

**Report upon maternity and child welfare for the year 1934 /
Monmouthshire County Council.**

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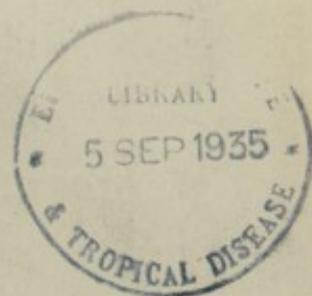
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MONMOUTHSHIRE COUNTY COUNCIL

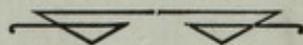
Notification of Births Acts, 1907 and 1915,
and Maternity and Child Welfare Act, 1918.

REPORT

UPON

Maternity and Child Welfare

For the Year 1934.



D. ROCYN JONES.

18th July, 1935.

County Medical Officer.

MONMOUTH COUNTY COUNCIL

Annual Report 2011-12

REPORT

Monmouth and South Wales

12th March 2012

By Cllr. [Name]

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PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
NEWPORT,

18th July, 1935.

To the Chairman and Members of the

Maternity and Child Welfare Committee.

I have pleasure in presenting to you the Twentieth 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, 1934, 5,559 live births and 291 stillbirths, making a total of 5,850, were notified to this Department after adjusting the notifications transferred to other districts and those transferred from other districts.

The number of registered births in the County for the year, according to the Registrar General's return, was 5,591, and 319 stillbirths, a total of 5,910, so that only 1.01 per cent. of the registered births were not ascertained under the Notification of Births Acts.

Of the 5,850 notified births, 5,821 were notified by midwives and 29 by doctors and parents. The percentage of births notified by midwives is 99.5, which is the usual 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.

Two 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. One of them is on leave of absence for the purpose of taking the qualifying certificate. 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 37 full-time Health Visitors on the Council's staff. In addition the Lecturer in Nursing under the Higher Education Committee devoted one day a week to Maternity and Child Welfare work. The apportionment of the time of the Health Visitors to Maternity and Child Welfare works out at approximately 23.

Two Health Visitors were away for a large portion of the year, one on sick leave and one taking the Training Course for the Health Visitor's certificate. Two temporary nurses were appointed in their places.

Nurses O. Griffiths, K. M. Walters, and C. Davies are also 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.

Statistics relating to the work of the Health Visitors, are given in the following pages, but their real value cannot be demonstrated by figures. They are highly-trained nurses and an enormous power lies in their hands. They come into close contact with the mothers and can thus find opportunity to draw attention to the need for proper nutrition, sufficient sleep, benefits of fresh air, cleanliness of house and person, etc., etc. The question of health to-day looms largely in the public eye and most mothers are keen to obtain instruction in the best methods of rearing their children. The work of the Health Visitors is, therefore, a matter of the greatest public importance.

I.—VISITS PAID.—During the year, 55,531 visits were paid to the homes as follows:

	New Cases		Re-visits under 1 year of age	Re-visits 1 to 5 years.	Total Visits.
	Babies seen	Fruitless Visits			
1934—	5401	1502	14,933	33,695	55,531
1933—	5580	1078	15,301	32,475	54,434
1932—	5762	907	16,684	23,667	47,020

1931.—First visits, 6,056; Fruitless visits, 940; Re-visits under 1 year, 15,544; Revisits 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; Re-visits 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; Re-visits 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 oneyear, 24,319; Re-visits 1-5 years, 31,261; Total 64,157.

II.—METHODS OF FEEDING OF INFANTS.—Of the new cases visited it was found that 4,326 children were being brought up entirely on the breast (80.09 per cent.) whilst 853 were being bottle fed (15.7 per cent), and 177 were both breast and bottle fed (3.2 per cent.). It was discovered on subsequent visits that in 488 instances (9.03 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 45 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 Visitors' figures show there is a decrease of .8 per cent. in the number of babies breast-fed, as compared with the previous year (1933).

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.

Although the Housing Act, 1930, which provides for the abolition of slum areas, is now in force, there is still much overcrowding in the County. The evils of bad housing, overcrowding and slum property have an important bearing on Maternity and Child Welfare, and better conditions would mean better physical and moral progress.

IV.—ANTE-NATAL.—The number of visits paid to expectant mothers was 298 to new cases, and 477 re-visits, a total of 775 visits. The figures for last year were 385 new cases, and 308 re-visits, a total of 693 visits.

PUERPERAL SEPSIS.—During the year 1934 notification of ten cases of Puerperal Fever were received under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, from the District Medical Officers of Health. Twenty-four cases of Puerperal Pyrexia were also notified. Upon investigation of these cases it was found that there were only two cases of Septicæmia. Two deaths occurred amongst these cases. All were immediately followed up by the Inspectresses of Midwives and measures were taken to prevent the spread of infection. When it was necessary the midwives were suspended from taking fresh cases until they had finished with the infected case.

The Registrar-General's list of deaths during the year showed 13 from Puerperal Sepsis. This classification includes all forms of Sepsis which may develop during the Puerperium.

Further comments are made under the heading of Maternal Mortality.

A scheme for the provision of facilities for diagnosis and treatment of cases is in operation. Under the scheme, Professor G. I. Strachan, M.D., F.R.C.S., of Cardiff, has 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 Isolation Hospitals during the year) and any necessary bacteriological examination is made by Dr. Gwyn Rocyn Jones, County Bacteriologist, at the County Laboratory, Newport.

V.—INFANTILE DIARRHŒA.—Six cases of this disease were discovered during visits to homes, and three re-visits paid, as against 7 and 2 re-visits in the year 1933.

Twenty-eight deaths were registered in children under two years of age, giving a death rate of 5.0 per 1,000 births, as compared with 4.8 for the year 1933.

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 fifteen 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 1934 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.

VI.—OPHTHALMIA NEONATORUM.—Thirty cases were notified under the Public Health (Ophthalmia Neonatorum) Regulations, as compared with 31 cases in the year 1933, and 32 in 1931. These cases, together with other cases of eye trouble reported by the Midwives making a total of 120 cases, were followed up by the Health Visitors, who paid 445 visits to them. In one case there was unsatisfactory conduct on the part of the midwife and a warning letter was 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 120 cases as follows:—

NUMBER OF CASES VISITED.

	Acute	Slight	Total
Brought forward from last year	2	—	2
New cases—			
Both eyes	28	55	83
One eye only	14	21	35
	—	—	—
	44	76	120
	—	—	—
Number of cases which attended hospital			
As out-patients	3	1	4
As in-patients	4	—	4
Number of cases in which there was neglect on the part of the midwife	1	—	1
RESULTS:			
Completely cured	39	70	109
Cases still being followed up at the end of the year	5	6	11
	—	—	—
	44	76	120
	—	—	—

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

VII.—STILLBIRTHS.—The number of stillbirths was 319, which works out at 5.7 per 100 live births, a decrease of .2 compared with the figure for 1933, which was 5.9 per 100 live births. This year's rate is equal to .94 per 1,000 of population. It continues to be abnormally high, and compares unfavourably with the rate for England and Wales, which for 1934 was .62 per 1,000 of population.

VIII.—UNREGISTERED WOMEN ACTING AS MIDWIVES.—No confinements were attended by unregistered women without a doctor during the year. The practice now appears to have ceased.

C.—VITAL STATISTICS.

The area of the Administrative County in acres at the 31st December, 1934, was 345,001. When the Newport Borough Extension Act came into operation on the 1st April, 1935, the County acreage was reduced to 342,249. 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 137 infants died within one week of birth, and 189 died within the first month of birth, whilst 316 died within the first twelve months. With the figure of 319 still-births there was a total of 635 lives lost to the community.

The infantile mortality rate per 1,000 births is 57.4, as compared with 71.7 for 1933. In 1932 the rate was 67.9; in 1931, 71.9; in 1930, 64.9; in 1929, 67.7; in 1928, 72.29; in 1927, 87.3; in 1926, 66.1; in 1925, 83.88; in 1924, 75.6; and in 1923, 73.0. The rate for the year under review is easily the lowest on record.

There were 5,591 live births registered during the year, a decrease of 28 when compared with the number for 1933, and the birth rate is 16.49 per 1,000 of population, compared with 16.2 in 1933. In the year 1932 it was 17.1; in 1931, 17.6; in 1930, 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 178, or 3.2 per cent. of all births. Last year the number was 193 (3.4 per cent.), and for the year 1932, 231 (3.9 per cent.).

The number of deaths of illegitimate children under one year of age was 16, or 2.8 per 1,000 of all births, and 89.8 per 1,000 of illegitimate births. Last year the number of deaths was 27, or 4.8 per 1,000 of all births, and 139.9 per 1,000 of illegitimate births. This year's rates are the lowest for very many years.

C.—VITAL STATISTICS FOR THE YEAR 1934.

DISTRICTS	Estimated Population	BIRTHS							DEATHS				INFANTILE MORTALITY														
		Legitimate		Illegitimate		Total		Grand Total	Rate per 1000 of population	Male	Female	Total	Rate per 1000 of population	Total Deaths under One Year				Ages at Death of Children under One Year.									
		Male	Female	Male	Female	Male	Female							Legitimate	Illegitimate	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
								Male	Female	Male	Female	Male	Female														
URBAN—																											
ABERCARN	19,730	174	160	4	6	178	166	344	12.3	113	96	209	10.5	17	3	20	53.1	7	2	...	...	9	4	5	1	1	20
ABERGAVENNY	8,240	66	42	5	3	71	45	116	14.0	52	53	105	12.7	3	...	3	25.8	1	1	...	...	2	...	1	...	...	3
ABERSYCHAN	25,020	215	161	8	5	223	166	389	15.5	137	132	269	10.7	18	1	19	48.8	13	1	1	...	15	...	1	2	1	19
ABERTILLERY	30,720	242	234	11	7	253	241	494	16.0	178	179	357	11.6	30	1	31	62.7	14	1	1	2	18	7	2	2	2	31
BEDWAS & MACHEN	8,794	69	72	2	...	71	72	143	16.2	58	49	107	12.1	10	1	11	76.2	7	1	...	1	9	1	1	...	11	
BEDWELLY	29,610	335	306	10	9	345	315	660	22.2	211	168	379	12.7	57	3	60	90.9	22	4	4	3	33	11	6	8	2	60
BLAENAVON	10,790	95	87	1	4	96	91	187	17.3	91	65	156	14.4	10	...	10	53.4	2	2	3	...	7	2	...	...	1	10
CAERLEON	2,481	20	9	...	...	20	9	29	11.2	19	11	30	12.0	...	...	...	...	...	...	...	...	...	...	...	...	...	3
CHEPSTOW	4,114	35	31	5	3	40	34	74	17.9	33	31	64	15.5	2	1	3	40.5	3	...	...	...	3	...	...	...	...	3
EBBW VALE	30,670	261	251	5	9	266	260	526	17.1	176	169	345	11.2	21	...	21	39.9	13	1	...	...	14	2	1	2	1	20
LLANFACHFA UPPER	4,384	35	32	...	...	35	32	67	15.2	29	34	53	12.0	5	...	5	74.6	2	...	...	...	2	2	...	...	...	4
LLANTARNAM	7,053	47	49	2	1	49	50	99	14.0	39	39	78	11.0	6	...	6	60.6	5	...	...	...	5	1	...	...	...	6
MONMOUTH	4,856	37	28	2	3	39	31	70	14.4	42	51	93	19.1	6	1	7	100.0	1	...	...	1	2	3	...	...	...	5
MYNYDDISLWYN	15,800	143	176	6	3	149	179	328	20.7	98	73	171	10.8	10	...	10	30.4	4	1	...	...	3	...	...	...	...	10
NANTYGLO & BLAINA	12,860	100	94	3	5	103	99	202	15.7	87	82	169	13.1	23	1	24	118.8	11	...	3	...	14	1	4	...	5	24
PANTEG	11,210	66	57	3	2	69	59	128	11.4	65	65	130	11.6	5	...	5	39.0	1	...	...	...	1	2	2	...	...	5
PONTYPOOL	6,674	55	47	3	2	58	49	107	16.0	41	40	81	12.1	5	...	5	46.7	3	...	1	...	4	...	...	...	1	5
RHYMNEY	10,280	92	91	5	5	97	96	193	18.7	75	59	134	13.0	9	...	9	46.6	1	2	...	...	3	1	2	2	1	9
RISCA	16,180	99	120	...	1	99	121	220	13.5	89	84	173	10.6	9	...	9	40.9	3	1	...	...	4	2	1	2	...	9
TREDEGAR	22,420	183	188	6	2	189	190	379	16.9	148	124	272	12.1	20	...	20	52.7	5	1	3	2	11	5	2	1	1	20
USK	1,274	9	6	1	1	10	7	17	13.3	9	8	17	13.3	...	...	...	...	...	...	...	...	...	...	...	...	...	...
RURAL—																											
ABERGAVENNY	8,616	57	48	7	1	64	49	113	13.1	41	35	76	8.8	6	...	6	53.0	2	...	...	1	3	1	2	...	...	6
CHEPSTOW	8,710	70	64	5	3	75	67	142	16.3	46	56	102	11.7	2	2	4	28.1	2	1	...	...	3	...	...	...	...	3
MAGOR	6,898	55	55	...	2	55	57	112	16.2	45	28	73	10.5	7	1	8	71.4	3	1	...	...	4	1	3	...	1	9
MONMOUTH	6,341	50	46	1	1	51	47	98	15.4	44	45	89	14.0	8	...	8	81.6	3	2	...	...	5	1	1	...	7	
PONTYPOOL	5,035	30	21	...	...	30	21	51	10.1	28	27	55	10.9	3	...	3	58.8	...	...	...	...	...	...	1	1	...	3
ST. MELLONS	20,200	150	148	3	2	153	150	303	15.0	97	95	192	9.5	13	1	14	68.9	9	...	...	...	10	2	1	1	...	14
Grand Totals, 1934	338,950	2,790	2,623	98	80	2888	2703	5591	16.49	3091	1888	3979	11.7	305	16	321	57.4	137	22	17	13	189	50	38	21	18	316
Totals for year 1933	341,496	2,704	2,668	105	88	2899	2754	5653	16.29	2152	1775	3927	11.49	372	27	399	71.72	143	30	17	20	210	59	46	36	45	396

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

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

Districts.	Present Year	(1933)	Districts.	Present Year	(1933)
URBAN—			URBAN—		
Nantyglo and Blaina..	118.8	(89.1)	Ebbw Vale ...	39.9	(64.8)
Monmouth ...	100.0	(104.5)	Panteg ...	39.0	(58.1)
Bedwellty ...	90.9	(80.0)	Mynyddislwyn ...	30.4	(68.9)
Bedwas and Machen..	76.2	(58.8)	Abergavenny ...	25.8	(50.8)
Llanfrechfa Upper ...	74.6	(75.9)	Usk ...	—	—
Abertillery ...	62.7	(86.7)	Caerleon ...	—	(100.0)
Llantarnam ...	60.6	(53.0)			
Abercarn ...	58.1	(59.8)	RURAL—		
Blaenavon ...	53.4	(88.4)	Monmouth ...	81.6	(117.0)
Tredegar ...	52.7	(87.4)	Magor ...	71.4	(68.6)
Abersychan ...	48.8	(50.1)	St. Mellons ...	68.9	(55.9)
Pontypool ...	46.7	(135.1)	Pontypool ...	58.8	(56.6)
Rhymney ...	46.6	(81.5)	Abergavenny ...	53.0	(66.6)
Risca ...	40.9	(66.9)	Chepstow ...	28.1	(33.0)
Chepstow ...	40.5	(57.9)			

CAUSES OF DEATHS UNDER ONE YEAR OF AGE.

CAUSES.	1934	(1933)	(1932)	(1931)
All causes ...	321	(399)	(399)	(442)
Scarlet Fever ...	—	—	(1)	—
Measles ...	—	(7)	(1)	(12)
Diphtheria ...	1	(2)	—	(1)
Whooping Cough ...	13	(15)	(13)	(1)
Influenza ...	4	(8)	(6)	(4)
Cerebro-spinal Fever ...	—	—	(4)	(2)
Meningococcal meningitis ...	—	—	—	—
Pulmonary Tuberculosis ...	2	—	—	(1)
Other Tubercular Diseases ...	3	(6)	(2)	(3)
Cancer (Malignant disease) ...	—	—	—	(1)
Syphilis ...	—	(1)	(3)	(1)
Bronchitis ...	13	(25)	(29)	(36)
Pneumonia (all forms) ...	28	(49)	(65)	(73)
Other Respiratory Diseases ...	3	(3)	(2)	—
Diarrhoea ...	22	(24)	(25)	(29)
Digestive Diseases ...	2	(5)	(5)	(7)
Acute and Chronic Nephritis ...	1	—	(1)	—
Congenital Debility ...	183	(201)	(202)	(213)
Violence ...	7	(11)	(3)	(6)
Other Defined Diseases ...	39	(42)	(37)	(52)
Causes ill-defined or unknown...	—	—	—	—

The Vital Statistics for England and Wales for the year 1934 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	1934	(1933)	1934	(1933)
ENGLAND & WALES ...	14.8	0.62	(14.4)	(0.62)	11.8	(12.3)	59.0	(64.0)
121 County Boroughs and Great Towns, including London	14.7	0.66	(14.4)	(0.67)	11.8	(12.2)	63.0	(67.0)
129 Smaller Towns (estimated resident populations, 25,000-50,000 at Census, 1931) ...	15.0	0.67	(14.5)	(0.63)	11.3	(11.0)	53.0	(56.0)
London	13.2	0.50	(13.2)	(0.45)	11.9	(12.2)	67.0	(59.0)
MONMOUTHSHIRE ...	16.49	.94	(16.29)	(0.97)	11.7	(11.49)	57.4	(71.7)

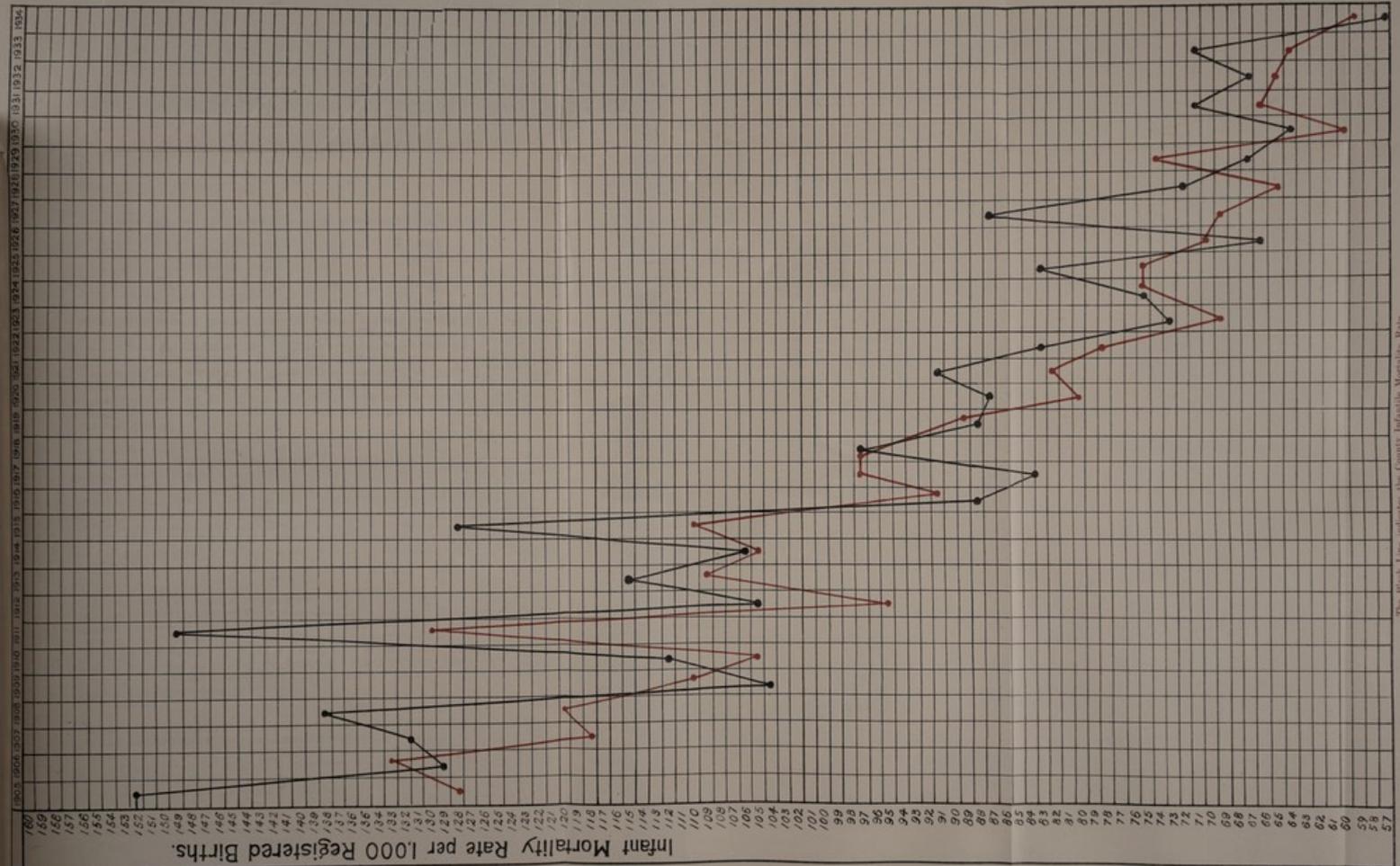
In all cases the estimated populations as supplied by the Registrar-General have been used for the purpose of this table.

NEO-NATAL MORTALITY.—The large proportion of deaths during the first month of life is still very noticeable. Of the total deaths under one year of age in this County a little more than half occur in and during the first four weeks. Although the infantile mortality rate has been so much reduced during the past 30 years the neo-natal rate remains very much the same.

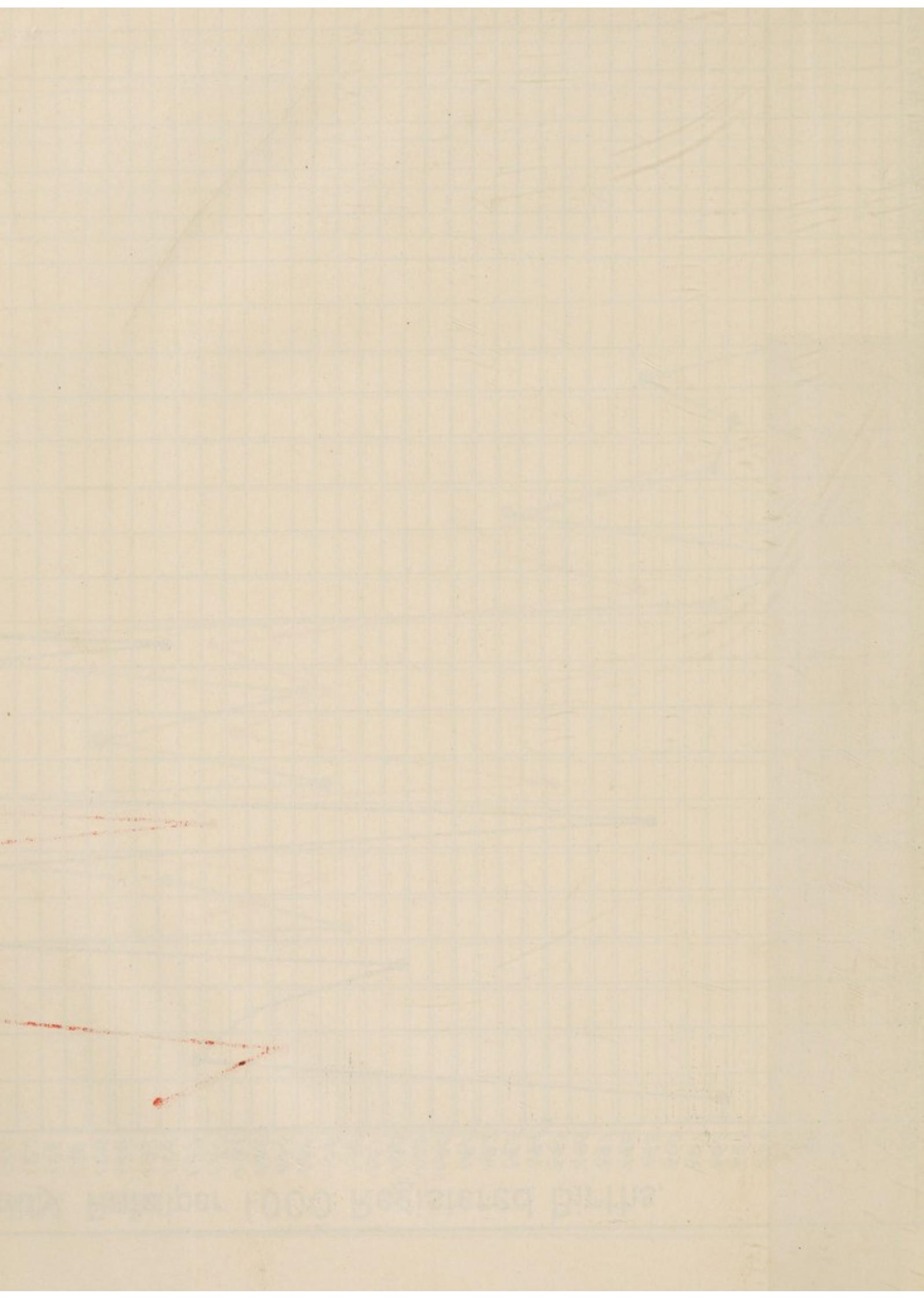
These deaths are largely due to conditions of the mother and to difficulties during confinement and the problem is closely connected with that of maternal mortality. The need for the pre-natal supervision of all pregnant women is emphasised, as well as the greater provision of hospital beds.

D.—MATERNAL MORTALITY AND ANTE-NATAL CARE.

The number of deaths registered during the year from accidents and diseases of pregnancy and parturition was 35; 13 from puerperal sepsis and 22 from other puerperal causes. This is equal to a rate of 6.2 per 1,000 live births which is 1.99 less than the figure for last year. Calculated upon total births (live and stillbirths) the figure is 5.9 per 1,000. The rate continues to be considerably higher than the rate for England and Wales, which for the year 1934 was 4.6 per 1,000 live births registered.



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



The County rates per 1,000 live births for the past twelve years have been:—

1934 ... 6.2	1933 ... 7.19	1932 ... 5.6
1931 ... 5.3	1930 ... 5.3	1929 ... 7.4
1928 ... 5.5	1927 ... 5.6	1926 ... 3.8
1925 ... 3.2	1924 ... 3.9	1923 ... 4.3

Although the maternal mortality rate for the year is lower than that of the previous year it is still far too high. It is satisfactory to note however that the attendance at the Ante-natal Clinics has increased. The 16 clinics were visited by 1,840 women (31.4 per cent. of the total number of births—live and still—notified during the year compared with 23.7 per cent. in 1933), who made 4,093 attendances compared to 2,793 in 1933, the average attendance per session being 17.2 compared with 13.3 in 1933 and 14.7 in 1932. This means that 31.4 compared with 23.7 in 1933 had at least one ante-natal examination. This is one step in the right direction and we hope that the increase in numbers will continue as time goes on.

The inspection of midwives continues and the Inspectors are untiring in their efforts to help the midwives to reach a high standard of efficiency in their work. The importance of notifying immediately any puerperal pyrexia occurring in their practices is continually impressed on the midwives so that steps may be taken at once to prevent the spread of that dreaded disease, Puerperal Septicæmia, which is the cause of so many deaths each year. The importance of regular and frequent examination of urine is not yet appreciated by all the midwives. Those examinations are a great help in the early recognition of toxæmia of pregnancy which, in this County, ranks second to Septicæmia as a cause of maternal deaths.

The percentage of maternal deaths during 1934 from some form of Puerperal Septicæmia was 37.5 and one-third of these cases was the result of miscarriage, either natural or induced. Toxæmia of pregnancy accounted for 30 per cent. of the deaths. The death rate resulting from various forms of heart disease in the mother was also high, this disease accounting for 10.0 per cent. Accidents of labour, such as ante-partum and post-partum hæmorrhage, accounted for most of the remaining 22.5 per cent. Obstructed labour accounted for only one death during the whole year and that was in a patient who had had no ante-natal treatment whatever.

Much propaganda work is still 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. To ensure a further decrease in the number of maternal deaths there must be greater co-operation of the patient with the family doctor, midwife, and the Public Health Services.

Several of the Clinics were again overcrowded and arrangements have been made for additional sessions to be held early in the year 1935 at Pontypool, Blaina, and Ebbw Vale.

The following are the reports of the Medical Officers in charge of the Ante-natal Clinics:—

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

BLAENAVON.—This Clinic is open for one whole day each month. During the year, 51 new patients attended compared with 47 in the previous year. The average monthly attendance was 13.0 compared with 10.6 in the previous year. 25 of the new patients, that is about half, were primiparae. Eleven patients attended who had attended the Centre on a previous pregnancy, and one attended who had attended during two previous pregnancies. Nine patients were found to be not pregnant. Three patients were referred to the Venereal Disease Department of the Royal Gwent Hospital and received treatment there. One patient was found to be suffering from under-nourishment. Four patients had milk supplied to them because for medical reasons it was found necessary. One patient, who expected her confinement soon after her first visit to the Centre, was found to be not pregnant. She was referred to the Consultant Obstetrician who within a few days operated on patient and removed two very large ovarian cysts.

BLAINA.—This Clinic is open for one whole day each month. The number of new patients who attended was 101 compared with 92 in 1934. The average attendance was 21.72 compared with 22.0 in 1934. A large number of patients had attended during previous pregnancies; 30 had attended on one previous pregnancy and 2 on two previous pregnancies. Fifty-five of the patients who attended during the year were primiparae. Three patients were suffering from under-nourishment. Seventeen patients had free supplies of milk granted to them. Two patients were referred to the Royal Gwent Hospital and treated there, one for gonorrhœa and one for syphilis. It was not found necessary to refer any of the patients here to the Consultant Obstetrician. There was a rather large proportion of congenital deformity in babies of those attending this Centre. Two children had Spina Bifida and one a meningocele. Five of the patients who attended were not pregnant.

CHEPSTOW.—This Clinic is open for one afternoon monthly. The new patients numbered 50 which was a large increase on that of previous year when they numbered 27. The average attendance for an afternoon was 12 compared with 5.27 in the previous year. Patients continue to attend from an adjoining area of the County of Gloucester, through an arrangement made between that County and Monmouthshire. Fourteen Gloucestershire patients attended during the year. Two patients who attended were not pregnant. One patient was referred to Royal Gwent Hospital for treatment for gonorrhœa. None of the patients were under-nourished. Three patients received a supply of fresh milk on medical grounds.

EBBW VALE.—This Clinic is open for one whole day each month. The number of new patients was 135 compared with 95 in 1933 and the average attendance each month was 25.72 while that of the year 1933 was 19.0. Of the new patients who attended 51 were primiparae. Twenty patients had attended during one previous pregnancy and 6 during two previous pregnancies. Three patients were suffering from under-nourishment and 17 patients received free supplies of milk. Two patients were referred to the Venereal Disease Department of the Royal Gwent Hospital, but only one was found to require treatment there. Three patients were referred to the County Consultant and were confined in Hospital, one requiring Cæsarean Section Operation. The ladies of the local Maternity and

Child Welfare Committee continue to take a warm interest in the welfare of the mothers and babies of this district. The cup of tea given to the mothers at the Ante-natal Clinic is much appreciated, especially during the winter months. Mrs. Williams continued her faithful attendance and helped the Health Visitors and myself in many ways.

MONMOUTH.—This Clinic is open for one morning once each month. The attendance here has always been small. During the year 26 new patients attended compared with 25 in the previous year and the average attendance was 4.66 per session compared with 4.1 in 1933. Two of the patients who attended were primiparae while the remainder were all multiparae. This proportion of primiparae is very low compared with that of other Clinics. Six of the patients had attended during a previous pregnancy and 4 during two previous pregnancies. Two patients were found to be under-nourished and 5 patients received a supply of milk. Two patients were not pregnant. One patient suffering from gonorrhœa was referred to the Royal Gwent Hospital. There have been several unavoidable changes in the health visitors of this district during the last two years and this, I think, accounts partly at least for the low attendance at the Clinic. It is hoped now that with a health visitor who is likely to be permanently in the district, the numbers who attend the ante-natal clinic will increase.

NEW TREDEGAR.—This Clinic is open one day each month. The attendance here shows an increase over the previous year when 59 new patients attended and the average attendance was 10.5, while for 1934 the number of new patients was 79 and the average attendance 12.08. 22 of the new patients were primiparae. 16 patients had attended during a previous pregnancy and 3 patients during two previous pregnancies. No patients were suffering from under-nourishment. 17 patients received a supply of free milk. One patient was treated at the Royal Gwent Hospital for syphilis and two for gonorrhœa. The number of re-visits paid by patients attending this Clinic remains below that of the other Clinics. This was also noticed in the figures of last year. Eight of the patients who attended were not pregnant.

PENGAM.—This Centre is open for one day each month. During the year 99 new patients attended and the average attendance was 17.41 per session. This is an increase over the year 1933 when 87 new patients attended and the average attendance was 15.2. 34 of the new patients were primiparae. 20 of the patients had attended during a previous pregnancy; 3 had attended during two previous pregnancies and one during three previous pregnancies. 10 patients were not pregnant. Eight patients received a supply of free milk. No patients suffered from under-nourishment. One patient was referred to the Royal Gwent Hospital and received treatment for syphilis. Five were referred for suspected gonorrhœa; one was negative and four required treatment. Two patients, because of anticipated difficulty during confinement were referred to the Consultant Obstetrician and were confined in Cardiff Royal Infirmary. One patient who suffered from congenital heart disease attended this Clinic and although there was some anxiety on her behalf she was safely confined of a healthy child at home and recovered easily after her confinement.

PONTYPOOL.—This Clinic is open for one day each month. The number attending this Centre has increased very much since the Clinic was moved to more central premises in the town. In 1933 the new patients numbered 87 and the average attendance was 15.2. In 1934 the new patients numbered 136 and the average attendance was 28.9. The number of primiparae who attended was 76. 21 patients had attended during a previous pregnancy. There were no patients suffering from under-nourishment. Two patients attending this Clinic were suffering from chorea and both had stillborn babies. Eighteen patients received a free supply of fresh milk. One patient suffering from gonorrhœa and one from syphilis received hospital treatment.

RHYMNEY.—This Clinic is open for one half-day each month. The number attending shewed a small decrease during the year. The new patients numbered 41 in 1934 compared with 46 in 1933 and the average attendance was 8.7 compared with 9.5 in 1933. This decrease was due to the fact that the health visitor of the district was off duty for rather a prolonged period through illness and the amount of health visiting carried out during that time was much less than usual. 12 new patients who attended were primiparae. 15 patients had attended during a previous pregnancy and 2 during two previous pregnancies. Three of the patients suffered from under-nourishment which is rather a large proportion compared with other Centres. The proportion of patients referred to the Consultant Obstetrician was also rather high, namely three. All were admitted to the Maternity Hospital, Cardiff. One was suffering from grave heart disease and one from pelvic deformity. Both had living children. The third patient had very serious kidney disease. She was admitted to Cardiff Maternity Hospital at the fourth month of pregnancy. The pregnancy was terminated and an operation performed to prevent the possibility of further pregnancies. She had no living children having had previously three still-births due to this disease.

TREDEGAR.—The Clinic is now open every Wednesday afternoon. The number of new patients was 186 compared with 123 in 1933, while the average attendance was 13.0 per week, compared with 12.0 per fortnight in 1933. The total number of attendances in 1933 was 265; in 1934 it was 520. The weekly attendance at Tredegar is very satisfactory and the numbers just about as many as can be dealt with at one afternoon session. One patient, a primipara, attended this Clinic from another district with a view to being confined in the Maternity Home at Tredegar, but because of the difficulty which was anticipated she was referred to the Consultant Obstetrician. She was admitted to Cardiff Maternity Hospital but in spite of this had a still-born baby. Two other patients, because of malpresentation in one case, and contracted pelvis in the other, had Caesarean section delivery in Tredegar Hospital and had living children. One of these patients had had two previous pregnancies which had terminated in still-born babies.

GENERAL.—The chief ailments from which the patients attending these Ante-natal Clinics suffered were anæmia, digestive troubles, constipation, dental defect, and varicose veins. Toxæmia of pregnancy, which manifests itself chiefly in albuminuria, œdema, and high blood pressure, either separately, or all together in the one patient, is a constant source of worry to those who have to deal with it. In the total number of patients who attended the Clinics at least once during the year, 355 or 39.3 per cent. suffered from toxæmia of pregnancy. It is for this reason that we try to impress on the midwife the necessity of her seeing her patient frequently and making frequent urine examinations, especially in the later weeks of pregnancy. Many midwives, and doctors too, seem to think that if a patient attends an ante-natal Clinic there is no need for this examination by themselves although some clinics are open only once monthly. Toxæmia may arise very suddenly, and that no doubt is why the ante-natal clinics have had much less influence on the mortality from this disease than on that from the other diseases and abnormalities of pregnancy. For this reason we require the co-operation of the midwife, especially in last weeks of pregnancy, when she should give weekly, and in some cases daily, attention to her patient and so note the very first signs of this complication. It was noted, too, that the majority of still-births in those attending these Clinics was due to toxæmia of pregnancy. It is also a frequent cause of premature labour. Malnutrition was found in many cases but

this was largely due to wrong feeding, overwork, or over reproduction on the part of the patient. Where the word under-nourishment is used in connection with these Clinics it means that the patient was not having sufficient food. Dental caries was very prevalent and where this occurred, especially in the older women, it was usually associated with anæmia and malnutrition. All patients suffering from dental defect were offered dental treatment and many availed themselves of this offer. On the whole the patients attend well and many attend until within a few days of confinement. We have still, of course, the patient who attends once, about half-way through her pregnancy, and can not understand, if conditions are normal then, why she should attend again. We are gradually, however, educating the patient to realize that, all unknown to herself, toxæmia or malpresentation may develop in the interval between her one visit and her confinement. When a patient fails to attend at the appointed date she is visited by the health visitor who tries to persuade her to continue her visits. Much of the success of these Centres in fact depends on the health visitor. The midwives, too, have a great influence and the Medical Officers of the Centres are grateful to the majority of them for their help and loyalty during the year. Many patients from the above districts were confined in the Tredegar Maternity Home and were admitted there either through the County Council scheme where home conditions were unsuitable for confinement, or as private patients.

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

NEWPORT.—During the year under review this Clinic was held one day in each month and served a wide district. The figures for attendance show an increase all round when compared with last year's statistics. 209 new cases attended and 214 re-visits were paid, giving an attendance per session, on an average, of 35.25. Of the cases attending for the first time, 56 were primiparae (38 per cent.); 130 were referred to the Clinic by midwives, 40 were advised to attend from the Infant Welfare Centres, 11 came on the recommendation of their own doctors, and the remainder came of their own accord. The midwives of the district took advantage of the facilities offered by the Clinic and several attended personally with their patients to learn the use of the pelvimeter, etc. There is no doubt that the midwife plays a very large part in persuading the expectant mother to seek ante-natal advice, and, especially in the case of the young, and frequently nervous, primiparae, the midwife is the deciding factor as to whether ante-natal visits are paid. The expectant mothers, on the whole, were very fit, but 9 per cent. all multiparae, showed sub-normal nutrition. These latter had all large families and were unable to obtain a sufficiency of nourishing food. Milk, mostly in dry form, was given them and improved their general health considerably. 15 had dental appointments and tonics and advice re heart-burn and constipation improved the health of others. 4 cases of rheumatic heart disease attended and had normal confinements having been advised re diet and sufficient rest. 16 had a raised blood pressure of 140 (systolic) or over but with attention to diet and rest, 12 had a normal pressure on their last visit to the Clinic while only one of the remaining 4 developed albuminuria. All were confined of living children. 10 had a non-gonococcal vaginal discharge, and one patient who attended irregularly, had gonorrhœa. 12 had varicose veins. One patient with a non-malignant breast tumour was referred for surgical advice and operation was deferred till after confinement. Of the births which could be traced all were living except 4. Of these 4, 1 was a placenta prævia, 1 was due to disease of the placenta (? syphilitic), 1 protracted labour in a primiparous patient with gonorrhœa,

and the fourth occurred in a multipara (cause unknown). 5 patients were admitted to Tredgar Maternity Home because of unsuitable conditions, one to Ty-Bryn Institution, and 2 had their babies in Glossop Terrace, being admitted there under the Consulting Obstetrician owing to a slight degree of contracted pelvis. Seven non-pregnant cases attended. No maternal deaths were recorded. In 11 cases, on the last visit to the Clinic before confinement, the fœtus was lying posteriorly and in 2 cases (both multiparæ) there was a breech presentation.

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

ABERGAVENTNY ANTE-NATAL.—This Centre is open one half-day per month, but owing to the fourth Tuesday occurring three times during holidays only nine sessions were held in 1934. The attendance is very small, the number of new cases being 16 and the total attendances 33. Four of the women were primiparæ and these all had normal confinements. There were no abnormalities except that one woman with a raised blood pressure later developed albuminuria. She was confined in hospital and had a live child.

4.—DR. P. R. WHITAKER, Assistant Medical Officer, Monmouthshire County Council.

CRUMLIN.—The total attendances at this clinic have increased from 331 to 529, and the average attendance per session has increased from 13.79 to 22.04. So great were the numbers that it was found impossible to cope with the cases in a fortnightly session and this clinic is now held once a week. Of the 253 new cases examined 32 per cent. were primiparæ. During the year about 35 per cent. multiparæ and about 30 per cent. primiparæ, shewed some abnormality in their pregnancy. These include malpresentation, Renal inefficiency, contracted pelvis, heart disease. 26 miscellaneous cases attended including post-natal cases and sterility cases. Nine cases were referred to the Consultant Obstetrician at Cardiff.

ABERTILLERY.—This clinic is now held once a fortnight and is always well attended. The average attendance per session during the year was 32.05 and total attendances have increased from 414 to 609. Of these 263 were new cases as against 217 last year, 40 per cent. being primiparæ. Some 35 per cent. multiparæ and 40 per cent. primiparæ showed some abnormality in their pregnancies. These include malpresentations, etc., as before mentioned. Eight cases were referred to the Consultant Obstetrician.

OAKDALE.—This clinic is held fortnightly and shows a marked increase in the number of attendances, being 327 as compared to 210 in 1933 and 199 in 1932. Average attendance per session has risen from 8.75 to 13.6. Of these 147 were new cases and 32 per cent. were primiparæ. Some 35 per cent. multiparæ and 50 per cent. primiparæ showed some abnormality in their pregnancies. Four cases were referred to the Consultant Obstetrician.

ABERSYCHAN.—This clinic is held once a month. The average attendance shows an increase being 8.6 as compared to 6.54 the previous year. Total attendance was 95 of which 48 were new cases and 40 per cent. primiparæ. One cannot help feeling that the attendance at this clinic would be much better, and the supervision of the expectant mothers more useful and more satisfactory if this clinic were held more frequently. With so long an interval between visits it is impossible to detect early symptoms and the patients themselves become slack and fail to realize the importance of regular examinations, especially during the latter months of their pregnancies.

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	Boy Scouts' Rooms, Neville Street	4th Tuesday in month, 9.30 to 11.30 a.m.	1929 Nov., 26th	Dr. Annie Roberts	Nurse M. Sausbury	Abergavenny Urban and Rural Areas	16	17	33	3.6
Abersychan	Congregational Schoolroom	4th Wednesday in month, 2 to 4 p.m.	Nov., 6th	Dr. P. R. Whitaker	Nurse L. Howell	Abersychan, Varteg and Garndiffaith	48	47	95	8.6
Abertillery	59 Tillery Street	Alternate Tuesdays—10 a.m. to 4 p.m.	1930 July, 19th	Dr. P. R. Whitaker	Nurse D. Beaucham	Abertillery, Six Bells, Aberbeeg & Llanhilleth	263	346	609	32.0
Blaenavon	The Hospital	4th Friday in month, 10.30 a.m. to 12.30 p.m. 1.30 to 3.30 p.m.	July, 29th	Dr. Mary Scott	Nurse C. M. Phillips	Blaenavon Urban District	51	66	117	13.0
Blaina	Church Institute	Alternate Thursdays 9.30 a.m. to 12.30 p.m. 1.30 to 3 p.m.	1929 Nov., 12th	Dr. Mary Scott	Nurse C. Davies	Nantyglo and Blaina	101	138	239	21.7
Chepstow	Domestic Arts Centre, Bridge St. School	1st Friday in month, 10 a.m. to 4.30 p.m.	Dec., 6th	Dr. Mary Scott	Nurse K. Webb	Chepstow Urban and Rural Areas	50	82	132	12.0
Crumlin	The Clinic, Hafodyrnyys Rd.	Alternate Fridays, 10 a.m. to 12 noon.	Nov., 1st	Dr. Philomene Whitaker	Nurse D. James	Llanhilleth, Crumlin, Hafodyrnyys, Newbridge, Abercarn and Cwmcarn	253	276	529	22.0
Ebbw Vale	James Street Wesleyan Chapel	Alternate Tuesdays—9.30 a.m. to 4 p.m.	Nov., 19th	Dr. Mary Scott	Nurse M. Redwood	Ebbw Vale, Beaufort, Victoria, Waunllwyd and Cwm	135	148	283	25.7
Monmouth	Working Men's Institute, Monk St.	1st Friday in month, 10 a.m. to 12 p.m.	Dec., 6th	Dr. Evelyn D. Owen	Nurse E. Fisher	Monmouth Urban and Rural Areas	26	30	56	4.6
Newport	School Clinic, Stanley Road, Gold Tops	Alternate Fridays, 10 a.m. to 12.30 p.m. 1.30 to 3.30 p.m.	Dec., 2nd	Dr. Mary Gordon	Nurse E. Wilnot	Machen, Rhiwderin, Rogerstone, Bassaleg, Ynysddu, Cwmfelinfach, Cross Keys, Risca, Pontnewydd, Cwmbran, Malpas, Caerleon, Caldeiot, Magor Rural Area, Runney and St. Mellons Rural Area	209	214	423	35.2
New Tredegar	Wesleyan Methodist Schoolroom	3rd Friday in month, 9.30 a.m. to 12.30 p.m. 1.30 to 3 p.m.	Nov., 15th	Dr. Mary Scott	Nurse F. Williams	New Tredegar, Cwmysyfog and Aberbarroed	79	66	145	12.0
Oakdale	Women's Institute	Alternate Tuesdays—2 to 4 p.m.	Oct., 28th	Dr. Philomene Whitaker	Nurse G. M. Watkins	Oakdale, Blackwood and Pontllanfraith	147	180	327	13.6
Pengam	The Clinic, Vine House	2nd Friday in month, 9.30 a.m. to 12.30 p.m. 1.30 to 3 p.m.	Dec., 3rd	Dr. Mary Scott	Nurse M. B. James	Cefn Forest, Pengam, Maesycwimmer, Bedwas and Trethomas	99	110	209	17.4
Pontypool	Tabernacle Schoolroom, Crane Street	Alternate Tuesdays—10 a.m. to 4 p.m.	Nov., 26th	Dr. Mary Scott	Nurse E. A. Morgan	Pontypool, Pontnewydd, Pontymoile, Panteg, and Griffithstown	136	153	289	28.9
Rhymney	Domestic Arts Centre, Middle Rhymney School	1st Tuesday in month, 10 a.m. to 12 noon	Dec., 3rd	Dr. Evelyn D. Owen	Nurse W. Jones	Rhymney and Abertysawg	41	46	87	8.7
Tredegar	Maternity Home, Park View	Every Wednesday—2 to 4 p.m.	Nov., 19th	Dr. Mary Scott	Nurse G. I. Golding	Tredegar, Sirhowy, Trevil, Bedwellty Pits, Troodrihwgwaer, Hollybush, Markham Village and Argoed	186	334	520	13.0
Totals ...							1840	2253	4093	17.2

E.—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 42:—

Location of Centre.	District Served.	Premises Utilised	Date of Opening.	Days 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 & Cwmcarn	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 a.m.—3 p.m.	Dr. T. Baillie Smith
Abertysswg ...	Abertysswg	Aion Baptist Chapel. Abertysswg	1920 July 7th	Wednesday, 10 a.m.—1 p.m.	Dr. Mary Scott
Beaufort ...	Beaufort	Primitive Methodist Schoolroom, Beaufort	1919 Sept. 3rd	Thursday, 11 a.m.—1 p.m. Doctors attends on alternate Thursdays	Dr. Mary Scott
Blackwood ...	Blackwood, Pontllanfraith and Argoed	Parish Hall, Blackwood	1917 April 20th	Monday, 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. W. Panes
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.—4 p.m. Doctor attends on alternate Thursdays.	Dr. W. Panes
Cwmbran ...	Llantarnam, Cwmbran Llanfdechfa & Pontthir	Wesley Schoolroom, Cwmbran	March 21st	Thursday, 2—4 p.m.	Dr. P. R. Whitaker
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, 10 a.m.—4 p.m.	Dr. T. Baillie Smith

Location of Centre,	District Served.	Premises Utilised	Date of Opening.	Days and Hours of Consultations	Medical Officer.
Markham Village	Markham	46 Abernant Road, Markham	1933 Feb. 15th	Wednesday, 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	Monday, 1 p.m.—4 p.m.	Dr. W. Panes
Newbridge ...	Newbridge and Pentwynmawr	Tabernacle Baptist Schoolroom, Newbridge	1917 March 20th	Monday, 10—12 noon, and 2—4 p.m.	Dr. T. M. O'Riordan
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 Cwmsyfiog	Wesleyan Methodist Schoolroom, New Tredegar	March 29th	Monday, 10—12 noon and 2—4 p.m.	Dr. W. B. Owen
Oakdale ...	Oakdale, Rhiw-syr-dafydd and Markham Village	Women's Institute, Oakdale	1918 Oct. 25th	Alternate Tuesdays, 10-30—4 p.m.	Dr. P. R. Whitaker
Panteg ...	Panteg, Griffithstown and Pontrhydyrun	Baptist Chapel, Griffithstown	1917 March 21st	Thursday, 10—12 noon	Dr. P. R. Whitaker
Pengam ...	Pengam, Fleur-de-lis and Maesycwmmwr	Vine House, High Street, Pengam	March 12th	Thursday, 10-30—12-30 and 1-30—3-30 p.m.	Dr. B. O. MacQuillan
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, Pontypool	May 9th	Wednesday, 10—12 noon and 2—4 p.m.	Dr. E. D. Owen
Rhymney ...	Rhymney and Rhymney 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. A. Roberts
Rogerstone ...	Rogerstone, Bassaleg, and Rhiwderin	Domestic Arts Centre, Rogerstone School	Nov. 12th	Alternate Fridays, 10—12 noon	Dr. M. Gordon
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, Harcourt 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 ...	Pontnewynydd 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 Mondays, 10—4 p.m.	Dr. W. R. Nash
Ynysddu ...	Cwmfelinfach and Ynysddu	Domestic Arts Centre, Ynysddu School	March 23rd 1917	Friday, 10—12 noon	Dr. A. S. M. Dewar

F.—DETAILS OF ATTENDANCES AT CENTRES.

CENTRE	MEDICAL OFFICER	No. of Infants on Register at 31st Dec., 1934	INFANTS						NURSING MOTHERS			EXPECTANT MOTHERS				
			New Cases		Re-visits		Total		Average Attendance at each Session	Grand Total	New Cases	Re-Visits	Total	New Cases	Re-Visit	Total
			Under 1 Year	1-5 Years	Under 1 Year	1-5 Years	Under 1 Year	1-5 Years								
Aberbargoed	Dr. A. Roberts	251	96	9	1193	525	1289	534	1823	37.97	72	117	189	8	7	15
Abercarn	Dr. E. M. Griffith	275	121	7	2146	1073	2267	1080	3347	69.72	2	8	10	—	—	—
Abergavenny	Dr. G. W. Parry	292	99	33	805	522	904	555	1459	30.39	19	13	32	1	—	1
Abersychan	Dr. R. J. S. Verity	163	70	9	570	305	640	314	954	19.87	15	35	50	3	—	3
Abertillery	Dr. T. B. Smith	603	240	29	2191	1016	2431	1045	3476	72.41	40	142	182	9	8	71
Abertyswg	Dr. M. Scott	90	41	8	461	118	502	126	628	13.08	5	12	17	—	—	—
Beaufort	Dr. M. Scott	119	61	18	511	194	572	212	784	16.0	78	103	181	7	1	8
Blackwood	Dr. A. E. Mathers	359	168	67	1239	661	1407	728	2135	56.18	1	14	15	—	—	—
Blaenavon	Dr. J. Reynolds	315	146	18	1267	622	1413	640	2053	42.77	44	81	125	—	—	—
Blaina	Dr. W. Panes	305	101	4	1499	1095	1600	1099	2699	56.22	52	78	130	12	59	71
Caerleon	Dr. P. Whitaker	131	45	11	365	240	410	251	661	27.54	34	142	182	9	8	17
Caldicot	Dr. M. Gordon	140	53	14	714	824	767	838	1605	34.14	—	—	—	—	—	—
Chepstow	Dr. T. L. Drapes	222	76	36	1047	1204	1123	1240	2363	49.22	31	53	84	6	1	7
Crosskeys	Dr. A. M. Dewar	97	51	3	596	237	677	240	887	18.47	40	166	206	3	1	4
Crumlin	Dr. P. R. Whitaker	183	104	4	773	442	877	446	1323	27.56	31	24	55	—	—	—
Cwm	Dr. M. Scott	212	116	16	1275	315	1391	331	1722	35.87	125	254	379	13	9	22
Cwmbran	Dr. P. R. Whitaker	234	70	12	903	691	973	703	1676	34.91	15	32	47	—	—	—
Ebbw Vale	Dr. F. Fonseca	355	192	31	2004	826	2196	857	3053	63.60	19	20	39	2	1	3
Garndiffaith	Dr. R. J. S. Verity	160	60	16	596	239	656	255	911	18.97	30	79	109	8	49	57
Llanhilleth	Dr. T. B. Smith	385	137	45	1389	773	1526	818	2344	48.83	19	20	39	—	—	—
Malpas	Dr. M. Gordon	128	45	16	348	553	393	569	962	41.82	30	79	109	—	—	—
Markham	Dr. A. Roberts	138	81	25	766	187	847	212	1059	22.06	19	20	39	1	1	7
Mounmouth	Dr. W. H. Williams	186	83	26	653	471	736	497	1233	25.68	—	3	3	4	3	7
Newtyglo	Dr. W. Panes	200	78	4	945	442	1023	446	1469	31.25	—	66	88	—	—	—
Newbridge	Dr. T. M. O'Riordan	278	124	16	1793	924	1917	940	2857	59.52	22	329	453	14	3	17
Newport	Dr. M. Gordon	256	96	39	687	619	783	658	1441	32.02	75	257	332	7	3	10
New Tredegar	Dr. W. B. Owen	281	94	23	940	702	1034	725	1759	36.64	55	39	94	5	3	8
Oakdale	Dr. P. Whitaker	206	86	49	588	287	674	336	1010	40.4	85	103	188	—	—	—
Panteg	Dr. P. Whitaker	190	65	6	862	748	927	754	1681	35.02	123	242	365	18	24	42
Pentnam	Dr. B. O. MacQuillan	374	167	31	1440	687	1607	718	2325	47.44	160	820	980	4	2	6
Pontnewydd	Dr. T. M. O'Riordan	133	65	4	641	335	706	339	1045	21.77	61	183	244	15	4	19
Pontnewynydd	Dr. R. J. S. Verity	260	118	5	944	479	1062	484	1546	32.20	36	21	57	1	—	—
Pontymoile	Dr. T. M. O'Riordan	122	53	2	520	204	573	206	779	16.22	51	158	209	6	2	8
Pontypool	Dr. E. Owen	296	113	15	962	576	1075	591	1666	34.70	64	73	137	—	—	—
Rhymney	Dr. R. V. Redwood	207	109	3	809	167	918	170	1088	22.66	33	53	86	—	—	—
Risca	Dr. A. Roberts	311	144	19	2105	1281	2249	1300	3549	72.42	71	131	202	17	7	24
Rogerstone	Dr. P. Whitaker	130	42	6	385	356	427	362	789	30.34	85	177	262	10	6	16
Rumney	Dr. E. Owen	92	27	5	325	258	352	263	615	23.65	15	37	52	2	1	3
Six Bells	Dr. T. B. Smith	332	136	53	1275	612	1411	665	2076	43.25	—	—	—	—	—	—
Tredegar	Dr. E. T. H. Davies	421	244	18	1421	345	1665	363	2028	42.25	50	129	179	21	14	35
Trethomas	Dr. M. Scott	250	106	10	1640	766	1746	776	2522	53.63	—	—	—	—	—	—
Usk	Dr. W. B. Owen	99	33	15	311	299	344	314	658	26.32	—	—	—	—	—	—
Ynysyddu	Dr. A. M. Dewar	227	99	45	1213	336	1312	381	1693	35.27	87	164	251	15	2	17
Total		10008	4255	825	43117	23556	47372	24381	71753	37.48	1835	4236	6071	233	221	454

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

Peculiar to Nursing Mothers—			Skin—		
Deficient Lactation	...	99	Chilblains	...	8
Sore Nipples	...	28	Psoriasis	...	12
Mastitis	...	33	Eczema	...	8
Not Classified	...	64	Boils	...	2
Peculiar to Women—			Scabies	...	2
Menorrhagia	...	31	Lipoma	...	1
Leucorrhœa	...	46	Urticaria	...	4
Amenorrhœa	...	22	Dermatitis	...	3
Prolapse of Uterus	...	7	Abscess	...	14
Abnormal Vaginal Discharge	...	16	Not Classified	...	30
Dysmenorrhœa	...	5	Eye—		
Pruritis Vulvæ	...	10	Conjunctivitis	...	14
Metrorrhagia	...	12	Blepharitis	...	15
Hyperemesis	...	11	Styes	...	3
Abortion	...	5	Iritis	...	1
Not Classified	...	38	Ear, Nose and Throat—		
Alimentary System—			Laryngitis	...	15
Constipation	...	613	Tonsillitis	...	17
Dental Caries	...	420	Enlarged Thyroid	...	18
Hæmorrhoids	...	46	Nasal Catarrh	...	38
Gastritis	...	91	Otorrhœa	...	8
Pyorrhœa	...	40	Enlarged Tonsils	...	4
Diarrhœa	...	15	Not Classified	...	20
Jaundice	...	5	Nervous System—		
Stomatitis	...	6	Neuralgia	...	14
Not Classified	...	44	Neuritis	...	9
Respiratory, Cardiac and Circulatory Systems—			Giddiness	...	1
Anæmia	...	201	Fits	...	1
Bronchitis & Bronchial Catarrh	...	82	Epilepsy	...	3
Varicose Veins	...	17	Not Classified	...	11
Heart Disease	...	11	Urinary System—		
Pulmonary Tuberculosis	...	5	Cystitis	...	10
Asthma	...	2	Incontinence	...	3
Pleurisy	...	4	Albuminuria	...	8
Phlebitis	...	2	Nephritis	...	12
Not Classified	...	18	Rheumatism	...	9
Venereal Diseases—			Not Classified	...	14
Venereal Disease	...	19	General Debility & Malnutrition		
Suspected Venereal Disease	...	8	Miscellaneous		
			...	...	288
			...	...	63

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

Prematurity	...	...	51	Respiratory, Cardiac and Circulatory Systems—	
Birth Injuries and Malformations—				Bronchitis & Bronchial Catarrh	1587
Umbilical Protrusion & Hernia	...	...	411	Anæmia	...
Phimosis	...	...	292	Heart Disease	...
Inguinal Hernia	...	...	70	Whooping Cough	...
Tongue Tie	...	...	59	Pneumonia	...
Hydrocele	...	...	14	Tuberculosis of Lungs	...
Undescended Testicles	...	...	35	Asthma	...
Hydrocephalus	...	...	9	Epistaxis	...
Hare Lip	...	...	4	Pleurisy	...
Cleft Palate	...	...	3	Not Classified	...
Spina Bifida	...	...	7		15
Hæmatoma (Sterno-mastoid)	...	...	5	Skin—	
Meningocele	...	...	2	Impetigo	...
Birth Injury to Shoulder	...	...	1	Urticaria	...
Hypospadias	...	...	2	Intertrigo	...
Imperforate Hymen	...	...	1	Eczema	...
Miscellaneous	...	...	22	Umbilical Discharge	...
Alimentary System—				Nævus	...
Constipation	...	...	873	Sores	...
Enteritis	...	...	405	Scabies	...
Gastro-Enteritis	...	...	197	Seborrhœa	...
Stomatitis	...	...	201	Abscess	...
Dentition	...	...	313	Burns and Scalds	...
Worms	...	...	186	Boils	...
Gastritis	...	...	144	Dermatitis	...
Flatulence	...	...	77	Sore Buttocks	...
Vomiting	...	...	28	Ringworm	...
Jaundice	...	...	26	Mastitis	...
Colitis	...	...	5	Pemphigus Neonatorum	...
Tuberculosis of Abdomen	...	...	1	Erythema	...
Rectal Prolapse	...	...	5	Psoriasis	...
Not Classified	...	...	35	Chilblains	...
Bones and Joints—				Vulvitis	...
Orthopædic Conditions	...	...	135	Not Classified	...
Nervous System—				Urinary System—	
Convulsions	...	...	41	Enuresis	...
Mentally Deficient	...	...	33	Cystitis	...
Nervous	...	...	9	Nephritis	...
				Retention	...
				Inflamed Penis	...

Eye—				Lymphatic System—			
Blepharitis	...	...	91	Adenitis	...	...	145
Conjunctivitis	...	...	87	Enlarged Glands	...	...	4
Squint	...	...	63	Deficiency Diseases—			
Nystagmus	...	...	4	Rickets	...	...	189
Ptosis	...	...	5	Debility	...	...	126
Ophthalmia Neonatorum	...	...	14	Malnutrition	...	...	147
Epiphora	...	...	3	Marasmus	...	...	55
Corneal Ulcer	...	...	3	Venereal Diseases—			
Keratitis	...	...	1	Congenital Syphilis	...	...	1
Styes	...	...	2	Rheumatism—			
Not Classified	...	...	12	Chorea	...	...	5
Ear, Nose and Throat—				Growing Pains	...	...	4
Nasal Catarrh	...	...	529	Miscellaneous—			
Otorrhœa and Otitis	...	...	336	Infectious Diseases	...	...	142
Septic and Enlarged Tonsils and Adenoids	...	...	321	Injuries	...	...	15
Mouth Breathing	...	...	5	Deaf and Dumb	...	...	2
Laryngitis	...	...	5	Miscellaneous	...	...	31
Deafness	...	...	3				
Tonsilitis	...	...	4				
Laryngeal Catarrh	...	...	2				
Miscellaneous	...	...	16				

I.—REPORTS OF MEDICAL OFFICERS OF THE CENTRES.

1.—DR. MARY SCOTT, Assistant Medical Officer, Monmouthshire County Council. FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Trethomas	Cwm	Abertysswg	Beaufort
	%	%	%	%
Breast-fed	46.8	40.8	47.1	42.2
Artificially fed	26.6	38.8	35.9	29.8
Breast and Artificially fed	26.6	20.4	17.0	28.0

ABERTYSSWG Centre.—This Centre is open for one half day weekly. There was an increase in the total attendances during the year 1934. In 1933 the total attendances were 572 and the average attendance at each session was 11.9. In 1934 the total attendances were 628 and the average at each session 13.08. It is satisfactory to note that part of this increase in total attendances was due to an increase in the number of children between the ages of one and five years. It is also satisfactory to note that there was an increase in the number of breast-fed babies attending. In 1933 the number of breast-fed babies was 32.6 per cent. and 41.3 per cent. were entirely bottle-fed. In 1934 the number of breast-fed babies was 46.8 and the wholly bottle-fed 26.6. The percentage of those part breast and part bottle fed remained about the same, being 26.1 per cent. in 1933 and 26.6 per cent. in 1934. Two toddlers in this centre were found to be suffering from

malnutrition and two infants also. One infant suffered from under-nourishment. No toddlers were under-nourished. The number of children's ailments discovered at this centre was similar to that of other centres except in the case of rickets. Only one child attending this centre during the year was found to be suffering from rickets.

BEAUFORT CENTRE.—This centre is open for two hours weekly with the Medical Officer in attendance once a fortnight. There was a decrease in the total attendances from 910 in 1933 to 784 in 1934; the average weekly attendance being 16 compared to 18.5 in 1933. There was a very slight increase in the percentage of babies which were breast-fed from 40 in 1933 to 40.8 in 1934. There was an increase in those wholly bottle-fed from 32.9 per cent. in 1933 to 38.8 per cent. in 1934 while percentage of partly breast and partly bottle-fed dropped from 27.1 in 1933 to 20.4 in 1934. Three toddlers and two infants suffered from malnutrition. There were no cases of under-nourishment. Five children suffered from rickets, one child with very definite deformities improving considerably when given Malt and Cod liver oil regularly.

CWM.—This centre is open for one day weekly with the Medical Officer in attendance once a fortnight. There was an increase in the attendances during the year chiefly in the infant class. The total attendances in 1933 were 1651 and the average weekly attendance 34.3 while in 1934 the total attendances were 1722 and the average weekly attendance 35.87. Breast feeding in the case of infants attending this centre increased from 45.6 per cent. in 1933 to 47.1 per cent. in 1934. The percentage of wholly bottle-fed children shewed a decrease from 36.9 in 1933 to 35.9 in 1934. The partly breast and partly bottle-fed percentage remained about the same, namely 17.5 per cent. in 1933 and 17.0 in 1934. The number of toddlers attending this centre who suffered from malnutrition seemed rather high compared with the other centres under my care. There were nine toddlers suffering from malnutrition and one infant. There were no children suffering from under-nourishment. Seven of the children suffered from rickets of a mild degree. There were no cases of rickets with gross deformity.

TRETHOMAS.—This centre is open for one whole day weekly. There was an increase in attendances during the year both in the infants' and in the toddlers' classes. The total attendances for the year were 2522 and the average weekly attendance was 53.63, compared with the total attendances of 2091 and an average weekly attendance of 43.5 in 1933. Breast feeding dropped from 50.0 per cent. in 1933 to 42.3 per cent. in 1934. The number of wholly bottle-fed children also dropped from 32.7 per cent. in 1933 to 29.8 per cent. in 1934. There was a large increase in the numbers who were partly bottle and partly breast-fed; the percentage in 1933 being 17.3 while that of 1934 was 28.0 per cent. The number of toddlers suffering from malnutrition was six and of infants one, while no child was under-nourished. Eight children suffered from a mild degree of rickets. The incidence of bronchitis and bronchial catarrh and laryngitis remains high in this district compared to the other three areas. Infantile eczema has also been very prevalent in this area during the year 1934; thirteen children, mostly under one year suffering from this very trying complaint, some of them for months at a time in spite of treat-

ment. It has been said by one skin authority that children who suffer from this complaint in infancy are of a highly sensitive and nervous disposition and usually later in life shew genius in a musical, artistic, or literary direction. If this is so then Trethomas and Bedwas district should in future years be well known in the world of art!

GENERAL.—The attendance in all four centres remains satisfactory and the work done in them can be carried out thoroughly in the time at our disposal. In all, except Beaufort, where there was a slight decrease, the number attending and the number breast-fed were better than that of 1933. There were less rigid restrictions on the giving of dried milk to mothers and infants. This has no doubt enabled more mothers to breast feed their babies and the mothers themselves have derived considerable benefit from taking this milk. Cod liver oil has been given free and also bought by the mothers in large quantities in the hope that the incidence of rickets may be lessened and that healthy bones and teeth may develop. Young infants take cod liver oil well and very few have been found who for any particular reason could not tolerate it. It is often difficult to train the toddlers who did not have it in infancy to overcome their dislike for it, but the majority can take cod liver oil with malt easily. It will be seen from the reports in these centres that only one child suffered from under-nourishment, that is having insufficient food. Several were found to be suffering from malnutrition in the sense that for some reason they were not able, properly, to assimilate the food given them, or that the food given them was unsuitable or badly prepared, or that the food was suitable and good but the benefits which ought to have been derived from it were minimised by the child having insufficient sleep, or insufficient fresh air or by the presence of bad teeth, enlarged tonsils, or other minor defect. The condition of the infants on the whole is satisfactory, but there is still the difficulty of toddlers. Many of these continue to be underweight and where there is a younger child are often rather pathetic little figures. The toddler is not old enough to join the school children in their play, is too young to go far from his mother and yet seems to feel that he is only second in importance to the baby who has taken his place. Frequently we hear of one of these toddlers who since the arrival of a new baby is not so well and has lost his appetite. In many cases this refusal of food is a subterfuge on the part of the toddler to get a little more attention from his mother. If the mother realizes this and decides to ignore his loss of appetite he rapidly recovers it, and soon resigns himself to a position of minor importance. A very great boon to these toddlers would be a distribution of milk daily for their consumption, at a reduced rate, as is done in the case of school-children. It would be necessary, however, as in the case of school-children, for the toddlers to have this milk either in school or at a centre where they would have it together. Otherwise, unless the child was ailing he might only have part of it (some would go to the baby) or he would refuse to take it, as so many children do, when in their own homes. Many of the children attending these centres continue to benefit from the treatment received from the Orthopaedic specialist, the Eye specialist, the Nose and Throat specialist, and mothers as well as children, from the dental treatment received from the County Dental Officers.

2.—DR. MARY GORDON, Assistant Medical Officer, Monmouthshire County Council.
FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Newport	Malpas	Caldicot	Rogerstone
	%	%	%	%
Breast-fed	43.6	49	43	57
Breast and Artificially fed	17.4	12	8	3
Artificially fed	39	39	49	38

NEWPORT.—During the year under review this clinic, formerly held fortnightly, was open weekly. Mothers and babies from Maesglas attended alternately with those from the Gaer, Glasllwch and some parts of Liswerry. The average attendance per session was 32.02. 96 new babies attended, and 687 baby re-visits were paid. The figure for breast-feeding was lower than last year, largely owing to an increased attendance from Maesglas district where many of the mothers have large families and 10 to 15 per cent. suffered from lactational deficiency and were able to breast-feed for only a few months, if at all. There was a large increase in the amount of free food given away to this district. The babies, on the whole, were a healthy lot. Two cases of mild rickets attended the Orthopædic Clinic for splinting and massage of legs. One severe case of umbilical hernia was admitted to hospital for operation, and one pyloric stenosis case was operated on in hospital and did well. One case of squint was referred to the Consultant Eye Specialist. Of the toddlers who attended, roughly 40 per cent. were underweight. These latter were advised to diet and helped with milk and cod liver oil where necessary. Bronchial catarrh, enlarged tonsils, impetigo and threadworms were the chief ailments. Two cases of squint were referred to Dr. Coulter. Two cases of talipes and 2 curvature of tibiae were referred to the Orthopædic Clinic. The physique of several of the nursing mothers attending was very poor. Milk, fresh or dried, was given where necessary on medical grounds and tonics and simple aperients prescribed. Several dental appointments were made, chiefly cases of severe pyorrhœa. Six expectant mothers were referred to the antenatal clinic at Newport. More free food was given away than during last year.

MALPAS.—The number on the register at the end of the year was 128 compared with 115 last year; 45 new cases under 1 year attended compared with 36 last year, and the average attendance per session was 41.82, last year's figure being 38.0. The area is a growing one and during the year there was a marked increase in the number of young mothers who came with their first baby, usually breast-fed, so it is not surprising that the percentage of breast-fed babies shows an increase of 18 per cent. over last year's figure. The babies on the whole were very fit. Three cases of mild rickets attended—two with curvature of the tibiae had splinting and massage at the Orthopædic Clinic. 78 toddlers attended, of whom 6 (roughly 8 per cent.) showed evidence of subnormal nutrition. Bronchial catarrh, threadworms and enlarged tonsils accounted for most of the ailments. 10 were given dental appointments, and 3 with severe eczema were referred to the Royal Gwent Hospital. About one-third of the toddlers reporting regularly came with their mother who was bringing a baby to the centre. 2 cases of squint were referred to Dr. Coulter. 2 cases of genu valgum were seen by the Orthopædic Consultant who advised osteotomy and treatment in the Royal National Orthopædic Hospital, but in neither case was the parent willing to allow the child to go into the hospital. There were 109 total

attendances of nursing mothers, 4 of whom showed lactational deficiency but only 1 showed subnormal nutrition. The latter brought 2 definitely rickety toddlers with her when she paid her last visit to the Clinic. 6 expectant mothers were referred to the Antenatal Clinic at Newport. Free food was given away to a slightly less extent than last year.

CALDICOT.—This Centre is held weekly, and is attended by mothers and babies from Caldicot and the surrounding rural district. The attendance during the year was very satisfactory, the figures showing an increase all round when compared with those of the previous year. The number on the register at the end of the year was 140 compared with 131 in 1933. 1605 total attendances were made compared with 1537 in the previous year, and the average attendance was 34.14 as against 32.7 in 1933. The figure for breast-feeding is slightly lower than last year (43 per cent. compared to 45 per cent.) but this fall may be explained by the fact that this year several mothers with large families attended with a baby whom they were unable to breast-feed owing to lactational deficiency due to repeated pregnancies. They were helped with extra nourishment as far as possible. The babies on the whole were very fit, but 4 cases of mild rickets attended and were treated with Cod Liver Oil and advised the sunshine and fresh air. 1 case of salivary fistula was admitted to hospital, and 1 harelip and cleft palate was operated on in hospital for repair of lip. 4 nævus cases attended hospital for out-patient treatment. Bronchial catarrh was very prevalent—part of the district round Caldicot is low-lying and tends to keep up catarrhal conditions. The toddlers who attended were a particularly healthy lot—only one showed subnormal nutrition. 1 case of squint attended the Consultant Eye Surgeon. 2 cases attended the Orthopædic Clinic and had splinting and massage for rachitic bowing of legs. 6 had dental appointments. 1 case of an unusual skin lesion, granuloma annulare, attended hospital for out-patient treatment. Bronchial catarrh and threadworm were the chief ailments. There was a fair amount of lactational deficiency (8.5 per cent.) among the nursing mothers attending, but the physical condition of the mothers as a whole was good. Constipation, pyorrhœa, and dental caries were the chief ailments to be treated. 3 expectant mothers were referred to the Antenatal Clinic, Chepstow. More free food was given away than last year, but the increased attendance would account for the increase. Several ladies of the local Infant Welfare Committee attended regularly throughout the year and my thanks are due to them for their helpful and valuable work.

ROGERSTONE.—This Clinic is held fortnightly. The number of infants on the register shows a decrease this year and there is a corresponding fall in the average attendance per session, 30.34 compared with 32.36 for last year. Breast-feeding figures continue to be very satisfactory—57 per cent. compared with 57.5 per cent. for last year. The number of toddlers attending also shows a decrease over last year's figure. 3 per cent. of the toddlers who attended showed signs of malnutrition, and were assisted with milk and cod liver oil where necessary. 7 cases of enlarged and septic tonsils were referred for tonsillectomy. 12 dental appointments were made and various minor complaints, e.g., threadworms and nasal catarrh, received advice and treatment. There was no malnutrition among the mothers who attended, and only one or two showed lactational deficiency.

GENERAL.—The work of the Centres proceeded along much the same lines as last year and it was again found necessary to direct parental attention to lack of a proper dietary and sleep during the 2—5 year-old period. At one of the Centres in particular, Newport, the flabbiness and pallor of many of the toddlers were striking. These toddlers are usually members of large families and as each new baby comes along, the toddlers are

pushed into the background until the age for school attendance comes, and more attention is given to the toddler who now becomes a schoolchild eligible to receive the benefits of the School Medical Service. Recently the Ministry of Health has been devoting more attention to the pre-school child—and Monmouthshire has followed suit, but it is difficult to make time for the examination and treatment of toddlers in baby centres, many of which are already over-crowded.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Markham	Risca	Aberbargoed
	%	%	%
Breast-fed	38	38.5	44.5
Breast and Artificially fed	15	14.5	16.5
Artificially fed	47	47	39

RISCA.—Breast-feeding has risen a little, i.e., from 34 per cent. to 38.5 per cent., but is by no means as high as it should be. In most cases the midwives' weighing scales record higher than those at the Clinic and the mothers at the first clinic visit are too apt to think that their babies are losing weight and will not be persuaded to give breast-feeding a fair trial. Also mothers who have been unable to breast-feed their first children are much too ready to wean subsequent children straight away without waiting for advice or help from the clinic. The attendance here has risen from 61.8 to 72.4 per cent. per session and was particularly good in the summer months when it was often over 90. 'Bus services here are excellent and mothers from the lower end of Pontymister attend very well. In proportion to the size of the clinic very little free food is given here. Some of the mothers at this centre are exceptionally careful, thrifty and tidy, and are not so ready to ask for help as in some of the other areas. This is a large centre and drugs are extensively used and are very much appreciated by the mothers, some of whom would be quite willing to pay a small sum for the medicines supplied. No antenatal work is done here but a large number of expectant mothers attend the Newport Centre. The poorer mothers, however, cannot afford the 'bus fare to attend regularly, and others dread the journey by 'bus or train, and it has been suggested that a centre for the Risca and Crosskeys area would be well attended. Most of the mothers here are healthy except for a few who have had much too short an interval between their pregnancies and one or two seriously debilitated following difficult confinements. Babies under one year are averagely healthy and those who have given trouble as regards insufficient gain in weight have in many cases been the children of the more well-to-do parents. It has been noticed that many of the babies have at birth been smaller than average and a larger number than usual have been premature, but these have all gained well and shown no tendency to delicacy. A very large number of toddlers attend here, many of them coming quite regularly from birth right up to school age. A large number of these have had treatment for dental caries and half a dozen or so have had refraction done on account of squint. Many children have enlarged tonsils and adenoids and the majority of the parents are willing to allow the operation when it is advised. The nutrition of the toddlers here is good and their mentality appears to be above average. The three voluntary helpers have attended most regularly and have been of great assistance.

MARKHAM.—Breast-feeding has fallen slightly, i.e., from 40 per cent. to 38 per cent., but the number of babies entirely bottle-fed has increased from 35 per cent. to 47 per cent. A good many mothers here did attempt to breast-feed their infants but had to give it up owing to deficient lactation even although their nutrition and general health seemed satisfactory. The great majority of the bottle-fed babies gained well on dried milk, the exception being one infant whose chart from the age of one to three months was practically a straight line and who finally at the sixth change of diet did extremely well on a patent food. The attendance has risen from 19 to 22 per session, but is still disappointingly small for the size of the area. A large proportion of the mothers come from Argoed and naturally, owing to the distance, most of these only come fortnightly, but the Markham mothers should attend better than they do. Free food is not given to any large extent, but the amount is quite high enough in proportion to the size of the clinic. Most of it is given to infants and a very small amount to toddlers. Drugs are used to a fairly large extent, ointments for skin troubles and medicine for bronchial catarrh being the most extensively used. No ante-natal work is done here, mothers being referred to Tredegar or Oakdale. Only 19 nursing mothers were treated during the year and about half of these showed a slight degree of anaemia. Most of these were women who had had large families or who also suffered from a marked degree of pyorrhœa. The nutrition of infants under one year is quite satisfactory but as in all the other clinics tends to be less satisfactory between the ages of one or two years. At that age the children are very susceptible to chest trouble and infectious ailments and become flabby and very tired. A number of younger toddlers, i.e., children between the ages of two to three years, attend the centre and these do not show much evidence of malnutrition. One child with symptoms suggestive of infantile paralysis was referred to the Orthopædic Clinic and from there to the Royal National Orthopædic Hospital for treatment. Many of the children over three years are in school and do not, therefore, attend unless to get appointments made for dental treatment or for refraction.

ABERBARGOED.—These figures are almost exactly the same as for 1933 and are very unsatisfactory as regards breast-feeding. Some of the mothers are unfit to feed their infants but there are undoubtedly others, more particularly among the younger mothers, who obviously have no intention of trying to breast-feed their children and the babies are already weaned when brought to the clinic. Midwives could do a great deal more than they do, in persuading the mothers to continue breast-feeding. The average attendance has risen from 31.5 to 37.9 per session and mothers with children under one year as a rule attend regularly. Attendance amongst the more well-to-do mothers tends to fall if the children are healthy, and a few mothers obviously only attend when free food is being supplied. A large number of mothers are receiving free food, but during the year 1934 a larger percentage than previously has been given to under-nourished children over the age of one year and less to infants. Drugs are rather extensively used here as most of the people are very poor and benefit greatly, especially from the iron tonics which have been added to the drug list. Ante-natal work is not done here and expectant mothers are referred to the New Tredegar Centre. Seventy-two nursing mothers were treated during the year and of these 18 suffered from a definite degree of anæmia, in some cases very severe and usually following upon a confinement. Most of these responded to treatment with iron, and extra nourishment such as colact (if they were nursing mothers). Several of the chronic anæmia benefited by having very septic teeth removed. The nutrition of infants under one is on the whole satisfactory but it has been noted that bottle-fed babies healthy at their first visit to the clinic and therefore not eligible for free food tend to fall off in weight owing to being given insufficient milk. One baby, suffering from pyloric stenosis,

was referred to Cardiff and operated upon, but after doing well for about six weeks it unfortunately had severe convulsions and died. A large number of toddlers attend the centre and many of these show a slight degree of malnutrition and they tend to become very debilitated following any illness such as diphtheria, measles, etc. Dried foods, especially colact, suit these children and their weight often goes up surprisingly well when these are supplied for a short time. Most of the children in this area go to school at the age of four and benefit considerably by school dinners and cheap milk. Very many of the children suffer from enlarged tonsils and adenoids and a great number of them are operated upon before the age of five, the results being excellent in most cases. Dental treatment is frequently asked for and quite a number of school children are brought to the clinic by parents asking for appointments for teeth, tonsils, or defective vision.

4.—DR. EVELYN D. OWEN, Assistant Medical Officer, Monmouthshire County Council

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Pontypool	Rumney
	%	%
Breast-fed	44	54
Breast and Artificially fed	30	10
Artificially fed	26	36

PONTYPOOL CENTRE.—The attendance at this centre shows a slight decline. The percentage of breast-feeding decreased considerably—from 52 in 1933 to 44 in 1934—while the combined breast and artificial feeding increased correspondingly for the purely artificial group remained much the same at 26 per cent. Thus it seems that as many mothers as previously attempted to breast-feed their babies but fewer were able to do so completely. It is not easy to explain why this should be so for the general debility among the nursing mothers who attended for advice was slightly less than the previous year—29 per cent. as against 32 per cent.—and most of these improved satisfactorily with treatment. In fact only about 9 per cent. were markedly anæmic and debilitated. The attendance of nursing mothers increased from 56 to 64. Several of these availed themselves of the opportunities offered them for the extraction of carious teeth. No ante-natal work is done at this centre. More toddlers aged 1 to 5 years were brought than in 1933—88 instead of 68—but as in that year nearly one-third were underweight. In many cases their complaint was loss of appetite. On enquiry this condition appeared to have been induced by wrong feeding, about which advice was given. Tonics were prescribed and cod liver oil and malt or some similar preparation was given in necessitous cases. As in previous years defective teeth and enlarged tonsils were common complaints. No severe cases of rickets were seen, but 12 children showed signs of a mild form of this disease. A little more free food was given than in 1933.

RUMNEY CENTRE.—This centre is held on alternate Thursday afternoons. The average attendance was much the same as the previous year—22 in 1933, 23.65 in 1934. While it is pleasing to see that the percentage of breast-feeding has again increased—this time from 49 to 54—it is anything but gratifying to note that the purely artificial feeding has increased even more, i.e., from 15.7 per cent. to 36 per cent. There are too many Rumney mothers not trying to breast-feed their babies. For the most part they are young, healthy women who should be able to do so. One mother who had started artificial feed-

ing before coming to the clinic, owing to a breast abscess, was persuaded to try to re-establish breast-feeding, succeeded, and was able to feed the baby till weaning time. 37 toddlers from 2 to 5 years of age attended during the year. Defective teeth and enlarged tonsils were their commonest complaints. Two orthopædic cases were referred to the clinic at Newport, and one child with an abdominal tumour was sent to the Cardiff Royal Infirmary. Fewer nursing mothers attended for advice and treatment than in 1933. Slight anæmia and debility was their chief trouble. Expectant mothers who attended were referred to the ante-natal clinic at Newport. Only a few simple drugs were used and only a little free food was given during the year.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Newbridge	Pontymoile	Pontnewydd
	%	%	%
Breast-fed	40	30.8	35
Breast and Artificially fed	30	19.2	17
Artificially fed	30	50.0	48

NEWBRIDGE.—Though the attendance at this clinic is still good the figures are slightly below those for the previous year. There is again a decrease in the percentage of breast-fed babies, being 40 per cent. in 1934 as against 47.2 per cent. the previous year, but it is satisfactory to note that the percentage of breast-fed and artificially-fed has doubled in 1934, and the percentage of artificially-fed infants has decreased from 37.5 per cent. the previous year to 30 per cent. in 1934. This shows that many mothers are willing to persevere with partly breast-feeding their baby even if they are unable to do so entirely. The total attendance of nursing mothers for 1934 is 453 and many expectant mothers came to the centre for advice, but these latter cases were referred for consultation to the ante-natal clinic in the district. A high percentage of nursing mothers suffered from debility following confinement and many from lactational deficiency. These were helped with free food—prescribed on medical grounds. The majority of nursing mothers suffered from dental caries, but only the very few availed themselves of the opportunity of attending the dental clinic for treatment. Two mothers were referred to the Tuberculosis Officer and one attended the V.D. department at the Royal Gwent Hospital. The total number of toddlers—children between 1 year and 5 years—attending the clinic is less this year. Mothers find it difficult to manage more than one infant at the centre, especially in the afternoon when the centre is generally very well attended. So, unfortunately, the toddler does not receive the attention due to it. Malt and Oil, etc., were prescribed and given free to many toddlers for medical reasons. Five children had their tonsils and adenoids removed; four were referred to the Tuberculosis Officer; five to the dental clinic; one to the V.D. department, Royal Gwent Hospital; and one to the eye clinic. As in previous years only simple drugs were prescribed and these in a restricted amount.

PONTYMOILE.—It is most satisfactory to note an increase in the percentage of breast-fed babies, though the increase is slight. This year the percentage is 30.8 compared to 29.7 per cent. the previous year; but it is disappointing to record that the percentage of partially breast-fed babies has increased considerably, being 19.2 per cent. as against 32.5 per cent. in 1933. While the percentage of the artificially-fed infants has increased from

37.8 per cent. in 1933 to 50 per cent. in 1934. There is an increase in the numbers attending the centre compared with the previous year. Several expectant mothers attended, but were advised to consult the medical officer at the ante-natal centre either at Newport or Pontypool. The attendance of the toddlers is fairly good, but owing to the distance many mothers come they seem able to manage only one child at a visit. Mothers, infants and toddlers were helped with free milk foods and accessories such as malt and oil, etc., when, for medical reasons, such were considered essential. Eight children were referred to the dental clinic, three to the V.D. department Royal Gwent Hospital, one to the Eye Clinic and one to the Orthopædic Clinic. Only five mothers attended the dental clinic, though about twice as many were advised to do so. Many mothers hesitate having their bad teeth extracted, as they are unable to afford dentures. One mother was referred to the V.D. Department, Royal Gwent Hospital.

PONTNEWYDD.—The average attendance at each session has increased from 18.9 in 1933 to 21.7 in 1934. The figures for percentages of breast-fed and partially breast-fed infants are disappointing. In 1933 the percentage of breast-fed babies was 48.0 per cent. and in 1934 it has dropped to 35.7 per cent. There is also a decrease in percentage of partially breast-fed infants, being 17.2 per cent. in 1934 as against 20.8 in the previous year, and the artificially fed class has increased from 31.2 per cent. in 1933 to 48.2 per cent. in 1934. This year it was again found that many babies were already weaned before they were brought to the clinic and many mothers, though helped, for medical reasons, with free supply of milk foods, still failed to continue to breast-feed their infants. I think the midwives should persevere, still more diligently, in their efforts to educate the mothers in the value to the infants of breast-feeding. Only a few mothers attended the dental clinic for extractions, though many more were urgently advised to do so. The total numbers of toddlers attending the centre in 335 as against 323 in 1933. These children, in many cases, were helped for medical reasons with such food accessories as malt and oil, pure cod liver oil, etc. Simple drugs in a very limited quantity were only prescribed. Three children were referred to the Dental Clinic; two to the Eye Clinic, and three to the Orthopædic Clinic, and one attended the skin department Royal Gwent Hospital for the treatment of a nævus. I wish again to express my thanks to the health visitors and also to the voluntary helpers for the valuable help given at the centres.

6.—DR. W. BOWEN OWEN, Assistant Medical Officer, Monmouthshire County Council.

Breast-fed	...	45%.	Part Fed	...	25%.
Bottle Fed	...	30%.			

INFANTS UNDER ONE YEAR OF AGE.

Fit	...	90%.	Not Fit	...	10%.
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CHILDREN BETWEEN ONE YEAR AND FIVE YEARS OF AGE.

Fit	...	40%.	Not Fit	...	60%.
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NEW TREDEGAR.—These figures show: (a) that most of the babies attending the Clinic progress satisfactorily. Lack of nourishment is not a cause of the "unfitness" in the others, as they are supplied with adequate milk foods when necessary. (b) The number of toddlers who are in an unsatisfactory condition is high, being 80 out of 133 who attended, and came under the influence of the Clinic regime. Unfortunately, many make spasmodic visits to the Clinic, which are not of much value, especially when the child is not progress-

ing satisfactorily. Infectious diseases have been common throughout the year, while colds and catarrhs have had a marked effect upon the health of the young. Special milk preparations, malt and oil, and medicines have been given to the needy cases. Many delicate children have been helped into strong and lusty healthfulness, while others seem especially prone to 'colds,' which keep them much underweight. This type of child is the great problem of the Clinic. Attendance has been poor this year again, partly due to the continued presence of infectious diseases. The first month of 1935 has seen a welcome increase. The register shows that children over one are in the majority. This is a very satisfactory state. Mothers are continually encouraged to bring the toddlers as well as the new babies.

7.—DR. WILLIAM R. NASH, Assistant Medical Officer, Monmouthshire County Council.

USK.—The number of attendances at this Clinic during the year 1934 was 703. There were 69 children between 1 and 5 years; and 32 under 1 year on the register on the 31st December, 1934. This represents an average attendance of 29.3. The percentage of breast-fed children was 50 per cent.; 8 per cent. were breast and artificially fed, and 42 per cent. were completely artificially fed. This is most unsatisfactory, and is caused in no small measure by the poverty and low standard of living of the agricultural labouring classes. The nutritional standard of the mothers in many of the districts around Usk is appallingly low. This may be accounted for by the low wages earned, the difficulty of obtaining fresh milk even in the heart of the country, and the general apathy and resignation of the people to accept things as they are. Attention has been paid to improving the general health and conditions of these mothers, but there is still much to be done. Ante-natal work is referred to the County clinics at Chepstow and Newport, and it is a matter for comment that very many of the expectant mothers are utterly unable to afford the necessary 'bus fares.' The regulations for the issue of free food, cod liver oil, etc., in view of the above, have been interpreted on the generous side. The usual infantile ailments have been treated, whilst several cases have been referred to the Tuberculosis Dispensary, and clinics of the County Council.

8.—DR. WILLIAM PANES, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Nantyglo	Blaina
	%	%
Breast-fed	57	55
Breast and Artificially fed	13	16
Artificially fed	30	29

NANTYGLO.—Compared with 1933 breast-feeding shows an increase of 10 per cent. This increase is in large measure due to the fact that mothers showing a tendency to lactational deficiency are, in necessitous cases, supplied with nourishment, thus enabling them to feed their children. Again, mothers are strongly impressed with the importance of breast-feeding. Generally speaking, the nutrition of infants up to 1 year of age was quite satisfactory. However, after one year of age, as in previous years, signs of improper care and feeding were commonly found. This fact is undoubtedly due to a number of factors, but chief of these is the badly and frequently insufficient dietary given to these children. Toddlers commonly have to take "anything that is going." This factor of bad feeding was counteracted to some extent by advice on feeding especially the importance of vitamins

and protein content of the food and the administration of cod liver oil and similar preparations. A pleasing fact, however, is the lessening of the incidence of mild rickets, no cases of severe rickets were encountered. The ailments treated were mainly those affecting the gastro-intestinal and respiratory tracts. A number of skin conditions and a few orthopædic conditions were met with. Of nursing mothers little change was noticed from that of 1933. A number were found to be suffering from debility and anæmias. Apart from questions of nutrition it is felt that a large percentage of mothers are up and about attending to household duties much sooner after the confinement than they should be. The average attendance per session was 31.25.

BLAINA.—Much that has been said in the report on Nantyglo Clinic holds good for Blaina Clinic. This is especially the case with regard to the feeding of both infants and toddlers. Infants up to one year of age generally are well-cared for and well nourished. However, from the ages of 1—5 years the same picture presents itself here as at Nantyglo. A large percentage, approximately 24 per cent., of toddlers developed signs of debility. This, as at Nantyglo, is due to improper and occasionally insufficient feeding. Similar measures as those employed at Nantyglo were used to prevent and treat this important condition. A number of cases were referred to the Orthopædic Clinic, two being of especial interest; one, a case of polio-encephalitis, and another of poliomyelitis. These cases are now undergoing treatment. Generally, the condition of nursing mothers was similar to that found at Nantyglo. Similar measures were taken in the anticipation and treatment of cases of debility and malnutrition amongst the mothers. I must express my thanks to the voluntary helpers for their very good work at the clinic both at Blaina and Nantyglo.

9.—DR. B. O. MacQUILLAN, Assistant Medical Officer, Monmouthshire County Council.

PENGAM.—There has been a diminution in the total number of attendances from the previous year—a fall of 101, although the number of toddlers attending increased from 631 to 718. Each session averaged an attendance of 47.44. The percentage of children who were completely breast-fed equalled 46 per cent. The partially breast and partially artificially fed number 17 per cent., and artificially fed children equalled 37 per cent. There is a considerable retrogression in the numbers of breast-fed children from the previous year which equalled 55 per cent. The etiology of this decrease is difficult to ascertain. There is no increase in the amount of malnutrition found among the mothers which in this area is very small and fully another 25 per cent. to 30 per cent. could breast-feed their babies if they were desirous of doing so. A large number of apparently healthy and well-nourished primiparae attended the clinic for the first time some three to four weeks after confinement with the baby already weaned. When investigated various answers were forthcoming: (i) Baby was cross for several days after birth which gave them sufficient justification for artificial feeding. (ii) Well intended though misguided influence of older relatives. (iii) This era of canned food entering into the realms of infant feeding. (iv) Only too frequently were some of the midwives to blame—several mothers have attended who were capable of and who actually wanted to breast-feed their babies were advised to the contrary by midwives. These latter mothers were advised and several have been successful in returning to breast-feeding with resultant healthy and well nourished children. Medicaments have been dispensed within the same limits as in former years and free food only allowed on purely medical grounds. Naso-pharyngeal and pulmonary affections claimed precedence in the number of cases attending and these all responded satisfactorily to the prescribed treatment.

10.—DR. A. E. MATHERS, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast-Fed	...	60.6%.	Artificially Fed	...	25%.
Breast and Artificially Fed	...	15.4%.			

BLACKWOOD.—This Centre is now held every week instead of fortnightly as in previous years. The total number of infants on the register has consequently increased, being 359 as compared to 278 last year, and the total attendances also show an increase, being 2135 as against 1497 in 1933. The average attendance per session is much the same being 58.18 as against 58.2 in 1933. There is a decrease in the number of breast-fed babies being 60.6 per cent. as against 63.4 per cent. last year. However, there is a considerable increase in those who persevere with breast and artificial feeding = 15.4 per cent.—last year's figure being 11 per cent. The number of those entirely artificially fed is 25 per cent. as it was in 1933. Ante-natal cases receive advice, but are referred to Oakdale for examination and treatment. The total number of expectant mothers who attended the clinic was 8, and 7 of these were new cases. Toddlers attended regularly, and this year shows a considerable increase in number, being 728—an increase of 358. No hard and fast rule is made as regards the giving of free food at this clinic. Each case is judged on its own merit and food is given on medical grounds only, e.g., if the child is under-nourished or in order to maintain the child's weight at an average normal figure. Cod liver oil in various forms is given to toddlers suffering from diminished muscle tone or other forms of vitamin A or D deficiency or with a tonic to build up their strength after a severe illness, e.g., pneumonia or whooping cough. Cough mixtures, laxatives, and various ointments for minor skin conditions are also used.

11.—DR. ALICE DEWAR, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

			Cross Keys.	Ynysddu.
Breast-fed	...	...	35%	44%
Breast and Artificially fed	...	...	24%	15%
Artificially fed	...	...	41%	41%

CROSS KEYS.—This centre is held weekly. For the first time for several years, the attendance shows a slight improvement. The number on the register has increased from 90 to 97; the total attendance from 861 to 887, and the average attendance from 18.3 to 18.47. Unfortunately the percentage of breast-feeding has decreased from 46 per cent. to 35 per cent. The artificial feeding has increased from 37 per cent. to 41 per cent. and the combined breast and artificial feeding from 17 per cent. to 24 per cent. Many of the babies were entirely or partially bottle-fed before their first visit to the centre. On the whole, the infants were fairly well nourished, only four being underweight. Twenty toddlers attended and about one-third of these were underweight. Their commonest ailments were constipation and bronchial catarrh. Two were referred to the Orthopædic Clinic and 2 cases of squint to Dr. Coulter's Clinic. The number of nursing mothers attending this centre has also increased. About a third of these suffered from general debility. Their commonest complaint was constipation. Six expectant mothers attended and were referred to the Newport Ante-natal Clinic. A very limited supply of simple drugs was prescribed and as free food was given only on medical grounds, very little was given at this centre.

YNYSSDDU.—This centre is held weekly. Though there is a slight decrease in the number of infants on the register, being 227 as compared with 235 in the previous year, the average attendance has again increased being 35.27 compared with 33.9, and the total attendance has increased from 1630 to 1693. Although the percentage of breast-feeding is still low, it shows a decided improvement, having increased from 35 per cent. to 44 per cent. The amount of combined breast and artificial feeding shows a slight decrease from 17 per cent. to 15 per cent. and the amount of artificial feeding has decreased from 48 per cent. to 41 per cent. The babies on an average are healthy and well-nourished but unfortunately over the age of one year many of them fall off in weight, and of the 60 toddlers who attended, about half of those were under-weight. Bronchial catarrh, constipation, thread worms and enlarged tonsils were their chief ailments. Two were referred to the Orthopædic Clinic, and one case of squint attended Dr. Coulter's Clinic. A large number of toddlers were given cod liver oil. A limited supply of simple drugs such as aperients, tonics and cough mixtures was prescribed, and free food was given only on medical grounds. 87 nursing mothers attended and about half of these were suffering from general debility. 15 were referred to the dental clinic. The expectant mothers who attended were referred to Newport Ante-natal Clinic. I should like to express my thanks to the voluntary helpers at both centres for their useful and valuable work.

12.—DR. PHILOMENE R. WHITAKER, Assistant Medical Officer, Monmouthshire County Council.

DETAILS OF FEEDING OF INFANTS UNDER NINE MONTHS.

	Oakdale	Crumlin	Panteg	Cwmbran	Caerleon
	%	%	%	%	%
Breast-fed	62	54	62	61	61
Breast and Artificially fed	15	3	10	11	15
Artificially fed	23	43	28	28	24

OAKDALE.—This centre is held fortnightly and its progress continues to be very satisfactory. The number on the register at the end of the year was 206, an increase on last year. The average attendance per session shows a slight decrease, being 40.4, as compared to 44.62 last year. However, this average is very satisfactory and is almost more than can be dealt with in a morning session, and is the highest of all my areas. Toddlers attend regularly, the total for the year being 336, a decrease on last year's figure, but the number of new cases shows an increase. The percentage of breast-fed babies is good at this centre—being 62 per cent.

CAERLEON.—This centre is held fortnightly and shows a steady increase in its attendance. At the end of the year the number on the register was 131, as compared with 123 in 1933, and the average attendance per session has risen from 25.74 to 27.54. The number of toddlers attending is good, being 251 for the year. The physique of the children, with one or two exceptions, is satisfactory, and free food and milk were given to the needy cases. The figure for breast-feeding shows a gratifying increase this year being 61 per cent., which compensates for the low figure of 36 per cent last year.

CRUMLIN.—This centre, held once a week, is always well attended. The number on the register was 183, as compared with 179 last year, and the average attendance per session has risen from 23.34 to 27.56. The total attendances show a corresponding increase

being 1,323, as against 1,121 last year. The percentage of breast-feeding has improved, the figure being now 54 per cent., as compared with 40 per cent. in 1932. The number of toddlers has also increased, being 446, as against 305 last year. Free food is given in fairly large quantities at this centre. The general physique of the mothers and toddlers is lower than in many areas.

PANTEG.—This centre is always well attended and the mothers take a great interest in the progress of their children, and respond readily to advice given. The number on the register at the end of the year was 190, a slight decrease, but the average attendance per session shows an increase again this year, having risen from 34.6 to 35.02. The total attendances number 1,681, as compared to 1,662 last year. The number of toddlers attending this centre is always high, the total for the year being 748. Breast-feeding maintains its level of 62 per cent., which is highly satisfactory.

CWMBRAN.—The attendance at this centre continues to be good and the number on the register at the end of the year is identical with that of last year—234, but the average attendance per session shows an increase, being 34.91, as against 33.85 in 1933. Total attendances 1,676, of which 703 were toddlers. The percentage of breast-feeding, although lower than last year, is good for the area, being 61 per cent. As this is still a distressed area, the amount of free food given is comparatively high, both to nursing mothers and to the toddlers.

GENERAL.—The attendances at the various centres show a further increase again this year, most marked in the Crumlin area, which compensates for the decrease at this centre last year. Free foods are given in necessitous cases on medical grounds and as a prophylactic in border line cases where to withhold the free food would spell malnutrition or even rickets. The greatest amount of free food is given at the Cwmbran and Crumlin centres. Drugs consist of simple tonics, aperients, etc. Ante-natal cases are referred to the nearest centre for advice and treatment. There does not seem to be quite the same degree of malnutrition amongst mothers attending the centres, at any rate it is less obvious. This may be due to several factors, but it is gratifying. There is still a good deal of propaganda needed with regard to dental hygiene amongst mothers. In many cases treatment is desired, but artificial dentures are beyond their means. However, much could be done by proper care earlier on, but few realise their value until too late.

13.—DR. R. J. S. VERITY, Medical Officer of Health, Pontypool Urban District Council and Abersychan Parish.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Abersychan	Garndiffaith	Pontnewynydd
	%	%	%
Breast-fed	46.6	64.7	62.1
Breast and Artificially fed	—	—	2.8
Artificially fed	53.4	35.3	35.1

ABERSYCHAN, GARNDIFFAITH. & PONTNEWYNYDD.—The attendances at the centres were much the same as those last year. Very little free food was given during the year and few drugs were prescribed. As in previous years, no under-nourishment was observed either in mothers or infants. Quite a large number of toddlers attended the Centre, but no under-nourishment was observed. 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. When the milk supply is deficient an endeavour is made to increase it. It is very satisfactory to see that the interest created before the child has reached the age of one year is continued afterwards. I wish to express my appreciation of the excellent work done by the nursing staff at all three centres and my thanks to the voluntary helpers for assistance given.

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., 1934	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	608	240	29	2191	1016	2431	1045	3476	72.41
Llanhilleth	385	187	45	1389	773	1526	818	2344	48.83
Six Bells	322	136	53	1275	612	1411	665	2076	48.25
Total all Centres	1320	518	127	4855	2401	5368	2528	7896	53.83

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 maintained. The small decrease is due to the falling birth-rate. There were only 494 births compared with 610 in 1930 and 1242 in 1921.

The following table shows the total number of children who attended at the Infants' Centres during the year 1934 and who, at the end of the year were (i) under 1 year of age and (ii) between the ages of 1 and 5 years.

	Under 1 year of age.	Between 1 and 5 years.	Total.
Abertillery	215	414	629
Llanhilleth	111	302	413
Six Bells	94	246	340

The above figures show that quite a number of toddlers are being brought to the various Centres. This is a matter that should be encouraged until the time arrives when special clinics for toddlers are established.

The details of the various ailments found in the children examined call for no special comment.

Rickets has definitely increased this year.

No marked case of under-nourishment came to my notice. In some few cases among the toddlers a marked improvement was brought about when the mothers substituted fresh milk for the "tinned" variety. The consumption of fresh milk should be encouraged as much as possible.

Epidemic disease did not manifest itself in this area during the year under review.

Whooping cough was a little more prevalent than usual and accounted for the deaths of two infants under one year of age.

Diarrhoea and enteritis also caused two deaths. The severity of Gastro-intestinal diseases has declined considerably.

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

The mothers are encouraged in every way possible to feed their infants at the breast, but unfortunately, there is still a tendency in some cases on the slightest excuse to discontinue this method and fly to one of the various milk substitutes.

The health of some of the nursing and expectant mothers—nursing mothers especially—has not been up to the standard that I should have liked. A great many of the mothers looked worn and tired.

Expectant mothers are now dealt with at the Centres which have been established at Abertillery and Crumlin, and at which there is a lady doctor in attendance. Great advantage is being taken of this particular service.

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

METHODS OF FEEDING INFANTS.

Breast-fed	...	55%		
Breast and Artificially fed	...	5%	Artificially fed	... 40%

BLAENAVON.—There was an increase of 4.28 in the attendances over the previous year. Foods are given free to necessitous cases. Some drugs are dispensed at this Clinic now. 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.

METHODS OF FEEDING INFANTS.

Breast-fed	...	52%	Artificially fed	... 31%
Breast and Artificially fed	...	17%		

CHEPSTOW.—The attendances at the Centre have been well maintained, and "taking the baby to the Clinic" continues to be almost part of a mother's routine here. Sister Webb has completed another year of tireless service to this Centre, and Mrs. and Miss Evill, in a voluntary capacity have worked devotedly, rarely missing a session. Generally speaking in the matter of Maternity and Child Welfare here the conditions are satisfactory. Neglected children are very rare in Chepstow, and carelessness in their interests is most exceptional. Only a very small percentage of the children seen could be described as sick children, if we except the host of minor maladies on which anxious motherhood would focus our attention; and the aim of the Clinic is being interpreted here as, chiefly, striving towards a return to normal conditions of infant feeding, that is, towards universal breast feeding. This, I am afraid, implies an effort to check and counteract the subtle propaganda of commercial interests which, however discreet and apparently scientific in individual pronouncements, undoubtedly have the cumulative effect of undermining many a mother's faith in the need for breast feeding and in her ability to achieve it. Continuous suggestion in print and picture is robbing many babies of their heritage. It is our experience here that with enthusiastic attendants, failure to breast feed is extremely rare.

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

METHODS OF FEEDING INFANTS.

Breast-fed	...	50%		
Breast and Artificially fed	...	4%	Artificially fed	... 46%

EBBW VALE.—There has been an increase in the attendances during the year. The distribution of free food is only supplied at the public expense after strict enquiry of the actual necessities of the cases. 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 meeting 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 are increasing, which is evidence of the popularity of this Clinic. The number of cases of under-nourishment of mothers and infants is not noticeable to the extent as might be expected after the prolonged depression, and compared with previous years the position appears to be stationary. Those affected are attributable to shortage of employment in the coalfield area, including the closing down of the Steelworks. Very few toddlers between the age of 2 and 5 years attend the Clinic, and up to the present, only a small proportion show any evidence of being under-nourished.

18.—DR. R. V. de A. REDWOOD, Medical Officer of Health, Rhymney Urban District.

METHODS OF FEEDING INFANTS.

Breast-fed	...	44%	Artificial feeding	...	31%
Breast and artificial	...	25%			

RHYMNEY.—Attendance at the Centre has been well up to the average. As stated in a previous report, numbers decreased when free food was given only in cases of ill-health and under-weight. A considerable amount of free food is given each week, owing to continued unemployment and irregular work, in nearly all cases of illness or poor development. A few simple drugs and ointments only are prescribed at the Centre; other prescriptions are obtained at the patients' dispensary. Ante-natal work has increased. Some cases are referred to me at the Rhymney Hospital. Others go to Cardiff and ultimately to the Maternity home in Glossop Terrace. There is some evidence of under-nourishment of mothers and infants compared with times when unemployment and short-working time were less prevalent. It does not seem to be increased this year compared with the last 3 or 4 years. Conditions have been bad for several years in this district. The attendance of children from 2 to 5 has increased and the attendance of mothers and infants has also increased. Any increase in dispensing would interfere with the other work of the Clinic. There is a special ante-natal clinic once a month. Appreciation of its value and attendances is increasing. All cases of infants and mothers when necessary are sent to the Rhymney Cottage Hospital for further examination and treatment. A number of cases of circumcision, abscess of breast, etc., are dealt with every year. Orthopædic cases are seen by Mr. A. Rocyn Jones, F.R.C.S., at Newport Clinic. The local committee, i.e., the county councillors and lady helpers, take an enthusiastic interest in the Centre and their help is invaluable. Mrs. Hopkins, as in former years, continues to give much valuable time and help. The report would not be complete without mentioning how pleased we are to have Nurse Jones back after her recent illness.

19.—DR. W. H. WILLIAMS, Medical Officer of Health, Monmouth.

MONMOUTH.—The work at this Centre has been well maintained and the general interest in the Clinic has in no way diminished. After ten years of hard and excellent work Miss Leach Nicholas has resigned her post of honorary secretary. Miss Leach Nicholas is much beloved by frequenters of the Clinic and everyone is glad to know that she remains a member of the Committee and that she will continue to attend the sessions from time to time. Mrs. Murrell has been appointed honorary secretary and it is interesting to note that the new and the retiring secretaries are both prominent members of the V.A.D. (Monmouth 10). This detachment as heretofore supplies nurses to assist at each Clinic. The methods of feeding the children have now changed at this Clinic. Breast milk is used when possible. When this method is definitely undesirable, substitutes have to be provided. Free milk and foods are granted in suitable cases only. The Committee investigates the necessity of each particular case and thus the amount of free food given is limited to the deserving. The drugs that are dispensed are only given to those who naturally come on the free list. This part of the work of the Clinic is greatly appreciated by the poorer mothers. Under-nourishment is rarely observed and when it is suspected prompt steps are taken to remedy the trouble. The continuation of the attendance of toddlers is gratifying and there have been no cases of under-nourishment observed.

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

The facilities for the purchase at the Infant Welfare Centre 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 £3,537 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 cost incurred on the articles given gratis. At a few of the Centres there are voluntary funds, out of which foods are supplied 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 medical officer in charge of the Centre is of opinion that expectant or nursing mothers and infants are in need on medical grounds, milk is given free if the income of the parents is within the scale fixed by the Council.

Foods to the value of £1,218 7s. 1d. were given for expectant and nursing mothers and for infants during the year. This included £345 15s 5d. 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	1927	...	...	£2,817	18	4
1920	...	...	£537	18	11	1928	...	...	£3,844	1	1
1921	...	...	£5,984	0	0	1929	...	...	£5,092	18	8
(Coal Stoppage: Dinners also given).						1930	...	...	£4,787	2	6
1922	...	...	£2,232	14	3	1931	...	...	£5,941	2	6
1923	...	...	£1,548	6	7	1932	...	...	£3,372	13	11
1924	...	...	£1,170	3	8	1933	...	...	£995	15	6
1925	...	...	£1,766	14	0	1934	...	...	£1,218	7	1
1926	...	...	£2,469	7	6						

K.—INSPECTION OF MIDWIVES.

The following table gives particulars of the training, etc., of the Midwives upon the County Roll at the 31st December, during the past five years, and, for comparison the year 1912:—

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
1934	239	2	241	229	—	12	27
1933	230	3	233	218	—	15	30
1932	240	3	243	224	—	19	32
1931	237	4	241	219	—	22	35
1930	237	4	241	215	—	26	35
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 6 practising (6 on the Roll but not practising); 2 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 number of names removed from the Midwives' Roll during 1934 was 16, 10 through removal from the County, 3 through death, and 3 through resignation.

The Chief Inspectress of Midwives is 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 number of inspection visits paid to midwives in the Urban and Industrial Areas by the Inspectresses of Midwives was 489. In addition 250 visits were made, but the midwives were not at home.

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

Many special enquiries have been made in addition to the routine inspection visits, and the midwives are given every opportunity to discuss their work. Attention is frequently drawn to the conditions of their practice, and there are indications that the standard of work is improving. Several midwives who could not or would not take pulse and temperature are now able to do so. Insistence on the obtaining and use of the pelvimeter has been made and there are very few midwives in the County without this instrument.

A midwife was reported to the Central Midwives Board as a result of complaints which had been made about her conduct by two Medical Practitioners. She was suspended by the Local Supervising Authority on the 17th November, 1934, and the case was heard on the 7th February, 1935.

The Board decided to take a lenient view of the case, because of the period of suspension the midwife had already undergone, but she was strongly censured and cautioned.

In the course of the Inquiry it was ascertained that the midwife's knowledge of the taking of pulse and temperature was unsatisfactory. Arrangements were immediately made that each midwife upon the County Roll should be visited by one of the County Assistant Medical Officers and be given instruction in this phase of her work should it be found necessary. Opportunity was taken of this visit to lecture the midwives generally upon their observance of the Rules of the Central Midwives Board.

Midwifery scholarships are not now provided by the Education Committee, for financial reasons.

1,443 notifications of sending for medical aid, and 123 of cases of still-birth, were received from midwives during the year.

Also 5 notifications of deaths of mothers, 12 notifications of children dying a few hours after birth, and 17 within 10 days of birth, 69 notifications of artificial feeding, 8 notifications from midwives who were liable to be a source of infection, and 5 notifications of having laid out a dead body.

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

High temperature	...	...	42	Abortion threatened	...	...	13
Obstructed labour	...	...	25	Still-birth	...	...	20
Premature labour	...	...	13	Unsatisfactory condition of child	...	...	67
Prolapse of cord	...	...	4	Eye affections	...	...	110
Hæmorrhage, ante-partum	...	...	48	Doctor engaged	...	...	5
Hæmorrhage, post-partum	...	...	46	Unsatisfactory condition of mother	...	...	74
Prolonged and difficult labour	...	...	422	Uterine Inertia	...	...	55
Premature birth	...	...	34	Albuminuria	...	...	32
				Spina bifida	...	...	13
Abnormal presentation—				Eclampsia	...	...	2
Breech	...	...	34	Tongue tied	...	...	1
Face	...	...	7	Convulsions	...	...	6
Hand	...	...	2	Miscarriages	...	...	39
Foot	...	...	5	Phimosis	...	...	1
Miscellaneous	...	...	6	Inflamed breasts	...	...	4
Retained placenta	...	...	65	Patients' request	...	...	5
Ruptured perineum	...	...	184	Miscellaneous	...	...	25
Abortion	...	...	18	Born before arrival	...	...	8

Suspension of midwives to prevent the spread of infection was necessary in 18 cases, 6 on account of puerperal fever, 8 pyrexia, 3 scarlet fever, 1 diphtheria. Compensation was paid by the Council in five cases. One midwife was reported to the Central Midwives Board for disciplinary action. Two midwives were reprimanded by the Executive Officer.

Letters were sent by the County Medical Officer to 23 midwives drawing their attention to minor breaches of the rules of the Board.

L.—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.

At the present time there are 29 constituent Associations affiliated to the Monmouthshire Nursing Association, and 32 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 is no longer recognised as a training centre for mid-wifery pupils.

There are seven maternity beds provided at the Home. During the year, 1934, 104 maternity cases were admitted at the Home, as compared with 82 in 1933. 88 of these cases were delivered by midwives and 14 by doctors. There were five still-births, and one death of infant within 10 days of birth. There were 210 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 1934, midwives were subsidised in the following areas:—

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

M.—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.

N.—TRAINING OF ELDER GIRLS IN ELEMENTARY SCHOOLS.

The teaching of mothercraft in Schools is now a matter of national importance, and local authorities are being urged to develop it. In this County the older scholars of Girls' Departments are taught infant care and hygiene at the Domestic Arts Centres of the schools.

O.—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, twice 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:—

Metatarsal Varus	3	Hemiplegia	2
Torticollis	3	Injury to shoulder	1
Congenital Equino Varus	7	Scoliosis	1
Outward Curved Tibia	3	Birth Palsy	3
Pes Plano Valgus	5	No physical signs	7
Genu Valgum	7	No definite diagnosis	1
Anterior Poliomyelitis	6	Monoplegia	1
Spastic Paraplegia	1	Contraction of scar on face	1
Contraction of toe	1		
Calcaneo Valgus	1		
			54

His recommendations were as follows:—

For admission to the Royal National Orthopædic Hospital, Great Portland Street	1
For admission to the Country Branch of the Royal National Orthopædic Hospital, Brockley Hill	9
To wear Splints or other apparatus	16
To have alterations to Boots	6
To see X-Ray Specialist... ..	2
No treatment required	6
Re-examination	11
Special Exercises	1
Massage and electrical treatment	2
	54

He also made at the Newport Clinic 66 re-examinations of children who had received treatment at the Royal National Orthopædic Hospital.

During the year 19 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:—

Anterior Polio Myelitis ... 3	Genu Valgum	1
Congenital Equino Varus ... 7	Torticollis	2
Hemiplegia	Birth Palsy	1
Outward Curved Tibia ... 1	Congenital dislocation of hip	1
Spastic Paraplegia	For further opinion ...	1

Since the inception of the scheme 132 infants and children under 5 years of age have received treatment at the Hospital.

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 1934 he examined and kept under supervision 48 crippled infant children, including cases of first diagnosis and re-examinations.

Twelve infants attended the Clinic for massage and electrical treatment during the year, making 345 attendances.

Eight walking instruments, 9 splints, 11 night shoes, 1 pair of surgical boots, 1 head splint, 1 spinal support, and 3 Fairbanks Splints were supplied for these children by the County Council. Alterations to boots were made for 34 children and one alteration to walking instrument. The total cost in this connection was £35 15s. 5d. 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.—OTHER TREATMENT.—(a) Dental.—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 5 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	...	1221
No. of appointments kept	...	822
No. of cases given "gas"	...	807
No. of permanent teeth extracted	...	2708
No. of temporary teeth extracted	...	983
No. of mothers treated	...	539
No. of children treated	...	268

The treatment is limited to extraction of defective teeth. Mothers who require dentures have to make their own arrangements. The need for dental treatment is still not understood sufficiently well by expectant mothers, for there are many examined at the ante-natal clinics and infant centres who do not follow the advice given in regard to treatment. This may be due to the fact that many women, for financial reasons, would be unable to obtain artificial teeth after the extractions have been made.

(b).—Defective Vision.—Urgent cases of squint and defective vision in children under school age who attend at the Infant Welfare Centres are referred for examination at the local school clinics. 48 children attended the Clinics during the year and spectacles were prescribed for 30.

(c).—Tonsils and Adenoids.—45 cases urgently requiring attention and referred from the Infant Welfare Centres received operative treatment at the School Clinics.

3.—HOSTEL FOR UNMARRIED MOTHERS. — The Maternity Home and Hostel at Nantyderry continues to do good work. There are 10 beds at the Institution, and the number of girls admitted during the year March 21st, 1934—April 1st, 1935—was 13, the average duration of stay being 95 days. Eleven babies were born. The total number of inmates during the year (including those who were admitted in the previous year) was 17 girls and 11 babies.

Twelve girls were discharged, of whom 6 went to relatives and 5 to Homes. Of the babies discharged 4 went to relations, 1 to a Home, 2 were adopted, and 1 died.

Of the 13 girls resident in the Hostel during the year, 3 were from the Borough of Newport, 5 from the County of Monmouth, 4 from Glamorganshire, and 1 from Radnorshire.

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 a 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 three months after the birth of the child. As far as possible the mother and child are not separated for at least the first 3 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 Nantyderry 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.

4.—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 202 cases during the financial year, involving a payment of £362 7s. 0d. 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 £10 15s. 3d. The figures for the year 1933 were 193 cases, costing £346 4s. 6d. Amount collected from husbands, £61 15s. 3d.

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

During the past few years these payments have been kept very low, through our strict observance of the regulations issued by the Ministry of Health governing the cases. Proceedings were taken by certain medical men against the County Council to recover fees which had been disallowed. The Council were successful in the County Court action, but on appeal to the High Court the decision was reversed. This will mean a considerable increase in future payments. It is possible that legislation to clarify the position will be introduced by the Government.

5.—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, 1934, to 31st December, 1934:—

Public Institutions	Tredegar	Chepstow	Pontypool	Total
Number of Maternity Beds	6	2	4	12
Number of Confinements during year	21	6	6	33

6.—DIFFICULT LABOUR CASES.—Facilities for consultation with Professor 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.

Thirty-eight cases were examined by Dr. Strachan, and 23 of them were subsequently admitted to the Maternity Hospital of the Cardiff Royal Infirmary. Three other cases were sent to the Maternity Department making a total of 26. Ten 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. One case was sent to a Gloucestershire Maternity Home.

7.—REGISTRATION OF MATERNITY HOMES.—Six 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), one at Bassaleg (Nursing), one at Chepstow Road, Newport, and the Victoria Cottage Hospital, Abergavenny. 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. From the 31st March, 1935, the Tref-ap-Gwilym Home and the Chepstow Road Home will be in the County Borough of Newport.

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

P.—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. Under the 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 to be supervised until they reach the age of nine years.

The supervision of these children is undertaken by one of the Council's Health Visitors. There were 35 children on the County Register at the end of the year. A visit of inspection is paid every three months to see that the health and home circumstances of the children are satisfactory. Generally, the standard of the home of the foster mother is good and most of the women are appreciative of the visits of the Infant Protection Officer. There was no need for the taking of proceedings in any case.

During the year thirteen cases were removed from the Register for the reasons stated:—

Legally adopted	...	...	2
Returned to mother or other relative	...	...	5
Left County	...	...	3
Admitted to Children's Home			3

Six new cases were notified during the year.

O.—CONCLUSIONS.

The infant mortality rate of 57.4 per 1,000 births compares very favourably with that of the previous year which was 71.7. This is the lowest mortality rate on record for the County. The lowest rate previously recorded was 64.9 in 1930.

The average attendance of infants at the Welfare Centres showed an increase from 35.9 in 1933 to 37.4 in 1934.

During the year, 1934, the regulations governing the granting of help in the form of fresh milk and dried foods to mothers and infants have been relaxed somewhat and this appears, when taken in conjunction with other factors at work, to have had at least some slight influence in raising the health standard.

When we survey the work done in connection with Maternity and Child Welfare during the year under review, we feel that although the results have not been spectacular, sure progress has been made in all branches.

During the year the visits paid by Health Visitors to the Homes increased from 54,434 in 1933 to 55,531 in 1934; the total attendance of infants and toddlers at the Maternity and Child Welfare Centres increased from 67,297 in 1933 to 71,753 in 1934; 31.4 per cent. of women confined in the year, 1934, paid at least one visit to an ante-natal centre compared with 23.4 in 1933. The still-birth rate for 1934 was 5.7 per 100 live births compared with 5.9 in 1933 and the maternal mortality rate for 1934 was 6.2 per 1,000 live births compared with 7.19 in 1933. No confinements were conducted by unregistered women without a doctor in 1934, while seven were so conducted in 1933. The amount of dental work in connection with Maternity and Child Welfare increased during the year. 549 mothers and 268 children from the Maternity and Child Welfare Centres were treated in 1934 compared with 454 mothers and 216 children in 1933.

There is still much to be done for the pre-school child or toddler, and the number of these children attending the Centres compared with that of the infant is low. The provision of Nursery Schools where these children could receive the benefit of fresh air, regular meals, and the regulation of time spent in sleep and play during the day, would be a considerable step forward. Economic difficulties no doubt stand in the way at present. When the health work carried out in this County and its results are compared with that of other parts, it is often forgotten that we have almost insurmountable economic difficulties to face, difficulties which, in fact, are, with one or two exceptions, greater than any other County in England or Wales.

It is hoped during the coming year to make at least one notable advance in Maternity and Child Welfare work in the County and that is the opening of the "Lydia Beynon Maternity Home." By having such a home in our midst the incidence of Maternal Mortality and still-births will be lessened. The effects of up-to-date facilities at hand in the treatment of difficult pregnancies and confinements are far reaching. Apart from the lowering of the maternal death and still-birth rates, permanent damage to the mother and birth injuries to the child with their subsequent ill-health can be avoided by the provision of hospital facilities.

D. Rocyn Jones,

County Medical Officer.