chepstow	8,781	...	12	16	...	3	3	...	...	...	...	...	...	...	...	...
Magor	5 526	...	7	6	1	2	3	...	...	...	...	...	...	...	...	...
Monmouth	6 562		21	3	...	...	2	...	...	...	...	...	...	...	...	...
Pontypool	5,294	...	5	6	...	1	2	1	1	...	...	...	...	...	...	...
St. Mellons	11,610	...	13	9	1	5	8	2	1	1	...	...	...	...	...	...
Totals ...	47,086	...	62	44	2	11	23	6	3	1	...	...	...	...	...	...
Grand Totals ...	369,205	...	995	397	32	403	386	125	58	11	1	1	7	57	...	2

The number of cases removed to Hospitals, and the number of deaths from infectious diseases, were as follows :—

DISTRICT	CASES REMOVED TO HOSPITAL													DEATHS										
	Diphtheria	Typhus Fever	Erysipelas	Scarlet Fever	Tuberculosis	Ophthalmia Neonatorum	Cerebro-Spinal Fever	Acute Poliomyelitis	Enteric Fever	Puerperal Fever	Polioencephalitis	Pneumonia	Encephalitis Lethargica	Diphtheria	Typhus Fever	Erysipelas	Scarlet Fever	Tuberculosis	Ophthalmia Neonatorum	Cerebro-Spinal Fever	Acute Poliomyelitis	Enteric Fever	Puerperal Fever	Polioencephalitis	Pneumonia	Encephalitis Lethargica
Urban—																										
Abercarn	...	...	...	...		...	...	...	...	1	...	...	...	...	...	...	-		...	...	...	1	2	...	32	...
Abergavenny ...	1	...	...	7		...	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	...	...	5	...
Abersychan	...	...	...	...		...	...	...	...	...	...	...	...	3	...	...	...		...	...	...	...	...	...	21	...
Abertillery	8	...	...	25		...	...	...	4	...	...	...	...	7	...	...	2		...	...	...	1	2	...	53	1
Bedwas and Machen	1	...	...	...		...	...	...	...	1	...	...	...	...	...	...	...		...	...	...	...	1	...	8	1
Bedwellty	32	...	...	51		...	...	...	1	...	...	...	...	10	...	...	1		...	...	...	...	...	...	53	...
Blaenavon	...	...	...	...		...	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	1	...	1	...
Caerleon	...	...	...	...		...	...	...	...	...	..	...	..	1	...	..	...		...	...	...	...	...	...	2	...
†Chepstow	...	...	...	...		...	...	...	..	...	...	...	...	...	...	...	...		...	...	...	...	...	...	11	...
Ebbw Vale	18	...	...	2		...	...	...	2	...	...	...	...	...	...	...	...		...	...	...	...	...	...	50	1
Llanfrechfa Upper ...	...	...	...	...		...	...	...	...	...	...	...	...	...	...	...	1		...	...	...	...	...	...	1	...
Llantarnam ...	1	...	...	..		...	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	...	...	4	...
†Monmouth	...	...	...	...		...	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	...	...	5	...
Mynyddislwyn ...	9	...	...	2		...	...	...	...	...	...	...	...	1	...	...	...		...	...	...	...	...	...	18	...
Nantyglo and Blaina	...	...	...	...		...	...	...	...	...	...	...	...	1	...	...	...		...	...	...	...	1	...	23	...
Panteg	1	...	...	1		...	...	...	...	...	...	...	1	...	...	...	...		...	...	...	...	...	...	13	1
Pontypool	...	...	...	...		..	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	...	...	10	...
Rhymney	1	...	...	...		...	...	...	...	...	...	...	...	...	...	...	1		...	..	...	...	...	...	21	...
Risca...	1	...	...	...		...	...	...	...	...	...	...	...	6	...	...	1		...	...	...	1	1	..	11	...
Tredegar	1	...	...	...		...	...	...	5	...	...	...	...	7	...	...	...		...	...	...	1	4	...	40	1
Usk	...	...	...	...		...	...	...	...	...	...	...	...	...	...	...	...		...	...	...	...	...	...	...	...
Rural—																										
Abergavenny ...	...	...	...	2		...	...	...	...	...	...	...	...	...	...	...	1		...	...	...	...	...	-	2	...
†Chepstow	...	...	...	...		...	...	...	...	...	.	...	...	2	...	...	...		...	...	...	..	2		4	...
Magor	4	...	...	...		...	...	...	...	...	...	...	...	1	...	...	...		...	...	...	...	...	...	3	...
†Monmouth	..	...	...	...		...	...	...	...	...	.	...	...	...	...	...	...		...	...	...	...	...	...	4	...
Pontypool	..	...	...	...		...	...	...	...	...	...	...	...	1	...	...	...		...	...	...	...	...	...	3	...
St. Mellons	1	...	...	1		...	...	...	...	...	...	...	...	1	...	...	...		...	...	...	1	...	...	10	...
Totals	79	...	...	91		...	...	...	12	2	...	...	1	41	...	...	7		...	...	...	5	14	...	408	5

See Table later in this Report.

See Table later in this Report.

† Returns not received.

Analysis of the Total Cases and Deaths according to the Age Groups.

Disease	CASES NOTIFIED. AGE GROUPS.												
	Under 1 year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	Total all ages
Diphtheria	6	16	18	27	18	80	47	14	15	5	4	...	250
Typhus Fever	...	...	...	...	...	...	...	...	...	...	2	...	2
Erysipelas	...	...	...	...	...	2	3	...	3	14	19	3	44
Scarlet Fever	11	36	45	53	60	279	133	49	34	5	2	...	707
Tuberculosis	3	11	4	3	6	46	46	47	139	54	38	...	397
Ophthalmia Neonatorum	50	...	1	...	...	...	...	...	...	...	...	...	51
Cerebro Spinal Fever ...	...	...	...	...	...	1	...	...	...	...	...	...	1
Acute Poliomyelitis ...	...	...	..	...	...	...	...	...		...	..	...	...
Enteric Fever	...	1	..	...	1	1	3	3	3	3	2	...	17
Puerperal Fever... ...	...	...	...	...	...	...	..	...	8	...	...	...	8
Polioencephalitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	45	64	29	10	10	24	11	15	41	22	21	43	335
Encephalitis Lethargica	..	...	...	...	...	2	...	1	...	1	1	1	6
Totals .	115	128	97	93	95	435	243	129	243	104	89	47	1818

Disease	DEATHS. AGE GROUPS.												
	Under 1 year	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and over	Total all ages
Diphtheria	1	4	4	2	7	4	1	1	...	...	...	...	24
Typhus Fever	...	..	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	..	...	...	...	...	...
Scarlet Fever	1	1	...	1	...	1	...	1	...	...	...	...	5
Tuberculosis	5	8	1	2	1	8	11	37	65	32	36	4	210
Ophthalmia Neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever ...	...	..	...	...	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis ...	...	...	...	...	...	..	...	1	...	1	...	...	2
Enteric Fever	...	...	...	...	...	1	...	...	1	...	...	...	2
Puerperal Fever... ...	...	...	...	...	...	...	...	...	3	...	2	...	5
Polioencephalitis ...	...	...	...	...	...	.	...	...	2	...	...	...	2
Pneumonia	52	42	15	5	3	4	5	3	15	18	26	24	212
Encephalitis Lethargica	...	...	...	1	...	2	...	...	...	...	...	1	4
Totals .	59	55	20	11	11	20	17	43	86	51	64	29	466

N.B.— The figures for Chepstow, Mynyddislwyn, Tredegar, Blaenavon, and Monmouth Urban, and Chepstow and Monmouth Rural Districts are not included in the above, as they were not to hand at the time of going to press with this report.

ISOLATION HOSPITALS.

The following are the Isolation Hospitals at present in the County:—

Abergavenny Joint Hospital, Llanfoist (owned jointly by the Abergavenny Town Council and Abergavenny Rural District Council)	2	wards,	12—33 beds
Abertillery Urban Hospital, Coedcaeddu	2	,,	12—14 ,,
Bedwellty Urban Hospital, Coedmoeth	6	,,	55 ,,
Chepstow Joint Hospital, St. Arvans (owned jointly by Chepstow Urban and Rural District Councils)	5	,,	20 ,,
Ebbw Vale Urban Hospital, Beaufort	5	,,	10—12 ,,
Monmouth Borough Hospital, Buckholt	3	,,	10—12 ,,
Nantyglo and Blaina Urban Hospital, Coalbrookvale	3	,,	5—7 ,,
Tredegar Urban Hospital, Ash Vale, Nantybwch ...	2	,,	6—8 ,,

Alterations are now being carried out to the Tredegar Urban Hospital, which will increase the accommodation there to over 20 beds.

Cases from Abercarn, Bedwas and Machen, Caerleon, Llanfrechfa Upper, Llantarnam, Panteg, Risca and Usk Urban Districts, and Magor, Pontypool and St. Mellons Rural Districts are admitted to the Newport Borough Isolation Hospital, Allt-yr-yn, Newport, when accommodation is available, but in the reports of the majority of these districts comment is made upon the difficulty of securing adequate facilities at that Institution.

In the Rhymney Urban District an ordinary dwelling house is being utilised for infectious cases.

The facilities in the Administrative County for the isolation of the infectious sick are still totally inadequate. Several of the Isolation Hospitals now in use are unsuitable for the purpose.

At a Public Enquiry convened by the County Council on the 3rd October, 1921, which was attended by representatives of practically all the Urban and Rural District Councils in the County, the urgent need of a County Scheme for the provision of Isolation Hospital accommodation for the County was established, but the Commissioners reported that, although they were convinced of the necessity of such a scheme, they were unable to recommend that any Order should be made for the present, in view of the financial position of the County.

ZYMOTIC DISEASES.

The seven principal Zymotic Diseases are Small-pox, Measles, Scarlet Fever, Diphtheria (including Membranous Croup), Whooping Cough, Fever (including Typhus, Enteric, and Continued Fevers), and Diarrhœa.

These diseases caused 170 deaths and gave a Zymotic death rate of ·46 for the County, as compared with a rate of ·94 for the year 1921, 1·15 for 1920, ·61 for 1919, 1·26 for 1918, ·96 for 1917, ·72 for 1916, 1·05 for 1915, 1·73 for 1914, 1·29 for 1913, 1·86 for 1912, 2·5 for 1911, 1·22 for 1910, ·87 for 1909, 1·5 for 1908, for the County. This year's rate is the lowest on record for the County.

Table showing death rate and attack (notification) rate of Zymotic Diseases in the County of Monmouthshire during the year 1922.

Population for death rate and attack (notification) rate, 369,205.

Disease.	No. of Deaths.	Death Rate per 1000 of population.	No. of notifications.	Attack Rate per 1000 of population.	England & Wales death rate per 1,000 of population.
Small Pox	...	...	...	...	...
Measles (including German Measles)	12	·03	Not notifiable	. .	·15
Scarlet Fever	7	·02	995	2·69	·04
Diphtheria (including membranous Croup) ...	41	·11	397	1·08	·11
Whooping Cough ...	63	·17	Not notifiable	...	·16
Fever (including Typhus, Enteric and Continued Fevers)	5	·01	32	·09	·01
Diarrhoea (under two years of age)	42	·11	Not notifiable	...	...
Totals	170	·46	*1424	*3·86	...

* Notifiable Diseases only.

Comparison of Infectious Diseases Death Rates in Monmouthshire.

	Measles and German Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Typhoid.
Average for years 1907-1913 inclusive ...	·43	·07	·92	·13	·09
1914	·47	·13	·12	·17	·03
1915	·71	·09	·33	·19	·03
1916	·04	·06	·21	·12	·04
1917	·30	·02	·11	·06	·079
1918	·53	·03	·30	·08	·02
1919	·003	·06	·28	·07	·03
1920	·51	·06	·16	·18	·01
1921	·02	·03	·17	·12	·01
1922	·03	·02	·17	·11	·01

There are still instances of delay in the notification of Infectious Diseases. It is impossible to combat the spreading of such diseases unless prompt notification is made by the practitioner in attendance.

MEASLES.

Cases of this disease generally were sporadic. In the Tredegar and Abersychan Urban Districts it became epidemic at the latter end of the year, but the type was less severe than in previous outbreaks. In the Bedwas and Machen Urban District the disease was very prevalent, while it was only fairly prevalent in the Abercarn area.

SCARLET FEVER.

It is gratifying to note that there has been a considerable decrease in the incidence of this disease during the year under review. The mild type has been general, no severe cases being reported. The Medical Officer of Health of the Abertillery Urban District states that mothers, taking the disease as a mild influenzal attack, do not seek medical advice, thus making control very difficult.

DIPHTHERIA.

The Medical Officer of the Tredegar Urban District reports that this disease is much too prevalent in his district, but it is hoped that the increased isolation facilities offered by the improvements in the Isolation Hospital will lessen the incidence. In Abertillery the number of cases was slightly above the average, but were of a mild type.

ENTERIC FEVER.

There was a slight increase in the incidence of this disease in the County, five deaths occurring, as compared with four for last year. Unfortunately six cases arose in the Abertillery Urban District through a woman who had been ill for over three months before being brought to light as a case of true Enteric.

DIARRHOEA AND ENTERITIS.

The death rate from these diseases shows a marked decrease from that of 1921; falling from ·6 per 1,000 of population to ·21. The exceptionally dry summer of 1921, and the comparatively wet one of 1922, no doubt have their influence upon these figures. The Abertillery Council again caused handbills to be distributed calling attention to the effect of the " fly nuisance " upon these diseases.

CEREBRO-SPINAL FEVER AND ACUTE POLIOMYELITIS.

Nothing of note to report.

SMALL-POX AND VACCINATION.

The latter part of the year under review showed an increase in the occurrence of small pox cases in England and Wales, particularly in the Counties of Yorkshire, Nottinghamshire, Derbyshire, and London. Six cases occurred in the South Wales area, the one at Crickhowell being the nearest to Monmouthshire. The progress of the disease in the various areas is being observed by this Department, and a marked map is kept for the purpose.

There are two Small Pox Isolation Hospitals in the County, both situate at the Cefn, near Newport; one is the property of the County Borough of Newport and the other of the St. Mellons Rural District Council.

The administration of the legislation governing Vaccination has of recent years become very lax, but it is to be hoped that the outbreak of this year will lead to a general tightening up. We are largely an unvaccinated community and the strictest surveillance of contacts becomes necessary.

The Public Health (Small Pox Prevention) Regulations, 1917, give power to Medical Officers of Health of Sanitary Districts to perform vaccination or re-vaccination of persons coming in contact with any case of Small Pox.

The Cinema at Abergavenny was disinfected on it being ascertained that the person suffering from Small Pox at Crickhowell had previously attended there.

WHOOPING COUGH.

In two districts, Abertillery and Tredegar, this disease was reported to be widespread and very prevalent, while in the Abercarn area it was only fairly prevalent. The Medical Officer for Abertillery comments as follows, " the havoc wrought by this disease is not to be judged by the number of deaths it causes, but by the great amount of permanent ill-health it leaves in its trail."

ENCEPHALITIS LETHARGICA AND ACUTE POLIO-ENCEPHALITIS.

Nothing of note to report.

PUBLIC HEALTH (PNEUMONIA, MALARIA, DYSENTERY, Etc.), REGULATIONS, 1919.

Pneumonia was very prevalent in the Abercarn Urban District during the early part of the year, though the cases were not generally of a severe type. The notification of this disease provided for under these Regulations has shown but very little improvement and it is to be regretted that many practitioners pay

such small attention to the requirements of the Ministry of Health in this connection.

INFLUENZA.

The early months of 1922 saw an extensive epidemic of Influenza throughout the country. In Monmouthshire the disease was widespread and all classes of the community were affected. Fortunately the disease was generally of a much less severe type than that which characterised the epidemic of 1918-1919. District Medical Officers of Health were circularised to the effect that supplies of Anti-Influenza Vaccine could be obtained either through this Department or from the Ministry of Health direct, and their attention was called to the importance of the notification of cases of Pneumonia. In addition, they were offered the services of the Health Visitors of the County to assist them should the need arise.

All the Elementary Schools in the County were closed for a week, but this was extended in many instances. As many as possible were disinfected during the period of closure.

Set out below are brief synopses of the reports of the District Medical Officers upon the symptoms and peculiarities of the outbreak:—

Abercarn Urban.—Large number of young children affected. Main symptoms in addition to usual cough and pain in limbs have been intense headache and pain in lower lumbar region. Pneumonia rare as a complication, though many have shown Bronchitis (severe). Vomiting and intense congestion of the fauces have been features of the child cases.

Abergavenny Borough.—Not common in children, chiefly adolescents and adults, all ages. Majority characterised by muscular pain. Severe lumbar pain has been noted, also severe occipital headache. Bronchial type, cough, pain in chest and expectoration. Gastro-Intestinal type less common. No cases of skin eruption, nor of nasal suppuration. Pneumonia not observed as accompanying the epidemic nor as a sequela. Most noticeable feature, the after effect on the heart, one practitioner reported cardiac weakness in several cases after Influenza. Relapses have been the rule rather than the exception, and delayed convalescence is explained by the enervating climate to some extent. The general opinion seems to be that it is not necessary to notify Pneumonia. All are agreed that Vaccine should be used as a prophylactic during the fall of the year before an outbreak has begun.

Abersychan Urban.—Affecting people of all ages. Clinical characteristics as usual, but there have been a fair number of cases where gastric and intestinal disturbances have been most marked. Recovery rapid, and no deaths up to the present.

Abertillery Urban.—Considerable increase in cases of febricula in children, also Gastro-Enteritis, noticed early in January, but no apparent causes. The cases are of the following types:—

1. Gastro and intestinal disturbances.
2. Severe frontal headaches with pain on pressure over the frontal sinuses.
3. Considerable pain in lumbar region and in the muscles of back of neck.
4. Good deal of Bronchitis, Influenza rash similar to Scarlet Fever.

Victims not confined to bed for long periods, but most are affected with very great weakness, sunken eyes and furred tongue. Cases thought to be Scarlet Fever owing to strawberry tongue and rash, but no sore throat, are of a type of Influenza hard to distinguish. No case at present in Isolation Hospital. No increase in deaths from Pneumonia in this area. It has been requested that children be excluded from Cinemas and Sunday Schools.

Bedwas and Machen Urban.—Very prevalent in all parts. Ordinary symptoms are present, a great number suffering from gastric and intestinal symptoms. No case of Pneumonia notified. No death due to Influenza. Extreme giddiness one of the symptoms. Practitioners advised as to Vaccine.

Bedwellty Urban.—Very prevalent except in Pontllanfraith where there are a few acute cases. Elsewhere the majority of the cases are mild. Bronchial type reported from Blackwood and Aberbargoed. Schools closed for disinfection.

Blaenavon Urban.—Raging throughout whole district, shows no sign of abatement. Four deaths registered. Mild type on the whole, but more persons attacked than at last epidemic. Very few Pneumonia, but Bronchial cases prominent. Throat symptoms frequent, gastric type rare. Myalgia of lumbar muscles and of limbs very prevalent. Severe attacks of giddiness seem to be a feature.

Caerleon Urban.—Prevalent throughout district. Symptoms:—Gastric and intestinal troubles, severe headaches, pain in lumbar region and great weakness. Epidemic of a mild type, mostly with laryngitis and bronchitis. No deaths have occurred. One case of Pneumonia.

Chepstow Urban.—Practically free from Influenza. Few cases have occurred which might possibly be described as such. Symptoms are those of a somewhat severe " cold." No cases of Pneumonia notified.

Ebbw Vale Urban.—Most cases of a catarrhal type affecting the air passages, with severe Myalgia of the lumbar muscles. Also few cases of the gastro-intestinal form. My opinion is that this is an aggravated form of cold due chiefly to the lowered resistance of the system from poverty due to unemployment. Tendency to Pneumonia not very marked, except when there is negligence on the part of the patient. Two notifications of Pneumonia connected with Influenza traced to that cause. Medical practitioners have been reminded about the Anti-Influenza Vaccine.

Llanfrechfa Upper Urban.—Considerable number of cases during the past fortnight. All are of a mild type without any severe complications or special symptoms. Number of cases not known, as many do not seek medical treatment. One application has been received for Anti-Influenza Vaccine.

Llantarnam Urban.—Same as for Llanfrechfa Upper only more noticeable.

Monmouth Borough.—Widespread, but of very mild type. Less than 50 per cent. of cases call in medical aid. Period of incubation varies from 24 hours to 3 days. Mild fever, 100-101 degrees. Pulse 110. Backache, headache, pains in limbs, dry cough. Nil in chest. No complications except marked debility in convalescence. No cases of Broncho-Pneumonia. Few cases have intestinal disturbances, but a large number complain of giddiness. Extremely infectious, many instances of all the inhabitants of a house being infected. No vaccine has been used.

Mynyddislwyn Urban.—Raging, mild at start, getting more dangerous. Pneumonia often as complication.

Nantyglo and Blaina Urban.—Many cases, several streets with nearly every house affected. Some mild cases, generally spasmodic cough and chest trouble. Some intestinal. Not so fatal and not so many Pneumonia cases following as last time. Usual pain in back, vertigo, but the burning feeling in chest chiefly noticed. Different to the former epidemic in that a number of young children and babies get it. Considering the number of cases the death rate is not high.

Panteg Urban.—Milder type and fewer in numbers than the epidemic of 1919. Can suggest nothing more than is being done. Should the necessity for Anti-Influenza Vaccine arise, application will be made.

Pontypool Urban.—Same as for Panteg.

Rhymney Urban.—Still at its height throughout the district. Large majority of cases are of the febricula type, attacking all ages. About 8 cases of Influenzal Pneumonia notified. Four deaths attributed to Influenza in

the returns and four have occurred since. Majority of cases have Fever to 103 degrees for the first 3 or 4 days. Pains in the limbs and marked pains in the back. Laryngitis in adults and croup in children are common. Few severe cases of the gastric form, but not common. Otitis media and discharge from ears more frequent than in previous epidemics. Few cases of giddiness. Weakness out of proportion to the severity and length of illness has been marked as previously. Instructions given to Cinemas as to enforcement of Regulations.

Risca Urban.—Very prevalent, of a mild type, patients recovering completely in from three days to a week. Symptoms:—gastric and intestinal disturbances, myalgia of lumbar muscles. Rashes, giddiness and inflammation of accessory sinuses have not been marked. Pneumonia not at all prevalent.

Tredegar Urban.—Prevalent. Chief symptoms:—headache, temperature of 100 to 101 degrees, a feeling of sore throat. Physical signs in the throat of " Influenzal Crescents " over the anterior pillars of the fauces. There is much cough. In young adults the attack is over in four to five days.

Usk Urban.—Prevalent, but nothing so far in the nature of an epidemic. Clinical characters:—Adults appear to exhibit the respiratory type, and to a slight extent, the gastric, the ratio being about 10 to 1. Children appear almost invariably gastric in type, or mixed, and a large proportion become jaundiced about the fifth day. This peculiarity I have not so far noticed in former outbreaks, and it passes off within a week. Exceptionally severe myalgias, rashes and attacks of giddiness I have not so far encountered.

Abergavenny Rural.—The Influenza epidemic has not been severe and is abating. A supply of Vaccine sent to the Cottage Hospital could be used as wanted.

Chepstow Rural.—As in Chepstow Urban.

Magor Rural.—As in Caerleon Urban.

Monmouth Rural.—As in Monmouth Borough.

Pontypool Rural.—As in Usk Urban.

St. Mellons Rural.—Very prevalent, especially in industrial portion. Fairly mild type, lasting 4 or 5 days. Chief symptoms, giddiness, myalgia and some congestion of the bronchial tubes. There is no Pneumonia.

ERYSIPELAS.

Little comment is made by the various Medical Officers upon this disease. In the Abercarn Urban area a decrease in the number of cases has been noted.

OPHTHALMIA NEONATORUM.

Fifty-seven cases of this disease were notified under the Public Health (Ophthalmia Neonatorum) Regulations, 1914. The disease is fully commented upon in the County Maternity and Child Welfare Report for the year 1922.

Cases			Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	At Home	In Hospital				
57	55	2	57	...	...	...

PUERPERAL FEVER.

During the year 1922, notifications were received from the District Medical Officers of 11 cases, while in the return of deaths furnished by the Registrar-General the number due to Puerperal Sepsis was 14. In the year 1921, 17 cases were notified, with 12 deaths; in 1920, 24 cases notified with 20 deaths; in 1919, 19 cases notified with 11 deaths; in 1918, 6 cases notified with 3 deaths; in 1917, 4 cases notified with no death; while in 1916, 13 cases were notified, 8 being fatal. The notification rate per 1,000 births in 1922, was 1·1. The notification rate per 1,000 of population equalled ·02, and the death rate per 1,000 of population ·03.

Of the four deaths notified from the Tredegar Urban District, three were from Sepsis after abortion.

Full details of the cases will be found in the County Maternity and Child Welfare Report for 1922, which has already been published.

TUBERCULOSIS.

During the year 386 cases of Pulmonary Tuberculosis were notified, and 253 deaths were registered. Of other forms of Tuberculosis 125 cases were notified, and 67 deaths registered.

Tubercular Diseases.—Notification Rate per 1,000 of population:—

	1914	1915	1916	1917	1918	1919	1920	1921	1922
Pulmonary Tuberculosis	2·45	2·3	2·47	2·26	1·9	1·27	·78	·86	1·05
Other forms of Tuberculosis	·65	·68	·65	·51	·48	·37	·27	·21	·34

Tubercular Diseases.—Death Rate per 1,000 of population:—

	1914	1915	1916	1917	1918	1919	1920	1921	1922
Pulmonary Tuberculosis	·6	·80	·94	·82	·96	·77	·68	·7	·69
Other forms of Tuberculosis	·23	·28	·26	·27	·27	·21	·19	·2	·18

Tuberculosis is a disease which frequently extends over a period of years, so that in 1914 and the years immediately following, notifications were received of chronic and long standing cases, as well as the new cases coming to the knowledge of the practitioners in the County. It can now be surmised that generally the old cases have been detected and notified, and that the great majority of the cases notified in recent years are new cases only.

Summary of notifications by District Medical Officers of Health to the County Medical Officer, under the Public Health (Tuberculosis) Regulations, 1912, during the period from 1st January, 1922, to the 31st December, 1922.

Age Periods.	Number of Notifications on Form A.													No. of Notifications on Form B.					No. of Notifications on Form C.		
	Primary Notifications												Total notifications (i.e. including cases previously notified by other doctors).	Prim. Notifications				Total notifications (i.e. including cases previously notified by other doctors).			
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 & upwards	TOTAL.		Under 5.	5 to 10.	10 to 15.	TOTAL.		Poor Law Institutions	Sanatoria.	Hospitals.
Pulmonary—																					
Males ...	...	6	15	16	19	21	37	35	21	10	...	180	190	...	15	16	31	33	...	35	100
Females ...	...	4	14	12	21	33	56	23	9	1	...	173	180	...	14	12	26	28	...	20	20
Non-pulmonary																					
Males ...	2	4	17	6	13	4	5	2	1	2	...	56	59	...	17	6	23	25	...	7	7
Females ...	...	9	14	15	8	2	2	9	...	...	...	59	61	...	14	15	29	31	...	10	10
Totals ...	2	23	60	49	61	60	100	69	31	13	...	468	490	...	60	49	109	117	...	72	137

The notification of Tuberculosis in the County, though somewhat improved, is still unsatisfactory and consequently considerable difficulty is experienced, and delay is occasioned, in the compilation of statistics of the year's work, and the ratio of non-notified tuberculosis deaths to total tuberculosis deaths remains high.

The reports of the Tuberculosis Physicians to the Memorial Association for the year ended March 31st, 1923, are as follows:—

Dr. A. CARVETH JOHNSON (East Monmouthshire).

TIME TABLE.

Dispensary.		
Newport ...	4 Palmyra Place ...	Mondays: 10 a.m. (Men only). 2.30 p.m. (Women only). Wednesdays: 10 a.m. (Men). 2.30 p.m. (Children). Saturdays: 10 a.m.
Visiting Stations.		
Abergavenny ...	Y.M.C.A. Buildings	Every Thursday 2.30 p.m.
Chepstow ...	Tygastroggy, Moor Street	Every Friday 2.30 p.m.
Blaenavon ...		By appointment.
Monmouth ...	Borough Buildings.	First Friday in every month, 12 noon.

Attendance at Institute and Visiting Stations:—

Newport, 4 Palmyra Place . .	Mondays: 10 a.m. (Men only); 2.30 p.m. (Women only). Wednesdays: 10 a.m. (Men only); 2.30 p.m. (Children only). Saturdays: 10 a.m.
Abergavenny, Y.M.C.A. Buildings	Every alternate Thursday 2.30 p.m.
Chepstow, Tygastroggy, Moor Street	Every alternate Friday, 2.30 p.m.
Monmouth Borough Buildings	First Friday in every month, 12 noon.

" During the year under review, Dr. J. W. Davis Hyde acted as Assistant Tuberculosis Officer for East and West Monmouthshire areas, and his service was available for East Monmouthshire for a little over one third of the time.

In April, 1923, Col. W. K. Beaman, M.R.C.P., was appointed full time Assistant Tuberculosis Officer for the Newport and East Monmouthshire area, and I hope that the work will be considerably extended.

There was no visiting station at Abergavenny for part of the year, and the present premises are temporary only, but quite satisfactory.

There has been no visiting station at Pontypool, but there is prospect of rooms being available very soon which can be made into a well equipped visiting station, which will serve the whole of the Eastern Valley. When ready this will be visited twice a week.

SUMMARY OF WORK.

New cases examined			818
Found to be suffering from Tuberculosis:—			
	Pulmonary ...	160	
	Non-pulmonary ...	131	
		——	291
Contacts examined (included in above):—			
	Newport ...	165	
	East Monmouthshire	34	
		——	199
Admitted to Beechwood Hospital			226

East Monmouthshire.

Cases Examined:—

	Under observation at beginning of year.	Found to be suffering from Tuberculosis.			
		Pulmonary.	Non-Pulmonary.	N.A.D.	Obs.
Boys	... 34	2	15	45	29
Men	... 54	38	12	51	48
Women	... 53	32	11	45	50
Girls	... 60	3	18	60	46
	201	75	56	201	173

The deaths from tuberculosis, all forms, during the period were 107. Of these 60, or 56 per cent., had been seen, and 47, or 44 per cent., had not been referred to the Memorial Association for opinion or treatment.

Contacts.

Few contacts were examined, but it is hoped that this part of the work will be largely extended. Arrangements have been made for the services of all County Health Visitors to be made available, and it is hoped that both

cases in earlier stages of the disease and contacts to definite cases may be persuaded to visit a doctor earlier than at present.

Care Committee.

There is at present no Care Committee for the area, but it is hoped that one will soon be formed from the Tuberculosis Committee of the County Council.

Epidemiological Classification.

A. Acute Primary Infection.
C. Sub-Acute or Chronic Disease.

Class I. Representing disease of slight severity, limited to small areas or one lobe.

Class 2. Representing disease of slight severity, more extensive than Class 1.

Class 3. Representing advanced disease.

Class A. are cases with fever even at rest.

Class B. are cases with fever when ambulant and afebrile when at rest.

Class C. are cases afebrile when ambulant.

Boys.

International Classification.	A.			C.			Total.
	A	B	C	A	B	C	
I.	—	—	—	—	—	—	—
II.	1	—	—	—	—	—	1
III.	1	—	—	—	—	—	1
Total	2	—	—	—	—	—	2

Men.

International Classification.	A.			C.			Total.
	A	B	C	A	B	C	
I.	—	—	—	1	1	5	7
II.	—	—	—	5	—	2	7
III.	2	—	—	15	5	2	24
Total	2	—	—	21	6	9	38

Girls.

International Classification.	A. A	A. B	A. C	C. A	C. B	C. C	Total.
I.	—	—	—	—	2	—	2
II.	—	—	—	—	—	—	—
III.	1	—	—	—	—	—	1
Total	1	—	—	—	2	—	3

Women.

International Classification.	A. A	A. B	A. C	C. A	C. B	C. C	Total.
I.	1	—	—	2	2	3	8
II.	—	—	—	3	—	2	5
III.	3	—	—	15	1	1	20
Total	4	—	—	20	3	6	33

The Epidemiological Classification of new cases shows that the majority of cases, both men and women, when first seen are advanced cases with fever even when at rest. As was stated in last year's report there has been practically no improvement in the type of case seen since the start of the work eleven years ago.

Beechwood Hospital.

Number under treatment April 1st, 1922 ...	40
Number admitted during year 1922-1923 to March 31st	226
	266
Number discharged:—	
Sent to Sanatorium	37
Improved	83
Stationary	9
Worse	3
Left off treatment against advice	13
For disobedience	6
Admitted for observation and discharged as non-Tuberculous	41

Number of Deaths:—

Certified as primarily due to Tuberculosis	...	30
Certified as primarily due to causes other than Tuberculosis	... ...	3
Number still under treatment on March 31st	...	45
Number admitted since opening of hospital	...	1,760

There has been no falling off in the demand for beds at the Hospital.

It was opened as a temporary war hospital in 1915 for ex-service men only, and now after 7½ years the hospital is still kept full, and there is always a waiting list of patients.

Much of the accommodation is of a purely temporary character, and it becomes increasingly difficult to carry on.

Miss Gould, the Matron, deserves the highest praise for the way in which she has kept things going.

One of the most important parts of the work of the hospital has been the special ward for observation cases. These have been coming in in steadily increasing numbers. It is often a matter of extreme difficulty to make a definite diagnosis when the patient can only be examined once or twice a week, and no reliable temperature records can be taken.

In hospital the patients can be kept under close observation, tested with tuberculin, and if necessary they can be sent to the Royal Gwent Hospital for X-Ray examination.

Many patients are now being sent by the Ministry of Pensions for diagnosis and some of these are sent to Beechwood.

The results of treatment are quite satisfactory, the majority of patients have been better on discharge. The percentage of patients sent to sanatorium is not very large partly owing to the fact that many are sent to sanatorium direct without passing through the hospital as was done formerly, and also to the fact that patients who have had a period of sanatorium treatment are admitted to Beechwood for short periods of treatment after slight breakdowns. Many of these are able to resume work after.

The number of deaths is also not very large, but several coming under the headings " stationary," " worse," and " left off treatment against advice " have not lived very long after their return home.

Once again we have to thank the numerous friends of the hospital who have helped to entertain the patients by concerts, whist drives, and in numerous other ways.

In conclusion, I should like to thank the Medical Officers of Health of Newport and Monmouthshire, and also the General Practitioners in the area for their co-operation and assistance.

Dr. J. L. THOMAS (West Monmouthshire).

TIME TABLE.

Dispensary.		
Newport ...	4 Palmyra Place ...	2nd and 4th Tuesdays in the month 11 a.m. Saturday: 10.30 by appointment.
Visiting Stations.		
Maesycwmmer ...	3 Railway Terrace ...	1st Monday in the month at 10.30 a.m.
Trethomas ...	Dr. Barnard's Surgery	3rd Monday in the month, 1.30 p.m.
Ebbw Vale ...	Central Surgery ...	Every Tuesday in the month. New Patients at 11.30 a.m. Old patients at 1 p.m.
Blaina ...	Council Buildings ...	1st and 3rd Wednesdays in the month at 11.30 a.m. Old patients at 1 p.m.
Newbridge ...	30 Alexandra Place ...	1st and 3rd Fridays in the month at 10.30 a.m. Old patients at 12 noon.
Abertillery ...	72 Somerset Street ...	Every Wednesday in the month at 11 a.m. Old patients at 1 p.m.
Risca	Public Hall ...	2nd and 4th Fridays in the month at 10.30 a.m. Old patients at 12 noon.
Tredegar ...	Central Surgery ...	Every Thursday in the month at 11.30 a.m. Old patients at 1 p.m.
New Tredegar ...	Old Workmen's Hall	2nd and 4th Mondays in the month at 11 a.m. Old patients at 12.30 p.m.
Rhymney ...	Central Surgery ...	2nd Monday in the month at 1 p.m.

The statistics of the year's work are as follows:—

Number of new cases seen	1,009
Number diagnosed as suffering from T. B. ...	236
Of these the pulmonary were	166
And the non-pulmonary	70
Cases sent to Sanatorium	33
Cases sent to Hospital	53

The proportion of cases diagnosed as suffering from Tuberculosis in this year's figures shows a decrease of more than five per cent.

This proportion cannot be an exact one on account of the carrying over of cases from one year to another; but it would be interesting to know whether the absence of influenza in an epidemic form was answerable for some of the decrease in the number of those definitely diagnosed as tubercular.

In the monthly returns of deaths due to tuberculosis there is only one reference to influenza in the causation of death. The mention of these returns compels one to refer once again to the large proportion of cases certified as dying from tuberculosis who did not come under our notice.

Considering that notification is compulsory, it is not satisfactory to find that this proportion was as high as 63 per cent., and whereas over 60 per cent. of these again are of persons suffering from pulmonary Tuberculosis and over 21 years of age, most of them chronic cases, one cannot fail to be perturbed by the extent of the opportunity thus afforded for infection of other members of the household and particularly those who spend most time indoors. Among these the women and children of course, run the greatest risk.

In reviewing the work of the area for the past year it must be confessed that opportunities of infection are as unrestricted as ever. Households known and unknown to us are still exposed to infection from open cases. Patients who, under treatment at sanatorium and hospital have had their disease arrested, have returned home to the same unsatisfactory environment, and the benefit of treatment has often been lost.

The coalfield stoppage of 1921, with its succeeding " Poor Times " of scarcity of good food, and anxiety about getting it, must have had its influence in the fight. Especially in the Nantyglo and Blaina district have the people suffered in this way.

But the children were certainly helped in keeping up their resistance by the oil and malt provided by the Association.

But while some districts have suffered more than others by the "Poor Times," the personal factor, as shown by lack of cleanliness, in house and person, and generally careless living, still stands out predominant in increasing the ill effects of overcrowding. One must also remember that the physical advantages of living in a new house are often nullified by the mental worry as to the heavy rent and low wages to meet it, and the still heavy cost of living.

Since we are unable to remove and segregate the open cases of pulmonary tuberculosis we have still to face the problem of the almost universal infection of the young and help them to maintain their acquired resistance.

Our work must be more and more devoted to this object, and will be made more efficient by close collaboration with the maternity and infant centres, the school clinics, and, of course, the Medical Inspectors of school children.

Our dispensary experience has taught that extended exclusion from school attendance often results in strengthening resistance to disease.

Our work amongst the young would be more efficient if it were possible to have stated sessions for their examination; but this is rendered difficult by the number of visiting stations, and the fact that these are so widely scattered.

In a previous report I suggested a systematic Von Pirquet Test of all children commencing school attendance. This procedure has been recommended in America, and recently Sir Thomas Oliver has advocated it in this Country. The advantage of an early discrimination of the infected from the others seems obvious, and as the people of Wales are by this time quite used to the test, there does not seem to be any difficulty in recommending its universal practice.

Now that the help of Dr. Hyde will be entirely at the disposal of the West Monmouth area an endeavour will be made to do more in the work of examination of contacts.

The St. Brides Hospital will be a great and valuable addition to the accommodation now available at the sanatoria and hospitals.

But Monmouthshire is looking forward to very increased facilities for treatment when the Cefn Mably Hospital will be opened for service, it is hoped, during the year.

These extra beds at a convenient spot will be a great boon to the County.

There is much to be said in favour of the French preventorium system, and if the necessary funds were forthcoming there are, as in France and Russia, many commodious buildings, in suitable situations, where the young may be strengthened in body and mind.

At present the treatment of surgical tuberculosis is our greatest difficulty. Chronic cases take the beds of those needing urgent attention and these last too often become chronic before a bed is found.

We hope much from the intended system of surgical nurses working from large centres, and these in addition to the health visitors and district nurses ought to be able to make such patients comfortable at home and thus free the beds for those whose disease is likely to be cured if attended in time.

With regard to the advanced cases of pulmonary tuberculosis which come to us there is still the very common history of an attack of pleurisy or other painful or acute illness drawing attention to long standing trouble, and so we continue to get advanced cases.

Too often we have had the case of a woman broken down after a recent confinement; and we would have liked a " Grancher System " working for the proper care of the new-born baby.

Syphilis has frequently added to difficulty of diagnosis and complicated the treatment; and particularly in the pensioner, the conjunction of tubercle and syphilis has had to be considered. The effect of this conjunction has not always been in accord with the usual teaching of increased severity of disease.

In this connection one must mention the great assistance which the X-Ray department of the Royal Gwent Hospital has been to us in our work, and in many cases of doubtful nature it has been of great advantage for the Tuberculosis Physician to see the case with the Radiologist.

We have also to thank the staff of the various Cottage Hospitals in the area for help in this and other directions.

As in past years our collaboration with the County Health Authority has been close and cordial, and we have always endeavoured to reciprocate the kindly feeling displayed by the various general practitioners in the area.

Until the beginning of May, Dr. J. W. Hyde divided his work between East and West Monmouthshire areas—alternate weeks—but, as mentioned before, in future his services will be confined to West Monmouthshire, which will be very much to the good since he knows the area well and is an enthusiastic worker.

The office staff have given willing and conscientious help, and one should mention that Miss Allender after nine years of faithful and able assistance as clerk to the West Monmouthshire area left to get married in January last.

Nurse E. C. Griffiths has done the work as tuberculosis sister with great faithfulness and often in trying circumstances.

As usual the Head Office Staff have always been ready to help us in the work and to make it as smooth as possible."

Table I.—DIAGNOSIS.

Table shewing the number of Persons Examined for Diagnostic Purposes.

	Under observation pending diagnosis on the 1st of Jan., 1922.	Number of new cases, including contacts, examined during the Year ended 31st Dec., 1922	TOTAL.	Number found to be suffering from Tuberculosis.		Number with no evidence of active Tuberculosis.	Number still under observation pending diagnosis last day of Year ended 31st Dec., 1922.
				Pulmonary.	Other than Pulmonary.		
Boys	97	262	359	15	31	206	107
Men	73	361	434	98	26	236	74
Girls	94	272	366	16	34	222	94
Women	78	306	384	100	27	150	107
Total	342	1201	1543	229	118	814	382

Table II.—RECOMMENDATIONS.

Table shewing the numbers and form of treatment recommended by the Tuberculosis Physicians.

	Number found to be suffering from pulmonary tuberculosis during the Year ended 31st Dec., 1922	Form of Recommendation (Pulmonary Cases).					Total Number of recommendations for Pulmonary Cases.	Number found to be suffering from tuberculosis other than pulmonary during the Year ended 31st Dec., 1922.	Form of Recommendation (Non-Pulmonary Cases).					Total number of recommendations for Non-Pulmonary cases.
		Domiciliary	Institute	Hospital	Sanatorium	For Opinion			Domiciliary	Institute	Hospital	Sanatorium	For Opinion	
Boys	15	...	12	2	5	...	19	31	...	20	24	1		45
Men	98	4	29	86	17	...	136	26	1	7	26	...	...	34
Girls	16	...	11	11	...	...	22	34	...	24	16	...	...	40
Women	100	7	53	54	17	...	131	27	...	17	16	...	...	33
Total	229	11	105	153	39	...	308	118	1	68	82	1	...	152

Table III.—CONTACTS.

Table shewing the number of Contacts examined, with the result of Examination.

(These are included in the numbers in Table 1.)

	Number under observation pending diagnosis on the 1st Jan., 1922.	Number examined during the Year ended 31st Dec, 1922.	TOTAL.	Number found to be suffering from Tuberculosis.		Number with no evidence of active Tuberculosis.	Number still under observation pending diagnosis on last day of Year ended 31st Dec., 1922.
				Pulmonary.	Other than Pulmonary.		
Boys	7	16	23	1	...	8	14
Men	3	20	23	7	1	11	4
Girls	19	32	51	2	4	33	12
Women	4	24	28	7	1	12	8
Total	33	92	125	17	6	64	38

Table IV.—ELEMENTARY SCHOOL CHILDREN.

Table shewing the number of Children attending Public Elementary Schools, who were referred by the School Medical Officers for examination by the Tuberculosis Physicians, with the result of the Examination.

	Number under observation pending diagnosis 1st Jan., 1922	Number of children referred for examination during the Year ended 31st Dec., 1922	TOTAL.	Number found to be suffering from Tuberculosis.		Number with no evidence of active Tuberculosis.	Number still under observation pending diagnosis last day of Year ended 31st Dec., 1922
				Pulmonary.	Other than Pulmonary.		
Boys ...	14	27	41	...	1	27	13
Girls ...	11	31	42	...	10	25	7
TOTAL	25	58	83	...	11	52	20

Table IVa. Analysis of the cases shewn above as suffering from Tuberculosis.

		Total Number	Age Groups { Under 5	5 to 6	6 to 7	7 to 8	8 to 9	9 to 10	10 to 11	11 to 12	12 to 13	Over 13
Pulmonary	Boys ...	...	...	...	...	...	...	...	...	...	...	...
	Girls ...	...	...	...	...	...	...	...	...	...	...	...
Non-Pulmonary ...	Boys ...	1	...	...	...	...	...	...	1	...	...	...
	Girls ...	10	...	...	1	2	1	1	1	3	...	1
	TOTAL ...	11	...	...	1	2	1	1	2	3	...	1

Table V.—SANATORIUM TREATMENT.

Table shewing results of Sanatorium Treatment

	Number under Treatment 1st Jan., 1922		Number admitted during the Year ended 31 Dec., 1922		TOTAL		Number discharged fit for work			Number Improved	
							Pulmonary		Non-Pulmonary		
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Tubercle bacilli absent from sputum	Tubercle bacilli present in sputum		Pulmonary	Non-Pulmonary
Boys...	1	...	6	...	7	...	1	...	...	...	...
Men	12	...	33	1	46	...	11	6	...	10	..
Girls	4	...	...	2	6	...	1	..	1	3	...
Women	6	...	18	...	24	...	5	1	..	2	...
Total	23	...	57	3	83	...	18	7	1	15	...

Table VI.—HOSPITAL TREATMENT.

Table shewing results of Hospital Treatment

	Number under Treatment 1st day of Jan., 1922		Number admitted during the Year ended 31 Dec., 1922		TOTAL		Number discharged fit for work			No. sent to Sanatorium		Number Improved	
							Pulmonary		Non-Pulmonary				
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Tubercle bacilli absent from sputum	Tubercle bacilli present in sputum		Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
Boys	...	13	1	26	1	39	...	...	...	...	...	...	20
Men	22	8	115	26	137	34	...	...	..	...	...	6	10
Girls	3	7	8	15	11	22	...	...	..	13	...	68	19
Women	7	6	47	9	54	15	...	...	...	...	...	6	10
Total	32	34	171	76	203	110	...	...	...	13	...	99	59

Patients Treated (Sanatorium and Hospital) at:

Beechwood Hospital ...	...	84	
Cardigan House Hospital	...	14	
Glan Ely Hospital ...	...	162	
Pontsarn Hospital ...	....	1	
Mardy Hospital ...	...	3	
North Wales Sanatorium	...	24	
Hull After Care Colony	...	1	
Talgarth Sanatorium ...	...	62	
West Wales ,, ...	...	3	
North Wales Surgical Block	...	15	
Adelina Patti Hospital ...	...	3	
Cwmla Hospital	...	6	
Penhysgyn Open Air Home	...	3	
Preston Hall San. and Colony, Kent		1	
TOTAL	...	382	

for Pulmonary and Non-Pulmonary Cases.

Number Stationary		Number Worse		Number left off treatment against advice		Number discharged for disobedience		Number of Deaths.				Number still under treatment last day of Year ended 31st Dec., 1922.	
								Certified as primarily due to tuberculosis		Certified as primarily due to causes other than tuberculosis			
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
...	...	...	...	1	...	...	...	...	...	...	...	5	...
1	...	2	...	3	...	...	...	3	...	...	...	9	.
...	...	...	...	...	...	...	...	...	...	...	...	...	2
3	...	1	...	...	...	...	...	...	...	...	...	12	...
4	...	3	...	4	...	...	...	3	...	...	...	26	2

for Pulmonary and Non-Pulmonary Cases.

Number Stationary		Number Worse		Number left off treatment against advice		Number discharged for disobedience		Number of Deaths				Number still under treatment last day of Year ended 31st Dec., 1922	
								Certified as primarily due to tuberculosis		Certified as primarily due to causes other than tuberculosis			
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
...	4	...	1	...	2	...	...	...	1	...	...	1	10
5	...	1	...	6	4	1	...	9	...	2	...	30	10
1	...	...	...	...	2	...	...	1	1	...	...	3	9
2	1	1	...	4	1	1	...	6	1	...	...	14	2
8	5	2	1	10	9	2	...	16	3	2	...	48	31

Places of Residence of these Patients:—

URBAN DISTRICTS—

Abercarn ...	... 27	Caerleon ...	... 2	Nantyglo & Blaina	... 16
Abergavenny	... 17	Chepstow ...	... 14	Panteg ...	... 4
Abersychan	... 11	Ebbw Vale	... 61	Pontypool ...	... 10
Abertillery	... 39	Llanfrechfa Upper	... 3	Rhymney ...	... 17
Bedwas & Machen	... 13	Llantarnam	... 8	Risca ...	... 14
Bedwellty ...	... 51	Monmouth	... 9	Tredegar ...	.. 31
Blaenavon ..	... 6	Mynyddislwyn	... 7	Usk ...	... ...

RURAL DISTRICTS—

Abergavenny	... ...
Chepstow ...	... 4
Magor ...	... 2
Monmouth ...	... 5
Pontypool ...	... 3
St. Mellons ...	... 8
TOTAL	382

Table VII.—INSTITUTE TREATMENT.

Table showing Results of Institute Treatment of Pulmonary and Non-Pulmonary Cases.

	Number under treatment 1st day of Jan., 1922		Number admitted during the Year ended 31st Dec., 1922		TOTAL.		Number discharged fit for work.			Number Improved	
							Pulmonary		Non-Pulmonary		
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Tubercle bacilli absent from sputum	Tubercle bacilli present in sputum		Pulmonary	Non-Pulmonary
Boys	38	70	13	28	51	98	...	...	...	9	3
Men	215	40	75	17	290	57	...	...	...	39	5
Girls	56	75	14	28	70	103	...	...	...	6	11
Women ...	164	33	80	21	244	54	...	...	...	24	10
Total ...	473	218	182	94	655	312	...	...	...	78	29

Table VIII.—HOME TREATMENT.

Table shewing the results of treatment of Pulmonary and Non-Pulmonary cases, treated at home by the medical practitioner in consultation with Tuberculosis Physician.

	Number under Treatment 1st day of Jan., 1922		Number admitted during the Year ended 31 Dec., 1922		TOTAL.		Number discharged fit for work			Number Improved	
							Pulmonary		Non-Pulmonary		
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Tubercle bacilli absent from sputum	Tubercle bacilli present in sputum		Pulmonary	Non-Pulmonary
Boys	3	3	12	25	15	28	...	..	...	2	...
Men	140	18	61	18	201	36	...	...	...	17	2
Girls	4	5	13	29	17	34	...	...	...	...	1
Women	47	10	77	21	124	31	...	...	...	11	1
Total	194	36	163	93	357	129	...	...	...	30	4

Pulmonary and Non-Pulmonary Cases.

Number Stationary		Number Worse		Number left off treatment against advice		Number discharged for disobedience		Number of Deaths.				Number still under treatment last day of Year ended Dec. 31st, 1922	
								Certified as primarily due to tuberculosis		Certified as primarily due to causes other than tuberculosis			
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
...	1	...	...	...	...	...	...	2	2	...	...	40	8
25	3	...	...	2	...	...	...	25	1	...	..	198	4
...	2	..	...	1	...	...	...	5	1	...	...	58	1
15	3	...	..	...	...	...	...	36	1	...	...	169	4
40	9	...	...	3	...	...	...	69	5	...	...	465	3

home by the medical practitioner in consultation with Tuberculosis Physician.

Number Stationary		Number Worse		Number left off treatment against advice		Number discharged for disobedience		Number of Deaths.				Number still under treatment last day of Year ended 31st Dec., 1922	
								Certified as primarily due to Tuberculosis		Certified as primarily due to causes other than Tuberculosis			
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
...	...	...	...	...	...	...	...	2	...	...	..	11	28
12	...	...	...	...	...	...	...	25	3	...	...	147	31
...	3	...	...	...	...	...	...	1	2	...	...	16	23
7	2	...	...	...	...	...	...	23	1	...	...	83	27
19	5	...	...	...	...	...	...	51	6	...	...	257	114

LIST OF CASES OF TUBERCULOSIS NOTIFIED UNDER THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1912 & 1913, during the year ended December 31st, 1922, arranged according to Districts.

District and Sub-Districts.	Pulmonary	Other Tubercular Disease	Total
URBAN.			
Abercarn			
Cwmnantygynt ...	1	...	1
Cwmcarn	4	1	5
Newbridge	4	...	4
Crumlin	4	2	6
Trinant	2	1	3
Llanhilleth	2	...	2
Abergavenny	5	4	9
Abersychan			
Abersychan	7	5	12
Pontypool	2	...	2
Penygarn	1	...	1
Abertillery			
Llanhilleth	18	7	25
Abertillery	28	8	36
Aberbeeg	8	3	11
Six Bells	7	1	8
Cwmtillery	6	2	8
Blaina	1	...	1
Crumlin	2	...	2
Bedwas & Machen			
Maesycwmmer ...	5	...	5
Trethomas	14	5	19
Machen	4	2	6
Bedwas	2	1	3
Bedwellty			
Aberbargoed	6	4	10
Blackwood	2	3	5
Pengam	3	1	4
Argoed	4	...	4
Hollybush	1	...	1
New Tredegar ...	4	4	8
Fleur-de-lis	2	1	3
Blaenavon	5	3	8
Caerleon	2	...	2
Chepstow	2	...	2
Ebbw Vale			
Ebbw Vale	44	11	55
Cwm	14	4	18
Beaufort	20	6	26
Waunllwyd	1	1	2
Victoria	1	...	1
Carried forward ...	238	80	318

District and Sub-Districts.	Pulmonary	Other Tubercular Disease	Total
Brought forward ...	238	80	318
Llanfrechfa Upper ...	...	4	4
Llantarnam	1	...	1
Monmouth	1	...	1
Mynyddislwyn	1	2	3
Nantyglo & Blaina			
Nantyglo	12	...	12
Blaina	13	...	13
Panteg	3	1	4
Pontypool	5	...	5
Rhymney			
Rhymney	16	2	18
Abertysswg	2	1	3
Risca			
Risca	3	3	6
Crosskeys	2	...	2
Tredegar	63	31	94
Usk	...	1	1
RURAL.			
Abergavenny			
Deri		1	1
Oldcastle		1	1
Clytha	1	...	1
Abergavenny	1	...	1
Llanfoist	1	...	1
Chepstow	1	...	1
Magor	2	...	2
Monmouth	2	...	2
Pontypool	1	...	1
St. Mellons			
Marshfield	...	1	1
Bassaleg	4	...	4
Rogerstone	2	...	2
Rumney	1	...	1
Bettws	1	...	1
St. Mellons	...	1	1
Total	377	129	506

VENEREAL DISEASES.

The Treatment Centre for the County is at the Royal Gwent Hospital, Newport. Dr. P. C. P. Ingram is the Medical Officer in charge of the Centre.

The days and hours of the sessions are:—

Males.—Mondays at 4 p.m.
Wednesdays at 2 p.m.
Thursdays (old cases only) at 4 p.m.
Fridays at 6 p.m.

Females.—Mondays at 2 p.m.
Thursdays at 2 p.m.

Facilities for irrigation of cases of gonorrhœa during the intervals between the clinics are available at the Royal Gwent Hospital, Newport.

The bacteriological examinations in connection with the Centre are conducted at the County Laboratory by Dr. H. W. Catto, the County Pathologist and Bacteriologist, who has been approved for the purpose by the Ministry of Health.

Good results continue to accrue from the work of the Inquiry Officer, Nurse E. M. Walters, amongst women and children suffering from Venereal Disease. This officer visits female patients (old and new) to encourage them to undergo, and persevere with, treatment at the Clinic. She also attends at the Treatment Centre on the days fixed for female patients. The work accomplished by her during the year was as follows:—

No. of visits paid in the Administrative County:—

	1922.	1921.
To new cases which came to her knowledge and which had not undergone treatment	342	361
To old cases in which visits to the Treatment Centre had been discontinued before completion of treatment, also to old cases still under treatment ...	1342	1138
To members of Voluntary Agencies, District Nurses, etc.	265	280
To suspicious cases (under observation)	148	147
Total	2097	1926

An arrangement has been made whereby a bed is reserved for Monmouthshire women at the Venereal Diseases Hostel at Cheltenham, provided by the Gloucestershire County Council. Two new cases were sent there in 1922.

The services of Colonel P. J. Probyn, D.S.O., M.B., B.S., (London), D.P.H., were secured to deliver lectures to men upon the prevention and treatment of Venereal Diseases. The Lecture campaign commenced in November, 1922, and continued until April of 1923.

The following is the report of Colonel P. J. Probyn, upon the Lectures delivered in the County:—

"The Lectures given were 16 in number, delivered in various parts of the County, chiefly in the industrial areas.

The attendances on the whole were mediocre, very good audiences turned up at Rhymney, Blaenavon, Bedwas, Aberbargoed and New Tredegar, but what was lacking in numbers was made up in enthusiasm, for those who attended were most interested, as evinced by the very excellent questions put at the end of the lectures.

Enthusiasm must emanate from the Local Secretaries and this was mostly the case.

In most places I was invited to return, so it augurs well for the furtherance of the campaign.

The main theme of lecture was on the two chief Venereal troubles, Syphilis and Gonorrhœa, but special attention was given to sex hygiene and the tendency of the proper sexual relationship to young folks in a spiritual and natural manner, this would be greatly helped by occasional lantern lectures, exhibiting slides or even Cinema Films as issued by the Society for Combating Venereal Diseases, the quality and interest of which I can testify to.

I feel sure that the propaganda work will be of great value if persevered in, as everyone seemed to be most keen in obtaining information for stamping out the plague. I was glad to see the interest which some of the Schoolmasters and Boy Scout Organisers took in the subject and it points to good results in future.

The essentials of treatment and the privacy of same as carried out at the Royal Gwent Hospital must be driven home, also the advantages of taking the thing in hand during the early stages and the awful effects following in the trail of imperfectly treated disease as is carried out by quacks."

The following is the report of Dr. P. C. P. Ingram upon the results of the year's work at the Treatment Centre:—

"In the report of last year comment was made on the fact that for the first time since the Clinic was opened the total number of new cases attending during the year showed a decrease. This is apparent again this

year, but it is confined to those of the male sex, the females, which include children under the age of about fourteen of both sexes, shewing a definite increase.

The decrease in the number of patients generally, has been noticed throughout the country and is thought to be due to a lessened incidence of the disease. The increase here in the female incidence is I think not due to an increase of the disease but (i.) to the fact that Practitioners are more ready to send suspicious cases to Hospital, and (ii.) to the work of the Maternity and Child Welfare Centres in the County.

The results of the treatment given have on the whole been most satisfactory. The Clinic has now been established sufficiently long enough to appreciate the beneficent results of thorough Ante-natal treatment, and there have now been through the Clinic of the Gwent several children, who, thanks to the treatment their mothers have received, are perfectly healthy and show no trace of disease, while in some other cases the mothers themselves have now been under observation long enough after treatment to be discharged as cured.

For the high average of attendance among these patients I am again indebted to the Lady Inquiry Officer.

In conjunction with the Ophthalmic Surgeon of the Hospital, a number of cases of Interstitial Keratitis have again been treated during the past year. Their case histories have been analysed and the results show a distinctly gratifying record. A report upon these cases was communicated to a meeting of the Midland and South Western Ophthalmological Society and caused considerable interest, and it is being published in the Transactions of the Ophthalmological Society of Great Britain. Further special records are being kept of all patients suffering from this important phase of the disease.

Among the males the decline is noticed, principally in the cases of primary Syphilis, and this explains the fall in the number of examinations for the Spirochæta Pallida. This I think can be said to be due to a lessened incidence of the disease. There is on the other hand an increasing tendency for practitioners to refer to the Clinic for purpose of diagnosis, patients with obscure symptoms suggesting past Syphilis, with the result that the number of examinations for the Wassermann test shows a substantial increase. Many of these cases have been found to be suffering from the later forms of Syphilis and under treatment they have improved very considerably."

Details of the work carried out at the Laboratory and Treatment Centre during the year 1922, are as follows:—

1.—COUNTY LABORATORY, COUNTY HALL.

Return of Specimens Examined.

	1922.									
	For detection of Spirochaetes.		For detection of Gonococci.		For Wassermann reaction (Syphilis).		TOTAL.		GRAND TOTAL.	Previous Year (1921).
	Males	Females	Males	Females	Males	Females	Males	Females		TOTAL.
From County of Monmouth—										
Treatment Centre ...	84	8	415	143	633	294	1132	445	1577	1820
Practitioners ...	4	—	63	19	167	53	234	72	306	294
From County Borough of Newport—										
Treatment Centre ...	129	10	475	96	520	122	1124	228	1352	1224
Practitioners ...	5	1	68	20	148	69	221	90	311	276
From Other Districts—										
(All from Treatment Centre) ...										
Glamorganshire ...	1	1	18	7	15	3	34	11	45	21
Breconshire ...	—	—	8	—	2	4	10	4	14	7
Other Counties ...	—	—	1	1	2	3	3	4	7	2
Totals ...	223	20	1048	286	1487	548	2758	854	3612	3644

No. of doses of substitutes for Salvarsan supplied to Medical Practitioners:—

			1922.		1921.
Novarsenobillon	·6	grm. =	187	...	107
,,	·45	,, =	55	...	42
,,	·3	,, =	38	...	36
Galyl	·4	,, =	—	...	10
,,	·3	,, =	—	...	18
			280	...	213

The number of practitioners upon the register for the supply of salvarsan substitutes is nine.

2.—TREATMENT CENTRE.

(Royal Gwent Hospital, Newport).

Returns of Dr. P. C. P. INGRAM, Medical Officer of Centre, to the Medical Officer of Health, relating to persons residing in the County of Monmouth.

	1922.			1921.		
	Males.	Females.	Total.	Males.	Females.	Total.
1.—Number of persons dealt with at or in connection with the Out-patient Clinic for the first time and found to be:—						
Suffering from syphilis ...	90	66	156	197	96	293
,, ,, soft chancre ...	9	—	9	14	—	14
,, ,, gonorrhœa ...	93	30	123	136	24	160
Not suffering from venereal disease	37	43	80	32	—	32
Total	229	139	368	379	120	499
2.—Number of persons discharged from the Out-patient Clinic after completion of treatment for:—						
Syphilis	4	2	6	7	3	10
Soft chancre	7	—	7	4	—	4
Gonorrhœa	24	2	26	32	6	38
Not suffering from venereal disease	29	7	36	—	—	—
Total	64	11	75	43	9	52
3.—Number of persons who ceased to attend the Out-patient Clinic without completing treatment, and who were suffering from:—						
Syphilis	48	23	71	11	2	13
Soft chancre	4	—	4	2	—	2
Gonorrhœa	39	12	51	14	5	19
Total	91	35	126	27	7	34
4.—Total attendances of all persons at the Out-patient Clinic who were:—						
Suffering from syphilis ...	2218	1659	3877	3141	1493	4634
,, .. soft chancre ...	62	—	62	62	—	62
,, gonorrhœa ..	1266	265	1531	1565	214	1779
Not found to be suffering from venereal disease	105	78	183	63	—	63
Total	3651	2002	5653	4831	1707	6538

	1922.			1921.		
	Males.	Females.	Total.	Males.	Females.	Total.
5.—Aggregate number of "In-patient days" of treatment given to persons suffering from:—						
Syphilis	253	243	496	281	273	554
Gonorrhœa	268	77	345	147	137	284
Total	521	320	841	428	410	838
6.—Number of persons treated with Salvarsan substitutes	252	150	402	345	160	505
7.—Number of doses of Salvarsan substitutes given:—						
Name of drug—Novarsenobillon						
dose ·005 ...		—			2	
dose ·01 ...		5			11	
dose ·02 ...		12			—	
dose ·03 ...		—			13	
dose ·05 ...		24			38	
dose ·1 ...		3			9	
dose ·2 ...		122			87	
dose ·3 ...		192			136	
dose ·4 ...		2			5	
dose ·45 ...		565			582	
dose ·5 ...		68			18	
dose ·6 ...		612			1478	
Name of drug—Intravenous Galyl						
dose ·4 gm. ...		—			—	
Name of drug—Intramuscular Galyl						
dose ·3 gm. ...		—			—	
dose ·4 ,, ...		—			—	
Total		1605			2379	
8.—Examinations of Pathological material:—						
Specimens from persons attending at the Treatment Centre which were sent for examination to an independent Laboratory—						
For detection of spirochaetes ...		92			190	
,, ,, gonococci ...		558			529	
For Wassermann reaction ...		927			1101	
Others		4			14	
Total		1581			1834	

DISINFECTION.

Disinfection of Schools.

The disinfection of Schools is now carried out by the County Sanitary Inspector, and the "MacKenzie" Spray with a solution of "Kerol" is used.

Disinfection of Rooms, etc.

Briefly, there are two methods of disinfecting rooms in practice in the County, viz., either by gaseous disinfectants or by liquid disinfectants. Advantages are claimed for each system, but both are equally efficient if carried out thoroughly. The contentious point is the saving of time.

The disinfection of rooms is systematically done in the majority of the districts in the County, but complaints have been received by the County Authorities from outlying areas where no attempt has been made to disinfect after an outbreak of disease, while in other districts the lack of central administration for Rural Authorities has caused regrettable delays. It has also been reported that where gaseous disinfection is carried out, adequate measures to prevent the escape of the sulphurous acid gas or the formalin gas used, are not always taken.

Disinfection of Bedding, Clothes, etc.

There is a deplorable lack of facilities in the County for the disinfection of bedding, clothes, etc. In few districts only has provision been made, while the Risca Urban District Council has purchased a steam disinfector, but its installation has been deferred until such time as some contemplated alterations to the Council's premises are executed, when a building will be erected to house the apparatus. Some districts adjoining the County Borough of Newport make arrangements with the Newport Authorities for the work to be done, at a fee.

Other than the above, the prevailing measures are to include bedding, clothes, etc., in the room to be disinfected by a gaseous disinfectant, and where this is not done—and instances are known—the bedding, etc., is not disinfected.

One Medical Officer of Health in the County has for some years past pressed for the provision of a County Travelling Disinfector for dealing with bedding, etc., and it would seem that, having regard to the absence of satisfactory arrangements for most of the local Sanitary Authorities, that such a provision would go far towards removing the existing trouble.

SANITARY ADMINISTRATION.

Mr. W. E. Thorn, A.R.S.I., M.S.I.A., the County Sanitary Inspector, assists the County Medical Officer in his sanitary investigations. Where the local Council is concerned he works in co-operation with the District Sanitary Inspector.

His duties during the year may be summarised as follows:—

Investigations of—

Sanitary conditions of Schools.
Pollution of Rivers and Streams.
Causation of Outbreaks of Infectious Disease.
Water Supplies of the County.

Nuisances arising from—

Drainage, Sewerage and Sewage Disposal.
Refuse Disposal,
and the keeping of animals, etc.

Inspections of—

Dairies and Cowsheds.
Dwellings where insanitary conditions, overcrowding, etc., were reported.
Home conditions of persons suffering from Tuberculosis.

Taking of samples of water, milk, and sewage effluent for bacteriological and chemical examination at the County Laboratory; the disinfection of premises, etc., etc.

During the year 50 Schools, comprising 61 Departments, were disinfected after closure due to infectious diseases. An extract from a District Annual Report reads, " We have been relieved of considerable trouble and expense by the fact that the fumigation and general disinfection of Schools has been carried out by the County Sanitary Inspector."

Under the County Medical Officer's scheme for ensuring a clean and wholesome milk supply, as outlined in an Appendix to last year's Annual Report, 113 " informal " samples were taken. All the samples were examined by the County Pathologist for tubercle, zymotic disease and dirt contamination, and his comments will be found under " County Laboratory " later in this report.

Where an unsatisfactory result is shown, a letter of warning is sent by the Clerk of the Council concerned to the producer or retailer from whom the sample was taken.

Investigations have also been carried out where farmers and milk sellers have contemplated the selling of " Graded Milk " as provided for under the Milk and Dairies (Amendment) Act, 1922, and on one occasion an address was given to a meeting of farmers and retailers upon the working of this Statute.

A considerable amount of the statistical work of the department is also prepared by this official.

WATER SUPPLY.

Except for the somewhat dry period from the middle of May to July, the summer of 1922 was, fortunately for the water supply in many parts of the County, a wet one, and consequently, with one exception, no complaints of shortage were received. In the Rhymney Urban District the supply was slightly curtailed during the dry period mentioned above.

Further good progress was made with the Gwryne Fawr scheme of the Abertillery and District Water Board. Extensive excavations were carried out, and approximately 15,000 cubic yards of masonry were placed in position. With the improved plant now in operation even better progress is anticipated during the year 1923. The Gwryne Fawr water is being supplied to constituent areas through a 16in. steel main, pending the completion of the works.

The supply from the Shon Sheffrey spring and reservoir which meets the needs of the main portions of the Tredegar Urban District and large portions of the Bedwellty and Mynyddislwyn Urban Districts, is now being filtered. Two batteries of modern mechanical filters have been erected during the year under review. The filtered water is reported as being of a high standard of purity.

Tredegar has another source of supply from the Georgetown Works which receive the water of the Ton-y-fedw Spring, this is also of good quality.

The Rhymney Valley Water Board now distributes the water for the Valley previously controlled by the Rhymney and Aber Gas and Water Co., and other minor undertakings. Supplies are received from various sources, but chiefly from the Taf Fechan Water Board.

The water supply of the Ebbw Vale Urban District is obtained from the Llangynidr and Carno Reservoirs, which receive the upland surface water from the Llangynidr Mountain. The water is filtered, and samples have shown it to be actively plumbo solvent. The Urban District of Nantyglo and Blaina and a portion of the Tredegar Urban District are also supplied from this undertaking. Powers to acquire the gathering grounds of their supplies are being sought by the Ebbw Vale Council, as a result of pollution thereon.

The main water supply of Monmouth Borough is from the Buckholt, but in view of the liability of shortage in times of drought, the water mains in the lower portions of the district can be augmented by the Wyesham supply. This is rarely needed, and then only in exceptionally dry periods.

In the Abercarn Urban District new supplies from Cwmcarn and Kendon have been immense boons, although the latter water is very hard.

Part of the western portion of the Llantarnam area is still dependant upon springs, which, it is reported, are not above suspicion.

Improvements to wells have been effected in the St. Mellons Rural District, and a piped supply laid on to some houses previously without a sufficiency.

It is gratifying to note that the Village of Manmoel in the Bedwellty Urban District is shortly to be provided with a supply from the Sirhowy Valley mains.

SEWERAGE AND DRAINAGE.

While much has been accomplished in the connecting up of houses to the Western Valleys Main Trunk and the Sirhowy Valley Sewers, a great deal yet remains to be done. It is hardly necessary to point out the extreme urgency of this work from a public health point of view, and it is realised that some of the Authorities concerned could be more expeditious in the matter.

There is every prospect that the Rhymney Valley Main Trunk Sewer will be completed at no very distant date, when here again the question of connecting up will arise.

No change, for the better at any rate, has taken place in the Eastern Valley. The Afon Lwyd receives practically all the crude sewage matter, and becomes more offensive year by year.

Unfortunately, this acute state of affairs is likely to continue for a time, as by the Eastern Valleys (Monmouthshire) Joint Sewerage Board Order, 1923, which has received the confirmation of Parliament,

i. The period during which application for powers may be made to Parliament is extended until the year 1928.

ii. If at the expiration of the Parliamentary session of 1928 (or at such later date as may be fixed by any future Local Act or Provisional Order passed or confirmed by Parliament before such expiration) the Sewerage Board have not obtained the powers mentioned,

(a) the Confirming Act and the Local Act shall be repealed, and

(b) the United District shall be dissolved and the Sewerage Board shall be abolished and cease to exist.

At the present moment there does not appear to be much likelihood that the scheme will be proceeded with, but it is understood that if, prior to the year 1928, it is desired to take action for the provision of a sewer for the Eastern Valleys, it would be possible, if circumstances appeared to warrant such a course, to extend by a further Provisional Order the time specified in Article I. of the Order.

In only one district in this Valley is there any treatment attempted, and that is in the Panteg Urban District where the sewage of Griffithstown, Sebastopol and New Inn is first carried to tanks for sedimentation.

In the Borough of Abergavenny the drainage of the courts in Lower Mill Street, is unsatisfactory.

Subsidence has again caused trouble in the Rhymney Urban area, necessitating the relaying of some drains and the continual clearing of others.

Conversions to water closets of privies and earth closets, the dispensing with hand-flushed closets and the replacement of old types of pans by the pedestal type, are gradually taking place. Here again there is plenty of scope for the active Councils.

The District Sanitary Inspector reports that at Hafodyrynys, in the Abersychan Urban District, there is an objectionable pail closet system.

POLLUTION OF RIVERS.

The Rhymney River and the Afon Lwyd continue to serve as open sewers for the valleys through which they flow.

While improvements in the sewerage and drainage in the valleys of the County must lessen the amount of pollution of rivers and streams, the erection of new houses in areas not served by sewers, must cause an increase, and so the position remains about the same.

Investigations by the County Sanitary Inspector show that slaughter-houses, pig styes and manure heaps drain directly into rivers, and the depositing of house refuse from houses adjoining the river banks continues unabated.

It is no exaggeration to say that the rivers serving the industrial valleys are regarded practically throughout their courses as convenient dumping places for all kinds of refuse; offal from slaughter-houses, old mattresses and hair-dressers' refuse being examples.

The proximity of some of the local Councils' refuse tips to the river, aggravated by careless tipping, does not serve as a helpful model to others.

There is also considerable pollution by effluent from works, colliery washings, and slag tips.

HOUSE REFUSE AND SCAVENGING.

Scavenging is carried out in the industrial areas either by the local Council, by Contractors, or by both. Although in a few districts a daily collection of house refuse is undertaken, in most cases it is carried out at intervals of two or three days.

Tipping on land is practically general as the means for disposal, only two Councils having installed Refuse Destructors, viz., Abertillery and Pontypool Urban. The Sanitary Inspector to the last named district reports that an additional cell is now necessary to cope with the increased amount of refuse. It is becoming increasingly difficult to find new sites for tipping in many areas, and the provision of destructors is being considered by some Councils, as the only solution to what is fast becoming a serious problem.

Motor lorries are replacing horse drawn vehicles in several areas, and on account of the increased speed adequate covers should be fixed to prevent refuse being blown about. The collections should be made as early in the day as possible, before food shops open, and their deliveries commence.

No improvement is reported in those portions of Rural areas which adjoin industrial localities, where conditions are almost Urban, and where there is no system of refuse collection. It is hoped that attention will be given to this question by the Councils concerned, and if the Council themselves do not undertake the collection, no doubt a contract with the adjoining Council or their Contractors could in most cases be entered into.

HOUSING.

The following table shows the progress of the schemes of the District Councils in the County, for the erection of new dwellings, during the year:—

Position of Housing Schemes of the various Councils at 31st December, 1922.

	Total Number of Houses originally proposed to be erected.	Total number completed.	Total No. completed during 1922.	Remarks.
URBAN.				
Abercarn ...	702	112	112	50 at Llanfach; 62 at Treowen. 8 bungalows and 1 in addition, private enterprise.
Abergavenny ...	240	16	16	6 in addition, private enterprise.
Abersychan ...	1000	143	91	10 by private enterprise.
Abertillery ...	80	48	8	3 in addition, private enterprise.
Bedwas and Machen	400	144	92	3 in addition, private enterprise.
Bedwellty ...	1100	179	77	Blackwood 27; Argoed 16; Pengam 34.
Blaenavon ...	144	144	127	
Caerleon ...	—	—	—	Scheme held up. 6 erected by private enterprise.
Chepstow ...	—	—	—	No Council Scheme.
Ebbw Vale ..	240	298 houses 45 huts	204	Each hut accommodates two families.
Llanfrechfa Upper	60	16	16	1 in addition, private enterprise.
Llantarnam ...	175	16	16	
Monmouth ...				No Report received.
Mynyddislwyn ...	128	37	37	60 nearing completion.
Nantyglo and Blaina	186	84	84	2 in addition, private enterprise.
Panteg ...	160	101	36	7 in addition, private enterprise.
Pontypool ...	260	130	124	
Rhymney ..	150	50	50	At Pen-y-dre.
Risca ..	750	155	72	
Tredegar ..	500 brick houses 25 wooden bungalows	97 houses 25 bungalows	73	8 in addition, private enterprise.
Usk ...	—	—	—	
RURAL.				
Abergavenny ...	116	—	—	
Chepstow ...	130	—	—	8 by private enterprise.
Magor ...	—	—	—	14 by private enterprise.
Monmouth ...	24	10		No Report received.
Pontypool ...	20	20	—	4 by private enterprise.
St. Mellons ...	138	100	56	32 in addition, private enterprise; 43 more in course of erection.

There appears to be very little improvement in the activities of private builders, and the burden of the local Council is not appreciably lightened. The serious attention of the Government will have to be given to the question, in consideration of the enormous amount of overcrowding which exists throughout the country, and from which Monmouthshire suffers as badly as anywhere.

In some districts excellent work is being done under Section 28 of the Housing and Town Planning Act, 1919, but many houses which are wholly unfit for human habitation, and houses needing structural repairs, remain occupied through the lack of alternative accommodation.

SALE OF FOOD AND DRUGS ACT.

At the meeting of the Works and General Purposes Committee, held on the 13th July, 1920, it was decided that the County Medical Officer should exercise general supervision over the action to be taken in pursuance of the Acts and Regulations under the Sale of Food and Drugs Acts, and that he, the County Analyst, and, if necessary, the Clerk, should confer as to the detajls of the proceedings necessary to secure observance of the Acts and Regulations.

The Administrative County is divided into three districts for the purposes of these Acts, as follows:—

District A., under the supervision of Inspector T. H. Lewis, assisted by Mr. A. A. Coles, and comprising the Municipal Boroughs of Abergavenny and Monmouth, the Urban Districts of Abersychan, Blaenavon, Llanfrechfa Upper, Llantarnam, Panteg, Pontypool and Usk, and the Rural Districts of Abergavenny, Monmouth and Pontypool.

District B., under the supervision of Inspector G. G. Probert, assisted by Mr. T. R. Davies, and comprising the Urban Districts of Abercarn (part), Abertillery, Bedwellty, Ebbw Vale, Mynyddislwyn (part), Nantyglo and Blaina, Rhymney, and Tredegar.

District C., under the supervision of Inspector T. E. Serjent, assisted by Mr. J. R. Gamble, and comprising the Urban Districts of Abercarn (part), Chepstow, Llantarnam, Mynyddislwyn, and Risca; and the Rural Districts of Chepstow, Magor, and St. Mellons.

During the year 1,169 samples were examined by the County Analyst, Mr. G. R. Thompson, F.I.C., F.C.S.

The following schedule gives details of the samples taken for analysis and in which Police Court proceedings were instituted, arranged according to the respective districts:—

District in which sample was taken.	Nature of Sample.	Extent of Adulteration, etc. of Sample.	Result of Police Court Proceedings.
Bedwas & Machen Urban ...	Butter.	25·3% excess water ...	Dismissed—Warranty Defence.
Chepstow Urban ...	Milk.	38·33% deficient in fat	Same vendor. Fined £5.
Do. do. ...	,,	42·67% deficient in fat	
Monmouth Urban ...	,,	20·0% deficient in fat. ...	Dismissed.
Mynyddislwyn Urban ...	,,	8·71% added water ...	Fined £5 and £2 2s. 0d. Costs.
Panteg Urban ...	,,	35·0% deficient in fat ...	Dismissed.
Do. do. ...	,,	33·33% deficient in fat ...	Fined £5.
Do. do. ...	,,	11·0% deficient in fat. ...	Dismissed—Warranty Defence.
Do. do. ...	,,	18·12% added water ...	Fined £2.

Twenty-six vendors were cautioned during the year on account of samples of the following:—Milk 24, Egg Powder 1, and Rice 1.

In two cases of milk showing a deficiency in fat, no action was taken on account of the Circular 325 issued by the Ministry of Health and dated 17th July, 1922. It was suggested by this Circular that it is extremely undesirable that a prosecution should follow upon any sample of milk found to be deficient in fat, unless a series of tests from the same source show repeated default. It naturally caused a storm of protest throughout the country from those whose duty it is to administer the legislation providing for a wholesome milk supply. The Circular has since been withdrawn.

The Report of the County Analyst for the year is as follows:—

" I have the honour to hand you herewith my Annual Report as Analyst under the Food and Drugs Acts, covering the work done during the year 1922.

I have analysed 1,169 samples during the year which have been submitted to me from the following sources:—

From the Inspector in Division A.	345 samples
From the Inspector in Division B.	469 samples
From the Inspector in Division C.	331 samples
From the County Medical Officer of Health ...	12 samples
From Local Authorities in the County ...	12 samples

Of this total number, almost exactly two-thirds have been milk samples, i.e., 782 milks have been examined which in my opinion is a good proportion to have been taken; of this number 36 have proved adulterated or " below standard "—4·60 per cent. of the milk samples taken.

The greater number of cases against which I have certified were for deficiencies in fat; we had 23 such, and in most cases the deficiencies were serious, ranging from a minimum of 4·33 per cent. to as high as 42·67 per cent.

Without going too much into detail I would mention that we had 15 samples with a deficiency below 10 per cent., 2 ranged between 10 per cent. and 15 per cent., and 6 were 20 per cent. and over; these latter 6 were serious and were respectively 20 per cent., 30·67 per cent., 33·33 per cent., 35 per cent., 38·33 per cent., and 42·67 per cent.

The samples certified as containing added water were 12 in number, and of these 11 contained less than 10 per cent., the worst case being a sample containing 18·12 per cent. added water. Only one sample was found which was not only deficient in fat but contained added water as well, i.e., 8·24 per cent. deficient in fat and with 3·76 per cent. added water.

No case occurred of Dyes or Preservatives being found, so that we have on the whole a satisfactory state of things upon which to report as to Milk supply.

Classified in my usual manner, the details for the year are as under:—

(a) According to content of fat:

Under 3%	3 to 3·49%	3·5 to 3·99%	4 to 4·49%	4·5% and over.
25	256	333	128	40

(b) According to content of solids not fat:

Under 8·5%	8·5 to 8·69%	8·7 to 8·89%	8·9 to 9·09%	9·1% & over
13	167	277	223	102

The rate of adulteration and average composition is better than we have had since 1914, and in spite of the fact that we have so many samples deficient in fat (but which are included for the purpose of average) the composition of the milk samples for the year is:—

Fat ... 3·67% Solids not fat ... 8·84%.

To illustrate my point as to improvement in quality I give below the average composition since 1914:—

Year.	Fat.	Solids not Fat.	Percentage of Adulteration.
1922	3·67%	8·84%	4·60%
1921	3·52%	8·84%	5·20%
1920	3·58%	8·61%	4·38%
1919	3·73%	8·74%	5·07%
1918	3·67%	8·63%	7·59%
1917	3·68%	8·71%	10·67%
1916	3·79%	8·73%	10·30%
1915	3·67%	8·74%	8·35%
1914	3·61%	8·72%	5·20%

I venture to point out that these figures show the return to the pre-war rate of adulteration.

With the improved condition as to composition in our milk supplies, a still further general improvement is to be expected under the provisions of the new " Milk and Dairies Act " when sufficient time has elapsed to allow of its enforcement.

The Butter samples over the year have proved very satisfactory, for we have not met with a single case of admixture or substitution of foreign fats; the content of moisture has also well shewn, as only one sample contained an excess; true in this case the excess was heavy being 25 per cent. above the maximum allowed and allowing that the butter in question cost, say 2/- per pound, this would represent a charge for water at fivepence per pound or 4/2 per gallon of water employed to add to the weight of the sample. I suggest this represents a fairly heavy water rate.

The admixture of Boric acid as a preservative in butter is subject to careful control as is evidenced by our not finding a single sample in which boric acid was found to exceed the limit of 0·5 per cent.

Two samples of " margarine mixed with butter " contained exactly the permitted amount of butter which may be so admixed under the provisions of the 1907 Act, i.e., ten per cent., and it is perhaps a little difficult to understand the wisdom of this arbitrary limit when it is freely admitted that margarine does not contain those vitamines which are found in butter, whereas, of course, it would follow that an admixture of the two materials would contain a proportion of these food advitants, ranging higher with the percentage of butter so admixed.

With special pleasure I would refer to the fact that objection has not had to be taken as in previous years as to rancidity of the butter samples, for you will recall that you raised a question some time ago as to the right to sell as butter that which was so extremely rancid as to be uneatable; no such cause of com-

TABLE SHOWING THE NUMBER OF SAMPLES TAKEN IN EACH DISTRICT.

DISTRICT.	Milk.	Butter.	Lard and Lard Compound.	Baking Powder	Self raising Flour.	Custard Powder.	Egg Powder.	Coffee.	Ground Rice.	Jelly and Jelly Crystals	Pepper.	Rice.	Bun Powder	Sponge Mixture	Seidlitz Powders	Mustard.	Peas.	Condensed Milk	Ground Ginger.	Cinnamon	Ground Mace	Blanc Mange Powder.	Pearl Barley.	Tapioca.	Cake Flour.	Cocoa.	Arrowroot.	Borax	Sago	Custard Pudding	Egg Substitute	Lemonade Crystals	Sugar	Corn Flour	Fish Paste.	Citrate of Magnesia.	Table Cream	Jam.	Demerara Sugar.	Cream of Tartar.	Desiccated Cocoanut.	Margarine	Totals.	No. of Samples found to be adulterated.				
																																											Milk	Egg Powder	Butter	Rice	Total
URBAN.																																															
Abercarn	35	3	3	12	12	1	12	12	...	12	12	3	...	...	...	12	1	...	...	...	...	1	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	63	5	...	...	...	5
Abergavenny	72	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	72	6	...	...	...	6
Abersychan	43	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	43	...	...	...	...	...
Abertillery	56	4	4	4	4	12	...	...	...	6	12	3	1	12	...	...	12	...	...	...	...	3	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	99	12	...	...	...	...
Bedwas and Machen...	11	12	12	12	12	1	1	...	...	12	12	12	...	...	...	1	12	...	...	...	...	1	1	...	1	12	1	...	...	...	...	...	...	...	...	...	...	...	...	...	31	1	...	1	...	1
Bedwellty	58	4	3	5	5	4	...	1	...	8	12	3	1	...	...	...	12	...	3	...	...	1	1	...	4	1	1	...	...	1	4	1	...	3	...	...	1	...	1	...	...	121	...	...	...	1	1
Blaenavon	44	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	44	...	...	...	...	...
Caerleon	7	1	1	1	1	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	13	...	...	...	...	...
Chepstow	10	12	1	1	2	1	1	...	..	1	12	12	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	24	12	...	...	...	12
Ebbw Vale	63	12	12	1	12	2	...	...	...	12	12	12	...	...	...	...	...	...	...	1	1	12	...	...	12	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	85	3	...	...	...	3
Llanfrechfa Upper ...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Llantarnam	16	3	3	...	1	2	1	...	...	1	12	12	...	...	...	1	1	...	...	...	...	...	...	1	...	3	...	...	...	...	1	...	...	...	...	...	...	...	...	...	38	...	...	...	...	...
Monmouth	21	...	12	12	...	...	...	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	27	1	...	...	...	1
Mynyddislwyn ...	16	12	12	1	12	1	...	...	...	...	...	1	...	...	...	1	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	32	12	...	...	...	12
Nantyglo and Blaina	29	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	29	1	...	...	...	1
Panteg	100	...	1	1	...	...	1	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	108	9	1	...	...	10
Pontypool	15	...	...	...	...	...	...	...	...	...	...	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	15	...	...	...	...	...
Rhymney	22	12	12	1	12	2	...	...	1	12	1	12	...	1	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	12	...	...	...	1	...	...	...	...	...	43	1	...	...	...	1
Risca	40	3	4	4	3	1	1	3	...	12	4	1	...	...	..	3	1	...	1	...	...	...	2	2	...	...	...	...	...	...	12	...	...	1	...	...	...	...	...	...	76	...	...	...	...	...
Tredegar	72	12	12	12	12	12	...	...	...	...	12	1	...	...	...	...	1	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	92	...	...	...	...	...
Usk	5	1	12	2	...	1	12	1	...	...	...	12	...	...	1	...	...	1	...	...	...	...	1	...	1	1	1	1	...	...	...	...	1	...	...	...	...	1	...	3	29	1	...	...	...	1
RURAL.																																															
Abergavenny ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chepstow	12	2	2	1	2	1	1	...	..	1	12	12	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	29	...	...	...	...	...
Magor	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Monmouth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pontypool	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	1	...	...	...	1
St. Mellons	7	...	12	1	3	1	1	1	...	1	1	12	...	...	...	...	...	...	1	...	...	...	...	12	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	25	...	...	...	...	...
TOTALS ...	761	33	38	29	33	22	11	11	1	28	30	30	2	3	1	9	10	1	5	1	1	7	3	6	17	15	3	1	1	1	11	2	1	6	1	1	1	1	2	1	1	3	1145	35	1	1	1	38

Some samples taken in Mynyddislwyn area are included in the Bedwellty area return.

plaint has been found over the year and on the question of rancidity in edible fats I am pleased to be able to state that the Lard samples sold have been exceedingly good in this respect, for only one sample contained more than one per cent. of acidity, which limit is in my opinion a perfectly wise and reasonable limit as between buyer and seller.

The production of edible fats to-day has reached a high state of perfection; machinery of the finest, technical control of the best obtainable, is employed, and it is clear that the intention of the large manufacturer is as far as possible to supply good and wholesome fat foods to the Public.

There have been 56 samples of Flour examined including the so-called self-raising flours and which I have passed as satisfactory, except one; wheat of excellent quality was used throughout and in those samples where the addition of acid and alkali had been employed to render them self-raising or self-aerating I have found materials of excellent purity used.

The one sample to which exception was taken was a curious one for it was by some means transformed through the excessive addition of bicarbonate of soda and acid phosphate into what was really a good quality baking powder; it was not a flour at all and at the time of discovery I was much exercised in my mind as to the results which might have happened had an attempt been made to use it as flour. I believe a genuine mistake had been made by the manufacturer in the labelling, but I fancy the housewife who had tried to make a cake or loaf from this flour would have wondered what on earth had occurred after it had been placed in the oven, but the results would at least have been amusing.

As hitherto I have most carefully sought in all substances examined as " pudding stuffs " for arsenic, and whilst in nearly every case there have been no traces at all, not a single sample has been found to exceed the very small limit imposed, i.e., no sample has shewn even one hundredth of a grain of arsenic per pound and I should here specially wish to mention that although there have been certain well known articles found in various parts of the Country to be contaminated by arsenic, each and every sample of cocoa examined by me has proved free from all traces, so evidently we have escaped this particular brand or consignment.

I referred in one of my Quarterly Reports to a sample of Egg Powder which I found not only to contain no egg at all, but further to be of absolutely no value as a baking powder or adjunct to baking; an explanation was forthcoming eventually from the manufacturer that it was at the time of manufacture a good and efficient article as a baking powder, yet had become damaged through age and exposure to damp and this was quite in accord with the opinion that I had already expressed to your learned Clerk when discussing the matter with him.

The " Facing " of rice appears to be gradually on the decline. I think probably it has been found that the Public are not so much led by the glossy appearance of the faced rice as formerly, for I think without a doubt there were cases wherein a poor quality grain had been talc-coated to make it appear of very much better quality, but practical results failed to shew the expected improvement. At any rate we have not met with those glaring cases during the year and only one sample contained talc to excess, but even then the excess was not what one could term a very heavy one; still it is extremely difficult for the retailer to control this irregularity as no simple means are available to detect an excess, indeed the analytical determination is not easy when great accuracy is wanted.

As already reported in my Quarterly Reports to you the general quality of the articles submitted has been of the highest, and I cannot say that any really gross case of adulteration has been found outside the milk samples, but certificates have been issued against 41 samples over the year which on the total number received gives a percentage adulteration at the low figure of 3·51 per cent. for the year.

Again in my Quarterly Reports to you I have detailed the exact nature of all samples received during the various quarters hence you would perhaps prefer for the sake of brevity, that I should summarise the work under the headings which are approved by the Ministry of Health and which are as follows:—milk 782, milk products such as separated and condensed milk, and butter 36, lard and margarine 42, sugar 3, pudding stuffs 215, beverages 29, spices and condiments 47, drugs 4, potted meats 1, and peas preserved and/or dried 10.

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

Report of the County Analyst for the year ended 31st December, 1922.

(1) Milk and Cream not sold as Preserved Cream.

	(a) Number of samples examined for the presence of a Preservative.	(b) Number in which a Preservative was reported to be present.
Milk	782	Nil
Separated Milk	3	Nil
Cream	Nil	Nil

(2) Cream sold as preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the labels as to preservatives were correct.

(i) Correct statements made ... ... Nil

(ii) Statements incorrect ... ... Nil

(iii) Percentage of Preservative found in each sample.	Percentage stated on Statutory label.
Nil	Nil

(b) Determinations made of Milk Fat in Cream sold as Preserved Cream.

(i) Above 35 per cent. ... ... Nil

(ii) Below 35 per cent. ... ... Nil

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved Cream in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed.

Nil

(d) Particulars of each case in which the Regulations have not been complied with, and action taken.

Nil

(3) Thickening substances.—Any evidence of their addition to cream or preserved creams:— Nil

Action taken where found ... ... Nil

(4) Other observations, if any ... ... Nil

PUBLIC HEALTH LABORATORY.

Facilities are offered to all Medical Practitioners in the Administrative County, free of charge, for bacteriological examinations, and the services of the Pathologist and Bacteriologist are available for any other assistance which may be required in the diagnosis of cases of disease. The following table shows the number of specimens examined during the year and also in the previous year. The majority of the sputum tests were conducted for the Welsh National Memorial Association, whilst practically all venereal diseases specimens came through the treatment centre at the Royal Gwent Hospital, Newport.

Table showing nature of specimens submitted for examination and the results thereof:—

Nature of Specimen.	No. Examined.		No. Positive.		No. Negative.	
	1921	1922	1921	1922	1921	1922
Wasserman Test for Syphilis	2214	2037	1087	896	1127	1141
Smears and Urines for Gonococcus ...	1124	1332	258	265	866	1067
Serum for Treponema Pallidum ...	342	242	140	91	202	151
Sputa for Tuberculosis, etc.—						
For Tuberculosis Physicians ...	1829	1911	368	375	1461	1536
County Cases	187	305	46	57	141	248
Concentration Methods	200	103	—	—	—	—
Mixed Infections	257	167	—	—	—	—
Throat Swabs for Diphtheria ...	6045	2561	330	135	5715	2426
Widals	69	53	16	10	53	43
Hairs for Ringworm	56	105	22	45	34	60
Blood Films and Counts	51	52	—	—	—	—
Autopsies	2	1	—	—	—	—
Tissues for Section	91	159	—	—	—	—
Urines for Chemical Examination ...	159	229	—	—	—	—
Pus	34	66	—	—	—	—
Effusions	14	15	—	—	—	—
Vaccines	39	61	—	—	—	—
Waters	60	41	—	—	—	—
Milks	58	139	—	—	—	—
Miscellaneous	211	277	—	—	—	—
Total	13042	9856	—	—	—	—

Remarks by the County Pathologist upon the above figures:

The total number of specimens examined at the County Laboratory during the year 1922, shows a diminution of 3,186, as compared with 1921, this being more than accounted for by the smaller number of throat and other swabs for Diphtheria being received. Indeed it will be seen that the number for this group of specimens is smaller than that of 1921 by 3,484, and this implies an actual increase by nearly 300 specimens in the other classes of examinations.

The incidence of Diphtheria throughout the Administrative County has not been as heavy as in the year 1921, the notifications being 397, as against 515. From a perusal of the figures in the foregoing table it will be seen that the number of " Positive " swabs came to 135, and as this figure includes a certain proportion of re-examinations of Convalescent Diphtheria cases and also a certain number of detected carriers, the natural deduction is that the actual primary cases of the disease, examined bacteriologically, must fall far short of 135. Now as the number of notifications of Diphtheria amounted to 397, of which, we must take it, only 100-120 cases (about 30 per cent.) were examined bacteriologically, it follows that 70 per cent. of the cases were diagnosed on

Clinical grounds alone, unless the swabs were examined elsewhere, which I think unlikely. Everyone is agreed as to the desirability of the Physician in charge of a patient with sore throat making his own diagnosis, and deciding upon and following out his own line of treatment without waiting for a bacteriological report, but from the statistical point of view it would have been more satisfactory had a higher percentage than 30 been investigated bacteriologically. Contrasting this state of affairs with what obtained in 1921, we find that the notifications numbered 515, while the " Positive " swabs totalled 330. After making the same allowances for re-examinations of positive cases, and carriers, we see that of these 515 cases, 60 per cent., were confirmed bacteriologically—a much more satisfactory result from the statistical point of view. It would appear desirable for statistic purposes that in every case in which a Clinical Diagnosis of Diphtheria is arrived at, a swab should immediately, as a matter of routine, be taken either by the practitioner in charge of the case or by the Medical Officer of Health to whom the case is notified, because it is only thus that we can obtain a true idea of the actual incidence of this disease.

Owing to the prominence given to the Milk question throughout the whole country during the year under review, and the agitation which led to the Ministry of Health issuing the Milk (Special Designations) Order of 1922, it was thought advisable to start on an investigation of the milk supplies throughout the Administrative County, the object being not so much to determine the quality of the milk in regard to its chemical composition—a line of work which properly belongs to the County Analyst's Department, and which is dealt with under the Sale of Food and Drugs Act—but to ascertain by bacteriological methods, the degree of cleanliness and wholesomeness of the milk at the time of its being sold to the consumer. The investigation was spread over three districts, at the start, and is still continuing and thus it is hoped gradually to make a survey of the whole County.

The examinations undertaken in the case of each sample have been:—

1. The enumeration of the total number of bacteria.
2. The estimation of the B. Coli content.
3. The microscopical examination of the centrifugalized deposit for the detection of starch granules, gross particles of dirt, pus, blood, etc.
4. The microscopical examination of the cream and centrifugalized deposit for Tubercle bacilli.
5. Cultural examination for Diphtheria, Typhoid, Paratyphoid, and Dysentery Bacilli.
6. Guinea pig inoculations for the detection of B. Tuberculosis.

7. In addition, the common antiseptics were always tested for qualitatively, as naturally the presence of any of these bodies would have had an influence on the bacterioscopic picture. These were never found.

In the Milk (Special Designations) Order of 1922, the Ministry of Health lay down certain standards which must be conformed to before the milk can be sold as " Certified," " Grade A.," or " Pasteurised " Milk. The question of freedom from tuberculosis is also introduced in the qualification " tuberculin tested," which can be added to the words " Grade A." where this condition has been complied with. " Certified " milk implies that all the animals of the herd supplying the milk have passed the tuberculin test.

As regards " Pasteurised " milk we are not immediately concerned with this as there is very little of it, if any, done throughout the County at the present time, but it behoves us to consider the standards laid down for "Certified " and " Grade A." milks, and accept them as ideals to be aimed at and attained.

A milk to be fit for sale as " Certified " Milk must not contain more than 30,000 organisms per c.c. or B. Coli in 1/10 c.c.

A milk to be fit for sale as " Grade A." milk must not contain more than 200,000 organisms per c.c. or B. Coli in 1/100 c.c.

Of the 139 samples of milk examined at the County Laboratory, 125 belong to this research and from the results obtained they can be classified under six different headings:

1. Those which conform to the standard laid down for " Certified " milks 31
2. Those which conform to the standards laid down for " Grade A." milks 14
3. Those which conform to the standards laid down for " Grade A." milk as regards the total number of bacteria, but contain B. Coli in 1/100 c.c. though not in less 21

   (This group would constitute borderline cases).
4. Those which are unsatisfactory in that they possessed a high bacterial content (this in several cases numbering many millions), but are satisfactory in respect of their B. Coli content 20
5. Those which are unsatisfactory because of a high B. Coli content, though not containing more than 200,000 bacteria per c.c. 6

6. Those which are unsatisfactory on account of the high bacterial content as well as a high B. Coli content 33

Thus we see that of 125 samples of mixed milks as retailed to the consumer 45, or 36 per cent., were of a satisfactory standard of purity, 59, or 47·2 per cent. were frankly unsatisfactory, while 21, or 16·8 per cent., formed a borderline group. In no instance were the Bacilli of Diphtheria, Typhoid, Paratyphoid, or Dysentery isolated, whilst with respect to the Bacillus Tuberculosis, this was discovered on two occasions by means of the animal inoculation test. The farms implicated were visited by the County Veterinary Surgeon, the County Sanitary Inspector, and the officials of the local Authority, and the diseased animals in each instance identified, removed from the herd and dealt with satisfactorily. The conclusion to be drawn from the results arrived at, if we are to take these as a fair index of the condition obtaining generally throughout the County, is that about one-third only of the milk supply retailed to the consumer conforms to the standards of purity which can be looked upon as satisfactory: as regards the remainder there is considerable room for improvement.

Passing on to the samples of water, whereas in 1921 a good many were only examined bacteriologically, in 1922, as a matter of routine, all the samples were examined chemically as well as bacteriologically; so that although the number of water samples is not as high as in the previous year the actual work connected with this special group has more than doubled.

Of the Venereal specimens a reduction is noted in the examinations undertaken for Syphilis (both blood and exudates) but there is an increase in the Gonorrhœal group. The number of examinations for Spironema Pallidum amounted to 70 per cent. of those of the previous year, and the number of positives worked out at 65 per cent. of those of 1921.

The question arises whether this indicates a distinct commencing diminution in the incidence of Syphilis, due to the measures which have been adopted to deal with this disease.

In this connection there are two interesting facts noticed, viz.:—

1. During the first six months of the year the proportion of " Positives " to " Negatives " was 41 : 60 = 68%
2. During the second six months of the year the proportion of " Positives " to " Negatives " was 29 : 55 = 52%

Again:

The number of Secondary lesions examined for Spironema Pallidum during the first six months was ... 12

The number of Secondary lesions examined for Spironema Pallidum during the second six months was ... 6

Thus a distinct decline of Syphilis of the skin and mucous membranes is noted during the course of the year. Further, a point to which, to my mind, a certain degree of importance is to be attached is that, during the last six months, it was noticed, when questioning patients as to where they had contracted the infection, that in the majority of instances an answer was given proving that the infection was hexogenous as regards the County and County Borough.

The Medical Officer in charge of the Clinic has dealt with this question more at length.

The rest of the specimens do not call for any particular comment. Under the heading " Miscellaneous " are included specimens of:—

Cerebro-Spinal Fluids.

Fæces.

Secretions from Eye.

Blood Cultures.

Blood for Sugar Content.

Vomits and Gastric Contents.

Complement Fixation Tests for Tuberculosis.

Haemagglutination Tests, etc.

This group also includes experiments carried out on animals under 39 and 40 Vic. Cap 77, Certificates A3 and B1, licence for which has been granted me by the Home Secretary . The experiments included inoculations for the detection of B. Tuberculosis and the identification of organisms such as the B. Welchii, Pneumococcus, Kleb's Loeffler Bacillus, etc., and were reported to the Home Office on 31st December, 1922.

DAIRIES, COWSHEDS AND MILKSHOPS.

These are periodically visited throughout the County.

In a few districts commendable zeal is shown by the officials in securing improvements to Cowsheds, but generally the position is much about the same, and many insanitary and unsuitable structures exist.

From two districts, Abertillery and Rhymney, an insufficient supply of milk is reported.

The year 1922 saw a definite move towards the provision of a pure and wholesome milk supply for the public in the form of the Milk and Dairies

(Amendment) Act, 1922, and the Milk (Special Designations) Order made thereunder. One of the most important features of the Act is the granting of power to Local Authorities to refuse or revoke the registration of any milk retailer who is persistently in default as to the quality and cleanliness of his milk, thus endangering the public health. Further, it is required that separate Registers for cow-keepers and purveyors be kept.

The Milk (Special Designations) Order provides for the grading of milk, and is a purely optional measure. The four grades provided for being:—

Certified.

Grade A. (Tuberculin tested).

Grade A.

Pasteurised.

The County Council are empowered to grant licences to producers of Grade A. Milk, the Ministry of Health issuing the licences to producers of the other grades. Distributors' licences are in each case granted by the Local Authority concerned.

In order to secure a uniform working of this legislation throughout the Administrative County, conferences of the District Medical Officers and District Sanitary Inspectors were held at Newport, when a Memorandum and standard requirements were agreed upon. The Memorandum, etc., has since received the approval of the County Council, and copies have been supplied to each District Council for their consideration.

FOOD INSPECTION, SLAUGHTERHOUSES AND BAKEHOUSES.

As will be seen in the Table following, many of the Urban Districts in the County have an efficient system of Food Inspection. It is regrettable to note that there are districts in which little or nothing is done to prevent unwholesome food being sold to the public. Unfortunately the shiftless tradesman is sometimes to be found, who cares little about the quality of the goods he sells when poverty creates a demand for "cheap lines." In such shopping centres as Pontypool, Chepstow and Monmouth, and the thickly populated areas of Llanfrechfa Upper and Llantarnam, a system of Food Inspection is needful. In districts where continual supervision is exercised it has been found that traders willingly co-operate by putting aside goods of a questionable character for the Inspector to see.

Table showing the amounts of Unsound Food condemned in the various Urban Districts:

DISTRICT.	Fish.	Meat.	Bottled and Tinned Foods, including Corned Beef, Milk, Fish, and Fruit.	Bacon.	Offal, etc.	Cooked Meat.	Fruit.	Miscellaneous (Potatoes, etc.)
Abercarn ...	...	...	30 lbs.	...	...	...	...	...
Abergavenny	...	...	8 tins.	...	...	...	...	...
Abersychan ...	...	328 lbs.	27 tins.	420 lbs.	...	...	...	...
Abertillery ...	7 boxes & 70 lbs.	322 lbs.	155 tins.	...	About 120 lbs.	93 lbs.	2 seives.	...
Bedwas and Machen ...	...	200 lbs.	266 tins.	...	...	...	...	...
Bedwellty ...	28 lbs.	589 lbs.	586 lbs., 1,519 tins, 327 bottles	593½ lbs.	...	36 lbs.	137 lbs.	1199 lbs. 381 pkts.
Blaenavon ...	...	...	154 tins.	...	...	...	8 barrels.	14 cwts.
Caerleon ...	...	...	...	...	...	...	...	
Chepstow ...	...	...	...	...	...	...	...	
Ebbw Vale ...	...	415 lbs.	16 tins.	...	...	...	...	2 cwt.
Llanfrechfa Upper ...	...	...	...	...	...	...	...	...
Llantarnam ...	...	...	...	...	...	...	...	...
Monmouth ...	...	...	...	...	...	...	...	...
Mynyddislwyn	...	1578 lbs.	301 tins.	...	..	...	...	...
Nantyglo and Blaina ...	...	190 lbs.	...	...	...	...	...	...
Panteg ...	83 lbs.	132 lbs.	269 lbs.	29 lbs.	115 lbs.	14 lbs.	83 lbs.	158 lbs.
Pontypool ...	...	...	...	...	.	...	...	...
Rhymney ...	...	...	161 tins.	...	.	...	...	..
Risca ...	...	441 lbs.	236 tins.	...	102 lbs.	...	...	...
Tredegar ...	4 doz. cartons.	526 lbs.	6 tins.	...	...	24 lbs.	756 lbs.	...
Usk ...	...	...	...	...	...	...	...	...
Total ...	7 boxes, 4 doz. cartons & 181 lbs.	4721 lbs.	885 lbs. 327 bottles 2,849 tins	1,042½ lbs.	337 lbs.	167 lbs.	8 barrels, 2 seives, 976 lbs.	381 pkts., 3,149 lbs., (mostly potatoes).

Slaughter-houses are periodically visited in all the districts, and adverse reports as to sanitary condition were received from the Urban Districts of Nantyglo and Blaina, Pontypool and Rhymney.

Much killing on unlicensed premises is carried out in the County and stern measures for the repression of this practice are urged. Several Medical Officers of Health advocate the provision of public abbatoirs.

The Bakehouses also are kept under constant supervision.

RAINFALL.

Appended is a table giving the comparative rainfalls between various localities in the County during the year under review, and also for a series of past years.

Name of place at which records were taken.	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922
Abergavenny ...	33·48	29·92	33·01	35·34	29·42	29·71	50·28	35·94	51·39	45·56	47·03	43·42	37·92	33·35	37·28	31·04	47·87	23·79	33·19
Abersychan, Glansychan House ...	—	43·81	46·09	55·20	44·90	49·98	66·41	49·92	69·00	63·82	69·95	57·6	—·	52·38	56·93	51·84	69·10	38·98	—
Abertillery ...	—	—	51·19	63·4	53·21	60·89	79·65	66·92	84·64	66·71	72·26	56·73	63·24	52·91	58·79	49·1	71·24	40·99	52·47
Chepstow, The Cedars	—	21·44	31·94	33·61	28·82	35·29	36·46	31·82	49·98	34·80	40·92	35·81	46·07	32·81	36·9	37·54	42·12	23·55	37·85
Cwmcarn (Maesderwen)	—	—	—	—	—·	—	—·	—	—·	—	—	—	—·	—	—	47·4	64·15	33·91	49·16
Ebbw Vale ...	55·79	51·63	48·10	58·50	52·20	61·68	76·21	63·26	73·94	66·74	71·65	59·54	63·10	50·02	61·69	48·84	75.21	43·11	54 51
Henllys, Pantyreos Reservoir ...	52·15	39·80	50·31	53·61	45·94	54·84	59·04	52·92	70·68	60·05	62·41	52·62	59·85	46·59	59·74	50·02	63 93	37·57	55·64
Little Mill, nr. Pontypool ...	40·66	30·24	33·67	42·59	36·42	38·35	55·81	42·20	57·66	44·25	46·29	42·88	54·79	39·23	40·06	44·9	46·26	25·94	27·42
Newbridge, Troedy-rhiw Fawr ...	52·50	42·15	46·95	51·26	40·53	45·39	64·06	45·65	64·42	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken
Pontypool, Maesderwen House, Pontymoile	51·00	41·30	43·55	52·17	41·53	49·77	64·97	48·25	71·75	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken	Not taken
Pontypool, Snatchwood Park ...	52·01	45·40	46·56	57·06	44·62	50·56	65·99	52·29	69·20	64·01	62·07	57·59	61·64	51·33	56·68	51·84	—	37·57	57·83
Tredegar, Redesdale House ...	55·76	50·90	53·37	—	50·14	—	69·64	60·12	74·47	61·09	61·51	51·4	·—	41·95	50·44	40·8	51·70	27·49	45·82
Wentwood, Newchurch Gathering Ground	38·42	36·37	38·49	42·82	35·80	40·94	48·35	39·55	56·17	45·43	48·64	42·37	47·38	40·07	47·6	43·26	49·85	29·33	47·22
Wentwood Reservoir Llanvaches ...	—·	—	35·42	36·84	31·57	37·31	41·59	34·73	48·96	39·17	42·32	37·55	44·50	37·22	43·67	41·14	46·13	25·71	42·52

VITAL STATISTICS FOR THE YEAR 1922.

District	Estimated Population.	BIRTHS								DEATHS				INFANTILE MORTALITY.				Zymotic Death-rate per 1000 of estimated population.	*Tubercular Death-rate per 1000 of estimated population (including Phthisis and other Tubercular diseases).	Respiratory diseases. Death-rate per 1000 of estimated population.	Medical Officer of Health
		Legitimate		Illegitimate		Total		Grand Total	Rate per 1000 of population	Male	Female	Total	Rate per 1000 of population	Total Deaths under One Year							
		Male	Female	Male	Female	Male	Female							Legitimate.	Illegitimate	Total.	Rate per 1000 births.				
URBAN.																					
Abercarn	20840	244	249	4	10	248	259	507	24·3	103	113	216	10·3	40	6	46	90·7	·38	·53	2·6	E. M. Griffith, M.D., C.M., Abercarn
Abergavenny	9118	94	93	7	3	101	96	197	21·6	71	58	129	14·1	7	2	9	45.6	...	·99	1·87	W. D. Steel, M.D., D.P.H., Abergavenny
Abersychan	28090	330	309	18	13	348	322	670	23·8	159	142	301	10·7	52	3	55	82·0	·57	·86	2·24	R. J. S. Verity, L.S.A., L.M.S.S.A., Garndiffaith
Abertillery	40170	453	499	15	9	468	508	976	24·2	228	185	413	10·2	88	...	88	90·1	·45	1·0	2·22	T. Baillie Smith, M.B., Ch.B. D.P.H., Abertillery
Bedwas and Machen ...	8804	121	147	3	5	124	152	276	31·3	52	46	98	11·1	17	1	18	65·2	·23	·11	1·82	B. O. Barnard, M.B., C.M., Machen
Bedwellty	32340	466	428	23	13	489	441	930	28·6	212	164	376	11·6	78	7	85	91·3	·9	·68	2·63	D. Rees Roberts, M.B., New Tredegar
Blaenavon	12880	137	139	6	4	143	143	286	22·2	92	81	173	13·4	32	2	34	11·8	·08	·54	3·83	G. H. Martin. M.B., B.Ch , B.A.O., Blaenavon
Caerleon	2325	15	18	1	1	16	19	35	15·0	9	8	17	7·3	2	...	2	57·1	·43	.43	·86	E. A. I. Phillips, M.R.C.S., L.R.C.P., Caerleon
Chepstow	5214	66	66	4	2	70	68	138	26·4	28	30	58	11·1	8	...	8	57 9	...	1·15	3·07	T. L. Drapes, M.R.C.S., L.R.C.P., B A., Chepstow
Ebbw Vale	36830	422	448	20	9	442	457	899	24·4	264	188	452	12·2	82	7	89	98·9	·33	1·03	2·5	F. M. Fonseca, F.R.C.S., D.P.H., Ebbw Vale
Llanfrechfa Upper ...	4854	56	43	2	4	58	47	105	21·6	26	24	50	10·3	13	...	13	123·8	·41	1·65	1·85	W. E. C. Murphy, M.B., B.Ch., Cwmbran
Llantarnam	7659	82	92	3	...	85	92	177	23·1	34	46	80	10·4	19	...	19	107·3	...	1·18	1·96	Ditto ditto
Monmouth	5172	52	44	3	3	55	47	102	19·7	37	42	79	15·2	10	...	10	98·0	1·74	1·35	2·71	W. H. Williams, M.R.C.S., L.R.C.P., B.A., Monmouth
Mynyddislwyn	15410	218	196	4	7	222	203	425	27·5	73	63	136	8·8	32	2	34	80·0	·52	·71	2·14	R. E. Roberts, M.B., Cwmfelinfach
Nantyglo and Blaina ...	17010	186	179	8	16	194	195	389	22·8	102	88	190	11·1	38	3	41	105·3	1·12	·59	2·70	T. W. Bevan, M.R.C.S., L.R.C.P., Nantyglo
Panteg	11310	117	121	3	3	120	124	244	21·5	70	48	118	10·4	12	1	13	53·2	...	·53	1·95	T. J. McAllen, M.B., B.Ch., Pontypool
Pontypool	7141	78	88	2	3	80	91	171	23·9	53	40	93	13·0	11	...	11	64·3	·28	1·26	3·78	Do. do.
Rhymney	12120	148	154	3	6	151	160	311	25·6	89	75	164	13·5	18	..	18	57·8	·17	1·32	2·23	R. V. de A. Redwood, F.R.C.S., L.R.C.P., Rhymney
Risca	17290	184	183	5	3	189	186	375	21·6	115	96	211	12·2	27	1	28	74·6	·64	·93	1·97	N. N. Wade, M.B., Ch.B., Risca
Tredegar	26070	332	324	13	12	345	336	681	26·1	150	153	303	11·6	53	3	56	82·2	·61	73	2·57	E. T. H. Davies, M.D , M.S., F.R.C.S., Tredegar
Usk	1472	15	12	1	...	16	12	28	19·0	14	7	21	14·2	2	...	2	71·4	...	...	3·4	E. L. M. Hackett, L R.C.P., L.R.C.S., Usk
RURAL.																					
Abergavenny	9313	78	74	3	3	81	77	158	16·9	48	59	107	11·4	5	...	5	31·6	·21	·64	1·93	E. Y. Steele, L.R.C.P., Abergavenny
Chepstow	8781	75	90	2	4	77	94	171	19·4	43	51	94	10·7	10	2	12	70·1	·23	·91	1·59	T. L. Drapes, M.R.C.S., L.R.C.P., B.A., Chepstow
Magor	5526	51	54	...	2	51	56	107	19·3	33	27	60	10·8	6	1	7	65·4	·18	1·27	2·17	E. A. I. Phillips, M.R.C.S., L.R.C.P., Caerleon
Monmouth	6562	63	64	4	1	67	65	132	20·1	42	61	103	15·6	8	2	10	75·7	...	1·52	2 29	W. H. Williams, M.R.C.S., L.R.C.P., B.A., Monmouth
Pontypool	5294	55	35	4	1	59	36	95	17·9	40	26	66	12·4	5	1	6	63 1	·38	·38	2·46	E. L. M. Hackett, L.R.C.P., L.R.C.S., Usk
St. Mellons	11610	97	118	3	2	100	120	220	18·9	69	61	130	11·1	15	1	16	72·7	·17	.69	2·15	N. N. Wade, M.B., Ch.B., Risca
Grand Totals, 1922 ...	369205	4235	4267	164	139	4399	4406	8805	23·8	2256	1982	4238	11·4	690	45	735	83·4	46	·87	2·38	
Totals for Year 1921 ...	*363958*	*5180*	*4803*	*167*	*162*	*5347*	*4965*	*10312*	*28·3*	*3278*	*1829*	*4107*	*11·3*	*883*	*61*	*944*	*91·5*	*·94*	*·99*	*1·98*	