

**Report upon maternity and child welfare for the year 1937 /
Monmouthshire County Council.**

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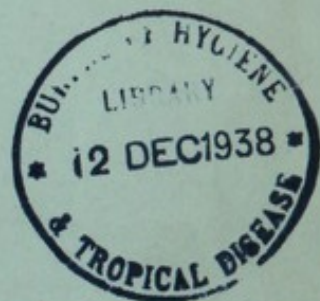
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MONMOUTHSHIRE COUNTY COUNCIL

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

REPORT

UPON

Maternity and Child Welfare

FOR THE YEAR 1937.

D. ROCYN JONES,


County Medical Officer.

22nd July, 1938.



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Monmouthshire County Council

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
NEWPORT,

20th July, 1938.

*To the Chairman and Members of the
Maternity and Child Welfare Committee.*

I have pleasure in presenting to you the Twenty-third 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, 1937, 4,872 live births and 267 stillbirths, making a total of 5,139 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 4,861, and 284 stillbirths, a total of 5,145.

Of the 5,139 notified births, 5,118 were notified by midwives and 21 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.

One of the County Health Visitors is engaged in School Medical Inspection work only, as she has 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 39 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 24.

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 Rural 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.

Nurses R. Davies and P. G. Waters are the Mental Deficiency Enquiry Officers for the Western and Eastern areas of the County. They also have Infant Welfare Districts.

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 four times yearly until the child attains the age of five.

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 it is gratifying to record that they meet them capably.

I.—VISITS PAID.—During the year, 56,919 visits were paid to the homes as follows :

NEW CASES. Babies seen	Re-visits under 1 year of age	Re-visits 1 to 5 years	Fruitless visits	Total Visits
1937—4,775	13,041	40,225	4,221	62,262
1936—5,050	13,637	34,315	3,917	56,919
1935—5,339	13,702	30,756	2,487	52,284
1934—5,401	14,933	33,695	1,502	55,531
1933—5,580	15,301	32,475	1,078	54,434
1932—5,762	16,684	23,667	907	47,020

1931.—First visits, 6,056 ; Fruitless visits, 940 ; Re-visits under 1 year, 15,544 ; Re-visits 1-5 years, 23,055 ; Total, 45,595.
 1930.—First visits, 6,731 ; Fruitless visits, 1,133 ; Re-visits under 1 year, 15,372 ; Re-visits 1-5 years, 22,909 ; Total, 46,145.
 1929.—First visits, 6,762 ; Fruitless visits, 1,122 ; Re-visits under 1 year, 15,930 ; Re-visits 1-5 years, 23,364 ; Total, 47,178.
 1928.—First visits, 6,481 ; Fruitless visits, 1,047 ; Re-visits under 1 year, 10,881 ; Re-visits 1-5 years, 18,066 ; Total, 36,475.
 1927.—First visits, 6,031 ; Fruitless visits, 775 ; Re-visits under 1 year, 14,246 ; Re-visits 1-5 years, 21,496 ; Total, 42,548.
 1926.—First visits, 7,467 ; Fruitless visits, 416 ; Re-visits under 1 year, 22,366 ; Re-visits 1-5 years, 27,751 ; Total, 58,000.
 1925.—First visits, 7,872 ; Fruitless visits, 590 ; Re-visits under 1 year, 22,541 ; Re-visits 1-5 years, 30,641 ; Total, 61,644.

II.—METHODS OF FEEDING OF INFANTS.—Of the new cases visited it was found that 3,567 children were being brought up entirely on the breast (74·7 per cent.) whilst 961 were being bottle fed (20·01 per cent.), and 191 were both breast and bottle fed (4·0 per cent.). It was discovered on subsequent visits that in 368 instances (7·7 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 56 cases the child only survived birth by a few hours (1·1 per cent.).

The percentage of breastfed 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 Visitor's 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 1·4 per cent. in the number of babies breast-fed, as compared with the previous year (1936). The percentage has been gradually falling for the past few years. In 1925 it was 86·2.

III.—SANITARY DEFECTS AT THE HOMES.—In accordance with the arrangements made at the initiation of the scheme, visits were paid by the Health Visitors to 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, 1936, 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 896 to new cases, and 1,046 re-visits, a total of 1,942 visits. The figures for the last year were 921 new cases, and 1,368 re-visits, a total of 2,289 visits.

PUERPERAL SEPSIS.—During the year 1937 notification of 37 cases of puerperal pyrexia were received under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, from the District Medical Officers of Health. Ten other cases of high temperature were also notified.

Nineteen of the cases were removed to hospital, and two deaths occurred.

All notifications 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 cases.

The Registrar-General's list of deaths during the year showed 8 from Puerperal Sepsis. In addition there were 2 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.—Thirty-two cases of this disease were discovered during visits to homes, and 19 re-visits paid, as against 10 and 9 re-visits in the year 1936.

Twenty-seven deaths were registered in children under one year of age, giving a death rate of 5·5 per 1,000 births, as compared with 4·1 for the year 1936.

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. 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 warm weather. During these months, the mothers attending the County Maternity and Child Welfare Centres are warned of the measures necessary to prevent the disease, and printed instructions to mothers are distributed by the Health Visitors at homes when cases are discovered.

VI.—OPHTHALMIA NEONATORUM.—Twenty-four cases were notified under the Public Health (Ophthalmia Neonatorum) Regulations, as compared with 14 cases in the year 1936, and 23 in 1935. These cases, together with other cases of eye trouble reported by the Midwives making a total of 121 cases, were followed up by the Health Visitors, who paid 534 visits to them.

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 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 121 cases as follows:—

NUMBER OF CASES VISITED.			
	Acute	Slight	Total
Brought forward from last year	8	—	8
New cases—			
Both eyes	14	63	77
One eye only	6	30	36
	<hr/> 28	<hr/> 93	<hr/> 121
Number of cases which attended hospital :			
As out-patients	6	—	6
As in-patients	2	—	2
Number of cases in which there was neglect on the part of the midwife	—	—	—
RESULTS :			
Completely cured	26	92	118
Blind—both eyes	—	—	—
Blind—one eye	—	—	—
Died	1	1	2
Left County	1	—	1
Cases still being followed up at the end of the year	—	—	—
	<hr/> 28	<hr/> 93	<hr/> 121

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

VII.—STILLBIRTHS.—The number of registered stillbirths was 284, which works out at 5·84 per 100 live births, a decrease of ·23 compared with the figure of 1936, which was 6·07 per 100 live births. This year's rate is equal to ·90 per 1,000 of population. It continues to be abnormally high, and compares unfavourably with the rate for England and Wales, which for 1937 was ·60 per 1,000 of population.

C—VITAL STATISTICS.

The area of the Administrative County in acres at the 31st December, 1937, was 328,881. 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 112 infants died within one week of birth, and 169 died within the first month of birth, whilst 305 died within the first twelve months. With the figure of 284 stillbirths there was a total of 595 lives lost to the community.

The infant mortality rate per 1,000 births is 63·9, as compared with 61·7 for 1936. In 1935 the rate was 61·4; in 1934, 57·4; in 1933, 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 6·5 above the rate for 1934, which was the lowest ever recorded in the County.

There were 4,861 live births registered during the year, a decrease of 227 when compared with the number for 1936, and the birth rate is 15·5 per 1,000 of population, compared with 15·9 in 1936. In the year 1935 it was 16·1; in 1934 16·0; in 1933, 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. It will be seen that the rate for 1937 is the lowest on record.

The number of births of illegitimate live children was 165, or 3·39 per cent. of all births. Last year the number was 178 (3·49 per cent.), and for the year 1935, 174 (3·2 per cent.).

The number of illegitimate stillbirths was 14.

The number of deaths of illegitimate children under one year of age was 9, or 1·8 per 1,000 of all births, and 54·5 per 1,000 of illegitimate births. Last year the number of deaths was 14, or 2·7 per 1,000 of all births, and 78·0 per 1,000 of illegitimate births.

C—VITAL STATISTICS FOR THE YEAR 1937.

DISTRICTS	Esti- mated Popula- tion	BIRTHS.						DEATHS.				INFANTILE MORTALITY.																
		Legitimate		Illegitimate		Total		Grand Total	Rate per 1000 of popula- tion	Male	Female	Total	Rate per 1000 of popula- tion	Total Deaths under One Year				Ages at Death of Children under One Year										
		Male	Female	Male	Female	Male	Female							Legiti- mate	Illegiti- mate	Total	Rate per 1000 births	Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 1 month	1—3 months	3—6 months	6—9 months	9—12 months	Total under 1 year	
URBAN—	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*
ABERGARN	18,750	150	138	2	4	152	142	294	15.6	121	106	227	12.1	17	—	17	57.8	8	3	—	1	12	—	4	—	1	17	
ABERGAVENNY	7,950	56	55	4	3	60	58	118	14.8	69	58	127	15.9	4	1	5	42.3	3	1	—	—	4	—	—	—	—	5	
ABERTILLERY	28,000	237	235	8	3	245	240	485	16.9	199	166	365	12.7	34	2	36	74.2	14	4	2	1	21	5	3	4	2	35	
BEDWAS & MACHEN	8,462	72	61	2	3	74	64	138	16.3	56	36	92	10.8	11	—	11	79.7	—	2	—	—	1	3	2	2	3	12	
BEDWELLY	28,040	280	233	7	12	287	245	532	18.5	175	140	315	10.9	33	1	34	63.7	13	1	3	2	19	4	3	4	1	31	
BLAENAVON	10,000	67	60	3	4	70	64	134	13.4	91	80	171	17.1	11	—	11	82.0	5	2	2	—	9	1	1	—	—	11	
CAERLEON	3,347	20	15	—	—	20	15	35	10.4	28	13	41	12.2	3	—	3	85.7	1	1	—	—	2	2	—	—	—	4	
CHEPSTOW	4,130	39	31	3	1	42	32	74	17.9	23	20	43	10.4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
CWMBRAN	10,950	80	68	6	1	86	69	155	14.1	86	60	147	13.4	12	—	12	77.4	7	1	1	—	9	2	1	—	—	12	
EBBW VALE	29,850	265	240	5	5	270	251	521	17.4	240	205	445	14.9	49	1	50	95.9	17	3	5	—	25	12	5	3	1	48	
MONMOUTH	4,828	38	28	5	—	43	28	71	14.7	34	26	60	12.4	1	1	2	28.1	—	1	3	2	—	1	—	—	—	2	
MYNYDDISLWYN	13,320	104	120	6	1	110	121	231	17.3	72	68	140	10.5	10	—	10	43.2	1	3	2	—	6	2	—	—	—	10	
NANTYGLLO & BLAINA	11,800	84	74	1	5	85	79	164	13.8	95	73	168	14.2	9	—	9	54.8	2	2	—	—	4	2	1	1	1	9	
PONTYPOOL	40,540	304	301	8	10	312	311	623	15.3	278	252	530	13.0	37	—	37	59.3	15	—	—	1	16	4	8	5	4	37	
RHYMNEY	9,576	83	60	1	1	84	61	145	15.1	76	54	130	13.5	16	—	16	110.3	3	—	—	1	4	3	4	2	3	16	
RISCA	14,900	106	101	5	6	111	107	218	14.5	121	69	190	12.6	7	—	7	32.1	3	1	—	—	4	1	1	1	—	7	
TREDEGAR	21,140	167	157	5	9	172	166	338	11.2	138	114	252	11.9	24	1	25	105.0	12	4	—	—	17	3	2	2	1	25	
USK	1,218	10	10	—	—	10	10	20	16.4	4	8	12	9.8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
RURAL—																												
ABERGAVENNY	8,355	40	50	1	4	41	54	95	11.3	54	47	101	12.0	1	—	1	10.5	—	—	—	—	—	1	—	—	—	1	
CHEPSTOW	8,566	62	53	2	3	65	56	121	14.1	49	45	94	10.9	6	—	6	49.5	2	—	1	—	3	3	—	—	—	6	
MAGOR & ST. MELLONS	16,030	120	92	2	4	122	96	218	13.5	92	75	167	10.4	13	—	13	59.6	4	2	1	1	8	2	1	1	1	13	
MONMOUTH	5,900	37	33	1	4	38	37	75	12.7	40	43	83	14.0	4	1	5	66.6	1	—	—	—	1	1	—	—	—	3	
PONTYPOOL	5,349	35	19	—	2	35	21	56	10.4	30	15	45	8.4	1	—	1	17.8	1	—	—	—	1	—	—	—	—	1	
Grand Totals, 1937	312,300	2,456	2,240	78	87	2,534	2,327	4,861	15.5	2,171	1,773	3,944	12.6	302	9	311	63.9	112	31	17	9	169	50	36	31	19	305	
Totals for the year 1936	319,940	2,515	2,395	90	88	2,605	2,483	5,088	15.9	2,192	1,735	3,927	12.2	293	21	314	61.7	123	27	11	12	173	52	34	32	20	311	

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

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

Districts	Present Year	(1936)	Districts	Present Year	(1936)
URBAN—			Mynyddislwyn	43·2	(74·0)
Rhymney	110·3	(51·7)	Abergavenny	42·3	(46·7)
Tredegar	105·0	(49·7)	Risca	32·1	(59·3)
Ebbw Vale	95·9	(61·1)	Monmouth	28·1	(42·2)
Caerleon	85·7	(102·5)	Chepstow	—	(58·8)
Blaenavon	82·0	(110·3)	Usk	—	—
Bedwas & Machen	79·7	(43·1)	RURAL—		
Cwmbran	77·4	(59·7)	Monmouth	66·6	(35·7)
Abertillery	74·2	(68·6)	Magor & St. Mellons	59·6	(49·5)
Bedwellty	63·7	(63·1)	Chepstow	49·5	(69·3)
Pontypool	59·3	(56·8)	Pontypool	17·8	(65·5)
Abercarn	57·8	(74·4)	Abergavenny	10·5	(57·6)
Nantyglo & Blaina	54·8	(65·9)			

CAUSES OF DEATH UNDER ONE YEAR OF AGE.

CAUSES.	1937	(1936)	(1935)	(1934)
All causes	311	(314)	(324)	(321)
Typhoid Fever	—	(1)	—	—
Measles	4	(1)	(7)	—
Diphtheria	—	(1)	—	(1)
Whooping Cough	6	(14)	(7)	(13)
Influenza	2	—	—	(4)
Cerebro-spinal Fever	—	(1)	(1)	—
Meningococcal meningitis	—	—	—	—
Pulmonary Tuberculosis	—	—	—	(2)
Other Tubercular Diseases	4	(3)	(2)	(3)
Cancer (Malignant disease)	—	—	(1)	—
Syphilis	—	(3)	—	—
Bronchitis	23	(18)	(21)	(13)
Pneumonia (all forms)	41	(48)	(43)	(28)
Other Respiratory Diseases	—	—	(2)	(3)
Diarrhoea	27	(18)	(24)	(22)
Digestive Diseases	4	(6)	(3)	(2)
Acute and Chronic Nephritis	—	—	—	(1)
Congenital Debility	169	(174)	(179)	(183)
Violence	3	(6)	(5)	(7)
Other Defined Diseases	28	(20)	(29)	(39)
Causes ill-defined or unknown	—	—	—	—

The Vital Statistics for England and Wales for the year 1937, compiled by the Registrar-General, are as in the subjoined table. The Monmouthshire figures are given for the purpose of comparison.

	Birth Rate per 1,000 of population.				Death Rate per 1,000 living		Deaths under one year per 1,000 births	
	Live Births	Still Births	Live Births	Still Births				
	1937	1937	1936	1936	1937	1936	1937	1936
ENGLAND AND WALES	14·9	0·67	(14·8)	(0·62)	12·4	(12·1)	58	(59)
125 County Boroughs and Great Towns, including London	14·9	0·67	(14·9)	(0·66)	12·5	(12·3)	62	(63)
148 Smaller Towns (estimated resident populations, 25,000-50,000 at Census 1931)	15·3	0·64	(15·0)	(0·67)	11·9	(11·5)	55	(55)
London	13·3	0·54	(13·6)	(0·50)	12·3	(12·5)	60	(66)
MONMOUTHSHIRE	15·5	0·90	(15·9)	(0·94)	12·6	(12·2)	63	(61)

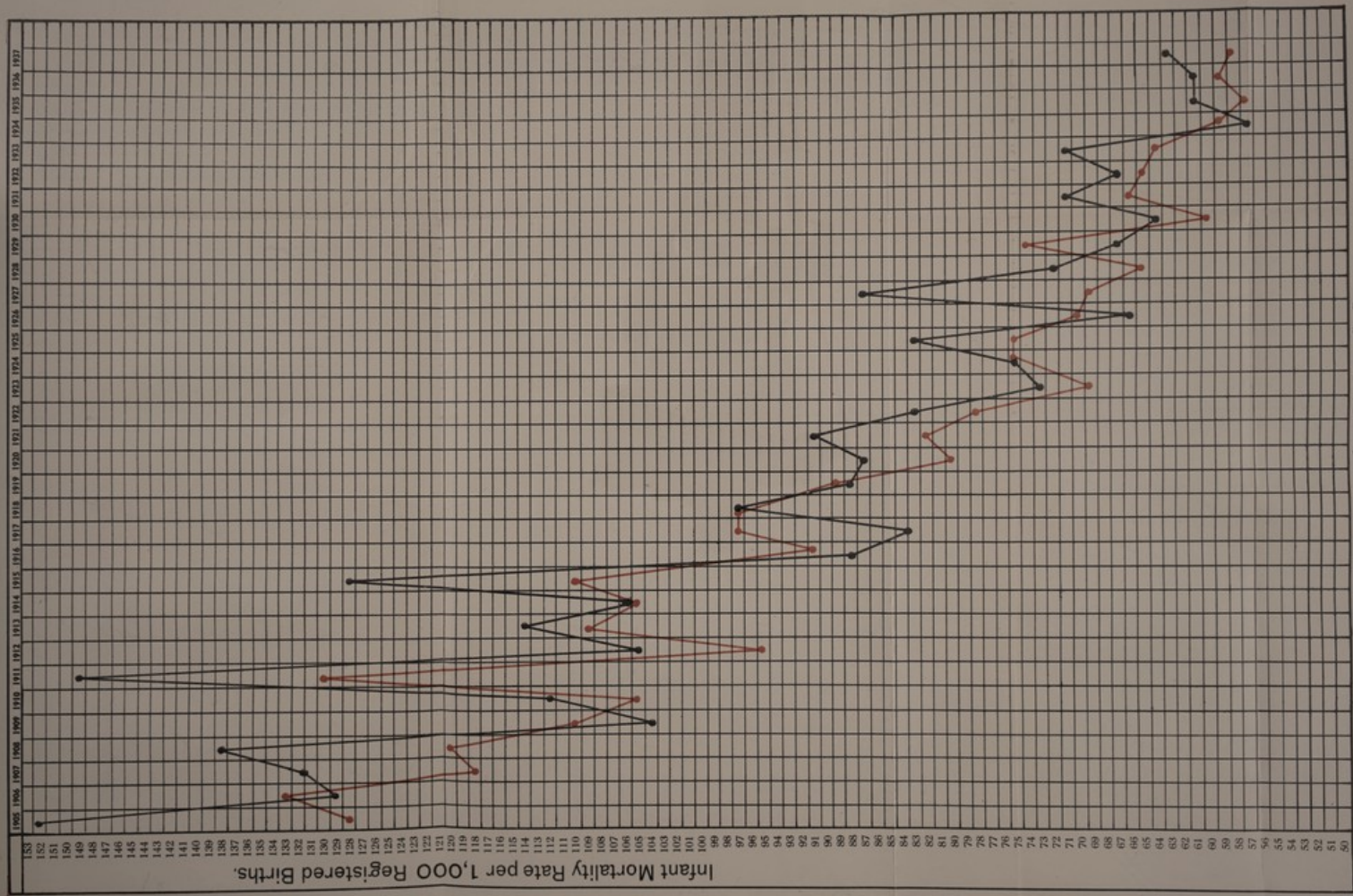
In all cases the estimated populations as supplied by the Registrar-General have been used for the purpose of this table.

NEO-NATAL MORTALITY. The large proportion of deaths during the first four weeks of life (169 out of 305 or 55·4 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 thirty years, the neo-natal rate remains practically the same. This year's percentage is ·3 above that of last year.

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 after-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 22; 8 from puerperal sepsis and 14 from other puerperal causes. This is equal to a rate of 4·5 per 1,000 live births, which is considerably lower than the figure for last year (6·8). Calculated upon total births (live and stillbirths) the figure is 4·27 per 1,000.



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

The rate continues to be considerably higher than the rate for England and Wales, which for the year 1937 was 3·23 per 1,000 live births registered.

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

1937	....	4·5	1933	....	7·19	1929	....	7·4
1936	....	6·8	1932	....	5·6	1928	....	5·5
1935	....	6·8	1931	....	5·3	1927	....	5·6
1934	....	6·2	1930	....	5·3	1926	....	3·8

The maternal mortality rate remains at a fairly high figure. It is satisfactory to note, however, that the attendance at the Ante-Natal Clinics has again increased. The 17 Clinics were visited by 2,814 women (54·7 per cent. of the total number of births—live and still— notified during the year compared with 42·8 per cent. in 1936, who made 7,778 attendances compared with 6,374 in 1936, the average attendance per session being 22·3 compared with 19·0 in 1936 and 18·4 in 1935. This means that 54·7 per cent. compared with 42·8 per cent. in 1936 had at least one ante-natal examination.

Notifications of puerperal pyrexia in the practices of midwives are still numerous but it is satisfactory to know that the number of deaths from Puerperal Septicæmia has dropped from 16 in 1936 to 8 in 1937. It is this decline in deaths due to sepsis which has been the chief factor in reducing our Maternal Mortality Rate from 6·8 per 1,000 live births in 1936 to 4·5 per 1,000 live births in 1937. The death rate from Puerperal Sepsis in Monmouthshire has been high for several years and towards the end of 1936 special schemes were started in an effort to fight this fatal disease.

(a) A generous supply of antiseptic was supplied free of cost to all midwives for each patient confined. It appeared that certain midwives were not making use of antiseptics as freely as necessary or were purchasing an inferior quality of antiseptic, their excuse being that they could not afford to do otherwise. While it was recognised that the use of Antiseptics alone and without the other necessary precautions would not reduce the sepsis rate, it was felt that each patient should be sure of the benefit of this extra safeguard.

(b) Sterile outfits were supplied throughout the year at cost price or at a sum less than cost according to the financial condition of the patient. The response to this offer by patients and by midwives has been remarkable and during the year 3,382 of these outfits were sold.

(c) Large amounts of special foods were supplied to us for distribution to necessitous expectant mothers in the distressed areas of the County by the Birthday Trust Fund and there is little doubt that this has also been an important factor in the fight against sepsis. Patients whose general health is improved by these foods are better able to resist infection, or, if infected are better able to fight and overcome that infection.

(d) Lastly the supplying of a special preparation free of cost for those patients who were potentially septic or who had developed sepsis was an important factor. In this the co-operation of the General Practitioner was required and it is gratifying to know that most practitioners have availed themselves freely of this supply.

This rather expensive drug was sent to certain distributing centres in all areas of the County and could be obtained free of cost and at a moment's notice by any practitioner requiring the drug for his patient. There is no doubt that this remarkable preparation introduced into this country by research workers in Queen Charlotte's Maternity Hospital, London, in 1936 has been a big factor in reducing maternal deaths from sepsis.

In 1936 there were 10 deaths from abortion and in 6 of these cases the cause of death was septicæmia. In 1937 there were 7 deaths from abortion and in 5 of these the cause of death was septicæmia.

Professor Strachan, the County Consultant Obstetric Surgeon, made the following striking remarks upon obstetrical problems and maternal mortality in his Presidential Address to the South Wales and Monmouthshire Branch of the British Medical Association at Cardiff, on the 24th June, 1937.

SOME OBSTETRICAL PROBLEMS

by

GILBERT I. STRACHAN, M.D., F.R.C.P., F.R.C.S., F.C.O.G., Professor of Obstetrics and Gynæcology in the University of Wales.

In discussing with you some obstetrical problems I realise at the outset that, in spite of a vast amount of clinical observation and experimental research, the subject of obstetrics is bristling with problems, and that our actual definite knowledge is really small. On this occasion, however, an extended consideration of these problems would take up too much time and space so that only some of the more outstanding can be considered; and one of the most important of these is the problem of disproportion.

Obstetrical disproportion is usually relative, and only in rare cases do we meet absolute disproportion, as in the case of a markedly contracted pelvis or a hydrocephalic head. The problem presented, then, is usually that of a head not yet engaged in the brim of a pelvis whose external measurements are a little below the standard accepted as the normal, and the problem is often exaggerated by the treatment employed.

It has to be remembered that the most commonly associated consideration in such case is an occipito-posterior position, and as nothing can be done to rectify this in pregnancy, arrangements have to be made for turning the head and shoulders into an anterior position, if necessary, usually late in labour.

Perhaps the most common interference practised is the induction of premature labour, and in considering this it should be remembered that induction before the 36th week offers only a poor prospect of survival of the fœtus. It should thus be delayed as long as possible, and in any case until the head can be pressed down into the pelvis only with difficulty. Again the method of induction is important. Lately simple puncture of the membranes has returned to great favour, and this is an excellent method, especially in multiparæ with lax passages, but in primiparæ it is often followed by slow cervical dilatation and corresponding danger to fœtal life. In primiparæ then the course of labour is likely to be more satisfactory if induction is by the insertion of bougies as this retains the dilating force of the bag of membranes, but a certain very small proportion of maternal deaths will occur in any large series of such cases.

An alternative line of treatment is to perform Cæsarean section about term. This will nearly always secure a live child, but a definite maternal mortality of at least 1 per cent.—10 per thousand—is to be expected under ideal conditions.

There can be little doubt but that both these lines of treatment have been much abused, and that in many cases so treated normal or assisted birth would have occurred had the woman been allowed to go into labour. In this way then the remarkable adaptability of

the head to fit itself into a small pelvis is so often forgotten, and how adaptable a particular foetal head may be rendered by moulding of the skull bones cannot be known in any individual case unless the woman be given a chance to show what is possible in this way by a trial of labour. If she be left for 8 hours with good contractions and for one hour after rupture of the membranes without any vaginal examinations, in few of these cases will natural delivery fail to occur, often with surprising ease.

Again in malpresentations it should be remembered that in 50 per cent. of cases a transverse lie will right itself into a vertex with the onset of labour pains. Regarding breech presentations, prophylactic version will be successful in not more than 60 per cent. of cases, and the more gently it is applied the more successful it will be.

Again, if this manipulation be too forceful the placenta may be separated and the foetus die so that we may cause the very thing we try to prevent.

It has to be emphasised also how difficult ante-natal examination may be, and how a breech may be mistaken for a vertex or *vice versa* according to the adiposity or rigidity of the patient.

Maternal Mortality has been much, perhaps too much, before the profession and the public of recent years, and this subject bristles with problems. Amongst much that is obscure two points stand out (1) that the most important single cause of maternal mortality is puerperal sepsis, and (2) that over any large series of cases the incidence of maternal mortality varies directly according to the amount of obstetric interference practised. Many problems surround puerperal sepsis and we all know that it may occur, and fatally in untouched cases, also that in other cases with much intrauterine manipulation no sepsis may appear. But in spite of these variations, in any large number of cases investigated the above generalisation regarding the influence of obstetrical interference holds good. This point is not yet sufficiently appreciated by the profession in all countries and it is beyond question that a large proportion of obstetrical complications are indeed manufactured by the unnecessary or too early application of forceps or by other unnecessary interference. Obstetrical teaching should always impress the value of conservatism, and the dangers of internal interference.

It is usual in investigations and reports to divide maternal deaths into preventable and unpreventable, but in practice the matter is not usually so simple, and in probably the majority of cases it is honestly difficult to know whether a particular mortality could have been prevented.

Ante Partum Haemorrhage whether accidental or inevitable still remains a grave problem, and certainly cannot be prevented. It is clear that in many cases a large element of shock is present which bears no relationship to the amount of blood lost and this may be fatal. This shock may be aggravated by energetic but well meant methods of delivery, such as *accouchment force* so that one principle in the treatment of these cases should always be to interfere as little and as seldom as possible. Thus, simple rupture of the membranes or the application of Willett's forceps are to be preferred to the more vigorous version, while, especially in selected cases of central placenta prævia, Cæsarean section may inflict the least trauma. *Accouchment force* for the above reason should never be employed, and it has caused many deaths.

Primary Inertia appears to be on the increase, and, especially in domestic practice, represents a difficult problem. In many cases the conditions of labour are quite normal but progress is slow owing to weak pains, and in such cases, and especially if the membranes

are intact, it has to be remembered that the patient is in no danger except possibly from unwise interference on the part of the attendant. But the problem is often to convince the patient, and especially the relatives, of this fact, and it is usually on account of pressure from this direction that the practitioner may be put off his judgment and may be pressed to interfere too soon, often with disastrous results. In no case does hospital treatment, with the absence of relatives, give better results.

A major consideration and problem at the present time to many of us is *the future of obstetrical practice in this Country*. From being entirely in the hands of midwives obstetric practice became almost entirely in the hands of doctors, but during the present century and since the passing of the Midwives Act of 1902 more and more has tended to revert to midwives until at present when about 65 per cent. of all deliveries are carried out by them.

The formation of a municipal and County salaried Midwives service under the recent Midwives Act is now accomplished, and this might appear to be the first step in the unification of obstetrical services on a national basis. It is increasingly felt that obstetric practice should be confined to a class of medical men who are fond of the work, and who are known to be expert at the work, and this is the present position. The majority opinion is that such a panel should be chosen from men in general practice and that they should be supported by specialist services but certain Public Health Authorities favour a full time service. Either of these could easily be associated with the newly established midwives service, but an essential in any scheme of national development is that the doctor who supervises the patient in the ante-natal period should also supervise any difficulties that may arise during labour. It is our opinion that to eliminate the family doctor from obstetrics as by a full time service would be a grave error and would destroy that confidence which is so important a thing to the woman in her time of stress.

My considerations have covered only a few of the problems that confront us daily in obstetrical practice, and the main points I would like to stress are the frequency with which complications may be caused by interference, often unnecessary and unjustifiable, and how much may be accomplished by patience and conservatism. It is always of value to take stock of our difficulties and to discuss them together: only in this way can ultimate solution be achieved.

The following are the reports of the Medical Officers in charge of the Ante-Natal Clinics.
1.—DR. MARY SCOTT, Assistant Medical Officer, Monmouthshire County Council.

BLAENAVON.—This Clinic is open for one whole day each month. There was an increase in the number of patients who attended during the year. The new patients numbered 95 compared with 67 in the previous year and the average monthly attendance was 25.2 compared with 16.36 in 1936. Six of the patients who attended were not pregnant. No patient had to be referred from this Clinic during the year to the Venereal Disease Department of the Royal Gwent Hospital. This compares very favourably with the number sent to this Department in the year 1936—which was four. Twenty-six patients suffered from varying degrees of dental Caries. Twelve of these accepted treatment, and had their mouths put into a healthy and clean condition for their confinement. Twenty-nine patients suffered from high blood pressure or from Albuminuria or from a combination of both.

There were six patients attending who had one of the minor forms of heart disease—all of these went through pregnancy and confinement successfully. Only two cases of malpresentation were noted. With the exception of three patients all were confined at home. Two went as private patients to Abergavenny Hospital and one to Tredegar Maternity Home. Ten patients suffered from malnutrition; that is a percentage of 10.5 of patients who attended this clinic.

BLAINA.—This Clinic is held on alternate Thursdays and is open for the whole day. The number of new patients who attended was 112 compared to 139 in 1936, while the average attendance per fortnight dropped from 17·68 to 16·68. There is no doubt that this drop in the attendance of the expectant women in this area is almost wholly due to the definite decrease in the birth rate of this area—Unemployment, especially in Nantyglo, has been very prevalent for years in this area. Many of the younger men and women who have left their homes to seek work elsewhere have been successful and have married and settled in other parts of the country.

This migration was very noticeable amongst the young people here about four or five years ago and it is now that the effect of it is beginning to tell in the birth rate.

Eight of the patients who attended were not pregnant. Only one patient had to be referred to the Venereal Disease Clinic at Newport. Unfortunately her pregnancy terminated in a stillbirth. Eight patients were offered treatment for dental caries but only two accepted and had the carious teeth extracted. Twenty-nine patients had albuminuria or high blood pressure or both. Six patients were found to be suffering from heart disease in one of its forms but none from a grave type of this disease. Six cases of malpresentation were found—one patient, a primipara with malpresentation of the child was advised to apply for examination by the County Obstetrical Specialist. She refused to do this and was confined at home after a long, difficult and painful labour.

Fifteen patients, that is 13·4% suffered from malnutrition.

CHEPSTOW.—This Clinic is held once each month for one whole day. The new patients numbered 81 compared with 77 in 1936 and the average monthly attendance was 19·75 compared with 18·81. 17 patients attended from the adjoining area of Gloucestershire. Three patients who were not pregnant attended. No patients from this area were referred to the Venereal Diseases Clinic during the year. Seventeen patients had Dental Caries, but only twelve accepted appointments, and were treated by the County Dental Officer. Twenty-five patients suffered from high blood pressure or Albuminuria or both. The number of patients shewing an abnormal heart condition was rather high, namely nine or a little over 11 per cent. Four cases of malpresentation were noted. Six cases of malnutrition were found; that is a percentage of 7·4.

EBBW VALE.—This Clinic is held fortnightly on Alternate Tuesdays. The total number of new patients who attended during the year was 200 compared with 173 in 1936, while the average fortnightly attendance was 21·04 compared with 19·8. Eighteen of the patients were confined during the year in Tredegar Maternity Home. Three patients were referred to the Royal Gwent Hospital Venereal Disease Department. One did not keep her appointment, but the remaining two attended and had treatment. Fourteen patients had Dental Caries but only three of these consented to having dental treatment. Forty-seven patients had Albuminuria or high blood pressure or both.

One patient was referred to the Consultant and was admitted to Hospital at five months for kidney trouble. She remained there two months and was then confined, the baby being premature and stillborn. Another patient whose condition was found to be abnormal was admitted to the Maternity Hospital—She was under observation there for several days and was then discharged and had a living healthy baby in her own home.

One patient who attended was mentally deficient and another suffered from Pulmonary Tuberculosis. Three patients had heart abnormality in a mild form. One baby was born with Spina Bifida—It lived only fourteen days. Nine cases of malpresentation were noted. Only eight patients, that is 4% were found to suffer from malnutrition.

NEW TREDEGAR.—This Clinic is held monthly for one whole day. The new patients who attended increased from 117 in 1936 to 151 in 1937, while the average attendance in 1937 was 29·54 compared to 22·83 in the previous year. Four of the patients who attended were not pregnant. Four patients were referred to the Venereal Diseases Clinic and three received treatment—In the case of one, treatment was found to be unnecessary. Twenty-seven patients had Dental Caries but only six would consent to an appointment being made for treatment by the County Dental Officer. Forty-one patients had either Albuminuria or high blood pressure or both. Heart disease, in a mild form, was present in the case of five patients. Seven cases of malpresentation were found. One patient was offered an appointment for examination by Obstetric Specialist—She refused to accept it and had a premature stillborn child. This same patient had had an appointment made for her in 1936 in order that she should receive advice in birth control; she did not keep the appointment as arranged, with the result that she had in 1937 the premature stillbirth already mentioned. Eight patients were found to be suffering from malnutrition; that is 5·3% of the new patients who attended.

PONTYPOOL.—This Clinic is held on alternate Tuesdays. During the year 255 new patients attended compared with 217 in 1936 and the average attendance per fortnight was 33·65 compared with 25·45 in 1936. Only two non-pregnant patients attended this Clinic. Five patients were referred to the Royal Gwent Hospital Venereal Diseases Department. In the case of one it was found unnecessary to give treatment; one did not keep appointment made; one started treatment but did not continue to attend the Hospital and had her sixth premature child, only two of whom are alive; two continued treatment up to time of confinement. Fifty-six patients suffered from dental caries and twenty of these accepted treatment for this condition.

Eighty-two patients had Albuminuria or high blood pressure or both of these conditions.

Eleven patients shewed signs of heart disease of varying degrees of severity. One of these patients had also Chorea as a complication. She was able to have plenty of rest and care in her own home and was carefully watched by her own doctor. Up to the end of the year she had not been confined but there is every hope that she will be safely confined in her own home. Several patients were confined in the Tredegar Maternity Home, two of them being sent there at the County Council's expense because of unsatisfactory home conditions.

One patient who had not attended for two months was found to have developed marked Albuminuria and high blood pressure. She was immediately put under her own doctor's care as she refused treatment in a Maternity Hospital. She was confined of living child but had several fits afterwards but recovered. She had never consulted her doctor during her pregnancy and had she not, through the ante-natal Clinic been put in touch with him, the pregnancy would have had a less happy ending. One elderly patient suffering from anæmia, marked dental caries, and toxæmia and whose pregnancy was complicated by uterine fibroids surprised everyone by giving birth to a particularly healthy child. She had refused to have examination by County Obstetrical Specialist.

Seven cases of malpresentation were found at the Clinic. Malnutrition was present in 15, that is in 5·9% of the patients.

TREDEGAR.—This Clinic is held every Wednesday afternoon. 239 new patients attended compared with 234 in 1936. The average attendance, in spite of the increase of new patients, dropped slightly from 15·14 in 1936 to 14·26 in 1937.

Two patients who were not pregnant attended. Seven patients were referred to the Venereal Diseases Clinic at the Royal Gwent Hospital. One of these was found to give a negative reaction and attendance was discontinued. One attended this Clinic only twice and so ceased treatment before she was cured. One patient did not keep appointment and so had no treatment. The remaining four attended more or less regularly. Twenty-one

SCHEDULE OF ANTE-NATAL CLINICS.

Clinic	Premises Used	Day and Time of Ante-natal Clinic	Date of Opening	Medical Officer in Charge	Health Visitor	District served by the Clinic	No. of New Cases attended	Re-Visits	Total	Average Attendance at each Session
Abergavenny ...	Boy Scouts' Rooms, Neville Street	4th Tuesday in month, 9.30 to 11.30 a.m.	1929 Nov. 26th	Dr. Annie C. Roberts	Nurse M. Sainsbury	Abergavenny Urban and Rural Areas	60	82	142	10.9
Abersychan ...	Congregational Schoolroom	4th Wednesday in month, 2 to 4 p.m.	Nov. 6th 1930	Dr. Mary R. MacQuillan	Nurse L. Howell	Abersychan, Varteg and Garndiffaith	87	120	207	20.7
Abertillery ...	59 Tillery Street	Alternate Tuesdays—10 a.m. to 4 p.m.	July 19th 1930	Dr. Annie C. Roberts	Nurse D. Beacham	Abertillery, Six Bells, Aberbeeg & Llanhilleth	303	583	886	35.4
Blaenavon ...	Workmen's Surgery	4th Friday in Month, 10.30 a.m. to 12.30 p.m.	July 29th 1929	Dr. Mary Scott	Nurse C. M. Phillips	Blaenavon Urban District	95	157	252	25.2
Blaina ...	Church Institute	Alternate Thursdays, 9.30 a.m. to 12.30 p.m.	Nov. 12th	Dr. Mary Scott	Nurse C. Davies	Nantyglo and Blaina	112	305	417	16.6
Chepstow ...	Domestic Arts Centre, Bridge St., School	1st Friday in month, 10 a.m. to 3.30 p.m.	Dec. 6th	Dr. Mary Scott	Nurse K. Webb	Chepstow Urban and Rural Areas	81	156	237	19.7
Crumlin ...	The Clinic, Hafodyrnyys Road	Fridays, 10 a.m. to 4 p.m.	Nov. 1st	Dr. Winifred E. Probert	Nurse G. I. Golding	Llanhilleth, Crumlin, Hafodyrnyys, Newbridge, Abercarn and Cwmcarn	413	758	1171	24.3
Ebbw Vale ...	James Street Wesleyan Chapel	Alternate Tuesdays—9.30 a.m. to 4 p.m.	Nov. 19th	Dr. Mary Scott	Nurse M. Redwood	Ebbw Vale, Beaufort, Victoria, Waunllwyd and Cwm	200	324	524	21.0
Monmouth ...	Working Men's Institute, Monk St.	1st Friday in month, 10 a.m. to 12 noon	Dec. 6th	Dr. Evelyn D. Owen	Nurse E. Webb	Monmouth Urban and Rural Areas	52	56	108	9.0
Newport ...	School Clinic, Stanley Road, Gold Tops	Alternate Fridays, 10 a.m. to 12.30 p.m. 1.30 to 3.30 p.m.	Dec. 2nd	Dr. Mary Gordon	Nurse E. Wilmot	Machen, Rhiwderin, Rogerstone, Bassaleg, Pontnewydd, Cwmbran, Malpas, Caerleon, Caldicot, Magor and St. Mellons Rural Area	318	634	952	32.8
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	New Tredegar, Cwmsyfhog and Aberbargoed	151	174	325	29.5
Oakdale ...	Women's Institute	Alternate Tuesdays—1.30 to 3.30 p.m.	Oct. 28th	Dr. Annie C. Roberts	Nurse G. I. Golding	Oakdale, Blackwood and Pontllanfraith	204	316	520	22.6
Pengam ...	The Clinic, Vine House	2nd Friday in month, 9.30 a.m. to 12.30 p.m.	Dec. 3rd	Dr. Mary Scott	Nurse M. B. James	Cefn Forest, Pengam	122	207	329	27.4
Pontypool ...	Tabernacle Schoolroom Crane Street	Alternate Tuesdays—1.30 to 3.30 p.m.	Nov. 26th	Dr. Mary Scott	Nurse E. A. Morgan	Maesycwimmer, Bedwas & Trethomas	255	519	774	33.6
Rhymney ...	Neuadd Wen yr Urdd	1st Monday in month, 10 a.m. and 2 p.m.	Dec. 3rd 1938	Dr. Evelyn D. Owen	Nurse W. Jones	Pontypool, Pontnewydd, Pontymoile, Panteg, and Griffithstown	96	95	191	15.9
*Risca ...	District Nursing Association Rooms	Every Monday—10 a.m. and 2 p.m.	1929 Nov. 19th	Dr. Annie C. Roberts	Nurse A. Hopkins	Risca, Cross Keys, Ynysddu, Cwm-felinfach	—	—	—	—
Tredegar ...	Lower Surgery, Park Place	Every Wednesday—1 to 4 p.m.	1929 Nov. 19th	Dr. Mary Scott	Nurse M. Payne	Tredegar, Sirhowy, Trevil, Bedwelty Pits, Troedrhigwaith, Hollybush, Markham Village and Argoed	239	460	699	14.2
Usk ...	Twyn Square	Alternate Mondays—10 a.m. to 1 p.m.	1938 June 27th	Dr. Winifred Probert	Nurse A. M. Spencer	Usk and District	—	—	—	—
*Risca —To be opened in May, 1938.						Add Runney which was closed early in year 1938	26	28	54	4.9

Totals ... 2814 4974 7788 22.3

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 41 :—

Location of Centre	District Served	Premises Utilised	Date of Opening	Days and Hours of Consultations	Medical Officer
Aberbargoed	Aberbargoed	Methodist Chapel, Aberbargoed	1917 Nov. 4th	Wednesday, 10 a.m.—1 p.m.	Dr. A. C. Roberts
Abercarn	Abercarn and 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, 10 a.m. to 4.30 p.m.	Dr. G. W. Parry
Abersychan	Abersychan	Congregational School-room, Abersychan	1918 Oct. 29th	Wednesday, 11 a.m.—1 p.m.	Dr. R. J. S. Verity
Abertillery	Abertillery and Cwmillery	59 Tillery Street, Abertillery	1917 June 8th	Friday, 10 a.m.—3 p.m.	Dr. T. Baillie Smith
Abertysswg	Abertysswg	Ainon Baptist Chapel, Abertysswg	1920 July 7th	Wednesday, 10 a.m.—12 p.m.	Dr. Mary Scott
Beaufort	Beaufort	Primitive Methodist Schoolroom, Beaufort	1919 Sept. 3rd	Thursday, 11 a.m.—1 p.m.	Dr. F. M. Fonesca
Blackwood	Blackwood, Pontllanfraith and Argoed	Parish Hall, Blackwood	1917 April 20th	Monday, 10.30 a.m.—12.30 p.m. and 2—4 p.m.	Dr. A. M. S. Dewar
Blaenavon	Blaenavon	Workmen's Surgery, Blaenavon	June 6th	Wednesday, 2—4 p.m.	Dr. T. M. O'Riordan
Blaina	Blaina	Church Institute, Blaina	April 17th	Friday, 10 a.m.—4 p.m.	Dr. W. Panes
Caerleon	Caerleon and Christchurch	Tan House, Mill Street, Caerleon	Nov. 21st	Alternate Wednesdays, 2—4 p.m.	Dr. M. Gordon
Caldicot	Caldicot, Sudbrook, Portskewett & District	Wesleyan Chapel, Caldicot	1920 June 1st	Tuesday, 10 a.m.—3.30 p.m.	Dr. M. Gordon
Chepstow	Chepstow Urban and Rural Districts	Domestic Arts Centre, Bridge Street School, Chepstow	1917 March 27th	Thursday, 10 a.m.—12 noon, 2—4 p.m.	Dr. J. J. O'Reilly
Crosskeys	Crosskeys, Wattsville and Pontywaun	Primitive Methodist Schoolroom, Crosskeys	Nov. 23rd	Friday, 2—4 p.m.	Dr. A. M. S. Dewar
Crumlin	Crumlin	4 Hafodyrynys Road, Crumlin	1924 March 28th	Wednesday, 10 a.m.—1 p.m.	Dr. W. E. Probert
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. T. M. O'Riordan
Cwmbran	Llantarnam, Cwmbran, Llanfrechfa and Ponthir	Wesley Schoolroom, Cwmbran	March 21st	Thursday, 10 a.m.—4 p.m.	Dr. M. R. MacQuillon
Ebbw Vale	Ebbw Vale	James Street Wesleyan Chapel, Ebbw Vale	March 13th	Tuesday, 10 a.m.—4 p.m.	Dr. F. M. Fonesca
Garndiffaith	Varteg, Victoria, Cwmavon and Garndiffaith	Calvinistic Methodist Schoolroom, Garndiffaith	Oct. 23rd	Tuesday, 11 a.m.—1 p.m.	Dr. R. J. S. Verity
Llanhilleth	Llanhilleth Aberbeeg	Workmen's Institute, Llanhilleth	1917 Oct. 15th	Monday, 10 a.m.—4 p.m.	Dr. T. Baillie Smith

Location of Centre	District Served	Premises Utilised	Date of Opening	Day and Hours of Consultations	Medical Officer
Markham Village	Markham	46 Abernant Road, Markham	1933 Feb. 15th	Wednesday, 2—4 p.m.	Dr. A. C. Roberts
Monmouth	Monmouth Urban and Rural Districts	Workingmen's Inst., Monk St., Monmouth	1917 June 15th	Friday, 10 a.m.—4.30 p.m.	Dr. W. H. Williams
Nantyglo	Nantyglo	English Weleyan Church, Nantyglo	1924 July 14th	Monday, 1 p.m.—4 p.m.	Dr. H. V. M. Jones
Newbridge	Newbridge and Pentwynmawr	Tabernacle Baptist Schoolroom, Newbridge	1917 March 20th	Monday, 10—12 noon and 2—4 p.m.	Dr. T. M. O'Riordan
Newport	Magor and St. Mellons Rural Area.	School Clinic, Stanley Road, Newport	March 21st	Alternate Wednesdays 2—4 p.m.	Dr. M. Gordon
New Tredegar	New Tredegar and Cwmsyfiog	Wesleyan Methodist Schoolroom, New Tredegar	March 29th	Monday, 10—12 noon and 2—4 p.m.	Dr. W. B. Owen
Oakdale	Oakdale, Rhiw-syr-dafydd and Markham Village	Women's Institute Oakdale	1918 Oct. 25th	Alternate Thursdays, 10 a.m.—3.30 p.m.	Dr. M. Scott
Panteg	Panteg, Griffithstown and Pontrhydyrun	Baptish Chapel, Griffithstown	1917 March 21st	Thursday, 10—12 noon	Dr. B. O. MacQuillan
Pengam	Pengam, Fleur-de-lis and Maesycwmmmer	Vine House, High Street, Pengam	March 12th	Thursday, 10.30—12.30 and 1.30—3.30 p.m.	Dr. H. V. M. Jones
Pontnewynydd	Pontnewynydd	Wesleyan Chapel, Pontnewynydd	April 19th	Thursday, 11 a.m.—1 p.m.	Dr. R. J. S. Verity
Pontymoile	Pontymoile, New Inn, and Pontypool Road	Mission Hall, Pontymoile	Oct. 17th	Tuesday, 10—12 noon	Dr. T. M. O'Riordan
Pontypool	Pontypool, Mamhilad, Glascoed, Goytre, Coedypaen, Llangibby	Tabernacle Schoolroom, Crane Street, Pontypool	May 9th	Wednesday, 10—12 noon and 2—4 p.m.	Dr. E. D. Owen
Rhymney	Rhymney and Rhymney Bridge	Neuadd Wen yr Urdd, Rhymney	March 12th	Tuesday, 2—4 p.m.	Dr. R. V. de A. Redwood
Risca	Risca	District Nursing Association Rooms Risca	March 23rd	Friday, 10—12 noon and 2—4 p.m.	Dr. A. C. Roberts
Rogerstone	Rogerstone, Bassaleg, and Rhiwderin	Domestic Arts Centre, Rogerstone School	Nov. 12th	Alternate Fridays, 10—12 noon	Dr. M. Gordon
Six Bells	Six Bells and Aberbeeg	Methodist Chapel, High St., Six Bells	1920 Sept. 29th	Wednesday, 2—4 p.m.	Dr. T. Baillie Smith
Tredeggar	Tredeggar, Sirhowy, Trevil, Troedrhigwair, Bedwellty Pits, Hollybush	Wesleyan Chapel, Harcourt Street, Tredeggar	1917 Feb. 26th	Tuesday, 11 a.m.—1 p.m.	Dr. E. T. H. Davies
Trethomas	Trethomas, Bedwas and Machen	Baptist Chapel, Trethomas	April 19th	Monday, 10.30—12.30 and 1.30—3.30 p.m.	Dr. Mary Scott
Upper Pontnewydd	Pontnewydd and Croesyceiliog	Ashley House, Pontnewydd	1919 June 16th	Tuesday, 2—4 p.m.	Dr. T. M. O'Riordan
Usk	Usk and Rural Area	Twyn Square, Usk	Nov. 11th	Alternate Mondays, 10—4 p.m.	Dr. W. E. Probert
Ynysddu	Cwmfelinfach and Ynysddu	Domestic Arts Centre, Ynysddu School	March 23rd 1917	Friday, 10—12 noon	Dr. A. M. S. Dewar

patients had Dental Caries and of these eight received treatment from the local Medical Aid Society or from the County Dental Officer. Eighty-two patients shewed signs of Toxæmia either by having Albumin in urine or by high blood pressure or by both. Eleven patients suffered from some form of heart disease. One patient with contracted Pelvis was referred to her own doctor. She had Cæsarean Section operation in the local General Hospital after it was found by her own doctor that she could not deliver herself. She had a healthy living child. Many of the patients attending this Clinic were confined in the Tredegar Maternity Home, two being at the expense of the County Council because of unsatisfactory home conditions.

Eighteen patients, that is 7·5% were found to be suffering from malnutrition.

PENGAM.—This Clinic is open for one day monthly. 112 new patients attended during the year compared to 93 in the previous year and the average monthly attendance was 27·41 in comparison with 23·90 in 1936.

Five patients who attended were not pregnant. Three patients were referred to and had treatment at the Venereal Diseases Clinic at the Royal Gwent Hospital, Newport. Twenty patients had Dental Caries and nine of these had treatment from the County Dental Officers. Twenty-three patients suffered from high blood pressure or from Albuminuria or a combination of both. Four patients had heart disease but none of a grave type. Only three cases of malpresentation were noted.

Several patients from this area were confined as private patients in the Tredegar Maternity Home. One patient was sent to Cardiff for examination by the Consultant. He did not think admission to hospital was necessary and she was safely confined at home. One patient, an elderly multipara with a very large child refused examination by Consultant and was confined in her own home after a long and difficult labour.

Six patients, that is 5·3% suffered from malnutrition.

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

NEWPORT ANTE-NATAL CLINIC.—This Clinic was open on alternate Fridays (morning and afternoon sessions) for old and new cases but towards the end of the year an additional session for old cases was conducted on the intervening Friday afternoons. An attendance of 40—50 cases per session justified the additional Clinic, but it is anticipated that the opening of a new Ante-natal Centre at Risca will relieve the pressure of numbers at Newport and so do away with the need for an extra half day Clinic—and will also relieve the expectant mothers from Ynysddu and district of the strain of long bus and train journeys.

The attendances showed an increase over last year's figures. 318 new cases attended, 634 re-visits were paid and the average attendance per session was 32·82.

Of the new cases attending 44% were primiparæ; 74% were referred to the Clinic by a midwife; 14·7% came of their own accord; 8% were referred through the County Maternity and Child Welfare Medical Officer while 4·3% came through the advice of their own doctors. It will be seen, therefore, that the greatest proportion of patients reporting came through the midwife. Many midwives attended personally with their patients—those who did not were written to after the last visit of the patient to the Centre.

Six per cent. of the expectant mothers showed subnormal nutrition but in only 2% was this due to under-nourishment. Dorsella, Marmite and Ovaltine given in cases of unemployment through the National Birthday Trust Fund helped greatly in improving the physique and general well-being of many of these expectant mothers. In other cases milk and colact were given on medical grounds. It was hoped that this extra nourishment would not only make the pregnant mother more fit for her confinement but would later on enable her to breast-feed her baby.

Several severe cases of Toxæmia and Malpresentation were referred to the Consultant Obstetrician. 4 cases of contracted pelvis were admitted to Glossop Terrace for trial labour and were delivered of healthy children. 1 severe case of contracted pelvis was delivered of a healthy child by Cæsarean Section in Glossop Terrace. 20 cases of high blood pressure (over 140 systolic) were observed carefully but in spite of treatment, 4 of these cases, complicated by Nephritis, had a stillbirth.

Constipation, heartburn and varicose veins were the chief ailment and the treatment of these and the giving of cod liver oil and vitamins in condensed form greatly improved the health of the mothers.

Two cases of rheumatic heart disease attended—1 had a live baby in Glossop Terrace and the other was safely delivered of a healthy baby at home.

216 live births were traced. 4 mothers had their babies in Tredegar Maternity Home; 4 in Herbert Street Nursing Home; 2 (1 a stillbirth resulting from Nephritis) in Ty Bryn and 2 in Coed-y-Gric Institution.

Eighteen cases were referred to the V.D. Department, Royal Gwent Hospital, for investigation of vaginal discharge.

Ten non-pregnant cases reported.

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

RHYMNEY.—This Clinic is open one half-day each month. The attendance has increased considerably in the last year. There were 96 new cases, compared with 59 in 1936; a total attendance of 191—146 in 1936; and an average attendance of 15·91 per session instead of 12·1. 25 of the new cases were primiparæ. One of these was found to be suffering from Tuberculosis and was sent to Professor Strachan, who admitted her to Cardiff and terminated the pregnancy. Another patient who was referred to Professor Strachan did not keep the appointment and had a very difficult confinement, which however terminated successfully.

Three cases of malpresentation were discovered. Dental Caries was common and several patients were referred to the Dental Clinic. There were three cases of malnutrition and several others were in need of extra nourishment which was provided through the National Birthday Trust Fund.

Nine cases of anæmia and four of heart disease were seen. These all had normal confinements.

MONMOUTH.—This Clinic is held once a month for a half-day. The attendance increased on that of the previous year. There were 52 new cases instead of 35 and 56 re-visits instead of 44, giving a total attendance of 108 as against 79 and an average of 9 per session instead of 6·5. 15 of the new patients were primiparæ and one was not pregnant. Three cases of malnutrition were seen, three of anæmia and one of severe debility. One patient found to be suffering from Venereal Disease was sent to Chepstow for treatment. One malpresentation was found. Seven necessitous mothers in need of extra nourishment were given a supply of fresh milk.

RUMNEY.—This centre which had been opened towards the end of 1936 was held once a month for a half-day during 1937. There were 26 new patients and 28 re-visits giving an average attendance of 4·9 at each session. 8 of the new cases were primiparæ. 10 patients were found to be suffering from dental caries. A few of these availed themselves of the treatment offered at the Clinic, some obtained treatment privately and others have been given treatment since the baby was born.

One patient who was in a very bad state of health owing to rheumatism and anæmia when first seen, improved remarkably with treatment and had an uneventful confinement. Five patients suffered from anæmia but there were no cases of malnutrition. One malpresentation was discovered, and one case of considerable albuminuria was found. This improved with treatment and a normal living child was born. No free food was given.

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

ABERGAVENNY.—This Centre is held once a month and has a morning session only. There has been a marked improvement in the attendance, 57 women attending in 1937 as against 36 in 1936 and the average attendance was 11 as compared with 6.6. This increase is in no way due to the giving of free food as National Birthday Trust Fund is not available for the rural areas. Of the cases, 17 were primiparæ, 37 were multiparæ, 2 were not pregnant and 1 was post natal.

Three women were offered appointments with Prof. Strachan but only one availed herself of this. She was a cardiac case with previous difficult confinements and she was admitted to Glossop Terrace. Of the other two, one had a Cæsarean section at full time done in Abergavenny Hospital and the other had a difficult stillbirth.

One woman who had had a previous Cæsarean section done in Hereford Hospital was referred there again by her own doctor and had an induction done at 8 months.

One woman (a primipara) who gave a history of operation for glands on both breasts was referred to her own doctor. She had a stillbirth but it was stated that the foetus was alive till shortly before birth.

As far as was known there was no maternal mortality and no patient developed puerperal sepsis.

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

OAKDALE.—This Clinic is held once a fortnight and the total attendance shows a marked increase on last year's figure, having risen from 303 to 520. New cases numbered 204 compared with 122 last year. The average attendance per session is almost double, being 22.6. Of the 204 new cases examined 31% were primiparæ.

ABERTILLERY.—This Clinic continues to be very satisfactory. During the year 303 new cases were seen and 583 were re-examined, making a total of 886 compared with 897 the previous year. The average attendance per session remains practically the same, being 35.44 as against 35.88 in 1936. The percentage of primiparæ is 38%, a slight increase on last year's figure of 37%.

CRUMLIN.—This Centre is now held every Friday and is a "whole-day" Clinic, and it has improved in numbers very considerably. During the year the attendance has risen from 769 to 1,175 of which 413 were new cases. This is the highest figure reached in any one year and gives an average attendance of 24.5 per session as compared to 17.47 in 1936 and to 15.9 in 1935.

Of the 413 new cases examined 27% were primiparæ.

ABERSYCHAN.—This Centre is held once a month and the attendance is increasing each year. In 1936 total attendances amounted to 131, but this year—207, while the average attendance per session is practically double, being 20.7 as compared to 10.9 in 1936 and 8.3 in 1935.

Although the progress of this Centre is good and the patients are beginning to realize the advantages of constant supervision, it would be much more satisfactory both for the

doctor and patient if this Clinic could be held at least once a fortnight. The usual high percentage of abnormal cases at this Centre is not so marked possibly due to improved physique and general health as a result of assisted food supply.

GENERAL.—The attendance at the ante-natal Clinics has improved steadily. The total number of cases examined during the year at the 4 above-named Clinics—2,784, Crumlin being the highest with a total of 1,171. The highest percentage of primiparæ was at Abertillery, being 38%.

Free food was given in every necessitous case that showed any signs of strain or toxæmia of pregnancy, and the improvement in the condition of the mother as a result, was quite definite. One is frequently told that the child has proved to be better than in any previous pregnancy.

G—REPORTS OF MEDICAL OFFICERS OF THE INFANT WELFARE CENTRES.

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

ABERTYSSWG.—This Centre is open for two hours every Wednesday morning. There was a slight decrease in the total attendances for the year from 683 in 1936 to 580 in 1937, the average attendance per session being 12·08 compared with 13·93 in 1936.

The total number on the register at the end of the year was 80 compared with 93 at the end of 1936. Breast feeding was slightly higher for the year, 43·3% of the babies brought to the Centre being wholly breast-fed up to nine months compared with 40·4 in 1936.

Eight children were found to be suffering from rickets in a very mild form. Nine children had dental caries and all nine had the carious teeth extracted at the Local County Dental Clinic. Three children had enlarged tonsils and all three had operation for this condition. No gross rickets or other orthopædic conditions were present in children attending this Centre.

The incidence of Bronchial Catarrh and Dental Caries is still unusually high in this area. Four babies under two years and six toddlers amongst those attending the Centre suffered from malnutrition.

Two non-nursing mothers and one nursing mother also suffered from this condition.

OAKDALE.—This Centre is open for one whole day once a fortnight. During the year there was a slight increase in the total number of attendances from 1,002 to 1,031 in 1937. Breast feeding decreased from 44% to 40·1% in 1937 while wholly artificially-fed babies increased from 12·0% to 20·7%. Seven children attending this Centre had Dental Caries and all had the Carious teeth extracted at the local County Dental Clinic. Eight children had enlarged tonsils but only three were operated on for this condition. Four children requiring special orthopædic attention were seen by the Orthopædic Specialist and were treated. One toddler suffered from squint and had glasses prescribed for him by the Ophthalmic Specialist.

Three children shewed signs of mild rickets—no children suffered from this disease in its more advanced form.

Three babies under two years and ten toddlers shewed signs of malnutrition. No nursing mothers suffered from malnutrition compared with nine non-nursing mothers who shewed signs of this condition.

TRETHOMAS.—This Centre is open one day weekly. The numbers attending here shew a definite increase for 1937, the total attendances for the year being 2,385 compared with 2,190 during 1936, while the average attendance per session was 50·74 compared with 46·59 in 1936.

The number of wholly breast-fed babies decreased from 50·4% in 1936 to 44·6% in 1937.

Eight children attending suffered from mild rickets. One marasmic baby attended this Centre and was in a much improved condition by the end of the year. Three children had dental caries and two had the carious teeth extracted. Appointments were made for eight of the eleven children found to be suffering from enlarged tonsils, the parents of the three remaining refusing to apply for treatment for this condition. There were five children requiring Orthopædic treatment and four accepted appointments and were treated. One child through injury at birth had almost complete paralysis of one arm. She had regular treatment for this at the Orthopædic Clinic and by the end of 1937 was practically cured. Three children suffered from squint—one accepted appointment for examination by the Ophthalmic Specialist and had glasses prescribed.

No nursing mothers suffered from malnutrition but in four non-nursing mothers this condition was present. Three babies under two years appeared to be malnourished and ten toddlers shewed signs of malnutrition.

GENERAL.—In spite of the falling birth rate, two of these three Centres shewed a slight increase in attendance over that of the previous year.

Malnutrition, not always due to insufficient food shews on the whole a decline.

Some of the children suffering from this condition came from homes where financial conditions could be described as comfortable. In these cases it would seem to be due either to some inherited weakness, or, as is more often the case, to lack of properly cooked and regular meals, combined with insufficient fresh air and insufficient sleep. Some of the healthiest children came from the poorest homes, where they are kept clean, fed regularly, and have little or none of the constant carrying about in a shawl formally considered by many of the older mothers to be good nursing.

All necessitous patients were helped with supplies of milk food and practically all necessitous nursing mothers were given a weekly allowance of milk food to enable them to continue breast-feeding. This supply of food to nursing mothers together with the fact that debilitated women generally wean their babies, probably accounts for the low rate of malnutrition found in nursing mothers who attend the Clinics.

Drugs, chiefly cough mixtures, tonics, and "grey" tablets were given at the Centres. In the more serious types of illness the patients were referred to their own doctors. Many of the children attending these Centres benefited by the treatment received from the Orthopædic Specialist, the Eye Specialist, the Nose and Throat Specialist and mothers, as well as children, from the Dental treatment carried out by the County Dental Officers.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	ROGERSTONE	CAERLEON	CALDICOT	NEWPORT
	%	%	%	%
Breast-fed	54·8	47·2	42·1	39
Artificially fed	37·5	44·4	52·6	53
Breast and Artificially fed	7·7	8·4	5·3	8

ROGERSTONE.—This Centre is open fortnightly—on a Friday forenoon. The figures for attendance shew an increase all round when compared with last year's figures—151 on register at end of year compared with 141 in 1936; 53 new cases under 1 year attended as

against 42 last year; 14 new toddlers came compared with 7 in 1936; 496 re-visits under 1 year compared with 466; 549 total re-visits under 1 year as against 508 the previous year. Total attendances were 971 compared with 942 in 1936, and the average attendance per session was 37·34 as against 36·23 last year.

Though the figure for breast feeding showed an appreciable increase over last year's figure (54·8% compared with 47%) a fair amount of anæmia was noticeable among the breast-fed babies. This anæmia improved and eventually disappeared after the administration of iron tonics to mother and baby. There was an increase of unemployment and even of irregular work during the year in the district, with a consequent repercussion on the health of the nursing mothers especially those with large families. Extra food was given in necessitous cases.

No cases of malnutrition were seen among the babies. Bronchial catarrh and eczema were the chief ailments among the babies. Several cases of nævus were referred, through the family doctor, to the Skin Department, Royal Gwent Hospital. 1 case of Metatarsus Varus was referred to the County Orthopædic Clinic and 2 squint cases were seen by Mr. Coulter.

The majority of the toddlers reporting belonged to the 1-2 years group and were healthy on the whole though insufficient sleep and an excess of starchy foods in the diet accounted for the flabby pale appearance of some. Bronchial catarrh was the chief ailment.

The next most frequent group to attend was the 2-3 year olds—there were few ailments to report among them, the majority being brought up by their mothers (probably bringing a baby as well) to have a watch kept on their progress.

Of the 3-5 year olds the majority attended school and come to the Centre for dental or tonsillectomy appointments.

Two cases of malnutrition were seen and assisted with tonics and cod liver oil.

The chief ailments of the nursing mothers who attended were anæmia and lactational debility—free food and iron tonics were given where necessary. More free food was given away than last year.

CAERLEON.—This Centre is open on alternate Wednesday afternoons for the mothers and babies from Caerleon and the surrounding rural districts.

The number on the register at the end of the year was 103 compared with 100 in 1936 and, though fewer new cases reported under 1 year and also in the 1-5 years old group those new cases who reported attended very regularly. The re-visits of babies totalled 395 compared with 335 in 1936 and toddler re-visits amounted to 306 as against 261 the previous year—making total re-visits in each group of 421 and 311 compared with 366 and 268 respectively. The average attendance per session was 30·5 as against 25·36 in 1936.

The *babies* on the whole were healthy and though the figure for breast-feeding is lower than last year (47·2% compared with 53·5%) the figure for mixed feeding is higher. 2 cases of malnutrition due to undernourishment were assisted with milk foods and cod liver oil. Bronchial catarrh and digestive upsets accounted for the minor ailments of most of the babies. Simple mixtures were given to relieve these.

Of the *toddlers* reporting, half belonged to the 1-2 year old group. The majority were healthy but 4 shewed mild rickets—of these, 1 was referred to the County Orthopædic Clinic for bowing of legs and was advised night binding and massage while cod liver oil and attention to diet and hygiene improved all 4 cases. 2 cases shewed malnutrition due to undernourishment.

One third of the toddlers attending were in the 2-3 years old group. This group was a very healthy one—no cases of malnutrition were observed. 2 cases were referred to the County Tonsils and Adenoids Clinic, 1 to the Aural Clinic at Newport, 1 case of squint was seen by Mr. Coulter and there were 6 dental appointments made.

The remainder of the toddlers were in the 3-5 years old group—the smallest group. Threadworms, Diarrhoea and dental caries were the chief ailments.

The nursing mothers who attended showed a fair amount of lactational debility and anaemia. Milk foods (given free to necessitous cases) and iron tonics caused much improvement in the general health and nursing capabilities of the mothers. 4 dental appointments were made. No cases of malnutrition due to under-nourishment were seen.

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

I should like to thank the ladies of the local Maternity and Child Welfare Committee who attended regularly at the Centre throughout the year and gave valuable assistance.

CALDICOT.—This Centre is held on Tuesday afternoons and is attended by mothers and babies from Caldicot and the surrounding rural district.

The figures for attendance show a slight decrease compared with 1936—though the number on the register at the end of the year was 150 compared with 137 in 1936 and 76 babies attended for the first time compared with 53 in 1936. The re-visits of babies were fewer than in 1936—758 as against 768 and the re-visits of toddlers also show a decrease—857 compared with 952. The total number of babies attending was slightly larger than in 1936, and the average attendance was very slightly smaller—36.04 compared with 36.61.

Of the *babies* attending the majority were healthy and only 2 were underweight—these 2 improving with the addition of solid food in their dietary at weaning-time. Two sets of twins attended and did well. Unfortunately the figure for breast-feeding is low this year—42.1%—due largely to the fact that most of the babies were on dried (or tinned) milk on their first visit to the Centre.

Drugs were given fairly freely—chiefly for bronchial catarrh and teething upsets. Bronchial catarrh is prevalent in Caldicot and the surrounding district as the country is low-lying.

Two cases of otorrhoea attended the Aural Clinic at Newport—1 case of rachitic bowing of the legs was referred to the Orthopaedic Clinic.

Of the toddlers who attended the majority belonged to the 2-3 year old group—none showed definite malnutrition but 4% showed slightly below normal nutrition and were helped with Colact and cod liver oil. Anaemia and threadworms were the chief complaints.

Of the 1-2 year old group none were of subnormal nutrition though 4% were pale and of flabby musculature due to lack of protein in the diet—advice and milk, if necessary, were given to such cases. Bronchial catarrh and urticarial rashes were the chief complaints.

Of the 3-5 year olds all were healthy and the majority came to the Centre for dental or tonsillectomy appointments. Threadworms and impetigo were the minor ailments.

Lactational debility occurred in 10 of the nursing mothers (roughly 8%) but no malnutrition was observed. Constipation, anaemia and pyorrhoea were responsible for most of the other troubles of the nursing mother.

Eight expectant mothers were referred to the Ante-natal Clinic at Chepstow.

Free food was given in much the same amount as last year.

The ladies of the local Maternity and Child Welfare Committee attended during the session and rendered excellent service.

NEWPORT.—This Centre was open on alternate Wednesday afternoons and was attended by mothers and babies from High Cross, Bettws, Llanwern, Nash and Goldcliffe. The area served was a large and scattered one and the attendance in wet weather was poor owing to difficult travelling conditions.

The attendance throughout the year was small. 28 new babies attended making 148 re-visits, and 12 toddlers made 95 re-visits. The average attendance per session was 11.79. The figure for breast-feeding was low, though slightly higher than last year—39% compared with 30%.

The babies were very fit—no cases of malnutrition due to under-nourishment attended, but several babies showed a degree of anæmia and were greatly helped with iron tonics.

Of the toddlers reporting, the majority belonged to the 1-2 year old group, next came the 2-3 year olds, then 4-5 year olds and the smallest number seen came in the 3-4 year old group. The majority were very fit—the chief complaints were bronchial catarrh and anæmia. 1 case of Genu Valgum was referred to the County Orthopædic Clinic and was advised osteotomy. One toddler showed malnutrition due to under-nourishment, and was helped with milk foods and cod liver oil. 1 case of mild rickets was seen and advised re diet and hygiene.

Of the nursing mothers who attended, two shewed lactational debility and were helped with dried milk, etc. Tonics and dental appointments were given to several.

Two expectant mothers attended and were referred to Newport Ante-natal Clinic.

Free food was given away in roughly the same proportion as last year.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	PONTYPOOL	RUMNEY
	%	%
Breast-fed	47·8	37
Breast and artificially fed	25·8	30
Artificially -fed	26·4	33

PONTYPOOL.—This Centre is open one whole day weekly. The attendances were slightly lower than the previous year. The total attendances were 2,429 as against 2,551 in 1936, with an average attendance per session of 50·60 instead of 52·06. The number on the register at the end of the year was 317 almost the same as in 1936—319. The slight fall in numbers occurred in all groups excepting new cases under one year which were rather more than in the previous year.

The percentage of breast-feeding fell from 55·2 to 47·8. In two cases the babies were not breast-fed owing to the severe illness of the mother following confinement, one eclampsia and one heart disease. In three cases malnutrition in the mother seemed to account for the inability to breast-feed the baby, although two other mothers, who were also suffering from malnutrition, managed, with the help of free food for themselves, given by the Clinic, to feed their babies on the breast alone till they were nine months old. Several other of the nursing mothers were suffering from some debility and anæmia and were given free food and iron tonics to assist them in the breast-feeding. Dental caries was a common complaint among the nursing mothers. Fifteen of them availed themselves of the dental treatment offered by the Clinic.

Eighty toddlers attended the Centre during the year. About one-third of these were underweight but only two or three cases of actual malnutrition were seen. There was no malnutrition among the babies. Their chief complaints were bronchial catarrh and constipation. Worms and dental caries were common among the toddlers, six of whom attended the Dental Clinic. Three cases of mild rickets were seen and three children were referred to the Tuberculosis Officer. Six toddlers were found to need operative treatment for enlarged tonsils.

Cod liver oil and malt and similar preparations were prescribed for children who needed them and were supplied free in necessitous cases. Less free food was given than in the previous year.

RUMNEY.—This Clinic was open for a half-day every week instead of fortnightly as previously. Thus while the total attendances were more than in the previous year—1,239 instead of 1,024, the average attendance per session was less—32 in 1936 and 24·29 in 1937. The number on the register at the end of the year was almost the same—149 in 1936 and 140 in 1937.

The percentage of breast-feeding dropped from 46 to 37 with a corresponding increase in the combined breast and artificial feeding. The percentage of artificial feeding remained about the same. A number of the mothers appeared to be over anxious about their baby's progress and gave complimentary feeds unnecessarily. Many of the babies were much above the average weight.

There was a considerable increase in the number of mothers attending for advice and treatment during the year. Instead of 29 new cases there were 45 and the total attendances went up from 91 to 123. None of them was suffering from malnutrition but there were two cases of severe anæmia and debility. A slight degree of this condition was the commonest complaint among the mothers.

Forty-nine toddlers attended during the year. Eight of these were below the average weight but there was no case of actual malnutrition. Their chief complaints were enlarged tonsils and dental caries. They were referred to the appropriate Clinics. Three cases of mild rickets were seen.

There was no malnutrition among the babies. Constipation and bronchial catarrh were their commonest troubles. One baby with club feet was already being treated at the Prince of Wales Hospital when it was first brought to the Clinic and is still under treatment there. A few simple drugs were given where needed and practically no free food.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	NEWBRIDGE	PONTY-MOILE	PONT-NEWYDD	CWM	CRUMLIN	BLAEN-AVON
	%	%	%	%	%	%
Breast-fed	41·7	29·4	35·7	40·4	39·0	33·0
Breast and Artificially fed	22·6	29·4	33·3	19·2	15·5	15·0
Artificially fed	35·7	41·2	31·0	40·4	45·5	52·0

NEWBRIDGE.—This centre is open every Monday, and the Medical Officer attends each week. The average attendance at this Centre is high and has increased this year to 79·2 from 70·87 in 1936. The number on the register at the end of 1937 was 322 compared with 267 in 1936. The number of new cases in 1937 was 127, an increase of 19 since the previous year. The number of re-visits under 1 year was less than the previous year, but the number of re-visits of the toddlers (1·5 years) increased considerably.

The percentage of breast-fed infants is 41·7% compared with 47·0% in 1936. This year there is a slight increase in the percentage of the breast and artificially-fed infants, also an increase in the purely artificially-fed class—the former have increased 20·0% in 1936 to 22·6% in 1937, and the latter from 33·0% to 35·7% in 1937.

The nutrition of the infants is on the whole, good. 27% were slightly below normal at the commencement of their attendance, but many of these were normal when they were about nine months or twelve months old. Less than 2.0% were definitely bad *re* nutrition. The majority of these infants—whose nutrition was below the normal standard were helped. If breast-fed the mother received Colact—if artificially-fed a regular allowance of a milk food was granted—or either Virol, cod liver oil or Roboleine was allowed.

The attendance of the toddlers at this Centre is satisfactory. Those whose nutrition was not normal received a regular supply of malt and oil, or Virol, Roboleine or Aberdeen Emulsion. During the year 18 toddlers were referred to the Dental Clinic; seven were referred for tonsillectomy—2 children were examined at Dr. Gordon's Clinic at the Royal Gwent Hospital and one by the Tuberculosis Officer.

The nutrition of the mothers is fairly satisfactory—There are 18.5% whose nutrition is slightly below normal. In many cases such mothers received help from the Centre to enable them to attain the average normal standard of health. 18 mothers in need of dental treatment, availed themselves of the treatment offered. Four mothers were referred to Dr. Gordon's Clinic at the Royal Gwent Hospital.

THE NUTRITION OF INFANTS UNDER 1 YEAR OF AGE.

	NEWBRIDGE	PONTY-MOILE	PONT-NEWYDD	CRUMLIN	BLAEN-AVON
	%	%	%	%	%
Excellent	18.5	25.0	28.0	25.6	14.0
Normal	56.1	53.3	47.4	56.0	57.0
Slightly below normal	23.7	20.0	24.6	14.8	26.0
Bad	1.7	1.7	—	3.6	3.0

PONTYMOILE.—This Centre is open each Tuesday morning, and the Medical Officer attends each week. It is satisfactory to record that there is an increase in the number of infants on the register at the end of this year 1937; it was 104 in 1936, in 1937 it is 128; there is also an increase in the number of new cases. It was 47 in 1936, it is 54 in 1937. The average attendance at each session in 1936 was 20.24 and it has increased to 22.29 in 1937.

The mothers did their best to feed their infants naturally and those who, for medical reasons, were in need of help were given a dry food to enable them to continue breast-feeding partly if not wholly.

The records for breast-feeding show a decrease since the previous year. The percentage for this was 44.0% in 1936 and in 1937 it is 29.4%. The figures for the breast and artificially fed class of infants show a corresponding rise this year—an increase of 13.4%—it is 29.4% compared with 16.0% in 1936. There is only a slight difference in the percentage of the artificially-fed class for the two years, being 41.2% in 1937 as against 40.0% in 1936.

The mothers and toddlers were referred to other Clinics for treatment when necessary—11 mothers and 4 toddlers attended the Dental Clinic. Three infants were referred to the Orthopaedic Centre and one to the Eye Clinic. All ante-natal cases were advised to attend the Clinic at Pontypool—The toddlers who attended the Centre, came on account of some special defect and their mothers were anxious for the special treatment.

THE NUTRITION OF TODDLERS.

	NEWBRIDGE	PONTY- MOILE	PONT- NEWYDD	CRUMLIN	BLAEN- AVON
	%	%	%	%	%
Excellent	10.0	13.8	12.1	7.7	4.0
Normal	55.0	56.0	51.6	38.4	53.0
Slightly below normal	33.4	30.2	33.3	51.3	42.0
Bad	1.6	—	3.0	2.6	1.0

PONTNEWYDD CENTRE.—This centre is open each Tuesday afternoon and the Medical Officer attends each session. There is a slight increase in the attendance during the year. It has gone up from 60 the previous year to 67 this year, but the average attendance at each session remains exactly the same this year as last, being 26.9 each year. The number of new cases of nursing mothers has increased from 50 in 1936 to 57 in 1937. This year 15 expectant mothers attended this centre but were referred to the Ante-natal Clinic either at Newport or Pontypool.

The percentage of breast-fed infants is almost the same as the previous year, 35.7% in 1937 as against 35.2 in 1936. There is a marked increase in the percentage of the breast and artificially-fed class—this is 33.3% in 1937 compared with 16.2% in 1936, and a corresponding decrease in the percentage of the purely artificially-fed infants—31.0% in 1937 and 48.6% in 1936. Some mothers were granted free food to enable them to feed wholly or partly their infants, but in all cases such food was given for medical reasons.

The mothers and children requiring special treatment were referred to the special Clinics for such treatment.

NUTRITION OF MOTHERS.

	NEWBRIDGE	PONTYMOILE	PONTNEWYDD	CRUMLIN
	%	%	%	%
Excellent	—	4.0	1.6	—
Normal	81.5	74.0	83.7	84.0
Slightly below normal	18.5	22.0	13.1	14.5
Bad	—	—	1.6	1.5

CRUMLIN.—This Centre is held each Wednesday morning. The Medical Officer attends each session. This Centre was formerly open on Friday afternoons, and the change may account slightly for the decrease in the numbers who attended, as it takes a little time for the mothers to get accustomed to a change in the Clinic day.

The number on the register at the end of 1937 was 178 compared with 217 in 1936. The number of new cases under 1 year was 70 as against 103 in 1936—and the average attendance at each session was 25.48 in 1937 compared with 37.18 in 1936.

The percentage of breast-fed infants has decreased. It is 39.0% in 1937 compared with 55.4% in 1936. There is a slight increase in the breast and artificially-fed class, 15.5% this year as against 13.9% the previous year. The percentage of the artificially-fed infants is higher, it is 45.5% compared with 30.7% in 1936.

The toddlers continue to attend very well, but it is not easy for the mother to bring her infant and toddler the same day as the district is very hilly. The nutrition of the toddlers is not good 51·3% are slightly below the normal. These particular children were given an allowance of either Colact, malt and oil, Virol or Roboleine to enable them to regain the normal standard of health.

Three children were referred to the Eye Clinic, five children were referred to the Tuberculosis Officer, three to the Dental Clinic and two to the Tonsil Clinic.

CWM.—This Centre is open every Thursday. The Medical Officer attends alternate weeks.

The number on the register at the end of this year, 1937, was 183 compared with 214 the previous year. The number of new cases under 1 year was 74, being 19 less than the previous year. The re-visits during 1937 were 1,023 compared with 1,178 in 1936, and the average attendance each session was 32·6 in 1937, in 1936 it was 36·5.

The percentage of breast-fed infants has decreased from 45% in 1936 to 40·44% in 1937. There was also a decrease in the percentage of breast and artificially-fed: this was 17% this year compared with 20·0% the previous year. In 1937 there was an increase in the class of artificially-fed infants, it was 36% in 1937 compared with 28% in 1936.

The number of toddlers brought to this Clinic is still small. A small percentage of these toddlers are undersized and underweight and are receiving help from the Centre.

The condition of the mothers is satisfactory. Many of these mothers had already weaned their infants before bringing them to the Centre. Many might have persevered, but others genuinely failed—owing in many cases to a general debility—such mothers were given a milk food to help them regain the normal standard of health.

BLAENAVON.—This Centre is open every Wednesday afternoon and the Medical Officer attends each week.

The number of infants on the register at the end of the year 1937 was 275 compared with 332 the previous year. The number of new cases under 1 year was less this year—109 compared with 124 in 1936. The number of re-visits was much higher, 1,314 in 1937 as against 1,041 in 1936.

The number of toddlers attending was less this year. In the early part of the year the snow storms were many and severe, and this severe weather condition would account for the irregular attendances. In such a district—in the stormy weather—it is difficult for a mother to bring two children to the Centre on the same afternoon. The total attendance in 1937 was 1,978 compared with 1,944 in 1936. The average attendance at each session was 41·20 in 1937, and 39·6 in 1936.

The percentage of breast-fed infants is low—being 33·0%, as there are no figures available for the previous year we are unable to make a comparison. The percentage of the breast and artificially-fed class is 15·0%, and the percentage of the purely artificially-fed infants is 52·0—a figure which suggests an improvement is needed, and a hope that more mothers will try to feed their infants naturally. Many mothers whose nutrition was not up to the normal standard were granted a supply of dried milk food to enable them to persevere with breast-feeding.

Though the nutrition of the infants is fairly satisfactory, yet many babies look pale and delicate. When advised to leave their babies sleep out-of-doors the mothers of these infants explain it is not possible. In very many cases their houses open directly on to a main street—which is often very narrow—and there is no back garden. So, of necessity, the baby, during the day, must either sleep in the kitchen or bedroom. A mother can only, in some cases, take her baby out for a limited time in the day.

Most of the toddlers were brought to the Clinic suffering from some definite defect, and were referred to the special Clinic for treatment. Ten children were referred to the Dental Clinic, 8 children to the Aural Clinic, one to the Eye Clinic, five to the Orthopaedic Clinic, three to the Tuberculosis Officer, and one to the Tonsil Clinic.

5.—DR. ANNIE C. ROBERTS, Assistant Medical Officer, Monmouthshire County Council.
FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	ABERBARGOED	MARKHAM	RISCA
	%	%	%
Breast-fed	37	32.0	32
Breast and Artificially-fed	13	12.5	13
Artificially-fed	50	55.5	55

ABERBARGOED.—The percentage of bottle-fed babies has again increased, 50% being entirely bottle-fed and this cannot be entirely attributed to debility on the part of the mothers as the younger and fitter primiparæ are even less anxious than the multiparæ to persevere with breast feeding. Midwives could do more to persuade mothers to breast-feed at least until the first visit to the infant welfare centre. Complementary feeding seems to be of little use or is found to be too much trouble and those cases coming under the heading of "breast and bottle-fed" are infants who have been breast-fed up to at least three months and then have been weaned.

The average attendance here has fallen from 35.1 to 30.7. This average is of course satisfactory for a half-day Centre, but attendance here is much too irregular being sometimes over 40 and at other times as low as twenty. It may perhaps be ascribed to a lack of continuity and supervision as one nurse does the centre for about seven months of the year. Another nurse the other five months and a third nurse does the home visiting.

Rather a high proportion of cases receive food as working conditions are very bad here and many people are on the "dole." Here also the condition of children aged 9 months to 2 years is decidedly unsatisfactory and free food has to be allowed them for long periods.

Drugs are very extensively used here and are much appreciated—Tonics especially give great benefit to both children and nursing mothers.

Nursing mothers here are in quite good condition 82% being graded as satisfactory, but it must be noted that a very large number of these receive colact and iron tonics. Of those part-nursing, only 62% were satisfactory, their general debility probably explaining the failure to breast-feed beyond three to four months. One mother who was successfully breast-feeding developed (in spite of iron and Colact) a high degree of anæmia and some peripheral neuritis and had to wean her baby. She recovered very shortly after completely weaning the child.

Non-nursing mothers, particularly multiparæ, are not in a good state of health, only 67% being graded as satisfactory.

Expectant mothers are dealt with at New Tredegar Ante-natal Centre.

Infants from 1 to 9 months are for the most part in good condition, 84% coming in the satisfactory category.

Babies of 9 months to 2 years are again unsatisfactory, only 53% reaching the satisfactory standard. In spite of this there is little evidence of rickets, only one child showing this in any marked degree. Injudicious feeding, lack of rest and in some cases lack of cleanliness are the chief factors contributing to this unsatisfactory state of affairs.

Toddlers (aged 2 to 5 years) show a great improvement upon the "under twos"—78½% of them being satisfactory.

Attendance of toddlers is again good, 65 children in the age-group 2—5 having been present during the year. These suffered chiefly from nasal and bronchial catarrh, and enlarged tonsils and adenoids, and as in 1936 about 20% were referred for extractions at the Dental Clinic.

MARKHAM.—Breast-feeding figures here are very low, barely one-third of the infants attending being entirely breast-fed. Debility in the mother does not account for this as 70% of the non-nursing mothers were in good condition. Mothers who have been unable to breast-feed their first babies seem to be quite determined that any subsequent children will have to be bottle-fed.

The average attendance has shown a decided increase, being 27·6 as against 20·4 in 1936. In spite of this increase the attendance is still disappointing. A high percentage of the cases are from Argoed and owing to the distance, those often only attended fortnightly. But the number of cases from Markham itself is small and has been ever since the Centre was opened.

Free food is given to a very small extent and in the main seems to be given year after year to the same families. Employment in Markham is better than in Argoed and therefore Markham people have less free food.

Drugs are perhaps not so extensively used here and those of which most use is made are ointments, cough medicines and iron tonics.

No ante-natal work is done here, the Markham women going to Tredegar and the Argoed over to Oakdale. In either case the journey is long and therefore the attendance at the Centres is smaller than it would otherwise be.

Nursing mothers here are in very good condition, 90% of them being satisfactory as regards nutrition. The part-nursing mothers are not so good, only 65½% being satisfactory hence probably the lactational debility.

70% of the non-nursing mothers were in good condition and a certain proportion of these should have been able to breast-feed had they persevered.

Expectant mothers are reported on by the Tredegar and Oakdale Ante-natal Clinics.

Infants of from one month to nine months were on the whole good, 82% being graded as satisfactory.

As at other Centres the babies from nine months to two years are the disappointing ones, only 50% being classed satisfactory. At this age children seem very prone to suffer from bronchial catarrh, urticaria, infectious complaints and debilitated illnesses such as pneumonia. At this age too, appetites are much more capricious and the children are more wilful and difficult to control.

75% of the toddlers (aged 2—5 years) were satisfactory and they show more resistance to illness and better muscle tone than the children aged 1 to 2.

The attendance of toddlers is now higher and one-quarter of the children who attended the Centre in 1937 were in the age group 2—5 years. A high percentage of children aged 4 years attend school and the mothers probably do not realise that the children are still eligible for treatment at an infant welfare Centre.

RISCA.—Breast-feeding figures are again lower and show a steady decline and it is noticeable that young primiparæ are both unable and unwilling to breast-feed their babies. A large number of infants are already completely weaned when at the age of one month they are brought for the first time to the Centre. The majority of the bottle-fed babies are fed on dried milks which can be obtained at the Centre as the mothers find these easier to use and safer in the summer months than cow's milk. Mothers at this Centre are aware of the necessity of adding vitamins to a dried milk food and are very willing to obtain any particular vitamin containing substance that is advised.

The average attendance here is again very high and has risen considerably being 83·6% as against 75·2% in 1936, an increase of 8·4%. The attendance of infants under one year is excellent, the majority of the mothers coming weekly until the children are 1 year old.

The amount of food given here is not high in proportion to the numbers attending. Colact is used extensively being given to nursing mothers of infants under nine months and to toddlers who show signs of malnutrition or who are convalescing from a severe illness.

As in previous years drugs are used very extensively, iron tonics being found to cause a marked improvement in the condition of children (especially those aged 1—2 years) who are suffering from slight anæmia, loss of appetite and poor muscle tone.

No ante-natal work is done at the Infant Welfare Centre, expectant mothers now having a Clinic opened for them in Risca.

The nursing mothers here are in quite good condition, 85½% of nursing mothers and 91% of part nursing being graded as satisfactory.

74% of non-nursing mothers are graded as satisfactory and very few of the 26% unsatisfactory cases suffered from anæmia in a severe degree.

Ante-natal mothers are dealt with at a separate session and are discussed in the ante-natal Clinic report.

Infants here were in very good condition, 93% being satisfactory as regards nutrition. Twelve infants were premature but these all made good progress. There were no cases of marasmus.

Babies aged 9 months to 2 years were not in such good condition as the younger infants, 72% only being graded as satisfactory. In this group there are more cases of lack of appetite, slight enteritis, loss of muscle tone and general malaise which may in part be accounted for by teething and a difficulty in assimilating a more solid diet.

85½% of the toddlers showed satisfactory nutrition and the average intelligence of these children is very good. Dental Caries this year has not been marked but an unduly high proportion of toddlers have enlarged tonsils and adenoids.

The attendance of toddlers here is high, 83 children aged 2—5 years attending in 1937.

6.—DR. AUGUSTA S. MONRO, Assistant Medical Officer, Monmouthshire County Council.

FEEDING OF INFANTS.

PENGAM.

Breast-fed	Breast and Artificially-fed	Artificially-fed
45·5%	27·7%	26·9%

This Clinic is open one day weekly. The figures for attendances for the past year show a decrease except in the attendance of toddlers. The decrease can be accounted for partly by weather conditions and partly by epidemics of measles, chicken-pox and whooping-cough. The increase in the attendance of toddlers is gratifying as we have tried to encourage mothers to bring toddlers so that they may be kept under medical supervision. A number of toddlers were underweight and soft and this might be prevented to some extent if children continued attending after one year and up to school age.

The percentage of wholly breast-fed babies has again increased this year, having increased from 37·1% to 45·5% and the percentage of artificially-fed babies has dropped from 33·4% to 26·9%. The figures for those part breast and part artificially-fed are much the same as last year, being 29·3% then and 27·7% this year. This increase in breast-feeding is exceedingly satisfactory.

The nutrition of the younger mothers with small families is good, but a number of the older mothers and those with large families show marked anæmia. This has been treated as far as possible at the Clinic. Oral and dental sepsis is one of the commonest complaints amongst the mothers and many have availed themselves of the facilities for treatment.

Medication has been carried out as in former years, the commonest ailments amongst the children being bronchial and nasal catarrhs. Free food has been given on purely medical grounds and in cases of malnutrition and undernourishment.

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

NEW TREDEGAR.

Breast-fed.	Breast and Bottle Fed.	Bottle Fed.
28%	27%	45%

No. reviewed at the end of the year 134.

In satisfactory condition 74%

In unsatisfactory condition 26%

The number of babies bottle-fed has increased, the percentage rising from 37% to 45%
The percentage of babies in satisfactory condition has decreased slightly, from 80% down to 74%.

CHILDREN AGED ONE TO FIVE.

No. reviewed at the end of the year 166.

In satisfactory condition 55%

In unsatisfactory condition 45%

The average attendance rose considerably during the year—being 61·6 as against 46·9 for the previous year.

The improvement was chiefly due to greater attendances of toddlers.

The amount of Bronchitis, Nasal Catarrh and Otorrhœa continues to be high. The children seem to lose their powers of resistance to the common cold, whilst recuperation is painfully slow.

Despite the assistance given, by way of milk, malt and oil and other medicaments malnutrition is common—due to repeated bronchitis and colds. Deprived of the assistance of the Clinic, their condition would undoubtedly be considerably worse.

A number of mothers fail to feed their babies. Neither they nor their babies are benefited by making a prolonged attempt.

Malnutrition observed in mothers :—

Nursing	....	....	....	2
Non-nursing	....	....	....	16

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

BLAINA.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

Breast-fed	Breast and Bottle-fed	Bottle-fed
47%	15%	38%

This year the percentage of babies fed wholly on the breast has fallen slightly when compared with 1936. The fall however is not great, being only 5%.

The number of infants on the register at the end of the year was 279 ; this figure is 28 less than that for the previous year. The average attendance at each session was 57·89, an increase of 5 per session over 1936.

Eight infants under 1 year of age presented signs of under-nourishment. The greater number of these presented signs of malnutrition not by reason of insufficient food but because of unsuitable food. Every case shewed improvement when put on a suitable diet.

The general condition of the infants as a whole shows a distinct improvement over that of previous years.

The numbers of toddlers who attended the Clinic during the year was 108. 20% of these showed signs of subnormal nutrition, but no case of a serious degree was encountered. In necessitous cases a suitable adjuvant to the diet was supplied.

Generally speaking the condition of the mothers who attended the Clinic shewed a very definite improvement on previous years. 11 mothers shewed some signs of debility but in most cases this was slight and rapidly improved under treatment. A number of these cases were supplied with dried milk preparations.

9.—DR. B. L. MACQUILLAN, Assistant Medical Officer, Monmouthshire County Council.

PANTEG.—Despite the prevalence of a severe epidemic of diphtheria in this clinic area in the latter months of 1937 and the necessary exclusion of quite a few toddlers who proved to be carriers, the average attendance was very satisfactory. The average number per clinic is gradually increasing and as in former years the number of toddlers seem to predominate.

The percentage of breast-fed children was 52. Partially breast-fed and partially artificially fed was 11. The artificially-fed babies equalled 37%.

The average mother attending this Clinic is well nourished. There is little or no poverty in this area and in most cases the nutrition of the children is quite satisfactory. Most of the symptoms of apparent undernourishment are not due to want of vital necessities of life but to some underlying pathological cause.

Either through the increased publicity of the "Keep Fit" campaign or the greater desire to ameliorate the lot of their children, the parents are becoming more and more "Clinic" minded—appreciating and utilizing more fully the excellent facilities pertaining thereto.

As in other years, drugs and medicaments were dispensed only in very necessitous cases and the free distribution of food was very limited.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	USK	CWMBRAN
	%	%
Breast-fed	64.15	52.22
Breast and Artificially-fed	13.20	22.22
Artificially-fed	22.65	25.56

USK.—This Centre is held once a fortnight on a Market Day, and continues to improve rapidly. The number on the register at the end of the year was 146, compared to 117 last year, and to 100 in 1935. The average attendance per session shows a marked increase, being 52.12 compared to 39.62. Total attendances have risen from 951 to 1,251, an increase of 300 in 1 year. One gratifying feature is the percentage of breast-feeding, being 64.15% as compared to 60% last year. This is particularly good for Usk which has always been surprisingly low for a rural area.

Free food was given in many cases, due partly to the difficulty in getting milk in the outlying districts and to the low wages of the farm labourer.

The total number of toddlers attending = 576, of which 8 were new cases. Malnutrition and debility was found in 6 cases and rickets in 2 cases. These were given free milk and cod liver oil.

Ante-natal cases are referred to Pontypool, but many find it impossible to travel so far, and attend at this Centre for examination and advice.

The needy cases are put on milk or milk food. 75 cases attended of which 12 were new cases.

The improvement in this Centre is most encouraging.

CWMBRAN.—This Centre is now held every week, is a whole-day session, and is always well attended. The number on the register at the end of the year was 228, a slight decrease on last year's figure of 232, but the total attendances, *i.e.*, 2,641, and the average attendance per session, *i.e.*, 53.89, both show a marked increase on 1936 when the figures were 2,295 and 48.82 respectively.

The percentage of breast-feeding is not so good as last year, having fallen from 62.5% to 52.22%. However, it is gratifying to note that the artificially-fed figure remains the same, and consequently the number of breast and artificially-fed acquires the 10% lost on pure breast-feeding.

Total attendance of toddlers at this Clinic is always good, and again shows an increase in numbers, being 1,085 as compared to 827 last year, and to 643 in 1935, making 442 more in 2 years or over 20% per year.

Of these 5 showed marked debility, 5 showed signs of malnutrition and 6 showed signs of rickets, and 3 were anæmic. Accordingly free food and milk were given in many cases.

Drugs prescribed consisted of simple tonics, aperients, ointments, etc.

Of the 119 nursing mothers, 14 showed signs of debility and malnutrition, but the general condition of the mothers is better than in 1936.

Expectant mothers are referred to Newport Ante-natal Clinic, but free milk was given to such necessitous cases as found it impossible to travel to Newport frequently.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	BLACKWOOD	CROSS KEYS	YNYSDDU
	%	%	%
Breast-fed	35.7	38.2	53.8
Breast and Artificially-fed	15.3	5.5	16.2
Artificially-fed	48.9	56.3	30.0

BLACKWOOD.—This Centre is open for one whole day weekly. Although the number of infants on the register has decreased from 385 to 337, the total attendance has increased from 2,591 to 2,703 and the average attendance at each session from 53.97 to 56.31. This is satisfactory, showing that the mothers are bringing their babies more regularly.

Unfortunately the amount of breast-feeding is still decreasing, being now only 35.7%, but as the amount of combined breast and artificial-feeding has increased by 6%, the amount of purely artificial feeding has also decreased. This shows that more mothers are making an attempt to breast-feed their infants, although they are unable to do so entirely.

The babies on the whole were fit. There were very few cases of actual malnutrition. Some cases showed signs of under-nourishment, but this was due to improper feeding and not to insufficient feeding. A large number of toddlers attended, and there again there was little malnutrition, but many of them were considerably underweight. This was also largely due to improper feeding and also to the fact that when a new baby comes along, the toddler gets very little special attention.

Bronchial catarrh and digestive disorders were the chief complaints. A few cases of mild rickets were seen. Four cases were referred to the Orthopædic Clinic and four cases of squint to Dr. Coulter's Clinic. A fairly large number of toddlers suffered from thread-worms and from dental caries.

As in previous years, a limited supply of simple drugs was used. A fair amount of free food was given, but mostly to the toddlers who required it on medical grounds.

The chief ailments of the mothers who attended, were anæmia, debility and dental caries. There was only one case of malnutrition due to under-nourishment and that was a non-nursing mother. The expectant mothers who attended were referred to Oakdale Ante-natal Clinic.

CROSS KEYS.—This Centre is open for one half-day weekly. Here also the number of infants on the register has decreased, being 88 compared with 101 last year. But the total attendance has increased from 1,205 to 1,281 and the average attendance at each session from 25·10 to 26·68. This is satisfactory and so is the fact that the amount of breast-feeding at this Centre has at last shown an increase, having risen by 5%. Unfortunately the amount of combined breast and artificial-feeding has fallen considerably, causing an increase in the amount of purely artificial feeding. There is still much room for improvement, especially as the health of the mothers here is fairly good and the financial conditions are better than at my other centres, allowing the mothers to have more nourishing food.

The health of the infants on the whole was very good. There was only one case of malnutrition, and a comparatively small proportion were underweight. Toddlers have never attended well at this Centre and the number is still low. On the whole they were healthy and only a few of them were underweight.

As in previous years only a very limited supply of simple drugs was given here and practically no free food.

The health of the mothers on the whole was satisfactory, the chief complaint being constipation and dental caries. None of them suffered from malnutrition. The expectant mothers were referred to Newport Ante-natal Clinic.

YNYSDDU.—This is a half-day Centre and is held weekly. There is a slight increase in the number of infants on the register, there being 192 compared with 187 for the previous year. The total attendance has increased from 1,740 to 1,818, and the average attendance at each session from 36·25 to 37·87. This Centre has always had a higher percentage of breast-feeding than my other Centres, and it has again shown an increase, being now 53·8%. The combined breast and artificial-feeding has also increased, with the result that the purely artificial-feeding has decreased by 10% and is now only 30%. This is most gratifying as the health of the mothers here is not any better than at my other Centres. A fairly large amount of free food has been given to these mothers to encourage them in breast feeding.

The babies on the whole were in fairly good health, there being only two cases of malnutrition. The toddlers attended well and only one of them suffered from malnutrition but about half of them were considerably underweight. Many of them were supplied with dried milk, cod liver oil and similar nutritive preparations.

The mothers were fairly healthy and the only case of malnutrition was a non-nursing mother. The expectant mothers were referred to Newport Ante-natal Clinic.

12.—DR. H. V. M. JONES, Assistant Medical Officer, Monmouthshire County Council.

NANTYGLO.—The Clinic is held on one half-day weekly.

Of the babies 47% were wholly breast-fed, 18% were partially breast-fed and 35% were entirely fed artificially. This compares with 44%, 22% and 34% the figures in the previous year.

The condition of health and nutrition of the mothers and children shows no appreciable change during the last year as compared with previous years. Respiratory affections are the most serious problem, particularly amongst the babies.

Striking care and perseverance have been shewn by several of the mothers in the rearing of delicate and ailing children, and in most cases the results have been most gratifying. It remains a pity, however, that no more of the mothers are able to breast-feed. In the last two years there has been very little change in the numbers of babies reared on the breast and artificially -fed. Though by no means bad the figures are, I think, susceptible of improvement.

Good use is made of the facilities provided by the Clinic as regards advice, simple medication and the supply of cod liver oil and milk foods. The progress of the weight of the children is eagerly followed by the mothers from week to week.

Several cases have been investigated at the County Hall Laboratory. Others again have been referred to the Tuberculosis Officer, to Dr. Watkins for a specialist medical opinion, and to Dr. Coulter for the remedying of eye defect.

13.—DR. E. M. GRIFFITHS, Medical Officer of Health, Abercarn Urban District.

ABERCARN.—The attendances have kept up wonderfully well. The average attendance per session is 82.6.

The number of cases receiving free food has dropped a great extent as employment has improved during the year.

Drugs have never been prescribed to any great extent at this Clinic and there has been little difference during the past year.

Malnutrition in nursing mothers has decreased considerably during the year and the same can be said of non-nursing mothers and babies and toddlers—owing no doubt largely to the decrease in unemployment during the year.

14.—DR. G. W. PARRY, Abergavenny.

This Centre is open every Tuesday which is the local market day ; it serves a wide agricultural area besides the town. Just over two thousand babies were seen during the year the bulk of whom were under one year of age. Many cases of from 5 to 12 years of age were also brought for advice—all of poor parents.

I think the majority of babies were brought for conditions arising out of wrong feeding and only advice was needed to correct these. These conditions were gastro-enteritis, stomatitis, diarrhoea, constipation and threadworms, and urticaria.

A large number of cases of blepharitis and conjunctivitis were also seen—generally due to neglect by the mothers. As usual there were several cases of otitis media due to enlarged tonsils—chiefly among toddlers and many cases of bronchitis.

The bulk of the feeding was by the breast, particularly up to six months but after this either cows milk or Ostermilk has to be used as the mothers' milk goes. Some free food has to be given as the parents could not possibly purchase enough out of income and the children would suffer. The amount is surprisingly small under the circumstances.

The amount of drugs given is small—chiefly expectorant mixtures and tablets for worms. Advice is what is chiefly sought.

There is obviously less malnutrition than was the case a few years ago and what there is is due more to ignorance and carelessness than to want.

I am obliged to the County Medical Officer of Health for dealing promptly with orthopaedic cases and cases of diseases of the ear, nose and throat.

15.—DR. R. J. S. VERITY, Garndiffaith.

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	ABERSYCHAN	GARNDIFFAITH	PONTNEWNYDD
	%	%	%
Breast-fed	46·1	42·8	55·5
Breast and Artificially-fed	25·6	35·7	4·5
Artificially-fed	28·1	21·4	40·0

All the Centres continue to make progress and a good average attendance has been maintained at each.

Breast-feeding is increasing yearly and when this fails mothers adopt the advice as to a suitable artificial food.

The attendance of "toddlers" has not been very great, not as great as one would like, but those who have attended have done so regularly. The general health has considerably improved; rickets which was very prevalent a few years ago is becoming less pronounced.

Some of the toddlers brought to the Clinics had not thrived and were undersized, this was generally due to wrong parental care and lack of sleep. A few had bad teeth and these were referred to the Dental Clinic.

Several nursing mothers also suffered from Oral and Dental Sepsis and were referred to the Clinic. Some few showed some degree of anæmia and debility, and were treated.

These Clinics serve a very scattered area and praise is due to the mothers who attend regularly.

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

CENTRE	INFANTS (0-1 year).					CHILDREN (1-5 years).			
	No. on Register 31st Dec., 1937	No. of Attendances		No. of Re-visits		Total		Total Attendances all ages	Average Attendance per Session
		New Cases under 1 yr.	New Cases 1-5 years	Under 1 year	1-5 years	Under 1 year	1-5 years		
Abertillery	548	226	15	2108	996	2334	1011	3345	69·68
Llanhilleth	341	105	19	1605	799	1710	818	2528	52·66
Six Bells	307	124	12	1203	724	1327	736	2063	42·97
Total all Centres	1196	455	46	4916	2519	5371	2565	7936	55·10

A comparison of the above table with the similar table printed in the reports of previous years shows that the attendances at the Centres are being well maintained. There were 461 births compared with 530 in 1936.

Rickets decreased again during the year, and the cases examined were of a mild degree and rapidly responded to appropriate treatment. Lack of fresh air accounted for the condition in some cases as the mothers stated that owing to various causes they had not the time to take the child for the necessary outings. Improvement was manifest when fresh air outings were given daily.

The other diseases call for no special comment being mostly of a bronchial and gastrointestinal nature.

Skin disease showed no increase but a few cases of scabies were observed in quite young children—this disease having been brought into the household mostly by older sisters who had returned home from domestic and other occupations. These were appropriately treated but some of them took a considerable amount of time to clear up.

Lack of proper bathing facilities and overcrowded and unsatisfactory sleeping quarters seemed to account for the condition in all cases and the consequent close contact with previously infected cases.

Most of the babies brought to the Clinics were well up to the average "weight for age."

There were several babies examined who averaged round the 5 lb. mark at birth but under proper advice *re* feeding and milk allowances it was surprising the remarkable progress made.

The "toddlers" are not taken to the Clinic in such numbers as the young babies. Those that did attend were mostly brought because they were suffering from the after-effects of some severe illness and showed considerable loss of weight, anæmia, etc., and were generally out of condition. Measles, Whooping Cough and Pneumonia were the diseases that accounted for their ill-health.

In no case did I elicit the fact that actual food shortage helped to account for their ill-health although it must be admitted that in most of their dietaries, if not in all, there was a grave deficiency in fresh milk and other fresh food stuffs—quality and variety were lacking. Fresh milk at its present price is much too expensive for general use in working class families with several children.

Special diet charts have been printed and distributed individually to each mother.

Some of the nursing mothers especially the younger ones did not seem to recover their normal health quickly after their confinement and failed completely to breast-feed their babies. In other cases where breast milk was poor in quality fresh milk was supplied by the authority to the nursing mothers. Special supplementary dietary allowances from other sources on the grounds of ill-health were also obtained for some nursing and delicate mothers. Some mothers seemed to be in ill-health through close confinement to house and lack of annual holiday.

All expectant mothers are encouraged and advised to attend the Ante-natal Clinics.

Many nursing and expectant mothers were referred to the dental Clinics for necessary treatment and advice.

Eight toddlers were referred for dental treatment and others for advice.

Two children were operated on for cleft palate and hair-lip at Bristol Infirmary.

One very severe case of cleft palate was seen in a young infant—this case was referred to Dr. Rocyn Jones.

Children suffering from a variety of deformities were referred to the Orthopædic Specialist for necessary special advice and appropriate treatment.

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

FEEDING OF INFANTS UNDER NINE MONTHS OF AGE.

	BEAUFORT	EBBW VALE
	%	%
Breast-fed	45.4	62.5
Breast and Artificially-fed	5.4	6.1
Artificially-fed	49.2	31.3

BEAUFORT AND EBBW VALE.—There has been a slight decrease in the attendance during the year.

The distribution of free food is only supplied at the public expense after strict enquiry of the actual necessities of the cases.

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

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

There was no malnutrition amongst the cases attending the Clinics.

Very few toddlers between the age of 2 and 5 years attend the Clinics.

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

RHYMNEY.

METHODS OF FEEDING INFANTS UNDER NINE MONTHS.

Breast-fed 40.6%. Breast and Artificially-fed 14.6%. Artificially-fed 44.8%.

Children 1 to 5 years specified diet and Roboleine where necessary.

The attendances weekly at the Clinic have been well maintained, despite the fact that recently the birth rate has progressively declined due to many of the young people leaving the district. The birth rate for Rhymney Urban District was above that for England and Wales up to recent years; it is now below.

The attendance of toddlers up to 5 years has increased.

A considerable amount of free food was given each week in nearly all cases of illness, poor development and under-nourishment. A less amount during 1937 as there is some improvement in employment.

A few simple drugs and ointments are prescribed; other prescriptions are obtained at the parents dispensary.

The Ante-natal work has increased considerably, the importance of examination and advice being appreciated more each year throughout the district.

Any Ante-natal cases presenting themselves at the Infant Welfare Clinic are referred to the following Ante-natal Clinic.

Malnutrition. Nursing Mothers: New Cases 54; Re-visits 158. Total attendances 212.

Expectant mothers: New cases 3; Re-visits 1, referred to Ante-natal Clinic.

Nursing mothers and non-nursing mothers. A considerable number of cases of malnutrition amongst the above cases following confinement. 40 entered in the case books.

Babies (30) not a large number having regard to the number on the register, (234,) where malnutrition is evident. Milk is given to the mother if suckling the baby; or, milk to the mother with the help of 2 bottle-feeds a day.

Where the baby is artificially fed, if below the scale, 1 box of free food is given a week.

About 50% of the toddlers suffer from malnutrition that visit the Centre; the mothers bring them owing to this being the case.

The attendance of toddlers has increased.

Ante-natal Clinic.

A few cases are referred to the Rhymney Hospital for any necessary treatment appropriate to that Institution. Most cases go to Cardiff and ultimately to the Maternity Home in Glossop Terrace connected with Cardiff Royal Infirmary.

The Orthopædic Clinic under Mr. Arthur Rocyn Jones, F.R.C.S., and Dental Clinics are much appreciated and taken full advantage of.

All cases of infants and mothers needing surgical treatment are sent to the Rhymney Cottage Hospital. A number of cases of circumcision, abscess of the breast, etc., are dealt with each year, and some are admitted.

The local committee, *i.e.*, the County Councillors and lady helpers take an enthusiastic interest in the Clinic, and their help is invaluable.

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

MONMOUTH.—The Centre has been well attended during the year, the average number attending being 47·3 per session. The nurse in charge has the assistance of members of V.A.D., Mon. 10., and also of members of the Committee.

Breast-feeding is always carried out when possible and Colact is much used to assist in this method when the mothers milk shows signs of failing.

Subsequently cows milk and some of the dried milks are substituted if necessary.

The attendances at the Clinic generally show a marked tendency to increase.

Free foods are given when it is clear that the infant or mother require it but then the Committee investigate the circumstances of the applicant and decide whether the case is a fit one to be placed on the free list.

Simple remedies are supplied through the Clinic and the mothers make much use of these facilities.

Malnutrition :—Nursing Mothers, 1; Babies, 12; Toddlers, 2.

The number of toddlers attending has been well up to the average.

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

There were no epidemic diseases during the year. Diphtheria immunisation was effected during the year amongst some of the 3—5 year age group attendants of this Clinic.

The feeding of infants is mainly breast-feeding, and compared to last year this method shows an increase. The period, however, covered by breast-feeding is less than formerly, the average period now being about three months, and it is, indeed, the exception that a child is wholly breast-fed for nine months. Combined feeding is now mainly effected in the 3—6 month period, and wholly artificial-feeding in the 6—9 month period.

Attendance figures for 1937 show a definite increase :—1936—215, 1937—249. This holds not only for mothers and infants, but also for toddlers and school children. The attendance per session is correspondingly increased from 52·6 per session for 1936 to 59·26 for 1937. School child attendance has been encouraged and an increased number of attendants for 1937 indicates that advantage is taken of the facilities afforded them by this Clinic.

Free foods and drugs shew no increase compared to previous years as only in very necessitous cases are they given.

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

The facilities for the purchase at the Infant Welfare Centre of infant food, 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 £5,873 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 £1,638 14s. 4d. were given for expectant and nursing mothers and for infants during the year. This included £357 9s. 10d. paid for fresh milk.

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

1919	....	£140 15 0	1928	....	£3,844 1 1
1920	....	£537 18 11	1929	....	£5,092 18 8
1921	....	£5,984 0 0	1930	....	£4,787 2 6
(Coal Stoppage : Dinners also given).			1931	....	£5,941 2 6
1922	....	£2,232 14 3	1932	....	£3,372 13 11
1923	....	£1,548 6 7	1933	....	£995 15 6
1924	....	£1,170 3 8	1934	....	£1,218 7 1
1925	....	£1,766 14 0	1935	....	£1,755 6 2
1926	....	£2,469 7 6	1936	....	£1,774 1 3
1927	....	£2,817 18 4	1937	....	£1,638 14 4

I—MIDWIFERY SERVICES.

The County Council is the Local Supervising Authority under the Midwives Acts for the whole of the Administrative County of Monmouth.

The County Council's scheme under Section 1 of the Midwives Act, 1936, came into force on the 1st October, 1937.

It provides for the domiciliary midwifery service, in the rural areas, through the Monmouthshire Nursing Association, and, in the urban areas, by salaried midwives employed by the County Council.

Of the Nurses employed by the Monmouthshire Nursing Association, sixteen do district nursing as well as midwifery, and four are employed solely as midwives. At present two of the districts are without nurse-midwives.

All the districts served by the Monmouthshire Nursing Association are rural areas with the exception of Ebbw Vale, Tredegar, and Abergavenny, which have at least one Monmouthshire Nursing Association Nurse. No general nursing is done by any of the nurses in those areas, their whole time being devoted to district midwifery. In the case of Tredegar and Ebbw Vale the nurses are resident in the District Nurses' Homes established in those two townships by the Monmouthshire Nursing Association. An annual contribution of £1,397 for 1938-39, rising to £1,582 in 1944-45, will be paid by the Council to the Monmouthshire Nursing Association in respect of midwifery done by the Association midwives.

Sixty-three midwives are employed by the County Council, and they are whole-time servants. In addition there are six peripatetic midwives who act as relief nurses for week-end leave, holiday leave, or in case of illness or suspension of the regular district midwives.

At the passing of the Act there were 229 midwives on the County Roll. Seventeen midwives not appointed under the Act retired voluntary, whilst twenty-three were compulsorily retired. Voluntary retirements are still taking place amongst those midwives not appointed as County Midwives, and any midwife who gave notice to practise on or after 1st January, 1935, and before 8th March, 1936, may up to July, 1939, apply for, and receive compensation on surrendering her Certificate.

Many of the midwives absorbed from those already practising in the County when the Act came into force are in possession only of the Certificate of the Central Midwives Board, but in the future only general trained nurses possessing also the Central Midwives Board Certificate, and not over thirty-five years of age will be appointed.

At the present time there are 141 practising midwives on the Roll, and deducting the 63 County Midwives, the 6 Peripatetic, the 22 Monmouthshire Nursing Association Midwives, and 17 who are practising in the Hospitals, Maternity Homes, and Public Assistance Institutions, there are still 33 independent midwives practising the art of midwifery.

There are three District Supervisors of Midwives who each have the supervision of an area of the County, and who devote two and a half days each week to this work, and every type of practising midwife in the County come under their jurisdiction. All are under the general supervision of Dr. Mary Scott, the senior lady medical officer.

Under the County Scheme no woman need lack the services of a trained midwife at her confinement.

The scales of fees adopted by the County Council are as follows:—

For midwives and	For the first or primipara births—35/-.
maternity nurses	For all subsequent or multipara births—30/-.

Provided that, in cases where Maternity Nursing exceeds two weeks, the payment shall be 20/- a week.

Subject to the income scale as under :—

INCOME.	WHEN MATERNITY BENEFIT IS PAYABLE.	WHEN MATERNITY BENEFIT IS NOT PAYABLE.
	Midwifery or Maternity Nurse	Midwifery or Maternity Nurse
Where weekly income (after deducting 5/- for each dependent child)		
(1) Is less than £2/10/0	20/-	Nil
(2) Exceeds £2/10/0 and does not exceed £3/5/0	25/-	12/6
(3) Exceeds £3/5/0 and does not exceed £4	27/6	15/-
(4) Exceeds £4 and does not exceed £5	30/-	25/-
(5) Exceeds £5	35/-	35/-

The net weekly income shall be the average gross earnings of the husband and wife for the six weeks immediately preceding the confinement.

No reduction is to be made in the above scale in respect of the fact that a patient or her relative is a contributor to a District Association.

It is as yet too early to record the effects this new Act will have on the public health of the County. The position of a midwife, who, previously was working as an independent woman, and who has now been appointed under the Act, is greatly altered for the better. Her hours of work are regulated. Uniform, telephone, travelling expenses and her equipment are provided. She is assured of a regular income, regular holiday leave and, when she retires, of a superannuation.

Refresher courses will be provided at regular periods and which will keep her up-to-date in her work.

Taken in conjunction with the schemes now being arranged by the Central Midwives Board for improving the training of midwives, and with the wider facilities for specialist and hospital treatment, the new facilities should do much to lighten the burden of women during pregnancy and confinement. It is also hoped that the damage to the health of the expectant mothers will become negligible and that the incidence of stillbirths will show a rapid decline.

Many difficulties were encountered in bringing this new Act into operation, but these have been overcome and the service is now working smoothly.

The following table shows the number of births notified from the date when the Act was first operative (1st October, 1937, to 31st December, 1937).

County Midwives	699
Monmouthshire Nursing Association	
Midwives	105
Independent Midwives	292
Maternity Homes in the County	108
Total	1,204

The Chief Supervisor of Midwives is Dr. Mary Scott, the senior Assistant Medical Officer, with three District Supervisors—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 Supervisors of Midwives was 584.

1,407 notifications of sending for medical aid, and 55 of cases of stillbirth, were received from midwives during the year. There were also three notifications of deaths of mothers, 10 notifications of children dying a few hours after birth, 10 notifications of deaths within ten days of birth, 141 notifications of artificial feeding, 13 notifications from midwives who were liable to be a source of infection, and two notifications of having laid out a dead body.

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

High temperature	67	Still-birth	6
Obstructed labour	30	Unsatisfactory condition of child	56
Delayed labour	31	Eye affections	107
Prolapse of cord	3	Doctor engaged or Patients' request	3
Hæmorrhage, ante-partum	70	Unsatisfactory condition of mother	72
Hæmorrhage, post-partum	45	Albuminuria	33
Prolonged and difficult labour	305	Spina bifida	3
Premature birth	29	Eclampsia	5
Abnormal presentation—		Varicose Veins	2
Breech	24	Rash, blisters, etc.	11
Face	8	Inflamed breasts	9
Hand	4	Born before arrival	8
Foot	5	Hare lip and cleft palate	2
Brow	2	Uterine Inertia	40
Undefined	21	Contracted pelvis	8
Retained placenta	46	Deformities	11
Ruptured perineum	234	Hysteria	1
Hernia	1	Placenta prævia	5
Abortion	45	Jaundice	5
Incomplete abortions	36	Death of child	3
Abortion threatened	18	Weak heart cases	11
Occipito Posterior	7	Extended breech	8
P.O.P.	4	Anæmia	1
L.O.P.	2	Phlebitis	1
R.O.P.	4	Oedema	3
O.P.P.	1	Miscellaneous	6
Fœtal distress	3		
Vaginal discharge	3		

Suspension of midwives to prevent the spread of infection was necessary in 19 cases—4 on account of puerperal fever, 7 pyrexia, 4 pemphigus neonatorum, and 4 through other infectious diseases. Compensation was paid by the Council to all the midwives concerned.

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

Tredegar Maternity Home (Monmouthshire Nursing Association).

There are seven maternity beds provided at the Home. During the year 1937, 155 maternity cases were admitted to the Home as compared with 125 in 1936. 118 of these cases were delivered by midwives and 36 by doctors. There were 8 still-births, and one death of an infant within 10 days of birth.

The grants hitherto made to the Maternity Home, Tredegar, by the Ministry of Health are now under the provisions of the Local Government Act, 1929, being paid by the County Council. They amount to £225 per annum. The Home is not recognised as a Training Centre for Midwifery Pupils.

J.—DISTRICT NURSING.

The Monmouthshire Nursing Association :

It was some 30 years ago that Lady Mather Jackson saw the necessity for the provision of district nurses in the County of Monmouthshire, and in due course she submitted a draft scheme for a County Nursing Association to the Higher Education Committee of the Monmouthshire County Council.

On March 4th, 1908, Dr. Rocyn Jones was appointed the first County Medical Officer for Monmouthshire, and immediately upon his appointment the Chairman of the County Council handed, to him the draft scheme submitted by Lady Jackson, requesting him to revise it and amend it or otherwise for submission to the County Council at their next meeting. In due course this draft was amended and submitted to the Higher Education Committee and afterwards to the County Council and approved, and in November of the same year the County Council gave it their complete blessing.

In February of 1909 a public meeting was held at Newport under the Chairmanship of the first Viscount Tredegar to consider the establishment of this Association for Monmouthshire, and after a free discussion it was unanimously resolved to proceed with the scheme and to appoint local committees in the industrial and rural areas of the County.

District nurses were appointed in the industrial areas to undertake general medical and surgical nursing only as there was an ample supply of midwives in these areas to carry on the midwifery nursing, but in the rural areas the Association's nurses did the nurse-midwives work which included general nursing and midwifery nursing.

The first Association in the industrial valleys was Newbridge, and Llantilio-Pertholy the first in the rural areas.

The benefit of the nurses was quickly realised and the formation of other Associations followed. In 1910 the number had grown very much and it was necessary to have a principal Body to supervise the work. It was then that affiliation between the local Associations and the County Nursing Association was established. The County Council were of the greatest help and the Monmouthshire Nursing Association owes a great deal to Dr. Rocyn Jones, The County Medical Officer, for his support and guidance.

Tredegar was chosen as the Headquarters, where a Nurses' Home and Training Centre was established. Pupils were trained in midwifery on the district, and the Higher Education Committee awarded Scholarships to assist them in their training.

The training of midwives in this way went on until the Central Midwives Board stipulated that midwives must have a period of intern training, and to satisfy that requirement the County Council asked the Monmouthshire Nursing Association to provide the necessary Home. This was agreed to, and in 1925 the County Council granted a loan, to be repaid in ten years, to enable the Monmouthshire Nursing Association to purchase and equip the premises next door to the Nurses' Home at Tredegar. This establishment proved an enormous success, and a great many pupils were trained for and obtained their C.M.B. Certificates, and as midwives they were employed all over the County, as well as becoming district nurse-midwives in our rural areas, having received six months general district training at Tredegar. In 1933, however, the Central Midwives Board introduced a new rule that all Training Centres for midwives must have 20 beds, and as Tredegar had only 8 beds the training had to cease, and the loss of having trained midwives always available is greatly felt.

Notwithstanding this, the Home has been continued as a Maternity Home only, and large numbers of patients enter each year, until 1937/8 showed a record total of 151, and so much has the work increased that it is now necessary to extend the premises for the purposes of dealing with the ante-natal work. The County Council has made an annual grant towards the maintenance of the Maternity Home, for which the Monmouthshire Nursing Association is very grateful, as the expenses are very high. Patients are admitted from all over the County.

Under the Local Government Scheme of 1918, the County Council was empowered to make Grants to the Rural Associations for the midwifery branch of the nurses' work, and these have continued until the introduction of the Midwives Act, 1936, on October 1st, 1937, when the Grants were increased in order to provide higher salaries for the midwives, and whenever possible to appoint fully trained midwives, which is being done as the vacancies occur. This Act also enabled the Monmouthshire Nursing Association to establish five new rural Associations, so that the area of the County of Monmouth should be completely covered for midwifery. The installation of telephones under the Act has also proved enormous advantage.

Since 1935 the establishment of District Associations in the industrial district has been great, and no less than 20 new nurses have been appointed, mainly through grants recommended by the Medical Committee of the South Wales and Monmouthshire Council of Social Service, and which recommendation was strongly supported by Capt. Twiston Davies, the Chairman, and Sir Percy Watkins and Mr. Elfan Rees, the Executive Officers of the Council.

The support which all concerned have given this Nursing movement has been remarkable, which is evidence how much the skilled attention in cases of general ailments, tuberculosis and midwifery is appreciated.

There are 46 District Associations in the County, employing 70 nurses. A grant of £260 per annum has hitherto been made by the Public Assistance Committee to assist these Associations, but under the Public Health Act, 1936, the responsibility for this payment was transferred to the Maternity and Child Welfare Committee.

K.—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.

L.—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.

M.—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 :—

Metarsus Varus	....	2	Talipes Varus	....	1
Torticollis	....	1	Congenital dislocation of hips	....	2
Outward curved Tibia	....	8	Birth Palsy	....	1
Congenital Equino Varus	....	5	Hemiplegia	....	6
Pes Plano Valgus	....	9	Shortening of leg	....	1
Exostosis of Os Calcis	....	1	Calcaneo Valgus	....	2
Genu Valgum	....	7	Synovitis	....	1
Anterior Poliomyelitis	....	5	Achondroplasia	....	1
Spastic paraplegia	....	1	No physical signs	....	9
Injury to elbow	....	2			
Pes Planus	....	8			
Deformity of leg	....	1			76
Deformity of toes	....	2			

His recommendations were as follows :—

For admission to the Royal National Orthopædic Hospital	....	1
For admission to Brockley Hill Country Branch of the Hospital	....	7
To wear Splints or other apparatus	....	18
To have alterations to Boots	....	19
To see X-Ray Specialist	....	7
No treatment required	....	6
Re-examination	....	17
To have special exercises, etc.	....	1
		76

He also made at the Newport Clinic 58 re-examinations of children who had received treatment at the Royal National Orthopædic Hospital.

During the year 13 infants were sent to the Royal National Orthopædic Hospital or its Country Branch at Stanmore, Middlesex.

The defects from which they suffered were as follows:—

Congenital dislocation of hip	1	Congenital Equino Varus	6
Outward-curved Tibia	1	Genu Valgum	1
Hemiplegia	1	Anterior Poliomyelitis	1
Pes Plano Valgus	1	Webbed fingers	1

Since the inception of the scheme 177 infants and children under 5 years of age have received treatment at the Hospital.

Upon discharge of the children from the Orthopædic Hospital, Mr. Nathan Rocyn Jones, M.A., M.D., F.R.C.S., 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 1937, 156 crippled infant children including cases of first diagnosis and re-examinations were seen at these clinics.

Ten infants attended the Clinic for massage and electrical treatment during the year, making 275 attendances.

Four walking instruments, 14 splints, 9 night shoes, and 5 pairs of surgical boots were supplied for these children by the County Council. Alterations to boots were made for 49 children, also 3 alterations to walking instruments and repairs to 2 splints. The total cost in this connection was £33 9s. 10d. 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	....	1,814
No. of appointments kept	....	1,106
No. of cases given "gas"	....	1,093
No. of permanent teeth extracted	....	2,845
No. of temporary teeth extracted	....	1,518
No. of fillings done	....	9
No. of mothers treated	....	658
No. of children treated	....	440

The treatment is limited to filling or 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. 83 children attended the Clinics during the year and spectacles were prescribed for 53.

(c) Tonsils and Adenoids.—58 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 104 children under 5 years of age attended, making 324 visits.

3.—HOSTEL FOR UNMARRIED MOTHERS.—The Maternity Hostel at Nantyderry continues to do good work. There are 8 beds at the Institution, and the number of girls admitted during the year was 18, the average duration of stay being 84·9 days. Thirteen babies were born. The total number of inmates during the year (including those who were admitted in the previous year) was 24 girls and 15 babies.

Sixteen girls were discharged of whom 9 went to relatives and 7 to Homes. Of the babies discharged, 4 went to relations, 3 to Homes, and 7 were adopted.

Of the girls resident in the Hostel during the year, 4 were from the Borough of Newport, 17 from the County of Monmouth, 1 from Glamorgan, 1 from Pembroke, and 1 from Hereford.

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.

The County Council makes an annual contribution of £330 to the Hostel.

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 £378 1s. 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 £74 4s. 9d. The fees paid in the year 1936 totalled £625 11s. 0d. Amount collected from husbands, £80 10s. 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, 1937, to 31st December, 1937 :—

PUBLIC INSTITUTIONS	TREDEGAR	CHEPSTOW	PONTYPOOL	TOTAL
Number of Maternity Beds	6	2	4	12
Number of Confinements during year	35	6	8	49

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

Sixty-seven cases were examined by Dr. Strachan, and 41 of them were subsequently admitted to the Maternity Hospital of the Cardiff Royal Infirmary. Seventeen other cases were sent to the Maternity Department making a total of 58. Ten cases recommended by the County Council were admitted to the Tredegar Maternity Home as the conditions for the confinement of the women in their own homes were unsuitable. One woman who suffered from Venereal Disease was sent to the London Lock Hospital for her confinement.

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.

N.—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 24 children on the County Register at the end of the year in the care of 20 foster mothers. 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 3 cases were removed from the Register as the children had attained the age of 9 years.

One new case was notified during the year.

0.—CONCLUSIONS.

The Infant Mortality Rate has risen from 61·7 per 1,000 births in 1936, to 63·9 per 1,000 births in 1937. This was due chiefly to a mild epidemic of infantile diarrhoea.

The Maternal Mortality Rate has dropped from 6·8 per 1,000 live births in 1936 to 4·5 per 1,000 live births in 1937. This is the lowest Maternal Mortality Rate for 12 years, but it cannot be assumed that this reduction is certain to be maintained. Fluctuations are inevitable, but it is hoped that the upward swing of the rate in previous years will be lessened. We shall not be satisfied until our Maternal Mortality Rate is equal to, or better still, less than the rate for England and Wales as a whole.

A tribute must be paid to the value of the foodstuffs which are supplied free of charge by the National Birthday Trust Fund, through the Joint Council of Midwifery, to expectant mothers in the distressed areas of the County. The foods provided are Ovaltine, Ostermilk, and Yeast Extract, and comparative statistics between mothers who received the food and those who did not, definitely prove the benefit which is derived from a special diet during the last three months of pregnancy.

The County Council has decided to extend this provision to the expectant mothers in the rural areas who do not come within the scope of the Birthday Trust Fund distribution.

The attendances at the Infant Welfare Centres and Ante-Natal Clinics continue to increase, and many of the premises are overcrowded. Many of those attending the Clinics, especially the Ante-Natal Clinics, have to wait hours before they can be seen by the Medical Officer of the Clinic. This is bad for the mothers and it prevents the harassed Medical Officers and Nurses from doing their work efficiently. Additional sessions must be provided and this will entail the appointment of additional staff.

It is regretted that difficulties with the sewerage scheme for the district has held up the opening of the Lydia Beynon Maternity Hospital. Negotiations are still proceeding, and it is hoped that the difficulties will shortly be overcome.

D. ROCYN JONES,

County Medical Officer.

APPENDIX I.

MONMOUTHSHIRE COUNTY COUNCIL.

PUBLIC HEALTH DEPARTMENT,

COUNTY HALL,

NEWPORT, Mon.

9th June, 1938.

CIRCULAR TO MEDICAL PRACTITIONERS IN THE ADMINISTRATIVE COUNTY :

Dear Doctor,

I am directed by the County Council to forward to you a copy of a letter which I have sent to the midwives practising in this County, in which is set out the provisions of the County Council under the Maternity and Child Welfare Schemes for imparting Birth Control advice and treatment on medical grounds only to suitable cases.

In the enclosure herewith you will find instructions given to the midwives, together with the procedure that is outlined for them, and this Department would be glad to help you in any case in which you think this advice and treatment would be necessary and essential for the preservation of health and life.

If you would care for our help in this matter I should be glad if you would communicate with me in a confidential letter regarding any such case, and I should be pleased to make the necessary arrangements for the women to be examined by our lady doctors who are trained in this work.

Yours faithfully,

D. ROCYN JONES,

County Medical Officer.

APPENDIX II.**MONMOUTHSHIRE COUNTY COUNCIL.**

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
NEWPORT, Mon.

Per Registered Post :

9th June, 1938.

CIRCULAR TO MIDWIVES PRACTISING WITHIN THE ADMINISTRATIVE COUNTY :

Dear Madam,

I am directed by the County Council to draw your attention to the fact that under the regulations of the Ministry of Health issued in 1930, 1931 and 1933, the Council has arranged for Birth Control advice and treatment to be given to married women for medical reasons only, viz., for married women who, if they again become pregnant, might suffer serious damage to health and perhaps loss of life.

This advice is also available for women who are suffering seriously from Tuberculosis, Diabetes, Renal trouble, and in cases of severe Malnutrition.

I am to draw your attention to the fact that on no account will advice or treatment be given to women who seek advice for the limitation of families only, or in the case of young married people for delaying of conception and pregnancy.

In every case it will be necessary for the applicant to submit a confidential letter from their own medical attendant as we desire this work to be carried out in complete co-ordination with the family doctor.

The procedure to be adopted will be as follows :

When you have a case to recommend, will you please advise her to attend the Ante-natal Clinic for your area ; the case will then be seen by the doctor in charge of the Ante-natal Clinic and afterwards referred, if the case is genuine, to one of the five Special Centres—Newport, Pengam, Crumlin, Abertillery and Pontypool—where the appropriate advice and treatment will be given by two of the lady Medical Officers, Dr. Gordon and Dr. Scott, who are specially trained and qualified in the work.

It is hoped in due course to increase these facilities by opening further Centres.

Please do not forget to advise the women to bring a confidential letter from their medical attendant intimating that in his opinion such advice is necessary for the preservation of health or life.

I enclose herewith a list showing where the Ante-natal Clinics are situated, with their dates and times of sessions.

Yours faithfully,

D. ROCYN JONES,

County Medical Officer and Executive Officer
under the Midwives Acts.

APPENDIX II

ADMINISTRATIVE COUNTY COUNCIL

CIRCULAR TO MEMBERS READING WITHIN THE ADMINISTRATIVE COUNCIL

The Council is requested to read the following circulars which have been received from the various authorities and to consider the same in connection with the business of the Council.

1. A circular from the County Council regarding the proposed alterations to the County Council's bye-laws.

2. A circular from the County Council regarding the proposed alterations to the County Council's bye-laws.

3. A circular from the County Council regarding the proposed alterations to the County Council's bye-laws.

4. A circular from the County Council regarding the proposed alterations to the County Council's bye-laws.