Report upon maternity and child welfare for the year 1935 / Monmouthshire County Council.

Contributors

Monmouthshire (Wales). County Council.

Publication/Creation

1935

Persistent URL

https://wellcomecollection.org/works/k324a86b

License and attribution

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

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

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



AC. 451





MONMOUTHSHIRE COUNTY COUNCIL

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

REPORT

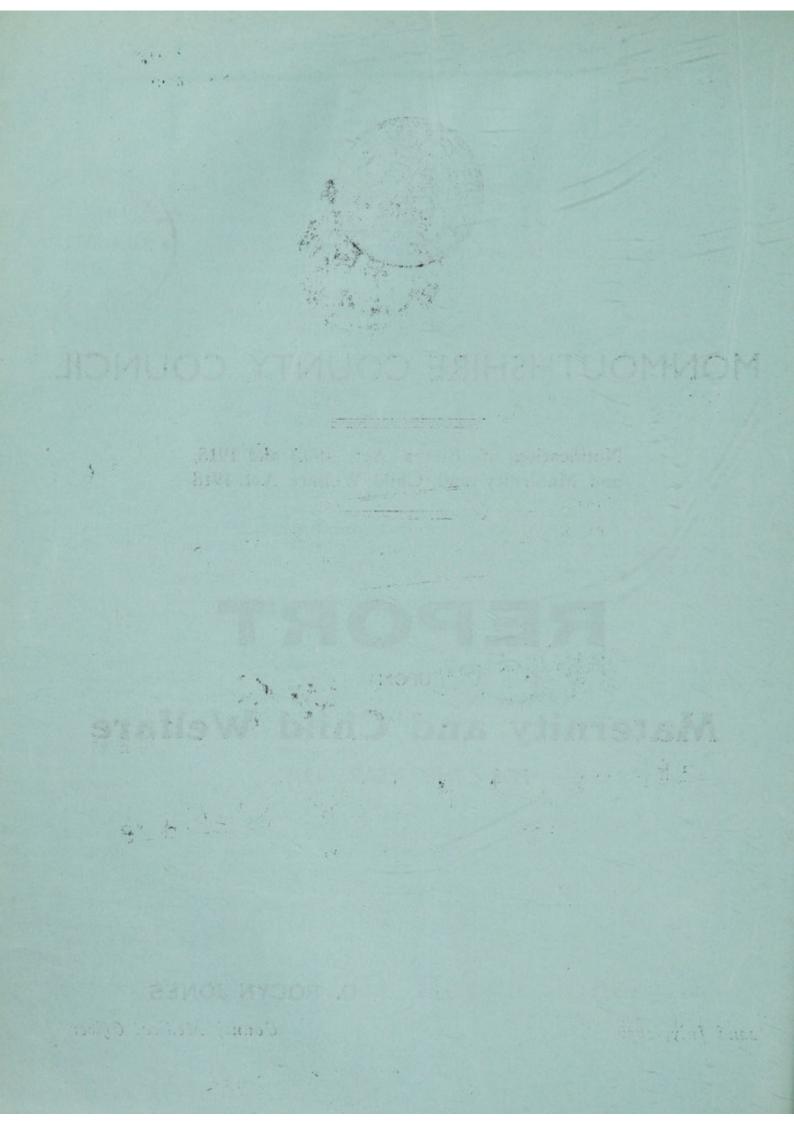
UPON

Maternity and Child Welfare

FOR THE YEAR 1935.

D. ROCYN JONES

County Medical Officer



CONTENTS

	TCA)	- 0.	Page
A.	SUMMARY OF BIRTHS NOTIFIED		3
B.	Work of the Health Visitors		3
C.	VITAL STATISTICS FOR THE YEAR 1935		8
D.	MATERNAL MORTALITY AND ANTE-NATAL CARE		11
E.	MATERNITY AND CHILD WELFARE CENTRES		18
F.	DETAILS OF ATTENDANCES AT CENTRES		20
G.	DETAILS OF MOTHERS' AILMENTS UPON WHICH ADVICE WAS GIVEN AT CENTRES		22
Н.	DETAILS OF INFANTS' AILMENTS UPON WHICH ADVICE WAS GIVEN AT CENTRES		23
I.	REPORTS OF MEDICAL OFFICERS OF CENTRES		25
J.	SALE OF FOODSTUFFS AT THE INFANT WELFARE CENTRES	•••	43
K.	Inspection of Midwives		44
L.	Provision of Midwives for the County		46
M.	COUNTY SCHEME FOR MATERNITY AND CHILD WELFARE		47
N.	Training of the Elder Girls in Elementary Schools		47
О.	Provision for Maternity and Child Welfare Cases at Hospitals, Etc		47
P.	Infant Protection		51
Q.	Conclusions		52

Digitized by the Internet Archive in 2018 with funding from Wellcome Library

Monmouthshire County Council

PUBLIC HEALTH DEPARTMENT,

COUNTY HALL,

NEWPORT,

22nd July, 1936.

To the Chairman and Members of the

Maternity and Child Welfare Committee.

I have pleasure in presenting to you the Twenty-first 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, 1935, 5,362 live births and 297 stillbirths, making a total of 5,659, 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 5,275, and 321 stillbirths, a total of 5,596.

Of the 5,659 notified births, 5,632 were notified by midwives and 27 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. The Ministry 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.

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 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 R. Davies 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 until the child attains the age of five, unless special conditions call for more frequent home visiting.

Statistics relating to the duties of Health Visitors, are given in the following pages, but their real value cannot be demonstrated by figures. Their work is of prime importance in a successful Infant Welfare Service. They are highly trained nurses, who, through their visits to the homes, are able to reach the mothers and instruct them in the correct care of the babies and toddlers. Their responsibilities are serious and its is gratifying to record that they meet them capably.

I.—VISITS PAID.—During the year, 52,284 visits were paid to the homes as follows:

	v Cases Fruitless Visits	Re-visits under 1 year of age	Re-visits 1 to 5 years.	Total Visits.
19355339	2487	13,702	30,756	52,284
1934-5401	1502	14,933	33,695	55,531
19335580	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-viists 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 4,144 children were being brought up entirely on the breast (77.6 per cent.) whilst 921 were being bottle fed (17.2 per cent.), and 231 were both breast and bottle fed (4.3 per cent.). It was discovered on subsequent visits that in 399 instances (7.4 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 43 cases the child only survived birth by a few hours (.8 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 2.4 per cent. in the number of babies breast-fed, as compared with the previous year (1934). The percentage has been gradually falling for the past few years.

arrangements made at the initiation of the scheme, visits were paid by the Health Visitors to several of the District Medical Officers of Health for consultation purposes, and reports were made to those Medical Officers upon serious housing defects and overcrowding.

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 777 to new cases, and 955 re-visits, a total of 1,732 visits. The figures for last year were 298 new cases, and 477 re-visits, a total of 775 visits.

PUERPERAL SEPSIS.—During the year 1935 notification of 11 cases of Puerperal Fever were received under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, from the District Medical Officers of Health. Thirty-five cases of Puerperal Pyrexia were also notified. Upon investigation of these cases it was found that there were five cases of Septicæmia. Seven 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. In addition there were 5 deaths, which, although not certified as due to Puerperal Sepsis, were probably indirectly the result of this disease.

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. 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.— Eleven cases of this disease were discovered during visits to homes, and nine re-visits paid, as against 6 and 3 re-visits in the year 1934.

Twenty-eight deaths were registered in children under two years of age, giving a death rate of 5.3 per 1,000 births, as compared with 5.0 for the year 1934.

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 6 per 1,000 births. It will be observed that the rate for 1935 is 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.—OPTHALMIA NEONATORUM.—Twenty-three cases were notified under the Public Health (Ophthalmia Neonatorum) Regulations, as compared with 30 cases in the year 1934, and 31 in 1932. These cases, together with other cases of eye trouble reported by the Midwives making a total of 127 cases, were followed up by the Health Visitors, who paid 437 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 127 cases as follows:-

NUMBER OF CASES VISITED.

				Acute	Slight	Total
Brought forward from last	year			5	6	11
New cases—						
Both eyes				17	73	90
One eye only				5	21	26
				27	100	127
Number of cases which atter	nded	hospital		-	-	-
As out-patients				6	_	6
As in-patients				7	-	7
Number of cases in which	ch th	ere was				
neglect on the part of	the	midwife		1	_	1
RESULTS:						
Completely cured				22	97	119
Blind—both eyes				1		1
Blind—one eye		htt		1	-	1
Eyes weak				1	_	1
Left district				2		2
Cases still being followed to						
of the year					3	3
or the year		opportunity of	West He	to none the	_	
				27	100	127
		105 11 22 11 11				

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

VII.—STILLBIRTHS.—The number of stillbirths was 321, which works out at 6.08 per 100 live births, an increase of .38 compared with the figure for 1934, which was 5.7 per 100 live births. This year's rate is equal to .98 per 1,000 of population. It continues to be abnormally high, and compares unfavourably with the rate for England and Wales, which for 1935 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, 1935, was 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 121 infants died within one week of birth, and 183 died within the first month of birth, whilst 322 died within the first twelve months. With the figure of 321 still-births there was a total of 643 lives lost to the community.

The infantile mortality rate per 1,000 births is 61.4, as compared with 57.4 for 1934. In 1933 the rate was 71.7; in 1932, 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 4.0 above the rate for 1934, which was the lowest ever recorded in the County.

There were 5,275 live births registered during the year, a decrease of 316 when compared with the number for 1934, and the birth rate is 16.12 per 1,000 of population, compared with 16.19 in 1934. In the year 1933 it was 16.2; in 1932, 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 174, or 3.2 per cent. of all births. Last year the number was 178 (3.2 per cent.), and for the year 1933, 193 (3.4 per cent.).

The number of deaths of illegitimate children under one year of age was 19, or 1.7 per 1,000 of all births, and 51.7 per 1,000 of illegitimate births. Last year the number of deaths was 16, or 2.8 per 1,000 of all births, and 89.8 per 1,000 of illegitimate births. This year's rates are remarkably low.

C.-VITAL STATISTICS FOR THE YEAR 1935.

	Esti-				BIRT	HS					DEA	THS						INFA	NTIL	E M	ORTA	ALITY					
DISTRICTS	mated Popula-	Legit	imate	Illegi	timate	To	otal	Grand	Rate per 1000				Rate per 1000	Total I	Deaths un	der On	e Year		A	ges at	Death	of Chi	ldren u	under (One Yea	er.	
	tion	Male	Female	Male	Female	Male	Female	Total	of popula- tion	Male	Female	Total	of popula- tion	Legiti- mate	Illegiti- mate	Total	Rate per 1000 births	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under Imonth	1-0		6-9 months		
RBAN— ABERGAVENNY ABERSYCHAN ABERSYCHAN ABERSYCHAN ABERTILLERY BEDWELLERY BEDWELLERY BEDWELLERY BEDWELLERY BLAENAVON CAÈRLEON CHEPSTOW WMIDRAN EBBW VALE LANTRECHFA UPPER LANTARNAM MONMOUTHYN MYNYDDISLWY ANTYGLO & BLAINA ANTYGLO & BLAINA ANTYGLO & BLAINA RHYMNEY RHYMNEY RHYMNEY RHSCA HEEDEGAR USK	19,667 8,262 6,133 30,083 8,804 10,620 3,159 4,055 8,505 30,190 1,004 1,741 4,968 14,765 12,550 2,780 33,230 10,050 10,050 2,780 33,230 10,050 11,050 2,780 33,230 11,050	* 182 58 40 253 79 330 70 12 22 68 292 13 16 30 100 100 21 271 88 123 177 7	* 187 52 39 239 70 300 68 21 25 50 238 5 12 34 126 81 21 25 34 126 81 21 25 34 126 81 21 25 34 126 81 21 25 34 36 81 36 81 81 81 81 81 81 81 81 81 81 81 81 81	6 3 2 7 15 1 1 3 2 9 1 5 3 9 4 4 6 6 3	33 33 100 1100 11 11 11 13 3 26 66 46 55	188 61 42 220 79 345 71 13 25 70 301 13 17 35 103 109 21 275 92 129 180 7	190 55 39 249 71 310 69 22 26 51 241 5 12 36 132 87 21 257 70 128 175 5	378 116 81 509 150 655 140 35 51 121 542 18 20 71 235 196 42 257 356 12	19.2 14.0 13.2 16.9 17.0 21.8 13.1 11.0 12.5 14.2 17.9 16.4 16.6 14.2 15.9 15.6 15.1 16.0 9.6	116 65 55 194 55 184 66 18 31 55 185 185 43 86 76 25 204 80 85 143 86	86 53 40 136 43 169 61 16 23 50 129 6 15 25 71 60 20 182 20 182 62 80 105 5	202 118 95 330 98 353 127 34 105 54 112 7 68 157 136 45 314 45 386 45 314 45 314 45 314 45 314 45 316 45 316 45 316 317 317 318 318 318 318 318 318 318 318 318 318	10.2 14.2 15.4 10.9 11.1 11.7 11.9 10.7 13.3 12.3 10.4 10.0 15.5 13.6 10.6 10.6 10.6 11.1 11.1 11.1 11.1 11	27 5 7 36 10 39 4 1 2 12 36 2 3 3 16 9 3 9 7 7 2 12 36 36 10 10 10 10 10 10 10 10 10 10 10 10 10	1	27 57 37 10 39 5 1 2 36 2 3 17 11 3 29 11 7 23 11 7	71.4 43.1 72.6 60.6 59.5 35.7 28.5 39.2 99.1 66.4 68.9 42.2 72.3 56.1 71.4 54.5 67.9 27.2 64.7 83.3	12 14 3 16 4 5 17 6 5 1 10 4 1 10 6	2 1311 121 111 121	1 1 3 1 2 1 1 3 3	3 5	15 2 4 23 5 24 4 1 8 20 1 1 1 8 6 2 17 7 4 4 12 17 17 17 17 17 17 17 17 17 17 17 17 17	5 4 2 3 1 9 1 1 4 2 2 1 1 5 1	3 1 2 1 7 7 2 6 1 1 3 3 3 1	3 1 6 1 1 3 1 1 1 2 4 4 4 4	1 2 1 2 1 2 2 3 1 2 1	27 5 7 37 10 39 5 1 1 3 36 2 2 3 3 12 2 11 1 2 7 7 2 3 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
URAL— ABERGAVENNY CHEPSTOW AGOR MAGOR & ST, MELLONS MONMOUTH PONTYPOOL T, MELLONS	8,505 8,630 1,771 11,723 6,115 5,312 5,230	52 67 9 65 36 28 38	45 54 10 65 32 27 34	2 3 5 1 1 1	4 3 4 2	54 70 9 70 37 29 30	49 57 10 69 32 27 36	103 127 19 139 69 56 75	12.1 14.7 10.7 11.8 11.2 10.5 14.3	58 46 15 76 28 30 26	45 49 10 54 36 31 26	103 95 25 130 64 64 52	12.1 11.0 14.1 11.0 10.4 12.0 9.9	6 9 2 5 3 4 5	1	9 2 6 3 4 5	67.9 70.8 105.2 43.1 43.4 71.4 66.6	2 5 1 2 2 	1 	1	1	4 5 1 3 3 1 2	1 1 1 1	2	2 1	2 2 1 2	8 9 2 6 3 4 5
Grand Totals, 1935	327,150	2,647	2,454	97	77	2744	2531	5275	16.12	2070	1691	3761	11.5	315	9_	324	61.4	121	26	19	17	183	49	33	31	26	322
Totals for year 1934	338,950	2,790	2,623	98	80	2888	2703	5591	16.49	2091	1888	3979	11.7	305	16	821	57.4	137	22	17	13	189	50	38	21	18	316

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

a figures in respect of this area are for the first three months of the year prior to the constitution of the new Pontypool Urban District,
a figures for this area are for the first three months of the year prior to the constitution of the new Cumbran Urban District,
a figures for this area are for the first three months of the year prior to the constitution of the new Magor and St. Mellons Rural District,
a figures in respect of this area are for the last nine months of the year following the new constitution of the district.

Sigures for this area include those for the old Pontypool area for the first three months of the year, and the whole of the new combined area for the remaining nine months.

The population figures used in the above tables are modified estimates submitted by the Registrar-General for use with records of births, deaths, and notifiable diseases.

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

Districts.	Present Year	(1934)	Districts.	Present Year	(1934)
URBAN— Cwmbran Usk Abertillery Mynyddislwyn Abercarn Rhymney Bedwas and Machen Ebbw Vale Tredegar	99.1 83.3 72.6 72.3 71.4 67.9 66.6 66.4 64.7	(83.3) — (62.7) (30.4) (58.1) (46.6) (58.8) (39.9) (52.7)	URBAN— Monmouth Chepstow Blaenavon Caerleon Risca	42.2 39.2 35.7 28.5 27.2	(100.0) (40.5) (53.4) — (40.9)
Bedwellty Nantyglo and Blaina Pontypool Abergavenny	59.5 56.1 54.5 43.1	(90.9) (118.8) (46.7) (25.8)	Pontypool Chepstow Abergavenny Monmouth Magor & St. Mellons	71.4 70.8 67.9 43.4 . 43.1	(58.8) (28.1) (53.0) (81.6) (68.9)

CAUSES OF DEATHS UNDER ONE YEAR OF AGE.

CAUSES.	1935	(1934)	(1933)	(1932)
All causes Scarlet Fever Measles Diphtheria Whooping Cough Influenza Cerebro-spinal Fever Meningococcal meningitis Pulmonary Tuberculosis Other Tubercular Diseases Cancer (Malignant disease) Syphilis Bronchitis Pneumonia (all forms) Other Respiratory Diseases Diarrhœa Digestive Diseases Acute and Chronic Nephritis	324 -7 -7 -7 -1 -2 1 -2 1 -3 -43 -2 24 3 -	(321) ————————————————————————————————————	(399) (7) (2) (15) (8) — (6) — (1) (25) (49) (3) (24) (5)	(399) (1) (1) (1) (13) (6) (4) — (2) — (3) (29) (65) (29) (25) (25) (3)
Congenital Debility Violence Other Defined Diseases Causes ill-defined or unknown	179 5 29	(183) (7) (39)	(201) (11) (42) —	(202) (3) (37)

For the purpose of the table of comparative infant mortality rates the figures in respect of the Cwmbran and Magor and St. Mellons Districts for the last nine months of the year, when the amalgamation of areas was in being, have been taken.

The Pontypool Urban District figure includes nine months of the new combined area (Abersychan, Panteg and Pontypool Parishes) and Pontypool Parish for the first three months of the year.

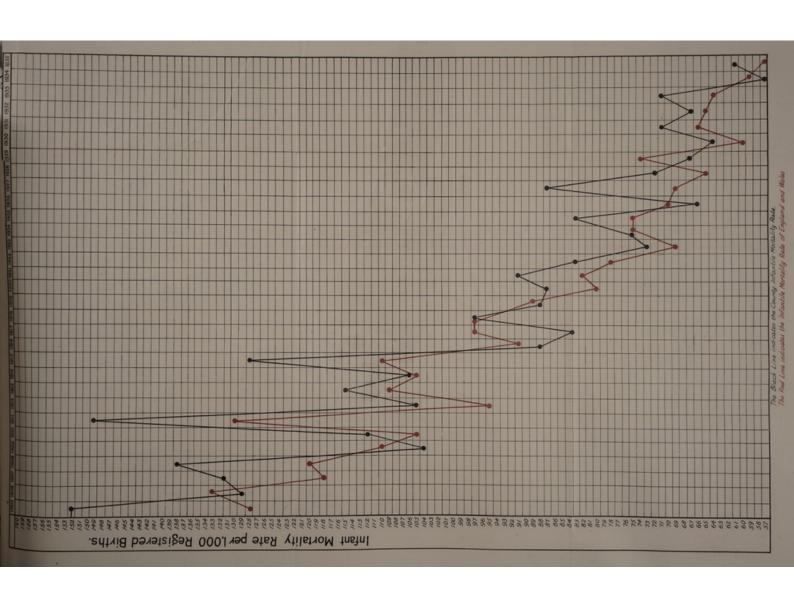
The rates of the old districts for the first three months of the year were:—Abersychan Urban, 86.4; Panteg Urban, 71.4; Llanfrechfa Upper Urban, nil; Llantarnam Urban, 68.9; Magor Rural, 105.2; St. Mellons Rural, 66.6.

The Vital Statistics for England and Wales for the year 1935 compiled by the Registrar-General, are as in the subjoined table. The Monmouthshire figures are given for the purpose of comparison.

manife and	Bi		per 1,000 o	f		h Rate 1,000		s under
	Live Births	Still Births	Live Births	Stirl Births	liv	ing	per 1,00	00 births
	1935	1935	1934	1934	1935	(1934)	1935	(1934)
ENGLAND & WALES	14.7	0.62	(14.8)	(0.62)	11.7	(11.8)	57	59
121 County Boroughs and Great Towns, including London	14.8	0.68	(14.7)	(0.66)	11.8	(11.8)	62	63
140 Smaller Towns (estimated resident populations, 25,000-50,000 at Census, 1931)	14.8	0.64	(15.0)	(0.67)	11.2	(11.3)	55	53
London	13.3	0.52	(13.2)	(0.50)	11.4	(11.9)	58	67
MONMOUTHSHIRE	16.12	0.98	(16.49)	(0.94)	11.5	(11.7)	61	57

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 four weeks of life (183 out of 322 under one year, or 56.8 per cent.) 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. This year's percentage is 3.5 above that of last year.



Rate per 1,000 Registered Births.

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. It is hoped that increasing ante-natal care of the expectant mother will reduce this mortality.

D.-MATERNAL MORTALITY AND ANTE-NATAL CARE.

The number of deaths registered during the year from accidents and diseases of pregnancy and parturition was 36; 13 from puerperal sepsis and 23 from other puerperal causes. This is equal to a rate of 6.8 per 1,000 live births which is 0.6 higher than the figure for last year. Calculated upon total births (live and stillbirths) the figure is 6.4 per 1,000. The rate continues to be considerably higher than the rate for England and Wales, which for the year 1935 was 4.1 per 1,000 live births registered.

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

1935	 6.8	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

The maternal mortality rate remains at the same high figure. It is satisfactory to note however that the attendance at the Ante-natal Clinics has increased. The 16 clinics were visited by 2,109 women (37.2 per cent. of the total number of births—live and still—notified during the year compared with 31.4 per cent. in 1934), who made 5,414 attendances compared with 4,093 in 1934, the average attendance per session being 18.4 compared with 17.2 in 1934 and 13.3 in 1933. This means that 37.2 per cent. compared with 31.4 per cent. in 1934 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 constant inspection and supervision of midwives continue and the inspectors are untiring in their efforts to help midwives to reach a high standard of efficiency in their work.

Notifications of puerperal pyrexia in the practices of midwives are still very numerous and a very large proportion of the maternal deaths follow in Puerperal Septicæmia. Because of this, much of the Inspectors' time is taken up trying to combat this disease and during the year considerable thought and discussion has taken place with a view to finding ways by which we might diminish its incidence.

We still have midwives who do not appreciate sufficiently the value of asepsis or of frequent and regular examination of urine in the case of the expectant woman.

The percentage of maternal deaths during the year from some form of sepsis was 46.2 while for the year 1934 it was 37.5. In 1934 one-third of the deaths from sepsis was the result of miscarriage either natural or induced. In 1935 slightly less than one-quarter of the deaths from sepsis was the result of miscarriage. The cause of death certified in three of the four deaths which resulted from miscarriage during 1935, was Puerperal Septicæmia.

The marked decrease for the year 1935 in deaths from abortion is the only encouraging point in our investigations into maternal mortality and may indicate that women are beginning to realise the very grave risk they run when they attempt to procure abortion either in themselves or in others. In 1933 and in 1934 the deaths following abortion numbered 10 for each year; in 1935 there were only 4 deaths following abortion and none of these were proved to have been deliberately procured.

Toxæmias of pregnancy accounted for 23.1 per cent. of the deaths, while in 1934 the percentage was 30. Accidents of labour, such as ante-partum and post-partum hæmorrhage and cardiac failure accounted for the remaining 30.7 per cent. of maternal deaths. There was one death following obstructed labour, the patient dying subsequently of Septicæmia. She had had no ante-natal treatment at any time.

We feel therefore that no effort should be spared to deal with the prevention of Septicæmia and Toxæmia, which together account for nearly 70 per cent. of our maternal deaths, and suggestions are at present being considered which we hope if put into force will help to solve this problem.

We have sometimes felt in the past that if we could reduce our abortion rate we might reduce our Puerperal Septicæmia rate. Unfortunately, although our abortion rate has been reduced to less than half that of the previous two years, our Puerperal Sepsis rate has increased.

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 held once each month for one whole day. The attendance was slightly below that of the previous year. The new patients numbered 44 compared with 51 in the previous year and the average monthly attendance was 12.8 compared with 13.0 in 1934. As in the previous year about 50 per cent. of the patients attending were primiparae. Five patients who attended were found to be not pregnant and 5 patients were perfectly normal in every way throughout their pregnancy. Two patients were referred to the Venereal Disease Department of the Royal Gwent Hospital but only 1 of them required treatment. One patient in whom it was thought difficulty might arise during confinement was referred to the Obstetric Specialist in Cardiff. He did not consider that such a difficulty would arise and admission to hospital was not advised. She was confined safely at home under her own doctor's care. Two patients who each had previously two stillborn babies had full time living children. Ten patients were suffering from dental caries. All suitable patients were offered dental treatment but only 2 availed themselves of this. Three patients attending this Clinic suffered from under-nourishment, and in addition to these, several necessitous patients received a free supply of milk on medical grounds. Three cases of malpresentation were found. Malnutrition, as distinct from undernourishment due to lack of sufficient food, was present in 4 cases.

BLAINA.—This Clinic is held on alternate Thursdays now. In previous years there was a session only once each month. The number of new patients who attended was 104 compared to 101 in 1934. The average attendance was 17.5 compared with 21.72 in 1934 but as the Clinic is now fortnightly this year's average attendance is not a true comparison. Over 65 per cent. of the patients who attended were primiparae. Three patients who attended were not pregnant and 6 patients were perfectly normal throughout their pregnancies. One patient was referred to the Venereal Disease Department at the Royal Gwent Hospital and received treatment there. As in the previous year the proportion of babies born with congenital deformity was rather high, 2 suffering from Spina Bifida. It was not found necessary to refer any of the patients attending to the Obstetric Specialist. Seven cases of malpresentation were found. Eight patients suffered from under-nourishment. Nine patients suffered from dental caries but only 3 accepted treatment although all suitable patients were offered it. Malnutrition, as distinct from under-nourishment due to lack of sufficient food, was present in 15 cases.

CHEPSTOW.—This Clinic is held once each month but is open for a whole day instead of an afternoon as in previous years. The new patients numbered 63 compared with 50 in 1934 and the average attendance was 13.6 compared with 12 in the previous year. Patients continue to attend this Centre from an adjoining area of Gloucestershire through an arrangement made between the two County Councils. 22 patients from Gloucestershire attended during the year. About 25 per cent. of the patients were primiparae. One patient was found to be not pregnant. Five patients were perfectly normal throughout pregnancy. One patient was referred to the Venereal Disease Department of the Royal Gwent Hospital for treatment. Two cases of malpresentation were found. One patient attending suffered from under-nourishment and that patient was from Gloucestershire. patients had dental caries and 7 accepted treatment for this. It was not found necessary to refer any patient to the Consultant Obstetrician but one patient suffering from severe chorea was referred to her family doctor who admitted her to the local hospital where she remained for several weeks and benefited greatly from her treatment there. Two of the patients who attended during the year had rather an unusual condition—recent amputation of the Coccyx because of fracture due to accident. Malnutrition, as distinct from undernourishment due to lack of food, was found in 5 cases.

EBBW VALE.—This Centre is held fortnightly now for one whole day on alternate Tuesdays. The new patients who attended during the year 1935 number 142 compared with 135 in 1934. The average attendance 24.0 compared with 25.72 in the previous year, a satisfactory increase, the decrease on the average (which is only apparent) is due to the Centre being held fortnightly instead of monthly. The percentage of primiparae attending was exactly 50. Eight patients who attended were not pregnant. Twenty-five patients were quite normal throughout their pregnancies. Four patients suffered from undernourishment. Two patients were referred to the Venereal Disease Department of the Royal Gwent Hospital. One was found to be suffering from gonorrhæa but would not attend the Hospital after first visit. Eleven cases of malpresentation were discovered. Dental caries was present in 24 patients and 6 accepted and received treatment. One patient was referred to the Obstetric Specialist because of marked toxæmia. She was admitted to the Maternity Hospital in Cardiff, treated there for several weeks, sent home much improved, and was safely confined soon after at home. A fairly good proportion of patients who attended this Clinic were confined in Tredegar Maternity Home which is easily accessible from this area. Seven sets of twins were born. Malnutrition, as distinct from undernourishment due to lack of sufficient food, was present in 13 cases.

NEW TREDEGAR.—This Clinic is held once each month and is open all day. There was a considerable increase in the new patients attending from 79 in 1934 to 103 in 1935. The average attendance increased from 12.08 to 18.6. The number of re-visits paid by patients to this Centre is low compared with those paid in other areas. In the other areas the average number of re-visits made by each patient is roughly two, while in New Tredegar it is one. 102 re-visits were made by 103 new patients. About 28 per cent. of patients who attended were primiparae. Ten patients were quite normal throughout their pregnancies. Four patients suffered from under-nourishment. Five patients were not pregnant. Four patients were referred to Royal Gwent Hospital, Venereal Disease Department; 3 received treatment and one refused to attend after first visit. Three cases of malpresentation were found. Two patients were referred to the Obstetric Specialist; one was examined by him and advised that there was no need for hospital treatment; the other did not keep appointment made for her. Dental caries was found in 28 patients. Seven kept their appointments and had the carious teeth extracted. Malnutrition, as distinct from under-nourishment due to lack of sufficient food, was present in 11 cases.

PENGAM.—This Centre is held one day each month. There were 102 new patients during the year compared with 99 in the previous year and the average attendance was 21.1 compared with 15.2. The primiparae numbered roughly 27 per cent. of the total. Seven patients who were not pregnant attended. Ten patients were perfectly normal throughout pregnancy. One patient suffered from under-nourishment. Three patients were referred to the Venereal Disease Clinic at the Royal Gwent Hospital; one who had had several previous stillbirths did not keep the appointment and had another stillbirth; another did not require treatment after examination at the Hospital, and the third received treatment. Two cases of malpresentation were found. Dental caries was present in the case of 31 patients and 9 patients had the carious teeth extracted. Two patients were referred to the Consulting Obstetrician who advised admission to the Maternity Hospital, Cardiff, for confinement, and both had living and full time children. Malnutrition, as distinct from under-nourishment due to lack of food, was present in 10 cases.

PONTYPOOL.—This Clinic is now held on alternate Tuesdays and is open for one whole day each time. 199 new patients attended during the year and the average attendance was 29.7. In the previous year the new patients numbered 136 and the average attendance 28.9. So that although in 1935 the Clinic was held fortnightly, the average fortnightly attendance exceeded that of the monthly clinic, that is the numbers attending were almost doubled for 1935. The percentage of primiparae attending was satisfactory, namely 39 per cent. Seven patients who were not pregnant attended. Ten patients were perfectly normal and healthy throughout the pregnancies. Five patients suffered from undernourishment. Three patients with suspected Venereal Disease were referred to the Special Department of the Royal Gwent Hospital for further observation. Five cases of malpresentation were discovered. The incidence of dental caries was high, 42 of the patients suffering from this. Treatment was offered to all suitable cases but only 6 accepted and had the carious teeth removed. One patient was referred to the Obstetric Specialist but it was found that admission to hospital was not necessary. Two patients were admitted to Tredegar Maternity Home for their confinements because of unsuitable home conditions, the cost being met by the Monmouthshire County Council. Malnutrition, as distinct from undernourishment due to lack of sufficient food, was present in 14 cases.

TREDEGAR.—This Centre is held one half-day each week. The number of new patients was 261 and the average attendance 15.5 compared with 186 new patients in 1934 and an average attendance of 13.0. Approximately 38 per cent. of patients attending were primiparae. Seven patients attended who were not pregnant. Twenty-five patients were perfectly normal throughout pregnancy. Three patients suffered from under-nourishment. Two patients were referred to the Venereal Department, Royal Gwent Hospital; received treatment; the other, who had been sent to the Ante-natal Clinic because her doctor suspected Venereal Disease, refused to attend the Hospital and had a stillborn child. Nineteen cases of malpresentation were found. Forty-three patients suffered from dental caries but only 7 accepted and received treatment. One patient attended the Clinic who had a dead foetus. She was referred to her family doctor and was confined safely a few days later. Four patients were referred to the Consultant Obstetrician. Two of these were suffering from toxamia and had induction of labour soon after admission to the Maternity Hospital, Cardiff, as the condition of both was grave. The third had Cæsarean Section operation in Cardiff Maternity Hospital because of an extreme degree of flat pelvis and both mother and child are alive and well. The fourth had a severe attack of chorea. She remained in Hospital for many weeks and made great improvement. Shortly before confinement she was re-admitted and confined safely in Hospital. One patient had Cæsarean Section operation performed in the local General Hospital because of contracted pelvis and malpresentation. Several patients about whom there was some doubt about presentation, etc., were referred to their own doctors and X-Rayed in the local General Hospital. Many of the patients who attended this Clinic were confined in the Tredegar Maternity Home, several at the expense of the Monmouthshire County Council because of unsuitable home conditions. Malnutrition, as distinct from under-nourishment due to lack of sufficient food, was present in 17 cases.

GENERAL.—The chief ailments associated with pregnancy from which the patients attending these clinics suffered were, constipation, from which roughly 56 per cent. of the patients suffered; Toxæmia, which manifests itself chiefly in albuminuria, ædema, digestive disturbance, and high blood pressure was present in nearly 36 per cent. of these patients; anæmia was present in 17 per cent. of the patients, and dental caries of varying degrees of severity in 20 per cent. It is interesting to note that last year the percentage of patients found suffering from toxemia was 39.3 per cent., so that there is apparently a slight diminution in the incidence of this disease. It is also interesting to note that this incidence varies greatly in the different areas from 16 per cent, in the Chepstow area to 39 per cent. in the Tredegar area. Why there should be this very marked difference it is difficult to understand but each year since these clinics were started the rate of toxæmia in Tredegar has been consistently high. Toxæmia of pregnancy is one of the chief causes of premature births and of stillbirths. Dental caries and pyorrhea, especially of the severer types, are often associated with toxemia and are no doubt frequently a cause of this condition and of anæmia. Time and again we see the typical picture of the multipara suffering from dental caries, anæmia and toxæmia. As an example I might take the case of a patient who has attended Tredegar Ante-natal Clinic throughout four pregnancies. During her first pregnancy her general health was satisfactory but she had some dental caries. During her second pregnancy her general condition is reported as "fairly good" and there were signs of toxamia. During her third pregnancy her condition was reported "poor," dental caries had increased, and there was albuminuria. During her fourth pregnancy dental caries and pyorrhoa were severe, there was marked albuminuria and other signs of toxamia and she is reported "debilitated and anamic." Throughout all her pregnancies this patient, like many others, would not avail herself of the dental treatment offered her. Dental treatment by the County dentists is offered to all suitable patients who have not passed the 28th to 30th week of pregnancy but only a small proportion avail themselves of the offer. A fair proportion also of those who make application for extractions fail to keep their dental appointments. Of the 1,018 new patients who attended those clinics, 13 were found to be suffering from one of the graver forms of heart disease. All thirteen gave a history of scarlet fever, chorea, or rheumatism in childhood. Only 9.3 per cent, of all the women who attended those clinics were perfectly healthy and normal throughout their pregnancies. The standard set for this was high, and no woman who suffered the most minor ailment was allowed into this group. The midwives of most of these districts have again been very helpful throughout the year and have done much to encourage the patients to attend. Much of the success of an ante-natal clinic also depends on the Health Visitor who should keep in constant touch with the mothers throughout their pregnancies and should visit them when they fail to attend. Each year, in most of these areas, the patients are now attending later in pregnancy and our aim is to see all of them where possible within three weeks of their confinements. A report on the patient's condition at her last visit to the clinic is made to her midwife in all cases.

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

NEWPORT.—During the year under review this Clinic was held on alternate Fridays (morning and afternoon sessions) and served a wide area. 202 new cases attended, 337 re-visits were paid, giving an average attendance per session of 25.6. It is gratifying to note an increase of total re-visits over last year, showing that patients are being trained to appreciate the need for regular supervision at the Clinic. Of the cases attending for the first time 47 per cent, were primiparae; 138 were referred to the Clinic by midwives, 8 came through the recommendation of their own doctors, 10 came of their own accord, and the remainder were sent from the Infant Welfare Centres of the County. It will be seen that by far the greatest proportion of patients attending came through the midwife—there is no doubt that in most cases, especially primiparae, the midwife is the controlling factor as to whether ante-natal visits are paid. On the whole, the mothers who attended were very fit. Eight per cent., mostly multiparae, showed subnormal nutrition, and were helped with milk, mostly in dry form, which improved their general health considerably. Two cases of definite malnutrition attended. Heartburn and constipation were the chief ailments, while anæmia and varicose veins accounted for debility among a great many. 13 dental appointments were made and greatly improved the general health of those who had them. Four cases of rheumatic heart disease attended—2 had normal confinements at home, having attended to rest and diet during the ante-natal period, 1 with slightly failing compensation was admitted to Glossop Terrace Maternity Home and did well after being delivered of a live child, while 1 had a "dry" labour at home with a stillbirth resulting. 13 had a raised blood-pressure of 140 (systolic) or over, but with attention to rest and diet. 10 were delivered successfully of living children, while of the remaining 3, 1 whose blood-pressure remained consistently at 146/90 with no albuminuria had a stillbirth; 1 who developed albumin in the urine and latterly could not attend the Clinic owing to cedema of leg and was unwilling to enter Glossop Terrace Maternity Home for confinement had a stillbirth at home; while the third patient with a raised pressure of 180-200/120 and albuminuria was delivered of living twins in Glossop Terrace Maternity Home but unfortunately died of cortical necrosis of the kidneys. One patient with a history of

1	t n	
ı	93	
	INICS	
	\sim	
3	7	
	4	
	_	
	CL	
	_	
	_	
	()	
	-	
	-	
	AL	
	-	
	-4	
	1	
	_	
	< ;	
	_	
	7.	
	_	
	fr)	
	_	
	_	
	_	
	-	
	Z	
	Z	
	AN	
	ANTE-NAT	
	AN	
	AN	
	200	
	200	
	200	
	200	
	OF AN	
	200	
	200	
	OF	
	200	
	OF	

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- Vuite	Total	Average Attendance at each Session
Abergavenny	1	us,	4th Tuesday in month,		Dr. A. S. Monro	Nurse	Abergavenny Urban	53	43	72	7.2
Abersychan	:	Neville Street Congregational Schoolroom	9.30 to 11.30 a.m. 4th Wednesday in month, 2 to 4 p.m.		Dr. P. R. Whitaker	Nurse L. Howell	and Rural Areas Abersychan, Varteg and Garndiffaith	37	30	29	8.3
Abertillery	:	59 Tillery Street	Alternate Tuesdays— 10 a.m. to 4 p.m.	July. 19th	Dr. P. R. Whitaker	Nurse D. Beacham	Abertillery, Six Bells, Aberbeeg & Llanhilleth	307	521	828	36.0
Blaenavon	:	The Hospital	4th Friday in month, 10.30 a.m.to 12.30 p.m.	July.	Dr. Mary Scott	Nurse C. M. Phillips	Blaenavon Urban District	44	7.5	116	12.8
Blaina	:	Church Institute	Alternate Thursdays 9.30 a.m. to 12.30 p.m.	1929 Nov., 12th	Dr. Mary Scott	Nurse C. Davies	Nantyglo and Blaina	104	211	315	17.5
Chepstow	:	e î	1st Friday in month,	Dec.	Dr. Mary Scott	Nurse K. Webb	Chepstow Urban and	23	101	164	13.6
Crumlin	:	The Clinic, Hafodyrynys Rd.	Alternate Fridays, 10 a.m. to 12 noon.	Nov., 1st	Dr. Philomene Whitaker	Nurse K. M. Walters	Llanhilleth, Crumlin, Hafodyrynys, Newbridge Aberearn	596	437	733	15.9
Ebbw Vale	:	James Street Wesleyan Chapel	Alternate Tuesdays—9.30 a.m. to 4 p.m.	Nov., 19th	Dr. Mary Scott	Nurse M. Redwood	and Cwmcarn Ebbw Vale Beaufort, Victoria, Waunllwyd	142	566	408	24.0
Monmouth	:	Working Men's Institute, Monk St.	1st Friday in month, 10 a.m. to 12 p.m.	Dec., 6th	Dr. Evelyn D.	Nurse A. Stephen	and Cwm Monmouth Urban and Rural Areas	39	84	123	10.2
Newport	i mana	School Clinic, Stanley Road, Gold Tops	Alternate Fridays, 10 a.m. to 12.30 p.m. 1.30 to 3,30 p.m.	Dec.,	Dr. Mary Gordon	Nurse	Machen, Rhiwderin, Rogerstone, Bassaleg, Ynysddu, Cwmfelinfach, Cross Keys, Risca, Pontnewydd, Cwmbran, Callaigh	202	337	539	25.6
							Magor Rural Area, Rumney and St. Mellons Rural		elistelle di chie	YII	
New Tredegar	:	Wesleyan Methodist Schoolroom	3rd Friday in month, 9.30 a.m. to 12.30 p.m.	Nov., 15th	Dr. Mary Scott	Nurse F. Williams	Area New Tredegar, Cwmsyfiog and	103	102	202	18.6
Oakdale	1	Women's Institute	Alternate Tuesdays—	Oct.,	Dr. Philomene	Nurse G. M.	Aberbargoed Oakdale, Blackwood	143	146	289	13.1
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.,	Dr. Mary Scott	Nurse M. B.	Cefn Forest, Pengam, Maesycwmmer, Bedwas and	102	131	233	21.1
Pontypool	:	Tabernacle Schoolroom, Crane Street	Alternate Tuesdays—10 a.m. to 4 p.m.	Nov., 26th	Dr. Mary Scott	Narse E. A. Morgan	Pontypool, Pontnew- ynydd, Pontymoile, Panteg and	199	336	535	29.7
Rhymney	:	Domestic Arts Centre, Middle Rhymney	1st Tuesdav in month, 10 a.m. to 12 noon	Dec.	Dr. Evelyn D.	Nurse W. Jones	Griffithstown Rhymney and Abertysswg	28	15	68	8.09
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, Troedrhiwgwair, Hollybush, Markham	261	437	809	15.5
							Totals	2109	3305	5414	18.4

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. S. Monro
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
Abersyohan	•••	Abersychan	Congregational School- room, 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	Ainon Baptist Chapel, Abertysswg	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.	Dr. F. M. Fonseca
						78 3 18
Blackwood		Blackwood, Pontllan- fraith and Argoed	Parish Hall, Blackwood	1917 April 20th	Monday, 10-30 a.m.— 12-30 p.m. and 2—4	Dr. A. S. M. Dewar
Blaenavon		Blaenavon	Workmen's Surgery, Blaenavon	June 6th	Wednesday, 2—4 p.m.	Dr. B. O. MacQuillan
Blaina		Blaina	Church Institute, Blaina	April 17th	Friday, 10 a.m.—4 p.m.	Dr. W. Panes
Caerleon		Caerleon and Christ- church	Tan House, Mill Street, Caerleon	Nov. 21st	Alternate Wednesdays, 2—4 p.m.	Dr. M. Gordon
Caldloot		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 moon, 2—4 p.m.	Dr. J. J. O'Reilly
Crosskeys		Crosskeys, Wattsville and Pontywaum	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, Llanfrechfa & Ponthir	Wesley Schoolroom, Cwmbran	March 21st	Thursday, 10 a.m.—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
Garndiffalth		Varteg, Victoria, Cwm- avon & Garndiffaith	Calvinistic Methodist Schoolroom, Garn- diffaith	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

		I was to see the second	often bearing bearing			
Location of Centre.		District Served.	Premises Utilised	Date of Opening.	Days and Hours of Consultations	Medical Officer.
Markham VIIIa	ige	Markham	46 Abernant Road, Markham	1933 Feb. 15th	Wednesday, 2—4 p.m.	Dr. A. S. Monro
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
Nantygio		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'Ĥtordan
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 29tb	Monday, 10—12 noon and 2—4 p.m.	Dr. W. B. Owen
Oakdale		Oakdale, Rhiw-syr- dafydd and Mark- ham Village	Women's Institute, Oakdale	1918 Oct. 25th	Alternate Thursdays, 10 a.m.—4 p.m.	Dr. M. Scott
Panteg		Panteg, Griffithstown and Pontrhydyrun	Baptist Chapel, Griffithstown	1917 March 21st	Thursday, 10—12 noon	Dr. B. O. MacQuillan
Pengam		Pengam, Fleur-de-lis and Maesycwmmer	Vine House, High Street, Pengam	March 12th	Thursday, 10-30—12-30 and 1-30—3-30 p.m.	Dr. M. Jones
Pontnewynydd		Pontnewynydd	Wesleyan Chapel, Pontnewynydd	April 19th	Thursday, 11 a.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, Goytrey, Coedypaen, Llangibby	Tabernacle Schoolroom, Crane Street, Ponty- pool		Wednesday, 10—12 noon and 2—4 p.m.	Dr. E. D. Owen
Rhymney		Rhymney and Rhymney Bridge	Domestic Arts Centre, Middle Rhymney School		Tuesday, 2—4 p.m.	Dr. R. V. de A. Redwood
Risca		Risca	Domestic Arts Centre, Danygraig School, Risca		Friday, 10—12 noon and 2—4 p.m.	Dr. A. S. Monro
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, Har- court St., Tredegar	1917 Feb. 26th	Tuesday, 11 a.m.— 1 p.m.	Dr. E. T. H. Davies
Trethomas		Trethomas, Bedwas, and Machen	Baptist Chapel, Trethomas	April 19th	Monday, 10-30—12-30 and 1-30—3-30 p.m.	Dr. Mary Scott
Upper Pontnewydd		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. P. R. Whitaker
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.

Control Cont	The color of the			S.F.	No. of Infants				INFANTS	TS				NURSII	NURSING MOTHERS		EXPECT	EXPECTANT MOTHER	THERS
Dr. A. Roberts	Dr. A. Roberts		MEDICAL OFFICER	Reg		New Case	-	Re-vis	its	Tot	Tes.	-	Average Attend-				-	-	
Dr. A. Roberts Dr. M. Griffich Dr. A. S. Verrity Dr. M. Societ Dr. A. M. Dewer Dr. A.	Dr. A. Roberts Dr. A. Roberts 289 102 15 154.3 568 1645 583 2228 46.41 108 217 17 108 118 1 154.3 568 1645 583 2228 46.41 108 217 10 10 2 1 2 1 </th <th></th> <th></th> <th>200</th> <th></th> <th>-</th> <th></th> <th>Year</th> <th>-</th> <th>Under I Year</th> <th>1-5 Years</th> <th>Grand</th> <th>ance at each Session</th> <th>Cases</th> <th>Visits</th> <th>Total</th> <th>Cares</th> <th>Vinits</th> <th>Total</th>			200		-		Year	-	Under I Year	1-5 Years	Grand	ance at each Session	Cases	Visits	Total	Cares	Vinits	Total
Dr. G. W. Garriffeld Dr. G. W. Garriffeld Dr. M. Scott	Dr. B. M. Grifffith Dr. G. W. Parrist Dr. R. J. S. Verity Dr. M. Grifffith Dr. G. St. S. Verity Dr. M. South Dr. M. Branes Dr. M. Branes Dr. M. Branes Dr. M. Drewn Dr. M. Branes Dr. M. Grodon Dr. M. South Dr. M. Grodon Dr. M. Grodon Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon Dr. M. M. Drewn Dr. M. Grodon D	:	A. Roberts			100	_	1543	568	1645	583	2228	46.41	108	219	327	17	00	25
Dr. G. W. Farry Dr. G. W. South Dr. M. Dr. M. South Dr. M. South Dr. M. South Dr. M. South Dr. M. Dr. M. South Dr. M. Dr. M. South Dr. M. Dr.	Dr. G. W. Farry, 1772 67 19 500 349 1188 567 1755 36.5 2 1 5 18 18 18 18 18 18 18 18 18 18 18 18 18	:	E. M. Griffith		_	18	_	9213	1069	2294	1070	3364	74.75	9	1	9	2	1	00
Dr. H. Scott Smith 516 5 5 10 5 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dr. R. Scott Smith Scott St. St. St. St. St. St. St. St. St. S		G. W. Parry		_	146	_	1042	529	1188	299	1755	36.56	-	1	1	20	00	13
Pr. R. Smith	Dr. N. South	:	R. J. S. Verity			67	_	591	344	658	363	1051	21.27	25	14	46	21	1	20
Dr. M. Scott by Scott	Dr. M. Scott M. Sc		T. B. Smith			346		2033	1173	2279	1198	3477	72.43	1	1	1	I	1	1
Dr. A. W. Boort, Dr. A. W. Devert September Se	Dr. A. W. Boorg, 187 04 124 1245 104 105 105 105 105 105 105 105 105 105 105	:	M. Scott		83	36		571	500	209	217	824	17.16	16	14	98	1	71	27
Dr. A. W. Deware Section 100 1655 1025 1000 1053 1050 2540 45 55 11 100 1050 274 150.55 41 175 114 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Dr. A. M. Dewar See 100 55 1025 7001 1055 1056 2741 55.53 8 127 114 10 6 5 1025 70 10 1055 1050 1050 10 10 10 10 10 10 10 10 10 10 10 10 10	:	M.	-	_	61		929	384	717	396	1113	23.18	17	56	43	Ī	-	1
Dr. V. Pensends Dr. W. Pansends Dr. W. Pansends Dr. W. Pansends Dr. P. Whitaker Dr. R. J. Repared 195 54 13 570 1325 215 56 51.38 35 131 116 4 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dr. W. Pennsel 285 113 570 1325 770 132 770 570	-:-	A.	38		091	_	525	1001	1685	1056	2741	59.58	41	73	114	16	9	55
Dr. W. Pinness 286 99 34 19671 876 175 85 25 95 18 <td>Dr. W. Pinness Dr. W. Whiteker Dr. W. Whiteker Dr. M. Gordon Dr. W. Whiteker Dr. M. Deware Dr. A. Deware Dr. A. M. Deware Dr. A. M. Deware Dr. A. M. Deware Dr</td> <td>:</td> <td>J. Reynolds</td> <td></td> <td>_</td> <td>113</td> <td>_</td> <td>1215</td> <td>602</td> <td>1328</td> <td>718</td> <td>2046</td> <td>42.62</td> <td>3</td> <td>25</td> <td>28</td> <td>5</td> <td>-</td> <td>C7</td>	Dr. W. Pinness Dr. W. Whiteker Dr. W. Whiteker Dr. M. Gordon Dr. W. Whiteker Dr. M. Deware Dr. A. Deware Dr. A. M. Deware Dr. A. M. Deware Dr. A. M. Deware Dr	:	J. Reynolds		_	113	_	1215	602	1328	718	2046	42.62	3	25	28	5	-	C7
Dr. P. Whitaker 99 34 99 35,5 118 4 2 Dr. M. Gordon 143 54 18 78,1 198 35,5 108 35,6 118 91 118 35,6 118 116 8 18 <td>Dr. P. Whitaker 19 34 38 19 35 198 35 198 35 198 35 118 4 2 Dr. M. Cordon 10 54 13 907 1910 961 1923 1184 656 31 907 1910 961 1923 1184 656 31 32 1 907 1910 961 1923 1848 656 1910 961 1910 961 1910 961 1910 961 1910 961 1910 961 1960 38 1910 1910 961 1910 961 1910 961 1960 1910 961 1910 961 1960 1910 961 1960 19</td> <td>-</td> <td>W. Panes</td> <td></td> <td></td> <td>66</td> <td></td> <td>1671</td> <td>876</td> <td>1770</td> <td>880</td> <td>9650</td> <td>55.20</td> <td>39</td> <td>133</td> <td>172</td> <td>1</td> <td>-</td> <td>1</td>	Dr. P. Whitaker 19 34 38 19 35 198 35 198 35 198 35 118 4 2 Dr. M. Cordon 10 54 13 907 1910 961 1923 1184 656 31 907 1910 961 1923 1184 656 31 32 1 907 1910 961 1923 1848 656 1910 961 1910 961 1910 961 1910 961 1910 961 1910 961 1960 38 1910 1910 961 1910 961 1910 961 1960 1910 961 1910 961 1960 1910 961 1960 19	-	W. Panes			66		1671	876	1770	880	9650	55.20	39	133	172	1	-	1
Dr. M. Gordon 143 54 28 781 1066 855 1062 1089 40.16 36 124 100 8 135	Dr. M. Gordon 143 54 28 781 1065 855 1062 1089 40.16 36 124 160 8 135	100.00	D Whitebor		000	24	_	000	100	954	606	5556	91 98	200	25	116	A	6	RR
Dr. A. M. Dewper 155 54 128 977 1210 S55 1122 1150 113 1 115 1 1	Dr. T., Urbapers 155 54 125 57 1210 551 135 155 155 155 155 155 155 155 155	:	M Conden	-	000	400		050	1100	1000	1000	0000	40.10	000	101	100	10	101	36
Dr. A. M. Drapes 195 14 13 307 1210 150 150 150 150 150 150 150 150 150 1	Dr. A. M. Drapes 19 34 13 90 120 90 125 218 71 248 101 6 87 188 101 6 87 188 101 6 189 484 100 500 185 72 286 189 188 101 6 289 484 100 500 185 32 289 484 100 500 185 32 289 484 100 500 185 32 185 32 <th< td=""><td></td><td>m. Gordon</td><td></td><td>200</td><td>100</td><td></td><td>100</td><td>COOL</td><td>000</td><td>1000</td><td>1920</td><td>40.10</td><td>90</td><td>124</td><td>TOOT</td><td>0</td><td>l or</td><td>17</td></th<>		m. Gordon		200	100		100	COOL	000	1000	1920	40.10	90	124	TOOT	0	l or	17
Dr. A. M. Diverset 192 562 937 138 989 1127 347 28 7 138 148 178 188 189 189 187	Dr. A. M. Downer 187 26 289 418 989 1183 1183 124 28 77 284 783 1187 1187 34 28 77 289 66 28 Dr. P. R. Panes 226 105 8 11286 6478 1881 1885 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 28 187 187 28 187 18	:	I. L. Drapes		CG CG	54	_	200	1210	201	1223	2184	45.50	18	11	18	1	1	19
Dr. P. R. Whitaker 198 101 6 889 494 1000 500 1500 1500 31.25 32 135 135 14 ————————————————————————————————————	Dr. P. R. Whitaker 198 101 6 889 494 1000 500 1500 1500 31.25 32 135 494 160 160 160 170 P. R. Whitaker 198 101 6 889 494 1000 500 1125 6 160 160 170 181 87 38.56 101 11 4 405 7 6 7 7 7 7 7 7 7 7 7 7 181 8 10 1 7 6 7 7 7 7 181 7 9 7 7 8 7 11 11 10 10 10	::	A. M. Dewar		35	55	-	937	138	686	138	1127	23.47	58	7.1	66	9	21	00
Dr. W. Panes 226 478 1891 486 1877 38 - 4 7 7 0 Dr. F. F. Fouseea 478 1926 478 1891 486 1877 38 - 40 1	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$:	P. R.	15		101	_	668	494	1000	200	1500	31.25	55	152	204	Î	1	1
Dr. P. R. Whitaker 198 619 1851 1855 101 304 405 7 6 Dr. R. J. S. Verriye 140 218 22 2268 717 2180 728 718 182 71 182 71 182 70 182 71 218 20 70 182 70 182 71 182 70 182 71 21 70 182 70 <	Dr. P. R. Whitaker 153 82 4 1126 619 185 61 314 405 7 6 Dr. R. J. S. Verity 136 49 2 22698 549 26 549 26 549 26 549 26 549 26 549 26 549 26 4 7		W. Panes			102	_	1286	478	1391	486	1877	39.10	11	13	24	1	-	1
Dr. F. Fonseca 403 218 226 717 2180 739 6718 3 4 7 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 4 3 3 4 4 4 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 <th< td=""><td>$\begin{array}{cccccccccccccccccccccccccccccccccccc$</td><td></td><td>P R Whitnker</td><td></td><td></td><td>68</td><td></td><td>9611</td><td>689</td><td>19061</td><td>643</td><td>1851</td><td>38.56</td><td>101</td><td>304</td><td>405</td><td>1</td><td>9</td><td>13</td></th<>	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$		P R Whitnker			68		9611	689	19061	643	1851	38.56	101	304	405	1	9	13
Dr. R. J. S. Verity 136 416 42 420 549 563 812 1651 26 29 55 7 1 Dr. T. B. Smith 389 102 7 1212 772 134 709 220 642 276 178 298 106 176 29 642 276 178 298 106 271 270 171 171 171 171 171 172 280 106 276 178 280 106 176 270 171 171 171 171 172 280 186 276 178 387 188 188 188 176 177 171 171 171 172 170 188 187 188	Dr. R. J. S. Verity 136 4.9 4.6 5.9 5.6 7.7 1.1 2.0 5.0 5.9 5.9 5.5 7.7 1.0 1.0 2.2 1.0 1.0 1.0 2.2 6.0 1.1 2.0 5.0 7.0 5.0		F Fonsoon	-	9-20	310		0966	212	9016	200	9005	67 10	200	7	1	0 0	,	
Dr. T. B. Smitch 359 102 7 1212 702 344 700 2023 4214 2 2 34 702 342 421 702 342 402 7 1212 702 344 700 2023 4214 2 2 3 4 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 <td>Dr. M. Scordon B. S. Werthy 139 7 1200 7 1200 120 175 250 16 175 250 6 17 23 42.14 20 2 50 114 750 116 175 25.00 6 17 23 3 1 2 2 2 3 3 1 2 2 2 1 2 2 3 1 3 1 2 2 2 3 1 2 2 3 1 2 2 3 1 2 2 3 1 2 2 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3</td> <td>:</td> <td>D I C Vomiter</td> <td></td> <td></td> <td>070</td> <td>-</td> <td>000</td> <td>020</td> <td>0000</td> <td>000</td> <td>010</td> <td>16 91</td> <td>96</td> <td>00</td> <td>10</td> <td></td> <td>-</td> <td>0</td>	Dr. M. Scordon B. S. Werthy 139 7 1200 7 1200 120 175 250 16 175 250 6 17 23 42.14 20 2 50 114 750 116 175 25.00 6 17 23 3 1 2 2 2 3 3 1 2 2 2 1 2 2 3 1 3 1 2 2 2 3 1 2 2 3 1 2 2 3 1 2 2 3 1 2 2 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3	:	D I C Vomiter			070	-	000	020	0000	000	010	16 91	96	00	10		-	0
Dr. M. Sommton Say 102 1712 1713 1714 1715 25.00 6 17 23 21 23 27 1715 25.00 6 17 23 21 3 27 1715 1716 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 1716 270 270 1716 270 </td <td>Dr. M. Rockets 192 171 171 171 171 171 171 171 171 171 171 171 171 171 172 171 172 171 172 171 172 171 172 172 171 172</td> <td>:</td> <td>46</td> <td>70</td> <td></td> <td>200</td> <td>_</td> <td>000</td> <td>202</td> <td>250</td> <td>200</td> <td>210</td> <td>10.91</td> <td>207</td> <td>23</td> <td>20</td> <td></td> <td>10</td> <td>0 =</td>	Dr. M. Rockets 192 171 171 171 171 171 171 171 171 171 171 171 171 171 172 171 172 171 172 171 172 171 172 172 171 172	:	46	70		200	_	000	202	250	200	210	10.91	207	23	20		10	0 =
Dr. Al. Gordon Dr. Al. Gordon Dr. Al. Gordon Br. Al. Gordon Dr. Al. Gordon Br. Al.	Dr. M. Gordon Dr. M. Gordon P. S. S. 640 714 730 116 730 116 730 116 230 416 250 117 250 117 250 118 278 116 250 128 154 379 1642 387 203 41.61 2 3 3 3 4 3 3 4 3 4 3 4 3 4 4 2 3 4 4 2 3 4 4 2 3 4 4 2 <th< td=""><td></td><td>1. D.</td><td>6</td><td></td><td>102</td><td>_</td><td>212</td><td>702</td><td>1514</td><td>807</td><td>2023</td><td>42.14</td><td>15</td><td>13</td><td>100</td><td>70</td><td>00</td><td>3 3</td></th<>		1. D.	6		102	_	212	702	1514	807	2023	42.14	15	13	100	70	00	3 3
Dr. A. Roberts 182 76 22 642 276 718 379 1642 376 718 379 1642 376 171 1 174 171 171 172 171 171 172 171 172 171 172 173 173 176 176 176 177 177 171 177 176 176 176 176 176 176 176 176 176 176 176 176 176 176 176 177 177 177 177 177 177 177 177 177 178 176 178 <t< td=""><td>Dr. A. Roberts 18.2 76 22. 64.2 776 718 20.8 11.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 2726 1032 307 1044 35.73 37 13 12 2726 1042 307 1044 35.73 37 176 17 38 156 16 27 104 350 18.23 35 156 176 17 36 18.73 37 37 37 37 37 37 37 37 37 37 37 37 37 37 37 38 36 36 36 36 36 37<</td><td>:</td><td>M. Gordon</td><td>-</td><td>11</td><td>6</td><td></td><td>00</td><td>114</td><td>60</td><td>110</td><td>C/I</td><td>29.00</td><td>0</td><td>I</td><td>73</td><td>71</td><td>0,</td><td>00</td></t<>	Dr. A. Roberts 18.2 76 22. 64.2 776 718 20.8 11.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 2726 1032 307 1044 35.73 37 13 12 2726 1042 307 1044 35.73 37 176 17 38 156 16 27 104 350 18.23 35 156 176 17 36 18.73 37 37 37 37 37 37 37 37 37 37 37 37 37 37 37 38 36 36 36 36 36 37<	:	M. Gordon	-	11	6		00	114	60	110	C/I	29.00	0	I	73	71	0,	00
Dr. W. Panes 252 98 12 100 540 1092 559 1034 41.61 2 2 2 2 2 2 2 2 2	Dr. W. Hassel 252 98 18 1544 379 1692 552 1684 377 2083 41.61 2 2 2 2 2 2 2 2 2 2 1010 540 1692 552 1684 357 37 39 178 45 46 45 45 45 45 45 45 46 46 46 47 <		A.		25	16		642	276	718	2882	1016	21.16	21	00	10	1	-	.7
Dr. W. Panes 308 82 12 1010 540 1024 357.73 37 139 176 — Dr. W. Panes 307 17 11 2726 1013 280 15.23 39 18 15 14 3 176 —	Dr. W. Panes 208 82 12 100 540 1054 357 1644 357 37 176 — — Dr. M. Gordon 43 177 171 171 172 189 175 181 176 — — Dr. W. B. Owen 43 192 125 494 1847 517 2864 567 181 46.0.29 83 44 127 4 —	::	W. H. Williams		55	- 86		1544	379	1642	397	2039	41.61	1	22	23	1	1	1
Dr. T. M. O'Riordan 307 171 11 2726 1013 2897 1924 3921 81.68 155 613 14 3 Dr. W. Gordon 43 394 15 280 265 319 280 559 19.32 33 44 18.7 344 50.29 83 44 18.7 450 18.32 45 18.7 450 18.32 44 18.7 46 50.29 83 44 18.7 42 57 82 52 52 18.2 42 18.7 346 52 56 421 744 17.7 37.4 42 74 17.7 44 76 42 57 18.9 56 58 42 17.2 74 17.7 44 17.7 44 17.7 44 17.7 44 17.7 44 18.7 44 17.7 44 17.7 44 18.7 44 17.7 44 17.7 44	Dr. T. M. O'Riordan 307 171 11 2726 103 2897 1024 3821 81.68 455 613 14 3 Dr. W. Gordon 43 39 15 280 265 319 580 599 593 44 127 2 4 94 137 450 596 491 137 450 597 899 132 2 4 4	-:-	W. Panes		180	85		10101	540	1092	552	1644	.35.73	37	139	176	1	1	1
Dr. M. Gördon 43 39 15 280 265 319 280 599 19.32 33 99 132 2 Dr. W. B. Owen 304 122 23 1725 494 1847 517 284 50.29 83 44 127 4 — Dr. P. Whitaker 203 81 5 953 739 1034 744 1778 34.4 127 4 — Dr. P. Whitaker 203 81 5 953 746 1721 769 2490 51.87 142 946 188 5 3 6 9 3 6 9 3 6 9 188 9 188 9 188 9 188 9 18 3 9 18 9 18 3 9 18 9 18 9 18 9 18 9 18 9 18 9 18 9 <td< td=""><td>Dr. M. Gordon 43 39 15 280 265 319 280 599 19.32 33 99 132 2 Dr. W. B. Owen 304 122 23 1725 494 1847 517 2849 60.23 83 44 127 4 — Dr. P. Whitaker 203 86 429 665 421 734 778 37.04 95 260 35.5 4 132 27 109 20.20 83 44 127 4 — 95 36 665 429 1181 45.42 57.04 95 260 36 96 48 74 178 37.04 95 290 188 86 290 188 89 29 56 29 66 734 77 109 29 18 39 99 132 30 99 132 4 3 4 4 4 4 4 <t< td=""><td></td><td>T M O'Riordon</td><td></td><td>14</td><td>1 12</td><td>_</td><td>1 9626</td><td>1013</td><td>2086</td><td>1094</td><td>1668</td><td>81 68</td><td>158</td><td>455</td><td>613</td><td>14</td><td>65</td><td>17</td></t<></td></td<>	Dr. M. Gordon 43 39 15 280 265 319 280 599 19.32 33 99 132 2 Dr. W. B. Owen 304 122 23 1725 494 1847 517 2849 60.23 83 44 127 4 — Dr. P. Whitaker 203 86 429 665 421 734 778 37.04 95 260 35.5 4 132 27 109 20.20 83 44 127 4 — 95 36 665 429 1181 45.42 57.04 95 260 36 96 48 74 178 37.04 95 290 188 86 290 188 89 29 56 29 66 734 77 109 29 18 39 99 132 30 99 132 4 3 4 4 4 4 4 <t< td=""><td></td><td>T M O'Riordon</td><td></td><td>14</td><td>1 12</td><td>_</td><td>1 9626</td><td>1013</td><td>2086</td><td>1094</td><td>1668</td><td>81 68</td><td>158</td><td>455</td><td>613</td><td>14</td><td>65</td><td>17</td></t<>		T M O'Riordon		14	1 12	_	1 9626	1013	2086	1094	1668	81 68	158	455	613	14	65	17
Dr. W. B. Owen 304 122 23 1725 494 1847 517 2353 44 127 4	Dr. W. B. Oven 304 122 23 1725 494 1847 517 2864 56.29 83 444 127 4 Dr. P. Whitaker 189 66 29 665 421 731 450 1181 45.42 57 82 139 —		M Gordon		10	30	-	086	985	310	086	200	10.89	253	8	139	6	-	6
Dr. P. Weither 189 152 29 665 494 754 154 57 82 152 494 154 157 454 57 82 152 4 7 154 177 82 155 4 3 155 4 3 155 4 3 155 4 157 <th< td=""><td>Dr. W. B. Owen 122 23 153 421 154 154 154 154 154 154 154 154 154 154 154 154 154 154 154 154 155 153 739 153 749 174 1778 37.04 95 260 355 4 3 Dr. P. Whitaker 203 168 23 153 734 291 751 76 142 946 1088 5 3 Dr. B. Owen 386 168 23 734 291 751 467 159 267 177 467 178 3 46 178 3 46 178 467 179 467 179 467 179 467 179 467 179 467 179 467 179 467 467 179 467 467 467 472 467 472 468 369 469 374</td><td>:</td><td>W D O</td><td>_</td><td></td><td>000</td><td>-</td><td>2000</td><td>200</td><td>2001</td><td>200</td><td>0000</td><td>20.00</td><td>60</td><td>4.4</td><td>107</td><td>1 =</td><td>-</td><td>1 -</td></th<>	Dr. W. B. Owen 122 23 153 421 154 154 154 154 154 154 154 154 154 154 154 154 154 154 154 154 155 153 739 153 749 174 1778 37.04 95 260 355 4 3 Dr. P. Whitaker 203 168 23 153 734 291 751 76 142 946 1088 5 3 Dr. B. Owen 386 168 23 734 291 751 467 159 267 177 467 178 3 46 178 3 46 178 467 179 467 179 467 179 467 179 467 179 467 179 467 179 467 467 179 467 467 467 472 467 472 468 369 469 374	:	W D O	_		000	-	2000	200	2001	200	0000	20.00	60	4.4	107	1 =	-	1 -
Dr. F. Whitaker 189 60 29 421 183 45.42 45.04 45.22 153 4 Dr. B. O. MacQuillan 386 168 23 739 1034 744 178 37.04 95 35.37 4 95 35.37 142 946 1088 5 3 4 3 4 9 4 142 946 1089 22.75 51 25.3 304 9 6 7 4 946 17.91 46 17.91 4 1887 440 1501 454 1895 46 17.91 45 1895 46 17.91 45 1887 45 1887 46 17.91 45 46 1887 46 17.91 46 46 1887 47 46 17.91 46 46 46 46 46 46 46 46 46 46 46 46 47 46 47 46 47 </td <td>Dr. F. Whitaker 189 60 421 731 450 1181 45,42 36 282 153 —</td> <td>:</td> <td>w. D. Owen</td> <td>_</td> <td></td> <td>227</td> <td>-</td> <td>07/1</td> <td>100</td> <td>100</td> <td>010</td> <td>2004</td> <td>00.23</td> <td>35</td> <td>+ 00</td> <td>120</td> <td>+</td> <td>-</td> <td>*</td>	Dr. F. Whitaker 189 60 421 731 450 1181 45,42 36 282 153 —	:	w. D. Owen	_		227	-	07/1	100	100	010	2004	00.23	35	+ 00	120	+	-	*
Dr. P. Whitaker P. Whitaker 203 8.1 5 953 739 1034 744 1778 37.04 95 260 355 4 3 Dr. B. O. MacQuillan 386 168 23 1553 746 1721 769 22.75 142 946 1088 5 3 Dr. R. J. S. Verity 284 114 14 1387 440 1501 454 1955 40.72 52 75 127 3 6 Dr. R. J. S. Verity 284 114 14 1387 440 1501 248 860 17.91 45 263 304 9 6 Dr. R. Owen 315 139 18 868 216 967 234 1201 45 263 375 46 17.91 46 27.7 46 17.91 46 37.7 46 37.7 47 27.66 38 64 97 11 4	Dr. P. Whitaker 203 81 5 953 739 1034 774 1778 37.04 95 260 355 4 3 Dr. B. O. MacQuillan 386 168 23 746 1721 749 1778 940 51.87 942 946 386 9 3 6 9 7 9 6 17.91 45 56 7 3 6 9 7 1002 22.75 7 12 3 6 9 7 1002 22.75 7 12 3 6 9 7 1002 22.75 6 7 1		P. Whitaker		69	99	-	665	421	731	900	1181	49.42	10	250	139	1	1	1
Dr. B. O. MacQuillan 386 168 23 1553 746 1721 769 2490 51.87 142 946 1088 5 3 Dr. T. M. O'Riordan 142 61 734 291 795 297 1092 22.75 51 253 304 9 6 Dr. R. J. S. Verity 120 440 1501 454 1650 40.72 52.75 51 273 304 9 6 Dr. R. J. S. Verity 120 36 245 1612 245 40.72 52 78 177 187 45 245 177 187 45 26 77 187 45 17 187 46 177 2092 143 2172 45.25 78 177 187 17 187 17 187 18 86 187 184 187 187 244 188 96 177 184 18 18 18 18<	Dr. B. O. MacQuillan 386 168 23 746 1721 769 2490 51.87 142 946 1088 5 3 Dr. T. M. O'Riordan 142 61 6 734 291 795 2497 1092 22.75 51 253 304 9 6 Dr. R. J. S. Verity 120 3 562 245 612 248 806 17.91 45 263 304 9 6 Dr. R. Owen 315 139 13 1390 630 1529 643 2172 45.25 78 117 195 7 Dr. R. V. Redwood 252 99 18 868 216 967 234 1201 25.55 69 273 11 4 Dr. R. V. Redwood 133 46 11 46 337 46 338 46 137 416 331 747 27.66 323 307 11 4	::	P. Whitaker			81	_	953	739	1034	744	1778	37.04	95	560	355	+	20	1
Dr. T. M. O'Riordan 142 61 6 734 291 795 297 1092 22.75 51 253 304 9 6 Dr. R. J. S. Verity 284 114 14 1387 440 1501 454 1955 40.72 52 75 127 3 9 6 Dr. T. M. O'Riordan 120 50 13 1390 63 612 248 860 17.91 45 263 308 2 1 Dr. T. M. O'Riordan 252 99 18 868 216 967 234 1201 255 69 205 275 69 205 275 69 205 275 7 196 27 7 196 273 11 4 4 27 248 366 37.15 7 196 273 11 4 4 27 10 4 27 11 4 4 13 11	Dr. T. M. O'Riordan 142 61 6 734 291 795 297 1092 22.75 51 253 304 9 6 Dr. R. J. S. Verity 284 114 14 1387 440 1501 454 1955 40.72 52 75 127 3 6 Dr. T. M. O'Riordan 120 50 139 139 630 630 1629 248 860 17.91 45 263 304 9 6 Dr. R. O'Reiners 315 139 18 868 216 967 234 120 45.55 69 205 273 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17 40 17		B. O. MacQuillan	_		891	_	1553	746	1721	769	2490	51.87	142	946	1088	20	00	00
Dr. R. J. S. Verity 284 114 14 1387 440 1501 454 1955 40.72 52 75 127 3 — Dr. T. M. O'Riordan 120 50 3 562 245 612 248 860 17.91 45 263 308 2 1 Dr. E. Owen 315 139 13 1390 630 1529 643 2172 45.25 78 117 195 7 Dr. R. V. Redwood 252 99 18 868 216 967 244 1201 25.55 69 205 274 7 Dr. R. V. Redwood 252 987 1417 2092 1436 3528 735 77 196 277 7 10 10 11 4 10 10 10 10 11 4 10 11 4 11 11 14 37 4 10 10 10 1	Dr. R. J. S. Verity 284 114 14 1887 440 1501 454 1855 40.72 52 75 75 127 3 — Dr. T. M. O'Riordan 120 50 345 612 248 860 17.91 45 263 386 2 17 45 263 386 2 17 45.25 78 117 195 5 7 Dr. R. V. Redwood 356 138 188 216 246 612 248 860 17.91 45 17 185 17 45 25 78 17 45 253 30 17 4 17 18 <td< td=""><td></td><td>T. M. O'Riordan</td><td></td><td></td><td>61</td><td>_</td><td>784</td><td>591</td><td>795</td><td>297</td><td>1095</td><td>22.75</td><td>51</td><td>253</td><td>304</td><td>6</td><td>9</td><td>15</td></td<>		T. M. O'Riordan			61	_	784	591	795	297	1095	22.75	51	253	304	6	9	15
Dr. T. M. O'Riordan 120 50 3 562 245 612 248 860 17.91 45 263 308 2 1 Dr. E. Owen 315 139 13 643 2172 45.25 78 117 195 57 195 57 1 4 1 4 1 4 1 4 1 4 4 1 4 4 1 4 4 1 4 4 1 4 4 1 4 4 1 4 4 1 4	Dr. T. M. O'Riordan 120 50 3 562 245 612 248 860 17.91 45 263 308 2 1 Dr. E. Owen 315 139 13 1390 630 1529 643 2172 45.25 78 117 195 5 7 Dr. R. V. Redwood 252 99 18 868 216 967 234 1201 25.55 69 205 274 — Dr. A. Roberts 346 13 1959 1417 2092 1436 3528 77 196 274 — Dr. A. Roberts 120 46 11 522 387 568 1950 40.00 — <		B J S Varity			114	-	1 282	UPP	1501	454	1955	40 79	59	757	197	- 83	-	07
Dr. E. Owen 120 337 125 347 346 347 346 347 346 347 346 347 346 347 347 346 347 346 347 346 347 346 347 346 347 346 347 346 347 346 347 <th< td=""><td>Dr. E. Owen 315 139 139 130 <th< td=""><td>:</td><td>The Me Corbinson</td><td></td><td></td><td>100</td><td></td><td>200</td><td>210</td><td>010</td><td>010</td><td>000</td><td>15.01</td><td>245</td><td>000</td><td>000</td><td>0</td><td>-</td><td>00</td></th<></td></th<>	Dr. E. Owen 315 139 139 130 <th< td=""><td>:</td><td>The Me Corbinson</td><td></td><td></td><td>100</td><td></td><td>200</td><td>210</td><td>010</td><td>010</td><td>000</td><td>15.01</td><td>245</td><td>000</td><td>000</td><td>0</td><td>-</td><td>00</td></th<>	:	The Me Corbinson			100		200	210	010	010	000	15.01	245	000	000	0	-	00
Dr. E. Owen 315 139 13 1390 630 1529 244 2272 45.25 75 11 130 274 2 Dr. R. V. Redwood 252 139 18 868 216 967 234 1201 25.55 69 205 274 2 Dr. A. Roberts 133 46 11 522 387 568 398 966 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. B. Smith 337 125 136 137 472 2248 46.83 2 2 2 2 Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 2 2 2 2 2 2 2 2 2 <	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$::	T. M. O relordan			200		700	0000	210	050	0000	10.71	200	200	2000	41	12	300
Dr. R. V. Redwood 252 99 18 868 216 967 234 1201 25.55 69 205 274 — — Dr. A. Roberts 346 133 19 1959 1417 2092 1436 3528 77.55 84 223 307 11 4 Dr. M. Gordon 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. Owen 120 41 14 375 3176 4658 1920 40.00 — <td>Dr. R. V. Redwood 252 99 18 868 216 967 234 1201 25.55 69 205 274 — Dr. A. Roberts 346 133 19 1959 1417 2092 1436 3528 77.550 84 223 307 11 4 Dr. M. Gordon 120 41 14 375 387 568 396 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 387 468 33 64 97 1 2 Dr. E. Owen 120 41 14 375 47 27.66 33 64 97 1 2 Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 2 5 1 Dr. M. Scott 100 37 41 1283 410 1359 454 1813<td></td><td>E. Owen</td><td></td><td></td><td>139</td><td></td><td>1390</td><td>089</td><td>679</td><td>643</td><td>2112</td><td>45.25</td><td>18</td><td>111/</td><td>CGT</td><td>0</td><td>,</td><td>12</td></td>	Dr. R. V. Redwood 252 99 18 868 216 967 234 1201 25.55 69 205 274 — Dr. A. Roberts 346 133 19 1959 1417 2092 1436 3528 77.550 84 223 307 11 4 Dr. M. Gordon 120 41 14 375 387 568 396 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 387 468 33 64 97 1 2 Dr. E. Owen 120 41 14 375 47 27.66 33 64 97 1 2 Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 2 5 1 Dr. M. Scott 100 37 41 1283 410 1359 454 1813 <td></td> <td>E. Owen</td> <td></td> <td></td> <td>139</td> <td></td> <td>1390</td> <td>089</td> <td>679</td> <td>643</td> <td>2112</td> <td>45.25</td> <td>18</td> <td>111/</td> <td>CGT</td> <td>0</td> <td>,</td> <td>12</td>		E. Owen			139		1390	089	679	643	2112	45.25	18	111/	CGT	0	,	12
Dr. A. Roberts 346 133 19 1959 1417 2092 1436 3528 73.50 84 223 307 11 4 Dr. M. Gordon 133 46 11 522 387 568 398 966 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. H. Davies 410 213 35 1563 437 1776 46.83 2 2 2 Dr. M. Scott 100 37 9 391 366 428 375 803 32.12 7 10 17 4 1 Dr. P. Whitaker 189 76 44 1283 410 1359 454 1813 37.77 61 134 19 19 9			R. V. Redwood			66	_	898	216	296	234	1201	25.55	69	202	274	1	1	1
Dr. M. Gordon 133 46 11 522 387 568 398 966 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. B. Smith 337 125 13 1137 645 1262 658 1920 40.00 —	Dr. M. Gordon 133 46 11 522 387 568 398 966 37.15 77 196 273 10 6 Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 — <		A. Roberts			33	_	959	1417	2002	1436	3528	73.50	84	223	307	11	4	15
Dr. E. Owen Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. B. Smith 337 125 13 137 645 1262 658 1920 40.00 — — — — Dr. E. T. B. Smith 337 125 13 137 645 1262 658 1920 40.00 — — — — — Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 — — — — — Dr. M. Scott 100 37 9 391 366 428 375 803 32.12 7 10 17 4 Dr. A. M. Dewar 189 76 44 1283 410 1359 454 1813 37.77 61 133 194 19	Dr. E. Owen Dr. E. Owen Dr. E. Owen Dr. E. Owen 120 41 14 375 317 416 331 747 27.66 33 64 97 1 2 Dr. E. T. B. Smith 337 125 13 137 645 1262 658 1920 40.00 —		M Gordon		-	48	-	669	997	500	308	986	87 15	77	198	973	10	9	18
Dr. E. Gwen Dr. T. B. Smith Dr. T. H. Davies Dr. A. M. Dewar Dr. Davies Dr. Dav	Dr. E. T. B. Smith Dr. E. T. H. Davies Dr. E. T. H. Davies Dr. M. Scott Dr. A. M. Dewar Total 9908 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 192 115 3		T. Controll		000	0.5	10	7770	100	000	000	200	07.10	00	207	200	27	00	20
Dr. T. B. Smith 337 125 13 645 1262 658 1920 40,00 —	Dr. T. B. Smith 337 125 13 1137 645 1262 658 1920 40.00 — <t< td=""><td>***</td><td>E. Owen</td><td></td><td></td><td>41</td><td></td><td>9/0</td><td>317</td><td>416</td><td>331</td><td>141</td><td>27.00</td><td>33</td><td>+0</td><td>16</td><td>1</td><td>7</td><td>0</td></t<>	***	E. Owen			41		9/0	317	416	331	141	27.00	33	+0	16	1	7	0
Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 —	Dr. E. T. H. Davies 410 213 35 1563 437 1776 472 2248 46.83 — </td <td>***</td> <td>T. B. Smith</td> <td></td> <td></td> <td>125</td> <td></td> <td>137</td> <td>645</td> <td>1262</td> <td>829</td> <td>1920</td> <td>40.00</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>-</td> <td>1</td>	***	T. B. Smith			125		137	645	1262	829	1920	40.00	1	1	1	1	-	1
Dr. M. Scott. Dr. M. Scott. Dr. M. Scott. Dr. M. Scott. Dr. M. Dewar Dr. A. M. Dewar The control of the c	Dr. M. Scott M. Scott 251 103 7 1834 697 1937 704 2641 56.19 32 53 85 19 13 18 Dr. P. Whitaker 100 37 9 391 366 428 375 803 32.12 7 10 17 4 1 Dr. A. M. Dewar 1890 76 444 1283 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 192 115 3	-	E T H Davise		-	213	_	569	487	1778	479	8766	46 83	-				-	
Dr. P. Whitaker 189 76 444 1283 410 1359 454 1813 37.77 61 133 194 19 9	Dr. A. M. Dewar Total 9908 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 195 115 3		M. C. L. Davies			900	-	000	100	1007	100	5041	20.00	00	0.20	NO O	101	10	00
Dr. P. Whitaker 189 76 44 1283 410 1359 454 1813 37.77 61 133 194 19 9 Dr. A. M. Dewar 189 76 44 1283 410 1359 6556 77455 61 133 194 19 9	Dr. P. Whitaker 100 37 9 391 366 428 375 803 32.12 7 10 17 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	:	M. Scott		-	103		1884	160	1937	\$0.	2041	90.19	32	99	8	RT	13	97
Dr. A. M. Dewar 189 76 44 1283 410 1359 454 1813 37.77 61 133 194 19 9 9	Dr. A. M. Dewar 189 76 44 1283 410 1359 454 1813 37.77 61 133 194 19 9 9 9 Total 9908 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 192 115 3		P. Whitaker		00	37	_	391	366	458	375	803	32.12	-	10	17	4	1	457
THE GOLD GOOD STATE AND THE STATE ST	Total 9908 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 192 115 3		A. M. Dewar		68	92		1283	410	1359	454	1813	37.77	61	133	194	19	6	28
TIT GOLD GOOD SALE ALLES SOLD GOLD GOLD GOLD GOLD GOLD GOLD GOLD G	9908 4148 647 48412 24248 52560 24895 77455 41.04 1756 4926 6682 192 115						-			-		-							-
	8308 4148 047 48412 24248 52500 24635 41.04 17.04 17.00 4920 0052 192 110		E	1000	-	-	-	-				2212	43 04	2000	0000	0000	100	112	2000

N.B.-Malpas Centre was transferred to the County Borough of Newport on 1st April, 1935.

two previous stillbirths attended the Clinic and was referred to the Venereal Diseases Clinic, Royal Gwent Hospital, and after the administration of anti-syphilitic treatment, a living child was born. Six cases of vaginal discharge were referred for investigation to the V.D. Clinic Royal Gwent Hospital. Five cases were admitted to Tredegar Maternity Home because of unsuitable home conditions. Six cases were referred to the Consulting Obstretrician, Mr. Strachan, at Cardiff. Nine non-pregnant cases attended.

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

CRUMLIN.—The total attendances at this Clinic have increased from 529 to 733. average attendance being 15.9 per session. This Centre is now held once per week and during the morning session only. Although the average attendance shows a decrease the total attendances have increased by just over 200. Of the 296 new cases examined, 40.8 per cent. were primiparae, an increase of 5 per cent. on last year's number. 437 cases re-visited the Clinic for supervision and treatment. About 18 per cent. primiparae shewed abnormality in their pregnancies. These include malpresentations, contracted pelvis, renal inefficiency, heart disease. 27 miscellaneous cases attended, including sterility and postnatal cases. The general condition of the mothers is quite good but there are many cases of malnutrition and debility, often due to frequent pregnancies.

ABERTILLERY.—This Clinic, held once a fortnight, is always well attended. The average attendance per session was 36, an increase on last year's figure. Total attendances amounted to 828, as compared to 609 in 1934, and 414 in 1933, an increase of exactly double in two years. Of these, 307 were new cases and 37 per cent. were primiparae. The usual abnormalities were found, renal inefficiency, contracted pelvis, etc. Several cases of malnutrition were found and supplied with free milk.

OAKDALE.—This Clinic is held once a fortnight and shows steady progress. The average attendance remains practically the same, being 13.1 as compared to 13.6 last year. Total attendances numbered 289, of which 34.6 per cent. were primiparae. The general physical condition of the mothers is quite good but some 3 per cent. received assistance on account of malnutrition.

ABERSYCHAN.—This Centre is still held once a month, rather an unsatisfactory arrangement on account of the long interval between the examinations. The average attendance remains the same, being 8.3, while the total attendances show a slight decrease, being 67 as compared to 95 last year. One gratifying feature of this Clinic is the high percentage of primiparae who attend, i.e., 51 per cent. The general physique of the patients attending this Centre has always been below par, and the percentage of abnormalities found during the pregnancies is higher here than in any of my centres. The straightforward case has so far proved the exception in this Clinic. Possibly only the abnormal cases turn up for examination. In consequence of this, the amount of free food given for malnutrition and debility is high. There seems to be an increase, especially in cases of renal inefficiency with toxemia. This applies to most of the centres this year, and it is difficult to assign the cause. Whether due to earlier and better investigation or not is a debatable point. Previously this appeared more frequently in multiparae, but during the year under review it applies to the primiparae as well.

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

MONMOUTH.—This Clinic is open for one morning each month. The number of new patients was 39 and the average attendance 10.2 per session which was a considerable increase on the previous year, when the corresponding figures were 26 and 4.6. Nine of the patients were primiparae; four had attended in a previous pregnancy; two during two previous pregnancies, and one during three previous pregnancies. One patient was found to be not pregnant. Two patients who had had serious difficulty in previous confinements were referred to the Consultant Obstetrician, who recommended admission to the Cardiff Royal Infirmary. Three patients went to the Tredegar Maternity Home and one to Coedygric for their confinements. Two patients were referred to the Venereal Diseases Clinic. A free supply of fresh milk was given to six of the patients who were in need of it on medical grounds. One patient with very severe anæmia who attended regularly from the early stages of her pregnancy responded remarkably well to treatment so that by the time the end of the pregnancy was reached the anæmia had practically disappeared.

RHYMNEY.—This Clinic is open for one half-day every month. With 38 new cases and an average attendance of 8 per session, this Centre was much the same as in the previous year. Twelve new patients who attendedwere primiparae; five had attended in a previous pregnancy, one during two, and one during three previous pregnancies. One of the patients was under-nourished, and two were very anæmic. Fresh milk was given to eight. Three patients went to the Tredegar Maternity Home for their confinements. One patient with a small pelvis was referred to the Consultant Obstetrician, who admitted her to the Cardiff Maternity Home and performed a Cæsarean Section.

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

Peculiar to Nursing	Mothe	rs		Skin—		
Deficient Lactat	tion		106	Chilblains	 	1
Sore Nipples			23	Psoriasis	 	3
Mastitis			40	Eczema	 	11
Not Classified			8	Boils	 	3
				Scabies	 	1
Peculiar to Women-	_			Lipoma	 	1
Menorrhagia			48	Urticaria	 	1
Leucorrhœa			23	Dermatitis	 	4
Amenorrhœa			6	Abscess	 	7
Prolapse of Ute	rus		14	Ringworm	 	1
Abnormal Vagin	nal Dis	charge	6	Not Classified	 	5
Dysmenorrhœa			4			
Pruritis Vulvæ			8	Eye—		
Metrorrhagia			5	Conjuctivitis	 	5
Hyperemesis			1	Blepharitis	 	2
Abortion			2	Styes	 	6
Not Classified			5	Iritis	 	1

Alimentary System-				Ear, Nose and Thi	roat-		
Constipation	70000		176	Laryngitis			6
Dental Caries			555	Tonsilitis			11
Hæmorrhoids			41	Enlarged Thys	roid		15
Gastritis			30	Nasal Catarrh			1
Pyorrhœa			53	Otorrhœa			3
Diarrhœa			10	Enlarged Tons	eile		2
Jaundice			3	Not Classified		el social	4
Stomatitis			9	1100 Classified		***	4
Not Classified			9	Nervous System-			
1400 Classified				Neuralgia			0
Respiratory, Cardiac	and Cir	culate	rv	Neuritis			8
Systems—	and Ch	Culai	n'y	Giddiness			
Anæmia			248	Fits			1
Bronchitis & Bro	nchial C	atarrh		Epilepsy			1
Varicose Veins			9	Not Classified			5
				Not Classified			1
Heart Disease			11	Himomy Contam			
Pulmonary Tube		***	3	Urinary System—			0
Asthma			4	Cystitis	***		6
Pleurisy	***	***	2	Incontinence			1
Phlebitis		***	1 2	Albuminuria	•••		1
Not Classified			2	Nephritis			19
W 1 D:				Rheumatism			7
Venereal Diseases—				Not Classified			5
Venereal Diseas			6	General Debility	x Malnu	trition	177
Suspected Vene	real Disc	ease	4	Miscellaneous			11
DETAILS OF	INFAN	TC,	ATTA	MENTS UPON WH	IICH A	DVICE	WAS
H.—DETAILS OF		/EN		THE CENTRES.	iich A	DVICE	WAS
	GIV	EIN	AI I	THE CENTRES.			
Prematurity			33	Alimentary System-	-		
Birth Injuries and Mal	formation	s-		Constipation			420
Umbilical Protrusi			291	Enteritis			243
Phimosis			292		•••		
Inguinal Hernia			52	Gastro-Enteritis			181
Tongue Tie			63	Stomatitis			125
Hydrocele			8	Dentition			182
Undescended Test			10	Worms			192
Hydrocephalus			5	Gastritis			104
Hare Lip			1	Flatulence			62
Cleft Palate				Vomiting			40
Spina Bifida			1				16
			4	Jaundice			16
Hæmatoma (Stern	 no-mastoi	 d)	4 3	Jaundice Colitis			16 2 2
Hæmatoma (Stern Meningocele	 no-mastoi	d)	4 3 3	Jaundice Colitis Tuberculosis of		n	2
Hæmatoma (Stern Meningocele Birth Injury to Sh	 no-mastoi	d)	4 3 3 1	Jaundice Colitis Tuberculosis of Rectal Prolapse	Abdome	n	2 2
Hæmatoma (Stern Meningocele Birth Injury to Sh Hypospadias	o-mastoio oulder	d)	4 3 3 1 3	Jaundice Colitis Tuberculosis of		n	2 2 1
Hæmatoma (Stern Meningocele Birth Injury to Sh Hypospadias Imperforate Hyme	 no-mastoi noulder en	d)	4 3 3 1 3 1	Jaundice Colitis Tuberculosis of Rectal Prolapse Not Classified	Abdome	n	2 2 1
Hæmatoma (Stern Meningocele Birth Injury to Sh Hypospadias Imperforate Hyme Imperfect Anus	 no-mastoid noulder en	d)	4 3 3 1 3 1 2	Jaundice Colitis Tuberculosis of Rectal Prolapse Not Classified Bones and Joints—	Abdome	n	2 2 1 9
Hæmatoma (Stern Meningocele Birth Injury to Sh Hypospadias Imperforate Hyme	 no-mastoi noulder en	d)	4 3 3 1 3 1	Jaundice Colitis Tuberculosis of Rectal Prolapse Not Classified	Abdome	n	2 2 1

Nervous System—			Eye-			
Convulsions		17	Blepharitis			101
Mentally Deficient		14	C			126
Nervous		1	Squint			77
			Nystagmus			3
Respiratory, Cardiac and C	irculate	rv	Ptosis			3
Systems—		-,	Ophthalmia Neor			11
Bronchitis & Bronchial C	atarrh	1175	Epiphora			2
Anæmia		100	Keratitis			3
Heart Disease		22	Styes			6
Whooping Cough		5	Not Classified			11
Pneumonia	***	33	Trot Chissines			
Tuberculosis of Lungs		5	E N 1 TI			
Asthma		7	Ear, Nose and Throa	t		
Enistania		1	Nasal Catarrh			341
Ammin	***	3	Otorrhæa and O			209
Dlaumians		3	Septic and Enlar	ged Ton	sils	
Mat Classified		6	and Adenoids			195
Not Classified			Mouth Breathing			2
Skin-			Laryngitis			8
Impotico		145	Deafness			1
Titionnia		208	Tonsilitis			2
Intertrice	11.00	89	Laryngeal Catari	h		1
Farama		137	Miscellaneous			3
Umbilical Discharge	•••	70				
Manue		55	Lumphatia System			
Compa	***	27	Lymphatic System—			
Carbina		21	Adenitis	• • •		93
Calagoria		3	Enlarged Glands			1
Abaaaa		26	1 1 0 0 1 1 1 1 1			
Burns and Scalds		24	Deficiency Diseases—			
Doile		4	Rickets			110
Downstitis		28				116
Sore Buttocks		36	Debility			167
			Malnutrition			167
Ringworm	***	2	Marasmus			54
Mastitis		12				
Pemphigus Neonatorum		1	Venereal Diseases—			
Erythema		3	Congenital Syphi	is		1
Psoriasis Chilblains		1 2				
			Rheumatism-			
Vulvitis Not Classified	• • • •	1	Chorea			3
Not Classified		13	Growing Pains			4
II: C				2750	1-11111	
Urinary System—		25	Miscellaneous—			
Enuresis		35	Infectious Diseas	0.0		107
Cystitis		12		25		13
Nephritis		2	Injuries Deaf and Dumb	•••		
Retention		1			•••	1
Inflamed Penis		1	Miscellaneous			11

1.—REPORTS OF MEDICAL OFFICERS OF THE CENTRES.

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

	Abertysswg	Beaufort	Trethomas
11	%	%	%
Breast-fed	51.5	40.0	40.4
Artificially fed	34.3	42.8	31.8
Breast and Artificially fed	14.2	17.2	27.8

ABERTYSSWG.—This Centre is held for two hours weekly. There was an increase in the total attendances during the year 1935 although the number on the infants' register at the end of 1935 was 83 compared with 90. The increase was therefore due to a greater number of revisits paid. In 1934 the total attendances were 628 and the average attendances at each session was 13.08. In 1935 the total attendances were 824 and the average at each session 17.16. The number of new cases between ages of one and five years in the year 1935 remains the same as in the previous year but here, as in the infant class, there was a considerable increase in the number of revisits. It is also satisfactory to note that there was again an increase in the number of breast-fed babies attending. In 1934 the number of breast-fed babies was 46.8 and 26.6 were entirely bottle-fed. In 1935 the number of breast-fed babies was 51.5 and wholly bottle-fed 34.3. The percentage of those part breast and part bottle-fed shewed a reduction from 26.6 to 14.2. As in the previous year only one child attending this Centre was found to be suffering from rickets. This is lower than the amount found in the other two areas. Eight children attending this Centre had dental caries and seven of these had teeth extracted at the local County Dental Clinic. Four children had enlarged tonsils requiring operation; the parents of two of these children consented to operation and the diseased tonsils were removed.

BEAUFORT CENTRE.—This Centre is open for two hours weekly and the Medical Officer is in attendance once a fortnight. There was a large increase in the total attendances for the year from 784 in 1934 to 1,113 in 1935. The average weekly attendances also increased from 16.0 in 1934 to 23.18 in 1935. There was a further slight decline in the number of breast-fed babies, the percentage falling from 40.8 in 1934 to 40.0 in 1935. There were no cases of gross rickets with deformities during the year. One child who attended during 1934 with this condition was by the end of the summer of 1935 completely cured. He has had a generous supply of free malt and cod liver oil during the two years but probably fresh air and sunshine did even more than diet and cod liver oil. He began to walk a little early in the year and was in the open air all the summer when he improved very rapidly. Although he was one of a very large family, we were fortunate in having the co-operation of the mother. One noticeable feature of the ailments of this area is the low incidence of respiratory complaints such as bronchial catarrh and bronchitis, compared with that of the other two areas. The percentage of children attending this Centre suffering from these complaints is about half of that found in Abertysswg and Trethomas. The same also holds good in connection with the incidence of enlarged tonsils and adenoids.

TRETHOMAS CENTRE.—This Centre is open for one whole day weekly. There was an increase of one in the number on the register at the end of the year, the number at the end of 1934 being 250 and at the end of 1935, 251. The total attendances for the year were 2,641, compared with 2,522 in 1934, while the average attendance per session increased from 53.63 in 1934 to 56.19 in 1935. Unfortunately there was a further decrease in the percentage of breast-fed babies attending this Centre from 42.2 in 1934 to 40.4 in 1935, while there was an increase from 29.8 to 31.8 in the number of bottle-fed infants. This decrease in the amount of breast-feeding which also occurred to an even greater degree in the previous year is rather difficult to account for, unless it may be due to the fact that the husbands of a very large number of the women living in this area and attending this Centre have been for several years unemployed and as time goes on the mothers are becoming less and less fit to feed their babies. As in the case of the Abertysswg Centre the number of children found to be suffering from rickets was exactly the same as in the previous year, that number in Trethomas being eight. In 1934 it was noted that the incidence of infantile eczema, especially in the case of babies resident in Bedwas and Trethomas was high, thirteen children suffering from this complaint. This number has been reduced to seven in 1935. No new cases have occurred during the year and the seven still suffering from it have now got this disease in a very mild form. The number of children suffering from naevus in this district is fairly high. During the year five children had naevi, which were increasing in size and all of them had them removed successfully in the Skin Department of the Royal Gwent Hospital. Many mothers and children attending this Centre had dental treatment at the County Dental Clinic. Fourteen children attending this Centre were immunised when this work was being done in the local schools by one of the School Medical Officers. The ages of these children varied from ten months to five years.

GENERAL.—The attendance at the three centres was very satisfactory but still not too large for the time at our disposal. Abertysswg is the only Centre where breastfeeding has increased, although the decrease at Trethomas is very small. All necessitous patients were helped with supplies of dried milk and the health of many nursing mothers was maintained by their taking the free food themselves. Cod liver oil and cod liver oil preparations were used freely at these centres but many of the mothers are beginning to realise that in addition to this sufficient rest and sleep, diet, suitable as well as sufficient, and plenty of fresh air and sunshine are necessary to infant and toddler alike. Toddlers are still on the whole below weight although many are in quite good health. A more generous amount of fresh milk in their diet would help to counteract this. Many, even when the father is working, seem to finish with milk soon after they are twelve months old. Rickets was seen only in a very mild form at these centres during the year and fourteen cases in all for the three centres. 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.

	Caerleon	Caldicot	Newport	Rogerstone
to State of the second	%	- %	%	9/0
Breast-fed	58	42	42	56
Breast and Artificially fed	13	6	19	8
Artificially fed	29	52	39	36

CAERLEON.—This clinic is held fortnightly, on a Wednesday afternoon, and is attended by mothers and babies from Caerleon and the surrounding rural district. The attendance all round show a decrease this year-99 on the register at the end of the year as against 131 last year; 34 new cases under one year attended, compared with 45 in 1934; and 3 new toddlers came, against 11 last year; making 556 total attendances in 1935 compared with 661 for the similar period of 1934. The average attendance per session was 21.38—last year's figure was 27.5. The babies, on the whole, were a healthy lot. The figure for breast-feeding was slightly smaller than last year—58 per cent. compared with 61 per cent. Five cases of mild rickets were seen and advised. There seemed no definite reason, other than a familial one, for the occurrence of these cases which were having a suitable diet with attention to hygiene, etc. No cases of malnutrition were noticed. Bronchial catarrh, eczema and urticaria (all allied allergic diseases) were the chief ailments seen and treated. One case of severe ophthalmic neonatorum was admitted to the Royal Gwent Hospital and one case of congenital cataract was referred to Mr. Coulter. Two cases were referred to the Orthopædic Clinic at Newport, and one of these, a club foot, was advised re splinting. Of the 20 toddlers who attended, the majority were a healthy lot, but 2 showed evidence of lack of suitable food and fresh air, and improved with the giving of malt and oil and attention to hygiene. Three toddlers had dental appointments. It was observed that at this Centre the toddlers were brought along for their own sakes and not merely because they accompanied a baby brother or sister. One set of twins attended and did well. On an average the mothers were fit. The majority were young, attending with the first or second baby. No under-nourishment was noticed, but 9 to 10 per cent. showed lactational debility. Six expectant mothers were referred to the Ante-natal Clinic at Newport. Free food was given away on medical grounds — more food was given this year than during last year. Several ladies of the local Infant Welfare Committee attended during the year and did most useful and valuable work.

ROGERSTONE.—This is a fortnightly clinic which, during the year under review, shows an increase all round compared with the figures for the preceding year. 133 were on the register at the end of the year, while the corresponding number for last year was 130. 46 new babies attended, making 52 revisits. Eleven new toddlers came, and 387 revisits of toddlers were made, as compared with 42 new babies, 6 new toddlers, 385 babies, and 356 toddlers, revisits, last year. The average attendance per session was 37.15 as against 30.34 for 1934. The majority of the babies were healthy and only required guidance re feeding, etc., to be satisfactorily reared. The figure for breast-feeding was much the same as last year (56 per cent. as against 57 per cent. last year). One severe case of facial eczema attended regularly and eventually did well. Two cases of naevi were referred to the Royal Gwent Hospital. One pyloric stenosis case which had been operated on in Cardiff Royal Infirmary attended regularly for instructions in feeding, and progressed satisfactorily.

One apparently very healthy baby developed a severe persistent conjunctivitis with photophobia and was referred to the Eye Department, Royal Gwent Hospital. The condition took a long time to clear up. One set of twins attended, and did well. No malnutrition among the babies was observed. The toddlers, on the whole, were a delicate lot. Six per cent. were underweight and many of them suffered from persistent bronchial catarrh and poor appetite. Several of the latter cases came from large families and suffered from lack of suitable food and fresh air-iron tonics and malt and oil helped considerably to improve their appearance and general well-being. Two cases of kyphosis were referred to the Orthopædic Clinic at Newport—one of these was put on the waiting-list for the Royal National Orthopædic Hospital for remedial exercises One case of semitendinosus bursa was also put on the waiting-list for the same hospital. Ten toddlers had dental appointments and two had tonsillectomy performed at the County Tonsil & Adenoids Clinic. No malnutrition was observed. Six per cent, of the nursing mothers showed evidence of anæmia on their first visit to the Clinic-but the figure for anæmia in the non-nursing mothers was also 6 per cent. None of the mothers showed evidence of malnutrition. Four had dental appointments. The 7 per cent, who showed lactational debility were helped, where necessary with milk, and dried foods and benefited greatly from these. Constipation was the chief ailment of the nursing mother. More free food was given this year than during 1934.

CALDICOT.—During 1935 this Centre was held on Tuesday afternoons and was attended by mothers and babies from Caldicot and the surrounding rural district. figures for attendance show an increase all round-143 were on the register at the end of the year compared with 140 the previous year. 835 baby visits were paid as against 767 in 1934 and 1093 toddler visits compared with 838 in 1934. The average attendance per session was 40.16 as against 34.04 in 1934. The figure for breast-feeding is again low (42 per cent.) and this may again be accounted for by the fact that several mothers with large families attended with a baby whom they were unable to breast-feed, owing to lactational deficiency due to repeated pregnancies. Extra nourishment given them from the Centre helped to maintain breat-feeding as long as long as possible. The babies, on the whole, were very fit, but 5 cases of mild rickets attended and were treated with cod liver oil and advised sunshine and fresh air. Two cases of dacryocystitis were referred to hospital and did well. One case of an unusual skin lesion, granuloma annulare, was seen in a baby who was sent to the Skin Department, Royal Gwent Hospital. Two sets of twins attended and did well. One case of severe club foot was sent for manipulative treatment to the Royal National Orthopædic Hospital. One case of congenital absence of patella was kept under observation by the orthopædic surgeon. One case of rachitic bowing of legs attended the Orthopædic Clinic for splinting and massage. Bronchial catarrh was again very prevalent probably because of the low-lying nature of the country round Caldicot. No case of under-nourishment was seen. The toddlers who attended were a healthy lot—only one showed subnormal nutrition but this was due more to deficient assimilation of food than to actual lack of food. Three cases of mild rickets attended the Orthopædic Clinic and had splinting and massage. Bronchial catarrh and threadworms were again the chief No under-nourishment was evident among the nursing or expectant mothers. Constipation, pyorrhœa and dental caries were the chief ailments to be treated. Eight expectant mothers were referred to the Ante-natal Clinic, Chepstow. Free Food was given away on medical grounds-more was given away this year than during last year. thanks are due to several ladies of the local Maternity and Child Welfare Committee who attended during the year.

NEWPORT.-In April, 1935, the Newport Borough extended its boundaries and absorbed the districts of Liswerry and Maesglas, so that for the remainder of the year the fortnightly afternoon Clinic, held at Stanley Road, Newport, was attended only by mothers and babies from the districts of High Cross, Bettws, Llanwern, Nash and Goldcliffe. The attendances necessarily dropped from last year's figures. During the year the average attendance was 19.32. 39 new babies attended, 319 total baby visits were paid. while 15 new toddlers came and the total coddler revisits were 280. The babies who attended were all fit, with the exception of one set of premature twins, one of whom throve so badly that he was admitted to the Children's Ward, Royal Gwent Hospital, and was an in-patient there for about eight weeks. The toddlers who came were mostly very fit. Four attended the Orthopædic Clinic and were advised re splinting and massage for mild rachitic conditions of the legs. No malnutrition was noticed. Of the 33 nursing mothers who attended, four showed lactational debility and were helped with dried food, etc. Several of the women who came were the wives of agricultural labourers to whom the benefits of unemployment are not extended so freely as to the more fortunate towndwellers. One case of malnutrition was seen. As was to be expected, owing to the decreased attendance, less free food was given away this year.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Pontypool	Rumney
	%	0,0
Breast-fed	45.5	25
Breast and Artificially fed	33.5	23
Artificially fed	21	52

PONTYPOOL. — This Centre is open one day a week with the Medical Officer in attendance in the afternoon. The average attendance has increased during the year from 34.7 to 45.25. Both the percentage of breast-feeding and of breast and artificial feeding increased (from 44 and 30 respectively in 1934). The number of nursing mothers who sought advice increased from 64 to 78. About a dozen of these appeared to be suffering from malnutrition but with the help of extra nourishment provided in the form of Colact They were able to breast-feed their babies. Of non-nursing mothers attending about 10 suffered from malnutrition. The number of toddlers brought continues to increase. About one-third of them were underweight. Of the babies under one year old about one-fifth were underweight. As in previous years bronchial catarrh and constipation weré the commonest ailments in the younger children, and enlarged tonsils and adenoids, worms and carious teeth in the older ones. Seven cases of mild rickets were seen and one child with marked rachitic bowing of the tibiae was referred to the Orthopædic Clinic and from there to the Royal National Orthopædic Hospital for operative treatment. He is now home again with a fine straight pair of legs. I wo cases of suspected tuberculosis were referred to the Tuberculosis Officer. A limited supply of simple drugs was used during the year. More free food was given than in the previous year. No ante-natal work is done at this Centre.

RUMNEY.—This Centre is open one half-day every fortnight. In 1935 the number on the register increased from 92 to 120 and the average attendance from 23.65 to 27.66. The percentage of breast-feeding shows a most disappointing drop from 54 to 25. The percentages of both combined breast and artificial feeding and of purely artificial feeding have increased. Many of these mothers go elsewhere for the confinement and it is a rare thing for a baby to be brought to the Centre under six or eight weeks old, by which time the artificial feeding is well established. It is only occasionally possible to persuade a mother to try to re-establish breast-feeding. Only one mother was suffering from malnutrition which prevented her from breast-feeding her baby. More toddlers were brought to the Centre than in the previous year. Defective teeth were their biggest trouble. Very few were underweight. One child suffering from infantile paralysis was sent via the Orthopædic Clinic to the Royal National Orthopædic Hospital and has since returned very much improved. At the parents' request three children were immunized against Diphtheria More mothers attended for advice and treatment than during the previous year. No ante-natal work is done at this Clinic. Very little free food was given during the year and only a few simple drugs were used.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Newbridge	Pontymoile	Pontnewydd
	- %	%	%
Breast-fed	. 43.0	45.0	40,6
Breast and Artificially fed	21.7	18.3	23.4
Artificially fed	. 35.3	36.7	36.0

NEWBRIDGE.—This Centre is open for one whole day weekly. The attendance during the year has been remarkably good. The number on the register at the end of the year 1935 was 307 compared with 278 in 1934 and the average attendance at each session has risen from 59.52 in 1934 to 81.68 in 1935. These figures must surely imply that the advice given at the Centre is appreciated by the mothers; they do not come for the free food given, because now the mothers realise that free food is only given for purely medical reasons. The new cases under 1 year were 171 compared with 124 in 1934. The figures for breast-feeding show an increase for 1935. The percentage has increased from 40 per cent, the previous year to 43 per cent, this year. An increase, however small, is always gratifying. Unfortunately the percentage of partially breast-fed infants has decreased with a resultant increase of the artificially-fed. This latter increase is due to several factorsone is that many mothers come to the Centre with the baby weaned at the end of the first month, when with a little more encouragement breast-feeding might have been maintained for the full period of nine months. During the year 20 mothers were offered appointments for extractions at the dental clinic, but many others could not accept this treatment as owing to financial difficulties they were unable to obtain dentures. One mother was referred to the Tuberculosis Officer. Though the children in this area attend the infant schools under 5 years we see a large number of toddlers at the Clinic, and of those attending only a small number were below the normal nutrition. These cases showed a marked improvement when the mothers followed carefully the Medical Officer's advice and instructions re diet, fresh air and hours of sleep. Such cases were assisted — where

necessary — by some suitable preparation, e.g., malt and oil, Aberdeen emulsion or cod liver oil. Eight children were offered dental appointments, four were referred to the eye clinic, five for removal of tonsils and adenoids. Two children were sent to the Tuberculosis Dispensary, one to the V.D. Department, Royal Gwent Hospital, and three to the Orthopædic Clinic. During the year the usual simple drugs were prescribed for such common ailments such as bronchial catarrh, constipation, and worms, and simple ointments for slight skin disturbances. The amount of such drugs was restricted as in the previous years. To the Health Visitors—and the voluntary helpers too—I wish to offer my best thanks for their very excellent services and for the good work they are doing at the Centre.

PONTYMOILE.—This Centre is open for half a day weekly. The attendance at this Centre during the year has slightly increased. The average attendance at each session has risen from 16.2 in 1934 to 17.9 in 1935. As this has been a wet and stormy winter the mothers from the neighbouring hills and rural districts found a difficulty in attending regularly—but in spite of these real difficulties the total attendance of nursing mothers has risen from 209 in 1934 to 308 in 1935. Amongst the mothers the number of cases of malnutrition was comparatively low and such cases were helped — for medical reasons — by free food to enable them to continue breast-feeding their infants. Fourteen mothers were offered dental appointments. There is a marked increase in the percentage of breast-fed babies. The percentage has risen from 30.8 per cent. in 1934 to 45.0 per cent in 1935. These is a slight decrease—less than 1 per cent.—in the partially breast-fed and a marked decrease in the artificially-fed infants—this latter percentage has fallen from 50.0 per cent. in 1934 to 36.0 in 1935. This is most gratifying. There was an increase in the number of toddlers attending this Centre. The total attendance of 1934 was 206; in 1935 it was 248. The mothers are encouraged to bring these little ones to the Centre so that they may be kept under medical observation. Three children were offered dental appointments. Two were referred to the tonsil clinic; two had treatment at the eye clinic; one at the V.D. Clinic, and one at the Orthopædic Clinic. The usual infantile ailments were treated by simple drugs.

PONTNEWYDD.—This Centre is open for half a day weekly. There was an increase in the number on the register at the end of the year. In 1934 the number was 133, in 1935 the number being 142. The average attendance at each session in 1934 was 21.7, in 1935 it was 22.7. The total attendance of nursing mothers had increased from 244 the previous year to 304 this year. It is most pleasing to record that the percentage of breast-fed babies has increased from 35 per cent. in 1934 to 40.6 per cent. in 1935. The percentage of the partially breast-fed has also increased from 17 per cent. in 1934 to 23.4 per cent. in 1935, and the percentage of the artificially-fed infants has fallen from 48 per cent. in 1934 to 36.0 per cent. in 1935. This result is most satisfactory and shows how willing and anxious the mothers are to follow the good advice given at the Centre. Some mothers suffered from general debility and in some cases were helped by a supply of free food to restore their nutrition to normal and so enable them to continue breast-feeding their infants. Six mothers were given dental appointments. There is a decrease in the attendance of the toddlers. The winter was so very wet it was not easy for a mother to bring two children to the Clinic, but the mothers are always urged to bring the toddlers so that they may be kept under medical supervision. Five children were offered dental appointments. Two received treatment at the eye clinic; two had their tonsils and adenoids removed, and four children were referred to the Orthopædic Clinic.

 DR. W. BOWEN OWEN, Assistant Medical Officer, Monmouthshire County Council. NEW TREDEGAR.

Breast-fed ... 37% Breast and Bottle-fed ... 35% Bottle-fed ... 28%

BABIES.

No. reviewed at the end of the year ... 132. In satisfactory condition ... 75% In unsatisfactory condition ... 25%

This year a large number of babies have shown poor progress. The reason for this is the "common cold." Coughs and colds have been very prevalent, especially during the later months of the year.

CHILDREN AGED ONE TO FIVE.

No. reviewed at the end of the year ... 114.

In satisfactory condition ... 40%

In unsatisfactory condition ... 60%

The percentage of fit and unfit are the same for 1935 and 1934. The number of children who suffer from feverish attacks, commencing with a cold and going on to a bronchitis is very high. Colds and coughs are not adequately treated at home. Small children suffering from these complaints should be kept in bed. Unfortunately they are allowed to be about the house, infecting others, while they themselves show a sharp loss of weight and firmness. It is a common occurrence to see a child lose in a week the weight it has taken months to accumulate. The attendance this year has improved, showing an average increase of 14 per session. Drugs and milk foods are given to the needful. A number of nursing mothers showed a considerable degree of anæmia and debility when first attending with the new baby. Milk foods and tonics were very beneficial in these cases, helping the mothers to renewed strength and well-being.

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

USK.—The number of infants on the register on 31st December, 1935, was 100 as compared with 101 for the previous year. The average attendance per session during the year was 32.12. This shows a slight increase over 1934. The percentage of infants which were breast-fed was 60 per cent., which is a most satisfactory increase on previous years. The percentage both breast and artificially-fed was 12 per cent., and the percentage completely fed by artificial means was 20 per cent. The ailments for which infants were treated was again chiefly conditions of the respiratory tracts, and this treatment was responsible for a large percentage of the drugs used. Several orthopædic cases have been referred to appropriate clinic with satisfactory results, whilst a few surgical cases have received treatment at the Royal Gwent Hospital. The health of the nursing mothers seems considerably improved. In many cases, the supply of fresh milk has had most beneficial results. The main ailments of these mothers appear to be a general lack of tone and vitality which have responded to the issue of increased nourishment and tonics. All antenatal cases are referred to the appropriate clinics at Chepstow or Pontypool, but many attend this clinic for dietary supervision between visits to the former clinics. I must express my thanks to the voluntary helpers who have accorded the Health Visitor in charge, Nurse Spencer, great assistance on all occasions. The improvement in attendance and health of both mothers and infants attending this Clinic is due in no small measure to the activities and hard work of the Health Visitor in the homes of these people.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Cwm	Blaina	Nantyglo
	%	%	%
Breast-fed	52	54	55
Breast and Artificially fed	20	14	16
Artificially fed	28	32	29

CWM.—The total attendances at this Centre for the year 1935 were 1,877, which was a slight increase over the previous year. The average attendance at each session was 39.10 as compared with 35.87 for 1934. Breast-feeding in the case of infants up to 9 months of age increased from 47.1 per cent. in 1934 to 52 per cent. in 1935. Wholly artificially-fed infants decreased from 35.9 per cent in 1934 to 28 per cent. in 1935. The number of children between the ages of 1 year and 5 years who visited the Clinic was 52. The general condition of children up to 1 year was very satisfactory. There were a few cases of infants being undersized but this was due in most cases to mal-assimilation and not malnutrition. The condition generally of the toddlers was satisfactory, although a few were found to be slightly debilitated. No case of gross under-nourishment was met with. During the year 6 cases of rickets were seen but all were of slight degree and responded to ordinary simple measures, no case coming to operation for gross deformity. The condition of the mothers attending this Clinic was generally quite satisfactory; very few required treatment for ailments.

BLAINA.—This Centre is held weekly, with a doctor in attendance at the afternoon session. The average attendance at each clinic was 55.2. With reference to the feeding of infants up to 9 months of age 54 per cent. were breast-fed. This shows no appreciable change from the previous year. The percentages of wholly bottle-fed infants, and of infants who were fed on breast supplemented by artificial feeding remained practically unchanged. In the cases of mothers who showed some degree of lactational deficiency, milk food was given free to necessitous cases, enabling these mothers, in many cases, to feed their infants. Dried milk foods were given in necessitous cases to infants who showed any sign of debility, or sub-normal nutrition. Of the 94 toddlers who attended the Centre during the year, 11 were found to be suffering from malnutrition due to under-nourishment. A number of other toddlers were also undersized, but in these cases the reason was found to be due either to mal-assimilation or heredity, e.g., small parents. In the cases of malnutrition the mother was advised as to dietary and in necessitous cases either a milk food or cod liver oil, etc., was given. With regard to infants under 1 year 8 were found to be showing signs of malnutrition. The deficiency was remedied by assisting the mother in case of breast-feeding and by giving dried milk in the cases of artificially-fed infants. With regard to the nutrition of the mothers attending, it is felt that there is some slight improvement over the previous year. Ten mothers were found to be suffering from debility. A number of mothers were treated for anæmia. It is felt that the anæmia and general debility occurring in the mothers were in some measure due to the fact that in quite a large percentage of cases mothers have to resume their household duties too soon after confinement.

NANTYGLO.—This Centre is held on one half-day each week. Average attendance per session was 35.73. With reference to the methods of feeding of infants up to 9 months of age the percentage who were wholly breast-fed showed a slight decrease over the previous year falling from 57 per cent. to 55 per cent. The ratio between the artificially-fed infants and the infants fed on breast supplemented by artificial feeding showed little change. From the nutritional point of view little change in infants and toddlers was noticed over that of 1934. Ten infants under 1 year and 15 toddlers were found to be nutritionally subnormal. The mothers of these children were advised regarding diet and in necessitous cases milk foods or cod liver oil and malt, etc., were given. Mild rickets were met with in only five cases. An unusually large number of cases of otorrhæa were seen — 17 cases during the year. Some of these received treatment at the Blaina Aural Clinic. With regard to the nutrition of the mothers, 15 were suffering from debility and received appropriate treatment.

GENERAL.—A point upon which I have laid particular stress in previous reports, but one which will bear repetition is the importance of a properly balanced diet for children between the ages of 1 and 5 years. Of course before this age, from birth to 9 months, the ideal method of feeding is breast-feeding; this method is strongly advised at all the Infant Welfare Centres. Too often it is found that the diet of the child who has reached one year of age is totally unsuitable. In many cases it is deficient in the factors necessary to healthy growth and development. Too often these children have to be content with "what is going on the family table." Their diet often consists of a great excess of starchy foods with very little or no protein and fats. It is for this reason that a number of children who have reached the "toddling" stage are found to be pale, flabby, and pot-bellied, with in some cases a mild degree of rickets. The steady gain in weight which has been manifest up to 1 year gives place to little or no gain and in many cases actual loss of weight. The child becomes peevish, listless and suffers from frequent attacks of diarrhœa. These signs quickly disappear when the child is put on a diet containing the proper proportions of proteins, fats and carbohydrates together with the necessary accessory food factors. These points are strongly emphasized at the Centres. The mothers are also advised of the importance of sufficient sleep, regular meals, and habits, fresh air and sunlight.

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

PENGAM.—The figures for this year are gratifying to peruse — an increase in all phases of infant welfare work, pointing to considerable appreciation expressed, and a more clinically-minded mother developing, especially among the younger primiparae. The total number of attendances during the year 1935 increased from 2,325 to 2,490. The total number of toddlers attending increased from 718 to 769. The average daily attendance at the clinic number 51.87. The percentage of completely breast-fed babies equalled 25 per cent., an increase of 6 per cent. over last year. The percentage of babies partially breast and partially artificially-fed numbered 17.2. Those completely bottle-fed equalled 30.8—a diminution of 6.2 from last year. The general standard of nutrition of both mothers and children is good, and would compare favourably with any other clinic area in the county. This is especially seen among the younger mothers, who show considerable improvement from those of former years. The essential and beneficial effects of fresh air and sunlight, combined with its cheapness and the economic aspect, is becoming more and more appreciated. The facilities offered, and the benefits obtained in the elimination of oral and dental sepsis with its malignant sequelae, e.g., toxemia, gastritis are appreciated to a great

extent. The number of applications for dental treatment from this clinic seems to impress one that the old-fashioned dread of the dental chair has passed. Medication is carried out as in former years. The most common complaints were teething troubles and their complications—gastro-enteritis, bronchitis and dermal infections. With a little care and advice, most of these complaints have been cleared up successfully. Free food has been given as in former years, purely on medical grounds, only in definite cases of malnutrition and undernourishment.

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

all the same and the same and the	Oakdale	Crumlin	Panteg	Cwmbran
	%	%	%	%
Breast-fed	67.0	46.4	63.8	58.5
Breast and Artificially fed	7.2	17.0	13.3	11.5
Artificially fed	25.8	36.6	22.9	30.0

OAKDALE.—This Centre is held once a fortnight and is always well attended. The average attendance per session shows an increase, having risen from 40.4 to 45.42. The total number on the register was 189. The toddlers attend regularly here, the number for the year being 450, an increase on last year's figure of 336. The percentage of breast-fed babies has always been very good, the number being 67.0 per cent., the highest of all my clinics.

CRUMLIN.—This Centre is held once a week, continues favourably, and is always well attended. The number on the register at the end of the year was 198, an increase of 15 on last year. The average attendance per session has risen from 27.56 to 31.25. Total attendances, 1,500. The percentage of breast-feeding is not so good as last year, being 46.4 per cent. This is fairly satisfactory considering the general poor physique of some of the mothers. The number of toddlers has also increased, being 500 as compared with 446 last year. These children are in many cases of poor physical condition. Consequently the amount of free food supplied is high.

CWMBRAN.—This Centre, held one half-day a week, is always well attended. Although the number on the register shows a decrease being 193, yet both the average attendance, i.e., 38.56, and the total attendance, 1,851, both show a marked increase. The percentage of breast-feeding is not so good as last year, being 58.5 per cent. Yet this is good, surprisingly good, for such a distressed area. The toddlers attend very well here, the number being 643. Many of these are of very poor physique and consequently free food was given in greater amounts than elsewhere.

PANTEG.—This Clinic continues to be one of the most progressive of all my clinics. It is held for a half-day once a week. The number on the register at the end of the year was 203, while the number per session has risen from 35.02 to 37.02. Total attendances were 1,778, an increase of almost 100 in the year. Although the number of toddlers attending this Clinic shows a slight decrease of 4, being 744, it is yet the highest of all my centres. The mothers take a keen interest and pride in the welfare and progress of their children, and one feels it is well worth while to give advice to them, for they endeavour to carry out the instructions given. The percentage of breast-feeding is good and shows an increase, being 63.8 per cent., which is very satisfactory.

GENERAL.—The attendances at the various centres shew a further increase again this year. The average attendance at Oakdale marks the greatest advance, with Cwmbran and Panteg a good second and third. Free foods have been given in necessitous cases on medical grounds, most noticeable in Crumlin area. Drugs consist of simple tonics, aperients, etc. Ante-natal cases are referred to the nearest ante-natal clinic, and are increasing steadily in numbers. There is evidence of malnutrition in nursing and non-nursing mothers, often more marked in the non-nursing mother. This mother frequently by reason of her debility ceases to be a nursing-mother (through inability to suckle her infant) and is, in consequence, automatically barred from assistance at the Centre even though she might be the more needy of the two. Amongst the expectant mothers there is also evidence of malnutrition in some 5 per cent. of cases, most marked in the Crumlin area. There is no evidence of malnutrition amongst the babies, but the toddlers in many cases show definite signs—in all 31 cases of malnutrition, and 18 cases of rickets in my areas.

10.—DR. ALICE S. M. DEWAR, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

		Blackwood	Cross Keys	Ynysddu
Breast-fed		 41%	37%	48%
Breast and Artif	icially fed	 18%	20%	14%
Artificially fed		 41%	43%	38%

BLACKWOOD.—This Centre is held weekly. The number of infants on the register has increased from 359 to 386; the total attendance is 2,741 compared with 2,135 in the previous year and the average attendance has increased from 56.18 to 59.58. Unfortunately the figure for breast-feeding is very much lower than that of the previous year, being 41 per cent., compared with 60 per cent. The amount of combined breast and artificial feeding has increased from 15 per cent. to 18 per cent. and the amount of artificial feeding is now 41 per cent.. compared with 25 per cent. for 1934. Many of these infants were already weaned before their first visit to the Centre and though some of the mothers are unfit to feed their babies, others make no attempt at breast-feeding. The condition of the infants on the whole was quite satisfactory, only 2 suffered from actual malnutrition. Unfortunately the health of the toddlers was not up to the same standard as that of the babies. A large number of toddlers attended here and about 40 per cent. of those were underweight. To a large extent this was due to improper feeding, and only 6 showed signs of malnutrition. Many suffered from enlarged tonsils and adenoids, and a considerable number were referred for dental treatment. Bronchial catarrh, constipation and threadworms were their chief complaints. Three cases were referred to the orthopædic clinic and four cases of squint to Dr. Coulter's clinic. Free food is given more extensively at this Centre, a large amount of it being to nursing-mothers. Drugs are also given to a greater extent here and a large amount of cod liver oil is given to toddlers. Sixteen expectant mothers attended and were referred to Oakdale Ante-natal Clinic. Of the nursing-mothers who attended here, a fairly large proportion suffered from anæmia and general debility but only 2 were under-nourished. A considerable number were referred for dental treatment. CROSS KEYS.—This Centre is open for one half-day weekly. The number on the register has decreased from 87 to 82 but the mothers are now attending much more regularly and the number of total attendances has increased from 887 to 1,127 and the average attendance from 18.47 to 23.47. This is most satisfactory as very little free food is given here and almost all the mothers are coming for advice alone. Breast-feeding has increased slightly, from 35 per cent. to 37 per cent., but is still very low. Unfortunately the artificial-feeding has increased from 41 per cent. to 43 per cent., while the combined breast and artificial-feeding has decreased from 24 per cent. to 20 per cent. The nutrition of the infants here is quite satisfactory, none suffering from actual malnutrition. Not many toddlers attended this Centre and those on the whole were very healthy; six were underweight but there was only one case of malnutrition. Cod liver oil in various forms was prescribed and also a limited quantity of simple drugs such as aperients, tonics and cough mixture. Six expectant mothers attended and were referred to the Newport Ante-natal Clinic. The nursing-mothers who attended were fairly healthy and only one was undernourished.

YNYSDDU.—This Centre is open for one half-day weekly. The number on the register had decreased from 227 to 189. But at this Centre also the mothers are attending more regularly and the number of total attendances has increased from 1,693 to 1,813 and the average attendance at each session is 37.77 compared with 35.27 for the previous year. Breast-feeding is still increasing here and is now 48 per cent. compared with 44 per cent. for 1934. The amount of artificial-feeding has correspondingly decreased to 38 per cent. while the amount of combined breast and artificial-feeding is practically the same as that of the previous year. This is satisfactory, but there is still room for much improvement. The condition of the infants was fairly satisfactory here, only three showing definite signs of malnutrition. Forty-four toddlers attended, about a quarter of these were underweight, but none suffered from malnutrition. One case was referred to the Orthopædic Clinic and two cases of squint to Dr. Coulter's Clinic. Nineteen expectant mothers attended and were referred to the Newport Ante-natal Clinic. A very large proportion of the nursing-mothers suffered from dental caries and most of those took advantage of the opportunity of attending the dental clinic. Among the nursing-mothers there was no case of malnutrition. A fair amount of simple drugs was given here and a considerable amount of cod liver oil especially to toddlers.

11.—DR. A. S. MONRO, Assistant Medical Officer, Monmouthshire County Council.

	Aberbargoed	Markham	Risca
	%	0/	%
Breast-fed	30.8	30.2	38.4
Breast and Artificially fed	42.3	45.8	36.8
Artificially fed	26.9	24.0	24.8

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

ABERBARGOED.—The figures for attendance at this Clinic show a satisfactory increase all round, and most of the mothers are regular attenders. The figures for feeding show a decrease in breast-feeding, but this is partly compensated by a decrease in wholly artificial-feeding and an increase in breast and artificial-feeding. The decrease in breast-

feeding is probably due to the poor condition of the mothers, many showing signs of anæmia and general debility. There is a certain number however who could breast-feed their babies but have stopped doing so before coming to the Clinic or because the baby has had a slight upset between Clinic days. Drugs and free food are given to many of the mothers, infants and toddlers as this is a very poor district, and all benefit greatly from them. Many of the mothers have improved after having dental treatment. No antenatal work is done here, expectant mothers being referred to the New Tredegar Centre.

RISCA.—The figures for attendance at this Clinic show a slight increase in the average attendance at each session, an increase in the attendance of toddlers and mothers, but a slight decrease in those under one year. The figures for feeding show that while breast-feeding has remained stationary there is a marked decrease in artificial-feeding and an increase in breast and artificial-feeding which is a step in the right direction. The mothers on the whole are healthy, but there are some very poor ones with large families and debilitated after repeated pregnancies. The majority of parents at this Clinic are very willing to follow advice given and many come as a measure of prophylaxis rather than treating the Centre as a curative clinic. Owing to the large numbers attending drugs are extensively used. No ante-natal work is done, the mothers being referred to the Newport Clinic. Many of the poorer mothers find it impossible to attend in Newport because of the 'bus fares and the time away from homes with small children. This is a large clinic and the voluntary helpers who came have been of great assistance.

MARKHAM.—The figures for attendance show a decrease from 22.06 to 21.16 for the average attendance at each clinic, but there is an increase in the number of toddlers and also in the number of mothers seeking advice. Breast-feeding has gone down but breast and artificial-feeding has increased and wholly artificial-feeding decreased. The percentage of breast-feeding in this Clinic should be higher as the general health of the mothers is good and there is less debility and anæmia. Many of the mothers, however, have some distance to come and therefore do not attend the Clinic so soon after the birth of the baby, with the result that baby is taken off the breast before advice can be given. Children under one year are fairly healthy, but rather a large number of toddlers show signs of malnutrition. No ante-natal work is done at this Clinic, expectant mothers being referred to Tredegar or Oakdale Clinics.

12.—DR. E. M. GRIFFITH, Medical Officer of Health, Abercarn Urban District.

METHODS OF FEEDING INFANTS.

Breast-fed ... 52.9% Breast and artificially-fed 5.9% Artificially-fed ... 41.2%

ABERCARN.—The attendance at the Centre remained at its usual high level. Matters have not improved industrially during the year, with the result that in a number of cases it has been found necessary, in order to counteract malnutrition in babies, to give free food, although not to the same extent as formerly. The amount of drugs prescribed at the Centre is very small. Only three expectant mothers were seen. The ante-natal clinic for the area is at Crumlin. There were six mothers who were found to be badly nourished,

but surprisingly few cases of genuine malnutrition were seen in babies. I would like to thank the lady helpers at the Centre, who have not tired in their efforts through all the years.

13.—DR. G. W. PARRY, Abergavenny.

ABERGAVENNY.—This Centre is open on the local market-day—Tuesday—of each week and serves the town and also the country district around. Some babies are brought from a distance as great as 12 miles. The numbers have increased during the year and many children are now being brought who are nearly 5 years old. These are given advice and simple prescriptions which they have made up at the chemist's at their own expense. No free food is given at the expense of the county but two or three are given it by the local voluntary committee. Breast-feeding needs no encouragement and is used by mothers as far as possible as it is easier and cheaper but many mothers are unable to go beyond 5-6 months as they are physically unfit. This physical deterioration seems to me to be slightly more marked, but I am afraid bad and wrong buying and preparing of food is almost as much to blame as lack of means. The difference between families with the same income is often very marked. The housing condition of some children is very bad but is gradually being improved by the local authority. The chief ailments found in mothers are almost entirely alimentary beginning with bad teeth and ending with constipation. Among children the greater part of diseases is confined to those conditions due largely to lack of care, viz., gastro-enteritis, conjunctivitis, impetigo and sore heads. These conditions account for 35 per cent. of all ailments. Respiratory conditions, chiefly bronchitis, come next, closely followed by otorrhea-which is very common-and enlarged tonsils and adenoids. There are many cases of umbilical protrusion but they are slight and quickly clear up. Deficiency diseases are few-six altogether-some or most of these there is no excuse for. Drugs are not much used, chiefly cough mixtures, but advice is the chief thing mothers need. Quite a large number of toddlers are brought to the Clinic and in most cases it is merely advice as to feeding or eyes and teeth that is needed. I am greatly helped by the nurses in attendance and I must record my thanks for the admirable and unfailing visiting of cases that they do.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	Abersychan	Garndiffaith	Pontnewynydd
	%	%	%
Breast-fed	73.4	53.0	57.9
Breast and Artificially fed	-		5.9
Artificially fed	26.6	47.0	36.2

The number of infants on the register contines to increase, and the average attendance is well maintained. The visits to the homes by health visitors have been regular, and they are greatly appreciated by mothers. Breast-feeding is still on the increase and is now becoming more the rule than the exception. This is quite different from what it was a few years ago when the bottle was resorted to very freely. The attendance of toddlers is steadily improving. An aural clinic has been established in the district. It undoubtedly supplies a long-felt want, and it has been in every way a success. Very few cases of malnutrition have been observed at the centres.

15.—DR. T. B. SMITH, Medical Officer of Health, Abertillery Urban District Council.

	1	INFANTS (0-1 year.) CHILDREN (1-5 years.)									
CENTRE No. on Register 31st Dec., 1935	No. on	No. of Att	tendances	No. of Re-visits		Т	Total		Average		
	New Cases under 1 yr.	New Cases I-5 years	Under 1 year	I-5 years	Under 1 year	I-5 years	Attend- ances all ages	Attenda nce per Session			
Abertillery	596	246	25	2033	1173	2279	1198	3477	72.43		
Llanhilleth	339	102	7	1212	702	1314	709	2023	42.14		
Six Bells	337	125	13	1137	645	1262	653	1920	40.00		
Total all Centres	1272	478	45	4372	2520	4855	2565	7420	51.52		

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 502 births compared with 610 in 1930 and 1242 in 1921.

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

Rickets decreased during the year and no new marked case was seen.

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 was encouraged, and the cost of fresh milk should be reduced if possible.

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

Whooping cough was more prevalent than usual and accounted for the death of one infant.

Diarrhœa 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 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.

Breast-feeding of infants was encouraged as much as possible and where the quality of the breast milk showed signs of depreciation owing to various causes amongst the mothers, a daily allowance of fresh milk was granted to the mothers. The various milk products are at the best poor substitutes for breast milk for infant feeding.

Cases suffering from various orthopædic conditions were referred to the orthopædic specialist, Dr. A. Rocyn Jones, for advice and treatment.

Dental treatment for nursing-mothers is provided by the County Council and this treatment proves a great boon to the mothers.

A few toddlers were referred for dental treatment at the County dental clinics.

16.—DR. J. J. O'REILLY, Medical Officer of Health, Chepstow.

CHEPSTOW.—The Centre is held each Thursday. The nurses are in attendance morning and afternoon; the doctor in the afternoon from 2.0 p.m. to 4.0 p.m. The building provides excellent accommodation for the purpose. It is a disadvantage that it is not nearer the centre of the area it serves, but one hears very few complaints under that head (probably the improved 'bus service has greatly helped the centres in the country areas), and of course it is central in the sense that the children are concentrated in and around the town. The total attendances for the year, and the first attendances, show a decrease on the previous figures. This is probably to be explained by Dr. Drapes' absence from the clinic. He became seriously ill during the early part of the year, and, making only a partial recovery, resigned from all active practice. He had been Medical Officer to the Centre since its inception and his sympathetic manner and engaging personality were naturally much missed. Needless to say he carries into retirement the affection and good wishes of all. We have increased the percentage of breast-fed cases during the year, and we aim to continue that tendency. We see no real reason why as many as 90 per cent. of mothers should not breast-feed their infants entirely. The propaganda of the artificial food firms notwithstanding, we hope to reach that standard during the course of the next few years. Meanwhile certain foods are sold at reduced prices, and in cases carefully investigated and found to be very poor, without charge. Of these, Colact is particularly useful. It may be merely a pleasant carbohydrate food without any specific action on milk secretion, but, taken as directed, it gives a number of mothers the comforting sense of having something to pass on to the child, and thus preventing what would be an insupportable drain on their own "strength." For it is typical of the effect produced by the activities of the advertisers that the relation of a mother and her suckling infants appears to suggest, not a kind of symbiosis benefiting both, so much as a variant of the vampire theme, the mother of course being the exsanguinated victim. A few simple drugs are also provided free when they seem called for; they are never served out as mere placeboes. Gross malnutrition has not been met with at any age. There have been several difficult feeding cases under one year, and we have a few delicate toddlers attending. These are from poor homes; usually there are several other children, and some tendency-such as to "chests" or rheumatism-has been grafted on. There have also been a few parents suspected of lacking interest, and our probation officer, Mr. Jones, has followed them up very diligently. But, on the whole, the Chepstow babies are a good lot and, their parents very devoted. There were no serious epidemics during the year. I would like to acknowledge the help and assistance of the voluntary lady helpers, especially Mrs. and Miss Evill and the nurses in the smooth running of the Centre.

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

METHODS OF FEEDING INFANTS.

Breast-fed ... 62% Breast and artificially-fed ... 10% Artificially-fed ... 28%

EBBW VALE.—There has again been an increase in the attendances at the Centre. The distribution of free food at the public expense is only made after strict enquiry into 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 meetings permit, parents are advised to consult their own medical attendants. There is a separate Ante-natal Clinic. No cases of malnutrition were observed among the nursing and expectant mothers or infants who attended the Centre. Very few toddlers attend.

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

MONMOUTH.—Once again I am able to report a very successful year's work at this Clinic. The number of attendances has again increased and the interest in the work of the Clinic has been well maintained. During the year Mrs. Murrell was obliged to resign her post as secretary to the Committee on account of her leaving the district. This is greatly deplored, but the Clinic is fortunate in having found another secretary in Mrs. Lewis, of Michel Troy. At first all children are breast-fed where possible. Subsequently, bottles are substituted in the majority of cases. Very little trouble is experienced in providing suitable dried milks for the infants. There was a considerable increase in the number of attendances at the Centre. No great quantity of free food is given. When it is necessary of course free food is provided but each case is judged on its merits by the Committee. At the Clinic only household remedies and simple mixtures are provided. Prescriptions are given for the cases requiring special medicines. The ante-natal work is specially reported upon by the visiting physician from Newport. Malnutrition is uncommon. A few nursing-mothers have been debilitated and a few infants have been found to be undernourished. The number of toddlers attending has been about average.

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

Breast-fed ... 25.4% Artificial-feeding ... 65.2% Breast and artificial ... 9.4%

RHYMNEY.—The above are the figures of the infants attending the centre during 1935 (about an average of 27 per weekly clinic). Attendance at the Centre has been well up to the average even in bad weather; the number of 27 being about an average attendance each session throughout the year. A considerable amount of free food is given each week in nearly all cases of illness or poor development, owing to the continued unemployment and irregular work in the district. A few simple drugs and ointments are prescribed;

other prescriptions are obtained at the patients' dispensary. Ante-natal work is definitely increasing each year. Some cases are referred to me at the Rhymney Hospital; others go to Cardiff and ultimately to the Maternity Home connected with Cardiff Royal Infirmary at Glossop Terrace. There is definite evidence of under-nourishment of mothers and children compared with times when unemployment and short working days were less prevalent. The conditions are still the same and have been so for many years. The attendance of children of 2 to 5 years at the Centre is gradually increasing, especially for orthopædic treatment at the County Clinic. A number are referred to the dental clinic. Any increase in dispensing would interfere with the other work of the Clinic. Appreciation of the value of the Ante-natal Clinic to those attending, is increasing throughout the district. All cases of infants and mothers needing surgical treatment are sent to the Cottage Hospital for further examination and treatment. A number of cases of circumcision, abscess of breast, etc., are dealt with each year, and some cases admitted. Orthopædic cases are seen by Mr. A. Rocyn Jones, F.R.C.S., at the 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 has acted as secretary for 15 years.

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 there is still a considerable amount of unemployment throughout the County. The service for the provision of infant foods at a little over cost price, therefore, meets a real necessity.

Dried milks, malt extracts and other infant foods to the value of £4,808 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 £1,755 6s. 2d. were given for expectant and nursing mothers and for infants during the year. This included £611 14s. 1d. paid for fresh milk.

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

1919			£140 1	5 0	1927	 	£2,817 18 4
1920			£537 1	8 11	1928	 	£3,844 - 1 1
1921			£5,984	0 0	1929	 	£5,092 18 8
(Coal	Stoppage	e: Dinne	ers also give	en).	1930	 	£4,787 2 6
1922			£2,232 1		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 1	4 0	1934	 	£1,218 7 1
1926			£2,469	7 6	1935	 	£1,755 6 2

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 six years, and, for comparison the year 1912:—

Year	Number Literate	Number Illiterate	Total No. on Roll	C.M.B.	No. holding other Certificates	No. untrained but registered	No. over 60 years of age
1935	227	2	229	217	_	12	28
1934	239	2	241	229	_	12	27
1933	230	3	233	218	_	15	30
1932	240	8	243	224	_	19	32
1931	237	4	241	219	_	22	35
1930	237	4	241	215	_	26	85
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, has considerably decreased, and there are only 2 practising. The remainder are not practising, but as they will not have their certificates cancelled, their names remain on the Roll. The two illiterate midwives are not practising.

The new Midwives Bill which, at the time of writing, is being considered by Parliament, will have a far-reaching effect upon the standard of midwifery. Panels of midwives controlled by local supervising authorities are foreshadowed, which will ensure higher efficiency in this service.

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 1935 was 25, 15 through removal from the County, 3 through death, and 1 through resignation, and 6 transferred to the County Borough of Newport under the Borough extension scheme.

The Chief Inspectress of Midwives is Dr. Mary Scott, Assistant Medical Officer, and there are three District Inspectresses: Nurse O. Griffiths for the Rural Areas, Nurse C. Davies for the Eastern and Western Valleys Areas, 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 449. In addition 132 visits were made, but the mid-

wives 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.

Midwifery scholarships are not now provided by the Education Committee.

1,675 notifications of sending for medical aid, and 123 of cases of still-birth, were received from midwives during the year.

Also 2 notifications of deaths of mothers, 14 notifications of children dying a few hours after birth, and 17 within 10 days of birth, 87 notifications of artificial feeding, 5 notifications from midwives who were liable to be a source of infection, and 4 notifications of having laid out a dead body.

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

High temperature	 80	Incomplete abortions		. 5
Obstructed labour	 29	Abortion threatened		14
Prolapse of cord	 11	Still-birth		21
Hæmorrhage, ante-partum	 64	Unsatisfactory condition of	of child	84
Hæmorrhage, post-partum	 62	Eye affections		120
Prolonged and difficult labour	 563	Doctor engaged		4
Premature birth	 28	Unsatisfactory condition	of mother	57
Abnormal presentation—		Albuminuria		35
Breech	 38	Spina bifida		4
Knee	 1	Eclampsia		6
Face	 10	Tongue tied		1
Hand	 2	Miscarriages		48
Foot ,	 3	Phimosis		2
Arm	 1	Inflamed breasts		7
Miscellaneous	 16	Patients' requests		7
Retained placenta	 63	Miscellaneous		18
Ruptured perineum	 249	Born before arrival		5
Abortion	 13	Pleurisy		1
Hernia	 1	Hare lip and cleft palate		2

Suspension of midwives to prevent the spread of infection was necessary in 23 cases, 10 on account of puerperal fever, 13 pyrexia. Compensation was paid by the Council to seven midwives. One midwife was reprimanded by the Executive Officer.

Letters were sent by the County Medical Officer to 20 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 41 constituent Associations affiliated to the Monmouthshire Nursing Association, and 58 nurses are employed by them. There are in addition six nurses on the staff of the Tredegar Nurses' Home, and two 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 midwifery pupils.

There are seven maternity beds provided at the Home. During the year, 1935, 129 maternity cases were admitted at the Home as compared with 104 in 1934. 101 of these cases were delivered by midwives and 23 by doctors. There were four stillbirths, and two deaths of infants within 10 days of birth. There were 406 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 has now ceased. The grants hitherto made to the Home by the Ministry of Health and now under the provisions of the Local Government Act, 1929, being paid by the County Council. They amount to £125 per annum. An additional grant of £100 per annum to the Maternity Home is included in the County Council's estimates for the year 1936-37.

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 1935, midwives were subsidised in the following areas:—

Llantilio Crossenny.
Goytrey and Llanover.
Tintern and St. Arvans.
Usk.
Llangattock-vibon-avel.
Raglan.

Itton.
Llanfoist and Llanellen.
Llandogo and Trelleck.
Abersychan (Talywain).
Penhow.
Caldicot.

Monmouth.
Llanfrechfa Lower.
Llanarth.
St. Mellons and Rumney.
Marshfield & St. Brides.
Caerwent.
Devauden.

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:—

Metatarsus Varus	 3	Shortening left lower limb	1
Torticollis	 1	Webbed fingers	2
Pes Plano Valgus	 6	Hemiplegia	3
Genu Valgum	 14	Spina Bifida	1
Deformity both hands	 1	No physical signs	7
Semi-membraneous bursa	 1	Local gigantism rt. lower limb	1
No definite diagnosis	 5	-	
Outward Curved Tibia	 . 9		55
Outward Curved Tibia			

His recommendations were as follows:-

or admission to the Country	Branch	of the Ro	val Nation	al Orth	opædic	
Hospital, Brockley Hill						
To wear Splints or other appa	ratus				- 6/1	
To have alterations to Boots						1
Re-examination			****			1
To see X-Ray Specialist		4,				
No treatment required						
Referred to General Hospital						

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 15 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:-

Hemiplegia	 2	Genu Valgum		1
Congenital Equino Varus	 4	Deformity of hands		3
Outward Curved Tibia	 3	Birth Palsy		1
		Congenital dislocation of	hip	1

Since the inception of the scheme 147 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, Pengam, Tredegar, Monmouth, and Chepstow, and supervises their massage and electrical treatment and appropriate after-care when necessary. A close watch is kept upon 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 1935–121 crippled infant children including cases of first diagnosis and re-examinations, were seen at these clinics.

Twelve infants attended the Clinic for massage and electrical treatment during the year, making 202 attendances.

Nine walking instruments, 9 splints, 13 night shoes, and 2 pairs of surgical boots were supplied for these children by the County Council. Alterations to boots were made for 53 children, also 3 alterations to walking instruments, repairs to 2 splints, and 2 to Fairbanks splints. The total cost in this connection was £64 5s. 7d. Infants suffering from Surgical Tuberculosis are treated at the Hospitals of the Welsh National Memorial Association.

In this County there is no excuse for delay in obtaining early treatment. Many cases are discovered by the Health Visitors and the Medical Officers in charge of the Infant Welfare Centres, who notify them to the County Medical Officer, and he 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	 1,702
No. of appointments kept	 1,101
No. of cases given "gas	 1,080
No. of permanent teeth extracted	 3,127
No. of temporary teeth extracted	 1,302
No. of mothers treated	 716
No. of children treated	 364

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. 64 children attended the Clinics during the year and spectacles were prescribed for 42.
- (c).—Tonsils and Adenoids.—55 cases urgently requiring attention and referred from the Infant Welfare Centres received operative treatment at the School Clinics.
- (d).—Otorrhœa.—Weekly Aural Sessions are held at five school clinics and 19 children under 5 years of age attended, making 49 visits.
- 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, was 15, the average duration of stay being 105.4 days. Twelve babies were born. The total number of inmates during the year (including those who were admitted in the previous year) was 16 girls and 12 babies.

Nine girls were discharged, of whom 4 went to relatives and 4 to Homes and 1 to a situation. Of the babies discharged 4 went to relations and 3 to Homes.

Of the girls resident in the Hostel during the year, 5 were from the Borough of Newport, 8 from the County of Monmouth, 1 from Cardiff, and 2 from Brecon.

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 to the amount of £833 9s. 0d. were paid during the financial year. 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 £58 19s. 0d. The fees paid in the year 1934 totalled £362 7s. 0d. Amount collected from husbands, £10 15s. 3d.

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

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, 1935, to 31st December, 1935:—

Public Institutions	Tredegar	Chepstow	Pontypool	Total
Number of Maternity Beds	6	2	4	12
Number of Confine- ments during year	25	6	7	38

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.

Forty cases were examined by Dr. Strachan, and 26 of them were subsequently admitted to the Maternity Hospital of the Cardiff Royal Infirmary. Five other cases were sent to the Maternity Department making a total of 31. 17 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.

7.—REGISTRATION OF NURSING HOMES. — Four Homes have been registered under the Nursing Homes Registration Act, 1927 one at Tredegar (Maternity and Nursing), one at Nantyderry (Maternity), one at Bassaleg (Nursing), 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.

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

P.—INFANT PROTECTION.

The supervision of children under the Children and Young Persons Acts is undertaken by one of the Council's Health Visitors. There were 28 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 and 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. It is surprising how well the children are looked after, considering that in many cases payments by parents are made irregularly and in some cases not at all.

During the year eight cases were removed from the Register for the reasons stated:-

Legally adopted		 2
Left County		 2
Attained the age of	of 9 years	 4

Two new cases were notified during the year.

Q.—CONCLUSIONS.

There is a slight increase in the infant mortality rate over that for the year 1934—61.4 against 57.4 per 1,000 births, the 1934 figures being the lowest on record, and that of this

year being the next lowest.

The infant mortality rate for the year 1915 was 129 per 1,000 births. There are several causes responsible for this remarkable drop in the space of 20 years, but the chief is the Council's Maternity and Child Welfare scheme, which was inaugurated in 1916, and includes home visiting by the health visitors, provision of infant welfare centres and antenatal clinics, supply of milk for expectant and nursing mothers and for infants, etc.

The one section in which very little progress can be recorded is maternal mortality. The maternal death rates have been higher in recent years than they were ten years ago, but this increase is probably more apparent than real, because the classification of maternal deaths has changed and the comparison is not the same. Nevertheless, the rate is much

too high.

We can defer further comment upon this subject until the Lydia Beynon Maternity Home is open. A grant of 75 per cent. of the cost of alteration and adaptation of the premises has been made by the District Commissioner for the Special Areas, and the work has commenced. Difficulties are being experienced in certain directions where helpful co-operation ought to exist and owing to which it is not anticipated that the Home will be open before the end of the year.

The popularity of the infant welfare centres was maintained, and the attendances increased. The average attendance per session was 41.04 as compared with 37.4 in 1934. Ante-natal clinics also were better attended, the average per session being 18.4 (17.2 in

1934).

The National Birthday Trust, acting on behalf of the National Council for Social Service, has again arranged for the free distribution of foodstuffs during the next twelve months to necessitous expectant mothers in the distressed areas of the County. The foodstuffs consist of Ovaltine, Marmite and Dorsella dried milk, and it is expected that the extra nourishment provided to pregnant women will lessen the maternal mortality rate in those areas. This supply of nourishing food to expectant women should do much to improve their general health and so raise their resistance to septicæmia which is the cause of almost half of the maternal deaths which occur in the County.

The Minister of Health has recently issued a circular in which he states that insufficient attention is being given to the health of young children between the ages of 18 months and 5 years. He understands that more than 16 per cent. of the children entering school are found to require treatment for some disease or defect, and suggests that in many cases these conditions could have been quickly cured if adequate supervision of the

health of the children had been exercised throughout the pre-school years.

Mention has frequently been made in these annual reports of the need for better facilities for dealing with the "toddlers." In this County they are visited twice yearly at the homes by the health visitors, and their attendance at the infant centres is encouraged. Treatment is given at the School Clinics whenever the parents desire it. In the year 1935 the following cases of children under 5 years were seen:—Orthopædic Clinics, 55 cases, with 121 re-examinations (15 sent to Orthopædic Hospitals); Dental Clinics, 364 cases; Eye Clinics, 64 cases; Aural Clinics, 19 cases; Tonsils and Adenoids removed, 55 cases.

Any extensive addition to these facilities would require more staff and more clinic accommodation and a special report is being made to the Maternity and Child Welfare Committee upon the subject.

D. ROCYN JONES