

**Report upon maternity and child welfare for the year 1932 /
Monmouthshire County Council.**

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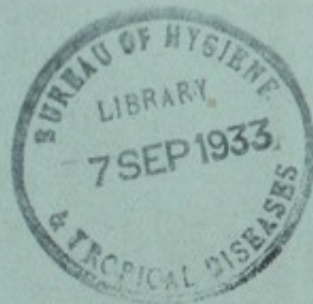
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MONMOUTHSHIRE COUNTY COUNCIL

**Notification of Births Acts, 1907 and 1915,
and Maternity and Child Welfare Act, 1918.**

REPORT

UPON

MATERNITY AND CHILD WELFARE

For the Year 1932.

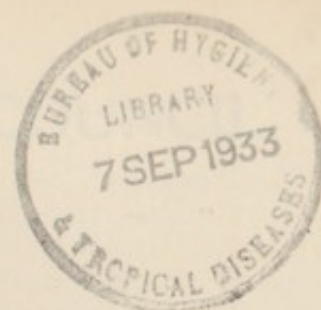
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D. ROCYN JONES,


County Medical Officer.

28th July, 1933.

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MONMOUTHSHIRE COUNTY COUNCIL.

PUBLIC HEALTH DEPARTMENT,

COUNTY HALL,

NEWPORT,

28th July, 1933.

To the Chairman and Members of the

Maternity and Child Welfare Committee.

I have pleasure in presenting to you the Eighteenth Annual Report upon the work done in connection with the Notification of Births Acts, 1907 and 1915, and the Maternity and Child Welfare Act, 1918.

A.—SUMMARY OF BIRTHS NOTIFIED.

During the twelve months ended the 31st December, 1932, 5,766 live births and 318 stillbirths, making a total of 6,084, were notified to this Department after adjusting the notifications transferred to other districts and those transferred from other districts. Sixty-four births were subsequently notified by Registrars or discovered by Health Visitors.

The number of registered births in the County for the year, according to the Registrar-General's return, was 5,885, so that only 2.02 per cent. of the registered births were not ascertained under the Notification of Births Acts.

Of the 6,084 notified births, 6,044 were notified by midwives and 40 by doctors and parents. The percentage of births notified by midwives is 99.3, which is a high figure.

B.—WORK OF THE HEALTH VISITORS.

The work of the Health Visitors in respect of School Medical Inspection and Maternity and Child Welfare is co-ordinated excepting at Ebbw Vale and Abertillery, where the County Health Visitors undertake Maternity and Child Welfare work only, as those areas are autonomous under the Education Act, 1902.

Three of the County Health Visitors are engaged in School Medical Inspection work only, as they have not been approved by the Ministry of Health for Maternity and Child Welfare work. The Ministry now require for all new appointments that nurses appointed as Health Visitors shall hold the Health Visitor's Certificate of the Royal Sanitary Institute.

There were at the end of the year 36 Health Visitors on the staff, including those who are only engaged in school work. In addition, the Lecturer in Nursing under the Higher Education Committee devotes part of her time to Maternity and Child Welfare work. The apportionment of the time of the Health Visitors to Maternity and Child Welfare works out at approximately 20.

Nurses O. Griffiths, K. M. Walters, and C. Davies have been appointed District Inspectresses of Midwives, to which work they devote two days per week. Nurse Griffiths is also Infant Protection Officer for the County and Mental Deficiency Enquiry Officer for the Eastern area of the County. She is also the Nurse in attendance at the Orthopædic Clinics, and engaged in Orthopædic after-care.

Nurses Walters and Davies give the remainder of their time to Maternity and Child Welfare work.

Nurse D. James is the Mental Deficiency Enquiry Officer for the Western area of the County. She also has an Infant Welfare District.

The Maternity and Child Welfare duties of the Health Visitors include attendance at Welfare Centres and Ante-Natal Clinics, and the home visitation of infants up to the age of five years.

All infants are visited soon after the tenth day, and during the first year of life at intervals of three months, excepting those who at the first visit are found to be in homes where they are well cared for. The visit at nine months is important, because of the advice with regard to weaning of breast-fed babies. The visit, when the child attains the age of twelve months, is also important, so that the general condition and development of the infant may be noted. In cases where there is reason to believe home conditions are not entirely satisfactory, or when the child has some defect, visits are paid more frequently.

After the first year, visits are paid twice yearly in the majority of cases, until the child attains the age of five, unless special conditions call for more frequent home visiting.

In the report upon the inspection of the County Maternity and Child Welfare Services, conducted by an Inspectress of the Ministry of Health during the year, it was pointed out that the number of visits paid by the Health Visitors to the homes of the infants, between the ages of one and five years, was not sufficient. This fact is acknowledged. The main province of the Health Visitor is the home, where through her knowledge, cheerfulness, and outlook on life, she is welcomed by the mothers. Owing to the ever increasing amount of infant centre, ante-natal clinic, and school clinic work, the Health Visitors have to spend a large proportion of their time at these clinics to the detriment of their home visitations. The only remedy is to increase the number of Health Visitors, which can hardly be suggested to the Council in these days of financial stringency.

Statistics relating to the work of the Health Visitors are given in the following pages, but their real value cannot be shown by figures. It must be measured in terms of the public health results which have accrued during the 18 years of their existence in this County. The object of health visiting is to give at the homes individual lessons in hygiene particularly in its relation to child welfare. Individual teaching is always the best form of instruction.

It is in the ante-natal period that the influence of the Health Visitor can be of special value. By her visit to the homes she wins the confidence of the mothers, and she contributes in two ways to the success of the Ante-natal clinic. She makes the time and place known to the expectant mother, encouraging her to attend, and she also sees that attendance is continuous and regular.

An ideal Maternity and Child Welfare Scheme would include such institutions as Infants' Hospitals, Convalescent Homes for mothers and babies, Maternity Hospitals and Day Nurseries, but the absence of such Institutions in this County can be partly compensated by a sufficiency of well trained Health Visitors, who can impart their knowledge of modern infant rearing to the mothers at the homes.

1.—VISITS PAID.—During the year 47,020 visits were paid to the homes as follows :

New Cases		Re-visits under	Re-visits	Total Visits.
Babies seen	Fruitless Visits	1 year of age	1 to 5 years	
1932—5762	907	16,684	23,667	47,020
1931.—First visits, 6,056; Fruitless visits, 940; Re-visits under 1 year, 15,544; Re-visits 1-5 years, 23,055; Total, 45,595.				
1930.—First visits, 6,731; Fruitless visits, 1,133; Re-visits under 1 year, 15,372; Re-visits 1-5 years, 22,909; Total, 46,145.				
1929.—First visits, 6,762; Fruitless visits, 1,122; Re-visits under 1 year, 15,930; Revisits 1-5 years, 23,364; Total, 47,178.				
1928.—First visits, 6,481; Fruitless visits, 1,047; Re-visits under 1 year, 10,881; Re-visits 1-5 years, 18,066; Total, 36,475.				
1927.—First visits, 6,031; Fruitless visits, 775; Re-visits under 1 year, 14,246; Re-visits 1-5 years, 21,496; Total, 42,548.				
1926.—First visits, 7,467; Fruitless visits, 416; Revisits under 1 year, 22,366; Re-visits 1-5 years, 27,751; Total, 58,000.				
1925.—First visits, 7,872; Fruitless visits, 590; Re-visits under 1 year, 22,541; Re-visits 1-5 years, 30,641; Total, 61,644.				
1924.—First visits, 8,577; Re-visits under one year, 24,319; Re-visits 1-5 years, 31,261; Total, 64,157.				
1923.—First visits, 9,896; Re-visits under one year, 24,529; Re-visits 1-5 years, 31,261; Total, 67,463.				
1922.—First visits, 9,100; Re-visits under one year, 25,350; Re-visits 1-5 years, 25,804; Toal, 60,254.				

The reduction in the number of visits paid in recent years as compared with the years 1922 to 1926 is partly due to the decrease in the number of births and partly to the extension of clinic work.

II.—METHODS OF FEEDING OF INFANTS.—Of the new cases visited it was found that 4,674 children were being brought up entirely on the breast (81.1 per cent.) whilst 870 were being bottle fed (15.0 per cent), and 167 were both breast and bottle fed (3.9 per cent). It was discovered on subsequent visits that in 579 instances (10.0 per cent.) children breast-fed had been put on the bottle after the first visit of the Health Visitor, and before the usual time of weaning. The above percentages are of the total new cases seen. In 51 cases the child only survived birth by a few hours (.88 per cent.).

The percentage of breast-fed babies in this table is much higher than that given by the Medical Officers in the section of this report dealing with the work of the Centres, and it must be pointed out that the Health Visitors figures deal with the feeding at the time of their first visits, i.e., about 10 days after birth, and there is evidently a considerable diminution in breast-feeding during the next few months. Many mothers take their babies to the Centre for the first time owing to their inability to continue breast-feeding.

The Health Visitor's figures show there is a decrease of .8 per cent. in the number of babies breast-fed, as compared with the previous year (1931).

The mother's milk is best and cheapest for the baby, but it is surprising how much persuasion and encouragement is necessary to achieve this ideal with present day mothers. Breast milk is clean and its composition is perfect. It is oftentimes difficult for mothers to carry out breast-feeding, but it is generally lack of patience which places so many children on the bottle, and every mother should be taught to overcome any difficulties that may arise. When the mother attends the Maternity and Child Welfare Centre the difficulties are usually overcome, for the doctor enquires very closely into every reason for failure to breast-feed, and in many cases is able to convince the mother that she can by perseverance breast-feed her child. Digestive troubles and carious teeth are frequent causes of failure to breast-feed, and attention to these defects often produces the desired result. Regularity of feeding is an important precept taught at the Centres. This added to regularity in bathing, sleeping and other functions, tends to make a happy and contented baby as well as a happy and contented mother. The breast-fed baby seldom suffers from nutritional disorders or from over-feeding.

III.—SANITARY DEFECTS AT THE HOMES.—In accordance with the arrangements made at the initiation of the scheme, visits were paid by the Health Visitors to the Local Medical Officers for consultation purposes, and reports were made to the District Medical Officers of Health upon Sanitary defects at the homes.

In several parts of the County the housing position has improved during the last few years through the activities of the District Councils in erecting houses, but in the thickly populated areas there is still a shortage of houses for the working classes and serious overcrowding is still prevalent. The shortage of houses is one of the chief causes of overcrowding, high rental is another, and it is evident that this state of things is not conducive to good health, particularly where there are young children. There are many cases where two families live in the same house, and mixing of the sexes in sleeping rooms is frequently found. Many of the older houses which are fit only for demolition have to be occupied because of the inability to find other accommodation. Into some of these houses the sun never penetrates. They are good breeding places for the rickety child.

IV.—ANTE-NATAL.—The number of visits paid to expectant mothers was 266 to new cases, and 278 re-visits, a total of 544 visits. This is smaller than last year's figure, but the increasing and regular attendances of expectant mothers at the Ante-Natal Clinics mean that fewer visits to homes are required.

V.—PUERPERAL FEVER.—During the year, 1932, notification of 6 cases of puerperal fever were received under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, from the District Medical Officers of Health. The 6 notifications were received from the following urban districts—Abersychan, 1; Abertillery, 1; Bedwellty, 1 and Tredegar 3. 8 deaths were registered.

The attack rate per 1,000 births in 1932, was 1.01. The attack rate per 1,000 of population equalled .017 and the death rate per 1,000 of population was .023. The death rate per 1,000 births was 1.35.

The following comparative table is submitted:—

Year	No. of Notifications to Local M.O.H.	No. of Notifications received at Central Office.	No. of Deaths Registered	Death rate per 1,000 of population for County	Death rate per 1,000 births.
1932	6	6	8	.023	1.36
1931	8	8	9	.025	1.40
1930	13	13	14	.038	2.2
1929	12	12	21	.058	3.2
1928	14	14	15	.04	2.2
1927	10	10	8	.02	1.2
1926	19	19	7	.019	.9
1925	22	22	8	.021	.9
1924	15	15	10	.027	1.19
1923	19	21	9	.02	1.0
1922	11	11	14	.03	1.5
1921	17	18	13	.03	1.2
1920	24	30	20	.05	1.89
1919	19	13	11	.029	1.3
1918	6	6	3	.009	.3
1917	4	4	Nil.	Nil.	Nil

The six cases of Puerperal Fever investigated by the County Midwives' Inspectress showed that all cases were attended by registered midwives.

Details of the cases are as follows:—Number of women attended at confinement by midwife alone, 2; by medical practitioner and midwife 4. In the two cases attended by midwives alone, the medical attendant was called in immediately after delivery.

Every precaution possible is taken to prevent the spread of infection. A visit of inspection is made immediately on receipt of the notification, and the midwife is prohibited from attending other cases until she has left the infected case and has allowed 24 hours to elapse for thorough disinfection of herself, her instruments and her clothing. Compensation is paid to the midwife for any cases which she may lose through this suspension.

Death resulted in three of the six cases which were notified under the Regulations and followed up by the County Staff.

On the 1st October, 1926, puerperal pyrexia became a notifiable disease in addition to puerperal fever. Puerperal Pyrexia is defined as any febrile condition (apart from puerperal fever) occurring in a woman within 21 days after childbirth in which a temperature of 100.4 degrees Farh. or more has been sustained during a period of 24 hours.

Twenty-four cases of puerperal pyrexia were notified in 1932 and all were followed up by the Inspectress of Midwives. Twenty-three cases cleared up satisfactorily, and one subsequently proved to be puerperal septicaemia.

A scheme for the provision of facilities for diagnosis and treatment of cases is in operation. Under the scheme the services of Dr. G. I. Strachan, M.D., F.R.C.S., of Cardiff, have been retained as Consultant Obstetrician, and his services have been requisitioned frequently by the medical practitioner in attendance upon the case. Cases requiring hospital treatment are sent to an Infectious Diseases Hospital (two were admitted to Cardiff Infectious Diseases Hospital during the year) and any necessary bacteriological examination is made by Dr. Gwyn Rocyn Jones, County Bacteriologist, at the County Laboratory, Newport.

VI.—INFANTILE DIARRHŒA.—Five cases of this disease were discovered during visits to homes, and fifteen re-visits paid, as against 6 and 11 re-visits in the year 1931.

Thirty deaths were registered in children under two years of age, giving a death rate of 5.95 per 1,000 births, as compared with 5.69 for the year 1931.

All cases of which the Health Visitor has knowledge are visited, but it is obvious that very many cases do not come to her notice. This disease is not notifiable.

During the years preceding the introduction of the County Maternity and Child Welfare Scheme, the death rate averaged 11 per 1,000 births. The average rate for the past fourteen years, which includes one very hot summer, when the rate was 17.2, has been 7 per 1,000 births. It will be observed that the rate for 1932 is considerably below that average. The reduction in the rate in recent years is undoubtedly due to the greater care which is now observed in the feeding of infants and the measures taken by the Council to ensure a clean milk supply.

The infective type of the disease is essentially one of the summer months and it varies in intensity according to the type of summer, many more cases occurring in really warm weather. During these months, the mothers attending the County Maternity and Child Welfare Centres are warned of the measures necessary to prevent the disease, and printed instructions to mothers are distributed by the Health Visitors at homes when cases are discovered.

VII.—OPHTHALMIA NEONATORUM.—Thirty-two cases were notified under the Public Health (Ophthalmia Neonatorum) Regulations, as compared with 19 cases in the year 1931, and 34 in 1930. These cases together with other cases of eye trouble reported by the Midwives making a total of 92 cases, were followed up by the Health Visitors, who paid 366 visits to them. In four cases there was unsatisfactory conduct on the part of the midwife, and warning letters were sent by the County Medical Officer.

Since the beginning of January, 1921, the Midwives practising within the Administrative County have been supplied with bottles of Collosol Argentum, with which they are instructed to treat the eyes of all children at birth. The supply is renewed upon application to the County Maternity and Child Welfare Centres. There is no doubt that these precautionary measures have succeeded in greatly reducing the incidence of blindness due to gonococcal infection, for rarely in recent years is there blindness from this cause.

The County Health Visitors are assiduous in their following up of affected cases. Medical treatment is immediately urged for the slightest case, and frequent visits are paid to see that the mothers are properly attending to the eyes of the infants. The Venereal Diseases Inquiry Officer also follows up cases suspected of gonococcal infection, with a view to attendance at the Clinic.

The Health Visitors have reported upon 92 cases as follows:—

NUMBER OF CASES VISITED.

				Acute	Slight	Total.
Brought forward from last year	...	...	...	2	5	7
New cases—						
Both eyes	...	...	...	20	32	52
One eye only	...	...	...	2	31	33
				—	—	—
				24	68	92
				—	—	—
Number of cases which attended hospital						
As out-patients	...	...	...	3	—	3
As in-patients	...	...	...	5	—	5
Number of cases in which there was neglect on the part of the midwife			...	4	—	4
RESULTS:						
Completely cured	...	...	...	21	62	83
Blind	...	...	...	1	—	1
To see Eye Specialist	...	...	...	2	—	2
Cases still being followed up at the end of the year	...	...	...	—	6	6
				—	—	—
				24	68	92
				—	—	—

Four of the cases were referred to the Venereal Diseases Clinic.

VIII.—STILLBIRTHS.—The number of stillbirths was 318, which works out at 5.4 per 100 live births, a decrease of .39 upon the figure for 1931, which was 5.79. The rate continues to be abnormally high, and it compares very unfavourably with the rate for England and Wales, which was 4.1 for 1931, but there were in that year six Welsh Counties with a higher rate than that of Monmouthshire. The Glamorganshire rate was 6.1.

IX.—UNREGISTERED WOMEN ACTING AS MIDWIVES.—There were no confinements attended by unregistered women without a doctor during the year, and this practice now appears to be checked.

C.—VITAL STATISTICS.

The area of the Administrative County in acres is 345,048. Other related statistics are given in the accompanying table.

The District Medical Officers' figures of the ages at death of children under one year of age, show that during the year 155 infants died within one week of birth, and 219 died within the first month of birth, whilst 396 died within the first twelve months, which, together with the figure of 354 stillbirths, make a total of 750 lives lost to the community.

The infantile mortality rate per 1,000 births is 67.7, as compared with 71.9 for 1931. In 1930 the rate was 64.9, which was the lowest ever recorded for the County. In 1929 it was 67.7; in 1928, 72.29; in 1927, 87.3; in 1926, 66.1; in 1925, 83.8; in 1924, 75.6; and in 1923, 73.0.

There were 5,885 births registered during the year, a decrease of 261 when compared with the number for 1931, and the birth rate is 17.1 per 1,000 of population, compared with 17.6 in 1931. In the year 1930 it was 17.6; in 1929, 17.8; in 1928, 18.3; in 1927, 17.5; in 1926, 20.3; in 1925, 21.5; in 1924, 22.3; in 1923, 23.5; in 1922, 23.8; in 1921, 28.3; in 1920, 29.2; and in 1919, 22.9.

The number of births of illegitimate children was 231, which gives a ratio to that of legitimate births as 39.2 to 960.8. Last year the number was 245, equal to 41.5 per 1,000 legitimate births, and for the year 1930 the figure was 35.55.

The number of deaths of illegitimate children under one year of age was 26, or 4.4 per 1,000 of all births, and 112.5 per 1,000 of illegitimate births. Last year the number of deaths was 24, or 3.9 per 1,000 of all births, and 97.9 per 1,000 of illegitimate births.

The District Infantile Mortality Rates, arranged in order of highest rate, are as follows:—

Districts.	Present Year	(1931)	Districts.	Present Year	(1931)
URBAN—			URBAN—		
Abergavenny ...	136.8	(29.2)	Abercarn ...	56.0	(61.9)
Usk ...	117.6	(214.2)	Monmouth ...	55.5	(78.9)
Llanfrechfa Upper...	100.1	(105.2)	Chepstow ...	54.3	(30.7)
Blaenavon ...	89.9	(90.3)	Panteg ...	40.0	(75.0)
Llantarnam ...	86.2	(68.7)	Abersychan ...	38.6	(69.2)
Nantyglo and Blaina..	85.8	(64.2)	Caerleon ...	—	(157.9)
Rhymney ...	83.7	(100.4)			
Tredegar ...	79.8	(95.1)	RURAL—		
Abertillery ...	78.0	(69.7)	Chepstow ...	78.1	(45.1)
Bedwas and Machen..	78.0	(64.5)	Abergavenny ...	53.5	(47.1)
Mynyddislwyn ...	77.0	(70.4)	St. Mellons ...	44.2	(30.9)
Risca ...	76.0	(59.2)	Pontypool ...	40.5	(42.2)
Bedwellty ...	72.8	(82.8)	Monmouth ...	34.4	(101.1)
Ebbw Vale ...	69.1	(91.7)	Magor ...	19.4	(57.1)
Pontypool ...	60.3	(61.0)			

C.—VITAL STATISTICS FOR THE YEAR 1932

DISTRICT	Esti- mated Popula- tion	BIRTHS								DEATHS				INFANTILE MORTALITY.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
		Legitimate		Illegitimate		Total		Grand Total	Rate per 1000 of popula- tion	Male	Female	Total	Rate per1000 of popula- tion	Total Deaths under One Year				Ages at Death of Children under One Year.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
		Male	Female	Male	Female	Male	Female							Legiti- mate	Illegiti- mate	Total	Rate per 1000 births	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—	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*

N.B.—The figures in the columns marked with an asterisk were supplied by the Registrar-General, and the remainder by the District Medical Officers.

5

PLATE 2

ENTRANCE

Date		Time		Place		Remarks	
1911	10/1	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/2	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/3	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/4	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/5	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/6	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/7	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/8	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/9	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/10	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/11	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/12	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/13	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/14	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/15	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/16	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/17	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/18	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/19	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/20	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/21	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/22	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/23	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/24	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/25	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/26	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/27	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/28	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/29	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/30	10:00	10:15	Entrance	Room 1	1st	1st
1911	10/31	10:00	10:15	Entrance	Room 1	1st	1st

The Vital Statistics for England and Wales for the year 1932, compiled by the Registrar-General, are as in the subjoined table. The Monmouthshire figures are given for the purpose of comparison.

	Birth Rate per 1,000 of population				Death Rate per 1,000 living		Deaths under one year per 1,000 births	
	Live Births	Still Births	Live Births	Still Births				
	1932	1932	(1931)	(1931)	1932	(1931)	1932	(1931)
ENGLAND & WALES ...	15.3	0.66	(15.8)	(0.67)	12.0	(12.3)	65.0	(66.0)
118 County Boroughs and Great Towns, including London ...	15.4	0.70	(16.0)	(0.67)	11.8	(12.3)	69.0	(71.0)
126 Smaller Towns (estimated resident populations, 25,000-50,000 at Census, 1931) ...	15.4	0.69	(15.6)	(0.73)	10.8	(11.3)	58.0	(62.0)
London ...	14.2	0.51	(15.0)	(0.50)	12.3	(12.4)	66.0	(65.0)
MONMOUTHSHIRE ...	17.1	1.02	(17.6)	(1.02)	11.1	(12.01)	67.7	(71.9)

In all cases the estimated populations as supplied by the Registrar-General have been used for the purposes of this table.

D.—DEDUCTIONS FROM THE COUNTY VITAL STATISTICS.

The birth rate (17.1) shows a reduction of .5 upon the figure for the year 1931 (17.6). There were 261 fewer births in the Administrative County during the year 1932 as compared with 1931.

The County Death Rate of 11.1 per 1,000 of population is below the rate for 1931, which was 12.01. It is also still below that for England and Wales (12.0).

The County Infantile Mortality Rate for the year (67.7) shows a decrease upon the rate for the previous year (71.9).

CAUSES OF DEATH UNDER ONE YEAR OF AGE.

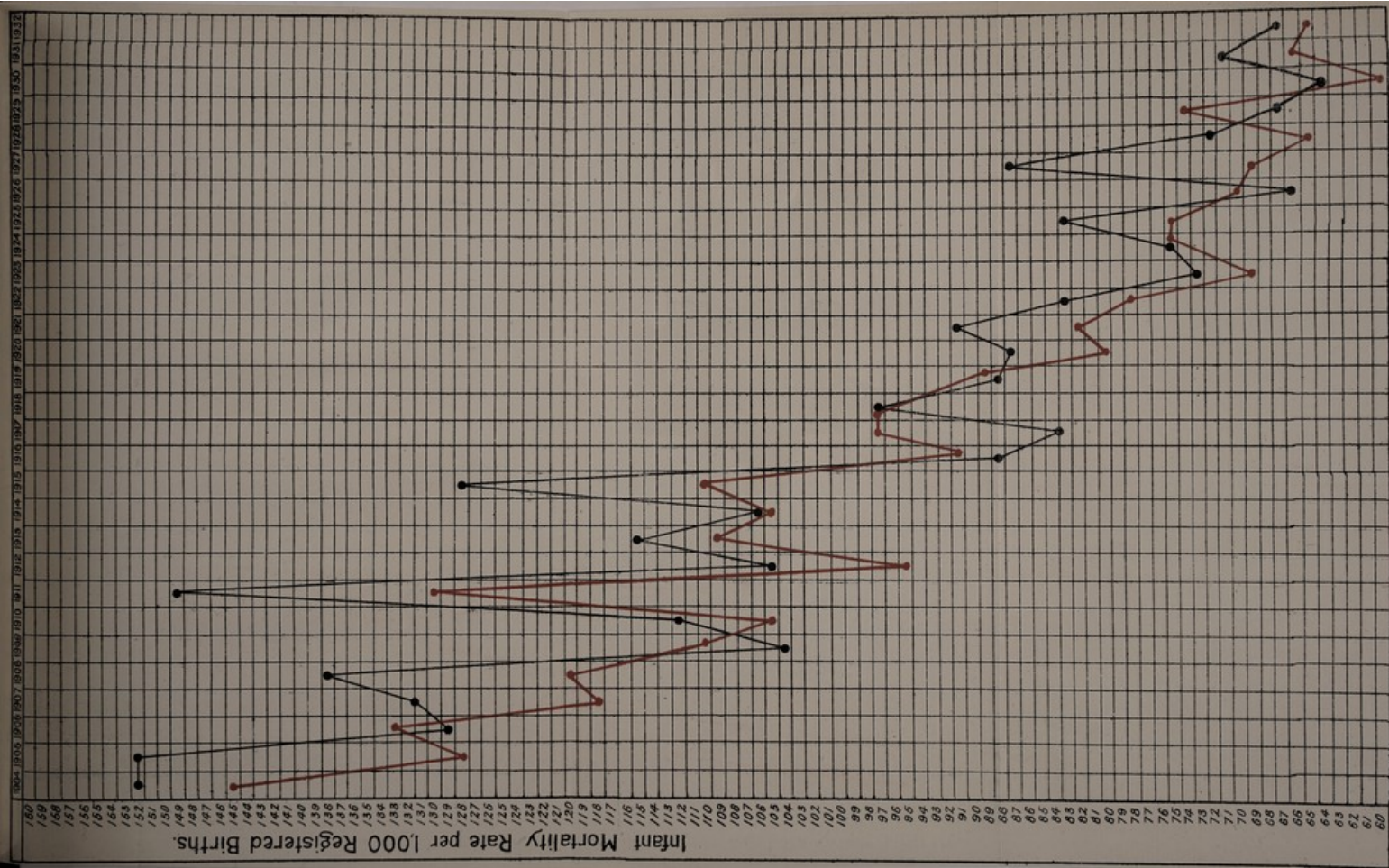
CAUSES.	1932	(1931)	(1930)	(1929)
All causes	399	(442)	(412)	(435)
Small Pox	—	—	—	(1)
Scarlet Fever	1	—	—	—
Measles	1	(12)	(1)	(4)
Diphtheria	—	(1)	—	—
Whooping Cough	13	(1)	(15)	(28)
Influenza	6	(4)	(2)	(5)
Cerebro-spinal Fever	4	(2)	—	—
Meningococcal meningitis	—	—	—	(3)
Pulmonary Tuberculosis	—	(1)	—	(1)
Other Tubercular Diseases	2	(3)	(2)	(1)
Cancer (Malignant disease)	—	(1)	—	—
Syphilis	3	(1)	—	—
Bronchitis	29	(36)	(24)	(33)
Pneumonia (all forms)... ..	65	(73)	(51)	(62)
Other Respiratory Diseases	2	—	(2)	(4)
Diarrhœa	25	(29)	(34)	(29)
Digestive Diseases	5	(7)	—	—
Acute and Chronic Nephritis	1	—	—	—
Appendicitis and Typhlitis	—	—	(1)	—
Congenital Debility	202	(213)	(204)	(191)
Violence	3	(6)	(5)	(6)
Other Defined Diseases... ..	37	(52)	(71)	(67)
Causes ill-defined or unknown...	—	—	—	—

The large proportion of deaths during the first month of life is still very noticeable. Death at this period of life is due often to the ill-health of the mother during pregnancy, and to difficulties during confinement.

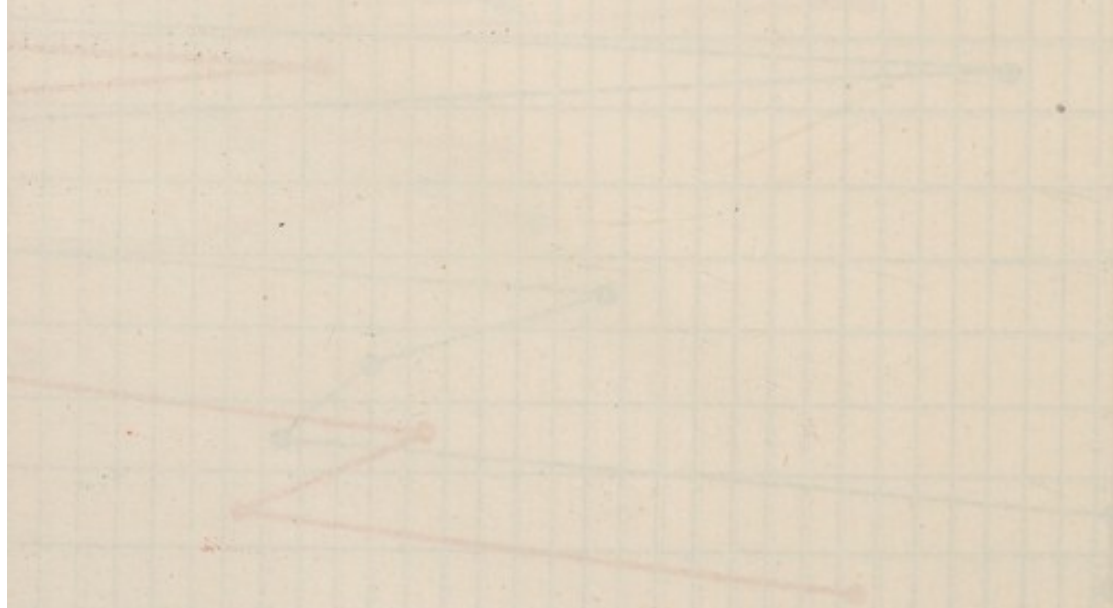
E.—MATERNAL MORTALITY AND ANTE-NATAL CARE.

MATERNAL MORTALITY.—The number of deaths registered during the year from accidents and diseases of pregnancy and parturition was 33, 8 from Puerperal Fever and 25 from other causes associated with child-birth. This is equal to a rate of 5.6 per 1,000 live births, which is an increase of .2 upon the figure for last year. The rate is still much higher than that of England and Wales, which for the year 1932, was 4.24 per 1,000 live births registered.

In the Annual Report of the Chief Medical Officer of the Ministry of Health for the year 1931, it is pointed out that since the beginning of the present century, the general death-rate has been reduced by one-third, the tuberculosis mortality by one-third, and the infant mortality by one half, but the maternal mortality has remained stationary.



The Black Line indicates the County Infants Mortality Rate.
The Red Line indicates the Infant Mortality Rate of England and Wales.



1000 Registered Pilots

A Committee consisting wholly of representative medical persons has been considering this question for four years, and their final report has now been published.

The Committee came to the conclusion that approximately one-half of maternal deaths can be prevented. When they came to explore to what the excess of deaths was due, they found four chief "primary avoidable factors." First they placed lack of ante-natal care.

This was estimated to have caused the death of the mother in about 33 per cent. of the preventable cases.

Secondly, the Committee found that 42 per cent. of the preventable deaths were due to what they described as "errors of judgment on the part of the doctor or midwife."

The third primarily avoidable factor, deemed to be answerable for 17 per cent. of the preventable deaths, was negligence of the patient herself, or of her friends.

Lastly, it was found that in 8 per cent. of these preventable deaths, there was at the moment of childbirth a serious lack of necessary facilities, i.e., no doctor, midwife, competent assistance or a hospital bed were available.

The average maternal mortality rate in England and Wales for the ten years 1922—31 was 4 per 1,000. The average rate for this County during that period was 4.92. For the year 1932, the County rate was 5.60 and the rate for England and Wales 4.24.

The following extract from Sir George Newman's Report is highly important:—

"What seems mostly to be required is to make available higher skill of doctors and midwives and to ensure more willing and enlightened mothers, as these are obviously the primary needs. But a definite responsibility has been placed upon the Local Authority in regard to the general health of girls and women and in regard to the provision of facilities for the ante-natal supervision of the pregnant women."

ANTE-NATAL CARE.—There was again an increase in the attendances of expectant mothers at the Ante-Natal Clinics during the year. The 16 Clinics were visited by 1,411 women (22.9 per cent. of the total number of births—live and still—notified during the year), who made 2,973 attendances, the average attendance per session being 14.79 as compared with 13.9 last year and 9.9 in the year 1930.

6,084 babies were born in the County during the year; 1,411 expectant mothers attended Clinics, which means that 23 per cent. had at least one ante-natal examination.

The increase in attendance is highly satisfactory, particularly when regard is had to the fact that there was a tightening of the regulations in the granting of free food early in the year. Milk is now given free on medical grounds only, and there was a considerable reduction in the amount distributed. The high attendance figure proves that only a small proportion of expectant mothers attended the Clinics for the sole purpose of obtaining free milk.

Several of the Clinics are over-crowded, and the Medical Officers find it impossible in the time at their disposal to give to all the women the attention which is necessary. Early in the year 1933, Ebbw Vale Clinic will be held in the morning and afternoon of the third

Tuesday in the month, instead of the morning only, and the Tredegar Clinic will be held on alternate Thursday afternoons, instead of one afternoon a month.

Much propaganda work is necessary to ensure that each young woman shall be trained and educated to seek ante-natal supervision early in pregnancy. Although our figures show that the number of women seeking ante-natal advice is growing year by year, there is still room for further efforts in this direction.

1.—Dr. MARY SCOTT, Assistant Medical Officer, Monmouthshire County Council.

ABERGAVENNY.—This Centre is open for one half-day each month. The attendance at this Centre has been, as in previous years, disappointing. The only encouraging feature is that there is an increase in the number of re-visits paid by the mothers. Last year the re-visits numbered less than half the new attendances, whereas in 1932 they numbered considerably more than the new visits.

One mother who attended was a primipara. Five male children were born before the end of the year, and no female children.

ABERSYCHAN.—This Centre is open for one half-day each month. There was a slight drop from 101 total attendances in 1931 to 94 total attendances for 1932. This drop in attendances in this area was entirely due to a decrease in the amount of milk given free. Several patients attended but did not return for further examination when they found that milk was given only on medical grounds. 42 new patients attended during the year. Of these 11 were primipara.

Nineteen male babies were born before the end of the year and 12 females.

One patient was not pregnant.

Two patients were referred to the Consultant Obstetrician but in neither case was it found necessary to admit them to hospital and they were confined safely at home.

BLAENAVON.—This Centre is open for one whole day monthly. During the year 54 new patients attended. 16 of these were primipara.

One patient had a stillborn premature child, which was found to be dead when she first visited the Centre. There were two other still-births, one in which there was abnormal position of the after-birth, and another where the child had spina bifida.

Two women who attended were not pregnant. Of the children born before the end of 1932, 26 were males and 23 females.

BLAINA.—This Centre is open for one whole day each month. During the year 116 new patients attended and of these 47 were primipara. The total number of visits paid by expectant mothers to this Centre was 323 as against 324 in 1931. The average attendance each month was 26.91, which is just about correct for one day at an Ante-natal Centre. It is a number which can just be coped with comfortably and allows of each patient being thoroughly examined.

115 mothers were confined before the end of the year, 64 male children being born and 51 females.

One stillborn child had spina bifida.

One patient had malpresentation at her last visit to Centre, and although the doctor was notified of this before confinement he was, unfortunately, unable to save the baby.

A third stillbirth was due to the very debilitated condition of the mother.

One set of twins was born.

One patient had a miscarriage in the early months, the cause of which was unknown.

Two patients were not pregnant.

Two patients had left the district and we were unable to trace them.

The ladies of the Local Maternity Child Welfare Committee have very kindly provided the mothers with a cup of tea throughout the winter.

CHEPSTOW.—This Centre is open for two hours each month. The number of visits to this Centre has decreased considerably in 1932. The total number of visits to the Centre in 1931 was 77, whereas in 1932 it was only 48. This is due partly to the amount of free milk being restricted to medical grounds only, but chiefly to the fact that one of the local general practitioners has very rightly started an Ante-natal Clinic which he holds for his own patients.

11 male and 9 female children were born before the end of the year of mothers who had attended the Centre.

Two primiparae attended.

Two patients were admitted to the Tredegar Maternity Home for their confinement as home conditions were not suitable.

One patient was referred to the Consultant Obstetrician for malpresentation, but this corrected itself before confinement and she was delivered safely at home.

One patient had a miscarriage, due no doubt to the fact that she was breast feeding a child of nearly two during her pregnancy.

EBBW VALE.—This Centre was open during 1932 for one half-day each week, and it was quite impossible to carry out the work as it should have been done in that time.

Two hundred and forty-seven was the total number of examinations made at the Centre. 33 primiparae attended. 106 patients were confined before the end of the year, 63 male children and 43 female children being born.

Five patients were found to be not pregnant.

One set of twins was born.

One baby was premature but lived.

A fairly large number of patients attending this Centre had albuminuria, and in spite of treatment and advice given both at the Centre and by their family doctor, three stillborn babies and one miscarriage resulted from this.

Two patients were referred to the Consultant Obstetrician, one of these was admitted to Glossop Terrace and confined there, the other was safely confined at home.

A much appreciated cup of tea was supplied by ladies of the Local Maternity and Child Welfare Committee to each of the mothers. Our thanks are due to Mrs. Williams especially for her faithful attendance at this Centre, and for the help she has rendered in many ways to the Health Visitors and myself during the very busy morning here.

MONMOUTH.—This Centre is open for one half-day each month. The total number of visits for the year shews an increase from 50 in 1931 to 61 in 1932. 14 primiparae attended. 27 new patients attended and before the end of the year 16 male and 13 female children were born.

One child was stillborn for no apparent reason.

One mother had twins, one of whom, owing to a difficulty which arose during birth, was stillborn.

One patient had a miscarriage in the 4th month of pregnancy.

One patient was confined (after being referred to the Consultant Obstetrician for toxæmia and contracted pelvis) in the Maternity Hospital and died as result of toxæmia, the child also being stillborn.

Another patient was referred to the Consultant but it was not found necessary to admit her to Hospital and she was successfully confined at home.

One patient was admitted to Tredegar Maternity Home and confined there because of unsuitable home conditions.

One patient was found to be not pregnant.

NEW TREDEGAR.—This Centre is open for one whole day monthly. 83 new patients attended of whom 21 were primiparae, and before the end of the year 36 male and 36 female children were born.

Two sets of twins were born.

There were two still births, one due to prematurity, and the other due to nephritis. This last patient attended only once in the 4th month of pregnancy when conditions were normal but later the nephritis developed and the child was stillborn at seven months. Had she attended regularly there is a possibility that this stillbirth might have been prevented.

One patient who was in the seventh month of pregnancy was found to have a dead foetus. She was referred to her family doctor who brought pregnancy to an end successfully.

Three patients were found to be not pregnant.

Four patients who expected confinement before the end of the year removed to another county.

PENGAM.—This Centre is open for one half-day monthly. During the year 62 new patients attended and the average attendance was 11.27 per session. Of these new patients, 14 were primiparae.

Before the end of the year 39 male and 24 female babies were born.

One baby was still-born and premature because of kidney disease in the mother.

Two mothers who attended this Centre died as result of confinement. One of these mothers attended faithfully and carried out our instructions and those of her family doctor regarding disease of kidneys, from which she suffered. Arrangements were being made for her to be admitted to a Maternity Home in the later months of pregnancy, but she had a miscarriage at five months and died of Cerebral Embolism. The other patient attended early in pregnancy only once, before any disproportion could be discovered. She had a very difficult labour, the baby was stillborn and the mother died the following day.

PONTYPOOL.—This Centre is open for one half-day a month. During the year 94 new patients attended, exactly the same as in the previous year. The number of re-visits was larger and therefore the average attendance was 20.7 per session, compared with 17.8 in 1931.

39 primiparae attended and of the babies born before the end of the year 52 were male and 61 were female. Four sets of twins were born, one set being still-born and premature.

There was one miscarriage, the cause being unknown.

One patient had a stillborn premature baby as the result of kidney disease. Three patients could not be traced, and five who attended were found to be not pregnant.

This is a very busy Centre, and we have had considerable difficulty in getting through the work here in the time allotted for it.

RHYMNEY.—This Centre is open for one morning once each month.

There was an encouraging increase in the attendance from 45 new patients in 1931 to 58 in 1932.

Of the mothers who attended 19 were primiparae. All of those mothers who were confined before the end of the year went to full term and were confined successfully. Twenty male children and 23 female children were born. Two mothers were found to be not pregnant.

One mother, because of unsuitable conditions at home, was referred to Tredegar Maternity Home and confined there.

One mother had a deformed child which lived 24 hours.

TREDEGAR.—This Centre was open one half-day monthly, but towards the end of the year arrangements were made to hold it every alternate Thursday in 1933.

Twenty of the patients who attended were primiparae, and before the end of the year 29 male and 34 female children were born. There was one set of twins. Three premature babies were stillborn. One mother suffering from Exophthalmic Goitre had a full-time still-born child. One patient was referred to the County Consultant, but admission to Hospital was not necessary.

One mother died as a result of confinement. She was found to be suffering from kidney disease. She was treated for this and passed successfully through her pregnancy and had a full-time living child. As soon as the confinement was over she went on to ordinary diet without her doctor's consent and on the day after she developed Eclampsia and died on the third day after confinement.

GENERAL.

It will be noted, as in former years, that the number of mothers who were confined before the end of the year was high in proportion to the number of new patients attending. This is due to the fact that a certain number of the patients who had attended in 1931 were not confined until 1932, and were therefore included in the total number of confinements for the latter year.

The majority of pregnancies fortunately run a normal course, without serious complications, but even in more or less normal pregnancies advice given at the Centres on minor ailments often adds greatly to the comfort of the pregnancies. Constipation is perhaps the chief minor ailment from which these women suffer, due in many cases to lack of green vegetables and fruit in their diet.

When a new patient attends the Centre, a record of her previous pregnancies, previous labours and any outstanding features in her past general health is taken. Her urine is examined. All this is done and recorded on the card by the Health Visitor of the Centre. The Medical Officer makes a physical examination of the patient and also takes the blood pressure. Pelvic measurements are also taken and recorded by the Medical Officer of the Centre. The taking of blood pressure has been found by experience to be very valuable, and during the year the Medical Officers have noted that an increased blood pressure is often an early sign of kidney disease in the expectant mother and is frequently found a month or six weeks before the appearance of Albuminuria in the urine. Treatment can therefore be started earlier.

The patient is always given an appointment card with the date of her next visit to the Centre filled in. She is also advised to attend regularly on the given dates until confinement, and particularly at the 36th week, when a special examination is made.

After the final examination a letter is sent to the patient's midwife and in certain cases to the patient's medical attendant as well.

In difficult cases, and in cases where further advice is deemed necessary, the patient is referred to Dr. Strachan, the Consulting Obstetrician, who decides which is the best course of procedure to adopt.

Our three great difficulties of former years in connection with Ante-natal Centres have now been partly smoothed away. The Centres have been re-arranged slightly, and this, in addition to the fact that milk is now granted on medical grounds only, has given us more time to examine the patients. Those patients who in previous years attended the Centres, took up our time, but did not follow advice given, and who simply came from mercenary motives, have ceased to attend, and this disposes of our first difficulty. The second difficulty of persuading mothers to attend as late in pregnancy as possible is disappearing, as will be seen by the increased number of re-visits over those of previous years.

Our third difficulty, of getting those suffering from Albuminuria to keep on strict diet, is not now so great, especially amongst the younger mothers attending. Several, however, in spite of treatment, have had an unfortunate termination to their pregnancies by giving birth to still-born premature babies. It would almost seem as if this disease is on the increase, but probably this apparent increase is due to the more accurate methods of diagnosis employed.

Whenever a patient connected with these Centres fails to attend on the appointed date she is visited by the Health Visitor, who tries to persuade her to continue her attendance.

During the year large numbers of expectant mothers had carious teeth extracted. It has been a great relief to many mothers attending these Centres to have the offending teeth painlessly extracted. This work is done by one of the County Dental Surgeons. This is an example of one of the old prejudices which these Centres are helping to break down, that it is harmful for expectant women to have teeth extracted.

The midwives in most of the districts continue to be of great assistance in bringing and sending patients to the Centres.

We have had many visits from midwives during the year.

2.—Dr. MARY GORDON, Assistant Medical Officer, Monmouthshire County Council.

NEWPORT CLINIC.—This Clinic is held one day in each month. The figures for 1932 show an all-round increase when compared with those of 1931. 172 new cases attended, and 355 visits were paid, giving an average attendance of 29.58 per session, as compared with 141 new cases, 236 visits and an average attendance of 23.6 in 1931.

Of the 172 new cases, 51 were primiparae (roughly 34 per cent.), 93 were referred to the Clinic by midwives, 5 were sent by their own doctors, 14 came of their own accord, and 17 were referred from the County Infant Welfare Centres. It will thus be seen that 72 per cent. of the cases attending came from midwives. This is a marked increase over the number referred last year by midwives, and it is gratifying to feel that the work of the Clinic is appreciated by the midwives of the districts.

The mothers who attended were, on the whole, very fit. Fourteen suffered from sub-normal nutrition, and the necessitous cases among these were helped with free food. Tonics, attention to constipation and dental sepsis improved the health of the others. Nine dental appointments were given, eight cases of organic heart disease, two cases of albuminuria, and eleven cases of increased blood pressure were found. In the latter cases, attention to diet and rest throughout the whole pregnancy prevented the onset of albuminuria and the possibility of eclampsia and a still-birth.

Three cases were referred to the Consultant Obstetrician. Two of these had their confinements in hospital. Two cases, because of unsuitable home conditions, were sent to Tredegar Maternity Home.

Three cases attended who were found not pregnant.

No maternal deaths occurred among the mothers who attended the Clinic.

3.—Dr. PHILOMENE R. WHITAKER, Assistant Medical Officer, Monmouthshire County Council.

ABERTILLERY.—This Clinic is held once a month, and is well attended. 432 cases were examined, and the average attendance per session was 36.0, a marked increase on last year's numbers. This is more than can be dealt with satisfactorily in a monthly Clinic. Some cases are hurriedly examined, and others are kept waiting about longer than is advisable for them.

Of these cases, 44 per cent. were primiparae, the highest figure yet obtained for primiparae. This is highly satisfactory, for it indicates that the mothers realize the necessity of being under supervision during their pregnancies, and accept attendance at the Clinic as a normal routine, not the nerve-wracking procedure they once considered it to be.

Of those attending the usual defects were discovered. Seven cases of breech presentation, four of contracted pelvis, and 3 albuminuria.

Two cases of twins and one of triplets were reported.

One case was referred to the Consultant Obstetrician.

Three maternal deaths occurred:—One eclampsia, one pneumonia, following confinement, and one contracted pelvis and complications.

CRUMLIN.—The total attendance for the year was good, and showed an increase on 1931, i.e., 336 as against 227. Of these 162 were new cases, and 174 re-visits, 40 per cent. were primiparae—the same as the previous year. The average attendance per session was 13.44 as compared to 9 per session in 1931.

Some 20 per cent. showed some abnormality in their pregnancies, including breech presentation, seven cases; flat pelvis, five cases; three cases of grave heart disease. Cases were referred to their own doctors in three instances on account of some defect. Two cases of contracted pelvis were referred to the Consultant Obstetrician. Five cases attended by reason of sterility.

One maternal death occurred—a case of grave heart disease, in which the question of terminating the pregnancy was discussed as possible treatment.

OAKDALE.—This Clinic is a half-day session only, and is always well attended, although the total number of attendances was not quite so good as the previous year, i.e., 131 compared to 199, making an average attendance per session of 10.91.

Of those attending 31 per cent. were primiparae, an increase on last year's percentage, and a welcome sign. The patients attend regularly, and are learning now to accept the ante-natal supervision as part of a normal routine.

The main defects found in the cases attending the Clinic are as follows:—Contracted pelvis, varying degrees, seven; breech presentation, three; choria, one.

There were two cases of twins.

Three cases were referred to Dr. Strachan for examination and advice.

No case of maternal death is reported from this Clinic.

SCHEDULE OF ANTE-NATAL CLINICS.

Clinic	Premises Used	Day and Time of Ante-natal Clinic	Date of Opening	Medical Officer in Charge	Health Visitor.	District served by the Clinic	No. of New Cases attended	Re-Visits	Total	Average Attendance at each Session
Abergavenny	...	4th Tuesday in month, 9.30 to 11.30 a.m.	1929 Nov., 26th	Dr. Mary Scott	Nurse G. I. Golding	Abergavenny Urban and Rural Areas	7	10	17	1.54
Abersychan	...	Every 4th Wednesday, 2 to 4 p.m.	Nov., 6th	Dr. Mary Scott	Nurse A. Roberts	Abersychan, Varteg and Garndiffaith	42	52	94	7.83
Abertillery	...	2nd Tuesday in month, 10 a.m. to 4 p.m.	1930 July, 19th	Dr. P. R. Whitaker	Nurse M. Sainsbury	Abertillery, Six Bells, Aberbeeg & Llanhilleth	230	202	432	36.0
Blaenavon	...	4th Friday in month, 10.30 a.m. to 12.30 p.m.	July, 29th	Dr. Mary Scott	Nurse C. M. Phillips	Blaenavon Urban District	54	58	112	10.18
Blaina	...	2nd Tuesday in month, 9.30 a.m. to 12.30 p.m.	1929 Nov., 12th	Dr. Mary Scott	Nurse C. Davies	Nantyglo and Blaina	116	207	323	26.91
Chepstow	...	1st Friday in month, 2.30 to 4.30 p.m.	Dec., 6th	Dr. Mary Scott	Nurse K. Webb	Chepstow Urban and Rural Areas	16	32	48	4.8
Crumlin	...	Alternate Fridays, 10 a.m. to 12 noon.	Nov., 1st	Dr. Philomene Whitaker	Nurse D. James	Llanhilleth, Crumlin, Havodrynyys, Newbridge, Abercarn and Cwmcaran	168	178	346	16.4
Ebbw Vale	...	3rd Tuesday in month, 9.30 a.m. to 4 p.m.	Nov., 19th	Dr. Mary Scott	Nurse M. Redwood	Ebbw Vale, Beaufort, Victoria, Waunllwyd and Cwm	91	156	247	20.5
Monmouth	...	1st Friday in month, 10.30 a.m. to 12.30 p.m.	Dec., 6th	Dr. Mary Scott	Nurse G. M. Watkins	Monmouth Urban and Rural Areas	27	34	61	6.1
Newport	...	2nd Friday in month, 10 a.m. to 12.30 p.m.	Dec., 2nd	Dr. Mary Gordon	Nurse R. Davies	Machen, Rhiwderin, Rogerstone, Bassaleg, Ynysddu, Cwmfelinfach, Cross Keys, Risca, Pontnewydd, Cwmbrian, Malpas, Caerleon, Caldicot, Magor Rural Area, Rumney and St. Mellons Rural Area	172	183	355	29.5
New Tredegar	...	3rd Friday in month, 9.30 a.m. to 12.30 p.m.	Nov., 15th	Dr. Mary Scott	Nurse F. Williams	New Tredegar, Cwmsyfiog and Aberbargoed	83	72	155	14.09
Oakdale	...	Alternate Mondays, 2 to 4 p.m.	Oct., 28th	Dr. Philomene Whitaker	Nurse K. H. Jones	Oakdale, Blackwood and Pontllanfraith	133	98	231	10.0
Pengam	...	2nd Friday in month, 9.30 a.m. to 12.30 p.m.	Dec., 3rd	Dr. Mary Scott	Nurse M. B. James	Cefn Forest, Pengam, Maescywmmer, Bedwas and Trethomas	62	62	124	11.27
Pontypool	...	4th Tuesday in month, 1.30 to 3.30 p.m.	Nov., 26th	Dr. Mary Scott	Nurse E. A. Morgan	Pontypool, Pontnewydd, Pontymoile, Panteg, and Griffithstown.	94	113	207	20.7
Rhymney	...	1st Tuesday in month, 10 a.m. to 12 noon.	Dec., 3rd	Dr. Mary Scott	Nurse W. Jones	Rhymney and Abertyswg	58	56	114	10.36
Tredegar	...	Alternate Thursdays 2 to 4 p.m.	Nov., 19th	Dr. Mary Scott	Nurse K. M. Walters	Tredegar, Sirhowy, Trevil, Bedwelty Pitts, Troedrhingwair, Hollybush, Markham Village and Argoed	58	49	107	8.91
Totals ...							1411	1562	2973	14.79

F.—MATERNITY AND CHILD WELFARE CENTRES.

The following are the details of the Centres now open under the scheme approved by the County Council and the Local Government Board in 1916, the number being 43 :—

Location of Centre.	District Served.	Premises Utilised	Date of Opening	Day and Hours of Consultations	Medical Officer.
Aberbargoed ...	Aberbargoed	Domestic Arts Centre, Aberbargoed School	1917 Nov. 4th	Wednesday, 10 a.m.—1 p.m.	Dr. A. Roberts
Abercarn ...	Abercarn and Cwmearn	English Baptist Church Schoolroom, Abercarn	Oct. 18th	Thursday, 10 a.m.—12-30 p.m., 2-30—4-30 p.m.	Dr. E. M. Griffith
Abergavenny ...	Abergavenny Urban and Rural Districts	Boy Scouts' Rooms, Neville Street, Abergavenny.	April 17th	Tuesday, 2-30—4-30 p.m.	Dr. G. W. Parry
Abersychan ...	Abersychan	Congregational Schoolroom, Abersychan.	1918 Oct. 29th	Wednesday, 11 a.m.—1 p.m.	Dr. R.J.S. Verity
Abertillery ...	Abertillery and Cwmtillery	59 Tillery Street, Abertillery	1917 June 8th	Friday, 10-45 a.m.—3 p.m.	Dr. T. Baillie Smith
Abertysswg ...	Abertysswg	Ainon Baptist Chapel, Abertysswg	1920 July 7th	Wednesday, 10 a.m.—1 p.m. Doctor attends on alternate Wednesdays	Dr. Mary Scott
Beaufort ...	Beaufort	Primitive Methodist Schoolroom, Beaufort	1919 Sept. 3rd	Wednesday, 11 a.m.—1 p.m. Doctor attends on alternate Wednesdays	Dr. Mary Scott
Blackwood ...	Blackwood, Pontllanfraith and Argoed	Parish Hall, Blackwood	1917 April 20th	Alternate Mondays 10-30 a.m.—12-30 p.m. and 2-4 p.m.	Dr. P. R. Whitaker
Blaenavon ...	Blaenavon	Workmen's Surgery, Blaenavon	June 6th	Wednesday, 2-4 p.m.	Dr. J. Reynolds
Blaina ...	Blaina	Church Institute, Blaina	April 17th	Friday, 10 a.m.—4 p.m.	Dr. E. D. Owen
Caerleon ...	Caerleon and Christchurch	Ty Craig, High Street, Caerleon.	Nov. 21st	Alternate Wednesdays, 2-4 p.m.	Dr. M. Gordon
Caldicot ...	Caldicot, Sudbrook, Portskewett & District	Wesleyan Chapel, Caldicot.	1920 June 1st	Tuesday, 1-30—3-30 p.m.	Dr. M. Gordon
Chepstow ...	Chepstow Urban and Rural Districts	Domestic Arts Centre, Bridge Street School, Chepstow	1917 March 27th	Thursday, 10 a.m.—12 noon, 2-4 p.m.	Dr. T. L. Drapes
Crosskeys ...	Crosskeys, Wattsville and Pontywaun	Primitive Methodist Schoolroom, Crosskeys	Nov 23rd	Friday, 2-4 p.m.	Dr. A. S. M. Dewar
Crumlin ...	Crumlin	4 Hafodyrynys Road, Crumlin.	1924 March 28th	Friday, 2-4 p.m.	Dr. P. R. Whitaker
Cwm ...	Cwm, Victoria and Waunllwyd	Parish Hall, Cwm	1917 Nov 20th	Thursday, 10-30 a.m.—1 p.m.	Dr. M. Scott
Cwmbran ...	Llantarnam, Cwmbran, Llanfrechfa & Ponthir	Council Offices, Cwmbran	March 21st	Thursday, 2-4 p.m.	Dr. B. O. MacQuillan
Ebbw Vale ...	Ebbw Vale	James Street Wesleyan Chapel, Ebbw Vale	March 13th	Tuesday, 10 a.m.—4 p.m.	Dr. F. M. Fonseca
Garndiffaith ...	Varteg, Victoria, Cwmavon & Garndiffaith	Calvinistic Methodist Schoolroom, Garndiffaith	Oct. 23rd	Tuesday, 11 a.m.—1 p.m.	Dr. R.J.S. Verity
Llanhilleth ...	Llanhilleth and Aberbeeg	Workmen's Institute, Llanhilleth	1917 Oct. 15th	Monday, 2-4 p.m.	Dr. T. Baillie Smith

Location of Centre.	District Served	Premises Utilised.	Date of Opening	Day and Hours of Consultations	Medical Officer.
Malpas	Malpas	The Institute,	1930 Jan. 2nd	Alternate Thursdays, 10 a.m. to 12 noon	Dr. Mary Gordon
Markham Village	Markham	46 Abernant Road, Markham	1933 Feb. 15th	Wednesdays, 2—4 p.m.	Dr. A. Roberts
Monmouth	Monmouth Urban and Rural Districts	Workingmen's Inst., Monk St., Monmouth	1917 June 15th	Friday, 2-30—4-30 p.m.	Dr. W. H. Williams
Nantyglo	Nantyglo	English Wesleyan Church, Nantyglo	1924 July 14th	Mondays, 1 p.m.—4 p.m.	Dr. T. M. O'Riordan
Newbridge	Newbridge and Pentwynmawr	Tabernacle Baptist Schoolroom, Newbridge	1917 March 20th	Monday, 10—12 noon, and 2—4 p.m.	Dr. W. R. Nash
Newport	Maesglas, Gaer Park, St. Brides, Magor, etc.	School Clinic, Stanley Road, Newport	March 21st	Alternate Wednesdays 2—4 p.m.	Dr. M. Gordon
New Tredegar	New Tredegar and Cwmsyflog	Wesleyan Methodist Schoolroom, New Tredegar	March 29th	Monday, 10—12 noon and 2—4 p.m.	Dr. A. Roberts
Oakdale	Oakdale, Rhiw-syr- dafydd and Mark- ham Village.	Women's Institute, Oakdale	1918 Oct. 25th	Alternate Mondays, 10.30—2.0 p.m.	Dr. P. R. Whitaker
Panteg	Panteg, Griffithstown and Pontrhydyrun	Baptist Chapel, Griffithstown.	1917 March 21st	Thursday, 10—12 noon	Dr. B. O. MacQuillan
Pengam	Pengam, Fleur-de-lis and Maesycwmmer	Vine House, High Street, Pengam	March 12th	Thursday, 10.30—12.30 and 1-30—3-30 p.m.	Dr. W. Panes
Pontnewynydd	Pontnewynydd	Wesleyan Chapel, Pontnewynydd	April 19th	Thursday, 11 a.m.— 1 p.m.	Dr. R. J. S. Verity
Pontymoile	Pontymoile, New Inn, and Pontypool Road	Mission Hall, Pontymoile	Oct. 17th	Tuesday, 10—12 noon,	Dr. T. M. O'Riordan
Pontypool	Pontypool, Mamhilad, Glascoed, Goytre, Coedypaen, Llangibby	Tabernacle Schoolroom, Crane Street, Ponty- pool	May 9th	Wednesday, 10—12 noon and 2—4 p.m.	Dr. E. D. Owen
Rhymney	Rhymney and Rhym- ney Bridge.	Domestic Arts Centre, Middle Rhymney School	March 12th	Tuesday, 2—4 p.m.	Dr. R. V. de A. Redwood
Risca	Risca	Domestic Arts Centre, Danygraig School, Risca	March 23rd	Friday, 10—12 noon and 2—4 p.m.	Dr. W. B. Owen
Rogerstone	Rogerstone, Bassaleg, and Rhiwderin	Domestic Arts Centre, Rogerstone School	Nov. 12th	Alternate Fridays, 10—12 noon	Dr. P. R. Whitaker
Rumney	St. Mellons, Peterstone and Rumney	Baptist Chapel, Rumney	Dec. 5th	Alternate Thursdays, 2—4 p.m.	Dr. E. D. Owen
Six Bells	Six Bells & Aberbeeg	Methodist Chapel, High St., Six Bells	1920 Sept. 29th	Wednesday, 2—4 p.m.	Dr. T. Baillie Smith
Tredegar	Tredegar, Sirhowy, Trevil, Troedrhiwg- wair, Bedwellty Pits, Hollybush	Wesleyan Chapel, Har- court St., Tredegar	1917 Feb. 26th	Tuesday, 11 a.m.— 1 p.m.	Dr. E. T. H. Davies
Trethomas	Trethomas, Bedwas, and Machen	Baptist Chapel, Trethomas	April 19th	Monday, 10.30—12.30 and 1-30—3-30 p.m.	Dr. Mary Scott
Upper Pontnewydd	Pontnewydd and Croesyceiliog.	Ashley House, Pontnewydd.	1919 June 16th	Tuesday, 2—4 p.m.	Dr. T. M. O'Riordan
Usk	Usk and Rural Area	Twyn Square, Usk.	Nov. 11th	Alternate Tuesdays, 2—4 p.m.	Dr. P. R. Whitaker
Ynysddu	Cwmfelinfach and Ynysddu	Domestic Arts Centre, Ynysddu School.	March 23rd 1917	Friday, 10—12 noon	Dr. M. Gordon

G.—DETAILS OF ATTENDANCES AT CENTRES.

CENTRE	MEDICAL OFFICER	No. of Infants on Regist- er at 31st Dec., 1932	INFANTS					NURSING MOTHERS			EXPECTANT MOTHERS				
			New Cases		Re-visits		Total	Grand Total	Average Attend- ance at each Session	New Cases	Re- Visits	Total	New Cases	Re- Visits	Total
			Under 1 Year	1-5 Years	Under 1 Year	1-5 Years									
							Under 1 Year	1-5 Years	Under 1 Year	1-5 Years	Under 1 Year	1-5 Years	Under 1 Year	1-5 Years	Under 1 Year
Aberbargoed	Dr. A. Roberts	353	143	20	1304	570	1447	590	2037	42.4	115	235	28	27	55
Abercarn	Dr. E. M. Griffith	284	113	4	2244	1060	2357	1064	3421	71.2	—	—	—	—	—
Abergavenny	Dr. G. W. Parry	296	90	37	864	511	954	548	1502	31.2	24	93	2	13	15
Abersychan	Dr. R. J. S. Verity	182	59	26	726	268	785	294	1079	22.4	16	23	—	—	—
Abertillery	Dr. T. B. Smith	658	246	79	2832	1085	3078	1164	4242	86.5	7	32	4	—	4
Aberystwyg	Dr. F. M. Scott	101	45	10	520	145	565	155	720	14.9	14	107	14	21	35
Beaufort	Dr. M. Scott	128	79	25	718	144	797	169	966	20.1	19	34	2	1	3
Blackwood	Dr. P. R. Whitaker	320	137	7	998	350	1135	357	1492	62.1	173	338	26	30	56
Blaenavon	Dr. J. Reynolds	247	146	16	1552	597	1698	613	2311	48.1	81	553	4	9	13
Blaina	Dr. E. D. Owen	321	124	10	1718	563	1842	573	2415	49.2	62	123	—	—	—
Caerleon	Dr. M. Gordon	96	33	12	283	262	316	274	590	24.5	20	84	8	7	15
Caldicot	Dr. M. Gordon	196	64	27	945	888	1009	915	1924	40.0	35	167	15	10	25
Chepstow	Dr. T. L. Drapes	282	81	15	1326	1750	1407	1765	3172	64.7	—	—	—	—	—
Crosskeys	Dr. A. M. Dewar	106	48	4	632	393	680	397	1077	21.9	22	38	9	1	10
Crumlin	Dr. P. R. Whitaker	223	115	3	888	334	1003	337	1340	27.3	46	137	—	—	—
Cwm	Dr. W. Pines	200	93	49	1036	260	1129	309	1438	29.3	24	58	—	—	—
Cwmbran	Dr. B. O. MacQuillan	223	76	4	907	477	983	481	1464	29.8	51	82	11	10	21
Ebbw Vale	Dr. F. M. Fonseca	334	181	53	1874	454	2055	507	2562	53.3	34	72	—	—	—
Garndiffaith	Dr. R. J. S. Verity	190	65	8	720	292	785	300	1085	22.6	30	54	—	—	—
Llanhilleth	Dr. T. B. Smith	390	142	46	1702	720	1844	766	2610	54.3	2	23	8	1	9
Malpas	Dr. M. Gordon	114	32	7	304	543	336	550	886	32.8	16	106	5	—	5
Monmouth	Dr. W. H. Williams	192	70	15	617	531	687	546	1233	25.1	—	—	1	4	5
Nantyglo	Dr. T. M. O'Riordan	191	77	5	965	354	1042	359	1401	28.5	54	301	5	1	6
Newbridge	Dr. W. R. Nash	340	146	17	2444	1364	2590	1381	3971	82.7	23	113	—	6	6
Newport	Dr. M. Gordon	227	101	24	662	333	763	357	1120	44.8	65	223	17	3	20
New Tredegar	Dr. A. Roberts	320	138	15	1664	537	1802	552	2354	48.5	96	189	7	9	16
Oakdale	Dr. P. R. Whitaker	194	95	15	593	338	688	353	1041	43.3	181	356	—	—	—
Panteg	Dr. B. O. MacQuillan	183	64	7	890	594	954	601	1555	31.7	39	114	6	2	8
Pengam	Dr. T. M. O'Riordan	382	165	23	1575	576	1740	599	2339	47.7	87	246	—	1	1
Pontnewydd	Dr. T. M. O'Riordan	158	56	1	681	301	737	302	1039	21.6	44	112	11	7	18
Pontnewynydd	Dr. R. J. S. Verity	263	113	5	914	431	1027	436	1463	29.7	46	86	—	—	—
Pontymoile	Dr. T. M. O'Riordan	145	47	9	527	373	574	382	956	19.8	27	73	2	—	2
Pontypool	Dr. E. D. Owen	316	143	8	1400	506	1543	514	2057	42.8	53	102	—	—	—
Rhymney	Dr. R. V. de A. Redwood	218	99	9	899	167	998	176	1174	24.4	48	236	3	1	4
Risca	Dr. W. B. Owen	321	131	7	1989	1281	2120	1288	3408	69.5	27	61	10	6	16
Rogerstone	Dr. P. R. Whitaker	146	61	8	485	262	546	270	816	31.3	117	261	5	10	15
Rumney	Dr. E. D. Owen	122	48	13	337	257	385	270	655	24.2	21	50	1	1	2
Six Bells	Dr. T. B. Smith	322	156	40	1615	633	1771	673	2444	50.9	11	63	—	—	—
Tredegar	Dr. E. T. H. Davies	507	309	33	983	235	1292	268	1560	32.4	—	—	—	—	—
Trethomas	Dr. M. Scott	270	95	13	1479	783	1574	796	2370	49.3	51	152	25	24	49
Usk	Dr. P. R. Whitaker	87	32	5	226	174	258	179	437	18.1	62	148	14	23	37
Ynysddu	Dr. A. M. Dewar	225	117	3	1033	360	1150	363	1513	30.8	56	150	20	10	30
Total		10346	4375	737	46071	22056	50446	22793	73239	39.67	1899	3654	275	254	529

H.—DETAILS OF MOTHERS' AILMENTS UPON WHICH ADVICE WAS GIVEN AT THE CENTRES.

Peculiar to Nursing Mothers—

Deficient Lactation	...	58
Sore Nipples	...	19
Mastitis	...	13
Abscess of Breast	...	7
Not Classified	...	40

Peculiar to Women—

Menorrhagia	...	24
Leucorrhœa	...	34
Amenorrhœa	...	6
Prolapse of Uterus	...	4
Abnormal Vaginal Discharge	...	3
Dysmenorrhœa	...	1
Pruritis Vulvæ	...	6
Ovarian Cyst	...	2
Metrorrhagia	...	3
Hyperemesis	...	2
Mal position of Uterus	...	1
Cervicitis	...	1
Not Classified	...	31

Alimentary System—

Constipation	...	301
Dental Caries	...	191
Hæmorrhoids	...	27
Gastritis	...	41
Pyorrhœa	...	32
Diarrhœa	...	1
Worms	...	1
Stomatitis	...	1
Not Classified	...	48

Respiratory, Cardiac and Circulatory Systems—

Anæmia	...	176
Bronchitis & Bronchial Catarrh	...	30
Varicose Veins	...	10
Heart Disease	...	7
Pulmonary Tuberculosis	...	3
Asthma	...	2
Pleurisy	...	1
Not Classified	...	11

Skin—

Eczema	...	6
Boils	...	5
Scabies	...	2
Acne Rosaris	...	2
Septic Finger	...	5
Lipoma	...	1
Insect Bite	...	1
Abscess	...	9
Not Classified	...	22

Eye—

Conjunctivitis	...	8
Blepharitis	...	1
Styes	...	1
Keratitis	...	1
Not Classified	...	4

Ear, Nose and Throat—

Laryngitis	...	14
Tonsilitis	...	5
Enlarged Thyroid	...	5
Nasal Catarrh	...	12
Otorrhœa	...	5
Enlarged Tonsils	...	3
Not Classified	...	7

Nervous System—

Neuralgia	...	2
Neuritis	...	10
Migraine	...	8
Insomnia	...	1
Epilepsy	...	4
Not Classified	...	6

Urinary System—

Cystitis	...	2
Albuminuria	...	3
Nephritis	...	6
Not Classified	...	10
Rheumatism	...	9
Rheumatic Fever	...	1
Synovitis	...	2

Venereal Diseases—		Miscellaneous—	
Venereal Disease	...	General Debility	...
Suspected Venereal Disease	2	Hernia	...
		Backache	...
		Malnutrition	...
		Miscellaneous	...
			173
			2
			8
			4
			20
			1537

I.—DETAILS OF INFANTS' AILMENTS UPON WHICH ADVICE WAS GIVEN AT THE CENTRES.

Prematurity	...	33	Respiratory, Cardiac and Circulatory Systems—	
Birth Injuries and Malformations—			Bronchitis & Bronchial Catarrh	1260
Umbilical Protrusion & Hernia	...	332	Anæmia	...
Phimosis	...	249	Heart Disease	...
Inguinal Hernia	...	66	Whooping Cough	...
Tongue Tie	...	57	Pneumonia	...
Hydrocele	...	12	Tuberculosis of Lungs	...
Undescended Testicles	...	13	Asthma	...
Hydrocephalus	...	3	Epistaxis	...
Hare Lip	...	2	Pleurisy	...
Cleft Palate	...	3	Empyema	...
Spina Bifida	...	2	Not Classified	...
Hæmatoma (Sterno-mastoid)	...	5		
Meningocele	...	3	Skin—	
Congenital Deformity of Ear	...	1	Impetigo	...
Broken Arm	...	4	Urticaria	...
Torticollis	...	3	Intertrigo	...
Hypospadias	...	3	Eczema	...
Umbilical Hæmorrhage	...	1	Umbilical Discharge	...
Imperforate Hymen	...	2	Nævus	...
Alimentary System—			Sores	...
Constipation	...	766	Scabies	...
Enteritis	...	348	Seborrhœa	...
Gastro-Enteritis	...	286	Abscess	...
Stomatitis	...	152	Burns and Scalds	...
Dentition	...	163	Boils	...
Worms	...	163	Dermatitis	...
Gastritis	...	150	Sore Buttocks	...
Dental Caries	...	121	Ringworm	...
Flatulence	...	94	Mastitis	...
Vomiting	...	20	Pemphigus Neonatorum	...
Jaundice	...	21	Erythema	...
Vaginitis	...	4	Psoriasis	...
Colitis	...	6	Chilblains	...
Rectal Prolapse	...	2	Not Classified	...
Not Classified	...	20		

Eye—				Lymphatic System—							
Blepharitis	...	...	75	Adenitis	...	...	105
Conjunctivitis	...	...	73	Urinary System—					
Squint	...	...	76						
Nystagmus	...	...	2						
Ptosis	...	...	1						
Ophthalmia Neonatorum	...	...	13						
Epiphora	...	...	3						
Corneal Ulcer	...	...	1	Enuresis	...	...	29
Keratitis	...	...	1	Cystitis	...	...	10
Photophobia	...	...	1	Nephritis	...	...	4
Styes	...	...	2	Inflamed Penis	...	...	8
Congenital Cataract	...	...	1	Hæmaturia	...	...	1
Not Classified	...	...	7	Deficiency Diseases—					
Ear, Nose and Throat—											
								Richets	177
								Debility	161
								Malnutrition	25
				Marasmus	...	...	48		
				Nasal Catarrh	368	Venereal Diseases—			
Otorrhœa and Otitis	...	...	302						
Septic and Enlarged Tonsils	...	...	267	Ophthalmia Neonatorum	...	...	4
and Adenoids	...	...	267	Congenital Syphilis	...	...	2
Mouth Breathing	...	...	3	Rheumatism					
Laryngitis	...	...	5						
Deafness	...	...	3						
Tonsilitis	...	...	6						
Laryngeal Catarrh	...	...	2	Chorea	...	...	12
Bones and Joints—				Growing Pains	...	...	2		
				Miscellaneous—							
Orthopædic Conditions	108					Infectious Diseases	86
Nervous System—											
								Injuries	12
								Deaf and Dumb	2
				Miscellaneous	...	...	10		
				Convulsions	36	<hr/> 7705 <hr/>			
Mentally Deficient	...	...	21						
Mongolian Imbecile	...	...	3						
Cretinism	...	...	1						

ABERTYSSWG.—This Centre is open for one morning session weekly. The Medical Officer is in attendance once a fortnight.

There was a decrease in attendance at the Centre, from 761 in 1931 to 720 in 1932. The number of toddlers decreased from 297 in 1931 to 169 in 1932.

Unfortunately, the premises used as the Infant Welfare Centre here are draughty and uncomfortable, but steps are now being taken to remedy this.

The number of breast-fed babies attending was much the same as that of 1931, the percentage being 54.0 in 1931 and 54.5 in 1932.

BEAUFORT CENTRE.—This Centre is open for two hours each week, but the Medical Officer is in attendance only once a fortnight.

The total number of attendances showed a definite increase again over that of the previous year, being 966 compared with 907 in 1931. There was a slight decrease in the number of toddlers who attended the Centre.

There was a considerable drop in the number of breast-fed babies attending. In 1931 the percentage was 64.2, while in 1932 it was 53.8. This brings the amount of breast-feeding in line with that of the other Centres. It is quite impossible to say why this has happened, as the conditions under which the people of this area were living in 1932 were much the same as those of previous years.

PENGAM CENTRE.—This Centre is open for one whole day, that is, two sessions weekly.

The total number of infants who attended during the year showed a very slight decrease compared with that of 1931. In 1931 the number was 2,410, while in 1932 it was 2,339—a difference of 71. The number of toddlers who attended increased from 569 to 599.

The amount of breast-feeding showed a slight improvement, being 54.8 compared to 52.6 in 1931.

The ladies of the local Infant Welfare Committee continue to take a warm interest in the work of the Centre, and in the welfare of the mothers and babies of this district. Mrs. Morgan particularly was very faithful in her attendance at the Centre during the year 1932.

TRETHOMAS.—This Centre is open for one whole day, that is two sessions each week.

There was a decrease in the total number of children who attended the Centre, the numbers falling from 2,854 in 1931 to 2,370 in 1932. This decrease is explained by the fact that work at the local colliery improved in 1932, with a consequent falling-off in attendance of a certain type of woman who attends the Centre only when she is in receipt of free milk or dried food. In spite of the decrease in numbers the attendance in 1932 may still be considered very satisfactory, being an average of 49.3 per week.

The number of toddlers showed an increase from 515 to 796. There was a slight increase in the number of breast-fed babies.

GENERAL.—In all four Centres the attendances continued satisfactorily. Last year, that is in 1931, Beaufort was outstanding in that there was, for no apparent reason, a large increase in the numbers attending the Centre compared with those of 1930. This year Beaufort is again outstanding in that there has been a marked decrease in the number of breast-fed babies. It would be interesting to discover the causes of these fluctuations especially as this is rather an isolated area less likely to be affected by outside influence than the other three areas.

The amount of dried milk and fresh milk given free in these areas remained about the same as in previous years, or diminished slightly, as milk was given more strictly on medical grounds during 1932.

The work of the Centres continues to be mainly preventative and drugs are not prescribed to any great extent. Bronchial catarrh and other respiratory troubles are the most common ailments amongst the infants, and therefore an expectorant cough mixture is perhaps more frequently prescribed than any other drug.

The incidence of rickets remains about the same as in the previous year. When the mother can be persuaded to give Cod liver oil in some form or another, to let the child practically live out of doors, to have patience, and not to expect a spectacular cure in the first week or so, the child usually recovers well. Unfortunately many mothers carry out the treatment for a few weeks only, are disappointed with the results, and return to the Centre months later when the child shews gross deformities, and must then have orthopaedic treatment.

There was very little undernourishment found in babies attending these Centres and that, as before, was due rather to improper feeding than to insufficient food.

No Ante-natal work was carried out at the above Centres. All Ante-natal patients were referred to the nearest Ante-natal Centre.

Many of the mothers and children benefited during the year from the dental treatment which they received from the County Dentists.

2.—Dr. MARY GORDON, Assistant Medical Officer, Monmouthshire County Council.

DETAILS OF FEEDING.

	Caldicot	Caerleon	Newport	Malpas
	%	%	%	%
Breast-fed	40.0	50.0	45.4	62.3
Breast and Artificially fed	24.0	10.0	18.3	10.8
Artificially fed ...	36.0	40.0	36.3	26.9

NEWPORT CENTRE.—This Centre is held on alternate Wednesday afternoons and is attended by mothers and babies from the Gaer, Glasllwch, some parts of Liswerry, and Maesglas.

There is an increase in the total attendances and in the average attendance per session, over last year's figures. This is all the more satisfactory in view of the fact that towards the end of the year the amount of free food given away was very much curtailed, so that mothers got no encouragement to bring babies to the Centre for purposes of obtaining free food only. There is still a great deal of unemployment in the Maesglas area, owing to irregular work at the Docks, and most of the food given to aid nursing mothers went to women in that district. Even with the extra nourishment, many of the women had to give complementary or supplementary feeds about the fifth or sixth month, and so the figure for breast-feeding is lower than last year (45.4 compared with 52.3).

The babies on the whole were healthy. 3 cases of fairly severe eczema were seen, and one very acute case was admitted to the Royal Gwent Hospital—all cases were being fed on an artificial food.

4 cases attended the Orthopaedic Clinic—2 with Pes Planus were given special boots with wedges, 2 cases of bowing of the legs were given splints and attended for massage.

3 sets of twins attended and did well.

The total visits of "toddlers" to the Centre amounted to 357. Threadworms, bronchial catarrh, dental caries and enlarged or diseased tonsils were their chief ailments. Mild rickets was seen in 7 cases who were healthy as babies, but who received a deficient supply of foods rich in vitamins after the weaning period. Cod liver oil was given to these children with much benefit. No malnutrition was observed among the 1-5 years group. Many of the toddlers were able to be observed as they accompanied their mothers who were bringing babies to the Centre.

Four expectant mothers were referred to the Ante-natal Clinic.

No malnutrition was observed among nursing mothers, though 10 per cent. showed lactational deficiency. Attention to dental sepsis greatly improved the health of several mothers.

More free food was given away this year than during last year.

CAERLEON CENTRE.—This Centre is held fortnightly, on a Wednesday afternoon.

The figures for attendance show a decrease all round when compared with the figures for 1931—the average attendance, 24.5, being almost the same as in 1930. 33 new babies attended, 590 total attendances were made, and 283 re-visits were paid.

The mothers who attended with their babies were very fit and were able in most cases to persevere with breast-feeding up till the weaning period. The percentage of breast-fed babies shows a gratifying increase over the previous year, 50 per cent. compared with 43.4 per cent. Caerleon, being a semi-rural area, shows only to a slight extent the effects of unemployment.

The babies were very fit. Two cases of mild rickets were seen, and one case of severe eczema. One case of hare-lip and cleft palate is awaiting admission to Hospital.

42 toddlers attended for the first time, chiefly because of minor ailments. Six showed signs of mild rickets, and only one showed any malnutrition. Bronchial catarrh, threadworms, and enlarged tonsils were the chief ailments.

26 nursing mothers attended for advice and treatment. Six showed general debility and were helped with tonics and milk in necessitous cases. Four had dental appointments.

Only a small amount of free food was given away.

Several ladies of the Local Infant Welfare Committee attended regularly throughout the year and gave much valuable help.

MALPAS CENTRE.—This Centre is held on alternate Thursday mornings.

The figures for attendance show a decrease all round when compared with the previous year; the average attendance was 32.8.

The babies were all very fit and as the nutrition of the mothers was very good it is not surprising that the percentage of breast-fed babies is very high—62.3 per cent. Most of the babies were breast-fed when brought to the Clinic, and owing largely to the fitness of the mothers, there was no difficulty in maintaining breast-feeding up to 9 months.

As there is little unemployment in the district, only a small amount of free food was given away.

Among the babies, 4 cases of mild rickets were seen, 2 of which attended the Orthopaedic Clinic and had splinting and massage. One case of severe eczema attended the Royal Gwent Hospital and one case of pyloric stenosis was admitted to hospital.

63 toddlers attended, only two of whom showed nutrition slightly below normal. Four had tonsils and adenoids removed at the County Clinic. Apart from about 10-12 who came with their mothers who were bringing a baby, the others came because of bronchial catarrh, threadworms, enlarged tonsils and decayed teeth.

There were 106 total attendances of nursing mothers, three of whom had lactational deficiency.

Five expectant mothers were referred to the Ante-natal Clinic at Newport.

CALDICOT CENTRE.—The Centre is held weekly and is attended by mothers and babies from Caldicot and the surrounding rural district.

The figures for 1932 show a decrease all round compared with 1931—the average attendance being 40.0.

The percentage of breast-feeding decreased slightly but breast and artificially fed cases show a marked increase—this is a very encouraging feature, showing that more mothers tried to persist with breast-feeding.

The amount of free food given away shows a decrease corresponding to the smaller attendance.

915 visits of toddlers were paid. Three attended Dr. Coulter for treatment of squint, four had dental appointments, two had tonsils and adenoids removed through the County Clinic. Three were underweight. The remainder attended with minor ailments, bronchial catarrh and threadworms.

Of the nursing mothers who attended for advice and treatment, the majority were very fit but six suffered from lactational deficiency.

Several ladies of the Local Infant Welfare Committee attend regularly, and my thanks are due to them for their valuable help.

3.—Dr. ANNIE C. ROBERTS, Assistant Medical Officer, Monmouthshire County Council.

	Aberbargoed Centre.		New Tredgar Centre.	
Breast-fed	81 = 46 per cent.	83 = 49 per cent.	
Breast and bottle	32 = 18½ per cent.	43 = 25.5 per cent.	
Bottle fed	63 = 35½ per cent.	44 = 25.5 per cent.	

ABERBARGOED CENTRE.—Breast feeding has risen slightly from 41 per cent. in 1931 to 46 per cent. in 1932, but there are still far too many babies who are being bottle fed before they attend the Centres. Some mothers will not persevere with breast feeding at all, and seem to take it for granted that if they cannot breast-feed their first babies, subsequent children must also be bottle fed.

The attendance at this Centre has fallen from 53.8 in 1931 to 42.4 in 1932. This is due to four reasons.

(1) During the second half of the year free food was given for medical reasons rather than for pecuniary ones, the result being that those people who attended for food only did not continue their visits.

(2) For some time during the year there was a medical officer in attendance at the Centre on alternate Wednesdays only, and the attendances on the other Wednesdays dropped to a very low figure.

(3) For a few months the drug cupboard at the Centre was practically depleted and this also tended to lower the attendance, especially as regards the older children.

(4) The weather during the last three months of the year was very bad and as a good number of the women attending came from Markham, it was thus impossible for them to attend regularly.

Less free food has been given this year than previously, but during the summer the Clinic benefited considerably by the milk which was granted to a limited number of toddlers by the "Save the Children Fund."

Drugs are prescribed rather freely here as few mothers would be able to afford them otherwise. Those in common use are ointments for eczema, impetiginous sores and blepharitis, ung. camph. co. for chest complaints, hyd. c. cret, and sod. cit. for hyperacidity of gastric or urinary systems.

Ante-natal work of any kind is rarely done here, as it is found that if mothers are treated at the Infant Welfare Centre, they use it as an excuse for non-attendance at the Ante-natal Centre at New Tredegar.

During the year very little malnutrition has been noticed among infants of one to nine months, but as previously noted children of nine months to two years are not nearly in such good condition. This seems to be accounted for by the fact that once a child is able to take a little solid food, it is given an unsuitable diet, often having food which it is quite unable to digest and gastritis and enteritis are apt to ensue. Whereas it has previously been bottle or breast fed at regular hours, it is now allowed to eat bread and butter, biscuits, etc., and also it is given a totally inadequate amount of milk.

82 children of the age 9 months to 2 years attended the Centre.

The condition of the mothers seems to have improved slightly, and it is to be noted that one or two mothers who hitherto have had delicate children whom they were unable to breast feed, are at present breast feeding healthy infants. In the majority of cases treatment for dental caries or Pyorrhœa is necessary.

80 children of the ages 2 to 5 years attended here during 1932. On an average these children were slightly underweight, but in few cases to any serious extent. A large number of these toddlers suffered from dental caries or enlarged tonsils and adenoids, or both, and the majority of them have received treatment at the Clinic, which has been extremely beneficial to their general health. One child who was very much underweight was also very much undersized, and it is probable that she is a case of infantilism. Another child (an old case who had not attended for a year) had a very advanced tubercular peritonitis and was at once referred to the Tuberculosis Physician but unfortunately the disease had progressed too far for anything to be done.

More than 60 children from Markham attended the Centre in 1932. Of these 35 were aged one to nine months, 17 were nine months to two years, and 9 were in the two to five year group. A Markham Clinic is to be opened in 1933 and the Aberbargoed Centre will become a half-day (morning) one instead of an all-day.

NEW TREDEGAR CENTRE.—Breast-feeding here is practically the same as last year—50 per cent. in 1931, 49 per cent. in 1932—but this year fewer babies have been entirely artificially-fed, the numbers being 34 per cent. in 1931 and 25½ per cent. in 1932. Minor ailments in the mothers are too often considered a sufficient excuse for weaning, and it is very difficult to persuade a woman who has mastitis in one breast that it is quite safe to feed the baby on the other breast.

The attendance here has been practically the same as in the previous year, being 49.3 in 1931 and 48.5 in 1932. In the summer months the attendance was high, being usually 50 to 60 per session, but in the latter half of the year, especially when a Medical Officer was present only, on alternate Mondays, the attendance fell off considerably.

Less free food has been given in 1932 than in the previous year, but this Clinic also was assisted by the "Save the Children Fund," and several toddlers benefited considerably by the supply of fresh milk which they had in periods of from one to three months.

Drugs are also in great request here but are not so freely used as at Aberbargoed, as more mothers buy their own or have them supplied by the local doctors.

Those drugs chiefly employed are ointments for skin troubles and blepharitis and simple tonics and laxatives.

Very little ante-natal work is necessary here as most mothers attend the ante-natal Centre, when advised to do so.

Dental appointments are occasionally made or a urine examination done when necessary.

The condition of children under nine months is here quite good, but during the last three months of the year an unusually large number of babies weighing from four to six pounds were brought for advice. Not one of these was unable to be breast-fed but the majority went ahead quite well when suitably fed. Children of the age of nine months to two years (of whom 70 attended the Clinic) were, on an average in better condition than those in Aberbargoed, the mothers here being a little more careful about suitable and regular meals.

The health of mothers here is fairly good and most of them seem to have little serious trouble at their confinements. A large number of mothers ask for treatment here but in many cases the treatment required is outside the scope of the Clinic and these patients are referred to their own doctors or to hospital out-patient departments. Unfortunately hospital in-patients' waiting lists are so large that many women wait untreated for years, and this contributes in no small part to chronic ill-health among the mothers.

59 children of the age of two to five years attended during the year. Slight malnutrition is common, but severe cases are rare, and the child with the lowest weight as compared to her age was one from an extremely good home. She was suffering from severe dental caries and very much enlarged tonsils and adenoids. She has had treatment for both and has improved greatly. Cases here also received milk from the "Save the Children Fund," and the parents of these children were very grateful for the help received.

One child went to the Royal National Orthopædic Hospital for operative treatment for double congenital dislocation of hips.

4.—Dr. PHILOMENE R. WHITAKER, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Blackwood	Crumlin	Rogerstone	Oakdale	Usk
	%	%	%	%	%
Breast-fed ...	62	56	66	56	50
Breast and Artificially fed	9	14	8	12	19
Artificially fed ...	29	30	26	32	31

BLACKWOOD CENTRE.—The number of infants on the register at this Centre shows a decrease, being 320 as compared to 364 last year, and the average attendance was 62.1 as against 71.6 in 1931. Total attendances were 1,492.

The percentage of breast-feeding shows an increase of 8 per cent. and artificial feeding a corresponding fall, more marked in those being partly breast-fed.

Ante-natal cases are referred to Oakdale Centre for special examination, but are given advice and treatment for minor ailments at this Centre. 56 expectant mothers attended, 26 being new cases.

The number of toddlers attending the Centre during the year shows a decrease, being 357 as compared to 483 in 1931.

CRUMLIN CENTRE.—This Centre, usually a half-day session and held once a week, has during about six months of the year been held fortnightly instead.

The number on the register was 223, a slight increase on last year, but the average attendance remained almost the same, 27.3 as compared to 28.7 last year. The total number of attendances was 1,340, a slight decrease on last year's figures of 1,380. 337 toddlers attended during the year as compared to 333 in 1931.

The percentage of breast-fed babies has increased, having risen from 45 per cent. to 56 per cent., while the number being fed on breast and artificial food is higher by 7 per cent. than the previous year.

ROGERSTONE CENTRE.—The progress of this Centre continues to be satisfactory. During the year the average attendance per session was 31.3, a slight decrease on last year's figure. The number on the register at the end of the year was 146 as compared to 155 in 1931.

The total number of attendances was 816, of which 270 were toddlers—a slight decrease.

Ante-natal cases are referred to Newport Ante-natal Clinic. Five new cases attended and ten re-visited.

The percentage of breast-fed babies at this Centre maintains a higher level than the other Centres, being 66 per cent., which is, however, a slight decrease on last year, of 70 per cent.

OAKDALE CENTRE.—This Centre is always well attended—a half-day session once a fortnight. The average attendance per session is almost more than can be dealt with satisfactorily in a half-day session, being 43.3, an increase on last year's number. The total attendances during the year were 1,041, compared to 1,024 in 1931, and the number on the register was 194, an increase of 21 on last year's figure.

The mothers bring the toddlers regularly for advice on their progress. The total number was 353 as compared to 345 in 1931, 15 being new cases.

The percentage of breast-feeding shows a decrease, being 56 per cent as compared to 60 per cent. last year, but is satisfactory when compared to the average for all areas.

USK CENTRE.—This Centre improves each year. The number on the register at the end of the year was 87, while the average attendance was 18.1 per session. The total attendances were 437 as compared to 306 in 1931. Of these, 179 were toddlers, an increase of 14 on last year's number.

The ante-natal work here is limited as there are no facilities for detailed examinations. However, the number of expectant mothers attending increases steadily, being 37 during the past year.

The percentage of breast-feeding has fallen from 55 per cent. to 50 per cent., which is rather disappointing in a rural area. A possible explanation of this may be the fact that mothers in this area live long distances from the Clinic and would attend only if the baby failed to take the breast.

The steady progress of this Centre is very encouraging, and my thanks are due to the Health Visitor on her keenness and enthusiasm, and to the voluntary helpers for their constant attendance and co-operation.

GENERAL.—The attendance at the majority of the Centres shows a decrease, with the exception of Oakdale and Usk, which both show an increase.

The percentage of breast-feeding is better than last year over the various areas. That there is any increase in spite of the prolonged trade depression is gratifying. It may even be a direct result of the depression, inasmuch as the mothers will strive to keep the babies on the breast rather than have recourse to dried milk on the slightest pretext.

The amount of free food given at the Centres has been limited to those cases which are entitled to assistance, on medical grounds. This has facilitated the work of the Centres tremendously as cases attend now for advice on feeding, etc., and not for what can be got free of charge. Consequently the amount of free food given at the Centres has decreased.

Drugs supplied consist mainly of simple tonics, aperients, cough mixtures, etc.

Among the mothers there is some evidence of under-nourishment, and many show obvious signs of the depression.

The number of toddlers attending the Centres is satisfactory, and some 4 to 5 per cent. show under-nourishment. There is an appreciable increase in the number of cases of rickets attending the Clinics, and an increased amount of free food such as malt and oil, Virol, etc., is being given to toddlers.

5.—Dr. TERESA M. O'RIORDAN, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Nantyglo	Pontymoile	Pontnewydd	Panteg	Cwmbran.
	%	%	%	%	%
Breast-fed ...	39	54	33.3	47.3	51.0
Breast and Artificially fed	34	22	19.7	14.0	17.6
Artificially fed ...	27	24	47.0	38.7	31.4

The Medical Officer visited the above-mentioned Centres alternate weeks for about nine months of the year 1932 and weekly for about three months in the same year.

NANTYGLO CENTRE.—The percentage of breast-fed babies has fallen; the percentage of the combined method has increased; and the percentage of the artificially-fed has also increased.

It has been difficult for many mothers to continue breast-feeding, and they have ceased to do so before their first visit to the Centre. Many were enabled to continue with the aid of a supply of free food, granted on medical grounds. Mothers who were unable to breast-feed entirely, did so partly. The number in this class has increased from 27 per cent. the previous year to 34 per cent. in 1932.

Though fewer new cases of mothers visited the Centre, those who attended did so oftener and more regularly. The total attendance has increased from 208 in the previous year to 301 in 1932.

The visit of the Medical Officer on alternate Mondays has influenced the attendance of the mothers, and also the percentage of breast-fed babies. Some mothers rarely saw the Medical Officer. If the Medical Officer attends weekly it has been found that the mothers take more interest.

The amount of free food given in 1932 at this Centre was greatly reduced as compared with the amount given in 1931. Such free food, in 1932, was given solely for medical reasons.

Drugs were even more sparingly prescribed than in former years. Only the very simplest drugs were prescribed, more stress being laid on the prophylactic side of the work.

The total visits of the toddlers to the Centre during the year amounted to 359. Many of these, whose nutrition was below normal, were granted several weeks' supply of fresh milk. This supply was allowed by the "Save the Children Fund." Others were granted Roboleine, malt and oil, emulsion or Virol, according to their medical needs. The necessity of plenty of rest, sleep and fresh air was particularly stressed, and the mothers were urged to follow the advice given in this respect.

PONTYMOILE CENTRE.—It is pleasing to record that in this Centre the percentage of breast-fed babies has increased by 18 per cent. in 1932, and that there has been a corresponding fall of 18 per cent. in the artificially-fed infants. The figure for the combined method remains the same.

The total number of attendances of infants decreased, and the average attendance per session fell from 24.9 to 19.8. This may be partly accounted for by the visits of the Medical Officer being reduced to fortnightly visits.

The nursing mothers appeared anxious this year to seek and follow advice, and showed their appreciation by the number of re-visits which they made to the Centre. Two mothers were referred to the Ante-natal Clinic at Pontypool and six mothers were referred to the Dental Clinic.

Free food and drugs were limited to a certain extent. Free food was only granted on strictly medical grounds.

The toddlers attended the Centre very regularly. Four were referred to the Dental Clinic, two to the Eye Clinic, one to the Tuberculosis Officer, and two for operation for removal of tonsils and adenoids. One child—three years old—was granted fresh milk for three months from the "Save the Children Fund" and gained weight during that period.

PONTNEWYDD CENTRE.—The percentage of breast-fed babies at this Centre has increased from 29.2 per cent. to 33.3 per cent., but the percentage in the combined method has decreased, and there has been an increase of 10 per cent. in the artificially-fed class.

The total attendance and the average attendance per session of the infants has decreased. But the mothers who brought their infants regularly to the Centre were most anxious to follow the advice given, and made a special effort to maintain the breast-feeding of their infant, as shown by the figures above.

The total number of nursing mothers who attended the Centre has greatly increased, and though the actual number of new cases was not large, still the mothers who attended did so very regularly.

The attendance of the toddlers was not large. Eleven of them received fresh milk, for varying periods, from the "Save the Children Fund," and derived great benefit from it, and showed an increase in weight during that period. Two children were referred to the Dental Clinic, two cases to Dr. Coulter's Clinic and two were referred to the Orthopaedic Clinic at Newport.

The amount of free food given at this Centre during the year was greatly reduced. It was only given for medical reasons. Drugs, too, were only supplied in a very limited way—the very simplest only are stocked.

All the expectant mothers who attended this Centre—the total numbering 18—were referred to the Ante-natal Centre at Newport.

PANTEG CENTRE.—At this Centre, as at the Pontymoile Centre, the percentage of breast-fed babies has increased. The 1931 Report recording the percentage as 43.10 per cent. and this year's percentage is 47.3 per cent. The percentage in the combined method of feeding has fallen by 4.7 per cent. The percentage in the artificially-fed class is almost the same.

The attendance of the infants at this Centre has shown a slight decrease this year: the average attendance per session falling from 35.5 in 1931 to 31.7 in 1932. The mothers who attended regularly were eager to follow the advice given re breast-feeding—this is shown by the increase in percentage of breast-fed infants. On the whole the health of the mothers was satisfactory and in most cases were able to continue breast-feeding their infant up to the ninth month. Six expectant mothers visited this Centre and were referred to the Ante-natal Centre.

The toddlers at this Centre attended very regularly and so the Medical Officer was able to advise re any complaint at its incipient stage. Five children were referred to the Eye Clinic for advice and treatment re strabismus. Five were referred to the Orthopædic Clinic. A few toddlers were granted fresh milk, malt and oil, or emulsion, according to their special needs.

Free food is only granted either to nursing mothers or babies whose physical condition is definitely below normal and are physically unable to carry on without such aid.

The use of drugs is very limited; the very simplest are only prescribed.

CWMBRAN CENTRE.—At this Centre there is a marked increase in the percentage of breast-fed babies—an increase of 12 per cent. The percentage in the other two methods of feeding has fallen.

The total attendance of infants at the Centre during the year has fallen, as also the average attendance per session. This may be partly accounted for by the visits of the Medical Officer being reduced to fortnightly visits for the greater part of the year.

The mothers this year were more regular in their attendances and sought advice more frequently re their own state of health—and seemed only too anxious to follow the advice given. These same mothers reported very regularly.

Eleven expectant mothers came for advice and were referred to the Ante-natal Centre at Newport.

The mothers whose health was not satisfactory were enabled to continue breast-feeding by an allowance of free food—granted strictly for medical reasons.

The toddlers were most regular in their visits. Several were granted fresh milk from the "Save the Children Fund" for definite periods, varying from one month to several. This allowance proved most useful and the results were satisfactory. In all cases the mothers were especially advised rest, sleep and fresh air.

GENERAL.—To the Health Visitors and voluntary helpers who attend these Centres I wish to express my thanks and appreciation. Their services have proved invaluable, and their kindly co-operation has helped considerably.

6.—Dr. EVELYN D. OWEN, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Blaina	Rumney	Pontypool
	%	%	%
Breast-fed	50.0	41.0	52.9
Breast and Artificially fed	28.3	26.3	23.3
Artificially fed	21.7	32.7	23.8

BLAINA CENTRE.—The attendance at this Centre was much the same as in the previous year.

Both the breast-feeding and the combined breast and artificial feeding increased; the former from 48.5 per cent. in 1931 to 50 per cent. the latter from 25.5 per cent. to 28.3 per cent. It is satisfactory that so many mothers have been able to feed their babies in this distressed area.

Less free food was given than in the previous year owing to strict adherence to the regulation that food should be given on medical grounds only.

Sixteen of the 59 toddlers who attended the Centre during the year were much underweight. These were given such preparations as cod liver oil and malt, Roboleine, etc., while a few of the worst were given fresh milk for a few months from the "Save the Children Fund." All showed some degree of improvement.

There were 24 cases of rickets, mostly mild. This type of case appears to be becoming increasingly common. One baby with torticollis was fitted with a collar at the Orthopædic Clinic and is improving well.

All ante-natal work is done at a separate clinic. Of the 62 nursing mothers who attended about 25 per cent. showed some evidence of malnutrition. Anæmia was common.

The work of the voluntary helpers has been invaluable. I wish especially to thank Mrs. Pope, who continues to be most loyal and faithful to the Centre.

RUMNEY CENTRE.—This is a half-day Centre, held once a fortnight.

The average attendance per session was nearly the same as in 1931, but the number of babies on the register showed a slight increase—99 in 1931, 122 in 1932.

The percentage of breast-feeding has once again risen slightly—from 38.5 per cent. to 41 per cent., with a corresponding decrease in artificial feeding.

Practically no free food is given at this Centre.

38 toddlers attended during the year, only three of whom were underweight. Bronchial catarrh, thread-worms and enlarged tonsils and adenoids were their chief complaints. Four cases of rickets were seen, one so severe as to need orthopædic treatment.

Nine of the 21 nursing mothers who attended were suffering from lactational debility, but there was no evidence of under-nourishment.

No ante-natal work is done at this Clinic. Expectant mothers are referred to the Newport Ante-natal Clinic.

PONTYPOOL CENTRE.—The figures for attendance at this Centre are practically the same as for 1931.

The amount of breast-feeding has increased considerably—from 44.1 per cent. in 1931 to 52.9 per cent. in 1932—while the amount of combined breast and artificial feeding has correspondingly decreased. This may have been due to the fact that in cases where the breast milk was failing, instead of giving artificial food for the babies, extra nourishment in the form of Colact was given to the mothers to enable them to continue if possible with the breast-feeding.

59 toddlers attended during the year. The few who were markedly under weight were given fresh milk from "The Save the Children Fund" for a few months, with satisfactory results.

As at Blaina less free food was given than in 1931.

There was little actual under-nourishment among the 53 nursing mothers who attended although about 13 suffered from some lactational debility. As in the previous year constipation was their commonest complaint.

I wish to thank the Health Visitors once again for the good work they are doing at all three Centres.

7.—Dr. ALICE M. S. DEWAR, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

			Cross Keys	Ynysddu
Breast-fed	...	...	39%	56%
Breast and Artificially fed	...	...	13%	7%
Artificially fed	...	...	48%	37%

CROSS KEYS CENTRE.—This Centre is open for one half-day each week, but during the greater part of 1932 the Medical Officer attended on alternate weeks.

The number of infants on the register was 106, with an average attendance of 21.9 per session, compared with 111 and 26 respectively for 1931.

At this Centre breast-feeding has decreased from 52 per cent. to 39 per cent., and artificial feeding has increased from 23 per cent. to 48 per cent. This high figure for artificially fed infants is partly due to deficient lactation in the mothers, and partly to the fact that a large number of these infants were weaned before their first visit to the Centre.

Very little free food was given here as it is given only on purely medical grounds and the infants on the whole are healthy, the chief complaint being bronchial catarrh. Most of the cases of malnutrition occur in the toddlers. 19 toddlers attended the Centre. 11 of these were under-weight and in need of special nourishment. This was provided in the form of cod liver oil and malt, or fresh milk, which was supplied by a special fund for that purpose.

22 nursing mothers attended. Constipation was their commonest complaint.

Nine expectant mothers attended and these were referred to the nearest Ante-natal Centre.

YNYSDDU CENTRE.—This Centre is open for one half-day each week, but during the greater part of 1932 the Medical Officer attended only on alternate weeks.

The number of infants on the register was 225 and the average attendance was 30.8 per session, compared with 195 and 29.2 respectively for 1931.

Here breast-feeding has decreased from 60 per cent. to 56 per cent. and artificial feeding has increased from 26 per cent. to 37 per cent. As at Cross Keys many of these artificially fed infants were weaned before their first visit to the Centre.

Very little free food was given here as the general health of the infants on the whole was very good.

There was an increase in the number of toddlers attending, the number on the register being 49. About half of those showed some evidence of malnutrition and they obtained nourishment in the form of cod liver oil and malt or fresh milk supplied by the special fund.

70 nursing mothers attended and about half of those suffered from general debility. A large number suffered from dental caries and most of those took advantage of the dental treatment offered to them.

20 expectant mothers attended. These were all referred to the nearest Ante-natal Centre.

I should like to express my thanks to the Health Visitors of both Centres for their excellent work. And I also wish to thank the voluntary helpers for their attendance and help.

8.—Dr. Wm. BOWEN OWEN, Assistant Medical Officer Monmouthshire Couity Council.

RISCA CENTRE.—The attendance at the Centre during the year has been satisfactory.

Parents are gradually realising the value of bringing their children to the Clinic, especially after they have out-grown babyhood. Too often the small child is neglected, because all interest is centred in the newly-arrived baby. Thus the care and attention of the first year of life is offset by the neglect of the succeeding years.

One would like to see more expectant mothers—especially young mothers—attending the Clinic. The Clinic atmosphere is a potent factor, and the sight of bonny children brought up in the "Clinic way" is a great incentive to go and do likewise. The mischief wrought by a bad start is frequently seen.

METHODS OF FEEDING.				CONDITION OF CHILDREN ATTENDING.			
Breast	...	...	46%	Really Fit	...	...	55%
Assisted Breast	...	...	21%	Not so	...	...	45%
Artificial	...	...	33%				

9.—Dr. WILLIAM PANES, Assistant Medical Officer, Monmouthshire County Council.

CWM CENTRE.—

METHODS OF FEEDING INFANTS UP TO NINE MONTHS OF AGE.

Breast-feeding	...	...	...	...	40%
Breast-feeding, augmented by artificial feeding	...	...	...	...	12%
Artificial feeding	...	...	...	...	48%

Compared with 1931 breast-feeding has fallen by 10 per cent., artificial feeding shows an increase of 7.5 per cent., the percentage of children who were fed on the breast augmented by artificial feeding has risen from 9.5 per cent. to 12 per cent. A large number of the children who were entirely artificially fed had already been weaned before their first visit to the Clinic. In the cases of these infants the mothers were strongly advised to supplement the diets with some preparation containing vitamins in concentrated form.

With regard to the feeding of children of 1—5 years of age, a point was made of impressing mothers with the importance of including an adequate supply of fresh milk in the dietaries of these children. It is felt that a large amount of the subnormality, so commonly found to exist in children of this age, would disappear if this were carried out.

Attendances.—Infants: A total of 1,129 attendances were made during the year. There were 93 new cases.

The number of toddlers who attended the Clinic for the first time was 49; this number shows an increase of 20 over the previous year. The average attendance per session was 29.3.

The complaints for which infants were treated were principally those resulting from improper feeding. Diseases of the respiratory system were also very commonly met with. A number of skin diseases were treated. Rickets occurred in six cases, two of which were severe. Five children were found to be suffering from conditions requiring orthopædic treatment. One of these received treatment at the Royal National Orthopædic Hospital, with a very gratifying result.

The drugs prescribed were chiefly aperients, simple expectorants and ointments.

Children under one year were generally found to be well nourished, but a large amount of subnormality existed in children from one to five years of age.

24 nursing mothers were treated during the year. Compared with the previous year, the health of mothers had definitely improved.

10.—Dr. Wm. R. NASH, Assistant Medical Officer, Monmouthshire County Council.

NEWBRIDGE CENTRE.—

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast, 62% Breast and Artificial, 14% Artificial, 24%

The number of infants on the register was 340, whilst the average attendance showed a further increase to 82.7. This is very satisfactory, when it is considered that for a large period of the year the amount of free dried food issued was drastically curtailed, as was the amount of medicinal treatment available. There is no doubt that this has been reflected in the development and general condition of a number of children, where parents were compelled to try cheaper dried foods when the medical condition of the child did not warrant the issue of the food usually distributed from the Clinic.

The supply of fresh milk for the children of the unemployed from the "Save the Children Fund" was a great boon, and there is no doubt that the children to whom this was issued would have suffered considerably had it not been available.

Diseases of the respiratory tract again accounted for most of the pathological carditis treated, followed closely by those of the alimentary system. There were a few cases of marasmus, and a variety of skin conditions. Although the amount of drugs available was small and limited, the advice given appeared to have been faithfully followed, with considerable improvement in the condition concerned.

The number of nursing mothers treated was 113. The conditions treated were chiefly the debilitated conditions following child-birth, affections of the heart and constipation. Expectant mothers were in all cases referred to the Ante-natal Clinic at Crumlin.

The voluntary helpers continued to do good work in the assistance given to the nursing staff, and my thanks are due to both for the excellence of their work under frequently trying conditions.

11.—Dr. E. M. GRIFFITH, Medical Officer of Health, Abercarn Urban District Council.

ABERCARN CENTRE.—

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast-fed, 61.1% Breast and Bottle, 1.7% Bottle-fed, 37.2%

The numbers attending at the Centre have kept up well during the year and compare very favourably with 1931. The average per session was 71.2.

Owing to the unprecedented depression in trade for the first part of the year a very large number of nursing mothers and infants received free food at this Clinic. However, when the economy campaign came along and stopped this in a very great number of cases, it is astonishing to find that the number attending did not decline. The drugs prescribed for the year were very few—probably not to the value of 50/-.

Under-nourishment was noted in a good many mothers, but very few infants showed any sign of this.

A great many toddlers were seen during the year and here again very few were under-nourished.

In conclusion I have once again to thank the Health Visitors (Nurse Lord, and Nurse James) for their devoted work and the Clinic owes much to the voluntary lady helpers.

12.—Dr. G. W. PARRY, Abergavenny.

ABERGAVENNY CENTRE.—This Centre is open on market-day (Tuesday) each week and draws its cases largely from the agricultural district.

The total number of attendances at the Infant Welfare Centre during the year was 1,502, with an average per session of 31.2.

Most of the children are breast-fed, some by breast and artificial milk, and a few only by artificial foods alone, and this only in cases of deficiency in the mother. Breast-feeding is decidedly on the increase, though the mother often has to be helped to maintain it.

Scarcely any free food is given—two cases at present, where the children must inevitably suffer owing to the very poor circumstances of the parents.

Many children need simple drugs, generally for chest complaints, and to a less extent, for conditions of the alimentary system. In this connection I am glad to note and appreciate the action of the Council in providing drugs again in this area where the practice of the colliery districts does not obtain. I found that prescriptions given were not used and drugs had to be provided privately.

Under-nourishment was seen only to a very small extent and in most cases was due more to sheer ignorance than lack of necessities. These cases, when not based on disease, cleared when advice as to feeding was followed. Toddlers are using the Clinic in increasing numbers and many school children of a higher age—who cannot therefore be entered on the books—are brought.

May I express my thanks to the nurses and voluntary workers who have worked hard to make the Centre a success.

13.—Dr. R. J. S. VERITY, Medical Officer of Health, Abersychan Urban District Council.

Details of Feeding Infants.

	Abersychan	Garndiffaith	Pontnewynydd
	%	%	%
Breast-fed	29.4	37.6	70.7
Bottle-fed	55.6	59.9	27.4
Breast and Bottle ...	15.0	2.5	1.9

ABERSYCHAN, GARNDIFFAITH AND PONTNEWYNYDD CENTRES.—

The attendances at each of these Centres have maintained the average of former years. There were a few cases to which free food was given at the beginning of the year, but these were discontinued later. Few drugs are prescribed. There has been no under-nourishment of mothers and infants noticed.

All the Centres continue to make progress and justify in every way their existence. Attendances are regular and the instructions given are carried out.

Breast-fed babies show an increase and there is an increased desire on the part of mothers for this.

The number of toddlers has increased, and I find it is the wish of the mothers for the attention to be given them at the Centres to continue up to school age.

The work generally has been carried on as in past years, the "preventive aspect" being uppermost.

14.—Dr. T. B. SMITH, Medical Officer of Health, Abertillery Urban District Council.

CENTRE	INFANTS (0-1 year)				CHILDREN (1-5 years).				
	No. on Register 31st Dec., 1932.	No. of Attendances		No. of Re-visits		Total		Total Attendances, all ages.	Average Attendance per Session.
		New Cases under 1 yr.	New Cases 1-5 years	Under 1 year	1-5 years	Under 1 year	1-5 years		
Abertillery	658	246	79	2832	1085	3078	1164	4242	86.5
Llanhilleth	390	142	46	1702	720	1844	766	2610	54.3
Six Bells	322	156	40	1615	633	1771	673	2444	50.9
Total all Centres	1370	544	165	6149	2438	6693	2603	9296	64.0

A comparison of this table with the same table printed in the reports of previous years shows that the attendances at the Centres are being well maintained.

The details of the ailments found in mothers and children examined at the Centres is much the same as in previous years and call for no special comment.

Mothers are encouraged in every way possible to maintain their infants on the breast, as of all methods of feeding this is the method par excellence in spite of the great improvements made in recent years in the manufacture of "breast milk" substitutes.

The details of the various methods of feeding infants cannot be stated without a careful extraction of the records kept in the books at the various Clinics, and these figures would prove interesting if time permitted of their extraction.

It is gratifying to note the number of toddlers who attend the various Centres. Measles was rife during the last quarter of the year among them. Quite a number of cases were complicated by branchial pneumonia.

The incidence and severity of gastro-intestinal disease in young children has declined considerably in recent years.

Foods are now given free at the Centres strictly on medical grounds—not in accordance with income scale.

During the latter half of the year no drugs were prescribed. Virol, cod liver oil emulsion and Roboleine can be obtained at the various Clinics at cost price.

CENTRE	NURSING MOTHERS.			EXPECTANT MOTHERS.		
	No. of Attendances.			No. of Attendances.		
	New Cases	Re-visits	Total	New Cases	Re-visits	Total
Abertillery ...	7	25	32	4	—	4
Llanhilleth ...	2	21	23	8	1	9
Six Bells ...	11	52	63	5	11	16
Total all Centres	20	98	118	17	12	29

An Ante-natal Clinic has now been established at Abertillery, and all expectant mothers were referred to this Clinic. It is held on the second Tuesday (10 a.m. to 4 p.m.) of each month now at the Old Police Station in Tillery Street.

The Ante-natal Clinic for the lower end of the district is held on alternate Fridays (10 a.m. to 12 noon) at "The Clinic," 4 Hafodyrynys Road, Crumlin.

The figures of expectant mothers attending those Clinics will be found under the appropriate Centres on another page of the Report.

Number of cases referred for dental treatment—

	1931.		1932.	
	Infants.	Mothers.	Infants.	Mothers.
Abertillery Infant Welfare Centre ...	—	3	—	4
Llanhilleth Infant Welfare Centre ...	5	41	4	41
Six Bells Infant Welfare Centre ...	2	2	—	3

Only expectant mothers and mothers who are nursing their infants come within the County scheme for dental treatment of mothers. Many mothers do not take advantage of the facilities provided for the simple reason that they cannot afford to procure artificial dentures.

Number and type of Orthopædic Cases.—

	1931.		1932.	
	Referred to Consultant Surgeon.	Examined by Consultant Surgeon.	Referred to Consultant Surgeon.	Examined by Consultant Surgeon.
Abertillery I.W.C.—				
Cleft Palate ...	—	—	1	—
Outward Curved Tibia ...	1	1	—	—
Talipes Varus ...	1	—	—	—
Rickets ...	3	3	1	1
Llanhilleth I.W.C.—				
Wasting, right lower limb ...	—	—	1	—
Genu Recurvatum ...	—	—	1	—
Rickets ...	—	—	1	1
Pes Planus ...	—	—	1	1
Six Bells I.W.C.—	—	—	—	—

One case was admitted to the Royal National Orthopædic Hospital during the year.

Cases of deformity are referred to the Consulting Orthopædic Surgeon, Dr. A. Rocyn Jones.

Two cases of hare-lip and cleft palate were referred to other sources for operation and when appropriate age is reached those cases will be operated upon.

15.—Dr. J. REYNOLDS, Medical Officer of Health, Blaenavon Urban District.

DETAILS OF METHODS OF FEEDING INFANTS.

Breast fed ...	80.
Dried Milk ...	35.
Cows' Milk ...	10.
Others ...	30.

The average attendance at the Clinic has increased from 41.6 in 1931 to 48.1 per session during the year under review.

Foods are given free in necessitous cases when necessary on medical grounds.

Drugs are prescribed when necessary, but no dispensing is done at the Clinic.

There is evidence of some mothers and children being undernourished.

Toddlers constitute a fair proportion of the children attending the Centre; there is some evidence of undernourishment.

16.—Dr. T. L. DRAPES, Medical Officer of Health, Chepstow Urban and Rural Districts.

The work carried on at the Centre has been very similar to that in former years. There were 282 infants on the register at the end of the year, of which 81 were new cases under 1 year, who had first attended during the year. The total number of attendances was 3,172, giving an average attendance of 64.7 at each session. These figures correspond very closely to those in previous years, only a very small proportion of toddlers attend, very few of whom appear to be undernourished.

A table giving details of the ailments which were treated is appended. As is customary it contains a large preponderance of diseases of the alimentary and respiratory systems. None of the conditions found call for any special comment.

Breast feeding is advocated in every case in which the mother has an adequate supply; it is rare to find a mother who is unwilling to persevere if the breasts are functioning satisfactorily. If the milk supply is deficient, an endeavour is made to increase it by ordering Lactagol, Colact or extra nourishment—in the case of mothers who are unable to suckle their infants either wholly or in part, recourse is made to the use of artificial foods—those which are found to be most suitable are the various brands of dried milk on the market.

The supply of free foods has been kept as low as possible, and is only ordered in the case of really necessitous cases. In these days of industrial distress many applications are received for free food and each case is decided on its merits. In certain cases free foods are supplied in conjunction with the Public Assistance Officer.

The supply of drugs has been reduced to a minimum—only a small number of medicines and ointments are now stocked and are used as infrequent as possible. Mothers are able to purchase food stuffs and preparations such as Malt Extract, Virol and Cod Liver Oil Emulsion at cost price.

A small proportion of nursing mothers have sought advice for themselves—the conditions treated have been mainly of a simple nature such as over lactation, anæmia, and disorders of digestion.

The success of the Centre is largely due to the efforts of the Nursing Staff of the County Council; assisted by some voluntary helpers who attend regularly and to whom I take this opportunity of expressing my appreciation and thanks.

17.—Dr. F. M. FONSECA, Medical Officer of Health, Ebbw Vale Urban District.

EBBW VALE CENTRE.

FEEDING OF INFANTS UNDER 9 MONTHS OF AGE.

Breast-fed	...	...	...	51.0 per cent.
Breast and Bottle		...	...	5.4 per cent.
Bottle-fed	...	...	...	43.6 per cent.

There has been a slight increase in the attendances during the year. Free food is only supplied at the public expense after strict enquiry of the actual necessities of the cases. There has been an increase, due to unemployment.

The drugs at the disposal of the Centre are used as far as practicable. In cases which require closer observation and further treatment than the weekly meetings permit, parents are advised to consult their own medical attendant.

The Ante-natal Clinic established a few years ago has made considerable progress, and the attendances have increased and is increasing, which is evidence of the popularity of this Clinic.

The number of undernourished mothers or infants attending the Centre is not noticeable to the extent as might be expected after the prolonged depression. Those affected are attributable to shortage of employment in the coalfield area.

Very few toddlers between the age of 2 and 5 years attend the Centre, and up to the present, only a small proportion show any evidence of being undernourished.

18.—Dr. W. H. WILLIAMS, Medical Officer of Health, Monmouth Urban and Rural Districts.

MONMOUTH CENTRE.—This Clinic continues to be much used by parents from the Urban and Rural Districts, and is open once weekly, on market days.

The local Secretary attends each session with one or two voluntary helpers and one V.A.D. Nurse to assist the Health Visitors for the County Council.

A local Committee meets monthly and investigates the cases whence requests for free milk, artificial foods, etc., have been made.

In only really necessitous cases is free food allowed.

For a short time the supply of medicines has stopped and this was found to be a great hardship in many cases. The poor are now able to again obtain certain necessary medicines at the Clinic.

The newly born child is in nearly every case breast-fed, and the addition or substitution of artificial feeding is only advised if and when the circumstance require it.

The attendance of toddlers continues to be satisfactory and there has been no evidence of malnutrition in these cases.

Eleven nursing mothers sought treatment during the year.

19.—Dr. R. V. de A. REDWOOD, Medical Officer of Health, Rhymney Urban District.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast-fed	...	...	...	...	33.7.
Breast and bottle	...	...	...	...	28.0.
Bottle fed	...	...	...	...	38.3.

The attendances have been good throughout the year, between 20 and 30 being the average per session. The numbers have declined a little compared to 1931, as free food is now given only for illness and underweight.

Drugs are prescribed in many cases each week and are obtained at the respective surgeries of the mothers. Grey tablets and simple ointments only are supplied at the Centre.

Expectant mothers are referred to the special Ante-natal Clinic held once a month. Three cases attended the infant Clinic and were so referred.

Compared with normal times in my opinion, there is a considerable amount of under-nourishment in mothers, more than in infants, due to unemployment, working short time, and shortage of money in the home due to illness, delay in payment of compensation after injury, etc.

A few "toddlers" attend, and these are brought because they are "ill" or underweight or with abnormality. I seldom see healthy ones.

The Infantile Death Rate under 1 year, 1931 was a high one—100.4. 1930—71.4, 1929—63.4. I believe it will be about 75.0 for 1932.

20.—Dr. E. T. H. DAVIES, Medical Officer of Health, Tredegar Urban District.

TREDEGAR CENTRE.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast-fed	...	...	...	...	54.0 per cent.
Breast and bottle	...	...	...	...	3.8 per cent.
Bottle fed	...	...	...	...	42.2 per cent.

There was a slight decline in the attendances during the year, probably due to the restriction in the supply of free foods.

No drugs are prescribed at the Centre.

Few cases of debility in infants were notified. There were nine cases of rickets, a rather large increase, and umbilical hernia was very prevalent.

K.—SALE OF INFANT FOODS, &c., AT THE CENTRES.

The facilities for the purchase at the Infant Welfare Centres of infant foods, etc., continue to be of advantage to the mothers attending the Centres.

The wages earned by many of the men employed in the works and collieries of the County continue very low, and unemployment throughout the County is greater than ever. The service for the provision of infant foods at a little over cost price, therefore, meets a real necessity.

Dried milks, malt extracts and other infant foods to the value of £4,518 3s. 10d. were purchased for sale and for distribution to necessitous cases at the Centres during the year.

A small sum is added to the cost price of the artificial foods sold at the Centres, and this in some measure sets off the loss incurred on the articles given gratis. At a few of the Centres there are voluntary funds, out of which foods are given free to mothers who do not come within the regulations governing the County Scheme.

The Health Visitors are instructed to take care that only those mothers who regularly attend with their babies at the Centres, and who cannot pay the prevailing high prices, are served with the foods.

In cases where the income to the home is below the scale fixed by the County Council, infants' foods can be obtained either free of cost, or at half cost.

As the result of a reduction made by the County Council in the Maternity and Child Welfare estimates of expenditure, it was found necessary to strictly observe the regulation that milk should only be given on medical grounds, and instructions were issued to the Medical Officers in charge of the Centres that the supply of free milk must be restricted to cases recommended by them after medical examinations.

This change of procedure commenced in July, and a considerable saving in the amount expended has been effected. Foods to the value of £3,372 13s. 11d. were given for expectant and nursing mothers and for infants during the year. This included £1,719 12s. 9d. paid for fresh milk.

The following table shows the value of foods given away each year since the commencement of the scheme.

1919	...	...	£140 15 0	1925	...	...	£1,766 14 0
1920	...	...	£537 18 11	1926	...	...	£2,469 7 6
1921	...	...	£5,984 0 0	1927	...	...	£2,817 18 4
(Coal Stoppage: Dinners also given).				1928	...	...	£3,844 1 1
1922	...	...	£2,232 14 3	1929	...	...	£5,092 18 8
1923	...	...	£1,548 6 7	1930	...	...	£4,787 2 6
1924	...	...	£1,170 3 8	1931	...	...	£5,941 2 6
				1932	...	...	£3,372 13 11

L.—INSPECTION OF MIDWIVES.

The following table gives particulars of the training, etc., of the Midwives upon the County Roll at the 31st December, in each year from 1912 to 1932:—

Year	Number Literate	Number Illiterate	Total No. on Roll	No. holding C M.B. Certificate	No. holding other Certificates	No. untrained but registered	No. over 60 years of age
1932	240	3	243	224	—	19	32
1931	237	4	241	219	—	22	35
1930	237	4	241	215	—	26	35
1929	245	4	249	222	—	27	35
1928	238	4	242	211	—	31	40
1927	248	5	253	219	—	34	36
1926	243	5	248	211	—	37	32
1925	241	7	248	208	—	40	35
1924	242	11	253	203	—	50	38
1923	231	14	245	190	—	55	42
1922	224	16	242	178	—	64	49
1921	214	18	232	168	—	68	38
1920	211	22	233	160	—	73	48
1919	212	25	237	159	—	78	53
1918	184	31	215	123	—	92	49
1917	203	37	240	131	1	108	58
1916	214	37	251	135	4	112	58
1915	208	42	250	117	4	129	73
1914	207	53	260	100	6	154	111
1913	194	59	253	89	6	158	87
1912	191	62	253	87	5	161	71

It will be observed that the number of untrained midwives, *i.e.*, those placed upon the roll by virtue of their being in practice prior to the year 1901, is decreasing every year, and there are only 14 practising (5 are on the Roll but not practising); 3 of them are illiterate.

We are gradually reaching the realisation of the ideal of a skilled midwifery service. The period of training of midwives has been extended from 6 to 12 months, and a better educated type of woman is taking up the work.

The success of a Maternity and Child Welfare Scheme depends largely upon the practising midwives, who are asked to co-operate with the Welfare Centres and Ante-natal Clinics and look upon them as places where they can send their patients to have any abnormality discovered. They are welcomed to attend the Clinics with their cases and hear them discussed. It is gratifying to record that the midwives of the County heartily respond to this invitation.

The total number of names removed from the Midwives' Roll during 1932 was 11; 7 through removal from the County, 3 through death, and 1 through resignation.

The total number of visits paid to midwives in the Urban and Industrial Areas by Mrs. Doré, the Inspectress of Midwives, and by Nurse Olwen Griffiths in the Rural Areas was 1,227 visits and 711 examinations.

There are upon the County Roll two midwives who cannot take pulse and temperature, one who can take but cannot chart pulse and temperature, and one who cannot take pulse.

Mrs. Doré has retired on superannuation. The Chief Inspectress of Midwives is now Dr. Mary Scott, Assistant Medical Officer, and there are three District Inspectresses: Nurse O. Griffiths for the Eastern Valleys and Rural Areas, Nurse C. Davies for the Western Valleys Area, and Nurse K. M. Walters for the Rhymney and Sirhowy Valley Areas. The alteration took effect on the 1st January, 1933.

The midwifery scholarships provided by the Education Committee in previous years have had to be discontinued for financial reasons.

1,518 notifications of sending for medical aid, and 130 of cases of still-birth, were received from midwives during the year.

Also 6 notifications of deaths of mothers, 8 notifications of children dying a few hours after birth, and 19 within 10 days of birth, 40 notifications of artificial feeding, 6 notifications from midwives who were liable to be a source of infection, and 10 notifications of having laid out a dead body.

The reasons given in sending for medical aid were as follows:—

High Temperature	...	...	28	Retained placenta	...	...	72
Obstructed labour	...	...	25	Ruptured perineum	...	...	221
Premature labour	...	...	5	Abortion	...	...	46
Prolapse of cord	...	...	5	Abortion threatened	...	...	23
Hæmorrhage, ante-partum	...	...	49	Still-birth	...	...	21
Hæmorrhage, post-partum	...	...	49	Unsatisfactory condition of child	...	...	70
Contracted pelvis	...	...	7	Eye affections	...	...	91
Prolonged and difficult labour	...	...	472	Doctor engaged	...	...	19
Premature birth	...	...	32	Unsatisfactory condition of mother	...	...	117
Abnormal presentation—				Uterine Inertia	...	...	45
Breech	...	...	20	Born before arrival	...	...	11
Face	...	...	2	Albuminuria	...	...	17
Hand	...	...	8	Spina bifida	...	...	8
Transverse	...	...	6	Eclampsia	...	...	3
Vertex	...	...	4	Miscellaneous	...	...	11
Foot	...	...	8				
Miscellaneous	...	...	23				

Suspension of midwives to prevent the spread of infection was necessary in 11 cases, 7 on account of puerperal fever, 2 scarlet fever, and 2 septic cases.

M.—PROVISION OF MIDWIVES FOR THE COUNTY.

The Midwives Acts' 1902 and 1918, are administered by the County Public Health Committee, acting as the Local Supervising Authority, for which the County Medical Officer acts as Executive Officer. The district nursing is provided under the scheme of the Monmouthshire Nursing Association, of which Lady Mather Jackson is the Honorary Secretary.

The Monmouthshire Nursing Association undertakes the training of pupil midwives for the Monmouthshire Education Committee. They were requested to make this provision at the instance of the County Council, after the passing of the Midwives Act, 1902.

Good work continues to be accomplished by the Association, both in the training of pupil midwives and in the provision of nurses for district nursing. At the present time there are 28 constituent Associations affiliated to the Monmouthshire Nursing Association, and 31 nurses are employed by them. There are in addition six nurses on the staff of the Tredegar Nurses' Home, and one at the Tredegar Maternity Home. The aims of the Association have been fully stated in previous Reports.

The Nurses' Home at Tredegar, which is recognised by the Central Midwives' Board as a training centre for midwifery pupils, passed out five pupils during the year.

Since the establishment of the Training Centre 20 years ago, 103 pupils entered for midwifery training, 95 have passed the C.M.B. examinations, three have failed, and four proved unsuitable to sit the examination, and three pupils are training and waiting for examination in May. Ten pupils have also received six months' general training at the home, in addition to the midwifery training.

Dr. Mary Scott, Assistant Medical Officer, is the approved Lecturer to the pupil midwives. The Home has been recently enlarged and there is ample accommodation for the staff and pupil midwives.

The grant of £350 which has been made to the Monmouthshire Nursing Association for many years to provide midwifery scholarships has had to be terminated, owing to the poor financial condition of the County Education Committee.

The Nurses' Home of the Monmouthshire Nursing Association at Tredegar has a maternity ward. The Home is approved by the Central Midwives' Board for the full training of midwives under the new regulations. There are seven maternity beds provided at the home, six of which are effective beds in accordance with the rules of the Central Midwives' Board. During the year 1932, 72 maternity cases were dealt with at the Home, as compared with 73 in 1931. Sixty of these cases were delivered by midwives and 12 by doctors; one of these was admitted after delivery. There was one maternal death, four still-births, and seven deaths of infants within 10 days of birth. There were 232 ante-natal attendances at the Home during the year.

The grant of £475 per annum for a maximum period of 10 years made by the County Council to the Monmouthshire Nursing Association in connection with the provision of

the Maternity Home at Tredegar is still being paid. It expires at the end of the financial year 1934-35. In addition the grants hitherto made to the Home by the Ministry of Health are now under the provisions of the Local Government Act, 1929, being paid by the County Council. They amount to £125 per annum.

PROVISION OF MIDWIVES IN RURAL AREAS.—A grant of £580 per annum is made to the Monmouthshire Nursing Association to subsidise the provision of trained midwives in the Rural Areas of the County, in accordance with the scheme of the County Medical Officer, which was approved by the County Public Health Committee and the Local Government Board in October, 1917. During the year 1932, midwives were subsidised in the following areas:—

Llantilio Crossenny.	Raglan.	Caldicot.
Llantilio Pertholey.	Itton.	Monmouth.
Goytre and Llanover.	Llanfoist.	Llanfrechfa Lower.
Tintern and St. Arvans.	Llandogo and Trelleck.	Llanarth.
Usk.	Abersychan.	Caerleon.
Llangattock-vibon-avel.	Penhow.	St. Mellons and Rumney.

N.—COUNTY SCHEME FOR MATERNITY AND CHILD WELFARE.

The scheme under which Local Maternity and Child Welfare Committees have been set up to render assistance at the Maternity and Child Welfare Centres has been set out in detail in previous reports. There are 24 Committees, the majority of which are very active and are rendering useful assistance to the mothers and infants attending the Centres.

The scheme was originally intended to serve Maternity and Child Welfare only, but in the year 1929, the County Committee decided to ask the Local Committees to also undertake the after-care of Tuberculosis and the Welfare of the Blind. Schemes have been drafted, and the Local Committees are prepared to administer them, the provision being made, in the case of Tuberculosis that the necessary funds are supplied by the County Council. The Committees are co-operating with the County Association for the Blind in the Welfare of the Blind and this part of the scheme has been satisfactorily inaugurated. Very valuable work in the brightening of the lives of blind persons is being carried out by many of the Committees. The matter of Tuberculosis after-care is still in abeyance.

O.—TRAINING OF ELDER GIRLS IN ELEMENTARY SCHOOLS.

It has always been the object of this department to stimulate interest in the teaching of infant care and management to elementary school girls. The older scholars of Girls' Departments are taught infant care and hygiene at the Domestic Arts Centres of the elementary schools of the County. It is not sufficient to train girls to make them competent to take up business careers. They should also learn how to become wise and healthy mothers. It naturally follows that a girl who has the scientific aspect of Maternity and Child Welfare instilled into her at school will appreciate the benefits of the Welfare Centre in her married life. The teaching of cookery, how to look after the home and how to manage children is of more importance to the great majority of girls than history and geography.

P.—PROVISIONS FOR MATERNITY AND CHILD WELFARE

CASES AT HOSPITALS, Etc.

1.—PHYSICALLY DEFECTIVE CHILDREN.—The joint scheme of the County Council and Education Committee, whereby beds are reserved at the Royal National Orthopædic Hospital, London, was in full operation during the year. The reservation of beds is 24.

Mr. A. Rocyn Jones, M.B., B.S., (Lond.), F.R.C.S. (Eng.), the Consultant Orthopædic Surgeon, visits the Central Orthopædic Clinic, Newport, once a month for the purpose of examining new cases, and re-examining children who have received treatment at the Royal National Orthopædic Hospital. The following children under five years of age were seen by him during the year :—

Rickets	...	...	3	Exostosis of Humerus	...	1
Torticollis	...	...	2	Dislocated Shoulder	...	1
Pes Planus	...	...	11	Deformity of Toe	...	1
Talipes Equino Varus	...	...	4	Not walking properly	...	2
Birth Palsy	...	...	2	Fractured Femur	...	1
Weakness of Left Leg	...	...	1	Paraplegia	...	1
Infantile Paralysis	...	...	4	Calcaneo Plano Valgus	...	3
Dorsal Scoliosis	...	...	1	Metatarsal Varus	...	2
Outward Curved Tibiæ	...	...	21	Quadriplegia	...	1
Hemiplegia	...	...	1	No physical signs	...	8
Genu Valgum	...	...	4	Spastic Monoplegia	...	1
Talipes	...	...	2			—
Swelling Left Clavicle	...	...	1			81
Exostosis of Os Calcis	...	...	2			—

His recommendations were as follows :—

For admission to the Royal National Orthopædic Hospital, Great Portland Street	...	...	...	...	...	2
For admission to the Country Branch of the Royal National Orthopædic Hospital, Brockley Hill	...	...	...	...	...	14
To wear Splints or other apparatus...	...	...	...	...	...	23
To have alterations to Boots	...	...	...	...	...	12
To see X-Ray Specialist	...	...	...	...	...	7
No treatment required	...	...	...	...	...	10
Re-examination	...	...	...	...	...	9
Massage	...	...	...	...	...	2
Special Exercises and re-examination	...	...	...	...	...	2

He also made at the Newport Clinic 72 re-examinations of children who had received treatment at the Royal National Orthopædic Hospital.

During the year 14 infants were sent to the Royal National Orthopædic Hospital or its Country Branch at Stanmore, Middlesex.

The defects from which they suffered were as follows:—

Congenital Equino Varus ...	2	Torticollis ...	1
Congenital Dislocation, Hip ...	2	Anterior Poliomyelitis ...	1
Severe Rickets ...	2	Birth Palsy ...	1
Outward Curved Tibia ...	2	Webbed Fingers ...	2
Scoliosis ...	1		

Since the inception of the scheme 96 infants and children under 5 years of age have received treatment at the Hospital.

Four infants also received treatment at the Prince of Wales Orthopædic Hospital, Cardiff.

Upon discharge of the children from the Orthopædic Hospital, the County Medical Officer takes charge of their after-care. He sees them periodically at the Central Orthopædic Clinic, Newport, and at the Clinics at Crumlin and Pengam, and supervises their massage and electrical treatment and appropriate after-care when necessary. A close watch is kept upon the surgical boots and instruments which have been supplied to the children, to see that they are properly and constantly worn and continue to be suitable. During the year 1932 he examined and kept under supervision 103 crippled infant children, including cases of first diagnosis and re-examinations.

Sixteen infants attended the Clinic for massage and electrical treatment during the year, making 437 attendances.

Five walking instruments, eighteen splints, five night shoes, three pairs of surgical boots, and one Fairbanks Splint were supplied for these children by the County Council. Alterations to boots were made for 30 children and five alterations to walking instruments. The total cost in this connection was £53 0s. 8d. Infants suffering from Surgical Tuberculosis are treated at the Hospitals of the Welsh National Memorial Association.

There has been a great advance of recent years in the treatment of children suffering from orthopædic defects. A few years ago there was a great shortage of beds in orthopædic hospitals. Children were not treated early enough, and they had no after-care. Now, through the spread of education and supervision of children by the Public Health Services, resulting in the earlier detection and, therefore, earlier treatment, the crippled child has a very much better chance of alleviation of his deformities.

In this County there is no excuse for delay in obtaining early treatment. Many cases are discovered by the Medical Officers in charge of the Infant Welfare Centres, who notify them to the County Medical Officer, who arranges an examination by the Consultant Orthopædic Surgeon. If treatment is required, the child's name is placed upon the hospital waiting list and the child is admitted as soon as a vacancy occurs.

2.—HOSTEL FOR UNMARRIED MOTHERS.—The Maternity Home and Hostel at Nantyerry continues its good work. There are 12 beds at the Institution, and the number of girls admitted during the year was 12, the average duration of stay being 93.1 days. Nine babies were born. The total number of inmates during the year (including those who were admitted in the previous year) was 14 girls and 10 babies.

Eleven girls were discharged, of whom five were found situations, four went to relatives and two to Homes. Of the babies discharged six were with their grandmothers, one went to a Home, and two were adopted.

Of the 14 girls resident in the Hostel during the year, two were from the Borough of Newport, ten from the County of Monmouth, one from Glamorganishire and one from Herefordshire.

The object of the Hostel is to make provision during pregnancy and confinement for unmarried women who have borne good characters, but were expecting a first baby, thus giving them the chance of privacy which they could not secure in a public institution and enabling them to preserve their self-respect.

Generally the girls are admitted one month before their confinement and remain for six months after the birth of the child. As far as possible the mother and child are not separated for at least the first six months of the infant's life.

During their stay at the Hostel the mothers are trained to undertake some useful work when they leave and arrangements are made when necessary for the boarding out of the baby.

The work at Nantyerry is carried out economically and on practical lines, and the results justify the vast amount of time given to it by the Committee and the Honorary Secretary, Lady Mather Jackson.

3.—MEDICAL ATTENDANCE AT CONFINEMENTS.—Under Section 14 of the Midwives Act, 1918, the County Council are responsible for the payment of fees of medical practitioners called by midwives in cases of emergency, under certain specified conditions.

Fees were paid in 213 cases during the year, involving a payment of £386 1s. 6d. The Council have power to recover the whole or part of such fees from the husbands, and the total amount collected in this way by the Finance Department was £43 15s. 9d. The figures for the year 1931 were 202 cases, costing £358 18s. 0d. Amount collected from husbands, £29 5s. 0d.

All these cases are investigated at the homes by the County Officers before they are passed by the County Medical Officer.

4.—PUBLIC INSTITUTIONS.—The old Poor-Law Institutions of the County are now under the control of the County Council, and the following table shows the accommodation available for maternity cases, and its use during the period 1st January, 1932, to 31st December, 1932:—

Public Institutions	Aber-gavenny	Tredegar	Chepstow	Monmouth	Caerleon	Pontypool	Total
Number of Maternity Beds	2	6	2	—	—	4	14
Number of Confinements during year ...	1	14	4	—	—	8	27

5.—DIFFICULT LABOUR CASES.—Facilities for consultation with Dr. G. I. Strachan, M.D., F.R.C.S., Senior Assistant Gynæcologist of the Welsh National Medical School, and the Royal Infirmary, Cardiff, are provided for these cases, and hospital treatment given when necessary.

Twenty-six cases were examined by Dr. Strachan, and 17 of them were subsequently admitted to the Maternity Hospital of the Cardiff Royal Infirmary. Nine cases recommended by the County Council were admitted to the Tredegar Maternity Home as the conditions for the confinement of the women in their own homes were unsuitable.

6.—DENTAL TREATMENT.—Mr. C. J. Hurry Riches, L.D.S., R.C.S., Senior School Dentist under the Education Committee, devotes one half-day per week to dental treatment of expectant and nursing mothers, and also children under five years of age. Each Maternity and Child Welfare Centre in the County is visited by Mr. Riches, and advice given to expectant and nursing mothers who have carious teeth. Treatment (extractions only) of those who desire it is afterwards given at the nearest County School Clinic. The treatment figures for the year are as follows:—

No. of appointments made	...	1285
No. of appointments kept	...	844
No. of cases given "gas"	...	821
No. of permanent teeth extracted	...	3525
No. of temporary teeth extracted	...	845
No. of mothers treated	...	598
No. of children treated	...	223

The treatment is limited to extraction of defective teeth. Mothers who require dentures have to make their own arrangements.

7.—REGISTRATION OF MATERNITY HOMES.—Five Homes have been registered under the Nursing Homes Registration Act, 1927, one at Tredegar (Maternity and Nursing), one at Nantyderry (Maternity), one at Tref-ap-Gwilym, Cardiff Road, Newport (Maternity), and one at Highfield, Bassaleg (Nursing). Powers of inspection of the Homes are given to the County Medical Officer, and are carried out. All the registered Homes were found to be satisfactory at the annual inspection.

Applications for exemption have been received from the majority of the hospitals of the County.

Q.—INFANT PROTECTION.

By the Local Government Act of 1929, the functions under Part I. of the Children Act, 1908, dealing with the visitation of children under the age of seven years, adopted for reward, were transferred from the old Boards of Guardians to the County Councils.

The Children and Young Persons Act, 1932, is now in force. Previously anyone could accept a foster-child and subsequently give notice of its reception to the Infant Protection Department. Under the new Act a person who proposes for the first time to receive a foster-child must give notice of its expected advent not less than seven days before. Strict regulations are laid down as to the removal of children from unsuitable places or from the care of unsuitable people. The children have now to be supervised until they reach the age of nine years. Hitherto the age was seven years.

The supervision of these children is undertaken by one of the Council's Health Visitors. There are 50 children on the County Register and a visit of inspection is paid every three months to see that the health and home circumstances of the children are satisfactory. All the cases were visited during the year and there were no complaints of the care bestowed upon them.

During the year two children were removed from the Register as they had been returned to their parents.

Twelve new cases were added.

R.—CONCLUSIONS.

It will have been noticed earlier in this Report that the infant mortality rate for the year is 67.7, which is a satisfactory figure and little higher than the record for the County, which is 64.9.

The maternal mortality rate is still high when compared with the rate for England and Wales. A tremendous saving of infant life has been accomplished by thought and education, yet the deaths of mothers at child-birth show no diminution.

The subject has been dealt with on a previous page, but two factors which would tend to diminish the rate can be mentioned here.

The Ante-natal services are still in the early stage of their evolution, but their value has already been proved in this County. The duty of the Council is to provide further Clinics and to encourage the prospective mothers to attend. Many of the disasters of child-birth may be thereby avoided and much illness and physical impairment prevented. There are 16 Ante-natal Clinics in the County, but many mothers are unable to attend as their homes are too far away.

The opening of the Lydia Beynon Maternity Home would, without doubt, prove a definite factor in the lowering of the maternal death-rate. In a recent report the Ministry of Health—when urging the provision of maternity beds—gave instances of remarkable reductions in maternal mortality as the result of proper supervision of confinements.

No progress has been made in regard to the provision of a definite scheme for "toddlers." The systematic inspection and supervision of these children between the ages of two and five years is a necessity, and the future extension of the Infant Welfare service must be upon the lines of improving the health of this group. It is far better to prevent disease in the pre-school age than to cure it in school days.

There is an abnormal percentage of defects found during the medical inspection of school children, when they are admitted to school at the age of five years, and if children receive more care and attention in the pre-school period, many defects can be prevented.

The attendances of "toddlers" at the Centres have increased slightly, but generally there is not time at the ordinary sessions to give attention to all, and to ensure regular visits and proper examinations it would be necessary to provide special sessions, a provision which could not be made without increase of medical and nursing staff.

There is also scope for the development of the Maternity and Child Welfare service by way of Post-natal Clinics, at which women may attend during the first few weeks after the birth of the child, which for the mother is a very important period. A medical examination at that time may save some mothers a lifetime of suffering.

In view of the serious financial position of the County it was ordered by the County Council early in the year that the Maternity and Child Welfare estimates should be reduced by the annual figure of £3,260. This year (1933-34) a saving of £637 is required in addition to the above figure of £3,260. To carry out this instruction it was found necessary to revise the scheme for the provision of milk for necessitous mothers and for infants, to ensure that the supply should be strictly limited to those who are in need on medical grounds.

With the same object in view the amount of medicines and drugs given at the Centres has been curtailed.

That the proportion of mothers who attended the Centres from mercenary motives was very small is proved by the very slight decrease in the attendances, notwithstanding the restriction of free foods which was imposed during the year by the strict adherence to the foregoing regulation. The average attendance of infants for the year was 39.1, compared with 42.2 in 1932.

The famous Ray Economy Report (the result of a Committee of Inquiry set up by the Government to look into question of Public Welfare), which was issued in November, 1932, holds that an efficient Public Health Service is a matter of public importance, but should be administered with care and on those strict business methods which are essential to just expenditure of public money. The Committee appears to be satisfied with the work done at Infant Welfare Centres and Ante-natal Clinics.

It must also be noted that in these days of shortage of money the Government has not called for any curtailment of the Maternity and Child Welfare Services. Rather are they pressing for their enlargement in the matter of additional Maternity and Child Welfare Centres and Ante-natal Clinics.

To reduce the efficiency of the Maternity and Child Welfare Services would be false economy, for what is being done now for the infant is for the benefit of the next generation.

In the House of Commons on the 22nd March, 1933, the Minister of Health said of the Maternity Services:—

“ They are not at present sufficiently adequate. The powers that Local Authorities have to supply these services are not fully used, and we are, in consequence, wasting health in some of the most important particulars. We cannot afford that waste.”

Tribute must once more be paid to the Save the Children Fund for a further grant to provide extra nourishment for children (between the ages of 2 and 5 years) of unemployed men. The grant was administered by way of fresh milk, through the Maternity and Child Welfare Centres, and the reports of the Medical Officers of the Centres show that the nutrition of many children was greatly improved through the supply of the milk and that the generosity of the Fund was greatly appreciated by the mothers. Grants for the provision of boots for older children have also been made by the Fund.

We again thank the Voluntary Helpers and the members of the District Maternity and Child Welfare Committees for the help rendered at the Centres. We also gratefully record our appreciation of the continued support afforded by the Chairman and members of the County Maternity and Child Welfare Committee.

D. ROCYN JONES,

County Medical Officer.

The Commission on the Status of Women, established in 1946, was the first of its kind. It was created by the Economic and Social Council of the United Nations to promote gender equality and the status of women in society. The Commission has since held numerous sessions, with the most recent one taking place in 2015.

The Commission's work is guided by the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which was adopted in 1979. The Commission monitors the implementation of CEDAW by its member states and provides recommendations to the United Nations General Assembly.

The Commission's mandate is broad, covering a wide range of issues related to women's rights, including education, employment, health, and political participation. It also works to address violence against women and the impact of armed conflict on women and girls.

The Commission's work is carried out through a variety of mechanisms, including the submission of reports by member states, the appointment of independent experts, and the holding of public hearings. The Commission also provides technical assistance to member states to help them implement CEDAW.

The Commission's work is essential for ensuring that women's rights are protected and promoted in all member states. It provides a platform for women's voices to be heard and for their concerns to be addressed at the highest levels of the United Nations.

DR. ROSEMARY JONES

Country Representative Office